Joint Local Health and Wellbeing Strategy 2025-29

Draft for stakeholder engagement, 17 February to 11 April 2025

Contents

Overview of our strategy

Background
- *About the Health and Wellbeing Board*
- *Working within a wider system*
- *How we work together as a Board*

About this strategy
- *A new approach for this strategy*
- *Our vision*
- *How we have developed this strategy*

Our evidence base
- *Current Health and Wellbeing in South Gloucestershire*
- *What local people have told us*
- *Bristol, North Somerset and South Gloucestershire Integrated Care System Strategy*

What we will do
- *How we will work together*
- *Our five commitments*
- *How we will deliver this strategy*
- *Annual Focus Areas*
- *Working together in a new way*
- *Measuring our impact*

References

Overview of our strategy

South Gloucestershire Council

Delivering for you

Our strategy sets out:

- **a shared vision** for the Health and Wellbeing Board 2025-2029
- how the Health and Wellbeing Board can use its **unique role and membership** to **lead and advocate** for health and wellbeing locally
- a **shared commitment to developing how we work together** to deliver that vision

Our vision is that South Gloucestershire is a healthy and inclusive place for current and future generations which supports and enables those who need help the most to improve their health the fastest.

5 Commitments *to develop Health and Wellbeing Board ways of working together*

- **Strengthening community involvement**
- **Building a programme of place-based working**
- **Doing more to reduce inequalities**
- **Shifting upstream with a focus on prevention**
- **Strengthening our use of data & insights in decision-making**

+

4 Annual focus areas *to drive action*

Background

About the Health and Wellbeing Board

South Gloucestershire Council
Delivering for you

The Health and Wellbeing Board is a statutory committee of South Gloucestershire Council. It brings together senior political, clinical, professional and community leaders from across South Gloucestershire.

The Board aims to reduce inequalities and improve the health and wellbeing of our residents. It works with local partnerships to align strategies, integrate services, and address health priorities through a coordinated, multi-agency approach.

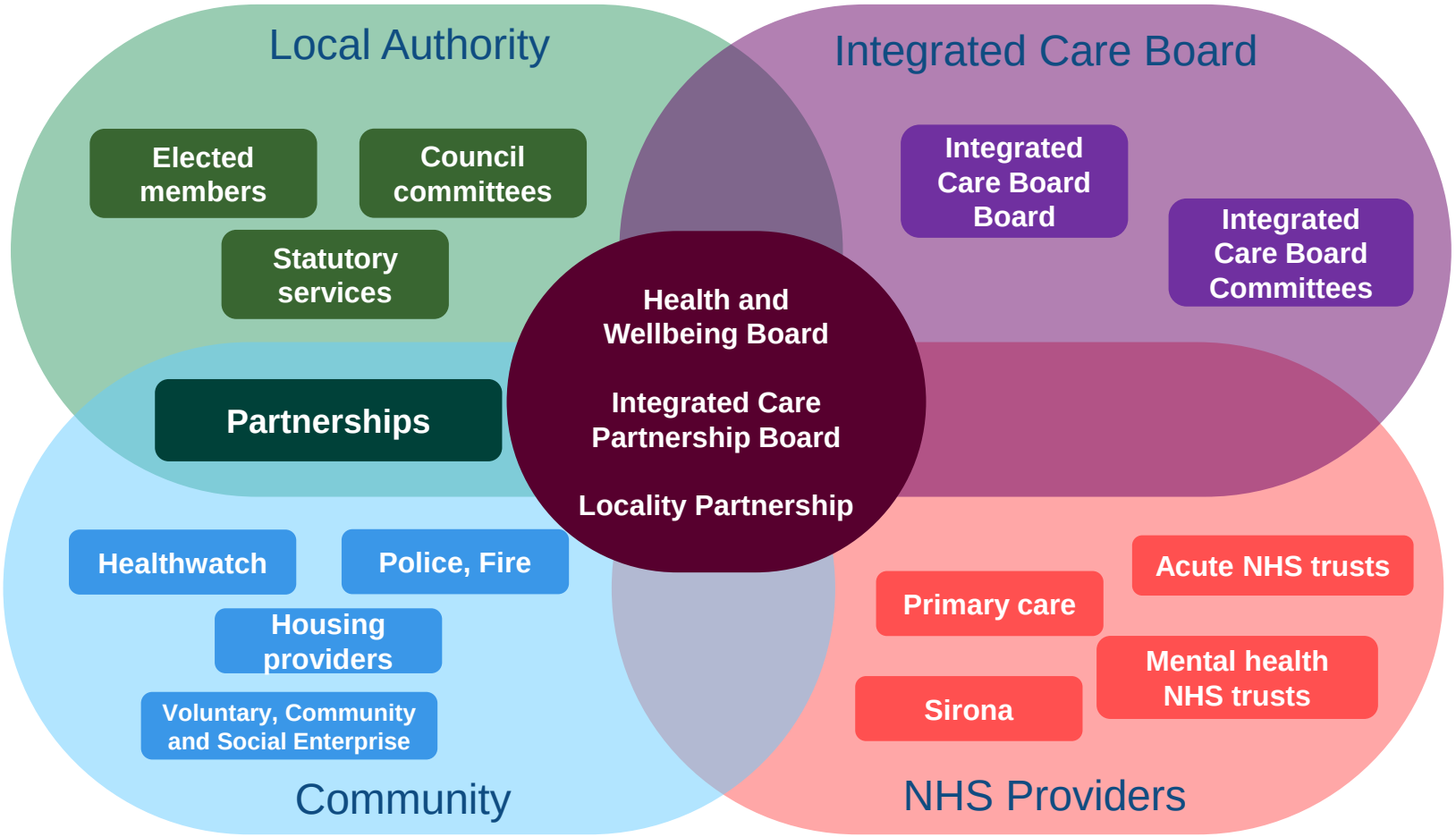
The Health and Wellbeing Board has statutory responsibilities to:

- Develop a Joint Local Health and Wellbeing Strategy
- Encourage and enable integrated working between health and social care
- Produce a Joint Strategic Needs Assessment and Pharmaceutical Needs Assessment

NHS Bristol, North Somerset and South Gloucestershire Integrated Care Board
cvs south gloucestershire supporting developing representing
NHS North Bristol NHS Trust
NHS South Western Ambulance Service NHS Foundation Trust
Circadian Trust giving more
healthwatch
Sirona care & health
Avon and Somerset Police SERVE.PROTECT.RESPECT.
South Gloucestershire Locality Partnership
NHS Avon and Wiltshire Mental Health Partnership NHS Trust
SOUTHERN BROOKS
Bromford.
AVON FIRE & RESCUE

Working within a wider system

The Health and Wellbeing Board exists within a system, with many different national and local strategies and priorities already in place.



The South Gloucestershire Health and Wellbeing Board has oversight of the following partnerships:

- Safeguarding Adults Board
- Children's Partnership
- Drug and Alcohol Partnership
- Carers Advisory Partnership
- Learning Difficulties Partnership Board
- Ageing Better Partnership
- Better Care Fund Planning Group
- Health Protection Assurance Group

The Health and Wellbeing Board is responsible for shaping and supporting delivery of the Bristol, North Somerset and South Gloucestershire Integrated Care System Strategy and Joint Forward Plan.

