

HEALTH & WELLBEING BOARD

JANUARY 23 2013

PROGRESS REPORT HEALTH & WELLBEING STRATEGY AND JOINT STRATEGIC NEEDS ASSESSMENT

REPORT OF DELIVERY & PLANNING MANAGER AND PUBLIC HEALTH SPECIALIST

Purpose

To report progress in the development of the Health & Wellbeing Strategy and the Joint Strategic Needs Assessment

Recommendations

That the Board:

- **Agree the process to allocate Board Sponsors to Health & Wellbeing Priorities**
- **Consider the proposal to adopt 'Ensure people have a positive experience of health and care services' as a cross-cutting principle rather than a priority**
- **Consider the proposal to create separate priorities for smoking and for drugs and alcohol misuse.**
- **Consider the proposal to develop an annual Making it Happen focus for the Board**

Developing Our Health & Wellbeing Strategy and Joint Strategic Need Assessment

The development of our strategy and JSNA have been underpinned by reference to relevant national guidance and reviews of best practice since the outset. This review has continued in the light of the publication of the national Operating Principles for JSNA and JHWS in November 2012¹. These new guidelines, which confirm our robust approach to both JSNA and JHWS outline:

Three overarching themes –

- Engagement
- Ownership
- Leadership

Six operating principles -

- Review and learn from previous JSNA and JHWS
- Agree the vision and scope
- Build a comprehensive picture of needs and assets
- Enable stakeholder involvement throughout
- Identification of strategic priorities
- Making it happen

¹ <http://www.nhsconfed.org/Publications/reports/Pages/OperatingPrinciplesJointStrategicNeedsAssessmentsandJointHealthandWellbeingStrategies.aspx>

Key points for JSNAs and JHWSs from the national operating principles include the following:

JSNA and JHWS:

Are not ends in themselves, but a means to identify the priorities for commissioning to improve health and wellbeing outcomes and reduce health inequalities.
Need to be strategic and take account of the needs of the entire population within the area.

They should be owned jointly by all members of health and wellbeing boards. Should involve ongoing dialogue with communities, to ensure their needs, assets and experiences are understood, and that priorities reflect what matters most to them. Real gains can be made if health and wellbeing boards look beyond needs to examine how local assets can be used to meet identified needs.

Are key to understanding inequalities and the factors that influence them, such as poor housing, environmental quality, worklessness, substance misuse or crime. Are not just about services, but are about understanding the determinants of health and wellbeing, and will be aided by wider partnerships.

Health and wellbeing boards will need to consider their organisation's equality duties. Equal attention should be given to physical and mental health and wellbeing.

JHWSs should prioritise the issues requiring the greatest attention and where the greatest impact can be made within available resources of health and wellbeing board members and wider stakeholders.

During 2012/13 the processes in Telford and Wrekin for JSNA and JHWS development have focussed particularly on two of the national operating principles: enabling stakeholder involvement and identification of strategic priorities.

The case studies of best practice highlighted in the national operating principles have been reviewed in the context of development of our local processes. There are numerous examples where best practice has been adopted in Telford and Wrekin, including:

- Establishment of the JSNA website
- Development of an assets-based approach for our priorities
- Publication of mental health and wellbeing assessment (for the Healthy Hub at First Point)
- Development of ward profiles and GP-practice profiles
- Extensive engagement and consultation process undertaken with key stakeholders and the public

In 2013/14 the national best practice examples will be used further to develop both the JSNA and the strategy further. The key areas for Telford and Wrekin JSNA and JHWS development in 2013/14 are being considered as follows: (based on best practice examples and case studies)

- Annual update of products and outputs, including succinct summary of key messages which turns data into intelligence to shape strategic priorities and commissioning intentions
- Engaging the wider community in the development of the JSNA, to ensure communities have a voice in agreeing the priorities
- Development of a continuous process so that, as data is released throughout the year, the JSNA is updated and interested stakeholders are notified on an on-going basis
- Review and refresh of the JSNA website, including mapping the data set to the Marmot life course framework to embed health inequalities

