



Department  
of Health

Tobacco Control &  
Physical Activity  
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T [REDACTED]

[www.dh.gov.uk](http://www.dh.gov.uk)

Ms Deborah Amott  
Action on Smoking and Health (ASH)  
Suites 59-63, 6<sup>th</sup> Floor, New House  
67-68 Hatton Garden  
London  
EC1N 8JY

8 December 2015

Dear Deborah,

Reference: 2015/027

**Grant to Action on Smoking and Health (ASH) for Support for Tobacco Control**

1. We are pleased to be able to award you the following grant. This grant has been awarded for the Support for Tobacco Control. I am writing on behalf of the Secretary of State to offer Action on Smoking and Health, hereafter referred to as the organisation, a grant up to a maximum of £150,000 for the financial year ending 2015/2016. This award is being made under the provisions of Section 64 of the Health Services and Public Health Act 1968.
2. The grant is for Support for Tobacco Control. This grant should be identified in your accounts as restricted funds.

**ADVICE**

3. This letter tells you about the conditions of the grant being offered to your organisation -
  - a. the standard conditions for all grants are given in paragraph 5, and
  - b. In paragraph 6 are the additional conditions for this grant (if specified).

Please read these conditions carefully, particularly those which require you to take action. A monitoring pack will be provided when the project/ service starts, summarising the information and documents the Department needs from your organisation: what, why and when.

4. You will be allocated a Policy Lead Contact in the Department of Health for this grant. For contact details, see the attached sheet. If there is anything that you do not understand in this letter, you should discuss it with your Policy Lead Contact as soon as possible. You may wish to copy this letter to your finance officer to help to ensure that the accounting requirements are fulfilled.

#### STANDARD CONDITIONS

5. The standard conditions attached to grants are as follows:-

#### BASIS ON WHICH GRANTS MADE UNDER SECTION 64 ARE AWARDED - FOR YOU TO NOTE AND OBSERVE

- a. the grant is awarded at the discretion of the Secretary of State. It is recoverable to the extent that if it is not used for the purposes for which it is given, and the right is reserved to discontinue the grant before it is paid in full;
- b. no aspect of the activity being funded by the Department should be party political in intention, use or presentation;
- c. In carrying out the activity, the organisation and anyone acting on its behalf, must comply with the law for the time being in force in the United Kingdom. Your attention is drawn in particular to the need to avoid committing any act of unlawful discrimination, harassment or victimisation prohibited by the Equality Act 2010 in providing goods, facilities or services to the public or carrying out public functions.

For further information, please refer to *What equality law means for your voluntary and community sector organisation* on the Equality and Human Rights Commission's website at [http://www.equalityhumanrights.com/uploaded\\_files/EqualityAct/service\\_providers\\_guide\\_voluntary\\_and\\_community\\_sector.pdf](http://www.equalityhumanrights.com/uploaded_files/EqualityAct/service_providers_guide_voluntary_and_community_sector.pdf)

- d. Your attention is also drawn to your obligations under the Data Protection Act 1998 and the Human Rights Act 1998. You should also note that any liability incurred under health and safety legislation, or liability for redundancy or unfair dismissal under employment legislation, will be the responsibility of your organisation (if your organisation is an occupier of premises or an employer) and not that of the Department. If there is any doubt over any of the above mentioned matters, you should seek legal advice.
- e. You are reminded of your duty to ensure, so far as is reasonably practicable, the health, safety and welfare of your employees as prescribed by the Health and Safety at Work Act 1974. This duty extends to include in particular:
  - the provision and maintenance of systems of work that are, so far as is reasonably practicable, safe without risks to health;

- arrangements for ensuring so far as is reasonably practicable
  - the provision of such information, instruction, training and supervision as is necessary to ensure, so far as is reasonably practicable, the health and safety at work of your employees;
  - so far as is reasonably practicable as regards any place of work under your control, the maintenance of it in a condition that is safe and without risks to health and the provision and maintenance of means of access to and egress from it that are safe and without such risks;
  - the provision and maintenance of a working environment for your employees that is, so far as is reasonably practicable, safe, without risks to health and adequate as regards facilities and arrangements for their welfare at work."
- f. the grant may not be passed, in whole or in part, to individuals or other organisations unless this is to pay for contracted activities where, the contractor is providing a specified product or service to the organisation as part of the project delivery and there is a written contract between the organisation and the contractor;
- g. the grant may not be used to finance fundraising efforts or to pay for organisational running costs apart from those indirect costs included in the agreed budget for the grant award;
- h. the grant is at a fixed cash level and will not be adjusted to meet pay and price changes;
- i. the Department has no commitment to renew financial support after the term of the grant;
- j. any underspend is to be reported upon and returned to the Department;

