



Appendix A2 - Public Health & Communities Policy Committee - Quarter 1 (1st April - 30 June '24) Performance Progress Report

Code	Title	+/-	2023/24 Outturn	2024/25 Target	Q1 Progress	Comparison over last 12 months	Management Notes
A&C - Communities & Public Health							
Business Plan actions:							
HC3.3	As part of the wider work around tackling domestic abuse and sexual violence, we will continue to deliver the Domestic Abuse Safe Accommodation Strategy to ensure victims are able to access safe and appropriate accommodation and support services.		n/a	n/a	On Track	n/a	The commissioned service - Next Link Plus continues to provide 52 units of safe accommodation and support within that safe accommodation. In addition, over the past year the Sanctuary Scheme has been developed enabling victims to remain safely in their own home wherever possible. A co-located Independent Domestic Violence Advisor within the Bristol City Council Housing teams has increased the quality of service to victims of domestic abuse. Domestic Abuse Housing Alliance (DAHA) accreditation is in progress.
HCW2.1	Deliver the priority actions contained within the Bristol Health and Wellbeing Strategy, including: - Providing evidence-based parenting support via Family Hubs - Improving rates of physical activity in the 30% most deprived wards in Bristol - Supporting mental health awareness within the workplace and the night-time economy.		n/a	n/a	On Track	n/a	Systems leadership training has been delivered to member of the Bristol Active City Network (externally funded) . Emphasis on distributed and collective leadership together with collaboration both within and outside organisations is currently the main focus. In the first three months, 8 people attended Thrive at Night training and 14 people enrolled onto Thrive at Work e-learning.
HCW2.2	Work with our commissioned delivery partner to produce and deliver healthy weight programmes alongside community leaders and residents, with a focus on social connection and mental health as well as eating and physical activity.		n/a	n/a	Behind Schedule	n/a	We have just completed the first 12 months of the contract with our delivery partner and targeted healthy weight programmes have been successfully delivered for adults and families. The adults programme has been oversubscribed and we are looking at ways to support additional resource for this. The community led 'test and learn' programmes (involving co-design and co-delivery) have had a slower start, but one is underway in South Bristol. There have been some problems with the provider recruiting new staff to replace some who have left, but plans are in place for addressing this and providing ongoing programmes for the year ahead.
HCW2.3	Increase access to sport and physical activity, focussing on interventions in areas where there are persistently low levels of participation. This work will be underpinned by the delivery of a new Playing Pitch Strategy and improvements to sports facilities across the city.		n/a	n/a	On Track	n/a	The development of Bristol's new Playing Pitch Strategy is underway and on track as too are investment works at Horfield Leisure Centre
HCW3.1	Build on the city's response to COVID-19 and the cost-of-living crisis, work with partners to develop our One City, Many Communities approach that will support people to get involved in their communities and help those communities be better prepared for future emergencies.		n/a	n/a	On Track	n/a	We continue to: 1.Host a fortnightly Community Exchange where we collaborate with a whole networks of community and community and voluntary groups. 2. Invest in a network of community hubs which are rooted in neighbourhood & equality communities. 3. Work to embed a One City Many Communities approach in BCC
HCW3.3	Progress key actions within the Food Equality Action Plan 2023-26, including working through the Shaping Places for Healthier Lives programme to deliver innovative ways of addressing food insecurity in Knowle West, Lawrence Hill and Lawrence Weston.		n/a	n/a	On Track	n/a	The first progress report on the action plan has been produced by Feeding Bristol and highlights work across the city (including work being carried out by BCC) towards food equality. This includes Shaping Places for Healthier Lives - which is working across BNSSG to address the root causes of food insecurity. The Progress report contains case studies/examples of projects improving food equality, local data insights into food, an overview of all the actions and their progress and recommendations on actions the city needs to take over 2024-25. This report will be presented to the Health & Wellbeing Board on 31st July 24.

