





#### READING HEALTH AND WELLBEING BOARD

DATE OF MEETING: 12<sup>th</sup> October 2018 AGENDA ITEM: 9

REPORT TITLE: A Proposed New Model for Reading's Joint Strategic Needs

**Assessment** 

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Public Health

ORGANISATION: Reading Borough Council

#### PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 The report provides a summary of the proposed new model for Reading's Joint Strategic Needs Assessment (JSNA) comprising:
  - an online, digital source of data to describe the demography and wider determinants of health of the Reading population that is user-friendly and configurable by the user;
  - a repository for detailed, service specific needs assessments carried out by internal and external partners with support from Wellbeing officers; and
  - improved engagement with local research, especially qualitative and participatory research that captures user voice.
- 1.2 Appendix 1 Presentation of a proposed new model for Reading's JSNA

## 2. RECOMMENDED ACTION

2.1 That the Health & Wellbeing Board authorises officers to progress the development of Reading's Joint Strategic Needs Assessment in line with the new model described in this report.

# 3. POLICY CONTEXT

3.1 Preparing a JSNA, in partnership with local Clinical Commissioning Groups (CCGs), is a legal requirement for local authorities. Under the Local Government and Public Involvement in Health Act (2007) and the Health and Social Care Act (2012), Reading Borough Council has a legal duty to prepare a JSNA and a strategy for meeting the needs described in the assessment (the Health and Wellbeing Strategy) in partnership with its partner CCG.

# 4. THE PROPOSAL

- 4.1 Current Position.
- 4.1.1 Reading's current JSNA consists of a large (70+) number of separate sections. Each section was originally produced by an officer from the Council's Wellbeing team, liaising with colleagues from other services as appropriate. A lead officer within the Council is

required to review and update the content of each section on an annual basis. The updated content must be reviewed by a member of the Wellbeing team and signed off by Reading's Public Health Consultant before it is published online.

- 4.1.2 This model has presented a number of challenges.
  - The process requires a large amount of officer time, both from within the Wellbeing team and from internal partners. There are a large number of JSNA sections, which are difficult to keep up-to-date, especially where resources are reducing and where there are competing priorities.
  - The process can involve duplication. Some teams and services produce needs analyses to support their own commissioning and strategic activities as well as having to produce JSNA content.
  - The JSNA process is not effective at involving health partners and often does not take account of the multiple geographies in which partners operate.
  - JSNA sections are produced by different authors with different knowledge and specialisms. As a result, the separate sections are sometimes inconsistent in their depth of analysis and detail. As they are usually produced in 'silo', they not always appropriately connected to other relevant sections.
  - The current format lacks visual and interactive content to engage users and doesn't make effective use of digital technologies or publicly available data.
  - The current format lacks a mechanism for providing an overarching 'big picture' of Reading and its population.
  - There is currently no consistent approach to articulating user voice through the JSNA, despite some active local forums, an effective Local Healthwatch Service and the availability of research by other local organisations.

# 4.2 Options Proposed.

- 4.2.1 The proposed new model for Reading's JSNA is designed to introduce a more cohesive and efficient approach to assessing the needs of the local population.
- 4.2.2 The key elements of the proposed model are:
  - an online, digital source of data on the demography and wider determinants of health of the Reading population that is user-friendly and configurable by the user;
  - a repository for detailed, service specific needs assessments carried out by internal and external partners with support from Wellbeing officers; and
  - improved engagement with local research, especially qualitative and participatory research that captures user voice.
- 4.2.3 Several options for the online element are being considered. These include:
  - providing links to publicly available information published by Public Health England (PHE);
  - using free report-building tools available through the Local Government Association (LGA);
  - using APIs (Application Programming Interfaces) with a data visualisation tool (such as Tableau) or a new website development; and
  - Subscribing to a web-based resource, such as OCSI's Local Insights; Grant Thornton's Place Analytics and Geowise's Instant Atlas.

These are described further in the presentation in Appendix 1.

