

## **Faith & VCS Homeless Forum**

Meeting June 15<sup>th</sup> 2016

**Briefing Paper for Agenda Item 4.** Follow up to questions raised in the Forums Homeless Health Review about the **Gloucestershire Joint Strategic Needs Assessment (JSNA)**; (please see [JSNA](#) on Forum web site for further info.)

### **A bit of background.**

This Forum unanimously supported the findings and recommendations in our Homeless Health Review. We had concerns about the effect of The Vaughan Centre closure on the award winning Homeless Healthcare Team; the HHT is fully supported by health professionals. We were really encouraged to hear that Dr Helen Miller, Clinical Chair of the Clinical Commissioning Group (CCG), and Ingrid Barker, Chair of Gloucestershire Care Services (GCS), also fully supports the Homeless Healthcare Team and homeless services. They are particularly keen to help reduce inequalities, especially for the more vulnerable people in the community such as the homeless, the chaotic and those with complex needs, who find it hard to advocate for themselves.

One of the recommendations in the Forums Homeless Health Review was to check to see that homeless healthcare had not been 'forgotten' in the County Councils's JSNA documentation. We saw JSNA/ JHWS (Joint Health & Wellbeing Strategy), as ensuring that socially excluded groups, such as homeless people, experience better health. St Mungo's Broadway have found nationally that a number of JSNA's do not identify the current and future healthcare and wellbeing needs of people identified as homeless or at risk of homelessness, including single homeless people, the gaps in current services, etc., The JSNA should identify the health inequalities faced by the homeless population and recommend achievable improvements in health and well-being outcomes for this group.

### **Understanding Health Inequalities.**

Understanding health inequalities will lie at the heart of achieving these aims. As such, JSNAs must include a particular focus on the needs and views of vulnerable people, those with complex medical and social care needs and those experiencing exclusion. The Department of Health has provided guidance on achieving this across the inclusion health groups, including homeless people.

### **What is a JSNA?**

The concept of Joint Strategic Needs Assessment (JSNA) was introduced in the Government's Commissioning Framework for Health and Well-being, which was published in March 2007. JSNAs 'describe the future health, care and well-being needs of local populations and the strategic direction of service delivery to help meet those needs.' The key elements of the JSNA process are involving all important stakeholders from health and social care, identifying those needs and service requirements that are most relevant and important to its population and making use of existing information, identifying information gaps and including the views of service users, patients and the population.

Breaking the phrase JSNA down into its constituent parts is useful in defining what it means in practice:

- **Joint:** a key element of the JSNA is that it should involve all the important stakeholders in identifying needs and acting upon them. Crucially the JSNA provides a new framework for health and social care to collectively work in partnership to identify the needs of the population they serve and to work together in commissioning services to meet those needs.

- **Strategic:** the JSNA should identify those needs and service requirements that are most relevant and important to its population. The needs assessment process should provide health and social care organisations with an evidenced based identification of the key needs of its population and should therefore define the strategic direction in its commissioning of services. This strategic direction should consider both today's and future health and social care needs.
- **Needs assessment:** there are many definitions of needs assessment. In order to identify health and well-being needs the assessment process should make use of existing information, identify information gaps and should include the views of service users, patients and the population. Importantly the needs assessment must include outputs that can be translated into actions for the commissioning and delivery of health and social care services, health improvement and well-being programmes and other interventions. The process should consider social inclusion and should identify inequities and inequalities in health and well-being and in current service delivery.

The Department of Health document states that a 'good' JSNA should:

- 'provide analyses of data to show the health and well-being status of local communities
- define where inequities exist, and
- Use local community views and evidence of effectiveness of interventions to shape the future investment and disinvestment services.'

In summary, the Joint Strategic Needs Assessment (JSNA) should provide a comprehensive picture of the current and future health and wellbeing needs of the population and informs commissioning in order to achieve better outcomes and reduce inequalities, this includes a particular emphasis on social excluded groups, i.e. the health inequalities faced by the homeless.

### **Inclusion Health.**

Inclusion Health recommends a greater focus upon members of the population that are socially excluded. Arguably the homeless population contains within it some of the most excluded individuals in society, therefore they are chronically excluded.

The Department of Health / Cabinet office paper 'Inclusion Health' uses a framework to highlight key areas where changes can be made or services enhanced to ensure a greater equity of access to health services, a better understanding of the needs of this group and better treatment outcomes.

### **Gloucestershire JSNA.**

For Gloucestershire the JSNA is jointly produced by the Clinical Commissioning Group (CCG) and Gloucestershire County Council on behalf of the Health and Wellbeing Board whose members decide the strategic direction of public agency commissioning in Gloucestershire. The production of the JSNA report is overseen by the 'Understanding Gloucestershire JSNA Information and Analysis Group' whose membership we are told, includes all the relevant partners and stakeholders; feedback is encouraged.

Directors of Public Health have a key role in providing leadership. The Gloucestershire Health & Wellbeing Board (H&WB) has an important duty re the homeless, planning for health provision and leadership in addressing homeless health and holding their Director of Public Health to account for homeless health. The Board needs to consider Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies.

The Health & Social Care Act 2012 include a welcome increased focus on health inequality's and integration but we saw the split in commissioning could present a real concern about the risk of a lack of coordination.

### **Action to Date.**

The JSNA was reviewed and we couldn't find any reference to homeless health care. The County Council encourages feedback so we contacted the Joint Strategic Needs Analysis Team. We asked for clarification, to help us understand and hopefully allay concerns that the Forum has; we pointed them to our JSNA web page.

We received a response from Neil Dixon, Strategic Needs Analysis Manager, at the Analysis Team as follows:-

*As you have discovered, we don't currently have a separate topic for the Health of people who are homeless. The priorities for populating the website have been with commissioners within GCC and the CCG, and at the moment, this doesn't appear on our plan for this year. However, I am pleased to say, we have produced an 'Understanding District - Joint Strategic Needs Assessment' for each of our districts, each of which includes a section on homelessness.*

We responded:

*We understand from what you are saying that homeless health has unfortunately not been a priority, hence hasn't been addressed...as yet. You will understand that we understood homeless health was now a priority in accordance with the Health & Social Care Act 2012 re reducing health inequality's etc.*

*Thank you for letting commissioners be aware of our concerns and we would like to meet up with them sometime to take this forward; we will see what view the Forum takes on this. Maybe an opportunity for the Forum to get involved re an initial study for GCC and CCG??*

*With this in mind are you yet able to let us know who has overall and ultimate responsibility for Gloucestershire's JSNA with their contact details please?'*

### **Thoughts/Future Action/Way Forward.**

- The 'Understanding District – JSNA' does give some helpful and informative basic data but only on the levels of homelessness.
- It is crucially important that the views of HHT patients/ clients and others are sought to help drive service delivery improvements. Who will do this?
- Who are the stakeholders? The Forum would like to be consulted and invited to be a stakeholder.
- We would like to work together, take forward, first open dialogue with the CCG and GCC, etc., to encourage them **to make the comprehensive assessment of healthcare of the homeless an urgent priority**. To include how needs may be harder to meet for vulnerable groups who experience inequalities, such as people who find it difficult to access services, those with complex and multiple needs, etc.,
- Help CCG and GCC to undertake a Homeless Health Needs Audit. A tool to help you understand, plan for and improve the health of people who are homeless in your area (Homeless link or see Forum web site)
- Write to members of the H&WB Board.
- One of our recommendations was to ask for a meeting with the Director of Public Health ( Sarah Scott).
- Other action?