

**TRAINING PROSPECTUS**  
**Manchester Public Health Team**  
**Manchester City Council**

**Introduction to Manchester**

Manchester is the main shopping, entertainment, and commercial centre for Greater Manchester, with a thriving nightlife, excellent transport links, and world-renowned universities. However, there are very high levels of deprivation with the health of people in Manchester generally worse than the England average. Manchester's residents have also been disproportionately adversely affected by the COVID-19 pandemic. Existing inequalities have deepened across all age groups and particularly for our most deprived communities; Black, Asian and minority ethnic communities, and those already living in poverty.

The life expectancy for men in Manchester is 74, and for women it is 79. Men can expect to die nearly 5 years younger than the average for England and women can expect to die nearly 4 years younger. In addition, life expectancy varies by 8 years between the most and least deprived communities within the city itself.

The population has increased by 9.7% (England, 6.6% and the North-West, 5.2%), from around 503,100 in 2011 to 552,000 in 2021. The percentage of people under the age of 15 years in Manchester is 19.4%, 71.1% of people are between the age of 15-64 years and 9.4% of people are over the age of 65 years. Over the next 10 years, the resident population of Manchester is projected to increase. Forecasts produced by the City Council suggest that the city's population will surpass 635,000 by 2025 and that there will be around 662,000 people living in the city by 2028. The population is increasing in diversity (51% non-white British) speaking a total of 94 languages.

**Manchester health and social care system**

Manchester has undergone a major system establishing the Manchester Local Care Organisation, responsible for improved population health outcomes and more efficient use of health and social care resources centred on 12 neighbourhoods in the city, and forming a Single Hospital Service (SHS)- Manchester University NHS Foundation Trust (MFT)- for the city.

The 2020 re-refresh of the Locality Plan maintained the five strategic aims for the city:

- Improve the health and wellbeing of people of Manchester
- Strengthen the social determinants of health and promote healthy lifestyles
- Ensure services are safe, equitable and of a high standard with less variation
- Enable people and communities to be active partners in their health and wellbeing
- Achieve a sustainable system.

The Greater Manchester Integrated Care System was established in July 2022 with four aims:

- Improve outcomes in population health and healthcare
- Tackle inequalities in outcomes, experience and access
- Enhance productivity and value for money
- Help the NHS support broader social and economic development.

## **Making Manchester Fairer**

The impact of the COVID-19 pandemic on Manchester has included damaging longer-term economic, social and health effects which are expected to further impact on health and widen inequalities. These effects include strains in public finances, affecting community and environmental conditions; widening inequalities in attendance and attainment in education and early years; increasing poverty, debt and income inequality; rising unemployment, particularly for young and older people; deteriorating mental health for all age groups, but particularly for young people. These effects are likely to be compounded for people from Black, Asian and Minority Ethnic (BAME) groups, disabled people, older people, women and those on low incomes. In turn, these effects are likely to be further compounded for those living in low-income areas.

Following the publication of Professor Sir Michael Marmot's "Build Back Fairer in Greater Manchester: Health Equity and Dignified Lives" in June 2021, Manchester gave a commitment to consider the recommendations and develop a local response.

Making Manchester Fairer- Tackling Health Inequalities in Manchester 2022-27 describes the actions Manchester will take to reduce health inequalities over the next 5 years in response to the Marmot Review for Greater Manchester and the specific needs of Manchester's residents in light of the COVID-19 pandemic.

The plan identifies eight areas of action:

1. Giving children and young people the best start in life
2. Lifting low-income households out of poverty and debt
3. Cutting unemployment and creating good jobs
4. Preventing illness and early death from big killers- heart disease, lung disease, diabetes and cancer
5. Improving housing and creating safe, warm and affordable homes
6. Improving our environment and surroundings in the areas where we live, transport, and tackling climate change
7. Fighting systemic and structural discrimination and racism
8. Strengthening community power and social connections

This action plan also provides a structure for greater collaboration between multi-agency and cross sectoral partnerships to mobilise organisations to place health equity at the heart of governance, policy development, resource allocation, workforce planning and commissioning arrangements.

## **Manchester Public Health Team**

Manchester has a large PHT of approximately 65 staff, made up of the DPH, three Assistant Directors of Public Health, a Head of Health Intelligence. We have a range of Programme Leads/Commissioning Managers leading work on the city's public health priorities across the lifecourse. The team also includes both a Community, and a Strategic, Health Protection Team.

We commission a range of services including Wellbeing, Drug and Alcohol, Sexual Health, Children's Public Health Services.

