



Borough of Telford and Wrekin

Health & Wellbeing Board

Thursday 17 September 2026

2.00 pm

Council Chamber, Third Floor, Southwater One, Telford, TF3 4JG

Democratic Services:	Lorna Gordon	01952 384978
Media Enquiries:	Corporate Communications	01952 382406

Committee Members:	Cllr A J Burford (Co-Chair), V Whatley (Co-Chair), Cllr K Middleton, Cllr S J Reynolds, Cllr P Thomas, Cllr K L Tomlinson, Cllr P Watling, J Britton, N Carr, E Hancox, N Lee, N Pay, L Millar, F Mercer, H Onions, J Suckling, J Williams and C Hall-Salter
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To receive the Health & Wellbeing Board Quarterly Strategy Progress Report.

7.0 Neighbourhood Health Update **Verbal Report**

To receive the Neighbourhood Health Update.

8.0 Annual Report of the Director of Public Health 2026: Healthy Neighbourhoods Prevention First **43 - 78**

To receive the Annual Report of the Director of Public Health.

9.0 Smoke-free Delivery Plan **79 - 118**

To receive the Smoke-free delivery plan for approval, following the Annual Public Health Report 2025.

10.0 GP Out of Hours **Verbal Report**

To receive an update on the GP Out of Hours service across the Borough.

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HEALTH & WELLBEING BOARD

Minutes of a meeting of the Health & Wellbeing Board held on Thursday 18 June 2026 at 2.00 pm in the Council Chamber, Third Floor, Southwater One, Telford, TF3 4JG

Present: Councillors A J Burford (Co-Chair), V Whatley (Co-Chair), K Middleton, S J Reynolds, P Thomas, K L Tomlinson, J Britton, N Lee, N Pay, C Parker, H Onions and J Suckling

In Attendance: J Clarke (Senior Democracy Officer (Democracy)), K Griffin (Community Safety Partnership Manager), N Minshall (Head of Service Health Protection Health & Well Being) and H Potter (Insight Manager)

Apologies for Absence: Councillors P Watling, N Carr, E Hancox, F Mercer and J Williams

HWB1 Declarations of Interest

None.

HWB2 Minutes of the Previous Meeting

RESOLVED – that the minutes of the previous meeting held on 19 March 2026 be confirmed as a correct record and signed by the Chair.

HWB3 Public Speaking

No requests for public speaking had been received in advance.

HWB4 Health & Wellbeing Board Quarterly Strategy Progress Report

The Director of Public Health presented the Health and Wellbeing Board Quarterly Strategy Progress Report which set out the key highlights and updates regarding the integration agenda. It was reported that the Domestic Abuse Strategy, incorporating the Violence Against Women and Girls (VAWG) Agenda had been approved by Cabinet and the link to the strategy would be circulated to member of the Board.

The Board noted the development of a new set of partnership commitments and welcomed the significant contribution of individuals who had lived experience of domestic abuse and had helped to shape the strategy. A multi-media campaign linked to the World Cup and domestic abuse awareness had been launched.

In relation to the council's priority on Drugs and Alcohol, the work of the MPFT and STARS service for children and young people in schools and primary care settings had reported positive engagement and the Board were asked to

note the expansion of the peer support service provided by A Better Tomorrow for individuals who were in hospital with dependency issues.

Members were asked to note the significant work that had taken place in relation to the Healthy Weight Agenda which had been active within schools and early years settings. A webinar covering eight topics had been delivered and there had been strong attendance. It was reported that the Healthy Telford Partners initiative had commenced with a focus on strengthening engagement in workplaces, faith organisations and community settings.

The Mental Health Strategy remained in development and a successful community awards celebration event had been held which recognised individuals who had lived experience. There had been a relaunch of the CAMHS service and this, together with assurance regarding pre-assessment clinics, would support engagement with individuals with neurodiversity needs.

An update was given on the Neighbourhood Health and Integration work which was a priority across all areas and the Telford and Wrekin Integrated Place Partnership (TWIPP) had held a successful workshop following the development of the Neighbourhood Implementation Plan. A series of actions would be delivered over the coming year which would reflect the work already being undertaken or had been committed to through the partnership. An update of the work of the Integrated Care Board (ICB) would be presented later in the meeting. The Board were asked to note the ongoing work of TWIPP in progressing the neighbourhood health priorities.

During the debate, Members noted the increasing demand across the services and the need to further strengthen preventative approaches. It was recognised that responding effectively to increasing complexity of need required a more joined-up approach across the agencies and which were aligned to the neighbourhood health model. Concerns were raised regarding the sustainability of the funding and the potential loss of momentum for the test-and-learn projects.

Members of the Board noted the report.

HWB5 Health & Wellbeing Strategy Performance and Outcomes Report

The Director of Public Health presented the Health and Wellbeing Strategy Performance and Outcomes Report which complemented the preceding report and provided an update on the numerical indicators set out within the Health and Wellbeing Strategy performance framework. The report was presented on a six-monthly basis and highlighted the data that had changed since the previous report.

Members attention was drawn to the indicators relating to life expectancy and healthy life expectancy which had been updated. The latest data continued to present a challenging picture with life expectancy remaining statistically lower

than the England average. Healthy life expectancy had deteriorated further and continued to perform below the national trend.

In relation to healthy weight, it was reported that the latest national survey data showed an increase in the proportion of adults classified as overweight or obese. Whilst the figures were survey-based and subject to a degree of uncertainty, the data indicated that the borough was now performing worse than the national average.

Improvements were highlighted in smoking prevalence in the “Protect, Prevent and Detect Early” outcome and the estimates proportion of adults who smoked had decrease and was now statistically better than the England average.

A number of new screening and immunisation indicators had been added to the performance framework to provide a broader measure of health protection activity and of particular note, bowel cancer screening rates had continued to improve and were not statistically similar to the national average. Challenges remained around vaccination uptake, particularly amongst teenage children.

A question was raised regarding the source of the data and it was explained that indicators were drawn from a variety of sources with some measures based on a direct measurement programme such as healthy weight in children. Other indicators such as adult obesity and smoking prevalence were derived from national surveys and were population estimates but GPs had been included within the national surveys.

Inequalities in life expectancy and health life expectancy were a significant challenge, particularly within the borough’s most disadvantaged communities and early deaths and preventable conditions were major contributors to the reduced life expectancy. Respiratory disease, cancer and cardiovascular disease accounted for around two-thirds of preventable deaths, with around one-third of preventable deaths being attributed to cancer. The improvement in bowel cancer screening uptake was welcomed. A range of awareness activities and social media campaigns had taken place, together with support from GP practices who undertook follow-ups with patients who had not responded to screening invitations.

There had been progress in smoking cessation with the introduction of the lung cancer screening programme which had enabled direct referrals for smokers resulting in a significant increase in residents accessing the Stop Smoking services.

In regard to children’s development indicators, the Best Start in Life Plan, which covered pre-conception to children aged five, would be presented to Cabinet at the July meeting. The Plan set out comprehensive measures to improve early childhood outcomes and support children to a good level of development.

During the debate, concerns were raised regarding the disparity between the local and national figures in relation to life expectancy and healthy life expectancy reassurance was sought that local intervention could make a meaningful contribution to improve local outcomes despite the scale of the challenge. The importance of learning from areas that had already seen an improvement, but it was noted that it would take time for changes to life expectancy and required the collective efforts of all partner organisations. An update was sought on vaping and the current activity taking place.

The Director of Public Health outlined a range of targeted initiatives which aimed to address the health inequalities within disadvantaged communities which were intended to improve these outcomes. Vaping remained an effective tool in helping smokers to quit. Concern did remain regarding the increasing number of young people taking up vaping despite having never smoked. Activity on the prevent of vaping focussed on schools and young people. Following Royal Assent, the Tobacco and Vapes Bill would give greater clarity on the restrictions including measures relating to underage sales, age cohorts and controls on vaping products. An update on smoking and vaping would be included in the Annual Public Health report at the September meeting.

Members of the Board noted the report.

HWB6 Health Protection Update Report

The Public Health Specialist presented the Health Protection Update Report which provided assurance that effective health protection arrangements and governance structures were in place across the Integrated Care Board (ICB), NHS and within the local authority systems.

It highlighted strong partnership working and demonstrated a clear focus on tackling health inequalities, particularly in relation to vaccination uptake.

A system-wide vaccination group met regularly to review both winter and childhood immunisation programmes and data was used to identify where there was lower vaccination uptake within the community. Communication, outreach and clinical provision was then tailored to suit.

NHS resources had provided funding for a health educator to work with local schools to improve the Human Papillomavirus (HPV) vaccination uptake and there had been encouraging results, with targeted communication via social media and advertising resulting in 102 of 144 eligible pupils receiving the vaccine. A further 7 pupils had consented but were absent on the day of the vaccination. This demonstrated the positive impact of partnership working on vaccination rates.

The Health Protection Team continued to respond to notifiable infectious diseases and maintained strong relationships with schools, care home and

other settings and provided advice on outbreak management and infection prevention rates.

Statutory responsibilities continued to be delivered effectively in relation to high-risk food. Hygiene inspection requirements set by the Foods Standards Agency have been met as well as private water supply monitoring obligations.

It was also reported that public-facing advice had been updated in relation to aesthetic procedures and national concerns regarding cases of botulism linked to Botox treatments.

The Service had also undertaken enforcement action resulting in the seizure and destruction of a large quantity of Selective Androgen Receptor Modulators (SARMs) the sale of which was illegal in the UK.

The council had participated in three national and regional pandemic preparedness exercises during the previous year which strengthened local and national resilience arrangements.

In conclusion, members were assured that Telford and Wrekin had well-established health protection arrangements which was supported by effective partnership working.

During the debate, members of the Board recognised the importance of the health protection activity that had been undertaken and the targeted work in relation to increasing the uptake of vaccination rates. A question was raised regarding the lack of uptake in relation to children in nurseries and if there was any indication that this group of people were reluctant to have their children vaccinated and if it was becoming a trend. The Board commended the innovative and sustain work undertaken to increase the uptake of the HPV vaccine. The Board discussed the positive outcomes of public health campaigns and the challenges posed by misinformation. A question was raised regarding the impact of weight loss medication.

The Public Health Specialist commented that there was increasing hesitancy amongst some parents and officers worked with Family Hubs, nurseries and schools to work to understand the barriers to vaccination. The focus of the data was to provide accurate information to enable informed decision making rather than mandating vaccination. Members of the Board were asked to note that vaccination clinics had been delivered within nursery settings to make access easier for parents. In relation to weight loss medication, it was advised there was currently limited evidence and that they would wait to receive robust research findings before drawing any conclusions.

Representative from the NHS highlighted the work undertaken through maternity and neonatal services to promote vaccination during pregnancy and vaccination rates locally compared favourably to many other areas.

Members of the Board noted the report.

HWB7 ICB Neighbourhood Health Report

The Director: Adult Social Care presented the report of the Director of System Improvement, ICB, which set out details of a Neighbourhood Health System Architecture which was being developed across the Shropshire, Telford and Wrekin, Stoke and Staffordshire cluster. A strong partnership approach had been established for some years and the recent national policy development has accelerated the work to define a future vision for neighbourhood health.

The report sought to raise awareness and stimulate a discussion around the future model for neighbourhood health which included the development of the neighbourhood health hubs, support for digital infrastructure and the use of population health data to target areas with the greatest need. Work had already commenced on developing a cluster-wide roadmap to define what this would mean for each neighbourhood.

This approach would support the shift of services from hospital settings into the community and primary care environments and would enable residents to access services closer to home or wherever was more appropriate. It would build upon the existing services delivered through the Primary Care Networks including pharmacy, physiotherapy, social prescribing and care co-ordination with the focus being on prevention, early intervention and improved public health outcomes. Recurrent funding would be available to support the shift in approach but further work was required to determine how funding could be allocated and successful interventions scaled up. It was important to align data, estates and digital infrastructure to support neighbourhood working.

A phased approach to implementation was proposed, with progression reflecting the local partnership arrangements rather than a fixed timetable and it was recognised that Telford and Wrekin were well places to progress at pace owing to its established partnership working arrangements and successful collaborative working.

During the debate, some Members sought clarification in relation to the governance role of Health and Wellbeing Boards within the emerging neighbourhood health framework. They highlighted the need to avoid duplication of governance arrangements and particularly noted the strength and maturity of the partnership structures already established such as the Telford and Wrekin Integrated Place Partnership (TWIPP). Other Members welcomed the report and emphasised the importance of security delegated funding arrangements rather than that of a fixed timetable in order that place-based partnerships could deliver on neighbourhood health priorities effectively. They considered there was a need for additional investment to support prevention, reduce inequalities and target support. Assurance was sought that frailty prevention and support would form a key component of neighbourhood health plans and that the work already being undertaken through existing strategies and partnership groups would continue to improve care closer to home and reduce avoidable hospital admissions.

The Director: Adult Social Care explained that the national guidance remained limited, but it was suggested that Health and Wellbeing Boards would retain their responsibility for setting strategic direction and place-based partnership boards playing a key role in delivering the agreed priorities. She stressed the importance of the role of volunteers and the community sector in supporting the delivery of neighbourhood health and that the sector was well integrated into local partnership arrangements. Consideration would be required in order to secure a sustainable resourcing and infrastructure to support and fulfil the expanding role within the neighbourhood health model.

Members of the Board noted the report.

HWB8 Community Safety Partnership Annual Report

The Community Safety Partnership Manager presented the Community Safety Partnership Annual report which highlighted key achievements during the reporting period.

Despite the population growth across Telford and Wrekin, there had been a notable reduction in the figures including violence resulting in injury (7%), burglary (12%) and vehicle-related crime (16%).

Community concerns in relation to road safety had been addressed through a dedicated task and finish group which had contributed to a significant reduction in the number of people killed or seriously injured on the roads, with no fatalities recorded during 2025. It was also reported that the Safer Stronger model had now been fully embedded, enabling coordinated action on local priorities and targeted interventions with high-harm offenders.

The establishment of a Shoplifting Sub-Group, enhanced partnership working with West Mercia Police and STARS and included the reintroduction of drug testing on arrest. A Pre-Release Panel had been introduced to support individuals returning to Telford from custody through accommodation and continuity of care arrangements.

The positive partnership working between the Council's Anti-Social Behaviour Team and West Mercia Police was acknowledged and would continue going forward.

Members welcomed the positive trends reported but raised concerns regarding the accuracy of crime statistics, noting that some incidents may go unreported due to difficulties contacting the police. It was suggested that local intelligence and residents' experiences should be considered alongside statistical data. It was also noted that there was an overlap between community safety, domestic abuse, drugs and alcohol services, and wider public health approach.

In response, Officers advised that partnership and police data were regularly reviewed through a performance dashboard, with hotspot areas subject to detailed analysis and targeted action through dedicated sub-groups. It was

clarified that STARS was the commissioned drug and alcohol treatment service delivered by Inclusion, part of Midlands Partnership University NHS Foundation Trust.

Members of the Board noted the report.

HWB9 Safeguarding Adults Board Annual Report

The Director: Adult Social Care presented the Safeguarding Adults Board Annual report.

It was reported that the outgoing Independent Chair, Sue Howard, had left her position and that Christina Leith had been welcomed as the new Independent Chair. Members were advised that the partnership was continuing to progress its priorities at pace for the forthcoming year.

The report summarised achievements against the Board's eight priorities during 2025/26. Particular attention was drawn to work undertaken in relation to self-neglect, engagement with people with lived experience, and efforts to ensure representation reflected the diverse communities of Telford and Wrekin. The successful implementation of the communications and engagement strategy was also highlighted.

Significant work had been undertaken to strengthen the use of both quantitative and qualitative data in order to better understand the experiences and outcomes of those supported through safeguarding services. Three Safeguarding Adult Reviews (SARs) had also been published, despite there having been no new SAR referrals during the year. Any learning points had been disseminated through the Board's Learning and SAR Sub-Groups.

A concerted effort had been made to enhance training and development opportunities across partner organisations, including both mandatory and supplementary training programmes.

The Chair acknowledged the importance of the safeguarding work undertaken across the partnership.

No questions or comments were raised.

Members of the Board noted the report.

HWB10 Co-Chairs Update

The Chair paid tribute to Claire Parker who was attending her final meeting of the Health and Wellbeing Board. He thanked her for her significant contribution to the Board and the wider health system.

The meeting ended at 3.44 pm

Chairman: _____

Date: Thursday 17 September 2026

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Telford & Wrekin
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Protect, care and invest
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Borough of Telford and Wrekin

Health & Wellbeing Board

Thursday 17 September 2026

Terms of Reference 2026/27

Cabinet Member:	Cllr Zona Hannington - Cabinet Member: Finance and Resident Services
Lead Director:	Anthea Lowe - Director: Policy & Governance
Service Area:	Policy & Governance
Report Author:	Lorna Gordon - Member Support Officer
Officer Contact Details:	Tel: 01952 384978 Email: lorna.gordon@telford.gov.uk
Wards Affected:	All Wards
Key Decision:	Not Key Decision
Forward Plan:	Not Applicable
Report considered by:	Health & Wellbeing Board – 17 September 2026

1.0 Recommendations for decision/noting:

The Health & Wellbeing Board is asked to:-

- 1.1 Review and agree the Terms of Reference set out in Appendix A

2.0 Purpose of Report

- 2.1 To set out for review and agreement the Terms of Reference for the Health & Wellbeing Board outlined in Appendix A.

3.0 Background

- 3.1 The Constitution requires that Full Council should agree at its Annual Meeting the Terms of Reference for each of its Committees to enable the Council to efficiently conduct its business.
- 3.2 At the Annual Meeting of the Council on 21 May 2026, Full Council delegated authority to each Committee to review its own Terms of Reference.

- 3.3 The Terms of Reference forms part of the Constitution and approved by Full Council.

4.0 Summary of main proposals

- 4.1 Following the Annual Council meeting held on 21 May 2026, the Health & Wellbeing Board has been granted delegated authority to review and amend its Terms of Reference. This delegation ensures the Board can maintain effective governance arrangements that reflect evolving system priorities and statutory responsibilities.
- 4.2 As part of this review organisation titles have been updated to reflect recent changes.

5.0 Alternative Options

- 5.1 There are no alternative options arising from this report.

6.0 Key Risks

- 6.1 There are no key risks arising from this report.

7.0 Council Priorities

- 7.1 A community-focused, innovative council providing efficient, effective and quality services.

8.0 Financial Implications

- 8.1 There are no financial implications arising from adopting the recommendations of this report.

9.0 Legal and HR Implications

- 9.1 Health and Wellbeing Boards (HWBs) are statutory bodies established under the Health and Social Care Act 2012. They are designed to improve health and wellbeing and reduce health inequalities within local authority areas. In accordance with the Act there is a minimum statutory requirement for membership of the Board but it also has the discretion to appoint other additional members such as representatives from the Integrated Care Boards (ICB's).

The Constitution requires that Full Council should agree its Annual Meeting the Terms of Reference for each of its Committees. At the Annual Meeting of the Council on 21 May 2026, Full Council delegated authority to the Health and Wellbeing Board to review its own Terms of Reference. There are no direct legal implications arising from this report.

10.0 Ward Implications

- 10.1 There are no ward implications arising from this report.

11.0 Health, Social and Economic Implications

11.1 There are no Health, Social and Economic Implications arising from this report.

12.0 Equality and Diversity Implications

12.1 There are no equality and diversity implications arising from this report.

13.0 Climate Change, Biodiversity and Environmental Implications

13.1 There are no Climate Change, Biodiversity or Environmental implications arising from this report.

14.0 Background Papers

1 [Council Constitution](#)

15.0 Appendices

A Health & Wellbeing Board Terms of Reference 2026/27

16.0 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Legal	03/09/2026	03/09/2026	ON

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Telford & Wrekin Health and Wellbeing Board - Terms of Reference and Procedure

The Board has the responsibility for public health and health and wellbeing responsibilities within the Borough.

1. TERMS OF REFERENCE

1.1 The Health and Wellbeing Board is responsible for:-

- the development of a joint Health & Wellbeing Strategy for Telford & Wrekin based upon the needs identified in the Joint Strategic Needs Assessment (JSNA)
- the ongoing development of the JSNA and the development, review and oversight of the delivery of actions identified in the joint health and wellbeing strategy and other key plans and strategies that may be developed from time to time
- the encouragement of joint and co-commissioning between health and care sectors, including Telford and Wrekin ICS, and the Integrated Care Board (ICB), Telford and Wrekin Council, and NHS England and ensuring that commissioning and delivery activity of the relevant organisations are aligned with the priorities set out in the Health & Wellbeing Strategy
- the general oversight of the Council's Public Health responsibilities and receiving the annual report of the Council's Director of Public Health
- the receiving of reports from, and making recommendations to, Telford and Wrekin's Full Council, NHS England, and the Integrated Care System and Boards and sub-committees that it may establish (and delegate functions to) and from other Boards and organisations involved in the provision of services that influence of health and well-being outcomes for the whole population within the Borough.

1.2 The Health and Wellbeing Board will link to the Community Safety Partnership and local Adults and Childrens' Safeguarding Boards as their remit contributes to the responsibilities of the Board.

