



Report of: Head of Intelligence and Policy, Leeds City Council

Report to: Leeds Health and Wellbeing Board

Date: 29 April 2021

Subject: Joint Strategic Assessment 2021

Are specific geographical areas affected? If relevant, name(s) of area(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Summary of main issues

- The production of a Joint Strategic (Needs) Assessment (JSA) on a three-yearly cycle is a joint responsibility of Leeds City Council and NHS Leeds CCG through the Health and Wellbeing Board and informs the Health and Wellbeing Strategy.
- The JSA 2021 will again include a focus on the wider determinants of health, producing analysis which can help to shape priorities, and guide the effective use of resources as part of commissioning and service delivery strategies and plans for the city. Efforts will be made to enhance the ways in which JSA findings are presented, strengthening the provision of 'real-time' analysis in particular.
- Oversight of production of the JSA will come through strong partnership arrangements, channelled primarily through a steering group made up of all relevant stakeholders, and supported by a similar group of practitioners.
- The intention is to maintain a group that can keep abreast of emerging evidence and ensure it is factored into strategic and service planning rapidly.
- The aim is for work to conclude in summer 2021, with Health and Wellbeing Board being involved and kept updated throughout.
- The Health and Wellbeing Board will receive an initial presentation of emerging/likely headlines and potential lines of enquiry at the meeting.

Recommendations

The Health and Wellbeing Board is asked to:

- Consider the proposed approach to the JSA 2021.
- Provide a steer on the focus proposed, including on stakeholder engagement and partnership working.
- Consider the emerging/likely headlines and potential lines of enquiry identified in the analysis undertaken to date.
- Agree to receive a further report when detailed work to produce the JSA has progressed further.
- Encourage wider engagement with the JSA development process, and use of the final product(s).

1 Purpose of this report

- 1.1 The production of a Joint Strategic (Needs) Assessment (JSA) on a three-yearly cycle, is a joint responsibility between Leeds City Council and the NHS Leeds CCG through the Leeds Health and Wellbeing Board, to inform the Health and Wellbeing Strategy. This is intended specifically to shape priorities and guide the use of resources as part of the commissioning strategies and plans for the city, by understanding the core drivers of health and wellbeing.
- 1.2 The next JSA is due in 2021. This paper sets out initial proposals to produce the JSA, and updates Health and Wellbeing Board on the work that has taken place to date.

2 Background information

- 2.1 The city's approach to the JSA over the last two iterations has sought to look beyond narrow health needs assessments (although these remain a vital component), extending the approach to better understand the wider determinants of health and wellbeing. By default this has informed the 'three key pillars' of the city's ambition – health and wellbeing, inclusive growth and climate change – although the third pillar has had only limited coverage to date and will need to be stronger moving forward.
- 2.2 We have adopted a partnership approach to the oversight of the JSA, with cross-council colleagues and partners from the CCG and Third Sector helping to shape the last JSA in 2018. More recently, significant progress has been made in gathering, understanding and acting upon qualitative evidence from key stakeholders (e.g. [Big Leeds Chat](#), [How does it feel for me?](#), the [Communities of Interest Network](#) interviews on health inequalities, etc.). We intend to build and extend these more informal approaches to data and intelligence.
- 2.3 We also dropped the 'Needs' from the title, reflecting our wider approach beyond traditional needs assessments, by giving equal billing to looking at opportunities and shaping interventions, drawing on the city's / community's strengths and assets.
- 2.4 Finally, we have also had an ambition to make the JSA more 'real-time' and interactive in its provision of detailed analysis of key demographic, socio-economic and health trends in Leeds. The JSA is currently hosted on the [Leeds Observatory](#) as a way to signpost potential users to the geographic and thematic profiles hosted on the website. However, while the Observatory does provide interactive, up-to-date analysis in a number of relevant areas, in narrow terms the current JSA is a static document rather than an interactive platform.
- 2.5 In revising the JSA, all of these elements remain relevant. Indeed the Covid-19 crisis has further reinforced the need to understand the wider determinants of health and wellbeing. It has further emphasised the need to radically improve our approach to data and analysis – with a common 'platform' for data / analysis being increasingly referred to as a priority. With this in mind, our approach should encourage increasing practical use of the JSA outputs, from a broader range of people and organisations.

2.6 In summary, the next JSA needs to more directly inform the journey from analysis to prioritisation of resources and the development and evaluation of practical interventions.

3 Main issues

3.1 Drawing on the learning from previous iterations of the JSA, and recognising the priorities for its future development outlined above, the sections below detail an outline proposal for development and delivery of the JSA 2021.

