North Somerset Health & Wellbeing Board

Date of meeting: 5 March 2020

Agenda Item: 9

Title of report: Joint Strategic Needs Assessment

Author: Matt Lenny – Director of Public Health

1. Recommendations

Members of the Health and Wellbeing Board are asked to note progress in developing the Joint Strategic Needs Assessment (JSNA) and agree the focus and methodology for planned investigations during 2020/21:

- A new core data set for the JSNA will be completed by the end of March 2020 which
 provides a list for extracting data including methods for automating updates from
 each source and effectively presenting this linked data through the Power BI
 software. Members of the HAWB will receive an update with details of the core data
 set list and be invited to review models for presentation of the data later this year.
- Using the output of the workshops held with Public Health England (PHE) and the
 priorities identified in those sessions, a number of potential investigation topics have
 been identified with the aim of agreeing three priority investigations for the 2020/21
 year. The Board are invited to confirm their preferred topics.
- The Board are invited to agree the proposed methodology for conducting the investigations.

2. Summary of Report

Following approval of a new approach to developing the JSNA in October last year, the JSNA steering group has been taking forward these changes.

Firstly, contact has been made with colleagues in the Clinical Commissioning Group (CCG) to explore data across local authority and health sources and develop methods for presenting and linking data in order to support better commissioning and delivery of services for the community.

A core dataset will be established by the end of March 2020, which will then be followed by a process of extracting data that can be routinely updated and presented through user-friendly software (Power BI) including visualisation of needs and trends. These sources and methods for presentation will be shared with HAWB members during 2020 for comment and revision.

Secondly, the HAWB agreed that a pattern of three investigations per year would be adopted. Recent workshops held with Public Health England to support a place based approach to reducing health inequalities has developed some suggested topics for investigation based around the three priorities identified – healthy places, mental health and

wellbeing and physical activity. The Board is invited to provide views on which topics should be the focus for investigations during 2020/21.

Lastly, a draft methodology for completing these investigations has been developed based on research on what has worked well in other locations. The Board is asked to agree this methodology, including the timescale for investigations and governance process.

3. Policy

The purpose of the JSNA (and Health and Wellbeing Strategies) is to improve the health and wellbeing of the local community and reduce inequalities for all ages. They are not an end in themselves, but a continuous process of strategic assessment and planning – the core aim is to develop local evidence-based priorities for commissioning which will improve the public's health and reduce inequalities.

Local authorities and clinical commissioning groups (CCGs) have equal and joint duties to prepare JSNAs and JHWSs, through the health and wellbeing board. National guidance is not prescriptive on what the JSNA should look like. It states that JSNAs are produced by health and wellbeing boards and are unique to each local area. Full details of the national guidance (2013) can be found here

4. Details

Following approval of a new approach to developing the JSNA in October last year, the JSNA steering group has been taking forward these changes.

i) Development of a core dataset

Firstly, contact has been made with colleagues in the Clinical Commissioning Group (CCG) to explore data across local authority and health sources and develop methods for presenting and linking data in order to support better commissioning and delivery of services for the community.

The core JSNA dataset will be composed of a number of over-arching themes with numerous data indicators in each theme. The themes are modelled on those used in the <u>Public Health England Fingertips profiles</u> and will be reportable by different geographies including, where possible, parish, ward, Lower Super Output Area (LSOA) and Primary Care Network (PCN) area. This will allow the JSNA dataset to be used internally by colleagues and externally by different organisations at the level of detail they require. The data indicators included in each theme will be the most recent published version and where possible will be from official statistics. Where the dataset included is from our own internal systems it will have been verified by peer review before being published.

It is important to note that the intention is to provide a first version of the data set later this year, but this will be built on to reflect areas where greater analysis will support action. For example, engagement around the development of the Health and Wellbeing Strategy during 2020/21 will capture information about information sources and key challenges for our community which can be supported by an expanded JSNA data set. The table below gives an example of this approach.

Theme Detail	Data examples
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Wider Determinants of Health	Wider determinants, also known as social determinants, are a diverse range of social, economic and environmental factors which impact on people's health	 Indicies of Multiple Deprivation 2019 Child Poverty indicator 2018 Claimant count 2019 Reported Crimes 2019
Child and maternal health	Data on a range of factors related to the health and wellbeing of pregnant women, children and young people	 Infant mortality rate 2016/18 Child mortality rate 2016/18 Population vaccination coverage - MMR for one dose (2 years old) 2018/19

The image below shows an example of the software (Power BI) that will be used to present the JSNA dataset. It shows the opportunity for creativity in displaying insights from data.



