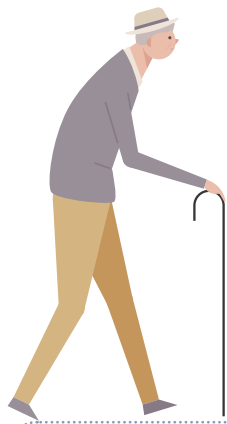


# Gloucestershire Joint Local Health and Wellbeing Strategy

2020-2030

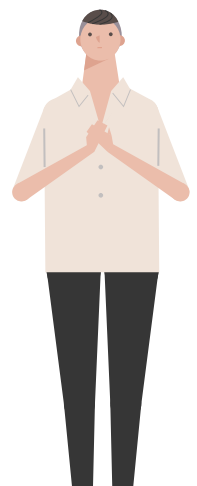
Mid-point review 2025





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# Foreword

I am pleased to welcome readers to this mid-point review of Gloucestershire's Joint Health and Wellbeing Strategy. We launched our ten-year strategy in 2020 and, as we reach the five-year point, it is a timely opportunity to reflect and report on our progress to date in delivering our seven strategic priorities.

Since we developed the strategy, we have seen significant global and national developments which have helped shaped our health and social care system, and our local communities. The pandemic and cost of living highlighted the importance of partners working together to improve health and wellbeing and tackle health inequalities; and the Gloucestershire Health and Wellbeing Board continues to provide a forum for collective action.

The introduction of Integrated Care Partnerships (ICPs) in the Health and Social Care Act 2022 has provided a further opportunity to bring those involved in health and social care together from across all sectors and in Gloucestershire we have named this forum the Health and Wellbeing Partnership. We have aligned the work of the county's Health and Wellbeing Board and the Health and Wellbeing Partnership to make the most of our shared priorities to improve health outcomes.

Our vision in the Joint Health and Wellbeing Strategy is for Gloucestershire to be a place where everyone can live well, be healthy and thrive. Our seven strategic priorities, which you will read about in this report, were developed through a programme of engagement with stakeholders, including local communities, and draw on evidence about the health needs of our population.

In the last five years, we have made great progress in delivering our priorities, and the work highlighted in this report shows how important partnership working is to achieve our vision. The issues we want to address are often complex and made up of many different parts. No single organisation can improve health alone, and the delivery of our priorities relies on contributions from a range of individuals and organisations, from health, social care, local government, and the voluntary and community sector.

The board is looking forward to continuing to work together over the next five years to take this work forward.

## **Cllr Carole Allaway-Martin**

Chair of Gloucestershire Health and Wellbeing Board  
and Gloucestershire Health and Wellbeing Partnership

Cabinet Member for Adult Social Care



# Introduction

Under the Health and Social Care Act 2012, Health and Wellbeing Boards have a statutory duty to develop a **Joint Local Health and Wellbeing Strategy\***, which sets out the priorities for improving the health and wellbeing of the local population and addressing health inequalities, based on an assessment of local health needs. The 10-year Gloucestershire Joint Health and Wellbeing Strategy was published in 2020 and laid out the board's commitment to focusing on seven priority areas in support of its shared vision for Gloucestershire to be a place where everyone can live well, be healthy and thrive.

**The seven strategic priorities are:**



Overall, health in the county is generally better than the England average. In the 2021 census, 83% of the Gloucestershire population reported being in very good or good health<sup>1</sup>, but inequalities in health access, experience and outcomes remain between individuals and within communities. Life expectancy is generally lower in individuals living in the most deprived parts of the county, with a gap of 7.6 years for men, and 5.8 years for women (2018-2020).<sup>2</sup>

Children living in child poverty are also more at risk of poorer health outcomes, and while the proportion of Gloucestershire children living in poverty is significantly below the national average, around 13,000 (16.3%) of under 16s live in households in relative poverty (2022/23).<sup>3</sup> You can read more about the health and wellbeing of the Gloucestershire population on the [Gloucestershire Inform website](#), which includes our local [Joint Strategic Needs Assessment](#). The need to address and reduce health inequalities is a cross-cutting theme across the seven priority areas, alongside wider work to address the other determinants (sometimes called the 'building blocks') of health, such as employment and skills, housing and economic development.



<sup>1</sup> Gloucestershire Inform – census 2021, demographic summary, Gloucestershire County Council.

<sup>2</sup> Inequality in life expectancy at birth (2018-2020), OHID, Fingertips.

<sup>3</sup> Children in absolute low income families (under 16s) (2022/23) OHID Fingertips.

\*The Health and Care Act 2022 amends section 116A of the Local Government and Public Involvement in Health Act 2007, renaming 'joint health and wellbeing strategies' to 'joint local health and wellbeing strategies'.

## How have we developed this review?

The mid-point review of the Joint Health and Wellbeing Strategy has been developed with members of the Gloucestershire Health and Wellbeing Board and leads for the seven priority areas.

The report provides a snapshot of progress across priority areas over the first five years of the strategy. It also reflects on some of the changes we have seen since 2020, which have shaped health and wellbeing locally, and our ways of working together. The review provides an opportunity to refresh our priority aims, and update on plans for the next five years.

The board has listened to and learned from the ongoing engagement completed by our priority leads to make sure that work is informed by the voices and experiences of our local communities and partners. You can read more about this engagement in the report.

**The report  
provides a  
snapshot of  
progress across  
priority areas**

## Our changing landscape

As we reach the five-year point of our ten-year strategy, it is important to acknowledge the national and local changes since the Joint Health and Wellbeing Strategy was published in 2020.

The Covid-19 pandemic and the cost-of-living have had an impact on Gloucestershire's residents, with more of an impact on families with low incomes and those already affected by health inequalities. They have also impacted on organisations providing services to our local communities, across public, private and the voluntary and community sectors.

Looking ahead, the Health and Wellbeing Board will continue to focus on working as a partnership to reduce differences in health outcomes and address the 'building blocks' of health and wellbeing, such as access to employment and education, and making sure everyone has the 'best start in life'.



There has also been a range of positive developments over the last five years which support delivery of our vision for Gloucestershire to be a place where everyone can live well, be healthy and thrive. These include:

- **The development of the county's new One Gloucestershire Integrated Care System (ICS)**, under the Health and Social Care Act 2022 and the creation of the Gloucestershire Integrated Care Partnership, known locally as the Gloucestershire Health and Wellbeing Partnership. We have aligned the work of the Gloucestershire Health and Wellbeing Partnership and the local Health and Wellbeing Board to ensure we take a joined-up approach. The seven priorities in the Joint Local Health and Wellbeing Strategy also form the first 'pillar' in the Gloucestershire Integrated Care Strategy. You can read more about the [Gloucestershire Integrated Care Strategy](#) online.
- **The development of an online Prevention and Health Inequalities Hub** which provides a toolkit for anyone who has an interest in understanding health inequalities in Gloucestershire, and the steps we can take to reduce them. We have also developed a new Prevention and Health Inequalities Framework to help partners consider inequalities and how we can prevent ill-health and disability when planning and implementing new programmes or initiatives.
- **A renewed focus on how the board and its members work with local communities and build on their strengths**, and the value of 'place-based' working. Place-based working recognises the benefits of organisations coming together at a local level to understand the needs of a community or place, identify shared priorities and deliver a joined-up response. The six Gloucestershire District Councils and Integrated Locality Partnerships (ILPs) are all represented on the Health and Wellbeing Board. ILPs are partnerships made up of local government, the NHS, social care, the voluntary and community sector, and wider partners working in a local area. The aim is to bring services together in a local area and tailor health and social care support to the areas that people live in.

As the board delivers its seven priorities over the next five years, we will apply the learning and tools in the new Health Inequalities Hub and prioritise listening to and working with our local communities exploring opportunities to use co-production processes.

As a Health and Wellbeing Board and Health and Wellbeing Partnership we regularly come together for development sessions, which strengthen relationships and promote joint working. We plan to continue with this approach because we can see the benefits that it brings.

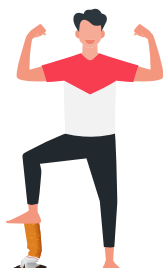
## Spotlight on the Gloucestershire Health and Wellbeing Partnership 'Integrated Care Strategy' - supporting the 'exemplar themes'.

