

Report of the Director of Public Health to the meeting of the Shadow Health and Wellbeing Board to be held on 17 January 2012

Subject:

Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy

Summary statement:

The Department of Health has mandated the production of Joint Health and Wellbeing Strategies to complement and sit alongside Joint Strategic Needs Assessments at local level. The purpose of this is to underpin commissioning plans for 2013-14 and to give all local partners a set of jointly agreed priorities to work on together in the new health and social care system. The Joint Health and Wellbeing Strategy should support Shadow Health and Wellbeing Board members in making the step from the Joint Strategic Needs Assessment focus on assessing needs and available assets, to planning the delivery of integrated local services based upon those needs and assets, and collectively addressing the underlying determinants of health and wellbeing. Refreshing the Joint Strategic Needs Assessment and developing the Joint Health and Wellbeing Strategy over the coming year will provide local partners in Bradford and Airedale, including Clinical Commissioning Groups, with a jointly-agreed and locally determined set of priorities on which to base commissioning plans within the transforming health and social care system going forward.

An accompanying paper sets out the issues and local context, and includes a summary framework and timescales for the production of the Bradford and Airedale Joint Health and Wellbeing Strategy

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**Overview & Scrutiny Area: Health/
Social Care**

1. SUMMARY

- 1.1. The Department of Health has mandated the production of Joint Health and Wellbeing Strategies (JHWBSs) to complement and sit alongside Joint Strategic Needs Assessments (JSNAs) at local level.
- 1.2. The purpose of this is to underpin commissioning plans for 2013-14 and to give all local partners a set of jointly agreed priorities to work on together in the new health and social care system.
- 1.3. The JHWBS should support Shadow Health and Wellbeing Board (HWBB) members in making the step from the Joint Strategic Needs Assessment (JSNA) focus on assessing needs and available assets, to planning the delivery of integrated local services based upon those needs and assets, and collectively addressing the underlying determinants of health and wellbeing.
- 1.4. Planning has begun locally to develop a Bradford and Airedale JHWBS and a proposed timescale and framework for the JHWBS is attached

2. BACKGROUND

- 2.1. Liberating the NHS – Legislative Framework and Next Steps; Healthy Lives, Healthy People and Capable Communities and Active Citizens set out the government's ambition for an enhanced role for Joint Strategic Needs Assessments (JSNAs).
- 2.2. A particular focus is the addition of a Joint Health and Wellbeing Strategy (JHWBS) to support Health and Wellbeing Board (HWBB) members in translating the findings and recommendations of their local JSNA into the strategic planning of the delivery of integrated local services based upon those findings, and collectively addressing the underlying determinants of health and wellbeing.
- 2.3. This strengthened role of JSNAs and JHWBSs is designed to enable Local Councillors, GPs and Directors of Public Health, Adult and Children's services to sit at the heart of local commissioning decisions, underpinning improved health, social care and public health outcomes for the whole community. As such, they are a key to the success of HWBBs in the future local health and care system.
- 2.4. Although new statutory duties will not take effect until April 2013, activity in the next year of transition will be crucial to position the HWBB and its accompanying JSNA and HWBB to rapidly implement the legislation underpinning future models for health and social care.
- 2.5. Once HWBBs are established on a statutory footing in April 2013, they will take over the statutory responsibility for undertaking the JSNA and JHWBS. From this point, HWBBs will continue the ongoing process of refreshing the JSNA and developing the JHWBS ready to feed into the commissioning cycle for 2014-15 and beyond.

3. OVERVIEW AND SCRUTINY COMMITTEE CONSIDERATION

3.1. Both Health and Social Care Overview and Scrutiny Committees have received presentations on the details of the NHS White Paper and the Public Health White Paper and its associated documents.

4. OTHER CONSIDERATIONS

4.1. Bradford and Airedale was an early implementer of HWBBs and a Bradford and Shadow HWBB has been in operation since October 2011, meeting on a bimonthly basis.

