

Progress against the six inequality themes identified for the Inquiry Day in 2016.

1. Pregnancy and Early Years

Suggested opportunities identified at the Inquiry Day in 2016

- *Strengthen emotional health and resilience of children and adults (in pregnancy or new parenthood)*
- *Improve access to affordable housing, and housing that is fit for purpose for young families*
- *Join up services: children/adults, transition between services (understanding information sharing), professional relationships*

What we know about young people

We have some good information about children with the worst outcomes from our Children and Young People's Health and Wellbeing Survey. However, we are aware that the limitation of this is that it only surveys children in school. A different approach would be needed to elicit the views and experiences of those not in schools or education and those in youth offending services, many of whom would be at higher risk of poor outcomes. Working with the Off the Record Youth Forum would be a good future action.

Actions we are taking

Our children's early help work is all targeted at those children and young people identified as in need of additional health input or as vulnerable / at risk by universal services. Health visitor and school nursing services prioritise their caseloads by indicators of disadvantage and risk. Those young people not identified through universal services may be slipping through and missing out on early intervention. There is a potential to be more proactive and reaching out to those we know who are at risk / vulnerable – those we know have factors in their family history, or live in certain areas.

Our settings work in the Director of Public Health (DPH) Award programme targets schools that are known to be in areas of high health need. Children's centre and youth services are cited in the areas with highest health needs and provide outreach.

Future actions

The local authority is looking at the use of routine enquiry around Adverse Childhood Experiences (ACES) to target early intervention services. Evidence shows that children who experience a greater number of these ACEs have a proportionately greater risk of poor adult outcomes (including risky behaviours, chronic conditions and early death).

As an authority we are looking at what happens to children who are identified as potential safeguarding cases but who then get classed as NFA (no further action to be taken) to see if early intervention could be given at this point. The use of ACEs and the trauma informed care approach is gaining interest in drug treatment services, the police force and so on.

2. Education and life-long learning

Suggested opportunities identified at the Inquiry Day in 2016

- Optimise the early years preventative work (under 5s), including expansion of nursery places and in particular to work with parents to encourage uptake of free child care available for 2 year olds from disadvantaged circumstances.
- Share current best practice across B&NES and coordinate more effectively the projects and initiatives for the most vulnerable families, their children and young people
- Establish an approach to promoting education and lifelong learning in service clients across all departments

What we know about people

Outcomes for disadvantaged pupils are low at every key stage when compared to similar pupils nationally, and their progress from KS1 to KS2 and from KS2 to KS4 is below both other pupils nationally and similar pupils nationally.

In addition to this, there are a number of other key groups at higher risk of poor physical and mental health, including children who are:

- from black and minority ethnic groups (including migrant families)
- with physical and learning disabilities
- who are - or are at risk of becoming - young offenders
- who are in - or are at risk of entering - the care system
- who are experiencing – or are at risk of - child sexual exploitation
- who are lesbian, gay, bisexual, transgender or questioning their sexuality
- who are being bullied or discriminated against for other reasons e.g. the way they look or their economic circumstances
- Young Carers

Actions we are taking

- Senior HM Inspector invited to attend Strategic Director's meeting with head teachers on 2nd March 2017
- Pupil Premium Review commissioned in maintained schools where the gaps for disadvantaged pupils are significantly larger than the national average

- Actively supporting the engagement of disadvantaged primary school pupils in the Children's University to raise aspirations
- There has been a focus on data training for head teachers, teachers and school governors
- Targeting of support money, for example, for a 'coasting' school to work with an 'outstanding' OfSTED rated school
- An event next week where Head at Bournville Community Primary School, Weston Super Mare to speak to about 20 schools with large numbers of FSM pupils about the good practice they have used.
- Recent funding success for asset-based development work at Foxhill

Future actions

We are running a workshop with local B&NES stakeholders and representatives of Sir Michael Marmot from the Institute of Health Equity in London to explore the issue of educational attainment for disadvantaged children further, informed by insights from around the country.

