



JSNA

Joint Strategic Needs Assessment

COMMUNITY VOICE

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Community Voice

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1. Introduction

Wandsworth is a vibrant, diverse Borough with a strong sense of community. It also boasts an active and dedicated Voluntary Sector formed of over 900 organisations.¹ In terms of health, the Borough is supported by 42 GP Surgeries, 60 Community Pharmacies and 33 Care Homes.² The community has an important role to play in building a picture of health and social care needs for the Borough.

The inclusion of the 'Community Voice' into the JSNA process has enabled a more thorough consideration of the health and social care needs of Wandsworth residents. The voice of the local community can further support the development of services which aim to support residents to live healthy, full lives in the Borough.

The role of Public Health and its partners, through the Joint Strategic Needs Assessment, is to understand and respond to the needs of local people, implementing services and support in response to the findings. This chapter is therefore written through the community's lens, using both anecdotal and survey-based information and including viewpoints of organisations and individuals to respond to the health needs identified by the community.

This chapter sits alongside and complements the Start Well, Live Well and Age Well JSNA chapters with a community view on the health needs in the Borough and the local perception of the gaps in health and social care service provision.

1.1 Defining Community and the Community Voice for Wandsworth

For the purposes of this report, community is defined according to Public Health England³, which use a definition drawn from community development.⁴ In this context the term 'community' is used as an umbrella term for those relationships, identities, interests and connections, which link people or give them a shared stake in an area, culture or activity. The groups and organisations consulted for this chapter create these links and identities, which make them communities in their own rights as well as a being a part of the wider Wandsworth community.

1.2 Understanding Health and Social Care Need in the Community

Responding to residents' needs ensures the best service provision for local people. Accurately assessing health needs is essential for Wandsworth Council, Southwest London Clinical Commissioning Group (SWL CCG) and their partners in delivering effective health and care that meets the requirements of the residents. During the period of COVID 19 needs will have developed, shifted and evolved, meaning that securing community involvement in developing the JSNA is of greater importance than ever before.

This chapter considers the well-being of the population in the widest sense, comprising not only physical and mental health, but also those needs, which allow residents to live a full, thriving, healthy life. Whilst recognising that these may look distinct for different population groups, it seeks to find the common threads which provide a community-wide perspective on health and social care need. It also strives to identify the needs of the most vulnerable in the population, who may have additional health requirements.

¹ Wandsworth Council, 2020. *Voluntary and Community Sector*. [Online]

Available at: <https://www.wandsworth.gov.uk/leisure-and-culture/volunteering/voluntary-and-community-sector/>

² Good, N., 2020. Patient and Public Involvement: Annual Report 2019-20, London: NHS Wandsworth, Clinical Commissioning Group.

³ Public Health England, 2015. A guide to community centred approaches for health and well-being, London: Public Health England.

⁴ Yenbury, H., 2011. Vocabularies of community. *Community Development Journal*, pp. 47(2):184-98.

Vulnerability is rarely a permanent state and is often more fluid and experienced differently across life stages. For the purposes of this chapter, vulnerabilities have been considered for different age groups, to reflect the life course approach. These include:

- **Start Well** – (*pregnancy, early years, childhood and adolescence*)
0–18-year-olds who are experiencing disadvantage, living in relative poverty or have low household income. In addition, those young people who have poor educational attainment, are known to the Criminal Justice System and those experiencing bullying or excluded from school etc
- **Live Well** – (*adults of working age*)
Adults who are homeless, unemployed, have poor relationships, or live with Learning Disabilities
- **Age Well** – (*Older people post retirement age*)
Older people who are living alone or experience frailty or loneliness

It should be noted that the groups outlined above are not exhaustive or exclusive, residents may move in or out of these vulnerability categories or be exposed to a number of vulnerable situations, either alone or together with their families.

1.3 Findings and Evidence of Need

Community responses were gathered via telephone calls and using the Microsoft Teams, Zoom and GoToMeeting video calling facilities with the stakeholder organisations identified and contacted, as a part of the data gathering approach to the development of this chapter. The findings are presented to reflect to the structure of the remainder of the Joint Strategic Needs Assessment: in four parts Start Well, Live Well, Age Well and the community's views on the wider determinants of health.

Each section considers the key areas of need highlighted by Community and Voluntary Sector Organisations in Wandsworth. Any good practice or gaps identified are also included.

It should be noted that there may be areas of health need not identified through the community voice research process. The findings presented are drawn only from those organisations that responded to the request for input into this chapter. If an area of health or social care is not highlighted in the section, it does not mean that Public Health and its partners are not working actively on such topic; rather, it indicates that the topic was not raised as an issue by respondents during the consultation process.

2. Start Well

Start Well covers areas of health and social care need during pregnancy, early years, childhood and adolescence. The main areas of need highlighted by the community respondents include:

- barriers to accessing services and information,
- children and young people's mental health, risky behaviour and
- children and young people's Special Educational Needs and Disabilities (SEND).

Discussions regarding this age group did not mention childhood obesity as an area of need.

2.1 Early Years Provision

HealthWatch Wandsworth reported on a survey they conducted into early years provision in the Borough.⁵ The survey formed a part of their response to the London Assembly Health Committee project on health and well-being for children under five. The survey identified Health Visitors, GPs and Children's Centres as a good source of information for parents and carers. Community and Leisure Centres were also cited as sources of support, through events and activities, but there were concerns that these facilities were too expensive or not well advertised, particularly in deprived areas.

HealthWatch Wandsworth highlighted the key role Health Visitors play in responding to the needs of new mothers, but that respondents felt they could benefit from more than one or two visits as they saw Health Visitors as vital sources of information.