- 4.2.4 Under the proposed model, the production of JSNA content will align with needs assessments that are already carried out by the Council and its partners as part of developing strategy and commissioning services. The Wellbeing team will work cooperatively with others to support the production of needs analyses that will support commissioning activity and take into account vulnerabilities and inequalities in the population. The completed needs analyses will then be included and published online as JSNA content.
- 4.2.5 **Next steps**. Options within the proposed model outlined here will be presented to Reading's Public Health Board (PH Board) in October 2018. The PH Board will be asked to discuss the proposed model and its implementation and:
  - agree a preferred option for the digital, online element;
  - agree how the new model will be funded (through the Public Health Grant or other means); and
  - agree how the implementation of the new model will be overseen (e.g. through the establishment of a separate Steering Group).
- 4.2.6 Four of the other Public Health teams across Berkshire have also identified similar challenges and have begun working with the Public Health Services for Berkshire team to develop a 'shared vision' for JSNA across Berkshire. Key elements of the shared vision will be automation of data updates and streamlining of JSNA content. A joint approach may offer an opportunity for greater efficiencies and access to a wider pool of resources and skills.

## 4.3 Other Options Considered

- 4.3.1 Continuing to produce updates Reading's JSNA in line with the current model is not recommended for the reasons outlined in paragraph 4.1.2.
- 4.3.2 The implementation of a 'Population Health Management' approach throughout the local Integrated Care System (ICS), focusing on intelligence and analysis to develop an understanding of the health and wellbeing needs of the population, suggests that CCGs and other NHS organisations may have similar interests both to the Berkshire 'shared vision' and Reading's proposed model for JSNA. The model proposed here is likely to allow for alignment with the ICS approach. Delaying an immediate decision on the Reading JSNA model could allow this to be checked more thoroughly, but is unlikely to confer sufficient advantages to merit the delay.

# 5. CONTRIBUTION TO READING'S HEALTH AND WELLBEING STRATEGIC AIMS

- 5.1 The JSNA contributes to the Health and Wellbeing Strategy by providing a basis on which to identify the health and wellbeing needs of the population. This proposed model is designed to introduce a more cohesive and efficient approach to assessing those needs.
- 5.2 The proposal recognises that plans in support of Reading's 2017-20 Health and Wellbeing Strategy should be built on three foundations safeguarding vulnerable adults and children, recognising and supporting all carers, and high quality co-ordinated information to support wellbeing. The proposal specifically addresses these in the following ways:

- Improving the quality of information available to form the basis of effective commissioning and strategic planning across all service areas.
- Providing resources that support greater understanding of needs of vulnerable adults and children, and carers.
- Better links with local qualitative research provide an opportunity for service user voices to be articulated and taken into account.

## 6. COMMUNITY & STAKEHOLDER ENGAGEMENT

- 6.1 The Wellbeing team has been involved in ongoing informal discussions with partner organisations about the proposed model and has taken part in workshops to discuss and develop the Berkshire 'shared model' and review potential digital solutions.
- 6.2 Further consultation and engagement between Wellbeing officers and partner organisations will help to set out plans for supporting the production of service specific needs analyses.

## 7. EQUALITY IMPACT ASSESSMENT

7.1 An Equality Impact Assessment is not required in relation to the proposal to adopt a new model for JSNA. No groups are expected to be disproportionately affected by adopting a new, more effective and efficient approach. We hope that by engaging better with local research groups, including our local Healthwatch, that the new model will enable us to take into account perspectives of members of the population who may not always be well-represented.

## 8. LEGAL IMPLICATIONS

8.1 Not applicable

#### 9. FINANCIAL IMPLICATIONS

9.1 Implementation of the digital element of the proposed model will be discussed further by the Public Health Board. Value for money and financial risk for each of the options has been considered (see Appendix 1) and will be taken into account before a preferred option is selected.

