

**Wiltshire Council**

**Cabinet**

**22 January 2013**

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**Subject: Wiltshire's Joint Strategic Assessment for Health and Wellbeing 2012/13**

**Cabinet member: Councillor Keith Humphries – Public Health and Public Protection**

**Key Decision: No**

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**Executive Summary**

To update the committee on the production of Wiltshire's Joint Strategic Assessment for Health and Wellbeing 2012/13 and the priorities which have been recommended

**Documents included:**

- The main report is available to download here: [www.tinyurl.com/hwjsa999](http://www.tinyurl.com/hwjsa999)
- A hard copy of the report will also be provided with Cabinet papers
- A 2-page Executive Briefing is included in Appendix A of this paper

**Proposal(s)**

Cabinet is asked to note the production of the 2012/13 JSA report and supporting documents and endorse its use in commissioning and strategy preparation, including the Joint Health and Wellbeing Strategy.

**Reason for Proposal**

The JSA programme is the mechanism of understanding our local population through the assessment of intelligence and information.

Our strategies and plans need to be evidenced based, our evidence base is the JSA programme. This JSA provides the evidence base for all health and wellbeing related strategies and plans.

**Maggie Rae**

**Corporate Director of Public Health and Public Protection  
NHS Wiltshire and Wiltshire Council**

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### **1. Purpose of Report**

The purpose of this paper is to update the committee on the production of Wiltshire's Joint Strategic Assessment for Health and Wellbeing 2012/13. This report forms part of the wider JSA programme which is the mechanism of understanding our local population through the assessment of intelligence and information.

### **2. Background**

The overall Joint Strategic Assessment for Wiltshire contains a summary of the main issues for Wiltshire across a range of themes. It is a needs assessment of strategic issues and priorities for Wiltshire for the next three years, and represents a 'single version of the truth' for the county. The JSA is a milestone in our journey to establish a full and agreed understanding of the needs of the local population. In addition to the overall JSA individual thematic chapters support the overall document providing detailed analysis of these issues and many more.

There is a statutory requirement for Health and Wellbeing Boards to produce a Joint Strategic Needs Assessment (JSNA) which must describe the current and future health and wellbeing needs of the people of Wiltshire. We have chosen this JSA to serve as Wiltshire's JSNA.

### **3. Introduction**

This JSA (2012/13) provides a summary of the current and future health and wellbeing needs of people in Wiltshire. It has been developed with a clear ambition to further improve the scope and quality of our data, centred on transforming data into knowledge and knowledge into wisdom to provide a comprehensive picture of local needs.

This JSA has emerged as the assessment tool on which all commissioning decisions for the county are based. As such, it covers a breadth of topics focusing from health and social needs to wider factors affecting the wellbeing of our community. Such topics include climate change and the economy, recognising the dynamic nature of health and well-being and the factors that influence it. The role of this JSA includes providing knowledge of such influences in order to enable timely commissioning

decisions to build resilient communities for Wiltshire. This JSA provides an opportunity to look ahead three to five years so that:

- inequalities within our population are reduced,
- services are shaped by local communities,
- social inclusion is increased,
- the above outcomes are maximised at minimum cost.

This year's work has been made possible through further consolidating and expanding a strong partnership of collaborative working between local partners. This 2012/13 JSA was comprehensively re-designed and re-written in summer/autumn 2012.

This assessment comes at a time when the NHS is being reorganised. Wiltshire Primary Care Trust (PCT) will be disbanded at the end of March 2013 and public health responsibilities will transfer from PCTs to local authorities, whilst Wiltshire Clinical Commissioning Group (CCG) will take on new commissioning powers. This JSA will continue to be key report for future commissioning decisions and for the new Health and Wellbeing Board.

The shadow health and wellbeing board is responsible for approving the document. The report will be presented to the shadow Health and Wellbeing Board, Wiltshire Clinical Commissioning Group and Cabinet in January 2013.

