

## HEALTH & WELLBEING BOARD

<b>Subject Heading:</b>	BHR JSNA 2022
<b>Board Lead:</b>	Mark Ansell
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**The subject matter of this report deals with the following themes of the Health and Wellbeing Strategy**

<input type="checkbox"/>	<p><b>The wider determinants of health</b></p> <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>
<input type="checkbox"/>	<p><b>Lifestyles and behaviours</b></p> <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>
<input type="checkbox"/>	<p><b>The communities and places we live in</b></p> <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>
<input type="checkbox"/>	<p><b>Local health and social care services</b></p> <ul style="list-style-type: none"> <li>• Development of integrated health, housing and social care services at locality level.</li> </ul>
	<p><b>BHR Integrated Care Partnership &amp; Transformation Boards</b></p> <ul style="list-style-type: none"> <li>• Older people and frailty and end of life      Cancer</li> <li>• Long term conditions      Primary Care</li> <li>• Children and young people      Accident and Emergency Delivery Board</li> <li>• Mental health      Transforming Care Programme Board</li> <li>• Planned Care</li> </ul>

## SUMMARY

This report provides a summary of the recently completed BHR 2022 Joint Strategic Needs Assessment (JSNA) carried out jointly by the Havering, Barking and Dagenham and Redbridge Public Health teams.

This is the second iteration of the BHR JSNA document following a successful collaborative approach taken by the three local authorities in 2020, which culminated in the production of a modern, easy to use and detailed JSNA that is complemented with an online tool to facilitate both the interrogation and further exploration of useful data, reports, and maps by interested stakeholders.

The report also includes a proposal on the production of future JSNAs for HWBBs consideration. This is a less burdensome approach which entails dropping publication of detailed borough editions of the JSNA but retaining the summary document, illustrated with infographics capturing key statistics and a set of recommendations agreed with the various transformation boards whilst further enhancing the online platform.

The HWB is requested to consider and advise on if the suggested alternative approach might adequately meet its needs and thereby allow PH teams to redirect their limited capacity to supporting their respective borough partnerships and the development of population health management within the ICS.

## RECOMMENDATIONS

The HWB approve the BHR JSNA 2022 report and feedback on the proposed approach to future JSNA production.

## REPORT DETAIL

### 1 Introduction and Background

- 1.1 The Health and Social Care Act 2012 amends the Local Government and Public Involvement in Health Act 2007 to introduce duties and powers for health and wellbeing boards in relation to Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs).
- 1.2 In the Act, the Government sets out a vision for the leadership and delivery of public services, where decisions about services should be made as locally as possible, involving people who use them and the wider local community. The Act supports the principle of local clinical leadership and democratically elected leaders working together to deliver the best health and care services based on the best evidence of local needs.
- 1.3 Local authorities and clinical commissioning groups (CCGs) have equal and joint duties to prepare JSNAs and JHWSs, through the health and wellbeing board. The responsibility falls on the health and wellbeing board as a whole.



- 1.4 JSNAs are assessments of the current and future health and social care needs of the local community. Such needs could be met by the local authority, CCGs, or the NHS boards. JSNAs are produced by health and wellbeing boards and are unique to each local area.
  - 1.5 The JSNA provides a single, agreed view of priorities at place level and provide crucial insight to shape the Joint Health and Wellbeing Strategy of the borough. Health and care partners must have regard to the JSNA and JHWS.
  - 1.6 H&WBs can agree to work together and the three BHR H&WBs collaborated on a JSNA for the first time in 2020 and also commissioned an online tool to enable users to explore the data themselves.
  - 1.7 The published JSNAs are complemented by an online tool called Local Insight that allows detailed interrogation of data referred to in the JSNA along with a package of analytical reports that can be downloaded by the public and made use of.
- 2. BHR JSNA 2022**
- 2.1 The pandemic slowed delivery of the current edition and limited engagement with new stakeholders e.g. PCNs. As a result, the 2022 edition is very similar to its predecessor in form and content. Efforts have been made to highlight the impacts of the COVID-19 pandemic as they are currently understood.
  - 2.2 The BHR JSNA 2022 report including an executive summary and list of recommendations is included as part of this briefing package.
  - 2.3 The JSNA will also be shared with each of the borough partnerships, both to inform their thinking regarding priorities for action but also to seek feedback as to how the JSNA can be improved.
  - 2.4 A considerably larger number of datasets, organised under the 4 pillars scheme, are now available via the Local Insight tool.
- 3. Future development of the BHR JSNA**
- 3.1 The rationale for a BHR JSNA was twofold:
    - Firstly, it was a means of making the best of limited public health analytical capacity and it continues to deliver in this respect.
    - And secondly, a common approach assisted transformation boards that were leading much of the redesign of health and care services across BHR.
  - 3.2 The production of the detailed borough specific versions of the JSNA has proved very time consuming at a time when PH teams would wish to also contribute to the practical application of population health management.
  - 3.3 The JSNA is based on aggregate data that are in the public domain. This allows for a wider variety of comparators to be used and for trends to be mapped in a consistent fashion over time. As such, the JSNA can be used to identify the overall needs of population and high level priorities for action e.g. to be addressed in the Joint Health and Wellbeing Strategies of each borough



3.4 However, none of the underlying data is available at the level of individual patient / resident and development of the JSNA is happening separate to thinking about the intelligence needed to underpin operational aspects of population health management.

3.5 A proposal for HWB consideration is a less burdensome approach which entails dropping publication of detailed borough editions of the JSNA but continue to produce the summary document, illustrated with infographics capturing key statistics and a set of recommendations agreed with the various transformation boards whilst further enhancing the online platform.

This would continue to provide an overview of the needs of the three boroughs and recommendations for action, with supporting data sets that could be explored and downloaded as desired but significantly reduce the effort entailed.

The HWBBs are requested to consider and advise on if the suggested alternative approach might adequately meet its needs and thereby allow PH teams to redirect their limited capacity to supporting their respective borough partnerships and the development of population health management within the ICS.

## IMPLICATIONS AND RISKS

JSNA is a statutory requirement and failing to deliver it would result in breaches in local Public Health authorities' duties, including the respective Health and Wellbeing boards.

## BACKGROUND PAPERS

Link to most recent BHR JSNA profiles:

[https://bhrijsna.communityinsight.org/custom\\_pages?view\\_page=43](https://bhrijsna.communityinsight.org/custom_pages?view_page=43)

Link to BHR online insight tool:

<https://bhrijsna.communityinsight.org/map/>