



Public Health Annual Report 2015

www.trafford.gov.uk

Foreword

Public Health has seen one of the most monumental transitions in the last forty years, with the return of responsibility for Public Health to Local Authorities from 1st April 2013, and further opportunities for Public Health in the Greater Manchester devolution agreement.

Over the last century great Public Health advances such as water sanitation, improved housing and highways, employment opportunities and better healthcare have been made, enhancing, protecting and nurturing good health amongst communities. More recently the recession has focussed our attention on addressing the underlying social conditions which are the root causes of ill health. The current challenges and opportunities are to find new, cost effective ways of giving children the best start in life, keeping people well and ensuring people have a healthy old age.

Public Health has been the responsibility of Trafford Council for over two years now, and Trafford Council has contributed greatly to improving the health of its residents and reducing health inequalities. The key challenge for Trafford communities is to work towards improving the length and, importantly, quality of life for all residents. Being physically located in Trafford Town Hall has enabled me to build even closer relationships with council and community services and I am proud to use this Annual Report to showcase some of the great programmes and projects happening a cross Trafford.

The past few years have been financially challenging for Trafford Council and financial constraints are likely to remain in place for the foreseeable future. There is a great deal of resilience in our communities, and a proven track record of delivering excellent Public Health services using an evidence-based, assets-based, "economics of prevention" approach. I want to use this Annual Report to celebrate the assets that we have in our diverse communities and the varied and valuable work taking place that is helping to make Trafford one of the healthiest and happiest places to live in Greater Manchester.

Abdul Razzag **Director of Public Health** Trafford Council

Contents

- The Public Health Journey in Trafford 4
- 6 Locality Working in Trafford
- Greater Manchester Devolution Arrangement 8
- Overview of health in Trafford 9
- Increasing healthy life expectancy 10
- Starting well 11
- Living and staying well 14
- Ageing well 25
- Final words 28
- References 29



The Public Health Journey in Trafford

5 July 1948 1974 1992 Park Hospital (now Trafford General), **Public Health functions** the first NHS hospital, opened by moved out of Local Authorities **Aneurin Bevan** • All but environmental health duties moved to health authorities • Doctors, nurses, dentists, opticians, all worked together to deliver integrated Medical Officer care to all, free at the point of delivery, for Health role for the first time in the UK terminated Medical Officers of Health in local authorities still led Public Health functions • Life expectancy in the UK: 66 years for men; 71 years for women • Infant mortality (deaths of babies under one year old) 34 per 1,000 live births 1940 1960 1980 1990 1960s onward 1986 **Decline and Regeneration** The Association of Greater in Trafford Manchester Authorities (AGMA) **Established** • 1960s & 70s: Economic recession – declining industry in Trafford Park AGMA represents the 10 local authorities of Greater Manchester • 1987: Trafford Park Development Corporation formed: responsibility for It works in partnerships with private, public Trafford Park and the surrounding industrial and voluntary organisations inside and area outside the region • 1998: 1,000 companies attracted to the area, AGMA increased employment levels and business ASSOCIATION OF GREATER MANCHESTER opportunities AUTHORITIES To this day Trafford Park remains Europe's largest industrial estate

Manchester Metrolink opened

 The line runs through Trafford from north to south, with its southernmost station in Altrincham



Gree dev • Pl re G el • Ir

1 April 2013 Responsibility for Public Health returns to local authorities As outlined in the the Health and Social Care Act 2012, local authorities are now responsible for improving the health of the local population and for public health

- services including most sexual health services and services aimed at reducing drug and alcohol misuse.
- The council remains responsible for providing social care services (such as residential care) for those in need

Wi Pu Exc • Ir • C

2000

communities
Working together, building on community assets
Tackling inequalities by tackling

Image: Charles J. B. Aldis. An early MOH in London. Image from: http://blog.wellcomelibrary.org/2014/01/the-work-of-a-19th-century-medical-officer-of-health/

3 November 2014

Greater Manchester devolution agreement

 Plans include devolving new powers and responsibilities to Greater Manchester, and Greater Manchester adopting a directly elected Mayor for the city region

Infant mortality 4.3 per 1000 livebirths nationally, 2.3 per 1000 in Trafford



Where next for Public Health in Trafford?

Exciting opportunities for:

Integrating health and social care

 Co-producing better health outcomes for everyone in our communities

 Tackling inequalities by tackling the wider determinants of health

Locality Working in Trafford

Working as part of Trafford Council has brought new opportunities for Public Health to work in partnership with local communities on the wider factors underlying health. This will ensure residents are centrally placed in improving health and increasing healthy life expectancies in the borough.

Locality Working is a new approach to partnership working. It brings together residents, businesses, community groups, councillors and public service providers as equals to work on new projects, making use of the people, places, assets and community spirit that thrives within Trafford.

The Trafford Locality Working programme has four elements, all following a local 'community development' approach:

- Locality Projects where the needs and strengths of our communities meet with local goals and residents can become involved with solving local issues and supporting their communities
- Locality Partnerships made up of councillors, partners and residents, take leadership in Locality Working, engaging residents and others involved and celebrating success
- 'Be Bold' media campaign showcases how residents can make a difference to their neighbours and themselves by being more active, volunteering, joining local groups or simply by being more neighbourly
- 'Community Builders' training 270 front-line staff and councillors on how to unlock the strengths within communities by listening, connecting, signposting and supporting residents to take action.