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Business Plan performance metrics:							
BPPM311	Maintain the levels of engagement with community development work	+	9,689	9,700 (Q1: 2,425)	2,603	Better	The community development team has exceeded the target for this quarter. we have had major city response mainly youth violence where many conversations and engagement happened. We have also had very strong neighbourhoods' connection in our priority's neighbourhoods. There was excellent engagement on social action new developments housing and health. Many engagement on support community hubs and welcoming spaces and also strategic engagement on food security and city priorities.
City Outcome measures:							
BPOM249	Track the number of Anti-Social Behaviour incidents reported	-	64,359	Monitor Only	n/a	n/a	Progress towards this action is included in the work of several of the Keeping Communities Safe strategic groups. Most obviously the work of the Drugs and Alcohol Serious Violence Hate Crime and ASB groups. To focus on the ASB Group however key actions currently underway include: 1. Formulation of an ASB MoU to reach agreement across the partnership on how we resolve ASB to give ASB some priority and to share information develop policy process and procedure to enable organisation to participate in ASB resolution and operationally realise principles in MoU. 2. Formulation of Tier 1 and Tier 2 Information Sharing Agreements to enable sharing of data for purposes of preventing ASB (and other crime and disorder types). 3. Sharing of common barriers and blockers to identify pressures on effective resolution of ASB situations. 4. Consideration of sign-up to the Resolve ASB Standard (benchmarking approach) 5. Implementation of BCC ASB Policy 6. Internal review of BCC approaches to ASB.
BPOM251	Reduce the percentage of people whose day to day life is affected by fear of crime (QoL)	-	21.0%	Monitor Only	n/a	n/a	This is a One City problem and therefore it is acknowledged that only a one city approach can effectively reduce fear of crime. We require more data in order to unpick the drivers for this measure. Ward level data will be available in due course and it has been proposed that the Quality of Live Survey could expand this question in order to give our residents scope to provide more information as to the source of their fear – to date this has not been possible however. In the meantime then the City should consider the following strategies: Confidence-building activities (e.g. media campaigns crime compensation programs shows of police strength) aimed at counteracting misinformation and alleviating fear; Community-building activities (e.g. efforts to improve relations between retail workers and shoppers and between police and the specific communities) aimed at reducing isolation and building the sense of interpersonal commitment that generates feelings of security; Physical rebuilding (improvements in traffic and pedestrian circulation opportunities for natural surveillance lighting and appearance of specific areas); Routine non-enforcement face-to-face contacts with citizens during patrol shifts. In addition to this BCC's involvement in the joint Community Safety and Police and Crime Plan 2023 – 26 which sets specific strategic actions in the priority areas (as identified by Strategic Needs Assessment) of Modern Slavery Serious Violence Child Exploitation Domestic Abuse & VAWG Hate Crime ASB and Drugs & Alcohol. Each of these areas has a strategic working group that oversees activities to deliver to the action plan held by the overarching co-ordinating group (KCS). All of these actions deliver towards reducing the fear of crime.

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BPOM253	Reduce the percentage of children with excess weight (10-11 year-olds)	-	35.2%	Monitor Only	n/a	n/a	The latest NCMP data for Year 6 children measured during the current academic year (2023/24) will be released in December 2024. The council is leading a system-wide approach to healthy weight working with partners settings and providers across the city to support health behaviours to address the wider impacts of the food environment and opportunities for physical activity and support for children towards healthy weight as part of a life-course whole family approach. As part of this whole family approach to healthy weight a new Tier 2 Healthy Lifestyles contract was commissioned in July 2023 for adults and families provided by BeeZee/Maximus for 2 years to June 2025. 39 families have so far attended healthy lifestyle programmes. The next rotation of healthy lifestyle programmes will start in September 2024.
BPOM258	Reduce the percentage of households which have experienced moderate or worse food insecurity (QoL)	-	8.3%	Monitor Only	n/a	n/a	A first-year progress report has been written for the One City Food Equality Action Plan. This has been produced by Feeding Bristol and highlights project and work across the city working towards food equality. The Progress report contains case studies/examples of projects improving food equality local data insights into food an overview of all the actions and their progress and recommendations on actions the city needs to take over 2024-25. The progress report has been presented to DMT and ELM and will go to HWB on 31st July 24 before being published soon after that.
BPOM259	% of households in the most deprived areas using a food bank or charity in the last year (QoL)	-	6.1%	Monitor Only	n/a	n/a	A first-year progress report has been written for the One City Food Equality Action Plan. This has been produced by Feeding Bristol and highlights project and work across the city working towards food equality. The Progress report contains case studies/examples of projects improving food equality local data insights into food an overview of all the actions and their progress and recommendations on actions the city needs to take over 2024-25. The progress report has been presented to DMT and ELM and will go to HWB on 31st July 24 before being published soon after that.
BPOM260	Reduce % of people in the 10% most deprived areas of Bristol reporting poor mental wellbeing (QoL)	-	30.3%	Monitor Only	n/a	n/a	We continue to support mental health and wellbeing through our Thrive Bristol plans and activities. Including Thrive at Work Thrive at Night and support in the community through VCSE partners to deliver mental health and wellbeing training.
BPOM281a	Prevent increase in life expectancy gap between men living in deprived & wealthy areas of Bristol	-	Data Not Available	Monitor Only	n/a	n/a	We are still waiting for data to be updated by the Office for Health Improvement and Disparities (OHID). This measure is the gap (in years) in life expectancy between the most deprived and least deprived parts of Bristol. For men there is a 9.9 years gap and for women it is 6.9 years. For both men and women the gap has not changed significantly in the last 10 years (this is also the case for England as a whole) although in the two years there has been a decrease in the gap for women in Bristol. The gap for both men and women in Bristol is similar to that in other local authorities that are socio-demographically similar to Bristol however Bristol has relatively wide gap when compared to other local authorities in the South West Region. For the latest available data the main reasons for the life expectancy gap are Circulatory Diseases Cancer and Respiratory Diseases – these three areas account for over 50% of the life expectancy gap. For men the main cause is Heart Disease and for women it is Lung Cancer. In the latest data Covid also contributes significantly to the gap for both men and women. For a lot of the causes of the gap changes in lifestyle behaviours such as quitting smoking improving activity levels and improving diet would have an impact.