#### **4. Main Considerations for the Council**

##### **2012/13 JSA health and wellbeing summary**

The 2012/13 suite of documents mark a step-change in the quality and quantity of information, data and intelligence provided under the auspices of this JSA.

The 2012/13 version concentrates on the key facts and key messages along with a focus on 'topic reports', which are areas identified as benefiting from new research or collation of existing knowledge. In order to continue to provide the breadth and depth of information required, the Wiltshire Intelligence Network website ([www.intelligencenetwork.org.uk](http://www.intelligencenetwork.org.uk)) has been utilised to host over 1,000 pages of supporting assessments, briefings and resources presented in an accessible way.

The new approach allows for greater flexibility, inclusiveness and scalability. It also allows for stakeholders to help shape the agenda and enables all intelligence, data and resources that are captured, to be used.

The main report is a reference resource and is not designed to be read cover to cover in one go. It relies on extensive signposting to guide readers to their areas of interest and links related topics together to enable information to be presented once but discovered from a variety of start points.

A concise information sheet (executive briefing) has been produced which provides a two page guide on this JSA and can be found in Appendix A

As well as the topic reports and briefings on all the major areas of health and wellbeing the JSA documents detail the indicators from a number of outcomes frameworks relevant to the subject.

This JSA also contains resources to inform the reader about the reference materials that underpin the analyses and perform a vital role in helping transform raw data into intelligence. These include information on geographical boundaries, Mosaic, deprivation, primary research (surveys), statistical techniques and the Wiltshire Intelligence network.

The main report is an annual report 'snapshot' and will next be published in 2013/14. However, the supporting briefings will be updated throughout intervening period to keep them up to date and maximise their usefulness. New topic reports for 2013/14 will also be chosen to reflect stakeholder priorities and evidence gaps.

### **Main changes for the 2012/13 reports**

Since the 2011/12 JSA there have been a number of significant enhancements which include:-

- Extensive signposting to more information on the Wiltshire Intelligence Network.
- Topic reports on:
  - Aging population
  - Health inequalities
  - Complex or vulnerable families
  - Projecting the future burden of disease
  - Reducing long term social care/care home placements
  - Mental health
  - Men's health
  - Health and wellbeing benefits of access to nature
- A further 70 section briefings covering every aspect of health and wellbeing in Wiltshire.
- A resources section providing information on maps, deprivation, statistics, finance, surveys, Outcomes Frameworks and Mosaic.
- A larger range of contributors from different agencies and topic themes.

### **Key issues in 2012/13**

The overall JSA for Wiltshire 2012/13 contains 5 agreed key issues for Wiltshire.

- Identifying and supporting complex and vulnerable families.
- Reducing the harms associated with alcohol and drug misuse.
- Supporting increasing numbers of people with long term health conditions to manage their conditions.
- Improving people's mental health and emotional wellbeing.
- Reducing the number of long term care home placements.

This JSA also highlights these 5 issues along with ones for each parts of the report. In the section briefings on specific themes, which can be found on the Intelligence

Network website, there are also key challenges identified that are specific to that theme.

### **Joint Health and Wellbeing Strategy (JHWS)**

Healthy Lives Healthy People updates and the way forward published in July 2011 details how Health and wellbeing boards will provide the vehicle for local government to work in partnership with commissioning groups to develop comprehensive Joint Strategic Needs Assessments and robust joint health and wellbeing strategies. The Joint Health and Wellbeing Strategy (JHWS) will in turn set the local framework for commissioning of health care, social care and public health services, and taking into account wider ranging local interventions to support health and wellbeing across the life course (e.g. local planning and leisure policies and working with community safety partnerships and police and crime commissioners).

There are a range of other detailed health needs assessments which will support the creation of the JHWS. These include JSAs for Clinical Commissioning Group localities, which focus in detail on a range of health needs and compare results at CCG and GP practice levels.

### **Improving outcomes**

This JSA is an example of joint working and using evidence based assessment to develop and commission services for local communities and people.

Since the publication of the first JSNA for Wiltshire, there have been improvements in a range of issues and outcomes highlighted within previous assessments. These include:-

- ✓ In 2002-04 life expectancy was 78.4 for males and 82.1 for females, by 2008-10 it improved to 79.6 years for males and 83.7 years for females.
- ✓ In 2005/06 Wiltshire's children had significantly more decayed, missing or filled teeth than in England overall. However, recent figures show that levels of tooth decay in 5 and 12 years olds in Wiltshire are similar or better than the England values.
- ✓ There was a 21% reduction in alcohol related violent crimes for December 2010 to November 2011 compared to the same time period in the previous year.
- ✓ Reducing the teenage conception rate to around 24 per 1,000 females aged 15 to 17.
- ✓ Reducing violent crime – Latest figures from Wiltshire Police indicate a 21% decrease between December 2010 and November 2011 in alcohol-related violent crime.
- ✓ Premature mortality from cardiovascular disease has halved in the past decade to around 290 deaths a year in Wiltshire.
- ✓ The number of people killed or seriously injured in road traffic collisions in Wiltshire fell from a baseline of 389 in 1994-98 to 254 in 2011. However, when turning this into a rate per head of population Wiltshire has a statistically significantly higher rate than England overall.

## **5. Environmental and climate change considerations**

The prevention section of the JSA for health and wellbeing has clear linkages with the existing environmental programme. Health improvement activities such as walking and cycling will have positive impacts on individuals health as well as environmental benefits, for example reducing air pollution through less car use. There are also other links, for example by reducing fuel poverty and increasing access to nature, there will be positive environmental and health benefits. Officers from Public Health and Neighbourhood Planning have recognised the links between health and the environment and will continue to work in partnership to improve health and environmental outcomes for the local population.

## **6. Equalities Impact of the Proposal**

Equality and diversity issues were considered within the Joint Strategic Assessment programme. JSA assessments are in the public domain and the community events are public meetings.

## **7. Risk Assessment**

The JSA programme is dependent on accurate intelligence and the publication is dependent upon the involvement of all thematic delivery partnerships. There are no known current risks associated with this programme.

## **8. Financial Implications**

The JSA programme is delivered within the current financial position. There are no known financial implications.

## **9. Legal Implications**

The Local Government and Public Involvement in Health Act 2007, as amended by the Health and Social Care Act 2012, places a statutory obligation on the Council, in cooperation with its partners, to prepare an assessment of relevant needs within the Council's area. The Joint Strategic Needs Assessment meets this obligation.

## **10. Options Considered**

There is a statutory requirement for Health and Wellbeing Boards to produce a Joint Strategic Needs Assessment (JSNA) which must describe the current and future health and wellbeing needs of the people of Wiltshire. We have chosen the Health and Wellbeing Chapter of the Joint Strategic Assessment to serve as Wiltshire's JSNA. Additionally, Wiltshire Council remains committed to using evidence and intelligence to help shape plans, services and strategies. The timely refresh of this JSA is required to meet this commitment and is part of the overall JSA programme.

## **11. Conclusions**

The Cabinet is asked to note the production of the this report and supporting documents and endorse its use in commissioning and strategy preparation, including the Joint Health and Wellbeing Strategy.

**Maggie Rae**  
**Director of Public Health and Public Protection**  
**NHS Wiltshire and Wiltshire Council**

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January 2013

**Background Papers**

The following unpublished documents have been relied on in the preparation of this report: None

**Appendices**

Appendix A: JSA Health and Wellbeing – Executive Briefing

Appendix B: JSA Health and Wellbeing main report – separate attachment

## Appendix A: JSA health and wellbeing – Executive Briefing



# Wiltshire's Joint Strategic Assessment for Health and Wellbeing 2012/13

## Executive briefing



a single version of the truth



Wiltshire's Health and Wellbeing Board members work together to understand Wiltshire's needs, agree local priorities and encourage those responsible for designing and paying for services to work in a more joined up way. The Joint Strategic Assessment for Health and Wellbeing 2012/13 provides a summary of the current and future health and wellbeing needs of people in Wiltshire. It has been developed with a clear ambition to further improve the scope and quality of our data, centred on transforming data into knowledge and knowledge into wisdom to provide a comprehensive picture of local needs.

