



Date: Thursday, 4 March 2021
Time: 9.30 am
Venue:
Contact: Michelle Dulson, Committee Officer
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HEALTH AND WELLBEING BOARD

TO FOLLOW REPORT (S)

- 6 Joint Strategic Needs Assessment (Pages 1 - 6)**
Report to follow.
Contact: Rachel Robinson, Director of Public Health, Shropshire Council
- 9 Covid-19 update and Flu Immunisations update (Pages 7 - 12)**
A verbal update will be given.
Contact: Rachel Robinson, Director of Public Health, Shropshire Council

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Shropshire Clinical Commissioning Group



Health and Wellbeing Board

Meeting Date: 4th March 2021

Shropshire Joint Strategic Needs Assessment (JSNA)

Responsible Officer: Rachel Robinson, Shropshire Director of Public Health

Email: Rachel.robinson@shropshire.gov.uk

1.0 Summary

1.1 At the Health and Wellbeing Board in January 2021 an update on Shropshire's JSNA was presented with revised timescales due to COVID-19. It was agreed that the Health and Wellbeing Board would receive regular updates on progress and any issues arising. The intention is to ensure Health & Wellbeing Board partners are kept informed and engaged with the programme as the governance and processes are designed and the needs assessments are developed.

2.0 Recommendations

2.1 The Health and Wellbeing Board note the contents of the report

REPORT

3.0 Progress since last report

3.1 **Place Based JSNA:** Planning has begun to consider the next steps in delivering the place based JSNA, the governance, geographies, proposed roles and delivery model required. Proposals are outlined below.

3.1.1 **Best Practice:** Following the last meeting the team have been speaking to colleagues in other areas who have taken a similar place based approach to ensure that our model is built on best practice.

3.1.2 **Geographies:** It was agreed at the January 2021 Health and Wellbeing Board that Place Plan geographies would be used as a consistent set of 'JSNA Geographies'. Ward level and/or practice level data will be used wherever possible within these geographies, but the place plans create the lowest meaningful geography for consultation and engagement. This creates 18 JSNA areas across the county that would be used to profile needs and design services across the health and wellbeing system, these in turn can be aggregated and overlaid with broader geographies which are meaningful to partners and provide information at those geographical levels required for planning and commissioning. Appendices 1 and 2 shows the map of these geographies. The table below shows how they align to Primary Care Networks and other geographical boundaries.

Table 1: Place Plan Geographies and Primary Care Network Boundaries.

Place Plan	Localities	Primary Care Network* NB these overlap
Oswestry	North West	North Shropshire
Ellsemere	North East	
Wem		
Whitchurch		
Market Drayton		
Shrewsbury	Central	Shrewsbury
Minsterley and Ponstesbury		
Church Stretton	South West	South West
Craven Arms		
Bishops Castle		Shrewsbury and South West
Ludlow		South West
Much Wenlock	South East/Central	South East
Cleobury Mortimer	South West	
Highley	South East	
Bridgnorth		
Broseley		
Shifnal		
Albrighton		Teldoc and South East

3.1.3 **Governance:** Following the January Health and Wellbeing Board, terms of reference are being drafted for both a strategic group to oversee and monitor the role out of the work programme and steering groups to coordinate the delivery of the programme. The Strategic Group will include the senior accountable officers who are responsible for the delivery of the JSNA across partners. An overview of the roles of the Health and Wellbeing Board members on the working and steering group are proposed below.

Table 2: Proposed roles of Health and Wellbeing Board member organisation

Stakeholder/HWB Member	Proposed Involvement/Role
STP	Inform and utilise needs assessments. Ensure overall and local service delivery models within Population Health Management programme are based upon the evidence generated through the need's assessments.
SC	Hold dual responsibility with CCG for delivery of the JSNA. Transformation programmes and Strategies (including community and rural strategy and Place Plan) to contribute to the evidence base and utilise findings in delivery of programmes. Commissioning intentions to inform and utilise the needs assessments. To provide project support to coordinate local stakeholder activity such as steering group meetings Insight Service and Intelligence Officers to provide dedicated analytical expertise
CCG	Hold dual responsibility with SC for delivery of the JSNA. To work collaboratively to ensure local ownership is established for each needs assessment and ensure they inform Commissioning Intentions. Provide relevant data and analysis as required.
Providers	To inform relevant needs assessments as core assets within the community/system
Health Watch	To inform relevant needs assessments as core assets within the community/system to support development of relevant needs assessment, help with local engagement and champion its use.
Community and Voluntary Sector	Working with partners to identify third sector assets to inform needs assessments To support evidence base and engagement with local communities To utilise the outputs in planning and bids
Other partners	To contribute data, support development of needs assessments and utilise evidence base as appropriate in local service planning
Local Councillors	Sponsor and Support the needs assessment within their area Local Elected Members, parish councillors and local organisations to support development of relevant needs assessment and help with local engagement Contribute local intelligence around local needs and community assets