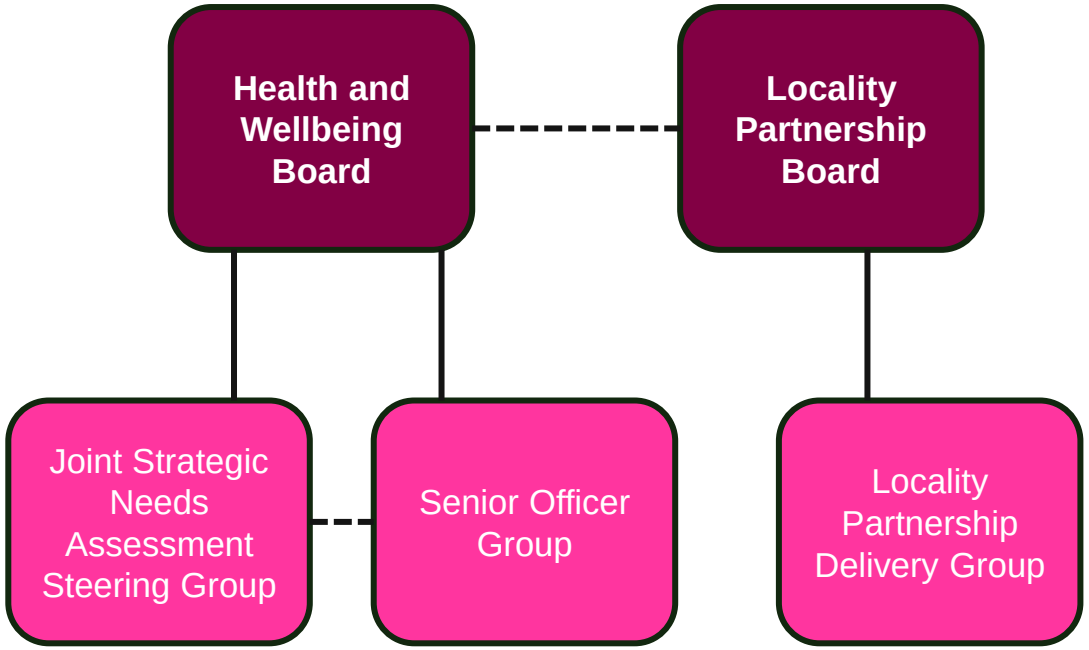
How we work together as a Board

The full Health and Wellbeing Board meets quarterly in public and meetings are webcast. The Board is Chaired by an Executive Member of South Gloucestershire Council.

The Board's Senior Officer Group manages the business of the Board, planning the programme of meetings and providing further oversight. The Senior Officer Group is chaired by the Director of Public Health.

The Joint Strategic Needs Assessment Steering Group reports to the Health and Wellbeing Board and is responsible for overseeing the Joint Strategic Needs Assessment. This includes supporting the selection and production of needs assessments as well as building skills and confidence among partners to use the findings. This ensures the ongoing production of quality-assured data and insights that inform planning and decisions across the system.

The South Gloucestershire Locality Partnership is one of the six locality partnerships within the Bristol, North Somerset and South Gloucestershire Integrated Care Board. It is made up of local health, social care, and the voluntary sector – with citizens and community as equal partners. Our Locality Partnership will be a principal delivery mechanism for this strategy. The Locality Partnership works closely with the Health and Wellbeing Board and the Chair and Director have places on the Board. The Health and Wellbeing Board and Locality Partnership Board meet for quarterly Joint Development Sessions to explore specific topics in greater depth. Other partnerships and groups are invited to join when needed.



About this strategy

A new approach for this strategy

South Gloucestershire Council

Delivering for you

This strategy sets out:

- **a shared vision** for the Health and Wellbeing Board over the next four years
- how the Health and Wellbeing Board can use its **unique role and membership** to **lead and advocate** for health and wellbeing locally
- a **shared commitment to developing how we work together** to deliver that vision

Why have we taken this approach?

To strengthen delivery of the existing commitments made within the system. The Health and Wellbeing Board is part of a wider system and works with a wide range of partners, each delivering their own strategies and national priorities. Rather than add a new set of priorities to this system, the Board will strengthen delivery of existing commitments made by and with its partners.

To develop how we work together in partnership. For several years inequalities and prevention have been a priority for South Gloucestershire Council, the local NHS and system partners. However, inequalities are still rising, and people are living fewer years in good health. Our communities have also faced significant challenges since the last strategy was written, including the COVID-19 pandemic and the cost-of-living crisis. These have widened inequalities. The Health and Wellbeing Board recognises the excellent work taking place in South Gloucestershire but accepts that we need to develop our ways of working as a system to reverse current trends in health. This strategy is not about inventing new ways of working. It is about strengthening our systems, our partnerships and our communities to improve outcomes for all.

To work closer with our communities. A strong message we continue to hear from our communities is that residents want more say over things that affect them and more meaningful engagement. Evidence also shows that involving communities is an important way to reduce inequalities.

To respond to stakeholder feedback. Over the last year, the Health and Wellbeing Board has gathered views on what its next strategy should look like. Health and Wellbeing Board Partners told us they wanted to see more support with data and insights and a strategy focus on inequalities, core determinants of health and community involvement.

To strengthen our use of data and insights in our planning and decision-making. The Joint Strategic Needs Assessment provides an assessment of the current and future health and social care needs of the local community. It should be used by all partners to ensure that health and care services are designed to meet local needs and resources are targeted effectively. Partners have recognised more could be done to ensure it is fully embedded in decision-making and that its impact is measured.

Our vision

South Gloucestershire Council

Delivering for you

For South Gloucestershire residents:

South Gloucestershire is a healthy and inclusive place for current and future generations which supports and enables those who need help the most to improve their health the fastest.

For the South Gloucestershire health and care system and partners:

The Health and Wellbeing Board, its partners and local communities will work closer together to reduce inequalities and hold ourselves to account on our commitments to create a healthier and more inclusive place for all.

How we have developed this strategy

South Gloucestershire Council

Delivering for you

We reflected on the strengths and challenges of the previous Joint Local Health and Wellbeing Strategy, which ran from 2021-25. It focused on four areas: children and young people, mental health, healthy weight, and the built environment.

We have developed this strategy in collaboration with system partners. We have consulted with colleagues from across the health, care and the wider system. We have reflected on the strengths and challenges of the last strategy, our work as a Board, the Joint Strategic Needs Assessment process and local priorities.

We have used the Joint Strategic Needs Assessment to understand local needs and inequalities. This strategy is rooted in an understanding of local data and insights. We are committed to an evidence-based approach.

We are listening to our communities. The Health and Wellbeing Board recognises that a successful strategy must be based on what is important to local people. This strategy is a response to insights gathered by the Council, Healthwatch and voluntary sector partners.

We took a creative approach. Rather than writing another strategy based on previous approaches, we asked partners to share ideas on how to do things differently. We have had honest and challenging discussions about where we have failed in the past and how to make more of a difference as a Board.

We have focused on developing our ways of working and agreed specific actions to achieve this. The Board recognised that it could do more with its unique membership to propel local action and strengthen existing commitments made by the health and care system. This strategy sets out concrete actions that aim to develop Health and Wellbeing Board decision-making and partnership working.

We ran an Equality Impact Assessment to ensure that our impact on inequalities was positive.

Our Strategy Editorial Group has wide membership. This includes representation from across the Council, Locality Partnership, Healthwatch, Southern Brooks Community Partnership and The Care Forum.

This strategy is based on:

- An understanding of local need and inequality
- Insights from our local communities
- Health and Wellbeing Board self-reflection
- Ongoing engagement with stakeholders
- Equality Impact Assessment

Our evidence base

Note: We are reviewing how this information is displayed in the final document

Current health & wellbeing in South Gloucestershire

South Gloucestershire Council

Delivering for you

South Gloucestershire residents tend to have better health outcomes than the national average. But this is not the case for everybody in our community. Our population experiences higher than average levels of depression and there are significant inequalities in preventable deaths, obesity and alcohol-related illness. We have a growing number of children eligible for free school meals and the educational attainment gap between those with and without free school meals is widening.

We are seeing a growing number of people living fewer years in good health because of preventable diseases like some cancers, type II diabetes and cardiovascular disease. The poorest in our society are most at risk of these diseases. We can do more to reduce inequalities by focusing on the modifiable risk factors that drive i

Where we are born, live, work and age impacts on our health. Our environment provides the building blocks for good health. Each block represents one of the essential things we all need to be healthy. We can prevent many diseases and reduce health inequalities by ensuring that these building blocks are in place for all our communities.