Source: Microsoft, https://powerbi.microsoft.com/en-us/

The timetable for finalisation and visualisation of the JSNA dataset is as follows:

- Agree the core dataset with data sources and update timetables March 2020
- Develop the extraction and analysis model for the core dataset April through to July 2020
- Upload core dataset August 2020
- Develop the visualisation model through core upload September 2020
- Launch first version of the data set in September 2020 for internal review
- ii) Agreeing topics for investigations during 2020/21

The HAWB met for the first time in October and since then work has been taken forward to help define its unique role and priorities through work with Public Health England (PHE) on the place based approach to reducing health inequalities.

North Somerset is the first local authority in England to take part in this analysis and learning which was based on two workshops for the Board and a wider group of stakeholders held in November 2019 and January 2020.

The workshops helped to review the current position of the Board against some key criteria around joint working and understanding and service engagement with communities. It also helped to identify an initial three areas of focus where a partnership approach could deliver health and wellbeing benefits with a focus on communities that need support most – healthy places, mental health and wellbeing and physical activity.

Engagement in those workshops helped to identify areas where changes could be made to improve outcomes for local residents. These ideas were mapped against the Population Intervention Triangle, a key part of the placed based approach advocated by PHE, and the output of those discussions can be seen in Appendix 1.

The key themes from those discussions have been identified and summarised into three key possible areas for investigation for each of the topics. These are summarised below.

The Board is invited to discuss the merits of each topic and agree what the focus should be for 2020/21 in each of these priority areas.

Placemaking – possible investigations

- How best to future proof our housing development to create environments that support health and wellbeing needs of children, families and older adults
- To review and recommend the best method for standard health impact assessments across significant developments in North Somerset
- To identify the homes where we can make the biggest difference to poor health outcomes and demonstrate the range of actions that should follow

Physical activity – possible investigations

- How to develop a workplace health programme to increase everyday physical activity including using the HAWB organisations as exemplars for developing this approach
- Using early years settings and providers to increase the number of children and families achieving the recommended levels of physical activity
- Create insight and segment the North Somerset population into actionable cohorts for change around physical activity, e.g inactive middle aged men, stopping the drop off in physical activity in girls etc.

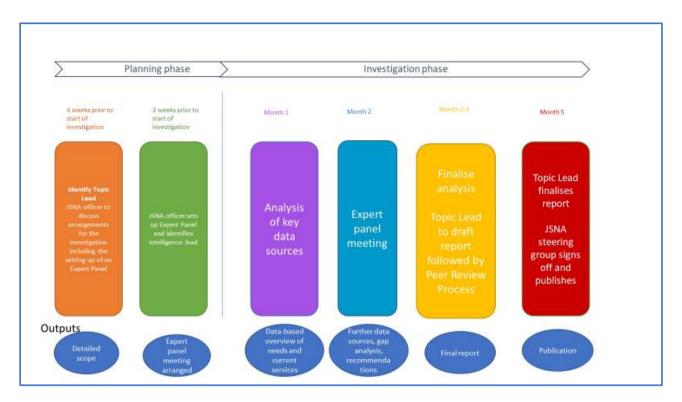
Mental health and wellbeing – possible investigations

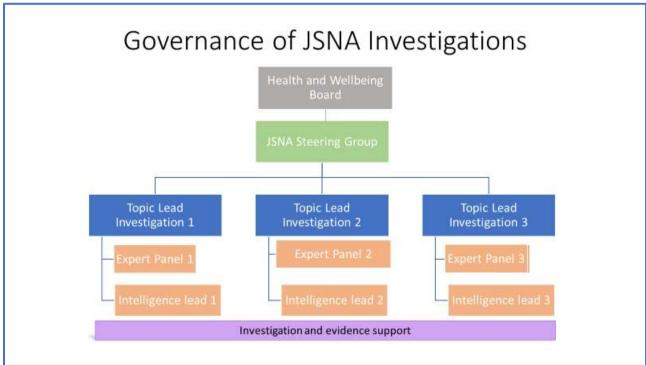
- Consider how to mainstream effective mental health resilience programmes within schools and colleges to meet known gaps in population need
- How best to develop attachment and resilience in the early years by working with children and families to improve mental wellbeing as a key part of school readiness
- Provide an evidence review around what approaches have been most effective in developing a local area approach to improving mental health and wellbeing at each tier of service need from prevention through to specialist services

iii) Agreeing the methodology for investigations

A process for the JSNA investigations has been developed based on research about approaches used elsewhere. This includes the suggested governance for managing the investigations to ensure they deliver a meaningful output. This includes setting up an expert panel to help identify more data sources, help with the gap analysis and make recommendations, for example, with regard to effective and cost-effective interventions. These panels could also include patient/client/service user/public representation. This will be further developed at the next JSNA Steering Group meeting in April.

