



Lancashire Health and Wellbeing Board  
Tuesday, 5 March 2024, 2.00 pm,  
Committee Room 'C' - The Duke of Lancaster Room, County Hall, Preston

## AGENDA

### Part I (Open to Press and Public)

Agenda Item	Item for	Intended Outcome	Lead	Papers	Time
1. <b>Welcome, introductions and apologies</b>	Action	To welcome all to the meeting, introduction and receive apologies.	Chair		2.00pm
2. <b>Disclosure of Pecuniary and Non-Pecuniary Interests</b>	Action	Members of the Board are asked to consider any Pecuniary and Non-Pecuniary Interests they may have to disclose to the meeting in relation to matters under consideration on the Agenda.	Chair		
3. <b>Minutes of the Last Meeting held on 14 November 2023</b>	Action	To agree the minutes of the previous meeting.	Chair	(Pages 1 - 10)	

Agenda Item	Item for	Intended Outcome	Lead	Papers	Time
<b>4. Appointment of Deputy Chair</b>	Information	To note the appointment of Asim Patel, Integrated Care Board, NHS as Deputy Chair of the Committee for the municipal year 2023/24.	Chair		2.10pm
<b>5. Health and Wellbeing Board Revised Terms of Reference</b>	Action	To agree the membership changes as detailed in the report.	Chair	(Pages 11 - 12)	2.15pm
<b>6. Lancashire Better Care Fund Plan 2023 to 2025</b>	Discussion/ Action	To receive the report and comment on the progress to date on the review and reset programme and support projects. Also, to review and comment on the Quarter 3 Better Care Fund submission and receive and consider the Finance Summary Q3 Report.	Sue Lott/Paul Robinson	(Pages 13 - 18)	2.20pm
<b>7. Lancashire Drug and Alcohol Partnership – Delivering the Government's Strategy 'From Harm to Hope: A 10-year drugs plan to cut crime and save lives'.</b>	Discussion/ Action	To receive and discuss the progress made by the Combating Drugs and Alcohol Partnership in achieving the outcomes of the Government's 10-year drug Strategy and endorse the proposed 2024/25 plan in making further progress in addressing the harms caused by drugs and alcohol in Lancashire.	Paula Hawley-Evans/Fiona Inston	(Pages 19 - 28)	3.00pm
<b>8. Sports Stadia Sponsorship by Vaping Companies</b>	Discussion/ Action	To discuss the findings and the work to mitigate vaping sponsorship in sport stadia.	Paula Hawley-Evans	(Pages 29 - 30)	3.30pm

Agenda Item	Item for	Intended Outcome	Lead	Papers	Time
<b>9. Urgent Business</b>	Action	An item of Urgent Business may only be considered under this heading, where, by reason of special circumstances to be recorded in the minutes, the Chair of the meeting is of the opinion that the item should be considered at the meeting as a matter of urgency. Wherever possible, the Chief Executive should be given advance warning of any Members' intention to raise a matter under this heading.	Chair		4.00pm
<b>10. Date of Next Meeting</b>	Information	The next scheduled meeting of the Board will be held at 2pm on Tuesday, 7 May 2024, venue to be confirmed.	Chair		4.05pm

H MacAndrew  
Director of Law and Governance

County Hall  
Preston



**Lancashire County Council**

**Lancashire Health and Wellbeing Board**

**Minutes of the Meeting held on Tuesday, 14th November, 2023 at 2.00 pm in  
Tatton Community Centre, Tatton Gardens, Silverdale RD, Chorley, PR6 0PR**

**Present:**

**Chair**

County Councillor Michael Green, Lancashire County Council

**Committee Members**

County Councillor Graham Gooch, Lancashire County Council  
County Councillor Sue Whittam, Lancashire County Council  
Dr Sakthi Karunanithi, Public Health, Lancashire County Council  
Dave Carr, Policy, Commissioning and Children's Health, Lancashire County Council  
Louise Taylor, Adult Services and Health and Wellbeing, Lancashire County Council  
Chris Sinnott, Lancashire Chief Executive Group  
Councillor Jennifer Mein, Central, Lancashire Leaders Group  
Clare Platt, Health Equity, Welfare and Partnerships, Lancashire County Council  
Sam Gorton, Democratic Services, Lancashire County Council

**Apologies**

Councillor Barbara Ashworth, East Lancashire, Lancashire Leaders Groups  
David Blacklock, Healthwatch

**1. Welcome, introductions and apologies**

The Chair welcomed all to the meeting and thanked the staff at Tatton Community Centre, Tatton Gardens, Chorley.

Apologies were noted as above.

Replacement for the meeting was Dave Carr for Jacqui Old, Education and Children's Services, Lancashire County Council.

The Board noted that the Deputy Chair of the Board, James Fleet had resigned from his role and as Chief Officer for Lancashire and South Cumbria Integrated Care Board as he commences a new role with Sandwell and West Birmingham Hospitals NHS Trust as Interim Chief People Officer. The Board thanked James for his leadership and significant contribution to the Lancashire and South Cumbria health and care system and the Health and Wellbeing Board and wish him all the very best



in his new role. The Board noted that a new Deputy Chair from the Integrated Care Board was being sought and an announcement would be made as soon as possible.

Chris Sinnott, Chief Executive, Chorley Borough Council gave a brief overview about the project and Tatton Community Centre which opened in early 2023 and offers extra care residential facilities, a nursery, GP Surgery, café, hairdresser and pharmacy. The Board also noted that there was another residential extra care facility at Primrose Gardens in Chorley.

## **2. Disclosure of Pecuniary and Non-Pecuniary Interests**

There were no disclosures of interest in relation to items appearing on the agenda.

## **3. Minutes of the Last Meeting held on 5 September 2023**

**Resolved:** That the Board agreed the minutes of the meeting held on 5 September 2023.

The Board were asked to note the following matters arising:

On 13 November 2023, the Council was notified that £8.4m had been awarded to support further work on alcohol and drug abuse in Lancashire, which was part of the Board's Happier Minds priority. It was also noted that Lancashire was specifically mentioned as an area of best practice.

CC Green updated the Board that he had visited premises that sold vapes with Trading Standards officers from Lancashire County Council. He had visited eight businesses and four of those failed the test on underage sales. It was agreed that it was an ongoing struggle to ensure businesses were selling products that were both legal and being sold to the right age of consumers.