The report also highlighted several barriers to accessing services support or information. These barriers prevented respondents from getting much needed support, attending groups or clinics or related to their ability to follow advice. These included:

- The affordability and availability of transport which acted as a barrier to engagement and support
- The affordability of healthy food and exercise programmes prevented respondents from making healthier choices or engaging in physical activity
- The availability of safer play spaces
- The availability of affordable childcare

Most respondents understood the impact of parental mental health on the health of babies and young children, as well as the whole family unit. Poor mental health can lead to a stressful and unstable environment. To ensure good mental health for children and their carers the survey highlighted the need for specialist mental health programmes to increase resilience and provide support. HealthWatch Wandsworth also reported that they anticipate mental health in families to become an area of greater need moving forward, particularly following the COVID 19 Pandemic, reflecting the national picture of increased mental health need resulting from this period.⁶

Perinatal Mental Health ([link](#))

There were many positive comments about support from services. However, there were comments that suggested room for some improvements relating to:

- * Getting a referral and reducing waiting times for mental health support:
- * Ensuring that issues are understood by health and care professionals who can then identify and refer people who need support
- * Co-ordination between services and continuity of care
- * Inclusion of family, friends and relatives, particularly partners has an impact on mental health wellbeing. 75% reported seeking emotional wellbeing and mental health support from friends and family.

Covid specific:

- * Availability of support from community settings and forums
- * Availability of information about support available
- * Although 'virtual' appointments are a useful part of care, they shouldn't be the only form of care.

⁵ HealthWatch Wandsworth, 2018. Key Issues in Early Years, London: HealthWatch Wandsworth. <https://www.healthwatchwandsworth.co.uk/report/2018-04-13/key-health-issues-early-years>

⁶ Office for National Statistics, 2020. Coronavirus and depression in adults, Great Britain: June 2020. [Online] Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/well-being/articles/coronavirusanddepressioninadultsgreatbritain/june2020>

Most respondents (73%) reported experiencing emotional or mental health difficulties during their pregnancy. Many related this to the coronavirus pandemic and related restrictions. Common themes mentioned in the comments included the following themes (incl. number of mentions) Anxiety 18, Stress 12, COVID 10, Low mood 10, Depression 4, Trauma 6.

30% of mothers (19) reported starting to experience difficulties during their pregnancy and a further 14% said that they already had difficulties before the pregnancy. Another 19% (12) immediately after birth whilst still in the maternity unit. Then 20% (13) started to experience difficulties up to 6 months post-natal and 9% (6) 6-12 months post-natal. However some people selected more than one option ⁷.

2.2 Children and Young People's Mental Health

HealthWatch Wandsworth's response to the government green paper on mental health in children and young people⁸ drew together their work on this theme and identified some key areas for focus. HealthWatch Wandsworth stated that all children should be considered at risk of developing poor mental health, but that several groups were identified as being particularly at risk. Higher risk groups highlighted by HealthWatch Wandsworth included: children from Black, Asian and Minority Ethnic (BAME) backgrounds, looked after children, children in poverty, those identifying as LGBTQ+ and children with Autism, Dyslexia, Epilepsy, a disability or a significant health condition.

HealthWatch Wandsworth also recommended that mental health support should be available to children and young people in a variety of settings and outside of school hours if needed or preferred. Key to this was providing children with a safe space to talk and to feel confident that the person understands their reality and need for confidentiality.

2.3 Risky Health Behaviours

HealthWatch Wandsworth provided anecdotal evidence from their discussions with young people around sexual health issues (unpublished). Young people identified risky behaviours such as not feeling safe, peer pressure or experimenting and exploring new behaviours without information. They highlighted the need for opportunities for young people to discuss and understand risky behaviour. Young people reported that informed conversation helped them to avoid risky behaviour. There is a need to link risky behaviour and mental health support as young people were concerned about feeling safe and the impact of peer pressure being more significant than the information available to them. There is a need for more information about sexual health through channels used by young people including social media.

3. Live Well

Live Well covers areas of health and social care need for adults of working age. This section covers a wide range of health-related concerns including physical and mental health, healthy lifestyles, preventing long term conditions and living with disabilities.

⁷ Note, our 2018 [Early Years survey](#) highlighted how important mental health of mothers is for the child.

⁸ HealthWatch Wandsworth, 2018. Government Green Paper on Young People's Mental Health. [Online]

Available at: <https://www.healthwatchwandsworth.co.uk/report/2018-03-23/government-green-paper-young-peoples-mental-health>

Healthy lifestyles and associated behaviours were not areas identified as having a significant need by the stakeholders interviewed during the research for this chapter. However, there are a few notable points to make including accessing information and identifying need.

HealthWatch Wandsworth reported anecdotal evidence that they had received reports that residents found it difficult to access information about services to help them manage their health and well-being. It is likely that Social Prescribing may have filled some of this need with Social Prescribers targeting certain segments of the population, however, many felt they would seek the information themselves, if they knew where to find it. The Well-being Hub is a resource valued by those who have used it, but it is not something every resident or health/social care professional knows about yet.

3.1 Lifestyle and Behaviour- Physical Activity

HealthWatch Wandsworth's report on physical activity in the Borough⁹ identified the need for more affordable exercise options in the Borough as well as exercise opportunities of those with specific disabilities or long-term conditions. Whilst 29% of respondents reported undertaking moderate exercise five times a week and a further 60% were doing some form of exercise, 10% of those who responded to the survey were doing none. Most respondents reported the positive impact of exercise on their mental health, but some also felt that exercise created anxiety.

Time to exercise and the cost of membership, activities or classes remain significant barriers to residents exercising. Respondents reported wanting information on how to fit exercise into their busy lives as well as opportunities to do exercise together (e.g. family exercise) and exercise opportunities in environments they feel safer in (e.g. women only classes). People with long term conditions also reported being keen to increase their physical activity but being worried about exacerbating their condition. They requested information, guidance and support on how to exercise in a positive way to benefit their health.

3.2 Long Term Conditions (Diabetes, CVD, Cancer)

Several gaps in health and social care were reported by respondents to Healthwatch Wandsworth and through the SWL CCG Patient and Public Involvement Report.²

With regard to CVD, HealthWatch Wandsworth reported that deterioration in physical health often resulted in development or exacerbation of mental health conditions that were also present in patients, indicating the need for a more holistic approach for those with CVD, including the need for physical activity support, outlined earlier.

