





Developing the Joint Strategic Needs Assessment

Legislation

- Health and Wellbeing Boards have a responsibility for assessing the health and wellbeing needs of the area and publishing a JSNA.
- Local authorities and Integrated Care Boards (ICBs) have equal and joint duties to prepare the JSNA on behalf of the Health and Wellbeing Board.
- The Health and Wellbeing Act 2022 requires the Integrated Care Partnerships to write an integrated care strategy to set out how the assessed needs identified in the JSNA can be met through the functions of the ICB, partner local authorities or NHS England (when commissioning in that area).







Changing landscape

Current JSNA is based on the process designed by the former Northamptonshire County Council and Northamptonshire CCG. Landscape has changed:

- ➤ New Health and Wellbeing Boards North and West (2021)
- ➤ NHS organisational change: move from CCGs to the ICB (2022)
- ➤ Establishment of the ICS / ICP and publication of the 10 year ICN strategy (2023)
- ➤ Planned new Health & Wellbeing Strategies for North and West (2023)
- Formation of new teams in the councils (2022)
- ➤ New website and technology options







Current approach

Focus in recent years has been on development of specific products to meet strategy development and commissioning needs at a given point, including:

- Overview of health and wellbeing needs (JSNA headline summary pack)
- Detailed needs assessment (e.g., 0-19's, sexual health, drugs & alcohol)
- Health profiles of a community (e.g., PCN and Local Area Partnership Profiles)
- Briefings and insight packs (short profiles on specific topics)
- Demographic reports (including ONS and census outputs)







Moving forward - what are the options?

There is no single, agreed definition of a JSNA. National guidance states that local areas are free to undertake JSNAs in a way that is best suited to their local circumstance – there is no template, format or mandated dataset.

JSNA vary considerably in terms of

- **≻**Topics
- **≻**Format
- > Process

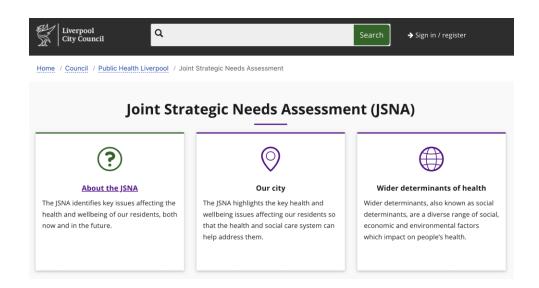


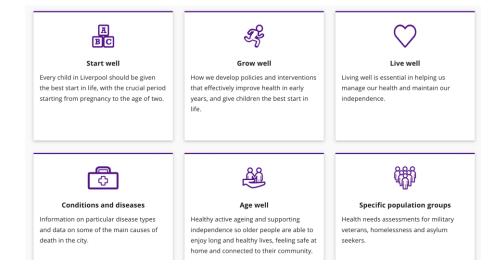




Topics – set list of topics

Many JSNAs do contain data on a standard list of topics, often presented along a life course alongside demographic and wider determinants (e.g. <u>Liverpool</u>)











Topics – agile response to priority areas

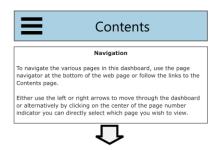
JSNAs are increasingly developing topics aligned to the immediate priorities e.g. cost of living and damp and mould (e.g. Suffolk JSNA)







Suffolk Cost of Living Dashboard







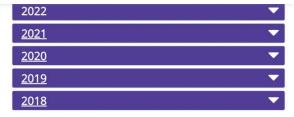


Topics – observatory style

Some JSNAs hold a wide variety of evidence and intelligence products from multiple partners e.g. VCSE, council, ICB, university e.g. <u>Suffolk JSNA</u>

Topic list

- Adult and child weight management needs assessment (2022)
- Ageing needs assessment (Ageing summary report, Ageing presentation delivered 2019) (2018)
- Air quality profile (2021)
- Alcohol (topic) (2018)
- Alcohol needs assessment (2022)
- Cancer (report) Cancer summary report (2018)
- Census 2021 (including summaries as data is released) (2022-23)
- Childhood immunisations (topic) (2021)
- Children in Care needs assessment (2018)
- Children in Suffolk: Suffolk data stories (2020)
- Children: Suffolk through a child's eyes (APHR) (2019)
- Children: State of Children in Suffolk (2022)
- Children: National Childhood Measurement Programme Briefing
 (2022)
- <u>Citizens Advice Impact Report (external report) (2019)</u>
- Community profiles East Suffolk (opens in new window) by partnership area (2019)
- Cost of living profile (2022)
- COVID-19
- Crisis in people with poor mental health (2019)
- Dementia (State of Suffolk) 2021
- Deprivation (2019) Suffolk report and summaries
- Drug and alcohol health needs assessment (2022)
- Economy, skills and employment (Suffolk summary) (2022)
- Evidence-based findings about the veteran population in the East of England (Northumbria University research: 2019)
- End of life: Lasting legacies (APHR) (2018)
- Food incocurity in Suffalls (2021)









Topics – mapping assets

JSNA guidance states that assets should be mapped alongside needs. Few achieve this, exceptions include <u>Bolton</u>

BOLTON JSNA

MENU =

ASSETS

Mounting evidence shows that when practitioners begin with what communities have – their assets – as opposed to what they don't have - their needs - a community's ability to address those needs increases.

