

Health and Wellbeing Board

7 September 2016

Report of the Chair of the Joint Strategic Needs Assessment/Joint Health and Wellbeing Strategy Steering Group

Update on the work of the Joint Strategic Needs Assessment/Joint Health and Wellbeing Strategy Steering Group

Summary

1. This report provides the Board with an update on the work that has been undertaken by the Joint Strategic Needs Assessment/Joint Health and Wellbeing Strategy Steering Group ('the Steering Group') since it was first established in late 2015.
2. The Board are asked to note the update and agree the recommendations at paragraph 36 of this report.

Background

3. Under the Health and Social Care Act 2012, all Health and Wellbeing Boards are under a duty to prepare a Joint Strategic Needs Assessment and from this a Joint Health and Wellbeing Strategy.
4. Under their Terms of Reference the Steering Group is responsible for developing the Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy (JHWBS). The Steering Group are also responsible for assuring the Health and Wellbeing Board that the JHWBS is being implemented and delivering improvements in the health and wellbeing of the residents of York.
5. The Steering Group is accountable for the management of the JHWBS and JSNA process ensuring that both these products meet the needs of the Health and Wellbeing Board and that its use is embedded in strategic commissioning for health and social care.
6. By the time of this Health and Wellbeing Board meeting the Steering Group will have met on six occasions since they were first established.

The work of the group is now gathering pace and one of the next tasks for them will be to develop a work programme for the next 12 to 18 months.

Main/Key Issues to be Considered

The Joint Strategic Needs Assessment (JSNA)

7. The current York [JSNA](#) is a web based document that contains a wealth of information covering a wide range of health and wellbeing areas. Discussion about the JSNA takes place at every Steering Group meeting.
8. Tool kits - in the earlier meetings a number of tools were agreed including, to assist with undertaking topic specific needs assessments:
 - A JSNA prioritisation tool; a set of key criteria that are considered when deciding whether a topic specific needs assessment should go ahead
 - A JSNA process map which enables the Steering Group to keep ongoing topic specific needs assessments on track and ensure they follow the same stages of the process during production
9. The tools are reviewed on a regular basis to ensure they are responsive to the Steering Group's needs.

Topic specific needs assessments

10. The Steering Group have recently signed off the following two needs assessments as complete:

Learning Disabilities

11. The full version of the Learning Disabilities Needs Assessment is at **Annex A** to this report and an easy read version is currently being produced. The full needs assessment is a comprehensive document that focuses on adults with a learning disability. Any future needs assessment required will aim to cover all age groups.
12. Adults with learning disabilities are one of the most vulnerable groups in society, experiencing health inequalities, social exclusion and stigmatisation. In general, adults with learning disabilities have greater and more complex health needs than the general population, and often these needs are not identified or treated.

A number of national reports have highlighted that adults with learning disabilities often experience barriers to accessing healthcare services, and receive poor levels of care. Studies have highlighted that adults with learning disabilities are more likely to die from a preventable cause than the general population. Patterns of health needs amongst adults with a learning disability are different to the general population, and therefore current programmes that target health inequalities may exclude this population group.

13. There are an estimated 3,980 adults with learning disabilities resident in York, of this estimate 835 have moderate/severe learning disabilities, 199 have profound multiple learning disabilities, and 59 have behaviours which challenge.
14. The needs assessment sets out a number of recommendations as follows:
 - Improve the quality of primary care learning disability registers, including improving the recording of adults with mild learning disabilities on practice registers.
 - Ensure NHS Vale of York Clinical Commissioning Group (CCG) works towards developing York specific Health information.
 - Ensure Health and Social Services work with adults who use services, their families and carers, in a way which looks at people's strengths and the capacity of the community.
 - Ensure there is sufficient capability in the market to achieve the desired service models and outcomes in the community.
 - Work with mainstream services and the community to ensure they are as inclusive as possible.
 - Work with adults with a learning disability to understand their particular needs and experiences within the Health and Social Care system.
 - Consult and engage with adults with a learning disability who use services to make sure that provider organisations are consistently delivering high-quality services and continued access to the community.
 - Work with adults with a learning disability who are living longer into old age to better understand their needs.