## **4. Community Voice**

The Chair welcomed Caroline Greer, Manager, UDevelop CiC who provided an overview of the work they do in creating structured programmes aimed at helping shape, change and have a positive ongoing impact on a person's life.

The Board noted the various opportunities/programmes on offer such as:

- Chorley Shed which is a community project provided for people who are referred through the social prescribing system and is a six-week program to help support them to grow in confidence and to balance their wellbeing for a sustainable life.
- Remote confidence building courses in the home for people who are unable to leave the home due mental health issues.
- Coaching services to integrate people back into society through various community programmes.
- UDevelop CiC was commissioned by Rise Construction Framework, supported by Chorley Council to run, and enhance the provision into Tatton Community



Centre to target the people of Chorley to help improve wellbeing and to also improve employability opportunities, personal and career development for adults.

- Over the last six months, consultations have taken place within the local community to find out what residents would like to see happening alongside working with local Councillors.
- Provision is being delivered in Phases 1 and 2 with regards to different local workshops, such as Yoga, coffee and chat/community drop in, health discussions to help reduce health inequalities.
- There has been an increase in groups, in terms of people with specific individual needs, neurodiverse groups, and working with Adult Social Care, Lancashire County Council and the NHS who bring groups to community drop-in sessions.
- Monday and Thursdays are warm space days and the over 50s have been targeted who are in isolation and are given opportunities to participate in arts and craft sessions and make new friends.
- There is a walk and talk session on a Thursday and case studies can be found in the monthly blogs that are produced and shared on social media.
- Chorley Women's Centre is also integrating and UDevelop are working with them on cultural and information days to bring a diverse community together in a community space.
- They are supporting local businesses such as JellyTots (0-4 years provision) and Rhythmicality.
- Phase 3 is looking at creating some more male and female groups as a drop in for Chorley East which are required due to over-spill.
- There is a special educational needs drop-in for people with neurodiverse doing board games in the evenings.
- With regards to the digital element, eight residents have completed a digital programme, and this has enabled them to speak with families across the world, online shopping etc and in working closely with Cellnet, once they completed the course, it has given them the opportunity to obtain a tablet or computer.

Further information on how UDevelop have developed the community including monthly blogs and what is on offer, can be found here: <https://www.udevelop.org.uk/>.

Following the presentation, the following comments were made:

- Connections with young families are starting to improve, particularly with remote services, however, discussions are underway with regards to outreach work, leading to more opportunities for families such as drop-in sessions. Inspire have been carrying out a consultation with young people to find out what it is they want, which will enable a programme to be built for outreach in the community centre.
- As part of the Best Start agenda, it was felt that a lot of work was already happening in Chorley and that the County Council can link in also.
- In terms of the Special Educational Needs drop-in sessions, it would be useful to promote this on the Local Offer and the County Council need providers to deliver Lancashire Break-time activities which is a commissioned service, therefore it would be useful for UDevelop to link in with the Council.
- UDevelop were commended on the different age ranges it caters for in the community and it was noted how significant it was to have NHS resources



operating from the Centre. It is hoped that this will strengthen the partnership between NHS and Councils under the Integrated Care Board and how pooled funding can be capitalised on what already exists.

- The project shows the power of what can work in a locality.
- There are difficulties still connecting to both District and County Councils and it is incumbent on the Health and Wellbeing Board to make sure it is aware that the system hampers the good work, and this needs to be addressed by the Integrated Care Board, Districts and County Councils.
- As a commitment from the Board to integrated health and social care, it needs to find out what the barriers have been, so it can map out how the Board can start to deal with them. It was noted that Chorley Council can do some work around it and share with others and UDevelop also agreed to do some consultation work on this too and look to discuss this further with Healthwatch to consult on a much larger footprint on what the specific individual needs are, in adult social care.
- This is an example of leadership from a local Government organisation, working with community organisations to help people remain well within their community.
- As a Health and Wellbeing Board, through the Place Based Partnership, there needs to be a long-term plan for community health and wellbeing, which needs to include facilities such as Tatton Community Centre in other districts in Lancashire.

- Resolved:**
- (i) That the Board noted the presentation and thanked Caroline Greer for her presentation.
  - (ii) Chris Sinnott, Lancashire Chief Executive Group agreed to provide some insight from a Chorley Borough Council perspective, into what barriers have been faced in setting up the Community Centre and what lessons can be learnt, and to share these at a future meeting of the Board.

## 5. Creating a Smoke Free Generation

Marie Dermaine and Paula Hawley-Evans, Public Health, Lancashire County Council provided the [report](#) which outlines the Government's intention around creating a Smoke Free Generation (as outlined at [Appendix 'A'](#)) and how the Lancashire Health and Wellbeing Board can support the Government's approach to national and local implementation.

The report provides a short briefing on the recent Government command paper: Stopping the start: our new plan to create a smoke free generation setting out ambitious proposals to prohibit the sale of tobacco products for future generations, measures to support current smokers to quit as well as wider actions to curb the rise in youth vaping, which alludes to the [report](#) that was received by the Health and Wellbeing Board on 5 September 2023.

The Board noted that additional funding had been confirmed as of 13 November 2023 of £1.6m to support this agenda and that the money is ringfenced under Section 31 meaning it is very specific on what it can be spent on in addition to the work that has already been committed to in terms of the smoking cessation.





The second part of the report is a program that has been announced on additional funding for a swap to stop program to help current smokers stop smoking.

The Board were informed that there are approximately 145,000 smokers across the 12 districts of Lancashire with a smoking prevalence of around 13.4% in comparison to England which is 12.7%. There is a trajectory of variants between 6% and 20% per area, which averages at around 23% of smokers per district. 83% of smokers start before the age of 20. The target by 2030 is to reduce the number of smokers in Lancashire to 5%.

The costs of smoking to Lancashire are significant at approximately £372m and are accrued through productivity loss, healthcare (£50m) and social care (£28m) and includes former smokers with smoking related illnesses.

In terms of supporting the Government's intention to achieve a smoke free generation, on the 1 October 2023, Lancashire County Council launched the service, Smoke Free Lancashire and continues to invest in reducing tobacco related harm. This service has a specific focus on vaping for children and young people to support them to stop, not take up smoking, and to support educating around vapes. There is a consultation that has been to schools, circulated to the Integrated Care Board, promoted through primary and secondary care and through internal comms. The Board were asked to encourage completion of the consultation. Further work is being carried out with Trading Standards on the issues around underage sales and the Where's the Harm booklet has been circulated to schools.

