

# Joint Health & Wellbeing Strategy 2021-25

## Contents

1. Intro
2. Vision
3. Strategic approach and objectives
4. Ambition to reduce inequalities
5. Ambition for a place-based approach
6. Related System-wide Strategies and Issues
7. Strategic Principles for delivery
8. Action plan
9. Monitoring and evaluating impact
10. Next steps

Appendices:

- A. Some examples of known inequalities locally
- B. Action Plan

## Introduction

The Health and Wellbeing Board is a statutory committee of South Gloucestershire Council set up in 2013 under the Health and Social Care Act 2012.

It aims to provide leadership to achieve, for all ages, improvements to the health and wellbeing of the people living and working in South Gloucestershire. The Board is responsible for the production of the Joint Strategic Needs Assessment (JSNA)<sup>1</sup>, which provides an assessment of the current and future health and social care needs of the local community. The information gathered through the JSNA underpins the priorities for the South Gloucestershire Joint Health and Wellbeing Strategy. The Healthier Together Integrated Care System is required to have regard to the JSNAs JHWSs for South Gloucestershire as well as Bristol and North Somerset.

Further information about the Board, including its remit, terms of reference, and what it can and cannot do, is available on the Board's website: <http://www.ourareaourfuture.org.uk/health-and-wellbeing-board/>.

This is the South Gloucestershire Joint Health & Wellbeing Strategy (JHWS) for 2021-25 which guides the strategic direction of the Board itself.

---

<sup>1</sup> <https://www.southglos.gov.uk/community-and-living/stronger-communities/community-strategy/joint-strategic-needs-assessment-jsna/>

This strategy should be used by community organisations and other partners to identify and align actions, influence decision making and enable them to work closely with the Board.

## **Vision**

The updated vision of the Joint Health and Wellbeing Strategy, emphasising a focus on reducing inequalities and a local South Gloucestershire 'place-based' approach, which is owned by all members of the Health and Wellbeing Board, is as follows:

*All people in South Gloucestershire have the best start in life, live healthy and happy lives and age well in supportive, sustainable communities. Service partners will work with residents and service users to provide accessible and compassionate services. People will feel encouraged, enabled and inspired to take responsibility for their own health and wellbeing.*

*We will work with partners at a local community, South Gloucestershire 'place', and wider health and care system level to recognise and reduce inequalities in South Gloucestershire. This will help us to do the best for our communities and support people to lead their best, healthiest lives. Eliminating inequalities will be everyone's business.*

## **Strategic approach and objectives**

This strategy is a refresh of the previous strategy (2017-21) which maintains a focus on the four previous collective areas of action, renamed the Strategic Objectives. These four identified areas enable the Board to lead, influence and align the system to realise these objectives in South Gloucestershire:

1. Improve educational attainment of children and young people, and promote their wellbeing and aspirations.
2. Promote and enable positive mental health and wellbeing for all.
3. Promote and enable good nutrition, physical activity and a healthy weight for all.
4. Maximise the potential of our built and natural environment to enable healthy lifestyles and prevent disease.



In addition, this refreshed strategy reinforces a focus on the Board's leadership role in reducing inequalities and taking a place and community-based approach.

## What do communities tell us?

In the process of developing the strategy in early 2021, the Board reached out to member organisations and partners to understand what role the Board should take and how it could best serve the local population. This helped the Board develop certain aspects of the strategy.

There were certain themes arising from the community engagement work, including:

- People should be seen as a whole person in a whole community, taking into account how their history and their present impact on their future (for example, trauma-based approach)
- People recognise that not everyone has equal access to information, services or care and this inequity can be for a range of reasons which need to be addressed
- Information should be easily accessible in a way that is understandable including for those who are digitally excluded from online communication
- The recognition that wider determinants, such as good quality housing, accessible public transport, reduction of social isolation and employment and training opportunities, are key factors to improve health outcomes

- Some inequalities remain hidden because current methods of data collection and analysis are inadequate.

The development work by the Health and Wellbeing Board, taking into account this community engagement work, has refined the approach and ambitions for the Strategy as set out below.

## Ambition for reducing inequalities

Inequalities can manifest in many ways and are often linked to each other, which magnifies their impact. Social inequalities like income gap, educational opportunities and racial inequalities, are often linked to environmental inequalities such as access to green spaces and good housing. In turn, these are linked to and influence, health inequalities where people may have poorer health outcomes and health care access.

