

# HEALTH AND WELLBEING BOARD

21 JULY 2023

## PRESENT

Councillors J. Slater (in the Chair), and R. Thompson.

### In attendance

Nathan Atkinson	Corporate Director Adults & Wellbeing
Richard Roe	Corporate Director, Place
Heather Fairfield	Chair of Healthwatch Trafford
Gareth James	Deputy Place Lead for Health & Care Integration
Caroline Siddall	Housing Strategy & Growth Manager
Jane Wareing	GP Board Representative
Dr. Manish Prasad	Associate Medical Director
Alicia Smith	Detective Superintendent, Stretford Police Station
George Devlin	Trafford Community Collective Representative
Caroline Davidson	Director of Strategy at MFT
Jo Bryan	Public Health Programme Manager
Aimee Hodgkinson	Public Health Commissioning Manager
Kate McAllister	Public Health Intelligence Lead
Kate Shethwood	Public Health Consultant
Berni Tomlinson	Neighbourhood Engagement Coordinator
Nat McGregor	Work Experience
Harry Callaghan	Governance Officer
Alexander Murray	Governance Officer

## APOLOGIES

Apologies for absence were received from Councillor K.G. Carter, Councillor P. Eckersley, Councillor J. Brophy, C. Rose, and S. Todd.

### 1. MINUTES

RESOLVED: That the minutes of the meeting 18 May 2023 be agreed as an accurate record and signed by the Chair.

### 2. DECLARATIONS OF INTEREST

No declarations were made.

### 3. QUESTIONS FROM THE PUBLIC

No questions were received.

### 4. GM JOINT FORWARD PLAN

The Deputy Place Lead for Health and Care Integration gave an outline of the plan, highlighting the six key 'missions'. Integrated Care Boards (ICB) had a duty to produce a five-year delivery plan in place stating how the ICB would use its

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powers. With the establishment of the six 'missions', clear areas of focus were in place and the plan contained details around delivery for each area. The Deputy Place Lead for Health and Care Integration asked Board Members to consider how the Board could align and work with the ICB to help to deliver the Plan.

The Chair noted that the plan highlighted communications with the public and the importance of having the right communications in place. The Chair then opened the floor for discussions.

The Corporate Director for Adults and Wellbeing highlighted the importance of aligning the plan with the Council's neighbourhood model and to ensure measures for success were identified within the plan. The Trafford Community Collective Representative agreed with this and added that discussions at the locality Board highlighted the importance of collaboration between all of the Boards to avoid duplication and ensure they worked together effectively.

The Public Health Consultant informed the Board of an important mapping exercise which would show where Trafford was collaborating with partners to implement the forward plan and how the borough was progressing with the plan. This would enable the Board to spot any gaps and overlaps that existed. The Health and Social Care Programme Director responded that within the plan there are plenty of tangible examples which show the work which is going on within the locality.

The Associate Medical Director Gave an overview of the hospital at home programme and informed the Board that it was a way of caring for people in their home to ensure that hospital was the last resort for End-of-Life care. Work on the programme was already ongoing and were looking to deliver this over the next few years.

The Deputy Place Lead for Health and Care Integration agreed that the ICB's priorities needed to be aligned with partners. He recognised that there were gaps within the plan, but it was a good piece of work to build upon.

The Chair of Healthwatch Trafford felt that there was not enough focus within the report upon children's mental health and she hoped that it was something the Board would pick up as a priority. The Chair agreed that Children's Mental Health was a priority for the Board and something that they would focus upon going forward.

RESOLVED: That the report be noted and recommendations approved.

## **5. CENSUS UPDATE - WHAT THIS MEANS FOR TRAFFORD**

The Public Health Intelligence Lead delivered the presentation to the Board. The presentation covered the aims of the census from 2021 and how data can be used to shape questions around public health in Trafford. The Public Health Intelligence Lead highlighted what the census covered, including data on population demographics, health, and education, and spoke about how important this was in helping to plan and deliver services. The Board were asked to note the useful

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features including its high response rate (98% at Trafford level), methodology, and geography. Resources from the Trafford data lab were shared and the Board were made aware of the limitations of the census, one being that it only offered a snapshot of the status of the population, which made it difficult to use the data to determine cause and effect. The data was self-reported, which meant people answered questions in different ways. The Public Health Intelligence Lead mentioned that it was important not to over interpret data.

The Public Health Intelligence Lead informed the Board of two approaches for how to use census data to inform public health. One example of how the data had been used effectively was in examining how many disabled people within each ward were affected by their disability on a day-to-day basis. The Public Health Intelligence Lead then offered observations and questions which could be taken from the data and spoke to the Board of the importance of asking questions of data to ensure conclusions were not based upon mere observations of the data.

The Public Health Intelligence Lead then presented questions that the board could help the public health team with and asked if the Board had any suggestions as to how the census data could support the work of the health and wellbeing board.

The Trafford Integrated Network Director agreed that the census data was a powerful tool when used in conjunction with the information held by services using the neighbourhood model.