3.1.4 **Proposed Delivery model** Based upon the above roles, and the need to have local ownership in place for each needs assessment, the table below sets out the suggested process for delivering each needs assessment. This covers just the first wave of needs assessments, and the proposal is to build in a review step at the end of the first wave to identify whether this is the most effective approach.

Table 3: Proposed Delivery Model

Month	Task	Who	Purpose	Proposal
Pre-project	Identify Needs Assessment 'Sponsor'	Health & Wellbeing Board	To act as the local strategic lead for the needs assessment, ensuring local buy-in and promoting the use of the outputs in local planning activity	Health & Wellbeing Portfolio Holder
Pre-work	Identify Needs Assessment lead officer	Health & Wellbeing Board	To take responsibility for the delivery of the needs assessment and to lead and advise the steering group throughout the process. The lead is responsible for ensuring the final needs assessment meets the agreed objectives and is completed to time and quality standards.	Director of Public Health
Pework	Identify nominated leads from partners	Each stakeholder	To ensure the needs assessment has buy-in from all appropriate local stakeholders. Examples include CCG, WCC, Providers, Parish Councils, BIDs Police, Third Sector etc.	Various
Pework	Establish steering group	Needs Assessment lead officer, Sponsor	To ensure the needs assessment has input from stakeholders and complements systemwide strategic planning activity. Also to ensure group has appropriate administrative support	Various
Month 1	Initial scoping meeting	Needs Assessment lead officer, Insight Analyst	To discuss the process, agree timeline, go through templates, roles and responsibilities	
	Initial stakeholder group meeting	Needs Assessment lead officer, Steering group	To get stakeholders together, confirm the objectives and set out the process/timeline	
Months 1 to 3	Data collection and research	Insight Analyst, Steering Group	To carry out the data collection, research process and analysis.	
Months 2 to 3	Regular engagement, progress updates	Needs Assessment lead officer, Insight Analyst	To keep stakeholders involved, resolve queries, share data, ensure local perspectives included	
Month 3	First draft report	Insight Analyst	To present the steering group with a first draft	
Month 4 – 6	Second stakeholder session Recommendations formed Action Plan developed Dissemination activity	Needs Assessment lead officer, Steering group, Sponsor	To sign off the needs assessment, agree key messages and recommendations and form action plan. To share the material more widely and confirm arrangements for delivering action plan.	

3.3 **Restart the SEND JSNA.** A full time analyst has been recruited and starts on the 15th March with their immediate priority to complete the SEND JSNA.

4.0 Risk Assessment and Opportunities Appraisal

4.1 It is proposed that a single, coordinated approach is taken to the development of place-based profiles and needs assessments which in turn support place-based working. This will take time to develop and is intrinsically linked to the refresh of the HWB Strategy.

5.0 Financial Implications

- 5.1 To deliver needs assessments at scale across the place plan areas, additional project support would be required, upskilling of analysts across the system (currently being rolled out through the CSU academy and analyst network) and the support of colleagues in planning and partners in local communities. The support of these will impact the scale and pace of delivery.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

