

**TRAFFORD COUNCIL
CHILDREN, FAMILIES AND WELLBEING**

Report to: Health and Wellbeing Board
Date: 3rd March 2015
Report for: Information
Report of: Director of Public Health

Report Title

Trafford Health & Wellbeing Strategy Action Plan – 2014/15 End of Year Report

Purpose

This report is to update the Health and Wellbeing Board on progress made in relation to the Health and Wellbeing Strategy Action Plan.

Recommendation(s)

- The Health and Well Being Board note the progress of the 8 priority areas of the Health and Well Being Strategy.

Contact person for access to background papers and further information:

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1.0 Context

- 1.1 Further to the development and endorsement of the Health and Wellbeing Strategy the Health and Wellbeing Board approved the development of an underpinning Action Plan which sought to reflect and capture the eight key priorities embedded in the strategy. The attached paper provides an update on progress against this action plan.

2.0 2014/15 End of Year Progress Update – Key successes and achievements against each of the priority areas

Priority 1: Reduce Children’s Obesity

Childhood obesity remains a national and a local priority. In 2014/15, the most significant achievement in Trafford has been the development of the Healthy Weight Pathway for children and young people. This was developed by a multiagency group using national and local evidence. In order to support this, a new Weight Management Service will be delivered by Pennine Care NHS Foundation Trust from 1st April 2015. This means that children and young people who are identified as having an unhealthy weight will be supported to receive evidence based programme of support in order to address childhood obesity as soon as possible. The lack of a pathway and service had been a significant gap in the local area and this new provision is a positive step forward for Trafford. There has been a reduction in proportion of school children in Year six (age 10-11) who are measured as obese from 18.4% in 2012/13 to 17.3% in 2013/14.

In addition, the breastfeeding support scheme which supports new mothers is continuing and will be reinforced by a new support worker in 2015/16 to ensure that the scheme continue to address inequalities in our rates. Initiation rate 77.3%- up from 73.9% in 2012/13 (England rate 73.9%) 6-8 week rate: 13/14 YTD 54.1%, 12/13 54.4% up from 51% 2012/13.

Furthermore, in order to increase access to leisure services, the Active Trafford Junior pass has been launched and is enabling young people from families with a low income to access a wide range of physical activity sessions, including swimming, at reduced prices

Priorities and key developments for 2015/16:

The key priorities for 2015/15 are to embed the healthy weight pathway into all children’s services and to work to ensure that there is a strong focus on children and young people in the new all age obesity strategy. Embedding the pathway will include training the children’s workforce, and providing information to GPs as well as closely monitoring the impact of the new provision on the rates of obesity in the population. In ensuring that the new all age obesity strategy includes children and young people as a priority group, we can focus on the prevention agenda and include the wider partnership such as the voluntary and community sector. This also allows us to provide a focus on the family context in which overweight and obese children live, and to consider family and community based interventions.

Priority 2: Improve emotional Health and Wellbeing of Children and Young People

New and innovative services have been developed by the Area Family Support Teams as part of the continued development of provision, in recognition of need and to improve access to services based on evidence based interventions. For example, sexual health support for at risk young people is delivered by the youth service and sexual health services and shows improved identification of young people at risk of child sexual exploitation. A multi-agency support programme is in place for young pregnant women and their partners (Young Bumps clinic), led by the Youth Service and Health Visiting. Uptake of antenatal support in this age group has more than doubled as a result which further protects the young parent and un-born child and has reduced the number of complex births. A perinatal infant and maternal health pathway is in place between midwifery, health visiting, primary care and adult IAPT (primary mental health service) which identifies and prioritises women with emerging mental health difficulties and early attachment difficulties. Family Nurse Partnership model has been implemented in Trafford since December 2014.

Early Help panels run in each locality, positively appraised in the peer review, and are designed to support professionals to bring cases for discussion where there are concerns about families not yet of sufficient concern to meet the criteria for social care or specialist service referral. These panels form part of the early help pathway across services, which is described in the Early Help Strategy. A framework of early help services are commissioned for families identified through those panels.

