

## Q4 2024/25 Exception Report on the Four Priority Areas of the B&NES Joint Health and Wellbeing Strategy (JHWS) Implementation Plan

Please refer to the JHWS: <https://www.bathnes.gov.uk/document-and-policy-library/joint-health-and-wellbeing-strategy> and to the JHWS Implementation plan: <https://www.bathnes.gov.uk/sites/default/files/BandNES%20Health%20and%20Wellbeing%20Strategy%20Implementation%20Plan1.pdf> when reviewing the report

### Priority 1: Ensure that children and young people are healthy and ready for learning and education

Date of Health and Wellbeing Board meeting this Q4 report and performance indicator set will be reviewed at: 06/02/25

#### Risk Assessment

Risk Level - RAG (Red, Amber, Green)

##### None - green

Action plan on or exceeding target  
Continue to monitor

##### Medium - amber

Some items not delivered to timeframe  
Monitoring suggests a trend line diverging from plan  
Low risk/likely to resolve

##### High – red

Action item not being delivered  
Monitoring does not evidence that sufficient progress is being made  
High risk

## 1. Sign off from Sponsor

Theme	Lead officers	Sponsor	Progress reviewed and exceptions have been reported?
1	Sarah McCluskey	Mary Kearney-Knowles	YES

## 2. Open 'Amber' and 'Red' actions from previous exception report Q2

Actions to control risk	Strategy action this relates to	Lead officer	Progress on the action	Current risk level (RAG)	Any requests to Health and Wellbeing Board?
Recognition that some services have a very strong trauma informed resilience approach which can be shared/promoted amongst the wider CYP workforce	1.2.1	Marcia Burgham  Sarah Gunner	January 2025, plans to review the current trauma information resilience training and resource available are ongoing as we identify appropriate contacts/ workstreams to enable this mapping.  Trauma informed guidance has been rewritten and sent out to all schools in B&NES and all schools that support children who are looked after. This is supported by a training offer from the education directorate. Details are available on the <a href="#">hub</a> Within the local authority we are looking to set up a trauma informed practice steering group (TIPS) to ensure that all of our practice is aligned across all of our partners.	AMBER	



Promote and encourage schools to engage in the Affordable Schools Programme.	1.3.3	Marcia Burgham	<p>Network meetings set up for 2025. The Palladium Trust have taken the Affordable Schools programme on trust wide and support has been provided to the trust lead.</p> <p>The 7 B&amp;NES schools in the trust have been offered a staff meeting (1 trust school already engaged).</p> <p>Total number of B&amp;NES schools <b>enrolled</b> in the programme is 35.</p> <p>Introduction to the programme briefing sessions are being held in mid-Jan to recruit new schools into cohort 4.</p>	AMBER	
Taking forward revised Safety Valve Plan 3 areas of focus: strengthening system of SEN support; Proactive development of local specialist provision; strengthening statutory decision making.	1.4.1	Olwyn Donnelly	The SEND & AP Advice Service is now fully recruited to and has already made contact with schools and stakeholders to build capacity and help at a pre-statutory level and ensure needs can be identified and met in a timely fashion.	AMBER	

### 3. New exception reports

<p><b>Priority ONE</b></p> <p><b>Ensure Children and Young People have the best start in life and are ready for education and learning</b></p> <p><b>Intended outcome: All our children are healthy and ready for learning and education.</b></p>	
<p><b>Strategy Objective</b></p> <p><b><i>1.1 Strengthen family resilience to ensure children and young people can experience the best start in life.</i></b></p>	

Strategy objective Action	Risk level – RAG	Reason for escalation	Actions to control risk	Success measures	Timescales	Any requests to Health and Wellbeing Board?
1.1.1 Implement Best Start in Life Action Plan	GREEN					
1.1.2 Work towards a shared trauma informed resilience approach	AMBER					
1.1.3 Ensure constant promotion of existing and new services so practitioners and families know what support is available	GREEN					

<b>Strategy Objective</b> <b>1.2 Improve timely access to appropriate family and wellbeing support</b>						
Strategy objective Action	Risk level – RAG	Reason for escalation	Actions to control risk	Success measures	Timescales	Any requests to Health and Wellbeing Board?
1.2.1 Ensure continuity of Early Help offer	GREEN					
1.2.2 New Family Therapy AWP provision.	GREEN					