2. General

At the first meeting after the Annual Council Meeting and in response to any further guidance consider its terms of reference, structure, membership and activities.

PROCEDURE

3. General

Unless specifically provided for in these Terms of Reference (TOR), the [Council Procedure Rules \(CPR\)](#) govern the way that committees operate and in, the case of any discrepancy, these Terms of Reference shall take precedence. Notwithstanding this rule, the Chair of the Board may vary or suspend rules contained in the CPR or TOR in the interests of efficient and effective management of the Board.

4. Membership

4.1 Members of the Health and Wellbeing Board will comprise representatives from the Shropshire, Telford & Wrekin Integrated Care System, Telford & Wrekin Council and HealthWatch. The core members are:-

- An elected Member of Telford & Wrekin Council (Co-Chair of the Health and Wellbeing Board)
- The Chief Executive or representative of the Shropshire, Telford and Wrekin Integrated Care Board (Co-Chair of the Health and Wellbeing Board)
- Cabinet Member with responsibility for Adult Social Care and Health
- Cabinet Member with responsibility for Public Health and Mental Health
- Chief Executive or representative of the Midlands Partnership NHS Foundation Trust
- Chief Executive or representative of the **Shropshire, Telford & Wrekin Community and Hospitals NHS Group**
- Executive Director responsible for Adult Social Care
- Statutory Director of Children's Services
- Statutory Director responsible for Adult Social Care
- Statutory Director of Public Health
- Director or representative of the Shropshire, Telford and Wrekin Integrated Care Board
- Chief Strategy Officer of Shropshire or representative of the Telford & Wrekin Integrated Care System
- Lead Clinician from the Telford & Wrekin Integrated Place Partnership
- Representative of local HealthWatch
- Chair of the Community Safety Partnership
- Each political group of Telford & Wrekin Council with 4 or more elected members shall have one place on the Health and Wellbeing Board with voting rights; this includes the administration.
- Representative of the community and voluntary sector Chief Officers Group.

4.2 The board may invite additional representatives to observe, present to, and address the Board on matters pertaining to its Terms of Reference.

4.3 A Cabinet Member may hold more than one of the responsibilities described above and as such this may result in a reduced number of Cabinet Members participating in Board meetings.

4.4 The Board will be advised and supported by officers from the local authority and the Integrated Care Board.

5. Chair

5.1 The Board will be jointly co-chaired by those members indicated at 5.1 above. The Chair of the meeting will alternate between those two members on a meeting-by-meeting basis.

- 5.2 In the event that the co-Chair whose turn it is to Chair a meeting is not available, the other co-Chair will take the chair for the duration of the meeting.

6. Data and Information Sharing

- 6.1 Members agree to share all relevant information and data, to allow effective monitoring and management of performance and other joint working arrangements.

7. Quorum

- 7.1 Quorum is one quarter of the Board's membership, with physical attendance from at least one Telford & Wrekin Councillor and one ICS or ICB Member required.

- 7.2 Where technically possible, officers presenting papers to the Board (who are not formal members), can do so via Microsoft Teams.

8. Disqualification for Membership

- 8.1 The regulations that apply to committees and sub-committees of local authorities in respect of disqualification will apply to the Health and Wellbeing Board save for the exception set out in this section.
- 8.2 Any person who would be disqualified from being able to stand for election as a councillor will be disqualified from being a member of the Health and Wellbeing Board EXCEPT THAT disqualification criteria concerning paid employment or office within the local authority do not apply – this allows Council officers to be members of the Health and Wellbeing Board and to have voting rights thereon.
- 8.3 For the avoidance of doubt, the following disqualification criteria will continue to apply to members of the Health and Wellbeing Board:-
- Being the subject of a bankruptcy restrictions order or interim order
 - Having been convicted in the United Kingdom, the Channel Islands or the Isle of Man of any offence and has had passed a sentence of imprisonment (whether suspended or not) for a period of not less than three months without the option of a fine.

9. Voting Rights

All Members of the Health and Wellbeing Board will be able to vote alongside the elected representatives. This applies to any additional board members appointed in addition to the statutory membership set out in the Health and Social Care Act 2012. For the avoidance of doubt, invitees shall not have the right to vote on any matter at the Board.

10. Meetings

- 10.1 The Health and Wellbeing Board will meet approximately quarterly and in public. Dates and times of meetings will be agreed and published in advance. **Note** - the press and public may be excluded during consideration of any matter which would involve the disclosure of confidential or exempt information.
- 10.2 Agendas and supporting papers will be issued, and published, at least five clear days before each meeting. Action notes will be produced and, at the next meeting,

confirmed as a true record of the meeting to which they refer and signed by the Chair.

- 10.3 Save as set out in section 10.1, members of the public and press will have access to the meetings and there will be provision for public speaking section at each Health and Wellbeing Board meeting.

12. Public Speaking

Members of the public may speak at the Health and Wellbeing Board. The procedure for this is published on the Council's website. This states that:-

- Topics must be in the remit of the Health & Wellbeing Board.
- Members of the public who wish to speak must notify Democratic Services in writing on the Friday before a meeting.
- A maximum of three minutes is allocated to each speaker, which will be strictly adhered to.
- A maximum of three speakers will be permitted at any one meeting.

13. Code of Conduct and Declaration of Interest

The Health and Wellbeing Board will adopt the Council's code of conduct. Any interests in item(s) on the agenda should be declared at the start of the meeting.

14. Reporting Mechanisms/Accountability

The actions of the Health and Wellbeing Board will be subject to independent scrutiny by the relevant Scrutiny Committee(s) of Telford & Wrekin Council. The Board will publish an annual report on the progress that has been made against the Health and Wellbeing Board Strategy.



Telford & Wrekin
Co-operative Council

Protect, care and invest
to create a better borough

Health & Wellbeing Strategy 2023-2027

Delivery Progress Report
September 2026

Our vision - happier, healthier, fulfilled lives



Borough Vision 2023 ambition – inclusive, healthy, independent lives

Closing the Gap

- Our HWB Strategy highlights that tackling inequalities and closing the gap requires comprehensive action across our priority programmes, through a strong targeted, intelligence-led approach. Addressing wider determinants of health is crucial and the NHS has a particular focus on reducing health inequalities through its
- The gaps in health and wellbeing experience are most repeatedly seen in our most deprived communities, compared to the most affluent communities, the 20% most deprived communities, [CORE20PLUS5](#) programme.
- Particular and specific inequalities are also faced by different groups of people, often referred to as inclusion groups and these are closely related to characteristics which are protected in the Equalities Act.

Closing the Gap – overview of inequalities focus across HWB Strategy

Healthy Weight	- Strategy engagement focus groups with at-risk groups including people with learning disabilities, mental health disorders, males, ages 55+, ethnic minority groups, people living within our most deprived communities - Key priority for Healthy Weight Strategy is to create opportunities to support groups facing inequalities including: children and adults with a learning disability, physical disability or long-term health condition, as well as those with a common mental health problem or serious mental illness. - Schools health & wellbeing programme selects schools to take part with the highest rates of excess weight and those in our most deprived communities	Integrated health and care	Start for Life Family Hubs: "core20" population, younger parents, black & minority ethnic group families Primary Care: All PCNs have nominated inequalities leads and specific health inequality related projects in place for 24/25. Health inequalities is one the prioritisation criteria the ICB Primary Care Team use to target practices requiring improvement support.
Alcohol, drugs & domestic abuse	Alcohol & drugs : Equality Impact Assessment completed alongside the Needs Assessment. Equality Action Plan to be integrated into annual strategy Action Plan, Ethnicity data now included in quarterly treatment monitoring data Domestic Abuse: focus on families with complex and multiple needs. The DA Forum assessing disproportionate impact of domestic abuse and lower service uptake rates among under-served groups, improving joint working with faith groups and BAME communities	Green & sustainable borough	Initiatives targeted towards under-represented groups - people from lower socio-economic groups, people from ethnically diverse communities and people with disabilities/additional needs.
Mental health & wellbeing	Children & Young People who: have SEND, looked after/care leavers, those who are NEET, and suffer multiple disadvantage and trauma adults who experience poor mental health alongside other vulnerabilities such as alcohol and drug use and housing needs	Economic opportunity	The Cost-of-living strategy is aimed at those residents in the Borough on the lowest incomes, be they working age or pensioners.
Prevent, detect & protect	People living in the most deprived 20% of communities in England – the core 20 are a key focus given the gaps in life expectancy the most deprived and most affluent communities. Cancer screening: narrowing the gap in uptake of screening programmes across GP practices, linked to deprivation Cancer Champions & Health Champions representative of diverse communities	Housing & homelessness	People affected by trauma and poor mental health Ongoing focus on homeless clients who present with complex and multiple needs.

T&W HWB Strategy highlights that tackling inequalities and closing the gap requires comprehensive action across our priority programmes, through a strong targeted, intelligence-led approach. The gaps in health and wellbeing experience are most repeatedly seen in our most deprived communities, compared to the most affluent communities, the 20% most deprived communities, [CORE20PLUS5](#) programme. Particular and specific inequalities are also faced by different groups of people, often referred to as inclusion groups and these are closely related to characteristics which are protected in the Equalities Act.

Healthy Weight

Progress / Key Highlights

- Early years settings have been targeted using data on deprivation and child weight prevalence. Targeted settings receive tailored support, including a health and wellbeing self-assessment and guidance on promoting healthier eating and increased physical activity.
- Joint working between the Health Improvement Team, Family Hubs and the Council's catering team has resulted in the development of bespoke training to increase practitioner knowledge of healthy diets, physical activity recommendations and effective healthy lifestyle conversations.
- Development of the Healthy Telford Partner initiative is progressing, with a communications toolkit and self-assessment audit completed. The programme is due to launch next quarter and will engage workplaces, schools, community centres, faith groups and other partner organisations.
- Development of a Healthy Conversations training programme has commenced, with key frontline workforce groups currently being identified.
- An Events and Outreach Working Group has been established to strengthen the local health improvement offer including mini health checks and BMI measurements. Since 1 April, the team has attended 113 events and delivered 877 blood pressure or mini health checks.
- Resources promoting the benefits of free school meal auto-enrolment have been developed to encourage uptake, including guidance highlighting both health and financial benefits for families.

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Performance

386 adults and 22 families have so far accessed the Healthy Lifestyles and Healthy Families programmes in 2026/27

75% of clients accessing the Healthy Lifestyles Service achieved their primary goals within their 12-week programme, many of those focussing on weight loss

There has been a 17% increase on referrals into the Healthy Lifestyle Service within the last quarter compared to the same quarter in 2025/26 (349 referrals up from 298)

Risks/ Challenges

- Data from the National Child Measurement Programme (NCMP) continues to identify a substantial number of children who could benefit from Healthy Families support. Converting eligibility into programme participation remains an area for further development. The service is reviewing engagement methods and using targeted communications, including text messaging, to increase awareness of support, alongside continued work with partners to promote referrals and encourage family participation.

Case Study

- Following a referral from her GP, a client enrolled on the Healthy Lifestyles 12-week weight management programme with the primary goal of losing weight. Working with an advisor, she set realistic goals, tracked her eating habits through a food diary, and made sustainable changes to her diet and physical activity levels. Despite previous challenges with weight management, including gluten and dairy intolerances and medication-related barriers, she successfully developed healthier long-term habits through dietary improvements and a home-based exercise programme. At follow-up, the client reported that the support had been instrumental in helping her achieve lasting behaviour change. She has continued these healthy lifestyle habits since completing the programme and has reached her personal goal weight of 10 stone, reducing from 11 stone 13 pounds, a total weight loss of 1 stone 13 pounds.

Domestic Abuse

Key Progress – against strategy / work plans (Q1)

- A new contract was awarded from June 2026 for Specialist Support for survivors, children and young people affected by domestic, SPOC and a behaviour change programme for DA perpetrators
- A new combined DA & VAWG strategy for 2026-2028 has been approved by T&W Council
- T&W Council has made additional investment for targeted VAWG prevention work with young people most at risk of causing serious sexual harms

Issues / Challenges for the HWBB

- Delivering the 16 commitments in the new DA & VAWG strategy
- Planning for the 2026 White Ribbon Campaign is due to start in Q2
- Increasing referrals for the DA perpetrators behaviour change programme

Performance (Q2)

- SPOC decreased by 25% in Q1, in line with seasonal trends and are at a similar level to Q1 2025/26
- Referrals for specialist support for DA survivors fell slightly to 94 in Q1, but there was an increase in the number of self referrals
- The number of young people affected by DA waiting for Specialist Support reduced significantly over the summer as a result of additional groupwork programmes
- The number of referrals for the DA perpetrators behaviour change programme increased slightly to 9 in Q1 but remains low
- Performance monitoring dashboards for the DA service have been reviewed and refreshed and now outcomes for survivors and children and young people impacted by DA will be able to be monitored

Alcohol and drugs

Key Progress – against strategy / work plans

Prevention – The number of young people in treatment at the end of Q1 was 51, significantly above the March 2022 baseline (28). In addition, seven PSHE sessions and school drop-ins were delivered, engaging 325 attendees across schools and education settings.

Harm Reduction – Uptake of Hepatitis C testing increased substantially during Q1, rising from 54.6% in the same period of 2025-26 to 72.3% in 2026-27. Alongside this, 184 blood-borne virus screenings were completed, representing a 24% increase compared with the previous year.

Treatment – 874 adults engaged with structured treatment during the rolling 12 months to Q1 compared with 860 during the same period in 2025-26. Treatment outcomes also remained positive, with approximately 54% of service users demonstrating substantial progress in treatment, above the national rate of 47%.

Recovery Support – During Q1, A Better Tomorrow supported 128 live clients through 33 supported houses and delivering over 200 volunteer hours each week.

Improving outcomes - Case Study

A 14-year-old young person was referred to Recharge by her foster carer due to concerns about vaping, which had begun at the age of nine and was impacting her respiratory health. Through a series of tailored one-to-one mentoring sessions, she explored the harms associated with vaping, increased her understanding of the impact on her health, and set goals to reduce her use.

With support from her mentor and family network, she successfully reduced her vaping before making the decision to stop completely. Following a sustained period of abstinence, she reported noticeable improvements in her breathing and fitness, reduced breathlessness during everyday activities, financial savings, and an increased sense of confidence and achievement from reaching her goal.

Performance

Numbers entering treatment increased during Q1, with 119 individuals commencing structured treatment compared with 102 during the same period in 2025-26, representing a 17% increase year-on-year.

Hospital-based interventions continued to increase, with referrals to the Drug and Alcohol Liaison Team increasing from 67 during Q1 2025-26 to 89 during Q1 2026-27, while brief interventions increased from 64 to 75 over the same period.

Detoxification commencements via the Drug and Alcohol Liaison Team increased significantly, rising from one individual during Q1 2025-26 to fourteen during Q1 2026-27.

Treatment outcomes remain strong, with approximately 54% of individuals in treatment demonstrating substantial progress, remaining above the national rate of 47%, whilst continuity of care following release from custody remains above the national average (67% compared with 55%).

Issues / Challenges for the HWBB

- The profile of people requiring support continues to evolve, with treatment demand remaining highest amongst individuals presenting with alcohol and non-opiate substance use, whilst unmet need for opiate users remains above the March 2022 baseline despite recent improvements.
- The continuing availability of synthetic opioids nationally presents an ongoing risk of overdose and drug-related harm, requiring continued vigilance, intelligence sharing, naloxone distribution and partnership working across the system.

Mental Health & Wellbeing

Progress / Key Highlights since last report

- Completed phase 2 of the specialist care framework – evaluated over 100 applications. There were 89 successful applicants. Planning has now begun for the redevelopment of care frameworks to align 2 frameworks to one.
- CQC Inspection of Adult Social Care included operational teams, commissioners, people with lived experience, voluntary sector partners, providers and public health.
- Mental health neighbourhood centre planning meetings are underway. Input from the voluntary sector and adult social care in Telford are vital in seeking Telford & Wrekin solutions.
- Developing contact management process across mental health, learning disability and autism services with increased capacity to support this.
- Continue to attend V-Care Panel with children's services to develop understanding of those coming through transition.
- Supporting Impower colleagues with their projects including introducing Valuing Good Lives tools.
- Two new subcontracts have been awarded by the new CAMHS service; Xyla will provide additional assessment support for CYP and families awaiting a neurodiverse assessment and Luminova Tales of Courage app to support CYP aged 7-12 with mild to moderate fears, worries and anxiety.
- The CAMHS service have also recently enhanced the mental health group offer, named CAMHSGO. A range of courses and groups including sleep hygiene, emotional regulation, outdoor creative CBT support for low mood and psychoeducation for parents has been developed for younger and older children and young people. Referrals are managed internally via CAMHS at present.
- Significant workforce challenges experienced within CAMHS leading to an impact on access, assessment and support. Demand for core CAMHS and ND continue, further exacerbated by an increase in workforce challenges on capacity and waiting times.
- Enhancing mental health support at place, aligned to the ambitions of FFP are underway.
- Additional investment has been awarded to MPFT by the WM CAMHS Provider Collaborative Toucan, to develop mental health support for children in care living in residential care. Work is progressing and discussions underway to develop proposals planned for 2026/27 implementation and mobilisation.

Risks / Challenges

1. ICB structural changes – there is limited ICB involvement in CYP and adult mental health workstreams. There is also uncertainty on where CAMHS will sit and who will lead, pending outcome of the ICB structural changes.
2. Rehab phase 3 funding is still pending – this would make the vacant social work rehab worker post a full-time role. We are unable to recruit to this post without confirmation of funding. This impacts team capacity in ASC and the wider multi disciplinary team.
3. Funding for 18-25 calm café beyond October is still unclear. Discussions with the ICB have been ongoing options are being scoped for alternative options. It is likely that the service will cease if funding has not been secured by the end of August.
4. CAMHS workforce challenges and impact on access, assessment, waiting times and support poses significant risks.

Protection, Prevent and Detect 1/2

Progress / Key Highlights

CVD Prevent Delivered 789 mini health checks since Apr 26 across events, LWCHs, community & workplaces. Focus on strengthening relationships and building capacity through volunteers on a neighbourhood/community footprint i.e. North Telford and Muslim community.

Frailty Community Falls class attendance increased compared to same period last year (May – Aug) despite heatwave. Awareness sessions held with health & care staff. Supported falls Prevention & Improvement referral chart based on CFS and OPGA. Delivery of online care Home and extra care setting sessions continue alongside training for new staff supporting. Online classes now reach 9 care and extra care settings, with 73 participants (mostly living with dementia), aged 80-90; 8 staff have been trained to support delivery.

Attended the ICB comms task and finish group to develop the forthcoming Live Well Age Well campaign.

Cancer Jun - Aug 26, Stop Smoking Service received 326 referrals and created 217 quit plans, increases of 181% & 197% respectively compared with the same period last year. Four-week quit rates averaged 52.3%, peaking at 62.6% in July, demonstrating strong engagement.

Data / Case Studies

CVD Prevent Ted was supported to undertake 7-day monitoring through the community BP project. This enabled him to complete GP-requested home monitoring without incurring any cost. This improved his confidence in managing his health, increased his understanding of blood pressure monitoring, and motivated positive lifestyle changes including healthier eating and increased physical activity.

Challenge / Risks

CVD Prevent community organisations limited capacity to undertake BP checks. NHS Health check uptake low compared nationally. Frailty

Frailty need to understand and join up Falls preventative pilots and programmes to ensure maximise opportunities and ascertain gaps. Increase referrals from health & care partners (as currently majority through word of mouth)

Plans for next quarter

CVD Prevent Launch new drop-in services, deliver Know Your Numbers Week activities, expand Blood Pressure Checker training, and enhance promotion through refreshed communications and employer engagement.

Frailty support development of Falls Prevention pathway and referral raising awareness of all programmes and pilots. Explore development On demand at home classes for Moving On participants currently being piloted through the F4A Falls Prevention Service.

Promote the Live Well Age Well campaign

Protection, Prevent and Detect 2/2

Progress / Key Highlights

Live Well Community Hubs: 237 residents supported at 24 sessions across 8 locations, strong resident and partner feedback demonstrating the value of joined-up community support. Focus on gaining feedback and establishment of final hub at Malinsee general practice.

Healthy Lifestyle Service period Jun to Aug 26, the service received 349 referrals, representing a 17% increase compared with the same period in 2025/26 (298 referrals). A total of 256 Healthy Lifestyles plans were created, an increase of 13% compared with 2025/26 (227 plans). The service continues to demonstrate strong outcomes, with 75.9% of clients achieving their primary goal.

Health Champions programme There are now a total of 144 volunteers. Development of champions through Cancer Champion and MECC training. Volunteers provided 33 blood pressure checking attendances, including support at 23 Live Well Community Hubs, while also promoting health and wellbeing through community events, outreach activities and Walk Week engagement.

Data / Case Studies

WCH An older resident accessed the Live Well Community Hub to receive specialist support from Veterans Support and Citizens Advice, resulting in advice on benefits and entitlements, support to apply for a Veterans Card, and signposting to local veterans' networks. Ongoing support, including a follow-up home visit, helped connect both the resident and spouse to services that could improve financial wellbeing, social connectedness and access to support.