The Gloucestershire Integrated Care Strategy includes three 'unifying themes' (now known as 'exemplar themes'). The themes were designed to help the Gloucestershire Health and Wellbeing Partnership work together using their collective efforts to improve health outcomes. It is recognised that the three themes are linked to preventing ill health and addressing health inequalities.

The three themes and the partnership's ambitions are as follows:

- **Smoking:** Identify greater numbers of smokers and signpost to appropriate stop smoking support
- **Employment:** Create additional employment and skills development opportunities
- **Blood pressure:** Increase prevention and early identification of high blood pressure and support those with a diagnosis to manage their blood pressure.

The work of the Gloucestershire Health and Wellbeing Board supports delivery of the ambitions, and the board recognises the links between the Joint Health and Wellbeing Strategy and the exemplar themes.



**Smoking** is a leading cause of preventable premature death and health inequalities. Locally, we are investing new government grant funding to support stop smoking services.

We are also engaging with current smokers to understand how best we can support them to quit.

There is a strong link between **employment** and health. Access to 'good employment' improves our life chances and our health and wellbeing.

Promoting employment and skills development, particularly for those who face barriers to entering employment, supports the board's work to address the building blocks of health – employment, housing and economic development.

High **blood pressure** is a leading cause of cardiovascular diseases, like stroke and heart disease, and often goes undiagnosed.

The board's strategic focus on physical activity and healthy weight plays an important role in supporting the ambitions in the Integrated Care Strategy to prevent high blood pressure through lifestyle changes and early intervention.

# Visi

## Gloucestershire

where everyone  
live well, happy  
and t

Where do we want to be?

Priorities



Physical activity

We want to address inequalities in physical activity levels, supporting everyone in Gloucestershire to live healthy and happy lives by supporting and mobilising a movement, systems change and with the use of evidence-based approaches.

Adverse childhood experiences (ACEs)

We want to build resilient communities and organisations that understand trauma and adversity, and take action to prevent the potential lifelong impacts of adverse childhood experiences across a lifetime, to reduce disadvantages in adulthood.

Mental wellbeing

We want every Gloucestershire resident to enjoy the best possible mental health and wellbeing throughout their life.

## Tackling health

Health inequalities are the prevent in people's health. For each of the we close this gap.

# ion

ire is a place  
yone can  
be healthy  
hrieve

Housing

We want to make sure health and wellbeing are promoted through improvements in the quality, affordability, availability, and suitability of housing.

Early  
years and  
best start  
in life

We want to ensure that every child in Gloucestershire has the best start in life.

Healthy  
lifestyles

We want to create the conditions that encourage and enable healthier lifestyles and healthier weight across Gloucestershire communities, with a focus on groups at greatest risk of weight-related inequalities.

Social  
isolation  
and  
loneliness

We want to enable local people to build and nurture strong social networks and vibrant communities.

## h inequalities

able, unfair and unjust differences  
priorities we will focus on how

# Priority updates

The following sections outline some of the work happening across the county to support the delivery of our shared priorities in the Gloucestershire Joint Health and Wellbeing Strategy. The programmes and initiatives described have been led or supported by organisations represented on the Gloucestershire Health and Wellbeing Board, often working in partnership with each other.

They have also often been delivered with other board and multi-agency partnerships in the county, including, but not limited to, the Mental Health and Wellbeing Partnership Board, the county's Strategic Housing Partnership, Gloucestershire's Coalition for the Wellbeing of Children and Young People, and the Enabling Active Communities and Individuals Partnership.



# Physical activity

**Aim:** Address inequalities in physical activity levels supporting everyone in Gloucestershire to live healthy and happy lives by supporting and mobilising a movement, systems change and with the use of evidence-based approaches.



## Key achievements to date

We Can Move is Gloucestershire's social movement for physical activity, it was developed over a three-year period from 2017. In 2021 the **We Can Move 2030 strategy** was agreed with the support of Active Gloucestershire. Active Gloucestershire (a registered charity) is one of a number of Active Partnerships nationwide working to increase physical activity.

The We Can Move approach aims to address issues including tackling inequalities in sport and physical activity by using proven behaviour change methods.

We Can Move has developed and progressed, and the following has guided its approach:

- **Tweaking our use of language** and developing clear calls to action to support our partners and changemakers to apply the approach to their work.
- Development of the **We Can Move Theory of Change** to better show how we can help people to be more active at individual and community levels and across the Gloucestershire 'system'.
- **Use of behaviour change methods** and working with partners and residents to help our movement progress.
- **Working as leaders** across organisational boundaries to encourage wider support for physical activity, with support from The Leadership Centre; Collaborate CIC and The Kings Fund.
- **Starting multiple programmes of work** spanning We Can Move and Active Gloucestershire's priorities, including programmes targeted at children and young people, older adults and promoting active environments.
- **Influencing multi-million-pound investment** into the county from national partners, including Sport England:
  - to support grants for sports and physical activity community organisations,
  - open school facilities for use outside of the school day, targeting schools in priority areas to reduce the inequalities,
  - supporting communities to address inequalities by funding clubs and community groups impacted by the cost-of-living increases,
  - working with partners to add to existing community physical activity facilities and programmes.

## case study

### Spotlight on:

The Pain Warriors at the Redwell Centre

As part of taking a community approach to support physical activity, Active Gloucestershire explored movement and activity with The Pain Warriors - a group for anyone living with chronic pain related conditions. They explored 'shoulder-to-shoulder' the problems and opportunities that exist; and worked together to come up with ideas around what they might like and feel able to do.

Participants recognised the value of having initial guidance on how to safely explore physical activity in their own setting and were supported by Lesley, a community exercise professional, to do this. They were also provided with a small box of exercise equipment.

The impact was positive and also gave some group members the confidence to begin to explore going to the swimming pool as a weekly social activity.

The group have shown what is possible when communities are given the tools and space to elevate their voices, feel trusted and come up with ideas around their own creative opportunities.

“Improved my inner-self”

“We had a laugh, but we only did what we could and that was fine”



## Forward look: Our priorities for the next five years

Looking forward, the [We Can Move 2030 strategy](#) and [Active Gloucestershire 2030 strategy](#) highlight the long-term plan to address inequalities in physical activity through six priorities:

1. Proactively work with marginalised and under-represented people such as those from Black, Asian and other diverse ethnic communities.
2. Promote active habits at a young age to support a lifetime of good health.
3. Support older people to enjoy good health for longer by starting or maintaining an active lifestyle.
4. Recognise that disability or a health condition shouldn't stop anyone from enjoying an active life.
5. Promote active design of the places we live, work and play to provide opportunities for everyone to become and stay active.
6. Remain flexible to respond to external challenges and opportunities, learning from the challenges Covid-19 highlighted.

To achieve these priorities, our strategies focus on:

- Movement building: acting as leaders to inspire and engage everyone to enjoy a more active life regardless of age, disability, ethnicity, gender, religious beliefs or background.
- Continuing to develop a culture of shared knowledge, learning and understanding, connecting with funders and partners, and engaging leaders.
- Drawing upon evidence-based approaches to community development and behaviour change.
- Creating a sustainable organisation by maintaining a diverse mix of partners and income.
- Learning from the findings of two external evaluations, focused on:
  - Working with district councils to understand how We Can Move seed funding can be used effectively, and how countywide approaches positively impact local areas.
  - Learning from the first four years of the We Can Move and Active Gloucestershire Strategy and making recommendations to inform a mid-strategy review.
- Securing investment from Sport England to help maintain and further the work already happening, and target work in the areas where inequalities are greatest.
- Focusing on showing learning and impact on inequalities by using mixed evaluation methods.

We will also be progressing work on the following areas:

- **Active Connect** – support, advice, and seed funding with a local area focus across the county.
- **The Movement Fund** – funding to support people, community groups and clubs to access national funds directly from Sport England.