The 2012/13 version concentrates on the key facts and key messages along with a focus on 'topic reports', which are areas identified as benefiting from new research or collation of existing disparate knowledge. In order to continue to provide the breadth and depth of information required, the Wiltshire Intelligence Network website ([www.intelligencenetwork.org.uk](http://www.intelligencenetwork.org.uk)) has been utilised to host over 1,000 pages of supporting assessments, briefings and resources presented in an accessible way.

### Key facts for Wiltshire

- The 2011 mid-year population estimate is 474,300 and this is expected to increase to 505,416 in 2021.
- Life expectancy for 2008 to 2010 was 79.6 years for males and 83.7 years for females.
- In 2010/11, 8% of Reception pupils and 16.4% in Year 6 were found to be obese.
- Approximately 60,000 adults are estimated to have a common mental disorder.
- There was a 21% reduction in alcohol related violent crimes for December 2010 to November 2011 compared to the same time period in the previous year.

### Key challenges

- Identifying and supporting complex and vulnerable families.
- Reducing the harms associated with alcohol and drug misuse.
- Supporting increasing numbers of people with long term health conditions to manage their conditions.
- Improving people's mental health and emotional wellbeing.
- Reducing the number of long term care home placements.

The main report of the Joint Strategic Assessment for Health and Wellbeing 2012/13 is available to download from the Intelligence Network: [tinyurl.com/hwj5a999](http://tinyurl.com/hwj5a999)

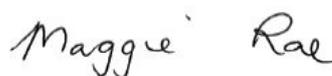
### Topic matrix

<b>DEMOGRAPHICS</b>	Introduction	Age and the ageing population			Gender	Ethnicity		
<b>HEALTH INEQUALITIES</b>	Measuring inequalities	Inequality in access and uptake of health services	Inequality in lifestyles and behaviours	Inequality in outcomes	Minority groups			
<b>CHILDREN AND YOUNG PEOPLE</b>	Complex families and safeguarding children in need		Demographics	Child mortality	Health inequalities	Antenatal, newborn and childhood screening		
	Immunisations	Obesity	Healthy eating and Physical activity	Accidents and injuries	Emotional wellbeing and mental health		Disabilities	
	Sexual health	Smoking	Substance misuse	Dental health	Youth offending	Wider determinants of health		
<b>BURDEN OF ILL-HEALTH</b>	General health	Projecting the future burden of disease	Cancer	Cardiovascular disease	Diabetes	Respiratory disease	Communicable disease	
	Mental health and neurological disorders	Mental health and dementia		Neurological diseases		Autism	Vulnerable adults	
	Disability and conditions effecting older people	Reducing admissions to care homes		Demographics	Physical disability	Sensory impairment	Learning disabilities	
		Rheumatologic and orthopaedic conditions		Falls and bone health	Carers	End of Life care	Long term conditions	
<b>HEALTH PROMOTION AND PREVENTATIVE SERVICES</b>	Men's health	Maternity	Sexual health	Smoking	Alcohol	Drug misuse		
	Domestic abuse		Obesity	Physical activity and healthy eating		Dental health		
	Screening	Vaccination	Pharmaceutical	Needs Assessment		Health Trainers		
<b>WIDER DETERMINANTS OF HEALTH</b>	Health and wellbeing benefits of access to nature	Economy	Community Safety	Housing	Transport	Environment	Arts and culture	
<b>RESOURCES</b>	Geographical boundaries		Deprivation	Mosaic	Primary research		Finance	
	Intelligence network	Outcomes Frameworks		Statistical guide		Glossary and abbreviations		

In the electronic version click on the topic name to open the section briefing or topic report

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