

HEALTH AND WELLBEING BOARD 23 JUNE 2022

Report title: Joint Strategic Needs Assessment 'The Health Profile for Lambeth' 2022 refresh – Emerging Findings

Wards: All

Portfolio: Cabinet Member for Healthier Communities, Councillors Jim Dickson and Marica Cameron (Job Share)

Report Authorised by: Andrew Eyres: Strategic Director of Adults and Health

Contact for enquiries: James Crompton, Head of Health Intelligence, 020 7926 4322
jcrompton@lambeth.gov.uk, Hiten Dodhia Public Health Consultant, 020 7926 5166
hdodhia@lambeth.gov.uk

REPORT SUMMARY

The Health and Social Care Act 2012 placed a statutory responsibility on Health and Wellbeing Boards to produce a Joint Strategic Needs Assessment (JSNA) which identifies the current and future health and wellbeing needs to its population. The Joint Health and Wellbeing Strategy should be based on the needs identified in the JSNA. The Covid-19 pandemic led to a delay in the publication of the JSNA in Lambeth and many of these areas were put on hold. The Health Profile for Lambeth is the first part of a refresh which will be continued throughout the 2022-23 financial year. This paper will describe the interim findings of the refreshed 'The Health Profile for Lambeth' 2022.

FINANCE SUMMARY

None arising from this report.

RECOMMENDATIONS

1. To review the health profile for Lambeth 2022.
2. To ensure that the Joint Strategic Needs Assessment underpins the work of the Health and Wellbeing Board and shapes the development of the Health and Wellbeing Strategy.
3. To contribute to the production of the Joint Strategic Needs Assessment to ensure all partners are working collectively in Lambeth using the same intelligence to support joint decision making.

1. CONTEXT

- 1.1 The Health and Social Care Act 2012 placed a statutory duty on local authorities and Clinical Commissioning Groups to assess the current and future health, care and wellbeing needs of the local community to inform local decision making. The Act introduced duties and powers for Health and Wellbeing boards in relation to Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies.
- 1.2 The JSNA is an assessment of the current and future projected health and care needs of the local population. It is systematic review of the health and wellbeing needs of the local population, informing local priorities, policies, and strategies that in turn informs local commissioning and service planning to improve health and wellbeing outcomes and reduce inequalities throughout the Borough. These are needs that could be reasonably be met by the local authority, the local Clinical Commissioning Group (CCG) and NHS England.
- 1.3 A JSNA provides population health intelligence to understand the needs of the population, as well as smaller population groups within it. It assesses current and future health, care and wellbeing needs of the local community to inform local decision making. This includes wider social factors that have an impact on people's health and wellbeing, such as housing, poverty, and employment as well as a focus on behaviours which affect health such as smoking, diet and exercise. It provides a common view of health and care needs for the local community, identifies health inequalities, and provides evidence of effectiveness for different health and care interventions. It can also identify gaps in health and care services, document unmet needs and identify priority areas or key challenges for different areas.
- 1.4 Information from both national and local sources including a range of organisations such as the Council, local and regional health partners is collected and collated to inform the JSNA. A key factor in its production is that all partners and sectors engage in its production to ensure that the evidence base is used to improve the health and wellbeing and outcomes of Lambeth's residents. A key factor that can also be considered as part of Joint Strategic Needs Assessment development is to develop it as a 'single source of truth' where all partners working collectively in Lambeth access and use the same insight to support joint decision making.
- 1.5 Lambeth's focus on communities is not just about identifying data and needs at local levels, it's also about asset-based approach. To reflect this, there is a need to re-balance and to routinely include community voices in the JSNA by actively involving more partners in co-production.
- 1.6 JSNAs are flexible ongoing process which enable local areas to focus on the priorities and present information in the way most relevant to them. JSNA documents in Lambeth include:
 - The Health Profile for Lambeth which looks at the overall pattern of health and care needs in Lambeth.
 - Factsheets which focus on specific topics to build a more detailed understanding.
 - Detailed needs assessments and health equity audits on specific priority topics.
 - Research questions and specific workstreams.
 - Outcomes review of the public health framework.
 - Maintaining knowledge management of available resources.

2. PROPOSAL AND REASONS

- 2.1 The Health Profile for Lambeth (HPfL) will provide a broad picture of health and wellbeing in Lambeth today.
- 2.2 The work to refresh HPfL brings together Office for Health Improvement and Disparities (OHID) data and knowledge with information from other sources to give a broad picture of the health and wellbeing of people in Lambeth today. The 2022 edition of the HPfL provides a comprehensive snapshot of the Boroughs health. It will also contain a summary of the impact of the coronavirus (COVID-19) pandemic on many aspects of health.
- 2.3 During the pandemic, OHID has been publishing information on its impacts on health in a series of tools and outputs including
 1. the COVID-19 dashboard;
 2. the COVID-19 Health Inequalities Monitoring for England tool (CHIME);
 3. the Wider Impacts of COVID-19 on Health (WICH) monitoring tool; and
 4. the weekly Excess Mortality in England reports

The information and insight gained from these tools are used, with other sources, as a basis for discussion of the impact of the pandemic on wider health outcomes and health inequalities.