The Trafford Community Collective Representative relayed his interest in using the data around inequality to see changes from 2011 to 2021, and how this could help to inform the approach for tackling inequalities within Trafford. The Corporate Director Adults and Wellbeing added that it would be interesting to look at how the borough had changed across the decade particularly with regards to the ageing population within the borough.

The Housing Strategy and Growth Manager asked how the data could be used to monitor the role of housing, and its impact on public health. The Corporate Director for Adults and Wellbeing added that it would be interesting to looking at the impact of the affordability of housing within the borough.

The Director of Strategy at MFT asked whether there was scope to look at acute hospital data and data from other sources to form broader insights. The Public Health Intelligence Lead replied that using data from multiple sources was a powerful tool. However, you had to be certain that the data could be used for those purposes and that you were not breaching GDPR.

The Chief Executive of Trafford Leisure asked what steps had been taken to get around the challenges of language to achieve such a high completion rate. The Public Intelligence Lead responded that the Office for National Statistics had gone to great lengths to address language barriers but there were still areas and demographics with lower return rates than others.

**RESOLVED:** That the presentation be noted.

## **6. TOBACCO DEEP DIVE**

The Public Health Programme Manager presented the actions and results following the Health and Wellbeing Board's deep dive the year before. Since that deep dive the Trafford's tobacco alliance had been launched which was a collective partnership of stakeholders who looked at reducing smoking. A CLEAR assessment had taken place which had highlighted where the alliance was performing well and where they needed to improve. Trafford had performed quite poorly overall, but the analysis had been conducted prior to the partnership being formed. The Board were provided with an overview of each of the indicators and their meaning.

The alliance had conducted an updated smoking needs assessment and the data had shown Trafford was still below the English and GM data which was good. There had been a slight increase post pandemic, however, the data did not provide the full picture, with less gathered face to face and a greater reliance upon telephone interviews. Higher smoking rates were seen within Stretford, Partington, and Sale Moor. Higher rates were also seen by those who worked in routine and manual job roles. Trafford's statistics were lower than Greater Manchester (GM) in all areas, including young people and those with substance dependence. The results showed that 90% of young people had never smoked and 77% had never tried a vape.

The next steps for the tobacco alliance were shared by the Public Health Programme Manager, which involved, reviewing the CLEAR assessment, the needs assessment, supporting the groups identified as needing support, and developing a strategy and action plan. A team away day had been scheduled to look at these challenges. Finally, the board were notified that the high impact action plans were in the process of being completed.

The Chair mentioned the importance that vaping should remain important to the alliance, due to the number of young people taking it up.

The Trafford Integrated Network Director spoke of the importance of the neighbourhood model and of the work which had been done to reduce smoking within North Trafford, which was proving difficult. The Trafford Integrated Network Director raised doubts around young people smoking data as it did not reflect the experience of his children and their friends.

The Public Health Programme Manager agreed with the issue of young people and vaping, as it was something that had increased in recent years, with smoking decreasing. She mentioned that young people were more likely to lie in a survey, which caused issues with the statistics. A research project was due to commence in September to look at vaping level among young people.

The Housing Strategy and Growth Manager suggested organising a meeting with housing associations around reducing smoking due to higher prevalence of smoking social housing. The Public Health Programme Manager responded that there had been interest from 'Great Places' to start a pilot project around interventions within social housing. The Housing Strategy and Growth Manager

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felt that working with 'Great Places' was a good start but engaging L&Q and Irwell Valley social housing groups would have a larger impact due to the level of stock they had within Trafford.

The Corporate Director for Place also challenged vaping data, saying how it was really high within schools across all years. He felt that communications around vaping from the council needed to be clearer, as there was a mix of messages going out. The Corporate Director for Place also mentioned that greater communication was needed around the health and environmental consequences of vaping. The Public Health Programme Manager responded agreed that the messaging could be confusing, especially with the way vapes were marketed with bright colours and flavours which appealed to young people.

The Chief Executive of Trafford Leisure asked how early children were made aware of the issues of vaping/smoking. The Public Health Programme Manager responded that this was being done from year six, with posters placed across schools to raise awareness, as well as increased promotion within secondary schools. The Chief Executive of Trafford Leisure spoke of the organisation highlighted the issues of smoking and vaping to young people on work placements. She felt having more interventions and more creative ways to allow young people to access smoking cessation would be a good option for the alliance.

Trafford Community Collective's Representative offered to meet to look at neighbourhood engagement as smoking cessation was one of the leading agenda items for his organisation. He also highlighted the opportunity to link it with some of the housing work.

A Governance Officer spoke of data that suggested posters can sometimes trigger vaping more, rather than decrease the levels. He also mentioned how in Canada and Australia smoke free places, were also vape free places, with much lower levels of smoking in both places compared to the UK. The Public Health Programme Manager replied that the posters were designed to educate and dispel myths about smoking and vaping. She agreed with aligning smoke free with vape free, and this was something that would become more prevalent to discussions in the future.