Healthy Lifestyles 2 case studies demonstrate significant improvements in physical and mental wellbeing. One highlights sustained behaviour change, with a client maintaining a 17.6kg weight loss and reducing their BMI from 31.7 to a healthy 24.5 over 12 months, while the other demonstrates the importance of engaging individuals when they are ready to make positive lifestyle changes.

Challenge / Risks

Live Well Community Hubs need to look at alternative ways of promoting offer alongside of social media. Referral from Health & Care.

Plans for next quarter

Live Well Community Hubs launch final hub at Malinslee general practice. Work with Shropshire Community Health to maximise support using Here to Help as an example. Strengthen communications, outreach and partner engagement to increase reach and impact. Think about evaluation in order to secure funding for 27/28

Health Champions identify champions from neighbourhood areas with low uptake and recruit clients who have received and benefitted from support from the Healthy Lifestyles Service.

Integrated Health and Care: Start for Life/Family Hubs (1/2)

Progress made

- Family Hubs continue to provide a broad community early help offer, with 415 parent and child contacts recorded across drop-ins, Playing Together, school-based activity, SEND parenting support, weekend events and targeted programmes in Q1.
- Reducing Parental Conflict Campaign Successfully ran through a March–May media campaign, digital screen promotion and sponsored social media, increasing website page views for this area from 89 in 2025 to 1,671 in 2026 Q2.
- The Citizens Advice offer for separated families is now live through Family Information Service / Family Connect, with 12 referrals made since launch in May.

Impact for children and families

- Families are accessing support earlier through community routes, drop-ins and Family Connect, helping to identify practical, emotional and parenting needs before escalation.
- Audit evidence confirms children's voices are visible across practice, with direct work contributing to improved confidence, emotional wellbeing, school attendance and successful reunification in audited cases.
- The Reducing Parental Conflict campaign generated significant reach, including 365,300 combined digital screen impressions and increased web engagement, supporting wider awareness and access to help.

Integrated Health and Care: Start for Life/Family Hubs (2/2)

Case Study

A family of five, newly rehoused in Donnington with very few possessions, accessed support through a Family Hub drop-in after being signposted by Family Connect. The Family Hubs practitioner responded quickly by arranging food support, a SIM card, benefits and employment advice, a welfare referral and practical household items including bedding, curtains, furniture, toys and books. The support helped stabilise the family, enabled children to start school and helped the family feel settled and hopeful in their new community. The family described the support as giving them “hope” and reported feeling happier, safer and more connected.

Risks and Mitigations

Funding and delivery uncertainty: the Year 5–7 Delivery Plan has been submitted, but confirmation of new strands is awaited, creating pressure on recruitment for school readiness and multidisciplinary development.

Workforce development

The Best Start in Life workforce has been strengthened through 5.6 Best Start Inclusion Practitioners being written into the Family Hub Delivery Plan. Practitioners will spend 75% of their time delivering direct support to families at home or in community settings. Proposals also include 1.2 Early Years Consultant posts and 0.8 posts across Health Visiting, Speech and Language Therapy and Occupational Therapy. Working with existing specialists, these roles will address emerging SEND needs and school readiness, aiming to increase the proportion of children achieving a good level of development. This BSIL team will be part of the wider SEND reforms and Experts at Hand

Telford & Wrekin Integrated Place Partnership (TWIPP) 1/3

Progress / Key Highlights

- In July, the TWIPP Committee reviewed the proposed vision, purpose, principles and enablers underpinning STW Healthy Neighbourhoods Programme.
 - Neighbourhood health initiatives continue to be delivered successfully across the borough, including Live Well Hubs and the Healthy Conversations Campaign, supporting improved wellbeing and community resilience.
 - The Malinslee and Dawley Live Well Hub was successfully launched, further strengthening local access to community-based support and services.
- The Committee endorsed the Place Expansion Full Award application to Sport England, seeking £1.2 million investment for 2027/28 to support increased physical activity and improve health outcomes across the borough.
- In September members participated in a workshop facilitated by the VCSE Alliance, exploring the strategic role of the voluntary, community and social enterprise sector in improving population health and reducing inequalities through stronger partnership working.
- Plans continue to progress for the new purpose-built community hub in Sutton Hill, which will incorporate a Neighbourhood Health Hub to improve access to health and wellbeing services for local residents.
 - The Integrated Care Board (ICB) has published the Neighbourhood Health Outcomes Framework for Shropshire, Telford and Wrekin. Shropshire Community Health NHS Trust has been designated to work with partners as the lead provider and delivery integrator. The focus for Year One is the development of Integrated Neighbourhood Team infrastructure and the implementation of case management approaches for individuals at highest risk, particularly those living with frailty and cardiovascular, renal and metabolic conditions.

Telford & Wrekin Integrated Place Partnership (TWIPP) 2/3

Case Study

Sport England Place Expansion Development Award Case Study

The Development Award has enabled partners to strengthen relationships, test new approaches, and build a shared understanding of how physical activity can contribute to improved health and wellbeing outcomes.

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- System Leadership: Strengthening partnerships, shared understanding, and collective leadership.
- Shared Roles: Creating capacity to connect organisations, communities, and programmes of work.
- VCSE Resilience: Supporting the role and sustainability of the voluntary and community sector.
- Get Yourself Active (Adult Social Care): Embedding physical activity and movement within Adult Social Care services.
- Hyperlocal Approaches in Donnington: Working with communities to understand local needs, build on strengths, and test place-based solutions.

The programme has demonstrated the value of collaborative, community-centred approaches and has created strong foundations for longer-term system change. Learning from this phase will inform a **Full Award application in November 2026**, seeking investment to continue and expand this work from **April 2027**.

Telford & Wrekin Integrated Place Partnership (TWIPP) 3/3

Risks

Securing sustainable, long-term funding for prevention initiatives that support the delivery of the Healthy Neighbourhoods Programme, aligning this work with the development and implementation of the Neighbourhood Health Outcomes Framework recently issued by the ICB.

Agreement of neighbourhood footprints remains outstanding. A collaborative session will be convened with TWIPP Health and Wellbeing Board members to support discussion and reach consensus.

Performance

The STW Neighbourhood Health Programme Outcomes Framework has been agreed and is currently being shared across a range of forums to support engagement and understanding. Roles and responsibilities are still being clarified and are yet to be formally agreed.

Green & Sustainable Borough

Progress / Key Highlights

- Green Flag Awards: 10 sites recognised in 2026, including two new sites that are Ketley Paddock Mound Local Nature Reserve (LNR) and Beeches and Lodge Fields LNR. .

Nature Reserve and Park Improvements:

- Apley Woods LNR -The duck pond decking has been replaced with recycled plastic material. Steps down to the meadow have been replaced and work to improve the footpaths on site has been completed. The second phase of the duck pond improvements will commence in the autumn.

2. Newport Canal – bank stabilising works have been completed.

3. Haybridge Avenue & Millfields Way play areas – money has been made available to upgrade the play areas in these two areas with more of a focus on meeting the needs of a wider range of the nearby residents. Consultation with the public has been completed for this stage and the tender process will begin shortly.

- Granville LNR – Seven digital guided walk nature trails are being developed as part of the Telford and Wrekin Place Expansion project in partnership with Energize.

• Telford Green Spaces Partnership TGSP: TGSP is a network that supports friends groups involved in caring for parks, Local Nature Reserves (LNRs), and other open spaces through volunteering. With funding from Fujitsu, the TGSP butterfly and moth conservation project is now nearing completion with over 1000 records of butterflies and moths recorded. As part of this project the Six-belted Clearwing moth was recorded at Rough Park Local Nature Reserve, the first-ever record of this in Telford. Fujitsu's support has also enabled volunteer groups to deliver a variety of additional projects, including bulb planting, wildflower sowing, tool purchases, and the installation of bird boxes.

- Play Strategy - Consultation with the public will begin the week commencing 14th September. The Play Strategy will be presented to cabinet in February 27.

• Food Resilience Project – A project is underway aimed at strengthening the borough's food system so that residents have reliable access to affordable, healthy, and sustainable food. This project will look at supporting peoples access to food banks and community grow spaces.

Economic opportunity

Progress / Key Highlights

Skills Bootcamps - The council will be gaining some funding from April 2027 to establish this provision in the borough. Skills bootcamps have been running in other parts of the country since 2022, but have never been offered in Telford & Wrekin before. Skills Bootcamps are free, flexible courses of up to 16 weeks, giving adults (19+) the chance to build sector-specific skills with an offer of a job interview at the end, giving learners direct line of sight into a job. Training must be designed and delivered in partnership with employers to ensure it delivers the skills needed. Development is in the early stages, but the available funding will provide capacity for around 400 adults to engage in bootcamps each year, across a range of sectors including construction, early years and childcare, digital skills, adult social care, and leadership and management.

Learn Telford - Following the end of the 25/26 academic year, Learn Telford has provided over 2600 adult learning opportunities through over 300 courses in 35 different venues across the borough. Of those 80% of learners were unemployed and 78% did not have GCSE level qualifications, with 13% having no qualifications at all. 48% of learners were from black or minority ethnic communities. Following their learning 80% of learners progressed onto further learning, with a further 5% moving into employment. The data continues to demonstrate the effectiveness of the service in reaching the sections of our community that need learning the most, and the impact of learning is that the large of majority of those adults progress into further learning or work. Learners also report a high degree of satisfaction with their course, their learning, and the support they receive. English and maths continue to be the largest element of the Learn Telford curriculum, which supports our residents to improve these essential skills for life and work.

Connect to Work - Is now halfway through year 2 of the programme. Staff recruitment is the key priority now to continue to build capacity towards full staffing by year 3 (Apr '27). Delivery continues to achieve 100% of the programme start target, with employment outcomes currently over 300% against target. DWP will be undertaking fidelity assessments over the next few months, but a recent audit found no issues.

Economic opportunity (Good and Fair Employment Alliance Jan-July 2026) 1/3

Overview

The Good and Fair Employment Programme recognises employment as both a key determinant of health and an important contributor to wellbeing, financial resilience and inclusion. Over the last six months, work has been structured around three interconnected priorities: Job Seeker Accreditation (ICAN-informed employment support model), Inclusive Recruitment and Workplaces and the Health of People of Working Age. Collectively, these priorities are supported through a growing alliance that currently engages 58 organisations and individuals, alongside resident and employment representation, reflecting increasing recognition that improving health, wellbeing and economic participation requires a coordinated system response

The work is also beginning to attract wider interest beyond the borough. We are already connected to wider stakeholders within the Good and Fair Employment Movement across the Midlands and in October, Ann Johnson Telford Local Systems lead (a role funded by Lloyds Bank Foundation) on behalf of the Alliance has been invited to present its Good & Fair Employment at Health Equity learning at the National Health Equity Network within a workshop at their annual Conference in Newcastle upon Tyne. This provides an opportunity both to showcase the system leadership and partnership development taking place locally and to learn from emerging practice and innovation being developed by national partners.

Job Seeker Accreditation (ICAN-Informed System informed Approach)

Over the last six months, a significant system-change opportunity has emerged through exploration of how the successful Birmingham ICAN supported into work system model could be adapted for Telford & Wrekin. Two Cross-sector workshops and planning sessions have already happened this has brought together local health partners, employers, education providers, DWP, the voluntary and community sector and employment support organisations to consider how existing assets can be aligned into a more coordinated employment, health and inclusion system informed by the ICAN Model, whose founders have visited Telford to provide insight and offer continued support.

- A key achievement has been the transition from exploration into early system design. The work is currently being shaped by a dedicated planning process involving 10 cross-sector partners, including health, local authority, employment, education and community organisations, with discussions also underway regarding NHS and social care test-and-learn opportunities.
- Alongside system model development, relationships are being strengthened with a range of funding and system-development opportunities including WorkWell, the DWP Innovation Fund, Pride in Place and Lloyds Bank Foundation. These discussions are helping ensure that local learning is connected to wider health, employment and place-based developments.

Inclusive Recruitment and Workplaces

The primary focus has been on building a stronger understanding of the relationship between recruitment, workforce wellbeing, inclusion and health. A borough-wide employer survey has been undertaken alongside lived-experience engagement, providing new evidence about the barriers people face in accessing, sustaining and progressing in employment. 27 local employers responded.

System-change activity has focused on strengthening relationships with employers and existing employer networks rather than creating new structures. This has included engagement with the Chartered Management Institute, Shropshire Chamber of Commerce, Telford Business Board, HR networks and the social care sector to explore how learning, employer insight and inclusive practice can be embedded through existing mechanisms.

A key achievement has been the growing recognition that workforce wellbeing, inclusive recruitment and healthy workplace practices are not solely employment issues but also important contributors to population health. The work is beginning to create stronger feedback loops between employers, health partners and wider system leaders to ensure local experiences inform future priorities and collective actions.

Health of People of Working Age

The strongest area of system development has been the Health of People of Working Age programme, which has emerged through strong alignment with the Sport England Place Partnership programme and wider health equity discussions. Public Health, employers, community organisations, employment support providers, Energize, CVS and other partners have come together around a shared ambition to improve the health, wellbeing and economic participation of working-age residents.

A substantial evidence-gathering phase has been completed, drawing together community insight, employer experience, public health intelligence, workplace case studies and wider stakeholder engagement. In parallel, a dedicated multi-agency working group has been established, creating a stronger mechanism for collaboration between health, employment and community partners.

This alignment has led to the development of an emerging proposal for a connected community employment, health and physical activity support system. The proposal seeks to strengthen existing partnerships by creating clearer referral pathways, improved support navigation, stronger community hubs and greater integration between physical activity, health, wellbeing and employment support. Rather than introducing new services, the ambition is to create a more coordinated system that improves access to support and addresses the factors that influence health and economic participation.

Next Steps

Progress the ICAN-informed model with a Planning and Steering Group workshop in late September/early October, which further the development of local test-and-learn opportunities.

Use September employer and stakeholder events to identify and prioritise future system-change opportunities within the Inclusive Recruitment and Workplace priority

Submit the Sport England Place Partnership Full Award application, informed by the Health of People of Working Age system work.

Present Telford & Wrekin's learning at the National Health Equity Network Conference in Newcastle upon Tyne in October

Continue to work with and strengthen relations with current and new place-based funders and partners and to align our work with current known health funding opportunities.

Housing

Key Progress – against strategy / work plans

- Opened a Rough Sleeper Emergency Accommodation with 24/7 staff on site, ensuring all Telford & Wrekin rough sleepers have an offer off the street.
- Opened a new refuge for those presenting as homeless due to domestic abuse offering 8 beds for women and their children.
- Opened a new 5 bed unit of temporary accommodation for singles and adults who we owe a housing duty.
- Increased the supply of temporary accommodation to reduce the use of B&B which is not suitable for families.
- Continue to work with partners to provide support to clients presenting as homeless
- Delivering a Landlord and Tenant support programme
- Continue to work with Housing Associations to increase successful nominations into social housing
- Using data on housing needs across adult and children's services shaping the development market to deliver more specialist and adapted accommodation including supported accommodation, extracare and provision for care leavers
- Maintaining daily multi-agency Rough Sleeping Task Force
- Continue to work with MPFT via dedicated Mental Health Nurse to provide rapid mental health support for rough sleepers.
- Developed the website with more homelessness advice and support
- Established a Homelessness Forum with partners

Improving outcomes - data or brief case study/ story etc.

- Since April we have prevented 104 applicants from becoming homeless
- Since April we have relieved 437 applicants from becoming homeless.
- Since April we have advised 437 applicants with housing advice.

Plans for next quarter – what we are hoping to achieve

- Continue to work with partners to manage customer expectations about the type, size and location of housing they may be offered
- Continue to work with developers and housing association partners to ensure that new properties reflect all housing needs.
- Review provision for rough sleepers during the SWEP period.

Issues / challenges for HWB

- Increasing numbers of clients including families presenting to services
- More complex clients with challenging behaviours who require multi agency response and support and impact on communities
- Shortage of affordable larger accommodation reflecting increase in larger families presenting as homeless
- Shortage of one bedroom self contained affordable properties for single clients
- Demand for more specialist supported accommodation to house those with mental health and substance misuse.

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Telford & Wrekin
Co-operative Council

Protect, care and invest
to create a better borough

Borough of Telford and Wrekin

Health and Wellbeing Board

Thursday 17 September 2026

Annual Public Health Report 2026 Healthy Neighbourhoods - Prevention First

Cabinet Member:	Cllr Kelly Middleton - Cabinet Member for Public Health and Unlocking Opportunities for All
Lead Director:	Helen Onions - Director of Public Health
Service Area:	Health & Wellbeing
Report Author:	Helen Onions - Director of Public Health
Officer Contact Details:	Tel: 01952 381366 Email: helen.onions@telford.gov.uk
Wards Affected:	All Wards
Key Decision:	Key Decision
Forward Plan:	Yes
Report considered by:	SMT – 1 September 2026 HWB – 17 September 2026

1.0 Recommendations for decision

- 1.1 HWB is requested to endorse and support the recommendations of the Director of Public Health Annual Report 2026, which are aimed at improving health and wellbeing outcomes, through implementation of the neighbourhood health programme.

2.0 Purpose of Report

- 2.1 The 2026 Annual Public Health Report focusses on neighbourhood health, the Government's new programme which is part of the NHS 10 Year Plan. It highlights the need to focus on prevention so our residents can stay healthy and independent, spot problems earlier.

3.0 Background

- 3.1 Working in neighbourhoods is far from new for local authorities, which offer a wide range of services and support in communities that impact on resident's health and

wellbeing, for example – lifestyle and public health services, adults and children's social care, housing, employment and welfare support.

- 3.2 Neighbourhood health is a collective approach across the NHS, local authorities, voluntary and community organisations, and local residents. The goals are to create more joined-up, person-centred support, strengthen community resilience, tackle health inequalities and reduce reliance on hospital-based care wherever appropriate.
- 3.3 The NHS 10 Year Health Plan and the [2026 Neighbourhood Health Framework](#) expect neighbourhoods to be increasingly recognised as the building blocks of health and care, bringing services together around the needs of local people and communities.
- 3.4 Voluntary and community organisations and local authorities with the NHS are leaders of Health & Wellbeing Boards and Place Partnerships are already rooted in communities, working alongside residents and are leading the way on prevention. We have a clear understanding of community needs, are able to reach people who may not engage with traditional health services, to reduce loneliness and social isolation, support community resilience and provide practical support and community connections. As well as addressing the wider factors of health such as housing, employment, debt and social inclusion. Place Partnerships, at local authority level, will be taking on responsibility for planning and improving healthcare for their local populations as part of neighbourhood health.
- 3.5 Neighbourhood health plans need to be developed under the collective leadership of well-established Health & Wellbeing Boards, hosted by each local authority.
- 3.6 The neighbourhood health shift gives the opportunity to improve local outcomes and reduce inequalities throughout residents' lives, so that residents start well, live well and age well.

4.0 Summary of main proposals

- 4.1 In Telford & Wrekin work on with partners on the health and wellbeing strategy, children and young people's and adult social care prevention strategies, and the Vision 2032 are clear examples of existing community-focused collaboration to improve outcomes for residents.
- 4.2 The Telford & Wrekin Integrated Place Partnership – TWIPP is steering the delivery of neighbourhood health in the Borough. TWIPP includes partners from:
 - local authority children and adults services and public health;
 - the four Primary Care Networks;
 - NHS leads from the Integrated Care Board (ICB) and the four local hospital and community trusts;
 - our Voluntary and Community Service Alliance.

- 4.3 On a broader footprint the NHS with TWIPP partners are collaborating with Shropshire – the Council and voluntary sector alliance, to develop the Healthy Neighbourhoods programme. The programme aligns with the approach being taken more widely across Staffordshire and Stoke on Trent to accelerate the shift toward neighbourhood-based models of care that enable earlier intervention and proactive care closer to home.
- 4.4 The development of Integrated Neighbourhood Teams through our Primary Care Networks is the key initial focus for the NHS Shropshire, Telford & Wrekin, Staffordshire and Stoke on Trent Neighbourhood Health Programme. Data on need and demand for healthcare is being used to target prevention and earlier treatment. Four population groups are priorities, and two of those are being worked on in 2026: people living with frailty and people with long-term conditions – such as cardiovascular disease.
- 4.5 Priority populations for Neighbourhood Health



- 4.6 The 2026 annual public health report describes how we have been strengthening prevention through TWIPP in Telford & Wrekin, through a series of case studies which showcase how the council, community and voluntary organisations have been working with residents and primary and community NHS services.
- 4.7 There are six priority themes for prevention agreed for healthy neighbourhoods, and the report uses these themes as a framework for recent case studies.



- 4.8 Neighbourhood health and prevention agenda connect well with other significant transformation programmes already underway, such as the Best Start in Life as part of the Children & Young People’s Strategy, Adult Social Care Strategy and Making Prevention Real Programme and the Sport England place expansion programme.

5.0 Alternative Options

- 5.1 Producing an independent annual report is a statutory duty for the Director of Public Health and the local authority must publish the report, so not publishing a report would mean this duty is not complied with. Health and Wellbeing Board could decide to not endorse the recommendations of the Director of Public Health, but such a decision would be in spite of the wealth of evidence presented in the report.