There is also support for over 18s too through Smoke Free Lancashire through the Tobacco Free Lancashire group and will target place-based areas where smoking prevalence is high and link in with NHS colleagues to ensure a joined-up approach and have a focus with population health.

The Board noted that in terms of the Swap to Stop, cohorts of people will be targeted who require help and support to stop smoking including behavioural support, advice around nicotine replacement therapy, work with GPs, primary and secondary care around the NHS long term plan.

Following the presentation, the following comments were made:

- The highest smoking rates tend to be in areas of deprivation alongside other issues and these need to be addressed from a Public Health perspective.
- In terms of young children and the Where's the Harm booklet, this is going to be delivered with additional information and targeted at Under 18s in schools and in PSHE lessons and there are links too with the Family Hubs.
- With regards to pregnant woman and smoking, under the NHS Long Term Plan, this will be delivered by the NHS Midwifery Service.
- There has been a delay in the national incentive scheme for pregnant women to stop smoking and when it commences, it will be managed by the NHS.
- There is also an awareness of pregnant women relapsing and within the current contract, there will be targeted work post pregnancy, working with health visitors and 0-19 teams.



- Targeted work needs to be done in workplaces and community groups.
- In terms of vaping, the message is, that if you have never vaped do not start, and if you have smoked swap to vaping.
- In terms of legislative changes, look to manage the ingredients of vapes and align the prevention of tobacco sales to vape sales also.
- There is now a Check 25 on vapes that follows accordance with Trading Standards and there are stringent checks carried out by the current provider to ensure vapes are used by those over 25.
- Support is also given to those who wish to stop vaping and will be referred for nicotine replacement therapy.
- As alluded to at the September Board meeting, concern around vaping and smoking sponsorship for sports teams was raised again. The Board noted that there is a piece of ongoing research being carried out to see if there is any evidence that this increases the number of young people vaping and to look at reducing the impact of that. The findings are due to come to a future meeting of the Board.
- The additional funding that has been allocated £1.6m comes with the mandate to increase the number of people to stop smoking and separate to that is an option to be part of the Swap to Stop Scheme, which will give access to the vaping aspect to help people to swap. For the last two years, the NHS has been receiving money directly for smoking cessation advice through the hospitals and is assumed to continue separately.
- With regards to integrated working, it was suggested that the Chair of the Health and Wellbeing Board, formally write to the Integrated Care Board to suggest the pooling of funds for working towards a smoke free generation, which includes the smoking cessation, Section 31 and Swap to Stop funding, to avoid duplication and to agree to have one plan for prevention and reducing health inequalities.

**Resolved:** That the Health and Wellbeing:

- (i) Supported the Government's intention to achieve a Smoke Free Generation.
- (ii) Endorsed the Council's submission of a bid for additional national funding to enable expansion of the 'Swap to Stop' programme to help smokers to stop smoking ([Appendix 'B'](#)).
- (iii) That the Chair of the Health and Wellbeing Board, formally write to the Integrated Care Board to request the pooling of funds for joint working towards a smoke free generation, to avoid duplication and as part of a single plan for prevention and health inequalities.

## 6. Winter Preparedness

Clare Platt, Health Equity, Welfare and Partnerships, Sue Lott, Adult Social Care – Urgent Care, Acute and Prisons, Lancashire County Council and Craig Frost, Urgent and Emergency Care, Lancashire and South Cumbria Integrated Care Board provided members with a collaborated [report](#) which highlighted plans in place across NHS and Local Government organisations to support health and wellbeing needs of Lancashire residents during the winter.



A presentation was given to the Board and is appended to the minutes and was circulated to members following the meeting. It provides further information on the following:

- Winter Preparedness 2023/24
  - Public Health, Wellbeing and Communities
  - Highways
- Adult Social Care Winter Plan 2023/24
  - Winter Planning - Context
  - Winter Planning – Funding and Oversight
  - Winter Planning – What's in the Plan
- Resilience and Surge Planning for Winter 2023/24
  - Winter Planning Guidance 2023/24
  - Winter Planning Process 2023/24
  - Place Winter Plans 2023/24
  - Urgent and Emergency Care (UEC) Investment Schemes 2023/24
  - Winter Campaign
  - Governance
  - Summary of Key Changes to System Co-ordination Centres (SCC) and Operational Pressures Escalation Levels (OPEL)

Following the presentation, the following comments were made:

- In terms of the discharge to assess, the offer is being expanded. Currently there are a number of beds in in-house older people's care homes, which are dedicated to residential rehabilitation and also spend on discharge to assess beds which is in the independent sector. Therefore, people being discharged from hospital who cannot return directly home, go into a care home for a period of up to four weeks and are assessed in that care home. The offer is now expanding on in-house beds by widening the criteria to include people who need a period of recovery, recuperation or a period of assessment. Currently people who are going into the independent sector are not always getting therapy intervention and through in-house beds they will receive this quicker by working collaboratively between Adult Social Care and the NHS as well colleagues who support those beds from a therapy provision.
- With the help of the Better Care Fund, it is hoped that improvements will be made as currently, too many people are going from hospital into a care home placement and that is an action from the Better Care Fund to improve that metric. The Board noted that there is a working group set up around discharge to assess and part of the work is to review some of the procedures and ensure they are aligned with national guidance.
- The independent sector care homes will still be required, particularly for people who need a nursing level of care that the Local Authority do not provide.
- In terms of support through public health, it is improving, however, there is still work to do, which also short-term depends on funding from year to year, as well as having discussions on collaboration work and working with Districts and their communities.



**Resolved:** That the Health and Wellbeing Board:

- (i) Endorsed the plans.
- (ii) Considered any future areas for improvement and collaboration.

## 7. Better Care Fund

Sue Lott, Adult Social Care – Urgent Care, Acute and Prisons, Margaret Ashton-Gray, Health and Social Care Integration Finance, Lancashire County Council and Paul Robinson, Midlands and Lancashire Commissioning Support Unit, NHS provided a progress update of the Better Care Fund reset work and actions taken since the Health and Wellbeing Board in September 2023.

The Board were informed that the quarterly report has been submitted and requires formal sign-off from the Health and Wellbeing Board at this meeting. The report shows that it is broadly on track with regards performance against the mandated Better Care Fund metrics, except for admissions to long term residential care for which mitigating actions are in place.

