

Minutes of: Health and Wellbeing Board

Date of Meeting: 11 June 2026

Present: Councillor T Tariq (in the Chair)
Councillors C Birchmore, E FitzGerald, C Hunt and T Pilkington

Also in attendance: W Blandamer, J Hobday, A Crook, Dr C Fines, H Tomlinson, J Richards, K Wynne-Jones, C Brown, F Vale, J McGlynn, I Trafford, R Passman and L Bell

Public Attendance: No members of the public were present at the meeting.

Apologies for Absence: A Cowan, Councillor A Arif, Councillor L Ryder and Councillor L Smith

HWB.155 Apologies for Absence

Apologies for absence are noted above.

HWB.156 Declarations of Interest

There were no declarations of interest made at the meeting.

HWB.157 Public Question Time

There were no public questions asked at the meeting.

HWB.158 Minutes of previous meeting

It was agreed:

That the minutes of the meeting held on 17 March 2026 be approved as a correct record.

HWB.159 Matters Arising

Kath Wynne-Jones provided an update on the development of the neighbourhood plans, noting that the process will continue until September. Work was ongoing across individual programmes to better understand the detailed contributions of each, alongside maintaining strategic oversight to ensure alignment with the identified priority areas.

HWB.160 Wider Determinants of Population Health

a Anti Poverty Update

Chris Brown, Head of Revenue and Benefits and Anti-Poverty Lead, gave a presentation detailing the development process and scope of the Anti-Poverty Strategy, which was reaching the final stages of governance and approval since the review process started in November. The Board noted the work to ensure relevant

insight and buy-in from local partners and community groups, as well as the emphasis on lived experience from diverse groups. The strategy was underpinned by clear, practical actions informed by the evidence, assigned among key stakeholders, and aligned to strategic aims.

In response to questions it was noted that:

- Baseline data would be provided where possible for actions when the strategy comes to Board for approval.
- Residents remained involved with the strategy's development, with groups being revisited and providing input as to whether the action plan addresses the issues raised and was a clear document.
- Bury Housing had been involved in the production of the strategy and action plan, and proactive engagement for residents was the current working practice; for example a new pre-tenancy approach will ensure welfare officers offer income maximisation advice prior to new residents moving in.
- The anti-poverty work ran alongside the Council's inclusion work, with every resident being supported as and when they needed. The Board noted that respected organisations and community groups were utilised through the Crisis and Resilience Fund, rather than 'parachuting in' unfamiliar services that local residents wouldn't trust and therefore not access.
- Services were proactive in responding to trigger points (e.g. atypical missed Council Tax payments) and reaching out to engage residents who might be in need before they reached crisis point. It was noted that not everyone would engage, but the work would aim to be as accessible as possible and remove barriers to support.

Will Blandamer advised that significant work with various partners was ongoing to identify cohorts at risk, ensuring support was visible and accessible and utilising existing networks. This reflected the need for the strategy to remain agile, responding locally and adapting to the differing needs of communities.

The Chair thanked Chris for his presentation and asked that, before the Strategy and Action Plan came before the Board for approval, work be undertaken to clarify the Board's responsibilities in this area and how they could hold the Strategy to account and monitor the resulting impact.

It was agreed that:

- The presentation be noted; and
- The role of the Health and Wellbeing Board be clarified for when the Strategy comes back for approval.

b Inequalities Strategy Refresh

Jon Hobday, Director of Public Health, presented the report detailing the strategic framework regarding health inequalities. It was noted that this reflected the current ways of working but was providing a stronger strategic focus. Jon outlined the four strategic priorities, governance and delivery routes, and success measures.

In response to questions it was noted that the strategy was directly informed by the JSNA, with the latter providing the background and insight into contributing factors and

shaping the subsequent responses. The Board noted the value of detailed and geographically specific data, with specific regards to the GM Scrutiny work and the Indices of Deprivation, and how this was reflected in the close working with Integrated Neighbourhood Teams as well as the Early Years work.

With regards to whether the strategy was broad enough to reflect the flow into services and levels of independent living, it was agreed that officers would review the detail of the outcomes framework which sits behind the strategy outside the meeting and assess whether any further measures should be introduced regarding reduction in demand.

It was agreed that:

Subject to the further discussion outside the meeting, the Bury Health Inequalities Strategy by approved.

