Devon Nested Rural Deprivation Partnership Group Strategic Framework

Functioning as Health and Wellbeing Board Rural Areas and Access to Services Sub-Group 2026-2031

Vision

Every person living in rural and coastal Devon should have the opportunity to live a long, healthy and prosperous life, recognising that services and support may need to be designed and delivered differently in rural places.

Ambition

By 2031, Devon will be recognised as a national leader in identifying, understanding and tackling hidden rural deprivation through data-driven, place-based partnerships and community-led action.

Purpose

The Devon Nested Rural Deprivation Partnership Group will fulfil the function of the Health and Wellbeing Board Rural Areas and Access to Services Sub-Group. The Partnership Group will provide strategic leadership for reducing rural inequalities by improving how partners understand need, target investment, design services and work with communities. The strategy will support better rural intelligence, more effective targeting of resources, integrated local delivery, stronger community leadership and measurable improvements in health and wellbeing outcomes.

Our Five Strategic Priorities

1. **Understand Rural Need Better**
   Develop a shared intelligence system to identify hidden rural deprivation, access barriers, service demand and community strengths.
2. **Rural Proof Decisions and Investment**
   Ensure policies, service changes and funding decisions reflect the realities, costs and barriers of rural and coastal communities.
3. **Support Resilient Rural Communities**
   Advocating and supporting community-led partnerships to strengthen prevention, local assets and resilience.
4. **Improve Rural Connectivity and Access**
   Reduce barriers to services and opportunities through better transport, digital inclusion, outreach, community hubs and rural-proofed service design.
5. **Influence National Policy**
   Develop and utilise Devon's evidence and experience to influence rural proofing, funding formulae, deprivation measures and national health inequalities policy.

1. Introduction

Many people in Devon live in villages, small towns, farming communities and coastal areas. These places are among Devon's greatest strengths, offering strong local identity, natural assets and community spirit.

However, rural and coastal communities also face specific challenges that affect health, wellbeing and opportunity. These challenges are not always visible. Rural deprivation can be hidden within wider areas that appear relatively affluent, and people may experience compounding disadvantage because services are distant, transport is limited, housing is unaffordable, digital connectivity is poor, and/or support systems are not designed for dispersed communities.

This strategy recognises that achieving fairness does not mean delivering the same model everywhere. In rural Devon, fair access means designing services, investment and support around the realities of rural life.

2. The Challenge

Healthy communities are built when the right building blocks of health are in place. These blocks include affordable homes, secure work, reliable transport, and strong community connections. For too many people in rural and coastal Devon, some of these blocks are missing or weakened. Housing pressures, seasonal employment, fuel poverty, social isolation, limited public transport, poor broadband and mobile coverage, food insecurity, and reduced local services can combine to make these building blocks less stable.

These challenges do not sit separately. Transport connects people to work, education, childcare, healthcare and social support. Affordable homes, enough income, digital access and local services also work together to support good health. When several blocks are fragile at once, people face greater risks of poor health, reduced opportunities and increased hardship.

Some of this need remains hidden because traditional data does not always capture the realities of rural and coastal life. This can mean that rural deprivation is overlooked and that communities miss out on the support and investment they need. By strengthening the building blocks of health in Devon's rural and coastal communities, we can create fairer opportunities for people to live well, stay connected and access the services and support they need.

3. Our Goal

Good health is built when the right building blocks are firmly in place. In rural and coastal areas, these include reliable transport, decent and affordable homes, good work, enough income, accessible services, strong digital connections, education and training, childcare, and community connection.

This does not mean every service will be available in every place in the same way. It means partners need to work together to understand where the building blocks of health are missing, weakened or harder to access, and to design services, investment and support around the realities of rural life.

Our approach will identify pockets of rural deprivation, recognise the additional barriers created by distance, sparsity, poor connectivity and reduced local service presence. It will also build on the strengths already present in rural and coastal communities, including local knowledge, community assets, voluntary action and strong local identity.