## How we're listening

To make sure that there is wide engagement and opportunity to learn from partners, professionals and community organisations, we host several networks such as:

- Gloucestershire Active Ageing Network
- Gloucestershire Active Inclusion Network (GAIN)
- Gloucestershire Healthy Living and Learning (GHLL – Lead Teacher network) meetings and conference
- Gloucestershire Healthier Communities Together
- Enabling Active Communities and Individuals
- VCSE Strategic Partnership
- Gloucestershire Integrated Care Partnership and Health and Wellbeing Board
- Gloucestershire VCS Equality Diversity and Inclusion (EDI) Peer Network

We meet regularly with colleagues from Sport England and as a regional and national network of Active Partnerships to make sure that they have access to wider learning, resources and support.

# Adverse Childhood Experiences (ACEs)

**Aim:** To build resilient communities and organisations that understand trauma and adversity and take action to prevent the potential lifelong impacts of adverse childhood experiences across a lifetime, to reduce disadvantages in adulthood.

## Key achievements to date

- **Launched in 2018** - creating a countywide social movement to raise awareness of the impact of childhood adversity and trauma and build resilience
- **ACEs Strategy 2018-2020** - to support county-wide ACE informed ways of working that protect children from the things that harm them
- **ACEs Conference 2018** - exploring how to become aware of ACEs, building resilience, and identifying ACEs champions
- **Resilience Documentary Screenings 2018** - nearly 500 people attended screenings across the county of exploring the science of ACEs and the hope that comes from building resilience
- **ACEs Conference 2021** - focussing on moving from ACEs to resilience with nearly 500 people attending, including the first Change Maker Awards
- **ACEs Strategy 2021-2024** - updated progress on delivering Action on ACEs strategy, highlighting achievements since the launch in 2018, key learning, and reflected on the impact of the pandemic.

## Examples of where an ACEs informed approach has been adopted so far:

- **The Door Youth Project** based in Stroud, launched Door Step, a programme of emotional and mental health support for vulnerable young people transitioning from primary to secondary school
- **Cheltenham Borough Homes** appointed a Family Investment Officer who supports vulnerable families
- **The Aston Project** set up by Gloucestershire Constabulary provides mentoring to vulnerable young people experiencing or at risk of ACEs
- **A maternity services pilot led by Gloucestershire Hospitals Trust** supported midwives to identify risk factors for ACEs and work with expectant mothers and families to build resilience and reduce risk
- **Health visitors** have been trained in spotting the signs of a lack of parental bonding and infant development in the early months
- **Firefighters** have received ACE awareness sessions across Gloucestershire Fire and Rescue Service, with the aim of including the training in the service's annual professional development process
- **Gloucestershire County Council Level 1 safeguarding training** for staff includes an awareness of ACEs.

## Ambassadors and the network

The role of an ambassador is to commit themselves to raising awareness about ACEs, looking to create change from the ground up. As of 2024, more than 150 people are signed up as ambassadors.

## Trauma Information Relational Practice (TIRP)

Trauma-informed practice is grounded in the understanding of how exposure to trauma can impact an individual. Gloucestershire County Council's education team has developed a Trauma Information Relational Practice (TIRP) training offer for all Gloucestershire schools focused on improving outcomes for children and young people, wellbeing and keeping them engaged in education. The offer, alongside a headteacher leadership programme, promotes inclusive and nurturing school communities with a focus on relationships and building resilience.

### case study

#### **Spotlight on:** the Midwifery Service ACEs screening tool

Evidence from local and national Serious Case Reviews, and international studies on ACEs, show the risks to children and families when ACEs are present. The Better Births Prevention Workstream aimed to improve outcomes, and use an ACEs informed approach, through a series of tools to help start a conversation about ACEs in the midwifery service. A toolkit was developed and used at booking appointments with 100% of women and their partners (if present) using maternity services.

The toolkit included a leaflet given to parents with the booking pack explaining ACEs, the five ways to wellbeing, and a self-help aid to reduce the impact of ACEs. It also included an 'Ecomap' to identify people and activities that currently help the family, and any support needs. This map was used to inform a support plan tailored to the family to help build resilience.



## Forward look: Our priorities for the next five years

The first phase of the ACEs programme has seen positive shifts across the county as organisations become aware of ACEs. The next phase will expand our focus to look at how we support people who have experienced trauma and adversity across their lives and for those who are experiencing disadvantages. We want to build resilient communities and organisations that understand trauma and can take action to prevent the potential lifelong impacts of ACEs and reduce disadvantages in adulthood.

Stakeholders have been discussing how the ACEs programme can evolve further which has included discussions around the development of a trauma informed approach (building on the learning from our previous work).

The county has recently been successful in its application to join the **Making Every Adult Matter (MEAM) Approach network** to become one of the fifty areas across the country working to improve services for people experiencing disadvantages, sharing their learning along the way. The MEAM approach focuses on creating long-term, sustainable change to the way complex problems and systems are approached and understood, which will contribute to the evolution of the ACEs programme.

As we review our approach to the ACEs and trauma informed agenda, our short-term priorities include:

- Developing a MEAM systems change learning network, open to practitioners involved in the MEAM network and those involved in related work (including ACEs ambassadors).
- Establishing a lived experience co-production working group which will inform all elements of the systems change work.
- Developing proposals for the next phase of the ACEs programme, incorporating the MEAM approach which will be shared with the Health and Wellbeing Board and will inform our priorities for the next five years.

## How we're listening

To date, the ACEs programme has involved extensive engagement with key partners, stakeholders and the ACEs ambassadors. This engagement will continue and develop more widely as we evolve the ACEs programme using the MEAM approach.

**ACTION  
ON ACES**  
Gloucestershire

# Mental wellbeing

**Aim:** We want every Gloucestershire resident to enjoy the best possible mental health and wellbeing throughout their life.

## Key achievements to date

Many factors influence our mental health and wellbeing, and no organisation or initiative can improve mental health alone. Making a difference relies on joint working by a range of partners. Some of our achievements include:

- **CandO** – In April 2023, the county council launched the Connect and Offload service (CandO), a mental health helpline for over 18s dealing with issues such as emotional distress and self-harm.
- **TIC+ Chat** - The TIC+ Chat service launched in 2020 to provide drop-in support by phone, text or webchat for children and young people (aged 11-25 years) experiencing mental wellbeing concerns. It is integrated into the wider pathway of support for children experiencing mental health issues and works closely with NHS mental health providers.
- **GloW Grants** – In 2021, the Gloucestershire Suicide Prevention Partnership launched the GloW (Gloucestershire Wellbeing) grant programme. Over £200,000 was awarded over three years to 28 community led projects and activities to improve wellbeing and reduce risk of suicide. A range of projects have been supported including postnatal support for mothers, a counselling project for young people, and a suicide bereavement peer support group.
- **On Your Mind Gloucestershire** is an online mental health support finder for young people up to the age of 25. It includes a directory of trusted local mental health services, self-help resources, and self-referral access to many NHS services in the county. The way the service looks, feels and works was informed by research and testing with children and young people.
- A new partnership between **Young Gloucestershire** and **Gloucestershire Health & Care NHS Trust** is supporting young adults with emotional wellbeing and mental health needs. The team offers support with building confidence and emotional resilience, developing healthy relationships, getting back into education and volunteering.
- The community mental health transformation programme is continuing to look at how we provide easier access and better support for adults with serious mental illnesses. Locality Community Partnerships (LCPs) have been introduced in a number of Gloucestershire districts to bring together statutory, voluntary and community organisations in a local area to discuss how best to meet the needs of individuals with serious mental illness and put the person at the centre.

- Relunched in April 2024, the **Mental Health Support and Advice Service** works alongside communities to enhance local community provision, reduce stigma and isolation, and provide 1:1 support for individuals struggling with mental illness to increase resilience, as well as helping with onward care and independence.
- Over the last five years, the Public Health team have funded a range of **free mental health training** open to anyone working or volunteering within the public or voluntary sectors in Gloucestershire. This has included training on suicide prevention, and awareness courses on self-harm and mental health. Around 300 people from a range of organisations attend the training every year.

#### case study

### Spotlight on: our new Suicide Prevention Strategy

In 2024, the Gloucestershire Suicide Prevention Partnership launched a new Suicide Prevention Strategy for the county. The strategy sets out seven strategic priorities and is designed to provide a framework to guide local action to prevent suicide and support those affected.

