

Trafford Smoking Needs Assessment 2022

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Introduction

Smoking is a primary cause of inequalities in health outcomes. For example, amongst men, smoking is responsible for more than half the excess risk of premature death between the social classes (Jarvis M and Ward J 2006). In 2019, the Government set an objective for England to be smokefree by 2030, meaning only 5% of the population would smoke.

Smoking harms nearly every organ of the body. It causes lung cancer, respiratory disease and cardiovascular disease, as well as many cancers in other organs including lip, mouth, throat, bladder, kidney, stomach, liver and cervix. Smoking reduces fertility and significantly raises the risk of developing type 2 diabetes, eye disease and dementia. It leads to decreased bone mineral density and is associated with increased risk of osteoporosis, bone fractures, back pain and degenerative disc disease.¹ Smoking is the leading cause of preventable death in the UK.

The Cost of Smoking

Around 5% of the NHS budget is spent on smoking related illnesses each year. The tobacco industry makes £12bn in England each year, or approximately £2,000 per smoker. Smoking costs society £17.04bn each year. This is due to a variety of different causes:

- **Working Population:** Smokers are more likely than non-smokers to become ill while of working age increasing the likelihood of being out of work and reducing the average wages of smokers. Smokers are also more likely to die while they are still of working age creating a further loss to the economy. Together this adds up to £13.2bn.
- **Social Care:** Smokers' need for health and social care at a younger age than non-smokers also creates cost, with smoking costing the NHS an additional £2.4bn and a further £1.2bn in social care costs.
- **Fires:** Smoking-related fires are the leading cause of fire-related deaths, and the costs of property damage, injuries and deaths amount to another £280m.

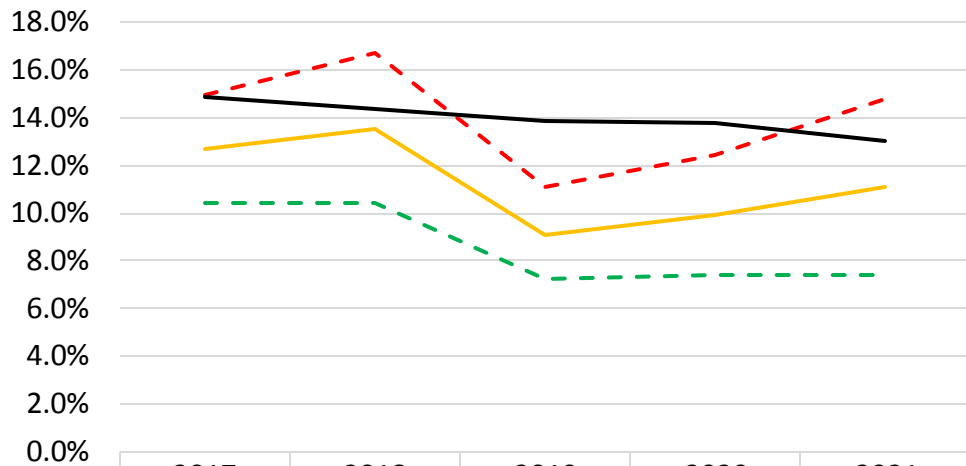
Smoking Rates Routine Population

There are two primary data sources available to look at Trafford's smoking prevalence.

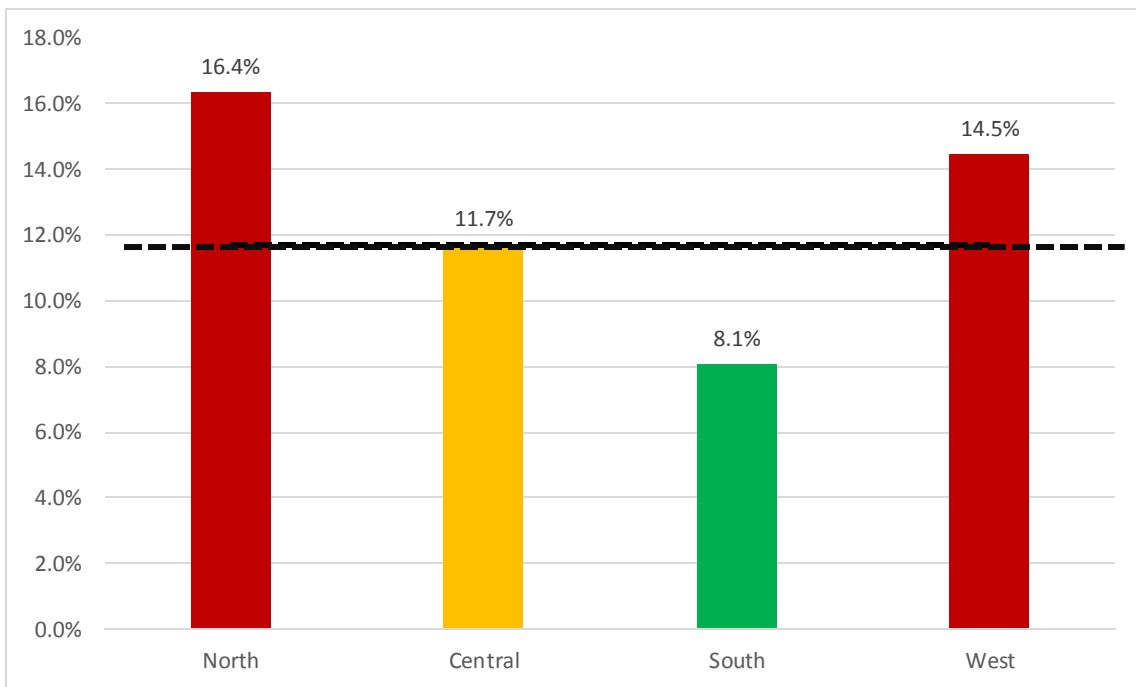
1. OHID national data which is pulled from the annual population survey (APS). This shows an increase from 2019 to 2021 from 9.1% to 11.1% but this has been deemed not statistically significant due to low sample sizes and changes in method of collection due to COVID-19.
2. GP data, from QOF indicators. This shows the current smoking prevalence per 1,000 based on data available for the 29% of patients who had their smoking status recorded in the last 24 months. This shows a smoking prevalence of 11.7%, which is in line with OHID figures.

