1. Purpose

1.1 The purpose of this report is to inform the Health and Wellbeing Board of the revised process to oversee the development of the JSNA and to propose that the Health and Wellbeing Strategy Implementation Group takes responsibility for reviewing and assessing recommendations from completed JSNA topics.

2. Recommendation/s

Members of the Health and Wellbeing Board are recommended to:

2.1 Note the revised process for the development of the Joint Strategic Needs Assessment (JSNA)

2.2 Agree that the Health and Wellbeing Strategy Implementation Group takes responsibility for reviewing and assessing recommendations from completed JSNA topics and proposing priorities to the Health and Wellbeing Board.

3. Policy Context

3.1 The production of a JSNA became a statutory duty on PCTs and upper tier local authorities in 2007. The Health and Social Care Act 2012 placed a new statutory obligation on Clinical Commissioning Groups, the Local Authority and the NHS England to jointly produce and to commission with regard to the JSNA. The Act placed an additional duty on the Local Authority and CCGs to develop a joint Health and Wellbeing Strategy for meeting the needs identified in the local JSNA.

3.2 Lewisham’s Joint Strategic Needs Assessment provides access to a profile of Lewisham's population, including demographic, social and environmental information. It also provides access to in-depth needs assessments which address specific gaps in knowledge or identify issues associated with particular populations/services. These in-depth
assessments vary in scope from a focus on a condition, geographical area, or a segment of the population, to a combination of these. Needs assessments in Lewisham are carried out to an agreed standard as outlined in the joint Community Services/Public Health guide. The overall aim of each needs assessment is to translate robust qualitative and quantitative data analysis into key messages for commissioners, service providers and partners.

The JSNA is the means by which local leaders can better understand the needs of all local people. This in turn helps to shape the Health and Wellbeing Strategy and inform the decisions about the priorities for local action.

3.3 The priorities of The Health and Wellbeing Strategy 2013-2023 were informed by the JSNA.

3.4 The current JSNA can be found here:  
www.lewishamjsna.org.uk

4. Background

4.1 A JSNA process was implemented in 2011. This included a standardised process for prioritising the topics on which needs assessments should be undertaken. There has been no systematic approach since 2012/13 to identify priorities for JSNA topics due to scarcity of resource to complete JSNAs topics, however topics have been completed when resources have become available.

4.2 Individual JSNA topics provide in-depth analysis and recommendations for that specific service/population group. Currently these are viewed only by the interested individual/group that has requested the JSNA topic to inform their specific commissioning decisions. This process does not allow for discussion by the Health and Wellbeing Board to prioritise commissioning decisions.

4.3 A Revised Process is illustrated in Appendix 1. It proposes a greater involvement of the Health and Wellbeing Implementation Group. The Health and Wellbeing Implementation Group was established to oversee the delivery of the Health and Wellbeing Action plan in 2014. It is proposed that this group now takes on the responsibility to oversee the prioritisation and final sign off of completed JSNA topics and presents the priorities for JSNA topics to be undertaken, and the conclusions from completed JSNA topics to the Health and Wellbeing Board (See Appendix 1 and 2).

4.4 It should be noted that key to this revised process is the involvement of the Children and Young People's JCG, Adult JCG, CCG Strategy Development Committee and the third sector, in proposing JSNA topics
and subsequently approving them when completed before final sign off by the Health and Wellbeing Implementation Group.

4.5 The current terms of reference of the Health and Wellbeing Implementation Group require amending to reflect the new responsibility to oversee the JSNA process.

5. Financial implications

5.1 There are no specific financial implications. The Public Health team will have to allocate the appropriate human resources to manage and coordinate the JSNA process. Relevant commissioners will also be required to allocate appropriate human resources to the relevant JSNA Topic Expert Group.

5.2 Both the development of the JSNA and any expenditure proposed as a result of it will be met either from existing budgets or from new external funding.

6. Legal implications

6.1 The requirement to produce a JSNA is set out above.

6.2 Members of the Board are reminded that under Section 195 Health and Social Care Act 2012, Health and Wellbeing Boards are under a duty to encourage integrated working between the persons who arrange for health and social care services in their area.

7. Crime and Disorder Implications

7.1 There are no Crime and Disorder Implications

8. Equalities Implications

8.1 JSNAs are a continuous process of strategic assessment and planning – core aim to develop local evidence –based priorities for commissioning which will improve health and reduce inequalities.

9. Environmental Implications

9.1 There are no environmental implications.

10. Conclusion

10.1 The proposed revised process for the JSNA will ensure that the process is systematic and improved and overseen by the Health And
Wellbeing Implementation Group which is accountable to the Health and Wellbeing Board.

Background Documents

Appendix 1 and 2: Draft Revised JSNA Process

If there are any queries on this report please contact Danny Ruta, Director of Public Health danny.ruta@lewisham.gov.uk

If you have problems opening or printing any embedded links in this document, please contact the above named officers or kalyan.dasgupta@lewisham.gov.uk (Phone: 020 8314 8378)