

Healthier Communities and Older People Overview and Scrutiny Panel

Date: 20 June 2022

Subject: Joint Strategic Needs Assessment (JSNA) plans

Lead officer: Dagmar Zeuner, Director of Public Health

Lead member: Cllr Peter McCabe, Cabinet Member for Health and Social Care

Contact officer: Yannish Naik, Consultant in Public Health

Recommendations:

- A. That the scrutiny panel notes the purpose and scope of the Joint Strategic Needs Assessment, and the changes to the process for developing the JSNA in 2022
- B. That the panel reviews the key issues that have been identified for the Merton Story 2022, using their local experience and taking into consideration the methodology applied to focus on a small number of strategic issues
- C. That the panel provides any comments on future developments around the JSNA, to support the steering group in planning for 2023.

1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

1.1. The purpose of this report is to present current plans around Merton's Joint Strategic Needs Assessment to the scrutiny committee. The report provides an opportunity for the scrutiny committee to review the key issues identified and feed into longer term plans for the JSNA.

1.2. The report sets out the remit of the JSNA, considers the current strengths and challenges of the JSNA, then discusses some of the changes made for 2022. These include

- 1.2.1 Being more collaborative in developing the JSNA (including through the steering group which brings together partners, and the identification of key stakeholders for each chapter)
- 1.2.2 Aiming to separate the Merton Story into separate web pages, following a standard structure to ensure that these are more accessible
- 1.2.3 Focusing on identification of a smaller number of key issues for the borough to ensure the JSNA serves its purpose to be strategic and remains manageable.

1.3. The report outlines some longer-term areas to explore for the JSNA in the future.

2 DETAILS

2.1. The Joint Strategic Needs Assessment (JSNA) is a statutory assessment of population health and wellbeing needs for the Health and Wellbeing Board. In Merton its main annual publication is named "The Merton Story".

2.2. The JSNA is more than the Merton Story. It includes a number of other products such as ward health profiles and in-depth Health Needs Assessments. These are issued throughout the year where relevant new data is published and to support redesign and commissioning of specific services.

2.3. The Merton Story has consisted of two sections:

2.3.1 The main document, in thematic sections, each with a number of key messages

2.3.2 A 2-side infographic with the main headings, providing an at a glance summary.

2.4. Since its original idea, the Merton Story main document has grown to include a range of health topics.

2.5. The Merton Story is explicitly limited to describing the risk and resilience factors that influence health and wellbeing, and the distribution of diseases and deaths, using mainly quantitative population data from national sources, supplemented where this is sparse with local and more qualitative insights. It is not the role of the Merton Story to cover performance of individual health and care services, as previously agreed with the Health and Wellbeing Board.

2.6. The Merton Story also does not include recommendations around how health and care needs should be met as this is picked up through existing strategies and governance arrangements. That is, the Merton Story describes the current state of population health but does not prescribe solutions.

2.7. Main partners of the JSNA include the local authority, the NHS, and the voluntary sector. As of July 2022 the JSNA will need to cater for the new local partnership system which will include the local borough committee, MHCT board, and HWBB.

2.8. The current Merton Story covers a wide range of topics in detail, including health inequalities and local assets. Some strengths and challenges of the Merton Story 2021 are provided below.

2.8.1 Strengths:

(i) Risk factors for health conditions are identified and presented well throughout.

(ii) We use a range of data sources and tell the Merton story well.

(iii) We have received informal positive feedback about usefulness from council, VCS and NHS.

2.8.2 Challenges:

(i) The single large document is not very accessible for all stakeholders; it is hard to update this document every year and the chapters are quite different.

(ii) Communication with users and stakeholders needs to be stronger for frequent feedback, and to ensure data collated is being used.

(iii) Identifying the scope of the Merton Story clearly to manage expectations, resource requirement, and length of time for completion.

2.9. The following changes have been made for the Merton Story 2022:

2.9.1 Improving collaboration

- (i) A steering group has been set up with representation across several council departments, health partners and the VCSE (see appendix 1).
- (ii) Each chapter lead has been asked to identify key stakeholders to work with them on the chapters.
- (iii) Ensuring key colleagues such as the members of Merton Council’s analysts network are aware of the work undertaken for the JSNA.

2.9.2 Content and format

- (i) Identifying a number of strategic key issues for the Merton Story 2022, as outlined in the table below. The key issues will be structured in several categories (Population, COVID Pandemic, Start Well, Live Well, Age Well and Healthy Place) to align with the Health and Wellbeing Strategy and the local Health and Care Plan. Methodology to identify key issues:
 - a) We reviewed the Public Health Outcomes Framework (a robust and comprehensive indicator set outlining population health at a local authority level, compiled by the Office for Health Improvement and Disparities), and the Merton Story 2021 to identify key issues.
 - b) These were considered by our steering group and chapter leads to further develop the list of key issues drawing on local knowledge. They are also being shared with DMTs and this scrutiny committee for review to ensure they are comprehensive.
 - c) The steering group will oversee the final agreement on key issues.