3. Fair employment

Suggested opportunities identified at the Inquiry Day in 2016

- *Ensure a multi-agency approach to engage with and support the work of The Anti-Slavery Partnership locally and regionally*
- *B&NES and its partners to agree definition of a quality job and to work with public sector partners to use our combined leverage to create and monitor delivery of quality jobs*
- *Work with partners to develop a new model of support for employers with a focus on mental health. The model developed will make the best use of local resources and existing Employer networks*
- *Better identification of people needing targeted support and better coordination of job seekers, training providers and employers through a single point of contact.*

What we know about people

- B&NES does better than national average for the gap in the employment rate between those with a long-term health condition and the overall employment rate – (the gap is 7%)
- B&NES does similar to the national average for the gap in the employment rate between those with a learning disability and the overall employment rate (Persons) – although this group still have a 66% gap

- B&NES does similar to the national average for the gap in the employment rate for those in contact with secondary mental health services and the overall employment rate (Persons) – although the gap for this group is still 64%
- Worklessness (high rates of long term unemployment) is concentrated in the most deprived wards in B&NES

Actions we are taking

- A number of commissioned programmes are already in place to provide employment support for people with learning disabilities or mental illness.
- A range of employment support activities are also in place for the wider population through DWP, the council, adult social care, Curo, DHI and a number of other organisations.
- A pilot programme of support to promote workplace mental health in SME's was delivered in early 2017.
- A programme of activities was delivered for mental health awareness week during May 2017 as part of strengthening the local approach to workplace wellbeing.
- Council offers have been contributing to and influencing the development of the West of England Employment and Skills Plan
- Delivery of 20 bed spaces of shared housing for young people under the DoD Platform for Life funding programme linked to supporting employment, training or education
- New Employment space, employment training and apprenticeships at Mulberry Park

Future actions

- A virtual employment hub is in the process of being created with additional support for local people, accessed through DWP funding for the West of England. These will include access to support through a new web tool with person to person support from employment navigators.
- Working with employers to improve workforce wellbeing and consequently productivity is an important part of this work.
- Closer integration of health and wellbeing support with employment support will be a key element of the B&NES Wellness Services transformation taking place over the coming year.

4. Healthy and sustainable places and communities

Suggested opportunities identified at the Inquiry Day in 2016

- *Improve access to public transport in less accessible areas*
- *Improve broadband coverage in homes and through free Wi-Fi availability*
- *Ensure delivery of sufficient affordable housing*
- *Change attitudes and stigma towards health and social issues*
- *Improve coordination and awareness of community activities (amongst the public and professionals)*

What we know about people

- There are a lack of affordable homes in B&NES
- Fewer people from lower income households in B&NES say there are plenty of places locally to experience nature
- Some of the areas in the district have higher than the national average number of hot food take aways

Actions we are taking

- A number of council officers have been contributing to work across the West of England to create a Joint Spatial Plan that will set out the vision for housing, employment and travel infrastructure over the next 20 years. The vision includes health and wellbeing, sustainability and narrowing the gap in health and social outcomes. So although this is a high level document it provides an important opportunity to maximise the health objectives so that the subsequent Local Plan for B&NES responds to the JSP and needs to deliver on the health and sustainability objectives.
- One of the key JSP objectives is likely to be the principles of good place-making. This aims to achieve places that are vibrant and enjoyable living and working environments, that are successful in creating economic growth, reducing carbon emissions, improving community health and wellbeing, and that address inequality of opportunity and life chances for all.
- A significant local programme is the redevelopment of the Foxhill housing area. This is one of the most deprived areas in the B&NES district, with high concentrations of social housing, some of which is in poor condition. Curo, the registered housing provider for much of the housing in the area, are in the process of redeveloping the adjacent former MOD site for a mix of market and affordable housing, which will enable Curo to reinvest and regenerate the Foxhill estate. The programme also aims to work in partnership with local organisations to maximise training opportunities, employment support and access to the natural environment surrounding the estate.
- Within BANES the Travelling Community Support Service delivered by Julian House provides an outreach service to Gypsy, Traveller & Boater communities. This service