The quarterly finance report (circulated separately to the Board) is a first iteration of what will become a regular part of the Better Care Fund quarterly reporting. A template will also be circulated separately for which the ambition is to use as the reporting template for future finance reports.

The reset programme is progressing and updates regarding various elements are provided within this report, including take up of the Better Care support offer and proposals on which element of the thematic review the system should commence first.

Information is also provided on the Hospital Aftercare service (circulated separately to the Board) which is one of the services funded through the Better Care Fund. The stories demonstrate the positive impact the service has for the people it supports. The intention is to regularly provide this type of information to the Health and Wellbeing Board, to support awareness of the scope of the services and teams delivered through use of the monies in the pooled fund.

Further detailed information can be found in the [report](#) on the following:

- The Lancashire Better Care Fund Quarterly Report
- Section 75
- Quarterly Finance Report
- The Review and Reset Work
- Better Care Fund (BCF) Support Offer Update
- Hospital Aftercare – Stories



Following the presentation, the following comments were made:

- That delays in funding payments from the Integrated Care Board to the Better Care Fund, from a Board's perspective raises concerns and assurance was needed. Lancashire County Council is the accountable body for the Better Care Fund, and for example the Discharge to Assess (D2A) fund is paid into the fund by the Integrated Care Board and then distributed back to the Board. This is the current mandated mechanism to receive the monies into the pool and the schemes that have been approved which are carried out by the Integrated Care Board, will then be returned, so they can continue to provide those services.
- The Better Care Fund pooled funding mechanism needs to be reviewed.
- In terms of the additional Integrated Care Board funding allocation of £10m into social care, the Board were informed that discussions commenced in the last financial year when the benchmarking information was shared with the Integrated Care Board and that there continues to be discussions on allocation of spend and it is hoped that a decision on that spend will be reported back to this Board at its next meeting in January 2024.
- It was suggested that a Better Care Fund Manager from the Integrated Care Board needs to be identified to oversee the funds activities.
- As from April 2024, the Lancashire Place Partnership will take delegated responsibility for the Better Care Fund from the Integrated Care Board. It was suggested that when decisions on the funds are to be made, that a joint meeting between Lancashire Place Partnership and the Lancashire Health and Wellbeing Board is convened.

**Resolved:** The Health and Wellbeing Board:

- (i) Received the report and commented on the progress to date on the review and reset programme and receive a further report at the Board's next meeting in January 2024.
- (ii) Considered and endorsed the proposal of focussing on the theme of Intermediate Care first.
- (iii) Received and considered the Finance Summary Report (circulated separately to the Board).
- (iv) Agreed and signed-off the Lancashire Better Care Fund Quarterly Report (circulated separately to the Board).
- (v) Would receive the decisions for spend, following further discussions on the additional Integrated Care Board funding allocation of £10m into social care at its next Board meeting in January 2024.

## 8. Urgent Business

There were not any items of urgent business received.



## 9. Date of Next Meeting

The next scheduled meeting of the Board will be held at 2pm on 23 January 2024. This meeting is likely to be a workshop following by a short formal meeting of the Board and will be held at County Hall, Preston.

H MacAndrew  
Director of Law and Governance

County Hall  
Preston



**Lancashire Health and Wellbeing Board**  
Meeting to be held on Tuesday, 5 March 2024

**Corporate Priorities:**  
N/A

**Health and Wellbeing Board Revised Terms of Reference**

Contact for further information:  
Sam Gorton, Tel: 01772 532471, Democratic Services Officer,  
[sam.gorton@lancashire.gov.uk](mailto:sam.gorton@lancashire.gov.uk)

**Brief Summary**

In order to ensure that the Health and Wellbeing Board remains focussed and effective in tackling health inequalities in Lancashire, it is proposed to change the membership of the Health and Wellbeing Board.

**Recommendation**

The Health and Wellbeing Board is recommended to agree the following changes to its current membership:

- (i) A representative from Voluntary, Community, Faith and Social Enterprise be added;
- (ii) That the reference to "The Leader of the Council" be amended to add the words "or their nominated representative", as is permitted by the relevant regulations.

**Detail**

The Health and Wellbeing is a statutory committee of the Full Council. Its role is to build strong and effective partnerships, which improve the commissioning and delivery of services across the NHS and local government, leading in turn to improved health and wellbeing for local people.

The Health and Wellbeing Board has certain specific statutory functions, notably the development of a Joint Strategic Needs Analysis and Health and Wellbeing Strategy, and a more general responsibility to develop health and care services across different agencies.

## Membership

The membership of the Lancashire Health and Wellbeing Board currently is comprised of the following:

- The Cabinet Member for Health and Wellbeing (Chair)
- The Leader of the Council\*
- The Lead Member for Health
- Executive Director of Adult Services and Health & Wellbeing\*
- Executive Director of Education and Children's Services\*
- Director of Public Health\*
- 1 member (Chair, CEO or Executive Director) to be nominated by NHS Lancashire and South Cumbria Integrated Care Board\*
- Three District Councillors (one from each of the sub areas of Lancashire, to be nominated by the Lancashire Leaders Group)
- One District Council Chief Executive (to be nominated by the Lancashire Chief Executives Group)
- The Chair of Healthwatch\*

\*Members marked with an asterisk are statutory members who must be on the Board to meet the requirements of the Health and Social Care Act 2012.

All Board members to have one vote each.

The Board may invite any other representatives to meetings of the Board as it deems appropriate. Such representatives will not be formal members of the Board and they shall not have a vote but may participate in the debate with the consent of the Chair.

It is proposed that the reference to "The Leader of the Council" be amended to add the words "or their nominated representative", as is permitted by the relevant regulations.

It is also proposed that the membership in future includes a representative of the Voluntary, Community, Faith and Social Enterprise Sector, which is needed to provide insight from that area which is important given the role of the sector in supporting and connecting individuals and communities. The appointment will be made by requesting a nomination from the Voluntary, Community, Faith and Social Enterprise Sector Alliance.

## List of background papers

None

Reason for inclusion in Part II, if appropriate

N/A





**Lancashire Health and Wellbeing Board**

Meeting to be held on 5 March 2024

**Corporate Priorities:**  
Caring For the Vulnerable  
Delivering Better Services

**Lancashire Better Care Fund Plan 2023 to 2025**

Contact for further information:

Sue Lott, Tel: 07887 831240, Head of Adult Social Care – Urgent Care, Acute and Prisons

[sue.lott@lancashire.gov.uk](mailto:sue.lott@lancashire.gov.uk)

Paul Robinson, Tel: 07920 466112, Principle Delivery Consultant

[paul.robinson27@nhs.net](mailto:paul.robinson27@nhs.net)

**Brief Summary**

This report provides a progress update of the Better Care Fund reset work and actions taken since the last report.