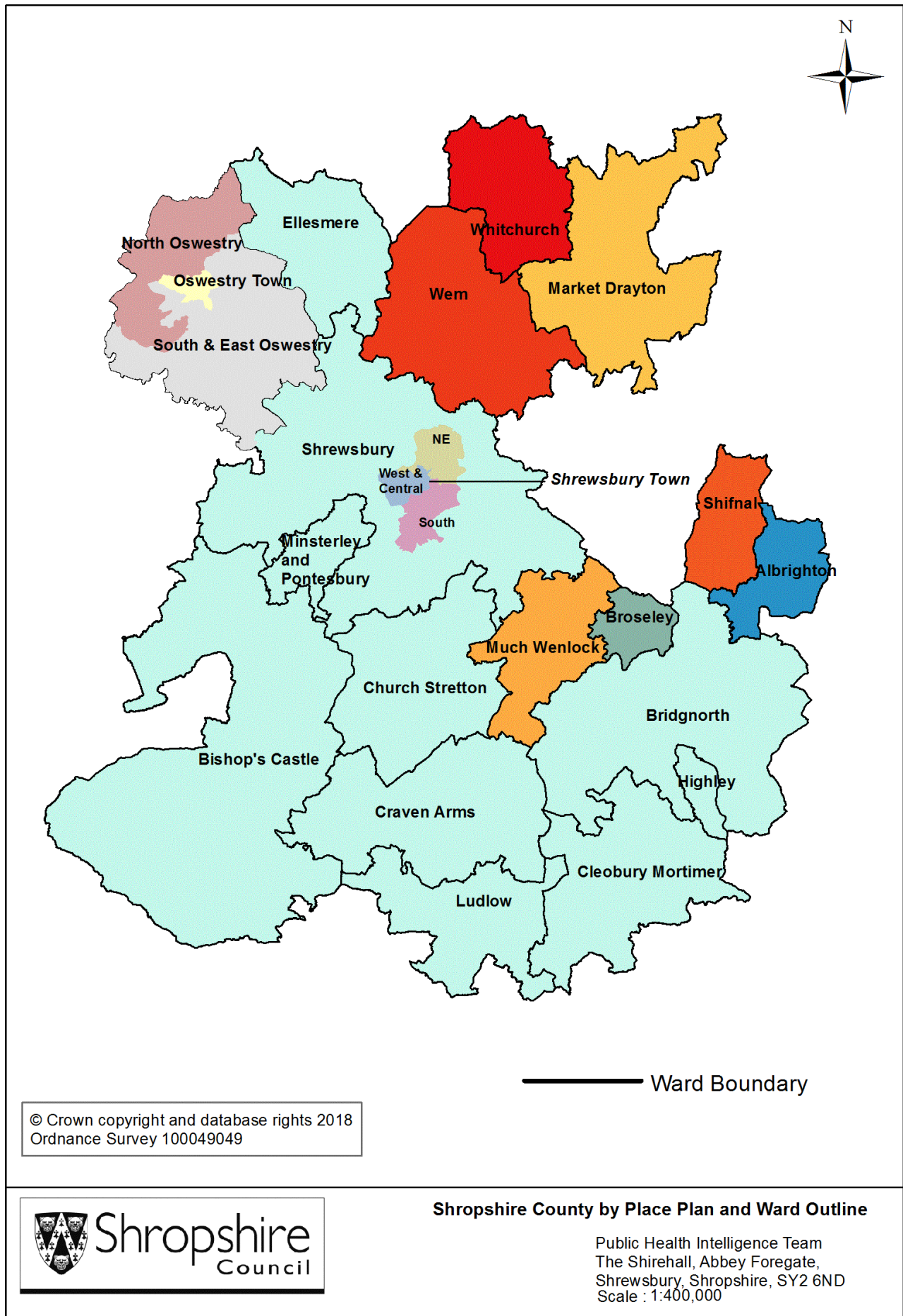
Appendix 1: Place Plan Geographies

Appendix 2: Primary Care Network Boundaries

Cabinet Member (Portfolio Holder)
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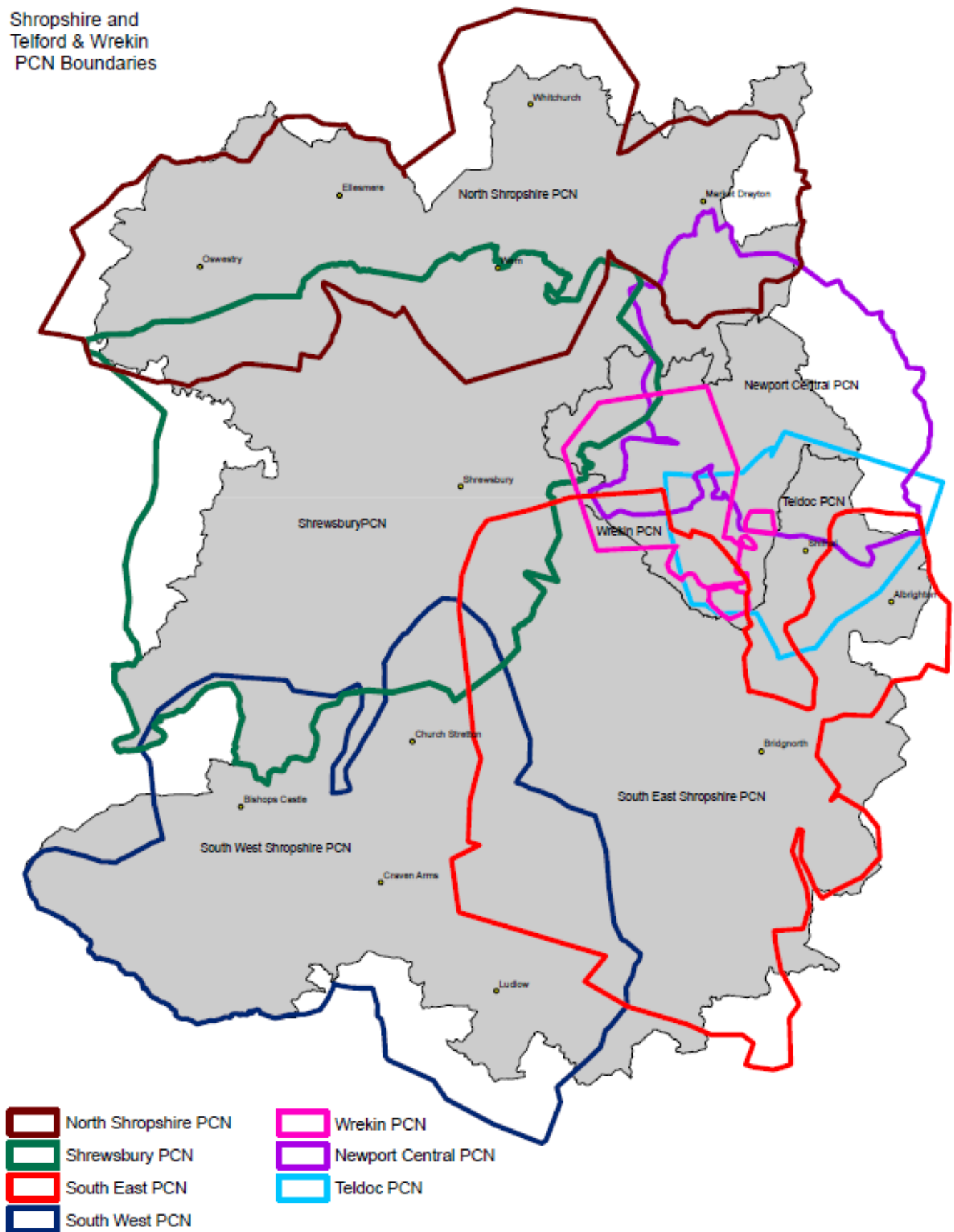
Cllr. Dean Carroll Portfolio Holder for Adult Services, Climate Change, Health and Housing
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Cllr. Ed Potter, Portfolio Holder for Children's Services



Appendix 2: Shropshire and Telford and Wrekin PCN Boundaries

Shropshire and Telford & Wrekin PCN Boundaries



PCN Boundaries have been created using GP Inner Catchment Area data from NHS Digital (March 2020) and Primary Care Network Data from Strategic Health Asset Planning & Evaluation (SHAPE)

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Health and Wellbeing Board

Meeting Date: 4th March 2021

COVID-19 update, and Flu Immunisations update

Responsible Officer: Rachel Robinson – Director of Public Health - Shropshire

Email: Rachel.robinson@shropshire.gov.uk

1. Summary

1.1 This report provides a COVID-19 update and Flu immunisations update which describes; flu vaccination national targets, the communications campaign to raise awareness of eligibility and increase uptake, flu vaccination uptake data and Local Authority flu vaccination progress. COVID-19 updates include latest data, the local response to rising cases, lateral flow testing and the COVID-19 vaccination.

2. Recommendations

2.1 That the Board notes the contents of the report.

REPORT

3.0 Flu Vaccinations

3.1 Flu vaccination is one of the most effective interventions we have to reduce pressure on the health and social care system this winter. We are currently seeing the impact of COVID-19 on the NHS and social care, and this coming winter we may be faced with co-circulation of COVID-19 and flu. Whilst the seasonal flu vaccine will not protect against COVID-19 infection, it is an effective way to protect those at risk from flu, prevent ill-health and minimise further impact on the NHS and social care. Increasing flu vaccinations uptake is more important than ever this year.

3.2 Table 1 shows vaccination uptake ambitions in 2020/21 for eligible groups. Whilst ambitious, this reflects the need this year to help protect as many qualifying groups as possible. More people are eligible this year including Household contacts of those on the NHS Shielded Patient List and children in year 7.

