

**Update on the Joint Strategic Needs Assessment (JSNA) Programme**

To: Health and Wellbeing Board

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**1.0 PURPOSE**

1.1 The purpose of this report is to introduce the following JSNA reports produced during 2013/14:

- Carer's JSNA
- Older People – primary prevention of ill health JSNA
- Older People's Mental Health JSNA

together with the JSNA Summary Report which has been developed in addition to the individual topic reports.

1.2 The purpose of the report is also to support the Health and Wellbeing Board (HWB Board) and its member organisations in considering their duties under the Health and Social Care Act 2012 to develop strategies to meet the needs identified in each JSNA, and to consider how joint commissioning and integration of service could support this.

1.3 Finally, the report provides a brief update on the JSNA programme for 2014/15, with particular reference to the scoping of the JSNA topic reports.

**2.0 BACKGROUND**

2.1 In the Health and Social Care Act 2012, the Government has set out a new vision for the leadership and delivery of public services – that decisions about services should be made as locally as possible, involving people who use them and the wider local community. The Act supports local clinical leadership and democratically elected leaders working together to deliver the best health and care services based on the best evidence of local needs. JSNAs and Joint Health and Wellbeing Strategies (JHWS) are an important means by which they can achieve this.

**Who is responsible for JSNAs and JHWSs?**

2.2 Local authorities and clinical commissioning groups (CCGs) have an equal and joint duty to prepare JSNAs and JHWSs, through the HWB Board. The responsibility falls on the HWB Board as a whole.

### **The aim of a JSNA is to:**

- Provide analyses of data to show the health and wellbeing status of local communities.
- Define where inequalities exist.
- Provide information on local community views and evidence of effectiveness of existing interventions which will help to shape future plans for services.
- Highlight key findings based on the information and evidence collected.

2.3 Once a JSNA has been prepared it is the duty of the HWB Board under section 193 of the Health and Social Care Act (2012) to prepare a strategy (the JHWS) for meeting the needs included in the assessment, through the exercise of the functions of the local authority, NHS England or the CCG. In preparing this strategy, the responsible local authority and each of its partner CCGs must, in particular, consider the extent to which the needs could be met jointly across health and social care, by the making of arrangements under section 75 of the National Health Service Act 2006.

2.4 The Cambridgeshire County Council JSNA process is based on a programme of detailed work and reports around client groups and major cross cutting themes. As such, it enables the gathering of stakeholders for each group or theme and allows a deep-dive into each JSNA programme work area. This helps to ensure that the JSNA is fit for purpose, as it is at the necessary depth of detail to support sound commissioning decisions.

### **3.0 JSNAs completed in 2014 for presentation at this meeting**

The JSNAs prepared for presentation to the Board at this meeting are:

#### **The Carer's JSNA**

3.1 The key findings and identified needs from the Carer's JSNA are included in both the Summary JSNA 2014 and the Carer's JSNA itself. The strategic background to the carers JSNA is the need to identify the needs of carers early in order to provide information and support with the aim of preventing escalation of need.

3.2 These principles underpin The Care Act 2014<sup>[1]</sup> and the transformational work relating to the Better Care Fund. The Act recognises carers in law in the same way as those they care for and Carers who are over 18 will be entitled to an assessment of their support needs. In addition, for young carers, The Children and Families Act 2014<sup>[2]</sup> states that local authorities in England must assess whether a young carer within their area has needs for support and, if so, what those needs are.

3.3 The JSNA has been informed by phase one of strategic work in Cambridgeshire to review and remodel the support to family/informal carers.

The second phase of this review is to design a new model of support for carers. The JSNA will inform this on-going work.

### **The Older People – primary prevention of ill health JSNA**

- 3.4 This JSNA provides important evidence and information to support the commissioning of preventative services and initiatives for Older People across health and social care and to encourage awareness and signposting of available public health improvement programmes and services available across Cambridgeshire. With the current CCG procurement of acute and community health services for Older People underway, the successful lead provider will be expected to use this evidence and information to develop effective integrated pathways of prevention to support healthy behaviours in older people.
- 3.5 This JSNA highlights opportunities for future work with partners and local communities to seize opportunities to raise awareness, provide information and signpost to evidence-based support to reduce lifestyle risks for older people. There is potential for this work to be built into and support the development of the Joint Older People's Strategy

### **The Older People's Mental Health JSNA**

- 3.6 The JSNA highlights a number of areas including further work for commissioners to benchmark service specifications, and current provision against NICE guidance and/or quality standards, particularly to ensure all the early intervention opportunities are being maximised. This will be particularly pertinent with the CCG procurement of a new lead provider for acute and community services for older people and the development of local integrated, holistic pathways for patient care which encompass mental health and wellbeing.
- 3.7 Continued partnership working to increase earlier identification and support for individuals and their carers with dementia and depression with referral to advice, support and services is also flagged as a key priority. Again there is potential for the needs identified in this JSNA to feed into the developing Joint Older People's Strategy.
- 3.8 Consideration of risk factors which may impact on the development of dementia and depression such as social isolation, housing and community support as well as physical or behavioural risk factors such as smoking, excessive alcohol use, obesity diabetes, hypertension and raised cholesterol levels are also important, and will be relevant to the Public Mental Health Strategy, recently commissioned by the Council Health Committee.
- 3.9 While the JSNA contains useful information, an analysis of CPFT service activity from the Mental Health Minimum Dataset (MHMD) was not possible as the data was not available in time, or complete enough, to be including within this work. It is now a specific requirement of the contract which CPFT have with the CCG to provide the MHMD in a timely and accessible format to

commissioners. The public health team will undertake an analysis of this data, when available, to provide additional service information for this JSNA and will present this to the HWB Board.

