

AGENDA FOR

CABINET

Contact: Andrew Woods
Direct Line: 0161 253 5134
E-mail: a.p.woods@bury.gov.uk
Web Site: www.bury.gov.uk

To: All Members of Cabinet

Councillors : M C Connolly (Leader and Cabinet Member for Business Engagement and Regeneration) (Chair), R Shori (Deputy Leader and Cabinet Member for Finance), P Heneghan (Cabinet Member for Children, Families and Culture), T Isherwood (Cabinet Member for Environment), J Lewis (Cabinet Member for Communities), A Simpson (Cabinet Member for Health and Wellbeing) and S Walmsley (Cabinet Member for Resource and Regulation)

Dear Member

Cabinet

You are invited to attend a meeting of the Cabinet which will be held as follows:-

Date:	Wednesday, 14 October 2015
Place:	Meeting Rooms A & B - Town Hall
Time:	6.00 pm
Briefing Facilities:	If Opposition Members and Co-opted Members require briefing on any particular item on the Agenda, the appropriate Director/Senior Officer originating the related report should be contacted.
Notes:	

AGENDA

1 APOLOGIES FOR ABSENCE

2 DECLARATIONS OF INTEREST

Members of Cabinet are asked to consider whether they have an interest in any of the matters of the Agenda, and if so, to formally declare that interest.

3 PUBLIC QUESTION TIME

Questions are invited from members of the public present at the meeting about the work of the Council and the Council's services.

Approximately 30 minutes will be set aside for Public Question Time, if required.

4 MINUTES *(Pages 1 - 6)*

To approve as a correct record the minutes of the meeting held on 2 September 2015.

5 DIRECTOR OF PUBLIC HEALTH - ANNUAL REPORT *(Pages 7 - 32)*

6 CULTURAL ECONOMY STRATEGY 2015-2018 AND ACTION PLAN *(Pages 33 - 52)*

7 ADOPTION OF REVISED STATEMENT OF COMMUNITY INVOLVEMENT *(Pages 53 - 88)*

8 HEALTH AND WELLBEING BOARD ANNUAL REPORT AND REFRESHED HEALTH AND WELLBEING STRATEGY *(Pages 89 - 132)*

9 MINUTES OF ASSOCIATION OF GREATER MANCHESTER AUTHORITIES / GREATER MANCHESTER COMBINED AUTHORITY *(Pages 133 - 142)*

To consider the minutes of meetings of the AGMA Executive Board and Greater Manchester Combined Authority held on 25 September 2015.

10 URGENT BUSINESS

Any other business which by reason of special circumstances the Chair agrees may be considered as a matter of urgency.

11 EXCLUSION OF PRESS AND PUBLIC

To consider passing the appropriate resolution under Section 100 (A)(4), Schedule 12(A) of the Local Government Act 1972, that the press and public be excluded from the meeting for the reason that the following business involves the disclosure of exempt information as detailed against the item.

- 12 RADCLIFFE GROWTH AND INVESTMENT LEISURE, CIVICS AND HOUSING** *(Pages 143 - 160)*
- 13 CHAMBERHALL - DEVELOPMENT AGREEMENT** *(Pages 161 - 172)*

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Minutes of: THE CABINET

Date of Meeting: 2 September 2015

Present: Councillor M Connolly (in the Chair)
Councillors P Heneghan, A Isherwood, J Lewis, R Shori,
A Simpson and S Walmsley

Apologies:

Public attendance: 1 member of the public was in attendance.

CA.252 DECLARATIONS OF INTEREST

Councillor Connolly declared a personal interest in any matters relating to the fact that his partner is employed in Adult Care Services.

CA.253 PUBLIC QUESTION TIME

A period of thirty minutes was allocated for any members of the public present at the meeting to ask questions about the work or performance of the Council or Council services.

No questions were asked.

CA.254 MINUTES

Delegated decision:

That the minutes of the meeting held on 8 July 2015 be approved and signed by the Chair as a correct record.

CA.255 GREATER MANCHESTER ROAD ACTIVITIES PERMIT SCHEME – CHANGES TO SCHEME TO ENSURE COMPLIANCE WITH THE AMENDED 2015 PERMIT SCHEME REGULATIONS

The Cabinet Member for Environment submitted a report advising Cabinet of the effect of legislative changes on the Greater Manchester Road Activity Permit Scheme (GMWRAPS), the impact of the Key Route Network (KRN) on its operation and the necessary changes and processes to be carried out to ensure compliance. The report included a summary of the main amendments to the Regulations that apply to GMWRAPS.

The new operational aspects of the amended Regulations will start on 1 October 2015. With regard to the Key Route Network it is anticipated that the new operational aspects will commence on 1 April 2016, when the new increase of the distribution of Permit Fees for consideration of permits on the KRN will also be introduced.

Cabinet, 2 September 2015

Delegated decision:

That the proposals outlined in the report be approved, and that Officers be authorised to take the necessary action to agree the legal changes necessary to the GMWRAPS documentation, to issue the Order and to approve the Deed of Variation.

Reason for the decision:

To ensure the GMWRAPS is compliant with legislation and can be lawfully operated.

Other options considered and rejected:

To reject the proposals meaning that the GMWRAPS scheme would no longer be compliant with legislation and could not be lawfully operated.

CA.256 BURY DOMESTIC ABUSE STRATEGY, 2015-18

Councillor Tariq, Deputy Cabinet Member for Health and Wellbeing and Lead Member for Community Safety submitted the Bury Domestic Abuse Strategy 2015-18. The Strategy supports the Bury Community Safety Partnership ambition to tackle domestic violence and abuse by seeking to reduce repeat incidents through a focus on prevention and early intervention. It is a partnership document which seeks to consolidate the work of the Council and partners by setting out a robust framework to deliver real change.

Delegated decision:

1. That support be given to the vision and commitment of the Community Safety Partnership to reducing domestic violence and abuse, particularly repeat offending.
2. That approval be given to the Bury Domestic Abuse Strategy (2015 – 2018) as detailed in the report.
3. That officers be authorised to develop a robust implementation and delivery plan to take forward the actions identified in the strategy and review existing services and make such changes as may be necessary (including the introduction of new ways of working) to meet the strategic priorities and improve outcomes for victims of domestic violence and abuse.

Reason for the decision:

Tackling domestic violence and abuse requires a whole system, multi-agency response. The Strategy is a partnership document which has been developed following a multi-agency review of domestic violence and abuse in the borough. It sets out a clear direction of travel which is more closely aligned to Team Bury priorities and the Council's ambitions to support our most vulnerable residents.

Other option considered and rejected:

Reject the Strategy. Without a multi-agency strategy, the ability of the Council to work with partners to tackle domestic violence and abuse through early intervention and prevention would not be possible.

CA.257 BURY DRUG AND ALCOHOL STRATEGY

The Cabinet Member for Health and Wellbeing submitted a report seeking approval of the draft Bury Drug & Alcohol Strategy 2015-18. The Strategy has been developed from the three key themes of the National Drug strategy (December 2010);

- Reducing Demand
- Restricting Supply
- Building recovery in Communities

In order to deliver against the three key themes, the following seven key objectives have been identified and included in the strategy based on local priorities:

- Ensure that all strategic plans recognise the role of drug and alcohol misuse particularly where there are cross cutting thematic areas.
- Increase knowledge and awareness about the harm caused by drugs and alcohol so that people can make informed choices and resist pressures, particularly young people and those on the periphery of drug and alcohol misuse.
- Break inter-generational substance misuse by supporting a whole family approach and by targeting resources appropriately.
- Ensure that all legal substances are sold responsibly.
- Ensure that robust partnership clinical governance is in place
- Support people to make a full recovery.
- Improve housing outcomes where appropriate for people in recovery.

An action plan, which was appended to the report, has been developed with key partners to ensure that cross cutting themes are robustly linked to this strategy, for example, Children's Trust Board and Community Safety Partnership Strategies.

Delegated decision:

That approval be given to the Bury Drug and Alcohol Strategy as detailed in the report.

Reason for the decision:

This decision provides the direction and framework for reducing the harms caused by drugs and alcohol for the next 5 years

Other option considered and rejected:

To reject the Strategy. This would leave the Council without clear intention, and could lead to more people misusing drugs and/or alcohol which would increase the demand on local services.

Cabinet, 2 September 2015

CA.258 CORPORATE FINANCIAL MONITORING REPORT – APRIL 2015-JUNE 2015.

The Deputy Leader and Cabinet Member for Finance and Housing submitted a report informing Members of the Council's financial position for the period April 2015 to June 2015 and provided a projection of the estimated outturn at the end of 2015/2016.

The report also provided Prudential Indicators in accordance with CIPFA's Prudential Code.

Delegated decisions:

1. That the financial position of the Council as at 30 June 2015 be noted.
2. That approval be given to the s151 Officer's assessment of the minimum level of balances.

Reason for the decision:

The report has been prepared in accordance with the Council's Financial Regulations relating to budget monitoring.

Other option considered and rejected:

To reject the recommendations.

CA.259 EMPLOYMENT EQUALITY REPORT

The Cabinet Member for Resources and Regulation submitted a report setting out details of the requirement for the Council to publish equality information upon its workforce under the Public Sector Duty (Equality Act 2010). The information must include data from various points in the employment lifecycle, disaggregated by the different protected equality characteristics. As well as being a legal requirement analysis of this data also helps inform the Council's Equality and Diversity priorities for the coming year.

Delegated decision:

That approval be given for the publication of the equality information in the suggested format detailed in the report.

Reasons for the decision:

To ensure that the Council is compliant with the requirements of the Public Sector Equality Duty (Equality Act 2010)

Other option considered and rejected:

To publish the information in a different format.

CA.260 HOME TO SCHOOL/HOME TO COLLEGE SEN TRAVEL

The Cabinet Member for Children Families and Culture submitted a report setting out proposed changes to the Council's existing policy framework for home to school/college transport.

The Children & Families Act 2014 introduced significant reforms to the way that services for children and young people with Special Educational Needs or Disability are provided, commissioned or delivered. Home to school transport or financial assistance to support travel to school is an important element of that provision.

The existing policy framework for home to school/college transport does not meet the expectations set out in the Act to provide greater flexibility and choice to families, and to enable to use of personal budgets where this is requested.

Delegated decision:

That approval be given to undertake consultation on proposed changes to the Council's policy framework for home to school/college SEN transport and travel assistance.

Reason for the decision:

The proposals respond to the statutory requirements introduced by the Children and Families Act 2014 and will ensure that the policy framework is informed by the outcome of consultation with stakeholders.

Other options considered and rejected:

That no further action be taken.

CA.261 EXCLUSION OF PRESS AND PUBLIC

Delegated decision:

That in accordance with Section 100(A)(4) of the Local Government Act 1972, the press and public be excluded from the meeting during consideration of the following items of business as it involves the likely disclosure of exempt information as detailed in the condition of category 9.

CA.262 FORMER FIRE STATION SITE, BURY – DEVELOPMENT OPTIONS

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The Leader and Cabinet Member for Regeneration submitted a report setting out options for taking forward the development of the former fire station, directly adjacent to the Rock Shopping Centre.

Delegated decision:

That approval be given to entering into a conditional development agreement as detailed in the report.

Cabinet, 2 September 2015

Reason for the decision:

The proposal is the most likely option to produce a development scheme in the medium term which meets the Council's aspirations for this strategically important site.

Other options considered and rejected:

Do nothing and wait for the market to improve
Sale of the site on the open market
Market the site to seek a development partner

**CA.263 RETAIL LED DEVELOPMENT PROPOSALS FOR RADCLIFFE TOWN
E CENTRE**

The Leader of the Council and Cabinet Member for Regeneration submitted a report providing an overview of the outcome of a 2 stage tender process with developers to provide a new retail led development scheme in Radcliffe Town Centre.

Delegated decision:

That Option 1, as set out in the report, be approved for the Council to enter into a lease agreement with the highest scoring bidder.

Reason for the decision:

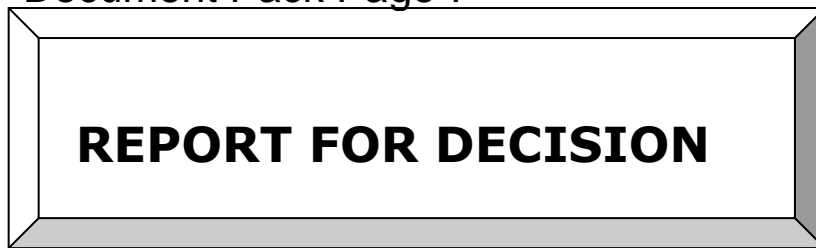
The proposal is a significant catalyst for the regeneration of Radcliffe and the wider Borough

Other options considered and rejected:

Do nothing
Offer to another developer

**COUNCILLOR M Connolly
Chair**

(Note: The meeting started at 6.00 pm and ended at 6.35 pm.)



DECISION OF:	Cabinet
DATE:	14 October 2015
SUBJECT:	Director of Public Health Annual Report
REPORT FROM:	Cabinet Member for Health and Wellbeing
CONTACT OFFICER:	Lesley Jones - Director of Public Health
TYPE OF DECISION:	CABINET - KEY DECISION
FREEDOM OF INFORMATION/STATUS:	This paper is within the public domain
SUMMARY:	It is a statutory duty for the Director of Public Health to produce an independent annual report which the Council has a statutory duty to publish. The Director of Public Health will use the annual report to focus on a different theme each year. In light of the transfer of public health responsibilities to the council in 2013, the theme for the 2013-14 report is the role of the council in improving health.
OPTIONS & RECOMMENDED OPTION	To note the content of the Director of Public Health Annual Report To accept the recommendations contained within the report.
IMPLICATIONS:	
Corporate Aims/Policy Framework:	Do the proposals accord with the Policy Framework? Yes No
Statement by the S151 Officer: Financial Implications and Risk Considerations:	The recommendations in the report are aspirational, and need to be considered in the light of budget constraints and wider Council policy, e.g. "Vision & Values", Planning etc.
Health and Safety Implications	Full Health and Safety assessments will be undertaken where recommendations are implemented.

Statement by Executive Director of Resources (including Health and Safety Implications)	A robust approach to Public Health is a key part of the Council strategy to ensure the Health & Wellbeing of residents, and achievement of Council aims and objectives.
Equality/Diversity implications:	Yes No (see paragraph below)
Considered by Monitoring Officer:	Yes Comments
Wards Affected:	All
Scrutiny Interest:	Health Scrutiny (presented 22 nd September, 2015)

TRACKING/PROCESS

DIRECTOR:

Chief Executive/ Strategic Leadership Team	Cabinet Member/Chair	Ward Members	Partners
Scrutiny Committee	Cabinet/Committee	Council	
	14 October		

1.0 BACKGROUND

It is a statutory duty for the Director of Public Health to produce an independent annual report which the Council has a statutory duty to publish. The Director of Public Health will use the annual report to focus on a different theme each year. In light of the transfer of public health responsibilities to the council in 2013, the theme for the 2013-14 report is the role of the council in improving health.

The report uses the King’s Fund publication ‘Improving the public’s health: A resource for local authorities’ 2013 to assess the councils current contribution to the public health agenda and make recommendations for further action.

The report addresses nine key areas identified by the King’s Fund namely:

- The best start in life
- Healthy Schools and pupils
- Helping people find good jobs and stay in work
- Active and safe travel
- Warmer and safer homes
- Access to green and open spaces and the role of leisure services
- Strong communities, well-being and resilience
- Public protection and regulatory services
- Health and spatial planning
- plus a tenth area of ‘Health and Social Care’

- 1.1 The report highlights the significant contribution to improving health and reducing inequalities already being made by the council. Huge challenges remain however, for example inequalities in life-expectancy, and there is clearly more that needs to be done working with partner agencies. A Transformational up-scaling of action on prevention is required as described by The Wanless Report - 'Fully engaged' scenario and the GM Devolution MoU if real positive impact on health is to be achieved. The recommendations within the report are designed to help the council further harness and shape its approach to improving health & wellbeing and reducing inequalities. What is clearly evident is that there is a strong sense of passion and ambition for the public health agenda across the council giving confidence that the health and well-being challenges facing our communities can be tackled.
- 1.3 The recommendations have been mapped against the Health & Well-being Strategy and the Council's vision, values and principles to ensure implementation can be aligned to existing sub strategies and action plans
- 1.4 The recommendations were considered by the Senior Leadership Team on 24th September. SLT have identified leads within the council responsible for implementing the recommendations if accepted by cabinet and have asked the Director of Public Health to report quarterly on progress towards implementation
- 1.5 Progress against the recommendations contained within the report will be contained within the 2015 report

2.0 ISSUES

- 2.1 Not implementing the recommendations risks failing to sufficiently improve the health and well-being of the population of Bury and reducing demand for services.
- 2.2 There may be financial implications associated with implementing the recommendations contained within the report. In most instances the business case will be made on an invest to save basis as the economic case for prevention has been well established.
2. The Senior Leadership Team recommended that all the recommendations be adopted by the council with a slight caveat on the second recommendation in the 'Active and Safe Travel' chapter. Whilst agreeing that 'Walking and cycling considerations should be embedded and prioritised within transport and land-use decision-making', SLT felt it would be difficult to commit to 'rejecting proposals whose impact on walking and cycling will not be positive'

3.0 CONCLUSION

- 3.1 It is recommended that Cabinet accept the recommendations within the Director of Public Health Annual Report 2013-14 (subject to the slight caveat to recommendation 2 within the Active Travel chapter) and task the Senior Leadership Team to embed actions to address the recommendations within council strategies and plans and oversee and support implementation.

List of Background Papers:-

Director of Public Health Annual Report

Contact Details:-

Lesley Jones
Director of Public Health
l.jones@bury.gov.uk
Tel: Ext 6762

Last Updated 19.05.14

Director of Public Health Annual Report 2013 - 2014



Public Health at the heart of our business



Bury Town Hall, Knowsley Street, Bury, Lancashire BL9 0SW
Tel: 0161 253 5000 Emergencies/Out of Office Hours: 0161 253 6606
www.bury.gov.uk



Foreword

I am delighted to present my first annual report as Director of Public Health for Bury.



Local authorities became responsible for public health in April 2013 following the NHS Reforms (2012) and I took permanent responsibility for Public Health within Bury in October 2014. The years 2013 and 2014 have consequently been a period of transition and change in which the Council has begun to learn about and embrace its new responsibilities and where teams have adapted to new ways of working.

It therefore seems timely to consider the role of councils in improving and protecting the public's health, celebrate what has already been achieved locally and reflect on what more can be done to ensure all the people of Bury enjoy healthy and fulfilling lives.

The report is based around the nine key areas identified in 'Improving the public's health: A resource for local authorities' published by The King's Fund in 2013, together with a tenth looking at 'Health and Social Care'. In producing this report, I have drawn on contributions from a wide range of colleagues from across the council and partner agencies. A full list of contributors can be found in appendix two and I would like to extend my sincere gratitude to each and every one.

Bury Council has stated its ambition to become a true 'public health council', working with partners to be the healthiest borough in the North West. There is no lack of passion for this agenda. I hope that the recommendations set out in this report provide some direction to help harness and channel that passion and achieve further real improvements in outcomes.

Lesley Jones
Director of Public Health

It is my pleasure to endorse the Public Health Annual Report 2013-14. It provides a strong foundation for the development of health-related services and programmes which can enhance the quality of life for those people living in the Borough.



The vision and creativity which exist within the Council will help to ensure that we continue to look for innovative ways to deliver and improve services, building on established relationships with partner organisations to use resources as effectively as possible.

I look forward to seeing the health of the people of the Borough improve now and in the future.

Councillor Andrea Simpson
Cabinet Member for Health and Wellbeing

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Local authorities are now at the heart of the drive to improve and protect the public's health and reduce health inequalities following the Government's 2012 health and social care reforms.

Bury Council has always strived to play its part in supporting people to have healthier, longer lives. However, the transfer of responsibilities for public health from the NHS provides a renewed opportunity for the Council and its partners to harness, shape and enhance their work to address the wider determinants of health. These include employment, education, housing and the environment, delivered through meaningful engagement with local citizens.

'Improving the public's health: A resource for local authorities' (The King's Fund, 2013) usefully sets out a range of practical evidence-based actions for councils across nine key local authority functions. This Public Health Annual Report takes stock of achievements to date across these nine key areas, plus an additional theme of 'health and social care', and makes recommendations on priorities for the future.

Bury Council and its partners have delivered a wide range of services and programmes which have a direct and indirect impact on improving the health of the Borough's population.

The strengthened public health remit, an assets-based approach to community development and excellent partnership relationships present exciting opportunities to further improve the health of residents.

However, there are also significant challenges. Social, economic and environmental factors beyond the direct control of local agencies significantly influence our health throughout our lives. Having a good quality, secure job, a decent place to live and a clean and safe environment are all basic pre-requisites to health and wellbeing. Stark inequalities exist between sections of the population and affect health outcomes. For example, a child born to poorer parents will have worse life chances than a child born in more affluent circumstances. More affluent people not only live longer but also live a greater proportion of their lives in good health.

Financial austerity in recent years has had a major impact. In addition to the direct impact on the local population, for example through reduced income and unemployment, reduced resource availability has affected the ability of local authorities to deliver services. Nonetheless, Bury is ambitious and aspirational and is committed to working with and for local residents to support the best possible health outcomes.



The Best Start in Life

3.1



Why is this important?

A child's experiences in their first four years can have a major impact on their health (for example, obesity, heart disease, mental health) and life chances (for example, educational attainment and economic status), both as a child and as an adult.

Good early years provision is good for all children, but it has a particularly positive impact on the development of disadvantaged children. It is, therefore, essential that efforts are concentrated into improving the quality of health provision available to children of the Borough. Although health is generally good, there are a number of areas where things need to improve.

There are strong links between deprivation, educational attainment and health outcomes in Bury. Areas of higher deprivation also experience poorer educational attainment and poorer health outcomes. As a result, individuals and families living in areas of high deprivation are more likely than the rest of society to depend on public services.

Facts and figures

There are several areas where improvements are required to enable children to have the best start in life such as:

- improving early access to antenatal services – currently only 63.5% of women access maternity services by week 12 of pregnancy (Bury Joint Strategic Needs Assessment, 2013);
- reducing smoking in pregnancy - although reducing, in 2012-13, 15.3% of mothers at time of delivery were classed as smokers (Bury Child Health Profile, Public Health England);
- increasing breastfeeding rates - 2012-13 breastfeeding rates were 68.9% at initiation and 41% after 6-8 weeks. These were below the England averages (73.9% and 47.2% respectively) but above the North West averages (62.2% initiation rate) (Bury Child Health Profile, Public Health England);
- improving oral health - in 2011-12, 33.5% of Bury children aged 5 years had one or more decayed, missing or filled teeth, compared to an England average of 27.9% (Bury Child Health Profile, Public Health England);
- reducing childhood obesity - Bury's rate of obesity at Year 6 ranges within wards from 9% to 33% (Bury Child Health Profile, Public Health England);
- increasing the proportion of children who achieve at least the expected level in early years learning - in 2014, this was 54%, compared to 55% in the North West and 58% in England (Department of Education).

The King's Fund suggests that local authorities:

- target the most disadvantaged children and families with intensive support, supplementing specific interventions with mainstream universal support.
- focus support on vulnerable mothers from pregnancy until the child reaches the age of two.

Healthy Schools and Pupils

3.2

What's already happening in Bury?

The ten authorities across Greater Manchester have collaborated to develop a new model for the provision of health, social and educational support for children aged 0-5. This model involves eight stages of assessment across the first five years of a child's life, supported by a range of evidence-based interventions to help ensure the best outcomes for all children. The model includes elements of provision that are available for all families and elements which are targeted at families who require more support. This model is being taken forward in Bury. For example:

Health visiting

The Health Visiting team has been successful in gaining UNICEF Baby Friendly Community Accreditation (designed to support breastfeeding and parent-infant relationships by working with public services to improve standards of care) and is taking part in research to assess the effectiveness of 'Baby Express', a newsletter with short, easy-to-read articles containing information on issues relevant to a child's needs at each stage of their early life.

Pre-school education

From September 2014, the number of parents eligible for free childcare for their two-year-olds increased. The Early Years Service is aware of a number of areas in the Borough where there are not enough places available to meet demand under this scheme and is working to increase provision in these areas.

Reform of Children's Centres

Following a three-month consultation, the Council approved a new model for Children's Centres to be fully implemented from September 2015. The new model aims to enhance targeted outreach to families requiring the most support whilst also creating opportunities to develop the provision of nursery places in the Borough.

Family Nurse Partnership

The Family Nurse Partnership (FNP) is a free voluntary programme for women under 20 who are expecting their first baby. The programme focuses on parents planning their future and empowers parents to make lifestyle choices which will give their child the best possible start in life. Parents are also supported to achieve their aspirations of finding a job or returning to education.

Families with complex needs

The Council and partners work together to implement the National Troubled Families agenda. It has identified families that meet the eligibility criteria for the project and is working to address their complex needs and dependencies. These can include families where there is alcohol, drug or substance misuse, relationship breakdown, domestic violence, involvement in crime, poor physical or mental health and truancy, exclusion or bad behaviour at school.

The Troubled Families One Programme was a success for the Council and its Team Bury Partners. The Council gave a commitment to turn around 385 families, though it identified 435 families and achieved this by March 2015. Work is underway on developing the approach to the expanded programme. In the Early Starter phase of the expanded Programme, the Council identified 1,194 families. The operational team includes Family Co-ordinators, Department for Work and Pensions representatives and police secondees.

Director of Public Health recommendations for the future:

- Maximise the full contribution of Bury's existing resources aligned to the implementation of the Greater Manchester Early Years New Delivery Model.
- Strengthen the relationships and mechanisms between all services involved in early years provision, including General Practitioners (GPs), to ensure all those eligible for services are offered them and receive timely, co-ordinated and effective support.
- Review the scale of provision of the Family Nurse Partnership in relation to local need.

Why is this important?

The school years are a crucial period in determining future health outcomes. Well-designed whole-school approaches to promoting health can contribute to increased concentration and confidence, greater participation in physical activity, better nutrition and improved academic attainment. Later in life, this can contribute to better prospects in the labour market, more engagement in society, healthier lifestyle choices and lower need for support from public services.

Facts and figures

The Borough has just over 26,000 school-aged children which equates to around 14% of the total population. While at GCSE level, students have historically performed better than the regional and national benchmarks, there are health inequalities within the Borough which need to be addressed to improve attainment levels for all pupils.

Areas of deprivation closely correlate with poorer education attainment and poorer health outcomes. These include lower attainment at foundation level (age 5) and GCSE, a higher proportion of 16-18 year olds who are not in education, employment or training (NEETs), higher teenage conception rates and increased levels of childhood obesity.

Public Health England's Bury Child Health Profile in March 2014 indicated the following:

- in 2012-13, 7.8% of Reception year children and 19.4% of Year 6 children were classed as obese. The figure for Reception year children is better than the England average but the level for Year 6 children is worse than the England average.
- in 2012-13, the rate of hospital admissions as a result of self-harm among young people aged 10-24 years was 382 per 100,000 compared to an England average of 346 per 100,000.
- during 2010-11 to 2012-13, the rate of alcohol-specific hospital admissions for under 16s was 53 per 100,000 compared to an England average of 43 per 100,000.
- in the same period, among young people aged 15-24, the rate of hospital admissions due to substance misuse was 115 compared to 75 per 100,000 for England as a whole.

The King's Fund suggests that local authorities:

- support schools to develop children's life skills such as problem solving, self-esteem and resilience to negative peer pressure.
- help schools include more opportunities for physical activity and promote healthy eating.
- develop 'whole school' approaches using resources such as the Department for Education's Healthy Schools Toolkit (2013).

Helping People Find Good Jobs and Stay in Work

3.3

What's already happening in Bury?

School nursing service

The Bury School Nursing Team works with other services to ensure that all Bury children have access to the Healthy Child Programme and to address issues such as sexual health, emotional health and wellbeing, obesity, and drug, alcohol and tobacco misuse. The Team works with all State-funded primary and secondary schools in the Borough and has a transition pathway with Health Visitors to ensure a smooth transition from early years provision into education.

The programme uses intelligence to identify multiple risk factors and behaviours and develop a comprehensive understanding of what pupils can access within schools, such as Child and Adolescent Mental Health Services (CAMHS). This will ensure that services can be shaped to children's needs.

Healthy eating

Bury is piloting You Only Live Once (YOLO), a ten-week weight management programme aimed at 10-16 year olds, offering healthy eating and physical activity advice and support. By March 2015:

- 150 young people and families had engaged with the programme;
- 73% of young participants had completed YOLO's combined offers;
- in total, across the four main cohorts, 130 kg of weight was lost;
- 90% of YOLO's attendees were aged 10 and 11 years;
- 30% of parents accessed further support either through the Health Trainer Service or Bury Exercise and Therapy Scheme (BEATS).

All four Bury College sites and a number of other catering outlets have achieved the Excellence Award of the Greater Manchester Healthy Catering Awards, which includes a commitment to reducing levels of saturated fat, sugar and salt in the food and drinks sold.

Emotional health and resilience

Developed by Bury's Anti-bullying Co-ordinator, all Bury schools have fully or partly signed up to an anti-bullying training package which includes training on peer mentoring and peer mediation. The package offers schools flexibility to select from a suite of 26 training elements which meet the particular needs of their pupils.

Bury flu pilot

In 2013, Bury was one of seven areas selected by Public Health England to pilot the nasal flu vaccination for primary school children. 10,527 children in primary schools were vaccinated. The UK Joint Committee on Vaccination and Immunisation judged the pilot a success. This led to continuation of the primary school vaccination programme in 2014 and is informing the national roll out.

Director of Public Health recommendations for the future:

- In conjunction with schools and key partners design, develop and embed a local comprehensive healthy schools programme.
- Ensure alignment of the school health service with the new healthy schools programme.
- Introduce a regular school-aged children health survey to enable better identification of health needs and trends and support prioritisation of service delivery.
- Review the provision of advice and support available to help school-aged children make health-related behaviour changes.



Why is this important?

Being in work can have a positive impact on people's health. "For most people, their work is a key determinant of self-worth, family esteem, identity and standing within the community, besides, of course, material progress and a means of social participation and fulfilment" (Working for a Healthier Tomorrow: Dame Carol Black's review of the health of Britain's working age population, 2008).