HWB.161 The operation of the health and care system

a BCF Submission

Adrian Crook, Director of Community Commissioning, presented the report which outlined the Better Care Fund submission for this year and the End of Year reporting for 2025/26.

The Board noted the 2026/27 submission met all national conditions and goals were reasonable and achievable. There had been changes as to which services were included, but it was noted the BCF had increased to £41,619,152. The full list of removals and inclusions was outlined in the report, and GM ICB Finance had confirmed those schemes removed will continue to be funded outside of BCF funding. The Board noted that Bury's BCF was well aligned with emerging government priorities

With regards to the 2025/26 End of Year report, this was received positively with all 3 metrics on track to meet goals. Emergency admissions for ages 65+ Bury had performed well, being lower than regional, national and peer group levels, however average days for discharge ready date to date of discharge showed higher than regional, national and peer group levels, as did long-term admissions to residential care/nursing homes.

It was agreed that:

The report be noted.

HWB.162 Behaviour and lifestyle determinants of health

a Food and Health Update

Francesca Vale, Public Health Practitioner (Food and Health), gave a presentation detailing Bury's Food Strategy, Food Partnership, Bury Schools Catering and the ambition for gold Sustainable Food Places standard. The Board welcomed the positive report, praising the whole-system partnership approach and the impact on obesity

levels. It was noted that Bury had been chosen as an area for excellence, with officers making representations in parliament and being chosen for DEFRA working groups. Bury was the only LA caterer to receive a gold FFLSH (Food for Life Served Here) standard, and had achieved a significant amount of progress in a short space of time.

In response to questions, it was noted that challenges continued, such as food inflation and fuel costs, as well as Multi Academy Trusts choosing other providers resulting in groups of schools not receiving this standard. Breakfast clubs were an area for further work, though changes in national guidance might have a positive impact on raising food standards and therefore raising buy-in with Bury Schools Catering. In response to further questions, it was noted that school menus were visible to parents and conversations were held directly with parents with regards to any allergies or food sensitivities. Councillors requested a list of schools not engaging with Bury Schools Catering, and Francesca undertook to provide this and to look at dietetics support.

The Chair thanked Francesca, Andrew Cowan, and their colleagues for the fantastic work they were doing and for their high ambitions.

It was agreed that:

The report be noted.

HWB.163 The effect of place and community on health and wellbeing

a Mental Health and Wellbeing Update

Ian Trafford, Head of Programmes Bury IDC, gave a presentation detailing key developments in both Children and Adults services which were commissioned and funded centrally in GM. With regards to the strategy refresh, feedback from residents and partners highlighted need for:

- Earlier help and easier access;
- More therapy options;
- Better support for: Neurodiverse people, Black and Asian communities, and Young adults (18–25);
- Improved coordination between services;
- Better communication of available support; and
- More consistent and sustainable provision.

Ian detailed the resulting strategic priorities, and advised that at a high level, these were to improve quality and coordination of what already exists, addressing gaps in provision and Wider Determinants (housing, employment, social factors), and ensuring earlier and better access to community based support (both low-level and crisis relief).

Jim McGlynn, Public Health Practitioner (Mental Health and Well-Being) gave a presentation on mental health work in Bury, highlighting the importance of evidence-based practice to understand inequalities and priority areas. The Board noted the work of the Coping and Thriving group, including a communications and action plan, Mental Health mapping exercise inc. CYP specific mapping, podcasts, military veterans offer, active practices, and training offers. Jim also spoke to the suicide prevention work, including last year's conference and the aim to host another in October 2026 specifically around children and young people. Quarterly stakeholder meetings were

held, as well as an annual vigil led by The Big Fandango. The Suicide Prevention Jigsaw described the support on hand from partners in Bury, and a biannual Suicide Audit was undertaken locally. A new group for neurodivergent children had been set up, and partnership work with BIG was underway with suicide survivors.

It was agreed that this topic merited further discussion than there was time for at this meeting, and that it be revisited at a future meeting when the Bury Mental Health Strategy was brought for endorsement.

It was agreed that:

The reports be noted, and the topic be revisited at a future meeting.

HWB.164 Urgent Business

There was no urgent business.

COUNCILLOR T Tariq
Chair

(Note: The meeting started at 4.35 pm and ended at 6.38 pm)