REPORT FOR: HEALTH AND WELLBEING BOARD

Date of Meeting:	2 May 2019
Subject:	**Development of a virtual Joint Strategic Needs Assessment for Harrow**
Responsible Officer:	Carole Furlong, Director of Public Health, Harrow Council
Public:	Yes
Wards affected:	All
Enclosures:	None

Section 1 – Summary and Recommendations

This paper discusses how a new web-based Joint Strategic Needs Assessment (JSNA) work programme will be delivered in Harrow. It will be accompanied by a presentation of a mock up of the new site.

Recommendations:
The Board is requested to note the work that has been undertaken since the previous paper in 2018-9 and support the delivery plan for the JSNA.

Section 2 – Report

1.1 Background

Public Health team has previously presented a paper to the Health and Wellbeing Board outlining three proposals to progress the JSNA in Harrow, in light of financial and staffing constraints. Of the three options considered, the proposal for a virtual (web-based) JSNA, was agreed to be the most efficient way forward for Joint Strategic Needs Assessments in Harrow.

This paper outlines the process to develop and update the Harrow web-based JSNA during 2019 so that it is in place to replace the current JSNA for 2015-2020. The JSNA will then become a rolling report rather than relating to one specific time period.

1.2 What is the JSNA?

A Joint Strategic Needs Assessment (JSNA) is an ongoing process by which local authorities, clinical commissioning groups and other public sector partners jointly describe the current and future health and wellbeing needs of its local population and identify priorities for action process.

The Health and Wellbeing Boards in each Local Authority have a statutory duty to undertake a JSNA in relation to their area (Health and Social Care Act 2012, Department of Health, 26 March 2013).

The Harrow CCG and Harrow Council have a legal obligation to have regard to the relevant JSNA and JHWS in exercising their functions.

1.3 Purpose of the JSNA

The Joint Strategic Needs Assessments guidance clearly states that, the vision and purpose for a JSNA is to: *"lead to stronger partnerships between communities, local government, and the NHS, providing a firm foundation for commissioning that improves health and social care provision and reduces inequalities"*, which can be enhanced through adopting an asset based approach to empower the local community, thus promoting independence.

The process of developing JSNA involves key decision-makers from the Health and Wellbeing Board. The result should be a needs assessment that encompasses health and social issues as well as the broader determinants of health. The NHS White Paper: Equity and Excellence: Liberating the NHS clarifies that JSNAs are important tools for commissioning. JSNAs will be used to inform Joint Health and Wellbeing Strategies which, in turn, will drive local commissioning decisions.

The following diagram demonstrates the roles and responsibilities of each partner contribution towards the JSNA process and how JSNAs provide the evidence base, from which strategies such as the JHWS are developed and services are commissioned. An effective and successful JSNA requires a

collaborative approach, which includes the involvement of the local authority, the CCG and local community views throughout the entire JSNA process.

