

<b>DECISION-MAKER:</b>	<b>HEALTH AND WELLBEING BOARD</b>		
<b>SUBJECT:</b>	<b>JOINT STRATEGIC NEEDS ASSESSMENT UPDATE</b>		
<b>DATE OF DECISION:</b>	<b>19 JUNE 2019</b>		
<b>REPORT OF:</b>	<b>THE DIRECTOR OF PUBLIC HEALTH</b>		
<b><u>CONTACT DETAILS</u></b>			
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<b>STATEMENT OF CONFIDENTIALITY</b>	
Not applicable	
<b>BRIEF SUMMARY</b>	
<p>This paper provides an update on Southampton's Joint Strategic Needs Assessment, the work of the Strategic Analysis Steering Group (SASG) and the progress towards the delivery of a Single Needs Assessment (SNA) for the city through the Southampton Data Observatory. It also includes an update on the latest Health and Wellbeing Strategy Scorecard.</p>	
<b>RECOMMENDATIONS:</b>	
(i)	The Health and Wellbeing Board note the latest JSNA update and new Southampton Data Observatory website.
(ii)	The Health and Wellbeing Board note the updated Health and Wellbeing Strategy Scorecard.
<b>REASONS FOR REPORT RECOMMENDATIONS</b>	
1.	For information only
<b>ALTERNATIVE OPTIONS CONSIDERED AND REJECTED</b>	
2.	None
<b>DETAIL (Including consultation carried out)</b>	
3.	Under the Health and Social Care Act 2012 local Health and Wellbeing Boards are responsible for producing a Joint Strategic Needs Assessment (JSNA). The JSNA looks at the current and future health and care needs of the local populations to inform and guide the planning and commissioning of health, wellbeing and social care services within a local authority area.
4.	The JSNA supports Health and Wellbeing Boards and other stakeholders to consider wider factors that impact on their communities' health and wellbeing, and local assets that can help to improve outcomes and reduce inequalities. Local areas are free to undertake JSNAs in a way best suited to their local circumstances; there is no template or format that must be used and no mandatory data set to be included.
5.	Southampton City Council and the Southampton Health and Wellbeing Board recognise the importance of evidence based decision making, using evidence

	and data from a range of sources including wider determinants of health. We have therefore moved away from the traditional JSNA and are now incorporating the JSNA into a single “all purpose” needs assessment framework, which also includes the Safe City Strategic Assessment, Economic Assessment and Pharmaceutical Needs Assessment (PNA). This vision was previously presented and agreed by the Health & Wellbeing Board.
	<b>Single Needs Assessment and Southampton Data Observatory</b>
6.	A new Southampton Data Observatory website has been developed to host the new Single Needs Assessment, with all content available as an online resource. The new website is hosted at <a href="https://data.southampton.gov.uk/">https://data.southampton.gov.uk/</a> and will replace the JSNA currently hosted at <a href="http://www.publichealth.southampton.gov.uk">www.publichealth.southampton.gov.uk</a>
7.	The new data observatory has been developed based on user feedback and in consultation with members of the Southampton Strategic Analysis Steering Group (SASG). As previously presented to the Health and Wellbeing Board, the website is structured by topic to improve navigation and to make it more intuitive for users to find what they need. From the homepage the user is presented with 8 topics; population, health (JSNA), economy, place, community safety, children & young people, needs assessments and data and resources. Within each of these sections the user is able to access and download key facts, intelligence briefings, datasets, summary slide packs, city profiles and detailed needs assessments. The user is also signposted to resources developed elsewhere (i.e. PHE Fingertips tools), so it is a ‘one-stop shop’ for data and intelligence on Southampton. Users should be able to navigate seamlessly through the website using similar functionality to that used on the Office of National Statistics (ONS) website.
8.	It was originally envisaged the website would go live late 2018, but was delayed due to technical resources being prioritised elsewhere. However, the site is now live and is going through a user testing period before being formally launched during the summer.
	<b>Strategic Analysis Steering Group (SASG)</b>
9.	In June 2018, the Health and Wellbeing Board were informed that the Strategic Analysis Steering Group (SASG) had been formed help set the strategic direction of the SNA and other strategic analysis, ensuring it is fit for purpose and informs evidence based decision making. This is the forum for partners to influence the analytical work programme, ensuring it is informed by organisational priorities, the commissioning and strategy cycle and business need.
10.	The steering group is made up of representatives from different areas, such as the CCG, Public Health, Voluntary Sector, Children’s and Adult Services, ICU and Strategy and Policy. Their participation and input ensures the analytical work programme is continually informed by a variety of partners and their respective priorities and business need.
11.	As well as the development of the new Southampton Data Observatory website, over the last 12 months the SASG have prioritised and overseen work on a number of analytical projects including: <ul style="list-style-type: none"> <li>• Homelessness Needs Assessment to inform the new Homelessness Prevention Strategy for the city</li> </ul>

