

**SUNDERLAND HEALTH AND WELLBEING BOARD**

24 May 2013

**REFRESHING THE JOINT STRATEGIC NEEDS ASSESSMENT (JSNA)**

**Director of Public Health and Head of Strategy, Policy and Performance  
Management**

**1.0 Purpose of the Report**

- 1.1 To provide assurance that there will be a robust process in place for the refresh of Sunderland's Joint Strategic Needs Assessment (JSNA).

**2.0 JSNA Context**

- 2.1 JSNAs are local assessments of current and future health and social care needs. Following the passing of the Health and Social Care Act 2012 local authorities and CCGs have an equal and explicit duty to prepare JSNAs and Joint Health and Wellbeing Strategies (JHWSs), through Health and Wellbeing Boards.
- 2.2 The JSNA and JHWS are continuous processes, and are an integral part of the local authority, CCG and NHS evidence base to inform commissioning cycles and embed health improvement in all policy and decision making. JSNAs are not a strategy or commissioning plan, but should be used to inform these and help determine all priority actions that need to be taken to meet health and social care needs and to address the wider determinants that impact on health and wellbeing. They help provide the explicit link from sound evidence to service planning, by providing an analysis of progress and a narrative that supports the formulation of the JHWS as well as informing wider 'people, place and economy' local plans and strategies.
- 2.3 It is for the Health and Wellbeing Board (HWB) to determine when to update the JSNA and JHWS or to refresh ones to ensure that they are able to inform all local commissioning plans over time.

**3.0 Reflections of Sunderland's previous JSNA refresh**

- 3.1 Sunderland's JSNA was refreshed in September 2011 to take a wider social determinants model to assessing the health and social care needs of the City.
- 3.2 Twenty-seven profiles were created and saved on both the Sunderland.gov.uk website and in the healthy cities section of the Sunderland Partnership website.

3.3 The process for updating the templates was established as a 'business as usual case', however it needs to be improved and simplified to focus on providing a sound evidence base for commissioning. The accountability for the individual profiles and clarity of roles and responsibilities needs strengthening to ensure the HWB as customer has assurance that a quality product will be delivered.

#### **4.0 JSNA Refresh – Next Steps**

4.1 By September 2013 there will have been a 'light-touch' refresh of profiles, updating major policy developments and any new data or significant data changes. In certain cases the update may require a more deep-dive assessment, for example, to inform commissioning intentions and associated equality analysis; to analyse why there has been a significant data change / outcome changes; or to inform a service review.

4.2 Following September 2013 update it is proposed that a new iterative process is launched. The first task for the new process will be to review what the priorities are for deep dive needs analysis based on an understanding of the policy and commissioning environment, and being cognisant of the outcomes we are seeking to achieve. This will be led by the Council's Executive Management Team, the Director of Public Health the Chief Officer of the CCG and HealthWatch.

4.3 A schedule will then be developed, identifying an ongoing timetable of refresh. The intention is to ensure profiles are live documents that inform annual planning and commissioning cycles, with each profile being updated at least once a year. The timescales for each profile refresh will also be influenced by the publication of new data, rather than to a single deadline date for all templates. A rolling programme of annual refresh will help to ensure the workload is spread where possible throughout the year, but would need a 'cut-off point' to inform annual planning and commissioning cycles that commence September onwards.

4.4 Whilst the JSNA template is broadly considered fit for purpose it is suggested a section on 'Key Strengths and Assets' should be added to the template that draws down key strengths and assets from relevant strategies. This should support the asset-based ethos to Sunderland's JHWS.

4.5 Essential to the development of an assets based approach is the involvement of the user – individual or community – and so an effective engagement process is a prerequisite for good quality profiles. An engagement plan will be developed with profile sponsors to ensure appropriate stakeholder involvement. The desire would be for an asset based approach to help realise improvements and reduce inequalities.

4.6 The JSNA provides a real opportunity for the Council, the NHS and wider partners involved in the HWB to strengthen engagement with communities, take collective leadership and ownership of key challenges, and influence the

integration of services beyond traditional health and social care boundaries, taking an assets based approach where practically possible.

## 5.0 Accountability

5.1 The role of officers within the system has been reviewed as follows:

Role	Requirement
<b>JSNA Lead Sponsor</b>	The Director of Public Health will be the named sponsor for the overall JSNA. They will lead the JSNA and be accountable to the HWB for ensuring the JSNA is responsive to their requirements.
<b>Commissioning Leads</b>	<p>It is proposed the Council's Executive Management Team, the Director of Public Health, the Chief Officer of the CCG and HealthWatch should act as the commissioning leads. They will meet annually to jointly review commissioning intentions and fit with JSNA profiles and to determine the profile priorities for commissioning and where a deep dive/full review is required.</p> <p>These will link to end to end service reviews and will provide the evidence base for commissioning and decommissioning decisions.</p> <p>They will be advised by profile sponsors with specific commissioning expertise covering People, Place and Economy.</p>
<b>Profile Authors</b>	<p>There will be a named author for each profile. This person may be from the Council or partner organisation. The profile author is accountable to the profile sponsor. The author will lead the completion of the profile, including collating policy and intelligence inputs; as well as patient and public engagement and equalities analysis with support from the policy and intelligence leads as appropriate.</p> <p>The profile authors would also be responsible for ensuring that commissioning data is incorporated into the profiles and shared with the intelligence lead.</p>
<b>JSNA Coordinator</b>	<p>There will be one coordinator who will manage the process for the production of the JSNA within the SPPM service.</p> <p>The coordinator will set deadlines for updates. The coordinator should be notified of any changes to the profiles and will liaise with the sponsor for sign off prior to arranging for public facing profiles to be updated.</p>

<p><b>Profile Intelligence Leads</b></p>	<p>There will be a named intelligence lead for each profile. This person may be from the Council or partner organisation.</p> <p>The intelligence lead will be responsible for:</p> <ul style="list-style-type: none"> <li>- coordinating intelligence inputs</li> <li>- updating the profile on the publication or collation of new data</li> <li>- joint interpretation of the data with the policy lead</li> <li>- highlighting any data gaps in the profile including those relating to comparative areas or equalities information and for proposing methods available for filling these gaps.</li> </ul>
<p><b>Profile Policy Leads</b></p>	<p>There will be a named policy lead for each profile. This person may be from the Council or partner organisation.</p> <p>The policy lead will be responsible for:</p> <ul style="list-style-type: none"> <li>- coordinating policy inputs</li> <li>- providing the policy direction as to what intelligence is important to the profile</li> <li>- joint interpretation of the data with the intelligence lead</li> <li>- updating the profile on the publication of new policies, strategies and procedures at a local, regional, national and international level, including the updating of profiles in line with best practice, particularly where the design principles that underpin Sunderland's Health and Wellbeing Strategy have been applied.</li> </ul>

## 6.0 Recommendations

- 6.1 It is recommended the Board agrees to the process of refresh set out in this report.