Patients also reported several areas for improvement in service provision, which they felt would be beneficial to those living with CVD:

- 1:1 dietary advice
- Support to understand changes to the body and the changes to their lifestyle that are needed to manage their condition
- Support to navigate and understand their health system to reduce the stress of managing it alone
- Improved communication between hospital and patients
- Better patient referrals to available services
- Mental health support to cope with the impact of CVD on their life
- More support based in the community and near their homes rather than from the hospital after discharge

⁹ HealthWatch Wandsworth, 2017. Consultation on Physical Activity in Wandsworth, London: HealthWatch Wandsworth. <https://www.healthwatchwandsworth.co.uk/report/2017-10-31/consultation-physical-activity-wandsworth>

The SWL CCG Engagement Report on Patient and Public Involvement in Wandsworth also identified that for those living with Diabetes, GP surgeries remain the preferred place to monitor and maintain care for most respondents. The report also outlined that the SWLCCG aim to conduct insight work to determine the reported barriers to accessing self-management services for people living with Diabetes.

Regarding cancer care in the community, an issue with continuity of care was identified, leaving patients feeling unsupported when transferred from one service to another, as part of their care pathway.

3.3 Mental Health in Adults

Many outstanding services were identified including the Mental Health Recovery cafés in Tooting and Wimbledon supported by the SWLCCG (open to all adults aged over 18 in the Southwest London Boroughs of Wandsworth, Merton, Sutton, Richmond and Kingston). HealthWatch Wandsworth reported that people valued the Tooting Café as a place of safety with activities and peer support that helps them to prevent a crisis.¹⁰ It was clear that people needed places to go to if they were unable to get a calm or supportive environment in their lives.

HealthWatch Wandsworth also reported on Community Adult Mental Health Services in 2019, which identified several areas in which services could be developed to support the needs of users:¹¹

- Greater user involvement in care planning and communication between services can hamper support (especially after patients are discharged from hospital)
- Improvements in waiting times as there is a perception that there were long waits for support
- Better communication between providers to improve the accessibility of services, especially for vulnerable groups.
- Improved recognition of the part that the recovery cafés play; they could form a larger part of personal crisis plans and be more widely available
- Diversification of the sites where mental health workshops are run, to include more specific user-friendly locations so that individuals won't have travel/financial barriers to access. For example, at care homes for the elderly or at parenting clubs for new parents
- Revisiting the risk of suicide, which remains an issue in Wandsworth (HealthWatch Wandsworth, 2016).¹²

Wandsworth Community Empowerment Network (WCEN) emphasised the need to consider mental health in Black, Asian and Minority Ethnic groups in Wandsworth as a part of their 2019 annual report.¹³ Highlighting their work as a part of the Wandsworth Black Mental Health forum and the Black Minds Matter Youth Leadership Programme WCEN work with local groups on issues around mental health inequalities to develop stronger relationships and collaboration around the need to support young black people living in the Borough. WCEN rely on grants to continue their work and have links to the local community. The annual WCEN report points to a continuing need for mental health support for BAME communities through established community groups and links as well as statutory services.

¹⁰ HealthWatch Wandsworth, 2019. Experiences of Wandsworth Mental Health Recovery Cafés, London: HealthWatch Wandsworth. <https://www.healthwatchwandsworth.co.uk/news-and-reports/search?keyword=mental+health+cafe>

¹¹ HealthWatch Wandsworth, 2019. Enter & View visit to East Wandsworth Community Mental Health Team, London: HealthWatch Wandsworth. <https://www.healthwatchwandsworth.co.uk/report/2019-09-30/enter-view-visit-east-wandsworth-community-mental-health-team>

¹² HealthWatch Wandsworth, 2016. Suicide Prevention Strategy Consultation, London: HealthWatch Wandsworth. <https://www.healthwatchwandsworth.co.uk/report/2016-03-31/suicide-prevention-strategy-consultation>

¹³ Wandsworth Community Empowerment Network, 2019. Wandsworth Community Empowerment Network - A year in review 2019, London: WCEN.

3.4 Mental Health in the LGBTQ+ Community

During discussions with community groups, the mental health needs of LGBTQ+ (Lesbian, Gay, Bisexual, Trans, Questioning and other) residents was identified as an area of need regarding the availability of support and services in the Borough.

The WCA's LGBTQ+ project reported that users from this group did not think that services had a clear understanding of the needs of this group regarding their mental health. As a result, they felt there was a lack of tailored services for those from the LGBTQ+ community.

A 2018 report by Stonewall found that, while 25% of the general population will have mental health issues at some point in their lives, within the LGBTQ+ community, that figure rises to 40%.¹⁴ Looking more specifically, within LGBTQ+ Youth and LGBTQ+ BAME groups, the figure is 60%.

Feedback from LGBTQ+ organisations to GPs, published in the SWL CCG's Patient Public Involvement Report 2019/20 supported WCA's LGBTQ+ project's findings that work is needed to improve the quality of care, support and lifestyle for this group.² It was recommended that funding be made available to ensure the needs of the LGBTQ+ community are met regarding health and social care.

The WCA's LGBTQ+ project identified pockets of good practice in both the health and social care services in the Borough, including the 'pride in 'practice' scheme, a quality assurance and social prescribing programme that strengthens and develops Primary Care Services' relationships with their lesbian, gay, bisexual and trans (LGBT) patients. Wandsworth is one of the pilot areas chosen by the LGBT Foundation, which is running the scheme. However, Free2Be, which offers training around LGBTQ+ issues, raised concerns about what will happen following the pilot's completion, as it was only funded for one year and training needs to be ongoing for GP practices involved.

However, several areas have been identified as needing further work around mental health and LGBTQ+ issues for adults. LGBTQ+ groups report feeling underrepresented in health promotion and prevention activities in the Borough.¹⁵

Key areas of need identified by the Wandsworth LGBTQ+ Network, Free2Be, WCA LGBTQ+ project and SWL CCG PPI report include:

- The biggest issue for people in the LGBTQ community in seeking help/support is fear. This may be fear of discrimination, fear of recrimination in their personal or professional life or lack of support based on their sexuality or gender identity
- If an LGBTQ person is not out to their GP, then they might not be able to be honest about the cause of mental health problems (e.g. end of or abusive relationship) making it hard for them to be signposted to appropriate services/support
- The Free2Be network confirmed that there are complex issues around faith, ethnicity and sexuality for BAME LGBTQ+ people in Wandsworth. Mental Health Professionals need to be aware of the complexities of these cultures in order to fully understand and support users
- Understanding the needs of LGBTQ+ people in Wandsworth, with reference to mental health, was considered a priority by all respondents
- It is important that services reflect that there are different experiences within and between different LGBTQ+ groups and that they may have differing needs resulting from these personal experiences

¹⁴ Bachmann, C. & G. B., 2018. LGBT in Britain: Health Report, London: Stonewall.