#### **ACTION FOR YOU TO TAKE (1) – ACCOUNTING FOR THE GRANT**

- k. you must separately identify the grant in your full annual accounts, audited, reported on by a reporting accountant or independently examined in accordance with current legal requirements and provide one copy for the Department. Identifying the grant in your accounts is required as a measure of accountability for the use of public funds;
- l. If information about the income and expenditure of the Support for Tobacco Control grant is not separately identified in your accounts, you must provide one copy of a certified statement of income and expenditure for the project in the same detail as the budget provided with the grant proposal. This statement should refer to the part(s) of the accounts from which it is derived and

be signed by one of the following:- trustee, company director, chief executive, finance officer/treasurer, registered auditor, reporting accountant or independent examiner;

- m. if your organisation is not legally required to have its accounts audited, reported on by a reporting accountant or independently examined, then you must provide one copy of a statement of your organisation's gross income and total expenditure, in which the grant must be separately identified, and signed by a trustee or, if a limited company, a company director. Identifying the grant in your accounts is required as a measure of accountability for the use of public funds;
- n. you must send the required one copy of –
- your accounts (paragraph 5k), or
  - a statement of your organisation's gross income and total expenditure (paragraph 5l),
  - and, if not already included in the above, a certified statement of the project's income and expenditure (paragraph 5m),
- as soon as possible, but not later than six months after the end of your financial year, direct to your DH Policy Lead contact. The Department may have to ask for further details about the expenditure of the grant;
- o. if you are unable to provide one copy of your annual accounts or statements within six months of the end of your financial year, you must tell your Policy Lead Contact immediately, provide one copy of your DRAFT accounts or statements within six months of the end of your financial year and forward the final approved version as soon as possible;
- p. unless otherwise agreed as in paragraph 5n, failure to submit the relevant accounts or statements specified in paragraph 5m within six months of the end of your financial year, will lead to suspension of this grant and any other grant still in payment at that time;
- q. all invoices, receipts, accounting records and any other relevant documents relating to the expenditure of the money should be kept, for a period of at least six years after the completion of the project. These must be made available at any reasonable time for inspection by officials of the Department or of the National Audit Office. Additionally, the Comptroller and Auditor General may carry out examinations into the economy, efficiency and effectiveness with which the grant has been used;

#### **ACTION FOR YOU TO TAKE (2) – GRANT REFUNDS AND CHANGES**

- r. the grant must be used in the Department's financial year (1 April to 31 March) for which it has been awarded. Any unspent grant remaining at the end of

**the financial year must be notified to your Policy Lead Contact as soon as it comes to light and no later than 30 April;**

- s. **If the organisation should close down, or merge with another organisation, the Secretary of State may require a refund of any grant which, at that time, had not been used for the purposes for which it was given; and**
- t. **If at any time you wish to make changes to these conditions you should discuss them with your Policy Lead Contact. If any of the conditions specified is not fulfilled without the prior agreement of the Secretary of State, you may be asked to repay all or part of the money.**

#### **ADDITIONAL CONDITIONS – ACTION FOR YOU TO TAKE (3)**

**6. Additional conditions will apply to this grant as follows:-**

##### **BUDGET ESTIMATES**

**A revised budget estimate for the project will be required before payment of the grant can start. Payment of the grant will be withheld if a satisfactory estimate is not received.**

##### **RETURN OF DOCUMENTATION**

**Payment of the grant will not commence until all required documentation i.e. signed hard-copy Grant Award letter, budget estimate template and other requested documentation is received. A copy of these documents needs to be sent to your Policy Lead Contact and the Department of Health Grants Hub team (see contact sheet).**

