
Be Well B&NES

Whole System Health Improvement Framework

July 2024

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Bath & North East
Somerset Council

Improving People's Lives



Be Well B&NES

Be Well B&NES is a key delivery route of commitment 3.2 of the B&NES Health and Wellbeing Strategy:



Priority 3: Strengthen compassionate and healthy communities

What are we going to do?

3.1 Continue to develop the infrastructure that encourages and enables individuals, organisations and networks to work together in an inclusive way, with the shared aim of supporting people in need and building strong local communities.

3.2 Enable and encourage proactive engagement in health promoting activity at all ages for good quality of life.

3.3 Develop a strategic approach to social prescribing to enable people to remain healthy and manage physical and mental health conditions.



Priority 3: Strengthen compassionate and healthy communities

Expected Outcome: Our communities are compassionate and support individuals to be healthy and well

| Strategy Objective | Action/s | Milestone and timeframe | Partnership responsible for leading delivery | Others involved in delivering action | Role of Health and wellbeing Board |
|---|---|--|--|--|--|
| 3.1 Infrastructure that encourages and enables individuals, organisations and networks to work together in an inclusive way, with the shared aim of supporting people in need and building strong local communities | Implement community wellbeing hub strategy | Community Wellbeing Hub Strategy implemented 2023-2030 (TBC) | Transformation Strategy & Governance Directorate B&NES | VCSE organisations, ICA, B&NES, health and care providers | Receive updates on progress of strategy Promote and champion relevant services |
| 3.2 Enable and encourage proactive engagement in health promoting activity at all ages for good quality of life | Implement health improvement strategy Cultural strategy to include activities that support/promote wellbeing | To update once strategy agreed Strategy agreed spring 2024 | B&NES Public Health Team Heritage Team B&NES | HCRG providers group, VCSE organisations, Primary Care Networks (PCNs) | Receive updates on progress of strategy Promote and champion relevant services and activity |

Health Improvement in B&NES: headline data

Generally good health improvement outcomes compared to national average, but space for improvement:

- **Obesity** rising, 63% of B&NES adults overweight or obese – just below England average.
- 15.9% of adults are **inactive**, doing less than 30 minutes of physical activity a week: 25,600 adults
- **Smoking** prevalence in adults currently 11.5% in B&NES, vs. 12.7% in England. Drives health inequality in specific groups
- 2021/2022 B&NES rate of hospital admissions due to intentional **alcohol** self-poisoning was 62.0 per 100,000 (England 33.7)
- **Mental health** problems, such as depression and anxiety, are relatively common in the adult B&NES population affecting around 1 in 6 adults.



Be Well B&NES system working



ONE TO ONE
MEETINGS



WORKSHOP
EVENTS



STEERING
GROUP



WORKING
GROUP



WRITING
GROUP

Be Well B&NES system partners

B&NES Council – Public Health, Parks, Housing, Community Wellbeing Hub, Culture, Childrens & Education services, Adult Social Care, Green Infrastructure, Property, The Active Way, Highways, Integrated Commissioning, Community Engagement, Research, Sustainable Transport, Planning etc

Leisure Facility Operators – GLL (Better), Dragonfly Leisure

University of Bath, Bath Spa University – Research & Sport Departments

NHS, ICB, Police, Surgeries, BANES Enhances Medical Services, The Care Forum, Healthwatch, HCRG, DHI, Fire Service

Active Partnership - Wesport

Curo, Age UK B&NES, Bath Mind

Bath City Farm, Southside, Project 28, Mercy in Action, Dorothy House

Youth Connect South West, Mentoring Plus, Bright Start CC, Action for Children

Bath Recreation Trust, Bath City FC Foundation, Bath Rugby Foundation, Bath Cricket Club, Bath Area Play Project, B&NES School Sports Partnership

The Whole Systems Approach



Whole Systems approach developed by PHE, evidence based, used across other LA's



Traditional local public health actions begin by determining the nature of health problems in advance, and from outside the “system” (eg provision of slimming world in response to rising obesity levels)