Using this data in combination, it may be that there is a rise in rates, but historical GP data would need to be obtained to be certain. We can also see that the smoking rates in Trafford have a large variation, with the North and West falling above the national average, while Central is in line with the Trafford average and the South is significantly below.

OHID All Age Smoking Population



	2017	2018	2019	2020	2021
— Trafford	12.7%	13.5%	9.1%	9.9%	11.1%
- - - 95% Lower CI	10.4%	10.4%	7.2%	7.4%	7.4%
- - - 95% Upper CI	15.0%	16.7%	11.1%	12.4%	14.8%
— England	14.9%	14.4%	13.9%	13.8%	13.0%



GP data on Trafford locality smoking rates 2023

Trafford’s smoking rates align to what we would expect, when we consider key indicator indicators such as socio-economic status. There is a higher prevalence of smoking in lower socio-economic groups and successful quit attempts are also lowerⁱⁱ. Trafford has a higher weekly income than the

England average with 10.7% and fewer people experiencing income deprivation, compared to the national averageⁱⁱⁱ. This may explain our lower overall rate. We can also see a clear correlation between areas of deprivation and smoking prevalence.

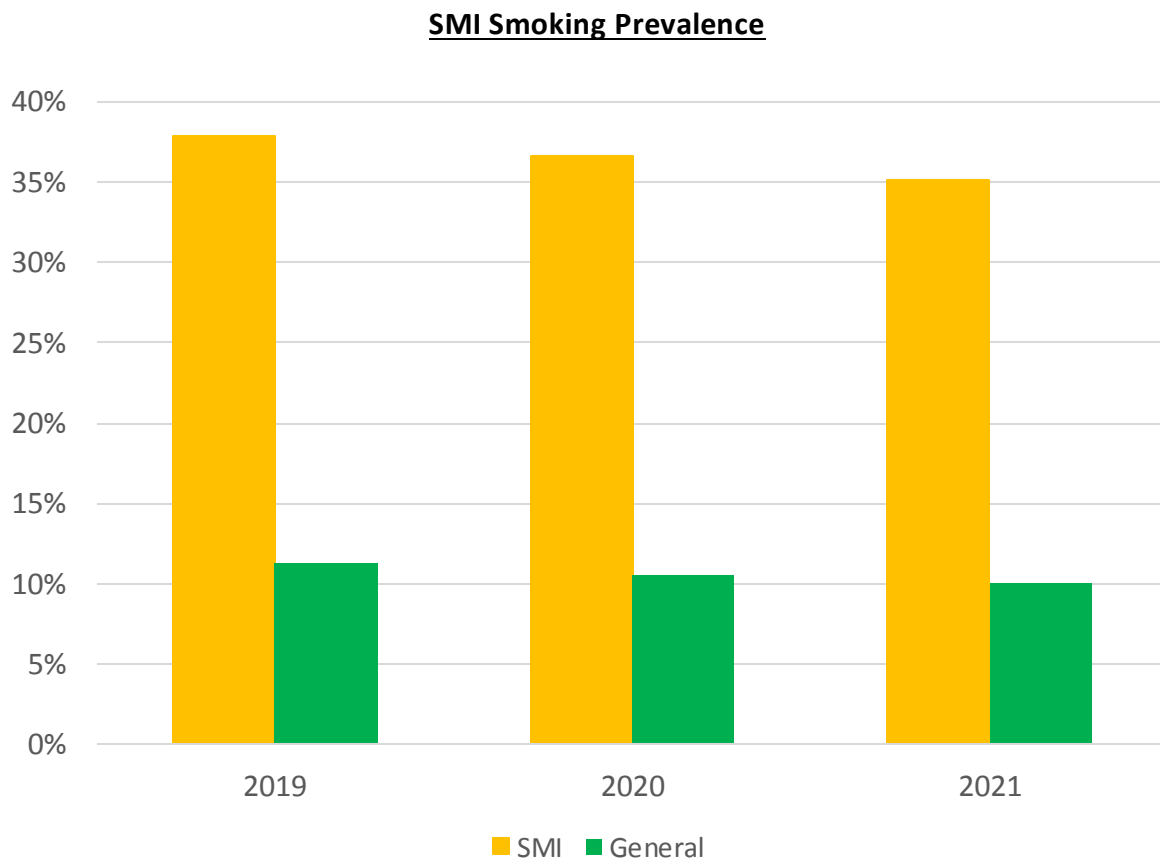
High Prevalence Population Groups

The following groups have higher smoking rates than the general population and therefore efforts to reduce smoking should prioritise these groups.

People with Severe Mental Illness (SMI)

Someone with SMI is defined as anyone with a diagnosed mental illness such as schizophrenia or bipolar. It does not include anxiety and depression. The SMI population in Trafford is around 2500 according to GP data.

The national smoking rate for people with SMI is 40.5%. This is over 3 times the rate when compared to the general population. In Trafford, our SMI smoking rate is 35%, slightly below national average. This roughly equates to 880 SMI smokers in Trafford.



Evidence suggests the desire to stop smoking in this population group is similar to the general population. There are also additional motivations to smoke in this cohort, such as a reduction in side effects of certain medications and a perception that it reduces symptoms of SMI such as anxiety. Evidence suggests smoking can reduce side effects of certain medications, but it does not necessarily lead to fewer symptoms of mental health problems. Lastly, people with SMI generally started to smoke prior to developing a mental health need^{iv}.

