

Community Network – Neighbourhood Health

Summary Report

Introduction

On Thursday 26 March, Bedford Borough Council hosted the latest Community Network event at Borough Hall, bringing together 43 Individuals from partner organisations, including voluntary, community and social enterprise (VCSE) organisations, and wider stakeholders from across Bedford Borough.

The purpose of the session was to provide partners with an update on council priorities, the emerging national neighbourhood health framework, and the current direction of travel for neighbourhood working locally. As neighbourhood-based approaches continue to develop nationally and across the Integrated Care System, the event offered an opportunity for organisations to hear directly about the policy context, proposed local arrangements, and what this may mean for partnership working in Bedford Borough.

This summary report provides an overview of the presentations delivered, key points raised during the session, and areas for ongoing consideration as neighbourhood plans continue to develop.

Council Update – Laura Church, Chief Executive

Laura Church, Chief Executive of Bedford Borough Council, opened the session with an update on the current position of the Council, highlighting both the challenges facing local government and the positive developments taking place across Bedford Borough.



Laura noted that, while national and local media coverage can often focus on pressures within councils, it is equally important to recognise the significant progress, opportunities, and investment taking place within the borough.

Positive Developments and Strategic Opportunities

Laura shared a number of key developments currently underway, including:

- **Universal** moving into Borough Hall, creating opportunities for closer partnership working and improved collaboration between organisations serving local residents. The overall benefit of Universal will also be important.
- Progress relating to the proposed **Tempsford New Town**, which is expected to span areas within Bedford Borough, Central Bedfordshire, and near St Neots. This presents an important strategic opportunity, but also requires careful planning around infrastructure, housing delivery, and Bedford Borough's long-term role within the development.
- Ongoing work in relation to **East West Rail (EWR)**, with council officers continuing to seek clarity from East West Railway Company ahead of the forthcoming public consultation.

Laura explained that officers have spent considerable time reviewing proposals, challenging assumptions, and pressing EWR Co to improve engagement with residents and communities. This includes ensuring the company has fully considered the impacts on Bedford Borough and identified meaningful mitigation where required.

Best Value Inspection and Improvement Activity

Laura also reflected on the significant level of external scrutiny and improvement activity the Council has managed over the past year, including the Best Value inspection activity and the CQC and Ofsted inspections. She noted that while these processes place additional demand on officers and services, they also provide an opportunity to strengthen systems, improve practice, and demonstrate progress.

On 10 February 2026, the Minister of State for Local Government and Homelessness **announced** that ministers have **appointed inspectors** to undertake a Best Value Inspection of Bedford Borough Council's compliance with the Best Value Duty. Inspectors are



assessing if we are delivering services in a way that is economical, efficient, and effective, while maintaining strong governance, leadership, and accountability. The review focuses on the following core themes:

- Leadership
- Governance
- Culture
- Use of resources
- Service delivery
- Partnerships and community engagement
- Continuous improvement

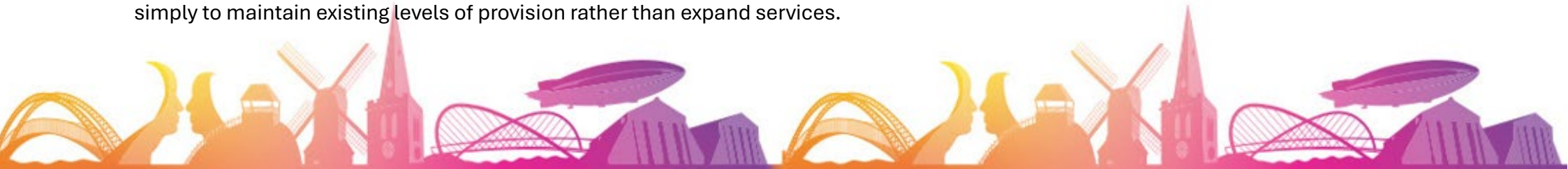
Inspectors have interviewed the cabinet and senior leadership team, and are in the process of interviewing other officers across the council. Unlike other inspections, we will have no idea of their findings or recommendations until after they report to the secretary of state. Laura noted that, while external scrutiny can be challenging, it also provides an opportunity to reset, improve, and ensure the Council is well-positioned to meet future pressures. The Council has since been progressing an **improvement plan**, focused on strengthening governance arrangements, embedding clearer accountability, improving internal processes, and building long-term organisational resilience.

Financial Context

Laura outlined the ongoing financial pressures facing local authorities nationally and locally.

