

	Agenda Item: 14
Report to:	Birmingham Health & Wellbeing Board
Date:	27 November 2018
TITLE:	UPDATE ON JSNA
Organisation	Birmingham City Council, Public Health
Presenting Officer	Becky Pollard, Interim Director of Public Health

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# 1. Purpose:

This information report sets out the developments in the Birmingham JSNA and proposed way forward to engagement of all partners in the development of an agreed work programme and production of specific needs assessments.

2. Implications:	
BHWB Strategy Priorities	Detect and Prevent Adverse Childhood Experiences
	All children in permanent housing
	Increase the control of individuals over their care through Integrated Personal Commissioning (Personal Health Budgets and Direct Payments)
	Increasing employment/ meaningful activity and stable accommodation for those with mental health problems
	Improving stable and independent accommodation for those learning disability



	Improve the wellbeing of those with multiple complex needs	
	Improve air quality	
	Increased mental wellbeing in the workplace	
Joint Strategic Needs Assessment		✓
Joint Commissioning and Servi		
Maximising transfer of Public H		
Financial		
Patient and Public Involvement		
Early Intervention		
Prevention		

### 3. Recommendations

The Board is asked to:

- Note the progress in improving the JSNA
- Support the establishment of a new JSNA Strategic Group and supporting processes to improve strategic oversight, agree an annual work plan and improve partner engagement.

## 4. Background

- 4.1 The JSNA is an assessment of current and future health and social care needs that could be met by the Local Authority, CCGs, or NHS England. The council and CCGs have an equal and joint duty to prepare JSNAs through the HWB. NHS England must participate in JSNAs. The responsibility falls on the Board as a whole.
- 4.2 The duty to undertake JSNA was introduced in 2007 in recognition that strategic planning for health and wellbeing was best done in partnership and based on evidence. The JSNA should be a single agreed picture of needs essential for strategic planning. In order to optimise the utility of the JSNA it is crucial that it draws on intelligence from across the council and wider



partners and that they engage fully in the process.

- 4.3 At the inception of the Health & Wellbeing Board it was agreed that the JSNA would be seen as a process with an annual refresh rather than a physical document. It would use updates based upon detailed needs assessments as well as outcomes relating to the Health and Wellbeing Strategy and Outcomes Frameworks.
- 4.4 The recent CQC review stated the JSNA was not fit for purpose and "There was not an up-to-date, coherent, shared view of the needs of Birmingham's population. Although there was a Joint Strategic Needs Assessment (JSNA), it was not clear how the priorities identified were being used to inform future commissioning intentions."
- 4.5 Additionally the "document was out of date and did not provide the detailed assessment expected. There was no evidence to suggest it had multi-agency input and it did not appear to unite all other needs analysis for the place, including local economic assessment and skills assessment."
- 4.6 The CQC report contained five comments on the JSNA. These have been categorised as relating to a need for:
  - Explicit linkage between JSNA and wider commissioning intentions
  - Explicit multi-agency input
  - Relevant reports from a wider range of partners to be included
- 4.7 Since the CQC report improvements to the JSNA have been made in the following areas:

#### Website

In order to identify the best way to improve the current JSNA website the draft CQC report was reviewed to identify the key issues highlighted. Additionally, Public Health England (PHE) were consulted to identify best practice and the current JSNA website was compared to a range of approaches taken by other areas

The web site has now been redesigned to improve navigation. There are three main sections:

- Locality profiles
- JSNA outcomes frameworks and health profiles
- JSNA themes

The JSNA themes are further split to reflect the HWB, STP and BCC priority areas:



- 1. Starting well maternity, children and young people
- 2. Living well working age adults
- 3. Ageing well older people
- 4. Local priorities Health and Wellbeing Board and STP

#### Place based intelligence

The District Health Profiles were launched in January 2018 having been developed over time with district committees based on data routinely available at district and/or ward level.

These can be found at:

https://www.birmingham.gov.uk/info/50120/public health/1332/district health profiles/1

There is a variety of information available on each district and ward, including population, age, employment and health.

Additionally, work is ongoing with BSol CCG locality GP leads to develop locality profiles. The profile for West Birmingham informed a presentation to the September CCG Governing Body. Work is continuing to develop the profiles with the other locality leads.

### Older people

An Older Adults JSNA Sub-Group has been established with representatives from:

- BCC Public Health
- BCC Commissioning
- Age Concern
- Ageing Better in Birmingham Programme
- Birmingham and Solihull Clinical Commissioning Group
- BVSC

The purpose of the group is to identify the key issues from across the health & wellbeing system to be included on Birmingham's Older Adults JSNA webpages. These will come via the priorities in strategic documents, policies, commissioning plans and improvement plans relevant to the topic area.

The starting point is based on the Adults Social Care Outcomes Framework (ASCOF) and Public Health Outcomes Framework and CQC data profile. Other strategic sources are:

BCF metrics



- Older Adults Marketing Position Statement
- ASC Prevention data presentation
- ASC Rapid Needs Analysis

#### Children

Specific work has been ongoing in response to internal requests and in preparation/response to external review bodies.

These include:

- Children with SEND
- Vulnerable children
- CYP substance misuse

## 5. Future development

- 5.1 Although progress to improve the JSNA content and accessibility has progressed, much of the work has been ad hoc and ion response to specific requests from partners. There is still a lack of strategic oversight and no process to prioritise requests.
- 5.2 Some of the issues include:
  - The balance between place based, locality specific reporting and city-wide thematic assessments
  - Engagement of all partners in the development of an agreed work programme and production of specific needs assessments.
  - Lack of awareness of the JSNA process or products
- 5.3 To improve the process it is recommended that a new JSNA Strategic Group is established, chaired by the Director of Public Health, and a membership including senior strategic decision makers from across the board. The working group will:
  - Prioritise requests for JSNA work
  - Develop an annual JSNA work plan for sign off by the Board
  - Ensure organisational commitment to the development of specific needs assessment
  - Ensure quality of JSNA through governance process and evaluation
  - Report progress and issues to the Health & Wellbeing Board
- 5.4 Reporting to the Strategic Group it is proposed that there are four Working Groups reflecting the current JSNA themes to act as an expert reference for specific needs assessments in each of these areas.



Time limited Task & Finish Groups will be convened to produce specific JSNA chapters from the annual work plan as agreed by the Board.

6.	Compliance Issues					
6.1	Strategy Implications					
6.2	Governance & Delivery					
6.3	Management Responsibility					
6. Risk Analysis						
Identi	fied Risk	Likelihood	Impact	Actions to Manage Risk		
#		#	#	#		
Apper	Appendices					
Signatures						
Chair of Health & Wellbeing Board (Councillor Paulette Hamilton)						
Date:						