supports people with specific health and welfare issues as well as developing outreach programmes, both on land and water. A number of successful joint working partnerships have been established with other agencies enabling them to increase engagement with these marginalised communities. The Travelling Community Support has become embedded within BANES and the surrounding local authorities and is well known of, through word of mouth and through social media.

- Two council- wide projects on air pollution are in development:
 - Awareness-raising amongst vulnerable groups in Air Quality Management Areas (AQMAs) of poorer air quality and actions they can take to reduce their exposure
 - Working with schools in Air Quality Management Areas using measurements of the personal exposure to NO₂ and PM_{2.5} to develop exposure reduction advice, promote active travel to school, raise public awareness, and support behavioural change with school children.

Future actions

- Requirement to embed the creation of sustainable and healthy places in the new B&NES Local Plan
- Introduction of a requirement to meet HAPPII compliance for all new housing for older people in the new B&NES Placemaking Plan
- Delivery of a 72 unit mixed tenure extra-care scheme at Lansdown designed to HAPPII standards
- Engagement with sheltered housing providers around the quality of the current affordable housing offer for older people, creating an environment for discussions around refurbishment or redevelopment / re-provision

5. Ill-health prevention

Suggested opportunities identified at the Inquiry Day in 2016

- *Identify sustainable funding for ill health prevention*
- *Address client dependency on health services/lack of community and individual empowerment*
- *Improve transport*

What we know about people

Higher risk or vulnerable groups have been identified and prioritised by a number of partnerships including Fit for Life (Active Lifestyles), the Tobacco Action Network and the Alcohol Harm Reduction Steering Group.

For physical activity these groups include:

- People living in geographical areas of inactivity
- 11-18 year olds (particularly females) – this is the age where levels of activity start to drop
- Families (particularly expectant mothers and those with pre-school aged children)
- Older People
- Those who are carrying excess weight in both children and adults
- Those with disabilities and long term health conditions
- Ethnic Minorities

For smoking, these groups include:

- People with a long term mental illness
- People in treatment for substance misuse
- Gypsy/Traveller community
- Young mums during pregnancy
- Routine and manual workers

For alcohol, these groups include:

- Men
- LGBT groups
- Children subject to adverse experiences eg substance misusing parents, domestic abuse
- Those experiencing mental health conditions
- Those in vulnerable housing situations or homeless
- Those living in more disadvantaged neighbourhoods

Actions we are taking

For physical activity:

Most of the commissioned interventions are targeted, or services are required to provide inclusive provision.

This includes:

- Leisure service contract requires action to be inclusive and address inequalities
- Lifestyle services are for people who meet specific criteria or are prioritised in areas of deprivation
- DPH award focussed on most deprived schools
- Wheels for All - provision for people with disabilities
- Infrastructure development s in areas of deprivation - e.g odd down cycle circuit

- Moving on up targeted intervention for pregnant women
- REACT project for older people

For smoking, much of our commissioned work is targeted at these higher risk groups, however there are also potential gaps in our approach including:

- Young people not in education employment or training (NEET) or with mental illness
- Routine and manual working men
- Ex-offenders
- Unemployed
- Complex families (via connecting families team)
- Ex-service staff
- LGBT community
- People in secondary care (hospitals, specialist services)
- Ethnic minority communities

Future actions

For physical activity:

- further engagement of front line staff to make every contact count
- greater engagement of community members to increase opportunities for activity
- greater engagement of parishes to instigate local activity
- greater provision of outreach to most marginalised communities
- greater promotion of outdoor activity and free opportunities
- development of street play opportunities
- develop link to new NDPP
- increase digital and social media offer