She welcomed the move towards three-year funding settlements from central government, contrasting this with the previous pattern of annually reviewed settlements over a number of years. Multi-year settlements provide councils with a stronger basis for medium-term planning, allowing for a more strategic and forward-looking approach to budgeting.

However, she also noted that rising demand on services continues to create significant pressure, often requiring councils to spend more simply to maintain existing levels of provision rather than expand services.



Laura highlighted that around 62% of the Council's budget is currently spent on high-demand statutory services, particularly:

- Adult social care
- Children's services and placements
- Temporary accommodation and housing pressures

She also referenced the ongoing Fair Funding Review, noting that while there is continued discussion nationally about a fairer distribution of funding, this has not yet translated into significant additional resources for Bedford Borough.

Laura closed by emphasising the importance of continued partnership working with VCSE organisations and wider stakeholders, particularly at a time of financial pressure and growing demand. She recognised the role of community partners in helping residents thrive, supporting prevention, and strengthening resilience across Bedford Borough. Questions and reflections were welcomed from the network.

Neighbourhoods Explained: From National Policy to Local Reality

Alex Wrack, Integrated Care Board Place Lead for Bedford Borough delivered a presentation on the newly published Neighbourhood Health Framework and what this means for Bedford Borough and wider partnership working.

Alex opened by explaining that neighbourhood working is fundamentally about wrapping services around residents and communities, rather than expecting residents to navigate fragmented systems themselves. She noted that while the national framework provides fresh momentum and clearer direction, many of the core principles have been discussed and developed locally through a range of strategic partnerships and forums for some time.



National Neighbourhood Health Framework

Alex outlined that on 17 March 2026, NHS England and the Department of Health and Social Care published the [Neighbourhood Health Framework](#), setting out a national model for how Integrated Care Boards, local authorities and Health and Wellbeing Boards can jointly design neighbourhood-based services. The framework promotes:

- A person-centred model of support
- A joint NHS and local authority endeavour
- A stronger focus on prevention and early intervention
- A shift away from hospital-centred care towards community support
- Locally designed systems built around outcomes and population need

Alex highlighted that the ambition is to make services work around the needs of individuals, rather than expecting individuals to coordinate care across multiple organisations themselves. The guidance quotes:

“Systems will make the NHS work around the needs of the individual, not the other way round, by improving data sharing between hospitals and neighbourhood health services, including social care. This will mean neighbourhoods can put in place more effective proactive care for those who might otherwise default to secondary care, rather than leaving patients to co-ordinate their own care.”

The guidance sets out five national goals for neighbourhood working:

- **Goal 1: Improve health outcomes for priority groups**
Focus on frailty, long-term conditions, end-of-life care, care home residents, housebound people, and children and young people.
- **Goal 2: Improve access to general practice**
Ensure people can access clinically urgent and routine GP care in a timely and consistent way.
- **Goal 3: Improve experience of planned care**
Reduce unnecessary hospital referrals and move more outpatient care into neighbourhood settings.



- **Goal 4: Improve urgent and emergency care performance**

Reduce avoidable emergency department attendances, ambulance conveyances, and delayed discharges through stronger community-based urgent care.

- **Goal 5: Improve patient and staff satisfaction**

Strengthen proactive and personalised care planning, while improving the experience of staff working across neighbourhood teams.

Together, these goals are intended to support a shift from hospital-centred care towards more preventative, joined-up, and community-based services. The framework is being introduced in phases:

Stage 1 (2026–27) is described as the *foundational* year, where areas are expected to create the conditions for neighbourhood health rather than fully deliver all ambitions immediately. This includes:

- Agreeing neighbourhood geographies
- Setting early priorities
- Beginning joint planning and governance arrangements
- Aligning plans with JSNAs and wider local reforms

Stage 2 (2027–29) will focus on longer-term reform, including full neighbourhood health plans, confirmed governance arrangements, delivery models, and enabling infrastructure.