¹⁵ HealthWatch Wandsworth, 2016. Healthwatch LGBT+ Mental Health Report, London: HealthWatch Wandsworth. <https://www.healthwatchwandsworth.co.uk/report/2016-11-30/healthwatch-lgbt-mental-health-report>

- The Albany Trust reported that, despite being the only organisation in the Borough which delivers National Institute of Health and Care Excellence (NICE) approved support services for LGBTQ+ groups, they have not received any referrals through the Council or other services

3.5 Living with Disabilities (including Adults or Children with Learning Disabilities and Physical Disabilities)

Whilst stakeholders were unable to point to recent evidence of work on disabilities, Healthwatch Wandsworth reported on some key areas, which are frequently raised by those living with disabilities - or their carers - during surveys related to health and social care issues. These include:

- The need for more support for parents and carers (including around mental and emotional well-being)
- Difficulties in accessing services or support and obtaining GP appointments
- Difficulties with housing tends to be a key concern – quality of supported housing, adaptations of private accommodation and isolation/interaction with neighbours
- Transport costs or lack of transport options to reach services. For example, the 2017 Healthwatch Wandsworth report on eye health found that the physical access to services was a major issue¹⁶

Some specific issues were also raised regarding adults with learning disabilities or with an Autism Spectrum Disorder:

- People with learning disabilities are very much behind the curve on life expectancy and access to mainstream services
- Adults with Autism lack support and there is a general lack of awareness and services for this group
- WCA reported concerns about adults with both physical and mental disabilities becoming more isolated as a result of the experience of living through the COVID 19 Pandemic. This is an area of increasing need for support and services

3.6 Social Isolation and Loneliness

Healthwatch Wandsworth emphasised that social isolation and loneliness is not an issue exclusive to for older people or those living alone. Their 2017 Autism Survey found that people can be in close proximity to others, but if they don't live near people, they can socialise or get on with, then they feel isolated. Respondents also talked about wanting to be a part of community events and wider community acceptance rather than having separate support to feel included. Whilst it was reported that there is support for specific groups, it is the isolation in the communities that people live in that is most keenly felt and lead to loneliness. Suggestions for areas where further work is needed to reduce isolation included running intergenerational projects, using community spaces more effectively and collaboration between existing community groups to bring communities together.

3.7 Homelessness and Rough Sleepers

Whilst there was no specific data on this area of health and social care need, there was concern from stakeholder respondents that homelessness will become an increasing area of need, as a result of COVID-19. In addition, Healthwatch Wandsworth reported this as an area that many of its survey respondents are concerned with in the Borough.

¹⁶ Healthwatch Wandsworth, 2017. Consultation on Eye Health and Preventing Sight Loss in London, London: HealthWatch Wandsworth.

3.8 Health Inequalities

How to reach different groups with health inequalities, with public health campaigns (Assembly) [Link](#)

- Messages need to be flexible for different people and groups.
- Stigma and engagement with campaigns could be addressed by an approach to build trust and by not presenting information as additional problems to be dealt with.
- Language and approach are important and specific suggestions were made from each group. A wide range of formats will reach the most people.
- Campaigns could work closely with different specialist groups, Champions, GPs and other services such as libraries, pharmacies and leisure centres.

Ideas for specific groups Different discussion groups mentioned specific ideas for their groups, for example:

- The BME group stressed the need to look at generational differences in relationships to food, to have different messages that are youth focussed and to promote cross-generational discussions within families.
- The LGBTQ+ group suggested that campaigns could also be targeted at families and friends. Some mentioned that work might need to be done with religious groups and faith schools and parent groups.
- The carers group suggested linking with carer's assessment, and not blaming the person for their condition and offering support as well as information.
- The Learning Difficulties (LD) group suggested targeting the people who support people with LD, and providing information for carers and families in a different format from that given to person with LD. They also suggested using images e.g. of a mobile phone to suggest checking risk factors online. There should be support for people using digital information and care organisations and voluntary sector could be involved in this. Health awareness sessions over a period of time were suggested.

4. Age Well

Age Well considers the health and social care needs of people past retirement age and into older age. Areas of need identified during this research ranged from gaps in the provision of services such as falls support, mental health and co-ordination of care to more complex issues around social isolation, loneliness and dementia.

4.1 Co-ordination of Care/Support in the Community

Respondents to the SWLCCG public patient engagement consultations stated that they felt there should be more co-ordination of care, particularly for elderly residents to ensure they can attend appointments and be supported without having to juggle several referrals or issues.²

In addition, whilst older people regularly reported to community groups that they had a good relationship with their GPs, this experience was not universal. It was suggested that GPs could be trained to work specifically with older people, their concerns and well-being issues, as some remained dismissive of these concerns. Accessing appointments regularly also remained a concern. In terms of accessing alternative services, social prescribing was identified as a useful and desirable way to support older people to stay independent and tackle many of the issues around social isolation.

4.2 Communicating Information

The Wandsworth Older People's Forum highlighted the issue of accessing information for older people. Many older people engage with and enjoy technology, but digital exclusion remains an issue for some. It was suggested that older people need alternative ways to access information and services. Online and via social media are not enough as many

older people don't use the internet this way. GP Surgeries, Libraries or mailing leaflets were reported as remaining the best places to provide information and access to services.

4.3 Healthy Ageing

Several issues were raised by the community groups consulted relating to needs around ensuring healthy ageing. The main issues identified were:

- Wandsworth Older People's Forum reported that older people are asking for more places to exercise to improve their health and confidence as well as reduce isolation
- Wandsworth Older People's Forum also reported the need for more seats in the Borough for older people to rest. This would allow them to get out more as they would know there were safe spaces to stop when needed
- Falls and risk of falling are still a significant issue among older people in the Borough
- HealthWatch Wandsworth found that poor eye health significantly contributed to limitations on mobility, increased feelings of isolation and impacted on mental health ¹⁶
- Social isolation and loneliness were raised as a significant issue by Wandsworth Older People's Forum, particularly in the context of the COVID 19 Pandemic and reduced interaction among older people

4.4 Older People Mental Health/Isolation/Loneliness

Although not a unique experience to older populations, social isolation and loneliness tends to affect older people disproportionately.¹⁷

When discussing mental health in older people, Community and Voluntary Groups specifically highlighted social isolation and loneliness as having a significant impact on mental health. Isolation was a real concern, as the COVID 19 Pandemic has severely impacted on people's ability to interact with each other.