6.0 Key Risks

- 6.1 Failure to implement Neighbourhood Health would risk continued fragmentation of healthcare services and support, making it harder for residents to access joined-up, person-centred care and reducing opportunities to improve prevention and tackle health inequalities. This could particularly affect priority groups such as people with frailty, long-term conditions, mental health needs, children and young people.
- 6.2 There is a risk of increasing pressure on hospitals and healthcare services. Without a stronger focus on prevention, early intervention and community-based support, the demand for emergency and acute services is likely to continue to grow, reducing the ability to improve outcomes, deliver value for money and meet national objectives.

- 6.3 The capacity of HWB and TWIPP partner organisations to contribute to delivery of the NHS 10-year Plan ambitions without adequate funding is also a key risk for successful implementation of the programme. This is particularly relevant to Voluntary Community & Social Enterprise sector organisations where ongoing financial stability can be an issue.

7.0 Council Priorities

- 7.1 Every child, young person and adult lives well in their community.

8.0 Financial Implications

- 8.1 The Annual report and strategy included with this report will be delivered by the Council in conjunction with Health, Voluntary Sector and other partner organisations.
- 8.2 Public health grant allocations to Council's are determined by Government as part of it's annual funding settlement for Local Government. Telford & Wrekin Council's Public Health grant for 2026/27 is £16m and is expended on service across the Borough's population including services such as working to help people cease smoking, deliver initiatives to support children's health, provide addiction services for drugs & alcohol, provide health checks and deliver sexual health services, and other programmes.
- 8.3 The Council's Public Health grant is governed by statute and can only be expended on services which promote and further public health to the Borough's population. There are also key indicators required by Government to measure success in certain key areas.
- 8.4 The Council will work with partner organisations within allocated resources to deliver Neighbourhood and Community health services at the local level as set out in Government and local strategies. These will be delivered within approved capital and revenue resources. Where additional resources are found to be required then this will be considered within the Council's Governance structure for setting future years budgets through it's Medium term financial strategy.

RP 21/08/25

9.0 Legal and HR Implications

- 9.1 The Director of Public Health has a statutory duty to prepare an annual report on the health of the people in the area of the local authority under Section 73B(5) of the National Health Service Act 2006 (as amended). The report has to be published by the local authority under Section 73B(6). The attached report is produced by the Director of Public Health in order to meet these statutory responsibilities.

10.0 Ward Implications

- 10.1 Borough-wide impact, but particularly wards with highest levels socio-economic deprivation where residents have worse health and wellbeing outcomes.

11.0 Health, Social and Economic Implications

- 11.1 Neighbourhood Health is expected to deliver positive social and economic benefits by: improving population health, supporting people to live independently for longer and strengthening connections between health services, local authorities, voluntary organisations and communities. Through a stronger focus on prevention, early intervention and joined-up support, the aim is to improve health outcomes, reduce health inequalities, tackle social isolation and address wider determinants of health such as housing, employment and social inclusion. Involving communities in service design and delivery will build community resilience and ensure services are better aligned to local needs.
- 11.2 Economically, neighbourhood health aims to make more effective use of public resources by: reducing avoidable hospital admissions, improving management of long-term conditions, cutting duplication across services and shifting care closer to home. Better health outcomes can help more people remain active, independent and engaged in education, employment and community life, while reducing demand on acute health and social care services. Partnership working across sectors encourages investment in local neighbourhood infrastructure, which may contribute to wider social and economic regeneration and improved wellbeing outcomes for residents and the borough.

12.0 Equality and Diversity Implications

- 12.1 Neighbourhood Health is expected to have a positive impact on equality and diversity through the strong emphasis on reducing health inequalities, improving access to services and ensuring support around the needs of individuals and communities. People who often experience poorer health outcomes, including people living with frailty, those with long-term conditions, disabled people, children and young people, people with mental health conditions and those approaching end of life are prioritised.
- 12.2 To maximise the benefits, neighbourhood health needs to ensure that no groups of people are disadvantaged by changes in the way services are delivered. Particular attention should be given to addressing digital exclusion, accessibility needs, language and communication barriers, and ensuring that seldom-heard communities are actively involved in shaping neighbourhood health plans. Ongoing engagement, monitoring of outcomes and equality impact will be important to ensure that the programme contributes to reducing, rather than widening, existing health inequalities and also supports fair and equitable access for all residents.

13.0 Climate Change, Biodiversity and Environmental Implications

- 13.1 Neighbourhood Health is likely to have a positive environmental impact by reducing reliance on hospital-based care and increasing access to services closer to where people live. Neighbourhood-based care, community hubs, integrated neighbourhood teams, greater use of digital technology and more coordinated services are expected, and these can help reduce travel for appointments and support more efficient use of health and care estates and resources.

14.0 Background Papers

None

15.0 Appendices

- A Annual Public Health Report 2026 Healthy Neighbourhoods – Prevention First

16.0 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Director	20/08/2026	20/08/2026	HO
Legal	20/08/2026	03/09/2026	ON
Finance	20/08/2026	28/08/2026	RP

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Telford & Wrekin
Co-operative Council

Protect, care and invest
to create a better borough

Twipp



Healthy Neighbourhoods Prevention First

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Telford and Wrekin Annual Public Health Report 2026



Foreword

My report this year shines a light on neighbourhood health, the Government's new programme, which is part of the NHS 10 Year Plan. Neighbourhood Health needs a strong public health approach, with a focus on prevention so our residents stay healthy and independent, spot problems earlier, and where needed the offer healthcare close to home, rather than in hospital.

Working in neighbourhoods is far from new for local authorities, we offer a wide range of services and support in communities that impact on resident's health and wellbeing, for example – lifestyle and public health services, adults and children's social care, housing, employment and welfare support. Our work on with partners on the health and wellbeing strategy, children and young people's and adult social care prevention strategies, and the Vision 2032 are clear examples of collaboration and delivery.

Bringing together services around the needs of local people, rather than organisational boundaries, with a shared focus on improving health outcomes is a foundation of neighbourhood health.

Voluntary and Community Sector organisations, alongside local authorities will be critical partners to the NHS in its major transformation journey over the next decade. This report introduces how we are working with the NHS to develop *healthy neighbourhoods* in Shropshire, Telford and Wrekin, with particular emphasis on prevention first, rather than the shift of treatment and care out of hospital into the community which is also gathering momentum. A series of case studies in the report showcase how the council community and voluntary organisations have been working with residents and primary and community NHS services on prevention. Neighbourhood health connects well with other significant transformation

programmes already underway, such as the best start in life and making prevention real in adult social care.

The case studies, framed around our agreed prevention priorities, describe how we are working differently, what impact this is having and what going further looks like. There are obvious opportunities for future action set out, and it is recommended these actions become part of the Telford & Wrekin Place Partnership delivery plan for neighbourhood health and in turn inform the Health & Wellbeing Strategy refresh during 2027.



Helen Onions

Director of Public Health
Telford & Wrekin Council

Acknowledgements

A very big thank you to the working group who have developed this report with me: Louise, Billy, Lauren and John.

We are particularly grateful to the case study contributors inside and outside the Council: Lauren, Jolene, Rachel, Jeni, Steph, Becky, Louise, Diana, Nicky, Lizzie, Wayne and Damion. Thank you for sharing your knowledge, insights and examples of good practice featured throughout this report.

Thank you to those who have been filmed for the videos and the residents who shared their experiences and stories, which help bring this report to life through our case studies.

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Prevention focus themes

Accessible information on
healthy lifestyles and self care



Integrated neighbourhood
teams and community hubs



Person centred care
and support



Comprehensive delivery of NHS
Prevention Programmes
(with inequalities targeting)



Early detection and treatment
for Long Term Conditions
(with inequalities targeting)



Focus prevention activities to
reduce inequalities

Working across the system to
support those in need



Recommendations - opportunities for action

The Government's Neighbourhood Health agenda, if fully realised, has the potential to improve health and wellbeing outcomes significantly for our residents so they start well, live well and age well. The prevention work underway across the Borough, which is showcased in this report, demonstrates the impact that information, community support and healthcare offered in neighbourhoods is having on children, young people and adults.

It is recommended that the Health & Wellbeing Board, the NHS Integrated Care Board and Telford & Wrekin Integrated Place Partnership continue to work together on the neighbourhood health agenda and agree an implementation plan, which:

- ensures prevention work becomes centre stage, alongside the shift of treatment and care out of hospital into community and primary care in neighbourhoods;
- scales up prevention programmes in an equitable way, with a focus on those who need it most;
- adopts learning from pilot projects and continues and expands the initiatives which are delivering obvious outcomes; and
- supports further investment in Voluntary Community and Social Enterprise organisations allowing local prevention programmes to become sustainable.

Improving Outcomes: Life Expectancy and Healthy Life Expectancy

Key Messages

- Life Expectancy in males in Telford and Wrekin has improved since 2001-03, but most of this improvement occurred during 2000s and early 2010s, after which progress slowed. Similarly for females life expectancy improved in the past two decades, however most of this improvement occurred during the 2000s with progress slowing markedly since 2010.
- Healthy Life Expectancy in males in Telford and Wrekin deteriorated over the last decade, this trend was also seen nationally following the pandemic, but the decline in Telford and Wrekin has been particularly marked. For female healthy life expectancy has generally declined over the past decade.
- Mental wellbeing is an important contributor to healthy life expectancy. Poor wellbeing and mental ill-health are strongly associated with lower levels of self-reported health – a key driver of healthy life expectancy.
- Improving mental wellbeing, alongside preventing and managing long-term conditions and addressing wider determinants of health such as income, education and social circumstances, will all support improvements in healthy life expectancy.

Life expectancy at birth 2023-25



Life expectancy gap by deprivation 2022-24

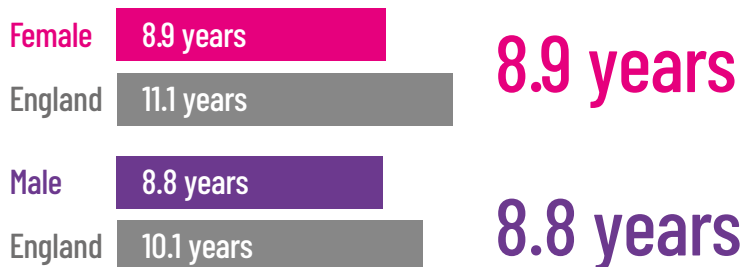
Inequalities in life expectancy by deprivation within Telford and Wrekin (Slope index of inequality)



Healthy life expectancy and years lived in poor health 2022-24



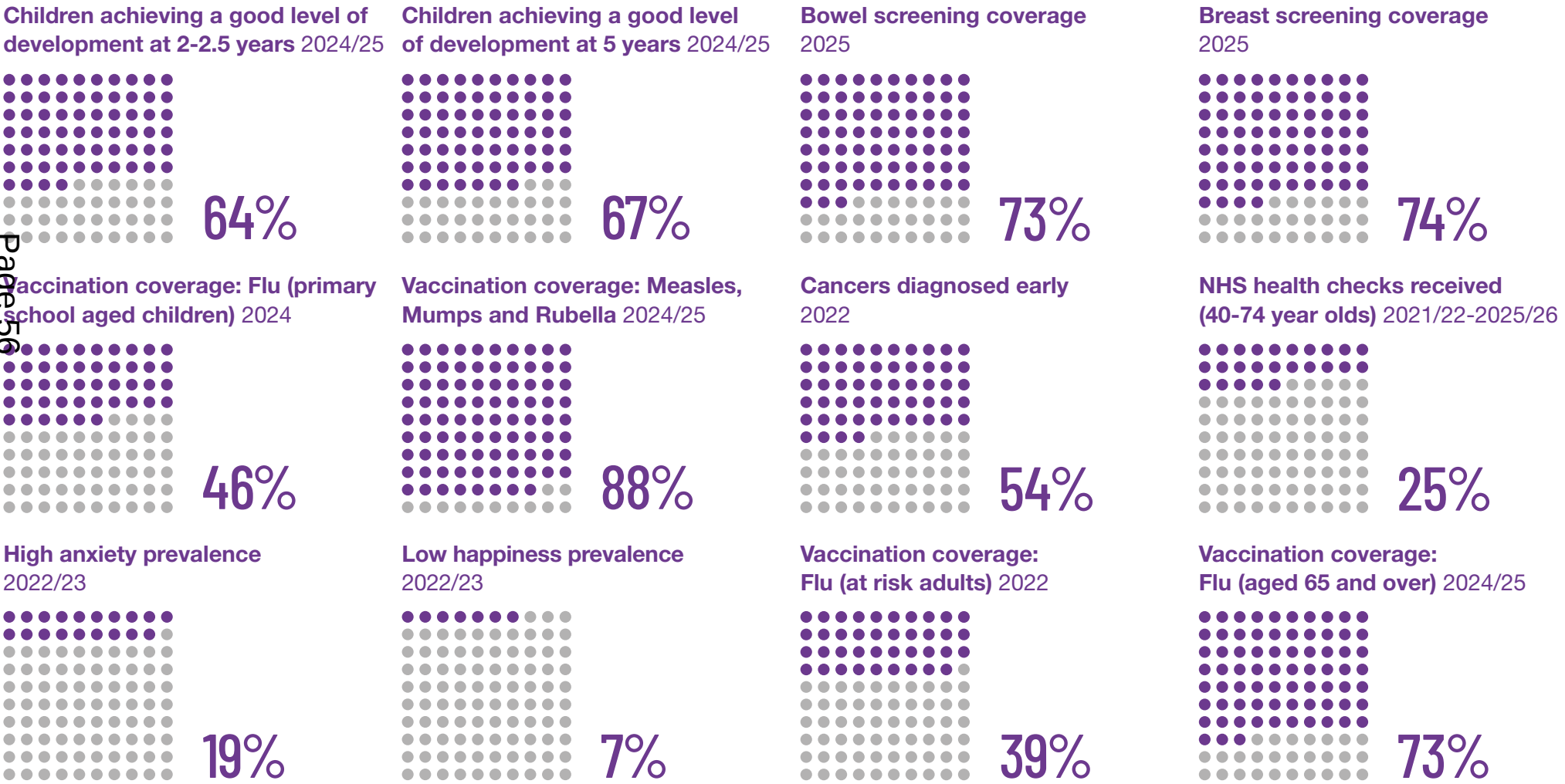
Healthy life expectancy at 65 2022-24



Source: Office for Health Improvement and Disparities: Health of the Region Explorer

Improving Outcomes: Starting well - living well - ageing well

The infographics on this page shows outcomes in Telford and Wrekin across the life course at a glance. The neighbourhood health shift gives the opportunity to improve local outcomes and reduce inequalities throughout resident's lives.



Further information on health and wellbeing outcomes in the borough can be found at [Telford & Wrekin Council | Telford and Wrekin Insight](#)

Moving from treating illness in hospital to developing places which focus on prevention, early intervention and support closer to home.

The NHS 10 Year Health Plan and the 2026 **Neighbourhood Health Framework** expect neighbourhoods to be increasingly recognised as the building blocks of health and care, bringing services together around the needs of local people and communities.

Neighbourhood health is a collective approach across the NHS, local authorities, voluntary and community organisations and local residents. The goal is to create more joined-up, person-centred support, strengthen community resilience, tackle health inequalities and reduce reliance on hospital-based care wherever appropriate.

Voluntary and community organisations and local authorities with the NHS are leaders of Health & Wellbeing Boards and Place Partnership – and are already rooted in communities, working alongside residents and leading the way on prevention. They have a clear understanding of community needs, are able to reach people who may not engage with traditional health services, to reduce loneliness and social isolation, support community resilience and provide practical support and community connections. As well as addressing the wider factors of health such as housing, employment, debt and social inclusion.

Place Partnerships, at local authority level, will be taking on responsibility for planning and improving healthcare for their local populations. Neighbourhood health plans need to be developed under the collective leaderships of the well-established Health & Wellbeing Boards which are hosted by each local authority.

What is Neighbourhood Health?

The Government expects a shift from reactive, hospital-focused care towards prevention, early intervention and support shaped around people, place and community strengths. Neighbourhood health brings services, communities and local partners together to work around the needs of the local population.

Prevention: Supporting people to stay well for longer through early intervention, management of risk factors and action on the wider determinants of health such as housing, employment and social connection.

Personalised Care: Designing support around individual needs, preferences and goals, recognising that people experience health and care differently.

Care Closer to Home: Delivering more services within neighbourhood and community settings, reducing reliance on hospital-based care where appropriate.

Community-Led Approaches: Working with communities as partners, recognising local assets, lived experience and the important role of voluntary and community organisations.

Place-Based: Organising services around the needs of local neighbourhoods, with decisions and resources increasingly shaped by local circumstances and priorities.

Together, these principles support a more preventative, person-centred and community-focused approach to improving health and reducing inequalities.

Healthy Neighbourhoods in Shropshire, Telford and Wrekin

The Telford & Wrekin Place Partnership – TWIPP is steering the delivery of neighbourhood health in the Borough. TWIPP includes partners from:

- local authority children and adults services and public health;
- the four Primary Care Networks;
- NHS leads from the Integrated Care Board (ICB) and the four local hospital and community trusts; and
- our Voluntary and Community Service Alliance.

On a broader footprint the NHS with TWIPP partners are collaborating with Shropshire – the Council and voluntary sector alliance, to develop the Healthy Neighbourhoods programme.

The programme aligns with the approach being taken more widely across Staffordshire and Stoke on Trent to accelerate the shift toward neighbourhood-based models of care that enable earlier intervention and proactive care closer to home to improve patient outcomes.

The development of Integrated Neighbourhood Teams through our Primary Care Networks is the key initial focus. Data on need and demand for healthcare is being used to target prevention and earlier treatment. Four population groups are priorities, and two of those are being worked on in 2026: people living with frailty and people with long-term conditions – such as cardiovascular disease.

Healthy Neighbourhoods vision

“Working together with our communities to create healthier, happier and well-connected neighbourhoods, where every resident has access to the care, support and opportunities they need to thrive.”

Priority Populations for Neighbourhood Health



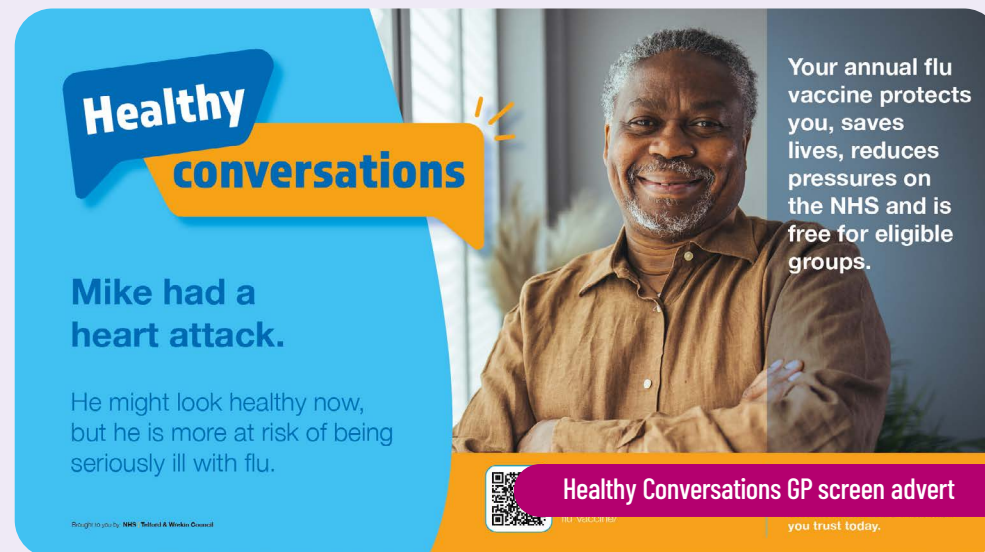
Accessible information on healthy lifestyles and self-care

- Healthy Conversations
- Digital Inclusion

What this means for residents

- Having clear, easy-to-understand information about healthy eating, physical activity, sleep, mental wellbeing, smoking cessation, alcohol use and preventing disease.
- Information being available in different formats and languages reflecting diversity so that everyone, including people with disabilities, low literacy or limited digital access can benefit.
- Knowing where to go for help, support and local services when needed.
- Feeling empowered to make informed choices about their health and wellbeing.
- Having the knowledge and skills to manage minor illnesses and long-term health conditions, to stay independent for longer.
- Ensuring everybody can access the same health information and opportunities, regardless of their background or circumstances

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Healthy Conversations

Why it is important

The quality and consistency of health information is crucial given widespread disinformation available online. Healthy Conversations programme and branding is being used to reach local residents who are traditionally more difficult to engage in health conversations. The aim is to help residents recognise themselves reflected in the campaign.