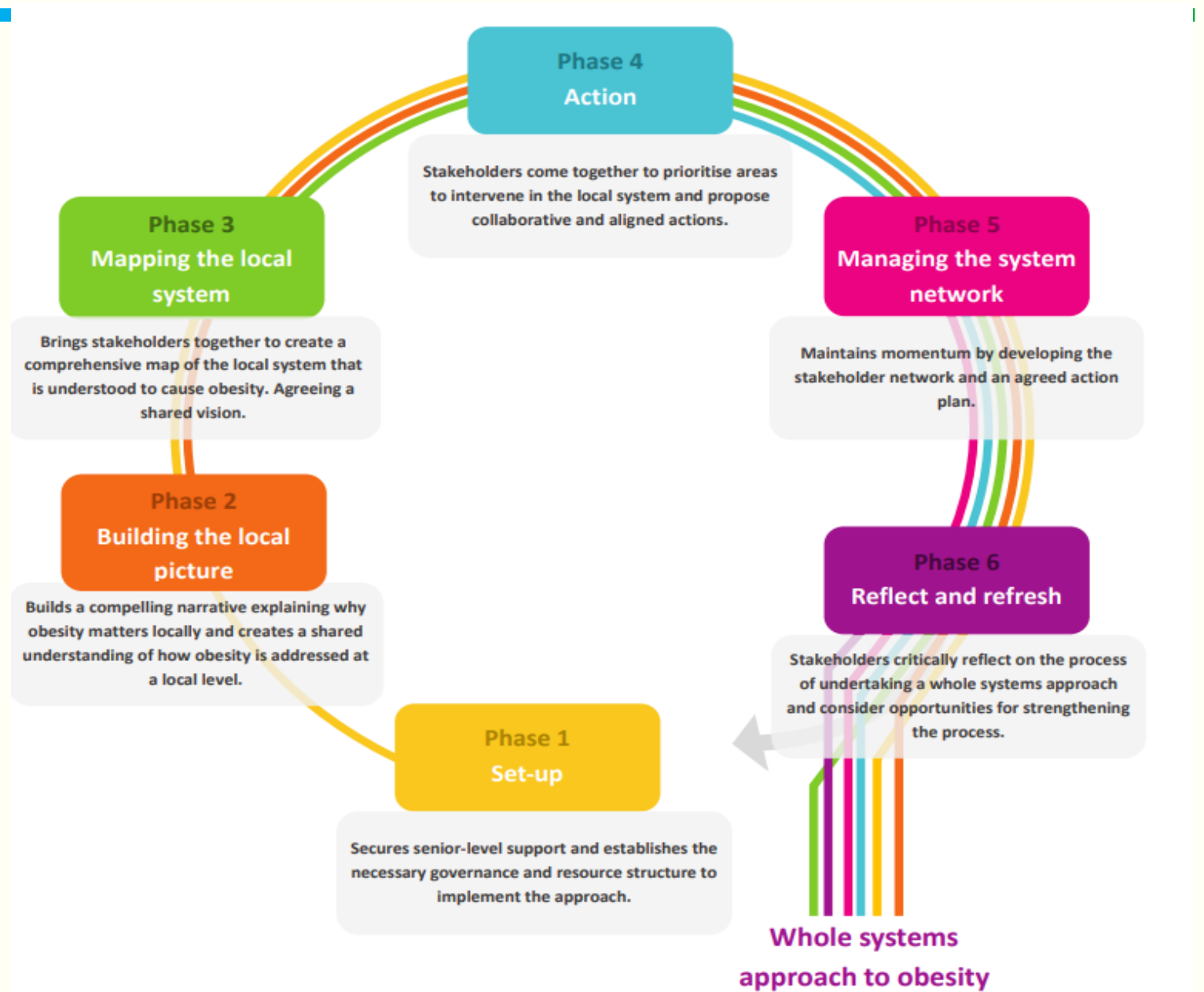


A complex systems approach starts with an understanding of how the current conditions support or harm health through active engagement with people living/ working there



It allows us to identify the ‘causes of the causes’ of poor health improvement outcomes, and make changes at different levels of the system