Locality Working will also help to ensure that Greater Manchester Devolution is connected to, influenced by and directly benefits the people of Trafford.

Residents and communities are our greatest untapped asset. Communities that are involved in decision-making about their area and the services within it, that are well networked and where neighbours look out for each other, have a huge impact on health and wellbeing.

The pioneering 'localities' programme is creating the conditions for community assets to thrive, removing barriers for our services to work alongside communities in ways that are empowering, engaging and meaningful.

Transparency and resident involvement is increasing local accountability and democracy, enabling an honest conversation with residents and stakeholders. This will also help to change the relationship between services and residents, changing roles and expectations and giving residents a more active role in their communities.

Examples of Locality Working in Trafford

- Engaging communities in taking positive action – Make Sale Smile micro-grants helped 34 residents to turn their 'Be Bold' ideas into reality. Two local residents created Sale Arts Trail, bringing 1,500 people into the town centre, improving health and wellbeing and increasing spend in local businesses
- New ways to tackle old issues

 Community-led alley way improvements. Agencies, councillors and residents came together to work on cutting down fly-tipping in Old Trafford
- Enabling new partnerships to form – Red Rose Forest, Trafford Housing Trust, Trafford Council, local businesses, councillors and Urmston Community Panel, together with residents, are improving Urmston Meadows. The community involvement will ensure that positive changes are sustained.

For further information please see

'Be Bold... Be the Difference' website www.traffordpartnership.org/BeBold

'Community Builders' website www.traffordpartnership.org/ BeBoldCampaign/CommunityBuilders.aspx



An example of our Old Trafford and Stretford Environmental micro-grants www.thebackgallery.wordpress.com/ about-2

Overview of Health in Trafford

Trafford and the nine other local authorities which make up Greater Manchester have worked closely together for 30 years. The Association of Greater Manchester Authorities (AGMA) was established in 1986 and the Greater Manchester Combined Authority (GMCA), in 2011. This history of strong joint working and the push from central government to create a 'Northern Powerhouse' has set the stage for the devolution agreement, 'Devo Manc'. The agreement is an ambitious plan to establish a locally elected mayor for Greater Manchester who would work with GMCA, taking responsibility for key elements of public sector spending in the area. The elections are due to take place in early 2017 and the mayor would initially have a budget of £1billion.

The devolution arrangement in Manchester would mean that responsibility for regional decision-making and financial matters relating to housing, planning and transport are held within Greater Manchester. The administration would also control the £6billion health and social care budget for the region which has already been brought together under GMCA. Devolution promises to encourage further integration of public services, reduce the inefficient overlap of services and support prevention efforts, while allowing decisions to be made 'closer to home' for the benefit of local populations. This is a good opportunity to work across some traditional service, organisational and geographic boundaries to improve the health and wellbeing of the population. It will address physical and mental health; primary and secondary care; health and social care; treatment and prevention and will also advise on areas such as urban design and transport policy.

Many of Trafford's public health challenges described in this report are also shared by other Greater Manchester local authorities. We have already started to work with other areas to provide stronger services, for example, working on joint commissioning of sexual health services. Devolution provides an exciting opportunity to take this work to the next level. A population health focus could combine the spending power of the region and put health at the centre of all our public spending.



PHYSICALLY **ACTIVE ADULTS** 62.5%

DEATH RATES FROM ALCOHOL-RELATED CONDITIONS 55.3

LOW BIRTH WEIGHT **BABIES AT TERM** 3.2%

MOTHERS SMOKING AT DELIVERY 8.3%

Source: Public Health England, 2015

Starting Well

Life expectancy describes how many years a person can expect to live from birth. The average life expectancies for men and women living in Trafford are slightly higher for England as a whole (79.9 years for men and 83.5 years for women). These figures mask variations in life expectancy across the borough. In general, communities in the north of Trafford have lower life expectancies than those in the South.

Healthy life expectancy is the number of years a person is likely to live in a healthy state. This is a good pointer to the population's general health and gives an idea of the population's need for health and social care services. Healthy life expectancies at birth for men and women in Trafford are 65.7 years and 63.2 years respectively. For women in particular, this represents a lower figure than we might expect. Addressing this would lead to better health for Trafford residents and reduce the need for health and care services in the area.

7

63.

Recently published data on deprivation by local authority areas shed more light on healthy life expectancy. These data show that, although levels of deprivation in Trafford are relatively low, (Trafford is in the third of local authorities with the lowest levels of deprivation in the country) levels of health in the borough are considerably worse than would be expected. In fact, Trafford is amongst the bottom third of local authorities in England for health outcomes.