Table 1: Vaccine uptake ambitions in 2020 to 2021

Eligible groups	Uptake ambition
Aged 65 years and over	At least 75%
In clinical at risk group	At least 75%
Pregnant women	At least 75%
Children aged 2 and 3 year old	At least 75%
All primary school aged children and school year 7 in secondary school	At least 75%
Frontline health and social care workers	100% offer

3.3 Flu vaccination uptake in Shropshire County

3.3.1 Providers have worked exceptionally hard to deliver the flu programme in challenging times this year, and with high targets. All should be congratulated for their efforts.

3.3.2 The table below shows GP Practice flu immunisation uptake at week 3 in Shropshire. Shropshire CCG has exceeded the 75% target for the 65 year and over group with a rate of 83.5%, and is the regionally highest for pregnant women at 54.3%. There has been an increase across all eligible age groups in 2020, compared to 2019.

Eligible group	Take up 2020 (%)	Take up 2019 (%)	% increase 2020 compared to 2019
65 years and over	83.5%	72.3%	+11.2%
Total Combined - 6 months to under 65 years: At-risk	61.8%	46.9%	+14.9%
All pregnant women	54.3%	48.6%	+5.7%
All age 2	67.8%	49.1%	+18.7%
All age 3	71.6%	49.4%	+22.2%
Age 50-64 years (eligible from December)	39.7%	N/A	N/A

3.4 Communications

3.4.1 A communications campaign to raise awareness of eligibility, and increase uptake of the free flu vaccination has been in place throughout the 'flu season.':

- The System Communications Task and Finish Group continues to meet weekly, with winter wellness and promotion of flu vaccination reporting being a standard agenda item
- Scheduled social media messages promoting the flu vaccine to eligible groups, were issued via the Council and CCG
- Press releases were issued via the STP, which included messages of the importance of the vaccine from GPs, pharmacies and the Shropshire and Telford & Wrekin Directors of Public Health
- The Shropshire Council website <https://shropshire.gov.uk/stay-safe-and-well-this-winter/advice-to-help-you-stay-well/> contains information and links to the public flu leaflets including different formats and languages, and is updated regularly

4.0 COVID-19 Updates

This section provides a brief update on COVID-19

4.1 During the 7-day period from 12th –18th February 2021 in Shropshire:

- 428 new cases reported
- This was a decrease of 64 (13%) cases compared to the previous week
- The seven-day infection rate for Shropshire was 132.5 cases of COVID-19 per 100,000 of the population.
- For the West Midlands it was 160.4 per 100,000
- For England it was 121.3 per 100,000
- 21% cases relate to people under the age of 30
- 13% cases relate to people aged 70+
- During the last week 35% of cases were in the Shrewsbury & Atcham area
- 40% were in north Shropshire
- 25% were in south Shropshire
- Outbreaks still continue within workplaces and care homes, these continue to be managed by the Health Protection Cell

4.2 Ongoing response to COVID:

- The local 'Step-Up Shropshire' campaign has been in force, with social media, press releases and interviews on local radio taking place covering vaccinations, testing, case rates and carers.
- The symptomatic and asymptomatic testing offer has been increased across the County to support rising cases and people who cannot work from home. This will now increase to support local businesses, school and the university.
- The local Health Protection Team with PHE West Midlands is responding to local outbreaks in settings such as schools, care homes and businesses, and provides support and guidance, contact tracing and advice to help prevent further outbreaks
- Regulatory Services continue to support advice, respond to complaints and enforce COVID secure workplaces. Please use the [Covid-19 business feedback form](#) to let us know about the Covid-secure measures in place in local businesses.
- The Community Response Team continues to work with the public and businesses
- The Council website is updated regularly <https://www.shropshire.gov.uk/coronavirus/> and includes; information for the public and businesses, resources, and sources of further support and information including mental health and wellbeing
- The COVID-19 helpline and bereavement support line: 0345 678 9028 continue to offer support and advice for Shropshire people

4.3 Testing

- 4.3.1 One in three people who have coronavirus never show any symptoms but that does not mean they are not infectious. Lateral flow (rapid) devices (LFDs) are one of the tools being used to help to detect and fight COVID-19. The tests can rapidly turn around results within an hour without the need for processing the swabs in a lab.
- 4.3.1 Frontline and key workers living Shropshire will be able to take rapid COVID-19 testing, as part of the Council's strategy to identify more positive cases, reduce the spread of infection and protect lives and livelihoods.

- 4.3.2 Although the country is still in lockdown, there will be people who can't work from home. Those individuals, who do not have symptoms, are encouraged to have Lateral Flow Rapid tests up to 2 times per week (or once every 4 days).
- 4.3.3 The test, which has already been rolled out to select groups including university students, social care staff and care home visitors, is for people who do not have symptoms.
- 4.3.4 We have significantly extended our capacity across the County:

Asymptomatic Testing is available at the following sites, and must be [booked in advance](#).