Health inequalities are sometimes documented between population groups across at least four overlapping dimension:

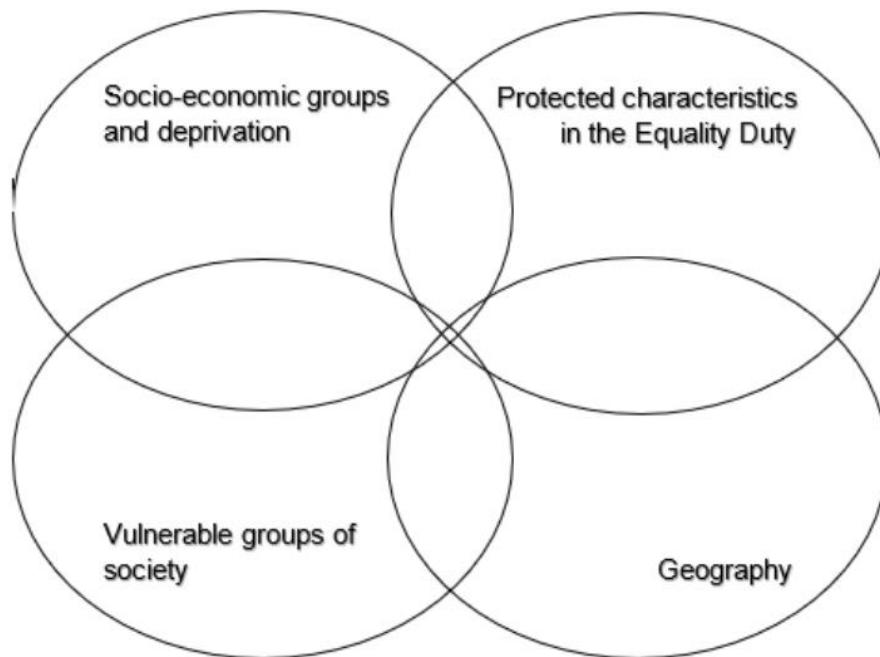


Figure 1. Groups usually considered for health inequalities.<sup>2</sup>

The Marmot Review 10 years on<sup>3</sup>, published in February 2020, highlights that national inequalities in life expectancy, especially for women, have increased since 2010. There is also a persistent strong relationship between deprivation measured at the small area level and healthy life expectancy at birth (the poorer the area, the worse the health).

<sup>2</sup> [Place-based approaches for reducing health inequalities: main report - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/854216/place-based-approaches-for-reducing-health-inequalities-main-report.pdf)

<sup>3</sup> [Health Equity in England: The Marmot Review 10 Years On | The Health Foundation](https://www.healthfoundation.org.uk/marmot-review-10-years-on)

Many people in South Gloucestershire live healthy lives that are full of opportunity for them to achieve their goals and those for their families. However, this can mask or hide inequality or make people less likely to recognise it. The South Gloucestershire health inequality gap is widening. This means that many people in our communities will have reduced opportunities for good economic, physical and mental health and wellbeing and to thrive.

## Ambition for a place-based approach

Given that inequalities stem from a complex range of causes, a joined-up, place-based approach is needed to tackle this complexity. This approach takes advantage of local leadership, partnerships and community expertise and builds on what is already available within the local area to tackle inequalities and improve health and wellbeing.