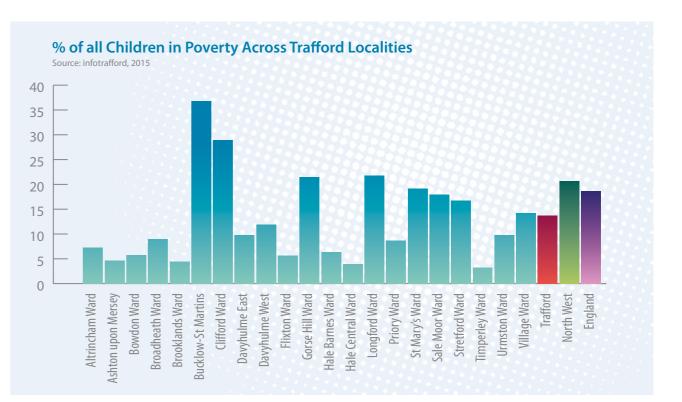
A map showing further data on deprivation and health across Trafford is available at www.infotrafford.org.uk/deprivation#options.

Data from a new report show that people in Trafford with serious mental health conditions have a high rate of early death and that this is significantly higher than elsewhere in the country (available at: *thersa*. *org/mentalhealth-data*).

Focussing on raising healthy life expectancy, whilst reducing the identified inequalities, are key aims for the Trafford Public Health team in 2016. Helping our children and young people to grown into healthy and successful adults starts with protecting and supporting their health and wellbeing before birth.

In 2014, 24.2% of Trafford's resident population (56,370 people) were aged 0-18 years, with this figure expected to increase over the next five years¹. Trafford celebrates diversity across its communities with over a quarter of school aged children (27.2%) coming from black and minority ethnic backgrounds.

According to the annual Child Health profile produced by Public Health England (available at: www.chimat.org.uk/resource/ item.aspx?RID=242359), Trafford children do similar or better than the England average in 30 of the 32 health measures. The greatest challenges in Trafford however, are the health and social inequalities, which are often masked by Trafford's good outcomes. Approximately 14.1% of children aged 0-16 in Trafford (an estimated 7,157 children) live in poverty².



Source: Public Health England, 2015

65.7

We know that the impact of deprivation is bigger in some communities, for example in areas of Partington, Sale West and Old Trafford. Poverty and deprivation can damage the health and wellbeing of children and young people.

Other factors associated with variations in the health of children or young people include:

- Disability
- it is estimated that 1 in 20 children in Trafford is living with a disability)³
- Involvement in safeguarding arrangements or becoming a Looked After Child
- across Trafford there are on average 320 children in care, 263 children with a child protection plan and 690 children in need⁴
- Witnessing domestic violence and abuse
- Living with a parent with mental health issues
- Parental alcohol and substance misuse problems

Ensuring a good start in life

Trafford has excellent schools and the Council's children's services received a good classification from Ofsted in 2015. Partnerships in Trafford also support our goal to maximise children's life chances.



Other activities across Trafford include;

- Trafford's Smoking Cessation Service providing specialist support to pregnant smokers.
- Dedicated infant feeding support for new mothers, to provide help in starting and continuing breastfeeding. Trafford has recently been awarded the UNICEF Baby Friendly award, recognising the high quality of this support.

UNICEF Baby Friendly Initiative

Trafford Infant Feeding Coordinator Jackie Hall said: "The Baby Friendly accreditation ensures that, however a mother chooses to feed her baby, she can be confident that our services will support her to form a strong bond with her child."

Alison, 36, says despite breastfeeding her oldest three children, she encountered difficulties feeding daughter Jasmine, who is now 14 months.

She said: "When I first had problems I was a bit embarrassed about asking for help because I felt I should be able to do it but the staff and volunteer peers were so approachable and gave me different techniques to try.

"Coming to the groups has been great, you get the chance to talk to people in the same situation and there's a real sense of community." She added: "When I had my first baby in 1996 there weren't places you could go to feed and I ended up using disabled toilets. Things have come such a long way and it's great to know I can go into a shop or a leisure centre and feed Jasmine if she needs it without worrying."

The Baby Friendly Initiative, set up by UNICEF and the World Health Organisation, is a global programme which provides a practical and effective way for health services to improve the care provided for all mothers and babies.

Parents who would like advice and support around feeding their baby should speak to their health visitor in the first instance.

- Trafford has a low teenage pregnancy rate, with 66 pregnancies amongst girls aged under 18 in 2013. The national Family Nurse Partnership was introduced in Trafford in 2014, aiming to improve the outcomes for babies of young mothers by providing intensive support for the first two years. Our local bespoke programmes, Young Bumps and Butterflies are achieving great results, offering friendly, experienced advice and support to our younger parents in the borough.
- Our school nursing service in Trafford has recently benefitted from a comprehensive review and increased investment. Services provided include a broad school-based immunisation programme and drop-in sessions for young people to raise mental or physical health concerns.
- The school nursing service is responsible for measuring reception and year six children as part of the National Childhood Measurement Programme (NCMP). Of the children measured in 2013/14, 78.1% of reception aged children and 66.6% of year 6 children were of a healthy weight. This is a higher proportion than the national figure. Lower proportions of Trafford children were obese than the national average (7.9% of reception aged children and 17.4% of year 6 children)⁵
- Trafford Child and Adolescence Mental Health Service (CAMHS) which provides specialist mental health services, is undergoing a transformational review. We are working to deliver the recommendations from the national programme to ensure that young people's mental health needs continue to be met.