Image based on The Health Foundation's Building Blocks of Health https://www.health.org.uk/publications/how-to-talk-about-the-building-blocks-of-health

Recent challenges such as COVID and the rising cost of living have widened inequalities. South Gloucestershire has the most productive economy in the South West, which has contributed to the area's low level of relative deprivation. However, this is not everybody's experience, and the number of local children and families living in poverty is growing.

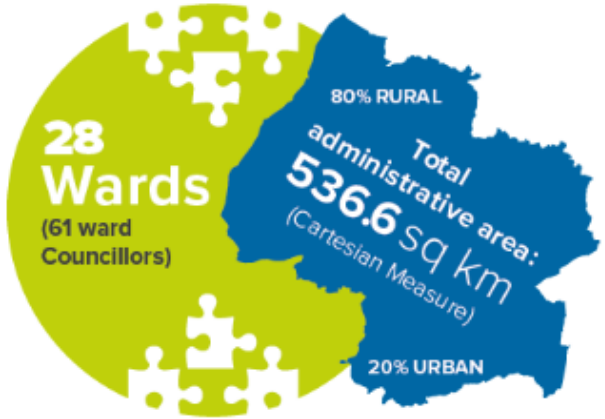
Rurality, transport and access to services are sources of inequality. South Gloucestershire is a largely rural area and access to services can be a challenge. This impacts most on residents without access to transport and those who are less mobile.

Population changes are likely to further widen inequalities. South Gloucestershire's population is growing; and ageing faster than the England average. These both present their own challenges, particularly in meeting the increasing demand for infrastructure such as housing, healthcare, education and transport. By 2041 the over-75 population is projected to increase by 11.4%. We are likely to see an increase in residents impacted by caring responsibilities, social isolation, falls, alcohol dependency and poor oral health. In addition, current services are often not located in areas where older people live.

Climate change will also widen inequalities. Flooding is identified as the number one risk to the UK from climate change and we have already seen an increase in the number and severity of flooding events impacting the local area. More extreme temperature events and impacts on water security are also expected. Our poorest communities are those most likely to be impacted.

Population 299,439

Note: We are reviewing how this information is displayed in the final document.



Total population 299,439 in 2023

FEMALE
151,250

MALE
148,189 (2023 Mid-year estimates)

CHILDREN (0-15 YEARS)
53,058 (18.3%) of total population)

WORKING AGE (16-64 YEARS)
183,172 (63.1%) of total population)

PENSIONABLE AGE (65+ YEARS)
54,194 (18.7% of total population)

ETHNIC MINORITY POPULATION
25,568 (8.8% of total population) (2021 Census)



The total **population** is projected to **increase** to **349,239** in 2041

(ONS subnational population projections 2018)

Headline Statistics

Some key facts about South Gloucestershire

59% **of adults are classified as overweight or obese,** which is **similar** to the South West region and **lower** than England. In England, a higher proportion of men than women are overweight and obese, but women are less physically active (1,2).
2022/23

16% **of children aged 4–5 in reception are overweight or obese,** which is **lower** than the South West region and England.
2022/23

12% **of adults aged 18+ smoke,** which is **similar** to the South West region and England. The APS also found 21% of those aged 18-64 in routine and manual occupations smoke.
2022

Violent crime
23.3 per 1,000
2022/23
The rate of reported violent offences in South Gloucestershire has gradually increased since 2012/13, apart from 2020/21 when there was a slight decrease. The latest rate is **lower** than England. There is no recent value for the South West to compare to.

14% **of people aged 18+ have depression,** a proportion which is **higher** than the South West region and England.
2022/23

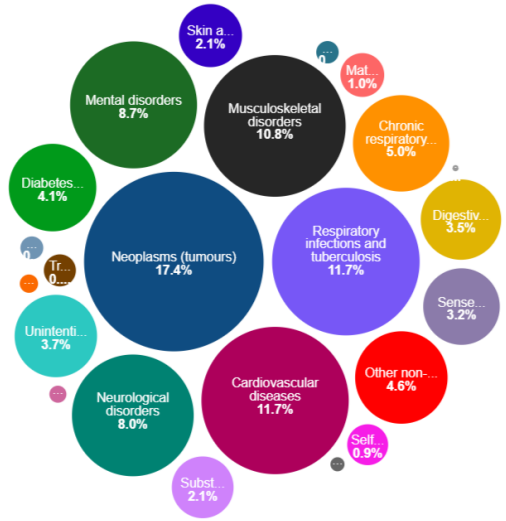
46% **of children and young people are physically active,** a proportion which is **similar** to the South West region and England.
2022/23

8% **of women were recorded as being smokers at time of delivery** (SATOD) where smoking status was known. This is **similar** to the South West region and England.
2022/23

10% **of children live in poverty** according to the income deprivation affecting children index, which is **lower** than the England average.
2019

Burden of disease

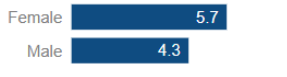
Estimates from the Global Burden of Disease Study 2021



Looking at population health data for the whole of South Gloucestershire can mask inequalities at a community level. To understand local inequality, we need to look closer at how multiple factors add together to impact on people's lives.

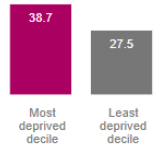
Headline inequality statistics

Inequality in life expectancy at birth
2018 - 20

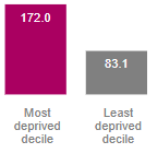


Life expectancy gap in years between the least and most deprived areas of South Gloucestershire by sex (slope index of inequality)

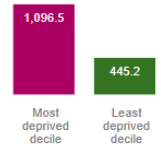
Year 6: Prevalence of overweight (including obesity) (%)
2019/20 - 2022/23



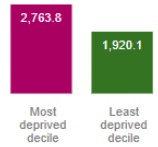
Under 75 mortality rate from causes considered preventable (2019 definition) (Persons) (per 100,000)
2018 - 2020



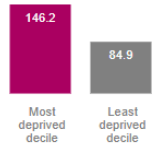
Admission episodes for alcohol-specific conditions (Persons) (per 100,000)
2018/19 - 2020/21



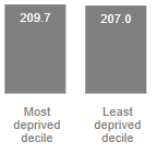
Emergency hospital admissions due to falls in people aged 65 and over (per 100,000)
2018/19 - 2020/21



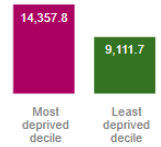
Hospital admissions as a result of self-harm (15-24 years) (per 10,000)
2018/19 - 2020/21



Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-4 years) (per 10,000)
2018/19 - 2020/21



Emergency hospital admissions (per 100,000)
2018/19 - 2020/21



What local people have told us

South Gloucestershire Council
Delivering for you

We hear a consistent message from local people that they want more say over things that affect them. Many people say they want to be more involved in their communities and how decisions are made. This strategy is rooted in insights from the Council's Community Conversations programme, Healthwatch and our wider local partners. Key themes that have informed our approach to this strategy are set out below.

Most people agree on what makes life good locally: a sense of community, access to amenities, and a balance of urban and high-quality rural space.