### Components of the Population Intervention Triangle

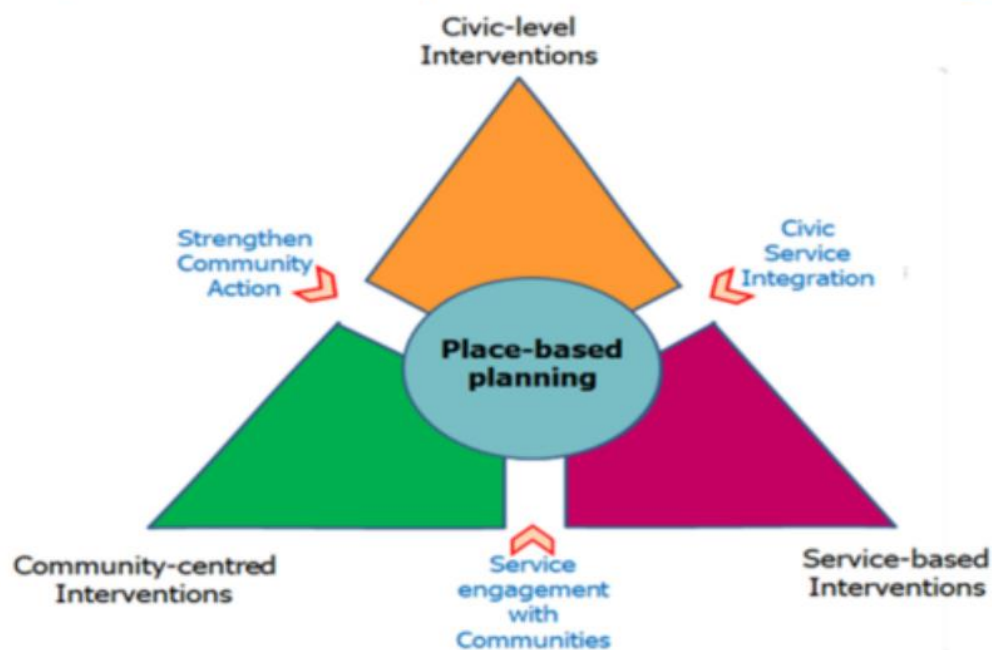


Figure 2. The Population Intervention Triangle model (PIT).

The Population Intervention Triangle is a place-based approach, developed by Public Health England<sup>4</sup>, to support cross-organisational working at the strategic place-based level. It aims to achieve measurable population level change in health and wellbeing outcomes, addressing health inequalities between and within local geographies and communities. To be effective, system leadership and planning is needed to implement action on civic, service and community interventions.

<sup>4</sup> [Place-based approaches for reducing health inequalities: main report - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/614446/place-based-approaches-for-reducing-health-inequalities-main-report.pdf)

This approach is not limited to geographical communities; it is equally about communities of interest and experience such as communities of people with protected characteristics.

The Health and Wellbeing Board is well-positioned, as a local system leader, to own and prioritise the whole agenda of addressing inequalities.

## **System-wide Working, Strategies and Issues**

The Health and Wellbeing Board has a unique role in the strategic landscape in South Gloucestershire and wider area to work collaboratively and lead system-level working with partners and organisations that operate locally.

It is necessary to note this strategy has been written at a time of significant challenge and change in the health and care system in South Gloucestershire and across the country. Therefore, whilst the strategy is written with the next four years (2021 to 2025) in mind, the Board will re-evaluate its relevance sooner in light of developing changes impacting on its role as required.

In line with the place-based Population Intervention Triangle above, the Board will work closely with the following structures:

### **Local and regional structures**

*South Gloucestershire Council* – The Director of Public Health is a member of the Board and, along with other officers, ensures that this strategy is complementary to, reflected in and aligned with SGC policy and strategy development.

*Town & Parish Councils* - The TPCs are key to local knowledge and influence in communities and are important partners in tackling local issues in a locally acceptable way

*The South West Inequalities Board* is now in place and HWB will ensure alignment to any national and regional frameworks that are developed.

### **Community structures**

*Communities* – Our greatest asset in South Gloucestershire is its people. The Board will actively respond to and seek feedback from community groups and insights offered to the Board who will be best placed to improve our understanding of inequalities and ways to reduce them.

*VCSE organisations* – Key to the place-based approach are the community centred interventions. VCSE organisations are the main connection to our communities. They are key partners in ensuring that our work to reduce inequalities is based on real engagement with our communities and what is important to them.

## **Health & Care Services**

The new Bristol, North Somerset, South Gloucestershire (BNSSG) Integrated Care System (ICS), established in December 2020, has evolved from the previous Sustainability and Transformation Partnership Healthier Together. ICSs bring together NHS providers and commissioners and local authorities to work in partnership in improving health and care in their area and are given a statutory footing through legislation. Integrated Care Partnerships (ICP) are the place-based provider alliance for integrated service provision. South Gloucestershire will have a single ICP which is co-terminus with the South Gloucestershire HWB and local authority boundaries.

*Healthwatch* – Healthwatch has the statutory duty to promote and support the involvement of local people in the commissioning, the provision and scrutiny of local care services. It enables local people to monitor the standard of provision of local care services and whether and how local care services could and ought to be improved. They obtain the views of local people regarding their needs for, and experiences of, local care services and importantly to make these views known. Their research is conducted in co-production with communities to highlight issues and inform change.

### **Relevant Strategies**

*The Council Plan* - As strategic leaders, responsible for the health and wellbeing of the local population, the Board supports the South Gloucestershire Council Plan 2020-2024 “to work together to take action to tackle the challenges of the climate and nature emergency, to reduce the inequalities gap, improve health and wellbeing and deliver value for money.”

*The Sustainable Communities Strategy*, developed by the multi-agency South Gloucestershire Partnership, has an overarching strategic role across a range of diverse themes, including economic improvement and community development. Health and wellbeing is key to these themes and therefore the two Strategies work together to ensure that information and action is shared.

In addition, the HWB is aware of and takes into consideration a range of strategies from the Council and partner organisations, this includes but is not limited to: the Early Help Strategy, the Climate Change Strategy, the Carers Strategy, the Housing Strategy.

