

#### FOR PUBLICATION

#### **DERBYSHIRE COUNTY COUNCIL**

#### DERBYSHIRE HEALTH AND WELLBEING BOARD

13 July 2023

#### **Report of the Director of Public Health**

Update on the Joint Strategic Needs Assessment (JSNA), State of Derbyshire report and development of interim tools.

#### 1. Purpose

1.1 To update the Health and Wellbeing Board (HWB) on the key health and wellbeing insight identified from the interim JSNA.

# 2. Information and analysis

2.1 A JSNA is key to understanding our population and place. Data, intelligence, and insight from the JSNA will support better services and outcomes for people in Derbyshire through the planning and design of services.

The Derbyshire JSNA is being refreshed and redeveloped by the Public Health Knowledge and Intelligence Team (KIT). This programme of transformation is providing new and improved insight into the health and wellbeing of Derbyshire residents. This insight will be summarised in the presentation that will accompany this paper.

This paper will provide an overview of the tools and analyses that are available to HWB members and provide an overview of the annual State of Derbyshire report.

# 2.2 Update on the JSNA transformation

The JSNA transformation started in 2022 and regular updates have been brought to the HWB. Since the last update new interim tools are available that are providing a deeper and more granular understanding of health and wellbeing. This granularity includes district, borough, and wards data. This information has recently been used in the development of the Integrated Care System (ICS) strategy and the planning for the HWB Strategy.

# 2.3 (Interim) JSNA Digital Platform Development

An initial data visualisation platform tool was developed and tested using a PowerBI platform. Due to continued issues with licensing and publishing this platform development has been paused. To overcome these challenges a temporary web-based tool and analyses have been developed in house by KIT Public Health Advanced Practitioners. These three tools are detailed below.

The first interim tool provides hyperlocal data for health and wellbeing. It brings data from a variety of health and wellbeing sources and provides visualisation together into 'quilts'. This platform is currently an interim format and future iterations will be more user friendly. These quilts are publicly available here: <u>Lower-Level Area Quilts</u>.

A second new addition to the to the JSNA is district and borough Acorn profiles. These show 'categories' of Derbyshire populations and their economic information, social grade, employment and health and wellbeing behaviours. Acorn is a commercial tool that provides new insight into the Derbyshire population. The information on Acorn is being tested to understand what it adds to our existing insight. Acorn summaries are publicly available here: Acorn Profiles.

A third new addition is the development of slope indexes, these provide a simple way of seeing the difference between health and wellbeing outcomes between people living in more deprived and least deprived areas. These indexes show that people living in more deprived areas have worse health and wellbeing experiences than those in more affluent areas. A sample of indexes are publicly available here: Slope Index.

# 2.4 State of Derbyshire report

This annual report provides a summary of key population health and wellbeing indicators for Derbyshire using the tools described above. Key points and learning are highlighted in the accompanying presentation.

The State of Derbyshire report is publicly available here: <u>Derbyshire</u> JSNA Summary Document.

The report highlights that many residents will live long, health and happy lives. However, this is not the case for all, and many people live shorter, harder, and sicker lives. Derbyshire has many areas of affluence, however around 100,000 people in Derbyshire live in the 20% most deprived areas in England. People who live in these areas are more likely to require health and state intervention and are more likely to be disproportionally impacted by health issues. The JSNA slope indexes highlight that across all conditions there is a direct relationship between health and wellbeing and deprivation.

The report shows that the Derbyshire population compares favourably to many health and wellbeing indicators, however there are outliers and differences listed below:

- People living in the more deprived parts of Derbyshire will lead shorter lives than people living in less deprived areas (7.2 years for women, 7.5 years for men).
- People live around 19 years in poor health (20.1 years for women, 17.7 for men).
- Smoking is the leading cause of preventable disease and 1 in 10 people in Derbyshire still smoke.
- Half of children and adults are physically inactive.
- 2/3rds of people in Derbyshire are overweight or obese.
- Derbyshire has significantly higher death rates from cancers in those aged over 65.
- 40% of residents are economically inactive and 15,000 people are economically active but unemployed.
- 14% of children live in poverty.
- Derbyshire is experiencing increasing housing affordability pressures. In Erewash house price rice has outstripped wage rises by 3 times.
- Accessibility is an issue for many with 1 in 5 households not having access to a car or van.