Wandsworth Older People's Forum reported serious concerns around the mental health of their members and, more widely, of almost 32,000 older people living in the Borough.¹⁸ The closure of local centres and activities, not being able to visit shops, needing to shield and fear of infection have all exacerbated feelings of loneliness, isolation and vulnerability among older members.

Several respondents including Voicing Views LGBTQ+ Project, Free2Be and the Wandsworth LGBTQ+ network reported that mental health problems also persist among LGBTQ+ people into older age. The fear of stigma or discrimination among the older LGBTQ+ community means that older people may be uncomfortable being open about their life with new carers or when a partner enters a care home for fear of residents, staff or carers being intolerant. This had led to community group members reporting hiding the 'evidence' of their lives, when visited by home care staff, a distressing experience when they may have recently lost a partner of many years.

Evidence from the SWLCCG Patient Public Involvement Report raised mental health in the LGBTQ+ community as an important concern.² The report identified that some older LGBTQ+ groups have felt isolated and remained silent, due to stigma attached to their lives in the past. As a result, they have experienced mental health problems associated with this silence, in addition to feeling threatened by homophobic attacks and discrimination.

¹⁷NHS, 2020. www.nhs.uk. [Online]

Available at: <https://www.nhs.uk/conditions/stress-anxiety-depression/loneliness-in-older-people/>

¹⁸ Greater London Authority, 2020. Population and household projections. [Online]

Available at: <https://data.london.gov.uk/demography/population-and-household-projections/>

4.5 Dementia

In Wandsworth, there are approximately 2,150 people over the age of 65 living with Dementia. This figure is set to rise to 2520 by 2030.¹⁹ Dementia is now one of the leading causes of death in the UK.²⁰ It is also the only condition in the UK's top 10 causes of death that does not currently have any treatment to prevent, cure or slow its progression. While Dementia is associated with ageing, it is not a natural consequence of getting older and more than a third of Dementia cases are potentially avoidable through modifiable lifestyle factors. The NHS checks commissioned by the Public Health Department have a key role to play in the Borough's Prevention Strategy.

However, Alzheimer's Society Wandsworth report that access to timely diagnosis of Dementia is highly variable and support available to both people with Dementia and their carers differs across London. In Wandsworth, of those estimated to be living with Dementia, only 76.3% have received a formal diagnosis (as at May 2020).²¹ In addition, Alzheimer's Society reported on the need to ensure that those who would like to be able to die at home.

Alzheimer's Society Wandsworth also highlighted the national figures regarding the impact of deprivation on those living with Dementia.^{22 23} They reported evidence to suggest that people with Dementia living in more deprived areas are less likely to complete an annual care review; an important review that seeks to ensure service users receive appropriate and timely care support.²⁴

5. Carers

When considering the gaps in health and social care need for Carers, it is important to recognise that caring responsibilities take many forms for people of many ages and abilities. They may be partners, children, family members, friends or neighbours. Several issues were raised by Carers as a part of the HealthWatch Wandsworth Carers Report.²⁵

The report found that:

- 67% of respondents were not receiving Carers Allowance,²⁶ but many would mention that they would like financial support
- Most feel that their caring role has an impact on their mental health. HealthWatch Wandsworth expect this situation to worsen as a result of changes in the support available to Carers resulting from COVID 19²⁷

¹⁹ Wittenberg, R. et al, 2019. Projections of older people with dementia and costs of dementia care in the United Kingdom, 2019-2040, London: Alzheimer's Society.

²⁰ Alzheimer's Society, 2018. Dementia - The true cost: Fixing the care crisis. Alzheimer's Society <https://www.alzheimers.org.uk/sites/default/files/2018-05/Dementia%20the%20true%20cost%20-%20Alzheimers%20Society%20report.pdf>

²¹ NHS Digital, 2020. Recorded Dementia Diagnoses May 2020. [Online] Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/recorded-dementia-diagnoses/may-2020>

²² Gale, C. et al, 2011. Neighbourhood environment and positive mental health in older people: The Hertfordshire Cohort Study. Health Place, pp. 867-874.

²³ Julian, D. et al, 2012. Neighbourhood characteristics and depressive mood among older adults: an integrative review. Int Psychogeriatric, pp. 1207-1225.

²⁴ Department of Health, 2016. Dementia Atlas, London: HM Government.

²⁵ Healthwatch Wandsworth, 2019. What Carers Want, London: Healthwatch Wandsworth.

²⁶ Carer's Allowance is a benefit for people who are giving regular and substantial care to disabled people (more than 35 hours a week). Carer's Allowance is set at £67.25 and there are eligibility criteria. It is a taxable benefit meaning it forms part of an individual's taxable income.

<https://www.citizensadvice.org.uk/benefits/sick-or-disabled-people-and-carers/carers-allowance/>
<https://www.gov.uk/carers-allowance>

²⁷ Office for National Statistics, 2020. Coronavirus and depression in adults, Great Britain: June 2020. [Online]

- Carers have their own health needs and experience physical health issues, including lack of sleep, back pain and other pain as well as exhaustion resulting from their caring role
- Carers of those with Dementia were often unaware of the support available to them
- Families living with disabilities, specifically, requested support for family members, not just the main Carer

Additional needs for Carers were raised by several respondents during the research process. Spectra reported that there is a broad need for support for parents and grandparents as Carers as well as for Older Carers in the Borough who may have multiple issues to manage.

The LGBTQ+ Network highlighted the need for LGBTQ+ carers to have someone to speak to without fear of discrimination. The new AGE UK Wandsworth LGBTQ+ Befriending Scheme may be well placed to meet this need, but wider support would be beneficial. Voicing Views reported several experiences of older LGBTQ+ people hiding evidence of their partner (who had died) when carers visited at home or hiding their relationship when visiting their partner in a Care Home for fear of discrimination from other residents or staff.