### **JSNA Summary Report**

- 3.10 In addition to the above topic reports, we have produced a JSNA Summary Report (2014). It is designed to identify and flag key pieces of information about the health and wellbeing needs of people who live in Cambridgeshire, using JSNA findings from this year and from previous years. It includes summarised findings from the Adult Mental Health JSNA which was taken to the HWB Board in June, but excludes those aspects of the Adult Mental Health JSNA about which the HWB Board raised queries which required further work. The reason for including certain aspects of the Adult Mental Health JSNA in the JSNA Summary Report at this point, is to enable officers to take forward the decision at the June HWB Board meeting 'to agree not to delay any work that had been identified as requiring to be started'. The JSNA summary report also includes key findings from the Pharmaceutical Need Assessment (2014) which is presented in a separate paper to this meeting of the HWB Board.
- 3.11 Given the duties of HWB Boards to develop the JHWS to meet needs identified in the JSNA, and to look at opportunities for meeting these needs through joint commissioning or integrated working of services, it may also be appropriate for the HWB Board to request a review of the extent to which the current JHWS (which was developed during 2012 prior to the implementation of the Health and Social Care Act) meets the needs outlined in the summary JSNA.

## **4.0 JSNA FORWARD PROGRAMME**

- 4.1 Following the feedback from the June HWB Board meeting, the importance of updating the Board with a brief scope for each of the forthcoming JSNA reports has been recognised. Updates on the Children and Young People's JSNA and the Transport JSNA are provided here. Capacity is still in process of being identified for the Long Term Conditions JSNA.

### **Children and Young People's JSNA**

- 4.2 The Health and Wellbeing Board requested that a JSNA be undertaken on Children and Young People in Cambridgeshire. A number of stakeholders have requested a focus on vulnerable children in Cambridgeshire, and that the JSNA should attempt to answer the question 'Who are the most vulnerable children and families in Cambridgeshire and what services are they currently in contact with?' Answering this question will help commissioners and providers to shape services which can promote prevention, intervene early and have highest impact on longer term outcomes and life chances for children. The JSNA will in effect aim to provide further insight into how well services are currently matched against need. Information governance rules

are being carefully adhered to in this work, which will not produce any individually identifiable information in the JSNA report.

### **Transport JSNA**

4.3 The intended scope of the Transport JSNA, following input from the HWB Board is:

- A review of the evidence on social isolation in relation to access to transport
- Transport to specialist hospital services
- Review the evidence for the impact of transport strategies and initiatives on promoting or discouraging physical activity
- This will be underpinned with a mapping/gap analysis of current transport access to health services across the county i.e. availability of public transport/community transport/car ownership relating it to health services.

### **JSNA Steering Group**

4.4 To support the development of the JSNA and to ensure continuous improvement in JSNA processes, a JSNA Programme steeringgroup has been established, which now meets once a quarter. Terms of reference are available for this group. Initially the group has been developing an evaluation exercise for the JSNA product which will be implemented shortly.

## **5.0 RECOMMENDATION/DECISION REQUIRED**

5.1 The HWB Board is asked to approve the following JSNA documents:

- Carer's JSNA
- Older People – primary prevention of ill health JSNA
- Older People's Mental Health JSNA
- JSNA Summary Report

5.2 The HWB Board is asked to consider the implications of the needs identified in these JSNAs for strategy development and the potential for joint commissioning through Section 75 or other forms of integrated working.

5.3 The HWB Board is asked to consider requesting a review of the extent to which the current JHWS (which was developed during 2012 prior to the implementation of the Health and Social Care Act) meets the needs outlined in the summary JSNA.

5.4 The HWB Board is asked to consider and comment on the scope and progress of the children's JSNA and transport JSNA.

Source Documents	Location
<p><b><i>Cambridgeshire JSNA reports</i></b></p> <p><b><i>JSNA Forward Work Plan</i></b></p>	<p><a href="http://www.cambridgeshireinsight.org.uk/jsna">http://www.cambridgeshireinsight.org.uk/jsna</a></p>
	<p>Cambridgeshire JSNA Roadmap v19-6-14 W</p>
<p><b><i>Department of Health – Health and Wellbeing Board duties</i></b></p>	<p><a href="https://www.gov.uk/government/consultations/health-and-wellbeing-board-duties">https://www.gov.uk/government/consultations/health-and-wellbeing-board-duties</a></p>
<p><b><i>Health and Social Care Act (2012)</i></b></p>	<p><a href="http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted">http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted</a></p>