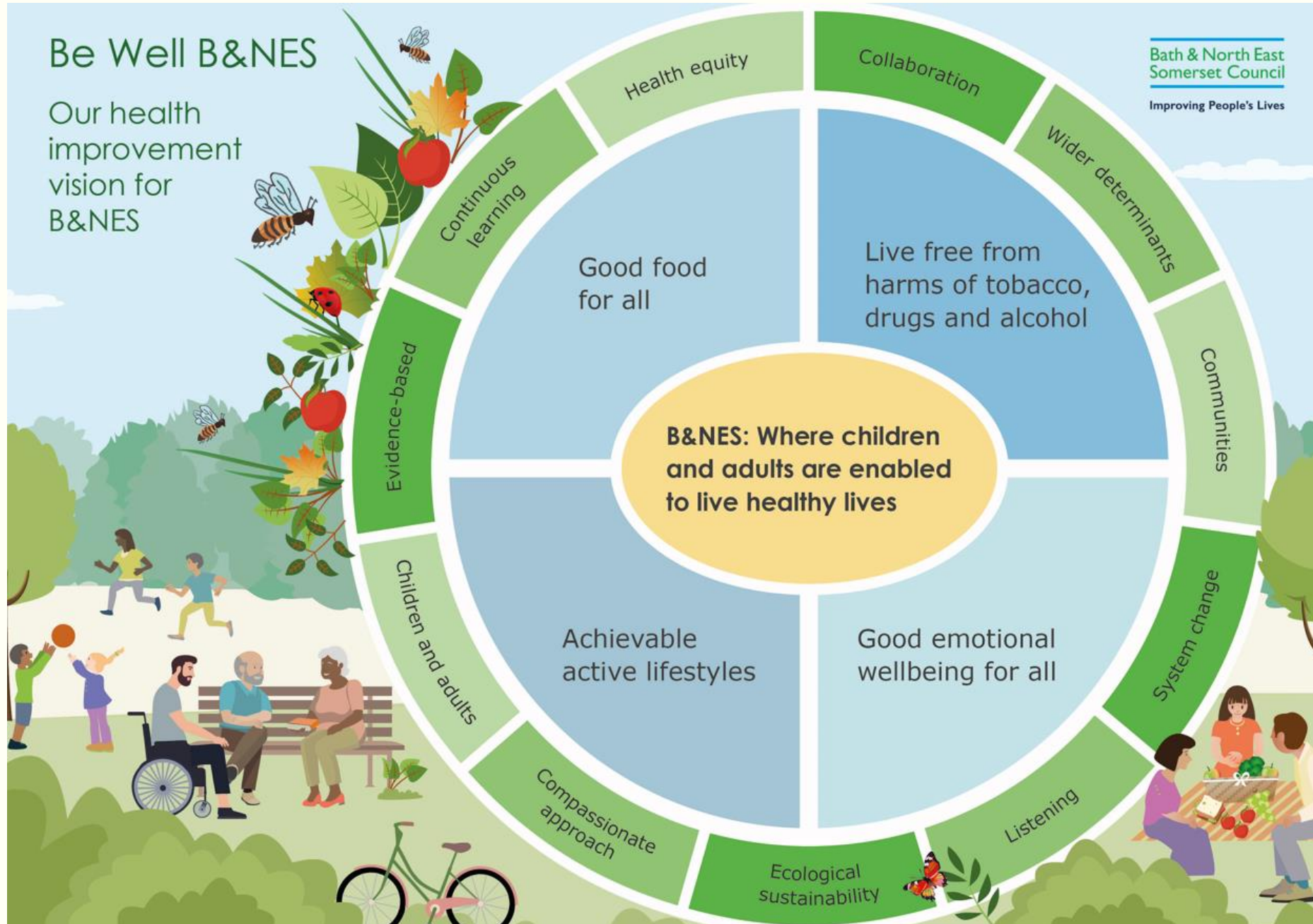
Where are we in our Whole Systems approach?



