

Manchester City Council Report for Information

Report to: Health Scrutiny Committee – 19 July 2023

Subject: Manchester ACEs and Trauma Informed Practice Update

Report of: Deputy Director of Public Health

Summary

This report is an update to a report considered at the meeting of the committee on 7 September 2022 on Adverse Childhood Experiences (ACEs) and Trauma Informed Practice. The relationship between ACEs and health harming behaviours, disease prevalence and life potential in later life is well evidenced. It is therefore critical for Manchester to have a strategic approach to ACE aware, trauma informed and responsive practice, to tackle health inequalities and achieve the ambition of Making Manchester Fairer. The report provides an update on the work done to strengthen the ACEs programme objectives, through extensive engagement and consultation with stakeholders, to ensure that the programme is fit for purpose following the impact of COVID-19 and within the context of Making Manchester Fairer.

The report also provides an update on the ACEs and Trauma programme of work across the city including a good practice example of culture change from Manchester Housing Services and a collaboration between Z-Arts and the Burnage Academy for Boys.

Manchester has come a long way in the journey to become a trauma informed and trauma responsive city, however, there is much more that needs to be done. This report tells some of the stories and captures some of the impacts. The engagement work with the workforce, communities, families, and individuals will continue so that outcomes improve for residents of the city.

Recommendations

The Committee is recommended to:

1. Note the content of the report.
 2. Consider and comment on the refreshed ACEs and Trauma Responsive Programme.
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Wards Affected: All

Environmental Impact Assessment - the impact of the issues addressed in this report on achieving the zero-carbon target for the city

Supporting individuals, families, and communities to prevent adversity and mitigate against past, and ongoing, trauma will impact on public health through increased
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physical and mental wellbeing. Protective factors that we promote such as exercise, mindfulness and healthy eating will support residents to access local green spaces and community assets, reduce traffic congestion and supporting the local economy.

Equality, Diversity and Inclusion - the impact of the issues addressed in this report in meeting our Public Sector Equality Duty and broader equality commitments

If Manchester is to be a truly trauma responsive City, then we need to support all our population to mitigate against trauma and what has happened to them. We are working to the principles of trauma informed practice –safety, trustworthy & transparency, peer support, collaboration & mutuality, empowerment & choice and cultural, historical & gender issues. We are inclusive in our delivery, co-producing resources (including training) with people with lived experience and supporting our underserved communities to understand trauma and adversity and adopt trauma informed approaches.

Manchester Strategy outcomes	Summary of how this report aligns to the OMS/Contribution to the Strategy
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	
A highly skilled city: world class and home-grown talent sustaining the city's economic success	
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	Through building trusted relationships and promoting strength-based conversations we can engage our population with what matters to them. This leads to community focused activities that build resilience and enable communities to thrive and flourish.
A liveable and low carbon city: a destination of choice to live, visit, work	
A connected city: world class infrastructure and connectivity to drive growth	

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

- [ACE-aware and Trauma Informed City Manchester 2019-25](#)
- Harpurhey Evaluation Report (available on request)
- [Adverse Childhood Experiences \(ACES\) and trauma informed practice](#) - Report to the Manchester Health Scrutiny Committee – 7th September 2022.

1 Introduction

- 1.1 Following the paper presented to the Health Scrutiny Committee in September 2022, this report provides an update on the progress made in Manchester becoming an ACE aware, trauma informed and trauma responsive city.
- 1.2 This report outlines the steps that have been taken to strengthen the ACEs programme objectives, through extensive engagement and consultation with stakeholders, and ensure that the programme is fit for purpose following the impacts of the COVID-19 pandemic and in light of the city's commitment to Making Manchester Fairer (see Appendix 1 for a copy of the programme).
- 1.3 The report also provides an overview on the progress made with several aspects of the ACEs and trauma programme of work including training and other recent activity including work with Housing Services.