Priority 3: Reduce alcohol and substance misuse and alcohol related harm

Successes and achievements 2014/15

Misuse of alcohol, and other substance misuse, continues to contribute significantly to poor health and hospital admissions in Trafford. However, we are pleased to note that Trafford's multiagency Alcohol Steering Group has overseen the successful delivery of a multitude of actions in the Borough's Alcohol Action Plan. Some examples of these actions include:

- The mental health trust Greater Manchester West (GMW) took over the contract for Alcohol Community Detoxifications on 01/05/14. The Council Drug and Alcohol Team (DAT) have worked closely with GMW and other more established providers to ensure a continuity and consistency of service across the board.
- Trafford are currently above target for individuals who are successfully discharged from alcohol treatment and also for those who re-present re-entering treatment.
- A new pathway for those adults requiring alcohol services has been agreed by all partners and providers. This has led to a simplified referral process, improved working relationships and a degree of synergy across agencies involved.
- New shared care protocols have been introduced in order to accredit the use of certain drugs prescribed to combat alcohol abuse and harmful drinking.
- A new alcohol screening tool has been introduced in order to assess young people who may be at harm from alcohol consumption. Training has been given to all relevant organisations and the tool made available on the Council website. This has led to an increase in the referral of young people.

- Trafford continue to focus on the priorities of reducing hospital admissions and tackling the issue of alcohol harm among middle aged women..
- The Council have assisted in funding and supporting the Rapid Assessment Intervention and Discharge (RAID) project. This has led to the introduction of two Alcohol Nurses at Trafford General and UHSM. From April to December 2014 the two nurses gave support and advice to 294 people with alcohol related issues, and 55 were referred for bespoke treatment.
- Alcohol Awareness Week was held in November with an emphasis on educating and informing individuals about safe and sensible drinking. Amongst other activities efforts were made to target middle aged womern by attending health clubs and gyms. We were delighted with the praise Trafford received from DrinkWise following their survey of activity across Greater Manchester, where Trafford were deemed to have introduced the most comprehensive programme of events and were described as being “the best by a country mile.”

Priorities and key developments for 2015/16

- To continue to work together with the different alcohol service providers to ensure a uniformity of approach and service provided to individual clients.
- To look to strengthen Community Based Assets in line with strategic national priorities. Work is already underway to help to boost membership and provide support for the TARGET Group, a voluntary peer group focused on recovery from abuse and addiction.
- The focus of all Trafford services is to reduce long-term dependency and promote abstinence. The new AIM Trafford service is targeting those in treatment for more than 6 years and considering ways in which individuals can move forward with their lives and reduce dosage, where possible.
- All services are measured using Public Health Outcomes Framework measure 2.15 which looks at successful completions and reducing re-presentations to service.
- Services have become more recovery focused over the past year with peer mentors, volunteers and recovery champions working within drug/alcohol services, inspiring others to embrace a new lifestyle, free from addiction. Individuals will have the opportunity to get involved in recovery and family coaching which will empower them both to help loved ones in addiction and to heal their local community.

Priority 4: Support people with long term health and disability needs to live healthier lives

With the highest proportion of older people in Greater Manchester, and with the number of older people projected to increase, Trafford is understandably investing considerable time, energy and resources into working with older people, carers and voluntary organisations to support the maintenance of people’s independence in their later years. Promoting independence and rehabilitation for older people goes hand in hand with improving support for people of all ages with long term health needs or disabilities, and we are very pleased with the progress being made on this agenda.

