

Joint Strategic Needs Assessment

Health and Wellbeing Together Board
13 March 2024

Presenters:

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What we are going to cover

- What the JSNA is - statutory duty for Health and Wellbeing Boards.
- What the new JSNA looks like.
- Introduce the concept of a culturally responsive JSNA.
- What we need, in order to develop our JSNA into a more culturally responsive JSNA.
- The next steps for the JSNA.

“JSNAs will be the means by which local leaders work together to understand and agree the needs of all local people, with the joint health and wellbeing strategy setting the priorities for collective action. Taken together they will be the pillars of local decision-making, focussing leaders on the priorities for action and providing the evidence base for decisions about local services.”

Department of Health, 2011

Joint Strategic Needs Assessment

- The Joint Strategic Needs Assessment (JSNA) has been refreshed and updated to better support the Council, wider health and care system and to provide the evidence base to support decision making to improve the health and wellbeing of the population and reduce inequalities.
 - Considered to be the ‘go to’ for local Health and Wellbeing Intelligence in Wolverhampton.
 - Aim is to add meaning and impact to the data
 - Establish evidence as the standard (to inform local strategies)
 - To identify priorities (for further detailed intelligence analysis and evaluation)
 - Collaboration and cross working (system wide approach - Health data, ASC, Childrens, Education, Economy)

Joint Strategic Needs Assessment

- The Joint Strategic Needs Assessment (JSNA) is formed of two key elements:
 - Overview Dashboard
 - Topic Specific Needs Assessments
- Hosted on WVInsight pages.
- Made available to the Public following presentation to the Health and Wellbeing Together Board.
- This will be a live document, with a quarterly review process.

Overview Dashboard

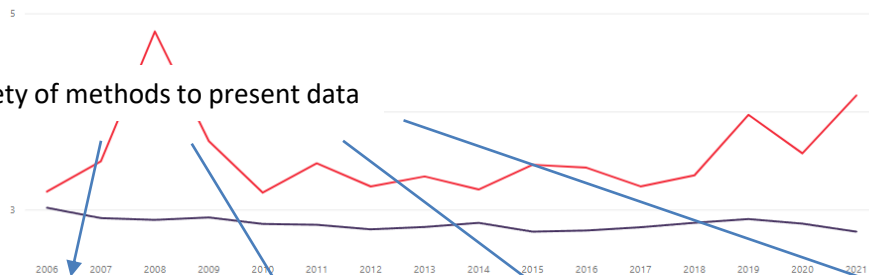
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Low Birth Weight

Last Updated
Dec 04, 2023

Comparing the % Low birth weight in Wolverhampton and England

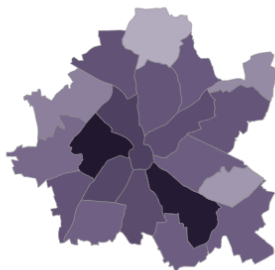
Area Name ● England ● Wolverhampton



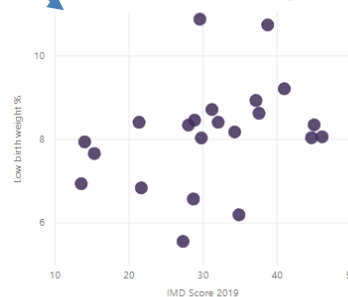
Using a variety of methods to present data

Year	Count	% Value
2006	93	3.18
2007	106	3.49
2008	146	4.82
2009	112	3.70
2010	100	3.17
2011	115	3.47
2012	103	3.23
2013	105	3.34
2014	100	3.20
2015	106	3.46
2016	109	3.43
2017	105	3.24
2018	102	3.35
2019	119	3.97
2020	106	3.57
2021	123	4.16

% Low birth weights 2016-2020



First 10 Area Name by IMD Score 2019 and Low birth weight %



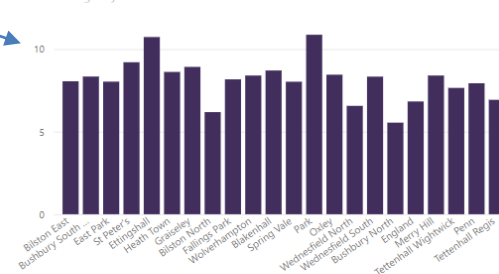
Low birth weight increases the risk of childhood mortality and of developmental problems for the child and is associated with poor health in later life.