People want a **more adult relationship** with us, alongside more **openness and transparency**

The council and communities are seen as sharing joint responsibility for making South Gloucestershire a good place to live

People **want more say** over the things that affect them, with meaningful upstream engagement not tokenistic consultations

We have heard from children and young people about what is important to them:

- **Positive relationships** with adults
- Having a **wide range of services** that are easily accessible, timely and appropriate
- **Schools that create a positive** supportive environment
- **Positive activities** to support mental health and emotional wellbeing

There is a **strong sense of community pride** but it relates more to towns, villages and suburbs than South Gloucestershire as a whole

If we are going to engage, we need to mean it (be prepared to change our mind) and **do it well** (blended to suit residents' needs)

There is opportunity to tap into local pride **and facilitate people's relationship** and participation within their place/community

South Gloucestershire Healthwatch identified three themes about health and social care in 2024 following analysis on insights received:

- **Staff and patient communication**
- **Quality of care and treatment**
- **Appointment availability**

Council consultations on its Inequalities Strategy and Budget identified that important issues for local people are:

- **Health and Wellbeing**
- **Educational attainment and experience**
- **Poverty and financial hardship**

Healthier Together

Improving health and care in Bristol, North Somerset and South Gloucestershire

Integrated Care Strategy on a page

5 Opportunities

1. We need to **tackle inequalities**
2. We can **strengthen the building blocks** of good health and wellbeing
3. Wherever possible, we need to **prevent illness and treat people earlier**
4. We need to work alongside communities to support **healthy behaviours**
5. And once people are ill, there are **conditions** that we could manage better

Our Commitments

Key things that will benefit people across the life course:

- Invest in the first 1,001 days of life
- Early identification and support for people experiencing anxiety and depression
- Support people to be a healthy weight
- Reducing harm from tobacco
- Reduce harm from drugs and alcohol
- Improved prevention, detection and treatment of cancer
- Tackle cardiovascular disease
- Better support for people with painful conditions
- Support for older people towards end of life

KEY ENABLERS

- Faster access to care and support for vulnerable groups
- Use VCSE expertise to identify and support people most at risk
- Increase our financial commitment to prevention
- Change our decision making to actively reduce health inequality
- Recognise and rectify historical injustices
- Build a workforce who are supported, skilled and healthy
- Embed trauma informed practice
- Create a network of volunteer and staff prevention champions
- Develop community strengths and assets that support everyday health and wellbeing
- Use purchasing and employment to support better health and wellbeing

South Gloucestershire Council

Delivering for you

The BNSSG Integrated Care System Strategy was developed with input from many people and grown from analysis of local needs including our JSNA, public and staff views and evidence about how best to secure better outcomes.

This new South Gloucestershire Joint Local Health and Wellbeing Strategy will build on and support delivery of the commitments we have made across our health and care system

What we will do

How we will work together

South Gloucestershire Council

Delivering for you

This strategy sets out five commitments to develop how the Health and Wellbeing Board makes decisions and works with partners over the next four years.

The commitments will be used as a lens to guide Board discussions and decisions. Any proposal requesting Board approval will need to show how it supports delivery of this strategy.

Attention to these five areas is not new. What is different about this strategy is:

- **We have agreed focused actions to progress each of our five commitments**. These actions are set out on the following pages and will ensure this strategy makes a difference.
- **A refreshed accountability processes** has been developed to ensure we hold ourselves to account.
- **Each year the Health and Wellbeing Board will produce an action plan setting out up to four Annual Focus Areas for the year ahead**. These areas for collective action will be an opportunity to drive forward best practice with local partners and to deliver on strategy commitments. Focus areas will be selected each year in response to local data, insights and wider system priorities. The principles for selecting focus areas are set out later in this strategy.

5 Commitments *to develop Health and Wellbeing Board ways of working*

- **Strengthening community involvement**
- **Building a programme of place-based working**
- **Doing more to reduce inequalities**
- **Shifting upstream with a focus on prevention**
- **Strengthening our use of data & insights in decision-making**

+

4 Annual focus areas *to drive action*

1.Strengthening **community involvement**

South Gloucestershire Council

Delivering for you

Why is this important?

Evidence shows that community involvement has a measurable impact on health outcomes and reducing inequalities.

- Communities in which people are born, live, work and grow have a significant impact on health and wellbeing. For example, experiencing social isolation and loneliness can be as bad for health as risk factors such as smoking (3).
- Communities hold many assets that can be mobilised to promote health and wellbeing. These include friendships, community cohesion, local groups, skills, and knowledge (4). Asset Based Community Development is based on communities identifying and addressing their own problems through the local assets available to them.
- Involving communities is critical for effective place-based working. Asking people what is important to them, working together to design services and taking a person-centred approach ensures that services can meet the needs of diverse communities. This type of approach is called co-production and has been shown to reduce inequalities (4).

Our communities have told us they want to be involved.

Residents have told us they want to be more involved in their community and have more say in decisions about where they live.

Sirona Care & Health, a social enterprise delivering NHS and local authority funded healthcare services across Bristol, South Gloucestershire and North Somerset, has a team of Wellbeing Leads trained in Asset Based Community Development. Their role includes close working with communities experiencing health inequalities. These include the Gypsy, Roma and Traveller and Chinese communities in South Gloucestershire.

Through the building of trusted relationships with the Gypsy, Roma and Traveller community, the team recognised a high level of health inequality in relation to breast cancer screening. Because of a lack of a permanent address and lower literacy levels among the community, women were not able to either receive or understand letters inviting them to screening appointments. To address this, Sirona's team has worked with the community to develop and roll out sessions to support them to access this care. The design of these has been led by the community, with Sirona acknowledging that members have the knowledge and ideas to make them as effective as possible.

In addition, the team has worked with the Chinese Wellbeing Society – a local organisation led by and serving the Chinese community – to support their access to preventative services for issues such as falls and diabetes. Key to this has been collaboration with "community champions" within the Society who can interpret and communicate this support in a culturally competent way.

1.Strengthening **community involvement**

South Gloucestershire Council

Delivering for you

What we will do

1. **Establish community involvement as standard practice**. We will ensure projects and updates presented to the Health and Wellbeing Board have been informed by community involvement, wherever possible.
2. **Give equal weight to insights and data**. The Joint Strategic Needs Assessment Steering Group will develop processes to ensure that community insights are a fundamental part of all needs assessments. The Health and Wellbeing Board will promote a culture shift that increases the value given to community insights in discussions.
3. **Develop better mechanisms to share community insights between Health and Wellbeing Board member organisations**. Board members will learn from each other by openly discussing the types of community involvement which have taken place, what worked well, and what could be improved.
4. **Develop a programme of strength-based community involvement to complement Health and Wellbeing Board meetings**. We will develop meaningful ways to involve local communities in the annual programme of Health and Wellbeing Board meetings.
5. **Develop and share accessible intelligence with local communities, where this is needed to support asset-based community approaches**.
6. **Review and refresh Health and Wellbeing documents to ensure that they are accessible for all those that use them.**
7. **Champion community involvement within organisations.** Health and Wellbeing Board members will promote community involvement approaches and share lessons learned within their organisations.

To be successful, we need to:

- Ensure **community involvement is welcoming** to all residents of South Gloucestershire.
- Build a **better understanding of what children and young people think about health and wellbeing** in South Gloucestershire.
- Recognise that **real co-production and Asset Based Community Development takes time and resources**.
- Ensure **community involvement is meaningful** and leads to change.
- Have **robust processes** to choose the **most appropriate strength-based approach.**
- **Work with our communities** and ensure we **do not pass risk to them** by expecting them to do it all.
- Recognise that **real Asset Based Community Development** work means that we **cannot control the conversation.**

What change will we see:

- Health and Wellbeing **Board meetings** and **Development Sessions** will be **informed by insights from strength-based community involvement**.
- **Local communities** will have **greater understanding** of what the Health and Wellbeing Board does **and feel able to influence its conversations**.
- **More effective sharing of insights** between Health and Wellbeing Board partners and learning from each others' approaches.
- Health and Wellbeing Board partners will **strengthen the use of community insights to design services.**

2. Building a programme of **place-based working**

South Gloucestershire Council

Delivering for you

Why is this important?

Depending on where you live in South Gloucestershire, your experience and needs will be different. South Gloucestershire is largely rural in area but most of its population lives within the fringe of Bristol. Local approaches developed with communities gain deeper understanding of the variety of local assets and challenges. This helps services meet the diverse needs of residents.

Evidence shows that place-based working is an effective way to involve communities, tackle core determinants of health, utilise resources and reduce inequalities. The Fuller Stocktake report highlighted that the most effective ways to improve population health and reduce health inequalities were those that involved partnerships with local communities (5).