The Associate Medical Director agreed with all that had been said. He felt children were enticed by the sweet flavours and bright colours and by misconceptions that vaping was safe. He spoke about data indicating that vaping could cause chronic lung disease, so people starting to vape earlier was worrying.

The Chair thanked all for their contributions before moving the recommendations of the report which were agreed.

**RESOLVED:** That the report be noted and the recommendations be approved.

## **7. PHARMACY UPDATE**

The Public Health Programme Manager introduced the update and reminded the board of Trafford's pharmaceutical needs assessment 2022-25. Trafford had a greater number of pharmacies than the GM and England average, although there was a current gap in provision within Partington on Saturday afternoons or Sundays. Work was being done to see if any pharmacies in the area would be interested in opening on a rota basis, however this was difficult as Trafford did not hold the contracts.

The Public Health Programme Manager informed the Board of the recent pharmacy closures of Lloyds Pharmacies based in Sainsburys in Altrincham, Sale, and Urmston. However, Trafford was coping and had a good level of provision in place. The Public Health Programme Manager stated that the Partington issue was more prevalent however, a recent announcement from Boots, who were planning to close 300 stores where there was coverage within 3 miles, meant that it could become a concern. As of the meeting there had been no announcements for closure to Boots Pharmacies based in Trafford.

The Public Health Programme Manager continued, highlighting changes to commissioned service for pharmacies associated with Emergency Hormonal Contraception (EHC) and smoking cessation. A SCS service had been launched, which would take smoking cessation referrals from hospitals. The Cure service in GM was in place to support inpatients to stop smoking. A swap to stop pilot was ongoing nationally and the team planned to look at the end of August to see whether Trafford could obtain any funding.

The Chair of Healthwatch Trafford asked about out of hours provision within GM, and the lack of it within Trafford. The Public Health Programme Manager recognised the troubles of this in Trafford and how it was difficult to address them as the Council did not hold the pharmacy contracts, just the contracts for the services commissioned by the Council. Communication was taking place with pharmacies to encourage additional out of hours provision, but the Council's ability to affect the level of provision were limited.

The Trafford Integrated Network Director raised concerns around the lack of pharmacy provision in Partington on certain days, especially for the disabled population of Trafford and Partington specifically (where one in four people were registered as disabled).

The GP Board Representative shared her concerns regarding pharmacy closures and the struggles being faced by the remaining pharmacies that were in operation.

The Deputy Place Lead for Health and Care Integration asked about the impact of pharmacy closures so far and if the remaining pharmacies had sufficient capacity. The Public Health Programme Manager responded that an impact was not being seen yet, as many of the closures were located near to other pharmacies. However, she mentioned how possible Boots closures could have a bigger impact in the future.

The Chair of Healthwatch Trafford felt that better communications were required to inform the public what medication was available where, as the level of medication access was concerning. The Public Health Programme Manager seconded this concern. Trafford's aim was for all residents to be within half a mile of a pharmacy, with almost everyone currently within a mile. The Deputy Place Led for Health and Care Integration agreed that communications could be improved.

RESOLVED: That the update be noted.

## **8. BETTER CARE FUND**

The Corporate Director for Adults and Wellbeing presented the verbal report regarding the better care fund. The aim was to bring the full and final report to the next meeting of the Board, with the final report requiring sign off by NHS England.

Following the update Board Members were given opportunity to ask questions but none were raised.

RESOLVED: That the update be noted.

## **9. WOMEN'S VOICES**

The Public Health Consultant introduced the item by providing some context to the organisation, which had been established following the publication of the National Women's Health Strategy in July 2022, which highlighted data of women feeling let down by the NHS. She referred to the National Strategy and possible areas for improvement, including provision for menopause, and mental health and wellbeing. Trafford's shared approach – 'One Voice Raises Another – was then presented to the board.

The Neighbourhood Engagement Coordinator began the presentation by speaking about her background and how she got involved with the programme, having previously worked on responding to women who came out after the pandemic with stories of violence against women. The Board were informed of work done in Trafford to establish the multi-agency, Women's Voice Core Group, which extended the voices of women in Trafford. The group aimed to bring together women who have had both good and bad experiences with the services which Trafford provides, offering them the opportunity to sit across the table from those who control the services. The Trafford Women's Voices event held in December 2022, drew evidence from lived experience and conversations. 85 people attended the event, which was incredibly successful. Two women shared their personal stories at the event which had a very powerful affect upon the audience.

The Neighbourhood Engagement Coordinator provided Board Members with ideas as to what the group wanted to achieve next. This included a plan to continue the conversation and develop further relationships for change. A Trafford POWER pledge had been written and the goal was to have as many organisations and individuals sign up to it as possible, beginning with locality-based women's alliance groups.

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Several members of the board relayed how impressed they were with the presentation, what had been achieved so far, and agreed with the plans moving forward.

The Chair thanked the Neighbourhood Engagement Coordinator for her presentation.

**RESOLVED:**

- 1) That the presentation be noted.
- 2) That the Board agree to support the plans of Trafford Women's Voices going forward.

The meeting commenced at 10.00 a.m. and finished at 11:58 a.m.