##### **MONITORING GRANT ACTIVITY**

- **You must submit a project progress report and associated Income and Expenditure details on the project when the project is completed. The project report should link back to the project proposal/ plan submitted to the DH Policy team and should include outcomes achieved and copies of any published papers, leaflets, articles resulting from or about the project. The progress report should also detail any slippage or changes agreed in the project and provide a revised plan for the next year(s) (where relevant);**
- **You should provide information about how your project has achieved any cash releasing savings or increases in productivity as a result of the work being carried out. This should be addressed in the end of project report.**
- **You may be asked to attend networking events or presentations throughout the course of the project as part of the process of sharing learning with other VSO's and the department;**
- **Your Policy Lead Contact may arrange to visit the project to discuss progress with you;**

- Any the other monitoring, evaluation and review arrangements specific to your project will be discussed and agreed with you by your Policy Lead Contact;

#### **YOUR ORGANISATION'S STATUS AS A CHARITY**

The grant award is provisional upon satisfactory completion of registration with the Charity Commission. Please copy the registration document to your Policy Lead Contact

#### **PAYMENT ARRANGEMENTS – ACTION FOR YOU TO TAKE (4)**

7. Payment of the grant will be made direct to your bank by BACS. Please inform your Policy Lead Contact if there are any changes to your bank account details. Please note that payments will not be made payable to an individual.

#### **AGREEMENT TO THE CONDITIONS OF THE AWARD – Action for you to take (5)**

8. Please confirm that the organisation has read and understood this letter by arranging for a trustee or, if a limited company, a company director to accept the above conditions on behalf of the organisation, by signing a copy of this letter and returning the whole copy, with an original signature (not a photocopy), and the budget template to your Policy Lead Contact and the DH Grants Hub. We will then arrange for payment of the grant once the project has started.

#### **ADDITIONAL INFORMATION**

9. This award has been made under the provisions of Section 64 and may not be used for lobbying or to fund original research and consultancy services must not be offered under this grant. ASH has confirmed that the grant will only ever be used for tobacco control delivery activity and not for any activity that could be considered to be lobbying, nor will it be used to fund research or provide consultancy services.

Yours sincerely



Jeremy Mean  
Deputy Director, Tobacco Control and Responsibility Deal

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**ACCEPTANCE OF GRANT AWARD CONDITIONS**

Date of Award Letter: December 2015

Grant Reference Number: 2015/027

Project Name: Support for Tobacco Control

Grant Award:

Year	£
2015/16	150,000

I am a Director/ a Trustee of ASH ("the Organisation") which has applied for a grant under Section 64 of the Health services and Public Health Act 1968] ("grant"). I confirm I have read and understood the conditions of the grant specified in the "Grant Award Letter", and that I accept the conditions on behalf of the Organisation. I understand that the Organisation, as a condition of receiving the grant, must inform the Department of Health if it alters the way in which the grant will be spent. I understand the Organisation may be liable to return all funds received under this grant if it is not used for the purposes for which it is given.

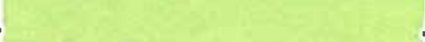
I authorise on behalf of the Organisation the disclosure of all relevant information to the NHS Counter Fraud and Security Management Service to enable the Department of Health to verify that grants allocated have been used appropriately. I also authorise on behalf of the Organisation disclosure of all relevant information to the Charity Commission and HM Revenue and Customs.

I understand that nothing in this declaration obliges or permits the Organisation to disclose information that is prohibited from disclosure by or under any enactment, rule of law or ruling of a court of competent jurisdiction or is protected by the common law.

I declare that the information provided in the application resulting in this award of grant is correct and complete. I understand that if it is not, appropriate action may be taken, which may lead to criminal sanctions being applied.

Position of signatory: TRUSTEE AND DIRECTOR

Full name: ANDY McEWEN

Signature: ..  ..

Date: 10/12/15

**PLEASE RETURN WITH THE COUNTERSIGNED AWARD LETTER**

**1. UPDATED CONTACT DETAILS**

We would prefer to use email for correspondence with your organisation. Please provide contact details of the person in your organisation who will be responsible for monitoring this grant and complying with the terms and conditions. Future correspondence will be sent to this person rather than the Chief Executive or Chair of the organisation. You should let us know if any of these contact details changes.