Place-based working is a national priority in England. The Independent Investigation of the National Health Service in England (2024 Darzi Report) emphasised the importance of local community-focused approaches (6). The Health and Care Act 2022 and NHS Long Term Plan champion the role of Integrated Care Systems, which bring together health, social care, and community partners to deliver services tailored for local populations (7,8). A cornerstone of better integration is the principle of place-based working, which supports local systems to address unique challenges and opportunities within their communities. Over the next 5-10 yeas NHS England aims for all neighbourhoods to (6):

- Have the NHS and social care working together to prevent people spending unnecessary time in hospital or care homes
- Strengthen primary and community-based care to enable more people to be supported closer to home or work
- Connect people accessing health and care to wider public services and third sector support, including social care, public health and other local government services

Our communities and local stakeholders say they want to work more in this way. A strong theme from community insights is that residents want more say over things that affect them.

Frontline professionals, including GPs and local voluntary sector partners, are already at the heart of this work. Health and Wellbeing Board partners and stakeholders have a deep understanding of what is needed to improve the support and care they give in their local areas. Bottom-up approaches are more likely to succeed when engaged local professionals design solutions to meet local challenges. Many Health and Wellbeing Board partners are already leading local efforts and have shown their support for a shift towards more local approaches.

"Place" can be defined in many ways and does not mean the same thing to all people.

Our approach to place-based working in South Gloucestershire will be based around how residents define their local neighbourhood and communities. This may include approaches based around where people live, where they go or shared interests and activities.



Based on: Features of place-based approaches - QCOSS

2. Building a programme of **place-based working**

South Gloucestershire Council

Delivering for you

What we will do

1. **Work with partners to develop a shared vision around what place-based working means in South Gloucestershire, based around how residents define their local neighbourhood and communities**. We will support the Locality Partnership to lead a conversation on Place with communities and local partners.
2. **Support the Locality Partnership-led programme of work around Place**. In Spring 2025, the Locality Partnership launched a new bottom-up approach to place-based working in South Gloucestershire. Communities, frontline professionals, the voluntary sector and local providers are at the heart of planning and local leadership. The Health and Wellbeing Board, Council and Locality Partnership colleagues will act as enablers.
3. **Foster a culture that recognises the unique challenges and opportunities of place-based working**. We commit to place-based working as a long-term approach that requires investment and trust in our communities.

To be successful, we need to:

- Establish a **shared understanding** of what we mean by place-based working.
- **Involve local communities** in an ongoing and meaningful way.
- **Recognise different approaches may be needed** in different areas and we may see progress at different speeds across South Gloucestershire.
- **Take an iterative approach**. We may fail at first in some places, but we will reflect on challenges and build back better.
- Ensure that all our **partners buy into this approach**
- Recognise that **frontline professionals and volunteers are central to this work**.
- **Learn from good practice elsewhere.**

What change will we see:

- Communities will become **more engaged** in their health and wellbeing.
- Services and support will be **better able to meet diverse local needs**.
- We will have a **more sustainable Voluntary, Community and Social Enterprise sector** based around place.
- We will shift towards a **more holistic approach to health and care** and will be doing more to tackle core determinants of health.
- **We will use resources more efficiently.**
- We will **improve health outcomes for all and reduce local inequalities** in the longer term.

3. Doing more to **reduce inequalities**

South Gloucestershire Council

Delivering for you

Why is this important?

Evidence shows tackling inequalities is essential for:

- **Enabling the best start in life.** The first 1,001 days of someone's life are considered critical for shaping future wellbeing (9). Addressing inequalities and barriers during this time can help to break the cycle of poverty and disadvantage, allowing societies to improve outcomes for children, regardless of their background.
- **Building a strong economy.** Reducing inequalities in health enables greater workforce participation, boosts consumer spending, fosters innovation and entrepreneurship, and reduces health and social care costs (10).
- **Using limited resources efficiently and fairly.** Some of the best ways to reduce inequalities are to tackle the core determinants of health, reducing the downstream costs of treating disease (11). Proportionate Universalism is a recommended approach to allocating resources fairly (15). This method addresses inequality through a combination of universal and targeted interventions, delivering services at a scale and intensity proportionate to need.

Reducing inequality aligns with national and local priorities. A local commitment to reducing inequality is set out in the South Gloucestershire Council Plan, and Bristol, North Somerset and South Gloucestershire Integrated Care System Strategy and Joint Forward Plan (12-14). National ambitions to reduce inequalities are set out in the 2024 Darzi Report and 2020 Marmot Review (6,15).

Tackling inequality is a statutory duty for the Health and Wellbeing Board. Previous Joint Local Health and Wellbeing Strategies recognised the importance of inequality by addressing it as a cross-cutting theme. Our partners and the Board have reflected that this approach did not always lead to specific action; and it was hard to measure our impact. This strategy commits to doing more to reduce inequalities, setting out specific actions for the Board and a new process to monitor progress.

Our local picture

Inequalities in South Gloucestershire are complex. Health is shaped by multiple overlapping factors such as race, income, education, age, ability, sexual orientation, immigration status, ethnicity, and geography. Each individual experiences a different combination of advantages and challenges related to these factors.

Inequality is hidden if we look at risk factors in isolation. Historically, approaches to measure inequality have used simple metrics like income and ethnicity separately. Data for the whole of South Gloucestershire, focused on single risk factors can mask the inequalities experienced by individuals and communities. To understand local inequality, we need to look closer at how multiple factors add together to impact on people's lives.

For example, in South Gloucestershire:

- Younger white mothers in more deprived areas are less likely to breastfeed their babies (16)
- Men over 50 and with poor mental health are more likely to be dependent on alcohol (17)
- Children who are leaving care and who are from minority ethnic groups are more likely to be 'Not in Education, Employment or Training' (18)

3. Doing more to **reduce inequalities**

South Gloucestershire Council

Delivering for you

What we will do

1. **Promote a consistent and shared narrative about local inequalities within the Board and among partners**. All Board members and Health and Wellbeing Board partners will be able to describe inequalities in South Gloucestershire.
2. **Foster a culture where reducing inequalities is everyone's business.** We use an inequalities lens in all our discussions as a Board. Health and Wellbeing Board members will act as champions for reducing inequality within their organisations.
3. **Promote proportionate universalism as the recommended approach to allocating funding to reduce inequality in South Gloucestershire.** Whenever the Board discusses a universal service, it should ask what is being done to ensure the service is not widening inequalities.
4. **Develop a support offer for partners to increase engagement with the Joint Strategic Needs Assessment process.** The Joint Strategic Needs Assessment Steering Group will work with partners to develop ways to support better use of data and community insights to identify need and help target resources.
5. **Support the South Gloucestershire Tackling Inequalities Plan 2024-28.** The Health and Wellbeing Board shares the ambition set out in this plan to 'take a proactive, action-based approach to tackling inequalities'. We will monitor progress against delivery of the health and wellbeing objectives set out in the Tackling Inequalities Plan.

To be successful, we need to:

- **Recognise that action to reduce inequalities takes time**. National trends show that inequality has been rising over time, meaning that the process of addressing it is challenging. Sustained longer-term efforts are needed. We may not see a reduction in local inequalities within the timeframe of this strategy. However, we can measure the changes in service provision and action on core determinants that we expect will reduce inequalities in the longer term.
- **Recognise that reducing inequalities goes hand in hand with prevention and tackling core determinants of health.**
- **Use data and insights to understand the complexity of local inequality** and identify where to target resources.
- **Take a life-course approach**, recognising the importance of the first 1,001 days

What change will we see:

- The Health and Wellbeing Board will have a **stronger understanding of how need is being addressed** via a strengthened Joint Strategic Needs Assessment accountability process and greater use of local insights.
- **Our communities will feel more involved in shaping services.** Local services will be better designed to meet the needs of our diverse communities.
- **Residents will report higher reported satisfaction** with support received.
- We will **reduce inequality in health outcomes** in the longer term.

4. Shifting upstream with a **focus on prevention**

South Gloucestershire Council

Delivering for you

Why is this important?