### **Issues of note:**

*Covid-19 Pandemic:* Covid-19 has shone a light on the existing health and wider inequalities that exist in society. It is increasingly clear that Covid-19 has had, and will continue to have, a disproportionate impact on many individuals and communities who already face disadvantage and discrimination.

The ‘Build Back Fairer’ Covid-19 Marmot review<sup>1</sup> highlights that inequalities in social and economic conditions before the pandemic contributed to high and unequal death toll from Covid-19. It also emphasises that to reduce health inequalities, exacerbated

by the pandemic, will require long-term policies with equity at the heart such as this strategy.

As a result of acute Covid-19 infection some people are suffering from 'Long Covid', the long-lasting implications of which are not fully understood. In addition, there are potentially significant impacts at a population-level which will require additional community-based care, rehabilitation and mental health programmes, and certain communities will likely be disproportionately affected.

The Board will continue to reflect the short, medium and long-term impacts of Covid-19 and make the recovery from the pandemic and restoration of services a central part in tackling health inequalities and their wider determinants.

*Climate and Nature Emergency:* South Gloucestershire Council declared a Climate Emergency on 17<sup>th</sup> July 2019, pledging to provide the leadership to enable South Gloucestershire to become carbon neutral by 2030. A number of the HWB partner organisations have also declared Climate Emergencies.

In addition to the actions within the 'Maximise the potential of our built and natural environmental to enable healthy lifestyles and prevent disease', the JHWS action plan includes overarching climate and nature related strategic actions where the HWB and its members can take a leadership role in championing this area of work and preventing further widening of inequalities.

## Strategic Principles for delivery

The following are strategic principles that all organisations represented at the HWB in South Gloucestershire sign up to in order to bring about the required cultural and system changes that are needed to tackle inequalities. These will help to create the environment for transformational change.

- **Champion Fairness**

We will champion and fight for fairness and will not accept inequalities in any form.

- **Ask, and be asked, difficult questions**

It can be challenging to understand inequalities. We will not shy away from difficult questions and we will be brave in our decision making. We will be open to challenge. All options to improve inequalities, including radical change, will be considered and nothing dismissed without valid consideration.

- **Be measurable**

All actions should have some way of showing their impact. In some cases this may be quantitative with outcomes that can be counted, and others may be qualitative where impact is captured in a narrative way; or a combination of both. There should be a focus on outcomes, rather than outputs.



- **Understand data**  
We will continue to gather and analyse quantitative and qualitative data from a range of sources to help us to understand where inequalities currently exist and where they may emerge or widen. Evidence of changes in health experiences and outcomes may take a long time to appear, be they beneficial or detrimental, so we will use interim data and information wisely to inform our 'direction of travel'.
- **Understanding, engaging with and promoting lived experience**  
We will work together with our communities to understand what their lives are like and what is important to them. We will appreciate the skills, knowledge and experiences that communities hold and let this guide the focus of the Board.
- **Focus on prevention**  
We recognise the importance of addressing wider socioeconomic determinants across the life course. We will work to shift the focus of our system from treatment to prevention and early intervention by understanding and responding to the causes of inequalities, as well as recognising the symptoms.
- **Focus on a Sustainable System**  
We will focus on developing a joined up system based on having a shared vision and language and building on good practice. Our vision is about the long haul, capitalising on, but not dependant on fads, fashion and policy priorities.
- **Work in Partnership**  
Reducing inequalities is everyone's business, so actions should be local relevant and locally owned – to enable co-production and delivery of solutions in partnership with agencies and communities.
- **Be aspirational yet realistic** – we can inspire and enable real change; this must relate to our aims and ensure that realistic measures can be adopted.

## Action Plan

The high level action plan can be found in Appendix B. This sets out actions that will guide the Board's focus and work throughout the life of this Strategy.

These actions are intentionally broad and high-level to ensure that the Board maintains oversight and acts as a leader setting aspirations and strategic direction rather than getting drawn into details of individual programmes or scrutiny roles which other committees and processes are better placed to achieve.

A more detailed action plan will accompany the high level action plan. This will be a live document, with named lead(s) for each section, which is regularly updated and published ahead of public HWB meetings on the website.

Implementation of these actions will be key to delivery of the vision and objectives of this strategy. The Health and Wellbeing Board will oversee and drive the implementation of the strategy through its member organisations and partnerships. Careful consideration has been given to where and how the Health and Wellbeing Board can add value to existing work to achieve better outcomes through the strategy.