Reference	2015/027
Organisation	ACTION ON SMOKING AND HEALTH
Name of contact	[REDACTED]
Position in organisation	[REDACTED]
Email address	[REDACTED]
Telephone number	[REDACTED]
Fax number	-
Postal address	SUITE 59-63, 6TH FLOOR, NEW HOUSE, 67-68 HATTON GARDEN, LONDON, EC4N 8JY.

**2. BANK ACCOUNT DETAILS**

If your organisation is in receipt of an existing DH grant, we may not need you to supply bank account details. If you do not have a current grant please provide bank account details (account name and number, sort code, bank name and address) on the organisation's headed notepaper.

Please tick

<input checked="" type="checkbox"/>	The organisation is currently in receipt of a grant from the Department of Health and the new grant should be paid into the same bank account.
<input type="checkbox"/>	The organisation is not currently in receipt of a grant from the Department of Health. I enclose details of our bank account name and number, and the bank name, address and sort code on headed paper.



	CONTACT
Policy Lead Contact	<p>[REDACTED]</p> <p>Department of Health  6<sup>th</sup> Floor Wellington House  133-155 Waterloo Road, London  SE1 8UG  Email: [REDACTED]  Tel: [REDACTED]</p>
Grant Hub Contact	<p>Voluntary Sector Grants Hub  Department of Health  2E23 Quarry House  Quarry Hill  Leeds  LS2 7UE</p> <p>Tel: [REDACTED]  Email: [REDACTED]</p>

This information is correct at 4 December 2015. We will send you a revised contact sheet if any of the details change.

## Appendix 1 - Deliverables

### Section 64 grant – Action on Smoking and Health 2015/16

#### Budget Note

The project work this grant funds runs for an entire year. Expenditure on the project to end October 2015 has come from the £166,387 "Other sources of funding for this project" identified under "Income" in the original budget submitted. This funding comes from core funding from Cancer Research UK and the British Heart Foundation.

Under "Expenditure – Annual Smokefree & Youth Smoking Surveys", all of the work on this will take place during January-March 2016.

#### Deliverables

The following details the deliverables ASH will produce between 1st December 2015 and 31<sup>st</sup> March 2016 through funding from Section 64 grant. Some of the grant objectives that were part of the scope of the application when it was made in March 2015 have since been delivered through other funding sources notably activity to support the implementation of new legislation and regulations in October 2015. The original grant application was always to be used in conjunction with funding from other sources, as noted above. Given that funding from Section 64 will be later in the year the remainder of this work will be 100% funded from DH Section 64.

Grant objective	Deliverable
<p>Implementation of the <i>Tobacco Control Plan for England</i> which runs to December 2015;</p> <p>Prevention agenda set out in the NHS Five Year Forward View for England in particular for policy areas which have the potential to reduce health inequalities such as smoking in pregnancy, mental health and tobacco harm reduction;</p> <p>Implementation of the WHO Framework Convention on Tobacco Control.</p> <p>Participating and contributing to DH's work to develop a national implementation strategy on harm reduction which the public health community can endorse and support local implementation.</p>	<ul style="list-style-type: none"> <li>• <b>Health inequalities launch:</b> In October a resource pack on health inequalities was launched providing briefings to local areas on tackling smoking among groups that have high smoking prevalence – this was disseminated to around 200 organisations and endorsed by key organisations such as PHE, the Association of Directors of Public Health and the Faculty of Public Health. We will be launching the materials with an event for national organisations working to reduce health inequalities and local authorities and CCGs in February 2016. This event will help to inform relevant organisations of the importance of tackling smoking in populations with high rates of smoking.</li> <li>• <b>Mental health and smoking report:</b> This project, currently underway, will result in a consensus document from organisations working in public health and mental health on the steps needed to implement NICE guidance and radically improve smoking rates among those with a mental health condition. The report is being developed collaboratively and will include research funded by Public Health England on the poverty experienced by those with a mental health problem who smoke. It will be further supported through a poll of service users and staff working in mental health settings. The final report will be widely disseminated to all CCGs and mental health trusts and promoted through a launch event in mid-January 2016 (date TBC).</li> <li>• <b>Promoting smoking cessation in secondary care:</b> ASH will</li> </ul>