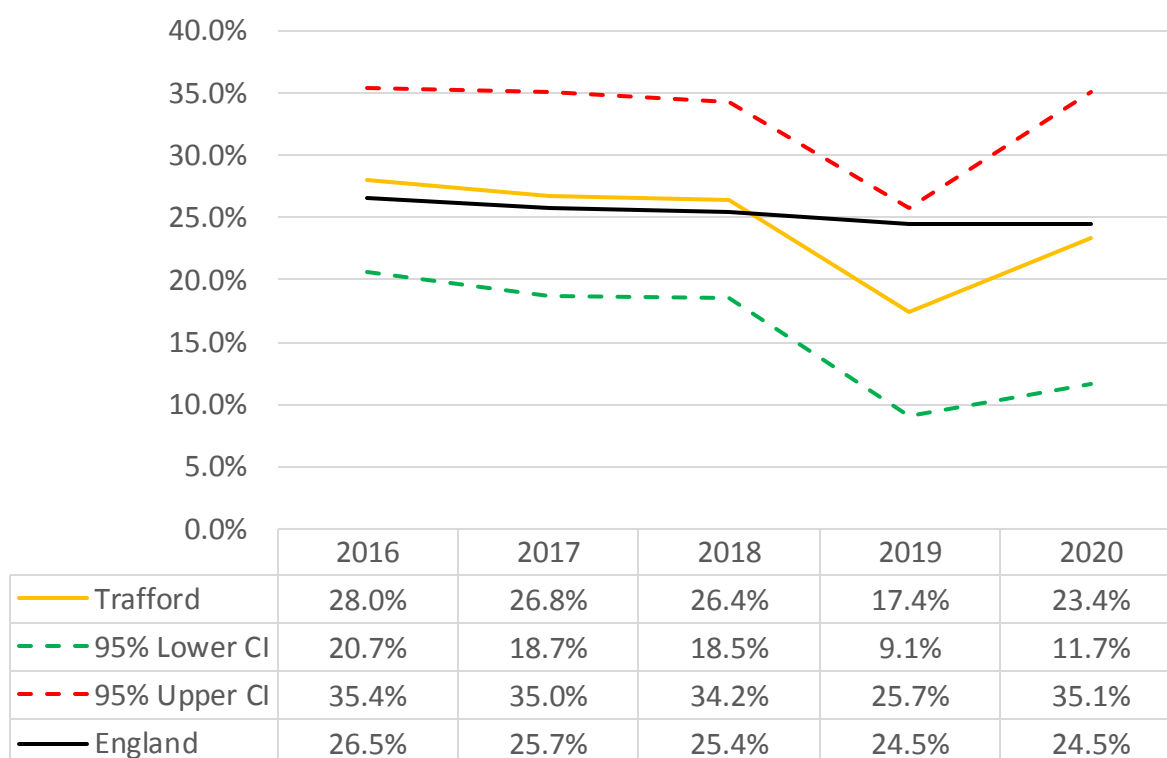
Routine and Manual Workers

A Routine and Manual worker is one of the three classes defined by the National Statistics Socio-economic classification (NS-SEC). NS-SEC categories distinguish different positions (not people) as defined by social relationships in the workplace. Despite the name, the definition does not perpetuate the manual/non-manual divide.

Nationally the smoking rate is 24.5% for this population cohort, almost double the general population. In Trafford, our rate is almost in-line with the national average at 23.4%.

Trafford has 116,000 people in employment^v. Due to changes in the modelling, it is difficult to determine the number of Trafford residents whose job role would fall into the Routine and Manual Worker class. However, 12.4% (13,800 people) fall into the lower three operational groups according to Nomis^{vi}. This would suggest roughly 3230 smokers in this cohort.

Routine and Manual Workers smoking prevalence - ONS



This data supports the wider evidence that people who are experiencing economic deprivation are more likely to smoke. Due to the large number of job roles that fall into this category, it is difficult to conclude if there are specific roles that may increase the likelihood of smoking, taking up smoking or not quitting.

Housing Tenure

According to ONS Adult Smoking Habit 2021^{vii} data, nationally there is a significantly lower proportion of current smokers in those who own their property outright (7.9%) or with a mortgage (10.1%), compared with those who rent (29.8% of local authority or housing association renters and 22.2% of private renters).

According to the 2021 Census data^{viii}, 70% of the population of Trafford own their house outright or with a mortgage, while 15% are social renters, through a local authority or housing association and 15% privately rent or don't pay rent.

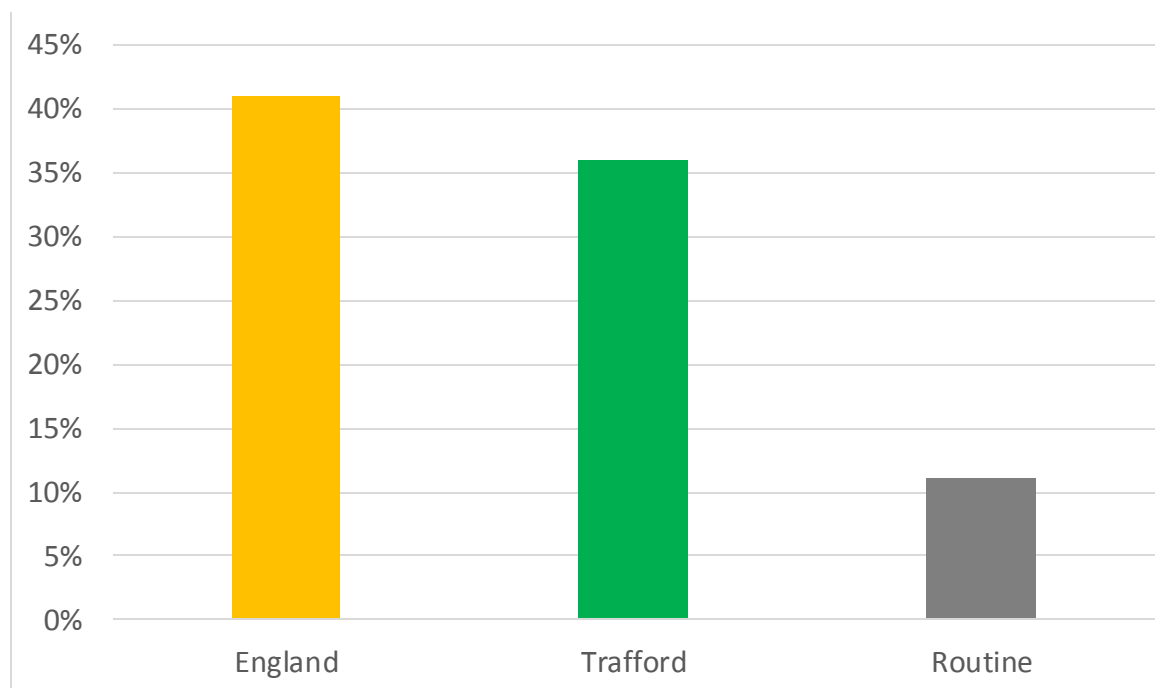
The rationale for a higher smoking rate in people who are social renters is similar to routine and manual workers. 50% of social rented households are within the lower income quintile^{ix} with a greater smoking prevalence in populations experiencing economic deprivation.