## **Monitoring and evaluating impact**

The Health and Wellbeing Board has a leadership role and oversight of all aspects of health and wellbeing in South Gloucestershire and yet it is not responsible for any commissioned activities. Therefore, it can be challenging to monitor the impact of the Board's activities. This section sets out the approaches to monitoring the Board's actions to ensure we are making a difference.

### **1) Monitoring our action plan:**

Each of the four strategic objective areas have suggested focus areas for the Board and the progress to achieve these will be monitored. If the Board itself does not have direct influence, its role is to offer strategic leadership to ensure that member organisations are progressing work towards meeting these actions. Evidence supporting the actions will be submitted to the Board so that they can be reviewed in turn at quarterly Board meetings. Progress will be monitored and any barriers or challenges will be highlighted and addressed.

### **2) Reflecting the BNSSG Population Health Outcomes Framework**

As we adapt to working within integrated care systems it is important we evaluate the role of the Health and Wellbeing Board in this new way of working. The Healthier Together Population Health, Prevention and Inequalities workstream is developing an ICS-level Population Health Outcome Framework. The Board will work to reflect this framework, with a focus on a place-based approach relevant to our local population.

### **3) Feedback from community health & wellbeing**

Using diverse sources of Council and partners' public engagement work the Board will be able to keep a sense of the health and wellbeing issues that are important to the local population. Brief summary reports from a range of sources such as the crime and disorder surveys, community cohesion work, online pupil surveys and completed needs assessments in related topic areas will be presented to the Board for review.

The Board will be aware, and take advantage of, existing opportunities for community engagement across South Gloucestershire through the Council, Healthier Together ICS, ICP, and other partner organisations. These may be changing mechanisms given recent reforms and the Board will be adaptive and take this into consideration.

The Board will be more visible to partner and member organisations, the Council and members of the public by responding to issues and celebrating successes. In turn, this visibility will hopefully encourage wider active participation and engagement with the Board to ensure it supports needs of our local population.

### **4) Evaluating the Board's role and function:**

In addition to actions for each focus area, there is a need for a more nuanced and reflective assessment of how well the Board is acting to represent the needs and aspirations of Board members, partners, communities and individuals in South Gloucestershire. This is especially important given the emerging landscape of ICS and ICP governance structures.

Board members and the partners they represent are encouraged to actively engage with the Board's activities and task and finish groups to achieve this strategies' objectives. Board members should develop organisational workplans to ensure maximum opportunity for impact and strategic alignment. Attendance at Board meetings will be reviewed and monitored. In line with our principles of 'ask difficult questions' and 'work in partnership', the Board will actively seek feedback from Board members through a quality assurance process at least once a year.

The quarterly HWB meetings are opportunities for public participation, alongside other mechanisms, and the degree of engagement at these meetings will be monitored. This will assess whether we are fulfilling our role and be open to challenge and scrutiny where we can have greater impact.

## **Next steps**

The purpose of this strategy remains for the South Gloucestershire Health and Wellbeing Board to continue to be accountable to our local population. It will be flexible, adaptive and keep our aims and objectives in clear view regardless of the changes to the health and social care landscape or other challenges. The strategy will be in place for four years from 2021 to 2025; the Board will continue to evaluate it and its actions to ensure it is best placed to respond to current and future challenges and opportunities.

## Appendix A: Some examples of known inequalities locally

The following are some examples of known current inequalities in South Gloucestershire. This is not by any means a full picture of inequalities, rather they are just some of the headlines that help us to understand the challenges and help the Board to focus their actions and strategic influences.

### 1. Improve educational attainment of children and young people, and promote their wellbeing and aspirations.

Children's education and skill development is essential for their own wellbeing. Learning ensures that children develop the knowledge and understanding, skills, capabilities and attributes that they need for mental, emotional, social and physical wellbeing now and in the future. Educational attainment is influenced by both the quality of education children receive and their family socio-economic circumstances. Clear inequalities are apparent, as demonstrated by the following points using South Gloucestershire data from PHE<sup>5</sup> and Local Government Inform<sup>6</sup>.

- At all stages of education, as measured by formal assessments at foundation stage, key stage one, key stage 2 and key stage 4, pupils who are eligible for free school meals perform worse than all pupils in total.
- The gap between the attainment of all pupils and those with free school meals is slightly bigger in South Gloucestershire compared to national and regional averages and has been showing no sign of improvement over the past 4-5 years.
- Children who live in the most deprived areas of South Gloucestershire make less progress between key stage 2 and key stage 4, and are more likely to get lower attainment 8 scores, than children who live in the least derived areas.
- Children in care achieve substantially lower average attainment 8 scores compared to the average for all pupils in South Gloucestershire.