Evidence shows that:

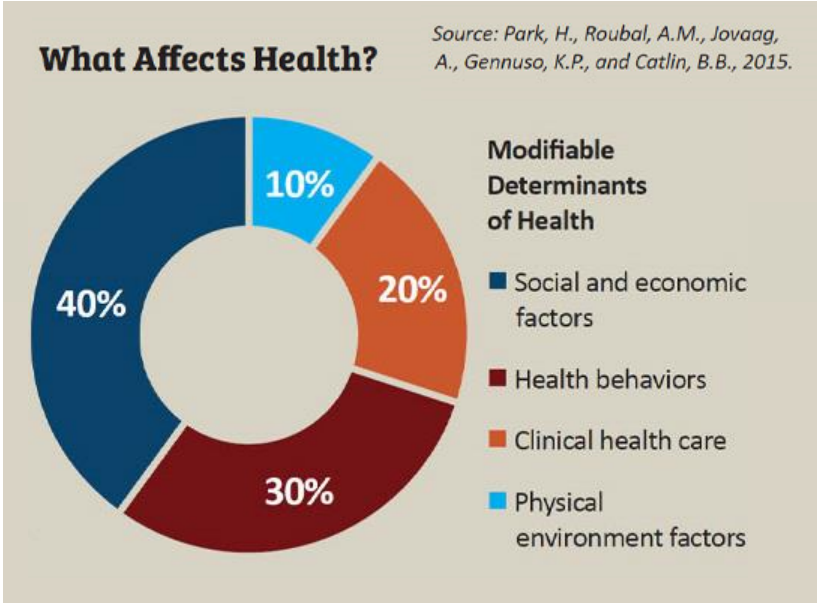
- **A system focus on prevention is essential for improving population health and wellbeing.** Early intervention to tackle the risk factors that cause disease enables people to live longer in good health (6). Staying healthy helps individuals to remain independent and active in their community. This in turn supports wellbeing.
- **Prevention is an effective way to reduce inequalities.** Preventable diseases are disproportionately experienced by some groups (11). For example, cardiovascular disease is among the largest contributor to health inequalities, accounting for one-fifth of the life expectancy gap between the most and least deprived communities (19). Action to tackle risk factors for major preventable disease is an important way to reduce health inequalities.
- **Action to tackle the core determinants of health can have the greatest impacts.** Many health inequalities stem from social inequalities such as inadequate housing, limited access to nutritious food and poverty (6). Social and economic factors account for 40% of the modifiable determinants of our health (20). Healthcare contributes only about 20% and yet the bulk of current health spending goes to health services.

South Gloucestershire has an ageing population with declining healthy life expectancy. We are seeing increasing rates of long-term conditions, disability and multiple conditions. People are living longer but spending fewer years in good health. The numbers requiring support and services continues to rise.

Rates of preventable conditions such as obesity, diabetes, heart disease and some cancers are increasing. These illnesses can be prevented with lifestyle changes and early intervention, yet they remain leading local causes of disease and death. These diseases often require long-term management which places significant strain on services.

The health and care system is unsustainable unless we do something differently. Without comprehensive action to prevent ill health, the pressures on health, care and other public services will only increase.

Focusing on prevention aligns with national and local priorities. Many national and local reports set out a commitment to prevention (6,12-14). However, it is widely recognised that prevention has repeatedly been given less attention than more immediate pressures on the NHS and care.



4. Shifting upstream with a **focus on prevention**

South Gloucestershire Council

Delivering for you

What we will do

1. **Involve young people.** The Health and Wellbeing Board will create opportunities to hear from young people in South Gloucestershire and build their insights into decision-making. This will include collaborating with the Youth Board around how to enable young people locally to live healthier lives.
2. **Ensure that discussions around prevention include action to tackle core determinants of health.**
3. **Commit to allocating long-term resources to early intervention and prevention activities in communities to ensure that core determinants of health are addressed before health deteriorates.**
4. **Support alternative prevention-focused funding models.** The Health and Wellbeing Board will support efforts to develop new funding models that give longer term support to community prevention projects.
5. **Commit to support the workforce and volunteers across our partnership to help them to achieve good health and wellbeing.**
6. **Foster a culture where prevention is everyone's business.** Health and Wellbeing Board members will be encouraged to be directly involved in community prevention projects, for example by signing up to mentoring young people in care.

To be successful, we need to:

- **Remember to focus on Core Determinants of Health.** Prevention efforts can easily focus only on preventing deterioration for someone with a disease (secondary prevention). Action on core determinants addresses the root causes of ill health and helps reduce inequalities.
- **Collaborate across the system.** Health and Wellbeing Board members have varying degrees of influence over the core determinants of health. At each level of the system there is potential to shift our focus further upstream.
- **Be creative.** We can learn from innovative approaches in other areas and create longer-term sustainable funding models for community prevention programmes.
- **Recognise that increasing prevention is fundamental to reducing inequalities**

What change will we see:

- **Young people and communities getting more involved in shaping health and care services** to address the core determinants of their health and wellbeing.
- **Measurable shift in spending upstream** among partner organisations.
- **Measurable shift to more person-centred and place-based approaches** to health and care that tackle core determinants of health.
- In the medium to long-term we hope to see **improved health and wellbeing outcomes and a reduction in health inequalities**.

5. Strengthening our use of data & insights in decision-making

South Gloucestershire Council

Delivering for you

Why is this important?

Robust use of data and insights is crucial for tackling inequalities and targeting need.

The primary mechanism for the Health and Wellbeing Board to understand its population and respond to the needs of communities is through the effective development and use of the Joint Strategic Needs Assessment.

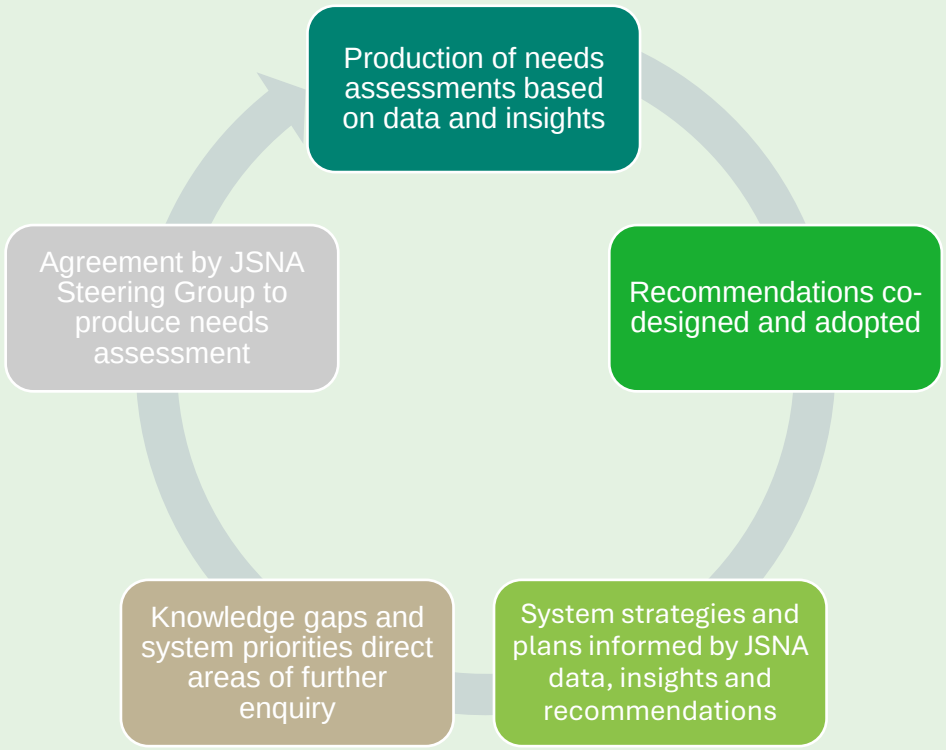
The Joint Strategic Needs Assessment is a statutory duty of Health and Wellbeing Boards. It is defined as “a systematic method for reviewing the health and wellbeing needs of a population, leading to agreed priorities for action that will improve health and wellbeing outcomes and reduce inequalities.”