How we have been working differently

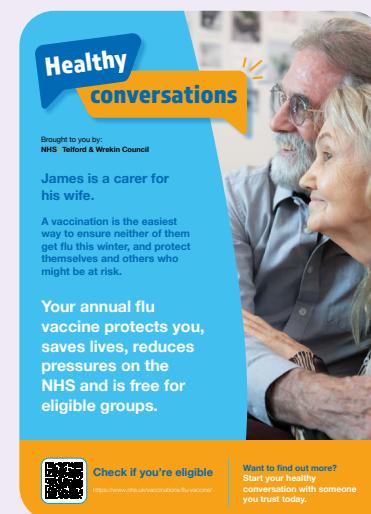
communications and marketing-led approach underpins Healthy Conversations. TWIPP collaboration has resulted in a move from generic health messaging, towards the use of imagery of real people in life situations. Vaccination uptake, an area of health inequalities which can be a challenging topic to shift attitudes on was chosen as the first campaign. The campaign directly targeted common vaccine myths and worked to bust them with clear, trusted information, while supporting frontline staff to feel confident having these conversations and to see the difference they can make to resident's lives.

Making an impact

The campaign generated whopping 3,836,830 impressions on social media, with 10,552 clicks, and an engagement rate of 5%. Our top-performing post of the campaign gave residents the opportunity to find out where to get their vaccine, which directly contributed to a strong turnout for jabs at local sessions.

Going further

Healthy Conversations is now a rolling campaign programme from TWIPP. Building on the initial success, Pharmacy First version of the campaign is being developed for the Autumn to improve access and continue breaking down barriers to vaccination.



Why is it important?

Digital inclusion is increasingly important as more services move online and adopt a digital-first approach. Without the access, skills, support and confidence to engage with digital technology, residents may not be able to access information, services and support and experience inequalities

How have we been working differently?

AbilityNet, a UK-based charity and Capgemini tech consultancy, have been working the Council and Voluntary and community organisations to help improve the digital skills of digitally excluded individuals, including disabled adults, older people. Live Well Hubs and community outreach programmes are offering targeted, accessible support sessions, based on intelligence of communities most at risk of digital exclusion. The programme includes accessible digital support and skills courses, NHS App support in GP practices, and outreach to unpaid carers, the deaf community and Age UK groups. Fraud and scam awareness sessions with local banks and building societies and West Midlands Cyber Crime Team are also offered.

Making an impact

Supporting and expanding digital inclusion is helping residents to participate in and benefit from a modern digital society, whatever their circumstances. Our community-based digital support offer has engaged over 800 residents to gain confidence and practical skills to access online services, information and support.

“Brilliant support and patience. I have hearing and visual impairment.”

“Listens to my query and explains to me how to put right with confidence.”

Going further

A community hub model is being developed to make digital support more accessible through voluntary, community and grassroots organisations, helping to create sustainable local support networks. Devices will be allocated to residents without suitable technology, and the Digital Champions Network will be expanded. Awareness of support and opportunities to build digital skills and confidence will become part of social value initiatives, widening partnership working further.



Digital Inclusion at a Council library

Integrated Neighbourhood Teams and Community Hubs

- Live Well Community Hubs
- Best Start in Life Family Hubs

What this means for residents

- Receiving more joined-up support with GPs, nurses, social workers, pharmacists, mental health practitioners and community organisations working together.
- Finding it easier to access help through a local community hub or single point of contact, rather than navigating multiple services
- Getting support earlier, helping to prevent problems from getting worse and reducing the need for hospital admissions.
- Having care and support that is tailored to their individual needs, strengths and circumstances.
- Better connections to community groups, activities and services that support health, wellbeing and independence.
- Increased focus on prevention, wellbeing and addressing wider factors which affect health, such as housing, employment, social isolation and financial wellbeing.
- Stronger community involvement, with local people helping to shape services and identify solutions to local challenges.



Live Well Community Hub at Hadley Community Centre



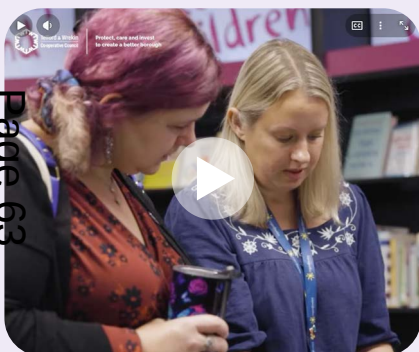
Damson Family Hub at Silver Threads Hall, Donnington

Live Well Community Hubs



Why it is important

Community hubs can bring together a range of services working together in a coordinated, integrated way in neighbourhoods. This means residents can access health, wellbeing, social care, financial support and community services in a familiar welcoming space as a one stop shop. Offering drop-in and appointment sessions in well known community venues provides support earlier and prevents issues from escalating.



[Click here to watch](#)

How we have been working differently

Live Well Hubs are currently running across the Borough in accessible community venues: Madeley, Sutton Hill, Woodside, Wellington, Donnington, Hadley, Leegomery and Malinslee. Built on the successful first Hub at the Anstice in Madeley, they integrate a wide range of services and support to improve health and wellbeing. Promotion through social media, videos and community storytelling has increased awareness and engagement. Live Hubs continue to evolve through co-production with residents, community groups and local partners, such as Town and Parish Councils.

Making an impact

Residents are receiving more holistic support through a single visit, often engaging with multiple services that they may not otherwise have accessed.

An elderly resident attended the Live Well Community Hub launch after receiving a text invitation from her GP practice. Initially seeking advice from Citizens Advice, discussions identified wider needs, including support for a terminal illness, maintaining independence at home and reducing social isolation. Through the Hub's joined-up approach, she received practical advice from the Independent Living Team on aids and equipment to support her independence in the kitchen. She was referred to a Social Prescriber for additional emotional and community support following multiple bereavements. Our resident was connected to local opportunities to reduce loneliness and an appointment was arranged through her GP surgery for ongoing support.

Going further

The Live Well Community Hub model is continuing to grow through stronger partnerships, greater community engagement and a focus on local needs and health inequalities. Expanding organisations involved, improving referrals and using resident feedback to enhance services, while ongoing platform development and promotion will increase awareness and access to support.

Best Start in Life Family Hubs



Why it is important

Life experiences from pregnancy through the early years shape children's health, development, learning and future opportunities. School readiness is measured by assessing children's level of development at aged 2-2.5 years and at 5 years old. Children with special educational needs and disabilities (SEND) and those who are disadvantaged have lower levels of school readiness. In Telford and Wrekin 67.3% of 5 year olds reached a good level of development in 2025. For 2-2.5 year olds in good level of development was 64.3%, which is lower than the England average.

How we have been working differently

The [Telford and Wrekin Best Start in Life Plan](#) sets out an ambitious partnership vision for improving early childhood outcomes. Our eight Best Start Family Hubs, delivered by the council and community and voluntary organisations such as CAB, Families in Telford and HomeStart, offer comprehensive information, advice and support for families across the Borough. Health Visitors have started to offer drop-in clinics for parents and babies from the Family Hubs and these sessions have become increasingly popular with families.

Making an impact

Drop In's are currently offered from 16 different locations across Telford and Wrekin, parents and carers can pop along, with no prior appointment or booking required to meet a Family Hubs Practitioner for support, signposting and advice around:

- Parenting and behaviour support
- Online and community safety
- Information on workshops and courses
- SEND support
- Domestic Abuse support
- Information about groups and support options in families' local communities



[Click here to watch](#)

Going further

The Best Start in Life Plan is delivering a range of initiatives to improve services and support for families. To improve joint working across the NHS and children's services a new School Readiness Integrated Neighbourhood Team is being created which will offer extra support, for example for infants with communication and language development challenges.



Damson Family Hub at Silver Threads Hall, Donnington

Person Centred Care and support

- Calm Cafe
- Social Prescribing

What this means for residents

- **Being listened to** and having their views, preferences and goals respected.
- **Having more choice and control** over decisions about their health, care and support.
- **Receiving care tailored to their individual needs**, rather than a one-size-fits-all approach.
- **Being treated as a whole person**, considering physical health, mental wellbeing, social circumstances, culture and personal strengths.
- **Working in partnership with professionals** to develop care plans and make decisions.
- **Receiving coordinated support** so services work together around the individual.
- **Getting help to stay independent** and maintain quality of life for as long as possible.
- **Support for self-care and self-management**, helping people build confidence to manage their own health and wellbeing.



Why it is important

Support in communities that strengthen social connections, reduce isolation and improve access to local assets can improve mental wellbeing. Young adulthood is a key stage for building independence and confidence. Accessible community-based support can strengthen resilience, social connections and self-help skills, helping young people with emotional and mental health challenges thrive and prevent issues from escalating into crisis.

How we have been working differently

The new 18-25 Calm Café has provided a youth-focused, open-access space where support is goal-focused, relationship-based and delivered in the community.

Alongside emotional wellbeing support, young adults can access practical help with housing, finances and other challenges affecting their mental health. Through consistent engagement and trusted relationships, staff can intervene early, prevent escalation and support young people to develop independence and resilience.

Making an impact

“For young people like XX, the Calm Café is not optional – it is essential, preventative, youth-focused, and it fills a gap that no other service currently provides.”

Going further

The Calm Café model has had very meaningful impact for young people, as it has for older adults, and these should be further developed and expanded.



18-25 Calm Cafe



For further information or to refer please contact:
talk2@telford-mind.co.uk or call 07434 869248



Social prescribing

Why it is important

Health is shaped by much more than health care alone. Factors such as loneliness, social isolation, poor housing, financial hardship, unemployment and low confidence can have a significant impact on both physical and mental wellbeing. Social prescribing recognises these wider determinants of health and provides a person-centred approach that helps individuals access practical support, community activities and local services that improve their health and quality of life. Across Telford and Wrekin, social prescribing helps residents address issues that cannot be resolved through clinical interventions alone.

How we have been working differently

Social prescribing services are embedded within Primary Care Networks, enabling closer collaboration between GP practices, voluntary and community organisations, local authority services and wider health partners. In Telford and Wrekin, services are delivered by Telford Mind in South East Telford PCN, Newport and Central PCN, and TELDOC. The approach focuses on understanding what matters to people and connecting them with support relating to mental health, housing, finances, employment, physical activity and community participation.



Telford



Making an impact

Through personalised support, our Social Prescribers are helping people identify solutions, build confidence and connect with community resources that support long-term wellbeing.

Rebuilding Confidence After Bereavement: Following the loss of a loved one, linking with our Social Prescribing support, allowed a service user to connect with local wellbeing and community groups, helping them rebuild confidence, develop new social connections and improve their wellbeing.

Tackling Financial Stress: A resident experiencing anxiety due to debt and financial difficulties was supported to access specialist financial advice services. With practical support in place, they reduced financial stress, felt more in control and were better able to focus on their health and wellbeing.

Supporting a Return to Community Life: Our Social Prescribing service helped a resident with a long-term health condition who had become isolated and lacked confidence to engage in community activities. Through personalised support, they were connected to local groups and are now attending regularly with increased confidence and independence.

Going further

Social prescribing will continue to support residents facing challenges such as loneliness, financial hardship and poor wellbeing. We will strengthen links between primary care, community organisations and local services to help more people access timely, personalised support that improves health, wellbeing and independence.

NHS prevention programmes

- Lung Cancer Screening
- Winter flu vaccination

What this means for residents

- **Support to stay healthy and well for longer**, rather than only receiving treatment when unwell.
- **Access to vaccinations and immunisations** to protect against serious diseases.
- **Screening programmes** that help identify conditions like cancer or cardiovascular disease at an early stage.
- **Health checks and risk assessments** to detect potential health problems before they become more serious.
- **Support to adopt healthier lifestyles**, including help with stopping smoking, healthy eating, physical activity and maintaining a healthy weight.
- **Earlier intervention** to reduce the risk of developing long-term conditions such as diabetes, heart disease and respiratory illnesses.
- **Improved wellbeing and independence**, helping people remain active and connected to their communities.
- **Reduced health inequalities**, by targeting support to those most at risk of poor health outcomes.



Lung Cancer Screening and Smoking



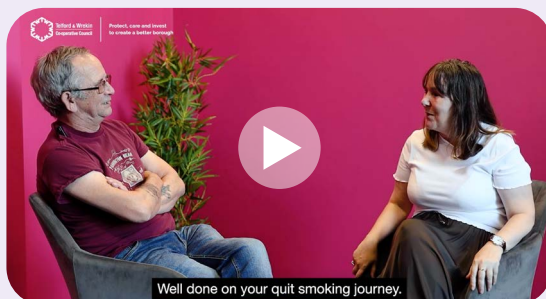
Why it is important

Quitting smoking at any age reduces the risk of smoking related illness or mortality and has both physical and mental health benefits. The NHS Lung Cancer Screening Programme offers lung health checks to people aged 55-74 with a history of smoking, helping identify lung cancer and other conditions earlier when treatment is often more effective.

How we have been working differently

With nine specialist Stop Smoking advisors, the team has more than doubled in size, with over 1000 referrals to the service over the last six months, and around half choosing to engage with stop smoking support.

Through close partnership working with NHS colleagues, primary care, acute services and community pharmacies, we've developed an integrated referral and nicotine replacement therapy (NRT) pathway, ensuring people receive timely, personalised support to quit smoking, including those who are housebound or face barriers to accessing services.



[Click here to watch](#)

Making an impact

Between January and July 2026, 549 people accessed Telford & Wrekin's Stop Smoking Service following a lung health check, with almost half successfully quitting smoking after four weeks. More than 1,000 people referred through the screening programme were contacted by the Stop Smoking Service in the first six months, with around half choosing to engage with support.

“Quitting together made it much easier than we ever thought it would be. The Lung Cancer Screening Programme gave us the push we needed, and the stop smoking support helped us stay on track. We both feel healthier, have more energy, are breathing better, and have more money in our pockets. Most importantly, we would not have done it without the help.”

Going further

We'll continue to strengthen partnerships across health and care services to support Telford and Wrekin's smoke free ambition. Alongside personalised behavioural support and access to evidence-based quit aids, we'll explore additional treatment pathways and improve access to support for groups at greatest risk of smoking-related harm and health inequalities.

Winter flu vaccination

Why it is important

Flu vaccination for people in certain age groups and with health conditions reduces the risk of serious illness and disruption in nurseries, schools and workplaces, as well as reducing pressure on NHS health services at a critical time of year.

How we have been working differently

To increase uptake of the flu vaccine in key groups ahead of families mixing at Christmas, the Council's Health Protection Team commissioned a local pharmacist to deliver flu vaccinations in two nurseries and a community centre. This required new dedicated work from partners across TWIPP.

Locations were selected to improve access for our most underserved communities, using working relationships developed during the pandemic. The locations, timings and the walk-in nature of the clinics was designed to make them as accessible as possible to people.

The clinics were arranged, advertised and promoted using established community relationships with schools, early years settings care homes, this built on the Healthy Conversations and vaccination education work.

Making an impact

This neighbourhood inequalities initiative aimed to improved access to vaccines in community settings outside of traditional NHS clinics. Provisional data for 2025/26 across the whole NHS flu programme shows vaccination coverage improved across all target groups in Telford and Wrekin compared to last year.



First community clinic at the Park Lane Centre in Woodside

Going further

The intention is to develop this work further over the upcoming flu season, using the experience gained to start earlier and reach a wider audience, all with a focus on reducing the impact of inequalities.

Focused prevention to reduce inequalities

- Get Yourself Active
- Move to Thrive
- Childhood immunisation

What this means for residents

- **Extra support for people and communities who face the greatest disadvantage** and health challenges, whatever the reason.
- **Earlier help to prevent illness**, especially for those at higher risk of poor health.
- **Improved access to services**, ensuring people can get the care, advice and support they need regardless of where they live or their circumstances.
- **Targeted programmes** such as smoking cessation, weight management, vaccination, screening and mental wellbeing support for those who would benefit most.
- **Reducing unfair differences in health outcomes** between different communities and population groups.
- **Helping everyone have the same opportunity to live a long, healthy life.**



Move to Thrive

Why it is important

Being active can support physical health, mental wellbeing, independence and social connection. Yet opportunities to move are not always equally accessible for Disabled people.

How we have been working differently

Get Yourself Active Local brings together Disability Rights UK, the Energize partnership, the council and VCSE organisations with carers and people with experience of disability to create a more inclusive environment where movement is considered part of everyday support and wellbeing, rather than an optional extra. Rather than standalone initiatives, a collaborative approach has developed across three strands:

- **Training health and social care workers** to confidently encourage movement;
- **Embedding physical activity** into everyday social work practice through Moving Social Work training;
- **Co-production** working directly with disabled people to shape activities and provider offers.

Making an impact

This collaborative approach through TWIPP is helping more people to be active in ways that suit their individual needs and preferences.

- 123 Social work professionals trained in Telford and Wrekin, with strong leadership buy-in helping embed learning into everyday practice.

- Co-production training has reached 16 physical activity providers, with 24 more registered across Shropshire Telford and Wrekin.

“It’s been a privilege to work with Disability Rights UK, our local partners, and people with lived experience to explore how we can shift the narrative around movement. This requires all of us to work together to build a system where movement can be embedded into the way we live, work, and deliver services.”

Michelle Pullen, Communities, Health and Social Care Programme Manager, Energize STW

Going further

By continuing to bring together councils, VCSE organisations, health and social care professionals, activity providers and people with lived experience, partners are sharing learning, building understanding and maintaining momentum towards a common goal: creating more opportunities for disabled people to be active in ways that suit them.

The Council is continuing to actively seek new products, initiatives and other ways to support and encourage inactive residents to access our leisure facilities and green spaces, including with Energize and partners as part of the Sport England Place Expansion Programme.



Why it is important

People living with dementia and their carers can benefit greatly from opportunities to stay active, connected and engaged within their communities. However, some residents, particularly those who are housebound or living with early onset dementia, can face additional barriers to accessing suitable support and activities.

How we have been working differently

Move to Thrive, funded by the National Lottery Community Fund, provides research-based, person-centred physical activity opportunities that support wellbeing, maintain independence and help people continue doing the things that matter to them.

Age UK Shropshire Telford & Wrekin, the Alzheimer's Society, Community Resource, Adult Social Care and other local organisations have been working together to deliver twice-weekly community sessions alongside tailored support for residents who are unable to attend group activities. There is an at-home service for housebound residents and one-to-one support for people with early onset dementia, developed in response to feedback from participants and partners. Support workers and trained volunteers help people access sessions and remain connected to local opportunities.



Move to Thrive session

Making an impact

In year one:

- 102 group sessions delivered, averaging 6.4 people living with dementia per session (437 attendances in total).
- Three tailored at-home movement sessions delivered for housebound residents.
- A 10-week one-to-one programme delivered for a person living with early onset dementia.
- 12 training courses reaching 104 professionals, volunteers and carers.
- A before-and-after mood survey showed positive improvements across all measured areas, particularly confidence, self-esteem and overall wellbeing.

“ Since coming on a Tuesday, [Stan] has grown in confidence and made friends... I am worried that if the sessions stop he will become a bit of a recluse again. ”

Pat, whose husband Stan attends with early-stage Parkinson's

Going further

Building on the success of its first year, Move to Thrive is continuing to develop dementia-friendly physical activity opportunities across the Borough. Love to Move instructors, including trained volunteers will extend the offer, so more people will stay active, connected and independent.

Childhood immunisation

Why it is important

Vaccination is a key prevention initiative and inequalities are often caused by vaccine hesitancy which includes:

- **Confidence:** Level of trust in vaccine and healthcare professionals
- **Complacency:** Perceived lack of need or value for vaccine
- **Convenience:** Barriers to accessing appointments

Working within our communities and building relationships, using clear messaging, and training health care colleagues to improve the way they communicate about vaccination can all improve vaccine uptake.

How we have been working differently

A targeted project has been designed to increase MMR and HPV vaccination uptake in young people, where levels of uptake are lower in our most underserved and disadvantaged communities.

Every professional and volunteer that parents encounter is confident to discuss vaccines. We visited schools and community groups to educate then offer a vaccination opportunity.

We worked closely with our school aged immunisation partners, education colleagues, family hub colleagues, local cancer prevention charity Lingen Davies, community and faith leaders.

We have listened to our young people, teachers and community leaders facilitating education sessions and postcode specific Facebook promotion

with information in formats that are accessible. The project has been given longevity through the Making Every Contact Count principle building confidence in professionals to have healthy conversations and work in partnership.



[Click here to watch](#)

Making an impact

So far 38 targeted education sessions have taken place communicating with over 3,000+ students, 250 professional interactions, and over 130 direct family conversations, with 75 immunisations given.

“Thank you for an engaging and expertly presented assembly. We really valued your time, enthusiasm and expertise.”