	<ul style="list-style-type: none"> <li>• Modelling future prevalence of long term health conditions and demand for adult social care</li> <li>• Electoral (health) ward profiles</li> <li>• Smoking intelligence briefing</li> <li>• Community Safety Strategic Assessment update</li> <li>• Economic Development analysis update</li> <li>• Update to mental health and sexual health data compendiums</li> <li>• Learning Disabilities Needs Assessment (ongoing)</li> <li>• Domestic Violence Needs Assessment (ongoing)</li> <li>• Health inequalities analysis</li> <li>• Support for the new Health and Social Care Strategy</li> </ul>
<b>Health and Wellbeing Scorecard</b>	
12.	<p>We know that improvements in health outcomes can take years to achieve at a population level, and that no one action will contribute to improving health across the city. The strategy therefore includes a number of measures from the Public Health Outcomes Framework (PHOF), which will be monitored over the 8 years of the strategy. Appendix 1 provides a scorecard outlining the current position, regional, national and statistical comparators, and recent trends for each measure. Southampton continues to face challenges in relation to health outcomes, but has seen some improvements from the previous years. These include:</p> <ul style="list-style-type: none"> <li>• Under 75 mortality from cardiovascular disease and respiratory diseases reduced in 2015-17 for both males and females. However, both rates for males continue to be significantly higher than the national average.</li> <li>• The rate of looked after children has continued to decrease in Southampton, from 120 per 10,000 in 2016, to 104 per 10,000 in 2018; although this is still significantly higher than the national average.</li> <li>• Southampton's under 18 years contraception rate has decreased from 31.7 per 1,000 population in 2016 to 26.3 per 1,000 population in 2016.</li> <li>• Adult (18+) smoking prevalence has fallen for the second year running, from 20.5% in 2015 to 17.4% in 2017. However, it is still higher than the national average of 14.9%.</li> </ul>
13.	<p>However, there are still some areas for improvement, and include:</p> <ul style="list-style-type: none"> <li>• Both life expectancy and health life expectancy have fallen for males and females in the last 12 months. Female healthy life expectancy in particular has fallen from 63.1 to 61 years and is now significantly lower than the England average.</li> <li>• Under 75 mortality from liver disease considered preventable has increased from 17.5 per 100,000 population in 2014-16 to 21.2 per 100,000 population in 2015-17.</li> <li>• Smoking status at time of delivery has increased from 13.8% to 14.4% in 2017/18.</li> <li>• Child excess weight in 10-11 year olds has increased from 34.9% 2016/17 to 37.4% in 2017/18.</li> <li>• Southampton continues to be the 2<sup>nd</sup> worst for injuries due to falls in people aged 65+ compared to its ONS comparator areas and the rate has continued to rise.</li> </ul>

	An overview of the health of Southampton's population will be presented to the Health and Wellbeing Board at the meeting on 19 <sup>th</sup> June.
<b>RESOURCE IMPLICATIONS</b>	
<b><u>Capital/Revenue</u></b>	
14.	None
<b><u>Property/Other</u></b>	
15.	None
<b>LEGAL IMPLICATIONS</b>	
<b><u>Statutory power to undertake proposals in the report:</u></b>	
16.	None
<b><u>Other Legal Implications:</u></b>	
17.	None
<b>RISK MANAGEMENT IMPLICATIONS</b>	
18.	None
<b>POLICY FRAMEWORK IMPLICATIONS</b>	
19.	None

<b>KEY DECISION?</b>	<b>No</b>
<b>WARDS/COMMUNITIES AFFECTED:</b>	All
<b><u>SUPPORTING DOCUMENTATION</u></b>	
<b>Appendices</b>	
1.	Health and Wellbeing Strategy Scorecard
<b>Documents In Members' Rooms</b>	
1.	None
<b>Equality Impact Assessment</b>	
<b>Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out.</b>	<b>No</b>
<b>Data Protection Impact Assessment</b>	
<b>Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out.</b>	<b>No</b>
<b>Other Background Documents</b>	
<b>Other Background documents available for inspection at:</b>	
<b>Title of Background Paper(s)</b>	<b>Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)</b>
1.	None