The strategy has been informed by the latest available local and national intelligence on suicide trends and risk factors, as well as discussions with a range of stakeholders.

No single agency can achieve suicide prevention alone, and working in partnership remains at the heart of our local approach. You can read more [here](#).

## How we're listening

Over the last five years, we have taken opportunities to listen to and learn from the experiences of key stakeholders, including service users and those with experience of mental ill-health.

All boards and committees with a focus on mental health have representation from people with 'lived experience' of mental health issues.

In 2023, the Mental Health and Wellbeing Partnership Board relaunched regular stakeholder events to bring together providers of mental health services with experts by experience, to continue the conversation on how we work together.

#### case study

### Spotlight on:

#### the Diverse Ethnic Research Alliance

NHS Gloucestershire ICB, Gloucestershire County Council and the University of Gloucestershire have been working together with local communities to co-ordinate a community-led research project with and for diverse-ethnic communities. The aim of the project is to explore people's perceptions of mental health and wellbeing, and the accessibility of mental health services across Gloucestershire's diverse ethnic communities.

In phase one of the project, community researchers (known as the Diverse Ethnic Research Alliance) have undertaken research with local communities. The work has highlighted issues which will be explored in phase two, including the need for more awareness and training in mental health and wellbeing that recognises the cultural aspects of mental health experiences.

### Forward look: Our priorities for the next five years

- Developing a countywide Living Well Strategy with a focus on mental health. The strategy will look at how we address the building blocks of mental health, as well as improving support and promoting good mental health for all
- Promoting the availability of local support services to individuals and groups likely to be at higher risk of poor mental health
- Working with partners to deliver our new Suicide Prevention Strategy, focusing on reducing the risk of suicide in high-risk groups and addressing common risk factors
- Continuing to progress the review of mental health crisis care to improve the support available
- Recommissioning the mental health supported accommodation service to ensure it is meeting the needs and housing requirements of existing and new residents.

# Loneliness and social isolation

**Aim:** We want to enable local people to build and nurture strong social networks and vibrant communities.

## Key achievements to date

- The development of relationships across the system has helped raise awareness of the issue at a local level and enabled more conversations around this topic
- The creation of an “Ending Loneliness in Gloucestershire Alliance” in 2023 as a campaign action group, hosted by the Voluntary Sector Alliance, with a shared vision, values, and action plan
- The sharing of data and intelligence between health and local authority partners and the voluntary and community sector has developed greater understanding of the need in the county with the 2022 annual Director of Public Health report focussing on social connections, containing data and case studies
- The sharing of data has helped bring about initiatives to address social isolation and loneliness, including:
- The Gloucestershire Volunteering Collaborative which brings together public, private and VCSE (voluntary, community and social enterprise) organisations who are passionate about the impact volunteering can have for individuals, communities and organisations. The collaborative oversees the county’s digital volunteering website ‘Go Volunteer Glos’ which helps connect would be volunteers with local volunteering opportunities.



Since the launch of Go Volunteer Glos in June 2022,

**3,590** people have registered with the site, and

**3,650** have submitted applications to become a volunteer

- **Know Your Patch Networks** which are based in each district of Gloucestershire. These multi-sector networks are for anyone involved in the adult social care field, supporting older and vulnerable people to maintain independence and wellbeing, and helping to reduce loneliness and social isolation. The networks help organisations to share information about the support available in communities
- **Thriving Communities Grants** which provides small grants to local VCSE organisations who help to create social connections, reduce isolation, improve physical and mental health and promote independence.

### case study

## Spotlight on:

Spotlight on Fairford  
and Lechlade Working 4  
Wellbeing \*

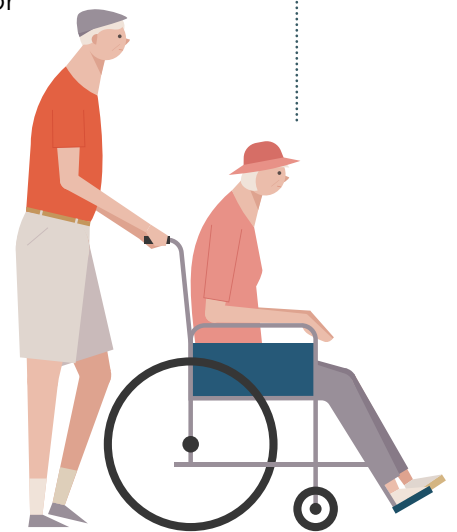
\* recipient of a Thriving  
Communities Grant  
in 2023.

The grant has enabled weekly Talking Cafés to run in Fairford, Lechlade and Beaumoor sheltered housing. The cafés provide a safe and welcoming environment for people to seek help and advice, along with a friendly smile and a chance to chat over a cup of tea or coffee.

The aim is to bring people together and give individuals who may be feeling isolated opportunities to meet and make friends.

The organisers, Working 4 Wellbeing, have built strong partnerships and work closely with other local organisations, such as Citizens Advice, the local foodbank, Age UK, the Warm & Well Energy Advisor and Gloucestershire Carers Hub.

*“ Thank you for all the events that you organise. Dad really does look forward to doing it all and getting out more, it also means Mum can socialise and get more interaction with people. I’m so grateful and appreciate everything that you and all the volunteers do, it really does make a difference, you are impacting so many lives in the local community ”*



## Forward look: Our priorities for the next five years

Over the next five years, we have clear ambitions to develop this priority area, building on the relationships that are already in place and our deeper understanding of the issue.

We are proposing that we re-frame this strategic priority as Creating a Connected Gloucestershire. The Gloucestershire VCS Alliance will drive this work with the wider VCSE sector, engaging proactively with statutory partners. The VCSE are well placed to champion this work as trusted sources of information and support in local communities. VCSE organisations work every day with people exposed to the risk factors for loneliness and isolation and those feeling disconnected.

## **We will:**

- re-frame the language we use around social isolation and loneliness to make it asset based and less stigmatising
- learn from the findings of a deep dive into the data on social isolation, loneliness and social connection to help us understand which geographic areas in the county (down to ward level) and population groups are most likely to be impacted. You can read more about the findings of the deep dive here: [A Connected Society | Flourish](#)
- apply the learning from a rapid evidence review looking at what conditions support social connections, to identify common themes which the local VCSE can support with
- build on last year's 'Loneliness Summitt' to bring together and support a regular VCSE led forum to take this work forward which will be called the **Connected Gloucestershire Alliance**.

Together, the remit of the Connected Gloucestershire Alliance will be:

1. To collate and share insights on the causes and lived experience of loneliness and the evidence on what can be effective in reducing loneliness in communities
2. To gather and hold an overview of activity, plans and strategies that aim to reduce loneliness locally and to encourage co-ordinated effort
3. To be a collective voice championing the importance of having positive relationships as an essential part of a 'good life' for all of Gloucestershire's citizens
4. To share and celebrate local examples of work to create a connected Gloucestershire to inspire and shape work in other Gloucestershire communities
5. To overturn the stigma of loneliness and change the language and narrative locally to emphasise our collective and structural responsibility to enable healthy connections
6. To make informed recommendations on the priority actions needed in the county that would lift more people out of loneliness and prevent others experiencing loneliness.

## **How we're listening**

In September 2024, more than 40 leaders from community and voluntary organisations in Gloucestershire came together at an event hosted by the VCS Alliance, to consider action to tackle loneliness in the county. This led to the creation of an outline plan for creating a 'Connected Gloucestershire'. The VCS Alliance is building on this work to create a countywide movement with plans to co-produce next steps working with partners and local communities.