Low birth weight defined as: Live births with a recorded birth weight under 2500g and a gestational age of at least 37 complete weeks as a percentage of all live births.

Since 2007 Wolverhampton's low birth weight has been consistently, statistically higher than the average value for England. It saw a peak in 2008, then had been consistent until 2018 when the value for Wolverhampton started to move further from the national average.

Text to describe the topic or indicators being presented

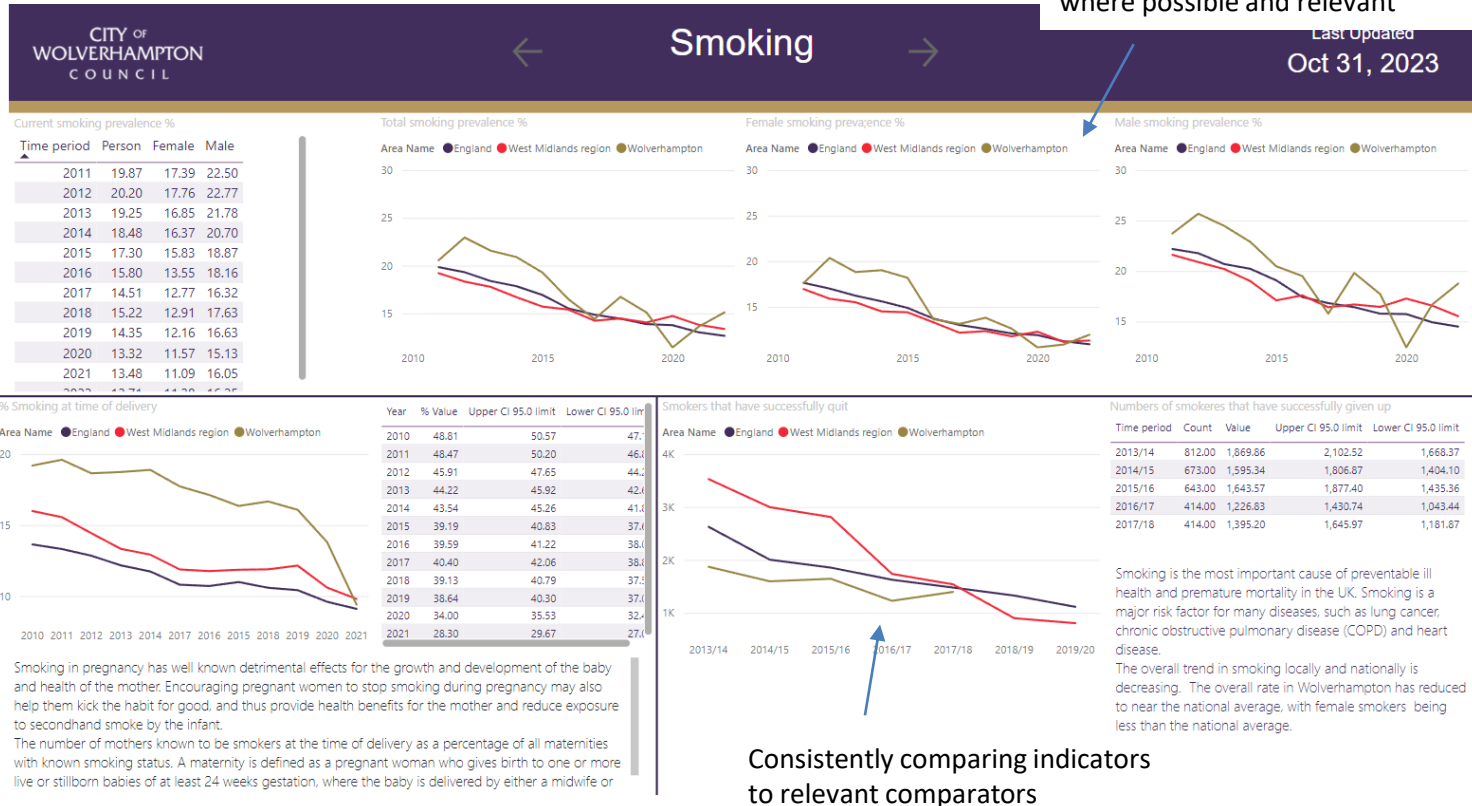
Low birth weight by area 2016-2020



Public Health Fingertips - Low birth weight of term babies 2021

Overview Dashboard

Including a breakdown by demographics where possible and relevant



Overview Dashboard

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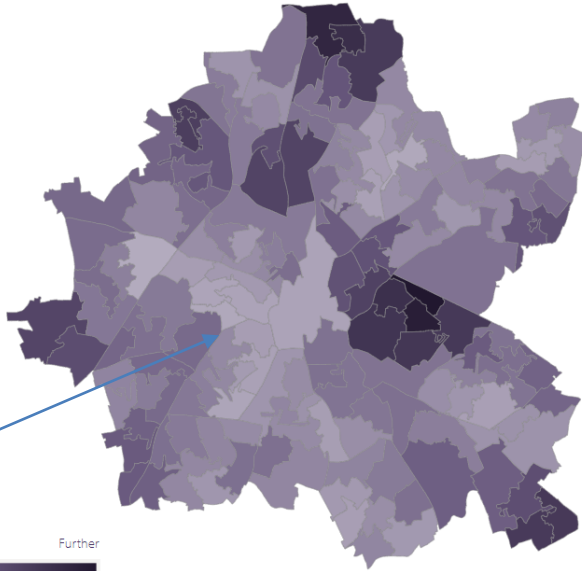


Assets and Hazards



Last Updated
13 Feb 2024

Asset Hazard Score map at LSOA



Innovative Dataset:
Assets and Hazards Dataset



Attribute

Distance to nearest Dentist (minutes)

Ward Name

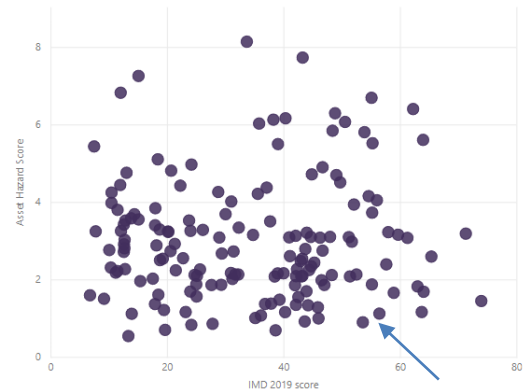
All

Clear all slicers

0.53

87.80

Asset Hazard Score against IMD 2019 Score



Linking in Deprivation, where possible and relevant

Topic Specific Needs Assessments

- Topic Specific Needs Assessments are reports that detail a much deeper analysis of a topic area:
 - Quantitative
 - Qualitative
 - Research and Evidence
- Build a compendium of our needs assessments, evidence reviews and deep dives.

Adult Mental Health Topic Specific JSNA:

Gambling Topic Specific JSNA:

All Age Suicide Prevention Needs Assessment:

Homeless Health Needs Audit:

Ill health can be both a cause and consequence of homelessness. People experiencing homelessness often face some of the most significant health inequalities of all, with average life expectancy around 30 years lower than that of the general population.

To help people sustain stable accommodation, more action is required to enable better integration of health and social care, and to help people access the healthcare services they require.

The HHNA recognises the importance of gaining a deeper understanding of the barriers that people experiencing homelessness may face in accessing services, as well as how equipped healthcare services are to work with people who are experiencing often complex, interacting social and health challenges.

The key recommendations for the local health and social care system are:

- Agree an all-partner commitment to undertake the NG214 - Integrated health and social care for people experiencing homelessness self-assessment to identify good practice and respond to areas for further development.
- Consider the introduction of an integrated commissioning response involving health, social care and accommodation services, informed by people with lived experiences of homelessness.
- Establish a Wolverhampton Health Inclusion steering group (or equivalent) as a subgroup of the One Wolverhampton and Homelessness Prevention strategy governance structures.