In addition, high risk groups are more likely to live in social housing. In 2020-21, 55% of social rented households had at least one household member with a long-term illness or disability (2.2 million households). This contrasts with 28% of owner-occupied households, and 29% of privately rented households.

People with Drug Dependence

Smoking is highly prevalent among people in treatment services. Nationally, 41% of people receiving treatment for substance use were identified as smokers. Trafford data is slightly below this at 36% and equates to 59 people^x.

Smoking prevalence in substance misuse service 2022



We also know that this cohort of people are at an increased risk of having SMI or a long-term condition. Evidence suggests the prevalence of COPD can be as high as 35%^{xi}. It is estimated that 75% of people engaged in substance misuse services also have SMI.^{xii}

Evidence suggests that patients with opioid addiction see it as interlinked to their drug dependence and complimentary^{xiii}.

High Risk Population Groups

The following groups are at an increased risk of tobacco related harm. While smoking is harmful for all, young people and pregnant women are identified as high risk. This is because we know that smoking is an addiction largely taken up in childhood and that smoking in pregnancy has well known detrimental effects for the growth and development of the baby and health of the mother.

Young People

A young person is defined as anyone below the age of 18. It is illegal for anyone to purchase nicotine products for a young person or sell to them directly. Anyone under 16 can have nicotine products confiscated from them.

Data in 2021, based off a survey 11- to 15-year-olds^{xiv}, shows that nationally there has been a decrease in the prevalence of smoking cigarettes. Only 12% of pupils had ever smoked (16% in 2018), 3% were current smokers (5% in 2018), and 1% were regular smokers (2% in 2018). The data also shows current e-cigarette use (vaping) has increased to 9%, up from 6% in 2018.

The 2022 Trading standards survey which interviewed 833 Trafford young people aged between 14-17, shows that Trafford aligns to the national average. 3% of young people surveyed claimed to be a regular smoker and 90% said they had never smoked, lower than the GM average of 81%.

For vaping, Trafford also aligns to the national average with 10% of Trafford young people claiming to vape occasionally or regularly, below the GM average of 22%. 77% of people asked had never tried a vape, higher than GM average than 59%.

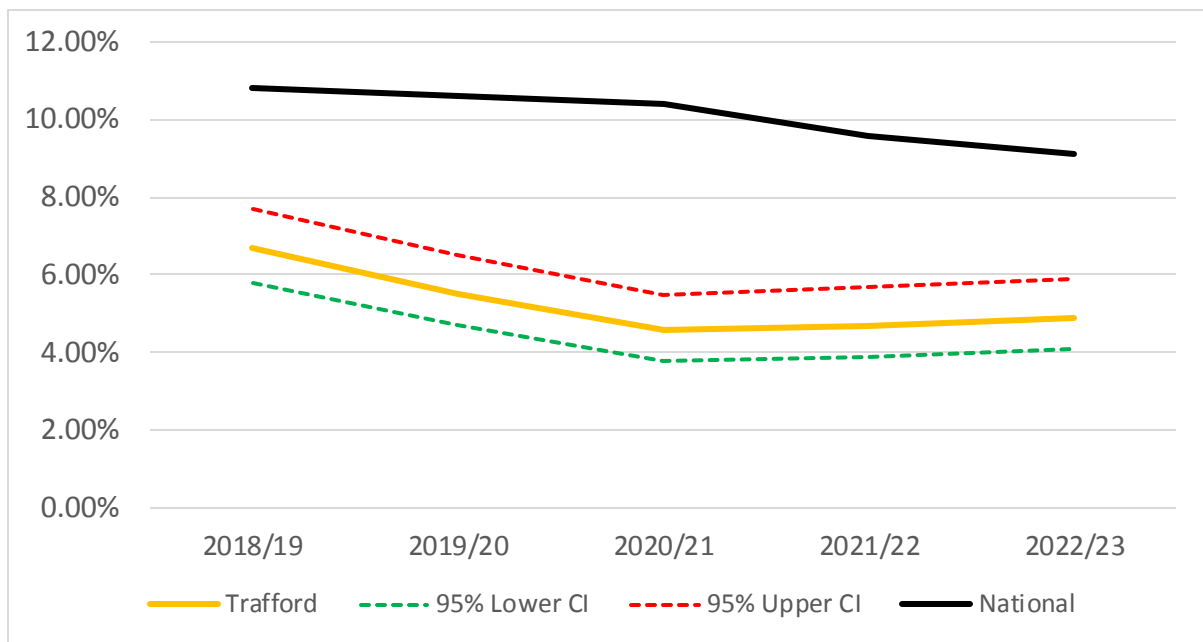
Trafford has an estimated population of 12,000 14–17-year-olds. Based on the Trading standards data, we can estimate that we can estimate that roughly 2775 young people have tried a vape, 1,600 regularly or occasionally vape and 360 smoke.

Pregnant Women

Smoking during pregnancy can cause serious pregnancy-related health problems. These include complications during labour and an increased risk of miscarriage, premature birth, stillbirth, low birthweight and sudden unexpected death in infancy.