- Reference to the evidence of effectiveness and efficiency of interventions, such as NICE standards and guidelines, providing the most up-to-date evidence on what works to improve the public's health, including research and good practice, as well as services, information and advice responsive to local need (part of the asset mapping approach)
- Further use of mental wellbeing impact assessment (MWIA) enabling people and organisations to assess and improve a policy, programme, service or project to ensure it has a maximum equitable impact on people's mental wellbeing
- Engaging stakeholders and the community in prioritisation and investment decisions

Health & Wellbeing Strategy

The draft Health & Wellbeing Strategy identifies a set of priorities which the Board will focus on overseeing the delivery of. The priorities and their allocated lead officer(s) are:

- **Reduce excess weight in children & adults** – Clare Harland
- **Improve life expectancy and reduce health inequalities** – Helen Onions/Louise Mills
- **Reduce teenage pregnancy** – Chris Marsh
- **Improve emotional health and wellbeing** – Michael Bennett
- **Support people with autism** – Richard Smith
- **Reduce number of people who smoke and misuse alcohol and drugs** – Vicky Pike/Michael Bennett
- **Support people to live independently** – Karen Kalinowski
- **Support people with dementia** – Kim Grosvenor
- **Ensure people have a positive experience of health and care services** – Karen Kalinowski/Chris Morris
- **Improve children and adult carer's health and wellbeing** – Chris Harrison

In December, Priority Leads met to commence 'asset map' each priority to understand how they are currently being delivered. All of the priorities are pre-existing as they are established goals to improving the health and wellbeing of the Borough's population and have established strategies or are part of delivery processes - although some are currently being refreshed.

The asset mapping process identified two issues for which the Board's views are sought:

- **That 'ensure people have a positive experience of health and care services' should be considered as a cross-cutting principle rather than a Priority.** Leads felt that this priority was in fact an essential element in the design and of **all services** and should be considered as part of Commissioning assurance processes. Adoption of this proposal would mean that all commissioners would have to demonstrate how they are assessing and improving service users' perception and experience of services.
- **For the Board to identify two or three themes on an annual basis to provide critical challenge and take forward and support the development of new models of delivery.** Whilst the Board's performance framework will provide regular updates on delivery of priorities, the establishment of the Clinical Commissioning Group and the Health & Wellbeing Board offers an exciting opportunity to develop new, more efficient and effective approaches to delivery. To achieve this, it is proposed that each year as part of the annual refresh of the Health & Wellbeing

Strategy, the Board should identify a maximum of three 'Making it Happen' themes, which may include:

- Tackling financial pressures e.g. through pooled budgets to address shared cost pressures
- Targeted action on specific inter-related issues – for example more effectively joining together work on different priorities to improve outcomes.

The forthcoming stakeholder engagement event 30 January, is an opportunity to explore what these 'Making It Happen' themes could be for the 2013/14 Health & Wellbeing Strategy. It is proposed that the Board will identify these themes as part of the sign-off of the Strategy in March.

Priority Sponsors

It is proposed that each of the agreed Priorities should have a Board Member as a sponsor. Their role would be:

- To act as a Board champion for the priority
- To support in a mentoring and advisory capacity the priority lead officer, meeting up on at least a quarterly basis, but also being available more reactively as issues demand
- To QA and sign-off priority assurance reports produced by the officer lead before presentation to the HWB, CYF and CCG Boards
- The Board Sponsor will not discharge a line manager role for the officer lead (unless already acting in that capacity). Any performance issues will be dealt with by respective line managers, having been raised by the Board Sponsor

On-going Development of Joint Strategic Needs Assessment

Our focus in taking the JSNA forward is to refresh the governance model for the JSNA. It is proposed that a JSNA Steering Group will meet in February to commence the process to agree a work programme to April 2014 – this will focus on ensuring our resources are targeted at developing our understanding of our most important issues and challenges. This programme will be developed in consultation with the Health & Wellbeing Board Advisory Group and the CCG Performance, Planning & Quality Committee. Once established, this programme will be presented to the Health & Wellbeing Board.

The second key area of development for the JSNA, is to work to engage with the voluntary and community sector. Many of these organisations, can bring an important view of 'need' in the community. It is important that these views are heard and more effectively fed into our JSNA.