Despite these challenges the report details some improvements:

- Derbyshire is above average for breast cancer screening and rates are returning to pre-pandemic levels.
- Bowel cancer screening rates have increased in all of Derbyshire and all the district and boroughs to 74%, which is higher than the English average of 70.3%.
- The rate of young people who are not in education, employment or training (NEET) is around half the rate in England. Only 382 young people were NEET in 2021.

# 2.5 Next phase of the JSNA development.

An improved website is in development alongside other JSNA tools, these will both give further depth to some of the issues highlighted previously. An update will come to a future HWB meeting. A key aspect of improving the data, intelligence, and insight through the JSNA is for HWB partners to support the JSNA transformation. This can be done through the sharing of information.

The data and intelligence in the interim tools presented is from mostly from publicly available sources. Good practice highlights that a JSNA is a repository for local data, intelligence, and insight. There are other sources of information that HWB partners have access to, and this will enrich the JSNA. Therefore, HWB members are encouraged to support the delivery of the JSNA through identification of a strategic lead who can join the JSNA transformation programme.

## 3 Alternative Options Considered

#### 3.1 Do nothing

The transformation of the JSNA has increased the interest and need for better quality information. Energy is building across the health and wellbeing system to improve the evidence and insight through the JSNA transformation. There is an increasing system requirement for a 21<sup>st</sup> century JSNA and this requires more information, some of which HWB partners have access to. Not completing the JSNA transformation programme is not favoured as this would result in health inequalities not being identified, reputational risks to the HWB and decisions being made that are not based on evidence or needs of the Derbyshire population.

# 4 Implications

4.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

#### 5 Consultations

5.1 Derbyshire County Council Corporate Management Team, Joined Up Care Derbyshire (JUCD) Strategic Intent Executive Group, the IPE, Derbyshire Chief Executives and JUCD Strategic Intelligence Group have been informed about the updates to the JSNA transformation programme.

Health and wellbeing partners have been consulted through surveys and engagement workshops.

Derby City Council public health have been engaged to agree alignment and collaboration.

# 6 Partnership Opportunities

6.1 All partners are asked to fully engage with the process of transforming our approach to the JSNA and support with data, intelligence, and insight sharing.

# 7 Background Papers

7.1 Transformation of the Derbyshire Joint Strategic Needs Assessment (JSNA): Update on Phase One was presented on 29th March 2023.

# 8 Appendices

8.1 Appendix 1 - Implications

# 9 Recommendation(s)

- 9.1 That the Health and Wellbeing Board:
  - a) Note the updates to the JSNA, the State of Derbyshire report and development of interim tools.
  - b) Provide data, intelligence, and insight into the JSNA via nomination of a strategic lead for each HWB partner.

## 10 Reasons for Recommendation(s)

10.1 The JSNA underpins the HWB strategy refresh, ICS strategy, Care Quality Commission (CQC) inspections, NHS Five year forward view and Public Health and Adult Social Care Strategies. A continuation of the transformation programme will support these strategies with evidence and insight.

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#### **Financial**

1.1 The JSNA transformation undertaken to date is funded through the core public health grant; however, future financial planning will be required. Sustainable funding and joint commissioning options with JUCD will be explored in the next phase of development.

#### Legal

- 2.1 Following the implementation of the Health and Care Act 2022 on 1 July 2022, clinical commissioning groups (CCGs) have been abolished and their functions have been assumed by Integrated Care Boards.
- 2.2 The Health and Care Act 2022 also amends section 116A of the Local Government and Public Involvement in Health Act 2007, renames 'joint health and wellbeing strategies' to 'joint local health and wellbeing strategies' and replaces references to 'clinical commissioning groups' with 'integrated care boards'.
- 2.3 HWBs continue to be responsible for the development of JSNA and joint local Health and Wellbeing Strategies. However, they must now have regard to the ICS strategy when preparing their joint local Health and Wellbeing Strategies in addition to having regard to the NHS Mandate.

#### **Human Resources**

3.1 There are no human resource implications of this report.

#### **Equalities Impact**

4.1 There are no equality impacts of this report.

#### **Partnerships**

5.1 The recommendations contained in this report will strengthen and further develop partnership working and allow all partners to be a proactive stakeholder in the transformation of the JSNA.

#### **Health and Wellbeing Strategy priorities**

6.1 The developing interim JSNA has already supported the development of the Integrated Care Strategy and will now inform the refresh of the HWB

Strategy. The recommendations in this report will ensure that the Board and partners can work collaboratively to transform our approach to the JSNA to inform and contribute to all future HWB strategies.

# Other Implications

7.1 None