Be Well B&NES

Our health improvement vision for B&NES

Bath & North East Somerset Council
Improving People's Lives



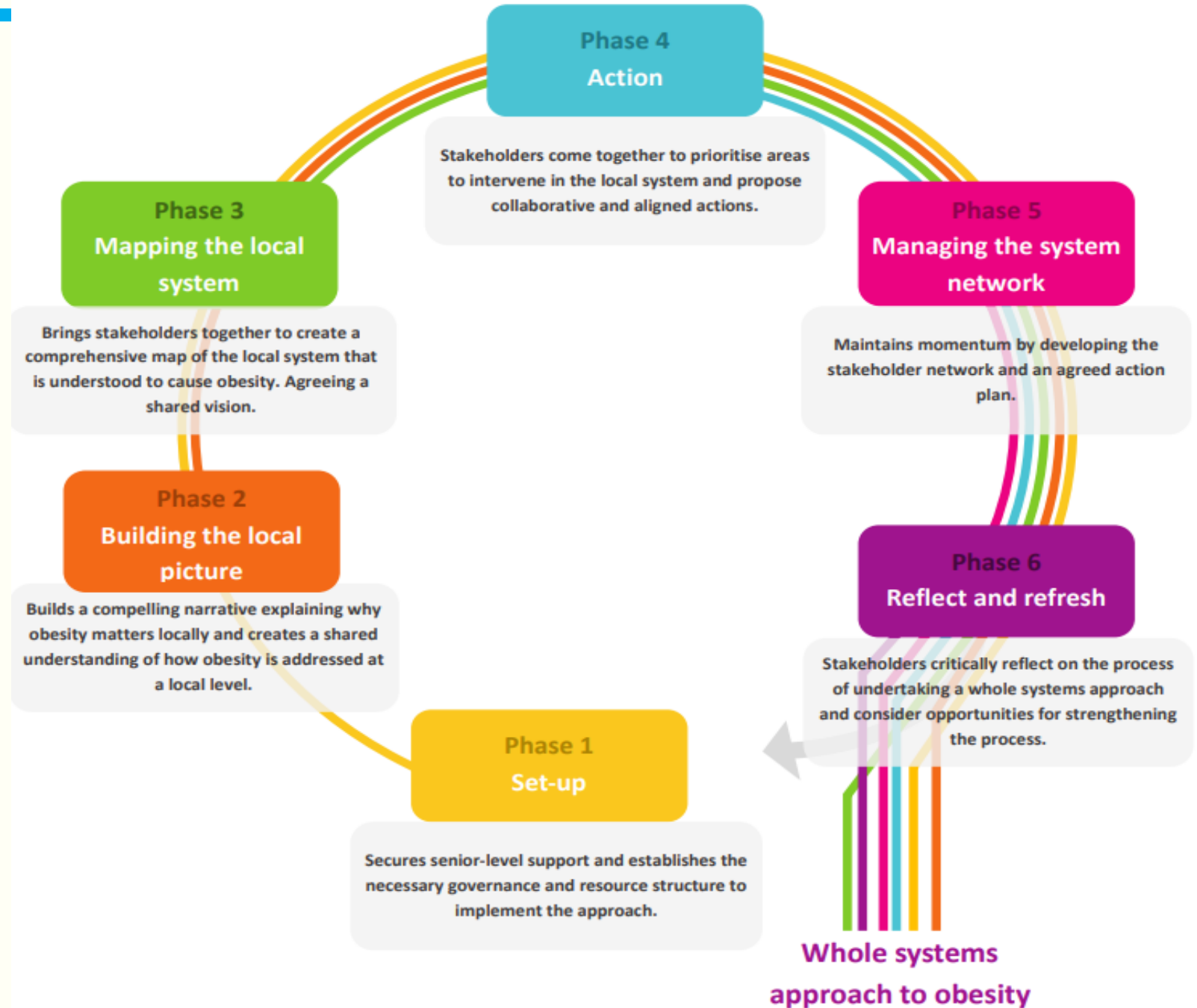


System priorities

Be Well B&NES partners have committed to:

- Listening to residents
- Working with target communities with greatest health improvement need
- Focusing on children and families at all levels of the system
- Improving the reach of existing interventions
- Providing consistent, system-wide training opportunities