JOINT STRATEGIC NEEDS ASSESSMENT

JSNA & JHWS: explicit link from evidence to service planning
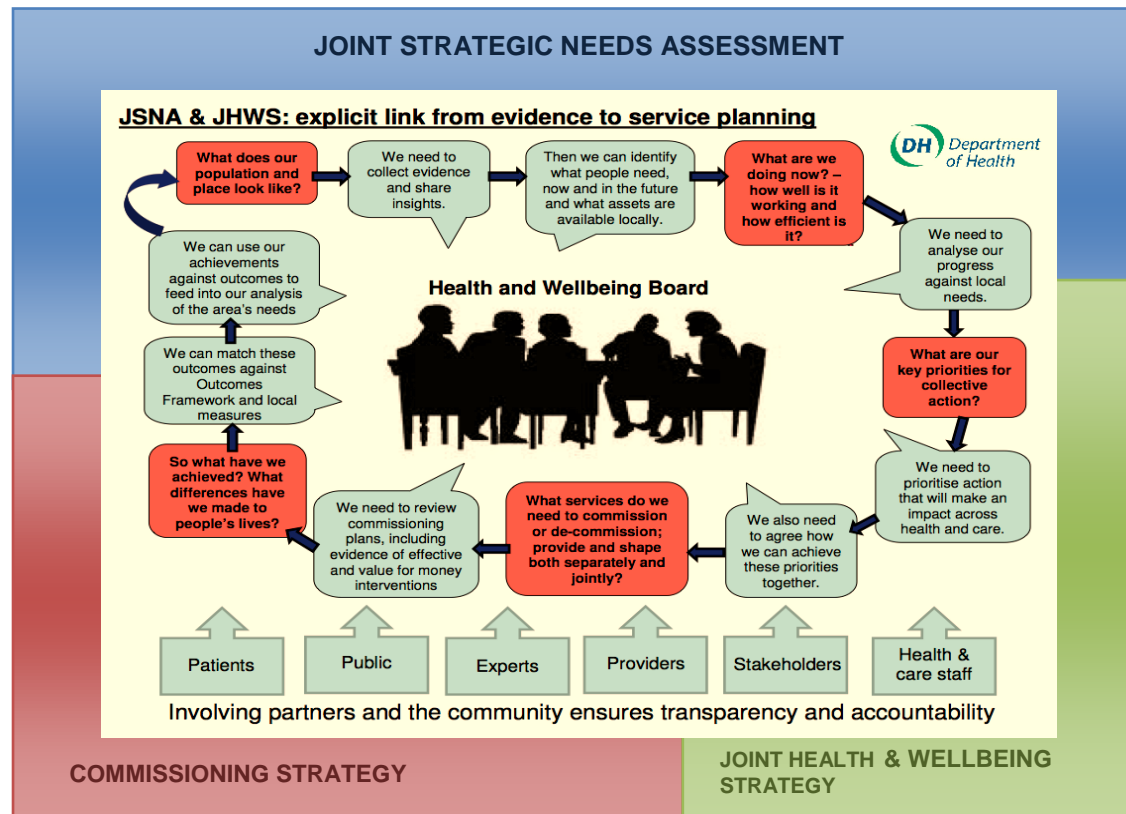
1.4 The Vision for a Web-based JSNA

We have researched web-based JSNA tools across other local authorities. They are used by a wide range of stakeholders and contain varying levels of data. Rather than designing an expensive new bespoke website with a searchable database and web tools, we propose to use existing tools available to the local authority to create an interactive website that mirrors the life course approach of the Joint Health and Wellbeing Strategy (JHWS).

The main benefits of a web-based JSNA are:

- the platform will allow for an ongoing programme with more up to date data so it is not out of date

- it allows for a rolling JSNA programme with reports being added as work is done by various partners that contribute to knowledge about a topic area rather than one report every 3-5 years.

- both in depth reports and shorter briefings can be included

- links to other relevant local reports can be used to avoid duplication (e.g. planning or housing strategy; vitality profiles)

- a link to source data such as PHE profiles /Fingertips tool can be embedded in the tool

- allows regular reports to be brought to the Health and Wellbeing Board on topics updated on the website meaning that the board can potentially focus on different topics in themed meetings.
- Allows for flexibility to the public health team who coordinate the JSNA and other contributors, so that work can be undertaken around other important business processes.

The council will host the new JSNA on it's website but we will seek to have a link to it from the CCG website too. The web-based JSNA tool will be divided into the various chapters corresponding to the JHWS:

- **Start Well :** Topics will include those related to maternity, children, and education
- **Live well:** Topics will include demographics. lifestyle, environment and housing, mental health, disease groups, and long term conditions
- **Work Well :** Topics related to work, worklessness, skills development, welfare and benefits and enterprise
- **Age well :** Topics will include those related to older people, dementia, winter wellness, death and palliative care

There will be flexibility around the content of the main sections and the stakeholder group will have input into this.