2 Background

- 2.1 ACEs describe a wide range of stressful or traumatic experiences that can occur from conception to the age of 18 – they include abuse, neglect, and household dysfunction. When children are exposed to adverse and stressful experiences, it can have a long-lasting impact on their ability to think, interact with others and on their learning. It has been shown that considerable and prolonged stress in childhood has life-long consequences for a person's health and well-being, with negative behaviours often being used unconsciously as protective solutions to unrecognised problems dating back to childhood.
- 2.2 Research shows that ACEs are common and endemic and are found to have a dose dependent response on disease prevalence, life potential and health harming behaviours such as smoking, alcoholism and drug use. In order to improve our city's health outcomes, ACEs need to be seen as the major contributor to disease that they are. It is therefore imperative that we work towards reducing this toxic stress burden on our children and families.
- 2.3 It is also important to sit this alongside societal issues, so we refer to a pair of ACEs to include Adverse Community Environments like poverty, discrimination, poor housing, lack of economic opportunity and social connectedness.

3 Programme Refresh

- 3.1 In 2018 the Council launched a pilot ACEs and Trauma Project to develop a 'trauma informed workforce' at a place level in the Harpurhey ward in North Manchester.
- 3.2 Following the success of the Harpurhey pilot project a programme of work was rolled out across the city and an ACEs and Trauma Informed Strategy 2019–25 developed (see [2019-11-12-ACEs Trauma-Informed Strategy 2019-25.pdf \(manchestersafeguardingpartnership.co.uk\)](https://manchestersafeguardingpartnership.co.uk/2019-11-12-ACEs_Trauma-Informed_Strategy_2019-25.pdf))

3.3 The refresh has provided a timely opportunity to:

- Check the strategy meets the needs of city
- Review effectiveness of the strategy and its achievements to dates
- Ensure that the programme meets the current needs of the population health needs of Manchester, especially considering the impact of the COVID-19 pandemic on the city
- Ensure the objectives are aligned to the city's strategic context; Our Manchester Reset – Forward to 2025, Making Manchester Fairer and the Anti-Poverty Strategy.

3.4 **Strategic Context** – Making Manchester Fairer is the city's approach to tackling health inequalities for the next 5 years, with a longer term vision. Adopting trauma responsive approaches as part of a whole system approach to population health and wellbeing in the city is essential to tackling health inequalities. The breadth of the areas of work that ACEs and trauma both influence and is influenced by is vast, further emphasising the need for a long term, whole system approach across a variety of cross cutting agendas. Trauma Informed practice also underpins the strategic priorities of the Manchester Safeguarding Partnership.

3.5 **Consultation and Engagement Process** - The Manchester ACEs and Trauma Responsive programme objectives have been drafted based on the findings of the extensive engagement and consultation activity to capture the views and opinions of a wide range of partners and stakeholders. The consultation and engagement process has been used to establish key priority themes and agree practical ambitions to respond to these challenges.

3.6 To engage a wide audience of partners and stakeholders in the strategy refresh process, an online survey was developed. The survey was promoted to partners and stakeholders via a direct email, hosted on the Manchester City Council (MCC) website, promoted on MCCs Facebook and twitter pages and circulated to the individuals who attended a consultation workshop (also held as part of the consultation process). It was hosted on the Councils website between June and August 2022 and was completed by 101 individuals from 69 organisations.

3.7 The survey asked a range of questions covering:

- Training
- Level of knowledge of ACEs in organisations and how this has been incorporated
- The impact of ACEs work on their organisation and clients
- Successes
- Future aims and objectives and resources required to achieve this
- Impact of COVID

3.8 The result of the consultation broadly showed:

- A fifth of respondents had fully incorporated trauma informed approaches into their team or organisations objectives and strategies and just under two thirds had incorporated some aspects for example develop bespoke training for a particular demographic, audits for self-assessment and producing action plans.
- Nearly 80% of those who responded stated that implementing a trauma informed approach has had a positive impact on the people they work with. A trauma responsive approach had helped their service users to understand negative thoughts, behaviours and patterns and work through their trauma informally in a supportive environment. It helped them to access services/programmes, gave them a voice and provided them with safe spaces.
- Organisations wanted us to focus on building community resilience and co-producing projects with residents. They wanted to have more opportunity to learn from others and share best practice.
- Respondents wanted us to continue to roll out training across the city and to provide specialist /sector specific training where possible.
- Organisations stated that they were committed to further embedding trauma informed approaches within their organisation.