Our central commitment is that living in rural and coastal Devon should not limit opportunity, and the need to strengthen the building blocks of health in these areas should be advocated for across partners of the Health and Wellbeing board.

4. Strategic Priorities 2026-2031

Priority 1: Understand Rural Need Better

Objective

To develop a shared Devon Rural Intelligence System that identifies where the building blocks of health are strong, missing, weakened or harder to access in rural and coastal communities.

Why this matters

Rural need is often dispersed and hidden. Traditional data does not always show where people face barriers to the things that support good health, such as transport, decent homes, secure work, digital connection, services and social support.

Without better intelligence, investment and services may not reach the communities where these building blocks are most fragile. Measures such as the Index of Multiple Deprivation can miss or disguise rural need, particularly where disadvantage is spread across small communities (pockets of rural deprivation) or masked by wider area averages.

Better rural intelligence will help partners see the full picture: where access is difficult, where pressures are building, where local strengths exist, and where action can have the greatest impact.

What we will do

Devon will develop an innovative Rural Intelligence System that brings together the Devon Composite Exclusion Risk Indices (CERI) Rural Dashboard, NHS Priority Places, LSOA-level analysis, a Rural Composite Risk Index, local qualitative intelligence, VCSE insight, community voice and real-time service demand.

The system will include indicators covering health, social wellbeing, economic security, access to services, housing, transport, digital connectivity and community

assets. This will help partners understand not only where need exists, but also which building blocks of health need to be strengthened in each place.

Outcome

One shared evidence base for all partners, supporting better decisions, more targeted action and clearer understanding of rural inequalities.

Priority 2: Rural Proof Decisions and Investment

Objective

To ensure that public strategies, service changes, commissioning decisions and investment programmes evidence that sufficient consideration is given to properly consider what rural and coastal communities need to address rural inequalities and to strengthen the building blocks of health.

Why this matters

Decisions that work well in urban areas may not work in rural places. Distance, sparsity, transport availability, digital access, housing pressures and workforce capacity can all affect whether a policy or service model is realistic, accessible and fair for rural residents.

Funding decisions based only on population size or broad district-level data can also miss rural need. Smaller communities may have fragile access to services, limited transport, high housing pressures, lower incomes or fewer local support options, but still not appear as priorities within traditional funding models.

Rural proofing helps ensure that decisions take account of the real costs and conditions of rural life from the outset, rather than treating rural access as an afterthought.

What we will do

We will advocate for embedding rural proofing into major strategies, policies, service redesigns and investment decisions. This means considering whether proposals will work in rural and coastal communities, whether they may unintentionally widen inequalities, and what adaptations are needed to make access fair.

The Partnership Group will also support the development of a Rural Investment Framework that considers the building blocks of health across rural and coastal Devon. This will include decent and affordable homes, reliable transport, access to services, enough income, good work, digital connection, education and skills, childcare, social connection, community assets, workforce capacity and local resilience.

This approach will support a shift from broad district-based planning towards more targeted place-based regenerative approaches.

Outcome

Rural proofing becomes a core part of decision-making, policy development and resource allocation across Devon, and investment is better targeted to reflect the true cost and complexity of strengthening health and wellbeing in rural and coastal communities.

Priority 3: Build Rural Integrated Neighbourhoods and Resilient Communities

Objective

To build stronger rural and coastal communities by bringing partners, local organisations and residents together around shared local priorities, using NHS Rural and Coastal Priority Places to help take a proportionate approach to inequalities and the Better Places model to support integrated, preventative and community-led action.

Why this matters

The building blocks of health work together. Reliable transport helps people reach work, education, childcare, healthcare and social support. Local community spaces help people stay connected. Advice services, volunteering, libraries, community transport, social prescribing networks and local groups all help create the conditions for people to live well.

In rural and coastal places, these connections are especially important. No single organisation can strengthen all the building blocks of health alone. Local solutions need to be shaped around the realities of each place, including distance, sparsity, local identity, community assets and the knowledge of residents.