3.2 The purpose of the JSA is:

- a) To shape priorities, and guide the use of resources as part of the commissioning and service strategies and plans for the city;
- b) To better understand the wider determinants of health and wellbeing, thereby informing the three key pillars of the city's ambition – health and wellbeing, inclusive growth and climate change;
- c) To provide a common, 'real-time', interactive approach to the detailed analysis of key demographic, socio-economic and health trends in Leeds. Benchmarking the city on a broader geography, but also providing local, community level analysis;
- d) To better understand the assets we have at our disposal and how they can be utilised effectively; and
- e) To drive a stronger partnership approach to data analysis, with closer collaboration and more effective use of intelligence;

Oversight and Approach

3.3 Strong engagement with a broad set of stakeholders will be key. It is envisaged that a JSA steering group / sounding board will be convened to ensure opportunities to input and shape the work are provided to the full range of relevant partners and to support ongoing and growing engagement with the JSA findings once the initial work is complete. This group would include:

- NHS - Clinically Commissioning Group, potentially providers including the acute trust and community services;
- Third Sector partners – both specific to health and wellbeing, but also more broadly looking at wider socio-economic determinants;
- Universities/Leeds Academic Health Partnership – building on wider collaborative work at a city-level;
- LCC representation covering health and wellbeing, inclusive growth, climate change and communities.

3.4 The day-to-day production of the JSA will also be a partnership effort, with a practitioner group drawn from across the council and health partners. This group

of colleagues will help to ensure the work properly reflects the city's communities and, alongside the steering group, will ensure the voices of Leeds people are recognised in the final products.

Strengthening linkages to Health and Wellbeing Strategy

- 3.5 The JSA will inform the next draft the Health and Wellbeing Strategy and also wider city strategies where appropriate. In 2020, the Health and Wellbeing Board agreed to update and extend the Health and Wellbeing Strategy to take us from 2021 to 2023 and beyond. A draft version of an updated strategy was produced, using the parameters and steer given by Board members as well as the rich intelligence and insights about health and wellbeing available to us since the 2016 version of the Strategy was published. However, given the ongoing context of Covid-19, this work was formally paused.
- 3.6 It is increasingly clear that the impacts of Covid-19 are likely to be far greater and wide-ranging than had been previously envisaged and work is needed to further develop the strategic response, drawing on national research and policy direction which is being produced.
- 3.7 Other key strategies across the city are also taking this approach to ensure they are appropriate for a rapidly changing environment. A new Three Pillars task and finish group is looking at opportunities to align Health, Economy and Climate and to understand what we might need to put in place to build a healthier, more resilient Leeds. The Health and Wellbeing Board as well as other key strategic boards will be central in further shaping this approach.
- 3.8 It is important we do not lose any of the great work that has been undertaken to date, but to build on this to ensure the Strategy will take us through the next 5 - 10 years and is well connected to our other strategic ambitions for the city. This will help us collectively respond to the likely future impact from Covid-19 on the health and wellbeing of the people of Leeds as well as reflect a greater emphasis on integration and tackling inequalities over the long term.
- 3.9 The JSA and subsequent strategy will also influence the commissioning priorities for the Leeds health and care system and the priorities for the emerging Local Care Partnership which brings together providers across the city.

Future-proofing the JSA with 'real-time' analysis

- 3.10 There remains a strong ambition to move beyond the JSA providing a static snapshot at the point in time it is produced, towards the ongoing provision of up-to-date information and 'real-time' analysis. While much of this is already available, primarily through the Leeds Observatory, there are significant opportunities to strengthen the presentation and communication of this information to better complement the objectives of the JSA.
- 3.11 Ongoing discussions regarding the creation of a vehicle for more consistent and inclusive city-wide approaches to data and analytics are likely to unlock further opportunities for the JSA in future. Therefore the production of the JSA 2021 will

need to be undertaken with the current 'City Office for Data Analytics' work in mind.

Timetable / Milestones

- 3.12 Early work has already begun to collect data and produce analysis which will inform the JSA. This will continue over the coming weeks.
- 3.13 Following Health and Wellbeing Board's input on 29 April, further engagement with the partners outlined above will be required as soon as possible to establish the JSA 2021 steering group and secure collective agreement on the shape of the outputs / products to be produced.
- 3.14 Over Spring and Summer (dependent on the pace of progress), the steering group will oversee production of the JSA, with regular check-ins and opportunities to shape and influence the work ongoing. Day-to-day activity will be supported and co-ordinated by members the practitioner group mentioned in 3.3 and 3.4.
- 3.15 The intention is to have draft product(s) – likely both in traditional report format and the more real-time digital solution outlined in this paper – to explore with the Health and Wellbeing Board members in the Summer and brought back to a future meeting for agreement in Autumn.
- 3.16 This timescale will also help shape the Health and Wellbeing Strategy redraft. Initial findings from the JSA will be factored into developmental conversations and will guide work being developed by the Health Partnerships Team including community and partner engagement. These conversations will need to align with thinking in the Inclusive Growth and Climate Change programmes and will be rooted back into the Health and Wellbeing Board from autumn onwards via an initial paper which will outline draft timescales for the new HWS strategy.