The Tobacco Control Plan^{xv} contained a national ambition to reduce the rate of smoking throughout pregnancy to 6% or less by the end of 2022 (measured at time of giving birth). This has been achieved in Trafford.

Smoking at time of delivery data



In the 2022-23 financial year, Trafford had a total of 2118 maternities. Trafford has the largest percentage of women whose smoking status was not known at time of delivery in the country at 36% which equates to 767 women. This is significantly above the national average of 4% and the Greater Manchester average which is 17.4%.

Of the 63% of women, we do have known data on, only 4.9% are smokers, which is significantly below the national average of 9.1% and represents 77 women.

Long-Term Conditions

Smokers are more likely to live with a long-term illness and many long-term conditions (LTC) are either caused or exacerbated by smoking. For example, Chronic Obstructive Pulmonary Disease (COPD) causes 30,000 deaths in England every year, and smoking accounts for as many of 80% of COPD related deaths^{xvi}.

Service Provision

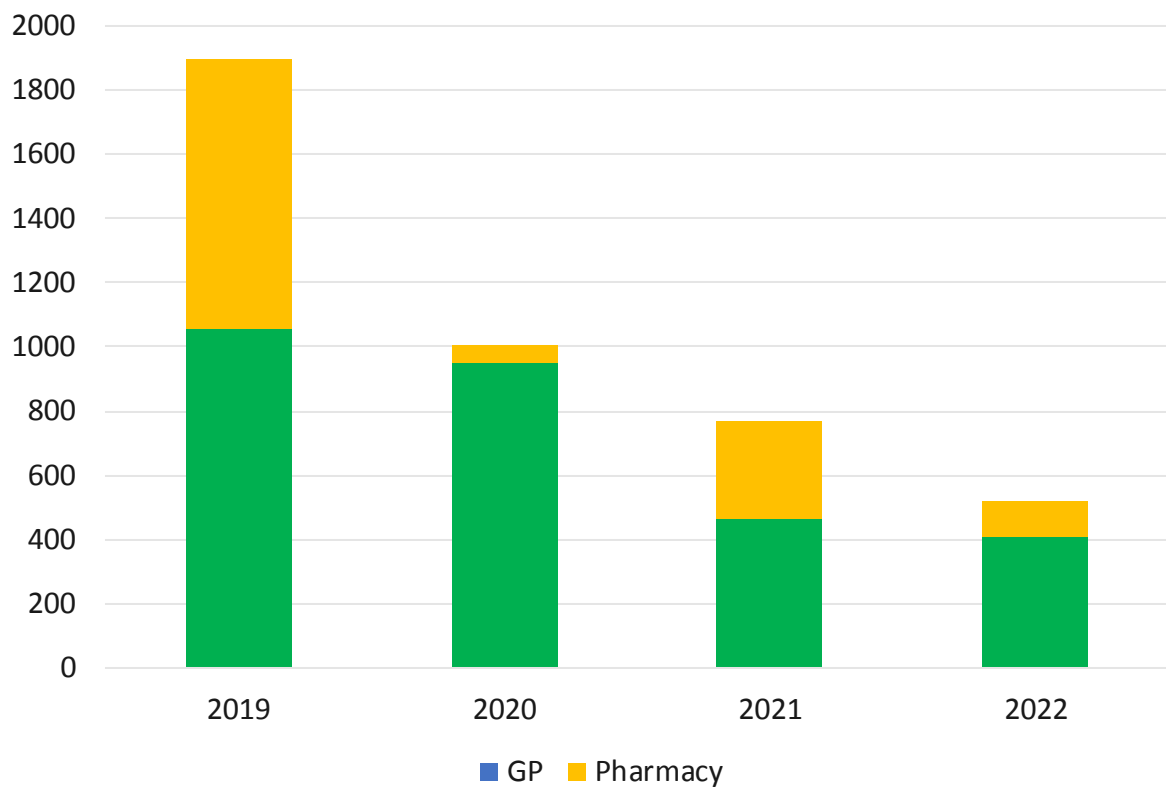
Trafford does not have stop smoking specialised service and instead has a primary care led service by GPs and pharmacies as well as a bespoke SMI service, led by BlueSci a social prescribing organisation. In addition, Trafford residents benefit from programmes of work led at a Greater Manchester level by the Make Smoking History Team, who are part of the NHS integrated care team.

Trafford Services

GPs and Pharmacies in Trafford deliver stop smoking support to the general population. This is done in different tiers. Tier 1 is Nicotine Replacement therapy (NRT) without behaviour support. Tier 2 – 4 are NRT, Vapes or pharmacotherapies such as Champix with the addition of behaviour support.

The graph below shows the number of interventions delivered by GP and pharmacies over time. It shows that there has been a significant drop off in interventions since 2019. This is largely due to the COVID-19 pandemic.

GP and Pharmacy Interventions over time



GP

In Trafford, 66% of GPs delivered stop smoking support in 2022. With the North and South having the fewest GPs delivering interventions

PCN	GP	Total GPs	% pf GPs delivering
AHA	4	5	80%
Central	5	5	100%
North	2	4	50%
South	2	7	29%
West	5	6	83%
Total	18	27	66%

Pharmacy

In Trafford, 33% of pharmacies delivered interventions, in 2022. This was focused mainly in the South and Central, although the 38% of pharmacies in the West made up most of the pharmacy activity. Trafford worked with the Local Pharmaceutical Committee to design the 2023-24 service to increase uptake.

Neighbourhood	Signed up	Total Pharmacies	% of Pharmacies signed up
South	6	12	50%
West	5	13	38%
North	2	18	11%
Central	5	11	45%
Total	18	54	33

BlueSci Severe Mental Illness (SMI) Service

BlueSci provide a stop smoking service delivered in four wellbeing hubs across the borough. This supports the work of GPs who do annual health checks of people on the SMI register and the work of GMMH who deliver stop smoking support to inpatients. It provides an evidence based, holistic community support offer to people in Trafford living with SMI, who smoke.