### 2. Promote and enable positive mental health and wellbeing for all.

The national prevalence of mental health conditions is increasing over time with 1 in 4 people experiencing mental health issues each year.<sup>7</sup> Poor mental health impacts on individuals and their families, in lost income, lower educational attainment, quality of life and a much shorter life span.<sup>8</sup> There is limited prevalence data locally in the community by sociodemographic groups or areas of deprivation.

- The Online Pupil Survey suggests that secondary school young people who identify as LGBT and primary school children with SEND (Special Educational Needs and Disabilities) report worse wellbeing scores.
- Over 10 years, the rate of hospital admissions for mental health and behavioural conditions in South Gloucestershire has increased, with the

---

<sup>5</sup> [Child and Maternal Health - PHE](#)

<sup>6</sup> [Data and reports | LG Inform \(local.gov.uk\)](#)

<sup>7</sup> <https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf>

<sup>8</sup> [Mental health statistics - MHFA England](#)

highest rate increases seen in areas of highest deprivation leading to a 83% increased gap between most and least deprived areas.<sup>9</sup>

- Nationally, it is well recognised that people from Black, Asian and Minority Ethnic (BAME) communities may face specific issues relating to mental health and access to mental health services.<sup>10</sup>

### 3. Promote and enable good nutrition, physical activity and a healthy weight for all.

The prevalence of people who are overweight and obese in England has increased markedly in recent decades. Excess weight is associated with many health problems. Obesity is influenced by the physical environment – the nature and density of fast food outlets, the availability and pricing of healthy and unhealthy foods, the presence, quality and accessibility of infrastructure for walking and cycling, availability of green space and opportunities of leisure time physical activity.

- Obesity disproportionately affects people from the most deprived social groups and prevalence varies considerably by age, sex and ethnicity.
- NHS digital have data on the number and rate of hospital admissions where obesity is a factor.<sup>11</sup> In 2018/19 there were 1,615 admissions per 100,000 population in England but in South Gloucestershire the figure was 2,233 per 100,000.
- Over 10 years, the rate of hospital admissions with a mention of obesity has increased and highest rate increases seen in areas of highest deprivation leading to a 218% increased gap between most and least deprived areas.
- The Online Pupil Survey reports that girls do less physical activity than boys, and that younger children do more exercise than older children.

### 4. Maximise the potential of our built and natural environment to enable healthy lifestyles and prevent disease.

Geographical barriers or access to services and poor quality housing are important 'wider determinants of health'.

- People living in rural areas within South Gloucestershire face more barriers to services such as schools and health services. Where-as people living in urban areas of deprivation are more likely to live in poor quality housing.<sup>12</sup>
- The 2019 South Gloucestershire StreetCare Survey mentions disability as the most common issue in relation to mobility difficulties due to poor condition of roads and pavements and obstructions.

Access to nature and green space is extremely valuable and beneficial for health and wellbeing but there are some significant inequalities of access for a variety of reasons:

---

<sup>9</sup> NHS Digital – Hospital admissions with a primary admission code for mental and behavioural conditions (excluding dementia) between 2010/11 to 2019/20

<sup>10</sup> Rethink Black, Asian and Minority Ethnic Mental Health Factsheet 2020

<sup>11</sup> NHS Digital Statistics on Obesity, Physical Activity and Diet England 2020

<https://files.digital.nhs.uk/22/EEB889/Obes-phys-acti-diet-eng-tab-2020.xlsx>

<sup>12</sup> [English Indices of Deprivation 2019 Sub Domain Report.pdf](#)

- 42% of people from England's Black, Asian and Minority Ethnic (BAME) communities live in the most green space deprived neighbourhoods which have less than 9m squared per person.<sup>13</sup>
- The Monitoring of Engagement with the Natural Environment (MENE) Survey 2009 – 2019 found children's experience with nature across the UK is varied with almost 25% spending time outside less than once a month.<sup>14</sup>

---

<sup>13</sup> Friends of the Earth Report: <https://friendsoftheearth.uk/nature/access-green-space-england-are-you-missing-out>

<sup>14</sup> [Monitor of Engagement with the Natural Environment \(MENE\) - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