4.2. The Bradford and Airedale JSNA is now in its third iteration and sits alongside a wide range of topic-specific needs assessment also in place across both the NHS and Local Authority.

4.3. Discussions are ongoing regarding the future development of the JSNA locally, and it is anticipated that there will be notable changes in approach as the local health and social care architecture changes over coming years.

4.4. To support work on JSNAs and JHWBSs, the Government will be producing new guidance on JSNAs. This guidance It will describe the principles of the JSNA and JHWBS, not specifying form or detailed content, as health and wellbeing boards will determine this locally. The statutory guidance will be available in draft form in January 2012

5. OPTIONS

5.1. Approve the indicative timeline and draft framework for a Bradford and Airedale JHWBS

5.2. Approve the indicative timeline and draft framework for a Bradford and Airedale JHWBS with amendments

5.3. Request a new approach and framework for a Bradford and Airedale JHWBS

5. OTHER IMPLICATIONS

5.1 SUSTAINABILITY IMPLICATIONS

The role of Public Health in contributing to sustainability strategies and workstreams will be considered as part of the work to ensure that Public Health functions and services maintain their capability and quality through the transition process and beyond as new structures are established

6. NOT FOR PUBLICATION DOCUMENTS

None

7. RECOMMENDATIONS

11.1 That the Shadow HWBB approve the indicative timeline and draft framework for a Bradford and Airedale JHWBS

8. APPENDICES

Proposal for the Development of a Joint Health and Wellbeing Strategy for Bradford and Airedale

9. BACKGROUND DOCUMENTS

DoH: Joint Strategic Needs Assessment (JSNA) and joint health and wellbeing strategies explained. December 2011

Proposal for the Development of a Joint Health and Wellbeing Strategy for Bradford and Airedale

Dr Anita Sims
Joint Director of Public Health
January 2012

Background

Liberating the NHS – Legislative Framework and Next Steps; Healthy Lives, Healthy People and Capable Communities and Active Citizens set out the government's ambition for an enhanced role for Joint Strategic Needs Assessments (JSNAs).

A particular focus is the addition of a Joint Health and Wellbeing Strategy (JHWBS) to support Health and Wellbeing Board (HWBB) members in translating the findings and recommendations of their local JSNA into the strategic planning of the delivery of integrated local services based upon those findings, and collectively addressing the underlying determinants of health and wellbeing.

This strengthened role of JSNAs and JHWBSs is designed to enable Local Councillors, GPs and Directors of Public Health, Adult and Children's services to sit at the heart of local commissioning decisions, underpinning improved health, social care and public health outcomes for the whole community. As such, they are a key to the success of HWBBs in the future local health and care system.

Although new statutory duties will not take effect until April 2013, activity in the next year of transition will be crucial to position the HWBB and its accompanying JSNA and HWBB to rapidly implement the legislation underpinning future models for health and social care.

Once HWBBs are established on a statutory footing in April 2013, they will take over the statutory responsibility for undertaking the JSNA and JHWBS. From this point, HWBBs will continue the ongoing process of refreshing the JSNA and developing the JHWBS ready to feed into the commissioning cycle for 2014-15 and beyond.

Purpose

The key impact of the addition of a JHWBS to the JSNA is not only to underpin commissioning plans for 2013-14, but also to give all local partners a set of jointly agreed priorities to work on together in the new health and social care system. The combination of the JSNA, JHWBS and aligned commissioning plans has the potential to be truly transformational in improving health, care and wider services for people in our communities.

The JHWBS is intended to inform commissioning decisions across local services such that they are focussed on the needs of service users and communities, and tackle the factors that impact upon health and wellbeing across service boundaries. The JHWBS can also be used to influence the commissioning of local services beyond health and social care to enhance the impact upon the wider determinants of health.

The JHWBS must drive the collective actions of the NHS and local government, both commissioners and providers, and engage communities in the improvement of their own health and wellbeing. Local authorities, CCGs and the NHS Commissioning Board will need to have regard to local JSNAs and JHWBSs as they draw up their commissioning plans so that their plans are fully aligned with their jointly agreed priorities.

