



Health and Wellbeing Board  
7 September 2017

## **Surrey Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy**

### **Purpose of the report:**

The purpose of this report is to update the Health and Wellbeing Board (HWB) on progress made in revamping the Joint Strategic Needs Assessment (JSNA) and the prioritisation process leading to a refreshed Joint Health and Wellbeing Strategy (JHWS).

### **Recommendations:**

It is recommended that the Health and Wellbeing Board:

- i. Agree on the areas of focus identified through the 2017 Joint Strategic Needs Assessment (JSNA) process and subsequent discussions, which will inform a refreshed Joint Health and Wellbeing Strategy (JHWS); and
- ii. decides the point at which to engage with stakeholders in refreshing the Joint Health & Wellbeing Strategy.

### **Introduction:**

- 2. The Health and Social Care Act (2012) sets out a statutory responsibility on the Health and Wellbeing Board to publish a Joint Strategic Needs Assessment (JSNA) and produce a Joint Health and Wellbeing Strategy (JHWS).
- 3. A JSNA is an assessment of the current and future health and social care needs of the local community. These are needs that could be met by the Local Authority, Clinical Commissioning Groups (CCGs), or NHS England (NHSE). The JSNA helps the HWB to consider wider factors that impact on the communities' health and wellbeing and local assets that can help to improve outcomes and reduce inequalities.
- 4. A Joint Health and Wellbeing Strategy (JHWS) is a strategy for meeting the needs identified in the JSNA and it is also produced by the HWB. Health and wellbeing boards must involve the local Healthwatch organisation and the local community continuously throughout the process. When involving the local community, boards should consider

inclusive ways to involve people from different parts of the community including those with particular communication needs to ensure that differing health and social care needs are understood, reflected, and can be addressed by commissioners.

5. This paper provides an outline of progress being made updating the JSNA and refreshing the JHWS including recommendations for updating the strategy based upon the latest information from the JSNA. The process undertaken so far is outlined and approval on the next steps is required from the Board.

#### **Background:**

6. The Surrey JSNA was first published in 2013. In September 2015 the Board approved the approach to updating the JSNA systematically, and the strategic direction was set by a JSNA Strategic Development Group.
7. In 2016, the JHWS was refreshed to update membership details, data that the strategy was based upon and incorporate a monitoring framework. The content of strategic priorities remained unchanged.
8. The refreshed JSNA was launched in December 2016 and followed a life course approach as set out in the 2010 Marmot Review – ‘Fair Society, Healthy Lives.
9. A progress update on the JSNA was received by the HWB in February 2017 with the majority of chapters completed and others being published online as they were completed. The Board explored completed chapters and followed this with a discussion as to how best to use the chapters to inform the strategic direction for health and wellbeing in Surrey.

#### **Joint Strategic Needs Assessment:**

10. The refreshed JSNA is available online on Surrey-I <http://www.surreyi.gov.uk/groupage.aspx?groupid=36>

#### **Joint Health and Wellbeing Strategy:**

11. The refreshed JHWS is informed by issues highlighted in the current JSNA. The issues informing the JHWS were prioritised based on a set of principles agreed by the JSNA Strategic Development group in June of 2017. The following principles were applied to the JSNA to identify issues
  - requiring joint action across the partnership in order to make a difference or accelerate progress;
  - that present with possibilities for preventative action;
  - Where there are clear gaps in services and neglected areas exist ,
  - where inequalities exist in the level of need, service provision, or outcomes

12. HWB members were involved in a workshop on 6 July 2017 where they discussed the focus areas proposed for each of the five priorities in the current JHWS. Members agreed to receive a full paper on the agreed areas of focus as identified during the facilitated workshop. Some of the updated JSNA chapters are yet to be published and the intelligence was drawn from existing documents and programme leads while awaiting the publication of these chapters online.
13. Agreement was reached on the following set of priorities and focus areas as a result of the workshop and in discussion with programme leads:

**Priority 1. Improving children's health and wellbeing**

- Promote healthy weight;
- Develop and deliver an integrated SEND (special education needs and disability) educational offer with and for Surrey's children and families.

**Priority 2 – Developing a Preventative Approach**

- Reduce the inequality in outcomes between children with multiple vulnerabilities and the Surrey average, particularly for looked after children and care leavers;
- Ensure all children, young people and families get the right support at the right time; and
- Ensure the environment promotes health (including Active Travel, Air Quality, and embedding health in Planning).

**Priority 3: Promoting Emotional Wellbeing and Mental Health**

- Improve provision of perinatal mental health services;
- Accelerate implementation of Surrey's Suicide prevention plan; and
- Support our children, young people and families to lead healthy lifestyles and have good emotional wellbeing and mental health

**Priority 4. Improving older adults' health and wellbeing**

- Support communities and care homes to be more dementia friendly;
- Improve identification and support for carers; and
- Develop a Surrey-wide end of life care strategy.

**Priority 5. Safeguarding**

- Extend the implementation of the Safer Surrey strengths-based model of practice for children's safeguarding;
- Build and embed a multi-agency response to keep children safe from harm, with a focus on Child sexual exploitation, missing children and domestic abuse and neglect;
- Embed the MASH (Multi Agency Safeguarding Hub for Adults)

**Options for public and stakeholder involvement:**

14. While there is no statutory duty to consult on the JHWS, the HWB has a duty to involve third parties in its preparation, including Healthwatch Surrey and people living or working in the area. The HWB also has a duty when exercising its functions to promote the involvement of

patients, their carers and representatives in decisions about the provision of health services to patients.

15. Healthwatch Surrey have been included in all discussions at the Board relating to the JSNA and have been a member of the JSNA Strategic Development Group ensuring the patient voice is included in its development.
16. There are two options proposed for engagement on the refreshed strategy:
  - a) Option A - to undertake engagement on the updated priority areas by working with priority leads and surveying stakeholders, including the public – completed by March 2018.
  - b) Option B - to update the strategy based on the above priorities with no further engagement (acknowledging the engagement with public and stakeholders that has already been undertaken as sufficient) – completed by December 2017.
17. Option A enables greater engagement with stakeholders and increases support to deliver the strategy from across the health and social care system. Whilst this requires more time and resource initially, the enhanced levels of engagement will benefit the delivery of the strategy in the long term. Option A is the preferred option
18. It is proposed that either of these options are carried out in consultation with the Health and Wellbeing Board leads for each priority.

#### **Next steps:**

- a) Continued follow up of outstanding JSNA chapters and publish them online.
- b) Work with JHWBS priority leads to establish the detail of the refreshed strategy.
- c) Work with JHWBS priority leads to refresh the strategy in line with either option A or B dependent upon which option the Board favour.

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