1.2.3	Progress work towards a Family Hub/Multi-Disciplinary Team approach to support families linked to new Integrated Neighbourhood Team model.	GREEN					
<b>Strategy Objective</b> <b>1.3 Reduce the existing educational attainment gap for disadvantaged children and young people.</b>							
<b>Strategy objective Action</b>		<b>Risk level</b> RAG	<b>Reason for escalation</b>	<b>Actions to control risk</b>	<b>Success measures</b>	<b>Timescales</b>	<b>Any requests to Health and Wellbeing Board?</b>
1.3.1	Improve Disadvantaged Educational Outcomes Programme (IDEOP) to commission work to provide intensive support for children eligible for free school meals, Children Looked After (CLA), SEND and BAME to support them to achieve better outcomes at school	AMBER was RED					
1.3.2	Continue to work alongside schools and social care to reduce exclusions and suspensions for all children open to social care but with a specific focus on CLA and	GREEN					

Children with Protection Plans (CPP) in place						
1.3.3 Continue affordable schools work.	AMBER Was GREEN					Promote and encourage schools to engage in the Affordable Schools Programme.
<b>Strategy Objective</b> <b>1.4 Ensure services for children and young people who need support for emotional health and wellbeing are needs-led and tailored to respond and provide appropriate care and support (from early help to statutory support services)</b>						
<b>Strategy objective Action</b>	<b>Risk level</b> RAG	<b>Reason for escalation</b>	<b>Actions to control risk</b>	<b>Success measures</b>	<b>Timescales</b>	<b>Any requests to Health and Wellbeing Board?</b>
1.4.1 Retain commissioned services	AMBER					
1.4.2 Influence ICA to invest and take action to address emotional wellbeing and mental health.	GREEN					

1.4.3	Use and refresh Dynamic Support Register and Care, Education and Treatment Plans to ensure support provided is needs led and tailored to child	GREEN					
1.4.4	Improve transition processes between children and young people and adult services (Physical and MH provision)	GREEN was AMBER			Designated Social Care Officer now in post		

#### 4. Annual Priority Indicator Set Summary

Priority Indicator	Timescales	Summary Points	Comments
Gap in School Readiness: the gap in the percentage of children with free school meal status achieving a good level of development at the end of reception compared to pupils who are not in receipt of free school meals	2023- 2024	2024 EYFS Profile data shows that most children in B&NES make good progress in school and achieve their milestones. EYFSP attainment in B&NES is typically above the England average. Outcomes for the cohort of children in receipt of FSM remain have improved, and to a greater extent than the improvement for non-FSM status. As a result, the attainment gap has narrowed. However, outcomes for children in receipt of FSM remain lower than the England comparison.	The impact of the pandemic was strongly reflected in a fall in GLD outcomes for children in receipt of FSM in 2023. In 2024, this outcome is much improved, returning to near pre pandemic levels. This remains a key focus as B&NES outcomes remain below those in England. The multiagency Language for Life early communication and language pilot project, funded by St Johns Foundation, has evidenced positive outcomes for this group



		The % of the cohort in receipt of FSM remained largely the same as the previous year at 12.6% (England 17.6%).	of children over the past 3 years. In 2024-26 this will be rolled out to the Somer area.
Child development: percentage of children achieving a good level of development at 2 to 2½ years	Financial Year ending 2022	82.1% of children aged 2 to 2½ years were at or above the expected level of development in all five areas of development (communication, gross motor, fine motor, problem-solving and personal-social skills) in the financial year ending 2022	This is similar to the England average. A higher proportion of children were at or above the expected level of development for communication skills (88.5%) and a higher proportion for personal-social skills (94.1%) when compared with England (86.5% for communication and 91.2% for personal-social skills).
Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-14 yrs.), crude rate per 10,000,	Data last updated May 2024 (for 2022/23)	B&NES rate is 80.5 which is a reduction from the previous reported rate and the same as the SW rate at 80.7, but higher than the England rate of 75.3	B&NES Injury Prevention Partnership continue to meet quarterly, and targeted campaigns are circulated to key professionals and stakeholders supporting children, young people and parent/carers.  A request has been made to colleagues in the RUH to work collaboratively to identify pathways to share intelligence and understanding regarding injury presentations at A&E and those more likely to result in hospital admissions.
Hospital Admissions as a result of self-harm (10-24 years), DSR (directly	2022/23	B&NES admissions 515.1 per 100,000 compared to 319 admissions per 100,000 across England.	Nationally, the rate of young people being admitted to hospital as a result of self-harm, between 2016 and 2020, is not significantly

standardised rate) - per 100,000			changing, and this is also the case in Bath and North East Somerset
Number of mothers known to be smokers at time of delivery as a percentage of all maternities with known smoking status	2023/24	2022/23 PHE Tobacco Control Profiles SATOD (smoking at time of delivery data for B&NES was 7.7% The South West was 9.2% and England is sitting at 8.8%	In 2023 <a href="#">Saving Babies Lives Care Bundle</a> was published, providing evidence based best practice for providers and commissioners of maternity care across England.