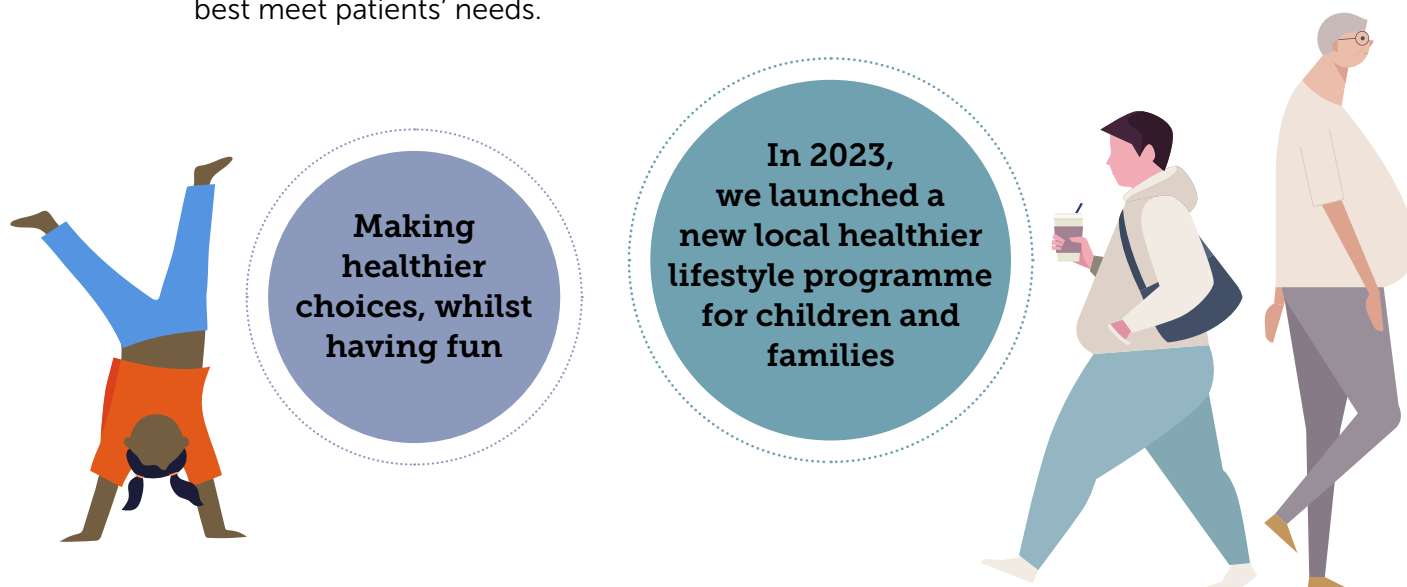
# Healthy weight

**Aim:** We want to create the conditions that encourage and enable healthier lifestyles and healthier weight across Gloucestershire communities, with a focus on groups at greatest risk of weight-related inequalities.

## Key achievements to date

Achieving our aim requires partnership working across a range of agencies. Some of our highlights across the last five years include:

- [Feeding Gloucestershire](#) has supported the development of thriving food networks across the county, aiming to ensure that everyone can access and eat good food. District-led activity around food security is well-established, with strong links to financial inclusion initiatives and a focus on sustainability
- [The Gloucestershire Holiday Activity and Food \(HAF\) programme](#) has enabled families to attend fun, enriching activities and access nutritious food, education, and resources during the school holiday period. In 2023/24, HAF delivered over 43,500 individual sessions to over 17,000 participants
- [Gloucestershire Healthy Living and Learning \(GHLL\)](#) works across primary, secondary, further education and special schools in the county to support action to encourage children and young people to be physically active and eat healthily
- The **Gloucestershire's Healthy Workplace accreditation** encourages employers to support the health and wellbeing of their employees, including promoting healthier weight policies and initiatives. As of September 2024, 41 local businesses have achieved the Gloucestershire's Healthy Workplace accreditation and a further 15 are working towards it
- In 2023, we launched a new local **healthier lifestyle programme for children and families**. The 8-week programmes offer free support to families with children who are above an ideal healthy weight. The team works directly with families to increase motivation, capability, and resilience to make healthier choices, all whilst having fun!
- We've been developing and testing new approaches to reach adults who might not usually access healthy weight support and working to develop our specialist weight management service to ensure a more integrated flexible approach to best meet patients' needs.



## case study

### Spotlight on:

#### our New Integrated Healthy Weight Pathway for Children and Young People

NHS Gloucestershire ICB has been funded by NHS England to establish an Integrated Healthy Weight Pathway to ensure children and young people living with higher levels of obesity have access to a menu of options personalised to their needs. In 2024, NHS Gloucestershire ICB secured agreement across One Gloucestershire to commission a specialist weight management service for children and young people (launching March 2025).

Children and young people living with obesity often have a range of needs which are not solely defined by their weight. Often the most effective weight management support for young people starts by understanding the barriers which may limit their opportunity to live a healthy and happy life.

A specialist team will bring together a range of professionals to reduce the complexity for families trying to navigate the care and support available to them and ensure that support is coordinated and delivered closer to home. The team will champion the voices of children, young people and families.

### Forward look: Our priorities for the next five years

Tackling obesity requires action across a range of sectors and settings, and we will continue to work in collaboration with our local partners.

Our priorities for the next five years, include:

- Working with partners, such as local food networks and Feeding Gloucestershire to improve the availability of affordable nutritious food within our communities
- Increasing the uptake of Healthy Start vitamins and food vouchers by adopting a more community-led approach
- Working with our local healthy schools programme (Gloucestershire Healthy Living and Learning) to further develop action on physical activity and healthy eating in our schools and colleges
- Working with partners to develop an Active Travel Strategy which encourages activities such as walking and cycling
- Working in partnership with the new Children and Family Centres to encourage and enable healthy lifestyles, for example, the 'First 1001 Days' programme will target healthy lifestyle support offers for pregnant women and their families through to the child's second birthday
- Co-developing a healthier lifestyles programme for young people aged 13-17 years, and for young people with special educational needs
- Developing weight management approaches for individuals who may be less likely to access support or face barriers to managing their weight due to other vulnerabilities in their lives
- Raising awareness of the weight management support available in the county and supporting health and care professionals to feel confident talking to people about their health and weight and signposting them to support.

## **How we're listening**

We engage with a range of organisations and partnerships across the county to support the healthy weight agenda, including the Feeding Gloucestershire Network, Active Gloucestershire's We Can Move programme and the Integrated Locality Partnerships which bring together health, social care and community partners at the district level.

As part of the development of our new adult weight management service, we undertook a public consultation to seek views on our proposals. We also co-design weight management interventions with individuals and service users to help make sure that we're listening to their experiences and the support we provide is tailored to their needs.

# Early years and best start in life

**Aim:** We want to ensure that every child in Gloucestershire has the best start in life.

## Key achievements to date

- The county's Children's Wellbeing Coalition has developed a single strategy for children in Gloucestershire called the [One Plan for All Children and Young People in Gloucestershire](#). The plan includes three pillars aligned to phases in children's lives, from Starting Well, to Growing Well into Being Well
- We have mapped the current 'Best Start for Life Offer' in the county with the aim of having a clear pathway and information available to support families through parenthood, this has been launched on Glosfamilies Directory [here](#)
- We continue to have a **health visiting team** which aligns well with the England average in relation to our commissioned contacts and supporting the six 'High Impact Areas'<sup>4</sup> identified within the national Healthy Child Programme for children aged 0 to 5 years
- The new Children and Family Centre and Youth Support contracts have now been awarded, and we are working towards creating our **Family Hub Network** across Gloucestershire to provide support for all families with children and young people aged 0 to 19, or up to age 25 for young people with special educational needs and disabilities. The hubs will offer local support for families and make it easier to access the right support at the right time and place
- The health visiting and early years' teams can now identify children that are eligible for free early years' education but not accessing it and have also missed their 2-year review. This will enable **targeted support for families** that may be more vulnerable
- We've seen an increase in the **percentage of children attaining a good level of development** in Gloucestershire (when measured against the Early Years Foundation Stage statutory framework)<sup>5</sup> and the county is slightly ahead of the national average.



<sup>4</sup> Health visiting and school nursing service delivery model - GOV.UK

<sup>5</sup> Early years foundation stage (EYFS) statutory framework - GOV.UK

- **We're working to prevent harm to children**
  - We're working with the Children's Safeguarding Partnership to help parents cope with crying babies and prevent abusive head trauma through the ICON programme
  - Operation Encompass, which immediately informs school staff if police have been called to a domestic abuse incident with children present, is being extended to early years settings
  - We have a Paediatric Liaison Lead within the health visiting service to support prevention of harm, in line with national guidance and standards, as well as working to improve health literacy and managing minor illnesses
- The First Dental Steps programme was rolled out in 2024 to help **improve dental health** outcomes for under 5s – all children are given dental advice and a toothbrush at their 9-12 month development review
- Our midwives and health visiting team are working with families to address the **impact of tobacco dependency**, and support parents and carers to access smoking cessation support.