4 Health and Wellbeing Board governance

4.1 Consultation, engagement and hearing citizen voice

- 4.1.1 This paper to Health and Wellbeing Board, follows on from a similar discussion at the council's Corporate Leadership Team (CLT) and a recent presentation on early shape for the JSA to the council's Cabinet. These are the first stages of engagement for the JSA 2021.
- 4.1.2 Moving forward, there will be regular and ongoing engagement with Health and Wellbeing Board and other key stakeholders and partners including the People's Voices Group. The Board will be kept updated on future plans which may include direct engagement with Leeds communities to enhance the qualitative evidence supporting the JSA, albeit this will likely depend in part on the continuing removal of social restrictions as we recover from the Covid-19 pandemic.

4.2 Equality and diversity / cohesion and integration

- 4.2.1 Given its core purpose the JSA naturally helps to identify inequalities, analyse trends and consider their impact on outcomes for people in Leeds. This work will

then inform future strategy development as outlined in this report and where appropriate will align to the work of the Leeds Tackling Health Inequalities Group.

- 4.2.2 However, there are no specific or direct implications for equality and diversity arising out of this report. Future work aligned to the JSA 2021 will be assessed at needed ahead of future reports.

4.3 Resources and value for money

- 4.3.1 The analysis contained within the JSA 2021 will support strategy and policy development in Leeds, contributing valuable local intelligence to underpin effective commissioning decisions and therefore maximise the impact of resources available across partner organisations.

- 4.3.2 Work to produce the JSA will be undertaken 'in house' across our partnership as detailed in 3.3 and 3.4.

4.4 Legal Implications, access to information and call In

- 4.4.1 There are no access to information or legal implications arising from this report.

4.5 Risk management

- 4.5.1 There are no direct risk implications arising from this report. This will be kept under review as work to produce the JSA progresses and issues will be escalated to the Board as required.

5 Conclusions

- 5.1 The JSA will again consider the wider determinants of health and wellbeing in Leeds. It will enable benchmarking of Leeds' performance against other local authorities while providing crucial local intelligence to support efficient and effective commissioning, strategy and policy development.

- 5.2 Production of the JSA will require strong ownership and input, co-ordinated primarily through a steering group of relevant partners. Similarly, maximising the impact of the work will need high quality and widespread communication to encourage engagement with the findings. This will be supported by a refreshed approach to presenting the analysis, encompassing more 'real-time' and interactive final product(s).

6 Recommendations

The Health and Wellbeing Board is asked to:

- Consider the proposed approach to the JSA 2021.
- Provide a steer on the focus proposed, including on stakeholder engagement and partnership working.
- Consider the emerging/likely headlines and potential lines of enquiry identified in the analysis undertaken to date.

- Agree to receive a further report when detailed work to produce the JSA has progressed further.
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7 Background documents

7.1 None.

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How does this help reduce health inequalities in Leeds?

The core purpose of the JSA dictates that it help reduce health inequalities in Leeds. The analysis produced will provide an up-to-date picture of strengths, assets needs and trends which can in turn inform the design and delivery of the refreshed Health and Wellbeing Strategy, supporting the vision to improve the health of the poorest the fastest.

Producing up-to-date analysis can help to share the Board’s wider work moving forward, alongside that of other partners including Leeds City Council.

How does this help create a high quality health and care system?

The findings of the JSA process can be used to design and deliver more effective services, community led solutions, and to make improvements to the way the health and care system works together for people in Leeds. It is a fundamental evidence base for the Leeds Health and Wellbeing Strategy, and so this JSA is well-timed to inform the renewal of the Strategy in the near-term.

How does this help to have a financially sustainable health and care system?

The JSA will again take a broader view, considering the wider determinants of health and wellbeing and assessing both the needs in the city but also the strengths and assets that exist to meet those needs.

Taking this holistic picture into account will support a more financial sustainable health and care system in the city, which recognises all the drivers of health and wellbeing and equips policy makers across organisations with the intelligence they need to make better decisions and implement more effective solutions.

Future challenges or opportunities

As highlighted in this paper, there remain significant opportunities to grow and develop the JSA digitally, enhancing provision of ‘real-time’ data and analysis to ensure an up-to-date picture if always available for commissioners and policy makers.

Priorities of the Leeds Health and Wellbeing Strategy 2016-21	
A Child Friendly City and the best start in life	X
An Age Friendly City where people age well	X
Strong, engaged and well-connected communities	X
Housing and the environment enable all people of Leeds to be healthy	X
A strong economy with quality, local jobs	X
Get more people, more physically active, more often	X
Maximise the benefits of information and technology	X
A stronger focus on prevention	X
Support self-care, with more people managing their own conditions	X
Promote mental and physical health equally	X
A valued, well trained and supported workforce	
The best care, in the right place, at the right time	X