- Scope information available with regards to individuals with a learning disability who are not known to the Local Authority. Assess robustness of information and any interventions which may assist in their continued independence from statutory services and inclusion in their community.

Further work to build on this needs assessment

- Assessment of primary care data to further understand the health needs of adults with learning disabilities in York, in particular in relation to lifestyle issues and prevalence of chronic diseases.
 - Continue to assess the needs of adults with behaviours that may challenge and autism.
 - Undertake an assessment of the level of demand for specialist services to ensure that provision is at required level.
15. It is suggested that implementing these recommendations and providing progress reports to the Steering Group is led by the Mental Health and Learning Disabilities Partnership Board and that Health and Wellbeing Board are advised to formally instruct them to produce a plan to fulfil this.

Self Harm

16. The summary version of the Self Harm Needs Assessment is at **Annex B** to this report, with the full version at **Annex C** (available to view online). Self-harm is reported to be a growing concern and issue locally. York does have slightly higher rates of hospital admissions due to self-harm than England average rates and anecdotal and audit information from a range of sources identifies growing concerns about increases in self-harm.
17. The needs assessment recommends the following four areas for local consideration:
- To strengthen the identification and recording of self-harm related problems that do not result in a hospital admission. This will establish a baseline measurement of the extent of the issue and help raise the focus on the importance of accurately being able to identify self-harming behaviour. Without being able to

accurately identify how much self-harm is happening it is not possible to demonstrate a suitable response to it.

- ii. To develop and enhance a local offer of information, advice and training to key staff groups and people most at risk of self-harm. This will reduce barriers to people who self-harm seeking help and improve the ability of staff to be able to respond to self-harming behaviour and risks effectively.
 - iii. To be able to offer evidence based interventions that are effective in reducing self-harming behaviour and clear referral routes into this support. This would also contribute to removing barriers for people to ask for help.
 - iv. To seek assurance that appropriate and adequate pathways exist which allow people who self-harm to receive support. This would include clarity that; self-harming behaviour among adults is assessed and risk assessed by service providers; there are clear pathways into support where self-harming behaviour is identified which should include consideration of referral processes for adults and children from Emergency Department and referral from schools into Child and Adolescent Mental Health Services (CAMHS).
18. It is suggested that implementation and progress reporting back to the Steering Group against these recommendations is led by the Mental Health and Learning Disabilities Partnership Board; joint working with the CAMHS Executive on issues for children and young people will be required. The Health and Wellbeing Board are advised to formally instruct the Mental Health and Learning Disabilities Partnership Board to lead on this work and ask them to produce a plan to fulfil this.

Future needs assessments

19. There are two further needs assessments that are due to commence during September 2016 and these will be focused around:
- Autism
 - Student Health
20. Task and Finish Groups will be established to lead on the work and the Steering Group will receive regular reports back.

Once completed the key messages and recommended actions from these needs assessments will be presented to the Health and Wellbeing Board.

Maintaining the current web-based JSNA

21. The Steering Group have discussed this on a number of occasions and have concluded that the website currently lacks ownership and is unfortunately not being maintained due to a lack of resource. This means that there are a number of broken links, some out of date information and no new information being added. What had been originally developed as a 'live' web based JSNA has now become static. No decision as yet has been made on how to manage this or what a future website might look like. However, the Steering Group have looked at other JSNA websites and how they function.
22. Additionally, whilst the JSNA contains a wealth of information there is a real need to increase and improve the capacity to analyse data and information contained within it to produce a single source of intelligence to inform commissioning decisions. The Steering Group have considered an initial business case with options to increase capacity to support the JSNA and further discussions are taking place on this.

