

## Somerset: Our County Joint Strategic Needs Assessment 2017

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### 1. Summary

#### 1.1. Summary and Purpose of Paper

Production of a Joint Strategic Needs Assessment is a statutory duty for Health and Wellbeing Boards (HWB). The assessment presents evidence on the scale and nature of the population's health and care needs, and likely future need, to inform decision making by the Board and its members. The bulk of the information is published as a website at [www.somersetintelligence.org.uk/jsna](http://www.somersetintelligence.org.uk/jsna). An annual summary is also produced, usually concentrating on a cross-cutting issue or population group in the county. The draft annual report for 2017, appended here, has a focus on ageing well. It looks at the health, social care and wellbeing needs of the population aged over 65 and is complemented by a qualitative report detailing personal experience and attitudes to ageing well.

1.2. The report is produced collaboratively by the partners on the Health and Wellbeing Board, and consulted upon widely to assess whether it is presenting a useful and realistic picture of need. The Health and Wellbeing Board is formally a committee of the County Council, but also includes members from each district council in Somerset, the Somerset Clinical Commissioning Group and Healthwatch, representing patients' views. The HWB is required to take the findings of the JSNA into account in developing the Health and Wellbeing Strategy. Somerset County Council and CCG are required to take it into account in commissioning decisions.

1.3. Scrutiny is asked to discuss and comment on the report and its findings, and their implications for commissioning services. Scrutiny's comments will be taken into account in the final draft and passed through to the Health and Well-being Board for consideration before the JSNA is approved.

1.4. This JSNA supports the County Plan's objectives, specifically:

- 'Health inequalities, where people from deprived backgrounds have poorer health, are more likely to live with long term conditions, and have a shorter lifespan than people living in more affluent areas'
- and
- 'Joining up our own social services with those services provided by the NHS. The aim is to improve results for individuals and families, but importantly to do this efficiently to make all our public funding go further.'

- 1.5 The JSNA summary for 2017 has been discussed by the Health and Wellbeing Board in a development session and by the Clinical Operations Group of the Clinical Commissioning Group. It will be taken to the Health and Wellbeing Board for approval on 13<sup>th</sup> July 2017.

## 2. Issues for consideration / Recommendations

- 2.1. The Scrutiny Committee is asked to discuss and comment on the draft JSNA summary 2017 and accompanying qualitative report and the JSNA website (<http://www.somersetintelligence.org.uk/jsna/>) as a source of evidence in its work to inform the health, social care and wellbeing needs of the whole population.
- 2.2. The following themes abstracted from the JSNA summary have particularly important implications for the commissioning of health and care services, and wider policy.

### Remaining healthy

- **Prevention first and foremost** - Nearly half the burden of disease for older people can be attributed to conditions that can be prevented or delayed by changes in lifestyle. The 'usual suspects' - not smoking, drinking responsibly, maintaining good social contacts, eating well and exercising – contribute strongly to ageing well.
- There is **no 'safe age'** before unhealthy activities begin to have an effect, nor an age after which improvements do not help.
- **Inequalities in health are very evident**, with a small number of poorer older people having a disproportionate burden of disease and so increased cost to health and care. A far greater focus on reducing inequalities will improve lives and save public money.

### Remaining independent

- **Good transport** helps independence and social contact in town and the countryside, affordable and sustainable transport solutions are important to keeping older people healthy and well.
- Design and local planning policy has a significant impact on health and independence, particularly for older people seeking appropriate housing solutions without having to move out of their community and away from their social support. **Housing policy** should take health and wellbeing impact into account.
- Formal health and care exist within a wider context of the immediate and extended family, and the voluntary and community sector. **The contribution and needs of family carers** in particular needs greater recognition.

## Remaining active and included in community life

- **Social contact** is an essential part of sustaining health and wellbeing.
- Rewarding and valued **work** is good for health. Employers should recognise the contribution to be made by older workers, including people past current state pension age.
- Supporting **stronger communities** through village agents, town and parish councils and voluntary groups such as Men's Sheds provides a cost effective way to health and wellbeing across all ages.

### 3. Background

- 3.1. Production of the JSNA is a statutory requirement of the Health and Wellbeing Board, as stated in the Health and Social Care Act (2012).

### 4. Consultations undertaken

- 4.1. A specific piece of qualitative work was undertaken to support this JSNA and provide insight and experience regarding ageing well. The results have been shared with participants for comment and are summarised in a separate report to compliment the JSNA summary. Detail of all the discussions will be linked from the qualitative report on the Somerset Intelligence website once the JSNA has been approved by the Health and Wellbeing Board for publication.
- 4.2. Engagement with stakeholders is maintained through the Health and Wellbeing Board and Executive, commissioners' meetings, JSNA Technical Working Group, Healthwatch Somerset Executive Group, CCG Engagement Advisory Group and CCG Equality Delivery System Group.
- 4.3. Feedback on the JSNA is continually sought through the JSNA webpages and meetings with commissioners, stakeholders and broader audiences such as those in the voluntary sector.

### 5. Implications

- 5.1. The Department of Health (DH) guidance suggests that commissioning plans of CCGs, NHS England and local authorities will be expected to be informed by relevant JSNAs and the health and wellbeing strategy. Where plans are not in line, the organisations could potentially be asked to explain why. The policy intention as cited by the DH is that *"local services which impact upon health and wellbeing will be based on evidence of local health and wellbeing needs and assets, including the views of the community; meaning that services and the way in which they are provided meet local needs"*.
- 5.2. The JSNA pays due regard to protected groups to identify health and social inequalities within the Somerset population.

## **6. Background papers**

- 6.1.** Appendix A - Somerset: Our County JSNA Summary 2017 Ageing Well  
Appendix B - Ageing Well – qualitative report

Somerset's Health and Wellbeing Strategy and Somerset's County Plan