What Neighbourhood Working Could Look Like in Practice

Neighbourhood working looks like a multi-agency teams of teams, bringing together services around local populations. Depending on need, this could include:

- Primary care
- Community nursing
- Mental health services
- Adult social care



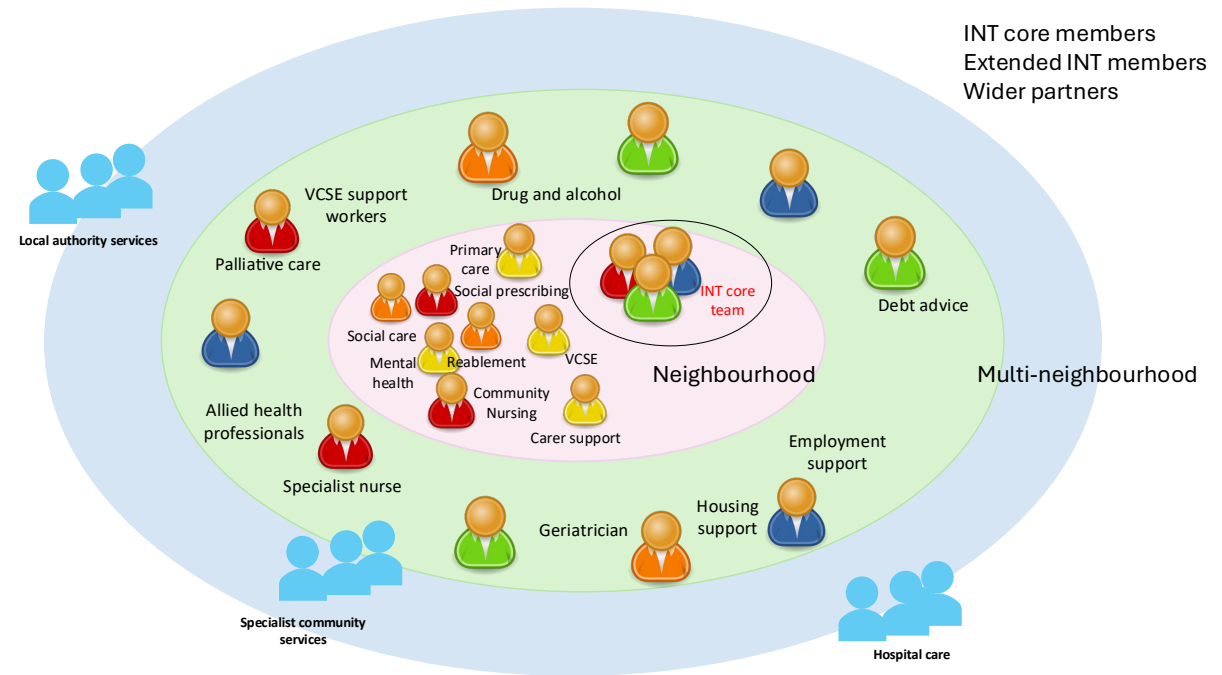
- Housing support
- Social prescribing
- Debt advice
- Employment support
- VCSE organisations
- Reablement and specialist services

Work is already underway locally to develop Bedford Borough's contribution to the wider BLMK Neighbourhood Strategic Plan. This must begin with understanding and sharing information on the national guidance within the neighbourhoods framework. We have discussed this with key partners:

1. Neighbourhood Health Delivery Committee – 27th February
2. Health & Wellbeing Board neighbourhood workshop – 25th March
3. Community Network Event – 26th March (current event to inform VCSE partners)
4. Executive Delivery Group neighbourhood workshop 28th April

Local discussions are beginning to shape key building blocks such as:

- Neighbourhood boundaries
- Integrated neighbourhood working team structures
- Development of local hubs (physical and virtual)
- Test-and-learn priorities, including frailty / older people in Year 1, and children, young people and SEND in Year 2.



Implementation of this guidance will not be without challenge. Pressures identified included:

- Ongoing ICB restructuring and reduced staffing capacity
- An ageing population with increasingly complex needs
- Limited estate and additional finance for neighbourhood hubs
- Integrating teams to work across multiple neighbourhoods
- No dedicated transition funding to move activity from hospital to community settings

Alex closed by emphasising that neighbourhood working is not about creating another layer of bureaucracy, but about **organising services more intelligently around communities**, building on what already works locally, and strengthening collaboration across organisations. Bedford Borough now has an opportunity to shape this agenda in a way that reflects local strengths, community identity, and resident need.

Q&A:

- **Have allied health professionals such as OT, SALT, nutrition and dietetics, eyes been considered as part of neighbourhood planning?**
We are still at an early stage of development, but the intention is that neighbourhood models will involve the full range of services needed to support residents. As the work progresses, we would expect relevant allied health professionals and specialist services to be included in planning and delivery.
- **How does this work for those who live in a border area, and therefore their GP is in another LA?**
This is an important area of discussion at present. It is recognised that some residents will live near borough boundaries or be registered with a GP outside their local authority area. Current thinking in Bedford Borough is based around four broad neighbourhood areas aligned to the four Primary Care Networks.
- **Do you feel there has been a culture shift over the last few years? We have been talking about how we can work together as partners for some time, and it feels like we are getting somewhere.**



Yes, there has been positive progress. Conversations around partnership working, accessibility, data sharing and integration have continued to develop over recent years. VCSE organisations have often led the way in collaborative working, already operating in highly joined-up ways around community need. This national framework is encouraging because it signals that the NHS and local government are increasingly committed to working in the same way, with partners involved in shaping decisions around health and community services.