In addition, Alzheimer's Society Wandsworth highlighted that nationally most Carers for those with Dementia (58.5%) spend more than 35 hours per week providing care, while over a third of Carers (35.7%) provide care for over 100 hours per week.²⁸ Indeed, a national carers report commissioned by the Alzheimer's Society UK found that unpaid carers of people with Dementia are disproportionately shouldering the burden of care – covering 75% of the total costs.²⁰ Given the reduced (in person or respite) support available to Carers as a result of the COVID 19 Pandemic, Alzheimer's Wandsworth recommended supporting those with Dementia and their Carers as a key area of work.

6. Wider Determinants of Health

Wider determinants of health, also known as social determinants, are defined as a diverse range of social, economic and environmental factors which impact on people's health.²⁹ These factors can also be influenced, in turn, by the availability of local or national resources, which shape the conditions of daily life.

6.1 Health Inequalities

Health inequalities are unfair and avoidable differences in health across the population, and between different groups within society.³⁰ They result from the conditions, in which people are born, grow, live, work and age. These conditions, in turn, impact on an individual's ability to live a healthy life as well as how they feel and act, affecting mental and physical health and overall well-being.

. Health inequality was widely acknowledged by all community groups interviewed as a very significant and undesirable dimension in the lives of the local residents. Health inequalities impact on almost all areas of public health, including obesity, mental health, housing, environment, physical activity, air quality, prevention, healthy life expectancy, age related ill health, Dementia and diabetes. The effects are felt across the age range, but the scale of inequalities in health are the most visible among BAME community, older people and those on low incomes. In their 2019 Annual

Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/well-being/articles/coronavirusanddepressioninadultsgreatbritain/june2020>

²⁸ NHS Digital, 2017. Personal Social Services Survey of Adult Carers in England 2016-17, NHS Digital.

²⁹ Public Health England, 2020. Wider Determinants of Health. [Online]

Available at: <https://fingertips.phe.org.uk/profile/wider-determinants>

³⁰ NHS England, 2020. Definitions for Health Inequalities. [Online]

Available at: <https://www.england.nhs.uk/ltphimenu/definitions-for-health-inequalities/>

Report WCEN expressed ongoing concerns regarding the disadvantage and health inequalities experienced by the communities they work with in Wandsworth.¹³

Health inequalities were mentioned as an ongoing and increasingly significant issue by all the organisations who contributed to this chapter. HealthWatch Wandsworth reported that affordability is often mentioned during discussion on prevention and well-being and that digital exclusion is an increasingly prominent feature of health inequalities for residents.

6.2 Healthy Communities and Environments

HealthWatch Wandsworth spoke to parents as a part of their Early Years Survey to ask what respondents thought could be done to make London more baby friendly³¹. Although the questions related to actions the Mayor of London could take for the whole of London, several responses were applicable to areas of work from Wandsworth.

These included:

- Working to reduce pollution and traffic, especially in pedestrianised areas
- Improving pavements for buggies
- Increasing the availability of baby changing and breastfeeding spaces
- Investing in services and baby-friendly activities

HealthWatch highlighted air quality as one of the main concerns reported by parents as a part of their work on Early Years. It is worth noting that the issues highlighted as a part of the Early Years Survey are not specific to parents and young children. Wandsworth Older People's Forum pointed to several heavy traffic areas in the Borough and identified the need to extend the Low Traffic Neighbourhood Scheme across Wandsworth. It was suggested that Low Traffic Schemes could be further enhanced by planting more trees to tackle air pollution and improve built up neighbourhoods. Wandsworth Older People's Forum also identified several other neighbourhood related needs for older people, including the need to improve pavements for users and the need for more seats to support those less able to walk for long periods of time to move more easily around the Borough.

7. Impact of COVID 19

One of the biggest areas of concern raised by Community and Voluntary Organisations was the impact of the COVID 19 Pandemic on residents, particularly for vulnerable groups.

Wandsworth Older People's Forum (WOPF) and the Wandsworth Care Alliance (WCA) both reported concerns on the impact of isolation on older people in the Borough and the need for regular contact to support good mental and physical health for vulnerable older people. The key concern involved not being able to consider the resumption of services and concern for users during periods of limited contact.

The impact of COVID on the mental health of a group already prone to isolation was thought to be significant, especially when the extent of digital exclusion among older people was considered. An increase in isolation had already occurred during lockdown, but, more recently, both organisations had found more people reporting symptoms of loneliness, anxiety and depression. Throughout discussions on other areas of health and social care need, the risk of isolation remained a significant background factor.

³¹ This is a UNICEF programme which aims to ensure services are enabled to support families with feeding and to help parents build a close and loving relationship with their baby. <https://www.unicef.org.uk/babyfriendly/about/>

The Albany Trust also reported concerns regarding the impact of lockdown on the mental health of the LGBTQ+ community as well as the overall impact of COVID 19 generally on already vulnerable groups, who may be at risk of isolation. Evidence is not yet available regarding the consequences of people being isolated further from their communities and support systems. However, the Trust reported that self-harm in the LGBTQ+ community is increasing and that they have seen increases in both suicide and risky behaviour in this group since lockdown began in March 2020.

There is also emerging evidence which demonstrates that people living with Dementia have been significantly affected by the COVID 19 Pandemic. A quarter of those who have died as a result of COVID 19 in England had Dementia, making it the most common pre-existing condition for deaths (along with diabetes). Related to this, 'unexplained excess' deaths from Dementia were 83% higher in England in April 2020 than previous years. Alzheimer's Wandsworth also reported the significant impact of COVID on carers of people with Dementia, many of whom are unpaid and unable to access their current support systems due to the Pandemic.

More widely, the community and voluntary sector reported that there is emerging evidence of the impact of COVID 19 on health inequalities, which have only increased as a result of the Pandemic. In addition, the increased reliance on technology during this period, whether through smart phones or computers and tablets, have highlighted the significant impact of digital exclusion in exacerbating health inequalities. A lack of access to technology has in turn limited access to services and support including online shopping, support groups for carers, school lessons, GP appointments and social interaction.

