



## Public Document Pack

<b>MEETING:</b>	South Area Council
<b>DATE:</b>	Friday, 8 April 2022
<b>TIME:</b>	10.00 am
<b>VENUE:</b>	Council Chamber, Barnsley Town Hall

### SUPPLEMENTARY AGENDA

- 6 Citizen's Advice Bureau - David Andy (Sac.08.04.2022/6) *(Pages 3 - 22)*
- 7 Public Health Update (Sac.08.04.2022/7) *(Pages 23 - 48)*

To: Chair and Members of South Area Council:-

Councillors Markham (Chair), Andrews BEM, Eastwood, Franklin, Frost, J. Higginbottom, Lamb, Osborne, Shepherd, Smith, Stowe and Sumner

Area Council Support Officers:

Diane Lee, South Area Council Senior Management Link Officer  
Lisa Lyon, South Area Council Manager  
Rachel Payling, Head of Service, Stronger Communities  
Peter Mirfin, Governance Manager

Please contact Peter Mirfin on or email [governance@barnsley.gov.uk](mailto:governance@barnsley.gov.uk)

***Date Supplement Published – 8<sup>th</sup> April, 2022***

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# **South Area Council**

## **Outreach Project**

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Project Delivery from 1st July 2017 to 31st  
December 2021 (CAB Started Sole Delivery

Sac.08.04.2022/6

# Project Overview (1)

- The service is now solely delivered by Citizens Advice Barnsley, before July 2017 it was jointly delivered with BMBC Welfare Rights Unit
- The service delivers Generalist and Specialist Benefit outreach advice to residents and workers in Darfield, Hoyland Milton, Rockingham and Wombwell via outreach services
- Prior to 23rd March 2020 this project was delivered at various outreaches throughout the South Area. From that date until 28th March 2022 when outreach restarted all client contact has been either via the telephone or digital.

# Current Delivery Model

- Outreach face to face delivery has recommenced in Hoyland and Wombwell. (See the leaflet at the end of this presentation)
- All clients who reside in Darfield can access support via the telephone service and digital means while we are undertaking preparation work to restart face to face delivery in Darfield.
- Besides face to face clients can access assistance through our telephone service, video service and by email.

# Current Delivery Model

- Services are currently delivered at various times during the day at various outreach locations but weekly are delivered from 9am through to 7pm.
- Two appointment blocks per month have been set aside over and above the normal outreaches to assist clients with form filling.

# Total Project: Summary of Results

Since this project was delivered solely by Citizens Advice on 1st July 2017 we have made:

- **5475** client contacts
- In excess of **£6.93m** of additional welfare benefits gain
- In excess of **£1.86m** of debt managed
- A return on investment of **£20** per **£** spent

# Client Numbers

Clients assisted with 10177 Issues

An average of 24.5 clients assisted each week

Clients assisted with various forms, from benefit applications, Blue Badge applications to replies to court forms

# Project Benefits Outcomes

1176 clients assisted to claim benefits  
an average of over £5860 per client

One client assisted to claim £77,400 of benefit  
another £67,088 another £62,348 and a number a  
few hundred pounds, but even these small amounts  
can make a major difference to someone whose sole  
income is benefits

# Project Debt Outcomes

**£1.86m** of debt managed

195 clients assisted with debts,  
an average of over £9520 per client.

Two clients assisted with debts over £28,000, a number in the £ teens thousands, but also some clients with debts only of a few hundred £, but it's the impact of those debts on clients lives.

# Top 5 Project Enquiry Issues

The top five enquiry areas as dealt with by CAB over the total project are:

- Benefits & Tax Credits
- Benefits Universal Credit
- Debt
- Employment
- Housing

# Research & Campaigns work

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Using South Area client evidence, we have escalated 36 social policy issues with our national policy team in support of national campaign work. The highest number related to: Universal Credit, Benefits and Tax Credits and Employment

# Currently Profile Data shows

- **57%** are female, **43%** male
- **46%** of clients report as being vulnerable
- **20%** of clients are employed
- **6%** are unemployed
- **26%** on Benefits

# Case Study 1 Generalist Adviser

**Overview:** Client and partner share care for disabled child, both work part time, but unable to access carer allowance due to working too many hours, and employer will not reduce one of their hours by 2 to allow them to claim carer allowance

**Help given:** Discussed options with client, suggested they identify a co-worker who wants to increase their hours by two, then make a joint representation to employer to request the change

**Outcome:** Client felt happy and confident in following this option which will allow them to claim carers allowance and increase their income by £48 per week

# Case Study 2 Welfare Rights Adviser

**Overview:** Client single and has worked 40 years at 40 hours per week, earning below minimum wage. Client has never paid tax or National Insurance, now unable to work for various health reasons. Client wants to claim benefits.