- **Are GPs on board with the neighbourhood planning direction?**

There is interest and engagement from GPs in the direction of travel. As with any significant change, there are still important questions to work through, particularly in relation to delivery models, commissioning arrangements and how neighbourhood working will operate in practice.

- **How will VCSE be involved in the design of neighbourhood working?**

Both statutory and non-statutory partners are expected to be involved throughout the development process. There are already a number of boards, groups and partnership forums where VCSE organisations are represented, including Integrated Neighbourhood Working groups and related implementation groups. The VCSE is also represented on the Health and Wellbeing Board. As plans develop further, there will need to be broader engagement with communities and grassroots organisations through newsletters, surveys, workshops and events such as this.

- **How involved are service users in these changes? Are you utilising individuals with lived experience, like through People Participation or Peer Support workers?**

As the national guidance was only recently published, engagement with service users has not taken place on neighbourhood planning specifically. However, there is clear recognition that lived experience must inform future planning and delivery. As proposals become clearer, there will be opportunities to engage residents, service users and partners to ensure lived experience is reflected in decision-making.

- **Will where bus routes are affect Neighbourhood boundaries? Example of Brickhill and Putnoe, which have always been isolated/cut off from each other.**

Accessibility, connectivity and active travel are important considerations in neighbourhood planning. Transport links, including bus routes, can significantly influence how communities access services and connect with one another. While neither the ICB



nor the Council directly operates bus services, these factors will need to be considered within wider planning and place-shaping discussions.

- **Regarding data systems, will this work for individuals who have opted out of health data sharing?**

This question was noted for further consideration. At present, the detail of future data systems, governance arrangements and information-sharing processes is still being developed.

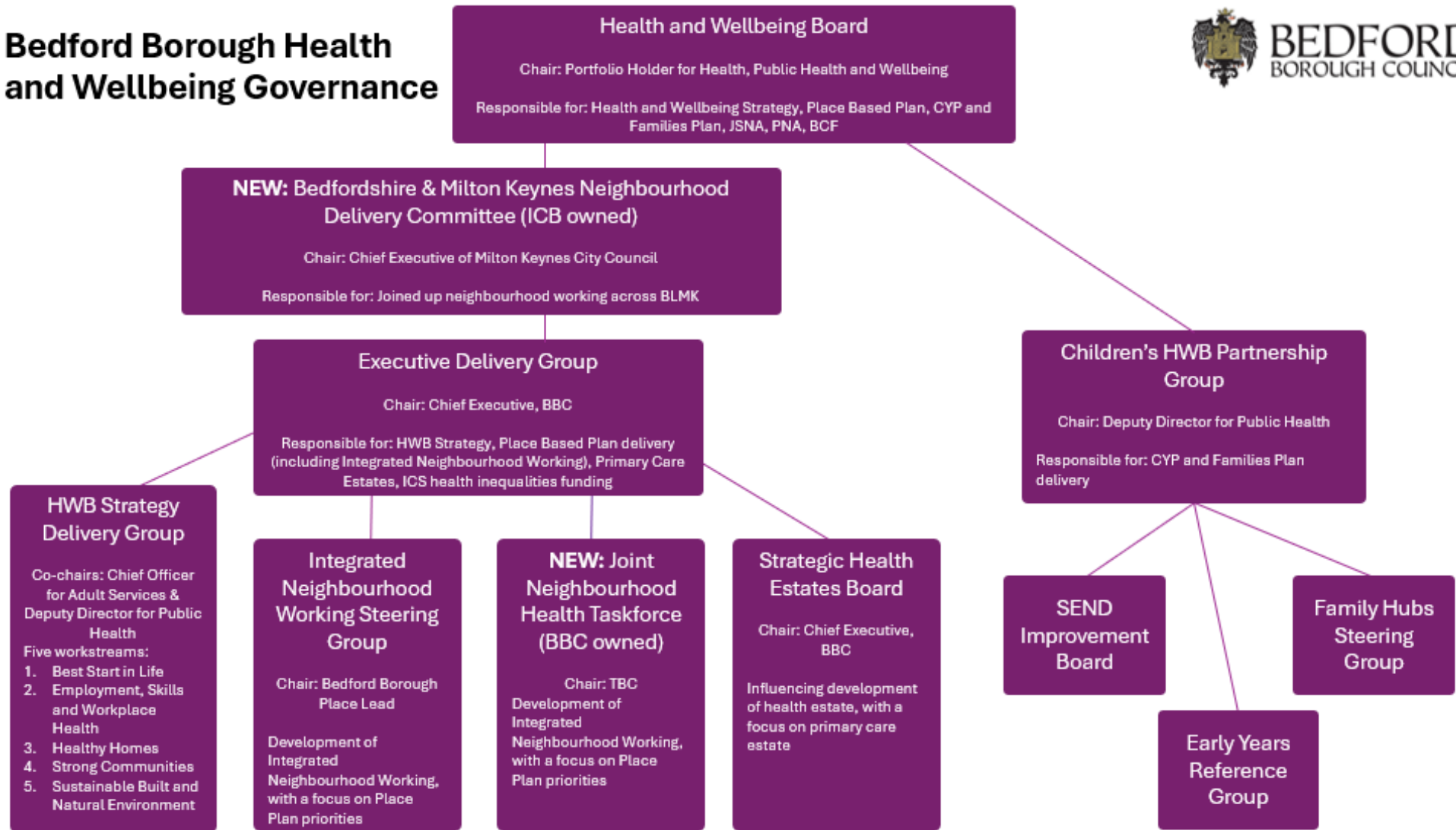
- **How diverse are the decision making boards such as the ICB senior leadership team and the health and wellbeing boards?**