- Procurement for Trafford CCG's Patient Care Co-ordination Centre is complete as of February 2015 with a preferred provider identified. An implementation date of 01.08.2015 has been agreed. The Patient Care Co-ordination Centre will ensure that patients are able to access the full range of services available in Trafford and that they receive care from the most appropriate place to meet their needs. The provider will ensure equitable access across Trafford to reduce health inequalities, including expanding access for vulnerable groups, including older people, people with disabilities and people whose first language is not English.
- Plans are underway to ensure that Trafford is compliant with the requirements of the Care Act, Part 1 of which comes into effect in April 2015. This will have a major impact on the way that needs are assessed and services are delivered, and considerable awareness raising and training of staff across agencies is now underway.
- The Home Care provision in the borough continues to increase, with a 36% increase in the number of purchased hours between 2010/11 and 2013/14. Home Care in Trafford is of a high overall standard. This is a result of many years work which has developed and stimulated the market based on a collaborative approach. The workforce has been supported to develop skills which have been underpinned by a robust multi-tiered market management approach
- The Trafford Multiagency Falls Strategy has been agreed and is moving into the implementation phase from April 2015. The new strategy will ensure that prevention and reablement activities are increased and that there is equitable access to evidence based services for those who have fallen.
- Diabetes Strategy to be finalised and implemented from April 2015. The Diabetes Strategy for Trafford outlines the Trafford Diabetes Network's plan to improve diabetes care in Trafford. It is Trafford's first comprehensive diabetes strategy, and provides a roadmap to address the growing challenge of diabetes through partnership working, focusing on prevention and with patient care at its core. The Strategy builds on diabetes work previously undertaken by Trafford Primary Care Trust when the principles of integrated care were defined as:
 - a. Integrated care should be patient centred but focus of delivery principally based on clinical need.
 - b. Ensure that Generalist care has the support and expertise to deliver the majority of care
 - c. Specialist care requirement for certain sub groups of patients (broadly matches super 6)
 - d. Specialists have a key role in up skilling primary care
 - e. Outcome measurement is essential in assessment of improvement in patient experience and to maximise fiscal efficiency
- Winterbourne View Response Action Plans have been fully delivered including weekly information returns to NHS England, completion of all Care & Treatment Reviews for Trafford patients and full involvement in on-going development of transforming care work streams.

Priority 5: Increase Physical Activity

The Sport & Physical Activity Partnership has been working with partners to support and produce a range of innovative funding applications which it is hoped will bring investment into the Borough to deliver a range of projects which aim to increase participation. The partnership is interested in promoting both increased participation in sports in the borough, and also in increasing physical activity (such as, for

example, though active travel or increased walking and cycling) among those who are not interested in sport based activities

There has already been a good increase in participation in sport and active recreation. Currently 41.3% (2013/14) of residents *participate in sport for at least 30 minutes at least once a week*, compared to 41.4% (2012/13) and 38.6% from the previous years (2011/12). This is above the current average in England (35.7%), the North West (35.8%). It is based on Sport England's Active People Survey.

Adult (16+) Participation in Sport (at least once a week[^]), by year

Year	Trafford	North West	England
2005/06	37.9%	33.7%	34.2%
2007/08	43.6%	35.7%	35.8%
2008/09	39.9%	36.0%	35.7%
2009/10	42.0%	35.7%	35.3%
2010/11	37.6%	35.2%	34.8%
2011/12	38.6%	36.1%	36.0%
2012/13	41.1%	35.8%	35.7%

There has also been a good increase in the percentage of residents who participate in sport and active recreation, at moderate intensity, for at least 30 minutes on at least 12 days out of the last 4 weeks (equivalent to 30 minutes on 3 or more days a week). Currently 29.7% (2013/14) of residents *participate in sport for equivalent to 30 minutes on 3 or more days a week*, compared to 26.9% (2012/13) and 27.2% from the previous years (2011/12). This is above the average in England (25.7%). It is based on Sport England's Active People Survey.

In contrast we know that 24.75% of residents are inactive. Nationally Trafford is ranked 23rd (no. 1 is the least inactive, no. 150 is the most inactive) and tops the North West table for having the lowest level of inactivity. However, we know that the health costs of physical inactivity per 100,000 population is £2,231,409. Thus we can still deliver considerable savings if we can reduce the physical inactivity levels in the borough.

