# **London Borough of Bromley**

#### **PART ONE - PUBLIC**

## **HEALTH AND WELLBEING BOARD**

Date: Thursday 28<sup>th</sup> November 2013

Report Title: Progress on the 2013/14 JSNA Update & Annual Refresh of the 2012 – 15

Health & Wellbeing Strategy

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#### 1. SUMMARY

- 1.1 **A Joint Strategic Needs Assessment** (JSNA) has been a statutory requirement of local authorities and NHS primary care trusts since 1 April 2008. Original guidance set out an expectation that the JSNA be carried out jointly by the director of public health, director of adult social services and director of children's services.
- 1.2 The government has since highlighted the 'equal and explicit' role of GP consortia and local authorities, including the director of public health, in preparing the JSNA, and endorsed the JSNA's key role in informing joint health and wellbeing strategies, to be developed by new Health and Wellbeing Boards.
- 1.3 The aim of the JSNA is to deliver an understanding of the current and future health and wellbeing needs of the population over both the short term (three to five years), and the longer term future (five to ten years) to inform strategic planning commissioning services and interventions that will achieve better health and wellbeing outcomes and reduce inequalities.
- 1.4 The JSNA is an evidence based document highlighting need, as such it is distinct from the Health & Wellbeing Strategy which it informs and which arises from it. The Health & Wellbeing Strategy outlines the priorities (based on the JSNA) agreed by the Health & Wellbeing Board together with the proposed actions and expected outcomes.

#### 2. REASON FOR REPORT GOING TO HEALTH & WELLBEING BOARD

- 2.1 At its meeting in September the Health and Wellbeing Board (HWB) agreed that it would receive regular updates on the progress in completing the annual JSNA to increase knowledge which will assist in informing the HWB priorities.
- 2.2 This report therefore describes the process for undertaking the 2013/14 JSNA, the suggested areas that will be covered and the key milestone dates and actions.

- 2.3 The report also outlines the proposed approach for completing the 2013 refresh of the current Health and Wellbeing Strategy.
- 2.4 The Health and Wellbeing Board is asked to comment and agree the approach outlined for:
  - updating the 2014 JSNA including the new areas outlined in section 4.1 and the timescales for undertaking;
  - refreshing the current Health & Wellbeing Strategy to reflect the previous 2012/13 JSNA

# 3. SPECIFIC ACTION REQUIRED BY HEALTH & WELLBEING BOARD AND ITS CONSITUTENT PARTNER ORGANISATIONS

- 3.1 Whilst the Public Health Team within the LB Bromley have the lead responsibility for completing the JSNA a project steering group has been established with representatives from:
  - Education & Care Services including adult social care, children's social care and education
  - CCG Clinical Lead
  - Voluntary Sector Strategic Network
  - Community Links Bromley
  - Healthwatch Bromley
  - Environmental Services, LA Housing and LA Planning

# Health & Wellbeing Strategy

The JSNA is an evidence based document highlighting need, as such it is distinct from the Health & Wellbeing Strategy which it informs. The Health & Wellbeing Strategy outlines the priorities (based on the JSNA) agreed by the Health & Wellbeing Board together with the proposed actions and expected outcomes.

Financial

1. Cost of proposal: within existing resources

2. Ongoing costs: within existing resources – core business

3. Total savings (if applicable): not applicable

4. Budget host organisation: LBB

5. Source of funding: Approved 2013/14 ECHS Budget

6. Beneficiary/beneficiaries of any savings: not applicable

#### Supporting Public Health Outcome Indicator(s)

The JSNA will record progress against the Public Health Outcome Indicators.

#### 4. COMMENTARY

## 4.1 What the 2013/14 is likely to include?

The aim of the JSNA is to deliver an evidenced based understanding of the current and future health and wellbeing needs of the population over both the short term (three to five years), and the longer term future (five to ten years) to inform strategic planning commissioning services and interventions that will achieve better health and wellbeing outcomes and reduce inequalities.