8. Commentary

This chapter has provided a unique perspective in understanding the health and social needs of the community, both as a result of the challenging landscape the COVID 19 Pandemic provides and through the wider health and social care needs of the Wandsworth community.

The findings of this research highlight that there are outstanding areas of health and social care need reported by the community and voluntary sector. Addressing these needs could increase the well-being of residents in areas where no provision exists. It should be noted that for some of the areas of need identified Public Health and its partners are already working to ensure that needs are met. For example reducing health inequalities and increasing access to services in Wandsworth is an ongoing priority for Public Health who already work with partners across several areas including adult and children's mental health, older people, and integrated urgent care and collaborating to address the health inequality issues which have arisen due to COVID 19.

One of the most significant needs reported was around information and support for those with a range of mental health needs, particularly for vulnerable and BAME groups. The SWLCCG report on equalities and patient public involvement also highlighted this as an area of need and continues to work to respond to community need where it is reported.² One example of current work is the emotional well-being support offered to young people through SWLCCG's Trailblazer Project, which works with schools to ensure whole school approaches to mental health. Wandsworth Clinical Commissioning Group (through the Southwest London Health and Care Partnership) secured funding to establish an innovative 'trailblazer' project which pilots new approaches to working with children and young people around mental health issues. The project aims to reduce self-harming through a whole system, multiagency approach. They have also funded a young commissioner's programme through Silverlined Horizons and Wandsworth Community Engagement Network. The Young Commissioners Programme is a free group for young people who are passionate about mental health and their community providing opportunities to challenge, change and make decisions regarding the mental health services available to young people. The project is run through

Silverlined Horizons, a youth engagement company. Events run as a part of the young commissioners' programme have focused on the mental health of young people from BAME backgrounds and have identified areas of further need and support.

For adults, a lack of response to this consultation regarding need related to healthy lifestyles and behaviours does not mean that no need exists. The Public Health Division, with its partners in this area of work including Adult Social Care, Commissioning and Community and Partnerships, continue to prioritise these issues with a clear focus on prevention across all work strands and have seen some significant improvement in a number of areas, for example in smoking cessation rates in the Borough.

As a part of this work, reports from HealthWatch that people were concerned that doing more physical activity may exacerbate a condition, suggest a need for more and targeted information on the proven benefits of exercise on both physical and mental health or a review of the types of classes offered based on location, venue, cost, support and accessibility or affordability.

Note: The COVID 19 Pandemic of 2020 has clearly impacted on the community and voluntary groups consulted as well as their users and many groups struggled with identifying need outside of this all-consuming issue. It may be that need identified by community groups six to nine months ago was not reported during this research as the landscape has altered so much in this time. It is equally challenging for the community and voluntary sector to envisage what the future may look like whilst so much uncertainly remains.

Appendix 1 – Stakeholder Respondents

A range of organisations were contacted as a part of the research for this chapter. Those who were able to respond provided research, reports, feedback and opinion on what they see as the health and social care needs of their users.

Southwest London Clinical Commissioning Group

The Southwest London Clinical Commissioning Group (formerly NHS Wandsworth CCG) commission most community-based health services, mental health and learning disability services as well as urgent care, rehabilitation services and non-emergency hospital care.

The SWL CCG involve public and patients in their work to inform commissioning decisions and identify need through their Patient and Public Involvement activities. As a part of their engagement activities the SWL CCG hold focus groups and events as well as seeking opinions from users via social media and direct contact e.g. interviews. A patient/public involvement group meet five times a year to discuss areas for which the CCG are responsible. The group includes representation of more than sixty voluntary sector partners, through the umbrella organisations Wandsworth Community Empowerment Network and Wandsworth Voluntary Sector Co-ordination Project. The list can be found [here](#).

Wandsworth Care Alliance

WCA were established in 1991, originally as a network of housing associations aiming to give their residents a stronger local voice. Since 2005 they have been a registered charity and have a key role in ensuring local people have a voice in their local community, with reference to the development of health and social care services. They act as a conduit to the SWL CCG and Council as well as providing support for local organisations to develop networks and skills. Their work incorporates, HealthWatch Wandsworth and Voluntary Sector Co-ordination as well as mental health, engagement and outreach projects. www.wandsworthcarealliance.org.uk

HealthWatch Wandsworth

Healthwatch is the independent national champion for people who use health and social care services. HealthWatch Wandsworth works with local people to ensure that NHS, Council and Community Services are considering the needs of their users and responding to those needs. HealthWatch Wandsworth conduct research, interviews, focus groups and research to find out what local people think of the services provided and what could be improved for the future. www.wandsworthcarealliance.org.uk/get-involved/healthwatch

Voluntary Sector Forum (VSF)

The Voluntary sector Forum is a quarterly meeting for Voluntary and Community Groups working in the Borough of Wandsworth. The meeting provides opportunities for groups to network and share the work of their organisation as well as receive information on NHS or council initiatives, give feedback and respond to consultations.

Wandsworth Older People's Forum (WOPF)

WOPF is an independently run member organisation for older people living in the Borough. It is run by volunteers and aims to campaign on issue affecting older people, represent older people's view to local groups and provide a link for older people's projects working in the Borough. The group also produce a regular newsletter and hold an annual conference.

www.wopf.org.uk

Voicing Views and LGBTQ+ mental health project

Voicing Views is the mental health service user project run by the WCA. It works with the Mental Health Trust, Southwest London Clinical Commissioning Group (SWL CCG) and Adult Social Services providing a service user perspective and a voice for those with mental health needs.

The new Lesbian, Gay Bisexual Transgender, Questioning and other sexual identities (LGBTQ+) mental health project run through the WCA is a response to the higher prevalence of mental health needs within the LGBTQ+ community. The project works with the LGBTQ+ community in Wandsworth as well as other community groups, commissioners and service providers to raise awareness and support the mental health needs of the LGBTQ+ community.