- 2.4 This report is divided into the following sections:

- Population
- COVID-19
- Mortality and life expectancy
- Child health
- Adult health
- Risk factors associated with ill health
- The wider determinants of health
- Health protection

Summary points are included at the beginning of each section, followed by detailed analysis and charts. The data and evidence in the report are provided to support policy makers and practitioners, to inform health improvement activities and support a reduction in health inequalities in their policy areas.

3. FINANCE

- 3.1 There are no financial implications arising from this report.

4. LEGAL AND DEMOCRACY

- 4.1 Under the Health and Social Care Act 2012, local Health and Wellbeing Boards are responsible for producing the Joint Strategic Needs Assessment with partners required to collaborate to understand their local community's needs, agree priorities and encourage organisations to work in a more joined up way.
- 4.2 There were no additional comments from Democratic Services.

5. CONSULTATION AND CO-PRODUCTION

- 5.1 Stakeholder voice is a key component of the Joint Strategic Needs Assessment. Engagement work is carried out as part of programmes of work when developing new insight to support evidence-based decision making.
- 5.2 A JSNA operations group meets monthly to develop, direct and oversee the ongoing updating, production of and dissemination of the Lambeth Joint Strategic Needs Assessment (JSNA), on behalf of the Staying Healthy Programme Board. Membership is wide and includes council departments, Lambeth together alliances and Health Watch.

6. RISK MANAGEMENT

- 6.1 The following risks will need to be managed:
- a) The JSNA is a key part of the evidence base for development of a Health and Wellbeing Strategy. There is a risk that this will not be optimised. There is a risk of failing to comply with the statutory duty to produce the Joint Strategic Needs Assessment.

Table 1 – Risk Register

Item	Risk	Likelihood	Impact	Score	Control Measures
1	JSNA not supporting development of a Health and Wellbeing Strategy	1	4	4	Scheduled meetings with council officer leading on Health and Wellbeing Strategy
2	Risk of failing to comply with the statutory duty to produce the JSNA	1	4	4	The JSNA is a continuous process, JSNA materials from previous refreshes are available via the JSNA website

Key

Likelihood	Very Likely = 4	Likely = 3	Unlikely = 2	Very Unlikely = 1
Impact	Major = 8	Serious = 4	Significant = 2	Minor = 1

7. EQUALITIES IMPACT ASSESSMENT

- 7.1 An Equalities Impact Assessment has not been completed as the report is for information. All Lambeth Public Health activities have an impact on equalities – where possible these seek to narrow the gap in the experience of health outcomes and we strive to measure this in all our work programmes. Through Covid-19 we have tried as far as possible to report data on ethnicity routinely as part of our assessment of the pandemic and its impact on our residents. Whilst some of this information is not able to be shared publicly due to the context of disclosure we do use it to inform how we deliver our work programme.

8. COMMUNITY SAFETY

- 8.1 Not applicable

9. ORGANISATIONAL IMPLICATIONS

Environmental

- 9.1 Not applicable.

Health

9.2 Covered in the body of the report.

Corporate Parenting

9.3 Not applicable.

Staffing and accommodation

9.4 Not applicable.

Responsible Procurement

9.5 Not applicable.

10. TIMETABLE FOR COMPLETION

Chapter	Status	Expected Completion
Population	In progress	June 2022
COVID-19	Not Started	July 2022
Mortality and life expectancy	Complete	Complete
Child health	In progress	June 2022
Adult health	Complete	Complete
Risk factors associated with ill health	Complete	Complete
The wider determinants of health	In progress	June 2022
Health protection	Not Started	June 2022

AUDIT TRAIL

Name and Position/Title	Lambeth Directorate	Date Sent	Date Received	Comments in paragraph:
Councillors Jim Dickson and Marcia Cameron Caldicott	Cabinet Member for Healthier Communities (Job Share)	01.06.22	dd.mm.yy	
Andrew Eyres, Strategic Director	Adults and Health	01.06.22	dd.mm.yy	
Ruth Hutt	Director of Public Health	01.06.22		
Peter Hesketh, Finance	Finance and Property	01.06.22	dd.mm.yy	
Andrew Pavlou, Legal Services	Legal and Governance	01.06.22	dd.mm.yy	
Julia Skinner, Democratic Services	Legal and Governance	01.06.22	07.06.22	

REPORT HISTORY

Original discussion with Cabinet Member	
Report deadline	10.06.22
Date final report sent	10.06.22
Part II Exempt from Disclosure/confidential accompanying report?	No
Key decision report	No
Date first appeared on forward plan	Not applicable
Key decision reasons	Not applicable.
Background information	Health and Social Care Act 2012 replaced now by the Health and Care Act 2022 Covid-19 Dashboard Covid-19 Health Inequalities Monitoring Tool Wider impacts of Covid-19 on health monitoring tool Weekly excess mortality in England
Appendices	Appendix A: