



AGENDA ITEM (11)(a)

HEALTHY COMMUNITIES PROGRAMME UPDATE

Accountable Member	Councillor Jenny Forde Cabinet Member for Health, Wellbeing and Public Safety
Accountable Officer	Heather McCulloch Healthy Communities Manager 01993 861562 heather.mcculloch@publicagroup.uk

Purpose of Report	To consider the update report from the Healthy Communities service
Recommendation(s)	That this update report is noted.
Reason(s) for Recommendation(s)	To keep the Committee updated on progress and to provide an opportunity to discuss emerging issues and developments.

Ward(s) Affected	All Wards
Key Decision	No
Recommendation to Council	No

Financial Implications	There are no Financial Implications
Legal and Human Rights Implications	There are no Legal and Human Rights Implications.
Environmental and Sustainability Implications	There are no Environmental and Sustainability Implications
Human Resource Implications	There are no Human Resource Implications
Key Risks	There are no key risks
Equalities Analysis	No effects on protected groups have been identified.

Related Decisions	There are no Related Decisions.
Background Documents	There are no Background Documents.

Appendices	Appendix 'A' – Cotswold District Council Public Health Profile
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Performance Management Follow Up	There is no Performance Management Follow Up in addition to that conducted in the course of normal operations
Options for Joint Working	There are no options for Joint working beyond those which are already in place

1. Background Information	
1.1	This report will focus on the element of the Healthy Communities service which is concerned with supporting and enabling residents to have greater access to services and opportunities which improve their health and wellbeing. The Council has no statutory function in regard to the direct delivery of Health services. Our focus instead is on prevention, with services informed by locally derived evidence. Healthy Communities also comprises Strategic Community Safety but this is not included in this report. Strategic Community Safety has been managed by the Healthy Communities manager since 2016.
1.2	The Healthy Communities team (excluding Community Safety) represents 1.75 full time equivalent staff dedicated to Cotswold District Council. This is divided across three roles – two Healthy Communities Officers and one Healthy Communities Manager. More broadly two of the three roles are shared with West Oxfordshire District Council.
1.3	The team undertakes a mixture of community focussed practical work and strategic development work with partners and stakeholders. In Gloucestershire the principle of working as a 'whole system' is well established. This approach is defined as all stakeholders involved in health services working together, including statutory health services, local authorities and the community and voluntary sector. The Council, through the engagement of the Healthy Communities team, works closely as part of this 'system' with many key partners including Gloucestershire Clinical Commissioning group (GCCG) and Gloucestershire County Council Public Health team (GCC).
2. The Cotswold locality health profile	
2.1	<p>The Cotswolds is a beautiful place to live and work and residents in the main enjoy a good quality of life. A snapshot of recent data from the Joint Strategic Health Assessment (JSNA) is included below:</p> <ul style="list-style-type: none"> • Cotswolds has an older population profile than the GCCG average. There are a high proportion of patients aged 65+ and 85+ which has implications for age-related Long Term Conditions. • Cotswolds is one of the 20% least deprived districts/unitary authorities in England, however about 8% (1,100) of children live in low income families and Cotswold district ranks as the most deprived district in the county under one of the measures of deprivation which is 'Barriers to Housing and Services'. • Life expectancy for both men and women is higher than the England average. • The number of people with caring responsibilities is higher than the Gloucestershire average. • The gap in the employment rate between those with long term conditions and those without is 19.2% which is 8.7% higher than for Gloucestershire. • In North Cotswold, compared with the county as a whole, there is higher prevalence of cancer and Chronic Heart Disease (CHD) • In South Cotswold prevalence of long term conditions is lower than the county average • The leading causes of avoidable mortality for women in Cotswold district in 2018 were cancer; cardiovascular disease and unintentional injuries • The leading causes of avoidable mortality for men in Cotswold district in 2018 were cardiovascular disease; cancer and respiratory disease

- The percentage of adults doing 150 minutes of exercise per week has fallen to 64.5% compared with 69.2% for Gloucestershire
- Smoking prevalence for adults is lower than the Gloucestershire rate but for young people it is marginally higher
- There is potential to increase uptake of seasonal flu and the MMR immunisation as well as coverage and uptake of bowel and cervical cancer screening
- Research carried out in the Cotswolds in 2015 found that the sectors of the population most vulnerable to loneliness and isolation are on the fringes of Stow-on-the-Wold, Bourton-on-the-Water and Lechlade. Higher vulnerability areas included the north of the area around Mickleton, Saintbury, Chipping Campden, and Bourton-on-the-Water and in the south at Tetbury and Fairford and the area to the West of Cirencester.

