

## **Scrutiny Management Committee**

6<sup>th</sup> December 2010

Report of the Assistant Director – Legal, Governance & ITT

### **Executive Referral – Joint Strategic Needs Assessment**

#### **Summary**

1. This report asks Members to consider a referral made by the Executive at their meeting on 21<sup>st</sup> September 2010 to refer the Joint Strategic Needs Assessment to the relevant Scrutiny Committees for consideration.

### **Background**

2. At a meeting in September 2010 the Executive were presented with a paper on the Joint Strategic Needs Assessment (JSNA) by the Interim Director of Public Health and the Director of Adults, Children & Education. This report stated:

'The Joint Strategic Needs Assessment is a process that identifies current and future health and wellbeing needs of a local population, informing the priorities and targets and leading to shared commissioning priorities that will improve outcomes and reduce health inequalities.

The Local Government and Public Involvement in Health Act (2007) places a duty on upper tier authorities and Primary Care Trusts (PCTs) to undertake Joint Strategic Needs Assessment (JSNA). Specifically the expectation is that the Directors of Adult Services, Children's Services and Public Health should jointly lead the process, in collaboration with Directors of Commissioning and should be responsible for presenting the findings and recommendations.'

3. A copy of the Executive Report dated 21<sup>st</sup> September 2010 and the JSNA are at **Annexes A & B** to this report and are available for viewing online.

#### Consultation

4. The JSNA was developed under the remit of the Healthy City Board which includes key City of York Council Members, Officers and partners including NHS North Yorkshire & York, York Hospitals Foundation Trust, York Health Group, the voluntary sector, patient representatives and York St John University.

#### **Options**

5. There are no specific options for SMC to consider, however in light of the Executive's referral to this Committee Members are asked to consider which of the five standing scrutiny committees should receive this document and how.

### **Analysis**

- 6. The JSNA states that generally the health and well being of the residents of York remains very good in relation to the rest of the country. However there are still inequalities in the determinants and outcomes of health for vulnerable groups and unhealthy lifestyles still impact on a proportion of the population. The key messages from the JSNA are as follows:
  - We need to understand and adapt to changing ethnic populations
  - Community cohesion is strong for many groups including older people and those with disabilities
  - Low proportions are concerned about drunkenness or drug use
  - Deprivations is low overall and getting lower and there are low levels of children in poverty
  - Levels of homelessness are reducing
  - A minority of areas experience deprivations, lower levels of cohesion and fuel poverty
  - Although the recession has had an impact on York, it is less than elsewhere
  - We see very positive education results at all ages and the gap in attainment is closing
  - Fewer people smoke than elsewhere in the region. Deaths due to smoking are lower than the national average and reducing.
  - York compares well on healthy eating but there is still more to be done.
  - The picture on alcohol is mixed with local levels, although good in comparison to national rates, higher than we would like.
  - Recent figures suggest improvements in physical activity levels for adults.
  - Teenage pregnancy rates are improving
  - Although childhood obesity levels are improving at reception age, we have seen a slight increase at Year 6.
  - Overall death rates are low but there remain differences in life expectancy for those in the most deprived areas, particularly men.
  - Death rates from coronary heart disease, stroke and cancer are all better than national averages and have fallen substantially over the last 13 years.

- Respiratory disease appears to be reducing in men, but rates for women remain around the national average.
- Dental health is relatively good for adults and children, but there remain concerns around access.
- We have a better collective understanding of the numbers and needs of people with physical and sensory impairment and those with learning disabilities in York.
- It is estimated that around 36,000 people in York have mental health problems. There are predicted to be large increases in the number of people with dementia.
- More older people are helped to live at home in York than the national average, but access to intermediate care remains a priority.
- More carers are involved in planning services.
- 7. As can be seen from the list above and the information contained within Annexes A & B to this report the JSNA is predominantly concerned with health inequalities, however these are affected by a number of different determinants which may fall within the remit of more than just the Health Overview & Scrutiny Committee (OSC). The JSNA is, therefore, a document that could potentially be used by several of the standing scrutiny committees to identify areas of concern and topics for further review.
- 8. The Health OSC has already scheduled a presentation on the JSNA into their work plan for 24<sup>th</sup> January 2011. In light of this SMC may wish to consider referring the JSNA to the Health OSC and asking that scrutiny Members from all of the standing scrutiny committees be invited to attend to listen to the presentation. Arrangements could be made, with the agreement of the Chair of the Health OSC that all Members present for this item are allowed to ask questions on the JSNA.

# **Corporate Priorities**

9. This report is linked to the 'Healthy City' theme of the Corporate Strategy 2009/2012:

'We want to be a city where residents enjoy long, healthy and independent lives. For this to happen we will make sure that people are supported to make healthier lifestyle choices and that health and social care services are quick to respond to those that need them.'

### **Implications**

10. There are no financial, human resources, legal or other implications associated with the recommendations within this report. However, should any of the scrutiny committees choose to undertake a review then implications might arise. These would be addressed as part of the review process.

## **Risk Management**

11. Whilst the production and approval of a JSNA may not in itself present considerable risks, the use of the document to inform directorate/partnership and commissioning priorities may lead to risks arising.

#### Recommendations

- 12. Members are asked to consider whether they wish to:
  - Refer the Joint Strategic Needs Assessment to the Health Overview & Scrutiny Committee
  - Request that the Chair of the Health Overview & Scrutiny Committee invite all scrutiny Members to listen to any presentation given and be given the opportunity to ask questions.

REASON: To address the Executive referral in relation to the Joint Strategic Needs Assessment

#### **Contact Details**

Annex A

Annex B

York

Joint Strategic Needs Assessment

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Specialist Implications Officer(s) None	
Wards Affected:	All 🗸
For further information please contact the author of the report	
Background Papers:	
None	
Annexes (online only)	

Executive Report 21.09.10 - Joint Strategic Needs Assessment for