

Item No.	Classification: Open	Date: 7 March 2022	Decision Taker: Health and Wellbeing Board
Report title:		JSNA Programme Update	
Ward(s) or groups affected:		All	
From:		Sangeeta Leahy - Director of Public Health	

RECOMMENDATION(S)

1. The board note the findings of the State of the Borough report, and agree an annual update.
2. The board note the population groups and communities identified with the poorest outcomes.
3. The board note and agree the JSNA projects recommended for 2022/23.

BACKGROUND INFORMATION

4. Joint Strategic Needs Assessment (JSNA) is a process designed to inform and underpin the Joint Health and Wellbeing Strategy (JHWS) by identifying areas of unmet need, both now and into the future. It is a statutory requirement for Local Authorities and their partners (under both the Health and Social Care Act 2012 and the Local Government and Public Involvement in Health Act 2007 s116 and s116A).
5. 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 to be included.
6. In Southwark, prior to the COVID-19 pandemic we had an annual work programme for the JSNA that aligned to four themes, ensuring it covered the breadth of issues affecting health and wellbeing:
 - Domain 1 - population groups
 - Domain 2 - behaviours and risk factors
 - Domain 3 - wider determinants of health
 - Domain 4 - health conditions and healthcare
7. This report has two main objectives:
 - To update the board on the State of the Borough report, undertaken as part of the JSNA programme.
 - To outline next steps for the JSNA.

KEY ISSUES FOR CONSIDERATION

State of the Borough Report

8. The State of the Borough report provides an update on health and wellbeing in Southwark. It seeks to provide an analysis of our population, along with details of the health inequalities that exist in the borough.
9. The report forms part of the borough's Joint Strategic Needs Assessment (JSNA) work programme, and informs the Joint Health & Wellbeing Strategy (JHWS) and it is envisaged other local action to improve health and wellbeing in Southwark.
10. Across the borough there have been significant improvements in health and wellbeing in recent years, and there are many areas of success that should be celebrated:
 - Our residents are living longer and healthier lives than ever before, with life expectancy comparable or better than the national average.
 - Levels of relative deprivation in the borough continue to reduce.
 - Around 9 in 10 children in Southwark achieve a good level of development at 2-2^{1/2} years.
 - Key risk factors such as smoking, alcohol and physical inactivity are comparable or better than the national average.
 - Preventable mortality has reduced by almost half since 2001, narrowing the gap with England.
11. Southwark also benefits from a wide range of social and physical assets that help our communities to maintain and sustain good health and wellbeing, from our extensive network of community, voluntary and faith organisations through to our libraries, leisure centres, parks and green spaces.
12. Although there have been substantial improvements in health outcomes in Southwark, many challenges remain. The COVID-19 pandemic has exposed and exacerbated the inequalities that too many people experience. These inequalities are both avoidable and unfair.
13. Across a wide range of health, social and economic measures, from child poverty through to obesity, hospital admissions and life expectancy, outcomes are poorer in central and northern parts of Southwark. In particular, communities in Faraday and Peckham wards. However, it is important to acknowledge that pockets of deprivation also exist within areas of affluence.
14. There are also significant gaps in outcomes between population groups in Southwark. These often mirror the inequalities we see at a national level, with those from Black, Asian and minority ethnic groups experiencing poorer outcomes compared to those from a White ethnic background. In particular, residents from a Black African and Black Caribbean

background are more likely to live in communities with high levels of deprivation, develop a greater number of long-term conditions, have poorer mental health, and experience discrimination and racism when accessing services.

15. It is estimated that Southwark has one of the largest LGBTQI+ communities in the country. There is increasing academic evidence that key public health challenges disproportionately impact this population group, with higher levels of smoking, alcohol use, incidence of some cancers and mental ill-health. LGBTQI+ individuals also experience discrimination and homophobia when accessing health, care and other services.
16. As we plan interventions, services and strategies to improve outcomes and reduce inequalities within the borough it is important to consider how different demographic and social characteristics overlap and intersect, magnifying disadvantage.