Residents are less concerned with organisational boundaries than with whether support is reachable, coordinated and relevant to their lives. Building resilient rural communities means strengthening formal services alongside the local relationships, places and networks that support everyday wellbeing.

What we will do

Support the Priority Places approach to steer targeted resources, partners will support the establishment of Rural Integrated Neighbourhood Partnerships that bring together health services, local authorities, Town and Parish Councils, VCSE organisations, libraries, housing partners, community transport, advice services, employers, education providers, community connectors and local residents. These partnerships will focus on practical local priorities such as access to health services, transport, digital inclusion, social connection, housing, fuel poverty, employment, skills, support for older people and carers, and community wellbeing.

The Better Places cluster approach is an example of a delivery model for supporting dispersed rural communities. These types of model will support place-based working, community-led prevention, shared learning, local impact reporting and stronger alignment between services and community priorities.

Partners will also map and support local community assets, strengthen volunteering and participation, and promote community-led wellbeing activity. This includes recognising the role of communities in responding to climate, economic and infrastructure challenges that affect health, wellbeing and access to services.

Outcome

Rural communities are better connected, more resilient and better able to shape and support local wellbeing. Services and resources are aligned around places rather than organisational boundaries, with stronger community leadership and more preventative support.

Priority 4: Improve Rural Connectivity and Access

Objective

To reduce the practical barriers that prevent rural residents from accessing services, support and opportunities.

Why this matters

Reliable, affordable and available transport is an essential building block of health. It supports other blocks by connecting people to work, education, childcare, healthcare, shops, advice, social networks and public services.

Digital connectivity is also a core part of everyday life. Broadband, mobile coverage, digital skills and access to devices can affect whether people can use services, stay connected, learn, work and access support.

Access in rural areas will not always mean having every service locally available. It may mean a mix of different solutions, including outreach, digital access, mobile provision, community transport, local hubs and better coordination between services.

What we will do

The partnership Group will advocate for improvements in physical and digital connectivity, including community transport, demand-responsive transport, public transport links, active travel where appropriate, broadband connectivity, mobile coverage, place-based digital skills inclusion place-based programmes and improved access to devices and data.

Service design will be rural proofed, with greater use of outreach, mobile services, co-located provision, community-based prevention, local hubs, assisted digital support and better signposting.

Partners will also consider how transport and digital access interact with other building blocks of health, including employment, education, childcare, health and care, social connection and access to advice.

Outcome

Rural residents experience fewer avoidable barriers to accessing the support and opportunities they need, even where services cannot be delivered in the same way as in urban areas.

Priority 5: Influence National Policy

Objective

To position Devon as England's Rural Health Inequalities Demonstrator.

Why this matters

Many of the building blocks of health in rural and coastal communities are shaped by national policy, funding formulae and infrastructure investment. This includes transport, digital infrastructure, housing, health and care funding, workforce policy, deprivation measures and approaches to prevention.

Devon has an opportunity to use its evidence and experience to influence wider change, showing how rural need can be better understood and how investment can be targeted to strengthen the conditions that support good health.

What we will do

The Devon Nested Rural Deprivation Partnership Group will use its rural evidence base to support reform of deprivation measures, strengthen national rural proofing, inform NHS population health approaches, influence Integrated Neighbourhood Team development, and advocate for fairer funding, rural transport, digital infrastructure and recognition of the true costs of rural service delivery.

The annual State of Rural Devon report will be a key mechanism for sharing evidence and influencing policy.

Outcome

Devon influences regional and national policy so that rural and coastal communities are better recognised in future funding, planning and service design.

5. Connection to the CORE Principles

Caring for People and Places

Rural access solutions should support people, communities and the environment. Better local access, community transport, active travel where appropriate and digital connectivity can reduce unnecessary journeys, support cleaner air and help people stay connected. Clean air, accessible local places, community connection and reliable services are all part of the conditions that support good health and wellbeing.