FIND OUT MORE









Topics – beyond the data

Many JSNAs are incorporating different types of information and intelligence including literature reviews, related strategies, national data and consultations e.g. Herts and Kent



heritage can help improve health outcomes and facilitate a shift from an illness-based medical









Format

Often JSNAs will contain use a standard format for topics - short "bite sized" for set topics with longer needs assessments or "deep dives" in focused areas.

Most are using web based tools, such as Power BI, to create interactive, dynamic dashboards that end users can tailor to their needs e.g. <u>Devon</u> and <u>Essex</u>

Information can be regularly updated and tailored to focus on specific variables, can include:

- Geographical areas (LAPs, wards, neighbourhoods)
- Population of interest
- Time periods





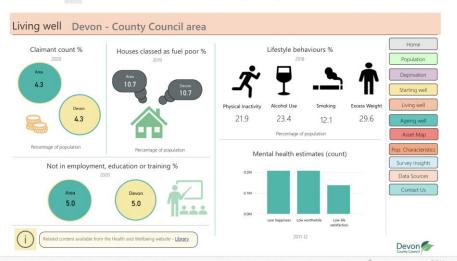


JSNA headline tool

The JSNA Headline tool is an interactive resource which sits underneath the umbrella of the Joint Strategic Needs Assessment (JSNA). It provides headline Health and Wellbeing across the life course for many different areas across Devon.

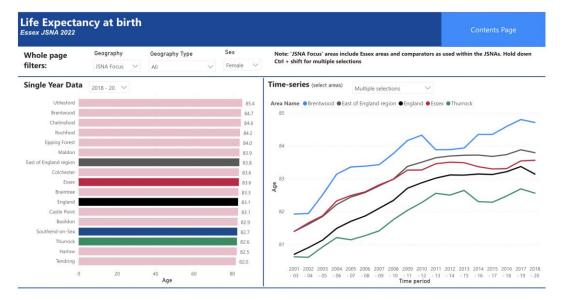
If you require the Joint Strategic Needs Assessment resource information in an alternative format please email publichealthintelligence-mailbox@devon.gov.uk or call 01392 383000 and ask for Public Health Intelligence.

You can click on the 🗸 icon below the report to make the report larger.



Essex County Council

The Health Outcomes -Length and Quality of Life dashboard is an interactive tool that presents information and intelligence to allow our stakeholders to understand the need in their local areas and inequalities as they pertain to length and quality of life. To make the most of this dashboard, it is important that it is used in conjunction with the accompanying downloadable reports so that the combined information and intelligence supports the provision of services to improve Essex resident's health and wellbeing and to reduce health inequalities.









Process

Most areas will have a multiagency JSNA steering group established to continuously develop the JSNA. Remit of the steering group often includes:

- Determining the scope of JSNA
- Prioritisation of requests (can include use of a matrix)
- Standardisation of approach to product development
- Resourcing
- Work programme development
- Quality assurance
- Promotion and evaluation







Next steps for Northamptonshire

Determining what the JSNA should be for Northamptonshire requires an understanding of the vision for the JSNA, with clarity on

- Scope
- Target audience and their needs
- Website and platforms for publication
- Involvement of wider stakeholders
- Governance and ongoing development

National guidance states that there is no requirement for each Health and Wellbeing Board to have its own JSNA – two or more Health and Wellbeing Boards could choose to work together to develop their JSNAs. Intelligence products are needed at System and Place level.







Recommendations

This review has highlighted the need to redesign the JSNA and process for ongoing development, considering organisational changes and priorities. Recommendations:

- Develop a System JSNA for Northamptonshire, ensuring that the intelligence products specific to Place (North and West) can be developed and are easily found.
- Initiate a JSNA re-design project to determine the scope of the JSNA in the context of plans for wider intelligence in Northamptonshire. Project to determine the vision for the JSNA, scope, format of the final product, governance and process for ongoing development and review.
- Establish a project steering group for the JSNA re-design project to oversee the stakeholder engagement and development of recommendations to Health and Wellbeing Boards.