Relationship with Joint Strategic Needs Assessment

JSNAs will be the means by which local leaders work together to understand and agree the needs of all local people, with the JHWBS setting the priorities for collective action. Taken together they will be the pillars of local decision-making, focussing leaders on the priorities for action and providing the evidence base for decisions about local services.

Based on the JSNA, the members of the Shadow HWBB will then develop the JHWBS for Bradford and Airedale. The JHWBS should support Shadow HWBB members to health and wellbeing board members to take the important step from the JSNA focus on assessing needs and available assets, to planning the delivery of integrated local services based upon those needs and assets, and collectively addressing the underlying determinants of health and wellbeing.

Refreshing the JSNA and developing the JHWBS over the coming year will provide local partners in Bradford and Airedale, including Clinical Commissioning Groups (CCGs), with a jointly-agreed and locally determined set of priorities on which to base commissioning plans within the transforming health and social care system going forward.

By agreeing a set of local priorities now, the Bradford and Airedale Shadow HWBB can influence local commissioning plans for the future and begin to create local services shaped around the local individuals who use them.

Bradford and Airedale Context

Bradford and Airedale was an early implementer of HWBBs and a Bradford and Shadow HWBB has been in operation since October 2011, meeting on a bimonthly basis. Topics addressed so far include the JSNA, Public Health Transition and local commissioning policies.

This places Bradford and Airedale in a strong position to follow best practice guidance from the Department of Health with Shadow HWBBs being required from April 2012 and statutory HWBBs from April 2013.

The Bradford and Airedale JSNA is now in its third iteration and has successfully maintained a live approach to updating and dissemination, mainly through the Bradford Public Health Observatory. There are a wide range of topic-specific needs assessment also in place across both the NHS and Local Authority.

Discussions are ongoing regarding the future development of the JSNA locally, and it is anticipated that there will be notable changes in approach as the local health and social care architecture changes over coming years.

To support work on JSNAs and JHWBSs, the Government will be producing new guidance on JSNAs. This guidance It will describe the principles of the JSNA and JHWBS, not specifying form or detailed content, as health and wellbeing boards will determine this locally. The statutory guidance will be available in draft form in January 2012, but will not be formally published until after the Health and Social Care Bill has gained Royal Assent. This guidance will be applied locally as appropriate and with the direction of the Shadow HWBB

Process and Timescales

Four key stages in the development of a JHWBS for Bradford and Airedale have been identified

1. Outline agreement from Shadow HWBB
2. Collection, collation and presentation of evidence underpinning our knowledge of health and social inequalities in Bradford and Airedale; to include:
 - a. Joint Strategic Needs Assessment
 - b. Focussed Needs Assessments, e.g. Alcohol, Obesity
 - c. Key policy documents, local, regional, national
 - d. Published research evidence
 - e. Locally held intelligence across all partners
3. Consultation
4. Development of final strategy alongside agreement of commissioning plans and priorities

The Department of Health has published indicative timings for the development of JSNAs and JHWBSs through to April 2013 (below). These will be used as an indicative local timetable.

	Dec 11	Jan 12	April 12	May 12	July 12	Oct 12	Feb 13	Mar 13	April 13
Health and wellbeing board		Continuous engagement with stakeholders, users and the public	Non-statutory operation						Full statutory responsibility
JSNA	Draft guidance available	JSNA refresh begins or already underway							
Joint health and wellbeing strategy	Draft guidance available		Priorities from JSNA needed to inform strategy	Strategy to be developed to feed into commissioning plans					
Clinical commissioning group			Non-statutory operation		Start of authorisation submissions	Authorisation process begins	Commissioning plans to be agreed		Full statutory responsibility Implement agreed commissioning plans
Local Authority planning cycle			Data collection and analysis		Reviewing priorities	Financial planning		Business plan finalised and published	
NHS Commissioning Board	Operating as an SpHA focused on business preparation (from October 2011)		Established as an Executive Non-Departmental Public Body with limited statutory responsibility			Partial running as Executive Non-Departmental Public Body			Fully operational with full statutory responsibility