3.9 An online engagement workshop was held in July 2022 and was attended by approximately 60 individuals from a range of organisations across the city. The workshop gathered participants opinions on community resilience, the focus of future work programmes, ways to co-produce projects with residents and how we can evaluate and evidence the impact of our work.

3.10 Two of our voluntary sector partners Back on Track and Thrive Manchester ran consultation workshops with their service user groups in summer 2022.

3.11 All of the various feedback and insight generated from the consultation and engagement processes has fed into the development of the refreshed objectives.

3.12 A full copy of the Engagement and Consultation Report can be found in Appendix 2.

3.13 The overarching aims of the Manchester ACEs and Trauma Responsive Programme are to:

- Prevent children from experiencing and being impacted by ACEs and trauma
- Support and build resilience for communities, families, individuals and children against the potential impact of adversity and trauma and to break the cycle of generational trauma
- Recognise the impact that ACEs and trauma has on children and adults and help them to receive support to reduce their negative impacts and to improve their well being

3.14 The revised objectives for the programme are as follows:

Create ACE-aware, trauma informed, trauma responsive and resilient communities

- We will work with partners to support and enable the development of trauma responsive community hubs in every neighbourhood.
- Work with existing models, opportunities and activities happening in the city to build resilient communities.

Make sure people with lived experience of adversity and trauma have a voice

- We will work innovatively and flexibly with individuals, families and communities who have experienced adversity and trauma to co-produce approaches, services and projects that are ACE aware, and trauma informed.
- We will work with 'Expert by Experience' groups across the city to co-design and co-produce training content, resources, projects and feed into the governance structures.

Support organisations across the city to embed ACEs and trauma informed approaches into their everyday practice

- We will increase city-wide knowledge and understanding of ACEs and trauma by rolling out sector specific training.
- We will support organisations to become trauma responsive by adopting trauma responsive approaches and policies and develop appropriate referral pathways.
- We will work with organisations to establish ways to support the wellbeing of their staff and service users.
- We will develop and test models of supervision.
- We will build strong ACE and trauma partnerships and networks by establishing knowledge sharing and network opportunities and supporting organisations to work collaboratively.

Develop a range of approaches to measure the impact of the strategy and ACEs and trauma activity in the city and ensure that practice is evidence based

- We will work with partners to measure the impact of our work with communities including developing a meaningful measure of community resilience.
- We will work with partners and stakeholders to develop a range of different approaches to measure the impact of their ACEs and trauma work.
- We will co-develop sector specific guidance and resources to measuring impact.
- We will work with Greater Manchester to develop a system level approach to measuring impact.

Ensure that equality, diversity and inclusion are central to our approach

- We will work with partners to actively engage those from underrepresented groups who may have experienced adversity or trauma based on their specific characteristics such as race, disability, sexual orientation or due to their culture, religion or community environment.

4 Training

Since September 2022 over 1,000 individuals have attended a training session. This includes elected members, staff from the Manchester Jewish Museum, the Afro-Caribbean Alliance, MCC Homelessness Directorate, Manchester Sensory Support Service, DWP, a number of schools, GMP, Primary Care, housing providers and a range of voluntary sector organisations.