The Quarter 3 report has been submitted and was signed off by County Councillor Michael Green, Chair of Lancashire's Health and Wellbeing Board in his delegated capacity. The Board is requested to consider the report and ask any clarification questions. The report shows with regards performance, it remains on track against the mandated Better Care Fund metrics, except for admissions to long term residential care for which mitigating actions are in place.

Progress updates for various elements of the Better Care Fund reset programme are provided within this report, including the current projects underway supported by the national Better Care Fund team.

High level finance discussions continue between the Council and the Integrated Care Board, which will ultimately support the baseline conditions upon which the partnership will be able to build good, evidence based, joint financial decision making.

**Recommendations**

The Health and Wellbeing Board is asked to:

- (i) Receive the report and comment on the progress to date on the review and reset programme and support projects.
- (ii) Review and comment on the Quarter 3 Better Care Fund submission.
- (iii) Receive and consider the Finance Summary Q3 Report.

## Detail

### The Lancashire Better Care Fund Quarter 3 Report

The Quarterly Report is a standing requirement of the Better Care Fund planning and reporting cycle, sitting alongside the submission of the annual Better Care Fund Plan and the fortnightly Adult Social Care Discharge Fund submission. The Quarter 3 report submission date was the 9 February 2024, and the report was signed off by County Councillor Michael Green in his delegated role as Chair of the Lancashire Health and Wellbeing Board.

As shared in the last Better Care Fund update, the new quarterly reporting template includes a progress update on the mandated Better Care Fund metrics, plus confirmation of activity and spend at the end of Q3. The report does not contain information about all Better Care Fund spend, only the specific schemes that are pre-selected by the national team for Health and Wellbeing Board areas to report against.

In terms of performance against the metrics during Quarter 2 of 2023/24 for the following 4 metrics:

- Avoidable Admissions
- Discharge to Normal Place of Residence
- Falls
- Reablement

Lancashire is on track to meet the individual targets set in the Better Care Fund Plan.

The **avoidable admissions** metric which Lancashire has previously not performed too well against, continues to perform better in Q2 than it did last year. However, there are still high numbers of people admitted to hospital which could have been avoided, so there is still work for the system partnership to undertake to improve performance in this area. 8764 people have been counted as an avoidable admission in 2023/24 as at 13 February 2024. As the usage of services such as virtual wards continue to increase, a continued improvement is expected in the number of people who avoid an unnecessary admission to hospital.

The number of **people discharged from hospital to their usual place of residence** has improved with the Lancashire performance at Q2 standing at 91.7%, exceeding the target of 88.6%. Lancashire remains slightly behind the national average of 92.6% and are mid-range compared with the performance of its' nearest neighbours. Work has taken place across organisations to improve the opportunities and decision-making for people to return home, and the work Adult Social Care has undertaken on community capacity in intermediate care is also contributing. The Lancashire County Council redesign of intermediate care services which commences from the 1 April 2024 will further maximise the capacity in homebased support.

The Lancashire performance for people **admitted to hospital as an emergency due to a fall** remains on track, with services such as the Falls Response and Lifting Service significantly contributing to our performance in this area. It is recognised that there are



still high numbers of people being admitted to hospital due to falls and opportunities to improve need to be explored.

**Admissions to residential care** had increased slightly previously, but this is now stabilising and likely to start decreasing from Q3 onwards. This has been impacted in part by the focussed work in Adult Social Care to reduce their waiting times for assessment, with several people who had been waiting for assessments for 24hr care in a care home setting.

The strengths-based practice model that Adult Social Care are implementing will also positively impact this metric, as will the continued building of community infrastructures meaning more people can be better supported at home.

The percentage of **people aged over 65 who were discharged from hospital and received Reablement and who are still at home 91 days later**, continues to perform well against the target. Lancashire remains a high performer nationally in this metric, with the national average at 81.8%. This metric will be changing from April onwards and a new metric is likely to come into being which will be all people aged 65 plus who are discharged home from hospital and are still at home 91 days later, rather than just those who have received Reablement.

Further detailed information is provided on the Q3 Better Care Fund report circulated separately to the agenda, to members of the Health and Wellbeing Board).

### **Better Care Fund Reset Progress: Support Offer Projects**

The Better Care Fund national support team shared three support offers that Lancashire agreed to take up. The support is provided as part of the overall Better Care Fund programme and is at no cost to the system. The support offers to Lancashire are in three defined areas:

- (i) Leadership & Governance
- (ii) Discharge to Assess
- (iii) Intermediate Care Demand and Capacity Modelling

### **Leadership and Governance**

Whole Systems Partnership (WSP) have been secured via the Better Care Fund support team to be Lancashire's delivery partner for this project.

Whole Systems Partnership (WSP) are currently holding a number of 1:1s and small focus groups with various system leaders to help Lancashire better understand the relationships and opportunities for learning at a local level, as well as best practice locally and elsewhere.

A relational survey was also circulated with system leaders, and the early themes from the outputs of the initial diagnostic work will be shared back into the system towards the end of March, to help shape the next steps.



## **Intermediate Care Demand and Capacity Modelling**

This project is at the early stages, with the identification of the datasets relating to performance, activity, capacity and finance now having been finalised. Information is being collated with initial analysis taking place at the beginning of April.

### **Discharge to Assess**

This project has now commenced, with the datasets being combined for ease with the demand and capacity modelling project.

Three Senior Responsible Officers (SRO) have been confirmed:

- Kash Ahmed – Director of Strategic and Integrated Commissioning, Lancashire County Council
- Imran Devji – Chief Operating Officer, Lancashire Teaching Hospitals
- Tony McDonald - Executive Director of Integrated Care, Partnerships and Resilience at East Lancashire Health Trust and Senior Responsible Owner (SRO) for Community Health Services Transformation

A survey is being finalised which will be shared with all frontline staff involved in hospital discharge, to understand from their perspective the appetite for change, thoughts, ideas and opportunities.

A full day of case reviews will be undertaken with each of the five main Acute Trusts that Lancashire residents may be admitted to, which will look at whether the right outcome was achieved for the person, what worked well and what other opportunities could there have been to improve the experience and outcome.