 Trafford 0-11 and 11-18 Early Help Hubs aim to improve the health of children and young people and reduce inequalities in health. The 'Talkshop' facility, for 11-18 year olds, based in Sale, promotes good sexual health and the Sexual Health Outreach Team (SHOT) offers a specialist service to young people aged between 11-18yrs. Services include: pregnancy testing, support and referral for termination of pregnancies, chlamydia screening, condom distribution, advice and information and one-to-one support for any safeguarding and child sexual exploitation issues.



Healthy children and young people grow into healthy adults. Working to improve the health and wellbeing of our adult population is vital in building strong communities in Trafford and sustainable economies, to support the population into older age. This in turn contributes to increasing healthy life expectancies in the borough.

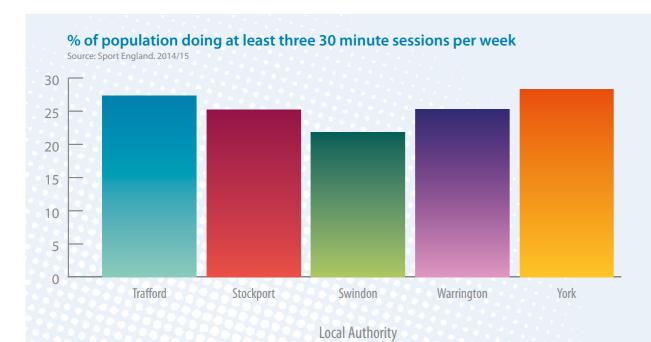
Physical Activity

Today many people have increasingly sedentary lives: driving to save time; watching television; working in offices; obesity and its associated conditions are on the increase and our children are the most inactive generation ever.

Currently many people in the UK do not manage the recommended 150 minutes of moderate physical activity each week.^{6,7} The health benefits of physical activity are well known: the most physically active people have around a 30% lower risk of death compared to those who are less active⁸.

Trafford physical activity levels compare favourably to other similar areas but there is scope for improvement⁹.

Wider effects of increases in physical activity would have positive impacts at all levels of the community^{10,11}.



FAMILIES

- Increased household income
- Positive impacts on child development
- Impaired family cohesion

SOCIETY

INDIVIDUALS

- Reduced risk of illness and premature death
- Reduced need for medical treatment
- Improvements in psychology and wellbeing

 Increased productivity • £6.5 billion economic savings (England) • £1.06 billion health savings (England) Reductions in youth crime

Trafford is focussing on three of the "Greater Manchester moving" priorities this year:¹²

To increase the number of people walking and running

> To promote physical literacy in the early years, at school and at home

To increase the

cycling

number of people

These priorities were chosen as the most likely to have the biggest impact on Trafford's activity goals through existing collaborations and strategies.

Increasing the number of people walking or running

Currently, the proportion of people in Trafford who walk for at least 10 minutes at least 5 times a week is lower than that in Greater Manchester or England¹³.

Trafford	Gtr Manchester	England
41.8%	44.1%	47.2%

The following projects aim to increase the number of people walking and running in Trafford:

- Promotion of physical activity in GP settings – helping staff to encourage people to exercise using local opportunities and partners.
- Healthy Hips and Hearts programme

 exercises to reduce frailty and improve mobility in older people.
- Learning from Liverpool East Activity Partnership (LEAP) – analysis of a programme encouraging residents to take up sport and physical activity which could be applied in Trafford.

Increasing the number of people cycling

Trafford performs relatively well on the number of people who cycle at least 5 times a week:¹³

Trafford	Gtr Manchester	England
3.6%	1.8%	2.5%

Local priorities include increasing the number of people who cycle recreationally or for sport and who use a bicycle for daily journeys, including commuting to work or Cycling improves health and reduces the number of cars on the roads, positively impacting on congestion and air quality.

We are working on an ambitious programme in partnership with Transport for Greater Manchester (TFGM) and British Cycling to increase the number of identified recreational routes within and beyond Trafford. This includes guided rides along scenic local routes pitched at various ability levels.

Full details are available at www.goskyride.com

Promote Physical Literacy in the early years, at school and at home

Greater Manchester Sport is supporting parents of young children to engage in physical activity through play.

Trafford's world famous sporting institutions provide inspiration to residents. They make an ideal platform on which to build the public health strategy for increasing physical activity in Trafford. Salford Quays is one of the country's largest open water swimming venues. Trafford also has a rich history and heritage of parks and green space, providing a stage for a wide range of activities which both reflect and define the local culture.

Smoking

Smoking is the biggest single cause of preventable early death in Trafford, and also a major cause of inequalities in rates of death and ill health across the borough¹⁴.

One in eight deaths from cardiovascular disease is smoking-related¹⁵.