Related Documents:

Wolverhampton Homeless Health Needs Audit 2023 - Full Report FINAL v1.0.pdf

Homeless Health Needs Audit 2023 - Summary.pdf

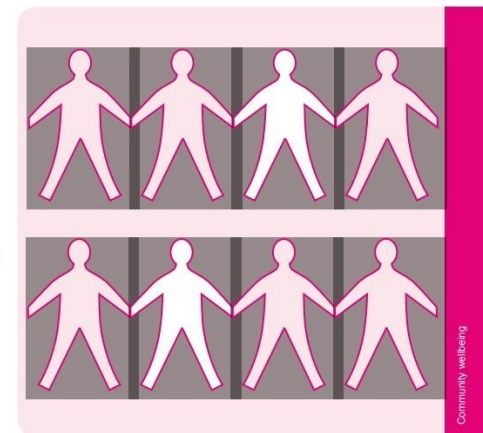
Perinatal Mental Health Needs Assessment:

Healthy Related Behaviour Survey 2023 - Emotional Health and Wellbeing:

Children and Young People's Emotional and Mental Needs Assessment:

Culturally Responsive JSNAs

- 2009 LGA report exploring
 - ethnic diversity and race equality in JSNAs
 - how to ensure JSNAs are 'culturally responsive'
- JSNA race equality framework >> **JSNA health equity framework**
 - Used to benchmark JSNAs
 - Updated: culturally responsive >> **equalities responsive**
 - Expanded beyond ethnicity to include other equality characteristics (sex, religion, language, migration status, gender identity, sexual orientation, disability)



Culturally responsive JSNAs:
a review of race equality and Joint Strategic Needs Assessment (JSNA) practice

JSNA health equity framework

	DEVELOPING	ACHIEVING	EXCELLING
1. Presentation of data	Core data	<ul style="list-style-type: none"> Ethnicity and equalities data in other data points + service data Data development 	<ul style="list-style-type: none"> Local data Equality mapping (compares across equalities characteristics) Engagement data (qualitative)
2. Analysis of need	Statement of consideration	<ul style="list-style-type: none"> Consideration of need Equality proofing (assessment of service capacity vs. diverse need) Uses different data 	<ul style="list-style-type: none"> Rationale for prioritisation Use of consultation Consideration of equality issues Community strengths and assets
3. Identification of action	No action proposed	<ul style="list-style-type: none"> Actions proposed Equality proofing (e.g. use of EIAs) 	<ul style="list-style-type: none"> Analysis of evidence of effectiveness Tangible goals

4. Process

Benchmarking

	DEVELOPING	ACHIEVING	EXCELLING
1. Presentation of data			
2. Analysis of need			
3. Identification of action			

Need for all HWBT partners to share relevant data

How to include qualitative data in JSNA dashboard?

Done well in the topic specific reports but how to include this in JSNA dashboard?

Can we equality proof our JSNA actions and recommendations?

How do we reflect our community involvement in the JSNA dashboard?

Can we link in with JHWS?

4. Process

Useful report findings

- “**all JSNAs can be ‘culturally responsive’** regardless of the demographic profile of the community they describe.”
- **There isn’t a “single definable approach** that produces the most culturally responsive JSNA.”
- Areas that “developed the **more culturally responsive JSNAs had worked with communities and stakeholders**, aligned strategies and were leading purposefully.”
- “**in depth assessments are not a precondition for culturally responsive JSNAs**, although they are helpful.”

What is the ambition and next steps?

- Our ambition for the JSNA is for it to continuously develop, include more data and intelligence that can further highlight inequalities across the City.
- To enable us to do this, we need access to more granular data from wider partners across the City. Improved recording of data by services across wider partners in the City.
- For the JSNA to be collectively owned by the partners across the Health and Wellbeing Board to ensure it remains fit for use and to make it more culturally responsive.
- Raise prominence on WVInsight making it easier to access and find and incorporating all health information in one place.

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