A series of guided interviews will take place with a random sample of Lancashire people who have been through a 'discharge to assess' process over the last six months. The aim is to obtain around 15 completed conversations, which will share the person's and their carer's experience of discharge, what worked well and what could have been better.

The ambition is to bring the outputs of all four elements together into one overarching report around the beginning of May. The report will set out the themes and opportunities for change, as well as what's working well already.

Whilst the project support offer did not have capacity to extend to cover the same diagnostic for people being discharged from Mental Health hospitals, Lancashire is looking to mirror the process and gain a similar understanding of what happens now and opportunities to improve.

### **Quarterly Finance Report**

In relation to the Q3 submission, actual spend and activity data to date has been completed across all schemes listed. It should be noted that as the reporting requirements for this period only focus on certain scheme categories, the template does not cover all schemes financed by the Lancashire Better Care Fund Pooled



Fund. The schemes selected equate to approximately 65% (£132m) of the total value of the Lancashire Pooled Fund of £204m.

Discussions are continuing between the Council and the Integrated Care Board regarding the transactional amounts into the pooled fund and will help shape the decision-making principles in relation to the financial relationship.

Further detailed information is provided on the Q3 Finance report circulated separately to the agenda, to members of the Health and Wellbeing Board).

### **List of background papers**

1. Lancashire Better Care Fund Quarter 3 Report (Board Members Only)
2. Lancashire Better Care Fund Finance Summary Report for Q3 (Board Members Only)





**Lancashire Health and Wellbeing Board**  
Meeting to be held on 5 March 2024

**Corporate Priorities:**  
Caring for the vulnerable  
Delivering better services

**Lancashire Drug and Alcohol Partnership – Delivering the Government's Strategy 'From Harm to Hope A 10-year drugs plan to cut crime and save lives'.**

Contact for further information:

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**Brief Summary**

Lancashire Drug and Alcohol Partnership has been in existence for eighteen months and in that time has developed and sustained some positive changes for the people of Lancashire. This report sets out progress to date and gives an outline of plans for 2024/25. The additional programmes proposed to be funded during 2024/25 are summarised in the report. (A description of the following providers and their main areas of work can be found in Appendix 'A').

The national 10-year Strategy 'From Harm to Hope' 2021 requires each upper tier authority to develop and sustain a Combatting Drugs Partnership with membership made up of key public and voluntary services in the county including, NHS, social care, public health, housing authorities, the Police and Crime Commissioner, prisons, and probation. Partnerships must link with other strategic boards such as the Lancashire and South Cumbria Integrated Care Board, reducing reoffending boards, and community safety partnerships. In Lancashire we chose to broaden the Partnership's remit to include alcohol along with illicit drugs due to the wide-ranging harms associated with it.

**Recommendations**

The Health and Wellbeing Board is asked to:

- (i) Receive and discuss the progress made by the Combating Drugs and Alcohol Partnership in achieving the outcomes of the Government's 10-year drug Strategy.
- (ii) Endorse the proposed 2024/25 plan in making further progress in addressing the harms caused by drugs and alcohol in Lancashire.

## Detail

Lancashire Drug and Alcohol Partnership (LDAP) is Lancashire's coordinating body formed to respond to the requirements set out in the Government's Strategy, 'From harm to hope: A 10-year drugs plan to cut crime and save lives' (2021).

The Strategy sets out three core priorities: break drug supply chains, deliver a world-class treatment and recovery system, and achieve a shift in the demand for recreational drugs. This approach can only be effective if it is built on strong local partnerships.

*"Successful delivery of the Government's drugs strategy, 'From harm to hope', relies on co-ordinated action across a range of local partners including in enforcement, treatment, recovery and prevention" (Guidance for local delivery partnerships – updated 26 January 2023, Home Office).*

Each combatting drugs partnership Lancashire Drug and Alcohol Partnership (LDAP) and local partners must work to achieve the following outcomes:

- Reduced likelihood of drug and alcohol related deaths
- A reduction in drug and alcohol related reoffending amongst prolific offenders within local areas
- Increase in the numbers of drug and alcohol users, especially offenders, engaging in treatment as well as increases in those achieving and sustaining recovery
- Reduced costs for local health services and police forces due to lower health and crime harms, and lower costs to the criminal justice system (as fewer people are dealt with by the courts)
- The strategy sets out several national targets and the Office for Health Improvement and Disparities (OHID) have set local (Lancashire) targets based on the national delivery expectations.

Lancashire Drug and Alcohol Partnership (LDAP) is made up of a range of partners and has established multi-agency working groups to achieve the above outcomes including on prevention, data and intelligence, early intervention, criminal justice, dual diagnosis, and drug related deaths.

As part of Lancashire Drug and Alcohol Partnership's (LDAPs) work, it had to undertake an initial needs assessment and develop an action plan. This allowed focus on work to address some of the big challenges faced by people with treatment needs in Lancashire. Levels of unmet needs have been mapped, numbers of people in treatment for different drugs, the links between prison and community treatment providers and made significant progress in addressing and reducing barriers to treatment.

Whilst performance has been strong in Lancashire for many years more recently it has been falling and the county is facing some very challenging issues and very high levels of unmet need. For example, Lancashire has a higher than England average in terms of unmet need for problematic – 'at risk' alcohol users (in England around 80% of this group are not in treatment whilst in Lancashire the figure is closer to 83% Lancashire).



The treatment population experience multiple and complex health and social needs. For example, around 80% of people entering treatment for alcohol use have a mental health treatment needs whilst for England the figure is closer to 70% of people in treatment have a mental health treatment need.

With additional investment there has come some challenges not least in recruitment of additional staff such as struggling to recruit social workers into the system, in response it has been decided to retrain three of recovery workers as social workers. Providers have taken a 'grow your own' approach to develop capacity in the future.

To achieve the ambitions in the national strategy there has been some allocated additional funding; the Supplementary Substance Misuse Treatment and Recovery Grant (SSMTRG). This grant is focused on community treatment for adults and children and young people with the aim of delivering on the Strategy's priority to develop a world class treatment and recovery system.

### **Progress against targets**

Lancashire are currently in year two of the National Strategy, the Lancashire Alcohol and Drugs Partnership, and the Supplementary Substance Misuse Treatment and Recovery Grant (SSMTRG) and have agreed annual targets with the Office for Health Improvement and Disparities (OHID).