Unemployment can have major impacts on individuals and their families, leading to poor physical and mental health and decreased life expectancy. In addition, there is a correlation between lower parental income and poorer health in children. It is important that workplace health initiatives address both absenteeism and reduced in-work productivity due to sickness. Working days lost to illness impact on the economy and also contribute to the social exclusion of workers affected.

Local authorities have both a direct and indirect impact on employment and training, through direct employment, procurement of other services and supporting employment opportunities more widely.

Facts and figures

- At the end of 2013, there were 400 16-18 year olds classed as not in education, employment or training (NEETs) (Department for Education). Young people who are classed as NEETs for a substantial period are less likely to find work later in life and more likely to experience poor long-term health.
- In 2014, 6.4% of Bury's working age population was unemployed compared to 7.1% in the North West. Amongst women, this was 5.8% in compared to 6.5% in the North West (ONS Annual Population Survey, 2014).
- People who experience long periods without work are more likely to suffer from poor physical and mental health. At November 2014, there were around 8,000 claimants of

Employment Support Allowance (ESA) which represents 7.6% of the working age population. This is lower than the North West rate of 8.1% but higher than the national average of 6.3%. 3,500 of these claimants had been in receipt of ESA for over two years. The two main health conditions experienced by claimants were mental health and musculoskeletal issues (NOMIS).

- Residents from higher professional and managerial categories report better health than the rest of the population. 46.1% of Bury's working population are in this category - this is higher than the average for the North West (40.9%) and the national average (44.3%) (ONS Annual Population Survey, 2014).

The King's Fund suggests that local authorities:

- use the Social Value Act to maximise equitable employment opportunities, for young people not in employment, education or training and those who are long-term unemployed.
- actively promote the health of their own staff by promoting health-enhancing cultures, delivering health promotion initiatives and effectively supporting those affected by ill health.
- support and challenge local businesses to implement national guidance on healthy workplaces.
- implement lessons learnt from national 'Fit for Work' pilots into local services and commissioning.

*Steps to Success apprentice,
image provided by Six Town Housing*

What's already happening in Bury?

Council Healthy Workplace Strategy

The Council is fully committed to the health and wellbeing of its employees, and recognises that a healthy workforce is a productive workforce. A Health, Work and Wellbeing Strategy has been developed and implemented which aims to provide a safe and healthy environment for employees. The objectives are to:

- ensure that employees have well-designed, rewarding jobs that make a difference to the community;
- provide employees with access to appropriate development opportunities;
- provide support and opportunities for staff to keep themselves healthy and safe;
- promote healthy living and encourage employees to adopt beneficial lifestyle choices.

The strategy is due to be refreshed in September 2015.

Employment Gateway

Bury Employment Gateway opened in dedicated premises, funded by Bury College, in the Mill Gate Shopping Centre in May 2014. A steering group is overseeing the project to make sure it serves a 'one-stop' concept and develops efficiencies by minimising duplicated services, in order to support those with the greatest need. In the first three months to the end of July 2014, 84 apprenticeship jobs were secured for young people through the services of the Gateway.

By the end of June 2014, the following services were based in the Employment Gateway:

- Bury College Employment Services (four staff) - Apprenticeship Vacancy matching service (Monday to Saturday);
- Job Centre Plus - Job Seeker's Allowance Advisor (Monday to Friday);
- National Careers Service - Mojo Trust and Work Solutions (3 days per week); and
- Manchester Credit Union (2½ days per week).

As the priorities of the Government continue to evolve, the key partners remain committed to the Employment Gateway concept and are adjusting their services to support new agendas and the funding available.

Working Well

The Working Well programme is a scheme which was initially launched in March 2014 to operate for three years. The purpose of the programme is to support Employment and Support Allowance (ESA) claimants in Greater Manchester who have completed the Work Programme without finding employment. The scheme was initially for up to 5,000 participants.

The scheme is built around the offer of intensive and integrated support to help individuals tackle their specific barriers to work. Each participant receives individually-tailored packages of assistance for up to two years, with up to a year of in-work support.

Backing Young Bury

Bury Council set up the 'Backing Young Bury' Campaign in April 2010, to help improve learning and working opportunities for young people in the Borough, whilst simultaneously ensuring that the Council has a skilled future workforce.

It is delivered in partnership with local businesses and organisations from both the public and private sector to further increase opportunities for young people, through a range of initiatives. The campaign has already led to a significant increase in the number of young people accessing apprenticeship opportunities and has developed a co-ordinated strategy towards work experience opportunities.

Director of Public Health recommendations for the future:

- Embed commissioning for social value. The Public Services (Social Value) Act 2012 requires public authorities to have regard to economic, social and environmental wellbeing in connection with public services contracts and for connected purposes. Bury Council should publicise how it is applying the Act in its commissioning and encourage other local businesses and organisations to commit to the spirit of the Act. Bury Council should also use the Act to enhance employment opportunities for those classed as NEETs.
- Develop and implement a local workplace health programme to support local employers to implement the Good Work: Good Health Charter. This is the Workplace Wellbeing Charter for Greater Manchester. It is a toolkit and guide to help businesses on the issue of health, work and wellbeing.
- Implement the Greater Manchester 'Work and Health' programme. This programme aims to change the culture among health professionals, employers and individuals to move away from the assumption that sickness means absence from work and to recognise the rehabilitation benefits that remaining in or returning to work can bring.
- Bury Council should commit to becoming an exemplar healthy workplace for the Borough.
- Develop a strategy for economic growth which aims to reduce inequalities within the Borough.



Active and Safe Travel

3.4

Why is this important?

Local authorities are responsible for drawing up and implementing local transport plans. Effective transport planning leads to fewer deaths and injuries, decreases air pollution, reduces social and economic isolation and encourages people to make healthier choices such as cycling and walking. Bury's Local Area Implementation Plan sits within the overall framework of the Third Local Transport Plan for Greater Manchester 2011-12 to 2015-16.

Facts and figures

- In 2012, only 39% of all urban trips under five miles made in England were by walking or cycling, with the average number of walking trips decreasing by 27% between 1995-96 and 2012 (Department of Transport National Travel Survey, 2012)
- At the end of 2013 there were 35 million vehicles licensed for use on the road in Great Britain. This was a 1.5% increase on 2012, the biggest annual increase since 2007. In the same year, 64% of all journeys were by car or van, 22% were by walking, 4.6% were by local bus (excluding London) and 1.5% were by bicycle (National Travel Survey, 2013).
- Although UK roads are considered to be among the safest in the world, cyclists and pedestrians remain particularly vulnerable road users. Between 2010 and 2012, the rate of children aged 0-15 years who were killed or seriously injured in road traffic accidents per 100,000 population was 21.5, compared to an England average of 20.7 (Bury Child Health Profile, Public Health England). Between 2011 and 2013, the rate of people killed or seriously injured in road traffic accidents was 26 per 100,000 population for Bury (Public Health Outcomes Framework). Although this is much lower than the rate for the North-West region (39 per 100,000) and for England (39 per 100,000), casualties affect individuals and their families and place a burden on local health services and efforts to minimise numbers are vital.
- In 2012 in Bury, about 5% of deaths in people aged 30 and over in were attributed to air pollution (Public Health Outcomes Framework). Assessment of the air quality in Bury has shown that it is below the national objective for nitrogen dioxide along primary road networks. The main local pollution source is road transport and the affected area has been designated as an Air Quality Management Area. As much of this is generated by motorway traffic, it is difficult for the Council to take steps to manage pollution levels. However, steps to encourage active travel through walking and cycling and reduced motor travel present potential benefits in terms of air quality, community safety, social inclusion, road safety and physical health.

The King's Fund suggests that local authorities:

- take positive action to promote and enable walking and cycling among their staff and local community.
- create safe, attractive and enjoyable local environments with roads that prioritise 'place' over cars to increase walkability.
- introduce 20mph speed zones where appropriate, prioritising densely populated areas with high accident rates, common urban destination areas and schools.

Warmer and Safer Homes

3.5

What's already happening in Bury?

Road safety

From 2013 to 2016, the Council is introducing 20mph limits to the majority of residential streets in Bury. This may involve up to 50 separate schemes with priority given to areas around schools and streets used as 'rat runs'.

Safe cycling

There are now 64 miles of highway cycle lanes in Bury and improved cycle parking facilities at Metrolink stations, schools and colleges.

Director of Public Health recommendations for the future:

- Develop and implement an Active Travel Strategy for Bury.
- Walking and cycling considerations should be embedded and prioritised within transport and landuse decision making. This could be furthered by committing to rejecting proposals whose impact on walking and cycling will not be positive.



Preventing Childhood Accidents

Why is this important?

Having access to safe and warm housing is vital for good health and wellbeing. There are three main areas where the Council and partners can deliver support that contributes to this goal: preventing childhood accidents; warm homes and energy efficiency; and reducing the risk of falls among older people.

Facts and figures

- Each year, thousands of children are injured or die as a result of accidents in the home. In Bury in 2012-13, the rate of hospital admissions for unintentional and deliberate injuries among 0-14 year olds was 134.9 per 10,000 of population, compared to an average rate of 103.8 per 10,000 for England (Bury Child Health Profile, Public Health England).
- The risk of unintentional injuries to children is greatest among those who are living in the most deprived circumstances. Influencing factors include overcrowded conditions, lack of safety equipment, socio-economic group, gender, ethnicity and a household's level of control over its home environment.

The King's Fund suggests that local authorities:

- implement guidance from the National Institute for Health and Care Excellence (NICE, 2010) and the 'Safe At Home' programme which includes provision and installation of safety equipment and training for staff.
- prioritise high-risk groups such as those with children under 5, those living in rented or overcrowded conditions and those on low incomes.

What's already happening in Bury?

The Health Visiting Service conducts routine assessments and visits under the framework of the Government's Healthy Child Programme for children up to the age of five. The Borough's Children's Centres play a key role in reaching families at greatest risk of home accidents and related injuries.

Greater Manchester Fire and Rescue Service offers free home safety checks, which could include fitting of a free smoke alarm in eligible homes.

Director of Public Health recommendations for the future:

- Develop and implement a childhood accident prevention action plan for Bury.

Warm Homes and Energy Efficiency

Facts and figures

- Living in a cold home increases the risk of cardiovascular disease, respiratory illness and stroke and is a key factor in excess winter deaths. In the period from 2010-13, there were 16% more deaths during the winter months than the average during non-winter months (Public Health Outcomes Framework).
- People's ability to keep their homes warm is related to their income. Fuel poverty affects a range of low income groups including older people, lone parents, long-term unemployed, people with disabilities, families where there is chronic illness and minority ethnic communities. In 2012, around 10.3% of Bury households were classified as in fuel poverty (Public Health Outcomes Framework).



The King's Fund suggests that local authorities:

- support vulnerable residents to access and benefit from warm home funding and related schemes.
- reduce the number of homes with poor energy efficiency ratings by installing better insulation, focusing on private rented and owner-occupied sectors.
- provide homeowners and landlords with advice on keeping houses warmer.
- help people reduce their energy bills by organising collective switching schemes targeting poorer consumers.

What's already happening in Bury?

The Greater Manchester Toasty Scheme helped over 1,400 residents in Bury to install insulation and 60 residents to install efficient heating measures.

Two collective fuel switching campaigns enabled 364 Bury households to switch energy suppliers, generating an average of £126 a year off their annual energy bills.

The Warm Homes Healthy People Fund enabled Bury Council to deliver two winter warmth schemes. The schemes paid for 285 home visits for the installation of winter warmth measures and provided over 1,000 winter warmth packs (cold alarms, thermal clothing, draught proofing materials and radiator reflector panels) for homes with residents aged over 75 or under five.

The Greater Manchester Little Bill Scheme has enabled the install of 216 energy efficiency measures (such as cavity wall, loft and external wall insulation and central heating) in 2014-15. This will save an estimated £45,000 annually off residents' energy bills which will help to reduce fuel poverty levels. Urban Renewal's Landlord Accreditation Officer promotes the Little Bill Scheme to registered landlords via newsletters and landlord forums. Urban Renewal Officers also make referrals directly to the Scheme.

Urban Renewal successfully bid to Public Health (£156,000 awarded in December 2014) for an 18-month funding package for targeting of energy efficiency measures. The scheme, which includes a customer contribution, is for residents who are experiencing fuel poverty or have a health condition that is exacerbated by living in cold conditions.

All Council houses have been improved to the Government's Decent Homes Standard by the 31 December 2010 deadline. This standard has been maintained since, with further commitment to enhance the quality of housing to a 'Bury Standard' given by Council in 2014, with over £12 million of additional capital investment committed to improving the housing stock.

Environmental Health Officers (EHOs) visit private-rented properties and houses of multiple occupation to carry out inspections regarding property condition. Category 1 hazards for Excess Cold are identified – the EHO will recommend measures and offer any retrofit grants that are available and may take enforcement action when necessary to bring these properties to a decent standard and lift them out of a Category 1 hazard. Landlords are also required to provide energy performance certificates (EPC) showing the energy efficiency ratings of their properties. This will give an indication of how affordable tenants' energy bills may be. Landlords are advised that their properties must meet the Government's minimum EPC rating of 'E' by April 2018, otherwise it will be illegal to rent their property (unless they have taken advantage of the maximum package of measures available under national grants). Procedures regarding Category 1 hazards including excess cold are to be improved to ensure accurate evaluation in the future.

Director of Public Health recommendations for the future:

- Explore and identify mechanisms for better identifying fuel poor households so schemes can be better targeted and benefits assessed.

Access to Green and Open Spaces and the Role of Leisure Services

3.6

Reducing the Risk of Falls among Older People

Facts and figures

- Nationally, more than one in five homes poses a risk to people living in them and the needs of a rapidly ageing population present specific challenges. The risk of falls increases in older age and it is estimated that in 2014, around 8,500 people aged 65 and over in Bury had a fall (Protecting Older People Population Information).
- Whilst Council housing is classed as 'decent' and other social housing is also likely to be 'decent', 85% of housing in Bury is either owner occupied or privately rented. In 2013, the BRE Housing Stock Modelling Service calculated that 21% of private sector housing in Bury had serious hazards and that the estimated cost to the NHS of poor private sector housing in Bury is over £5 million per annum.
- At retirement, older people on low incomes face a likely struggle for 20 years or more to repair and maintain their homes (Delivering Housing, Health and Social Care Priorities, Helping Vulnerable People and Local Communities, Chartered Institute of Environmental Health, 2011). Low cost work can make homes safe, secure and convenient to use and help reduce the strain on the NHS. For example, £35,000 can provide help with minor repairs or adaptations for 200 older people. It costs approximately the same amount for one older person to live in a care home for a year.

The King's Fund suggests that local authorities:

- work with NHS, social care, housing departments and other agencies to develop specific programmes to reduce falls.
- undertake targeted risk assessments and work with home improvement agencies to provide support to vulnerable people with aids and adaptations.
- provide handyperson schemes to help people improve the safety of their homes and link to hospital discharge schemes.

What's already happening in Bury?

Considerable work has gone and continues to go into improving the aids and adaptations service, whilst managing challenges around budgets, with strong collaboration and partnership working across multi-agency and multi-disciplinary teams. This includes the provision of adaptations into existing stock but also making the best use of stock for adaptations, through for example appropriate allocation policies and procedures.

Additionally, one of the objectives of the Housing Strategy 2014-2024 and requirements of the Care Act 2014 is to influence the market to recognise and support the specific housing needs of older people, people with disabilities and other groups.

As part of this, through a Joint Commissioning Partnership, joint work is undertaken with partner registered providers to help meet these needs, facilitating new specialist housing and where possible incorporating adaptations in new general housing developments.

Director of Public Health recommendations for the future:

- Ensure that the challenges around the Better Care Fund for adaptations and other assistance for safer homes are mitigated and that the opportunities presented by the Fund are realised.
- Significantly strengthen joint working around strategy and programmes relating to the reduction in falls associated with property condition.
- Map out the current services which tackle property condition linked to falls. Consider the development of services or programmes to tackle this issue, including in particular the development of handyperson schemes, and link these with hospital discharge schemes.
- Improve intelligence of specialist housing provision and projection of future needs across the Borough in order to identify and plan for future requirements.

Why is this important?

Access to green and open spaces and to leisure services has a direct and indirect impact on physical and mental health, including promoting the development of social networks and informal support.

Facts and figures

- Between March 2011 and February 2014, the proportion of the population in Bury who use outdoor space for health or exercise increased from 12.3% to 20.2%. The same period saw an increase from 12.0% to 16.7% in the North West and from 14.0% to 17.1% in England as a whole (Public Health Outcomes Framework).

The King's Fund suggests that local authorities:

- prioritise access to green space in planning developments.
- ensure parks are well maintained and that anti-social behaviour does not act as a disincentive for people to enjoy the space and derive health benefits from it.
- actively engage community groups and volunteers in the management and maintenance of green spaces.
- proactively plan the use of leisure facilities to maximise local residents' health.
- work with GPs to implement activities such as walking groups in green spaces.



What's already happening in Bury?

Sport and exercise

The GP referral scheme offers subsidised leisure centre membership, together with close monitoring and support to eligible residents.

Over 1,600 residents have an Active Lifestyle Discount Card (available to people in receipt of certain benefits, carers, people with disabilities and people aged 60 and over) which offers up to 50% discount on a range of leisure and sporting activities, library services and Council-owned allotments.

The 'I Will if You Will' project is working to encourage women and girls aged over 14 to participate in sport, including offering a wider range of activities and delivery times.

Targeted leisure activities and equipment are provided to specific groupings including men, women, older people and people with disabilities.

Parks and open spaces

Bury has 12 Green Flag-standard parks. Residents can enjoy facilities and also be involved in the parks' management.

The Borough, local community and businesses have been recognised for their commitment to regenerating the local environment by the planting of trees and shrubs, flowers and landscaping and also by dealing with environmental issues such as litter, graffiti and vandalism. Bury has won the 'Best Large Town' category in the North West in Bloom Awards for 11 years running and the Gold Medal Award for Britain in Bloom in 2013. In 2014, Radcliffe won a Gold Award for North West in Bloom for the fourth consecutive year.

The majority of the Borough's outdoor sports facilities and allotments are self-managed and there are 11 'Friends of' groups and a number of other environmental groups.

In September 2014, the Welly Café opened in Manchester Road Park, Bury. The Café has developed by Bury Employment Support and Training (Bury EST), a supported employment agency run by Bury Council. Bury EST helps people who find it difficult to find work or keep a job because of disability or disadvantage. Service users are from a variety of backgrounds

disabilities or autism, and those recovering from drug or alcohol dependencies. More than 35 service users and volunteers were involved in transforming an underused bowling green and pavilion into a community hub, café and training centre. The project now provides support and work experience and has been able to directly employ three service users. In addition to skills, qualifications and on-the-job training, the scheme has promoted improved health, mobility, confidence and self-esteem among service users.

Director of Public Health recommendations for the future:

- Undertake an equity audit to understand leisure centre use among different groups in the Borough.
- Develop a leisure centre 'without walls' approach to future provision.
- Expand the Welly Café concept across the Borough.
- Work with health and social care professionals to embed physical activity as part of prevention, treatment and care plans.
- Establish an annual walking festival in the Borough maximising use of green spaces.

Strong Communities, Wellbeing and Resilience

3.7

Why is this important?

Maintaining health and wellbeing enables individuals to maximise their potential, lead active, fulfilled lives and participate fully in their local community. Social support increases resilience, promotes recovery from illness and improves the chances of avoiding lifestyle risks such as smoking.

People who have poor social networks are less resilient to the health effects of social and economic disadvantage. Lack of social support and chronic loneliness produce long-term damage to physical health through raised stress hormones, lower immune function and poorer cardiovascular health. They also make it harder to build willpower and self-regulate behaviour, leading to engagement in unhealthy behaviours.

Facts and figures

- In 2013-14, 37% of adult social care users in Bury reported that they have as much social contact as they would like. This is lower than the England average of 45% (Adult Social Care Outcomes Framework).
- The Warwick-Edinburgh Mental Wellbeing scale was developed to enable the monitoring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing. During the period from 2010-12, the average score for the North West region was 36.2, compared to an England average of 37.7 (Public Health Outcomes Framework).





The King's Fund suggests that local authorities:

- support volunteering, for example through creating community champions, befriending schemes and social network interventions.
- develop an assets-based community development approach which includes community asset mapping.

What's already happening in Bury?

Bury Council takes an assets-based approach to improving community wellbeing - assets include social and voluntary groups, parks and buildings, community activities and local people.

Volunteering

The Council works with Bury Third Sector Development Agency (B3SDA) to promote volunteering and encourage people to get involved with local opportunities. In 2013-14, B3SDA awarded certificates to over 400 volunteers who had given either 50 or 100 hours in the preceding year. B3SDA has calculated that, in 2013, the third sector in Bury had over 800 groups, 1,000 full-time employees and 18,000 volunteers.

Community champions have been recruited to support a range of programmes, such as the Changing Lives Project (skills for further education, employment and life), I Will if You Will (getting women involved in physical activity) and Helping Yourself to Health (raising people's awareness of their own health and offering training in self-care techniques). In addition, the Council commissions a range of low-level activities which provide people with the opportunity to connect with their local community and others - these include befriending, lunch clubs and day services.

Asset-based community development (ABCD)

Partners have continued to work together to promote ABCD across the Borough, with more and more examples of ABCD being put into practice:

- **The Bury Directory** maps a range of local community assets including local groups, community projects and services. It provides an online, one-stop information point for advice, support, services, events, activities and more, for use by health and social care professionals, customers, patients and the general public. Development of the Bury Directory began in early 2014, with the site due to go live in March 2015.

- various **training and information-sharing** activities have taken place. Two bite-sized briefings for Councillors have taken place to introduce them to the ABCD approach. Working with the Greater Manchester Public Health Network, the Community Engagement for Health Group participated in a peer review process to help develop approaches to ABCD. A master class in ABCD has been held, facilitated by Cormack Russell from Nurture Development. Cormack is a key national and international advocate in the ABCD approach. This was attended by over 40 individuals from a range of agencies including some local councillors.
- over the past two years (2013-2014), work as part of the **Community First Programme** has continued in Bury East, Moorside, Radcliffe West and Radcliffe East. Community representatives have sought to build on their local strengths to support projects which help address local community priorities. Over £33,000 of funding was made available from the Office of Civil Society and the Cabinet Office during the lifetime of the programme.

- in October 2013, the Council worked with B3SDA to support its successful application to host two Community Organisers as part of the national **Community Organisers** Programme. The Programme was run by Locality, a leading network for community-led organisations. During 2014, the two Community Organisers worked in Radcliffe and Bury East, helping build relationships in communities, encouraging people to get involved and creating opportunities to seek change through collective action.
- **Participatory Budgeting** involves local people in making decisions on spending priorities and monitoring activity. For example, towards the end of 2014, Bury Council supported Greater Manchester Police to deliver a successful participatory budgeting event in Bury East where £15,000 was allocated to a range of local community projects.
- **Bury East Alcohol Prospectus Scheme** was a two-year project running until April 2014. The project involved work with the local community using participatory budgeting to allocate £90,000 of funding. A number of projects and initiatives were developed to address alcohol related anti-social behaviour and improve health and wellbeing. An end-of-project evaluation form submitted to the Department for Communities and Local Government highlighted a wide range of activities developed as a result of the project, including youth outreach and diversionary activities, education and awareness raising projects and work to support vulnerable people. Measurable reductions in alcohol-related anti-social behaviour were also reported.
- **'Our Place'** is part of the Government's approach to localism, transforming public services by making sure that they are focused on the user and not the organisation. Locally, 'Our Place Radcliffe' was created to improve health and wellbeing through community-led initiatives and projects. The initiative aims to support and enhance the Bury GP Federation's 'A Healthier Radcliffe' which is redesigning and reshaping local health and social care provision, including extended GP opening hours. In June 2014, 'Our Place Radcliffe' was awarded a further £17,000 to fund work in the local community. £7,000 of this was earmarked for local projects which promote health and wellbeing within Radcliffe, to be allocated using participatory budgeting.

- Township Forums set and drive local priorities for their area through the creation of three-year **Township Plans**. These plans are refreshed annually and progress updates are shared at each meeting. Examples of the types of projects which have been co-ordinated and delivered through Township Plans include:

- successful bid for £7,800 of Home Office funding for a diversionary project in Bury East working with young people. This project was delivered by Early Break with support from Bury Council.
- Radcliffe's Township Plan was used to support the successful bid to the national 'Our Place' scheme described above.
- Whitefield and Unsworth Township Forum has overseen a number of projects aimed at improving health and wellbeing. In particular, the Forum is working with the Alzheimer's Society on a project entitled 'Dementia Friendly Communities' which is being piloted in Whitefield.
- Prestwich Township Plan identifies town centre regeneration as a priority. The Prestwich Township Forum has a regeneration sub-group to oversee and develop this work. This has been supported by Bury Council through the allocation of £500k to help fund work on the A56 corridor. Public consultation will begin in summer 2015.
- Bury West Township Forum's highways sub-group has helped shape and promote a number of initiatives to help improve road safety across the Township area. These include the Street Safe initiative and Safer School projects.
- Ramsbottom, Tottington and North Manor (RTNM) Township Forum has helped facilitate four successful community right-to-bid nominations for community assets within the RTNM area (under the provisions of the Localism Act 2011).

Tackling social isolation

Bury Council is a core member of the delivery group responsible for securing in excess of £10 million for Greater Manchester to develop a programme around older-age social isolation. The programme is being led by Greater Manchester Centre for Voluntary Organisations. Three wards within the Borough (Moorside, Radcliffe North and St Mary's) will act as pilot areas for the overall programme. The focus in year 1 is upon the pilot wards across Manchester to help provide intelligence on social isolation, the causes and how this can be overcome. In years 2-5, alongside the community engagement, there will be the development of scaled delivery proposals based on learning in Year 1 with design input from local people. It is the intention of the Council to use the intelligence derived from this programme to help inform future strategic direction.

Alongside the Council's involvement with the Greater Manchester Ambition for Ageing programme, Bury has a Dementia-friendly Community programme run by the Alzheimer's Society. This is tackling the barriers that people in a specific ward may face when living with the condition.

Director of Public Health recommendations for the future:

- Adopt participatory budgeting methodology as a mainstream mechanism for allocating funds to local community initiatives and for engaging local people in resource allocation decisions.
- Ensure strong and sustainable support to maximise the role of the community and voluntary sector.
- Develop scaled and coherent mechanisms for community engagement and asset-based community development across all Team Bury partners.

Public Protection and Regulatory Services

38

Why is this important?

The local authority has a very important role to play in protecting the public from harm through the powers of inspection, regulation and licensing. These powers are used for example to ensure healthy and safe food provision, improve air quality, ensure safe business practices, prevent the sale of unsafe and illegal goods, including illicit tobacco, and tackle anti-social behaviour.

Facts and figures

- There are more than 1,500 registered food businesses in Bury and each is subject to an annual risk-based inspection programme. Bury also supports the National Food Hygiene Rating Scheme which informs the public about hygiene standards in food businesses.
- In 2013-14, there were 125 accidental dwelling fires in Bury. By far the most common cause of fire was cooking-related which accounted for 40% of incidents. In 2014-15 there were 112 accidental dwelling fires and cooking-related causes again accounted for 40% of incidents (Greater Manchester Fire and Rescue Service).

The King's Fund suggests that local authorities:

- reduce the negative impacts of takeaways and fast foods on health, through education, award schemes and planning restrictions.
- reduce the negative impact of air pollution through, for example, engagement with businesses, setting up car clubs, and promoting fuel-efficient driving, active travel and other carbon reduction measures.
- work with Fire and Rescue Services to reduce accidental dwelling fires.



What's already happening in Bury?

Healthy food

Four Bury premises have achieved the Greater Manchester Health Catering Award. The Award recognises catering businesses which have demonstrated a commitment to reducing the level of saturated fat, sugar and salt in food and drinks.

The Golden Apple Award is delivered jointly by the Council's Environmental Health Service and the Nutrition and Dietetic Service of NHS Pennine Care. During 2013 and 2014, it worked with the Borough's early years services and Children's Centres to promote healthy eating and good oral health care. It has also developed a resource pack for child minders.

Health and Spatial Planning

39

Protecting the population

A review of the partnership model to address domestic violence abuse in the Borough was undertaken and the findings were presented to the Community Safety Partnership. A refreshed Domestic Violence Strategy and supporting action plan are to be developed in 2015.



Bury is part of a multi-agency collaboration for Greater Manchester to tackle child sexual exploitation. Project Phoenix aims to be a national leader in its approach to protect young people and prosecute offenders.

The aims of the project are to raise awareness of child sexual exploitation; help people recognise the signs; encourage people to report it; and provide support to victims and those most at risk.

Through the Retail Violence Initiative, the Council's Environmental Health Officers work with Crime Reduction Specialists from Greater Manchester Police to provide post-robbery advice visits and targeted robbery prevention advice for vulnerable businesses. This is part of an AGMA-wide initiative which aims to reduce crime and disorder, raise safety and security standards in high-risk businesses and reduce fear and perceptions of crime among the public.

Air pollution

The Council's fleet includes 66% Euro 4 and 24% Euro 5 (lower emission levels) vehicles, refuse collection vehicles with systems to reduce fuel consumption and a number of electric-powered vehicles. More than 100 Council drivers have received Eco Driver training as part of the Driver Certificate of Professional Competence (CPC) training requirements for drivers of lorries, buses and coaches.

Greater Manchester's Freight Quality Partnership is working with the freight industry and other stakeholders to reduce freight mileage through improved maps and signage and encouraging use of rail rather than road.

Transport for Greater Manchester has received funding to promote low-carbon commuting and a Greater Manchester car-sharing database has been launched. Electric vehicle charging points were installed in seven Council-owned car parks in 2013.

Bury Council monitors air quality at 11 locations in the Borough. The Council has worked to reduce carbon emissions by installing new boilers in schools and privately-owned houses and by taking steps to reduce carbon emissions from Council activities.

Regulations

Fire safety measures include inspections of electrical goods sold at second-hand and charity shops, a survey of e-cigarettes, investigation of complaints about sub-standard electrical goods and seizure of counterfeit phone chargers.

The Council has led or participated in campaigns and programmes including a joint initiative with Greater Manchester Police to protect businesses from violence; advice and training on workplace health and safety; tobacco control and smoking cessation activities; and information, advice and monitoring about money lending, credit advertising and doorstep crime.

Director of Public Health recommendations for the future:

- Introduce restrictions to limit the provision and concentration of takeaways, particularly near schools.
- Bury's Air Quality Action Plan (2002) needs to be updated and linked to an Active Travel Strategy.
- Work with partners, businesses and communities to develop and implement a strategy to limit and mitigate the effects of climate change.
- Develop a multi-agency sustainable development strategy for the Borough

Why is this important?

The National Planning Policy Framework (NPPF) states that the planning system plays an important role in facilitating social interaction and creating healthy, inclusive communities. In addition, it indicates that planning should take account of and support local strategies to improve health, social and cultural wellbeing for all, and deliver sufficient community and cultural facilities and services to meet local needs.

In support of the NPPF, the Government's Planning Practice Guidance (PPG) outlines that local planning authorities should ensure that health and wellbeing and health infrastructure are considered in local and neighbourhood plans and in planning decision making. Public health organisations are advised to use the PPG in helping them work effectively with local planning authorities to help promote healthy communities and support appropriate health infrastructure.

The way in which places are planned affects many aspects of health. The King's Fund guide cites evidence from a range of sources. For example, a higher density of shops and schools in a neighbourhood can promote active travel and therefore better physical and mental health. Well-planned green space has many positive effects, including increasing physical activity levels; lowering flood risk and associated psychological distress; and reducing noise and air pollution.

Facts and figures

- Evidence in the Council's Community Facilities Topic Paper 2013 demonstrates that the Borough has a sufficient level and distribution of community facilities which support the existing settlement pattern and growth aspirations for focusing new development in Bury and Radcliffe. Demand for these facilities may increase as a consequence of housing growth and it will be important to monitor this and phase necessary improvements correctly.
- In the case of open space, sport and recreation facilities, the Greenspace Audit and Strategy 2015 records major deficiencies in particular types of open space in a number of areas across the Borough, such as for natural greenspace and allotments. Quality of facilities is also below the required standard across much of the Borough and consequently the enhancement of open spaces represents the key focus for the spending of Section 106 monies as part of new housing developments.
- Bury's JSNA recognises that the planning system can contribute to health and wellbeing by addressing areas of deprivation and by encouraging and enabling people to take responsibility for their own health and wellbeing.

Health and Social Care

3.10

The King's Fund suggests that local authorities:

- use the Spatial Planning and Health Group checklist (SPAHG, 2011) when scrutinising planning strategies, plans and proposals.
- employ accessibility criteria in planning policy, for example new homes are walkable distances from local shops.
- carry out robust health impact assessments.

What's already happening in Bury?

Bury Council's spatial planning approach is set out in its Unitary Development Plan (UDP), which was adopted in 1997 and remains the Borough's statutory development plan, together with a range of Supplementary Planning Documents (SPDs) which provide supporting advice. These documents include social, economic and environmental policies which have a direct and indirect influence on health; for example SPD1 relates to Open Space, Sport and Recreation Provision in New Housing Development.

Bury Council submitted its Core Strategy to the Secretary of State for examination in December 2013. The Core Strategy was withdrawn in March 2015 following the suspension of the Examination in Public in June 2014, when AGMA announced that its Greater Manchester Spatial Framework (GMSF) would be upgraded from an informal, evidence-based document to a statutory development plan for the Greater Manchester area. AGMA Councils' individual strategies will need to take account of the Framework. The Council's UDP continues to be the Borough's statutory plan and the intention is to prepare a new Local Plan which will run alongside the development of the GMSF.

Director of Public Health recommendations for the future:

- Adopt the Spatial Planning and Health Group Checklist.
- Embed Health Impact Assessment within the planning process.

Why is this important?

An ageing population, more people with multiple long-term conditions and clinical and technological advances are combining to put increasing pressure on the health and social care system, exacerbated by an era of financial austerity.

This has stimulated a need to better integrate services across the health and social care system and to place greater emphasis on the prevention of ill health and promotion of independence.

Facts and figures

- Bury's JSNA states that the Borough has 31,000 residents aged 65 and over (17% of total population). Of these, 3,700 are aged 85 and over (2% of the total population). The numbers of older people and the proportion of the total population aged 65 and over are expected to increase over the coming years. It is expected that Bury's older population will increase to nearly 47,000 people by 2035. This will represent 21% of the projected total population in 2035. People aged 85 and over will more than double over the same period (from 3,900 to 8,900).
- The difference in life expectancy between the most and least deprived areas is almost 6 years. Premature mortality is higher than would be expected, given the levels of deprivation in Bury. This suggests that the health and social care system, particularly primary care, could have a significant impact on improving health.
- The JSNA also highlights that the likelihood of disease and disability increases with age. Disability prevalence increases from 6% in children to 16% in the working population and 45% in those of retirement age. It is estimated that there are 2,000 people aged over 65 living with dementia - this will rise as with the projected increase in population aged 65 and over. Fulfilling a caring role has a higher impact on older residents with the majority of carers in Bury aged 55 and over.
- Social isolation is known to be a significant risk to health. Older people are particularly vulnerable to isolation. 61% of over 65s in Bury live alone.

King's Fund suggestions:

The King's Fund produced an evidence summary 'Making best use of the Better Care Fund' in January 2014. It outlines the key interventions necessary to create a financially sustainable system which delivers better outcomes for the population, namely:

- a focus on primary prevention;
- promotion of self care;
- active management of long-term conditions in primary care;
- risk stratification and predictive modelling;
- falls prevention;
- care co-ordination and case management;
- provision of intermediate care, reablement and rehabilitation;
- hospital discharge planning and post-discharge support;
- medicines management;
- integration of services for those with mental and physical health needs; and
- improved management of end-of-life care.



Conclusion

What's already happening in Bury?

Better Care Fund

The Better Care Fund was announced by Government in June 2013. The purpose of the Fund is to speed up the local integration of health and social care so that people can have personalised care closer to home. This should, in turn, reduce the number of unplanned admissions to hospitals. The Fund pools a number of separate budgets previously held by the CCG, NHS and local authorities for a range of health and social care provisions including reablement, carers' breaks and disabled facilities grants. Each local authority's health and wellbeing board was required to produce a local plan which sets out its vision and plans for the Fund. Bury's plan set out its ambitions to further promote self-care and personal accountability of people for their own health needs. This will support people appropriately and enable them to live in their own homes and communities. Bury's vision is that:

- people will live well, stay well, remain active and have better outcomes and experiences;
- there will be a focus on citizenship, prevention, self-care and independence with the aim of reducing the demand for services and making efficient and effective use of both health and social care resources;
- Better Care Fund Schemes will focus on integrated care delivery for the frail elderly and children with complex needs;
- Bury will provide better support for people at home with the provision of co-ordinated services in their own communities to prevent people needing emergency care in hospital or being inappropriately admitted to care homes;
- in order to achieve the cultural shift that will be necessary, Bury service providers will have to utilise their workforce more effectively, considering skill mix, reorientation and training opportunities for staff.

A Healthier Radcliffe

The township of Radcliffe is providing a test-bed for new ways of working. Having successfully secured funding to extend GP opening hours, the six GP practices in Radcliffe have collaborated to extend their opening hours up to 8pm on weekdays and 8am to 6pm on Saturdays and Sundays. To enable this, they have worked to create a shared patient record system.

In addition, health and social care community-based services have started to work more closely together and are piloting a range of schemes aimed at keeping people well and supporting people to remain in their own homes. Evaluation of this work will inform developments across the rest of Bury.

Director of Public Health recommendations for the future:

- Review and redesign existing health improvement services to create a single, holistic, healthy lifestyle service.
- Develop and implement a system-wide cohesive digital self-care offer which supports individuals to adopt healthier lifestyles, self-treat minor ailments and self-manage long-term conditions.
- Embed systematic, scaled primary and secondary prevention within primary care.
- Further develop the Healthy Living Pharmacy scheme.
- Review intermediate care and reablement services to create a greater focus on promotion of independence and rehabilitation.
- Develop a place-based approach to provision of health and social care, linking to wider services and enabling closer engagement of communities.



This report highlights the significant contribution that Bury Council, working with partners and local communities, is making to improve the health of the people of Bury. However there are still some aspects where health outcomes continue to fall short compared to the England average. These include healthy life expectancy especially for females; infant mortality; hospital admissions caused by unintentional and deliberate injuries to children; and premature mortality due to cardiovascular diseases, respiratory conditions and cancers. Furthermore these poor outcomes are not felt uniformly across the Borough. In a borough of 9,948 hectares and 185,060 population, there is a 6.7 year gap in life expectancy for men and an 11.3 year gap in life expectancy for women between those living in the more deprived areas and those living in more affluent areas.



Passion and ambition for this challenge exist and are vital to deliver this agenda but there is a need to bring precision to that passion. We need to develop a much more detailed and rich understanding of the local population, based not only on statistics but also on people's stories so that we can target scarce resources most effectively; we need to understand and apply what is known to work but also be brave enough to innovate and evaluate; we need to ensure that everything we do is purposefully designed to maximise the positive impact on health and minimise the

negative; and finally we need to create the conditions which enable people to play a full and effective role in improving their own, their families' and their communities' health.

There is need for a transformational scaling up of action on prevention if we are to achieve the step change in health improvements that we all desire. Action on prevention needs to be both universal (for example engaging and working with all schools, workplaces, GP practices, pharmacists and neighbourhoods) and targeted with interventions tailored to meet the specific needs of defined cohorts of the population who require more than the universal offer.

Such transformational change cannot be achieved overnight but the journey in Bury has begun ...

Appendix 1

Update on Recommendations from 2012 Annual Report

The 2012 Public Health Annual Report focused on three key public health areas - **smoking, weight** and **alcohol**.

It set out a number of recommendations and progress against each is set out over the next 5 pages.



Smoking



Recommendation:	Encourage Government to introduce further measures to protect the public from second-hand smoke such as banning smoking in cars when children are present.
Update:	Parliament has passed regulations to end smoking in cars carrying children in England and these come into effect on 1st October 2015. The regulations make it an offence to smoke in a private vehicle with someone under 18 years old present, and for a driver to fail to prevent smoking in a private vehicle with someone under 18 years old present. People who fail to comply could be issued with a £50 fixed penalty notice.
Recommendation:	Greater Manchester Pension Fund should disinvest in the tobacco industry.
Update:	Greater Manchester Pension Fund currently has no direct holdings in tobacco companies.
Recommendation:	Give financial incentives for schools to achieve a target prevalence of smoking.
Update:	Financial incentives have not been offered. However, the Council funded an internet-based educational programme called Operation Smokestorm for use in the school year 2013-14. The programme highlights health harms associated with tobacco, ethical issues around illicit tobacco production and how tobacco companies market their products. After positive feedback from pilot schools, a further six schools accessed the programme in the 2014-15 academic year. The Council is now developing a broader 'Healthy Schools' programme to help improve the health of school-aged children.
Recommendation:	Offer rewards for information leading to the discovery of the sale of illicit tobacco.
Update:	This has not been necessary. Bury Trading Standards receives intelligence from various sources around illicit tobacco. Supported by Public Health, Trading Standards seizures from commercial and residential properties amounted to: <ul style="list-style-type: none"> • 2013/2014 - cigarettes £9,224, tobacco £5,502, blunts and cyclones £636 - total £15,362. • 2014/2015 - cigarettes - £22,088, tobacco £5,726, blunts and cyclones £510 - total £28,324. This is based on values of £8 for a packet of cigarettes, £14 for a pouch of tobacco and £2 for a blunt or cyclone. Year on year, this is a 235% increase in seizures of cigarettes. The cigarettes and hand-rolling tobacco are a mixture of counterfeit and 'none duty'.

Recommendation:	Offer nicotine patches to offenders who are detained for any length of time in police custody.
Update:	NHS England commissions comprehensive public health services for offenders including support to stop smoking.
Recommendation:	Re-establish the pregnancy reward scheme.
Update:	A review is underway to look at how smoking in pregnancy can be further reduced and a reward scheme will be considered within that review.
Recommendation:	Commission a stop-smoking service that allows people to make contact at any time to arrange an appointment.
Update:	Bury Stop Smoking Services are currently being redesigned and improving access to cessation support will be key to this.
Recommendation:	The clinician and patient should be able choose the stop smoking medication, if the evidence has shown its effectiveness, that they feel is most likely to succeed.
Update:	Choice of medication is governed by locally relevant policies, informed by NICE guidance.
Recommendation:	Introduce a text messaging service to support quitters.
Update:	A text messaging service has been piloted within alcohol and drug services. The learning from this will be used to support other aspects of health-related behaviour change including quitting smoking.
Recommendation:	Work with vets and pet shop owners to make pet owners more aware of the dangers of second-hand smoking to their pets.
Update:	This has not been progressed.
Recommendation:	Encourage primary care to make wider use of leaflets, aimed at parents, which explain the dangers of second-hand smoking when their children have glue ear, tonsillitis or asthma.
Update:	Health visitors proactively provide information and education to parents about the dangers of second-hand smoking.
Recommendation:	Recommission the Greater Manchester Health Bus.
Update:	The health bus was a vehicle for community awareness raising. Bury Council now has local capacity to undertake much more effective and targeted awareness raising and engagement with the public so the health bus is no longer required.

Weight

Recommendation:	Encourage Government to introduce a 'fat tax' and other measures to reduce the obesogenic environment.
Update:	Directors of Public Health across the North West published a Manifesto for the Public's Health in July 2014. It called for a range of measures to help reduce obesity, including a tax on sugar-sweetened beverages. They also commission 'Food Active' to focus on population-level interventions to address social, environmental, economic and legislative factors which influence people's ability to make behaviour change.
Recommendation:	The Local Authority should stop selling sugar-sweetened drinks on its premises and stop providing biscuits at its meetings.
Update:	Although the Council still sells snacks and sugared drinks in its vending machines, it also sells a range of options such as water and non-sugared drinks. Vending will continue to be reviewed.
Recommendation:	Fully implement the Breastfeeding Strategy for Bury.
Update:	Bury Breastfeeding Strategy Group is overseeing and actively implementing the Breastfeeding Strategy.
Recommendation:	Further promote healthy school meals.
Update:	Bury has adopted a healthy schools meals policy. A number of schools and the sites of Bury College have achieved the Greater Manchester Healthy Catering Standard.
Recommendation:	Build on present initiatives to increase physical activity amongst schoolchildren.
Update:	The North West Directors of Public Health Manifesto, 'Top Ten for Number Ten', called for Government to require all schools to provide a minimum of one hour of physical activity to all pupils every day in line with UK physical activity guidelines for 5-18 year olds. In February 2014, the previous Coalition Government announced additional funding for PE and sport in primary schools. Bury Council's 'I Will if You Will Programme' has been successful in getting more women aged 14 and over to be physically active. Sport England has awarded a further grant of £2m for the project to be extended in 2015 and 2016. Phase 2 will focus on sustaining physical activity levels in local communities. Bury Leisure aims to maximise the benefit of outdoor spaces for physical activities by increasing opportunities for sport and leisure in parks and countryside areas.



Recommendation:	Recognise GPs' central role in encouraging overweight and obese patients to tackle their weight and promote motivational interviewing.
Update:	A risk assessment around weight is included in the NHS Health Checks programme aimed at those aged 45-74. Uptake of NHS Health Checks in the eligible population was 76.5%.
Recommendation:	Weight management before bariatric surgery should primarily be seen as a way of reducing operative risk.
Update:	NHS England is now responsible for commissioning this service (Level 4). There is a need to further review weight management pathways in light of the new commissioning arrangements.
Recommendation:	Specialised weight management should be offered to those whose weight is an immediate risk to their health.
Update:	Specialist Weight Management Services (Level 3) are now commissioned by Bury CCG. There is a need to further review weight management pathways in light of the new commissioning arrangements.

Alcohol

Recommendation:	Support the introduction of a minimum price for alcohol of at least 50p to be uplifted for inflation and increase in income, whichever is higher.
Update:	The North West Directors of Public Health Manifesto, 'Top Ten for Number Ten', called for Government to introduce minimum pricing to tackle alcohol-related harm and improve health and social outcomes.
Recommendation:	Use the licensing regulations to protect public health.
Update:	Under legislative changes and following NHS reforms, Public Health has increased its engagement and participation in the licensing process, lodging objections to a number of full licence applications or variations to the conditions of an existing licence.
Recommendation:	Build on work that has reduced alcohol consumption amongst children.
Update:	The recent North West Trading Standards survey shows consumption of alcohol and tobacco are falling among school-aged children. A holistic healthy schools programme is being developed which will focus on reducing alcohol consumption alongside other health issues.
Recommendation:	Promote the use of screening and brief intervention in General Practice.
Update:	NHS England commissions an alcohol-related risk reduction scheme (DES) from GP practices. A risk assessment around alcohol use is included in the NHS Health Checks programme aimed at those aged 45-74.
Recommendation:	Introduce routine screening for problem drinking in police custody.
Update:	There is a drug and alcohol worker based within the custody suite. As well as carrying out mandatory assessments to individuals testing positive for Class A drug use, workers also carry out 'cell sweeps' to identify people where alcohol may or may not have been a contributing factor and offer assessment, support and signposting.
Recommendation:	Increase secondary care work on alcohol, building on the service that is now in the Accident and Emergency Department.
Update:	Bury CCG reviewed the Accident and Emergency Alcohol Liaison Service, which identified and supported those needing help with alcohol misuse, along with the Rapid Assessment Interface and Discharge (RAID) Service. The CCG has now commissioned Accident and Emergency provision which incorporates elements of both services.
Recommendation:	Encourage the development of policies elsewhere to tackle alcohol problems, for example with the Fire and Rescue Service, Six Town Housing and employers.
Update:	Fire and Rescue Service delivers Alcohol Brief Interventions.



Appendix 2

List of Contributors



Ian Bailey	Group Manager (Oldham, Rochdale and Bury), Greater Manchester Fire and Rescue Service
Anna Barclay	Public Health Analyst, Department for Communities and Wellbeing, Bury Council
Lee Buggie	Principal Physical Activity Development Officer, Department for Communities and Wellbeing, Bury Council
Derek Burke	Chief Officer, Bury Third Sector Development Agency (B3SDA)
John Campbell	Strategic Planning and Development Manager, Department for Communities and Wellbeing, Bury Council
Marcus Connor	Corporate Policy Manager, Department for Communities and Wellbeing, Bury Council
Heather Crozier	Social Development Manager, Department for Communities and Wellbeing, Bury Council
Lesley Davidson	Anti-bullying Co-ordinator, Department for Children, Young People and Culture, Bury Council
Sue Dickinson	Lead Officer (Sufficiency and Information), Department for Children, Young People and Culture, Bury Council
Maureen Foden	Business Support and PA (Public Health), Department for Communities and Wellbeing, Bury Council
David Fowler	Assistant Director (Localities), Department for Resources and Regulation, Bury Council
Andrea Gorton	Principal Advisor (Occupational Health & Wellbeing), Department for Resources and Regulation, Bury Council
Diane Halton	Service Manager for Public Health, Department for Communities and Wellbeing, Bury Council
Sharon Hanbury	Head of Urban Renewal, Department for Communities and Wellbeing, Bury Council
Steve Hoyle	Principal Environmental Health Manager, Department for Communities and Wellbeing, Bury Council
Andrew Johnston	Environmental Health Manager, Department for Communities and Wellbeing, Bury Council
Crispian Logue	Principal Planning Officer, Department for Resources and Regulation, Bury Council

Neil Long	Assistant Director (Operations), Department for Communities and Wellbeing, Bury Council
Cindy Lowthian	Communities Manager, Department for Communities and Wellbeing, Bury Council
Christine Maksymowski	Township Co-ordinator, Department for Communities and Wellbeing, Bury Council
Sarah Marshall	Performance Officer (Performance and Intelligence), Department for Communities and Wellbeing, Bury Council
Chloe McCann	Assistant Improvement Advisor (Corporate Policy), Department for Communities and Wellbeing, Bury Council
Gráinne McClean	Improvement Advisor (Corporate Policy), Department for Communities and Wellbeing, Bury Council
Steph Mitchell	Health Improvement Specialist (Women's and Children's), Department for Communities and Wellbeing, Bury Council
Ann Norleigh Noi	Senior Partnership Implementation Officer, Department for Communities and Wellbeing, Bury Council
Susan Reynolds	Head of Early Years and Early Help, Department for Children, Young People and Culture, Bury Council
Sarah-Jayne Rushton	Customer Engagement Co-ordinator, Department for Communities and Wellbeing, Bury Council
Helen Smith	Public Health and Social Care Intelligence Manager, Department for Communities and Wellbeing, Bury Council
Michelle Stott	Housing Development and Policy Officer (Urban Renewal), Department for Communities and Wellbeing, Bury Council
Liz Trayford	Planning and Research Officer, Department for Children, Young People and Culture, Bury Council
Karen Whitehead	Strategic Lead (Health and Families), Department for Children, Young People and Culture, Bury Council
Michael Whitehead	Senior Planning Officer, Department for Resources and Regulation, Bury Council
Karen Young	Head of Inclusion, Department for Communities and Wellbeing, Bury Council

REPORT FOR DECISION



DECISION OF:	CABINET
DATE:	14 OCTOBER 2015
SUBJECT:	CULTURAL ECONOMY STRATEGY 2015-18 AND ACTION PLAN
REPORT FROM:	CABINET MEMBER FOR CHILDREN, FAMILIES AND CULTURE
CONTACT OFFICER:	IAN CHAMBERS ASSISTANT DIRECTOR (LEARNING & CULTURE)
TYPE OF DECISION:	CABINET (KEY DECISION)
FREEDOM OF INFORMATION/STATUS:	This paper is within the public domain.
SUMMARY:	<p>The Cultural Economy is one of the fastest growing sectors internationally. There are significant financial and employment benefits for areas with a thriving cultural economy; together with intangible benefits resulting from greater civic pride, community cohesion and better health and wellbeing of the population.</p> <p>This Strategy will help Bury to build on its existing assets, promoting a stronger cultural economy in the future.</p> <p>With increasing pressure on resources, the Strategy will seek to maximise the benefits to the Borough, by encouraging greater partnership working with all involved in this sector.</p>
OPTIONS & RECOMMENDED OPTION	<p>Option 1: To approve the Cultural Economy Strategy and associated Action Plan. This is the recommended option as it gives clear focus and direction to the cultural economy sector in the Borough for the next three years.</p> <p>Option 2: Do not approve the Strategy and Action Plan. This would leave the Council without a strategy to increase the benefits to the Borough associated with having a strong cultural economy.</p>

IMPLICATIONS:		
Corporate Aims/Policy Framework:	Do the proposals accord with the Policy Framework? Yes	
Statement by the S151 Officer: Financial Implications and Risk Considerations:		
Health and Safety	There are no health and safety issues arising directly from this draft Strategy. Any changes in services or operating practice will be subject to risk assessments and implemented in line with existing policy.	
Statement by Executive Director of Resources:		
Equality/Diversity implications:	The Strategy provides a framework for the future and does not directly impact on any specific group. The implications for people with protected characteristics will be assessed when detailed proposals are brought forward as part of the delivery of key projects in the Action plan.	
Considered by Monitoring Officer:	Yes	JH
Wards Affected:	All	
Scrutiny Interest:	Overview and Scrutiny	

TRACKING/PROCESS

DIRECTOR: Executive Director for Children, Young People and Culture

Chief Executive/ Strategic Leadership Team	Executive Member/Chair	Ward Members	Partners
21.09.15			
Scrutiny Committee	Committee	Council	
	14.10.15		

1. INTRODUCTION

- 1.1 Internationally, the cultural economy is one of the fastest growing sectors. It can support local economies, bring in employment and income, and increase civic pride and community cohesion.
- 1.2 As has been the case with a number of recent strategies, this document does not follow a traditional format. Reflecting the Council’s need to streamline the services it provides, the Strategy has been cut back to focus on the key objectives which we need to achieve in order to build a successful cultural economy in the Borough.

- 1.3 Bury already has a strong identity and reputation as a popular visitor location, with attractions such as Bury Art Gallery, Museum and Sculpture Centre, Bury Cultural Collection (Archives), Bury Market, The Fusiliers Museum, the East Lancashire Railway(ELR) and the Met helping to build the Borough's identity.
- 1.4 As a result, the Borough has achieved regional, national and international recognition including:
- Bury Town Centre obtaining Purple Flag status in 2015;
 - Bury Market winning 'Market of the Year' in 2015;
 - ELR was awarded Lancashire Tourism 'Large Visitor Attraction of the Year' Award in 2014
 - The Met won 'Best Entertainment Venue' at the 2014 Manchester Tourism Awards
 - International acclaim for the Art Gallery programme and cultural trading practices
 - Ramsbottom runner up in the Daily Telegraph's 2014 'High Street of the Year' survey and it hosts one of Europe's top Chocolate Festivals
 - Bury has won 'Best Large Town' category in the North West for 11 years running
 - Radcliffe winning the Gold Award for North West in Bloom for the fourth consecutive year in 2014.
- 1.5 It is important to build on these successes and assets, and this Strategy will help to support and co-ordinate activity to achieve this.
- 1.6 The Strategy has been developed in consultation with the Cultural Economy Group which includes key representatives from the organisations listed in 1.3 as well as other commercial partners and Council officers. A draft Strategy was presented to the Council's Strategic Leadership Group on 8 July 2015 and, as a result of feedback from that meeting, further consultation has taken place with the Cultural Economy group members and an Action Plan has been developed to set out specific activities and timescales.

2. CULTURAL ECONOMY STRATEGY OBJECTIVES 2015-2018

- 2.1 The Strategy is framed by Bury Council's vision, purpose and values to '*lead, shape and maintain a prosperous, sustainable Bury that is fit for the future*'. In order to make the most of our existing assets and maximise the opportunities available to the Council, the Strategy is based around three key objectives.

Leadership and Innovation - Building Bury's reputation as a cultural centre

At the heart of the town's cultural quarter is Bury's Art Gallery, Museum and Sculpture Centre. Particularly in recent years, it has gained an increasing regional, national and international reputation for the quality of the exhibitions it has been able to attract and for the successes it has had leading multi-authority exhibitions to places like China. It is important for this reputation to be maintained and new opportunities identified. Not only will this reinforce the Art Gallery's reputation, but it will also bring about economic benefits for the surrounding outlets and services.

Developing talent and entrepreneurship

It is essential to identify and build upon talent and skills to create a sustainable, healthy cultural economy which benefits residents through employment, learning

and leisure. This objective also identifies the intention to communicate and maximise benefits to businesses and service providers of major events in the Borough and the North West, such as the Borough's successful festivals, Bury's hosting of the European Network of Cultural Centres Conference in 2016 and Manchester's status as European City of Science in 2016.

Making the most of the Borough's cultural offer

It is important to recognise that the Council cannot achieve all of its ambitions on its own. Whilst it has an important role to play in the development of the cultural economy, it is essential that work is done in partnership with other agencies. By working collectively we will be able to promote the multitude of attractions, festivals and events with the Borough and maximise new opportunities which will enhance the cultural economy.

- 2.2 Within the Strategy a number of actions have been identified against each objective. The Cultural Economy Action Plan sets out for each action the key projects, outputs and milestones that will be taken forward to deliver the objectives. Alongside will also be developed by the Cultural Economy Group a number of measures of success, such as visitor spend; numbers employed in tourism; income generated by Bury Art Gallery, Museum and Sculpture Centre; and national recognition of the Borough's cultural assets through retention of existing and achievement of new awards and endorsements.

3. FINANCIAL IMPLICATIONS

- 3.1 The Strategy has no direct financial implications for the Council but provides guidance to managers in respect of prioritising the use of resources.
- 3.2 By working with partners to develop the cultural economy, there is a recognition of the wider economic benefits to be derived from increased visitor numbers, a thriving retail and leisure sector and increased employment opportunities. Expenditure by visitors to Bury rose from £238million in 2009 to over £302million in 2012. Further increasing income from Bury's cultural assets is central to the Council's priorities for growth and investment and the Greater Manchester Strategy for the Visitor Economy and these actions fully support that approach.

4. RISKS

- 4.1 There is no identified risk to introducing a strategy subject to continued support to the priorities from the Council and its partners.
- 4.2 The absence of a strategy however does carry risks. Bury is building a healthy reputation as a cultural and visitor destination but faces strong competition from other areas. With public funding continuing to be limited in future years, it is important to focus activities in those aspects that will make most difference. The strategy sets out a direction of travel that is transparent to partners and external investors (to guide future growth) and minimise the risk of unplanned developments.

5. EQUALITY AND DIVERSITY ISSUES

- 5.1 There are no direct equality issues arising from this report. These will be identified and assessed when detailed proposals are brought forward as part of the delivery of key projects in the Action plan.

6. CONCLUSIONS AND RECOMMENDATIONS

- 6.1 Bury has already established a reputation as a cultural centre and visitor destination. It is essential that this status is maintained and developed in the future to contribute to growth in the Borough.
- 6.2 This Strategy provides a strong focus and foundation for the co-ordination of future cultural economy initiatives.
- 6.3 It is recommended that Cabinet approves the Cultural Economy Strategy and associated Action Plan.
-

List of Background Papers:-

Cultural Economy Strategy 2015-18
Cultural Economy Action Plan 2015-16
Economic Strategy for Bury 2010-2018

Contact Details:

Ian Chambers
Assistant Director (Learning and Culture)
Children, Young People and Culture
Tel: 0161 253 5477
Email: i.chambers@bury.gov.uk

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Bury Council Cultural Economy Strategy 2015 - 2018

*Developing economic growth through arts
and culture*

Foreword

Globally, the cultural economy is one of the fastest growing sectors. In addition to bringing employment and income, cultural activities promote civic pride and strengthen community cohesion and contribute to health and wellbeing.

Bury Council's vision, purpose and values look to '*lead, shape and maintain a prosperous, sustainable Bury that is fit for the future*'. A vibrant cultural economy will make a vital contribution to this aim. The Borough has a wealth of creative talent and cultural assets which offer opportunities to generate income and promote community prosperity. We value our cultural diversity, built heritage, natural environment and range of visitor attractions and services. They are a resource for the residents of the Borough and also for the many people who visit us for day trips or longer stays. A vibrant cultural economy will generate economic benefit; celebrate diversity; identify and nurture talent; and support community cohesion.

We want to build on our strengths and raise the regional, national and international profile of the Borough as a cultural destination. This Strategy will promote sustainable economic growth from our natural, built and community assets. It reflects the ambition of the Economic Strategy for Bury 2010-2018, to achieve '*increased recognition and quality of Bury's local tourism and cultural products and better linkages between local attractions leading to more visitor and resident spend*'.

We have identified three key objectives which make the most of existing assets and emerging opportunities:

- *a leadership position in UK cultural economy innovation*
- *contributing to local economic prosperity and employment opportunities*
- *Making the most of the Borough's cultural offer*

These three objectives reflect a vision and ambition which represents the ground-breaking potential of cultural action in Bury's economy. Despite limited resources and the difficult financial situation in recent years, the cultural sector continued to be a strong growth area and research indicates that this contribution to the local economy is projected to continue to grow over the next 10 years. The Council is dedicated to working with partners to offer operational and structural support in order to deliver the benefits of our cultural economy to local communities and the greater Manchester conurbation. I am very proud of the work that has gone on in the Borough and I am confident that this Strategy provides a sound base for the future. It is my privilege to support and formally present this Strategy.

Councillor Paddy Heneghan
Cabinet Member for Children, Young People and Culture

Introduction and Context

Bury has a strong identity and is growing as a visitor destination. It has a unique position both as part of the Greater Manchester conurbation and gateway to the scenic attractions of Pennine Lancashire and the north. Assets include Bury Art Gallery, Museum and Sculpture Centre, the Met Performing Arts venue, Bury Cultural Collection (Archives), the Borough's markets, East Lancashire Railway (ELR), The Fusilier Museum, the Irwell Sculpture Trail and Burrs Country Park. The Borough's cultural offer has achieved significant regional and national recognition in recent years:

- ELR was awarded Lancashire Tourism 'Large Visitor Attraction of the Year' Award in 2014;
- The Met won 'Best Entertainment Venue' at the 2014 Manchester Tourism Awards and is the UK centre for a number of performing artforms;
- Bury achieved Purple Flag status in 2015 in recognition of the quality of its evening and night-time economy offer;
- International acclaim for the Art Gallery programme and cultural trading practice;
- Ramsbottom hosts one of Europe's top Chocolate Festivals;
- Bury has won the 'Best Large Town' category in the North West in Bloom Awards for 11 years running and the Gold Medal Award for Britain in Bloom in 2013;
- Radcliffe won Gold Award for North West in Bloom for the fourth consecutive year in 2014;
- Bury Market won the National Association of British Market Authorities (NABMA) 'Market Attraction of the Year' in 2015, with previous awards in 2006, 2009 and 2012;
- Bury was runner-up in the 2015 Academy of Urbanism Great Town Award.

A vibrant cultural economy promotes regeneration and sustains jobs and businesses in the wider economy. The Greater Manchester Strategy for the Visitor Economy 2014 - 2020 and the Economic Strategy for Bury 2010 - 2018 both recognise the potential of culture in the sub-regional economy.

Engagement in arts and culture also makes an important contribution to the health and economic wellbeing of the local population. Participants of all ages can develop creative problem-solving and communication skills and better intellectual ability. These benefits have a strong positive influence on longer-term health, employability and participation in society and, as a consequence, create savings for health, welfare and local authority services.

Bury's growth has been contrary to the prevailing national economic trend and the area has outperformed neighbouring towns in Greater Manchester for both the daytime and night-time economies. Borough-wide visitor spend rose from £238 million in 2009 to just over £302 million in 2012 and numbers employed in tourism increased from 3,546 to 4,074 in the same period. This Cultural Economy Strategy provides a framework for increasing income from Bury's cultural assets to support their viability and contribute to wider prosperity across the Borough.

Delivering the potential of culture will be driven and measured by:

- economic impact;
- quality;
- uniqueness/innovation;
- sustainability;
- capacity/potential to attract regional or national attention;
- capacity to lift aspirations/expectations of local communities.

Objective 1 - Leadership & Innovation

Building Bury's reputation as a cultural centre

Planning together

A baseline of enhanced partnership and joint working has been developed over the last 5 years through the local Cultural Economy Group, particularly between cultural, leisure and retail services. The Council will develop the work of the Cultural Economy Group to bring together partners in the public, private, community and voluntary sectors. In particular, the Group will:

- work to reinforce a spirit of co-operation;
- minimise duplication in research, promotion, training and event planning across Bury;
- present a more coherent 'Bury Brand' and combined offers to visitors and local residents;
- co-ordinate opportunities for sponsorship and investment;
- increase access to funding opportunities and encourage businesses to invest in events in Bury;
- maximise return on investment of funds and effort.

It is also vitally important that Cultural Economy activities are firmly embedded in all of the planning and development of Bury's economic initiatives.

Leadership and innovation

A key element of establishing a high impact sustainable contribution to the economy will be the commitment to innovation and leadership. The borough's 2 flagship centres – the Art Museum/Sculpture Centre and The Met Arts Centre – have the international reputation and track record to facilitate national attention to Bury. The Council will promote these centres as resources supporting local innovation and development.

Sharing resources

Collectively, organisations involved in the cultural economy possess an array of talents, knowledge, funding sources, networks, target audiences and communication channels. The Council will lead by example - it will enable cultural economy partners to benefit from its training, development, marketing and funding opportunities to support growth throughout the sector.

We will:

- ensure that Bury Council's strategies, operations and service delivery support the growth and improvement of the cultural offer;
- expand and develop the work of the Cultural Economy Group to share resources, co-ordinate activity and secure investment;
- support events and attractions through marketing, training and grant activities to maximise return on resources invested.

Objective 2 - Developing talent and entrepreneurship

Bury Council will work with partners to identify funding and development opportunities to develop the skills needed to grow the local cultural economy

Growing talent and skills

Industries of the twenty-first century will depend increasingly on the generation of knowledge through creativity and innovation. Bury must aim to become a 'Creative hub' contributing towards shared goals at both a national and Greater Manchester level. Matched with the strong entrepreneurial drive displayed throughout the Borough, culture presents opportunities for high quality employment and economic growth. It takes artists, performers, craftspeople, designers (often in breaking new technologies), food producers, cultural sector managers and people who work in entertainment, arts and leisure services to create a healthy and sustainable cultural economy. It is important to nurture talent and to attract and retain the best people to work in the Borough's cultural sector. This includes supporting artists and producers to learn necessary business skills so that they can build a successful career.

The Council will identify and promote opportunities to tailor and target existing initiatives to support the creative sector. Creative Skillset, the industry skills body for creative industries, promotes national provisions for apprenticeships within the creative sector. The Arts sector and business, schools, further education colleges, Business in the Community and the

Greater Manchester Chamber of Commerce promote the development of business skills which are vital for cultural economy organisations and practitioners. The Council will work with partners including Bury Third Sector Development Agency (B3SDA) to promote volunteering and develop volunteers' skills and talent. It will also examine how residents of Bury can learn about and access the learning and career opportunities available in Salford at MediaCityUK. This key connection is especially vital for the local Digital sector.

Spreading the benefit

The Borough's cultural trading, festivals and events present potential for 'spin-off' benefits for businesses and organisations. Bury has a portfolio of major events with international and national status such as English Folk Expo, Homegrown and the Big Whistle, both hosted by the Met, The international Text Festival and the Asia Triennial. Forthcoming events include Bonsai Europa in October 2015 and the European Network of Culture Centres conference in February 2016. In addition to the income generated for the venues and local accommodation providers, the increased spending power brought into the Borough can be captured by other businesses and facilities, through special programmes, offers and packaged promotions. Major events across Greater Manchester, such as Manchester's status as European City of Science 2016 and the associated EuroScience Open Forum (ESOF) in July 2016, also present exciting opportunities for local businesses and attractions. By communicating the benefits of major local and regional events, the Council will work to secure sponsorship and investment from local businesses to maximise potential return.

We will:

- develop and share a database of opportunities for business skills and talent growth in the cultural economy;
- engage with Arts sector and business, schools, further education colleges, Business in the Community, Greater Manchester Chamber of Commerce and B3SDA to ensure that their activities support and are accessible by cultural sector practitioners and organisations;
- relaunch a Digital Bury Development Plan aimed at developing continued growth in this key sector;
- support the growth of strategic high impact events, festivals and conference business.

Objective 3 - Making the most of the Borough's Cultural Offer

Bury Council is committed to working with partners to achieve sustained growth in the cultural economy

Supporting attractions and events

Bury's cultural offer has enormous potential for income generation, economic growth and increasing the number of visitors to the Borough. A range of emerging initiatives and trends signal an exciting time for the Borough's cultural economy. The Council will ensure that its own operations facilitate the growth and income-earning potential of these initiatives:

- planned refurbishment of the Met, ELR's development plan and the Burrs Country Park Strategy;
- international programmes at Bury Art Gallery, Museum and Sculpture Centre, The Met and The Fusilier Museum;
- promotion of retail and day-time leisure facilities and development of the night-time economy, including building upon Bury's Purple Flag status by encouraging businesses and organisations to expand their evening activities and promoting the status within and outside of the Borough;
- increasing use of the Borough's parks for planned leisure and recreation events, such as 'I Will if You Will';
- continued commissioning of contemporary public art on the Irwell Sculpture Trail;
- interest in locally-sourced food and regional food specialities with scope for co-ordinated promotion of markets in Bury, Radcliffe and Ramsbottom and food events such as Ramsbottom Chocolate Festival and Incredible Edible in Prestwich and Ramsbottom;
- support for events such as Bury Light Night, English Folk Expo and Homegrown, Ramsbottom Festival and ELR's special galas.

The Art Gallery, Museum and Sculpture Centre as a resource

Bury Council has invested in developing Bury Art Gallery, Museum and Sculpture Centre as a hub for cultural activity. In addition to direct income generation from its shop and 'paid for' workshops and talks, its location will prompt visitors to use other outlets and services in Bury town's culture quarter and other parts of the Borough. It is also linked to a Sculpture Trail through the Borough. The Gallery's assets include its collections, exhibition and event spaces, staff expertise and access to cultural networks. The building also hosts Bury Library and its archives. The Council will promote these as a resource for cultural organisations across the Borough to increase the breadth and number of activities.

Attracting Visitors

The borough and its partners will develop marketing opportunities that attract regional, national and international visitors. Digital promotion is crucial and increasingly important with the VisitBury website designed to be a focal vehicle. This is supplemented with various social media platforms and more traditional printed material, 'What's On' guides, local print and broadcast media, regional tourism marketing and specialist arts and culture channels.

Reaching out

Bury has gained experience, income and profile from exhibitions such as the Gallery's lead role in Greater Manchester Museums Group's (GMMG) exhibition to China in 2012 and its international exhibition programme featuring artists from China and Europe. Both the Art Museum and the Met have international leadership reputations. The Council plans to build upon these activities to reach new national and international audiences who will visit Bury or experience its cultural highlights in other locations. By using exchanges and loans, Bury can raise awareness of its collections through other galleries and give the Borough's residents and visitors' access to major works from across the world. There are developing opportunities in China and Japan and the Council will also work with partners to strengthen links with other parts of the UK and Europe. This includes collaboration within Greater Manchester and the North West to jointly bid for projects and funds to create exhibitions.

We will:

- maximise use of tourism, arts and culture marketing opportunities to attract regional, national and international visitors;
- build on international experience to develop the Borough's reputation as a cultural centre and reach new audiences;
- co-ordinate and disseminate a schedule of major events to secure sponsorship and enable local businesses to plan for and benefit from increased visitor numbers.

Cultural Economy Action Plan 2015 - 2016

	Objectives	Actions	Key Projects	Key Milestones and Outputs	Lead
1	Leadership & Innovation Building Bury's reputation as a cultural centre	Ensure that Bury Council's strategies, operations and service delivery support the growth and improvement of the cultural offer.	<p>Increase profile for cultural offer in borough and GM marketing and tourism activities</p> <p>Research and propose a process of linking cultural trading opportunities with local and GM business and trade development programmes</p>	<p>Year on year 10% increase in hits to Visit Bury website; Specialist Arts media campaigns promoting international programmes</p> <p>Proposal presented for joint working across GM economic forums linking cultural missions to trade by April 2016</p>	<p>Arts, Museums & Tourism Service</p> <p>Arts, Museums and Tourism Service/Economic Development</p>
		Expand and develop the work of the Cultural Economy Group to share resources, co-ordinate activity and secure investment	Expand stakeholder engagement with CE Group and cultural economy impacts	Increased representation from different subsectors of the cultural economy is secured	Cultural Economy Group

	Objectives	Actions	Key Projects	Key Milestones and Outputs	Lead
		Support events and attractions through marketing, training and grant activities to maximise return on resources invested.	<p>Establish Cultural Action Plan contributing to Purple Flag programme</p> <p>Refresh Bury Culture Quarter Action Plan</p>	<p>Action Plan developed by December 2015</p> <p>Plan Adopted by April 2016</p>	<p>Cultural Economy Group/ Economic Development</p> <p>Cultural Centres Group</p>
2	Developing talent and entrepreneurship Bury Council will work with partners to identify funding and development opportunities to develop the skills needed to grow the local cultural economy	Develop and share a database of opportunities for business skills and talent growth in the cultural economy	<p>Investigate cultural sector training needs;</p> <p>Progress development of cultural sector apprenticeships/training including external partnership & funding</p> <p>Establish annual programme of training opportunities</p>	<p>Review complete in line with Economic Strategy refresh</p> <p>Establish 1 training programme per year</p>	Arts, Museums and Tourism Service /Economic Development

	Objectives	Actions	Key Projects	Key Milestones and Outputs	Lead
		Engage with Arts sector and business, schools, further education colleges, Business in the Community, Greater Manchester Chamber of Commerce and B3SDA to ensure that their activities support and are accessible by cultural sector practitioners and organisations.	<p>Establish professional development programmes for local cultural producers</p> <p>Create an Events Advice Package and levels of support available to community event organisers</p>	<p>Annual programme of training opportunities established by April 2016</p> <p>Package available by December 2015</p>	<p>Arts, Museums and Tourism Service</p> <p>Arts, Museums and Tourism Service</p>
		Relaunch a Digital Bury Development Plan aimed at developing continued growth in this key sector	<p>Develop support for Bury Digital industry competitiveness including partnership for international contract bidding and trade missions.</p> <p>Develop partnership working with higher education sector and</p>	<p>Plan re-launched April 2016</p> <p>Partnership working developed by April 2016</p>	<p>Economic Development</p> <p>Arts, Museums and Tourism Service</p>

	Objectives	Actions	Key Projects	Key Milestones and Outputs	Lead
			close working with Media City/BBC		
		Support the growth of strategic high impact events, festivals and conference business	<p>Create and apply Strategic Event Criteria to identify key events that have the potential for highest local economic impacts within existing resources</p> <p>Roll out Sustainability Development support for the category of events with measurable potential to become Strategic Events</p>	<p>Agreed portfolio of key events by December 2015</p> <p>Review and adoption of qualifying events by June 2016</p>	<p>Cultural Economy Group</p> <p>Arts, Museums and Tourism Service</p>
3	Making the most of the Borough's Cultural Offer Bury Council is committed to working with partners to achieve sustained growth in the cultural economy	Maximise use of tourism, arts and culture marketing opportunities to attract regional, national and international visitors.	<p>Review & update Events Marketing, co-ordinate to strategic Cultural Economy Developments</p> <p>Review of GM & Marketing Manchester support</p> <p>Negotiate greater prominence for Bury</p>	<p>Review completed Dec 2016. Refreshed events marketing policy 2016</p> <p>Review as part of Visitor Economy Strategy;</p> <p>Bury status enhanced in GM promotions</p>	<p>Arts, Museums and Tourism Service</p> <p>Arts, Museums and Tourism Service</p> <p>Arts, Museums and Tourism Service</p>

	Objectives	Actions	Key Projects	Key Milestones and Outputs	Lead
			Cultural offer within GM cultural tourism activities		
		Build on international experience to develop the Borough's reputation as a cultural centre and reach new audiences.	<p>Develop new cultural products to tour.</p> <p>Establish international agency role for other UK cultural services.</p> <p>Increased profile for Bury through international festivals</p>	<p>1 touring product in 2015-6; 2 touring products per year thereafter</p> <p>Represent 50 UK organisations by 2016</p> <p>Minimum of 3 per year</p>	<p>Arts, Museums and Tourism Service</p> <p>Arts, Museums and Tourism Service</p> <p>Arts, Museums and Tourism Service</p>
		Co-ordinate and disseminate a schedule of major events to secure sponsorship and enable local businesses to plan for and benefit from increased visitor numbers.	<p>Establish Bury as an international hub for cultural conference business</p> <p>Increase impact of the Bury Cultural Centres Group joint working</p> <p>Increase engagement of cultural activities in Night Time Economy planning</p>	<p>Host 2 international cultural conferences per year from 2016</p> <p>Co-ordinated programmes/marketing and joint bidding 2016</p> <p>Cultural Actions identified & delivered</p>	<p>Arts, Museums and Tourism Service</p> <p>Cultural Centres Group</p> <p>Cultural Centres Group</p>

REPORT FOR DECISION



DECISION MAKER:	CABINET
DATE:	14 OCTOBER 2015
SUBJECT:	ADOPTION OF REVISED STATEMENT OF COMMUNITY INVOLVEMENT
REPORT FROM:	CABINET MEMBER – RESOURCES AND REGULATION
CONTACT OFFICER:	MICHAEL WHITEHEAD – SENIOR PLANNING OFFICER
TYPE OF DECISION:	CABINET - KEY DECISION
FREEDOM OF INFORMATION/STATUS:	This paper is within the public domain
SUMMARY:	<p>This report brings forward a revised version of the existing Statement of Community Involvement (SCI) which will set out how we will involve the community in preparing and revising all local planning documents, in making decisions on planning applications. The Council's current SCI was adopted in August 2013. The document has now been revised to take account of changing circumstances, in particular to set out how consultation and community involvement will take place in respect of the Greater Manchester Spatial Framework (GMSF), which is to be prepared by all ten Greater Manchester authorities.</p> <p>A decision was made under delegated powers by Cabinet Member for Resources and Regulation on 10 August 2015 to approve a draft version of the revised SCI for a 4-week public consultation. 10 representations have been received and minor changes have been made to the document where appropriate, and approval is now sought for the adoption of the revised SCI.</p>
OPTIONS & RECOMMENDED OPTION	<p>Option 1 (Recommended Option) That Cabinet adopt the attached revised SCI.</p> <p>Option 2 That Cabinet seek revisions to the SCI before adoption. Members to specify the nature of any revisions to be sought.</p> <p>Option 3 That Cabinet do not adopt the revised SCI and specify reasons for their decision.</p>

	<p>Reasons Option 1 would ensure that the SCI is up-to-date and provides the necessary advice on how consultation and community involvement will take place on the Greater Manchester Spatial Framework, ahead of its public consultation on the Vision, Strategy and Options in Autumn 2015. Once adopted, the provisions of the SCI will be followed for all future consultation processes for Local Plan documents, including the GMSF, and planning applications, and will contribute to the soundness of Local Plan documents by ensuring that consistent and correct procedures have been followed.</p>
IMPLICATIONS:	
Corporate Aims/Policy Framework:	Do the proposals accord with the Policy Framework? Yes The SCI is part of the Bury Local Plan and takes account of national planning guidance and Regulations.
Statement by the S151 Officer: Financial Implications and Risk Considerations:	There are no financial implications arising from this report.
Statement by Executive Director of Resources:	This report revises the existing SCI (August 2013) to take account of changes e.g. Greater Manchester Spatial Framework. Consultation has been undertaken and this is reflected in the final version of the SCI.
Equality/Diversity implications:	No An initial screening has been undertaken (see attached assessment) which did not identify any negative impacts on equality.
Considered by Monitoring Officer:	Yes JH
Wards Affected:	All
Scrutiny Interest:	

TRACKING/PROCESS

DIRECTOR: STEPHEN KENYON

Chief Executive/ Strategic Leadership Team	Cabinet Member/Chair	Ward Members	Partners
Scrutiny Committee	Cabinet/Committee	Council	
	14 October 2015		

1.0 BACKGROUND & ISSUES

- 1.1 The Council already has an SCI which was adopted by the Council's Cabinet on 28 August 2013. Since the document was adopted, the planning landscape at sub-regional level has changed to the extent that the adopted SCI requires an update in respect of the planning documents that the Council will seek the community's views on. In particular, the decision made by the Council on 28 January 2015 to approve the making of an agreement with the other nine Greater Manchester authorities in preparing jointly the GMSF signifies that it is now necessary to revise the Bury SCI to set out how consultation and community involvement will take place in respect of the GMSF.
- 1.2 The revised SCI has therefore been updated to include a section on the GMSF, which will be a Joint Development Plan Document (DPD) prepared by the Association of Greater Manchester Authorities (AGMA) on behalf of the ten districts. The section, within Chapter 3 'Local Plans', sets out the scope of the GMSF, the groups which will be consulted, the stages at which AGMA will involve the community, and the methods which will be used to do this, together with contact details should anyone wish to be informed of future consultations. The SCI continues to be in a succinct, accessible format and is structured in 4 parts including an Introduction, General principles of planning consultations, Planning Policy and Planning Applications.

Draft SCI consultation and representations received

- 1.3 The Cabinet Member for Resources and Regulation approved the draft version of the revised SCI for a 4-week public consultation under delegated powers on 10 August 2015. The consultation draft of the SCI was made available for comment at deposit points and on the Council's website from 12 August to 9 September 2015.
- 1.4 A total of 10 formal representations were made during the consultation from a range of respondents including statutory bodies such as Historic England, Natural England and also from local groups such as the Bury Federation of Civic Societies. There was general support for the SCI and its content with some suggested minor amendments to the wording, one of which has been incorporated within the final document, as noted below. Some of the issues raised include the methods by which the Council involve the general public in planning consultations and requests to make reference to Ward Councils and Residents Associations within the list of bodies the Council are required to consult.
- 1.5 One minor change has been made to Chapter 3 following consultation to respond to a representation from Walmersley Residents Action Group in respect of notifying residents affected by site-specific proposals. Further minor changes have also been made to correct typographical errors, inaccuracies, updates or to clarify our approach further.

2.0 CONCLUSION

- 2.1 Members are asked to consider the Statement of Community Involvement and approve the document for adoption.

List of Background Papers:-

- Draft Statement of Community Involvement (August 2015)
- SCI Responses Report
- Equality and Cohesion Impact Assessment Initial Screening Form

Contact Details:-

Michael Whitehead
Senior Planning Officer
3 Knowsley Place
Duke Street
Bury
BL9 0EJ

Tel: 0161 253 6154

Email: m.whitehead@bury.gov.uk

Statement of Community Involvement

The planning process in Bury and how you can have your say

ADOPTION (FOR CABINET) - OCTOBER 2015



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1 Introduction

1.1 This Statement of Community Involvement (SCI) sets out how we will involve the community in preparing and revising all local planning documents and in making decisions on planning applications. It highlights the importance of becoming involved in the planning process at an early stage. We will follow the guidelines and requirements set out in these pages and will monitor and update it as necessary.

1.2 The Council's Planning Division sits within the Department of Resources and Regulation and comprises two teams:

- The **Strategic Planning and Economic Development Team** produces the planning documents that will make up the new Development Plan and can be contacted for advice on planning policy. They organise and lead the consultations on draft planning documents and consider relevant consultation responses when making any amendments to the Council's final adopted documents, where appropriate (see 'Planning Policies' section of this document). The team also input to the development of the Greater Manchester Spatial Framework, although consultations will be led by the Association of Greater Manchester Authorities (AGMA) (see page 7 8).

Phone: 0161 253 5550

Email: planning.policy@bury.gov.uk

- The **Development Management Team** can be contacted for advice on pre-application enquiries and planning applications. Fees are payable for planning applications and pre-application advice. The team process planning applications in accordance with the adopted development plan (currently the Unitary Development Plan, or UDP for short), the National Planning Policy Framework (NPPF) and any other material considerations including consultation responses and other representations.

Phone: 0161 253 5432

Email: development.control@bury.gov.uk

1.3 For general planning enquiries, you can call at the reception desk in Bury Town Hall on Knowsley Street. However, should you have a pre-arranged meeting with an officer in the Planning Division, you can go directly to the reception on the ground floor of 3 Knowsley Place on Duke Street in Bury (opposite the main entrance to the Town Hall).



2 General Principles of Planning Consultations

- 2.1 This opening section of Bury's SCI sets out the general principles and practices used by the Council in involving Bury's communities in the preparation of the various planning policy documents that the Council produces and in determining planning applications. The approach taken by the Association of Greater Manchester Authorities (AGMA) in preparing the Greater Manchester Spatial Framework is set out separately in this report.
- 2.2 We want everyone to have the chance to have their say on the Council's emerging planning policies and on planning applications, wherever it is relevant.
- 2.3 We will apply some general principles to our planning consultations:

We will seek views of interested and affected parties as early as possible;
We will consult as widely as possible within the confines of staffing and financial resources;
We will be inclusive wherever possible by providing information in an accessible format, giving advice where requested and encourage involvement from groups that have traditionally not been involved in the planning process;
We will inform people who respond to consultations of later stages, when requested;
We will share information with you via the Council's website, social media and at dedicated Council buildings where this is appropriate and effective.

- 2.4 In general we will keep you informed through a variety of methods including:
- **Letters and emails** - For environmental reasons, where you have provided us with an e-mail address we will generally use that means of communication rather than sending a letter in the post.
 - **Website** – The Internet is a popular way of communicating planning issues and making all relevant information available to individuals and groups. A key advantage of this is that we can include far more information than we could within newspaper adverts for example. You will be able to access a wide range of planning-related information at www.bury.gov.uk/planning.
 - **Media** - We will use the more traditional media to issue press notices and releases, where appropriate. We will also make use of social media by using Facebook and Twitter as a means of keeping people informed of the latest planning news from the Council and information of local and national interest on planning issues. 'Like' us on Facebook and 'follow' us on Twitter to keep up-to-date!



www.facebook.com/buryplanning

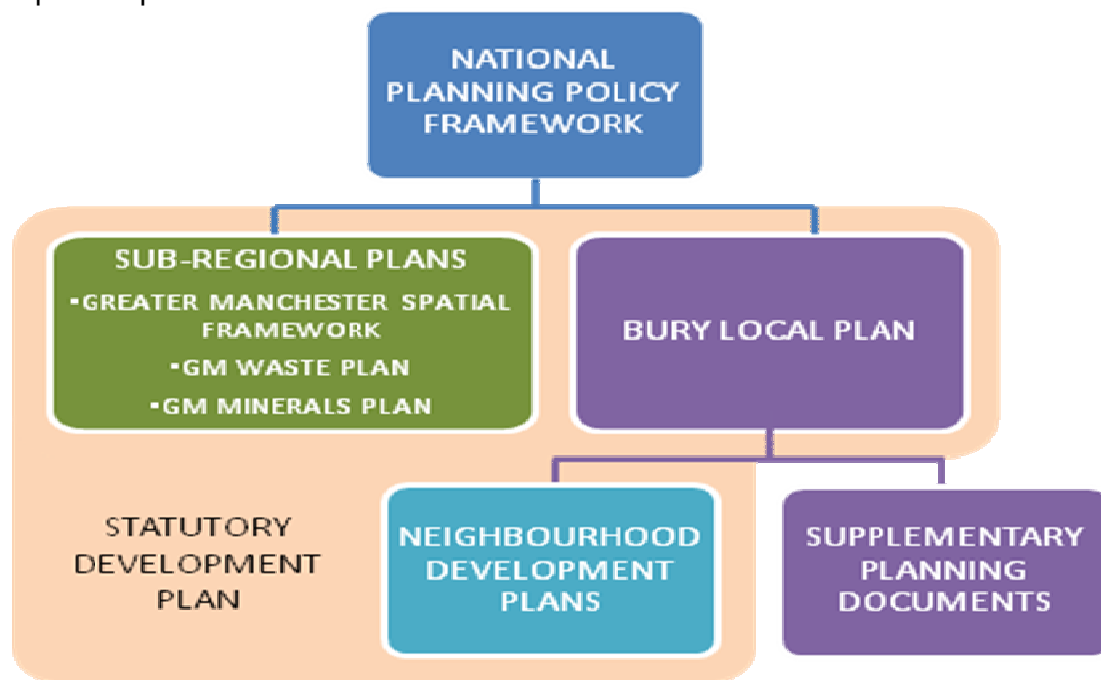


www.twitter.com/BuryPlanning

- **'Planzine' newsletter** - The individuals on our database with e-mail addresses receive our 'Planzine' e-newsletter. This contains updates on major news stories and public consultations on planning matters in Bury, shows you how you can become more involved in the planning process and offers tips on obtaining advice should you have a development proposal of your own. Planzine is also available on our website.

3 Planning Policy

- 3.1 The Government wants to give local people a greater role in shaping their local area, and the provisions of the Localism Act and the National Planning Policy Framework (NPPF) give communities the opportunity to get more involved in the preparation of planning documents together with new powers to help shape ~~their~~ **their** neighbourhoods.
- 3.2 The diagram below and the following sections sets out the emerging structure of planning policy in Bury, highlighting those documents that will make up Bury’s statutory development plan.



National Planning Policy Framework

- 3.3 The National Planning Policy Framework (NPPF) was introduced in March 2012 and sets out the Government’s planning policies for England and how these are expected to be applied. The Framework acts as guidance for local planning authorities in preparing plans and making decisions on planning applications.
- 3.4 Additional advice is provided in the Planning Practice Guidance (PPG) which is available online at <http://planningguidance.planningportal.gov.uk>. Policies in Development Plans must be consistent with the Framework and PPG.

The Development Plan

- 3.5 The current statutory development plan in Bury comprises the Unitary Development Plan (UDP) and the Greater Manchester Joint Minerals and Waste Plans. Work is currently on-going on the preparation of a new Local Plan for Bury and this will, once adopted, replace the UDP. Work is also on-going on the preparation of the Greater Manchester Spatial Framework which again, once adopted, will form part of Bury’s wider Development Plan. The various documents making up Bury’s Development Plan will be used as the basis for determining planning applications.
- 3.6 The documents making up the Development Plan must be supported by evidence and generally accord with national policies in the NPPF.