- **Lantern:** Meadow Farm Drive, Harlescott, Shrewsbury, SY1 4NG
Monday - Sunday from 8am - 8pm
- **HALO Craven Arms Community Centre**
Newington Way, Craven Arms, Shropshire, SY7 9PS
Sunday 9.00 – 3.00pm, Monday 11.30 – 7.30pm, Tuesday and Friday 8.00 – 4.00pm
- **Wem Stanier Hall,** Thomas Adams Sixth Form, Noble Street, Wem, Shropshire, SY4 5DT
Saturday 9.00 – 3.00pm, Monday 11.30 – 8.00pm, Wednesday and Thursday 8.00–4.00pm

Walk in testing with no prior appointment required is also available at:

- **Bridgnorth Community Centre,** Severn Street, Low Town, Bridgnorth, WV14 6BB
- **Shifnal Cricket Club,** Priorslee Road, Shifnal, TF11 8HD
- **The Victoria Centre,** Victoria Road, Oswestry SY11 2HT
- **Opening hours at the walk-in rapid testing sites are from 8am-5pm daily.**

A number of pharmacies across Shropshire will also provide testing allowing greater access to testing in some of our more rural areas of the county.

Shropshire pharmacies will be coming online from the 22nd February and can be booked online using <https://www.1centralhealth.co.uk/shropshirelft>

Sites are available at Cleobury Mortimer, Craven Arms, Ellesmere, Highley, Pontesbury and Oswestry.

4.4 COVID-19 vaccinations

- 4.4.1 The NHS COVID-19 vaccination process has started, with the first vaccination in the county having taken place on the 8 December 2020 with over 160,000 people now vaccinated across Shropshire, Telford and Wrekin between the 8th December 2020 and 24th February 2021.
- 4.4.2 The aim was in Shropshire to have invited for their first vaccination: every care home resident and everyone over 80 by the end of January, everyone over 70, anyone who is clinically extremely vulnerable and health and social care workers by mid-February, this was achieved. The rest of the priority groups are now being invited in order of cohorts. Unpaid Carers are being invited to book their appointments alongside over 60s. Those in cohort 6 who are at risk and have underlying health conditions (as defined in table 2 of the green book) are also being invited.
- 4.4.3 The second phase of vaccination programme will focus on the rest of the population, mainly the under-50s, who are much less likely to become seriously ill with COVID-19 by the middle of July.
- 4.4.4 Local Vaccination Centres are now open at Telford International Centre, Shrewsbury Indoor Bowls Club and Ludlow Racecourse, in addition to local GP sites and the Hospital Hubs at the Royal Shrewsbury, Robert Jones and Agnes Hunt Orthopaedic Hospital and the Princess Royal.

4.4.5 The public are being asked ‘please don’t contact the NHS to seek a vaccine, we will contact you.’ The priority for vaccination can be seen in the table below:

Table 1: Priority groups for vaccination, recommended by JCVI

Priority group	Risk group
1	Residents in a care home for older adults Staff working in care homes for older adults
2	All those 80 years of age and over Frontline Health and social care workers
3	All those 75 years of age and over
4	All those 70 years of age and over Clinically extremely vulnerable individuals (not including pregnant women and those aged under 16 years)
5	All those 65 years of age and over
6	Adults aged 16 to 65 years in an at-risk group (Appendix 4)
7	All those 60 years of age and over
8	All those 55 years of age and over
9	All those 50 years of age and over

5.0 Risk Assessment and Opportunities Appraisal

(NB This will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)

There are no Human Rights, Environmental Consequences, Community or Equality issues identified with the provision of these updates.

6.0 Financial Implications

There are no financial implications that need to be considered with this update

7.0 Additional Information

None

8.0 Conclusions

The will between all local providers to work closely together and increase uptake of the flu vaccination for eligible groups this year, is evidenced through the increase in uptake figures, and all involved should be commended for their efforts.

Covid-19 continues to be a changing and challenging situation for everyone, and work will continue in response to this including; the ‘Step up Shropshire’ campaign, testing availability, the response of the Health Protection Team and support for those who need it through the COVID helpline.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)
Cabinet Member (Portfolio Holder) Cllr. Dean Carroll Portfolio Holder for Adult Services, Climate Change, Health and Housing
Local Member
Appendices None

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