#### case study

### Spotlight on:

Early Years Special Educational Needs (SEN) Training

We have been working with the organisation Dingley's Promise to roll out training for all early year practitioners and reception teachers to build awareness, skills and confidence to support the learning, wellbeing and inclusion of children with special educational needs in mainstream settings.

To date:

- 50 early year Special Educational Needs Coordinators (SENCOs) have completed the accredited level 3 SENCO training
- 14 early years' settings have completed the training and been awarded the Dingley's Inclusion 'mark of achievement'
- 28 early years' settings are participating in the early years' service's Enhanced Inclusion Support Programme.

A 'ready for learning' audit tool and resources have also been developed to identify preschool children in need of additional support to achieve expected developmental levels and help ensure a positive transition to school to support their wellbeing and inclusion.

## Forward look: The One Plan for All Children and Young People in Gloucestershire

The One Plan for All Children and Young People in Gloucestershire includes three pillars aligned to phases in children's lives, from Starting Well, to Growing Well into Being Well.

To deliver the plan there will be three sub-groups. The Best Start in Life sub-group will become the Starting Well sub-group and lead on the delivery of the Starting Well Pillar Plan.

Priorities include:

- Supporting children and families to be ready for learning and experience a positive transition to school
- Promoting healthy routines and lifestyles through advice, information and support
- Ensuring early education and childcare places are available for and meet the needs of all children, including those with SEN and disabilities
- Ensuring all practitioners supporting young children and families are confident to address and meet their needs, using trauma informed approaches
- Working across the system on a joint workforce strategy which celebrates and values the vital role professionals play
- You can read more about the One Plan for All Children and Young People in Gloucestershire here: <https://www.gloucestershire.gov.uk/one-plan>.

### How we're listening

The One Plan for All Children and Young People in Gloucestershire commissioned community insights research over the summer and autumn of 2023 with parents with young children, which helped inform our priorities. The strategy also incorporated feedback from a wide range of existing engagement forums including the Maternity Voices Partnership, the Parent Carer Forum and Healthwatch. We will continue to invite feedback and engage via our Starting Well sub-group meetings.

# Health and housing

**Aim:** Make sure health and wellbeing are promoted through improvements in the quality, affordability, availability and suitability of housing.

## Key achievements to date

The Gloucestershire Housing Partnership (GHP) oversees a range of work across international resettlement, domestic abuse, homelessness and rough sleeping. The purpose of the partnership is “to ensure that everyone living in Gloucestershire has a home that meets their needs and enables them to live healthy, happy and successful lives.”

Our achievements to date, include:

### Providing a diverse housing offer:

- Work continues to support the development of new housing, including extra care housing and accessible homes. This has led to more people supported to live at home, remain with loved ones or in their own community and have better health and wellbeing outcomes
- A new Disabled Facilities Grant pathway has been developed for people with rapidly progressing or highly debilitating conditions such as Motor Neurone Disease (MND) to enable home adaptations
- A Specialist Housing Occupational Therapist has been employed (hosted by Gloucestershire Health and Care NHS Trust) to provide specialist advice to service users and partner organisations on accessible housing.

### Bringing existing housing stock conditions up to standard:

- A stock condition survey was completed for housing in the county with 6,000 houses surveyed across five districts
- We have been successful in applications for a number of grants to improve the housing stock in Gloucestershire. This was due to having an established partnership in place through the Warm and Well Steering Group.

### Homelessness and rough sleeping:

- Local authorities have continued to invest government funding provided under the national Rough Sleeper Initiative (RSI). Outreach services operate countywide, responding to ‘Streetlinks’ and actively engaging rough sleepers to address their needs. Additional emergency accommodation is provided during periods of bad weather under the Severe Weather Emergency Protocol (SWEP)
- The local Next Steps Accommodation Programme (NSAP) is helping prevent people from returning to the streets. We currently have three buildings with 50 units in Gloucester targeted at former rough sleepers and the homeless cohort. Referrals are open to all districts
- A ‘complex homeless prevention support service’ (CHPSS) is being piloted. The multi-disciplinary team aims to support rough sleepers who face multiple disadvantages.



### Resettlement:

Since 2021, 43 families have been welcomed into settled accommodation through the Afghan Support Resettlement schemes, and 1,760 Ukrainians (as of December 2024) have arrived on the Homes for Ukraine scheme, thanks to partnership working across public sector bodies, VCSE organisations and our local communities.

### Supporting victims of domestic abuse:

The Places of Safety scheme has been expanded with 802 properties improved under the domestic abuse target hardening scheme and five properties completed under the sanctuary scheme.

In 2023, for the first time, Gloucestershire agreed to participate in the Women's Rough Sleeping Census which was facilitated by the Nelson Trust, P3 and the Homeless Healthcare Team. The census included a survey of women about their rough sleeping experiences.

The results suggest that women's rough sleeping in Gloucestershire is hidden, intermittent, and shaped by male violence. Safety was the key theme in responses from women and professionals. The findings will inform potential commissioning opportunities for women's only accommodation and homeless pathways to help reduce inequalities experienced.

There were 300 people supported through the Warmth on Prescription scheme during the winter of 2023/24. They were given help with bills, additional advice and energy saving tips and heated blankets were provided in some cases. An evaluation was carried out with a survey sent to all recipients of support. Out of the 252 surveys returned:

- 73% said they had fewer hospital stays this winter
- 68% said they had fewer trips to A & E

People have also commented on their physical and mental health as a result of having a warmer home:

- 69% said their health conditions had improved
- 83% felt their mental health had improved
- 54% felt their physical health had improved

#### case study

### Spotlight on:

Warmth on Prescription

Recipients of support were also asked about quality of life, with

**85%** saying it had improved, and

**96%** said the support had a positive impact on their day-to-day lives.



## Forward look: Our priorities for the next five years

The Gloucestershire Housing Partnership will continue to provide strategic leadership and act as the voice for housing in Gloucestershire by:

- Facilitating and promoting links between the health and wellbeing and housing sectors
- Adopting a trauma informed approach to addressing key housing issues and barriers
- Responding to and seeking to influence local, regional and national housing policy as part of a wider focus on 'healthy place shaping'- creating communities and environments which support health and well-being by for example, enabling active travel or fostering community connections
- Supporting partners to deliver effectively on ambitions for rough sleeping, migration and domestic abuse
- Supporting and encouraging the development of high-quality energy efficient new housing and making best use of existing homes
- Achieving recognition for innovation and best practice
- Maximising funding opportunities and making best use of collective resources
- Supporting improvements and adaptation of existing housing stock to ensure best use.

Our priorities for the next five years are:

- Homelessness and rough sleeping
- Providing a diverse housing offer
- Domestic abuse related housing
- Housing and health
- International Resettlement.



## How we're listening

The Gloucestershire Housing Partnership includes diverse membership from across system partners and connects into other boards and partnerships to promote links between health and wellbeing and housing sectors. The board regularly invites guests to meetings to share information and help join up areas of work.

There are a number of engagement opportunities across all the programme areas that sit within the Housing Partnership. These include:

- The Local Domestic Abuse Partnership Board Engagement and Consultation Coordinator whose role is to ensure the voice of the victim/survivor is represented
- The work of our complex homeless prevention support service in engaging and understanding the needs of complex rough sleepers, and our Breakfast clubs for rough sleepers.

# Addressing the wider issues which impact on our health and wellbeing

‘Access to good-quality homes, education, and safe spaces in which to play, exercise and socialise all determine how long we’re likely to live – they are the building blocks of a healthy society’. (*The Health Foundation, July 2022*).<sup>6</sup>

Over the next five years, the board will continue to focus on the wider issues which impact on our health and wellbeing. The ‘wider determinants’ of health describes the impact that environmental, social and economic factors have on our health and wellbeing. This includes our living conditions, housing, financial circumstances and our access to employment and education. Differences in people’s circumstances are a leading cause of social inequalities, which are in turn a leading cause of health inequalities. Health inequalities are avoidable and preventable differences in people’s health outcomes, experiences and access to health care.