Participation at Trafford Community Leisure Trust (TCLT) facilities has continued to increase and total attendances at TCLT facilities and activities has exceeded 2.5 million for the first time in 2013/14 (increase in usage of 300% on the Trust's first year of operation and up 8% on 2012/13).

- There were 200,000 Active Trafford visits to TCLT facilities during 2013/14.
- 500 people each week attended Healthy Hips & Hearts sessions.
- Junior visits totalled 1,128,340, and these are up by 14% in 2012/13.
- The Sport & Physical Activity Partnership has surveyed residents to investigate sport and physical activity behaviours. The results are giving us a better picture of what provision is needed in the borough and how we can direct our resources in the best way possible. For example, we know that almost 10% of adults (16+) in Trafford would like to do more cycling and consequently we are embarking on a partnership with British Cycling to realise this ambition.

Partners have developed innovative projects to increase participation in sport and physical activity. For example, Flixton Girls School have been nationally recognised for good practice in increasing participation amongst its girls through the development of Fitness Fridays - on one Friday each month, all staff and students go into school in sports kit and the day includes a variety of sessions covering

everything from aerobics, zumba, pilates, yoga and body combat. The academic record at School has improved as a result of engaging pupils in sport and physical activity.

Lancashire County Cricket Club Foundation and Salford Red Devils Foundation, in partnership with Trafford Housing Trust Community Panels are delivering the Sporting Foundations for Life project over the next 3 years in community areas of Trafford. The project has been funded with support from Sport England, and Trafford Housing Trust Community Panel's. It is a customer-led, asset based multisport (centred on cricket and rugby league) community engagement programme, working to increase the once-a-week participation of 14-25 year-olds.

Priorities and key developments for 2015/16:

- to increase participation in 1 x 30 minutes per week sport and physical activity particularly amongst those who are currently inactive.
- to deliver a major programme to encourage participation in the workplace.
- to increase volunteering opportunities in sport and physical activity.
- to support links between school sport and sport in the community.

Priority 6: Reduce the number of deaths from cardiovascular disease and cancer

Cancer and cardiovascular diseases continue to be a major cause of death and disability for Trafford residents. We have been working to increase the uptake of preventative services, such as national NHS screening programmes and NHS Health Checks, to identify these conditions early and deliver effective treatment. We still see variation in uptake of these prevention services, with people living in the more deprived parts of the borough less likely to take up the offers. Considerable work is going into promoting uptake in these areas and within more deprived populations, and in reducing these inequalities in access.

Cancer:

1. **Cervical screening:** recent trend of falling uptake of cervical screening reversed in 2014/15; overall Trafford uptake increased from 78.04% end of April to 78.68% end of Jan. Public Health is working with Trafford CCG, primary care practices and the voluntary sector to encourage a sustainable increase in screening uptake rates.
2. **Bowel cancer screening:** eight practices in predominantly deprived communities that did not meet the 60% uptake target in 2012/13 took part in a pilot. The practices were supported to send GP endorsement letters to non-responders between 2nd January and 3rd April 2014. These practices achieved a 6.2% increase in screening uptake.

NHS Health Checks: NHS Health Checks are a mandatory requirement for local authorities. 20% of the eligible population should be invited each year as health checks are offered to individuals every 5 years. The eligible population is defined as the number of people who are 40-74 years old who are not already diagnosed with a defined list of medical conditions.

Cumulative YTD performance 14/15:

- Number invited- 6266, 9.3% of eligible population

- Of those invited, number who received a NHS Health Check- 2629 (42% of those invited)

Over 2013/14, the CCG data quality lead for NHS Health Checks has worked closely with practices to ensure that correct and appropriate data are drawn from practice data systems to reflect the activity being undertaken on NHS Health Checks in general practice in Trafford. National research indicates that the content of the invitation letter greatly influences the likelihood of uptake. The public health team have reviewed the invitation letters sent by general practices and have provided practices with a template letter based on best practice to optimise uptake. Public Health has printed 150 posters using the PHE approved image bank to display in healthcare and community settings.