Make Smoking History Services

The Greater Manchester Make Smoking History Team, commission secondary care NHS services to deliver stop smoking support to inpatients as part of the NHS Long Term Plan.

CURE Inpatient Support

The CURE Project is a comprehensive secondary care treatment programme for tobacco dependency. It is systematically identifying all active smokers admitted to secondary care and immediately offering nicotine replacement therapy and other medications, as well as specialist support, for the duration of the patient's hospital stay and support to stay smokefree after discharge.

CURE is part of Greater Manchester Integrated Care Partnership's Making Smoking History programme, which is taking a whole system approach to reducing smoking rates in Greater Manchester.

Smokefree Pregnancy programme

In 2018, the Greater Manchester Health and Social Care Partnership launched an innovative new programme to support pregnant smokers to quit and increase the number of babies born smokefree.

Manchester University NHS Foundation Trust has a specialist stop smoking service. Pregnant women are offered specialist advice to help quit smoking; and electronic carbon monoxide tests to check their exposure to harmful chemicals during their antenatal appointments.

Advanced Pharmacy Offer

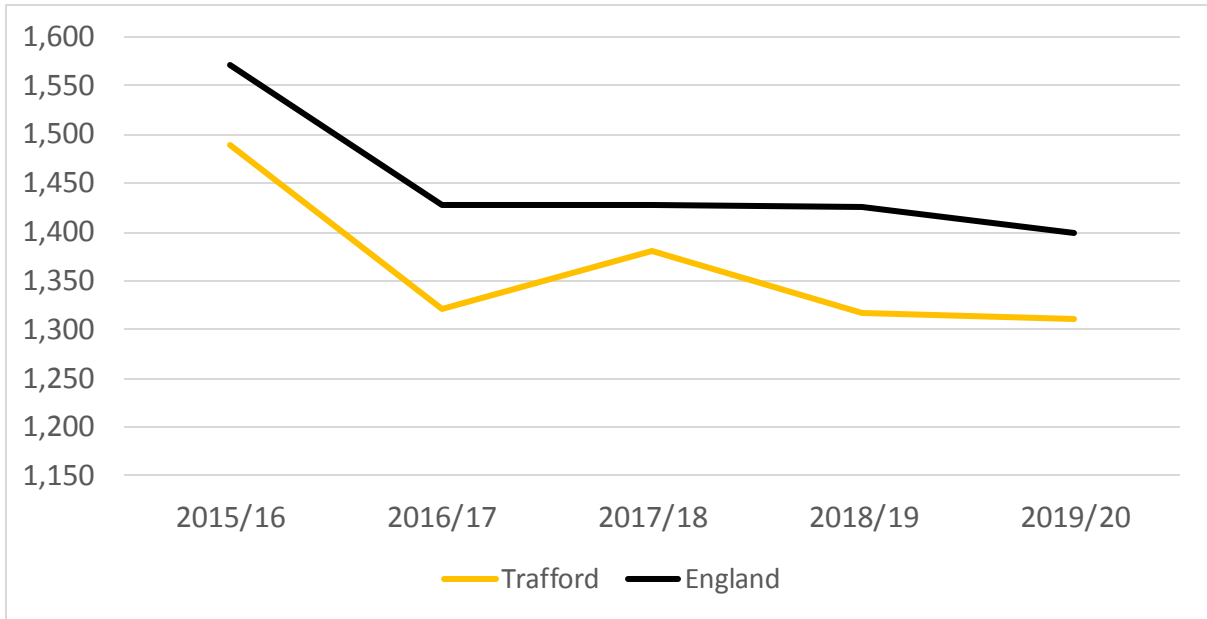
In 2021, the Department for Health and Social Care introduced a service to allow pharmacies to accept to smoking referrals from secondary care, as part of the Community Pharmacy Contractual Framework. This service has been designed to enable NHS trusts to undertake a transfer of care on patient discharge, referring patients (where they consent) to a community pharmacy of their choice to continue their stop smoking treatment, including providing medication and support as required. In January 2023, 25 of 62 pharmacies signed up for the service in Trafford, 40% of all pharmacies.

Neighbourhood	Signed up	Total Pharmacies	% of Pharmacies signed up
South	7	12	58%
West	8	13	62%
North	6	18	33%
Central	4	11	36%

Hospital Admissions

Smoking accounts for approximately 5.5% of the NHS budget. Admissions to hospital due to smoking related conditions not only represent a large demand on NHS resources but can also be used as a proxy for variations in smoking related ill health in the general population across England. Hospital admissions data is taken from HES (Hospital Episode Statistics) and includes all admissions to hospital with smoking attributable diagnosis as the primary diagnosis. As shown by the graph below, Trafford have been below the England average for hospital admission since 2015.

