



Health and Wellbeing Board Meeting Date: 9th September 2021

Shropshire Joint Strategic Needs Assessment (JSNA)

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1. Summary

1.1 This paper presents to the Health and Wellbeing Board an update on Shropshire's JSNA; progress to date, future direction of the JSNA and revised timescales.

2. Recommendations

- 2.1 The Health and Wellbeing Board:
 - Note the update and work programme/timescales

REPORT

3.0 Background

- 3.1 The Local Government and Public Involvement in Health Act (2007) placed a duty on local authorities and PCTs (now CCGs) to undertake a JSNA in three-yearly cycles. Local authorities and CCGs have equal and joint duties to prepare JSNAs and Joint Health and Wellbeing Strategies, through the health and wellbeing board. In practice, in Shropshire, these duties have been passed to Public Health to deliver on behalf of the Health and Wellbeing Board. Leadership for the JSNA sits with the Director of Public Health 1.
- 3.2 The JSNA seeks to identify current and future health and wellbeing needs in the local population and identify strategic priorities to inform commissioning of services based on those needs. These priorities in turn inform the Health and Wellbeing Strategy, a key document as a basis for commissioning health and social care services in the local area. The JSNA aims to:
 - Define achievable improvements in health and wellbeing outcomes for the local community;
 - Target services and resources where there is most need;
 - Support health and local authority commissioners;
 - Deliver better health and wellbeing outcomes for the local community:
 - Underpin the choice of local outcomes and targets.
 - Importantly, the JSNA is not an end in it itself, rather a framework of tools that are produced to inform commissioning.

¹ Further guidance: <u>JSNA Toolkit</u>: a springboard for action and <u>Statutory guidance on Joint Strategic Needs</u> <u>Assessments and Joint Health and Wellbeing Strategies</u>

- 3.3 Shropshire's original JSNA was completed in 2008/09, a further review was published in 2009/10 and the most recent report was published in July 2012. These JSNA reports were structured in four key areas following a Marmot approach: Starting Well, Living Well, Aging Well and Vulnerable groups. Within those groups several priorities were identified and described following a review of local intelligence and stakeholder engagement. Subsequently, updates have been published on the Shropshire Together webpages, giving updated profiles and needs assessments for key themes http://www.shropshiretogether.org.uk/jsna/.
- 3.4 Changes to the health and social care landscape, the requirement to produce an updated Health and Wellbeing Strategy and emerging priorities meant in 2019 there was an urgent need to update the JSNA, deliver several theme-based needs assessments and consider a new approach to the JSNA moving forward.

4.0 Progress Update and Revised Timescales 2021/22

- 4.1 Due to the COVID-19 pandemic, resources were diverted to deal with the emerging issues and capacity pressures from February 2020. By March 2020 Public Health was operating in full business continuity mode with other service areas following in April 2020 resulting in the pausing of the JSNA place based work programme, however, mapping and monitoring of vulnerable communities and services has taken place to support the COVID-19 response.
- 4.2 An update on progress prior to COVID and the next steps is described below:
 - The Initial focus of addressing the resetting strategic priorities was complete in November 2019 to January 2020 and presented back to the HWBB.
 - The urgent MSK, Older People and SEND Health Needs Assessments were partially complete. The first two reports were finalised, and a structure agreed for the SEND report, however due to the pandemic further work was paused.
 - In December 2020 it was agreed to restart the SEND JSNA bringing in resources by commissioning an external provider to complete the needs assessment report and engagement and this resource was added in April 2021. The first draft was completed and circulated for stakeholder comment in August 2021. A final draft will be completed in September 2021 for approval by local SEND Strategic and Partnership groups with the intention of publication in October 2021.
 - The Pharmaceutical Needs Assessment (PNA) has been identified as a priority by the Health and Wellbeing Board. Despite the suspension of publishing requirements to October 2022 by DHSC, Shropshire Council have approached and agreed in principle to deliver the PNA as an STP in partnership with Telford and Wrekin Council. This will allow efficiency around the process of undertaking primary research and wider evidence gathering and analysis whilst still leading to the production of two distinct PNA products reflecting the specific needs of those populations.
 - Draft content and evidence resource plans have been created for the PNA deriving from a review of previous PNA products and discussion with Pharmaceutical Services Negotiating Committee (PSNC). This review was widened to incorporate further best practice examples subsequent to stakeholder discussion in August 2021.
 - An initial meeting with the preliminary PNA Stakeholder Board took place on 7th July.
 Project timelines were developed by Shropshire Council and were approved by the PNA

SB. A review of information sources and methodology has commenced for completion in November 2021.

- April 2021 onward The JSNA place-based programme has been restarted and planning initiated to put in place the new place-based approach, including web-based planning, agreement around wave 1 areas, preparation of surveys and report template production. This will run concurrent with the launch of wave 1 engagement by September 2021 with full delivery within 18 months to two years. The pace of the place JSNAs will depend on resource capacity; delivery of each need's assessment requires a small team. There are two key strands to the new JSNA:
- 1. The Place-Based Need Assessments (PBNA) Needs assessments covering the County's 18 Place Plan areas. The plan remains to divide the County into 3 waves of JSNAs. 3 Place Plan area have been identified as potential priority areas subject to stakeholder agreement based upon wider determinants, health needs, rurality and that in aggregate they cover a wider geography of the County.
- 2. The Web-Based JSNA In parallel will be the development of a new online profiling tool produced by Public Health in conjunction with the Business Intelligence team. This will enable users to profile a variety of different geographical areas with the priority focus being on traditional JSNA content, but also eventually incorporating wider measures allowing a more comprehensive viewing of the wider determinants of health and facilitating place-based approaches to be taken across the system. A proof of concept using Power BI, a ubiquitous and PHE endorsed business intelligence tool, is currently in progress.