In South Gloucestershire, the Joint Strategic Needs Assessment Steering Group produces the Joint Strategic Needs Assessment on behalf of the Board. This work includes production of high-level population health dashboards, tools and detailed needs assessments.

Feedback has identified opportunities to strengthen this process:

- Stakeholders have told us they want more support to use the Joint Strategic Needs Assessment.
- There are opportunities to strengthen how the rolling programme of needs assessments is based on the priorities of partner organisations.
- Partners have recognised more could be done to ensure the data, insights and recommendations of the Joint Strategic Needs Assessment are taken forward by partners.
- Our stakeholder engagement identified opportunities to strengthen how we hold ourselves to account as a Board.

Using data and insights to shape services and inform decision making through the Joint Strategic Needs Assessment (JSNA)



5. Strengthening our use of data & insights in decision-making

South Gloucestershire Council

Delivering for you

What we will do

1. **Strengthen partner engagement with the Joint Strategic Needs Assessment development process**, ensuring comprehensive membership to the steering group.
2. **Support partners to improve their use of Joint Strategic Needs Assessments** to inform decisions. Require more regular updates on new developments and demonstrations on how to use the tools.
3. **Require that any proposal brought to the Board demonstrates how it has been informed by the Joint Strategic Needs Assessment.**
4. **Commit to regular review of how well the Board uses data and community insights to inform decisions.**
5. **Commit to monitoring strategy progress throughout its lifetime.** The monitoring process must be light-touch but robust. We will build in opportunities for reflection and iteration of our approach.
6. **Use quarterly Joint Development Sessions to plan and monitor progress of Health and Wellbeing Board Annual Focus Areas.** Each session will focus on one of the Health and Wellbeing Board focus areas. The session will include a review of plans and progress against the five Health and Wellbeing Board commitments.
7. **Produce a Health and Wellbeing Board Annual Report** that it is relevant and accessible to communities and celebrates new ways of working.

To be successful, we need to:

- **Foster an open and honest learning culture.** We will actively encourage Board members and partners to share any challenges they have faced so we can work together to find creative solutions.
- **Ensure that self-reflection is not a one-off event** and that we continue to monitor the Strategy throughout its lifetime.
- **Recognise that our monitoring process should be iterative**. We may need to adapt what we measure in response to what we learn.
- **Ensure there is analytical resource and partner commitment** to deliver the new process for improving accountability.

What change will we see:

- Health and Wellbeing Board is **assured that the Strategy is making a difference**.
- Health and Wellbeing Board is **assured that data, insights and recommendations from the Joint Strategic Needs Assessment inform decision-making**.
- **Joint Strategic Needs Assessment outputs reflect partner priorities** better.
- Decisions and local commissioning are more evidence-based. **Partners are more confident in their use of data and community insights to inform decision-making**
- **Resources are better targeted at need** which will reduce health inequalities.

How we will deliver this strategy

The strategy runs from 2025 to 2029. We will publish an action plan for each year of its life and use a new accountability process to monitor progress. This will ensure that the Joint Local Health and Wellbeing Strategy continues to drive action throughout its lifetime and adapts when needed.

Each year, we will identify up to four Health and Wellbeing Board Annual Focus Areas for the year ahead. This will ensure that the strategy drives tangible action against its core commitments. These targeted areas for collective action will be chosen during an annual review of the strategy and published in an action plan. Focus areas will be selected each year in response to local data, insights and wider system priorities. They may be iterations of previous focus areas or new priorities for the system.

We will monitor progress of the strategy throughout its lifetime. We will monitor our impact using health and wellbeing outcomes, community insights and reports from members and partners on how they have developed ways of working.

Our new accountability process will include opportunities for ongoing reflection and iteration within the full meeting cycle of the Board. We will theme each of our quarterly Joint Development Sessions around one of that year's focus areas, using the time to review plans and progress with partners. The Senior Officer Group and full Board meetings will take forward these discussions to ensure continuous learning and to drive action.

We recognise that we may need to adapt this strategy and our actions in response to what we learn. We will use our strengthened approach to community involvement to get ongoing feedback from our communities on how the strategy is making a difference for local people.

We will publish a Health and Wellbeing Board Annual Report which will summarise strategy progress, celebrate successes and set out plans for the year ahead. We will share accessible and relevant updates with our communities.

Principles for selection of Health and Wellbeing Board Annual Focus Areas

They should:

- Target local need identified in the Joint Strategic Needs Assessment
- Offer opportunity for the Health and Wellbeing Board to deliver on its five commitments
- Be able to benefit from Health and Wellbeing Board support to drive progress
- Be focused and achievable within a 12-month period
- Be the next development of previous Health and Wellbeing Board focus areas OR a new policy priority which requires system leadership
- Be local, system or national priorities

Annual Focus Areas

South Gloucestershire Council

Delivering for you

The Health and Wellbeing Board will have up to four focus areas each year to drive action

Year 1 (2025-26) Proposals:

To be confirmed following stakeholder engagement

Children and Young People – to encompass the first 1,001 days of life, education attainment and school attendance

Healthy Weight – to include supporting people to have a healthy weight and sign up to the new BNSSG Healthy Weight Pledge

Housing and Health – housing is an important core determinant of health and there is potential to explore the development of a Health and Wellbeing Board led housing strategy and link into the Ageing Well workstream

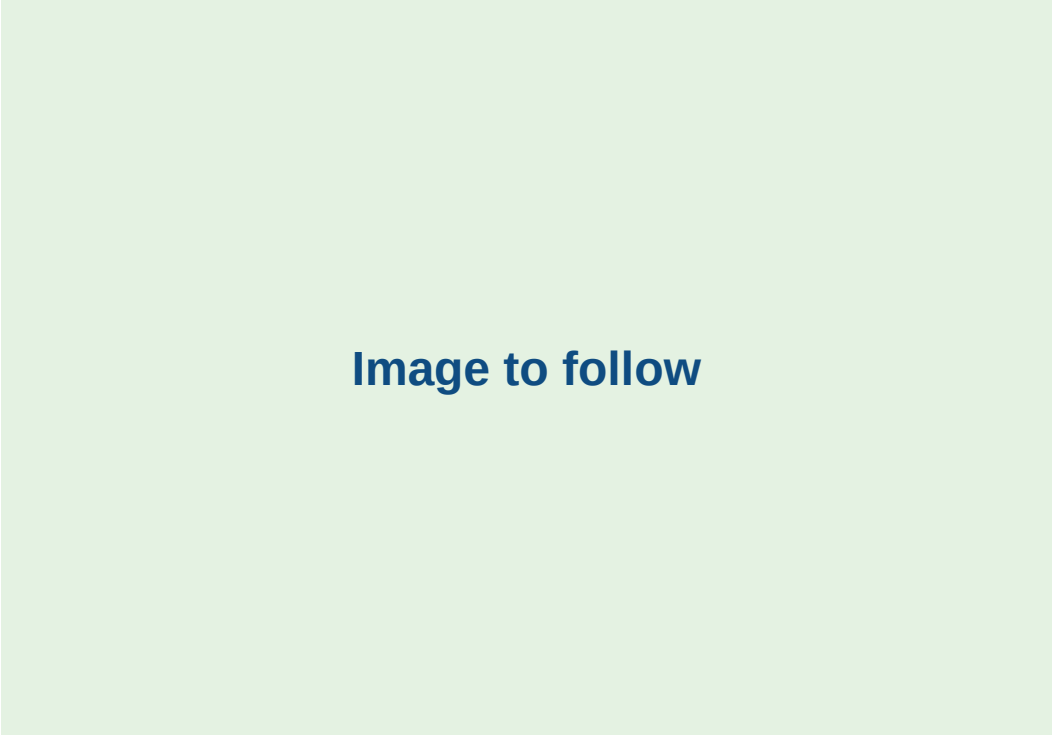
Place-based working and Neighbourhood Health - this aligns with Commitment 2 in our strategy, national policy about neighbourhood working and our direction of travel to move care closer to home and integrate local services

Working together in a new way

Core to the success of the strategy will be Health and Wellbeing Board member commitment to fostering the right culture. The Board has many strengths, including an engaged membership with breadth and depth of experience. Our new strategy seeks to build on these strengths and develop our ways of working. We will have the greatest impact if we are prepared to challenge ourselves and our partners to do things differently.