Hospital Admissions for Smoking Related Disease

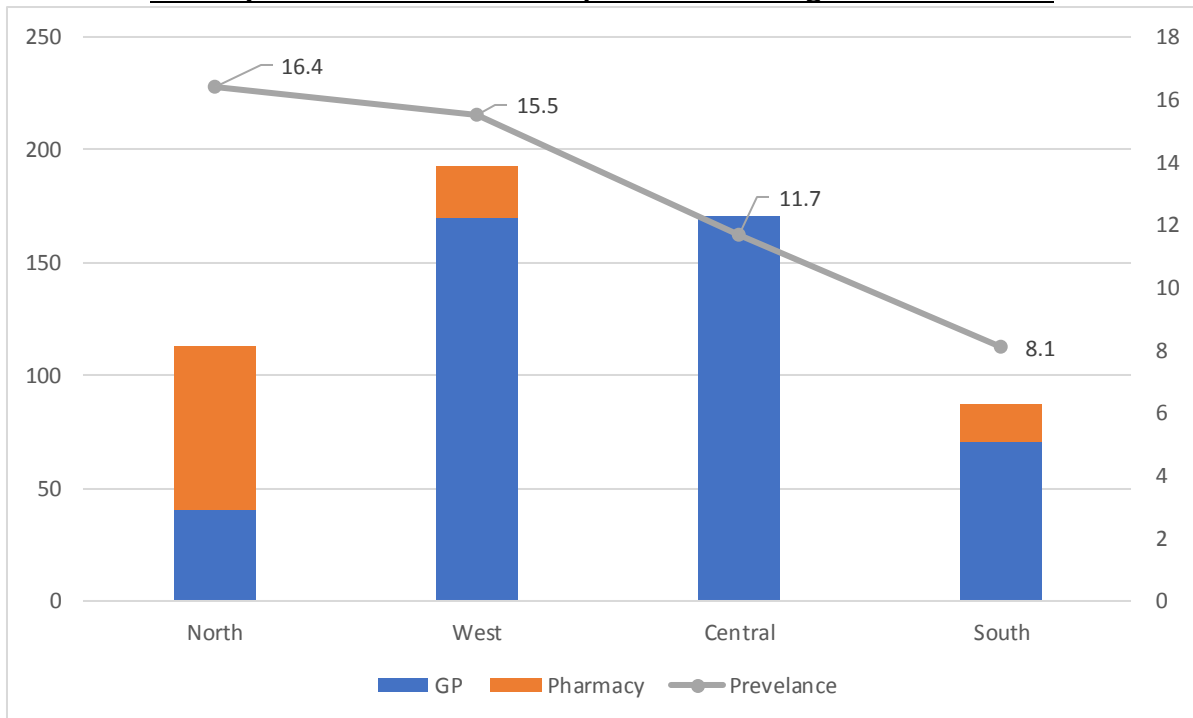


Locality Data

Trafford is split into four localities: North, West, Central and South. There are 5 Primary Care networks, with South being split between Altrincham Healthcare Alliance AHA and South.

The graph below shows the number of interventions delivered by GP and pharmacies in 2022 compared to the smoking rates in each neighbourhood. It shows there is little correlation between interventions delivered and prevalence, with the North have a disproportionate number of interventions compared to its prevalence rate

Primary care interventions compared to smoking rates in Trafford



The below section provides a summary of relevant demographic data, further detail can be found in Trafford's JSNA^{xvii}.

What the data shows, is that in the areas of high deprivation, there is an increased smoking rate and in turn more people with COPD and lung cancer. We can also see that while there is sufficient GPs and Pharmacists in each locality, there is wide amount of disparity on access to stop smoking services.

North

- North's smoking prevalence is 16.4% in 2022, above the national and Trafford average.
- Trafford's North neighbourhood consists of four wards: Clifford, Gorse Hill, Longford, Stretford.
- 20% of Trafford total population live in the North which is 49,400 of 235,000.

Demographic data

- North is Trafford's youngest neighbourhood, containing three of the five wards with the youngest median age (33 and 35 years).
- Unemployment is above the national average in the North and income deprivation is higher compared to national averages
- The North neighbourhood has 17,542 people belonging to ethnicities which are not white, making up 37.4% of the neighbourhood's population, greater than Trafford's overall 14.5%
- The North neighbourhood encompasses some of Trafford's most deprived areas. The wards of Clifford, Gorse Hill, Longford, and Stretford are four of the top five most deprived wards in Trafford

Mortality and disease

- COPD, emergency admissions are statistically higher in three wards of the North neighbourhood.
- The incidence of Lung cancer is higher in all wards.

Disease	England	Clifford	Gorse Hill	Longford	Stretford
COPD	100	193.2	106.2	145.8	96.7
Lung Cancer	100	238.7	122.5	112.9	108.2

Service Provision

50% of GP and 28% of pharmacies in the area delivered stop smoking interventions in 2022.

Provider	Count	Stop Smoking Provider
GP	4	2
Pharmacy	18	7

West

- The West's smoking prevalence is 14.5% which is above the national and Trafford average.
- Trafford's West neighbourhood consists of five wards: Bucklow-St Martins, Davyhulme East, Davyhulme West, Flixton, Urmston.
- 22% of Trafford residents live in this neighbourhood, 53,000 of 235,500

Demographic

- The West neighbourhood has a contrasting age structure, with the youngest median age in the ward of Bucklow St Martins (35 years), and oldest median age in the ward of Flixton
- Bucklow St Martins has a long-term unemployment rate of 5.3, higher than the national average per 1,000. It is also the borough's most deprived ward.
- West locality is predominately white, at 94% above the locality average of 77%.

Mortality and disease

- Urmston, Davyhulme and Bucklow St Martins have a ratio for emergency hospital admissions above the national average for COPD
- All wards are above the national average for Lung Cancer rates.

Disease	England	Bucklow St Martins	Davyhulme East	Davyhulme West	Flixton	Urmston
COPD	100	193.2	106.2	145.8	96.7	129.2
Lung Cancer	100	238.7	122.5	112.9	108.2	244.1

Service Provision

- The PCN in the neighbourhood is West PCN, it contains six GP Practices: Partington Central, Flixton Road, Primrose Surgery, Partington Family, Davyhulme and Urmston Group. 50% of which delivered stop smoking interventions in 2022.
- There are 13 pharmacies in the neighbourhood, 23% of which delivered stop smoking interventions in 2022

Provider	Count	Stop Smoking Provider
GP	6	3
Pharmacy	13	3

Central

- Central's smoking prevalence is 11.7% in line with the Trafford average and above the national average.
- Trafford's Central neighbourhood consists of five wards: Ashton upon Mersey, Brooklands, Priory, St Mary's, and Sale Moor.
- 23% of Trafford residents live in this neighbourhood, 56,000 of 235,500.

Demographics

- The median age for Sale Moor and Priory (38 years) is less when compared to Ashton upon Mersey, Brooklands, and Sale Moor (41 years).
- Central has 5,050 people belonging to ethnicities which are not white, making up 9.6% of the neighbourhood's population, less than Trafford's overall average of 14.5%.
- All wards in Central have a lower unemployment rate than the national average.
- There is considerable variation in deprivation levels across the Central neighbourhood, with the index for multiple deprivation being highest for central Sale (Priory), east parts of Sale Moor, and west parts of St Mary's. The ward of St Mary's has the highest levels of overall deprivation in the neighbourhood at 16.6% with Sale Moor second highest at 15%.