Adult smoking rates have fallen across Trafford, but this masks higher rates amongst certain communities, such as those with higher levels of deprivation. Support for people wanting to guit smoking in Trafford is available through -

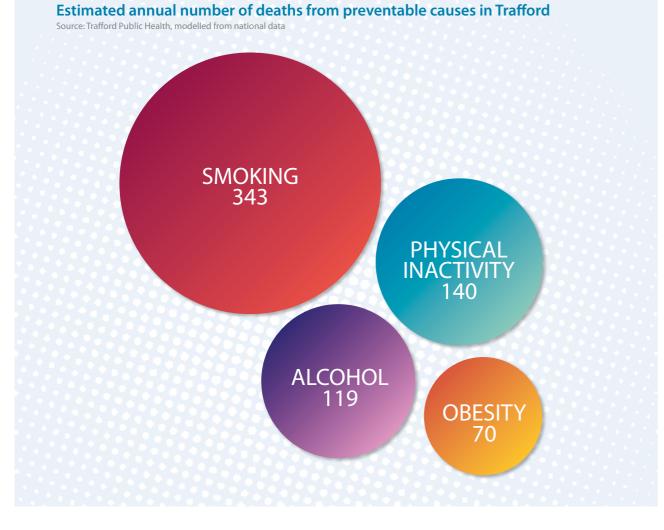
- Local GP practices and pharmacies.
- Trafford Specialist Stop Smoking Service, which offers face to face appointments with trained advisors at nine clinics across the borough. Referrals can be made from a range of professionals including GPs, pharmacists, midwives, and learning disability teams. Stop smoking services offer tailored interventions for people making guit attempts, including nicotine replacement treatments and behavioural support.

Alcohol

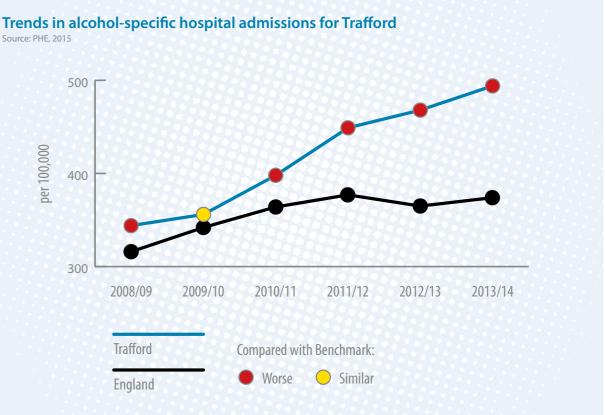
Alcohol is a key cause of preventable premature death, chronic illness and hospital admissions in Trafford¹⁶. The number of hospital admissions caused by alcohol in Trafford has risen year-on-year for the past decade¹⁶.

Safe drinking levels are: up to 21 units per week for men and "up to 14 units per week" for women¹⁷. Approximately 27% of Trafford adults regularly drink more than this every week¹⁶.

About 6.5% of adults in Trafford regularly drink very high risk amounts - that is, over 50 units per week for a man and over 35 units per week for a woman¹⁶.



Source: PHE, 2015



Support for people experiencing problems with alcohol in Trafford, includes:

- Trafford Alcohol Navigation Service provided by Phoenix Futures. This offers a bespoke treatment plan for anyone over the age of 11 in Trafford experiencing problems with alcohol, enabling individuals to make positive changes in their lifestyles.
- The Recovery Abstinence Service provides on-going support for people who have achieved abstinence, and has developed the "Future Skills" gardening initiative. This partnership agreement with Age UK provides a free gardening service to elderly residents in the Trafford Area and allows service users to get involved and learn new skills.

Mental Health

Mental health is a key part of overall health and wellbeing. Unfortunately, mental health problems are guite widespread in the UK population, with about one in four British adults experiencing at least one mental health problem in any one year¹⁸. Anxiety and depression are the most common mental health problems, with around 1 in 10 people affected at any one time. These can be severe and long-lasting and often have a big impact a person's ability to get on with life. Other less common mental health problems include as bipolar disorder and schizophrenia.

Mental health conditions can be important causes of inequalities in health. Poorer people, the long-term sick and unemployed people are more likely than the general population to be affected by common mental health problems for over 18 months¹⁹.

In Trafford, there is evidence that, despite some improvements in the quality of mental health care, more still needs to be done for this vulnerable population. A recent national report found people with mental health conditions in Trafford have a disproportionately high rate of early death, even compared with people with mental health conditions in other parts of the country. This is despite a finding of relatively good access to health checks for people with mental health conditions in the area (thersa. org/mentalhealth-data).

Mental Health remains a priority for the Trafford Health and Wellbeing Board²⁰. Approaches for Trafford must include work on the wider determinants of health for people with mental health conditions. This includes work with partners such as Trafford Housing Trust on local mental health and wellbeing programmes. These approaches will contribute, not only to reducing health inequalities, but also to improving rates of healthy life expectancy across the borough.

Substance Misuse

Greater Manchester West offers a bespoke treatment plan for anyone over aged 18 and over who may need support with prescribed medications, enabling individuals to make positive changes in their lifestyles.

Trafford achieves the highest completion rate for opiate misuse treatment in the North West. We are also working hard to detect the rising trend of New Psychoactive Substances or legal highs to ensure individuals are receiving appropriate treatment.



