

REPORT TO: Halton Health and Wellbeing Board
DATE: 09 October 2024
REPORTING OFFICER: Director of Public Health
PORTFOLIO: Health and Wellbeing
SUBJECT: Joint Strategic Needs Assessment Summary
WARD(S) Borough-wide

1.0 **PURPOSE OF THE REPORT**

1.1 To provide members of the Board with an update on the Joint Strategic Needs Assessment.

2.0 **RECOMMENDATION: That**

- 1) the report be noted; and
- 2) the Board approves the draft summary for publication.

3.0 **SUPPORTING INFORMATION**

3.1 **Background to the JSNA summary document**

Joint strategic needs assessments (JSNAs) analyse the health needs of populations to inform and guide commissioning of health, well-being and social care services within local authority areas. The JSNA underpins the health and well-being strategy and commissioning plans. The main goal of a JSNA is to accurately assess the health needs of a local population in order to improve the physical and mental health and well-being of individuals and communities.

In 2012 the first executive summary of the JSNA mapped across the life course (the approach advocated by the Marmot Review on tackle health inequalities) was presented.

This approach has continued to receive good feedback from various partnerships and stakeholders. As a consequence the revised annual summary has used broadly the same approach, updating data and information since the previous version.

The 2022-2027 Health and Wellbeing Strategy also uses these broad life course stages with the addition of the wider determinants of health as the basis of its priority setting.

3.2 **Local development of the JSNA**

The JSNA continues to be hosted on the Halton Borough Council website.

The JSNA is developed as a series of chapters, on a rolling programme with an annual summary and a selection of health profiles.

Since resuming the JSNA work post Covid-19 pandemic suspension the work has focussed on a number of general topics and updating the core JSNA products as well as statutory requirements. These include:

- Inequalities in life expectancy
- Cheshire & Merseyside cancer health needs assessment
- Pharmaceutical Needs Assessment
- Drugs JSNA
- GP JSNA profiles
- Poverty and Cost of Living JSNA
- Ward profiles
- Understanding the drivers for healthy life expectancy.

The JSNA annual summary document is split into sections on:

- Population
- Health Inequalities: life expectancy and healthy life expectancy
- Wider determinants of health
- Starting Well: focus of children and young people
- Living Well: focus on adults of working age and those with long-term health conditions
- Ageing Well: focus on older People (65 and over)

This summary document is attached as Appendix 1.

3.3 **Key changes since the previous summary**

Despite the continuing challenges the borough faces many of the health indicators show year on year improvements. So whilst the borough's health continues to be, generally, worse than the England average, these improvements show that we are moving in the right direction in some areas, despite the backdrop of a national cost of living crisis.

Some highlights include:

- Under 18 conceptions have fallen (despite fluctuations) since 2010.
- Child immunisations continue to perform well compared to the national and regional averages. For example, uptake of

MMR is similar to the North West and England However neither Halton, the North West or England as a whole met national targets for MMR uptake.

- Halton is above the national target (75%) for uptake of flu vaccinations amongst those aged 65 and over (77.3%). However Halton does not meet national target (55%) of flu vaccinations in those at risk groups (40.1%). Halton's performance is similar to both regional and national uptake.
- Uptake of NHS Health Checks is better than the North West and England averages.
- Smoking prevalence amongst adults has fallen in recent years and is now similar to the England average (both 13%). Inequalities continue e.g. between those in routine & manual occupations and amongst those with mental illness compared to the overall prevalence.
- Breast cancer screening coverage has improved.
- Hospital admissions due to falls injuries in people aged 65 and over have fallen in recent years, closing the gap between Halton and England.

However, some areas do remain difficult to improve and others have worsened since the previous reporting period:

- Both male and female life expectancy, at birth and at age 65, have reduced (as they have across England as a whole over the latest 3 year period 2020-22) and remain statistically worse than England.
- Internal differences in life expectancy remain substantial There is now a 13 year gap between life expectancy at birth amongst men and women living in the most deprived ward in Halton (Halton Lea), compared to the least deprived (Daresbury, Moore & Sandymoor vs Halton Lea).
- There has been an increase in the levels of children living in poverty. The levels of both child poverty and older people living in poverty are statistically higher than the England averages. Almost 1 in 4 children under 16 in Halton live in relative low income families (24%); almost 1 in 5 older people aged 60 and over live in poverty in Halton (18%).
- The levels of children achieving a good level of development by age 5 fell during the pandemic levels (as they did across the North West and England on average). Halton's level remains statistically lower than the North West and England average.
- The percentage of working age people with no formal qualifications has increased. The proportion of 16-17 year olds not in education, employment or training has also increased.
- Smoking at time of delivery and breastfeeding rates are consistently worse than the North West England rate.