As of November 2023, there were almost 7000 adults in treatment in Lancashire. This is an increase of 800 people from the baseline 6119 in March 2022. The target has been exceeded for 2023/24 by more than 200 adults in treatment. For young people, as of November 2023 there were more than 300 in treatment. This is from a baseline of 196 in March 2022. The target for 2023/24 for young people was 244 people in treatment. A significant increase has also been seen in the continuity of care (people leaving prison with a drug/alcohol treatment need and arriving at community treatment) figures at 64% for the rolling 12 months to November 2023, compared to a baseline of 37% in March 2022.

Lancashire in 2023/24 has achieved micro-elimination of Hepatitis C within the treatment population. This is across all twelve districts and is thanks to the hard work of Change, Grow Live (CGL) provider and with support from health colleagues across the County.

This is a significant achievement and means that there is:

- 100% of people using the service have been offered a Hepatitis C test.
- 90% of those people have been tested.
- 75% of people who were diagnosed with Hepatitis C have started treatment.

### **Lancashire Alcohol and Drug Treatment Plan for 2024/25**

The additional programmes proposed to be funded during 2024/25 are summarised below. (A description of the following providers and their main areas of work can be found in Appendix 'A').



## **Change, Grow, Live (CGL) – Lancashire's Adult Treatment Provider**

The current average caseload sits at 65-75 per drug and alcohol worker. A key element of plans for 2024/25 is to significantly increase the number of drug and alcohol workers to bring caseloads down towards the ambition of 40 per drug and alcohol worker as set out in the drug strategy. In comparison a social worker would typically carry a caseload of around 20. There are also plans to recruit specific stimulant workers to increase the number of primary crack users coming into treatment as we have identified that there is a high unmet need in this population. It is proposed to use some of the additional funding to enhance the pharmacy offer to those receiving medically assisted treatment. The enhanced offer includes the delivery of wellbeing support, including harm reduction, reporting of all missed pick-ups and late collections and an annual review by a pharmacist. One of driving forces behind the funding of the enhance pharmacy service is to support the management and reduction of risks, including drug related deaths and overdoses. Support for the criminal justice system and the police's Test on Arrest programme.

## **We Are With You – Lancashire's Children and Young Peoples treatment provider**

The plans for 2024/25 include the addition of two contextual safeguarding workers to enhance the links between and With You and children's social care to improve access and treatment for young people who are at risk of exploitation and criminality. The plan is to introduce a dedicated transitional worker to support individuals between the ages of 18-25 as they transition from young people's service into Change, Grow Live (CGL). It is proposed to also fund a Cognitive Behaviour Therapy practitioner to support the high levels of mental health needs seen in service.

## **Red Rose Recovery**

The Red Rose Recovery plans for 2024/25 include the uplifting of all Supplementary Substance Misuse Treatment and Recovery Grant (SSMTRG) funded staff to the Real Living Wage of £12 an hour. This will support staff retention and bring greater parity between recovery and treatment service pay.

## **Lancashire Women**

The main addition to the Lancashire Women offer in 2024/25 is the addition of a part time group work facilitator. Group work is a key component of drug and alcohol treatment and recovery and the introduction of the group work in the Snapback programme is to support women to feel comfortable in engaging in group work to allow them to facilitate access to structured treatment.

## **The Well**

The plans for The Well include the expansion of their People with Lived Experience Management training to support the private sector in addition to public and charitable sector.



## Conclusion

The Partnership will, in 2024/25, review and revise the drug and alcohol needs assessment factoring in changing drug markets and patterns of use. It will place a greater emphasis on prevention and develop a revised and SMART action plan. The Partnership is well placed to continue to deliver on the objectives in the National Drugs' Strategy 'From Harm to Hope' and meet the core requirements of the additional grants in terms of performance.

## Appendices

Appendix	Title
Appendix 'A'	Delivery partners in the Lancashire Substance Use Treatment System

## List of background papers

From Harm to Hope: A 10-year drugs plan to cut crime and save lives. 2021  
<https://www.gov.uk/government/publications/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives>

Guidance for local delivery partners. Updated 26 of January 2024  
<https://www.gov.uk/government/publications/drugs-strategy-guidance-for-local-delivery-partners/guidance-for-local-delivery-partners-accessible-version>





# Appendix A

## **Delivery partners in the Lancashire Substance Use Treatment System**

### **Active Lancashire**

Active Lancashire is the strategic lead for Sport and Physical Activity in Lancashire. They connect with like-minded local organisations and individuals to help bring about active lifestyles. Nationally they are one of the many Sport England-led Active Partnerships that drive a sports delivery system across the country.

They use sport and physical activity to influence behaviours and develop skills which can have a broader, positive impact on people's lives.

Active Lancashire supports people in addiction and recovery to connect with physical activity and sport to improve health and build resilient communities. It is a key partner in the treatment and recovery system contributing to community action, building skills and knowledge and improving individual health and wellbeing.

### **Change Grow Live (Inspire)**

Change Grow Live is a charity, providing prevention, treatment and recovery support services across England and Scotland.

Every year our multi-disciplinary teams support more than 200,000 people affected by drug or alcohol use, homelessness, and the criminal justice system.

Change Grow Live provide the main and core adult community treatment provision in Lancashire.

They provide. The following is not an exhaustive list and illustrates the main aspects of treatment.

- Psychosocial interventions
- Pharmacological interventions
- Treatment and recovery support
- One to one work and group work
- Harm reduction – needle exchange, advice and information, support to manage and reduce drug and alcohol related harm.
- Relapse prevention
- Support and training to allied professionals.
- Assessment, Prescribing and health care interventions and referral.
- Community detoxification treatment and support
- Assessment and support to access residential detoxification and works closely with social workers to support people to access residential rehabilitation programmes.

### **Lancashire women**

Lancashire Women are a leading charity, supporting an average of 5000 people each year in Lancashire to improve their lives and push through the barriers they face.

They offer support with employment, mental health and wellbeing support (1 to 1 sessions and group sessions), money advice and energy advice. They also have a

Justice & Safety team who work with women in the justice system or women who might face homelessness or domestic abuse.

For the treatment system Lancashire women provide specific support to women involved with the criminal justice system. They provide bespoke support to women that are treatment resistant and build on their commissioned work with the probation service to support the transition from Prison to engagement in community treatment.