For smoking:

- Work with STP area colleagues to support NHS trusts to achieve a Tobacco Free NHS during 17-18. go completely smoke free estates
- Work with CAMHS service to instigate a clear pathway for smoking cessation support for young people with mental health issues
- Work with the wellness service to ensure holistic outreach service to workplaces/men
- Delivery of training and support to key settings including job centre plus, older people's services and social housing
- Gain a more detailed understanding of smoking prevalence in and support needs of BME groups

- Work with PSHE leads to develop an approach to substance misuse via schools based equalities groups and PSHE leads in schools

For Alcohol:

- Working with the 'Blue Light' services to embed best practice in harm reduction for treatment resistant drinkers
- Targeting identification and brief advice training to priority settings including older people's services, housing and the universities
- Facilitate a meeting with local agencies working with Looked after children to explore needs in relation to substance misuse.
- Work on a co-ordinated approach to health promotion work with the LGBT community - prioritising mental health, substance misuse and sexual health.

Making Every Contact Count (MECC)

- MECC is about making the most of the opportunities to make a difference to people's health and wellbeing. By supporting people to make changes to their lifestyles it is possible to prevent ill health, improve health and reduce health inequalities.
- MECC encourages a wide range of workforce to initiate very brief healthy conversations around core elements of lifestyle behaviours such as stopping smoking, increasing physical activity, reducing alcohol consumption, maintaining a healthy weight and diet and promoting mental and emotional health and wellbeing.
- We are working across the Sustainability and Transformation Plan (STP) footprint to roll out MECC to ensure a consistent and system wide approach. Using national evidence and local learning we will be working with partner organisations to implement MECC in an effective and sustainable manner.

6. Inequity in access to health services

Suggested opportunities identified at the Inquiry Day in 2016

- *Have a greater focus on populations that experience extreme exclusion to better understand their health needs and be able to determine whether they attend health services*
- *Improve transport to access healthcare services*
- *Address the long length of time that people with low to moderate mental health needs have to wait for a mental health needs assessment*

What we know about people

Local and national work suggests that health services and preventative programmes are less well used by men and those from disadvantaged areas or routine and manual trades. Age, sexual orientation and ethnicity can also play a role, depending on the kinds of services involved. For example young people might be more likely to use urgent care services rather than general practice, but less likely to take up offers of screening or health checks.

Actions we are taking

There are numerous examples of services and projects aimed at marginalised or vulnerable groups across many different health and social services locally – too many to mention here. This is reflected in the Health and Wellbeing Strategy and the CCG five year Strategic Plan. The transformation ambitions between health and social care commissioners and Virgin care also reflect these ambitions, though it is too early to judge progress in targeting services towards those most in need.

However, we don't yet have a framework of actions, aimed at the key groups with the worst outcomes and metrics to help judge the effectiveness of progress.

Uptake of the national child and adult vaccination programmes are regularly explored in a B&NES multi-agency immunisation group. As a result of the work of this group, work has gone on over the year to support a number of general practices in B&NES with lower uptake of childhood immunisations to increase their uptake.

An urgent transport service has been implemented as part of the early home visiting service in primary care to ensure patients can be transported to the RUH early in the day so that they can be assessed and hopefully returned home the same day.

Future actions

- A workshop is being planned for late November to identify what can be done collectively to reduce the differences we see between different population groups in the uptake of identified screening and immunisation programmes
- For a number of reasons, adults with learning disabilities are less likely to attend routine screening appointments than the general population. Work is ongoing to find out what the specific barriers are, and to make access to breast and bowel screening appointments easier

- The public health team based in the B&NES, Gloucestershire, Swindon and Wiltshire NHS England team are appointing project officers in each local authority area for a period of one year to help identify, understand, and address inequalities seen in the uptake of screening and immunisation programmes.
- Access to transport for hospital care is subject to a substantial review across the 12 CCGs in the South West.