5 Activities to note

- Co-op Academy New Islington primary school became the first school in Manchester to be a Trauma Informed Schools UK accredited school.
- Working with MADE - Manchester's cultural education partnership – we led on a project with four schools and four creative providers using a trauma informed lens. One project involved Z-Arts and Burnage Academy for Boys working with years 7 to 9, all of whom had experienced displacement from their country of birth, to explore what it means to connect with others and have a sense of belonging in the school community.
- Showed two screenings of the Wisdom of Trauma film attended by 140 people – both sessions concluded with a panel discussion involving individuals with lived experience from GM Rape Crisis, MASH (Manchester Action on Street Health) and Survivors Manchester.
- 4CT through our commissioned North Manchester TICTAC project have produced a self-assessment tool that allows voluntary and community sector providers to assess their strengths in working in a trauma informed way and their further support needs. This has been used by M40 Gateway, the LCO care navigators and the New Testament Church of God.
- We are working with the Pakistani Sounding Board to support them to convey messages about trauma to their communities. A briefing, training session and consultation workshop have so far taken place. The group is led Bollywood Active and includes Hopewell (formerly the North Manchester Health Forum) and the Ethnic Health network.

6 Impacts

- 6.1 The following narrative and associated case study brings to life the impact of adopting trauma informed and trauma responsive approaches.

The journey of MCC Housing Services (formerly Northwards Housing)

- 6.2 As a housing provider MCC Housing Services have been on the trauma informed journey since the pilot in Harpurhey. Although initially focused on one ward, they quickly realised that this approach would be beneficial to staff who support individuals and families in all areas of the city in managing their tenancies. As such the move towards working in a trauma informed way was

natural. This was led by the staff involved, who adapted the training received in response to the issues and problems raised by the people and families they were working with.

- 6.3 MCC Housing Services wanted to make all their workforce trauma informed and ensure all colleagues working with residents were trained in this approach. Working with Public Health they developed housing specific trauma training which was delivered to housing officers and customer service centre advisors. The whole workforce has now been trained and as such everyone who speaks to residents is aware of the importance of this approach in order to make the resident feel secure and to get the best outcomes for both the individual/family and the organisation.
- 6.4 Working with Public Health colleagues MCC Housing Services has helped other housing organisations realise the benefits of trauma informed working. Through the Manchester Housing Providers network, a trauma informed group has been established, working together, sharing good practice and offering training to housing providers to help them become trauma informed.
- 6.5 This year MCC Housing Services has started to incorporate this approach into their policies, ensuring that it is clear to their workforce and residents that this approach is embedded in all that they do. They also discuss trauma informed working in staff reviews and appraisals. The new Council wide Anti-Social Behaviour policy is the first policy to explicitly state that Housing Services are working towards being a trauma informed organisation.
- 6.6 The case study below illustrates the impact of this approach.

Case Study 1: Submitted by Claire Tyrell, May 2023

Client MM SWO (Support & Wellbeing Officer) LJ

Presenting Issues

- Property condition- MM was unable to keep the property clean or allow access for repairs
- Mental health – MM has a mental health condition and should be being cared for by the Community Mental Health Team (CMHT) but would not engage with them, refused access and become very agitated if they visited
- Physical health – kidney failure requiring regular and frequent dialysis. At times MM would not report for dialysis, the hospital would then phone the housing team to check up on MM, quite often this was out of hours at the weekend, or they would send an ambulance which MM refused to get in
- Engagement – lack of engagement with all services
- Self-neglect – due to the above plus poor diet.

There have been serious concerns around MM's mental health, self-neglect, property condition and engagement with services for a number of years.

Numerous crisis cleans were completed by Housing Services and the CMHT but ongoing care was always refused so a poor property condition always returned.

This was escalated to the CMHT, rather than legal action against the tenancy, due to our mental health concerns.

Case was referred from the housing officer to the Tenancy Support Team for further intensive support to try to engage with MM and escalate with the CMHT. LJ picked up the case and began trying to engage with MM – this proved difficult at first and LJ escalated her concerns to the CMHT due to the concerns around MM's mental and physical health, as MM was missing their dialysis appointments.

LJ had been attempting to visit MM with their care coordinator and MM repeatedly refused access, often coming across very aggressively. We needed access to the property to carry out the annual gas safety check - if MM didn't allow this then a court order would have been obtained. As MM agreed to allow the contractor access, LJ went to visit at the same time and MM allowed her in. Despite being extremely concerned about the property condition and MM's overall physical and mental health, she focused on engagement and getting MM to talk to her; and was able to pick up on a lot of his concerns and difficulties. LJ managed to get MM to trust her over a few visits at which she didn't attempt to do anything apart from talk to him and build a relationship.