Priorities and key developments for 2015/16

Action to offer NHS Health Checks to those not yet invited:

One practice in the west of Trafford does not undertake NHS Health Checks and patients registered with this large practice have never received invitations to attend their NHS Health Check. From January 2015 these patients are being invited to attend either of two community pharmacies nearby.

Action to increase uptake rate:

From February 2015 patients from ten participating practices are being offered the opportunity to have their NHS Health Check in Tesco Pharmacy including evening and weekend opening times which will provide increased flexibility to patients unable or unwilling to attend their GP practice.

Priority 7: Supporting people with enduring mental health needs, including dementia to live healthier lives

The increasing number of older people in the borough means that we are seeing an increasing number of people living with dementia. Trafford is active in addressing the needs of people with dementia, both through working with GPs to increase diagnosis rates, and also to making areas 'dementia friendly'. This is something that is receiving an increasing national focus, and in Trafford we are determined to be in the forefront for successful delivery of appropriate support to people with dementia.

- The Trafford RAID services became fully operational in January 2014 and provide liaison services to Trafford and South Manchester registered patients using CMFT Trafford site and UHSM. A multi-agency steering group is established and full performance reports are available from the provider (GMW) as well as the commissioner (TCCG).
- Increasing Access to Psychological Therapies (IAPT) improvement programme currently on target to meet identified improvement targets.
- Winterbourne View Response Action Plans have been fully delivered including weekly information returns to NHS England, completion of all Care & Treatment Reviews for Trafford patients and full involvement in on-going development of transforming care work streams.

Priority 8: Reduce the occurrence of common mental health problems amongst adults

Many older people in Trafford live with anxiety and depression. This is very distressing to those individuals, and to their families, and interferes not only with

family life but also with their ability to hold down employment and to engage fully in their communities. Ensuring that people are able to access treatment and to develop effective self care strategies (such as physical activity, CBT, meditation and mindfulness techniques) is an important part of reducing the impact of these conditions.

Key successes and achievements in 2014/15

- Response to the call for evidence of the APPG on suicide prevention and self harm completed to Rt Hon Madeleine Moon MP Chair APPG Suicide and Self Harm Prevention. Positive feedback received. Trafford participated in the Greater Manchester sector-led improvement process for Suicide Prevention and on 18TH Feb 2015 reported progress to GMPHN.
- Trafford has supported the national picture regarding Health and Wellbeing Board Priorities by supporting information to this website: http://www.local.gov.uk/health-and-wellbeing-boards/-/journal_content/56/10180/6111055/ARTICLE. By selecting a single area on the map, the user can view a summary of the local priorities, and access links to the health and wellbeing strategy and reports highlighting measures of health and wellbeing for that area.
- Liaison with GMP to roll out mental health support to frequent callers with chronic mental health conditions –this is being led by the Strategic Mental Health Partnership Executive chaired by the GMPCC. This work has produced substantial reductions in number of calls to the police service among the cohort supported.
- Trafford is a member of the Greater Manchester Suicide Network and also the Executive meetings.
- Suicide Prevention progress: Trafford involved in developing the GM Conference with GMPHN and Network Rail.