Mortality & disease

- Ashton Upon Mersey and St Mary's have a ratio for emergency hospital admissions above the national average for COPD
- Priory and St Mary's are above the national average for Lung Cancer rates.

Disease	England	Ashton upon Mersey	Brooklands	Priory	St Mary's	Sale Moor
COPD	100	107.7	62.4	104.7	132.5	100.6
Lung Cancer	100	85.4	97.1	136.1	108	103.1

Service provision

- The PCN in the Central Neighbourhood is Sale PCN. It contains five GP practices: Boundary House, Firsway, Bodmin Road, Washway Road, Conway Road. All of which provide stop smoking support.
- There are 11 pharmacies in the Central Neighbourhood, none of which provide stop smoking support.

Provider	Count	Stop Smoking Provider
GP	5	5
Pharmacy	11	0

South

- The South neighbourhood's smoking prevalence is 8.1%, below the Trafford average of 11.7% and the national average.
- 34% of Trafford residents live in this neighbourhood, 80,000 of 235,000
- Trafford's South neighbourhood consists of seven wards: Altrincham, Bowdon, Broadheath, Hale Barns, Hale Central, Timperley, and Village.

Demographics

- There is a large gap (10 years) in median average between the seven wards of the South neighbourhood, youngest for Broadheath and Altrincham (37 years) and oldest for Bowdon (47 years).
- The South neighbourhood has 7,208 people belonging to ethnicities which are not white, making up 9.6% of the neighbourhood's population, less than Trafford's overall 14.5%.
- All wards are below the England average for long-term unemployed.
- All wards are below the England average for income deprivation.

Mortality & Disease

- Village is the only ward to experience above average hospital admissions for COPD.
- Village is above average for lung cancer rates with Hale Central and Altrincham falling in line with national averages.

Disease	England	Altrincham	Bowden	Broadheath	Hale Barns	Hale Central	Timperley	Village
COPD	100	95.5	77.2	97.8	81	83.8	81	111.4

Lung Cancer	100	105.7	94.4	98.2	105.1	105.1	72	118.6
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Service provision

- There are two PCNs in the South neighbourhood and 11 practices.
 - Altrincham Healthcare Alliance (AHA) consists of five practices: Park Medical, St John's, West Timperley, Altrincham Medical, Shay Lane Kelman. 80% of which provide stop smoking support
 - South Trafford consists of six practices: Timperley Healthcare, Family, Grove Medical, Barrington, Village, Riddings and Shay Lane Patel. 33% of which provide stop smoking support
- There are 20 pharmacies in the neighbourhood, 5% of which provide stop smoking support.

Provider	Count	Stop Smoking Provider
GP: AHA	5	4
GP: South	6	2
Pharmacy	20	1

Recommendations

1. Improve the number of pharmacies delivering the stop smoking service across Trafford so there is equity of access across the borough. This should have a particular focus on areas of high prevalence.
2. Increase referral routes into pharmacy stop smoking services, through VCSE organisations already engaging with populations of high prevalence and high risk.
3. Collate data from GPs on the number of adults who currently vape and improve known smoking status data. Work to compare this historically over time to understand trends.
4. Ensure all GPs can deliver stop smoking support to residents with training offered to support.
5. Explore opportunities to expand provision of stop smoking support to high prevalence groups.
6. Provide support to young people who vape and wish to stop.
7. Conduct further analysis on smoking prevalence by occupation.
8. Obtain data on stop smoking support delivered within NHS services, via the Greater Manchester Integrated Care Team.

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- i [Smoking and tobacco: applying All Our Health - GOV.UK \(www.gov.uk\)](http://www.gov.uk)
 - ii [Socioeconomic status and smoking: a review - PubMed \(nih.gov\)](http://nih.gov)
 - iii [Income \(traffordjsna.org.uk\)](http://traffordjsna.org.uk)
 - iv [Smoking rates in people with serious mental illness \(SMI\) | National Library of Quality Indicators | Standards and Indicators | NICE](#)
 - v [Labour Market Profile - Nomis - Official Census and Labour Market Statistics \(nomisweb.co.uk\)](http://nomisweb.co.uk)
 - vi [Labour Market Profile - Nomis - Official Census and Labour Market Statistics \(nomisweb.co.uk\)](http://nomisweb.co.uk)
 - vii [Adult smoking habits in the UK - Office for National Statistics \(ons.gov.uk\)](http://ons.gov.uk)
 - viii [Housing, England and Wales - Office for National Statistics \(ons.gov.uk\)](http://ons.gov.uk)
 - ix [English Housing Survey: Social rented sector, 2020-21 \(publishing.service.gov.uk\)](http://publishing.service.gov.uk)
 - x [NDTMS - Home](#)
 - xi [COPD and asthma in patients with opioid dependency: a cross-sectional study in primary care | npj Primary Care Respiratory Medicine \(nature.com\)](http://npj.PrimaryCareRespiratoryMedicine.nature.com)
 - xii [Scope, quality and inclusivity of international clinical guidelines on mental health and substance abuse in relation to dual diagnosis, social and community outcomes: a systematic review | BMC Psychiatry | Full Text \(biomedcentral.com\)](http://BMC.Psychiatry)
 - xiii [Why do so many drug users smoke? - PubMed \(nih.gov\)](http://nih.gov)
 - xiv [Smoking, Drinking and Drug Use among Young People in England, 2021 - NDRS \(digital.nhs.uk\)](http://digital.nhs.uk)
 - xv [Smoke-free generation: tobacco control plan for England - GOV.UK \(www.gov.uk\)](http://www.gov.uk)
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 - xvii [Our Neighbourhoods \(traffordjsna.org.uk\)](http://traffordjsna.org.uk)