Framework for a Joint Health and WellBeing Strategy for Bradford and Airedale

The following outline framework for the structure and content of the JHWBS for Bradford and Airedale has been constructed locally for consideration by members of the Shadow HWBB:

Title

“Good Health and Well Being, Strategy to Reduce Health Inequalities, 2012 – 2017”

Introduction

- Local context, Sustainable Community Strategy, JSNA, Shadow HWBB
- Broader national context - changes to commissioning and provision of services over forthcoming years
- Public Sector Resources
- Access to health care and social care, how access affects inequalities
- Inequalities strategy priorities- process to identify evidence and priorities that offer the greatest opportunity to increase life expectancy, narrow the gap in inequalities and promote more active lifestyles

Section 1: The policy context

- The NHS White Paper *Liberating the NHS*
- The Public Health White Paper *Healthy Lives, Healthy People*
- Public Health Outcomes Framework
- NHS Outcomes Framework
- Social Care Outcomes Framework

Section 2: Why inequalities matter

- What are health inequalities?
- What are social inequalities?
- How do they interact?
- What causes inequalities?
- Commissioning for reduction in inequalities
- The cost of inequalities, financial and broader
- Factors affecting inequalities
- What shapes our health and wellbeing?

- Deprivation
- Life chances
- Marmot Review
- Life Expectancy
- Infant mortality
- The 'big killers' – Smoking, Obesity, Alcohol
- Mental Health
- Health and employment
- Emergency admissions
- Hip and Knee replacements linked to deprivation
- Ethnicity & Equality Act 2010
- Summary

Section 3: Give every child the best start in life

- Introduction
- Children and their families living in poverty
- Best Start in Life (2011)
- Unintentional injuries in Childhood
- Road Casualties
- Breast feeding
- Weaning
- Maternal mental health
- Infant Mortality
- Obesity and Pregnancy
- Reducing smoking in pregnancy
- Children in care and leaving care
- Alcohol and Young People

Section 4: Enable all children, young people and adults to maximise their capabilities and have control over their lives

- Introduction
- Children, young people and adults at greater risk of ill health Reducing Teenage Pregnancy
- Sexual Health
- Dentistry

- Services and Ex Services personnel
- Domestic abuse
- Learning Disabilities
- Gypsy and Travelers
- Health Trainers
- Migrant Workers
- Changing Lives – Big Society

Section 5: Growing old in Bradford and Airedale

- Key health issues
- Key social care issues
- Demographic changes
- Dementia
- Alcohol
- Quality of Life

Section 6: Create fair employment and good work for all

- Local and national strategic approaches
- Early intervention pilots
- Healthy Workplaces
- Mental health
- Alcohol and substance abuse

Section 7: Ensure a healthy standard of living for all

- Economic downturn and changes
- The recession in Bradford and Airedale
- Debt and Financial Inclusion
- Volunteering
- Accessing Health Care and Well Being Information
- Innovative Access - Telehealth

Section 8: Create and develop healthy and sustainable places and communities

- Sustainable development and inequalities
- Housing
- Housing Strategy
- The built environment
- Reducing Seasonal Winter Deaths

- Falls Prevention
- Health and Safety
- Homelessness

Section 9: Strengthen the role and impact of ill-health prevention

- Prevention and Early Intervention through Partnership
- Barriers to change
- Activity
- Obesity and healthy weight:
- Healthy Schools
- Helping People to Stop Smoking
- Coronary Heart Disease
- Strokes
- Alcohol and Drugs
- Screening
- Immunisation

Section 10: Inequalities Delivery Plan 2012 – 2015

This will be developed around the framework as the strategy develops alongside local commissioning plans and the JSNA refresh