## 10. BACKGROUND PAPERS

- 10.1 Health and Social Care Act, 2012 https://www.legislation.gov.uk/ukpga/2012/7/contents
- 10.2 Local Government and Public Involvement in Health Act, 2007 https://www.legislation.gov.uk/ukpga/2007/28/contents

# A Proposed New Model for Reading's Joint Strategic Needs Assessment (JSNA)

Marion Gibbon Interim Consultant in Public Health



# **Comparing Models**

#### Current Model

- 70 + sections, difficult to keep An online, digital data source up-to-date
- Inconsistent and not connected
- Not visually engaging or configurable
- No 'big picture'
- No 'user voice'

# Proposed Model

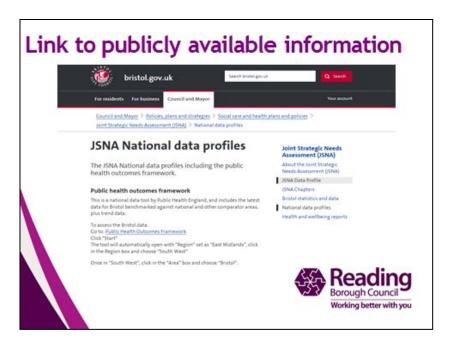
- Reading's demographics and determinants of health
- Detailed service specific needs assessments that complement the commissioning cycle
- · Engages with local qualitative research, including Healthwatch

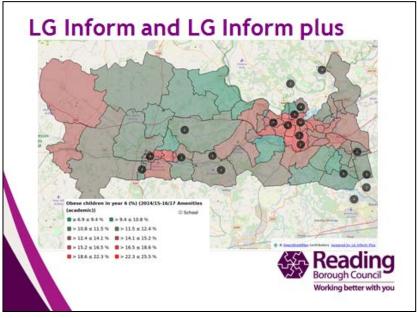


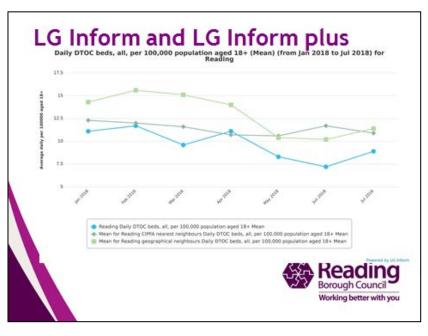
# An Online, Digital Data Source

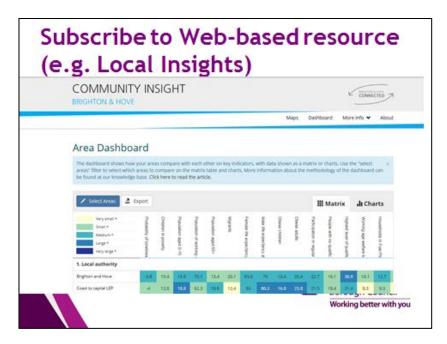
- Updates automatically from public sources
- Visually engaging
- Data available for different geographies
- Interactive and can be configured by the user



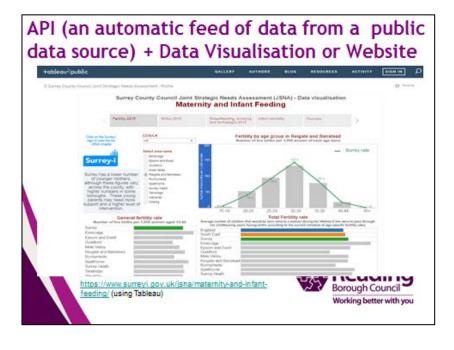












# An Online, Digital Data Source - Evaluating the options

	Links to public data sources	LG Inform/LG Inform Plus	Subscribe to web-based resource	API + Data Visualisation or Website
Automatic updates	Yes	Yes	Yes	Yes
Visually engaging	No	Partly	Yes	Yes
Different geographies	Yes (on separate sites)	Partly	Yes	Yes
Interactive	No	No	Yes	Yes
Cost	Free	Free	££	EEEE



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# Service specific needs assessments

- Wellbeing team will work collaboratively with its internal and external partners as part of developing strategy and commissioning services
- Inequalities and wider determinants of health taken into account in wider commissioning and planning
- Jointly produced needs analysis published as JSNA content Reading

# Engages with local qualitative research

- Healthwatch reports will be included as part of the JSNA, making sure they are taken into account in planning and commissioning of services
- Including reports from local participatory research
   Whitley4Real, Participation Lab
   <a href="http://blogs.reading.ac.uk/participation-lab/files/2018/08/Picture2.png">http://blogs.reading.ac.uk/participation-lab/files/2018/08/Picture2.png</a>
- And other third sector partners http://rva.org.uk/article/rvas-report-on-youthisolation-and-loneliness-in-reading/
  Reading

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