**Help given:** Completed full benefit check, assisted client to claim Income Based Universal Credit and PIP. (Personal Independence Payment)

**Outcome:** Client awarded Universal Credit also enhanced rate of both components of PIP, for a period of 10 years. A benefit award of £77,400.

# Client Comments

Advisor was very helpful, I have now started my own business

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Mohamed thought the service was extremely excellent.

Advisor had a lovely manner - gave concise and relevant advice.

I was very happy... he explained well. I didn't feel judged. It was wonderful. In one day, my life was changed.

# Client Comments

Absolutely brilliant! I was never made to feel small. I was talked to as a person.

I hate emails so found telephone contact handy. The adviser was great at keeping in touch and that all the information I was given was marvellous.

**ANY QUESTIONS**

Do you live or work in the South Area?

## Do you need advice?

**Citizens Advice will be providing free, impartial and confidential advice at the following times:**

### **Monday - The Hoyland Centre**

3pm - 7pm (Welfare Rights and Generalist Advisers)

### **Tuesday - The Hoyland Centre**

9am - 12.30pm (Generalist Adviser)

1pm - 4.30pm (Welfare Rights Adviser)

### **Thursday - Wombwell Library**

9am - 12.30pm (Generalist Adviser)

1pm - 4.30pm (Welfare Rights Adviser)

**The Welfare Rights Adviser** can help with all aspects of claiming benefits including Universal Credit, Council Tax, Housing Benefit, Tax Credits and Pensions

**The Generalist Adviser** can help with Debt and Money Worries, Employment, Housing, Relationship, Energy and Consumer issues

**No appointment needed - just drop-in!**



**South Area Council**

Darfield, Hoyland Milton, Rockingham, Wombwell



Funded by the South Area Council for residents of Darfield, Hoyland Milton, Rockingham and Wombwell  
If you do not live or work in these wards we will not be able to assist you on this project

# Do you need advice?

## Telephone - 0800 144 88 48

Freephone helpline open Monday to Friday, 9am - 4pm

## Online Contact Form - [barnsleycab.org.uk/contact-us/](https://barnsleycab.org.uk/contact-us/)

Available 24 hours a day. We aim to respond via email within 2 working days, however at busy times this may take slightly longer.

## Advice via Video Call - 01226 666017

Please call this number and leave a message. An adviser will call you back within 2 working days to arrange an appointment.

## Online Advice - [barnsleycab.org.uk](https://barnsleycab.org.uk)

Self-help information on a range of different issues can be found on our website.

## Face-To-Face Advice

Face-To-Face advice is now available in a small selection of community outreach locations across Barnsley. Please check social media for details.



[twitter.com/BarnsleyCAB](https://twitter.com/BarnsleyCAB)



[facebook.com/barnsleycab/](https://facebook.com/barnsleycab/)



Wherever you live in Barnsley, Citizens Advice can help  
Our advice is FREE, CONFIDENTIAL and IMPARTIAL

We can help with: debt and benefits issues, employment, housing, relationship, energy and consumer problems.

Updated April 2022

# Thank you

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# PHE's (now OHID) Seventh Independent E-Cigarette Review



# Aim of Review

## Terminology:

The term ‘**vaping products**’ describes e-cigarettes and refill containers/ e-liquids

- Seventh report in a series of independent reviews commissioned by PHE to summarise evidence on vaping products to inform policies and regulation
- Smoking remains the largest single risk factor for death and years of life lived in ill-health and is a leading cause of health inequalities in England
- Alternative nicotine delivery devices, such as nicotine vaping products, could play a crucial role in reducing the enormous health burden caused by cigarette smoking



# COVID-19 and Recent Developments

- COVID-19 has had a devastating impact worldwide, and has also likely affected both vaping and smoking behaviours in England
- The pandemic is the subject of ongoing research and it is too early to assess the full impact on vaping and smoking
- The UK government has committed to review the ‘Tobacco and Related Products Regulations (TRPR)’ (**which govern nicotine vaping products**) sometime in 2022, to assess whether the regulations have met their objectives
- The government’s tobacco control plan for England, which sets out ambitions for 2022, remains in place, although a new tobacco control plan for England is expected to be published in summer 2022.



# What We Know Since the 2016 TRPR Implementation

- The Medicines and Healthcare products Regulatory Agency (MHRA) received 231 reports of 618 adverse reactions believed to be associated with nicotine containing vaping products
- Each report represents a person for whom more than one adverse reaction could have been reported
  - **A report is not proof that the reaction was caused by a vaping product, just that the reporter thought it might have been**
- A safety review by the Committee on Toxicity of Chemicals in Food, Consumer Products and the Environment (COT) concluded that the risk of adverse health effects from vaping products **is expected to be much lower than from cigarettes**
- However, the review also found that exposure to particulate matter and nicotine could be associated with adverse health effects **and that the effects of inhaling flavouring ingredients is uncertain.**



# Vaping Among Young People

Data were collected in September 2019 (from the ITC Youth survey) and in 2020 (from the ASH-Youth survey).

- **ASH-Youth survey data (11 to 18 year olds) showed:**
- Smoking prevalence (including those who smoked sometimes or more than once a week) in March 2020 was 6.7% (compared with 6.3% in March 2019) and has changed little since 2015 when it was 7.1%
- little change in levels of vaping over the last few years with current vaping - prevalence being 4.8% in March 2020, the same as in March 2019
- **The ITC Youth survey data (16 to 19 year olds) showed:**
- Smoking prevalence at 6.2% (defined as smoking more than 100 cigarettes in their life and having smoked in the past 30 days)
- Current vaping prevalence at 7.7% (defined as vaping on more than 10 days in their lifetime and having vaped in the past 30 days)



# YP Continued.....

- Based on the socioeconomic status of 11 to 18 year olds, the estimates for smoking and vaping prevalence were higher among more advantaged groups (7.1% for smoking, 5.3% for vaping) than for more disadvantaged groups (5.7% for smoking, 3.5% for vaping)
- Most young people who had never smoked had also never vaped. Between 0.8% and 1.3% of young people who had never smoked were current vapers
- Most current vapers were either former or current smokers
- The main reasons for vaping were to:
  - “give it a try”
  - “for fun/I like it”
  - “liking the flavours”
  - Of the 11 to 18 year olds who vaped, 11.9% reported doing so to quit smoking
- Three-quarters of current vapers aged 11 to 17 bought their vaping products despite sales to under-18s and proxy purchases being illegal.
- Under half (43%) of 11 to 18 year olds who were current and former vapers reported always using vaping products that contained nicotine



# YP Conclusions

- Vaping and smoking prevalence among young people in England both appear to have stayed the same in recent years and should continue to be closely monitored
- Enforcement of age of sale regulations for vaping (and smoking) needs to be improved
- Misperceptions of the relative harms of smoking and vaping should be addressed
- More research is needed on the addictiveness of different types and strengths of nicotine vaping products among young people and the extent to which they are using illegal products
- Locally in Barnsley, we have a questions added to the Relationship & Sex Education Portal for schools that include smoking and vaping behaviours



# Vaping Among Adults

**Data reported came from 4 different surveys. Most data were from the smoking tool kit study (STS), collected between January and October 2020, and the ASH-Adult survey, collected in February and March 2020. Other data were collected in 2019**

- Smoking prevalence among adults in England continues to fall and was between 13.8% and 16.0% depending on the survey, equating to about 6 to 7 million smokers
  - There was some variation in smoking prevalence by socio-demographics, such as a higher prevalence among adults from more disadvantaged groups
- Vaping prevalence was lower than smoking prevalence across all groups and continues to be around 6% - equating to about 2.7 million adult vapers in England
- Vaping prevalence was between 17.5% and 20.1% among current smokers, around 11% among former smokers and between 0.3% and 0.6% among never smokers. Around 10% of long-term former smokers (quit for longer than 1 year) vaped, compared with 24% of short-term former smokers (quit for less than 1 year).



# Adult Continued.....

- The proportion of vapers who also smoke has declined since 2012, from 74% to 38% in the ASH-Adult survey, and from 92% to 51% in the STS survey
- Among long-term former smokers, a decreasing proportion used nicotine replacement therapy (NRT) – an increasing proportion used vaping products, between 2013 and 2020
- The proportion of current vapers who have vaped for more than 3 years appears to be increasing
- The most common reasons for vaping reported in the ASH-Adult survey were to: quit (29.7%), stay off (19.4%) or reduce (11.2%) smoking tobacco



# Adult Conclusions

- The proportion of long-term vapers is increasing over time and further research into this group is needed
- A greater emphasis needs to be placed on how best to communicate evidence of relative harm to smokers so that they can consider all the options available to them to quit smoking completely
- Vaping is more common among more disadvantaged adult groups in society. This mirrors smoking prevalence, and research should continue to explore the effect this has on health inequalities
- Further research should be carried out on addiction among vapers of different types of vaping products, nicotine types and flavours used



# Effect of Vaping on Smoking Cessation and Reduction

The following are the main findings from nationally representative survey data - STS

- Using a vaping product is the most popular aid used by people trying to quit smoking. In 2020, 27.2% of people used a vaping product in a quit attempt in the previous 12 months. This compares with 15.5% who used NRT
- Vaping is positively associated with quitting smoking successfully. In 2017, over 50,000 smokers stopped smoking with a vaping product who would otherwise have carried on smoking
- Prescription medications (NRT) were also positively associated with successfully quitting smoking
  - **This shows how important it is for people who smoke to have access to a wide choice of cessation aids**
- The extensive use of vaping products in quit attempts compared with licensed medication suggests vaping products may reach more people who smoke and therefore have more impact than NRT
- Quit rates involving a vaping product were higher than any other method in every region in England. These ranged from 49% in the South West to 78% in Yorkshire and the Humber.