MM responded well to this and continued to engage with LJ, with little attempt being made at this point to deal with the issues, but simply to keep MM engaging. Having gained trust and understanding using trauma informed practice, LJ was able to persuade MM to allow her to facilitate contact with the CMHT. After a visit from them, which LJ also attended, MM agreed to be admitted to hospital where he received both physical and mental health care. Whilst in hospital LJ kept in touch with MM and by working with the hospital was able to coordinate a clean-up of the property to enable MM to be safely discharged home.

How the Housing Officer used a trauma informed approach

LJ was able to build a positive relationship with MM over a short period of time, gaining his trust, creating a sense of safety and collaborating with him. Through talking to MM and listening LJ established that MM had some traumatic experiences with mental health services and the police in the past, so this was why MM had never engaged with them and was often rude and aggressive.

LJ identified concerns very quickly, ensuring a crisis clean was completed with the property. With cleaning supplies provided by LJ, MM is now able to keep this to an agreed standard. LJ established what was important to MM leading to a repair of the TV aerial so MM could watch TV.

LJ was able to support MM in rebuilding the relationship with the CMHT to ensure they were able to provide support where needed and through this mental health support MM was able to continue with dialysis treatment and taking the appropriate medication.

Outcomes from this trauma informed approach

- MM was able to access support with physical and mental health including medication and dialysis. This meant no missed appointments at hospital and no need for an ambulance to be sent on a wasted journey.

- The property condition was maintained – which meant a reduction in costs for crisis cleans and a sustainable tenancy. Nobody believed MM would be able to return to independent living but with LJ's support this became a reality.
- A reduction in the reliance on services such as A&E and GMP call outs.

By using a trauma informed approach and focusing on the person and not the issues presented MM is now undergoing the treatment they need and is able to live independently in their own tenancy.

7 Next Steps

- 7.1 Following the refresh of the Manchester ACEs and Trauma Responsive Programme objectives, we will work with our partners to develop an implementation plan.
- 7.2 Future activity will be outlined in the implementation plan, but priorities include:
- Continuing work to ensure that Manchester City Council is a trauma informed organisation and delivers trauma responsive services to residents
 - Continue to roll out multi-agency training across the city.
 - Support key sectors to implement trauma informed and trauma responsive practices into their core activity with a focus on education, health, early help, criminal justice, housing, arts and the voluntary sector.
 - Listen to the voices of lived experience and understand the needs of our diverse communities.
 - Develop specialist trauma enhanced practitioners.
 - Continue to invest in the voluntary sector to ensure that community hubs across all our neighbourhoods are trauma responsive.
 - Develop robust methods to effectively measure the impact of the ACEs and Trauma Responsive work programme across the city.
 - Continue to work alongside colleagues in Greater Manchester to support GMCA's vision of a trauma responsive City region including the development of a web portal and investment in training
 - Embedding an ACE-aware and trauma responsive approach within all aspects of service delivery within Manchester City Council by raising awareness and understanding of the agenda and ensuring that all policies and practices are trauma responsive in their approach.

8 Summary

- 8.1 Manchester has come a long way in the journey to become a trauma informed and trauma responsive City, however, there is much more that needs to be done.
- 8.2 A key focus for the work going forward is to continue to work innovatively and flexibly with individuals, families and communities who have experienced adversity and trauma to co-produce approaches, services and projects that

are ACE aware, and trauma informed. We are also focused on ensuring that the resident voice is heard and those who are underrepresented are actively engaged.

- 8.3 The ACEs and Trauma Responsive work programme will continue to support the aim of Making Manchester Fairer to tackle structural health inequalities with a focus on the social determinants of health.

9 Recommendations

- 9.1 The Committee is recommended to:

1. Note the content of the report.
2. Consider and comment on the refreshed ACEs and Trauma Informed Programme and objectives.
3. Advocate for trauma informed practice wherever possible.