- 3.7 Following submission, Development Plan Documents will be examined by an independent inspector whose role is to assess whether the plan has been prepared in accordance with legal and procedural requirements and whether it meets specified 'soundness' tests. More information on the examination process can be found on the Planning Inspectorate website at www.gov.uk/planning-inspectorate.
- 3.8 Ultimately, Bury's Development Plan will consist of the following:
- **Bury Local Plan** - The emerging Local Plan will set out the local planning framework for the delivery of growth and development to meet identified future needs. Local Plan policies and site allocations will establish where future development will be encouraged and areas where it will be resisted.
 - **Adopted Policies Map** – Illustrating where the policy designations and site-specific proposals are on a plan.
 - **Greater Manchester Spatial Framework** – This is being prepared by AGMA and will focus primarily on housing and employment land requirements for Greater Manchester, the infrastructure requirements to deliver this and the environmental capacity of Greater Manchester to accommodate this in the most sustainable manner.
 - **Greater Manchester Minerals Plan and Greater Manchester Waste Plan** – already adopted, these documents contain the policies, broad framework and site proposals to meet the needs for minerals and waste across the GM area.
- 3.9 As part of the plan preparation process, we will assess the social, economic and environmental impacts of the policies in the Bury Local Plan at each stage, and our SPDs as appropriate. The key purpose of Sustainability Appraisal (SA) is to identify and enhance the positive effects whilst minimising any potentially adverse impacts of our planning policies. This process will also involve the assessment of any equality impacts.
- 3.10 Where necessary, we will also carry out a Habitat Regulations Assessment of our emerging planning documents.
- 3.11 In addition, the Council will produce and update a range of supporting guidance notes, referred to as *Supplementary Planning Documents (SPDs)*.

Neighbourhood Planning

- 3.12 The Government's Localism Act (2011) introduced Neighbourhood Planning giving new rights and powers for neighbourhoods to produce a plan to shape how their neighbourhood area should develop and grow. They are taken forward by neighbourhoods themselves: by an existing parish council, or by the creation of a neighbourhood forum where there is no parish council.
- 3.13 Planning Aid is a voluntary organisation providing independent and impartial advice and support through its Chartered Town Planners, with particular responsibility now for supporting groups interested in neighbourhood planning. Find out more at www.rtpi.org.uk/planningaid.

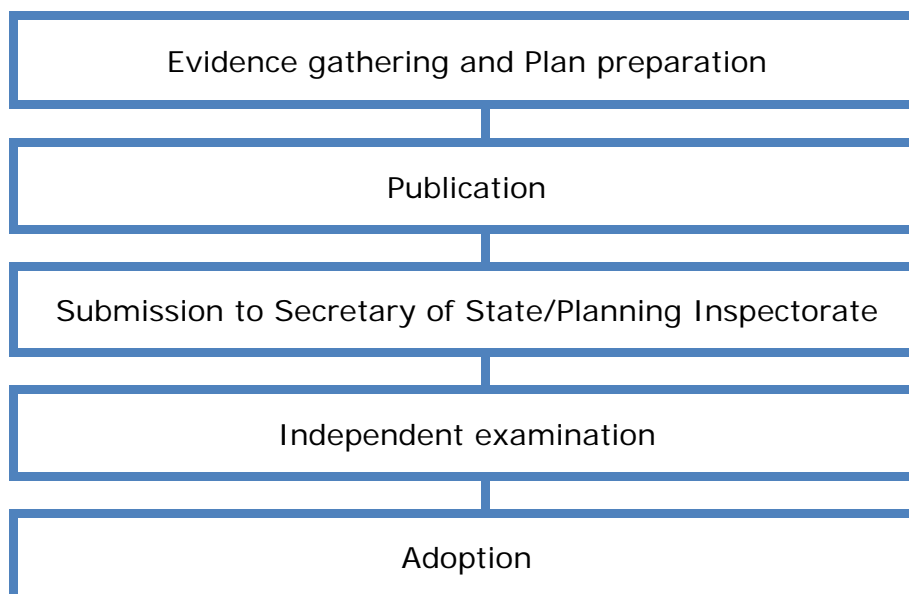
Consultation on Planning Policy Documents

- 3.14 There are a number of key stages involved in the preparation of planning policy documents. These stages are required by Government planning legislation and regulations and are designed to ensure that the process is as open and transparent as possible. The following highlights the key stages involved in the preparation of the Local Plan, the Greater Manchester Spatial Framework and Supplementary Planning Documents (SPDs) and sets out who will be consulted, the stages at which consultation will take place and how consultation will be undertaken. Information on consultation involved in the

preparation of Neighbourhood Plans is also set out. Any public consultations on the emerging Bury Local Plan, the Greater Manchester Spatial Framework or other planning policy related documents will appear at www.bury.gov.uk/planningconsultations.

Bury Local Plan

3.15 Bury's Local Plan will be the key planning policy document that we produce. The diagram below illustrates the key stages in the production of the Local Plan.



How will the Council involve you?

3.16 The following table lists some of the activities and methods the Council will consider using when undertaking consultation exercises in connection with the Local Plan. **The methods used will be tailored to suit the scale and nature of impact of the decisions to be made and the particular needs of people being consulted:**

Material made available on the Council's web site, in Council offices at Knowsley Place Reception, Town Hall Reception and selected local libraries (see our Statement of Community Involvement web page on www.bury.gov.uk/planningconsultations http://www.bury.gov/10738 for a list).
Send letters and emails to database contacts, including targeted consultation letters for key community groups. The Council may consider more targeted consultation where residents may be more directly affected by proposals.
Advertise via social media on Facebook & Twitter.
Where possible, place articles in: <ul style="list-style-type: none"> ▪ local newspapers; ▪ 'Planazine' - the department's e-newsletter sent to a database of contacts and ▪ Using other online news sources as appropriate.
Use posters on notice boards in prominent locations including town centres, civic suites, markets, leisure centres and public open spaces.
Advertise on TV screens at Council buildings.
Advertise via Township Forums and other community group meetings as appropriate.

Hold key stakeholder discussions and forums.

Officer meetings with authorities / agencies under 'Duty to Co-operate'

When will the Council involve you?

Early Engagement

- 3.17 In developing the Local Plan, the Council will seek to engage with interested parties at an early stage. This will include a minimum 6 week period of consultation on a draft version of the Local Plan which would be likely to include the key issues within Bury and realistic options for addressing these. Consultation would also involve inviting comments on emerging evidence that will be prepared in support of the Local Plan.

Publication Stage

- 3.18 Following consideration of all comments submitted on the draft Local Plan, the Council will prepare a Publication version of the Plan and this will effectively be what the Council considers to be its final, 'sound' plan. This version of the Local Plan will then be subject to a further period of consultation lasting at least 6 weeks.

Submission and Examination

- 3.19 We will inform all those who request to be notified when the Local Plan is submitted to the Secretary of State and anyone who made representations at the Publication stage will be notified of details of the Examination.

Who will the Council involve?

- 3.20 The list below outlines the organisations and other bodies that we are legally required to consult and involve in preparing our Local Plan documents.

- 3.21 Specific and 'Duty to Co-operate' consultation bodies include the following (as at **August October** 2015):

- Neighbouring local planning authorities
 - Manchester City Council
 - Salford City Council
 - Bolton Council
 - Blackburn with Darwen Council
 - Rossendale Council
 - Rochdale Council
 - Lancashire County Council
 - North Turton Parish Council
- Coal Authority
- Civil Aviation Authority
- Historic England
- Environment Agency
- GM Local Enterprise Partnership
- GM Local Nature Partnership
- GM Police and Crime Commissioner
- Highways England
- Homes and Communities Agency
- Lancashire Police and Crime Commissioner
- Natural England

- Office of Rail and Road
- South Pennines LNP
- Transport for Greater Manchester
- Network Rail Infrastructure Limited
- NHS Bury Clinical Commissioning Group
- NHS Commissioning Board
- United Utilities, Electricity North West ...and other relevant gas, electricity and electronic communications network infrastructure providers.

3.22 We are also required to include voluntary bodies whose activities benefit any part of the Borough and other 'general consultation bodies' that represent the interests of:

- Different racial, ethnic or national groups in the Borough;
- Different faith groups in the Borough;
- Disabled persons in the Borough;
- Businesses in the Borough.

3.23 We have developed a consultation database which includes all of the above but also includes a wide range of other individuals, groups and stakeholders. We contact those on the database throughout the process of preparing planning policy documents so that everyone has the opportunity to influence policies and proposals as they emerge. This database is reviewed and updated on a continuous basis.

3.24 You can find out how to contact us if you would like us to add your details to this database on page ~~11~~ 12.

The Greater Manchester Spatial Framework Joint Development Plan Document

3.25 The ten Greater Manchester authorities have agreed to produce a joint Greater Manchester Spatial Framework Development Plan Document (GMSF). The GMSF will provide the overarching framework to strategically manage sustainable growth and development across the conurbation over the next twenty years or so. Principally, the GMSF will identify the housing numbers and employment floorspace needs and associated infrastructure requirements, as well as identifying the key broad opportunity areas where this growth should be focused.

3.26 The ten districts have each resolved to delegate the formulation of the GMSF to the Association of Greater Manchester Authorities (AGMA.). AGMA act on the ten districts' behalf on the consultations on the GMSF. This section of Bury Statement of Community Involvement sets out how the community and other stakeholders will be involved in the preparation of the joint GMSF.

3.27 However, the Greater Manchester Agreement provides for a directly elected mayor with powers over strategic planning, including the power to create a statutory spatial framework for GM (with a unanimous vote of the Mayor's cabinet). Legislation is required to enable these changes and it is anticipated that the first city region Mayor elections will take place in early 2017. The governance of the document will transfer from a joint development plan document by the ten districts to the GMSF produced by GM Mayor/Greater Manchester Combined Authority. The consultation arrangements will need to be reviewed at this time.

Who will AGMA involve?

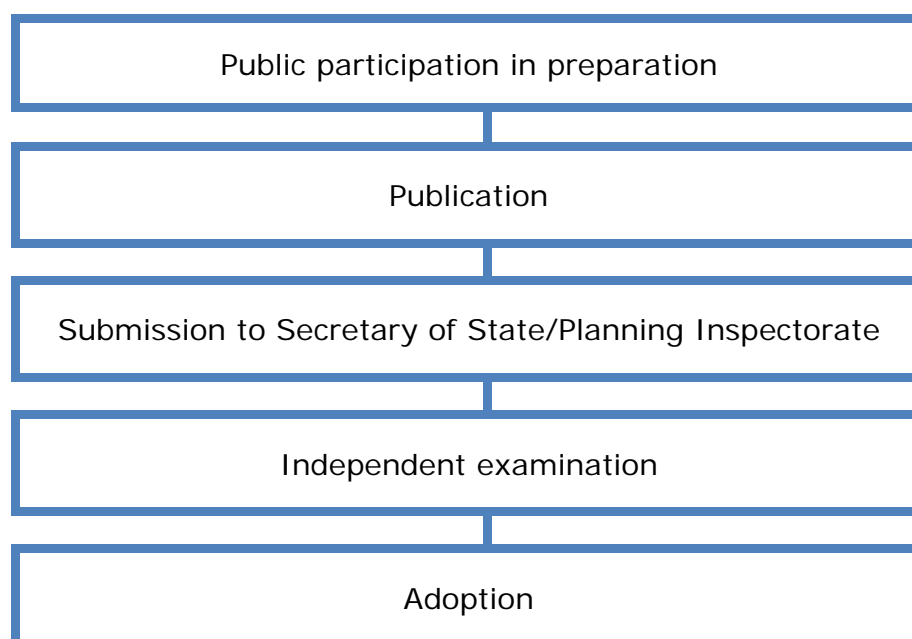
3.28 The following groups will be consulted where appropriate:

- **Specific consultation bodies** – organisations that AGMA are required to consult throughout the plan preparation process, including those responsible for services, utilities and infrastructure provision, Parish Councils in and adjacent to Greater Manchester, adjoining councils and government departments, where appropriate.
- **Local organisations** - community and voluntary bodies with an interest in Greater Manchester.
- **Businesses** – those with business interests in Greater Manchester and bodies representing the interests of businesses operating in Greater Manchester.
- **Landowners, developers and agents** – those who have a direct interest in future development and have a major role to play in providing the facilities and services the district needs.
- **The general public** - those who live in, work in or visit Greater Manchester as well as those who have expressed an interest in the subject matter.

When will AGMA involve you?

- During **preparation**, as appropriate, inviting representations on what the GMSF should contain, when AGMA is gathering evidence, identifying the issues, and developing the options for addressing the issues. ~~and then the preferred options/approaches.~~ Representations will also be invited on a draft document during a specified time period. Comments that are submitted will be considered prior to the next stage.
- At the **publication** stage, when the proposed submission version of the GMSF (the draft GMSF we want to adopt) is published to allow formal representations to be made for a period of at least 6 weeks on the soundness of the plan and whether it complies with legal requirements. Significantly, only representations made at this stage can be considered at the public examination.
- At the **submission** stage the GMSF and associated documents, including all the representations made at the publication stage, will be submitted to the Government (this is not an opportunity to submit additional comments). Following submission an independent inspector will be appointed to undertake a **public examination**. People who made representations at the Publication stage can appear at the examination.

GMSF Preparation



How will AGMA involve you?

AGMA will contact appropriate organisations and individuals directly, by email or by post.
AGMA will publicise consultations by methods such as the AGMA website and each of the ten districts' web sites, press releases, social media, meetings and workshops.
AGMA will make consultation documents available on the AGMA website and each of the ten districts' websites, at the principal office of each of the ten districts and at selected public libraries.
AGMA will publish comments received, or a summary of them, as soon as possible and explain how they have been taken into account in preparing the plan. ¹

- 3.29 If you wish to register your interest in being informed of future GMSF consultations please contact gmsf@agma.gov.uk. Further information about the GMSF is available on the AGMA website: www.agma.gov.uk.

Duty to Cooperate

- 3.30 In undertaking the community and stakeholder involvement outlined above AGMA will ensure that the duty to cooperate with neighbouring councils and other prescribed bodies is met, as set out in law. In doing so AGMA will engage constructively, actively and on an ongoing basis and have regard to their activities so far as they are relevant, in order to ensure that strategic matters are given full consideration in the preparation of the GMSF.

¹ The exceptions to this general principle occur at the 'publication' stage of the plan when representations are passed to the independent inspector to consider at the public examination and following the examination when the inspector may consult on proposed modifications to the plan. At these stages we are not therefore in a position to explain how comments have been taken into account.

Supplementary Planning Documents

- 3.31 The preparation of SPDs involve a similar process to that for statutory development plans, except that the documents are much quicker to produce as there is no submission to the Government or Planning Inspector involvement.

How will the Council involve you?

- 3.32 The following table lists some of the activities and methods the Council will consider using when undertaking consultation exercises in connection with Supplementary Planning Documents:

Material made available on the Council's web site, in Council offices at Knowsley Place Reception, Town Hall Reception and selected local libraries (see our Statement of Community Involvement webpage on www.bury.gov.uk/planning www.bury.gov.uk/10738 for a list).
Send letters and emails to those database contacts that are considered to be affected by the SPD.
Advertise via social media on Facebook & Twitter.

When will the Council involve you?

- 3.33 Where necessary, we will engage with relevant stakeholders in developing a draft of the SPD. However, normally, we will prepare a draft version of the SPD and make this available for comment for a minimum of 4 weeks.
- 3.34 Once adopted/approved we will make the SPD available on our website, and from our principal office. We will also notify any person or body that made a representation or who has asked to be notified of the adoption.

Who will the Council involve?

- 3.35 By making all relevant material available on the Council's web site and by placing it in the Council's principal offices and libraries, we will be seeking to encourage involvement from a wide range of individuals, businesses, groups, organisations and other stakeholders. We will also send letters/emails to those contacts that are considered to have a specific interest in the SPD.

Neighbourhood Plans

- 3.36 Neighbourhood Planning is an optional process led by the community. There are parts of the neighbourhood planning process that the Council have to undertake and publicise. However, it is a Parish Council or Neighbourhood Forum that is responsible for engaging and consulting with their neighbourhood during the development of a neighbourhood plan. There is further information about neighbourhood planning on our website, including how we will support parishes and forums producing a plan and our other responsibilities which include publicising neighbourhood area applications and holding a neighbourhood referendum towards the end of the process.

- 3.37 Neighbourhood Plans need to be consistent with other elements of the Development Plan and would be subject to a formal examination by an independent inspector.
- 3.38 More advice on neighbourhood plans can be found on the Government's Planning Practice Guidance website (see link in paragraph 3.4).

Wish to be kept informed?

- 3.39 If you have an interest in ~~the~~ local planning matters and would like to add your details to our database of contacts and receive letters or emails on future consultations please contact via the following:

Write to us:

Strategic Planning and Economic Development.
Resources and Regulation
3 Knowsley Place
Duke Street
Bury
BL9 0EJ

Phone us: 0161 253 5550

Email us: planning.policy@bury.gov.uk

4 Planning Applications

- 4.1 The Development Management Team handle both pre-application enquiries and the processing of planning applications.

Pre-application Advice

- 4.2 Pre-application enquiries help the applicant get their application 'right first time' and whilst they are not a guarantee of obtaining planning permission, the exercise ensures that all of the planning issues are identified early so as to enable the applicant to put forward the best possible application.
- 4.3 More details of how this service is delivered including information on charges is available on our website at www.bury.gov.uk/planning www.bury.gov.uk/10785.

Getting Involved in Planning Applications

- 4.4 The publicity for planning applications is subject to legislative requirements set by Government and can be carried out using different methods including one or all of the following:

- Letters to neighbours;
- Site notices;
- Press notices.



- 4.5 We will publish all planning applications on our website and a minimum of 21 days will be allowed for comments to be made via our online system, by email or by post. See our ~~'Planning applications and appeals' page~~ www.bury.gov.uk/e-planning <https://planning.bury.gov.uk/online-applications> for more information or view the ways you can contact us in Chapter 5 1. In addition to being able to view the applications in your own home, you can also view them online at your local library.
- 4.7 All comments received by the Council before the application is determined are considered by the officer in making their recommendations on the application. **Planning is an open and public process and as such all comments made on a planning application can be viewed by both the applicant and other members of the public.**

Decision Making

- 4.9 Most planning applications are determined by the Chief Planning Officer, but some applications are presented to the Planning Control Committee (PCC). ~~There is a formal 'scheme of delegation' of decisions to the Chief Planning Officer and these can be viewed on our website at~~ www.bury.gov.uk/planning. If an application is presented to the PCC then there is an opportunity for the public to address Members of the Committee. Our website provides more information on how to do this on our "Planning proposals – have your say" web page at www.bury.gov.uk/10771.

Planning Appeals

- 4.12 When an application is refused by the Council an applicant has a right of appeal to the Planning Inspectorate (PINS). The process of who is informed of an Appeal is set down by Government and we will ensure that these requirements are complied with.
- 4.14 As a minimum requirement, any comments that a person makes on the original application are passed to the Planning Inspector appointed to consider the Appeal and these comments are also be supplied to the applicant. In certain Appeals you may be able to make further comments and in some cases you may also take part in a Public Inquiry, although this will be at the discretion of the Inspector. The rules around publicity and how you can be involved in Appeals can be found on our "Planning applications refusals and appeals" webpage at www.bury.gov.uk/planning www.bury.gov.uk/10769.

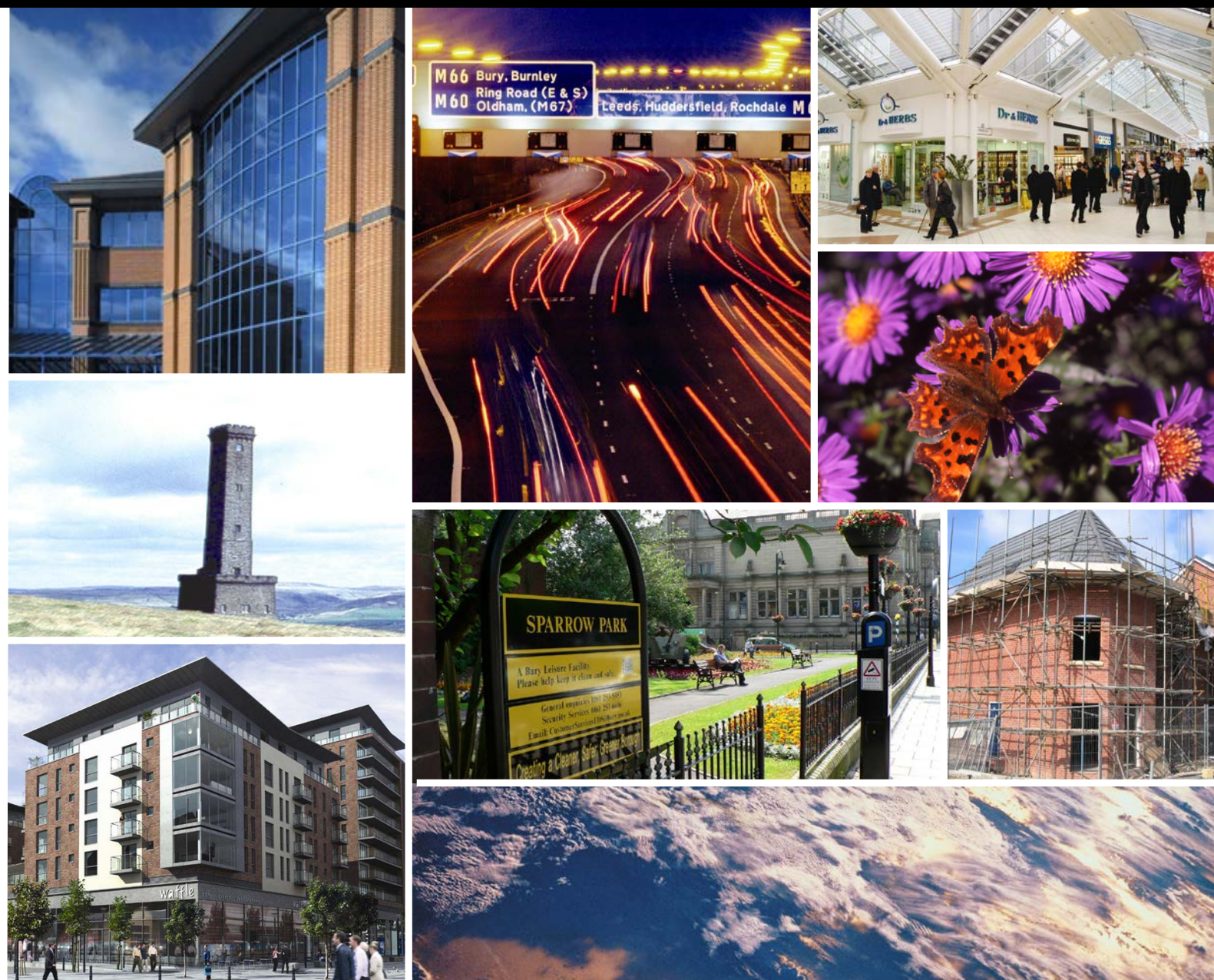


Bury Council
Strategic Planning and Economic Development,
3 Knowsley Place,
Duke Street, Bury, BL9 0EJ
0161 253 5550
planning.policy@bury.gov.uk
(October 2015)

STATEMENT OF COMMUNITY INVOLVEMENT

RESPONSES REPORT

OCTOBER 2015



Introduction

- 1.1 This document sets out the consultation that was carried out on the revised 2015 Statement of Community Involvement, the representations received and the Council's response to those representations.
- 1.2 The revised SCI was published as a Consultation Draft for a 4-week consultation period from 12 August to 9 September 2015, and was revised to take account of changing circumstances, in particular to set out how consultation and community involvement will take place in respect of the Greater Manchester Spatial Framework (GMSF) which is to be prepared by all ten Greater Manchester authorities.
- 1.3 Despite there being no requirement to carry out consultation on the SCI in the Regulations, this consultation involved writing to all organisations and bodies on the Council database which were considered relevant to the document (see Appendix 1 for a draft of the letter).
- 1.4 The draft document was put on deposit at selected local libraries, on the Council website and at the Planning offices at Knowsley Place. The consultation was also promoted using the department's social media accounts on Facebook and Twitter.

Representations received and responses made

- 2.1 A total of 10 representations were received on the SCI Consultation Draft. Table 1 below shows details of the respondents.

Table 1: SCI Consultation Draft respondents

Organisation
Historic England
Greater Manchester Minerals and Waste Unit
Natural England
Network Rail
Bury Federation of Civic Societies
Greater Manchester Ecology Unit
National Trust
Walmersley Residents Action Group
Office of Rail and Road
Ms Janet Dunnett

- 2.2 All comments received on the Consultation Draft of the SCI were considered and amendments and revisions were made where considered appropriate.
- 2.3 There was general support for the SCI and its content with some suggested minor amendments to the wording, one of which has been incorporated within the final document. Table 2 below provides a summary of the issues raised and the Council's response to them:

Table 2: What main issues were raised and how were they addressed?

Key issues	Council's response
The Minerals and Waste Planning Unit should be identified within 'Other Consultation Bodies'.	<p>Comments noted, no change required.</p> <p>The Minerals and Waste Planning Unit are not a generic consultation body under the Regulations. Other bodies can be consulted at the Council's discretion, and indeed the Unit is on the database and is consulted on such documents.</p>
Ward Councils, Residents Associations and Civic Societies should be part of the list of consultation bodies. Letters should be used as many have little or no experience of the Internet.	<p>Comments noted, no change required. Other bodies can be consulted at the Council's discretion and Ward Councillors are notified as a matter of course. Residents Associations and Civic Societies are on the Council's database and these bodies are notified where considered relevant, such as on Local Plan matters where targeted letters have been sent out outlining the key issues for the area in which the group are based.</p> <p>Letters are used as a means of reaching contacts on the database, although where email addresses are held then these are used for environmental and budgetary reasons.</p>
When site-specific proposals are involved neighbours should be individually notified as if a planning application had been submitted.	Comments noted, change required. The Table on page 6 has been amended to note that more targeted consultation may be considered in such cases.
No evidence of how local people will have a say in how their neighbourhood will look, what it will be like to use and on the provision for future demands and issues. Consultation methods and levels of engagement could be more innovative.	Comments noted, no change required. The SCI accords with Government regulations, policy and guidance and offers sufficient flexibility to tailor consultation activities and methods to the document being prepared, as appropriate and as resources allow.

Table 3: Further changes made post-consultation

2.4 The following changes have been made to the SCI following the public consultation and prior to adoption:

Change	Commentary
Chapter 3: Added the following text - 'The methods used will be tailored to suit the scale and nature of impact of the decisions to be made and the particular needs of people being consulted'.	To retain the reference from the 2013 SCI which helped to retain flexibility and highlight that consultation methods will be vary according to the type of document out to consultation.

APPENDIX 1 – CONSULTATION DRAFT AUGUST 2015 LETTER

Our Ref:

Date: 12 August 2015

Please Ask For: Philippa Brunsden

Direct line: 0161 253 7411

Direct fax: 0161 253 5290

E-mail: p.brunsdend@bury.gov.uk

BURY STATEMENT OF COMMUNITY INVOLVEMENT: CONSULTATION

As you may be aware, as part of the Local Plan process, the Council is required to prepare a Statement of Community Involvement (SCI). The role of the SCI is to specify how the Council will involve the community in the preparation of future planning policy documents, such as the Local Plan, as well as in the processing of planning applications.

The current SCI was adopted in August 2013 and we are proposing to amend the document to reflect changing circumstances. Most notably, since the current SCI was adopted, the Council has agreed to work together with the other Greater Manchester councils to prepare a joint Greater Manchester Spatial Framework (GMSF). The SCI has therefore been updated to set out how consultation and community involvement will take place in respect of the GMSF.

Once adopted, all future planning consultations and publicity will be carried out in line with its requirements.

The revised draft SCI is now the subject of a four-week period of public consultation from **Wednesday 12 August to Wednesday 9 September 2015**. It can be downloaded from the Council's web site at www.bury.gov.uk/planningconsultations.

Please note, the Council's website is in the process of being updated so if you are unable to locate the document on the website or if you would like to request a copy or discuss the SCI consultation draft, please contact a member of the Strategic Planning and Economic Development section on 0161 253 5550 or by email at planning.policy@bury.gov.uk.

Alternatively, copies can also be obtained from, or inspected at, the Planning offices at 3 Knowsley Place, Duke Street, Bury and can also be inspected at Bury Town Hall and selected local libraries (please see www.bury.gov.uk/planningconsultations for a list).

Please send any comments by email to planning.policy@bury.gov.uk or by post to the address below by **no later than Wednesday 9 September 2015**.

Strategic Planning and Economic Development
3 Knowsley Place
Duke Street
Bury
BL9 0EJ

Yours sincerely,

A handwritten signature in black ink that reads "P Brunsdon". The signature is written in a cursive, flowing style.

PHILIPPA BRUNSDEN
MONITORING AND RESEARCH OFFICER

STRATEGIC PLANNING AND ECONOMIC DEVELOPMENT


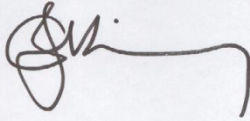


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Equality Analysis Form

The following questions will document the effect of your service or proposed policy, procedure, working practice, strategy or decision (hereafter referred to as 'policy') on equality, and demonstrate that you have paid due regard to the Public Sector Equality Duty.

