

HEALTH AND WELLBEING BOARD

16 January 2018

Title:	Joint Strategic Needs Assessment (JSNA) 2017		
Report of the Corporate Director of Adult & Community Services			
Open Report	For Decision		
Wards Affected: All	Key Decision:		
Report Authors:	Contact Details:		
Mark Tyrie, Senior Intelligence and Analysis Officer	0208 227 3914		
Hollie Stone, Intelligence and Analysis Officer	0208 227 5734		
Rosanna Fforde, Intelligence and Analysis Office	0208 227 2394		
Sponsor:			
Matthew Cole, Director of Public Health			
Summary:			
<p>Residents of Barking and Dagenham continue to face significant health challenges. There are high rates of smoking, inactivity and overweight and obesity, while life expectancies for both men and women are the lowest in London. Our population is anticipated to continue to grow and we need to ensure we can meet the increased demand for services. However, there are also opportunities, notably with the transformation of council and NHS services and the anticipated regeneration and growth within the borough.</p> <p>This report provides a high-level overview of key health issues affecting residents at each life course stage, together with demographic information and a consideration of the needs of vulnerable groups.</p> <p>This paper aims to:</p> <ul style="list-style-type: none">– Allow the Health and Wellbeing Board to discharge its duties in relation to the Joint Strategic Needs Assessment (JSNA);– present updated demographic and health data in the context of key strategies and priorities for the borough;– seek the approval of the Health and Wellbeing Board for a review of the JSNA process, content and format for 2018.			
Recommendation(s):			
The Health and Wellbeing Board is recommended:			
(i) To take account of the findings of the JSNA in the development of its strategies and in its appraisal of strategies developed by partner organisations			
(ii) To support the commissioning of services by partner organisations that align with the JSNA findings and the Joint Health and Wellbeing Strategy			
(iii) To support the review of the JSNA process, content and format in 2018.			
Reason(s):			
The JSNA provides the evidence base on which strategic decisions of the Health and			

Wellbeing Board are made. It directly informs the development of the Joint Health and Wellbeing Strategy. The Health and Wellbeing Board has a statutory responsibility for the JSNA and the Council and the NHS Barking and Dagenham Clinical Commissioning Group have an equal and joint duty to prepare it.

1 Introduction

The purpose of this paper

1.1 This paper aims:

- to assure the Health and Wellbeing Board that it continues to discharge its duties in relation to the Joint Strategic Needs Assessment (JSNA)
- to summarise key health issues for each life course stage using the most up-to-date data available and to present this in the context of key strategies and priorities for the borough
- to seek the agreement of the Health and Wellbeing Board that the JSNA process, content and format should be reviewed for 2018.

Statutory background and role of JSNAs

1.2 Local authorities and Clinical Commissioning Groups (CCGs) have a joint and equal statutory responsibility to produce a JSNA via the Health and Wellbeing Board.¹

1.3 This duty was established by the Local Government and Public Involvement in Health Act 2007 for local authorities and primary care trusts, and subsequently amended by the Health and Social Care Act 2012 to reflect the creation of CCGs and Health and Wellbeing Boards.

1.4 The aim of a JSNA (see Box 1) is to provide timely, relevant information on the needs of the population to inform key strategies (most notably, the Joint Health and Wellbeing Strategy) and commissioning decisions. Its ultimate purpose in doing so is to improve the population's health and reduce health inequalities.

1.5 Although the function of a JSNA is described in the statutory guidance, the process, content and structure are not specified, recognising the need for flexibility according to the local situation. Suggested content includes demography, needs at different life course stages, the needs of vulnerable groups, wider determinants of health, and the health information needs of the community.

1.6 Similarly, the timing of updates is to be locally determined, although the JSNA must always fulfil its function as an evidence base for decision making.²

Box 1: Purpose of JSNAs

'The purpose of JSNAs and JHWSs [Joint Health and Wellbeing Strategies] is to improve the health and wellbeing of the local community and reduce inequalities for all ages. They are not an end in themselves, but a continuous process of strategic assessment and planning – the core aim is to develop local evidence-based priorities for commissioning which will improve the public's health and reduce inequalities.' Source: DH, 2013

¹ Department of Health. *JSNAs and JHWS statutory guidance*. London: DH; 2013 [<https://www.gov.uk/government/publications/jsnas-and-jhws-statutory-guidance>].

² 'Health and wellbeing boards will need to decide for themselves when to update or refresh JSNAs and JHWSs or undertake a fresh process to ensure that they are able to inform local commissioning plans over time. They do not need to be undertaken from scratch every year; however, boards will need to assure themselves that their evidence-based priorities are up to date to inform the relevant local commissioning plans.' (p.10) Department of Health. *JSNAs and JHWS statutory guidance*. London: DH; 2013.

Our approach to the JSNA in 2017

- 1.7 In recent years, a suite of more than 90 chapters has been updated and published on the [London Borough of Barking and Dagenham \(LBBD\) website](#). While detailed, extensive in scope and developed in collaboration with numerous partners, finding information from among these chapters is not always easy, and they also require considerable staff time to update. This year, a more limited update has been carried out, while we consider the optimal approach for 2018.
- 1.8 This 2017 JSNA is therefore a revision of the summary report that was presented to the Health and Wellbeing Board last year. It provides a high-level overview of key health issues affecting children, young people and adults at each life course stage, together with demographic information and a consideration of the needs of vulnerable groups.

The 2018 JSNA

- 1.9 Following submission of this report to the Health and Wellbeing Board, work will begin in developing a new JSNA process for 2018.
- 1.10 The 2018 JSNA will coincide with the need to revise the Joint Health and Wellbeing Strategy and hence is a timely opportunity to consider how the utility, effectiveness and accessibility of the JSNA can be maximised.
- 1.11 It also reflects broader changes; 2017 has been a year of transformation for the Council as it has responded to straitened financial circumstances and the need for change to harness growth opportunities (see section 2.2). This has included changes for staff working directly on the JSNA; the Public Health Intelligence team is now part of a Performance and Intelligence Unit working across public health, adults' and children's social care, and community safety. In this environment, where new ways of working are being developed, the time is right to reconsider the most suitable format, content and process for the JSNA.

The structure of this paper

- 1.12 This paper begins by summarising the demographic features of Barking and Dagenham, including its population size and structure, trends and projections for growth, ethnicity, socio-demographic issues and deprivation.
- 1.13 It then considers two overarching indicators: life expectancy and healthy life expectancy. These summarise the health, both in terms of both morbidity and mortality, of our population.
- 1.14 The third and largest section treats each life course stage in turn, from pre-birth and early years to older adulthood. Data on key health issues for each group are presented and placed in the context of strategies and priorities for Barking and Dagenham. This section also incorporates the needs of vulnerable groups, such as looked after children, within these life course stages.