Head of Year 8, Telford Langley School

Going further

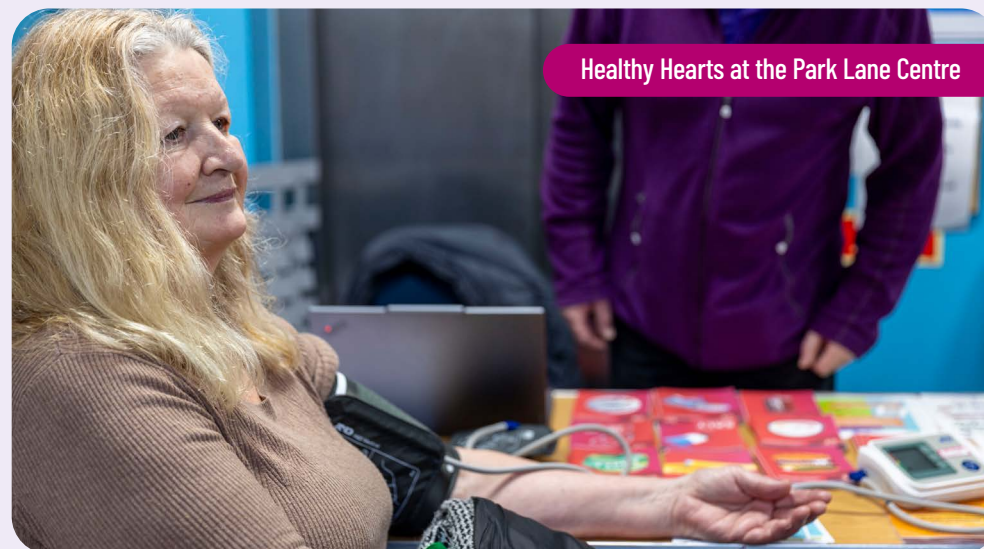
An ongoing partnership programme is being developed to sustain this important initiative. Reaching the needs and preferences of underserved communities will allow information to be shared in formats and language they relate to, from trusted voices. Students in one school alone spans 43 languages, so we are co-producing visual and easy-read resources with Year 8 and sixth form students to close this gap.

Early detection and treatment of Long Term Conditions

- Falls Prevention
- Healthy Hearts

What this means for residents

- **Identifying their health problems sooner**, often before symptoms become severe.
- **Quicker access to tests, diagnosis and treatment**, helping to prevent conditions from worsening.
- **Better health outcomes**, as many conditions can be managed more effectively when found early.
- **More support to stay independent and maintain quality of life.**
- **Reducing the risk of complications**, hospital admissions and avoidable ill health.
- **Helping people live well with long-term conditions** through ongoing care and support.



Healthy Hearts at the Park Lane Centre



Healthy Hearts at the Park Lane Centre

Why it is important

As the Borough ages, falls are a leading cause of injury, hospital admission and loss of independence for older adults. Across Shropshire, Telford and Wrekin, more than 18,300 people attended hospital following a fall in the last six months. Falls can have a significant impact on confidence, mobility and wellbeing, often increasing the need for health and social care support.

Integrated working can help across residents stay active, independent and connected through falls prevention and strength and balance programmes.

How we have been working differently

Public Health, Adult Social Care, Primary Care, Community Services and wider health partners have been using local intelligence. In partnership we've expanded falls prevention support to provide accessible, person-centred options for residents across community and care settings.

- **Fit4all:** Our established falls prevention programme, taking a hybrid approach to engage residents in both community and care settings.
- **Moving On:** Community classes are helping residents to continue exercising after Fit4all, supporting long-term physical activity and independence.
- **Broader access:** Weekly online exercise sessions for care homes and extra care settings are now being offered so residents unable to attend community venues can access falls prevention.

Making an impact

Our falls prevention offer is growing fast, with over 3,500 attendances this year, up 1,502 on last year. Community Moving On classes and Digital Online sessions are helping residents like rebuild strength, confidence and independence, while over 1,100 digital attendances reached our most frail residents in care homes.

“C would fall quite regularly, almost weekly. C now has had only a few falls over the last six months and has told me that he feels stronger.”

Going further

A Falls Prevention Pathway, which matches individuals to the right support is being developed, including a digital at-home offer, and physical activity conversations are being embedded into routine assessments to identify support earlier. An infra-red thermal imaging pilot project in care homes, which detects falls and provides insights around an individual's behaviours and habits to prevent falls has reduced conveyances to hospital by over 80%, and the use of the technology is being extended for a further 12 months.



Fit4All session

Healthy Hearts



Why it is important

South East Telford includes neighbourhoods in the most deprived 10% nationally and rates of life expectancy are lower. The Healthy Hearts Pilot, developed with South East Telford Primary Care Network, brought preventative health services directly into communities to support earlier identification of cardiovascular risk. Almost one in four residents receiving an NHS Health Check were found to have an elevated risk of developing cardiovascular disease, showing the value of reaching residents who may not otherwise engage with preventative healthcare.

How we have been working differently

Using dedicated outreach buses, Healthy Hearts brought NHS Health Checks delivered by GP practices and the Council Healthy Lifestyles Service alongside community organisations into places where residents live and socialise. It focused on building relationships with men and communities experiencing higher disadvantage, offering health checks at community events to make access feel welcoming rather than too health-focussed or clinical.

Making an impact

The pilot delivered 283 NHS Health Checks and 369 additional Blood Pressure and Mini Health Checks, through 78 community events across 16 locations. 24% of participants had a QRisk score of 10% or above, enabling earlier intervention. Promotion reached over 137,000 residents, and 26% of participants accessed the service simply by passing the bus.

“ I would not have booked a GP appointment myself and only attended because I saw the bus advertised on Facebook. ”

Going further

Learning from the Healthy Hearts is shaping future cardiovascular prevention and outreach work, focused on extending neighbourhood engagement with men and minority ethnic communities, strengthening referral pathways into Healthy Lifestyle Services, and adopting a blended drop-in and appointment model to reduce inequalities across the Borough.



Healthy Hearts at the Park Lane Centre

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Telford & Wrekin
Co-operative Council

Protect, care and invest
to create a better borough

Borough of Telford and Wrekin
Health and Wellbeing Board
Thursday 17 September 2026
Smokefree Update

Cabinet Member:	Cllr Kelly Middleton - Cabinet Member for Public Health and Unlocking Opportunities for All
Lead Director:	Helen Onions - Director of Public Health
Service Area:	Health & Wellbeing
Report Author:	Sonya Durkin-Jones - Public Health Programme Officer
Officer Contact Details:	Tel: 01952 381800 Email: sonya.durkinjones@telford.gov.uk
Wards Affected:	All Wards
Key Decision:	Not Key Decision
Forward Plan:	Not applicable
Report considered by:	H&WB 17.09.2026

1. Recommendations

- 1.1 The Health & Wellbeing Board is requested to endorse and support the Smokefree Telford & Wrekin Delivery Plan, produced in response to the recommendations of the 2025 Annual Report of the Director of Public Health.

2. Purpose of Report

- 2.1. The Health & Wellbeing Board supported the 2025 Annual Public Health Report findings and approved the recommendations to develop a comprehensive plan to deliver Smokefree Telford & Wrekin ambitions.
- 2.2. This report provides an update on the Smokefree Delivery Plan and the work being progressed across council teams and partners on the commitments, as well as an update on national legislative changes aimed at reducing smoking and vaping-related harm.
- 2.3. The key updates in this report are:

Smokefree Update

- Smoking prevalence figures and the number of quitters
- An introduction to the Smokefree Telford & Wrekin Delivery Plan
- A summary of achievements aligned to our Smokefree commitments
- An overview of recent National Legislation - The Tobacco & Vapes Act 2026.

3. Background

- 3.1 Tobacco-related harm is the single largest driver of reduced life expectancy due to the increased risk of a wide range of chronic diseases. Smoking is a key cause of health inequalities given the well-known link with social disadvantage. Despite decades of public awareness campaigns and regulation, smoking remains one of our most significant public health challenges.
- 3.2 Vaping is less harmful than smoking tobacco and can help people to quit, but the increase in vaping among children and young people who have never smoked is a major concern.
- 3.3 The UK Government's primary public health goal is to make England "Smokefree" by 2030. This ambition is officially defined as reducing the proportion of adult smokers to 5% or less of the population. To enable and address this goal, the government has set goals across NHS and local government services that aim to support the nation in quitting smoking.
- 3.4 The 2025 public health report described the key elements of a Smokefree ambition and proposed the development of a comprehensive plan to deliver Smokefree Telford & Wrekin across Health & Wellbeing Board partners, through the following commitments:
- Reduce the number of people who smoke, by supporting more people to quit in community and NHS settings.
 - Protect children and young people against smoking, vaping (and other nicotine products).
 - Create more Smokefree places to protect children and vulnerable people from second-hand smoke.
 - Enhance enforcement and tackling of illicit tobacco and vapes.

4. Key updates

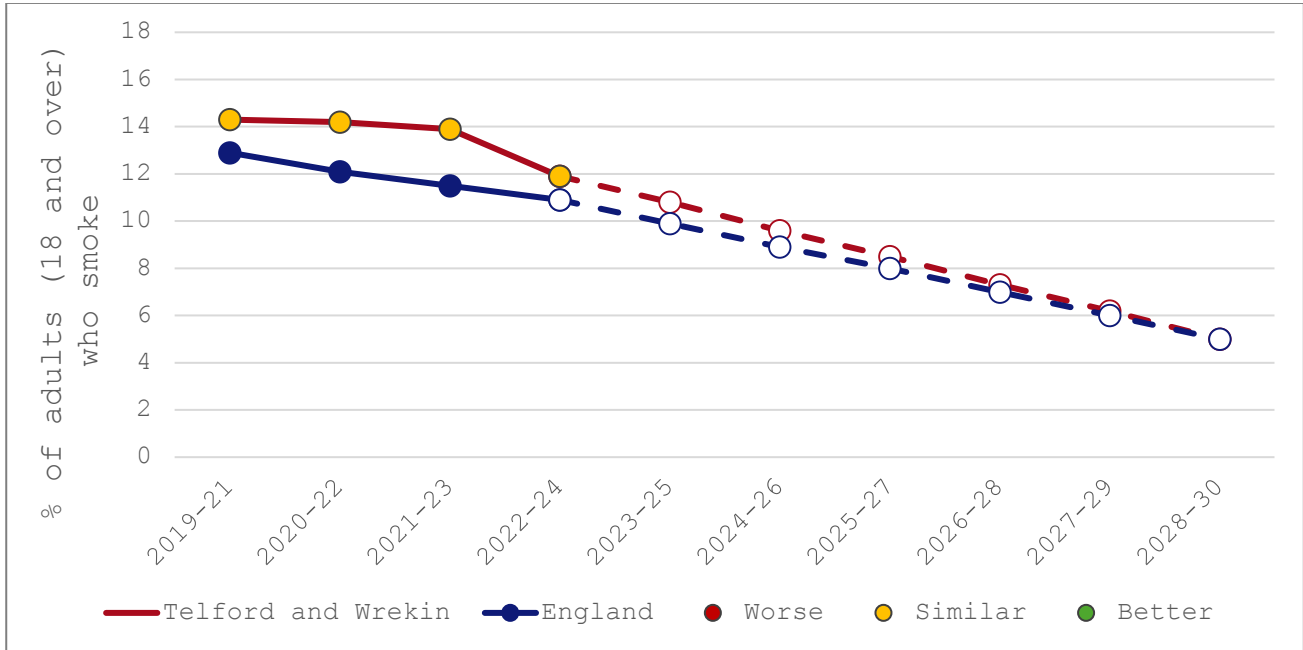
4.1 Overview of local smoking picture

- 4.1.1 The adult smoking prevalence figure reported in the annual public health report last September was 14.5% (based on 2023 data). The figure was derived from the Annual Population Survey, and this data is now being published on a 3-year-rolling average basis due to the sample size. The latest published figure for smoking prevalence for the period 2022-2024 for Telford & Wrekin is 11.9%, which is lower

Smokefree Update

than the 13.9% figure for the 3-year-period 2021-23. It is expected given the reducing trend since 2019, that Telford & Wrekin will reach the Government's Smokefree target of 5% by the end of the decade. (Figure 1)

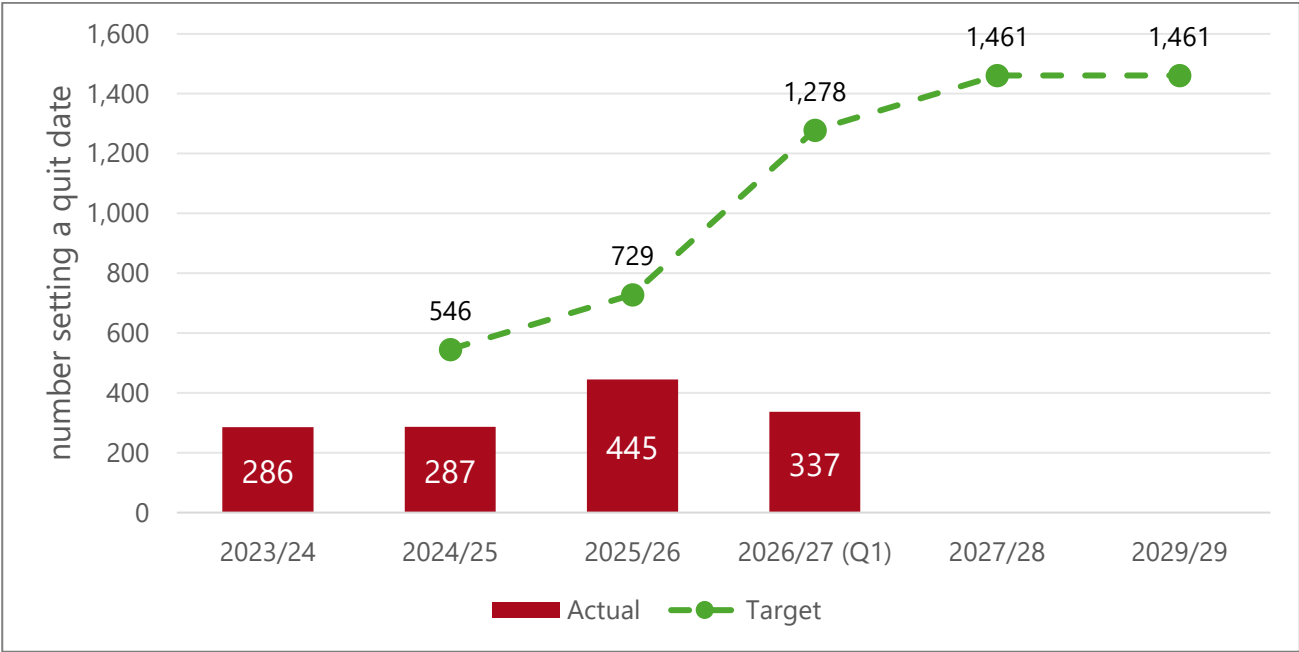
Figure 1 Smoking prevalence in adults (aged 18 and over) and projection to the Smokefree ambition in 2030



Source: [Public Health Outcomes Framework - Data | Fingertips | Department of Health and Social Care](#)

4.1.2 The Council's Healthy Lifestyles Team has recruited further Stop Smoking Advisors to increase the number of smokers in Telford & Wrekin setting a quit date, in line with targets set by the Office of Health Improvement & Disparities. The Team supported 445 smokers to set a quit date during 2025/26, compared to 287 in the previous year, and the number setting a date during April-June 2026 exceeded the total number seen in 2024/25. (Figure 2)

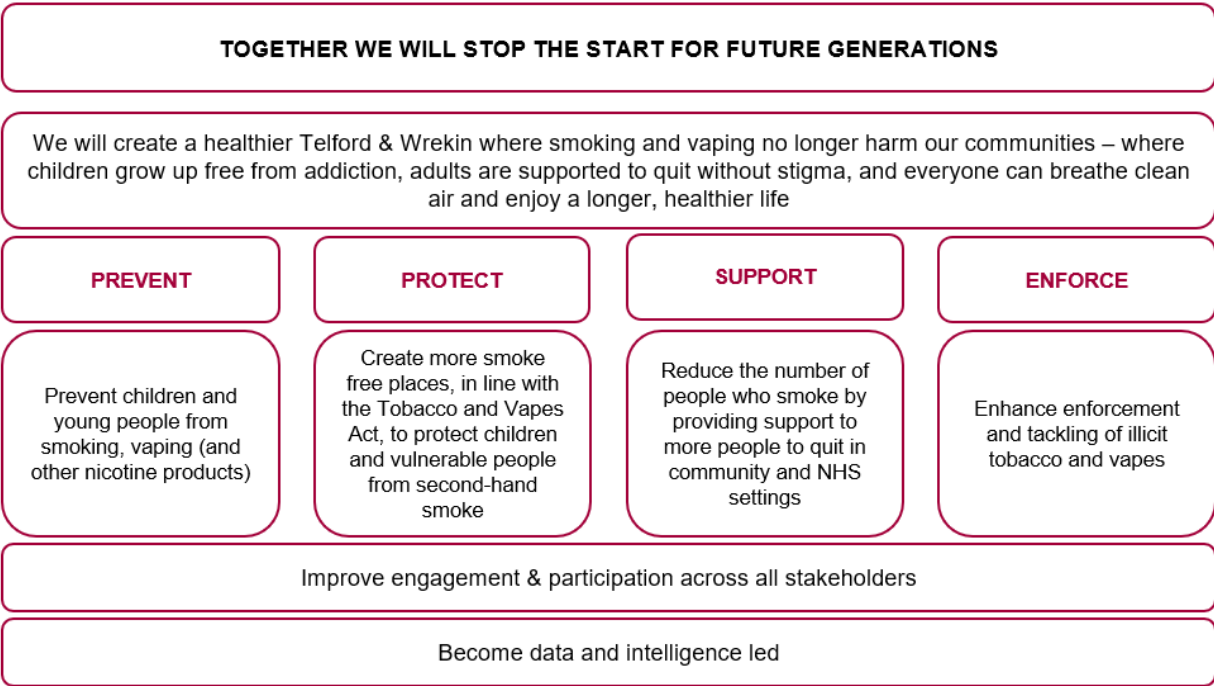
Figure 2 Number of smokers setting a quit date and targets



4.1.3 A total of 226 clients who were supported by our Stop Smoking Advisors during 2025/26 remained quit after 4 weeks. The 4-week-quit rate for this period was 54% of those setting a date, which is slightly higher than the national average rate for England (53%).

4.2 Smokefree Delivery Plan Overview

4.2.1 The Smokefree Delivery Plan framework which has been developed with HWB partners over the past year, is based on the four commitments set out in the 2025 annual report, which are captured under the following headings: Prevent, Protect, Support and Enforce.



4.2.2 Given that smoking is a complex social and health issue, becoming Smokefree has been progressing through focussed efforts across multiple teams across the Council, in the NHS and our community and voluntary sector partners. This cross-system approach has included:

- Engagement of system partners across Shropshire Telford & Wrekin
- Assessment of gaps and barriers in existing services and pathways
- Outcomes of the tobacco workshop with partners from the NHS, social care, Public Health, the voluntary and community sector, trading standards and Shropshire Fire and Rescue Service
- Consideration of the upcoming provisions of the Tobacco and Vapes Act 2026.

4.2.3 Improving engagement and participation across all stakeholders is an important strand of the delivery plan. The newly appointed Public Health Programme Officer for Smokefree is increasing internal and external collaboration and has become chair of the Shropshire Telford & Wrekin Tobacco Steering Group, which includes key NHS colleagues.

4.3 Delivery on our Smokefree Commitments

4.3.1 The following sections summarise highlights delivered across our Smokefree plan in the past 12 months. This includes work to take on the responsibilities within the new Tobacco & Vapes Act 2026.

4.3.2 PREVENT - Prevent children and young people from smoking, vaping (and other nicotine products):

- Public Health Commissioning Team collaboration with the School Nursing Service embedded in schools and colleges. The Personal, Health and Social Education curriculum has been enhanced with smoking and vaping awareness sessions led by our school nurses in 56 primary schools and 12 secondary schools, delivering smoking prevention advice and secondary school drop-ins.
- The Children & Young People's Vaping position statement, approved by HWB in September 2023, is currently being refreshed and to align with the new Tobacco & Vapes Act and corporate smoking policies update.
- Telford & Wrekin Crucial Crew community safety roadshow, which is the longest running in the country, offered a broad awareness programme aimed at year 6 pupils in July, involving over 1,380 pupils in 2026.
- Guidance has been issued to schools on asthma policies and 18 of our schools (24%) are now accredited in the Asthma Friendly schools programme, which requires schools to implement and strictly enforce comprehensive, smoke-free site policies that prohibit both smoking and vaping.

Smokefree Update

- Healthy Telford online includes links and resources to encourage smokers to seek support people on their journey – including our latest advice and awareness campaign material such as Crush the Habit.
- Shropshire Fire and Rescue Service have committed to including a quit smoking referral pathway as part of their home fire safety visits.

4.3.3 PROTECT - Create more Smokefree places, in line with the Tobacco & Vapes Act 2026, to protect children and vulnerable people from second hand smoke:

- The Health Protection Team lead the approach to Smokefree and have also participated in the Government consultation on aspects of the Act intended to expand mandatory Smokefree places into areas such as school playgrounds and hospital grounds.
- The Healthy Lifestyles team is working with local employers on the Healthy Telford Partner Programme, to encourage Smokefree areas in workplaces and raise awareness of our stop smoking services.