There is a range of work happening in the county to address the wider determinants of health and health inequalities, which the board can help support.

- **Housing** is one of the board’s seven strategic priorities. The board will continue to support the work of the Gloucestershire Housing Partnership to ensure that everyone living in Gloucestershire has a home that meets their needs and enables them to live healthy lives.
- **Employment and skills development** is a priority in the county’s [new Economic Strategy](#) (2024-2034). There is scope to learn from the work of the [Gloucestershire Employment and Skills Hub](#) in supporting those who may face barriers to employment to build their confidence and skills and access opportunities. The new economic strategy also focuses on the importance of inclusive growth, making sure that all Gloucestershire residents can access, benefit from, and positively contribute towards the economy. This includes those experiencing health inequalities.
- The Gloucestershire Health and Wellbeing Partnership has also identified ‘employment’ as an ‘exemplar theme’ in the [Gloucestershire Integrated Care Strategy](#) recognising the relationship between employment and health.
- **Healthy place shaping:** The board’s district council members play a key role in helping shape healthy environments and places through their responsibilities for providing local services, such as planning, leisure facilities, and environmental health, including local air quality plans. There is an opportunity for the board to work with all its members to promote ‘healthy place shaping’ – creating communities and environments where it is easy to be healthy.
- **Supporting environmental sustainability:** All Gloucestershire councils and NHS partners in the local Integrated Care System have stated their commitment to addressing climate change and achieving net zero targets. It is important that the board continues to work in partnership to support this agenda. Evidence published by the UK Health Security Agency<sup>7</sup>, shows that climate change has significant adverse impacts for health and wellbeing, while actions to reduce the impact of climate change have co-benefits for health.

<sup>6</sup> How to talk about the building blocks of health - The Health Foundation

<sup>7</sup> Climate change: health effects in the UK - GOV.UK

## Spotlight on:

### the Gloucestershire Health Inequalities Hub

To help everyone achieve the health equity they deserve, it is important that everybody understands the underlying causes of ill health. Achieving health equity is a core focus of the board's work, and we want to make sure that our partners understand what they can do to make a difference.

In 2023, Gloucestershire's Prevention and Health Inequalities Hub was launched; an online collection of information, resources and practical tools to help people to better understand and act to improve health equity in their areas of work.

In developing the hub, Gloucestershire's Health Inequalities Framework was created by Gloucestershire's Integrated Care System (ICS) health inequalities leads, setting out the collective approach to addressing health inequalities.

The framework has been designed to help:

- Organise and describe the work being done to tackle health inequalities
- Understand the types of activity that are taking place
- Understand the contributions that different parts of the system are making over time, showing our collective response.



**Spotlight on:**board members'  
roles as anchor  
organisations

Anchor organisations are organisations with a significant stake in a local area. Anchors can help generate social, economic and environmental benefits for local communities through their actions and can contribute to reducing inequalities and improving outcomes for individuals and communities.

Examples of how anchors can make a difference, include: targeting training and employment opportunities at local communities, particularly those who might face barriers to employment; seeking to secure social value through their procurement and supply chain, and using their buildings and assets to support local communities.

In 2021, the Gloucestershire Health and Wellbeing Board approved ten principles which set out how the member organisations will act as anchors for the local community going forward.

Over the next five years, the board will continue to work with members to promote the anchor principles and create opportunities for shared learning.

## The 10 anchor principles

1. Commit to target voluntary, training and employment opportunities for local residents, especially in underrepresented and disadvantaged communities.
2. Support staff development and career progression, targeted at groups who are underrepresented in senior positions.
3. Maximise the social, economic and environmental benefits to the local community by being a fair and ethical partner.
4. Consider the implications of social value in all relevant decision-making processes.
5. Follow the highest ethical standards in our operations and supply chains.
6. Support local community action and mutual aid groups by being an active community partner, focusing in areas with greater need.
7. Consult with local community groups to produce policy solutions together.
8. Protect the local environment and minimise negative impacts on places and spaces.
9. Promote healthy lifestyles and support the health and wellbeing of the community.
10. Act as a positive example of ethical and effective leadership to encourage innovation and action across the community.

You can read more about anchors in the 2021 Director of Public Health Annual report: [Sources of Strength: Securing Gloucestershire's health and wellbeing through an anchor institutions approach](#)

# Delivering the priorities

## **New sponsors for each of the priorities**

To support delivery of the Joint Local Health and Wellbeing Strategy over the next five years, each of the seven priorities has been allocated two sponsors from the Gloucestershire Health and Wellbeing Board. The sponsors will act as a point of contact between the priority and the board, helping to update on progress and escalate any risks or issues.

## **Developing our approach to monitoring progress and measuring impact**

The board has developed a dashboard for each priority which reports on county level performance compared to the national average. You can view the dashboard in the next section.

In producing the mid-point review, the board has recognised that we need to develop our approach to measuring progress and showing impact across the seven priorities.

The dashboard mainly includes high level population health outcomes. While these are important, it can be hard to show the contribution which local activity makes at the population level, particularly as the factors which impact on our health and wellbeing are complex.

Over the next six months, we will work with the priority leads to develop 'logic models'<sup>8</sup> for each of the seven priorities which will capture the short, medium, and longer-term outcomes that their activities will contribute to. We will look at the outcomes from the perspective of individuals and communities, as well as the wider system. We will also look at how we can use qualitative data alongside quantitative data to help measure impact and distance travelled. This will include listening to and working with communities and individuals to ensure that our approach and outcomes take into account their perspectives and what matters to them.

The priority lead sponsors will support this work and report back to the board.

<sup>8</sup> Creating a logic model for an intervention: evaluation in health and wellbeing - GOV.UK

# Health and wellbeing dashboard

Key	
	Significantly better than the national average
	No significant difference to the national average
	Significantly worse than the national average
	No comparison possible
X	no update available
!	updated indicator

Section	Indicator	Updated	Gloucestershire	England
			Latest Value	Latest Value
Life expectancy and health inequalities	Life expectancy at birth (male), 2021-2023	!	80.0	79.1
	Life expectancy at birth (female), 2020-2022	!	83.8	83.1
	Inequality in life expectancy at birth (male), 2018-2020	X	7.6	9.7
	Inequality in life expectancy at birth (female), 2018-2020	X	5.8	7.9
	Infant mortality rate, 2020-2022	!	3.5	3.9
Physical activity	Percentage of physically inactive adults, 2022/23	!	18.5	22.6
	Percentage of Children and Young People who are Inactive (less than an average of 30mins/day), 2022-2023	!	27.3	30.2
	Percentage of Children and Young People who are Active (an average of 60+mins/day), 2022/23	!	48.7	47.0
	Percentage of Children and Young People doing 6+ hours exercise per week, 2024	!	48.7	#N/A
ACE's	Percentage of Children and Young People reporting that they 'feel safe at home or the place where they live', 2024	!	90.4	#N/A
	Percentage of Children and Young People reporting when they are worried about something, there is a trusted adult they can go to for help? 2024	!	84.3	#N/A
Mental Wellbeing	Number of CYP aged under 18 supported through NHS funded mental health with at least one contact (12 month rolling), September 2024	!	8,395	798,479
	Percentage of Gloucestershire schools who are supported by a Mental Health Support Team, 2023	!	47.6	N/A
	Percentage of people who have completed IAPT treatment who are "moving to recovery" (18+ yrs), Oct 24	!	56.2	N/A
	Percentage of physical health check achievement for people with Severe Mental Illness, 1st April 2023-31st March 2024	!	79.5	N/A
	Emergency hospital admissions for intentional self-harm (Directly Standardised Rate) , 2022/23	!	114.5	126.3
Social isolation and loneliness	Percentage of adults who feel lonely often/always or some of the time, 2019/20	X	20.4	22.3
	Percentage of referrals to the community wellbeing service for social isolation and loneliness, December 2023	!	43.9	N/A
	Percentage of Children and Young People often feeling close to other people or feeling close to people all of the time, 2024	!	52.8	N/A
	Percentage of adult social care users who have as much social contact as they would like (18+ years), 2022/23	!	48.3	44.4
Healthy Lifestyles	Reception children: prevalence of obesity (including severe obesity), 2023/24	!	9.3	9.6
	Reception children: difference in obesity between most deprived and least deprived decile, 2022/23	!	6.7	6.6
	Year 6 children: prevalence of obesity (including severe obesity),2023/24	!	19.9	22.1
	Year 6 children: difference in obesity between most deprived and least deprived decile, 2021/22	!	15.5	17.1
Early Years and best start in life	School Readiness: percentage of children achieving a good level of development at the end of Reception, 2022/23	!	67.8	67.2
	School Readiness: percentage of children with free school meal status achieving a good level of development at the end of Reception, 2022/23	!	47.8	51.6
	Percentage of 2 year old's benefiting from funded early education, 2024	!	64.2	74.8
Housing	Percentage of households which are overcrowded in terms of bedrooms, 2	X	2.0	4.4