Free2B Alliance

Free2B is a London based community interest company (CIC) which supports LGBTQ+ young people and their parents, providing 1:1 and group support in schools and the local community. Its LGBTQ+ network for Wandsworth includes Voicing Views, The Albany Trust, Wandsworth LGBTQ+ Alliance, Spectra (one of the consortium providers of sexual health services) and Age UK Wandsworth's 'LGBTQ+ Chats' project

www.free2be.org.uk

Wandsworth Community Empowerment Network (WCEN)

WCEN work with the community across Wandsworth, providing a voice for many local groups. They host regular meetings and events including their annual Black Mental Health conference and the Black minds Matter Youth Leadership programme. This research engaged with them through the SWL CCG and through their annual report

Community & Partnerships Team at Wandsworth Council

The voluntary and community sector in Wandsworth is supported by the Voluntary Sector Partnership Team at Wandsworth Council, part of the Community and Partnerships Team.

The number of organisations contacted was limited by the availability of organisations to respond during a time of unprecedented community need for their services due to COVID 19. However, obtaining valuable data and interviews with large representative organisations such as HealthWatch Wandsworth, SWL CCG, Wandsworth Community Empowerment Network (WCEN) and the Voluntary Sector Forum ensured a representative view of the Borough as well as allowing Public Health to request information through their partner and network organisations and for content to be fed back through those channels into this document. The voluntary sector in Wandsworth provides a wide range of information, advice, support, activities and opportunities for residents. More information on the voluntary sector in Wandsworth can be found on the Borough website (Wandsworth Council, 2020).

Contact Outcomes List

Organisation/ Name	Contact	Contact/Outcome/Notes
HealthWatch Wandsworth	<i>(Manager)</i>	Initial email contact, telephone interview (27/05/20) HealthWatch provided notes.
Wandsworth Care Alliance	<i>(Voluntary Sector Co-ordination Manager)</i>	Initial email contact – telephone interview (15/06/20)
SW London CCG (Formally Wandsworth CCG)	<i>(Patient and Public Engagement Manager)</i>	Initial email contact – telephone interview (30/06/20)
Wandsworth Voluntary Sector Forum (VSF)		Attended the Zoom meeting and informed all attendees about JSNA Community Voice chapter. Made a request for anyone wishing to contribute to contact PH , gave contact details and answered questions - 01/07/20.
Wandsworth Older People's Forum	<i>(Hon Secretary)</i>	Initial contact at Wandsworth Voluntary Sector Forum followed by email correspondence and provision of information. Telephone interview - 08/07/20
Free2Be Alliance	<i>(Co-Founder/Director)</i>	Initial contact via email. Attended and interviewed as a part of the virtual meeting (via Go to Meeting) of the Wandsworth LGBTQ+ network, chaired by Free2B. 21/07/20
WCA - Voicing Views/LGBT Mental Health Project		Initial contact via email Telephone interview 22/07/20 Further interview as a part of the virtual meeting of Wandsworth LGBTQ+ network - 21/07/20
Age UK Wandsworth LGBTQ+ Active chat	<i>(LGBTQ+ Active chat project manager)</i>	Interviewed as a part of the virtual meeting (via Go to Meeting) of the Wandsworth LGBTQ+ network, chaired by Free2B. 21/07/20
Albany Trust		Interviewed as a part of the virtual meeting (via Go to Meeting) of the Wandsworth LGBTQ+ network, chaired by Free2B. 21/07/20 Further information received by email
Spectra		Interviewed as a part of the virtual meeting (via Go to Meeting) of the Wandsworth LGBTQ+ network, chaired by Free2B. 21/07/20
Wandsworth LGBT Forum		Interviewed as a part of the virtual meeting (via Go to Meeting) of the Wandsworth LGBTQ+ network, chaired by Free2B. 21/07/20
Alzheimer's Wandsworth		First contact via Wandsworth VSF. Submission on behalf of Alzheimer's Wandsworth received via email 29/07/20

Appendix 2 – Research methods and limitations resulting from COVID 19

This document was researched and developed during the COVID 19 Pandemic of 2020, which strongly influenced data collection opportunities and outcomes. Prior to the nationwide lockdown implemented by the English Government on 23rd March 2020, the aim was to collect data via community consultation events such as the Voluntary Sector Forum, allowing for the opportunity to interact directly with the community and receive input.

However, due to the limitations of the COVID Pandemic, the data collection to inform this chapter has been limited to desk-based research. This approach has been informed by the Wandsworth Health and Care Plan and previous JSNA and supported by contact with the SWL CCG and voluntary sector co-ordinating bodies including Wandsworth Care Alliance, HealthWatch Wandsworth and the Free2Be Alliance. On recommendation from these bodies, further organisations who represented at risk groups were contacted. Communication has been via email and telephone as well as attending the Voluntary Sector Forum by Zoom to request input to this chapter. It should be noted that some of the need identified during this process was via the opinion of the co-ordinators of these community groups during conversation, having been asked to speak on behalf of their users. In addition, where respondents did not identify any need associated with specific health or social care issues, it does not necessarily follow there are no further needs in this area, simply that they were not highlighted during the research at this time. Further needs relating to specific public health interventions and outcomes have been identified throughout the JSNA by service users, data or public health initiatives.

Research questions for determining community views on the health and social needs were intentionally open, allowing respondents to provide an overview of the issues they see as relevant to their users. Respondents were asked:

- Tell me about your organisation, its role, users and aims
- What do you see as the gaps in health and/or social care need for your users?
- How do you think these gaps can be overcome? What is missing/what is needed?
- How is the current situation with COVID 19 impacting on health and social care needs?

Acronyms

BAME	Black, Asian and Minority Ethnic Groups
CVD	Cardiovascular Disease
JSNA	Joint Strategic Needs Assessment
LGBTQ	Lesbian, Gay, Bisexual, Transgender, Querying
NICE	National Institute for Clinical Excellence
SEND	Special Educational Needs and Disabilities
SWLCCG	Southwest London Clinical Commissioning Group
WCA	Wandsworth Care Alliance
WCEN	Wandsworth Community Empowerment Network
WOPF	Wandsworth Older People's Forum

Acknowledgements

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Date release	21 st September 2021	
Description	The Joint Strategic Needs Assessment covering Wandsworth resident population overview, life expectancy and healthy life expectancy at birth and at age 65 years	
Contact	Wandsworth Council 020 8871 6000 The Town Hall, Wandsworth High Street, London SW18 2PU	
Related Documents	DataWand	