Table 1 – key issues for Merton Story 2022 for review

Chapter Topic	Key issues
Merton Population	East / West population differences & characteristics
	Migration, population density and population turnover including life expectancy
	Inclusion and inequalities (ethnicity, age & sex LGBTQ+, socioeconomic status)
COVID Pandemic	The Pandemic in Merton
	Risk of severe disease – including vaccination
	Wider impacts – age specific covered in Start Well, Live Well and Age Well, and some specifics to cover e.g. long covid, therapeutics.
	Disproportionate impact on certain communities
Start Well	Mental health
	Healthy weight
	Childhood adversity / safeguarding (including poverty, offending, substance misuse)
	Maternal health / early years – including low birth weight

	Screening and immunisations
	Education including school readiness & Special Educational Needs and Disabilities
Live Well	Smoking and respiratory health
	Diabetes and other long term conditions (including cardiovascular disease)
	Obesity (including food / physical activity)
	Sexual health
	Adult mental health including suicide and self harm
	Substance misuse and alcohol - Broad overview, awaiting needs assessment
Age Well	Dementia
	Frailty and falls
	Loneliness and isolation (including digital exclusion)
	Screening and immunisations including cancer screening, Abdominal Aortic Aneurysm screening, flu
	Disabilities
	Carers
Merton as a Healthy Place	Financial pressures and cost of living, including employment of particular groups
	Housing
	Food
	Greenspace and climate change
	Community cohesion and crime
	Transport and air quality including injuries

(ii) The Merton Story large document will be broken down into a web page per key issue, with a standard format to ensure it is accessible.

(iii) Taking into account the recent changes to the ward boundaries the East-West boundary for analysis has been redrawn. Lower Morden will be in West Merton, Abbey will remain in East Merton and Wandle will be in West Merton as it is mainly made up of wards previously in West Merton.

2.9.3 Data

(i) We are using automated data processes to support the analysis of the Merton Story, including an automated analysis of the Public Health Outcomes Framework data for Merton (see appendix 2).

(ii) The analysis for the Merton Story will be broad, identifying issues where more detailed analysis is required. For example, we have begun a needs assessment around substance misuse and alcohol.

(iii) Service data will only be used selectively where it provides a good proxy for population health.

2.10. There are several areas that we are keen to explore in the future

2.10.1 Demonstrating the use of evidence from the JSNA in decision making including by key governance mechanisms.

2.10.2 Strengthening the incorporation of resident voice and assets in a more systematic way.

2.10.3 Ensuring that we integrate the JSNA with other work undertaken around data including working across the council, linking with developments in the NHS such as population health management.

2.10.4 Building on existing analysis to include predictive modelling.

2.11. All options for future development will depend on securing capacity and capability to deliver the above.

3 ALTERNATIVE OPTIONS

3.1. Do nothing: This would leave us without important information and fail in delivering a statutory duty.

3.2. Retain the status quo: While we could attempt to retain the format and breadth of topics contained within the Merton Story 2021, it does not seem feasible and this would not address some of the points that our proposals are seeking to address in terms of making the JSNA more accessible.

4 CONSULTATION UNDERTAKEN OR PROPOSED

4.1. A steering group for this work has been established, bringing together key stakeholders including from the council, the NHS and the VCS (see appendix 1). This steering group is meeting monthly. The Merton Story 2022 will be presented to the Health and Wellbeing Board in September.

5 TIMETABLE

Merton Story/JSNA 2022 Actions	Timeline – By When to be completed
Identify: key stakeholders, sub chapter leads, initial identification of key issues	30th April 2022 (completed)
1 st Working Group meeting	Week beginning 18 th April 2022
2 nd Working Group meeting: update key issues to be included	Week ending May 2022
Scrutiny meeting	June 2022
To have updated chapters and sub sections & sign off by chapter leads & their managers for each section as a 1 st draft	30th June 2022
To have 2 nd draft and key messages signed off by chapter leads and their managers	17th July 2022

Sign off of key messages by PH SLT	31 st July 2022
Analyst network meeting	Week beginning 1 st August 2022
Present/Circulate to HWBB, Other DMTs	September 2022
Merton story publication	October 2022

6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

6.1. The JSNA will be delivered within existing capacity.

7 LEGAL AND STATUTORY IMPLICATIONS

7.1. The JSNA is a statutory duty as outlined above.

8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

8.1. The JSNA will consider equity throughout, including in the choice of key issues and in the structure of each topic.

9 CRIME AND DISORDER IMPLICATIONS

9.1. N/A

10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

10.1. Regular reporting on project progress is taking place through the C&H recovery and reset dashboard.

11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

Appendix 1 – JSNA 2022 Steering Group Members

Steering Group Member	Position
Yannish Naik	Public Health Consultant
Clarissa Larsen	Health and Wellbeing Board Partnership Manager
Keith Burns	Head of Commissioning and Market Development
Shamal Vincent	Business Intelligence Manager
Catherine Dunn	Policy, Strategy & Partnerships Officer
Farah Ikram	CSF Head of Policy, Performance & Partnerships
Simon Shimmens	VCS Representative
Dave Curtis	HealthWatch Representative
Kate Symons	Clinical Commissioning Group Representative
Gemma Dawson	Merton Health and Care Together Representative
Ann Maria Clarke	Planner, Environment and Regeneration

Appendix 2 (attached): Public Health Outcomes Framework for Merton

12 BACKGROUND PAPERS

[The Merton Story 2021](#)

[The Merton Story Summary 2021](#)

[Merton Story report to Health and Wellbeing Board, 2020](#)

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