The JHWS model acknowledges that:

- Health and wellbeing is not about health services alone. The biggest impacts on an individual's health and wellbeing are derived from the environment they are born in, that they live and work in; from their education and wealth; and from their relationships with others.
- It is important to note that, inequalities in health and well being are a result of an accumulation of disadvantages through life.
- The environment in which we live is a major determinant of health and well being. Therefore, collaboration across practitioner professionals such as planners, public health, service providers, and ecologists, urban designers, across transport, air quality, community development and economic departments is essential.
- Tackling determinants of health are required across the life cycle, using a life course approach (rather than at a single point in a certain time), using the Marmot approach which addresses health inequalities between vulnerable and well-off populations focusing on all ages and stages of life.
- Local health and wellbeing of the population can be assessed utilising a series of outcome indicators available such as the Public Health Outcomes Framework, NHS outcomes Framework and Adult Health and Social Care Outcomes Framework to improve the health and well being of the population.

1.5 Stakeholder Engagement Workshops

As part of the JSNA work programme, a workshop with stakeholders was held in February 2019. The purpose of the workshop was to engage all stakeholders in the JSNA and to seek their opinions on the initial proposal for a web based system.

The event was opened by the Leader of the Council and vice chair of the CCG in order to represent partnership working. In addition to the Portfolio Holders and other Councillors, key stakeholders from the voluntary sector, the local authority and CCG attended.

After presenting stakeholders with information about past JSNAs in Harrow, there was a demonstration of how a web based tool might work. Stakeholders were then asked questions about why they needed data on health and wellbeing and how they use it; where they currently access data; and what topics were of key importance to them so that the steering group could plan for content in the coming year.

1.5.1 Usefulness of the JSNA as a local information source

There was overwhelming agreement that the JSNA was the main source of information – despite the data being somewhat out of date. The key purpose of the JSNA was to provide both data and narrative about population health needs.

It was highlighted that council and NHS strategies need to be more closely aligned. For the voluntary sector, the JSNA was seen as the key resource to support funding bids but information was found in a wide range of other sources including local information gathering from service users.

Stakeholders thought that a wider range of data sources would enrich the JSNA. Of particular interest were the needs of new communities and on going needs of vulnerable groups. There was also wide recognition of how national politics were influencing local policies and how this was changing people's expectation of health. As a result stakeholders had a keen interest in comparative data. Horizon scanning for potential health problems was also thought to be important

1.5.2 Capturing User / Resident Voice

The data on service user experience and opinions and health concerns of the local population are not well captured in the JSNA and this needs to improve. As part of the ongoing process, the steering group will seek qualitative evidence such as Healthwatch reports, surveys and user group opinions as the topics on the website are developed. If there is no existing data forthcoming, the steering group will consider how this might be sought within the financial constraints of the partners. Ideas include surveys, focus groups and workshops.

1.5.3 Engaging other stakeholders

There were no representatives from the police at the stakeholder workshop. Crime and violence are important issues that have an impact on the health and wellbeing of the population. It will be important to capture this information in the JSNA.

1.5.4 Further requests

The voluntary sector requested that the JSNA be enhanced to include both a service directory and links to further information resource. While this is not within the scope of the JSNA,. The steering group will consider how links to evidence based information and to information on services is presented.

1.5.5 Prioritising topics

With regard to the priorities for the website development, there was a very wide range of topics mentioned. However, the impact of poverty on health and the topic of mental health were both mentioned most frequently. It was stressed that mental health shouldn't be siloed in a separate section but should be integrated into the main sections of the report.

1.6 JSNA Delivery programmme

A steering group will be established comprising of the Public Health Consultant and Analyst, The Head of Business Intelligence at the Council, and a senior manager from the CCG. Consideration needs to be given as to how to involve the voluntary sector partners in this process. A member of the web development team from the council will be involved to resolve any website issues. Other members will be co-opted to the group depending on the topic being developed e.g. subject specific voluntary sector groups.

We propose that the web site is developed in stages and the delivery plan for the JSNA is aligned to the Health and Wellbeing Strategy Board schedule, so that on completion of each section, it can be presented at the board meetings for discussion and review. This does not mean that no work will be undertaken on other topics in this time, merely that the new website pages will be developed and reported to the Board quarterly.