The table below shows the topic areas the Steering Group have suggested be included in this year's JSNA. The core areas are those included in previous years, and these will be updated. In 2014 there will be a number of new areas:

- The ward health profiles will show the levels of a range of health outcome indicators for each ward and provide a comparison between wards.
- There will be a report on the characteristics and health needs of those people who use unscheduled care services frequently.
- The section on Asset Based Community Development will focus on the principles of asset based community development, a framework for using assets, examples of how this approach has been used in Bromley. The aim is for this section to be developed further in subsequent years.

| Area   | Core/<br>New/ |
|--|---------------|
| The Health of People in Bromley: Life Expectancy and the Burden of Disease   | Core          |
| The Places where People Live   |               |
| Ward Health Profiles   | New           |
| • Housing  | Core          |
| Populations of Interest (Each of these sections include a summary of the health needs of the relevant population). |               |
| Children & Young People  | Core          |
| Older People   | Core          |
| • Learning Disability, Physical Disability & Sensory Impairment and mental health                                  | Core          |
| and wellbeing  | Core          |
| End of Life Care   | Core          |
| • Carers   | Core          |
| Alcohol and Substance Misuse   | New           |
| Frequent Attenders to Unscheduled Care Services  |               |
| Asset Based Community Development  | New           |
| Reports on more in depth health needs assessments carried out during the year – up to 5 can be undertaken          | Core          |
| Updates on issues raised in the last JSNA  | Core          |

Full details and examples can be found in Appendix 1.

## 4.2 How will this be undertaken?

The Steering Group will oversee the production of the JSNA and act as an advocate for the JSNA process. Members will nominate leads for specific sections.

A working group has been set up to include the leads for specific sections. These leads will collate routine and non-routine information and set the context in narrative.

The final document and Executive Summary will be published on the JSNA page on the Bromley MyLife web portal. A web presence for the underlying JSNA data is being developed further this year.

# 4.3 Key Milestones

Scope for the 2014 JSNA developed and agreed November 2013 Data collected, collated, and analysed December 2013 to April 2014 Sections drafted, proofs produced and document edited December 2013 to April 2014 Draft JSNA circulated to stakeholders for comment May to July 2014 Final editing and updating of core data (where appropriate) August 2014 JSNA finalised, signed off by HWB and published September 2014 Underlying JSNA data published on web September 2014 September 2014 HWB prioritise areas for two health needs assessments HWB considers JSNA and prioritises key areas October – December 2014 New HWB Strategy & Work Plan developed by HWB October 2014 – February 2015 2015 – 18 HWB Strategy approved and published March 2015

# 4.4 Proposed Approach for refreshing the 2012 – 15 Health & Wellbeing Strategy

It is proposed that the current strategy will be reviewed by end of December to reflect the last JSNA signed of the HWB in July 2013. The current nine priorities will be revisited and updated as appropriate. The draft refreshed strategy could then be presented to the January HWB meeting for approval.

This approach could then enable the HWB to consider the revised JSNA in autumn 2014 to underpin the new 2015 HWB strategy and HWB work plan priorities. The benefit of this approach is that it will enable the HWB to develop shared priorities which then can be reflected within the strategy.

| Non-Applicable Sections:                                 | FINANCIAL IMPLICATIONS; LEGAL IMPLICATIONS IMPLICATIONS FOR OTHER GOVERNANCE ARRANGEMENTS, BOARDS AND PARTNERSHIP ARRANGEMENTS |
|--|--|
| Background Documents:<br>(Access via Contact<br>Officer) |  |

# Appendix 1 - Proposed Outline for JSNA 2013-14

The Health of People in Bromley: Life Expectancy and the Burden of Disease (2012 JSNA from page 22)

This section will look at the demography of the population and will summarise the key causes of mortality and the prevalence, trends and issues for the key diseases and risk factors for disease.

# The Places where People Live (2012 JSNA from page 98)

#### Ward Health Profiles

This section will include a map of each ward with information on key health indicators for that ward, as well as a ranking of the ward against the other wards in the borough for each indicator.

#### Housing

This section will summarise the key issues relating to housing and health in the Borough.

# Populations of Interest (2012 JSNA from page 126)

Each of these sections will include a summary of the health needs of the relevant population.

- Children & Young People
- Older People
- Learning Disability
- Physical Disability & Sensory Impairment
- Mental Health
- End of Life Care
- Carers
- Substance Misuse
- Alcohol
- Frequent Attenders to Unscheduled Care Services

## **Asset Based Community Development (new)**

This section will focus on the principles of asset based community development, a framework for using assets, examples of how this approach has been used in Bromley. This section will be developed further in subsequent years.

Reports on more in depth needs assessments carried out during the year Updates on Progress from Last Year's JSNA (2012 JSNA from page 229)

http://bromley.mylifeportal.co.uk/uploadedFiles/Putting\_People\_First/Bromley\_Homepage/Document Library/Public Health/BROMLEY%20JSNA%202012%20FINAL%20VERSION.pdf