# Health and wellbeing dashboard – what does it tell us?

The findings from the latest dashboard are summarised below. The full dashboard also contains data at district level (where it is available). You can understand more about the health and wellbeing of the Gloucestershire population by reading the local Joint Strategic Needs Assessment: [Health and Wellbeing | Inform Gloucestershire](#)

## Overall health outcomes in the county

Overall, life expectancy at birth (the average number of years that an individual is expected to live based on current mortality rates) for men and women is significantly above the national average; at 80 years for men and 83.8 years for women (2021-23).

The overall gap in life expectancy between those in the most and least deprived parts of the county is 7.6 years for men, and 5.8 years for women (based on 2018-20 data). While this is significantly better than the national picture, the gap in life expectancy and the impact of deprivation on health outcomes highlights the importance of the Board's work to address health inequalities. In future, we will also include measures like 'healthy life expectancy' in our dashboard. This measures the average number of years that an individual is expected to live in good or very good health and helps us understand someone's quality of life over their lifetime.

## Physical activity

Physical activity has significant benefits for health, both physical and mental. The Chief Medical Officer (CMO) recommends that adults undertake a minimum of 150 minutes of moderate physical activity per week. Physical inactivity is defined as engaging in less than 30 minutes of physical activity per week. 18.5% of adults in the county report doing less than 30 minutes of moderate intensity physical activity per week (2022/23). This is significantly better than the national average of 22.6%.



The CMO recommends that children and young people are physically active for an average of at least 60 minutes per day across the week. 48.7% of children (aged 5-16) in the county are active for over an hour a day (22/23). This is in line with England. However, 27.3% of children in Gloucestershire are classed as inactive (doing less than 30 minutes of activity a day).

Our ambition is to address inequalities in physical activity levels in Gloucestershire supporting everyone to live healthy, happy and active lives.

## Adverse Childhood Experiences

In the 2024 Gloucestershire Pupil Wellbeing Survey (PWS), 90.4% of students who took part said they felt safe at home or in the place where they live; and 84.3% said there was a trusted adult they could go to when they are worried about something. It is important that all children feel safe at home. Ensuring that children and young people can thrive, and life lives of choice and opportunity underpins the new Gloucestershire One Plan for Children and Young People.

Over the coming months, we will identify additional indicators for the ACEs priority, including a focus on trauma-based approaches in the county and the new Making Every Adult Matter programme which focuses on supporting adults experiencing severe and multiple disadvantages.

## Mental wellbeing

The county rate of all age emergency hospital admissions for intentional self-harm was significantly below the England rate in 2022/23.

People living with severe mental illness (SMI) tend to have poorer health outcomes and a lower life expectancy, often due to preventable physical illnesses.<sup>9</sup> 79.5% of people with Severe Mental Illness (recorded on GP registers in the county) received a comprehensive physical health assessment in 23/24.

The percentage of Gloucestershire schools who are supported by a Mental Health Support Team as part of the Trailblazer scheme (now known as Young Minds Matter) has increased with 47.6% of schools now covered by the programme. The teams provide early intervention for children and young people with mild to moderate mental health issues; for example, exam stress, behavioural difficulties or friendship issues; as well as providing support to staff. The teams act as a link with local children and young people's mental health services ensuring those children with a higher level of need receive the appropriate level of support.

New programmes and offers to support people's mental wellbeing have been introduced in the county and we will look at how the impact of these developments can be captured as part of our dashboard review.



<sup>9</sup> [NHS England » Improving the physical health of people living with severe mental illness](#)

## Social isolation and loneliness

Loneliness can impact people of all ages and is associated with poorer health outcomes. In 2019/20, 20.4% of adults in the county who participated in the Sport England Active Lives survey reported that they felt lonely always, often or some of the time. This is in line with the national average.

In 2023, an average of 43.4% of referrals to the county's Community Wellbeing Service included social isolation and loneliness as one of the reasons.

In the 2024 Gloucestershire Pupil Wellbeing Survey, 52.8% of children and young people reported that they felt close to other people often or all of the time. Having good connections with others can help to combat loneliness and improve mental wellbeing, and we will develop new indicators to measure the impact of the proposed 'Connected Gloucestershire' movement on social connections in the county.

## Healthy weight

We want to create the conditions that enable healthier lifestyles and healthier weight across Gloucestershire communities, with a focus on those at greatest risk of weight-related inequalities.

In 2023/24, 9.3% of reception aged children in the county were living with obesity, which is in line with England, and 19.9% of children in year 6, which is significantly lower than the England level.

If you are a child living in Gloucestershire, you are more likely to live with obesity if you live in a deprived or urban neighbourhood. Locally, obesity levels are 6.7% higher for reception aged children living in the most deprived communities compared to those living in the least deprived and 15.5% higher for year 6 children.

In 2023, we introduced a new children and young people's weight management service in the county, which tailors services to those with greatest need of support. We're also taking steps to develop weight management offers for adults living with overweight and obesity, with a focus less likely to access support or face barriers to managing their weight due to other vulnerabilities.



## Early years and best start in life

Ensuring all children are able to get the best start in life is vital. Our dashboard currently includes indicators to measure school readiness. School readiness is a key measure of early years development and is an indicator of how prepared a child is to succeed in school cognitively, socially and emotionally. It can affect educational attainment, and longer-term life chances.

In 2022/23, 67.8% of children in the county achieved a good level of development at the end of reception, which is in line with England. For children receiving free school meals, the percentage was lower at 47.8%. Receipt of free school meals is often used as an indicator of socio-economic disadvantage.

There are benefits to children accessing early years education including language development, social skills and confidence before they start school. In 2024, 64.2% of eligible 2-year-olds in the county were accessing their free entitlement to early education in maintained nursery, primary, secondary and special schools. This is significantly below the national percentage. The health visiting and early years' teams can now identify children that are eligible for free early years' education but not accessing it and have also missed their 2-year review. This will enable targeted support for families that may be more vulnerable.

'Starting well' is a key priority in the new Gloucestershire One Plan for children and young people. There is a commitment to close the gap and eliminate inequalities to ensure that all children in the county get the best start in life and can thrive. A new indicator set is being developed to support the work of the One Plan starting well sub-group. This will inform the review of the Health and Wellbeing Board dashboard.

## Health and housing

There is currently only one outcome measure included in the dashboard for health and housing. This is an occupancy rating which provides a measure of whether a household is overcrowded or under-occupied. An occupancy rating of negative 1 or less implies that a household has fewer bedrooms than the standard requirement, positive 1 implies there are more bedrooms than required, and 0 implies that standard required is met.

Data from the 2021 Census, indicates that across Gloucestershire 2.0% of households had fewer bedrooms than required (compared to 2.6% in the 2011 census). This percentage is significantly lower than the national average of 4.4%. However, data shows that there are differences at a local level, with some Lower Super Output Areas<sup>10</sup> having higher levels of overcrowding compared to the county average.

The priority leads for housing and health have identified new outcome measures to understand progress, including affordable home delivery, homeless preventions, and disabled facilities grants delivered. These will be included in the dashboard review.

<sup>9</sup> (Footnote – Lower Super Output Areas (LSOAs) are a geographical hierarchy designed to improve reporting of small area statistics. LSOAs have an average population of 1,500 people or 650 households.

