

## HEALTH & WELLBEING BOARD

**Subject Heading:**

Progress with Barking, Havering and Redbridge Joint Strategic Needs Assessment

**Board Lead:**

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**The subject matter of this report deals with the following themes of the Health and Wellbeing Strategy**

<b>The wider determinants of health</b> <ul style="list-style-type: none"> <li>• Increase employment of people with health problems or disabilities</li> <li>• Develop the Council and NHS Trusts as anchor institutions that consciously seek to maximise the health and wellbeing benefit to residents of everything they do.</li> <li>• Prevent homelessness and minimise the harm caused to those affected, particularly rough sleepers and consequent impacts on the health and social care system.</li> </ul>	
<b>Lifestyles and behaviours</b> <ul style="list-style-type: none"> <li>• The prevention of obesity</li> <li>• Further reduce the prevalence of smoking across the borough and particularly in disadvantaged communities and by vulnerable groups</li> <li>• Strengthen early years providers, schools and colleges as health improving settings</li> </ul>	
<b>The communities and places we live in</b> <ul style="list-style-type: none"> <li>• Realising the benefits of regeneration for the health of local residents and the health and social care services available to them</li> <li>• Targeted multidisciplinary working with people who, because of their life experiences, currently make frequent contact with a range of statutory services that are unable to fully resolve their underlying problem.</li> </ul>	
<b>Local health and social care services</b> <ul style="list-style-type: none"> <li>• Development of integrated health, housing and social care services at locality level.</li> </ul>	
<b>BHR Integrated Care Partnership Board Transformation Board</b> <ul style="list-style-type: none"> <li>• Older people and frailty and end of life</li> <li>• Long term conditions</li> <li>• Children and young people</li> <li>• Mental health</li> <li>• Planned Care</li> </ul>	

Cancer  
Primary Care  
Accident and Emergency Delivery Board  
Transforming Care Programme Board

## SUMMARY

The Report describes progress made with the development of a JSNA for the developing BHR health and social care system and suggested next steps.

## RECOMMENDATIONS

Members are asked to consider and comment on the first draft of the BHR JSNA and proposed next steps.

## REPORT DETAIL

The Integrated Care Partnership Board requested a JSNA for the developing BHR health and social care system in the summer of 2019. A first draft has now been produced by the Public Health teams of the 3 boroughs in conjunction with the various Transformation Boards working to improve care within the developing BHR system.

It is structured around the King's Fund's population health model that presents population health outcomes as standing on four pillars: -

- The wider determinants
- Health related behaviours
- The communities / places in which we live
- Integrated health and social care services

The analysis regarding the health and social care services pillar is further subdivided into separate sections regarding each of the Transformation Boards. Each section seeks to provide a brief summary of the needs of the population based on an analysis of a small dashboard of metrics relevant to that topic; drawing on relevant policy and national evidence where necessary.

Recommendations are made regarding actions on the part of the health and social care system to address the needs identified. The analysis and recommendations are deliberately high level and made with the intention of identifying priorities for action not to inform detailed action planning.

Commentary and recommendations regarding the first three pillars are made at borough level, as the Council is the lead agency for local action in most instances, with health partners engaging via borough level Health and Wellbeing Boards. Commentary and recommendations regarding the health and social care system relate to the whole of the BHR system as partners are agreed that the overall approach should be consistent across the whole area.

The executive summary (attachment 1) attempts to capture the major factors affecting population-level health outcomes and the implications for health and social care services in a single overarching narrative.



Further development of the JSNA will be iterative, with each edition better than the last. Areas for development in 2020 include additional analysis and commentary regarding: -

- the health needs of the population at locality level. The JSNA includes dashboards containing locality level data where these can be determined. In the coming year, public health teams will work with PCNs and other stakeholders leading the delivery of services at locality level to produce a summary of the health needs of the population served and priorities for action.
- the needs of specific priority groups e.g. people with a learning disability
- primary, urgent and planned care
- patient / service user experience

In addition to the JSNA profiles; officers from the three boroughs and BHR CCGs have reviewed how the information contained might be made available in the form of an online data visualisation / mapping tool to enable interested parties to further interrogate the information held within the BHR JSNA and bring the data to life. An options appraisal has been undertaken and Local Insight chosen as being the best fit with local needs in terms of functionality, adaptability, cost and level of maintenance required.

Local Insight comes prepopulated with over a 1000 different open source indicators that the supplier refreshes regularly. These can be grouped into bespoke collections e.g. the BHR JSNA dataset, structured in line with the population health model, and analysed for locally determined geographies e.g. localities, where the underlying data allow. In addition, locally sourced data can be added and presented in the same way. The tool itself is relatively intuitive and easy to use, both for the developer and the end user. The necessary licences will be purchased during December and the tool should be up and running in early spring.

## Next steps

1. DsPH / colleagues will present the JSNA profile to the ICPB, H&WBs and BHR Transformation Boards with request that they: -
  - identify any errors that need to be remedied before publication of the 2020 edition the BHR JSNA
  - suggest any gaps that they would hope to see addressed in subsequent iterations of the JSNA
  - review their current work programme against the recommendations made in the JSNA and comment on the rationale for any significant gaps or areas of divergence.
2. Council and BHR CCGs officers to collaborate to get the Local Insight operational by early spring.
3. DsPH / colleagues to develop brief statements about the needs of each locality with PCNs / other relevant stakeholders for inclusion in the 2021 JSNA

4. Going forward, each of the Boards identified above is asked to build consideration of the JSNA recommendations and how the JSNA might be strengthened into their respective annual work programmes.

## Progress with next steps

1. The draft JSNA was presented to the ICPB in December 2019. It was well received. The following additions were made to the proposed next steps set out above: -
  - That the recommendations made within the JSNA should be cross checked against the priorities identified in the Healthy London Partnership's Health and Care Vision for London<sup>1</sup>.
  - An owner should be indicated for each recommendation.
  - Relevant Boards should be asked to confirm that the recommendations are being (or will be) addressed or explain why action isn't planned at this time.
  - Develop a reporting mechanism to monitor progress against the recommendations made.
  - Devise a means of monitoring and reporting on changes in relevant key outcome measures.
2. The draft JSNA was subsequently presented to the BHR Health and Care Cabinet. Again the document was well received; members felt that social care issues needed further development.

## IMPLICATIONS AND RISKS

Health and Wellbeing Boards have a statutory obligation to develop a JSNA. The BHR JSNA complements but does not replace existing borough based JSNA documents and is consistent with the Board's intention to participate fully in BHR wide arrangements where this is likely to result in better outcomes and experience of care for local residents.

Commissioners of health and social must consider the JSNA but it has no direct role in decision making at locality, borough or tri-borough level.

## BACKGROUND PAPERS

Executive Summary and Recommendations from draft 2020 BHR JSNA.

<sup>1</sup> <https://www.healthylondon.org/vision/>