1.6.1 First Section

The JSNA work programme will commence with the Start Well stage, as the 'best start for all our children' is vital for a healthy and thriving future society. All the evidence shows us that what happens in early childhood and the developing years' impacts on health and well-being and life chances throughout the life course. Supporting parents, children, young people and communities is an investment in both the present and the future for individuals and society as a whole. In addition, the public health team and other council teams and stakeholders have undertaken a number of needs assessments

around the topic of child heath recently so pragmatically it will be the easiest to populate first.

The sections will include a wide variety of subtopics which may not cover every issue that might be of interest within the strategy stage. These will be added to in future quarters. The following table shows the plan for the website development over the coming year.

Delivery Plan : Harrow JSNA 2019 website work programme	
Output	Go live date on website:
1. Start Well Stage	End May-19
2. Age Well Stage	End Sep-19
3. Live Well Stage	End Dec-19
4. Work Well Stage	End Mar-20

1.6.2 Communicating JSNA updates

In order to communicate the updates, we will develop a communications plan which will include short briefing s of data or documents that have been added to the JSNA each quarter. This will be distributed to stakeholders through an email list (which will be GDPR compliant).

Ward Councillors' comments

A number of ward councillors were in attendance at the stakeholder workshop. Their opinions and comments have been included in the previous section of this report.

Financial Implications/Comments

The JSNA is the responsibility of all partners on the Health and Wellbeing Board. It is managed and coordinated by the Public Health team on behalf of the Board, although other council teams and the CCG are also required to contribute to the JSNA.

There are no direct financial implications arising directly from this report however, there is no specific budget earmarked to support the delivery of the JSNA. The development of a web based report, which can be implemented and updated over time and enabling partners to contribute, should avoid the need to identify specific budget provision and enable this to be managed within existing budgetary resources.

Legal Implications/Comments
None
Risk Management Implications
None

Equalities implications

Was an Equality Impact Assessment carried out? No

Reducing health inequalities is one of the primary focuses of the JSNA. Therefore, equalities information will be included in the different sections of the JSNA where possible.

Council Priorities

The JSNA is a vital document in supporting the delivery of the council's and the CCG's priorities. It identifies inequalities in health, demonstrated the need for action or for targeting of services and measures the impact of those services on the priorities. As such, it contributes to all of the council priorities.

1. **Building a Better Harrow**
    - Create a thriving modern, inclusive and vibrant Harrow that people can be proud to call home
    - Increase the supply of genuinely affordable and quality housing for Harrow residents
    - Ensure every Harrow child has a school place
    - Keep Harrow clean
    - More people are actively engaged in sporting, artistic and cultural activities in ways that improve physical and mental health and community cohesion

2. **Supporting Those Most in Need**
    - Reduce levels of homelessness in the borough
    - Empower residents to maintain their well-being and independence
    - Children and young people are given the opportunities to have the best start in life and families can thrive
    - Reduce the gap in life expectancy in the borough

3. **Protecting Vital Public Services**
    - Harrow has a transport infrastructure that supports economic growth, improves accessibility and supports healthy lifestyles
    - Healthcare services meet the needs of Harrow residents
    - Everyone has access to high quality education
    - A strong and resourceful community sector, able to come together to deal with local issues
    - Harrow continues to be one of the safest boroughs in London

4. **Delivering a Strong local Economy for All**
    - A strong, vibrant local economy where local businesses and thrive and grow
    - Reduce levels of in-work poverty and improve people's job opportunities
    - Harrow is a place where people and businesses invest

5. **Modernising Harrow Council**
    - Deliver excellent value for money services

- Reduce the borough's carbon footprint
- Use technology and innovation to modernise how the Council works
- Improving access to digital services

Section 3 - Statutory Officer Clearance (Council and Joint Reports)

Name: Donna Edwards. | x | on behalf of the
                                         Chief Financial Officer

Date: 9 April 2019.

Name: Paul Hewitt | x | Corporate Director

Date: 23/4/19

Ward Councillors notified: NO

Section 4 - Contact Details and Background Papers

Contact: Sarita Bahri, Public Health Analyst, ext 5511

Background Papers: None