1. RESPONSIBILITY

Department	Resources and Regulation	
Service	Strategic Planning and Economic Development	
Proposed policy	Adoption of Revised Statement of Community Involvement	
Date	Cabinet – 14 October 2015	
Officer responsible for the 'policy' and for completing the equality analysis	Name	Michael Whitehead
	Post Title	Senior Planning Officer
	Contact Number	0161 253 6154
	Signature	
	Date	28 September 2015
Equality officer consulted	Name	Catherine King
	Post Title	Principal Workforce Strategy Adviser
	Contact Number	0161 253 6371
	Signature	
	Date	28 September 2015

2. AIMS

What is the purpose of the policy/service and what is it intended to achieve?	<p>The Statement of Community Involvement (SCI) sets out how we will involve the community in preparing and revising all local planning documents and in making decisions on planning applications.</p> <p>The current Statement of Community Involvement was adopted in August 2013. Approval is sought to adopt the Revised Draft Statement of Community Involvement following a 4-week consultation in August/September.</p> <p>The primary purpose of revising the SCI is to set out how consultation and community involvement will take place in respect of the Greater Manchester Spatial Framework.</p>
Who are the main stakeholders?	The main stakeholders which were involved in the Statement of Community Involvement consultation were local residents, developers, land owners, businesses, planning and development consultants, statutory

	consultees, infrastructure providers, interest groups and representative bodies.
--	--

3. ESTABLISHING RELEVANCE TO EQUALITY

3a. Using the drop down lists below, please advise whether the policy/service has either a positive or negative effect on any groups of people with protected equality characteristics. If you answer yes to any question, please also explain why and how that group of people will be affected.

Protected equality characteristic	Positive effect (Yes/No)	Negative effect (Yes/No)	Explanation
Race	Yes	No	The SCI refers to the Council's requirement under the Regulations to consult general consultation bodies that represent the interests of different racial and ethnic groups within the Borough. Details of such groups are held on the Council's database, e.g. BME Community Forum, ADAB and Jinnah Centre, and are notified at each consultation stage on planning documents where considered relevant. The document also notes that the Council will be inclusive wherever possible by providing information in an accessible format and encourage involvement from groups traditionally not involved in the planning process.
Disability	Yes	No	The SCI refers to the Council's requirement under the Regulations to consult general consultation bodies that represent the interests of disabled groups within the Borough. Details of such groups are held on the Council's database e.g. Bury Coalition for Independent Living and the National Deaf Children's Society, and are notified at each consultation stage on planning documents where considered relevant. The document also notes that the Council will be inclusive wherever possible by providing information in an accessible format/manner and encouraging involvement from groups traditionally not involved in the planning process.
Gender	Yes	No	The SCI refers to the Council's requirement under the Regulations to consult general consultation bodies that represent the interests of different racial and ethnic groups within the

			Borough. Details of such groups are held on the Council's database, e.g. Bury Asian Women's Centre, League of Jewish Women and Women's National Commission, and are notified at each consultation stage on planning documents where considered relevant.
Gender reassignment	No	No	
Age	Yes	No	The SCI refers to the Council's requirement under the Regulations to consult general consultation bodies that represent the interests of different racial and ethnic groups within the Borough. Details of such groups are held on the Council's database e.g. Bury Pensioners Association and Help the Aged, and are notified at each consultation stage on planning documents where considered relevant. The document also notes that the Council will be inclusive wherever possible by encouraging involvement from groups traditionally not involved in the planning process.
Sexual orientation	No	No	
Religion or belief	Yes	No	The SCI refers to the Council's requirement under the Regulations to consult general consultation bodies that represent the interests of different faith groups within the Borough. Details of such groups are held on the Council's database e.g. Islamic Cultural Association and Higher Prestwich Hebrew Congregation, and are notified at each consultation stage on planning documents where considered relevant. The document also notes that the Council will be inclusive wherever possible by providing information in an accessible format/manner and encourage involvement from groups traditionally not involved in the planning process.
Caring responsibilities	No	No	
Pregnancy or	No	No	

Document Pack Page 85

maternity			
Marriage or civil partnership	No	No	

3b. Using the drop down lists below, please advise whether or not our policy/service has relevance to the Public Sector Equality Duty. If you answer yes to any question, please explain why.

General Public Sector Equality Duties	Relevance (Yes/No)	Reason for the relevance
Need to eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010	No	
Need to advance equality of opportunity between people who share a protected characteristic and those who do not (eg. by removing or minimising disadvantages or meeting needs)	Yes	The Revised Draft Statement of Community Involvement includes a requirement to consult bodies whose activities represent the interests of different racial, ethnic or national groups, different faith groups and disabled persons in the Borough.
Need to foster good relations between people who share a protected characteristic and those who do not (eg. by tackling prejudice or promoting understanding)	No	

If you answered 'YES' to any of the questions in 3a and 3b

Go straight to Question 4

If you answered 'NO' to all of the questions in 3a and 3b

Go to Question 3c and do not answer questions 4-6

3c. If you have answered 'No' to all the questions in 3a and 3b please explain why you feel that your policy/service has no relevance to equality.

4. EQUALITY INFORMATION AND ENGAGEMENT

4a. For a service plan, please list what equality information you currently have available, **OR** for a new/changed policy or practice please list what equality information you considered and engagement you have carried out in relation to it.

Please provide a link if the information is published on the web and advise when it was last updated?

(NB. Equality information can be both qualitative and quantitative. It includes knowledge of service users, satisfaction rates, compliments and complaints, the results of surveys or other engagement activities and should be broken down by equality characteristics where relevant.)

Details of the equality information or engagement	Internet link if published	Date last updated
<p>The Revised Draft Statement of Community Involvement was subject to a 4 week consultation period, in which the Council sought the views of individuals, bodies and organisations on the Council's Local Plan consultation database via letter or email. These contacts represented the interests of different racial, ethnic or national groups, different faith groups and disabled persons in the Borough. 10 responses were received to the consultation.</p>		

4b. Are there any information gaps, and if so how do you plan to tackle them?

<p>No</p>

5. CONCLUSIONS OF THE EQUALITY ANALYSIS

<p>What will the likely overall effect of your policy/service plan be on equality?</p>	<p>Positive</p>
<p>If you identified any negative effects (see questions 3a) or discrimination what measures have you put in place to remove or mitigate them?</p>	<p>N/A</p>
<p>Have you identified any further ways that you can advance equality of opportunity and/or foster good relations? If so, please give details.</p>	<p>No</p>
<p>What steps do you intend to take now in respect of the implementation of your policy/service plan?</p>	<p>Following the consultation and receipt of representations, comments have been considered and amendments have been made as necessary. The Revised Statement of Community Involvement is now to go before Cabinet to seek approval for adoption.</p>

6. MONITORING AND REVIEW

If you intend to proceed with your policy/service plan, please detail what monitoring arrangements (if appropriate) you will put in place to monitor the ongoing effects. Please also state when the policy/service plan will be reviewed.

The outcomes of consultations carried out in line with the Statement of Community Involvement will be published and recorded through the Local Plan Consultation Database. The timescale for review will be dependent on any legislative changes.

COPIES OF THIS EQUALITY ANALYSIS FORM SHOULD BE ATTACHED TO ANY REPORTS/SERVICE PLANS AND ALSO SENT TO THE EQUALITY INBOX (equality@bury.gov.uk) FOR PUBLICATION.

REPORT FOR DECISION



DECISION OF:	Cabinet – 14 October 2015 Council – 21 October 2015
SUBJECT:	Health & Wellbeing Board Annual Report and Refreshed Health & Wellbeing Strategy
REPORT FROM:	Councillor Andrea Simpson, Cabinet Member for Health & Wellbeing
CONTACT OFFICER:	Heather Crozier, Social Development Manager/ Health & Wellbeing Board Policy Lead
TYPE OF DECISION:	Council
FREEDOM OF INFORMATION/STATUS:	This paper is within the public domain
SUMMARY:	An annual report for the Health & Wellbeing Board for 2014/15 has been produced along with a refreshed Health & Wellbeing Strategy. It is good practice for all Health & Wellbeing Boards to produce an Annual Report detailing key achievements from the year and summarising the work undertaken by the board. All Health & Wellbeing Boards have a statutory duty to produce a Joint Health & Wellbeing Strategy. The refreshed strategy has five overarching priorities and is now a condensed version of the original strategy and is presented as a 'Plan on a page' with Team Bury branding.
OPTIONS & RECOMMENDED OPTION	<ol style="list-style-type: none"> 1. For Members to consider the annual report for the Health & Wellbeing Board for 2014/15 and recommend approval of the refreshed Health & Wellbeing Strategy to Council. 2. To not approve the annual report for the Health & Wellbeing Board for 2014/15 and the refreshed Health & Wellbeing Strategy.
IMPLICATIONS:	None
Corporate Aims/Policy Framework:	Do the proposals accord with the Policy Framework? Yes
Statement by the S151 Officer: Financial Implications and Risk Considerations:	<p>There are no financial implications for the Health & Wellbeing Strategy as the delivery of all actions will be contained within existing resources.</p> <p>It is essential however that resources are prioritised to ensure delivery of the strategy.</p>
Health and Safety	

Statement by Executive Director of Resources:	<p>The Strategy is a key part of the Council’s approach to improving the Health and Wellbeing of residents, and managing demand for service going forward.</p> <p>It is essential that the Strategy is delivered through effective cross-agency working, and recognises the challenges and opportunities of the devolution agenda.</p>
Equality/Diversity implications:	<p>There are no equality or diversity issues identified by the Health & Wellbeing Board Annual Report. The Equality Analysis for the Refreshed Health & Wellbeing Strategy is attached and shows a positive impact.</p>
Considered by Monitoring Officer:	
Wards Affected:	All wards
Scrutiny Interest:	Health Scrutiny

TRACKING/PROCESS

DIRECTOR: Executive Director of Communities and Well Being

Chief Executive/ Strategic Leadership Team	Executive Member/Chair	Ward Members	Partners
14 th September 2015			
Scrutiny Committee	Committee	Council	
22 nd September 2015			

1. INTRODUCTION

- 1.1 In 2014, Bury Wider Leadership Group identified three key priority areas which were:
- Safer, Stronger Communities
 - Health & Wellbeing
 - Stronger Economy
- 1.2 The Health & Wellbeing Board has taken responsibility for the Health & Wellbeing priority, Health & Wellbeing Board Annual Report and Health & Wellbeing Strategy.

2.0 The Health & Wellbeing Board

2.1 The Health & Wellbeing Board is a committee of the Council.

3.0 Health & Wellbeing Board Annual Report

3.1 It is best practice for all Health & Wellbeing Boards to produce an Annual Report.

- 3.2 The Annual Report for 2014/15 covers the Health & Wellbeing Boards first full year of operation and as such, there has been a focus on developing the architecture and up skilling members of the board.
- 3.3 Key achievements for the board in 2014/15 were:
- Relationships between members were strengthened by
 - Relationships between members were strengthened by holding regular Member Development Sessions, a member away day, and Chair development sessions
 - The infrastructure of the board has been strengthened by:
 - Introducing a forward plan
 - Holding regular agenda set meetings
 - Revising the report submission process and the report template
 - Introducing a new meeting structure
 - Co-producing an Etiquette & Expectations document
 - Being the first Health & Wellbeing Board across Greater Manchester to refresh their Health & Wellbeing Strategy
 - Governance arrangements have been strengthened
 - The Bury Directory has been successfully implemented
 - Engagement mechanisms between Health & Wellbeing Board & providers have been reviewed
 - Overseen the development of the health & wellbeing agenda under Devolution Greater Manchester
- 3.4 The Health & Wellbeing Board have been involved in the development and sign off of:
- The Pharmaceutical Needs Assessment for Bury (PNA)
 - The Better Care Fund
 - A Bid for funding to support Working Carers
 - The Disability Strategy
 - The Children & Young People's Plan
 - Health & Social Care Integration agenda
- 3.5 The Health & Wellbeing Board have considered:
- The Annual Safeguarding Children's Report
 - The 5 Year CCG Strategy
 - The GM Strategy for Public Health
 - The Primary Care Co-Commissioning Strategy
 - Healthier Together
 - 'Due North' report into geographical inequalities
- 3.6 As a result, the Health & Wellbeing Board are well placed to tackle key issues of Devolution, Health & Social Care Integration and inequalities.

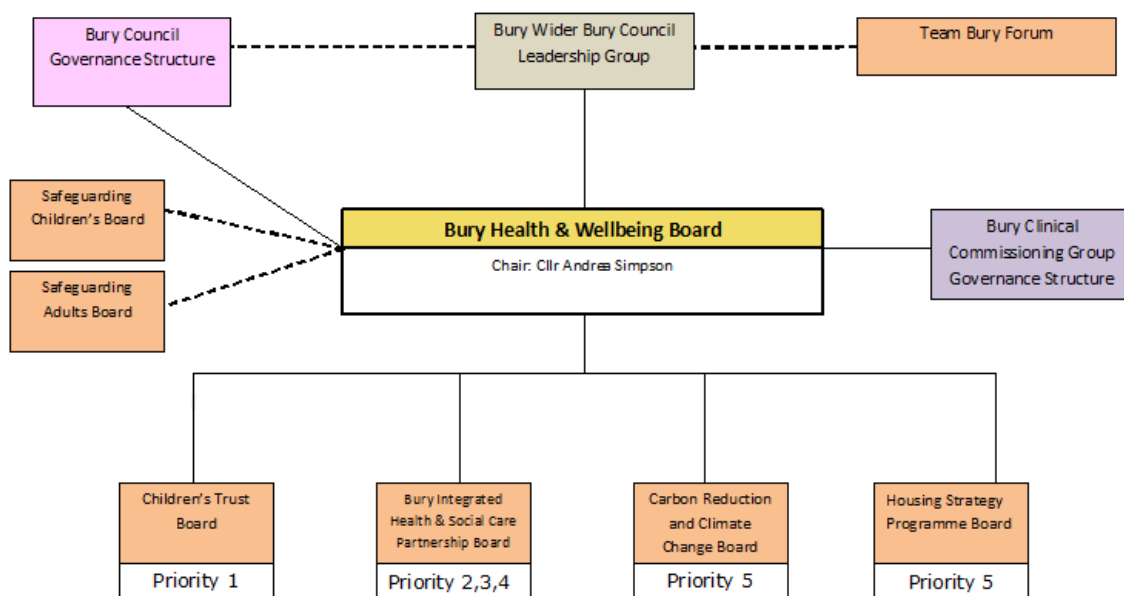
4.0 The Refreshed Health & Wellbeing Strategy

- 4.1 The Health & Wellbeing Board have a duty to produce a Joint Health & Wellbeing Strategy and review the contents of the strategy on a regular basis. As such the Health & Wellbeing Board committed to refreshing the Strategy throughout 2014/15.
- 4.2 The refreshed Health & Wellbeing Strategy is now a condensed version of the original strategy and is presented as a 'Plan on a page'.
- 4.3 Priority Leads from the Health & Wellbeing Board have been identified for each priority:

- **Priority 1- Starting Well**, Mark Carriline (Executive Director, Department for Children, Young People and Culture)
- **Priority 2- Living Well**, Lesley Jones (Director of Public Health)
- **Priority 3- Living Well with a Long Term Condition or as a Carer**, Pat Jones-Greenhalgh (Executive Director, Department for Communities & Wellbeing)
- **Priority 4- Ageing Well**, Pat Jones-Greenhalgh (Executive Director, Department for Communities & Wellbeing)
- **Priority 5- Healthy Places**, Pat Jones-Greenhalgh (Executive Director, Department for Communities & Wellbeing)

4.4 A summary of the refreshed Priorities can be found in Appendix 1

4.5 The Bury Health & Wellbeing Strategy Governance Structure can be found below



5.0 ISSUES & RISKS

5.1 The issues and risks identified are that of capacity to undertake the work required to deliver the Health & Wellbeing Board work plan and Health & Wellbeing Strategy.

6.0 FINANCIAL IMPLICATIONS

6.1 There are no financial implications for the Health & Wellbeing Board Annual Report.

6.2 There are no financial implications for the Health & Wellbeing Strategy as the delivery of all actions will be contained within existing resources.

7.0 EQUALITY AND DIVERSITY ISSUES

8.1 There are no equality or diversity issues identified by the Health & Wellbeing Board Annual Report.

8.2 The Equality Analysis for the Refreshed Health & Wellbeing Strategy is attached in list of background papers. The Equality Analysis indicates that the overall effect of the Health & Wellbeing Strategy will be positive.

8.0 CONCLUSIONS AND RECOMMENDATIONS

It is recommend that:

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Cabinet note the Health and Wellbeing Board Annual Report.

Cabinet are requested to:

- Approve the vision and direction of the refreshed Health & Wellbeing Strategy
- Support the priorities
- Note the governance structure
- Review progress in the 2015/16 Annual Report

And recommend to full Council for Approval.

List of Background Papers:-

- Health & Wellbeing Board Annual Report
- Refreshed Health & Wellbeing Strategy- plan on a page
- Equality Analysis for the Refreshed Health & Wellbeing Strategy- plan on a page

Contact Details:-

Heather Crozier, Social Development Manager/ Policy Lead for the Health & Wellbeing Board. Tel: 0161 253 6684, Email: h.crozier@bury.gov.uk

Appendix 1- Summary of Refreshed Priorities

Priority 1- Starting Well

Refreshed Actions

- Improve health and developmental outcomes for Under 5s.
- Develop integrated services across education, health and social care which focus on the needs of the child especially those with the most complex needs.
- Support positive and resilient parenting, especially for families in challenging circumstances
- Narrow the attainment gap amongst the vulnerable groups

Measures of Success

1. a) Improved health outcomes for under 5s
b) A higher proportion of children will be school ready
2. Implemented the SEND reforms
3. a) Fewer children making repeat entry into the social care system
b) Children move from care into high quality permanence
c) Children in care in stable placements
4. Improvements in the differences in levels of educational attainment across the borough and between groups

Priority 2- Living Well

Refreshed Actions

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- Ensure comprehensive advice and support is available to support people to maintain a healthy lifestyle
- Establish a healthy schools and work and health programme
- Adopt a 'health in all policies' approach to policy and strategy Development

Measures of Success

1. People will adopt and maintain a healthy lifestyle and be physically active
2. All schools and workplaces in Bury will be 'health promoting' organisations
3. All policies and strategies will be developed to ensure they have a positive impact on the health of people in Bury

Priority 3- Living Well with a Long Term Condition or as a Carer

Refreshed Actions

- Ensure people with long term conditions (including mental health) are supported to live as well as possible with their condition.
- Ensure carers have access to the support and information they need to fulfil their caring role and maintain their own health.
- Support people with long term conditions (including mental health) to achieve and maintain sustainable employment.

Measures of Success

1. a) An improved quality of life for people living with long term conditions
b) A reduction in hospital admissions for people with long term conditions
2. Improved health and wellbeing of carers
3. Increased number of people with long term conditions in sustainable employment.

Priority 4- Ageing Well

Refreshed Actions

- Ensure older people play an active role within their community, tackling the impact of social isolation
- Reduce the likelihood of people experiencing a crisis and when they do reduce the impact of this
- Ensure people at the end of life are treated with dignity and respect

Measures of Success

1. A reduction in the number of older people feeling socially isolated
2. a) A reduction in non elective admissions in older people
b) A reduction in permanent admissions to residential and nursing homes
c) An increase in the number of over 65's who remain at home following re-ablement services
3. a) An increased number of people will have choice and control over where they die
b) An increased number of people will die with an end of life plan

Priority 5- Healthy Places

Refreshed Actions

- Create a clean and sustainable environment
- Ensure suitable and quality homes

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Measures of Success

1.
 - a) Improved air quality
 - b) Reduced carbon emissions
 - c) Green spaces that are welcoming, safe and well maintained
 - d) High levels of recycling
2.
 - a) Access to affordable and appropriate tenure housing
 - b) Access to quality homes that meet people needs and secure their health and wellbeing
 - c) Reduced homelessness

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LIVING WELL IN BURY:

MAKING IT HAPPEN TOGETHER

Refreshed Bury Joint Health and Wellbeing Strategy 2015 - 2018



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Foreword

We are delighted to introduce the refreshed Bury Joint Health and Wellbeing Strategy. This refreshed strategy sets out Bury Health and Wellbeing Board's bold five-year vision for improving health and wellbeing in the borough. It makes three underpinning principles and identifies five cross-cutting priorities, to help achieve this.

Many factors affect our health and wellbeing. What makes a person "well" can involve many different factors, including physical and mental wellbeing, employment, environmental factors, social circumstances, adequate housing and economic factors.

Everyone has the right to good health. Unfortunately, there are huge differences in levels of physical health, mental health and wellbeing across our borough. The greatest challenge we face is to tackle inequalities and this remains central to all that we do.

The priorities identified in this strategy have been informed by our Joint Strategic Needs Assessment (JSNA), other formal data sources, such as, the Census 2011, and by listening to the views of those living and working in the borough. They reflect our most pressing health and wellbeing issues right across the life course from birth to end of life. This will ensure we are well placed to continually build, protect and promote resilience for good health and wellbeing at all stages throughout life.

Whilst the principal responsibility for developing and delivering this strategy sits with Bury's Health and Wellbeing Board, all of us living and working in Bury have a role to play in its delivery. In Bury, we are fortunate to have a strong history and culture of working together with demonstrable success. Enhanced by a new legal framework, this strategy builds on that solid foundation, generating a renewed commitment and focus to making real differences to the lives of local people.

We know we are faced with significant financial pressures whilst customer expectations and demand for services is rising. There is also a very real responsibility on individuals to also help with this in self-caring and looking after themselves too. Team Bury, our local strategic partnership, is fully committed to collaborative working at a Greater Manchester level around Public Sector Reform. This work is focused on developing ways of improving outcomes for customers and efficiently using resources through integrated approaches. We recognise the journey ahead may be challenging, but we also welcome the opportunities it will bring.

Chair of the Health and Wellbeing Board

Cabinet Member for Health and Wellbeing.

Andrea Simpson



Deputy Chair of the Health and Wellbeing Board

Executive Director for the Department of Communities and Wellbeing

Pat Jones-Greenhalgh



Introduction

Under the Health and Social Care Act 2012, upper tier Councils in England must establish a Health and Wellbeing Board.

The vision of Bury's Health and Wellbeing Board is to:

“Improve health and wellbeing through working with communities and residents to ensure that all people have a good start and enjoy a healthy, safe and fulfilling life.”

Bury Health and Wellbeing Board

Bury Health and Wellbeing Board (the Board) has been operating in shadow form since May 2011. From April 2013, it became a statutory committee of Bury Council. The Board brings together senior leaders from across Bury Council and the NHS with elected members, HealthWatch, and representatives from the voluntary and community sector, to set out a vision for improving health and wellbeing in the Borough.

The Board will be the single strategic forum to ensure coordinated commissioning and delivery across the NHS, Social Care, Public Health and other services.

The Board will determine, shape and implement key priorities and integrated strategies to deliver improved health and wellbeing outcomes, for the whole of the population of Bury.

The Board will set out the most pressing health and wellbeing priorities for the Borough and what it will do about them in this Joint Health and Wellbeing Strategy. This strategy is also intended to influence the direction of other relevant strategies and plans.

There is a long and rich history in Bury of partners working together to promote, improve and protect health and wellbeing. The Board will build upon this legacy with the strength of a new statutory framework. It will bring a sharper focus to shared priorities, provide strong leadership to drive forward progress on these and strengthen existing programmes of work to increase their impact.

Further information about the Board, its membership and meetings is available at: www.theburydirectory.co.uk/healthandwellbeingboard



The Joint Health and Wellbeing Strategy

This strategy is the Board's overarching plan to respond to those needs identified in the JSNA, from other data sources and from those who live and work in the borough. It sets out the Board's vision for the health and wellbeing of people in Bury and identifies key priorities for action.

This strategy does not set out all that we need to do around health, wellbeing and social care. There are already a range of strategies, set out at Appendix 2, that focus on specific issues and will complement and support this strategy. Rather, this is meant to focus on the most important and pressing challenges we face in the borough that cannot be addressed by a single agency alone. The five priorities identified in Section 4 cut across all organisations and it is joint action that can make the biggest difference. The strategy emphasises the importance of integration, prevention and early intervention, and targeting resources at those most in need.

This strategy will also inform the plans of Bury Clinical Commissioning Group (CCG), Bury Council and NHS England as to the services they intend to put in place. This will ensure we are maximising efforts to close the gap in healthy life expectancy both within the borough and in comparison with the rest of the country.

The Board will monitor the delivery of this strategy every twelve months based on the measures of success set out under each priority. It will also refresh this five year strategy on an annual basis.



Development of this strategy

This Strategy has recently been refreshed. The needs and priorities highlighted within this refreshed strategy have been agreed by the Board and wider stakeholders, including members of the community. They are based on a range of information about health and wellbeing from a wide variety of sources, including:

- The JSNA, as a one-stop source of reliable information about, and analysis of, the health and care needs of our population and its communities to identify priority areas of need. The current JSNA is available at www.bury.gov.uk/jsna
- It is acknowledged that some of the data in the JSNA is now out of date. Therefore, more up-to-date data sources have been used where available. These include the Census 2011, the Bury Health Profile, baseline data in various outcomes frameworks and Bury's Public Health Annual Report 2012. All data sources used within this refreshed strategy are referenced throughout the document.
- Existing local strategies and plans that influence health and wellbeing
- Knowledge and experience of those living and working in the borough

The priorities within this strategy have also been informed by listening to what local people have told us. An extensive consultation has taken place on the earlier draft version of this strategy. This showed overall support for the priorities and a resounding consensus that giving children the best start in life was the most important priority. The consultation also emphasised the importance of mental health and wellbeing, work and employment. The strategy has been strengthened to reflect these issues. The consultation also provided valuable insights into perceived barriers and opportunities in implementing the actions under each priority. These will be crucial in informing the implementation of this strategy, ensuring we are building on our assets to drive it forward. The consultation has also helped shape our four principles which we believe will deliver the change and improvement required to achieve our desired health and wellbeing outcomes. Further details of the consultation exercise are available at <http://www.bury.gov.uk/index.aspx?articleid=7415>.

This strategy was subject to an Equality Assessment (EA) to ensure compliance with the Equality Act 2010 and consideration of its impact on protected groups. As this strategy is concerned with reducing health inequalities and based upon the needs of specific equalities groups where known, the EA found that overall it will have a positive effect on equalities. The JSNA provides data in relation to specific equalities groups, and this has been key in informing the development of this strategy. However, it is recognised that there are gaps in the data in relation to some equalities groups. The forthcoming refresh of the JSNA will seek to address these gaps where data exists. The consultation process around the draft version of this strategy provided valuable feedback from some specific equalities groups and those working with them. Tackling inequalities and ensuring we meet the needs of specific groups, will further inform this Strategy's implementation. The full EA provides further information about how we have paid due regard to our public sector equality duty. The Equality Assessment for the refreshed Strategy has been updated.



Section 1: Our Principles

The following principles will guide the work of Bury Health and Wellbeing Board and be at the core of all we do:

We will promote and develop prevention, early intervention and self-care

Many illnesses can be prevented and intervening early can limit their extent. Taking care of ourselves is crucial in keeping well. We will enable and support people and communities to take responsibility for their own health and wellbeing, working with them to develop the knowledge, skills and confidence required to do so.

We will reduce inequalities in health and wellbeing

We know that there are social and economic reasons that have a negative impact on people's health and wellbeing. We will work with and influence partners to address these issues and the impact they have on our health and wellbeing. We will ensure that resources are proportionately targeted to those most in need in order to close the gaps in health experience within the borough and beyond.

We will develop person centred services

We will simplify how health and social care is created and delivered in Bury. We will make sure that people can access services, in a timely way, and see that they are fair. We will ensure that local people have the opportunity to shape and influence services, so that they meet their needs and keep them safe. We will provide the appropriate information to support and enable them to make the right choices for themselves.

We will plan for future demands

We recognise that the population is ageing and more care is needed. We also know that customer expectations are changing. We will use all our information and intelligence sources to enable effective planning and use our resources wisely to ensure the right services are available. We will also ensure that quality is at the heart of all advice, support and care services to ensure the effective use of those resources and maximise outcomes. Crucial to this is working with, and listening to, local people.



Section 2: Our approach to improving health and wellbeing

The Board has adopted an all encompassing approach to health and wellbeing, using the World Health Organisation's definition of health as 'as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity' in producing this strategy. Maintaining health and wellbeing is important for individuals to maximize their potential, enable them to lead active, fulfilled lives and participate fully in their local community. Figure 1 shows the wide range of factors that affect our health and wellbeing.



Source: Modified from Dahlgren & Whitehead's rainbow of determinants of health (G Dahlgren and M Whitehead, Policies and strategies to promote social equity in health, Institute of Futures Studies, Stockholm, 1991) and the LGA circle of social determinants (Available at: http://www.local.gov.uk/web/guest/health/-/journal_content/56/10171/3511260/ARTICLE-TEMPLATE)

Figure 1: Model of wider determinants of health and wellbeing

The Board has placed a strong emphasis on 'wellbeing' through this strategy. Wellbeing is people's sense and experience of mental, social, physical and spiritual health. It includes people's sense of control over their lives, connectedness to others through their community and social networks, purpose, fulfilment, enjoyment and belonging. The Board strongly supports 'The Five Ways to Wellbeing' which are a set of evidence based public mental health messages. They Five Ways to Wellbeing are:

1. Connect (with others).
2. Be Active
3. Give
4. Take Notice
5. Learn



There are known differences in health experience and outcomes between different social groups. These are called health inequalities and can be on the basis of where people live or other features, such as, social class, ethnicity or age. The interaction between some of these can magnify health inequalities further. Action around all the wider determinants shown in the above diagram is crucial, therefore, in both increasing life expectancy and narrowing the gaps in health outcomes between groups. Targeting resources according to greatest need is also critical in closing inequalities gaps.

There are strong links between socio-economic deprivation and health inequalities. The Index of Multiple Deprivation (IMD) 2010 combines a number of indicators, chosen to cover a range of economic, social and housing issues, into a single deprivation score for each small area in England. This allows each area to be ranked relative to one another according to their level of deprivation. Figure 2 below shows the varying levels of multiple deprivations across Bury.