Opportunities for All

Where people live should not limit their chances. Rural residents need fair opportunities to access education, childcare, healthcare, employment, advice, social

activities and digital services. This means strengthening the building blocks of health in the places where they are currently missing, fragile or harder to reach.

Roots for Life

People should be supported throughout every life stage. Early help, health checks, learning, work, care and wellbeing support should not depend solely on owning a car, having strong mobile signal or living near a town. Strong building blocks of health need to be in place from childhood through to later life, so people can live well, stay independent and remain connected to their communities.

Engage and Empower

Local people know what works best in their communities. Rural voices must shape decisions, plans and investment so that solutions reflect real needs rather than assumptions. Community leadership is essential to understanding which building blocks are strong, which are under pressure and what action will make the greatest difference locally.

6. Success Measures

By 2031, the Sub-Group will work with partners to achieve measurable progress across five areas.

Understanding Rural Need

All rural Priority Places will be mapped, the CERI Rural Dashboard will be live and used by partners, and a Rural Intelligence Framework and Rural Composite Risk Index will be developed. An annual State of Rural Devon report will provide a shared account of progress and emerging need.

Investment and Rural Proofing

A Rural Investment Framework will help partners target resources more effectively towards Priority Places. Rural proofing will be embedded in major strategies and service changes, with community intelligence used more consistently in decision-making. Investment decisions will better reflect the true cost and complexity of strengthening the building blocks of health in rural and coastal communities.

Local Delivery, Community Assets and Resilience

Rural Integrated Neighbourhood Partnerships will be established in Priority Places, each with a local plan, shared dataset, prevention programme and annual impact report. At least five Better Places clusters will be operating by 2028, community assets will be better mapped and supported, and there will be increased community participation, volunteering and community-led wellbeing activity.

Access, Connectivity and Opportunity

Partners will work to improve rural transport, digital inclusion, access to online services and access to primary care, pharmacy and dentistry where rural barriers are identified. There will also be greater use of outreach, local hubs and community-based models, alongside work to improve employment and skills access, recognise food insecurity and financial hardship, and better understand rural housing pressures.

Health and Wellbeing Outcomes

The strategy will support reductions in rural health inequalities, preventable emergency admissions, loneliness and social isolation, while contributing to improved healthy life expectancy, mental wellbeing and community resilience.

7. What Will Be Different by 2031?

By 2031, Devon will have a stronger understanding of hidden rural deprivation and a clearer evidence base to support decision-making. Partners will be better able to identify where the building blocks of health are strong, where they are fragile and where targeted action is needed.

Rural proofing will be embedded across key strategies, and investment will be better targeted towards communities experiencing access barriers and poorer outcomes.

Priority Places will provide a shared geography for local partnership working. Better Places clusters will be supporting prevention and resilience, and communities will have a stronger voice in shaping the services and support that affect their lives.

Devon will also have stronger evidence to influence national policy and funding, helping ensure that rural and coastal communities are better recognised in future decisions.

8. Our Ambition for 2031

By 2031, Devon will be recognised nationally for its approach to understanding and reducing rural inequalities.

The success of this strategy will not be measured by whether every community has the same service offer. It will be measured by whether rural and coastal communities are better understood, better supported, better connected and better able to shape the services, investment and support that affect their lives.

Our ambition is that rural need is no longer hidden, rural communities are no longer treated as an afterthought, and the building blocks of health are strengthened so that location is no longer a barrier to living well in Devon.

Appendix : Devon Rural Deprivation Partnership membership

- Devon Communities Together (Chair);
- Be Buckfastleigh Better Places;
- Citizens Advice Devon;
- Communities Team Devon County Council;
- Connecting Communities, Exeter University;
- Devon Association of Local Councils;
- Devon Community Foundation;
- Devon Family Hubs;
- Economy Team Devon County Council;
- Libraries Unlimited;
- NHS Devon;
- Public Health, Devon County Council;
- Plymouth University;
- Teignbridge District Council;
- 4 Elected members Devon County Council, including Cabinet Member for Rural Affairs.