	<p>continue to support the roll out of the NHS Statement of Support for Tobacco Control (which is endorsed by the Public Health Minister) to CCGs and Trusts. We will further be developing materials in partnership with leading organisations to help make the case for further activity to help people to quit smoking in secondary care settings. This is an ongoing programme of work which will be launched by the end of March 2016. In addition we are providing support on smoking cessation to the London Clinical Senate, a multi-professional group of senior health professionals which provides independent, strategic advice to commissioners, about health care for the populations they serve</p> <ul style="list-style-type: none"> <li>• <b>Electronic cigarettes and tobacco harm reduction:</b> Providing briefing materials to councils on current evidence around electronic cigarettes. This will take the form of a short Q&amp;A and be distributed to all councils via tobacco control leads before the end of 2015. ASH is also providing support to NCSCT on developing guidance to local commissioners on implementing NICE Guidance on Tobacco Harm Reduction.</li> <li>• <b>Managing nicotine withdrawal in police custody:</b> We will publish guidance to police custody sergeants on management of nicotine withdrawal for smokers coming into police custody. This will particularly highlight the needs of those with mental health conditions. We will be seeking input from PHE, NCSCT and organisations representing offenders and police organisations. The final document will be distributed to local authority tobacco control leads and through police networks. Once we receive feedback from PHE we can progress to developing a launch plan. Timescale TBC but before the end of the 2015/16 financial year.</li> <li>• <b>Smoking in prisons:</b> We continue to support the implementation of smokefree prisons through our role as an observer to the NOMS Smokefree Prisons Project Board, which meets monthly.</li> <li>• <b>Local authority resource pack on implementing Article 5.3:</b> Working with the WHO Tobacco Control Collaborating Centre and Kent County Council produce a set of materials to enable councils to implement Article 5.3 of the WHO FCTC. Timescale TBC but before the end of the 2015/16 financial year.</li> </ul>
<p>Preparation for implementation of the EU Tobacco Products Directive and standardised "plain" packaging in May 2016</p>	<ul style="list-style-type: none"> <li>• <b>Briefing on the TPD requirements on electronic cigarettes:</b> We will publish and disseminate to local authorities and other stakeholders a briefing setting out the requirements of the TPD for electronic cigarettes and what that will mean for products available on the market. Timescale TBC but before the end of the 2015/16 financial year.</li> <li>• <b>LA briefing on TPD requirements and SP:</b> We will produce a briefing for local authorities setting out their responsibilities</li> </ul>

	<p>from May 2016. This will be based on the format produced already here: <a href="http://ash.org.uk/files/documents/ASH_937.pdf">http://ash.org.uk/files/documents/ASH_937.pdf</a> Timescale TBC but before the end of the 2015/16 financial year.</p>
<p>Development of regional approaches to tobacco control;</p>	<ul style="list-style-type: none"> <li>• <b>Support to regional meetings:</b> Ongoing support across the country to regional networks.</li> </ul>
<p>Raising awareness of the harms from tobacco use</p>	<ul style="list-style-type: none"> <li>• <b>Information resource updates:</b> Over the next 5 months we will be updating 6 fact sheets and one research report update.</li> <li>• <b>ASH Daily News:</b> This daily email bulletin will continue to be produced. It currently reaches over 2,500 subscribers.</li> <li>• <b>Infographics and other resources:</b> We will be producing more information in infographic form to support dissemination of good evidence in relation to the harms from tobacco. We will shortly be publishing an infographic on deaths caused by smoking by condition. We are further exploring ways of illustrating data on smoking at ward level in partnership with PHE.</li> </ul>
<p>Bringing together a network of organisations with an interest in tobacco control that DH can make use of to improve communication with stakeholders about tobacco control; the Tobacco Control Plan for England, and the upcoming implementation of tobacco control regulations in 2015-16</p>	<ul style="list-style-type: none"> <li>• <b>Database of local contacts:</b> We maintain a network of over 500 local contacts through which we disseminate relevant information regularly and respond to enquiries and requests for support</li> </ul>
<p>Monitoring public attitudes to tobacco control issues and report on these regularly.</p>	<ul style="list-style-type: none"> <li>• <b>Smokefree GB and Smokefree Youth surveys:</b> March 2016 will be the 10<sup>th</sup> year that ASH has undertaken a survey of public attitudes and behaviour around smoking. The youth survey is entering its 4<sup>th</sup> year and in the year following the March wave we have applied for further funding from Cancer Research UK to follow up the respondents to the annual survey at three month intervals over the following year. This will add value to the findings from the survey the Section 64 Grant helps fund.</li> </ul>
<p>Working with charities, researchers and professional bodies to provide ongoing support to the Smoking in Pregnancy Challenge Group. This meets the challenge set by the then-public health minister, Anne Milton to</p>	<ul style="list-style-type: none"> <li>• <b>Smoking in Pregnancy Challenge Group communications group:</b> ASH provides ongoing input into this communications group with partners from across charitable sector, PHE, NHS England and others. This support includes drafting of documents for the group for example a Q&amp;A for midwives on electronic cigarettes.</li> <li>• <b>Support dissemination of NICE Guidance:</b> Continuing to work with PHE and Challenge Group members to disseminate NICE Guidance including supporting workshops and events.</li> </ul>