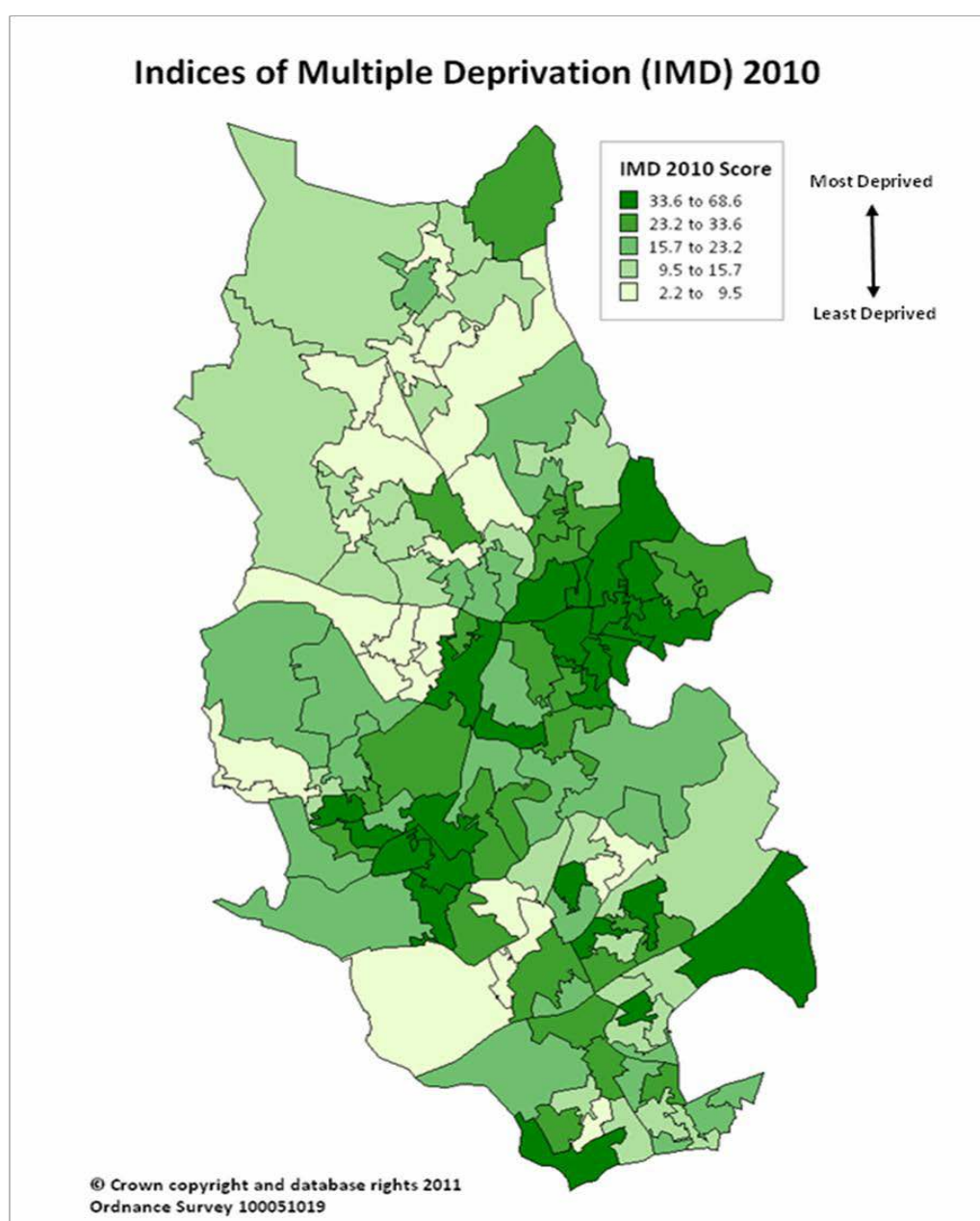


Figure 2: Indices of Multiple Deprivation (IMD) 2010



Our approach to improving health and wellbeing recognises that we have many assets within our communities that can be used to address the health and wellbeing needs in the borough. Our assets range from community and voluntary groups, parks and buildings, community activities and, crucially, local people. We are committed to listening to and working with local communities to understand their needs and work directly with them to develop local services that are important to them. This is known as a community assets-based approach to generate participation, sustainability, and ownership of local initiatives.

The strategy is also informed by the findings of the Marmot Review “Fair Society Healthy Lives” published in 2010. This review was requested by the then Secretary of State for Health and conducted by Prof. Michael Marmot. It looked at what were the most effective strategies and actions to reduce health inequalities across England. The review showed clear links between social and economic circumstances and health. It also highlighted that we accumulate positive and negative effects on health and wellbeing across the lifecourse. So, what we do earlier in life can strongly influence our health outcomes in later life. The review recommended that action was needed on the following six key policy objectives to effectively reduce health inequalities across England:

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- Ensure healthy standard of living for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill-health prevention

In producing this strategy, we have strived to reflect local action on all these policy objectives and across the life course to ensure we are focused on the root causes of ill-health and tackling health inequalities.



Section 3: Health and Wellbeing in Bury

Bury's population was estimated to be 186,500 in 2013¹. This is expected to rise to 198,800 by 2025^{1a}. Around 10.9% of Bury's population are from Black and minority ethnic (BME) Communities. Figure 3 shows the ethnic profile of Bury's population based on the 2011 Census.

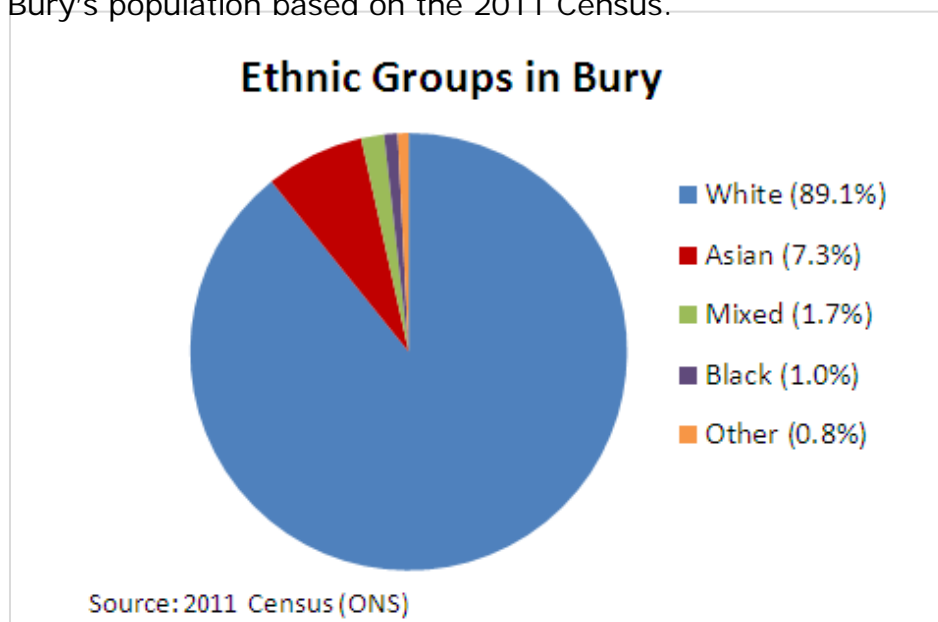
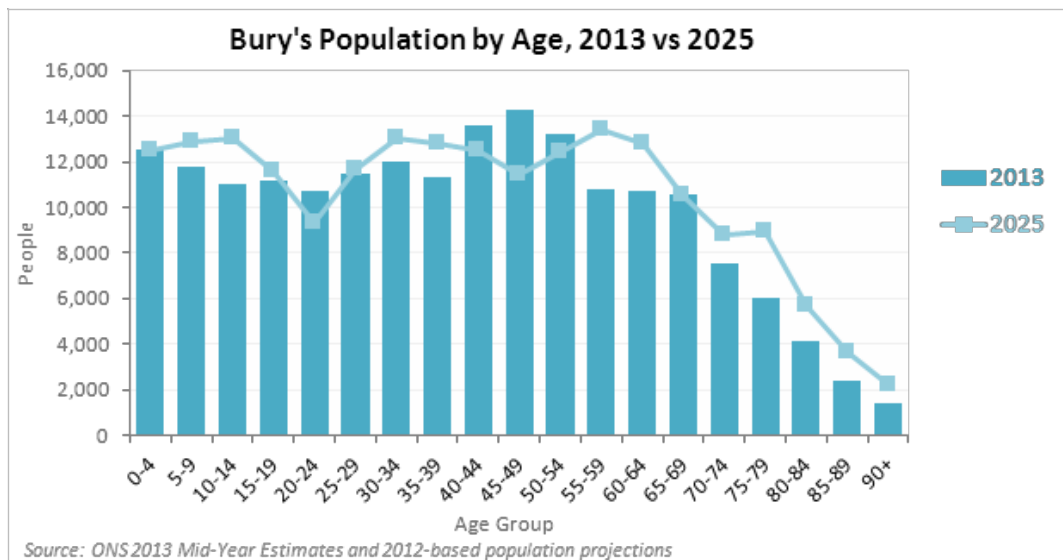


Figure 3: Ethnic Groups in Bury

By 2025, there are a range of changes expected in Bury's population as shown in Figure 4. While most age groups are expected to grow in size, the proportion of the population that are under 20 is expected to stay the same (at 25% of the total population), while the older is expected to increase - the proportion of the total population aged 65 and over is expected to rise from 17% in 2013 to 20% in 2025. The 80 and over population is also expected to increase from 4% to 6%. This means there will be 11,500 people aged 80 and over living in the borough in 2025, an increase of 46% on the 2013 figure (7,900).^{i,1a}





2013 Population by Age Group Compared to 2025 Population Projections for Bury

The ageing population will mean an increasing burden of poor health in later years and a significant increase in demand for health and social care. For example, as the population ages, the number of people living with dementia (and who are aged 65 and over) will increase by 34% over the next 10 years, which will result in a higher dependency on hospitals, carers and specialist care services.⁹⁹ Services will need to be shaped according to these changes. We need to support people to remain safe and independent for as long as possible.

In Bury, we have seen steady and lasting improvements in how long people can expect to live, partly due to a significant reduction in cardiovascular deaths. However, life expectancy in the borough is still below the England average and this gap is widening. Life expectancy for males is 78.2 years, just over 1 year less than the England average at 79.4 years. For women life expectancy in Bury is 81.2 years, which is 1.9 years less than the England average of 83.1 years. Across the borough there are big differences in life expectancy. For men there is a gap of 10.7 years and 7.4 years for women, between the most and least deprived areas across the borough.ⁱⁱ Bury has just under 1,800 deaths a year with the main causes being cancer and circulatory disease, with respiratory disease also a main contributor. Early death rates from cardiovascular disease and cancer have fallen but are still worse than the England average.ⁱⁱⁱ

Many of the leading causes of death and ill health are preventable. A focus on healthy lifestyles is critical in increasing life expectancy and narrowing the inequalities gap both locally and nationally. Smoking related deaths in Bury are significantly higher than the England average.^{iv} Smoking levels are 18% in adults, which is slightly lower than the England average.⁵ In Bury, over two-thirds of the adult population is overweight or obese, and the National Child Measurement Programme suggests that nearly 1 in 5 five year olds and 1 in 3 10 year olds are overweight or obese.^v Unhealthy lifestyles are risk factors in the development of long term conditions and the burden of ill-health associated with them. Ensuring we have joined-up services, focused on addressing the needs of the customer, and the promotion of self care will be critical.

In the early years, despite falling rates of teenage pregnancy, levels in Bury are still worse than the England average. Breastfeeding rates are below the national average, and there is significant drop off between initiation and 6-8 weeks.^{vi} Smoking in pregnancy is a key factor in low



birth weight and infant mortality. Local levels of smoking in pregnancy are high at 14% compared to the England average of 12%.^{vii} Giving children the best start in life is essential to their future social, health and economic outcomes right across life.

Bury's educational results remain significantly higher than the England average.^{viii} However there are educational attainment gaps between ethnicities. Those on free school meals and looked after children also experience lower attainment levels than the wider population. Education has an impact on employment and wider wellbeing issues throughout life. Bury has an unemployment rate consistently below the regional average, but there are small areas that fall into the most deprived for employment nationally, particularly Chesham Fold and Coronation Road. Disadvantaged groups are likely to require greater support to help them into work.

The JSNA has areas of possible inequalities which are not currently considered, such as, sexual orientation and religion. These areas will be included in the next iteration of the JSNA process where relevant data is available.

¹ Public Health England, Public Health Outcomes Framework Indicators 0.1ii, 0.2iii and 0.2iv (as at April 2015)

99 Projecting Older People Population Information System, www.poppi.org.uk, (as at April 2015)

¹ Public Health England, Public Health Outcomes Framework Indicators 4.04i and 4.05i (as at April 2015)

¹ Public Health England, Local Tobacco Control Profile (as at April 2015)

¹ Public Health England, Public Health Outcomes Framework Indicators 2.12, 2.06i and 2.06ii (as at April 2015)

¹ Public Health England, Public Health Outcomes Framework Indicators 2.02i and 2.02ii (as at April 2015)

¹ Public Health England, Public Health Outcomes Framework Indicator 2.03 (as at April 2015)

¹ Public Health England, 2012, Bury Health Profile

Four consistent themes are shown throughout the JSNA which still hold true in light of more up to date information:

- The consequences of the growth and profile of our population will increase demand for services particularly from older people.
- The effect of social deprivation on poorer health outcomes for some of our population compared to others.
- Social exclusion is both a cause and consequence of poor health outcomes and often results from limited rights, resources and opportunities.
- The impact of lifestyle choices which are increasing the demand on services, increasing inequalities and will result in higher levels of ill-health and lower levels of wellbeing.

The Board has a statutory duty to tackle health inequalities. Its second principle is around tackling inequalities in health and wellbeing which, in turn, has informed the priorities set out below.



Section 4: Our Priorities

Priority 1 – Starting Well

Why this is important

Focusing on pregnancy and the first few years of a child's life ensures that children can be given the best possible start for their physical, educational and emotional development which will help them realise their potential and flourish throughout their lives. Prevention, intervening early and supporting parents in the first phase of a child's life represents a key opportunity to break the cycle of deprivation, disadvantage and poor outcomes across the life course.

Strengthening the relationship between infants and parents/guardians has a strong impact on both physical and mental health. Parenting is the single largest factor implicated in a range of health and social outcomes for children, notably accident rates, substance misuse, teenage pregnancy, truancy, school exclusion and underachievement, child abuse, employability, juvenile crime and mental illness.^{ix}

Identifying those in need of help and support, intervening early and addressing the whole family's needs is crucial to a child's development and realising our aspiration for laying the foundations for future life. Giving every child the best start in life was the most important of all the policy recommendations for reducing health inequalities in The Marmot Review. It was also identified as the highest priority locally from the consultation on this strategy.

Bury is better than Statistical Neighbour average

- Almost 14% of women in Bury who give birth are smoking at the time of their delivery. This has improved from last year and is the second best rate in the statistical neighbour group, where the average is 17%
- Initiation of breastfeeding after birth has improved in Bury for the last three years to 70% of new mothers in 2013/14. This puts Bury as third highest in the statistical neighbour group (where the average 66%)
- Five year olds in Bury have an average of 1.3 decayed, missing or filled (dmf) teeth, which is the same as the average of our statistical neighbours
- 15% of children who left care in 2013/14 were subjects of Special Guardianship Orders, which is better than the statistical neighbour average of 12%

Bury is worse than Statistical Neighbour average

- The infant mortality rate in Bury has been on a worsening trend in recent years, and is currently 5.2 per 1000 live births. This is the third highest rate in the statistical neighbour group



- The percentage of children achieving a good level of development at the end of reception has improved from the previous year, but Bury is still slightly below the statistical neighbour average, at 56%
- The same is true for reception pupils who receive free school meals – in Bury, 39% achieve a good level of development, compared to the statistical neighbour average of 41%
- In Year 1, the percentage of pupils achieving the expected level in phonics screening check is the lowest in the statistical neighbour group, both overall and for pupils who receive free school meals
- Bury has a higher percentage of child protection plans that are repeats, compared to the average of our statistical neighbours – 20% (avg 17%)
- Fewer children leaving care in Bury are adopted – 17%, versus 19 Statistical Neighbour average
- Fewer children in care have long term placement stability in Bury (55%) than the average of our statistical neighbours (69%). Bury has the second lowest rate in the Statistical Neighbour group

Our Actions

We will:

1. Improve health and developmental outcomes for Under 5s.
2. Develop integrated services across education, health and social care which focus on the needs of the child especially those with the most complex needs.
3. Support positive and resilient parenting, especially for families in challenging circumstances
4. Narrow the attainment gap amongst the vulnerable groups.

Measures of Success

If we are making a difference, we will have:

1.
 - a) Improved health outcomes for under 5s
 - b) A higher proportion of children will be school ready
2. Implemented the SEND reforms
3.
 - a) Fewer children making repeat entry into the social care system
 - b) Children move from care into high quality permanence
 - c) Children in care in stable placements
4. Improvements in the differences in levels of educational attainment across the borough and between groups



Indicators

1. a) Improved health outcomes for under 5s
 - Number of mothers who smoking during pregnancy
 - Breastfeeding initiation and maintenance at 6-8 weeks after birth
 - Infant mortality
 - Tooth decay in children aged 5
 - Childhood obesity
- b) A higher proportion of children will be school ready
 - Children achieve a good level of development by the end of Reception
 - Children with free school meal status achieve a good level of development at the end of reception
 - Year 1 pupils will achieve the expected level in the phonics screening check
 - Year 1 pupils with free school meal status will achieve the expected level in the phonics screening check
2. Implemented the SEND reforms
 - Number of Education, Health and Care Plans (EHC)
 - Number of families accessing personal budgets
3. a) Fewer children making repeat entry into the social care system
 - A reduction in the number of repeat child protection plans
- b) Children move from care into high quality permanence
 - Number of children moving out of care into permanence through adoption or Special Guardianship Orders
- c) Children in care in stable placements
 - Long term placement stability for Children and Young People in Care
4. Improvements in the differences in levels of educational attainment across the borough and between groups
 - Narrowing the gap indicators

Summary

ACTIONS	MEASURES OF SUCCESS	INDICATORS	Responsible Group
Improve health and developmental outcomes for Under 5s.	Improved health outcomes for under 5s	Number of mothers who smoking during pregnancy	Children's Trust Board
		Breastfeeding initiation and maintenance at 6-8 weeks after birth	



		Infant mortality	
		Tooth decay in children aged 5	
		Childhood obesity	
	A higher proportion of children will be school ready	Children achieve a good level of development by the end of Reception	
		Children with free school meal status achieve a good level of development at the end of reception	
		Year 1 pupils will achieve the expected level in the phonics screening check	
		Year 1 pupils with free school meal status will achieve the expected level in the phonics screening check.	
Develop integrated services across education, health and social care which focus on the needs of the child especially those with the most complex needs	Implementation of SEND reforms	Number of EHC plans in place	Children's Trust Board
		Number of families accessing personal budgets	
Support positive and resilient parenting, especially for families in challenging circumstances	Fewer children making repeat entry to social care system	A reduction in the number of repeat child protection plans	Bury Safeguarding Children's Board
	Children move from care into high quality permanence	Number of children moving out of care into permanence through adoption or Special Guardianship Orders	
	Children in care in stable placements	Long term placement stability for CYPIC	



<p>Narrow the attainment gap amongst the vulnerable groups.</p>	<p>Improvements in the differences in levels of educational attainment across the borough and between groups</p>	<p>Narrowing the gap indicators</p>	<p>Children's Trust Board</p>
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Priority 2 – Living Well

Why this is important

Maintaining a healthy lifestyle is essential for good health and wellbeing. Smoking, poor diet, physical inactivity, alcohol and drug misuse are risk factors for a range of long-term health conditions, such as, cardiovascular disease, diabetes, some cancers and dementia.

Unhealthy lifestyles contribute to the major causes of deaths in Bury of cardiovascular disease, cancer and respiratory diseases and to early deaths. Smoking-related illnesses are the main preventable cause of early death in Bury. The rate of smoking related deaths in Bury is worse than the average for England, representing around 334 deaths per year. (Bury Health Profile 2014). In Bury, life expectancy is lower than in England. Lifestyle factors are key drivers behind health inequalities.

There are links between unhealthy lifestyles and poor mental health with obesity, alcohol misuse and higher levels of smoking all linked to mental ill-health. Leading a healthy lifestyle can have positive impacts on all aspects of health and wellbeing - physical, mental and emotional – and can offer resilience to stressors in life. Physical activity is a good example of this and it can significantly improve confidence and self-esteem.

It is recognized, however, that it is not always easy to adopt a healthy lifestyle and there are many factors affecting that. These could range from lack of information to support individual choices to wider environmental factors, such as the availability and price of alcohol, unhealthy food and tobacco products. It is vital, therefore, that we maximise all opportunities at policy, service and individual levels to facilitate well-informed and supported individuals, able to influence and sustain their own health and wellbeing within healthy environments. We also know that many behaviours are set in childhood and it is important to target action that supports children and their families to start and sustain healthy lifestyles.

Bury is better than Statistical Neighbour average

- People in Bury have higher rates of self-reported wellbeing than for the average of our statistical neighbour group, and scores have improved on the previous year
- Fewer children are classed as having excess weight – 19% of reception pupils (vs 23% Statistical Neighbour average) and 34%



of children in Year 6 (vs 35%), although rates have increased for Year 6 pupils for the last two time periods

- Bury has more physically active adults than the statistical neighbour average (55% vs 51%), and has improved on the previous time point
- Smoking rates have decreased in recent years to 18% of adults – this is the second lowest rate in the Statistical Neighbour group

Bury is worse than Statistical Neighbour average

- Bury has more adults who are overweight than the Statistical Neighbour average (68% vs 66%)
- Bury has more adults who binge drink (25% vs 23%)

Our Actions

We will:

1. Ensure comprehensive advice and support is available to support people to maintain a healthy lifestyle
2. Establish a healthy schools and work and health programme
3. Adopt a 'health in all policies' approach to policy and strategy development

Measures of Success

If we are making a difference:

1. People will adopt and maintain a healthy lifestyle and be physically active
2. All schools and workplaces in Bury will be 'health promoting' organizations
3. All policies and strategies will be developed to ensure they have a positive impact on the health of people in Bury

Indicators

For all actions and measures of success will be:

- More people reporting positive mental wellbeing
- Increase in proportion of people who maintain a healthy weight
- Increase in proportion of people who are physically active
- Reduction in proportion of people who smoke



- More people drinking alcohol within the recommended safe levels

Summary

ACTIONS	MEASURES OF SUCCESS	INDICATORS	Responsible Group
Ensure comprehensive advice and support is available to support people to maintain a healthy lifestyle	People will adopt and maintain a healthy lifestyle and be physically active	More people reporting positive mental wellbeing Increase in proportion of people who maintain a healthy weight	Health & Social Care Integration Partnership Board
Establish a healthy schools and work and health programme	All schools and workplaces in Bury will be 'health promoting' organisations All workplaces in Bury will be 'health promoting' organisations	Increase in proportion of people who are physically active Reduction in proportion of people who smoke	Health & Social Care Integration Partnership Board
Adopt a 'health in all policies' approach to policy and strategy development	All policies and strategies will be developed to ensure they have a positive impact on the health of people in Bury	More people drinking alcohol within the recommended safe levels	Health & Social Care Integration Partnership Board



Priority 3 – Supporting people to live well with a long term condition or as a carer

Why this is important

It is estimated that 45,000 adults in Bury have at least one long term condition. Long term conditions are those that cannot currently be cured but can be managed variously with medication, support services and therapies, and self care strategies, such as maintaining a healthy lifestyle. They include diabetes, heart disease, dementia, mental health conditions, chronic obstructive pulmonary disease (COPD) and some neurological conditions.

People living in more deprived communities are at greater risk of developing a number of conditions but are less likely to be diagnosed early thus having poorer health outcomes. Long term conditions are more likely in older age and some, such as diabetes, are more prevalent in ethnic minority communities. The number of people living with more than one condition also increases with age. Those with long term conditions are two to three times more likely to experience mental health problems than the general population.^x

The consequences of long term conditions can be life-changing and even devastating for some people and their families without the right support in place. Some people may struggle to seek or remain in work and they may become dependent on benefits. Roles they undertook within their family life and social activities may cease. Having the right support, retaining choice and control, confidence and self-esteem are all vital in self management of a condition, maintaining independence and coping with everyday life. Adopting self care approaches, such as maintaining a healthy lifestyle, utilising available technologies and meeting one's wellbeing needs are also important.

Carers are vital in providing physical, practical and emotional support. However, carers providing support for 50 hours a week or more are twice as likely to be in poor health as those not caring.

The Carers Trust defines a carer as 'someone of any age who provides unpaid support to family or friends who could not manage without this help. This could be caring for a relative, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems'^{xi}. Data from the 2011 census tells us that, in Bury, there are 19,954 people providing some form of unpaid care. This is 11% of the population and is an increase of 723 individuals in the last 10 years.

To support unpaid carers within our borough, the Carers Strategy Group developed the Adult Carers Strategy for Bury 2013-2018. The four main aims of this strategy are to strengthen:

1. Identification and recognition;
2. Realising and releasing potential (continuing with career and/or educational attainment);
3. A life outside of caring;
4. Supporting carers to stay healthy.



For more detailed information, go to

<http://www.bury.gov.uk/index.aspx?articleid=4903>

¹ NHS Inform, Long Term Health Conditions and Mental Health available at: <http://www.nhsinform.co.uk/MentalHealth/Wellbeing/Long-Term-Health-Conditions> ¹
www.carers.org.

Bury is better than Statistical Neighbour average

- Carers and people with long term conditions in Bury report a better health-related quality of life than the statistical neighbour average
- More adults with learning disabilities live in stable and appropriate accommodation in Bury than for the average of our statistical neighbours (86% vs 83%)
- In Bury, there are fewer unplanned admissions for chronic ambulatory care sensitive conditions than for the average of our statistical neighbours (1017 per 100,000 population vs 1057), although the trend has been worsening over the last three data points
- More adult carers have as much social contact as they would like (i.e. fewer are socially isolated) than the average of our statistical neighbours (47% vs 45%)
- The employment gap between the general population and people with a learning disability is about the same as the average of our statistical neighbours (64 percentage points), although this has worsened since the previous data point

Bury is worse than Statistical Neighbour average

- Bury has the largest gap in the employment gap between the general population and adults who are in contact with secondary mental health services in the statistical neighbour group (71 percentage points v 64 on average)
- Fewer adults who are in contact with secondary mental health services live in stable and appropriate accommodation than the average of our statistical neighbours (36% vs 59%). Bury has the second lowest rate in the statistical neighbour group.
- The employment gap between the general population and people with long-term conditions is slightly wider than for the average of our statistical neighbours (11.0 percentage points vs 10.7)

Our Actions

We will:

1. Ensure people with long term conditions (including mental health) are



supported to live as well as possible with their condition.

2. Ensure carers have access to the support and information they need to fulfil their caring role and maintain their own health.
3. Support people with long term conditions (including mental health) to achieve and maintain sustainable employment.

Measures of Success

If we are making a difference, we will have:

1. a) An improved quality of life for people living with long term conditions
 - b) A reduction in hospital admissions for people with long term conditions
 2. Improved health and wellbeing of careers
 3. Increased number of people with long term conditions in sustainable employment.
-
1. a) An improved quality of life for people living with long term conditions
 - Health related quality of life for people with long term conditions
 - Percentage of adults with a learning disability living in stable and appropriate accommodation
 - Percentage of adults in contact with secondary mental health services who live in stable and appropriate accommodation
 - b) A reduction in hospital admissions for people with long term conditions
 - Unplanned hospitalisation for chronic ambulatory care sensitive conditions
 2. Improved health and wellbeing of careers
 - Percentage of adult carers who have as much social contact as they would like
 - Health related quality of life for carers
 3. Increased number of people with long term conditions in sustainable employment.
 - Gap in the employment rate between those with a long term health condition and the overall employment rate



- Gap in the employment rate between those with a learning disability and the overall employment rate
- Gap in the employment rate between those in contact with secondary mental health services and the overall employment rate

Summary

ACTIONS	MEASURES OF SUCCESS	INDICATORS	Responsible Group
<p>Ensure people with long term conditions (including mental health) are supported to live as well as possible with their condition.</p>	<p>An improved quality of life for people living with long term conditions</p>	<p>Health related quality of life for people with long term conditions</p>	<p>Bury Integrated Health & Social Care Partnership Board</p>
		<p>Percentage of adults with a learning disability living in stable and appropriate accommodation</p>	
	<p>Percentage of adults in contact with secondary mental health services who live in stable and appropriate accommodation</p>		
	<p>A reduction in hospital admissions for people with long term conditions</p>	<p>Unplanned hospitalisation for chronic ambulatory care sensitive conditions</p>	
<p>Ensure carers have access to the support and information they need to fulfil their caring role and maintain their own health.</p>	<p>Improved health and wellbeing of carers</p>	<p>Percentage of adult carers who have as much social contact as they would like</p>	<p>Bury Integrated Health & Social Care Partnership Board</p>
		<p>Health related quality of life for carers</p>	
<p>Support people with long term conditions (including</p>	<p>Increased number of people with long term conditions in sustainable employment.</p>	<p>Employment of people with long term conditions</p>	<p>Economic Partnership Board</p>



<p>mental health) to achieve and maintain sustainable employment.</p>	<p>Gap in the employment rate between those with a long term health condition and the overall employment rate</p>	
	<p>Gap in the employment rate between those with a learning disability and the overall employment rate</p>	
	<p>Gap in the employment rate between those in contact with secondary mental health services and the overall employment rate</p>	

Priority 4 – Ageing Well

Why this is important

We live in an ageing society where the number of older people is set to increase. Many older people live independent and fulfilling lives, feel they are in good health and, on the whole, experience a good quality of life. For some, however, ageing will lead to an increased risk of multiple health problems, feeling lonely and isolated, and increased health and social care needs.

For some older people ensuring they are able to play an active role within their community, whilst tacking the impact of social isolation, will be all the support they need to lead an independent life. Where older people do have care and support needs, it is important that the impact of this is reduced and that they are supported to reduce the likelihood of this happening again. Without health and social care intervention, conditions and injuries such as stroke, falls and dementia can undermine a person’s wish to remain in their own home and return to independent living. Effective prevention, reablement and support which promote independence are critical and reduce the need for hospital admission or long term care and support.

In addition to this, strong links with safeguarding services will ensure we protect the most vulnerable from being subject to anti-social behaviour, crime and abuse.

Having secure, appropriate and settled accommodation, with the right kind of support, plays a vital role in health, wellbeing and feeling safe and secure. It is important to have the right kind of housing that is accessible, can accommodate any necessary aids and adaptations, and is warm and energy efficient.

With an ageing population, the number of carers is likely to increase and there are likely to be more older carers. Carers often experience poor health outcomes as they focus on the needs of those they are caring



for at the expense of their own health and wellbeing. We need to ensure their needs are met.