Code	Title	+/-	2023/24 Outturn	2024/25 Target	Q1 Progress	Comparison over last 12 months	Management Notes
BPOM281b	Prevent increase in life expectancy gap between women living in deprived & wealthy areas of Bristol	-	Data Not Available	Monitor Only	n/a	n/a	We are still waiting for data to be updated by the Office for Health Improvement & Disparities. This measure is the gap (in years) in life expectancy between the most deprived and least deprived parts of Bristol. For men there is a 9.9 years gap and for women it is 6.9 years. For both men and women the gap has not changed significantly in the last 10 years (this is also the case for England as a whole) although in the two years there has been a decrease in the gap for women in Bristol. The gap for both men and women in Bristol is similar to that in other local authorities that are socio-demographically similar to Bristol however Bristol has relatively wide gap when compared to other local authorities in the South West Region. For the latest available data the main reasons for the life expectancy gap are Circulatory Diseases Cancer and Respiratory Diseases – these three areas account for over 50% of the life expectancy gap. For men the main cause is Heart Disease and for women it is Lung Cancer. In the latest data Covid also contributes significantly to the gap for both men and women. For a lot of the causes of the gap changes in lifestyle behaviours such as quitting smoking improving activity levels and improving diet would have an impact. A comprehensive programme of work is being lead by public health to address health inequalities and improve life expectancy.
BPOM283	Reduce the Suicide Rate per 100,000 population	-	11.70	Monitor Only	n/a	n/a	BCC hosts and leads the Avon realtime suicide surveillance system to monitor and respond to suicides to protect public health and link to postvention services. Annual reports based on combined local and national statistics is published online and the latest report can be viewed by partners and the public. We have a live local suicide prevention strategy which runs from 2022-2025 and will be imminently refreshed in light of the new National Suicide Prevention strategy 2023-2028. BCC provides leadership and engagement on the Avonwide Suicide Prevention Partnership and the BNSSG ICS suicide prevention partnership as well as a local group with its own action plan. BCC links up with local universities and groups that manage risks associated with the Avon Gorge and harbour to focus on residents and locations where suicide can occur more frequently
BPOM312	Increase % respondents who volunteer or help out in their community at least 3 times a year (QoL)	+	48.4%	Monitor Only	n/a	n/a	Data is not yet due. Generally community and voluntary sector partners are reporting that it is harder to recruit volunteers. We continue to invest in asset based community development which encourages neighbourliness and community action.
G&R - Management of Place							
Business Plan actions:							
ENV2.2	Implement a plan to address and manage the risks associated with the 10,000+ trees impacted by Ash Die Back.		n/a	n/a	Behind Schedule	n/a	Work is ongoing to develop a funded programme of works to address and manage the risk associated with ash trees across the city. Whilst the programme of works is being developed the service is addressing trees which cause any immediate risks to the public or property.
Resources - Policy, Strategy & Digital							
Business Plan performance metrics:							
BPPM537	Ratio of consultation response rate for the most and least deprived 20% of Bristol citizens	-	0.99	1	1.3	Worse	In 2023/24 this indicator was consistently better than the 2023/24 target of 1.3 because it included an advertising policy research survey with UoB in Q1 of 2023/24 which received very high response rates from deprived areas because of the use of direct mailing to deprived households. That survey is no longer included in this measurement for 2024/25 as we measure a 12 month rolling year so the outturn has returned to a more typical value of 1.3.