We are committed to:

- **Open and honest conversations** that identify challenges and opportunities to do things differently
- Acting as a **critical friend** within our partnerships
- A culture of **ongoing reflection and iteration**
- **Leading by example** and acting as ambassadors within our own organisations on behalf of the Health and Wellbeing Board
- **Creativity**
- **Long-term vision**
- Being **evidence-based**
- Reaching and **hearing from all parts of the community**
- Making our meetings and documents more **accessible**



South Gloucestershire Council

Delivering for you

Measuring our impact

We are committed to monitoring progress of this strategy throughout its lifetime.

To understand the impact of the strategy we will:

- **Develop our own self-assessment tool** to reflect on our work as a Board. This will include a review of how well we use data and insights to inform decisions and how we have developed ways of working in response to this strategy. We will run the tool each year.
- **Ask members and partners to report back** on how they have developed ways of working in response to this strategy.
- **Use our community involvement** work to understand the impact of the strategy for local communities.
- **Use quarterly Joint Development Sessions** to monitor progress of our Annual Focus Areas.
- **Use the Joint Strategic Needs Assessment to monitor impact** on population health and wellbeing outcomes.
- **Reflect on our findings throughout the year**
- **Dedicate time for an annual review of progress** in full Board meetings.
- **Report on our progress in the Annual Health and Wellbeing Board report**, sharing accessible updates to our communities and partners.

References

1. South Gloucestershire Council Health and Wellbeing Board. Joint Health and Wellbeing Strategy 2021-25 [Internet]. 2021 [cited 2024 Dec 6]. Available from: https://beta.southglos.gov.uk/publications/joint-health-and-wellbeing-strategy/joint-health-and-wellbeing-strategy-2021-25/

2. South Gloucestershire Council. Community Conversations Strategy [Internet]. 2024 [cited 2024 Dec 6]. Available from: https://beta.southglos.gov.uk/static/b86605465eea363c0d870f726776fcc5/Community-Conversations-strategy.pdf

3. National Academies of Sciences E and MD of B and SS and E. Social Isolation and Loneliness in Older Adults: Opportunities for the Health Care System. National Academies Press [Internet]. 2020 Feb 27 [cited 2024 Dec 3]; Available from: https://www.ncbi.nlm.nih.gov/books/NBK557974/ doi: 10.17226/25663

4. Public Health England. UK Gov. 2015 [cited 2024 Dec 3]. A guide to community-centred approaches for health and wellbeing. Available from: https://assets.publishing.service.gov.uk/media/5c2f65d3e5274a6599225de9/A_guide_to_community-centred_approaches_for_health_and_wellbeing__full_report_.pdf

5. Dr Claire Fuller. NHSE. 2022 [cited 2024 Dec 3]. Next steps for integrating primary care: Fuller Stocktake report. Available from: https://www.england.nhs.uk/wp-content/uploads/2022/05/next-steps-for-integrating-primary-care-fuller-stocktake-report.pdf

6. NHS England. Neighbourhood health guidelines 2025/26 [Internet]. 2025 [cited 2025 Feb 3]. Available from: https://www.england.nhs.uk/long-read/neighbourhood-health-guidelines-2025-26/#appendix-1

7. The Department of Health and Social Care. UK Gov. 2024 [cited 2024 Dec 3]. Independent investigation of the NHS in England. Available from: https://assets.publishing.service.gov.uk/media/66f42ae630536cb92748271f/Lord-Darzi-Independent-Investigation-of-the-National-Health-Service-in-England-Updated-25-September.pdf

8. NHS England. The NHS Long Term Plan [Internet]. 2019 [cited 2024 Dec 3]. Available from: https://www.england.nhs.uk/publication/the-nhs-long-term-plan/

9. UK Legislation. UK Public General Acts. 2022 [cited 2024 Dec 3]. Health and Care Act 2022. Available from: https://www.legislation.gov.uk/ukpga/2022/31/contents

10. Department of Health and Social Care. UK Gov. 2021 [cited 2024 Dec 3]. The Best Start for Life - The Early Years Healthy Development Review Report. Available from: https://www.gov.uk/government/publications/the-best-start-for-life-a-vision-for-the-1001-critical-days

References

South Gloucestershire Council

Delivering for you

11. The Health Foundation. The Health Foundation . 2020 [cited 2024 Dec 3]. Using economic development to improve health and reduce health inequalities. Available from: https://www.health.org.uk/sites/default/files/upload/publications/2020/InclusiveEconomiesReport.pdf

12. Marmot M. Fair society, healthy lives : the Marmot Review : strategic review of health inequalities in England post-2010. Department for International Development, UK Gov [Internet]. 2010 Jan 1 [cited 2024 Dec 4]; Available from: https://www.gov.uk/research-for-development-outputs/fair-society-healthy-lives-the-marmot-review-strategic-review-of-health-inequalities-in-england-post-2010

13. South Gloucestershire Council. South Gloucestershire Council Plan 2024-28 [Internet]. 2024 [cited 2024 Oct 31]. Available from: https://beta.southglos.gov.uk/our-priorities/

14. Bristol NS and SGICP. Bristol, North Somerset and South Gloucestershire Integrated Care System Strategy [Internet]. 2023 [cited 2024 Dec 6]. Available from: https://bnssghealthiertogether.org.uk/wp-content/uploads/2023/06/ICS_Strategy_V2.8_01112024.pdf

15. Bristol North Somerset and South Gloucestershire Integrated Care Board. Bristol, North Somerset and South Gloucestershire 2024-2029 Joint Forward Plan [Internet]. 2024 [cited 2024 Dec 6]. Available from: https://bnssghealthiertogether.org.uk/wp-content/uploads/2024/05/BNSSG-2024-2029-Joint-Forward-Plan-full-FINAL-version.pdf

16. Marmot M et al. The Institute of Health Equity. 2020 [cited 2024 Dec 6]. Health Equity in England: The Marmot Review 10 Years on . Available from: https://www.instituteofhealthequity.org/resources-reports/marmot-review-10-years-on/the-marmot-review-10-years-on-full-report.pdf

17. South Gloucestershire Council. Children & Young People's Needs Assessment 2023 [Internet]. 2023 [cited 2025 Jan 30]. Available from: https://beta.southglos.gov.uk/static/74b2775f0d790e0d2b46d35572e1c5c3/CYPNA_2023_Long-read.pdf

18. South Gloucestershire Council. Adult Social Care & Ageing Well Needs Assessment Phase 1, May 2024. [Internet]. 2024 [cited 2025 Jan 30]. Available from: https://beta.southglos.gov.uk/static/e79c759c6b74ad0a48cddc81054c4a2c/Ageing-Well-Needs-Assessment-2024.pdf

19. South Gloucestershire Council. Tackling Inequalities Plan 2024-28. [Internet]. 2024 [cited 2025 Jan 30]. Available from: https://beta.southglos.gov.uk/static/5aed2bddea503ee043a106435d6253af/Tackling-inequalities-action-plan-24-28-web.pdf

20. Raleigh V JDWD. The Kings Fund. 2022 [cited 2024 Dec 4]. Cardiovascular disease in England. Available from: https://www.kingsfund.org.uk/insight-and-analysis/reports/cardiovascular-disease-england

21. Park H et al. Relative Contributions of a Set of Health Factors to Selected Health Outcomes. National Library of Medicine [Internet]. 2015 Dec [cited 2024 Dec 4];49(6). Available from: https://pubmed.ncbi.nlm.nih.gov/26590942/