When people reach the end of their life, we need to ensure that people are treated with dignity and respect and that they are supported to die at a place of their choosing. Supporting people to plan for the end of their life will ensure that they, and their careers, are involved with this as much as possible.

Older people are at particular risk of falls which is one of the main reasons for hospital admissions and the need for social care support. Around 35% of people aged 65 and over living in the community fall each year and this increases with age. Hip fractures are the most serious consequences of a fall in the over 65s; around 20% of those who have a hip fracture (often due to a fall) will die within four months.

A stroke is the third most common cause of death in the UK and around 50% of strokes occur in people aged over 75. After a stroke, around 30% will die within a year. For those surviving a stroke, many are left with longer-term problems or permanent disability. Around 1 in 12 people over 65 in the UK have dementia and the chances of developing dementia increase with age. Those who have had a healthy lifestyle earlier in their life, reduce their risk of dementia.

Bury is better than Statistical Neighbour average

- Fewer people aged 65 and over are permanently admitted to care homes (702 per 100,000 people aged 65 and over, vs 723)
- Slightly more older people who have been discharged from hospital into reablement services are still at home 91 days later (81.4%) than for the average of our statistical neighbours (81.2%)
- More people die in their usual place of residence in Bury (22.4%) than for the average of our statistical neighbours (21.7%) – Bury has the third highest rate in the statistical neighbour group

Bury is worse than Statistical Neighbour average

- Out of the monitored indicators we are achieving better than our statistical neighbour average in them all

Our Actions

We will:

1. Ensure older people play an active role within their community, tackling the impact of social isolation
2. Reduce the likelihood of people experiencing a crisis and when they do reduce the impact of this
3. Ensure people at the end of life are treated with dignity and respect

Measures of Success

If we are making a difference, we will have:

4. a) A reduction in the number of older people that feel socially isolated



5. a) A reduction in non elective admissions in older people
 b) A reduction in permanent admissions to residential and nursing homes
 c) An increase in the number of over 65's who remain at home following re-ablement services
6. a) An increase in the number of people that have choice and control over where they die
 b) An increase in the number of people that die with an end of life plan

Indicators

1. a) No older people will feel socially isolated
 - People aged 65 plus who have as much social contact as they would like
2. a) A reduction in non elective admissions in older people
 - Non elective admissions for people aged 65 plus
 b) A reduction in permanent admissions to residential and nursing homes
 - Permanent admissions to care homes people aged 65 and over
 c) An increase in the number of over 65's who remain at home following re-ablement services
 - Older people at home 91 days after leaving hospital into reablement
3. a) People will have choice and control over where they die
 b) People will die with an end of life plan
 - Proportion of deaths in usual place of residence (from End of Life Care Intelligence Network)

Summary

ACTIONS	MEASURES OF SUCCESS	INDICATORS	Responsible Group
<p>Ensure older people play an active role within their community, tackling the impact of social isolation</p>	<p>A reduction in the number of older people that feel socially isolated</p>	<p>People aged 65 plus who have as much social contact as they would like (Adult User Experience Survey)</p>	<p>Bury Integrated Health & Social Care Partnership Board</p>
<p>Reduce the likelihood of people experiencing a</p>	<p>A reduction in non elective admissions in older people to A&E</p>	<p>Non elective admissions for people aged 65 plus (AOA)</p>	<p>Bury Integrated Health & Social Care Partnership Board</p>



crisis and when they do reduce the impact of this	A reduction in permanent admissions to residential and nursing homes	Permanent admissions to care homes people aged 65 and over (ASCOF indicator 2A,(2))	
	An increase in the number of over 65's who remain at home following re-ablement services	Older people at home 91 days after leaving hospital into reablement (ASCOF Indicator 2B(1))	
Ensure people at the end of life are treated with dignity and respect	An increase in the number of people that have choice and control over where they die	Proportion of deaths in usual place of residence (from End of Life Care Intelligence Network)	Bury Integrated Health & Social Care Partnership Board
	An increase in the number of people that die with an end of life plan		

Priority 5 – Healthy Places

Why this is important

Most people intuitively understand that where they live and the quality of their local environment has an impact on their health and well-being but there is also robust evidence from a wide range of sources which tells us about the direct effects of the environment on our health status and life-expectancy.

The layout of our built environment can help or hinder social connectivity, active travel, our safety and access to essential amenities. Having access to green space is essential for well-being, good quality housing helps prevent accidents and provides security and warmth.

Carbon reduction and recycling strategies also make an important positive contribution to the public’s health. Carbon reduction and recycling of waste are important measures for conserving the natural resources and energy, reducing the amount of waste going to landfill and reducing greenhouse gases that contribute towards climate change.

The long term health of our population is dependent on the continued stability and effective functioning of our global environment. Continued pressure on the earths resources through human activity is contributing to climate change which brings with it new risks and hazards to our health such as flooding and new infectious disease.

In short, what is good for the environment is good for our health

Bury is better than Statistical Neighbour average



- Bury recycles more of its household waste (43%) than our statistical neighbours, on average (41%)
- Slightly fewer households are in fuel poverty (10.3% vs 10.4% Statistical Neighbour average)
- In the statistical neighbour group, Bury has the third lowest rate of households that live in temporary accommodation at 0.2 per 1000 households (Statistical Neighbour average is 0.4)

Bury is worse than Statistical Neighbour average

- Bury has a slightly worse rate of mortality due to air pollution (4.8% of deaths in people aged 30 and over, vs Statistical Neighbour average of 4.7%)
- In the statistical neighbour group, Bury has the third highest rate of homeless acceptances – 2.5 per 1,000 households (Statistical Neighbour average is 1.8)

Or Actions

We will:

1. Create a clean and sustainable environment
2. Ensure suitable and quality homes

Measures of Success

If we are making a difference, we will have:

1.
 - a) Improved air quality
 - b) Reduced carbon emissions
 - c) Green spaces that are welcoming, safe and well maintained
 - d) High levels of recycling
2.
 - a) Access to affordable and appropriate tenure housing
 - b) Access to quality homes that meet people needs and secure their health and wellbeing
 - c) Reduced homelessness

Indicators

1.
 - a) Improved air quality
 - Fraction of mortality attributable to particulate air pollution
 - Adapting to Climate Change (Local PI on PIMS)
 - Annual Greenhouse Gas Report (% change in Bury Council's Carbon emissions)



- b) Reduced carbon emissions
 - Suite of Planning indicators proposed in Bury’s core strategy (zero carbon, mitigating measures in new developments which have a negative effect on air quality)
 - c) Green spaces that are welcoming, safe and well maintained
 - ‘Green flag’ standard parks in the borough
 - Street cleanliness levels
 - d) High levels of recycling
 - Percentage of households recycling
2. Ensure people have suitable and quality homes
- Statutory homelessness - homelessness acceptances
 - Statutory homelessness - households in temporary accommodation
 - Percentage of households in fuel Poverty

Summary

ACTIONS	MEASURES OF SUCCESS	INDICATORS	Responsible Group
Create a clean and sustainable environment	Improved air quality	Fraction of mortality attributable to particulate air pollution	Carbon Reduction Board
	Reduced carbon emissions	Percentage change in Carbon emissions	
	Green spaces that are welcoming, safe and well maintained	‘Green flag’ standard parks in the borough	Carbon Reduction Board
		Street cleanliness levels	
High levels of recycling	Percentage of households recycling		
Ensure suitable and quality homes	Access to affordable and appropriate tenure housing	Percentage of households in fuel	Housing Strategy Programme Board (HSPB)



	<p>Access to quality homes that meet people needs and secure their health and wellbeing</p>	<p>Poverty</p> <p>Statutory homelessness - homelessness acceptances</p>	
	<p>Reduced homelessness</p>	<p>Statutory homelessness - households in temporary accommodation</p>	



Section 5: Next Steps

To translate this strategy into action, detailed implementation plans will be developed as part of an annual programme of work. The implementation plans will reflect some of the useful insights provided through the consultation process around barriers and opportunities for delivery.

The Health and Wellbeing Board is the principal body for making sure that the actions and outcomes set out in this strategy are delivered and that there is a whole system contribution to achieving its vision. This strategy enables the Board to assess the plans and strategies of its partner organisations to ensure there is alignment with the Health and Wellbeing Strategy.

The Board will also hold other organisations to account for delivery of the actions within this Strategy.

A newly created virtual Hub will act as a conduit for the Board to influence and direct those strategic groups which will support the delivery of this strategy. The Hub will have a clear understanding of existing partnership structures and will play a key role in building strong collaborative relationships and facilitating integrated working amongst stakeholders. The Hub will also increase community engagement by involving service users, their organisations and the public in working groups or task groups and in the prioritisation and delivery of the Health and Wellbeing Strategy.

The Health and Wellbeing Strategy will be monitored and reviewed on a regular basis and revised annually. Bury Council's Health Scrutiny Committee will provide governance and it will receive regular progress reports from the Health and Wellbeing Board. The Board will also produce an annual report for the wider public.

This strategy has described our joint vision, the major challenges and our priorities for Bury over the next five years.

To ensure leadership, action and delivery of these priorities, as a Board we will:

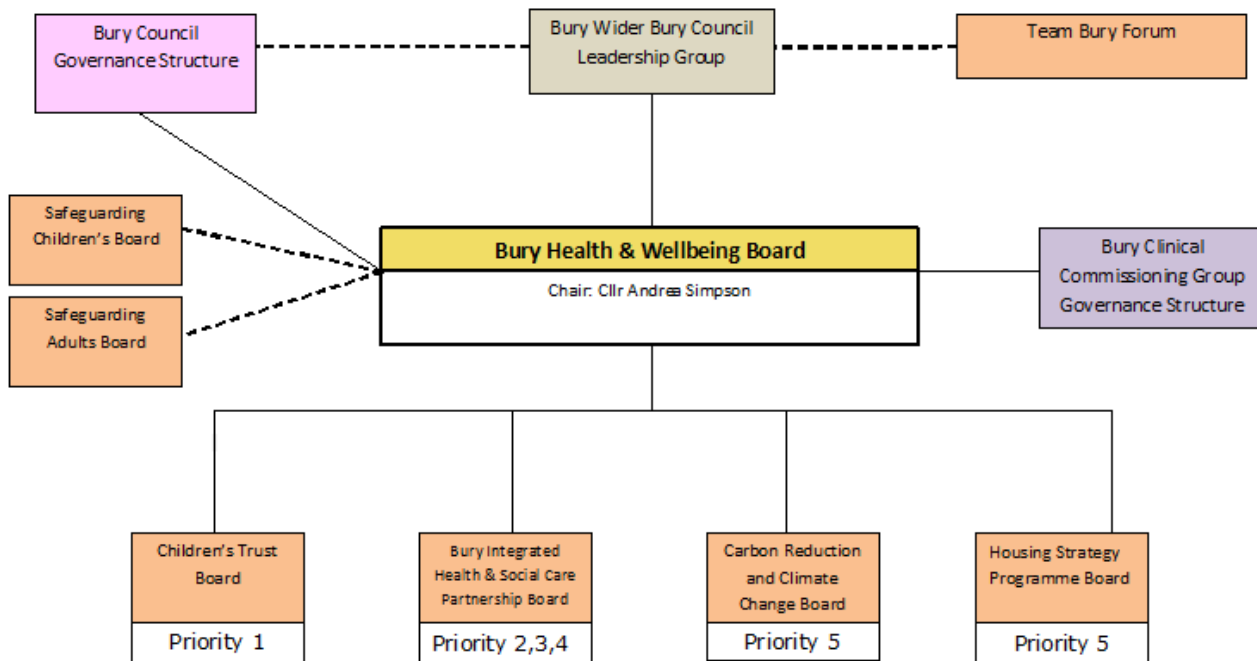
- Listen to our communities.
- As a priority, focus resources to improve health and wellbeing and reduce inequalities.
- Deliver an annual programme of work with stated outcomes and monitoring.
- Have accountable senior officers leading on delivery plans.
- Actively use the powers of health scrutiny to ensure commitments are delivered and monitored.
- Embed and consider the impact on health and wellbeing when making policy, planning decisions and service developments.

These are our commitments that will enable us to improve the health and wellbeing of all in Bury.



Overarching Governance for HWB Strategy

Bury Health & Wellbeing Board Governance Structure



Details

Self-reported wellbeing

Source: Public Health Outcomes Framework

Link to definition: <http://www.phoutcomes.info/public-health-outcomes-framework#gid/1000042/pat/6/ati/102/page/6/par/E12000004/are/E06000015/iid/22301/age/164/sex/4>

This data comes from four questions in the Annual Population Survey, published by the Office for National Statistics (ONS).

The data shows the percentage of respondents who answered 0-4 (on a scale of 0 (not at all) to 10 (completely) when asked:

2.23i "Overall, how satisfied are you with your life nowadays?"

2.23 ii "Overall, to what extent do you feel the things you do in your life are worthwhile?"

2.23 iii "Overall, how happy did you feel yesterday?"

For the fourth indicator (2.23iv – people with a high anxiety score), the data shows the percentage of respondents from Annual Population Survey who answered 6-10 (on a scale of 0 (not at all) to 10 (completely) when asked:

2.23iv "Overall, how anxious did you feel yesterday?"

Health-related quality of life

Source: NHS Indicators

Link to definition:

https://indicators.ic.nhs.uk/download/Outcomes%20Framework/Specification/NHSOF_Domain_2_S.pdf

Health-related quality of life refers to the extent to which people:

1. have problems walking about;
2. have problems performing self-care activities (washing or dressing themselves);
3. have problems performing their usual activities (work, study etc.);
4. have pain or discomfort;
5. feel anxious or depressed.

The indicator is based on the GP Patient Survey - a very large survey of adults registered with a GP Practice in England.

Chronic ambulatory care sensitive conditions

Source: NHS Indicators

Link to definition:

https://indicators.ic.nhs.uk/download/Clinical%20Commissioning%20Group%20Indicators/Specification/CCG_2.6_I00757_S_V7.pdf

This measures how many people with specific long-term conditions, which should not normally



require hospitalisation, are admitted to hospital in an emergency. These conditions include, for example, diabetes, epilepsy and high blood pressure

Fuel poverty

Source: Public Health Outcomes Framework

Link to definition: <http://www.phoutcomes.info/public-health-outcomes-framework#gid/1000041/pat/6/ati/102/page/6/par/E12000004/are/E06000015/iid/90356/age/1/sex/4>

Under the "Low Income, High Cost" measure, households are considered to be fuel poor where:

- 1.They have required fuel costs that are above average (the national median level)
- 2.Were they to spend that amount, they would be left with a residual income below the official fuel poverty line.

The key elements in determining whether a household is fuel poor or not are:

- Income
- Fuel prices
- Fuel consumption (which is dependent on the dwelling characteristics and the lifestyle of the household)

Homeless acceptances

Source: Public Health Outcomes Framework

Link to definition:

<http://www.phoutcomes.info/public-health-outcomes-framework#gid/1000041/pat/6/ati/102/page/6/par/E12000004/are/E06000015/iid/11501/age/1/sex/-1>

Count of households who are eligible, unintentionally homeless and in priority need, for which the local authority accepts responsibility for securing accommodation.

References

- Public Health Outcomes Framework (PHOF): www.phoutcomes.info
- Local Authority Interactive Tool (LAIT): <https://www.gov.uk/government/publications/local-authority-interactive-tool-lait>
- Local Alcohol Profiles for England (LAPE): <http://www.lape.org.uk/>
- NHS Outcomes Framework (NHSOF): www.indicators.ic.nhs.uk
- Adult Social Care Outcomes Framework (ASCOF): <http://ascof.hscic.gov.uk/>
- End of Life Care Intelligence Network (EoLCIN): http://www.endoflifecare-intelligence.org.uk/data_sources/
- [Department for Environment, Food & Rural Affairs \(DEFRA\): https://www.gov.uk/government/statistical-data-sets/env18-local-authority-collected-waste-annual-results-tables](https://www.gov.uk/government/statistical-data-sets/env18-local-authority-collected-waste-annual-results-tables)

Priority 1

Bullet	Data Source
1	Public Health Outcomes Framework
2	Public Health Outcomes Framework
3	Public Health Outcomes Framework
4	Local Authority Interactive Tool



5	Public Health Outcomes Framework
6	Public Health Outcomes Framework
7	Public Health Outcomes Framework
8	Public Health Outcomes Framework
9	Local Authority Interactive Tool
10	Local Authority Interactive Tool
11	Local Authority Interactive Tool

Priority 2

Bullet	Data Source
1	Public Health Outcomes Framework
2	Public Health Outcomes Framework
3	Public Health Outcomes Framework
4	Public Health Outcomes Framework
5	Public Health Outcomes Framework
6	Local Alcohol Profiles for England

Priority 3

Bullet	Data Source
1	NHS Outcomes Framework
2	Public Health Outcomes Framework
3	NHS Outcomes Framework
4	Public Health Outcomes Framework
5	Public Health Outcomes Framework
6	Public Health Outcomes Framework
7	Public Health Outcomes Framework
8	Public Health Outcomes Framework

Priority 4

Bullet	Data Source
1	Adult Social Care Outcomes Framework
2	Adult Social Care Outcomes Framework
3	End of Life Care Intelligence Network

Priority 5

Bullet	Data Source
1	Department for Environment, Food & Rural Affairs
2	Public Health Outcomes Framework
3	Public Health Outcomes Framework
4	Public Health Outcomes Framework
5	Public Health Outcomes Framework



**NOTICE OF THE DECISIONS AGREED AT THE JOINT MEETING OF THE GREATER
MANCHESTER COMBINED AUTHORITY AND AGMA EXECUTIVE BOARD HELD ON
FRIDAY 25 SEPTEMBER AT STOCKPORT TOWN HALL**

GM INTERIM MAYOR	Tony Lloyd (in the Chair)
BOLTON COUNCIL	Councillor Cliff Morris
BURY COUNCIL	Councillor Mike Connolly
MANCHESTER CC	Councillor Sue Murphy
OLDHAM COUNCIL	Councillor Dave Hibbert
SALFORD CC	Ian Stewart
STOCKPORT MBC	Councillor Sue Derbyshire
TAMESIDE MBC	Councillor Kieran Quinn
TRAFFORD COUNCIL	Councillor Michael Young
WIGAN COUNCIL	Councillor Peter Smith

JOINT BOARDS AND OTHER MEMBERS IN ATTENDANCE

TfGMC	Councillor Andrew Fender
GMWDA	Councillor Nigel Murphy

OFFICERS IN ATTENDANCE

Liz Treacy	GMCA Monitoring Officer
Richard Paver	GMCA Treasurer
Andrew Lightfoot	GM Public Service Reform
Paul Najsarek	Bolton Council
Mike Owen	Bury Council
Howard Bernstein	Manchester CC
Carolyn Wilkins	Oldham Council
Steve Rumbelow	Rochdale MBC
Jim Taylor	Salford CC
Eamonn Boylan	Stockport MBC
Steven Pleasant	Tameside MBC
Theresa Grant	Trafford Council
Donna Hall	Wigan Council
Ian Hopkins	GMP
Mark Hughes	GM Growth Company
Simon Nokes	New Economy
Pete O'Reilly	GM Fire & Rescue
Andrew Taylor	GM Waste Disposal Authority
Adam Allen	Office of the Police & Crime Commissioner

Jim Battle
Clare Regan
Jon Lamonte

Deputy Police & Crime Commissioner
GM Interim Mayor's Office
TfGM

Julie Connor
Sylvia Welsh
Steve Annette

) Greater Manchester
) Integrated Support Team
)

99/15 APOLOGIES

Apologies for absence were received on behalf of Sean Anstee (Trafford), Richard Farnell (Rochdale), Richard Leese (Manchester) and Jim McMahon (Oldham). It was noted that Dave Hibbert (Oldham), Sue Murphy (Manchester) and Michael Young (Trafford) and were attending as their substitutes.

100/15 DECLARATIONS OF INTERESTS

None received.

101/15 MINUTES OF THE JOINT GMCA AND AGMA EXECUTIVE BOARD MEETING HELD ON 31 JULY -

The minutes of the Joint GMCA and AGMA Executive Board meeting held on 31 July 2015 were submitted for consideration.

RESOLVED/-

To approve the minutes of the Joint GMCA and AGMA Executive Board held on 31 July 2015.

102/15 FORWARD PLAN OF STRATEGIC DECISIONS OF THE JOINT GMCA AND AGMA EXECUTIVE BOARD AND AGMA EXECUTIVE BOARD

Consideration was given to a report of Julie Connor, Head of the Greater Manchester Integrated Support Team, which set out the Forward Plan of those strategic decisions to be considered over the next four months.

RESOLVED/-

To note the Forward Plan of Strategic Decisions as set out in the report.

103/15 MINUTES OF THE GMCA AND AGMA AUDIT COMMITTEE MEETING HELD ON 18 SEPTEMBER 2015

RESOLVED/-

To note the minutes of the GMCA and AGMA Audit Committee held on 18 September 2015.

**104/15 GREATER MANCHESTER HEALTH AND SOCIAL CARE DEVOLUTION
GOVERNANCE PROPOSALS**

The Chair had agreed, under Part 5A, paragraph 7.3 of the GMCA Constitution, for this report to be considered as a late item.

Liz Treacy introduced a report setting out the proposals relating to governance for the first stage of a devolved health and social care system in Greater Manchester from October 2015 (in shadow form) and April 2016 (in final form), recognising that arrangements set out may change as the system becomes more self assured and is able to demonstrate sustainability and maturity.

The Head of Paid Service advised that initially the Strategic Partnership Board may need to meet monthly up to January 2016, suggesting that a monthly meeting be programmed into the schedule of meetings taking place on the GMCA and AGMA Executive day.

RESOLVED/-

1. To support the in principle shadow governance arrangements set out in the report.
2. To note that the shadow structure will be in place from October 2015 and that the arrangements will be subject to review and development during the shadow period to ensure that they are fit for purpose for devolution in April 2016.
3. To note that the in principle shadow governance arrangements are also agreed by the GM Association GG and the Greater Manchester Provider Trust Chief Executive Officer Group

**NOTICE OF THE DECISIONS AGREED AT THE GREATER MANCHESTER
COMBINED AUTHORITY MEETING HELD ON FRIDAY
25 SEPTEMBER AT STOCKPORT TOWN HALL**

GM INTERIM MAYOR	Tony Lloyd (in the Chair)
BOLTON COUNCIL	Councillor Cliff Morris
BURY COUNCIL	Councillor Mike Connolly
MANCHESTER CC	Councillor Sue Murphy
OLDHAM COUNCIL	Councillor Dave Hibbert
SALFORD CC	Ian Stewart
STOCKPORT MBC	Councillor Sue Derbyshire
TAMESIDE MBC	Councillor Kieran Quinn
TRAFFORD COUNCIL	Councillor Michael Young
WIGAN COUNCIL	Councillor Peter Smith

JOINT BOARDS AND OTHER MEMBERS IN ATTENDANCE

TfGMC	Councillor Andrew Fender
GMWDA	Councillor Nigel Murphy

OFFICERS IN ATTENDANCE

Liz Treacy	GMCA Monitoring Officer
Richard Paver	GMCA Treasurer
Andrew Lightfoot	GM Public Service Reform
Paul Najsarek	Bolton Council
Mike Owen	Bury Council
Carolyn Wilkins	Oldham Council
Howard Bernstein	Manchester CC
Steve Rumbelow	Rochdale MBC
Jim Taylor	Salford CC
Eamonn Boylan	Stockport MBC
Steven Pleasant	Tameside MBC
Theresa Grant	Trafford Council
Donna Hall	Wigan Council
Ian Hopkins	GMP
Mark Hughes	GM Growth Company
Simon Nokes	New Economy
Peter O'Reilly	GM Fire & Rescue
Andrew Taylor	GM Waste Disposal Authority

Adam Allen
Jim Battle

Office of the Police & Crime Commissioner
Deputy Police & Crime Commissioner

Clare Regan
Jon Lamonte

GM Interim Mayor's Office
TfGM

Julie Connor
Sylvia Welsh
Steve Annette

) Greater Manchester
) Integrated Support Team
)

121/15 APOLOGIES

Apologies for absence were received on behalf of Sean Anstee (Trafford), Richard Farnell (Rochdale), Richard Leese (Manchester) and Jim McMahon (Oldham). It was noted that Dave Hibbert (Oldham), Sue Murphy (Manchester) and Michael Young (Trafford) and were attending as their substitutes.

122/15 CHAIR'S ANNOUNCEMENTS AND URGENT BUSINESS

The Chair reminded Leaders that the signing of the Project Phoenix Charter had been arranged to take place at the rise of the Police and Crime Panel meeting later in the day.

123/15 DECLARATIONS OF INTERESTS

There were no declarations of interests made in respect of any item on the agenda.

124/15 MINUTES OF THE GMCA MEETING HELD ON 28 AUGUST 2015

The minutes of the GMCA meeting held on 28 August were submitted for consideration.

RESOLVED/-

To approve the minutes of the GMCA meeting held on 28 August 2015.

125/15 MINUTES OF THE TRANSPORT FOR GREATER MANCHESTER COMMITTEE HELD ON 11 SEPTEMBER 2015

The meeting was made aware that Tameside were experiencing particular issues with school transport, pending the outcome of discussions with the Chief Executive and Chair of Transport for Greater Manchester, the issue may be raised formerly at the GMCA meeting in October.

RESOLVED/-

To note the minutes of the Transport for Greater Manchester Committee held on 11 September 2015.

126/15 MINUTES OF THE GREATER MANCHESTER LOCAL ENTERPRISE PARTNERSHIP (LEP) BOARD HELD ON 7 SEPTEMBER 2015

RESOLVED/-

To note the minutes of the Greater Manchester Local Enterprise Partnership Board held on 7 September 2015.

127/15 FORWARD PLAN OF STRATEGIC DECISIONS OF GMCA

Consideration was given to a report of Julie Connor, Head of the Greater Manchester Integrated Support Team which set out a Forward Plan of those strategic decisions to be considered by GMCA over the next four months.

RESOLVED/-

To note the Forward Plan of Strategic Decisions as set out in the report.

128/15 GREATER MANCHESTER PORTFOLIO LEADS 2015/16

Consideration was given to a report of Sir Howard Bernstein detailing suggested Portfolio holder responsibilities for Leaders and Chief Executives for 2015/16, in line with the governance arrangements included in the Greater Manchester Strategy agreed in September 2013.

RESOLVED/-

To approve the Portfolio holder responsibilities for Leaders and Chief Executives for 2015 until June 2016, as outlined in the report.

129/15 GREATER MANCHESTER CLIMATE CHANGE AND LOW EMISSION IMPLEMENTATION PLAN 2016-2020

Steve Rumbelow introduced a report updating members on the development and timetable for production of the Implementation Plan for the GM Climate Change Strategy and Low Emission Strategies and introduced the current version of a draft Consultation Report for comment and agreement. He added that both strategies do reflect Greater Manchester's Comprehensive Spending Review submission.

The meeting was advised that the Interim GM Mayor has signed the Subnational Global Climate Leadership Memorandum of Understanding, known as the Under 2 MOU. The goal is to limit global warming to below 2°C, which Intergovernmental Panel on Climate Change (IPCC) scientists say is needed to avoid dangerous

climate change. The MOU is a shared goal of limiting greenhouse gas emissions to 2 tons per capita, or 80-95% below 1990 level by 2050.

The Chair thanked Councillor Sue Derbyshire and Steve Rumbelow for the speedy turnaround of the commentary required in relation to the Under 2 signing.

RESOLVED/-

1. To agree the attached version (Annex 1) of the Implementation Plan for consultation purposes.
2. To agree the timetable and pathway for the consultation and final approval of the Implementation Plan (see Section 5 of the report).
3. To note that the funding for the delivery of our low carbon investment ambitions are the subject of a Comprehensive Spending Review bid to Government.

130/15 GREATER MANCHESTER COMBINED AUTHORITY REVENUE BUDGET MONITORING 2015/16

Richard Paver introduced a report informing members of the 2015/16 forecast revenue outturn position as at the end of August 2015.

RESOLVED/-

1. To note the transport revenue outturn position for 2015/16 this is in line with budget after contributions to earmarked reserves of £0.959 million.
2. To approve the contribution of £0.959m to earmarked reserves as detailed in paragraph 2.4.
3. To note the Economic Development and Regeneration revenue outturn position for 2015/16 which shows a favourable position of £0.187 million after transfers to earmarked reserves.
4. To approve the contribution of £0.015m to earmarked reserves as detailed in paragraph 3.3.
5. To note and approve the budget adjustments referred to in paragraphs 2.2 – 2.4 for Transport budgets and paragraphs 3.2 – 3.5 for Economic Development and Regeneration budgets.
6. To note the Transport for Greater Manchester revenue outturn position for 2015/16, which is in line with budget.

135/15 GREATER MANCHESTER INVESTMENT FRAMEWORK AND CONDITIONAL PROJECT APPROVAL

Eamonn Boylan introduced a report seeking approval for the Ashton Old Baths Phase 2 project. Further details of the project are included as a more detailed report, considered in the confidential part of the agenda due to the information relating to the business affairs of Ashton(Old) Baths Limited.

RESOLVED/-

1. To agree that the project funding application by Ashton Old Baths (loan of £250,000) be given conditional approval and progress to due diligence.
2. To delegate authority to Richard Paver as GMCA Treasurer and Liz Treacy as GMCA Monitoring Officer, to review the due diligence information and, subject to their satisfactory review and agreement of the due diligence information and the overall detailed commercial terms of the transaction, to sign off any outstanding conditions, issue final approvals and complete any necessary related documentation in respect of the loan at 1) above.

136/15 EXCLUSION OF PRESS AND PUBLIC

RESOLVED/-

That, under section 100 (A)(4) of the Local Government Act 1972 the press and public should be excluded from the meeting for the following item of business on the grounds that this involves the likely disclosure of exempt information, as set out in paragraph 3, Part 1, Schedule 12A of the Local Government Act 1972 and that the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

**137/15 GREATER MANCHESTER INVESTMENT FRAMEWORK AND
CONDITIONAL PROJECT APPROVAL**

Consideration was given to a report providing further detail on the funding application from Ashton Old Baths for £250,000.

RESOLVED/-

To note the contents of the report.

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