### **Red Rose Recovery**

Red Rose Recovery (RRR) was established as a charity in 2012 and has become nationally recognised as a pioneering organisation in developing recovery systems and creating opportunities for people affected by substance misuse, mental health and offending behaviours.

As a Lived Experience Recovery Organisation, our staff's personal and relatable experience provides inspiration and hope to people who are struggling to find a way forward.

RRR also supports and helps co-ordinate the Lancashire User Forum which is the UK's largest mutual aid forum and active service user group delivering community action and recovery support across the county. You can attend this open and friendly forum any time during your recovery.

In Lancashire Red Rose Recovery provide.

- The Recovery Infrastructure Organisation (RIO) which works at an individual, community and strategic level to promote recovery and support people to achieve and maintain their own recovery.
- Provide lived experience staff to the Alcohol care team at Blackburn and Burnley Hospitals
- Provide lived experience workers to support criminal justice work, harm reduction, work with people with dual diagnosis (mental health and substance use needs), provide evening and weekend access to recovery groups and develop community resources.

### **The Well Communities**

The Well is a not-for-profit community interest company founded in 2012. It had hubs in barrow, Morecambe, and Lancaster as well as sites in Kendal and Fleetwood and helps people recover from drug and alcohol addiction. Support is provided by people with 'lived experience' of addiction.

- Promotes and provides the therapeutic benefits of one addict helping another.
- focus on Asset Based Community Development. This means that we concentrate on each person's abilities, skills and knowledge (or 'assets') to build confidence and self-esteem.
- build lasting friendships and feel part of a supportive community – which is vital for achieving long-term recovery.

- We encourage members to get involved in their communities. This gives them a sense of pride that they're able to contribute and 'give back' to society.
- The design and delivery of our services is very much led by members and their families. This helps us to keep our services relevant, effective and inclusive.

In Lancashire the well provides.

- Group work
- Assertive alcohol work
- Out of hours recovery support
- Training for managers to support staff with lived experience in the workplace

### **We Are With You (WAWY)**

We Are With You provide the Children and Young Person treatment and recovery service up to age 25.

We Are with You is a charity, providing prevention, treatment and recovery support services across England and Scotland.

In Lancashire We Are with You provides a comprehensive treatment and recovery offer for children and young people.

They run stand-alone young people's services which works in partnership with our adult service provided by Change Grow Live. Services are developed locally around the needs of young people and provide a holistic approach to support, focusing on reducing risk-taking behaviour, building resilience, self-esteem, and wellbeing to make positive change.

- Assessment, support, and referral
- Emotional support
- Education and prevention activities
- Training
- Psychosocial interventions
- Pharmacological interventions
- Harm reduction interventions
- Access to detoxification and rehabilitation activities in the community
- Relapse prevention





**Lancashire Health and Wellbeing Board**  
Meeting to be held on 5 March 2024

**Corporate Priorities:**

Caring for the vulnerable  
Delivering better services

**Sports Stadia Sponsorship by Vaping Companies**

Contact for further information:  
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**Brief Summary**

To understand how widespread vaping sponsorship of sports stadia is in England.

**Recommendation**

The Health and Wellbeing Board is asked to discuss the findings and the work to mitigate vaping sponsorship in sport stadia.

**Detail**

The Health and Wellbeing Board held on the 5 September 2023, received a report, 'Tackling Illicit Vapes and Youth Vaping in Lancashire'. The discussion about the report highlighted concern regarding vaping companies sponsoring sports stadia and the impact this could have on young people vaping. An action was agreed that further research be carried out to find out how widespread such sponsorship is and report the findings to the Health and Wellbeing Board.

A literature search was undertaken which identified that only two sports clubs are currently sponsored by the vaping firm Totally Wicked, which is based in Blackburn with Darwen. The clubs are Blackburn Football Club and St Helens Rugby Football Club. Blackburn Football Club have been sponsored since 2018 and St Helens since 2013. St Helen's stadium was also renamed 'The Totally Wicked Stadium' in 2017.

Whilst the sponsor's name and logo appear on the match day kits and adult replica kits are available in the club shop, it is not on the kit on sale to children. This is similar to the situation at Preston North End when they were sponsored by Tennent's (alcohol) and the children's kit were sponsored by their Community Trust. The company take sales to children and young people very seriously and are the chair of

the Independent British Vape Trade Association, they are also a responsible provider with a Check 25 approach.

Sponsorship to advertise and market products at sports stadia by industry is not a new phenomenon, e.g. previously there has been tobacco sponsorship, which was made illegal in 2005. Sport sponsorship works by increasing brand awareness and driving positive consumer perceptions about a brand which, in turn, lead to brand loyalty and anticipated increases in sales. The challenge with vapes is combatting the marketing and promotion of products to children and recognising that vaping is an evidence-based method of support to help adults quit smoking, as recognised by the National Institute for Health and Care Excellence (NICE). A bigger issue identified by this piece of work was that sports fans are routinely exposed to sponsorship by alcohol and gambling industries. Alcohol-related harm costs NHS England approximately £3.5bn each year, and the annual economic burden of harmful gambling is estimated to be around £1.27bn. Seven out of the twenty teams in the Premier League are sponsored by gambling firms as well as over half of the teams in the Championship. The English Football League is sponsored by Skybet. Positively the Premier League has announced that clubs have agreed to 'withdraw gambling sponsorship from the front of their matchday shirts' from the 2026/27 season onwards. Teams can still partner with gambling companies as sleeve partner or for in-stadium visibility.

### **Positive action – Healthy Stadia**

Sports stadia are in a unique position to influence health and wellbeing of a significant number of people. There is a well-established programme called Healthy Stadia which is a non-governmental organisation based in Liverpool and aims to work with clubs, sports stadia, and non-government bodies to positively influence the health of fans through stadium-based policies and community programmes. Further information can be found at <https://healthystadia.eu/healthy-stadia-concept/>.

Lancashire County Council's Public Health Team will continue to work with relevant agencies to promote healthy lifestyles and tackle youth vaping through the newly formed Lancashire Smokefree Alliance.

### **Conclusion**

This piece of work has identified limited sport stadia sponsorship by vaping companies and acknowledges where there is sponsorship those sponsors are undertaking mitigating actions, so products are not endorsed by children. This piece of work has identified a concerning amount of sport stadia that have gambling sponsorship. We will continue to work to develop positive health messages with stadia as per the Healthy Stadia Concept.

### **List of background papers**

None