It was acknowledged that many leadership and decision-making structures have historically not reflected the full diversity of the communities they serve. This remains an important area for improvement across the system. Progress is being made in some areas, and there is a continued need to strengthen representation and inclusion across senior leadership and partnership boards.

Please find the visual below, which details which boards and forums are currently operating in a neighbourhood, community and health space – if you would like to know more about which forum may be relevant to you, please contact us at communities@bedford.gov.uk .



Bedford Borough Health and Wellbeing Governance



Participant List:

| Participant | Organisation | Participant | Organisation |
|--------------------|--|--------------------|---|
| Aishat Ajibike | East London NHS Foundation Trust | Alex Wrack | Bedford Borough Council |
| Anne Davis | Food etc and Sight Concern Bedfordshire | Bev Davies | Bedfordshire Fire and Rescue Service |
| Caroline Leonard | FACES | Caroline Cook | Luton All Women's Centre (we run Bedford Women's Centre) |
| Claire Salgin | MNVP - BLMK ICB | Demelza Honeyborne | RBMHAW C.I.C |
| Demelza Honeyborne | RBMHAW C.I.C | Ejaz Shaikh | 5C Property Developers Ltd |
| Elaine Midgley | Bedford Creative Arts | Emma Foxley | Let's Get Going CIC |
| Fizz Heseltine | Living It Up | Haroon Ghalib | AKG |
| Harriet Snowdon | Cambridgeshire Community Services NHS Trust | Hazel Muza | Bako Sanctuary C.I.C |
| Hazel Muza | BAKO Sanctuary C.I.C | Jen Harris | Music24 |
| Johnathan Rudland | Be Active | Laura M Peggs | FLAG Bedford |
| Lorna Godden | 4YP UK | Lucy Bardner | The Harpur Trust |



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| Maxine Bone | FLAG Bedford | Michaela Martindale | FACES Bedford |
| Paul (PK) Kellett | Bedford Giving | Rose Birmingham | 4YP UK |
| Sally Hazeltine | Voiceability | Sam Price | Beyond Detention |
| Sarah Davis | ICaSH | Sarah Davis | ICaSH |
| Sarah McCulloch | ACCM (UK) | Jemima | ACCM (UK) |
| Sarah Loftus | Luton All Women's Centre (we run Bedford Women's Centre) | Sarah Russell | Tibbs Dementia Foundation |
| Sarah Masterson | Bedford Maternity and Neonatal Voices Partnership | Sue Beaumont | Bedford Council of Faiths, UNA (Luton), Remembering Srebrenica |
| Tracey Hughes | Stroke Association | Unknown | Social Prescriber |
| Carol Miller | Family Hubs | Jane Banks | Family Hubs |
| Poonam Sahonta | Fostering | Unknown | IPS Employment |