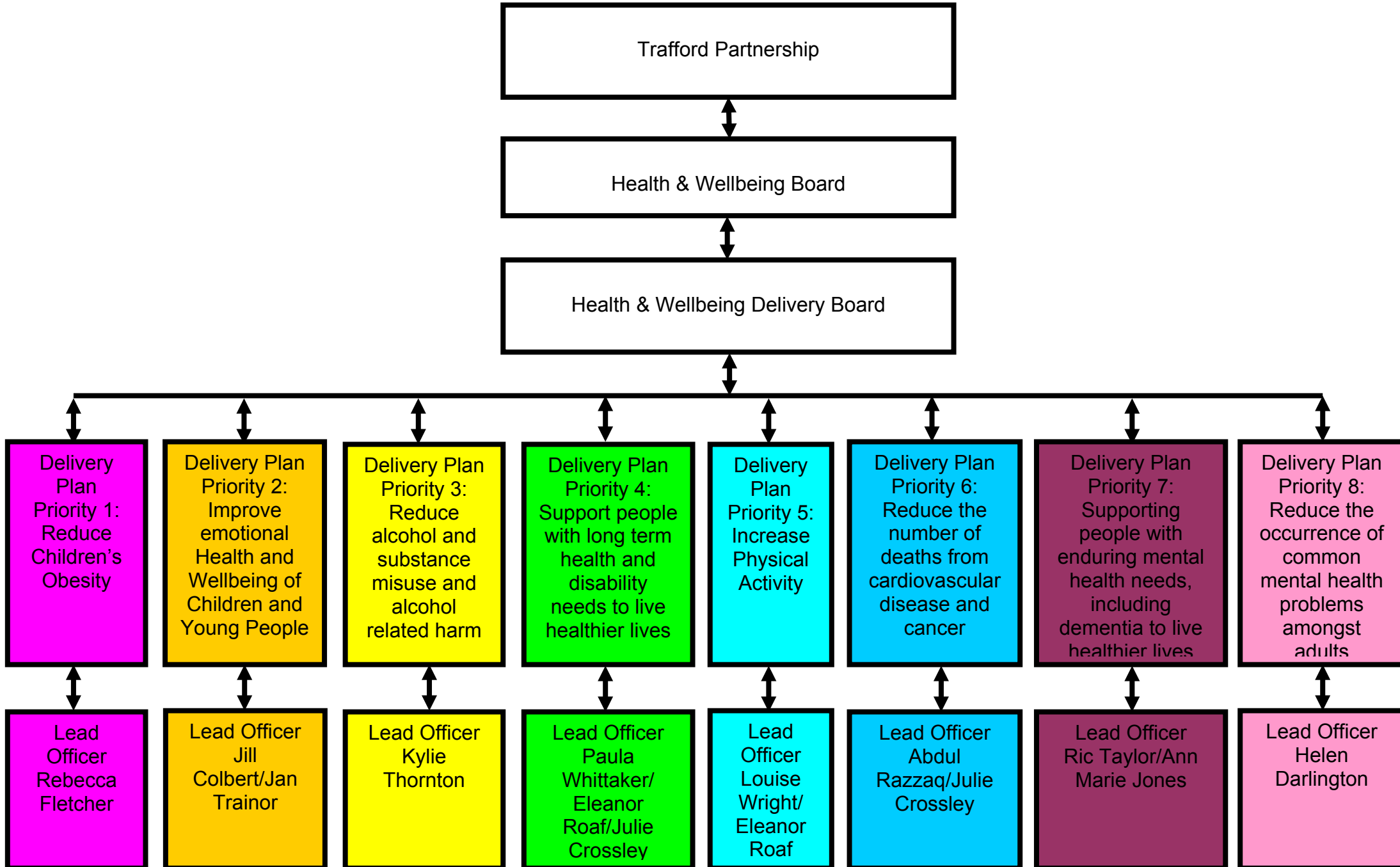
Priorities and key developments for 2015/16

- Develop an all age wellbeing service with providers.
- Continue the development of Suicide Prevention work.

3.0 Recommendations

- The Health and Well Being Board note the progress of the 8 priority areas of the Health and Well Being Strategy.
- The Health and Well Being Board to support the delivery of priorities identified above for 2015/16.
- The Health and Well Being Board to support a review of the 2013-2017 Health and Well Being Strategy process and for public health to present options for the 2017-2021 Strategy process to the next Health and Well Being Board.

Health and Wellbeing Delivery Board Governance Structure



Appendix 2

Appendix 3a/b



Appendix 3a-b HWB
strategy action plan a