The Board are asked to endorse the methodology and governance set out below. Please note these flow charts are available on a bigger scale in Appendix 2.





5. Consultation

An officer steering group, including a range of representatives from across the Council and the Clinical Commissioning Group have collaborated on the development of this proposal. A wide range of stakeholders were involved in the workshops held in partnership with Public Health England which developed the suggested topics for investigation.

6. Financial Implications

The JSNA will be developed from within existing resources which is primarily officer time. Any development costs to create more effective channels for communicating its findings will be identified and the Director of Public Health will ensure appropriate resources are available to meet these aims.

Costs

No direct costs at this stage apart from officer time to develop the new model for the JSNA. **Funding**

None required at this stage.

7. Legal powers and implications

8. Climate change and environmental implications

The scope of the JSNA is broad and includes wider social, environmental and economic factors that impact on health and wellbeing such as access to green space, the impact of climate change, air quality, housing, community safety, transport, economic circumstances and employment.

The JSNA will include intelligence about factors that impact on climate change and our local environment. This will include the evidence base demonstrating the aligned benefits of action to address climate change and health and wellbeing change.

9. Risk management

JSNAs perform an important role in helping to identify key challenges to health and wellbeing in the local population. Failure to develop an effective JSNA may risk key outcomes not being addressed and health inequalities could widen.

10. Equality Implications

Equality implications of current and future service delivery as well as wider determinants of health and wellbeing are addressed through the JSNA. Reducing gaps in health outcomes between population groups is one of the key aims of producing the JSNA.

11. CORPORATE IMPLICATIONS

The JSNA will support the delivery of the new Council Corporate Strategy and the Healthier Together plan for Bristol, North Somerset and South Gloucestershire by providing key data and analysis to inform action planning and partnership working.

12. OPTIONS CONSIDERED

Options around the development of the data set and topics for investigation have been set out in Section 3.

Author

Matt Lenny, Director of Public Health (with input from the JSNA Steering Group)

APPENDICES

Appendix 1: Output of place based approach to reducing health inequalities workshop

Appendix 2: Flow charts for carrying out and overseeing investigations

BACKGROUND PAPERS

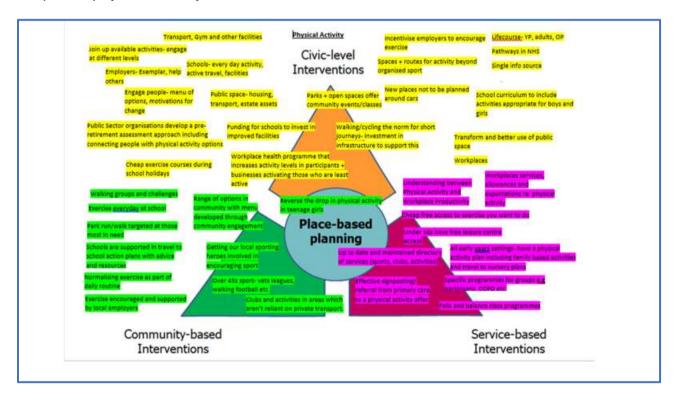
None

Appendix 1: Output of place based approach to reducing health inequalities workshops

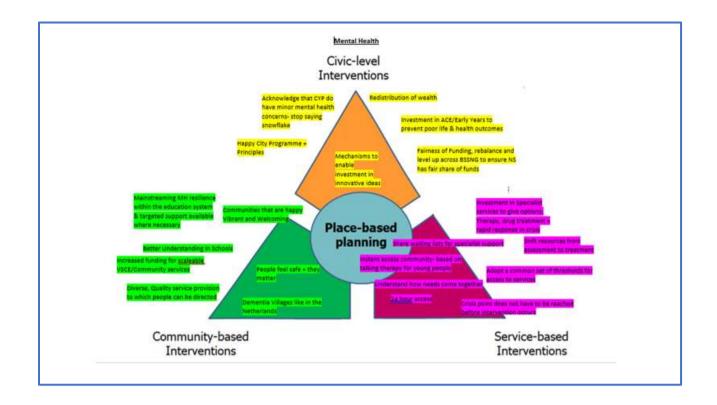
Output for place making discussion



Output for physical activity discussion



Output for mental health and wellbeing discussion



Appendix 2: Flow charts for carrying out and overseeing investigations

Planning phase Investigation phase Month 2-4 4 weeks prior to 3 weeks prior to Month 2 Month 1 Month 5 start of start of investigation investigation Topic Lead Identify Topic finalises Lead report Analysis Expert of key up Expert Panel panel **JSNA** and identifies data meeting steering sources group signs setting up of an off and publishes Outputs Data-based Further data overview of sources, gap Detailed Publication needs and analysis, Final report meeting arranged

Governance of JSNA Investigations