NHS Health Checks

The NHS Health Check programme aims to help prevent heart disease, stroke, diabetes, kidney disease and certain types of dementia by identifying risks and providing health improvement advice²¹. Everyone aged between 40 and 4 years is invited to attend an NHS Health Check every five years, with the exception of those who have certain long term conditions. Health Checks highlight how individuals' personal risks can be reduced through lifestyle changes such as quitting smoking, losing weight and drinking less alcohol, as well as giving people support to achieve these changes.

Cancer Screening

Disease prevention and early diagnosis are important for improving health outcomes and life expectancy in Trafford. All eligible people are invited to have screening tests for breast cancer, bowel cancer and cervical cancer. Cervical Screening is delivered by GPs and breast and bowel screening through national programmes. For more information about cancer screening programmes, please see www.nhs.uk/Livewell/preventing-cancer/ Pages/cancer-screening.aspx for more information.

The proportion of people in Trafford accepting a screening test varies considerably by locality and population group. Uptake of screening tends to be lowest in localities in the North of Trafford, which also sees some of the worst health inequalities in the borough. Increasing the numbers of people in these areas attending for screening tests could help to tackle these inequalities.

Public Health is working in partnership with health services, council partners, community and third sector organisations across Trafford to encourage and support people to have their cancer screening tests. Research is being analysed into why people may not go for screening tests and local groups and charities such as Macmillan, Cancer Research UK and Voice of BME-Trafford are working together with communities to help inform and engage people with screening programmes.

In 2014-2015, Trafford celebrated the highest cervical screening coverage rate in Greater Manchester. Schemes such as the 'One Minute' social media campaign, which promoted cervical screening to women across the borough, contributed to a range of approaches leading to this success. In Public Health, we hope to sustain this figure, improve uptake rates for breast and bowel screening, and reduce inequalities between groups in Trafford in 2016. This will cut the number of Trafford residents affected by cancer in the future.

Work, the Economy and Health – Good Quality Jobs

The conditions in which we work have a huge impact on our health; good quality jobs can improve and protect health, whereas poor quality work can be damaging to health and can also worsen inequalities across the population²³. The UK economy has continued to grow following its peak before the 2008 financial crisis and we now have lower levels of unemployment²⁴. This, however, has come hand-in-hand with increases in part time employment, more zero hour contracts and more in-work poverty²⁵⁻²⁷.

Low-quality work can harm health through:

- Poor working conditions
- Psychological or social conditions at work
- Poor pay or insufficient hours
- Temporary or insecure work, with the risk of job loss

Employment and Worklessness in Trafford

Trafford is one of the economic powerhouses of Manchester but many of its skilled residents are employed by businesses in other areas of Greater Manchester.

Over 77% of the working age population in Trafford are in employment. This is higher than the figure for either the North West (71%) or the UK (73%)²⁸.

The biggest group of unemployed people claiming benefits in Trafford is those claiming **Employment Support Allowance and** Incapacity Benefit (5.6%). This is lower than both the North West and UK rates.

The proportion of Trafford residents claiming the main out-of-work benefits (7.6%) is also lower than the equivalent proportion in the North West or the UK (11.2% and 9.4% respectively).

Inequalities throughout the borough mean that the more deprived areas of Trafford also have the greatest proportions of residents with no qualifications and the highest unemployment rates²⁹.

Underemployment (not having access to as much work as they would wish) is a problem for some in Trafford. Occupations with the highest rates of underemployment include labourers, cleaners and catering staff²⁸.

What can be done:

- Local partnerships can draw on what is known about what constitutes 'good' and 'poor' quality work and can learn from emerging guality job promotion strategies, to develop better jobs for their local populations.
- Creating skilled jobs is crucial to creating good quality jobs, as skilled work typically has more protective elements and less health-adverse conditions.
- Local authorities should encourage the creation of jobs where workers are valued, receive a living wage at minimum, have opportunities for promotion and are protected from adverse conditions (such as shift work) where possible.

The Trafford Employment Skills and Enterprise Group, a subgroup of the Trafford Partnership involving local government, employers and the voluntary sector. It works to support recruitment to local businesses and to maximise employment and training opportunities for Trafford residents. Programmes include:

- Nu-Traxx a programme aimed at improving employability skills in young people and moving them into employment
- Working Well Programme in which **Employment Support Allowance (ESA)** claimants are assigned a key worker, providing intensive and tailored support for a period of two years
- Stronger Families Programme integrating a number of services to create packages of support aimed at reducing anti-social behaviour, improving school attendance, and helping parents overcome barriers to work. This has seen good results in Trafford and is to be expanded in 2016 to support more families facing difficulties.

Ageing Well

Health Protection

Health protection is about reducing or preventing the harm caused by infectious diseases and hazards in the environment: for example chemicals and radiation. Local authority Public Health departments, working with Public Health England and the NHS, are responsible for planning to prevent such health threats and arranging responses to outbreaks or incidents. Immunisations, discussed in other parts of the report, are also important in the fight against infectious disease. In Trafford one of the main health protection priorities is tackling healthcare associated infections such as MRSA. All cases undergo full investigation and root cause analysis in order to learn lessons and prevent future cases. Trafford currently has a slightly higher percentage of older people than the profile of Greater Manchester as a whole and the life expectancy for men and women in the borough is better than the national average, at 79.5 years for men and 83.5 years for women¹.