- Levels of child and adult obesity are statistically worse than the North West and England averages. Over 7 in 10 adults in Halton are overweight or obese (72.7%).
- Hospital admissions amongst young people due to self-harm, injuries, self harm and substance misuse are all worse than the North West and England averages.

3.4 **Developments for the JSNA during 2024 and 2025**

It is important to recognise that the JSNA is an on-going, continuous process, refreshing data to ensure its timeliness, and producing 'deep dive' needs assessments to assist commissioning decisions.

The process for agreeing and developing a work plan for the remainder of 2024/25 and into 2025/26 will be managed in collaboration with key stakeholders and members of the Health and Wellbeing Board.

One Halton

The JSNA work will need to support the development of One Halton. The team will work closely with the One Halton ICP Board and One Halton Priority Sub-Groups on this to identify priority areas requiring support.

Cheshire & Merseyside Population Health Dashboard

The team have led on the development of the dashboard, using the Combined Intelligence for Population Health Action (CIPHA) platform, on behalf of the Cheshire & Merseyside ICS and Directors of Public Health. The dashboard focusses on health outcomes across a wide range of priority topics. It is built from a wide range of local and national sources.

Whilst not developed for One Halton Local Place specifically, it will nevertheless provide a useful source of outcome based metrics. It includes metrics across all of our One Halton Health and Wellbeing Strategy priorities – wider determinants, starting well, living well and ageing well. It also includes the All Together Fairer (formerly known as Marmot) Beacon Indicators.

Both CIPHA, other ICS data tools and other sources such as Midland & Lancashire Commissioning Support Unit (CSU) Aristotle data portal mean the JSNA now sits within a much richer and more timely data landscape. This likely requires a new data-to-decision journey/model locally, more integrated than before.

4.0 **POLICY IMPLICATIONS**

- 4.1 The health needs identified in the JSNA have been used to develop the Health & Wellbeing Strategy.

The JSNA provides a robust and detailed assessment of need and priorities across Halton borough. As such it should continue to be used in the development of other policies, strategies and commissioning plans and reviews such as those of Halton ICB.

5.0 **FINANCIAL IMPLICATIONS**

5.1 None identified at this time.

6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES** [\(click here for list of priorities\)](#)

6.1 **Improving Health, Promoting Wellbeing and Supporting Greater Independence**

All issues outlined in this report focus directly on improving health, promoting wellbeing.

6.2 **Building a Strong, Sustainable Local Economy**

The above priority is a key determinant of health. Therefore improving outcomes in this area will have an impact on improving the health of Halton residents and is reflected in the JSNA.

6.3 **Supporting Children, Young People and Families**

Improving the Health of Children and Young People is a key priority in Halton and this is reflected in the JSNA, taking into account existing strategies and action plans so as to ensure a joined-up approach and avoid duplication.

6.4 **Tackling Inequality and Helping Those Who Are Most In Need**

All issues outlined in this report focus directly on this priority; tackling inequalities and identifying health need is central to the work of Public Health.

6.5 **Working Towards a Greener Future**

The JSNA is key to informing steps to improve health and wellbeing and ultimately reduce the carbon footprint associated with healthcare appointments.

6.6 **Valuing and Appreciating Halton and Our Community**

Community safety is part of the JSNA. Having a thriving community with access to good quality affordable housing is crucial to the health and wellbeing of Halton residents.

7.0 **RISK ANALYSIS**

7.1 Developing the JSNA does not in itself present any obvious risk. However, there may be risks associated with the resultant commissioning/action plans developed based upon it and these will be assessed as appropriate.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 The JSNA seeks to provide intelligence on which to base decisions on action to tackle health inequalities. This includes analysis of a range of vulnerable groups and the need for targeted as well as universal services to meet the range of needs identified.

9.0 **CLIMATE CHANGE IMPLICATIONS**

9.1 The JSNA is key to informing steps to improve health and wellbeing and ultimately reduce the carbon footprint associated with healthcare appointments.

10.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

10.1 None under the meaning of the Act.

Appendix 1

JSNA summary document