# Questions?





# Best Bar None

South Area Council Update

Garreth Robinson (Senior Public Health Officer – Barnsley Council)

# What is Best Bar None?



Best Bar None is **an accreditation scheme** supported by the Home Office that aims to improve standards in the evening and night-time economy



Accreditation achieved through a combination of responsible management and operation of licensed premises, ongoing improvements, and social responsibility.



Best Bar None's goal is to help provide a **safer night out to all**

# Best Bar None - Benefits

Benefits include:

A reduction in alcohol related crime and disorder

Stronger and more positive relationships between the licensed trade, police and local authorities

A reduction in the harmful effects of binge drinking

Improved knowledge and skills of enforcement and regulation agencies, licensees and bar staff to help them responsibly manage licensed premises

Responsible owners recognised through awards and encouraged to share good practice with others

# Barnsley Best Bar None Progress

2018	2019	2020	2021
<p><b>13</b> venues accredited</p> <p>Barnsley won 'Best New Scheme' at BBN National Awards</p>	<p><b>23</b> venues accredited</p> <p>Barnsley came runner up for 'Most Innovative Scheme' at BBN National Awards</p>	<p>Scheme paused due to COVID</p> <p>Public health continued to support and engage with licensed venues across the borough throughout the time</p>	<p><b>25</b> town centre venues accredited</p> <p><b>9</b> Dearne area venues accredited</p> <p>Awards night June 2022 (combined event)</p>

# Planning the Scheme

Core Best Bar None Team

Communication with National Best Bar None team

Recruitment and training of assessors

Regular planning meetings

Consultation with licenced premises

Licenced premises sign up

# Initiating the Scheme

Initial visits with  
licensed premises  
(1 hour)

Overview of  
assessment process  
– essential criteria

Any support or  
resources needed -  
i.e., policies &  
procedures

Encouragement to  
support wider  
initiatives i.e., Ask  
for Angela/  
#AlrightPal

Time scales and  
commitment

Benefits for venue,  
local community  
and wider priorities

# Finalising the scheme

2-hour assessment visit with venues by trained assessors

Ongoing communication and support to venues

Regular feedback and updates by assessors to BBN core team

BBN core team support assessors throughout the process

Ongoing communication with National team

Assessments checked by core team and accreditations awarded

# Monitoring & Control

Quality assurance –  
venue observations  
by assessors

Licencing checks

Police crime checks

Venues put forward  
for awards in specific  
categories

Judging panel – (local  
elected members,  
local police, senior  
mangers, scheme  
coordinator)

# Closing the scheme



POST ACCREDITATION SMART  
SURVEY – FEEDBACK FROM  
VENUES & ASSESSORS



LETTERS TO RE-ENGAGE  
VENUES THAT DIDN'T  
PARTICIPATE



AWARDS CEREMONY TO  
CELEBRATE SUCCESS

# Dearne Area Best Bar None Pilot 2021/22

Ward Alliance Priorities – Business Support

Covid recovery plan

Consultation with local licenced premises

Dearne pilot proposal to local coordinator

Area lead - regular meetings with local coordinator

# Dearne Outcomes

	Before	After
Number of Accredited Venues	0	9
Number of First Aiders	1	31
Number registered with ICO	0	9
Number with policies & procedures in place	1	9
Number with staff training	0	9
Number with fully up to date safety records	0	9
Number awarded a BBN award	0	5
Number signed up to 'Ask for Angela'	0	16

# Costs to Area Teams

- ▶ The Best Bar None scheme has been funded by public health. In order to make the scheme more sustainable, moving forward, the scheme would need to be funded by the area teams; should you wish to roll out in your area.

<b>Best Bar None Folder x1 ( 1 per venue)</b>	£1.40 per folder
<b>Printed Assets</b>	Free
<b>2 GB USB Stick (1 per venue)</b>	£2.60 each
<b>Assessor Training (2 people in area)</b>	£80 per person or £600 max 20 people
<b>Window Stickers plus delivery + VAT</b>	£2.39 each plus £47.96 (VAT & Delivery)
<b>Glass Award</b>	£25 each
Frames	£12.99 each

# THANK YOU FOR LISTENING AND SHORT FILM...

## CONTACT:

**Garreth Robinson** – Senior Public Health Officer (BMBC)

[garrethrobinson@barnsley.gov.uk](mailto:garrethrobinson@barnsley.gov.uk)

## INFORMATION:

**Best Bar None**

<https://bbnuk.com/>

**Best Bar None Barnsley**

<https://www.youtube.com/watch?v=u-Sq6FSGUII>

<https://bbnuk.com/schemes/barnsley/>

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