Public Health Protection Functions in Trafford

Prevention

Potential threats to population health, including environmental hazards and infectious diseases, can be targeted through joint working with the environmental health department in the council. Trafford Council works closely with Public Health England, using data and expert advice to set up local prevention strategies, for example for the prevention of tuberculosis.

Planning and Preparedness

The Secretary of State has a legal duty to protect the health of the population. This involves Public Health England (PHE) providing information to local agencies. The Director of Public Health (DPH) in Trafford provides information and advice and acts on behalf of the local authority, making sure robust plans are in place to protect the health of local residents, for example in preparing for a possible influenza outbreak. The DPH is also a local leader here, escalating any concerns to the correct authorities.

Partnership Working

Strong working relationships locally are important in health protection planning. Trafford Council works closely with NHS England, NHS Trafford Clinical Commissioning Group and provider organisations in health protection work. The DPH in Trafford Council chairs the multiagency health protection forum, which provides assurance to the Trafford Health and Wellbeing Board that robust plans and arrangements are in place to protect the population of Trafford. The DPH also co-chairs the Local Resilience Partnership, participating and raising awareness of emergency plans in place for the local community.

Age 65+ **3,000 more**

The Future...

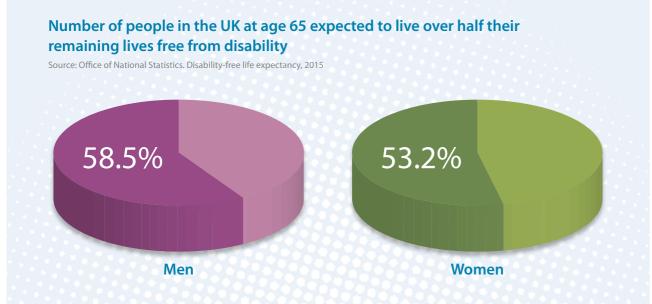
By 2020, there will be 3,000 more people aged over 65 years living in Trafford: of these, 1,000 will be aged over 90 years.

Older people provide the backbone of much family support and volunteer based services, but an ageing population can present a significant challenge to health and social care services and infrastructure.



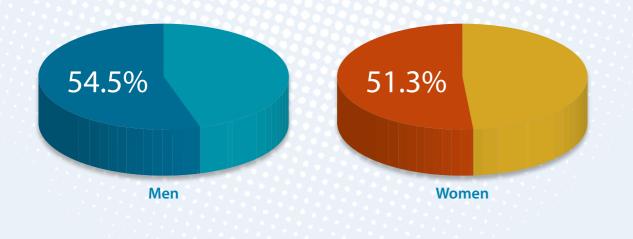
Future Needs

Future needs and demands for health and social care depend on more than just life expectancy. To estimate population needs, we also need to know the numbers of people supporting friends and family in older age and the levels of poor health and disability among older people. Comparisons of total life expectancy with 'disability-free life expectancy' (the number of years after age 65 that people can expect to live without significant disability) give an indication of expected demand for health and care services.



Number of people in Trafford at age 65 expected to live over half their remaining lives free from disability

Source: Office of National Statistics. Disability-free life expectancy, 2015



We can see from the figures that people in Trafford are living with disability for longer than expected from the national figures.

Some of the causes of this poor health in older age are diabetes, cardiovascular disease and falls. Trafford is doing less well than the England average in some of these areas, including:

- Reducing death from preventable causes
- Uptake of NHS Health Checks
- Cancer screening
- Diabetic retinopathy screening
- Injuries due to falls in people aged over 65
- Fuel poverty

So improving our performance in these areas to at least the England average would significantly improve the health of our population and greatly reduce the need for services³⁰.

Inequalities across Trafford mean that health in the north of the borough is, on average, significantly worse than in the south²⁹.

Lifestyle Factors

Improvements in health can partly be achieved by reducing lifestyle-related ill health, caused, for example, by smoking, alcohol use, lack of physical activity and obesity.

We have established programmes in all of these areas, but their reach and impact is variable. Improvements here would mean that everyone across Trafford could access the support they need to make lifestyle changes, ensuring our adult population ages well.

Environmental Factors

Changes to the environment in which people live can reduce the risks they face or can make healthier choices easier.

For example, changing street and pavement design and introducing dementia friendly standards for shops and cafes make it easier for people with visual or memory impairment to get out and about and retain their independence. In Trafford, dementia friendly initiatives have been introduced

in a few of our town centres in the past year. We also need to address the number of households affected by fuel poverty.

Final Words

During the last two years, Public Health has established a positive start in the Local Authority, developing successful relationships with a range of partners within Trafford and the surrounding areas. Major challenges remain, crucially, the need to tackle persisting inequalities in health, whilst improving overall healthy life expectancy through a life course approach. A strong focus on ill health prevention will support the transformative challenges facing the Trafford in the coming years.

