

Director of Public Health Annual Report 2013 - 2014



Public Health at the
heart of our business



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Foreword

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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.

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).

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.



Helping People Find Good Jobs and Stay in Work

3.3

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.

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.

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.

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

3.6

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.

Strong Communities, Wellbeing and Resilience

3.7

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.

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).



- 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

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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

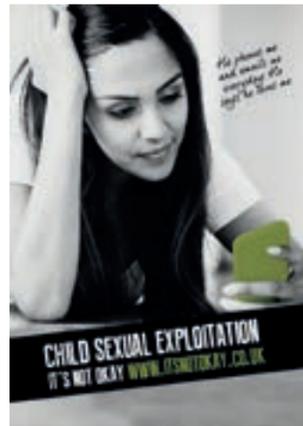
Four Bury premises have achieved the Greater Manchester Health Catering Award. The Award recognises catering businesses which have demonstrated a commitment to reducing the level of saturated fat, sugar and salt in food and drinks.

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.



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.

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.



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



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