3. Current work programme

3.1 Place-based work

- 3.1.1 *Place-based work* focusses on a particular geographic area. It is an approach favoured by health partners as it is shown to be effective in engaging residents and identifying and mobilising community assets and resources. The team is currently working in a number of locations and taking a place-based approach – Bourton on the Water, Tetbury and Fairford.
- 3.1.2 Bourton on the Water is one of 6 pilot projects led by the 6 district councils in Gloucestershire, commissioned and funded by GCCG and GCC. The 2 year pilot projects are testing the District Councils' effectiveness in improving the health outcomes of residents in 6 particular locations. Each project received funding of £43,000 from the commissioners. It is hoped that as a result of the intervention the community in Bourton will be more aware of services, able to access a wider range of opportunities and be more actively engaged in matters concerning their own health and the health and wellbeing of their neighbours and community. Each project is being evaluated by the University of the West of England.
- 3.1.3 Bourton on the Water was selected following a review of available data. It is an area which faces challenges in terms of access to services. There have also been some concerns over the lack of opportunities for young people in the area.
- 3.1.4 The work in Bourton on the Water is well established and coming towards the final phase of the project. The following outputs have been achieved:
- Local project steering group in place including CCG & GP practice
 - New learning programme designed with Glos Wildlife Trust to retain disengaged young people
 - Consultation with young people towards the development of a Youth Council
 - Dementia training with residents and businesses
 - Health champions programme launched
 - Family support sessions in collaboration with the primary school
 - The establishment of the Funstival – a large scale community and health information event
 - Physical activity programme for diabetic patients
 - A Wellbeing advisor appointed to engage with residents, families and GPs
- 3.1.5 Conversely the work in Tetbury is just getting underway. This work is focussed on the needs of older people in the town. A developer contribution of £127,000 was secured through the planning system from a large development for older people. The rationale was that the development would have a significant impact on the town's infrastructure by increasing the number of older residents. It was felt appropriate therefore to seek a contribution to mitigate this impact. The contribution was secured by the District Council directly.

- 3.1.6 Currently the focus of work is on establishing what assets and services exist in Tetbury and what residents, community groups, local stakeholders and statutory partners think is the best way to allocate the investment. Tetbury Town Council is closely involved in the project. The beneficiaries will be people aged 55+. A health information event is planned to raise public awareness of services. A steering group is being established to include the GP practice, Town Council and voluntary sector. This group will consider options resulting from the consultation and develop some proposals for investment. These options will be brought back to the Council in early 2020.
- 3.1.7 The Friends of Fairford and Lechlade Communities and the local Patient Participation group (PPG) are working on a community wellbeing project. Gloucestershire Rural Community Council (GRCC) are assisting with the initiative. The Healthy Communities officer is engaged with the steering group and provides guidance and professional support. The project partners are currently exploring successful approaches which have been applied elsewhere. Organisers are looking particularly closely at the Frome model which has been shown to be very effective. A 'compassionate community' programme in Frome, Somerset, has been successful in reducing emergency admissions to hospital by 30% over the last 3 years. Frome Medical Practice, serving the 28,000 population in Frome and the surrounding area, have taken the innovative approach of combining a compassionate community programme of community development with routine medical care. The success of the programme makes routine use of the most effective intervention for improving health and longevity, which is social relationships. The group is also networking with commissioners locally. A survey is capturing residents' feedback about the strengths and gaps in the local area. A public event is planned for later in the year to hear more about the Frome model, look at the results of the survey and determine a course of action.

3.2 Special populations

3.2.1 Young people

- 3.2.1.1 We have managed the distribution of Youth Activities funding which was given by Gloucestershire County Council until March 2018 and then Cotswold District Council in 2018/19.
- 3.2.1.2 Through this funding we have also been able to support World Jungle to establish the Cotswold Youth Network which currently has a linked membership of around 170 groups and interested parties.
- 3.2.1.3 We have developed, with the support of the Phoenix Trust, a Leisure Card scheme to enable community groups working with vulnerable young people to access the Leisure Centre at no cost.
- 3.2.1.4 The Council is engaged with other health partners and Active Gloucestershire on the countywide Gloucestershire Moves programme and are currently involved in a project to increase physical activity amongst young people and families. The project will encourage participants to walk more and walk together. It will link strongly to our plan to train walk leaders and encourage more health walks to be developed.

3.2.2 Disabled people

- 3.2.2.1 The team is concerned to ensure that disabled people have fair access to services and have launched the Inclusion Award. Working alongside Active Impact, a specialist disability organisation, and people with lived experience, we use the Award to recognise the commitment of organisations who are already inclusive and develop the competency of those who wish to become inclusive. The aim is to have more groups providing a safe and exciting opportunity for disabled people in the Cotswolds.
- 3.2.2.2 Work is also underway to improve the offer at our leisure centres for disabled people with a new weekly class for learning disabled adults getting underway this month.

3.2.3 Dementia

3.2.3.1 The team has long been engaged in dementia work. This continues with an officer trained to deliver Dementia Awareness sessions and who works closely within the county's 'Dementia training and education strategy' and with the 2togethertrust. Support is also given to communities wishing to develop Dementia Friendly schemes. There is some staff dementia awareness training available and potential to develop a broader programme to include Councillors.

3.3 Supporting the voluntary sector

3.3.1 The team is involved in overseeing two grants – the Community Activity Support Grant Scheme and the Defibrillator grant scheme. There is also investment made through the Community Welfare grants to the Churn, Cotswold Friends, Cotswold Counselling, GRCC and the Stroud and Cotswold Citizens Advice Bureau – all of which are relevant to the work of the team.

3.3.2 The service coordinates the quarterly Health and Well-being Partnership which brings together representatives from a wide range of voluntary and statutory partners.

3.4 Strategic development

3.4.1 In the context of the development of the Council plan and given GCC has now published the priorities for the new countywide Health and Wellbeing Strategy, the opportunity arises for the Council to develop a Health and Wellbeing Action plan. The Healthy Communities team is beginning to scope out this piece of work. A full review of the empirical data, alongside consultations with voluntary sector partners and stakeholders will inform the actions. The Cabinet member for Health, Wellbeing and Public Safety will be overseeing this approach and will summarise some key priorities in the Autumn 2019.

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