Abdul Razzaq Director of Public Health Trafford Council



References

- 1. Office for National Statistics. *Population mid-year* estimates 2013. London. 2015.
- 2. Public Health England. *Public Health Profiles. Child Health Profile 2015; Trafford.* London. 2015.
- 3. Trafford Council. *Joint Strategic Needs Assessment: 2012.* Available at: www.infotrafford.org.uk/jsna.
- 4. Trafford Council, DCS Safeguarding Governance Group. *Monthly Safeguarding Activity Report: July 2015.*
- 5. Health and Social Care Information Centre, (2015) National Child Measurement Programme 2013-2014.
- 6. Department of Health. *Start Active, Stay Active: A* report on physical activity for health from the four home countries' Chief Medical Officers. London. 2011.
- 7. Chief Medical Office. Department of Health. *At least five a week: Evidence on the impact of physical activity and its relationship to health*. London. 2004.
- 8. Morris JN, Heady JA, Raffle PA, Roberts CG, Parks JW. Coronary heart disease and physical activity of work. *Lancet*. 1953: 265;1053-1057.
- 9. Sport England. *Active People Survey 9*. Available at: http://www.sportengland.org/research/about-ourresearch/what-is-the-active-people-survey/.
- 10. Allender S, Foster C, Scarborough P and Rayner M. The burden of physical activity-related ill health in the UK. *Journal of Epidemiology and Community Health*. 2007: 61; 344-348.
- 11. Ossa D & Hutton J. *The economic burden of physical activity in England*. London. 2002.
- 12. Greater Sport: Greater Manchester Sports Partnership. *Greater Manchester Moving*. Available at: http://www. greatersport.co.uk/get-active/greater-manchestermoving.
- 13. Department of Transport. *Walking and cycling statistics: Proportion of residents who walk or cycle for recreational purposes (CW040)*. London. 2015.
- 14. Public Health England. *Tobacco profile for Trafford*. 2015. Available at: http://www.tobaccoprofiles.info/
- Action on Smoking and Health (ASH). Smoking statistics.
 2014. Available at: http://ash.org.uk/files/documents/ ASH_107.pdf.
- Public Health England. *Trafford alcohol profile*. 2015. Available at: http://fingertips.phe.org.uk/profile/localalcohol-profiles
- 17. NHS Choices. *Alcohol Units*. 2015. Available at: http:// www.nhs.uk/Livewell/alcohol/Pages/alcohol-units.aspx

- 18. The Office for National Statistics. *Psychiatric Morbidity report*. London. 2001.
- National Statistics. Better Or Worse: A Longitudinal Study Of The Mental Health Of Adults In Great Britain. London. 2003
- 20. Trafford Council. *Trafford Joint Health and Wellbeing Strategy 2013-2016*. Available at: http://www. infotrafford.org.uk/hwbstrategy.
- 21. Public Health England. *NHS Health Checks website*. Available at: http://www.healthcheck.nhs.uk/
- 22. Public Health England. *NHS Health Check Data* October 2015. Available at: http://www.healthcheck. nhs.uk/interactive_map/north_of_england/north_ west/?la=Trafford&laid=90
- 23. Bell, R., et al., *Work, stress and health: The Whitehall II study.* J. Ferrie, Editor. 2004. International Centre for Health and Society/Department of Epidemiology: London.
- 24. PwC. *UK Economic prospects*. 2014. Available at: http:// www.pwc.co.uk/the-economy/publications/ukeconomic-outlook/ukeo-nov2014-prospects.jhtml
- 25. Office for National Statistics, *People and proportion in employment on a zero-hour contract:* 2000-2012, October to December, each year (ONS Labour Force Survey). 2014.
- 26. Unite. Government must act to halt rise in zero hours. Available at: http://www.unitetheunion.org/news/ governmentmustacttohaltriseinzerohours/
- 27. MacInnes, M.D. *Monitoring Social Exclusion and Poverty* 2014. Joseph Rowntree Foundation, 2014.
- 28. Nomis. *Labour Market Profile Trafford*. 2016. Available at: www.nomisweb.co.uk
- 29. Department for Communities and Local Government. Indices of Multiple Deprivation (IMD) 2015. Available at: http://www.infotrafford.org.uk/deprivation#info
- 30. Kippin, H. Randle, A. *Managing Demand: Building Future Public Services*. 2014. Available at: www.thersa.org/ discover/publications-and-articles/reports/managingdemand-building-future-public-services

Acknowledgements

Prepared by Abdul Razzaq Edited by Sepeedeh Saleh With contributions from Paula Whittaker, Helen Gollins, Eleanor Roaf, Tim Gillibrand, Phil Clelland, Christine Camacho, Adrian Bates, Nick Metcalfe, Jill Colbert, Jackie Hall, Nicky Shaw, Paul Burton, Kylie Thornton, Eve Donelin, Jenny Shaw, Sarah Gunshon, Jamie Whyte and Kerry Briggs

For further information on the work programmes included in this report, please visit www.trafforddirectory.co.uk Published by Trafford Council December 2015 0161 912 2000

www.trafford.gov.uk