## Appendix B: JHWS Action Plan

FOCUS AREA	Whole HWB Action
<p><b>Overarching Actions: A PLACE BASED APPROACH TO TACKLING INEQUALITIES</b></p> <p><b>Board lead(s):</b> Cllr Franklin Owusu-Antwi, Cabinet Member for Public Health and Equality of Opportunity, South Gloucestershire Council</p>	
Action to understand population need	<ol style="list-style-type: none"> <li>1. The Board will lead a refresh of the local JSNA process to ensure it is aligned to the Healthier Together ICS Outcomes Framework and provides evidence and the analysis of needs that help to determine what actions the local Integrated Care Partnership, the Council and other partners need to take to meet health and social care needs, and to address the wider determinants that impact on health and wellbeing in South Gloucestershire.</li> </ol>
Actions to promote partnership working and support	<ol style="list-style-type: none"> <li>1. Each Board member organisation will have an annual plan to show how they will respond to the Board's actions and aspirations for reducing inequalities</li> <li>2. The Board will develop a 'peer support' process on named topics, to enable the formal sharing of information and best practice</li> </ol>
Actions to promote a place-based approach to new strategic landscape	<ol style="list-style-type: none"> <li>1. The Board will respond to the changing strategic landscape (e.g. ICS / ICPs) by working collaboratively with the BNSSG Healthier Together ICS to ensure a place-based approach.</li> <li>2. Each Board member organisation will assess how their annual plan can complement progress towards the BNSSG Public Health Outcomes Framework</li> </ol>
Actions to address socio-economic/financial inequalities	<ol style="list-style-type: none"> <li>1. The Board will promote, and develop a process to enable, the full use of the apprenticeship levy across South Gloucestershire.</li> <li>2. The Board will help improve access to training and employment for people who often face barriers, and encourage other member and partner organisations to do the same.</li> <li>3. Board members will ensure their organisations take an active role in understanding socioeconomic challenges of their workforce and service users/clients and ensure access to support</li> <li>4. The Board will work together, and with the South Gloucestershire Partnership, to enable continuing support for small businesses and VCSE organisations</li> <li>5. All Board member organisations will support fair pay in their own organisation and within commissioning partners, recognising the benefits this has to both staff and organisations</li> </ol>
Actions to address the climate and nature emergency and the link to impacts on inequalities	<ol style="list-style-type: none"> <li>1. The Board will support initiatives which aim to address the climate and nature emergencies by making clear the links between these and public health and inequalities and making addressing these in their own organisation</li> <li>2. The Board will champion methods of gathering evidence about the health and health care implications and the local impacts of a changing climate, especially where the impacts exacerbate existing inequalities</li> </ol>
Actions to address inequalities through funding and commissioning opportunities	<ol style="list-style-type: none"> <li>1. Board Members to ensure their organisation's commissioning strategies align with the Inequalities objectives and invests directly in communities.</li> <li>2. The Board will actively work across organisations to identify areas of joint funding and commissioning, particularly those focused on the areas of collective action</li> <li>3. The Board will use its leverage over commissioning partners to ensure priorities are worked on.</li> </ol>

	<ol style="list-style-type: none"> <li>4. The Board will work with the South Gloucestershire collaborative on the development of locality networks and hubs</li> <li>5. The Board will commit to increasing investment in disadvantaged communities, based on the priorities identified by communities</li> </ol>
Action to increase the impact of Data, Intelligence and Insights to understand and address inequalities	<ol style="list-style-type: none"> <li>1. The Board will advocate for any data collected nationally to include (in)equalities data</li> <li>2. The Board will develop a data, intelligence and insights programme for all Members</li> <li>3. The Board will develop a full 'place based' approach to data and intelligence, linked in with Population Health Management</li> <li>4. The Board will develop a platform to share data, intelligence and insights with the wider community</li> </ol>
Actions to improve the Board's engagement with Communities.	<ol style="list-style-type: none"> <li>1. The Board will develop a joint communications and engagement plan to develop an ongoing dialogue with the wider community (this will include a focus on the each of the collective actions)</li> <li>2. The Board will ensure community representation through both voluntary sector organisations and lay representatives, including a Children and Young Person's representative</li> </ol>
Actions to understand and combat digital exclusion	<ol style="list-style-type: none"> <li>1. All Board members will ensure the work of their organisation account of digital exclusion issues, and report back on this annually</li> <li>2. Board members will ensure that nobody their organisation supports is disadvantaged due to lack of digital accessibility</li> <li>3. The Board will support the BNSSG and South Gloucestershire protocol to support people to be more digitally able</li> </ol>

### **Strategic Objective 1: Improve educational attainment of children and young people, and promote their wellbeing and aspirations**

**Board lead(s):** Chris Sivers, Director of Children, Adults and Health, South Gloucestershire Council and Sirona Care & Health (name tbc)