4.3.4 SUPPORT - Reduce the number of people who smoke by providing support to more people to quit in community and NHS settings:

- The Healthy Lifestyles Team have successfully recruited 5 new Stop Smoking Advisors with diverse backgrounds and experience to support people across our communities to access the service and reduce inequalities.
- The number of face-to-face clinics offered at in our 8 Live Well Hubs has expanded and the Healthy Hearts/Here to Help bus includes smoking prevention advice.
- Collaboration with the NHS Lung Cancer Screening Programme has increased referrals into the service. Since January 2026, over 1000 referrals have been received by this pathway and 50% have set a quit date
- The Crush the Habit campaign supports self-referrals into the service and continues to successfully engage smokers with over 2.5 million impressions, more than 109,000 interactions and 16,500 click through leading individuals to commit to quit. Paid advertising took place over spring/ summer 2026 and the initial response has been positive across social media, bus backs, and local news outlets - the Shropshire Star and Telford Journal.
- The Shrewsbury & Telford Hospital Acute Tobacco Dependency Treatment Service uses an early intervention model, and smoking cessation screening is a mandatory assessment. The Maternity Smoking Cessation Service is well

Smokefree Update

embedded and the smoking at time of delivery is now 4.8% across Shropshire Telford & Wrekin, which is lower than the Government target of 6% (for SATOD) for the first time.

- Family Nurses deliver Health Visiting as a more intense, targeted intervention to young, first-time mums and they deliver effective health education interventions, including the use of carbon monoxide monitoring to support smoking cessation. This has contributed to a **100% rate of non-smokers at programme graduation**, highlighting the positive impact of targeted, evidence-based support.
- Midlands Partnership Foundation Trust support patients admitted for mental health problems with the offer of vapes to support tobacco withdrawal, and in 2025/2026 over 30% of mental health inpatients were offered this Swap to Stop support.

4.3.5 ENFORCE - Enhance enforcement and tackling of illicit tobacco and vapes:

- The Council's Trading Standards Team lead work on enforcement and the Tobacco & Vapes Act 2026 will introduce retail licensing responsibilities for the Licensing Team. The Act will also expand the Smokefree place enforcement requirements which lie with the Health Protection Team, and the current arrangements are being reviewed in light of the new provisions expected.
- In 2025/26, to July 2026, 4 underage vape sales have been detected during intelligence led visits – one case resulting in the successful prosecution of the seller, a fine and costs awarded to the council.
- In addition to this, 16,560 (820 packs) cigarettes and 11.5 kg of hand rolling tobacco have been seized from 6 premises, with the price of a pack of 20 illegal cigarettes ranging from £4.50 to £7.50.
- Public Health witness statements are being used for the first time to support Trading Standard prosecutions, and positive case studies are being collated for learning internally, but also for sharing externally.
- Trading Standards have continued their collaborative enforcement work with the Police to deter and detect underage sales and to interrupt the supply of illicit tobacco and nicotine products. This includes working with store front landlords to stop illicit supplies moving location after detection.

4.4 The UK Tobacco & Vapes Act 2026 update

4.4.1 The Act received Royal Assent on 29th April 2026 and this landmark legislation aims to create a "smoke-free generation" by phasing out tobacco sales to younger people and tightening regulations on access to tobacco and vaping. The main elements of the Act include:

- **Generation Ban Implementation:** It will be illegal to sell tobacco products to anyone born on or after 1 January 2009, with the law taking effect from 1 January 2027.
- **Retail Changes:** A mandatory licensing scheme for retailers selling tobacco and vape products. New "on-the-spot" fines can be issued by Trading Standards for selling tobacco or vapes to under-18s.
- **Smoke-Free Places:** Extended smoke-free and vape-free areas, including banning smoking/vaping in outdoor areas such as playgrounds and near school/hospital entrances.
- **Vape Regulations:** Restrictions on vaping advertising, packaging, and flavours are included to curb youth uptake.

4.4.2 The Tobacco and Vapes Act 2026, introduces significant new responsibilities for Smokefree related services across local authorities, and preparations for these new provisions in the Council include the following:

- The Trading Standards Team is planning for major changes that will be necessary under the Act, including: the use of Fixed Penalty Notices, enforcement of the generational tobacco ban and enhanced illicit product enforcement due to new duties to curb the sale of illegal, non-compliant, or unregulated tobacco and vapes, especially those appealing to children.
- The Licensing Team is preparing for a new mandatory retail licensing scheme and anticipating a retail licensing system and enforcement changes.
- The Environmental Health Team is reviewing existing Smokefree area enforcement activities in line with the new provisions within the Act.
- The Public Health Team is preparing for expansion of service needs due to the inclusion of the generational tobacco ban, changes to vape restrictions, in school & college awareness campaigns with new prevention and support measure to include vaping.

5. Alternative Options

5.1 Not Applicable

6. Key Risks

- 6.1 Lack of local comprehensive collaboration on the Smokefree agenda would likely mean smoking prevalence in our borough reduces more slowly than other parts of the country, and as such the harms and impact highlighted in the public health report would persist.

7. Council Priorities

- 7.1 Every child, young person and adult lives well in their community.

8. Financial Implications

- 8.1 The ongoing work and delivery plan presented within this report will be delivered by the Council working with Health and Voluntary Sector partner organisations and will be subject to resources available at a partnership level.
- 8.2 The Council has a budget funded by Public Health grant of £555k in 2026/27 to deliver local stop smoking initiatives and interventions, and a further £106k to deliver other areas of work i.e. communications & publicity, etc. Therefore, a total of £661k is available in 2026/7 to deliver the Council's work and services set out in the delivery plan working in collaboration with other organisations.
- 8.3 The Government directed grant to fund local smoking cessation services and support (known as Local Stop Smoking services & support grant) is now included as part of the overall Public Health grant from 2026/27 and is ongoing. It remains a ring-fenced grant allocation and must be spent in line with grant conditions.
- 8.4 The Council will engage in the design and implementation of the multi-agency strategy within existing resources, however, should there be additional resources required for the Council to deliver it's part then this would be considered as part of the usual Governance process for setting the Medium-term financial strategy.

9. Legal and HR Implications

- 9.1 The Director of Public Health has a statutory duty to prepare an annual report on the health of the people in the local authority under Section 73B (5) of the National Health Service Act 2006 (as amended). The report must be published by the local authority under Section 73B (6). The attached Delivery Plan and T&W Service Update is part of the ongoing work to enable the 2025 Smokefree strategy within the 2025 report.

10. Ward Implications

10.1 Borough-wide impact, but particularly wards with highest levels socio-economic deprivation.

11. Health, Social and Economic Implications

11.1 Smoking increases the risks of lung cancer, and other cancers, heart disease, stroke, respiratory disease and dementia. Half of the life expectancy gap between the most deprived and most affluent communities - 8.8 years for males and 6.4 year for females in Telford & Wrekin, are due to smoking. Second hand smoke exposure affects babies, children and young people, and vulnerable adults.

11.2 Smoking places significant financial costs burdens on statutory services, the economy and society more broadly, due to loss of productivity, unemployment, health and social care, as well as the impact of fires.

12. Equality and Diversity Implications

12.1 Smoking has significant implications for equality and diversity, particularly in how it reinforces health and social inequalities. It disproportionately affects individuals from disadvantaged backgrounds, including those with lower incomes, certain ethnic minorities, LGBTQ+ communities, and people with mental health conditions. These groups often face higher smoking rates due to targeted marketing, social stressors, and limited access to cessation support.

12.2 In the workplace, smoking policies that lack inclusivity can further marginalise these individuals, especially if they do not provide equitable access to quitting resources or accommodate cultural and social needs. Addressing smoking through an equality and diversity lens means recognising these disparities to ensure that local partnership action is inclusive, supportive, and tailored to the needs of vulnerable populations.

13. Climate Change, Biodiversity and Environmental Implications

13.1 Smoking has a considerable impact on climate change and the environment globally, contributing to: deforestation, pollution, and resource depletion. Tobacco farming results in the loss of 100,000s of hectares of forest each year, reducing biodiversity and carbon absorption. Farming consumes vast amounts of water and depletes soil through heavy pesticide use. The Tobacco industry emits millions of tonnes of CO₂ annually through cultivation, manufacturing, and transportation processes. Cigarette butts, among the most littered items globally, release toxic chemicals and microplastics into ecosystems. The rise of disposable e-cigarettes has further added to electronic and plastic waste. Environmental harms are disproportionately felt in low-middle income countries where tobacco is grown.

14. Background Papers

- HWB September 2025 - Annual Public Health Report 2025 Towards a Smokefree Future

15. Appendices

A Telford & Wrekin Smokefree Future Delivery Plan 2026 - 2028

16. Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Director	30/07/2026	30/07/2026	HO
Legal	30/07/2026	18/08/2026	ON
Finance	30/07/2026	08/09/2026	RP

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Telford and Wrekin Smokefree Delivery Plan

2026-2028



TELFORD & WREKIN HAS SET A BOLD AMBITION TO BECOME SMOKEFREE*

*Smokefree being defined by the Government target of less than 5% or fewer adults smoke

Overview of the Smokefree Delivery Plan

Together we will stop the start for future generations

We will create a healthier Telford and Wrekin where smoking and vaping no longer harm our communities – where children grow up free from addiction, adults are supported to quit without stigma, and everyone can breathe clean air and enjoy a longer, healthier life

Prevent

Prevent children and young people from smoking, vaping (and other nicotine products)

Protect

Create more smokefree places, in line with the Tobacco and Vapes Act, to protect children and vulnerable people from second-hand smoke

Support

Reduce the number of people who smoke by providing support to more people to quit in community and NHS settings

Enforce

Enhance enforcement and tackling of illicit tobacco and vapes

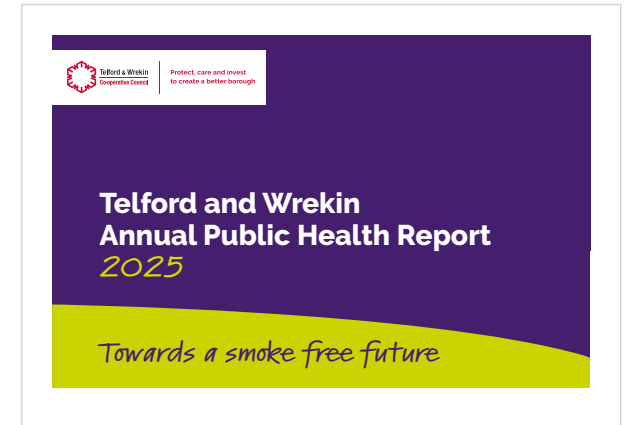
Improve engagement and participation across all stakeholders

Become data and intelligence led

Background and contents

At the September 2025 Health & Wellbeing Board meeting, the Director of Public Health received support and approval for the development of a comprehensive plan to deliver Smokefree Telford and Wrekin ambitions across Health & Wellbeing Board partners.

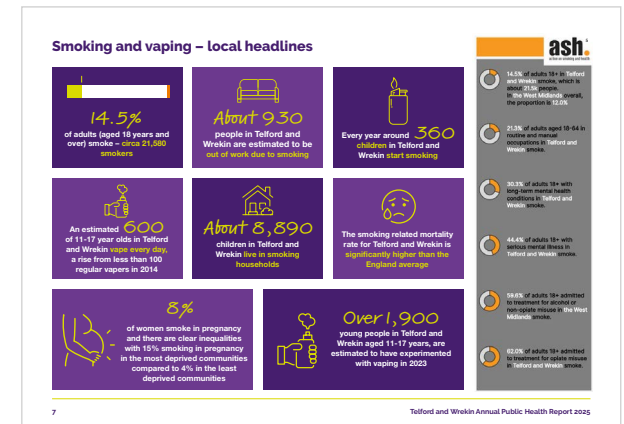
The report introduced the Telford and Wrekin Smokefree strategy and proposed development of a comprehensive plan to deliver Smokefree Telford and Wrekin ambitions across Health & Wellbeing Board partners.



This delivery plan updates associated work being undertaken across Telford and Wrekin since September 2025, including an overview of the delivery plan, as well as an update on national legislative changes that will impact our work to reduce the impact of smoking and vaping-related harm in the borough.

The key elements in this update are:

- smoking prevalence figures and the number of quitters;
- an introduction to the Smokefree Telford and Wrekin Delivery Plan;
- a summary of achievements aligned to our smoke free commitments; and
- an overview of recent National Legislation – The Tobacco and Vapes Act 2026.



Together we will stop the start

Smoking is a complex social and health issue, and this improvement is the result of focussed efforts across many Council teams. The services that support our smoke-free future have traditionally focussed on smoking cessation or interrupting the supply of illicit tobacco and nicotine products. However, with the upcoming provisions of the Tobacco and Vapes Act 2026, services are being reviewed and enhanced across Telford and Wrekin. According to ASH, every smoker that quits, saves an average of £2338 a year, alongside significant health benefits.

The adult smoking prevalence figure reported in the annual public health report last September was 14.5% (based on 2023 data). The figure was derived from the Annual Population Survey, and this data is now being published on a 3-year-rolling average basis due to the sample size. The latest published figure for smoking prevalence for the period 2022-2024 for Telford and Wrekin is 11.9%, which is lower than the 13.9% figure for the 3-year-period 2021-23. It is expected given the reducing trend since 2019, that Telford and Wrekin will reach the Government's smoke free target of 5% by the end of the decade (Figure 1).

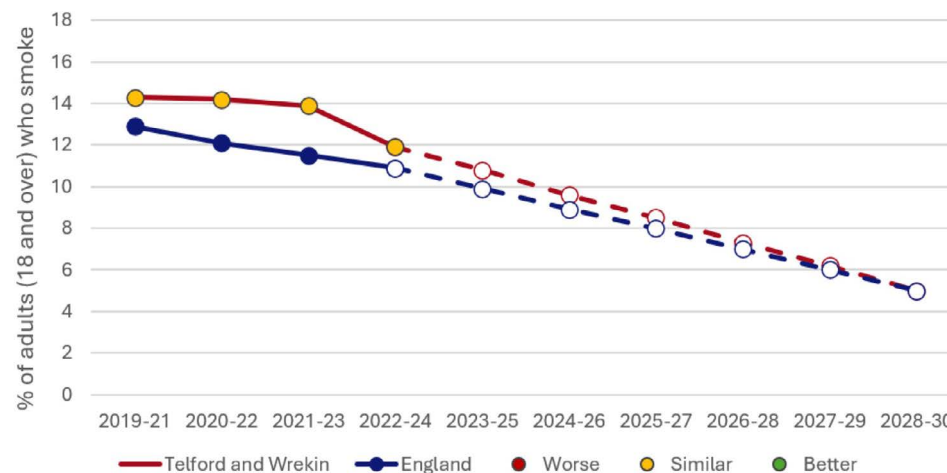


Figure 1 Smoking prevalence in adults (aged 18 and over) and projection to the smoke free ambition in 2030.

Vaping

Tobacco use is a well-researched area and NHS cessation programmes endorse the use of nicotine e-cigarettes (vapes) alongside other approved methods and tools (nicotine replacement, medication, counselling) to quit a known cancer-causing product.

Vaping with nicotine e-cigarettes is generally more effective for quitting smoking than traditional Nicotine Replacement Therapy (NRT), with research suggesting it can be up to twice as effective in helping smokers quit for at least six months.

Although less harmful than tobacco smoking, it is not risk-free and poses additional addiction risks and the health impact of a second hand vape aerosol is poorly researched.

Vaping is also highly attractive to children and young people due to appealing fruit/candy flavours, designs resembling USB drives or toys, and, for many, peer pressure.

In our delivery plan scoping conversations, all parties agreed that CYP vaping – cessation and prevention – was not adequately addressed across the Region and should therefore be a key part of any Joint Action Plan.



Our School Nurse team

- The Public Health Commissioning Team lead the way on CYP prevention through their school nurse programme in schools and colleges.
- They enhance curriculum PHSE smoking and vaping awareness sessions with eight FTE school nurses across 56 primary schools and 12 secondary schools that delivery smoking prevention advice and a secondary school drop-



Updated Schools Curriculum in 2026

- From September 2026 our School nurses will also be involved in supporting school implementation of the new government guidance on smoking and vaping awareness.
- Schools are mandated to include smoking and vaping awareness into their Relationships and Sex Education Curriculum.
- The guidance means schools should have content that:
 - explains the harms of smoking and vaping;
 - covers nicotine addiction;
 - explains the particular risks of illicit vapes;
 - helps young people understand how to access support to quit; and
 - includes relevant legal information on vaping and smoking.
- This will further raise awareness for children and young people – one of our vulnerable populations.
- [Relationships and sex education \(RSE\) and health education - GOV.UK](#)

Crucial Crew

- Telford & Wrekin Council host the annual Crucial Crew programme – a multi-agency partnership event aimed at Year 6 students designed to provide them with life skills and knowledge that will help to keep themselves and others safe, both now and in the future.
- In 2026, 1383 children attended Crucial Crew and benefitted from vaping awareness sessions.
- Crucial Crew aim to raise students' awareness of important safety issues, encouraging them to think about their own and others safety and guiding them on what to do in potentially unsafe situations.
- Provision of education sessions to year 6 pupils at Crucial Crew includes vaping awareness 'Be smart, don't start'.
- Video of School Nurses delivering vaping education at Crucial Crew in 2025: <https://www.youtube.com/watch?v=0Dtvs3LLG0g>



Creating Smokefree Spaces

- The creation of more smokefree places is the responsibility of every organisation across Telford and Wrekin that controls a place where people work, play and gather – such as Telford & Wrekin Council premises, large employers and our hospital trust. The Tobacco and Vapes Act will also specify additional venues.
- The Health Protection Team lead the way on our approach to current smokefree provisions. They have also participated in the government consultation on aspects of the Act that will expand mandatory smokefree places into areas such as school playgrounds and hospital grounds.
- The Healthy Living team is working with large organisations to encourage smokefree areas and uptake of our stop smoking services.
- Our participation in the cross-system Tobacco Steering Group includes support for smokefree areas, whether they be under the control of Telford & Wrekin Council or another organisation such as SaTH (our hospital trust).



Asthma Friendly Schools

- In 2025 our schools were issued advisory guidance on asthma policies and 18 of our schools are now participating in the ICBs Asthma Friendly schools' programme.
- The **Asthma Friendly School Scheme** in Shropshire, Telford and Wrekin is a partnership between local health and education authorities designed to ensure schools provide a safe, inclusive environment for pupils with asthma. It is fully aligned with national NHS England policy.
- Asthma-friendly schools appoint designated 'Asthma Champions' to oversee asthma safety. These champions undergo training to identify environmental triggers that can stimulate an asthma attack – including **tobacco smoke**, indoor air quality issues, and pollen – while also managing school registers and emergency inhaler kits. [Become an Asthma Friendly School](#)

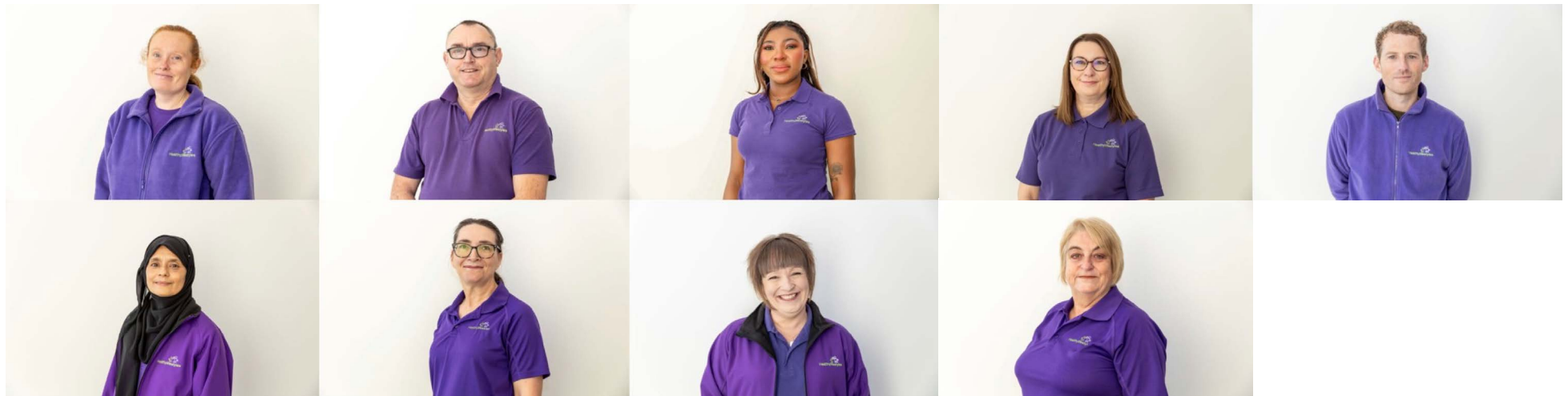


Telford & Wrekin Council's Stop Smoking Service

Our expanded Stop Smoking Advisor team

The Healthy Lifestyles Team have successfully recruited 5 new Stop Smoking Advisors with diverse backgrounds and experience to support people across our communities to access the service and reduce inequalities.