The Joint Health and Wellbeing Strategy (JHWBS)

23. Producing a Joint Health and Wellbeing Strategy is a statutory responsibility of Health and Wellbeing Boards. The JHWBS should set out the health and wellbeing priorities for the city based on the evidence in the local JSNA, other local intelligence and data and on engagement with stakeholders and the public.
24. The [current Joint Health and Wellbeing Strategy](#) for York runs from 2013 to 2016; as well as a number of cross cutting principles and actions it has five key themes:
 - Making York a great place for older people to live
 - Reducing health inequalities
 - Improving mental health and intervening early
 - Enabling all children to have the best start in life
 - Creating a financially sustainable local health and wellbeing system

25. The proposal for the new Strategy is that it will run for 5 years from January 2017 until December 2021. It will be a high level strategy underpinned by targeted action plans and existing strategies (e.g. alcohol strategy and children and young people's plan) and will be based on what is known as the 'life course approach' with themes such as:
- Starting and growing well
 - Living and working well
 - Ageing well
 - Dying well
26. Initial engagement has taken place in relation to renewing the JHWBS including two open engagement sessions, an online survey, a 'foyer' day at West Offices and visits to York Older People's Assembly and the VCS Forums.
27. The new JHWBS will be drafted throughout September and a formal 8 week consultation will take place throughout October and November. The Strategy will be launched at the January 2017 meeting of the Health and Wellbeing Board.
28. The Steering Group will continue to lead this piece of work to ensure a new JHWBS for the city is produced and action plans are in place to implement it.

Consultation

29. Consultation and engagement has taken place as both the learning disabilities and self harm needs assessments were being produced.
30. Engagement sessions have been held in relation to renewing the JHWBS as detailed above with a formal consultation scheduled to take place later in the year.

Options

31. The Board are asked to note the contents of this report. They are also asked to consider the following options:
- i. Agree or amend the recommendations arising from both the self harm and learning disabilities needs assessments

- ii. Agree or suggest alternatives as to the lead group for implementing the recommendations

Analysis

- 32. Learning from previous needs assessments has highlighted the need for robust implementation plans to be put in place, clear leads to be identified at an early stage and clear reporting lines identified if recommendations are to be taken forward.

Strategic/Operational Plans

- 33. The Health and Wellbeing Board have a statutory duty to produce both a Joint Strategic Needs Assessment and a Joint Health and Wellbeing Strategy.

Implications

- 34. There are resource implications associated with delivering such complex projects. Currently the resources we do have are shrinking and the burden of work to undertake the JSNA is not evenly distributed. The Steering Group are actively seeking ways in which this can be addressed and will keep the Board updated on the progress with this discussions.

Risk Management

- 35. The production of a JSNA and a Joint Health and Wellbeing Strategy are statutory responsibilities for the HWBB. Delivering against both is resource intensive and needs to be managed to ensure a fit for purpose JSNA and Joint Health and Wellbeing Strategy are produced.

Recommendations

- 36. The Health and Wellbeing Board are asked to note this update and are recommended to:
 - i. Agree the recommendations arising from both the self harm and learning disabilities needs assessments
 - ii. Agree the lead groups suggested for implementing the recommendations

Reason: To update the Board on progress made with the JSNA and the JHWBS

Contact Details

Author:

Tracy Wallis
Health and Wellbeing
Partnerships Co-ordinator
City of York Council/NHS
Vale of York Clinical
Commissioning Group

Chief Officer Responsible for the report:

Sharon Stoltz
Director of Public Health
City of York Council

**Report
Approved**



Date

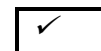
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Tel: 01904 551714

Specialist Implications Officer(s) None

Wards Affected:

All



For further information please contact the author of the report

Background Papers:

Joint Strategic Needs Assessment
Joint Health and Wellbeing Strategy 2013-16

Annexes

Annex A – Learning Disabilities Needs Assessment

Annex B – Summary Self Harm Needs Assessment

Annex C – Self Harm Needs Assessment (online only)

Glossary

CAMHS- Child and Adolescent Mental Health Services

CCG- NHS Vale of York Clinical Commissioning Group

HR- Human Resources

HWBB- Health and Wellbeing Board

IT- Information Technology

JHWBS- Joint Health and Wellbeing Strategy

JSNA- Joint Strategic Needs Assessment

VCS- Voluntary and Community Sector