Through our leadership, involvement and contribution to both the Manchester Locality Plan and the Making Manchester Fairer Action Plan for the city we can offer

opportunities to develop the competencies required from the Public Health training Programme.

### **Internal and external links**

We have good links and relationships with other City Council directorates and services, and we encourage and support trainees to work across the City Council, NHS bodies, and other external agencies including the voluntary and community sector.

### **Links to academic units**

There is a high level of research advice and experience available within the team and we have a strong track record of academic collaboration e.g., Age Friendly Manchester with the University of Manchester and Manchester Metropolitan University.

### **Particular interests and training opportunities**

We believe that in Manchester we can meet most interests (with the exception of managing the problems of the rural poor!). There are many opportunities to work across a wide range of topics whilst developing the skills and competencies that will support the development of a portfolio of evidence to support taking up a career in Public Health.

### **Organisation of training**

Barry Gillespie is our Lead Trainer, with two further Educational Supervisors- Cordelle Ofori and Sarah Doran- also qualified to support trainees. We try to ensure that trainees are stretched and supported, and that they are given opportunities, especially in the later stages of training, to lead on strategic areas of the public health programme.

## **Examples of trainees' projects and experiences**

### **Anne Whittington**

I spent my ST4 year in Manchester with the intention of having a primarily healthcare public health focused placement. I was supported and enabled to link with one of the local hospitals and to begin a project on reducing the high burden of alcohol related morbidity and mortality through hospital-based interventions. Manchester has an integrated health and care commissioning structure and a close working relationship with the NHS, which enabled me to get to know and work closely with partners in primary care on a number of smaller projects.

Halfway through my time at the council the COVID-19 pandemic began, and my original projects were put on hold as we were all required to contribute to the pandemic response. I had a role supporting the Public Health Community Infection Control Team and delivering some of the testing programmes, particularly those for adult social care. As a more senior trainee I was given the opportunity to represent the team at meetings and to ensure I was getting the experience I needed to achieve my learning objectives. The team was friendly and supportive but also appropriately challenged me to take on the extra responsibility required towards the later stages of training.

### **Simon Watts (2022-23)**

During my ST5 year I have been placed between Manchester NHS FT and Manchester City Council Public Health Team with a focus on Healthcare Public Health and health inequalities.

I have really enjoyed my experience and there are lots of interesting placement opportunities for future registrars within the Council, particularly around the Health Inequalities agenda through the Make Manchester Fairer programme. This programme has a wider determinant focus as well as the providing the opportunity to influence how health screening, diagnostic and treatment services are provided across the city working with the Local Care Organisation and Manchester NHS FT.

The Public Health team have also led on innovative work around community engagement and co-design which has been sustained and further developed since Covid-19, making it an interesting place to practice public health, aligning priorities to resident's needs.

I was able to take part in the senior management meetings and deputised for consultants at system partnership boards which has provided me with senior level exposure and experience.

The placement has been flexible in terms of office working vs remote working, with a lot of the team in on a particular day of the week which has allowed me to make better connections with people in the team.

### **Audit/CPD**

All the Consultants are registered with the Faculty of Public Health for Continuing Professional Development. We encourage trainees to undertake audit work.

### **Facilities and hybrid working**

All our trainees are located together with the rest of the Public Health team in the Town Hall Extension in the city centre. The Town Hall Extension is located next to the Central Library with excellent facilities. In relation to hybrid working, we encourage 2-3 days (pro rata full time) working in the office to build relationships with other members of the team and colleagues based in the Town Hall Extension- City Council and Manchester LCO (co-located on the same floor).

### **Travel options to the PHT**

As we are based in Manchester city centre in the Town Hall Extension, St. Peter's Square, there are a range of options for travelling to this work placement by public transport. There are good bus connections to the city centre from all across Greater Manchester, three train stations within walking distance- Oxford Road (5 minutes), Piccadilly (under 15) and Victoria (under 15)- and St. Peter's Square Metrolink stop on the tram network. There are also secure cycling facilities, including showers, in the basement of the Town Hall Extension and a number of public cycle parking facilities near the building. Given the public transport facilities, and access to a taxi service when required, the placement can be undertaken without the use of a car.

### **Contact name, telephone number and email address**

For any further information please contact Barry Gillespie, Lead Trainer, on 07507 545887 or email [barry.gillespie@manchester.gov.uk](mailto:barry.gillespie@manchester.gov.uk)

**Barry Gillespie January 2023**