Be Well B&NES: Action phase



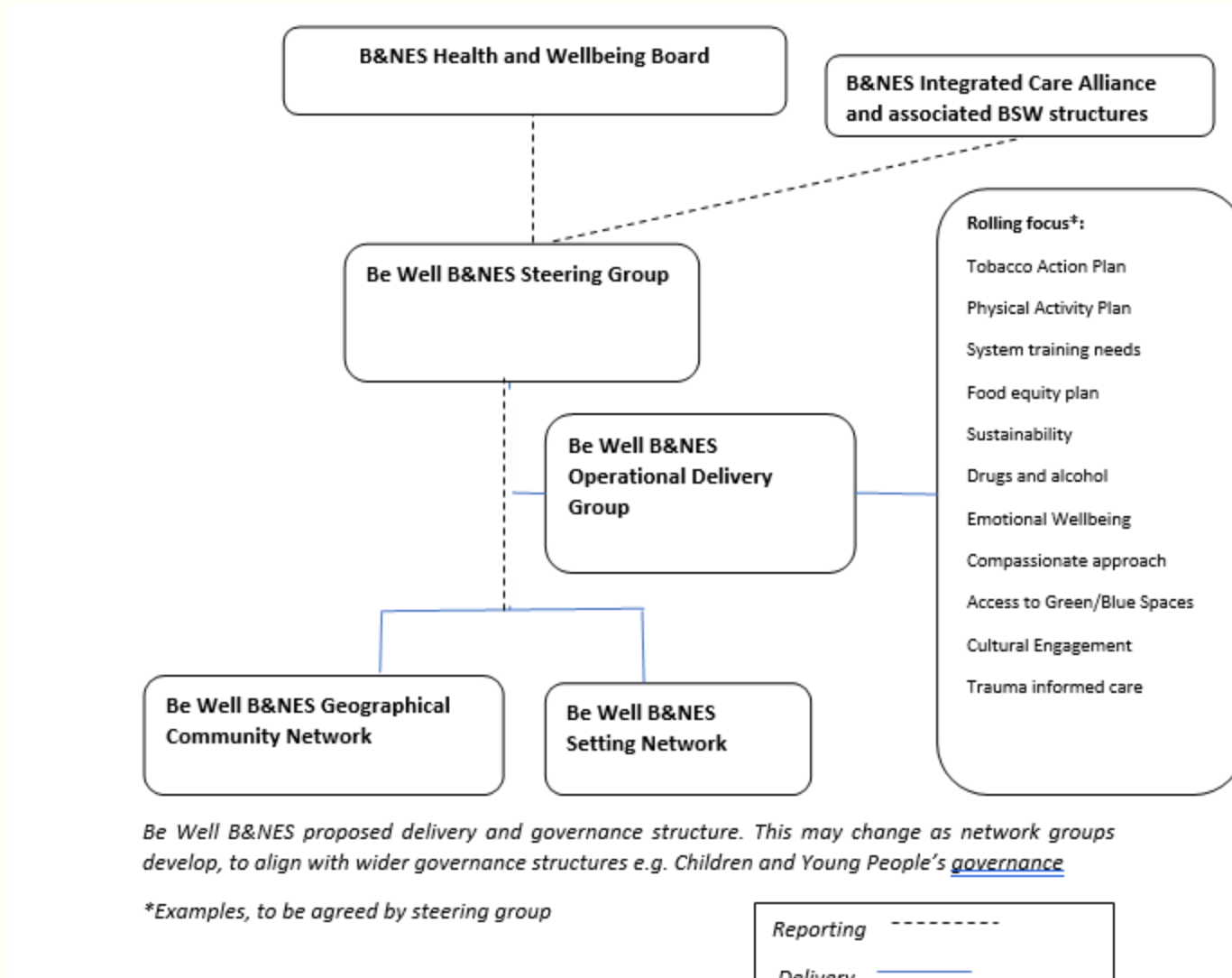


Network Groups

- Network Groups: own priorities, develop action registers, take action
- Phased approach
- Evolve over time

- 1. Setting** Network Group
- 2. Community** Network Group
- 3. Operational delivery** Network Group

Be Well B&NES delivery structure



Monitoring

- What will success look like?
- How will we monitor progress?



Be Well B&NES next steps

- Review, sign-off and publication of Framework document: July 2024
- Formation of network groups: Jul-Sept 2024
- Agree action plans: Oct-Dec 2024
- 10 year programme: regular review of network and operational groups

Today's request



Sign-off of the approach outlined in the Be Well B&NES document



Your continued support of Be Well B&NES as we move into the action phase