Currently each Place-Based Needs Assessment will be broken down into logical navigable dashboards aligned with the expectations of a traditional JSNA;

- Local population demographic who lives there
- Households by type
- · Health indicators
- Social Care indicators users of Shropshire Council services
- Economic indicators local deprivation, employment etc
- Education achievements and inequality indicators
- Crime
- Environment

The dashboard would be implemented into the Shropshire Council public facing webpage similar to how existing reports have been such as the <u>Shropshire Snapshots</u> and forthcoming electoral ward information. Each data set would be accompanied by a narrative that updates depending on the place selected.

As well as quantitative data it is also under consideration how qualitative feedback will be captured and presented should we wish to include as part of this phase of the online dashboard development e.g. use of a word maps describing certain responses, specific embedded responses etc. estimated timescales for this are December 2021.

 Leadership will remain with the Director of Public Health while working closely with system partners in the CCG to align the Population Health Management Needs and the Associate Directors for Business Intelligence, Communities and Head of Partnerships to align to the data infrastructure and community engagement elements. Engagement and leadership from local members, the community and voluntary sector and key stakeholders are critical to the process and will be a key element of Governance Structures.

- This is a shared responsibility and joint programme of work and as such resources and support from across the system will be required to deliver the programme.
- Additional resources to support the role out of the programme have been brought in, including the new Head of Information and Insight and his Team within Shropshire Council and a new Joint population health post sitting within Public Health and the CCG.
- The Covid-19 pandemic and response to prevent and mitigate the harm that it can cause radically changed how society functions. Whilst much harm from Covid-19 has been prevented, it is important to develop a shared understanding of the impact of the events associated with the pandemic on inequalities, to support and sustain a recovery. Therefore, as part of the JSNA moving we will seek to incorporate the Health and Wellbeing Impacts of COVID-19 adding to the work already undertaken to consider those vulnerable and the social and economic impacts of COVID-19.
- The Infant Mortality report was completed in August 2021 giving an overview of comparative health outcomes and risk factors. Some of the key messages identified in the report were
 - The infant mortality rate (IMR) in Shropshire is 4.4 per 1000 live births which is similar to the IMR across England which currently stands at 3.9 per 1000.
 - The infant mortality rate in the West Midlands is consistently significantly higher than that of England.
 - Infant mortality in Shropshire declined between 2001 and 2015, however recent trends indicate a rise in IMR but is not significantly higher.
 - Key modifiable risk factors where Shropshire performs significantly worse than England include levels of smoking in pregnancy and maternal obesity.
 - Risk factors where Shropshire performed better than national averages include socio-economic deprivation, initiation of breastfeeding and other risk factors for SUDI.

Through the JSNA strategic group, key outcomes measures outlined in the HWB, including infant mortality trends will continue to be reviewed and the board will be altered to any changing patterns, action around smoking in pregnancy and obesity remain a HWB priority.

A practice and place-based review of Community Mental Health is underway in
partnership between MPFT and Shropshire Council. This will allow a population health
management approach to be undertaken combining evaluation of clinical PCN profiling to
be combined with measures of the wider determinants of mental ill health. A review of
risk factors and sources than can be aggregated to PCN level has been completed, and
data acquisition and analysis for an initial draft is expected to be completed by October
2021.

Key milestones

- September 2021 Final Draft of SEND JSNA. Development of proof of concept for Web-Based JSNA/Place-Based Profiling Tool with population data
- September 2021 Launch of first 3 Place-Based Needs Assessments, analysis and engagement running concurrently; first draft of PCN Community Mental Health Profiles
- November 2021 Initial Consultation for Pharmaceutical Needs Assessment (PNA) begins; source and methodology review completed
- December 2021 Web-based tool go live.
- January 2022 PNA Service Mapping
- March 2022 First draft of PNA

- May 2022 Formal Consultation on final draft PNA (90 days statutory period)
- July 2022 Redraft and submission of PNA to HWBB for final approval.
- Summer 2023 Full transition to Place-Based and Web-Based JSNA products.

 *subject to change in agreement with HWB

5.0 Interlinkages to other programmes of work

- 1. Population Health Management
- 2. Transforming Insight Function
- 3. Health and Wellbeing Board
- 4. Business Intelligence Function Shropshire Council
- 5. Community and Rural Strategy

6.0 Risk Assessment and Opportunities Appraisal

- 6.1 It is proposed that a single, coordinated approach is taken to the development of placebased 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.
- 6.2 Therefore, this paper seeks agreement to the approach and the sets out the anticipated direction of travel for the development of a coordinated evidence base for the whole system, delivered under the JSNA umbrella.

7.0 Financial Implications

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)

Cabinet Member (Portfolio Holder)

Cllr. Dean Carroll, Cabinet Portfolio Holder - Adult Social Care, Public Health and Assets

Cllr. Kirstie Hurst-Knight, Cabinet Portfolio Holder - Children and Education