

| Do you have other ideas that could help to develop the JSNA in the future? | |
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| Open ended response from survey | Approach |
| The involvement of the wider workforce in identification of priorities. The increased profile of the Health and Wellbeing Board will contribute to this. | A - Workforce involvement to support promotion of JSNA, providing operational awareness of key health and wellbeing issues and developing contact with service providers and commissioners |
| Stronger links with council teams - JSNA website appears to be entirely NHS driven. Given the forthcoming transfer of public health responsibilities to the local authority it is a missed opportunity not to build those links with information specialists and staff with access to community research across council departments | |
| Yes step one. Identify key people in organisations who help deliver, join them up, get them working together, and get a feedback mechanism established. | |
| Have professionals from beyond health/public health been engaged in relation to the social determinants? A lot of very useful quantitative data is used. What about qualitative research? | |
| Do not develop in isolation - talk to the leads and providers who know their subjects from an "on the ground" view -this will help to marry theory/data with practice/reality | |
| Wirral cluster/area meetings to invite all agencies working in area | |
| improve partnership working with a wider range of agencies | Covered by A & C |
| All agencies involved in working with people are asked to input, both statutory and voluntary | Covered by A & C |

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| By asking people who have complained about things or the people who have needed the services recently for their opinions and not just those who shout the loudest. | B - Seek to include views of a range of people including those who have commented upon and used local services, for groups who find service providers and as such JSNA hard to access and local subject service groups such as Alzheimer's Society and Wirral Autistic Society |
| The inclusion of the needs of adults like myself on the Autistic Spectrum, as we are often neglected. And sometimes some of us don't fit into the criteria for mental health or learning disability, as Autism is a developmentally disorder. | |
| By engaging with some of the hardest to reach people identified in the report it would stand to good reason you could collect qualitative data to support spending on tackling those issues identified. | |
| Reaching out to more networks/groups to inform them of your work, e.g. Alzheimer's society. | |
| Need to target services to communities / areas with particular issues. | |
| Public involvement rather than health and social care professionals dictating what will happen | |
| Those people who are following unhealthy life styles have to be engaged in this process. Community based forums, using local facilities to continually promote the benefits of a healthier life style. Stop accepting that being poor means you are going to be unhealthy. Work on instilling pride and self-esteem/worth in people regardless of income | |
| more public awareness | |

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| Keeping it on everyone's agenda | C - Develop a sustainable and continuous process for gathering views of local people through partners existing contact opportunities |
| working with voluntary and community sector at all times, not just when you need consultation | |
| Involve the public more via the Patient Forums, PPGs and local media. Encourage GPs to allow PPGs play an active role in collecting and collating local information. This could be via questionnaires or one-to-one at surgeries. Confidentiality can be resolved if discussed beforehand. If you think to involve patients has merit then I am willing to volunteer to assist in this area. I'm not sure how at the moment, maybe become part of a steering team. | |
| God help us having to spend more of our money supporting yackatting groups. | |
| local media, community groups, mobile information vehicle in greater need areas | Covered by B & C |
| Ensure that there is public involvement at all stages | |
| People of Wirral need to be made aware of it. I imagine a great deal of people would want to better their lives if they read the statistics. I am seriously considering moving myself and my family out of Wirral. I'm shocked by the statistics and I don't want my child being brought up here to be honest. | |
| Wider consultation | |
| Go out among the communities and find out truly what their lives consist of on a daily basis, what their priorities are: where and how they spend their money, how they view their responsibility to their own health and social needs, how they see the responsibilities of the Government or local Council in relation to their lives. You may have to rewrite the manual. | |

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| I was once upon a time a senior civil servant. These documents are fine for civil servants and a few of ministerial rank but not for others especially those that you are trying to reach! | D - endeavour to ensure format of JSNA documents is accessible to widest audience |
| Again I feel the language used could be excluding certain groups. there is a need for a more familiar simple clearer English | |
| Provide information around what it is and how useful it might be. | |
| Gets someone working on the website who understands the principles of simple English? | |
| please consider reporting plans, strategies for actual services or programs, staffed by professionals who are open-minded | E - through JSNA website, provide access to strategies and plans developed as a consequence of the work of the HWB |
| Feedback on what has changed as a direct outcome of the JSNA. | F - Provide through JSNA contact and website, an ongoing contact with residents in order to provide reflection of their perceived and expressed needs and how they consider the information to have been used... |
| Continual public consultation post development to see how and if people feel their views have been used to shape the JSNA. | |
| Learn from other areas | G - consider the approaches taken by other areas for the provision of information and data through the JSNA |
| Highlight links to where there are national/local examples of good practice | H - consider provision of more links to other practice and delivery linked to JSNA key issues/content |
| Include it on the agenda of the Area Forums to perhaps increase the likelihood of residents raising health & wellbeing/NHS/PCT concerns/issues and getting these linked into or back to the development of the JSNA. | |
| Provide evidence to demonstrate the positive impact of past interventions. | |
| Provide reasons in statistics, where possible, as to why Wirral people misuse substances, become obese, suffer mental health issues and how prevention measures in place have improved, if at all, statistics. | |

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| more links to evidence for commissioners to access | |
| social media | I - develop a range of contact options for residents and partners not limited |
| more joint events with public and carers invited | |
| as much non computer publicity as possible | |
| Perhaps getting ideas from members of the public. | Covered by I & B |
| An area forum. | |
| more engagement events i.e. through LINK or when LINK transitions to Local HealthWatch | |
| Yes you could include some success stories to provide role models for those trying to change their life styles so people can see it is achievable | J |
| Develop stronger partnerships and have some belief in the voluntary sector | K - continue to further develop working relationship with V, C & F sectors |
| As a partner I would be interested to offer to assist with any future development of the JSNA as I use data from the JSNA to ensure I am targeting some of MFRS resources towards vulnerable groups. The JSNA is a very useful site. | Contact at MFRS |

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J - continue to develop website and wherever possible any interactive opportunities

K - continue to further develop working relationship with V, C & F sectors