JSNA Programme

17. A number of projects are currently underway as part of the JSNA programme:

- Air Quality Needs Assessment
- Severe & Multiple Disadvantage Needs Assessment

On completion, summaries of these reports will be shared with the board, with the full documents placed on the JSNA webpages.

18. In addition to the projects currently underway it is recommended the JSNA programme focuses on a number of areas over the coming year, including:

- **Pharmaceutical Needs Assessment.** This is a statutory requirement of the Health & Wellbeing Board and is required to be published by October 2022.
- **Analysis of 2021 Census.** Results of the Census will start to be released from the summer, with data being released over an 18-month period. This data will give a rich understanding of the changing demography and social determinants of health, along with intersectionality within key groups from ethnic minorities to sexual orientation.
- **Cancer Screening.** Previous local needs assessments published in 2018 and 2019 highlighted significant inequalities in coverage, particularly among residents from an ethnic minority background. National research has pointed to a significant fall in cancer screening as a result of the pandemic. Recovery of cancer screening programmes will be a key area of work over the coming years.
- **Special Educational Needs & Disabilities.** This group experiences significantly poorer health outcomes than the general population. The last needs assessment on this was published in 2018, and colleagues in Education welcome a refresh of this work.

Policy framework implications

19. The JSNA process should underpin the development of the Joint Health & Wellbeing Strategy of the Health & Wellbeing Board and other local plans and policies designed to improve health and wellbeing in the borough.
20. The JSNA should inform plans of borough the Council and NHS partners, including the emerging South East London Integrated Care System.

Community, equalities (including socio-economic) and health impacts

Community impact statement

21. Lead authors for each JSNA project included within the future programme are encouraged to engage with partners, community and voluntary organisations, and residents in the development of their reports.

Equalities (including socio-economic) impact statement

22. A key component to the JSNA programme is to develop our understanding of health inequalities in the borough. All JSNA reports consider how different population groups and communities are affected by the issue being considered. This includes the protected characteristics outlined in the Equality Act 2010, along with other factors such as socio-economic status.

Health impact statement

23. The JSNA programme is designed to consider the direct and indirect influences on health and wellbeing in the borough i.e. health and its wider determinants.

Climate change implications

24. The JSNA programme will include work assessing the wider determinants of health, including environmental impacts e.g. air quality.

Resource implications

25. The JSNA is undertaken in-house and led by the Public Health division on behalf of the Health & Wellbeing Board. While the majority of the resource for producing the JSNA will come from within Public Health, co-production is an important aspect to the development of JSNA projects. There is an expectation that partners will play an active role in the development of projects within their area of expertise. Through this co-production process the JSNA can better reflect the local picture and ensure recommendations for future action have the support of all partners.

Legal implications

26. Local authorities and clinical commissioning groups (CCGs) have equal and joint duties to prepare the Joint Strategic Needs Assessment, through the Health & Wellbeing Board, outlined in the Health and Social Care Act 2012.

Financial implications

27. There are no financial implications. The JSNA programme delivered in-house, led by the Public Health division with contributions from partners.

Consultation

28. The JSNA work programme will be developed following the engagement of key partners across Southwark Council, NHS and other partners. Lead authors for each project included within the programme are encouraged to engage with partners and residents in the development of their reports.

SUPPLEMENTARY ADVICE FROM OTHER OFFICERS

Director of Law and Governance

29. None sought.

Strategic Director of Finance and Governance

30. None sought.

Other officers

31. None sought.

REASONS FOR LATENESS

32. The report was unavailable at initial circulation of meeting papers due to annual leave of the report author.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
JSNA Programme Update	Public Health Division, Environment & Leisure.	Chris Williamson 02075251774

APPENDICES

No.	Title
Appendix 1	State of the Borough Report 2022

AUDIT TRAIL

Lead Officer	Sangeeta Leahy		
Report Author	Chris Williamson		
Version	1.0		
Dated	9 February 2022		
Key Decision?	No		
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER			
Officer Title	Comments Sought	Comments Included	
Director of Law and Governance	No	No	
Strategic Director of Finance and Governance	No	No	
Cabinet Member	No	No	
Date final report sent to Constitutional Team	23 September 2021		