Actions to work together to support schools and families, particularly those children who are more likely to experience inequalities	<ol style="list-style-type: none"> <li>1. Board members will identify the role their organisation has in being trauma/ACE informed and sign up to being trauma informed.</li> <li>2. The Board will develop a process to coordinate the work of its member organisations and schools.</li> <li>3. Board member organisations will work to increase apprenticeship and employment opportunities for children and young people with SEND.</li> <li>4. All Board organisations will ensure CYP's lived experience and insight are key in the (re)design of services</li> </ol>
Actions to improve a child and family centred approach to the development of and delivery of relevant services.	<ol style="list-style-type: none"> <li>1. The Board will develop a process to share information on service use to identify any inequalities in access/use of children's services and/or family support.</li> <li>2. Board members will include in their annual plans how they will show improvement in their approach with children, young people and families</li> </ol>

### **Strategic Objective 2: Promote and enable positive mental health and wellbeing for all**

**Board lead(s):** Sebastian Habibi, Programme Director, Healthier Together, Dave Jarrett, Area Director of South Gloucestershire, BNSSG CCG and Vicky Marriott, Healthwatch

Actions to improve workplace mental health and wellbeing	<ol style="list-style-type: none"> <li>1. Each Board member organisation will sign up to be an exemplar of Best Practice in supporting workplace/workforce mental health</li> <li>2. Each Board member provide will include workplace MH and wellbeing in their annual plans</li> <li>3. Each Board member organisation will have named MH Champions and will train up MH first aiders.</li> </ol>
--	--



<p>Actions to improve community mental health and wellbeing</p>	<ol style="list-style-type: none"> <li>1. The Board will champion the importance of good mental health and wellbeing as a collective Board and through their organisations</li> <li>2. The Board will also champion the parity of esteem for mental health with a particular focus on resourcing and commissioning</li> <li>3. The Board will monitor and promote the understanding of the wider determinants of mental health, including financial insecurity and climate and nature crisis, and support actions to address these</li> </ol>
<p><b>Strategic Objective 3: Promote and enable good nutrition, physical activity and a healthy weight for all</b>  <b>Board lead(s):</b> Sara Blackmore, Director of Public Health, South Gloucestershire Council and Sirona Care &amp; Health (name tbc)</p>	
<p>Actions around food insecurity:</p>	<ol style="list-style-type: none"> <li>1. All Board member organisations will illustrate how they are supporting appropriate food insecurity actions and tackling food poverty in their clients/service users and the wider community</li> </ol>
<p>Actions around healthy weight</p>	<ol style="list-style-type: none"> <li>1. All Board member organisations to promote the national Better Health campaign to tackle obesity amongst their workforce and with the public/patients/clients</li> <li>2. All HWB member organisations will promote and champion the One You South Gloucestershire integrated healthy lifestyles and wellbeing service</li> <li>3. The Board will work with primary care partners to increase NHS Healthcheck uptake amongst communities/population groups with greatest needs</li> <li>4. The Board will promote the training of primary care staff to become healthy weight coaches</li> <li>5. The Board and the HWB member organisations will support active travel campaigns and other co-benefits of an active healthy lifestyle</li> </ol>
<p><b>Strategic Objective 4: Maximise the potential of our built and natural environment to enable healthy lifestyles and prevent disease</b>  <b>Board lead(s):</b> TBC</p>	
<p>Actions to support the increased provision of, equality of access to, and benefits of the natural environment in enabling and maintaining healthy lifestyles</p>	<ol style="list-style-type: none"> <li>1. All Board member organisations commit to supporting the case for local, high quality accessible open spaces for all and include open space provision in future developments of their estates and landholdings</li> <li>2. The Board will actively promote the use of the natural environment to improve physical and mental wellbeing, including support for 'green' social prescribing</li> <li>3. The Board will champion the maintenance and improvement of existing green spaces and the natural environment, to improve local provision and quality, and lead to better health outcomes</li> </ol>
<p>Actions to maximize the contribution of the existing built environment to promoting public health objectives</p>	<ol style="list-style-type: none"> <li>1. All Board member organisations show that their work, including estate and landholdings, contribute to reducing pollution, climate change, supporting nature and reducing fuel poverty</li> <li>2. All Board member organisations will promote the offer of free training in fuel poverty and how to refer to Warm and Well to all relevant frontline staff</li> <li>3. All Board member organisations to support and maximize use of active travel options and community transport services</li> </ol>
<p>Actions to support the development of new communities and healthy places</p>	<ol style="list-style-type: none"> <li>1. All Board member organisations will ensure their own strategic planning supports this</li> <li>2. As stakeholders and partners in other strategic planning forums, all Board member organisations will ensure that health planning is aligned and the infrastructure (e.g. GP practices, pharmacies, community group settings, access to nature) is provided in a timely</li> </ol>

	manner to support the development of new communities and healthy places
--	---