<p>stakeholder organisations to support DH in meeting its national ambition to reduce smoking in pregnancy from 14% to 11% by the end of 2015.</p>	<ul style="list-style-type: none"> <li>• <b>Smoking in pregnancy yammer groups:</b> We support and co-ordinate an online yammer groups for professionals to enable them to share practice. It currently has 143 members.</li> </ul>
<p>Encouraging local areas to prioritise tobacco, to maximise the opportunities from effective implementation of upcoming tobacco regulations, and to develop and implement evidence-based, comprehensive tobacco control strategies that maximise a multi-sectoral approach to implementation in line with the Tobacco Control Plan for England and NICE Guidance.</p> <p>Working with local authorities, charities and professional bodies to help promote resources such as the CLear standard, local tobacco control toolkit, Local Government Declaration on Tobacco Control and the NHS Statement of Support for Tobacco Control which support delivery of the Tobacco Control Plan for England, the NHS Five Year Forward View for England, Public Health Outcomes Framework and implementation of tobacco control regulations in 2015-16.</p>	<ul style="list-style-type: none"> <li>• <b>Local toolkit updates:</b> We are updating the materials in our toolkit for local authorities. This includes an update of the ASH Ready Reckoner tool to bring it up to date with local smoking rates published in November.</li> <li>• <b>Local Alliance Toolkit:</b> Set of materials to support the development of local tobacco alliances. This will be published online and distributed to all local tobacco control leads. We are working with regional tobacco offices to develop this resource.</li> <li>• <b>Local Government Declaration on Tobacco Control:</b> We will continue to support the roll out the Declaration. Currently 50% of all upper tier authorities have signed the Declaration. We aim to increase that number over the period of the grant.</li> <li>• <b>Local and regional communication:</b> We continue to support roll out of NICE Guidance, CLear and other tools through input into meetings across the country. We also provide updates and prompts through regular emails to our local network.</li> <li>• <b>Responding to local feedback:</b> As part of an annual survey of tobacco control leads we have asked for suggestions of further support local areas would welcome from ASH. We will be responding to these suggestions.</li> </ul>
<p>Encouraging and supporting the development of approaches to tobacco control at regional level which have the potential to enhance local implementation of tobacco control policies.</p>	<ul style="list-style-type: none"> <li>• <b>Supporting Tackling Illicit Tobacco for Better Health Partnership:</b> We provide expert input into the regional tobacco work on illicit tobacco across the North of England the South West.</li> <li>• <b>Support to London Illicit tobacco work:</b> We are supporting the activity of the SE London cluster of local authorities in developing a joined up approach to tackling illicit tobacco across the region.</li> </ul>
<p>Providing DH with information to inform DH policy making on the</p>	<p>The WHO FCTC Article 9 and 10 working group on product regulation meets in February 2015 in advance of the next conference of the parties meeting in November 2016. ASH is an</p>

development and implementation of the WHO Framework Convention on Tobacco Control by providing DH with reports from working groups and other relevant information.

observer to the group and will ensure that the UK perspective is fed into the discussions and that the Department of Health is properly briefed about the outcomes of the meeting.