For more information visit www.healthytelford.com



Expanding our reach

- Total number of referrals into Stop Smoking Service 2025/26 – 733.
- Our referrals in 2026/27 are already exceeding 2025/26 month on month figures. We expect this trend to continue.
- Our expanded Stop Smoking Advisor team is turning referrals into quit dates that lead to less smokers and better health across Telford and Wrekin.
- The Lung Cancer Screening Programme pathway has provided over **1000 referrals to date** – a focussed intervention with a vulnerable community that has a **take up rate of 50%.**



Online Assistance

- The Healthy Telford website has links to “Crush the Habit “ which is a campaign to encourage smokers to seek support to quit. Target adverts have been used on social media and local transport.
- [Telford & Wrekin Council | Help to stop smoking](#)



Supporting the Stop

- The Attitudes Survey 2025 gave insight into CYP and adult smoking habits – including vaping.

“It was observed during the survey engagement sessions that larger numbers of people appeared to be vaping rather than smoking and anecdotally we were told by people we approached that they had changed to vaping rather than smoking. Attendees at one of the focus groups spoke about how they both vaped and smoked cigarettes and this was dependent on where they were at the time with one saying that they were able to vape in the pub when they socialised and another saying that they vaped in the house as soon as they woke up as they were not allowed to smoke in the house.”



- Crush the Habit continues to successfully engage smokers with over 2.5 million impressions since launch, more than 109,000 interactions and 16,500 click through leading individuals to commit to quit.

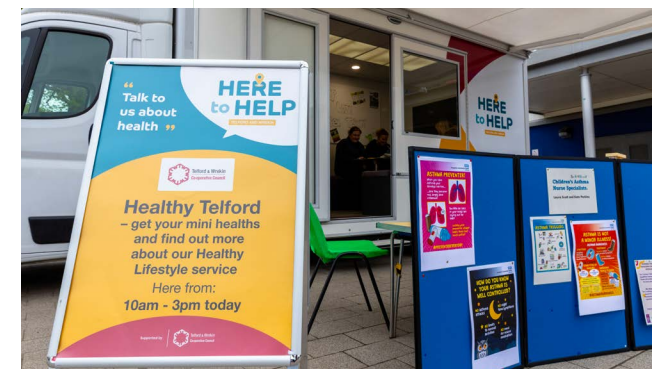
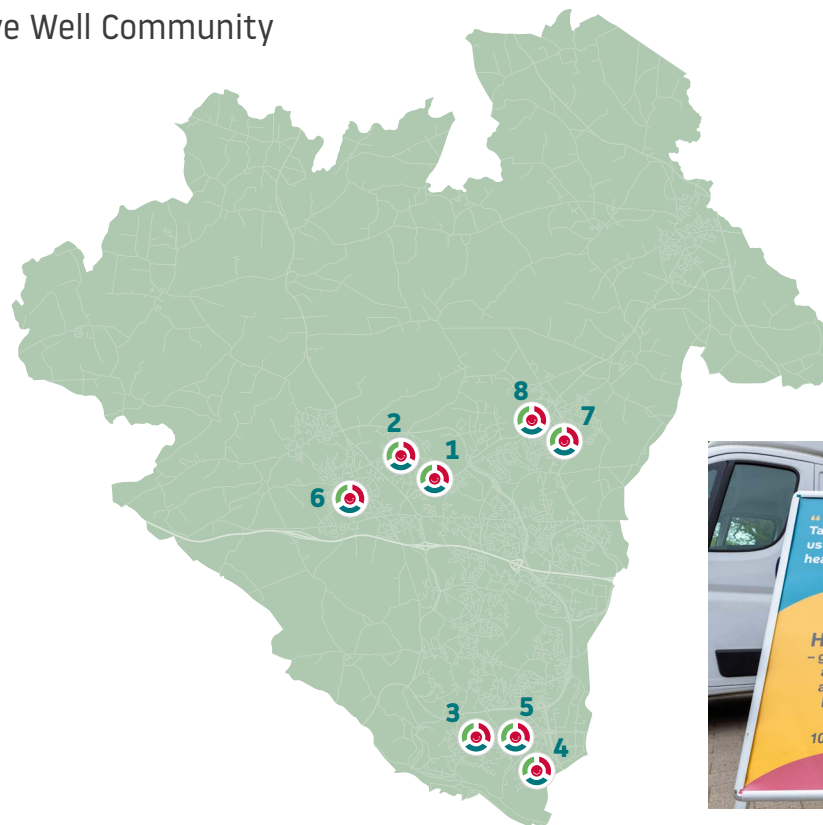


- Paid advertising is in place for the spring/summer 2026 campaign and the initial response has been positive across social media, bus backs, and local news outlets – the Shropshire Star and Telford Journal.
- Healthy Lifestyles Outreach – The Healthy Telford team attend outreach and events, targeting our communities experiencing health inequalities. These include community events as well as Live Well Hubs, Healthy Hearts and Here to Help Bus. Mini health checks including carbon monoxide (CO) monitoring is offered to smokers and smoking prevention advice.

Face to Face clinics expanded

- The Stop Smoking Service supports clients either over the phone, through video call or face to face appointments. There are now 12 face-to-face clinics across the Borough making the service accessible to all.
- These include services at the eight Live Well Community Hubs service across our Borough:
 - Hadley Community Centre **1**
 - Leegomery Community Centre **2**
 - The Park Lane Centre **3**
 - Hub on the Hill **4**
 - Madeley Community Library Live Well Hub The Anstice **5**
 - Wellington Community Library and Residents Hub **6**
 - Donnington Community Hub **7**
 - Silver Threads Hall **8**

- In addition to general health support, the clinics offer CO and blood pressure monitoring and referrals into Stop Smoking Advisors.



Case Study

A 29-year-old male from Telford and Wrekin referred himself to the local Stop Smoking Service after seeing an advert on social media.

The young male had been smoking for over 15 years and had a history of substance misuse, as well as diagnosed with mental health conditions – currently being supporting through NHS Mental Health Teams.

He was spending over £90 per week on cigarettes.

By accessing the 12-week stop smoking programme and guidance on quit aids, this young male is now 1-year smokefree!



Through weekly monitoring, trigger planning and relapse prevention, he saw his carbon monoxide reading reduce from 20ppm to 1ppm.

Whilst navigating his quit journey, the advisor spoke to the client about a change in mental health which prompted a change in medication following a review.

The client maintained his smokefree status even whilst on holiday abroad and speaks about his increased confidence and assertiveness in smokefree environments.

The main changes he has seen: improved mood, energy, health and finance!

He has also now enrolled at university and is motivated to support and inspire others to become smokefree.



Reducing potential harm

- Illicit and unregulated vapes and cigarettes are dangerous because they bypass safety standards. They often contain dangerously high, unlisted levels of nicotine and toxic substances like lead, nickel, and formaldehyde.
- Furthermore, the illicit tobacco and vape trade funds organized crime, such as human trafficking and modern slavery.
- It also increases access to smoking and vaping by being cheaper than highstreet prices, with the price of a pack of 20 illegal cigarettes ranging from £4.50 to £7.50.
- In 2025/26, four underage vape sales have been detected during intelligence led visits – one case resulting in the successful prosecution of the seller, a small fine and costs awarded to the council.
- In addition to this, 16,560 (820 packs) cigarettes and 11.5 kg of hand rolling tobacco have been seized from six premises.



Team work

Health and Wellbeing participate in, and now Chair, the cross system Tobacco Steering Group where we share good practices, solve common problems and improve efficiency in delivering smoking related services.

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Trading Standards have continued their collaborative enforcement work with the Police to deter and detect underage sales and to interrupt the supply of illicit tobacco and nicotine products. They have also worked with store front landlords to stop illicit supplies moving location after detection.

The Health Improvement team engage in regional groups and communities of practice with other local authorities on tobacco and vape related topics, to keep up with best practice and local initiatives, including a recent meeting with Warwickshire regarding non-smoked nicotine products such as snus and nicotine pouches.



Become data and intelligence led

Measuring impact

Monitoring of progress indicators will be achieved through collation of government, regional and local indicators. The existing Healthy Lifestyles Dashboard will be enhanced to include all Smokefree related activity.

A delivery plan for Smokefree Telford and Wrekin has been developed.

Telford & Wrekin Council's Health and Wellbeing department has recently created and filled a Programmes Officer role that will promote and oversee the delivery plan objectives.

The Council's Insight team is developing a broader data dashboard that will allow data collation and presentation for each strategic commitment, allowing us to see the cumulative impact of all our Smokefree activities.

The Council's Healthy Lifestyles team has recruited further Stop Smoking Advisors to increase the number of smokers in Telford and Wrekin setting a quit date, in line with targets set by the Office of Health Improvement & Disparities. The team supported 445 smokers to set a quit date during 2025/26, compared to 287 in the previous year, and the number setting a date during April-June 2026 exceeded the total number seen in 2024/25 (Figure 2).

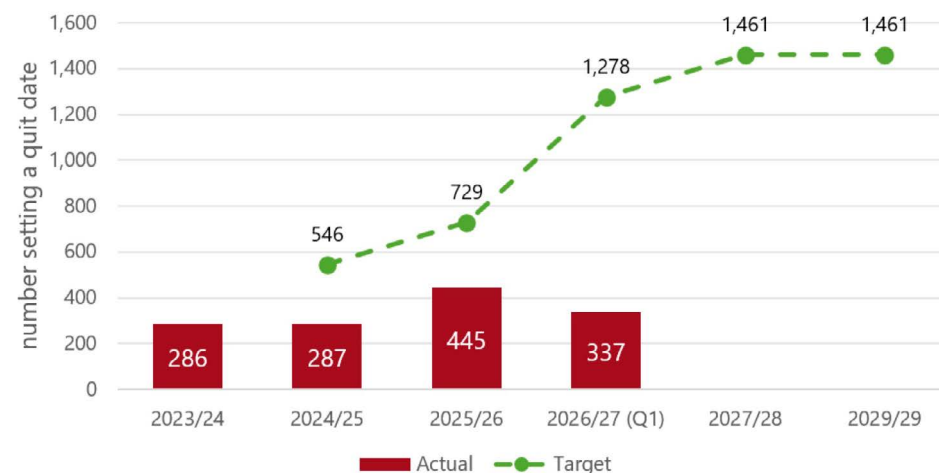


Figure 2 Number of smokers setting a quit date and targets

The delivery plan

The Telford and Wrekin Smokefree Delivery Plan

At the September 2025 Health & Wellbeing Board meeting, the Director of Public Health received support and approval for the development of a comprehensive plan to deliver Smokefree Telford and Wrekin ambitions across Health & Wellbeing Board partners.

The report introduced the Telford and Wrekin Smokefree strategy and proposed development of a comprehensive plan to deliver Smokefree Telford and Wrekin ambitions across Health & Wellbeing Board partners.

The delivery plan is based on the following strategic commitments:

- reduce the number of people who smoke, by supporting more people to quit in community and NHS settings;
- prevent children and young people against smoking, vaping (and other nicotine products);
- create more smokefree places to protect children and vulnerable people from second-hand smoke;
- enhance enforcement and tackling of illicit tobacco and vapes; and
- the key actions highlighted in the report.

The delivery plan

A joint approach

In follow up to the research, reporting and recommendations within the Annual Public Health Report, extensive internal and external engagement was undertaken to gain interest and understanding of the need for Smokefree Framework amongst the key actors in delivering a Smokefree Telford and Wrekin. Those consulted include:

- Telford & Wrekin Council staff:
 - Public Health
 - Trading Standards
 - Licensing
 - Insights
- NHS programme leaders and staff
 - Acute
 - Mental Health
 - Maternity
- The ICB Tobacco Steering Group (TSG)
- Neighbouring Public Health Staff
- Other LA smoking cessation staff & smokefree policy creators
- NHS SW Framework staff

The response was wholly positive to the Report.

In our scoping conversations, all parties agreed that children and young people vaping – cessation and prevention – was not adequately addressed across the region and should therefore be a key part of any delivery plan.

Based on these conversations, and the content of the report, this delivery plan was created as a guide for the ongoing work in Telford and Wrekin, and as a tool to engage allied organisations in our Smokefree Future.

This led to a Cross System Workshop that reviewed Smokefree related services and activities across Shropshire, Telford and Wrekin – led by the ICB and Council staff.

We know our vision of a smokefree future cannot be achieved alone and the TSG focus and membership presents an opportunity for joint work towards common goals on a Smokefree Future, rather than engaging each member separately.

The delivery plan

The workshop

- In April 2026, Colleagues from across Shropshire, Telford and Wrekin came together for a system-wide tobacco workshop, including partners from the local NHS, social care, public health, the voluntary and community sector, trading standards and Shropshire Fire and Rescue Service.
- The workshop generated a greater understanding of gaps and barriers within the existing pathways and services, as well as highlighting additional resources needed to implement and enforce the Act. Participants made commitments to practical steps to address common barriers and gaps.
- The session demonstrated the real value of partnership working and the importance of a joined-up system approach to improving the health and wellbeing of our communities and was of great value to the delivery plan.

Opportunities were identified for collaborative working across services:

- pathway redesign;
- community-based delivery;
- workforce and MECC;
- communication and promotion;
- policy and enforcement integration.

Suggestions were made for the delivery plan and the Chair of the Tobacco Steering Group was handed to the Telford & Wrekin Public Health Programme Officer.



The delivery plan

Additional actions identified

Vaping

- Gain understanding of SHA impact on air quality.
- Inclusion of vaping in cessation pathways.
- A pathway for CYP vapers.

Service access

- Improve non-digital follow up.
- Review pretreatment pathways to reduce in treatment intervention.
- Consider home delivery of NRT.
- Clarify pharmacy pathways.

Pharma Therapy

- Review of NRT provision across Telford and Wrekin.
- Consideration of equal provision NHS vs local authorities served.
- Comparison of POMS vs NRT outcomes in quitting.

Communication

- Expanding awareness of services – e.g. licensed vehicles, lived experience and children and young people peers.
- Communication via allied services – e.g. taxi licensing and home fire safety visits.
- Promote cessation messages in all press releases issued on tobacco enforcement work undertaken.



The delivery plan

Prevent

Priority action	Measures of impact	Lead organisation/group
Protect children and young people against smoking, vaping and other nicotine products		
Refresh the Telford & Wrekin Children and Young People's Vaping Position Statement.	Telford & Wrekin CYP Vaping Position Statement updated and reissued- incorporated in Telford & Wrekin smokefree related services, materials and activities.	Health Protection and partners
Engage with young people, through our Child Friendly approach, to co-produce prevention activities which raise awareness of the harms of smoking and vaping.	Co produced CYP focussed material is created CYP material in/on all appropriate smokefree messaging Number of CYP engagements CYP smokefree peer groups created in targeted schools Reduction in CYP tobacco and nicotine use Number of prevention activities co-produced by CYP	Health Protection and partners
Develop an online toolkit of resources and communications for children, young people, parents, carers, schools and education settings to stop the start of smoking and vaping.	Online tool kit is created Usage/Views of the toolkit Embedding the toolkit in school smokefree messaging Capture of positive case studies	Health Protection and partners
Associated goals and objectives		
Expand the vape and other nicotine product content of our smokefree related services, materials and activities	Updated vape/other product content in all smokefree related materials. Improved understanding of vape and other nicotine products impacts across all smokefree related services. Expansion of Telford & Wrekin services for vape and other product users. Provide a CYP vape/nicotine cessation pathway	Health Protection and Stop Smoking Service
Endorse and expand the ICB Asthma Friendly School programme in Telford and Wrekin schools.	Number of Asthma Friendly School accreditations in Telford and Wrekin	PH Commissioning

The delivery plan

Protect

Priority action	Measures of impact	Lead organisation/group
Create more smokefree places to protect children and vulnerable people from second-hand smoke		
Make more local outdoor spaces smokefree, through expanded restrictions set out in the Tobacco and Vapes Act, e.g. outside schools, children's playgrounds and hospitals.	Awaiting regulations Compliance with T&V Act requirements across Telford and Wrekin Number of smokefree places	Health Protection
Encourage premises to adopt voluntary outdoor smokefree places.	Number of additional smokefree places % of focus areas with smokefree places	Health Protection and Health Improvement
Work with organisations and employers to develop smokefree policies.	Updated Telford & Wrekin Council smokefree policy Number of large local employers and high-profile businesses engaged in Smokefree pledges and worker awareness Capture of positive case studies	Health Protection and Health Improvement
Associated goals and objectives		
Smokefree SaTH	Alignment of smokefree approaches across NHS services Smokefree care provision across SaTH	SaTH
Smokefree Telford and Wrekin	% Telford & Wrekin Council Building land that is smokefree Air Quality indicators	PH Programme Officer and All services

The delivery plan

Support

Priority action	Measures of impact	Lead organisation/group
Reduce the number of people who smoke by supporting more people to quit in community and NHS settings		
Understand the local inequalities picture to inform effective targeting, through equity profiling of tobacco dependency and stop smoking service clients – by age, gender, ethnicity etc.	Telford & Wrekin Needs assessment completed Use of data to inform service focus and provision Create a focus map for smokefree services and activities – e.g. CORE20plus5	All partners
Develop confidence and expertise of frontline health and care professionals and appropriate volunteers (health champions etc.) through Making Every Contact Count (MECC) training on smoking and vaping.	Creation of training material Attendees at training Number of direct and associated service staff trained on MECC Number of VBA sessions and attendees	DPH and Health Improvement
Improve and expand advice and signposting to support available for people to quit through promotion of Healthy Conversations campaign, underpinned by national campaign material (e.g. Stoptober).	Inclusion of key signposts and messaging in Health Conversations Campaign Increase in referrals linked to campaign	Health Improvement
Associated goals and objectives		
Incorporate pharmacy pathways into local smokefree services and update signposting	Clear pharmacy pathways integrated into Telford & Wrekin services and sign posting Home delivery of NRT to home bound patients	Pharmacy Service and Stop Smoking Service
Review and enhance pretreatment pathways to reduce in-treatment intervention	Enhanced pretreatment pathways aligned across Telford & Wrekin One definition of active smoker across pretreatment pathways	PH Programme Officer and All services

The delivery plan

Support

Priority action	Measures of impact	Lead organisation/group
Reduce the number of people who smoke by supporting more people to quit in community and NHS settings		
Review, streamline and enhance the current stop smoking pathways across community settings in the NHS Tobacco Dependency Programmes and linked services such as Lung Cancer Screening.	Smoking pathways aligned across Telford & Wrekin	PH Programme Officer and all partners
Expand the Healthy Lifestyles Service Stop Smoking service in line with needs.	Number of in community stop smoking clinics % population using nicotine % population using tobacco products Number of users of the LA cessation service Number of users that set a four week quit date (gov target) % users that achieve a 12 week quit Capture of positive case studies	PH Programme Officer and all partners
Expand the number of clients supported with free NRT including a review of funded NRT for targeted cohort and look at future NRT provision for other communities.	Number of clients with access to free NRT Clear pathways for NRT	PH Programme Officer and all partners
Develop and promote online resources and apps to engage those anting to quit through a digital offer	Availability of online resources Promotion of resources in all campaign materials Use of online resources	All partners
Use of consistent data across STW systems	Aligned definition of smoking across STW services Consistent measures of success across STW stop smoking services	All
Associated goals and objectives		
Engage with residents who smoke to understand barriers, especially those in groups where smoking prevalence is highest Associated services to adopt MECC approach for smokefree services	Residents and organisations engaged Barriers identified and addressed in service provision TSG barriers scoping work assessed and addressed	PH Programme Officer and partners
	Home fire safety visits to include a referral pathway to cessation services Create a SRFS staff offer Engagement of taxi drivers in smokefree messaging and materials Number of VBA sessions delivered and attendees	SRFS, Licensing and partners

The delivery plan

Enforce

Priority action	Measures of impact	Lead organisation/group
Enhance enforcement and tackling of illicit tobacco and vapes		
Explore adoption of retail licensing scheme for tobacco and vapes products, linked to new Tobacco and Vapes Bill powers.	Awaiting regulations Licenses issued Licenses revoked	Licensing
Consider use of fixed penalty notices for offences such as underage sale of tobacco and vaping products	Awaiting regulations Number of fixed penalty notices	Trading Standards
Continue to enforce compliance with regulations relating to all tobacco and vapes regulation, including point of sale, age restrictions on sales and illegal sales	Illegal tobacco and vape sales Illicit tobacco and vape seizures Discovery operations Number of smokefree places	Trading Standards and Health Protection
Associated goals and objectives		
Align enforcement messaging with smokefree messaging	Promote cessation messages in all public enforcement communication	Trading Standards and Licensing

The Tobacco and Vapes Act 2026

The Tobacco and Vapes Bill received Royal Assent on April 29th, 2026, creating the Tobacco and Vapes Act 2026 (the Act).

There are a range of actions at national level that are needed to ensure that the measures within the Act are effectively implemented, such as the creation of additional Smokefree Places legislation. There will also be impacts on Local Authority Services.

- **Trading Standards:** increased enforcement burden and spot fines.
- **Licensing:** new mandatory licensing scheme.
- **Health Protection:** increased smokefree area enforcement.
- **Health and Wellbeing teams:**
 - **Stop Smoking Services:** new support measures needed to include vaping;
 - **Public Health Commissioning:** enhancement of school and college campaigns due to generational ban;
 - **PH Programme Officer:** management of cross system workflows to achieve our Smokefree vision.

<https://ash.org.uk/media-centre/news/blog/the-smokefree-generation-everything-you-need-to-know>

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