Priority 3: Strengthen compassionate and healthy communities

1. Sign off from Sponsor

Theme	Lead officers	Sponsor	Progress reviewed and exceptions have been reported?
3	Amy McCullough	Becky Reynolds	Yes

2. Open 'Red' actions from previous exception reports - NONE

3. New exception reports

LEAD	LEAD OFFICER: AMY McCULLOUGH Priority THREE Strengthen compassionate and healthy communities						
Strategy Objective 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							
Strate	egy objective Action	Risk level – RAG	Reason for escalation	Actions to control risk	Success measures	Timescales	Any requests to Health and Wellbeing Board?
3.1.1	Implement Community Wellbeing Hub (CWH) strategy	AMBER	CWH Business Plan in place and the CWH is delivering well.	Both the Council and ICB have agreed to use BCF to partially fund the CWH beyond March 2025 (subject to approval of	Recommended budget secured through BCF governance.	BCF agreed for April '25 to end of March '26.	For HWB members to champion the CWH as an approach that

To note: There is not a specific CWH strategy document. There is a Business Plan, which has been developed by the CWH Partnership,	RAG rated Amber because use of Better Care Funds Conditions and	planning) and including (in principle) if further national BCF is made available beyond March	Needs to be agreed beyond March '26	delivers on integrated neighbourhoods and prevention,
and there is an Outline Business	metrics are not yet	2026.	once further	and to support
Case. The latter has been led by	confirmed for		national	the realisation of
Council colleagues and developed	25/26 and funding		funding	opportunities to
with the CWH Partnership and wider	for the CWH		confirmed.	align the CWH
partners, and it sets out the	beyond March			with other front
strategic, economic, financial and	2026 is not able to			doors across the
commercial case for a CWH.	be agreed – Better			system.
	Care funding has			To support the
For information about the CWH see:	reverted to 1 year			use of core
https://communitywellbeinghub.co.uk	confirmed funding			funding for the
	(not 2) with			CWH where this
	funding for further			is possible in the
	years not yet			future.
	confirmed.			

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

Strategy objective Actio	Risk level level – RAG	Reason for escalation	Actions to control risk	Success measures	Timescales	Any requests to Health and Wellbeing Board?
3.2.2 Implement Be Well B – the Whole System Improvement Framev	Health (based upon		To note: Progress is being made on the development of the community aspect of the Be Well B&NES work, which is taking more time than anticipated.			

	network group)				
3.2.3 Cultural strategy to include activities that support/promote wellbeing	GREEN	To note: Audit on cultural activity across B&NES undertaken, which with other evidence such as findings of the LGA Cultural Peer Challenge that took place in 2023, will be used to inform health and wellbeing content for the new Culture Strategy. An initial draft strategy (to engage with stakeholders on) will be drafted by the end of this financial year.	Key products developed, including the Strategy, indicator set, and qualitative measures.	Cultural Plan (2 year) Strategy to be developed by end of 25/26	For members to flag any funding opportunities to support the alignment of culture and health and wellbeing outcomes

Strategy Objective
3.3 Develop a strategic approach to social prescribing to enable people to remain healthy and manage physical and mental health conditions (cross ref to ICA's priorities 2,3 and 4 and cross cutting themes)

Strategy objective Action	Risk level RAG	Reason for escalation	Actions to control risk	Success measures	Timescales	Any requests to Health and Wellbeing Board?
3.3.1 Establish a framework for social prescribing across B&NES – include mapping of existing services, identification of gaps in provision and develop a shared definition of what	GREEN			Social Prescribing Project Manager in post, scoping work for framework complete, and	2024/25	Due to be discussed at the May HWB – any asks will be made then

social prescribing means in B&NES		draft framework has	
		been developed.	

4. Annual Priority Indicator Set Summary

Priority Indicator	Timescales	Summary Points	Comments
Prevalence of smoking among persons aged 18-64 years in the routine and manual group	2018-2022	Smoking in this demographic group was lower than the England average during 2020 and into the first part of 2021, but data for 2022 and 2023 shows an increase above the England average; as at April 2023 smoking prevalence of 28.9% for B&NES compared to 19.5% for England.	During 2020 and 2021 the survey methodology was changed due to COVID. Government announced additional funding for LA's from April 2024 to enhance local stop smoking support and access to free vape kits for smokers (from Dec 23 – March 25). This will increase capacity locally to focus on this target group.
Percentage of adults who feel lonely often/always or some of the time (aged 16+)	2020	As at December 2020 the percentage of adults who felt lonely often/always or some of the time was 26.8% compared to 22.3% for England.	To note: Based upon survey data and so a sample of residents.
High ratings of anxiety (% adults 16+)	2012-2022	The percentage of adults in B&NES with high ratings of anxiety are higher than the England average; 23.5% in B&NES compared to 22.6% for England, though not statistically significantly so. 22/23 data show the same trend – with self reported anxiety at 26% for B&NES and 23.3% nationally. Over the last ten years the B&NES average has generally been above the England average with a few exceptions.	To note: Based upon survey data and so a sample of residents. Anxiety increased during the Covid-19 pandemic.
Percentage satisfaction with local area as a place to live	2016-2022	As at December 2022 84.3% of B&NES residents were satisfied with the local area as a place to live (no England comparator).	To note: Based upon survey data and so a sample of residents.