



FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

DERBYSHIRE HEALTH AND WELLBEING BOARD

Date 29 March 2023

Report of the Director of Public Health, Adult Social Care and Health

Transformation of the Derbyshire Joint Strategic Needs Assessment (JSNA): Update on Phase One

1. Purpose

To update the Health and Wellbeing Board (HWB) on the ongoing JSNA transformation programme in Derbyshire.

2. Information and Analysis

2.1 What is the JSNA?

The JSNA is an ongoing process through which assessments of the current and future health and social care needs of our local communities are made. The JSNA guides the future planning and commissioning of health, social care and well-being services to improve outcomes and reduce inequalities. The JSNA is used by the public health team, the wider council departments, NHS partners, public and third sector partners and needs to be relevant and accessible to all.

Producing a JSNA is a joint and equal statutory responsibility shared between Local Authorities and Integrated Care Boards, overseen by the HWB.

Local areas can undertake a JSNA in a way best suited to local circumstances and there is no template or specific format that must be followed, and no mandatory dataset to include.

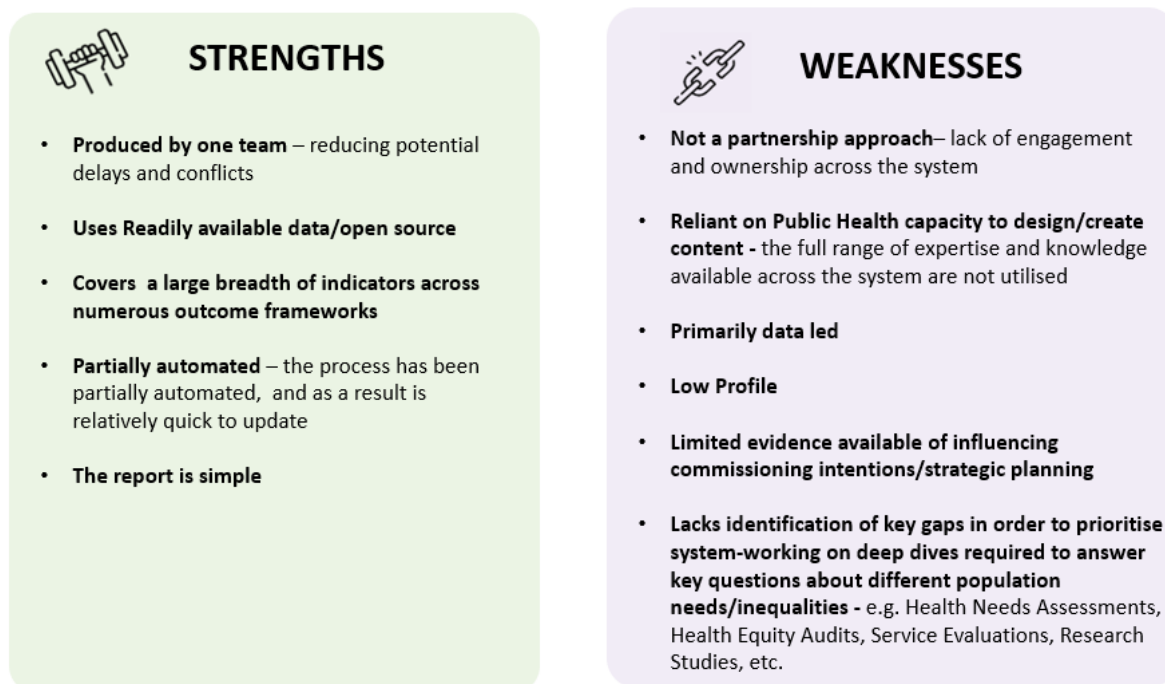
A good JSNA process should take a ‘big picture’ view of the needs of the population and involve NHS, Local Authority and wider partner organisations such as service providers, the third sector, universities and criminal justice agencies. A JSNA can be described as a foundation for addressing health and wellbeing needs.

2.2.1 Advantages and Disadvantages of the current Derbyshire JSNA approach

The current approach in Derbyshire brings together a range of data on an annual basis that demonstrates how Derbyshire is performing across a range of routine indicators. However it is not widely used by the system to inform decision making, has a low profile amongst local decision makers and the process lacks a sense of shared ownership.

The advantages and disadvantages of the current approach are summarised in Figure 1 below.

Figure 1. Advantages and Disadvantages of the current approach



3. Transforming the JSNA: A New Approach

The most recent guidance for JSNAs was produced back in 2013. Since then, a lot has changed:

- There has been a move towards Integrated Care Systems (ICS) for joint commissioning and delivery of health services (Joined Up Care Derbyshire).
- The NHS Long Term Plan requires more NHS action on prevention and health inequalities.
- Joined Up Care Derbyshire has been formed and is keen to place the JSNA at the heart of its decision making.
- Population Health Management approaches are being incorporated into ICS strategic plans
- Primary care networks are now required to complete health inequality plans.
- COVID-19 –recovery from the detrimental impact of COVID-19 on the health and wellbeing of our population.

These changes provide the opportunity to review the current approach to the JSNA process in Derbyshire in order to redesign and relaunch it as a key source of information and analysis to inform health, social care and wellbeing decision making. We are working with Derby City Council who are starting a similar transformation process.

Phase One (2022/23)	Review good practice, stakeholder engagement, trialling and testing new approaches. - Completed
Phase Two (2023/24)	Establish a strategic partnership approach to oversee the development and delivery of a jointly owned JSNA Transformation Plan which will include multiple work areas: Digital platform development - self-serve JSNA website that will act as single point of access for data/intelligence/insights across the system. Content Creation for JSNA Summaries – joint working across the system to identify and support JSNA summaries for key areas of focus Development of a process for prioritisation of systemwide deep dives – in order to prioritise the utilisation of specialist capacity across the system to support the delivery of the deep dive work Integration of JSNA Approach with Population Health Management Agenda at system level Culture change required across the system, to address both the generation of JSNA content and the utilisation of JSNA content routinely in decision making. This will require both a Communications plan and a Workforce Development plan. - In progress

Phase Three (2024/25)	Evaluation of Transformation approach in order to reflect, learn and implement this approach for the future- Not started
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3.1 Update on Phase One of the Transformation Programme (2022/23)

This paper provides an update the HWB on the outputs and learning from Phase One.

3.1.1 Strategic Ownership of JSNA between Derbyshire County Council and Derby & Derbyshire Integrated Care Board (ICB)

The Integrated Care Strategy has been informed by data and intelligence that was produced collaboratively, and, whilst it did highlight the lack of a systematic process for generating system insights it will provide a strong joined up foundation on which to build.

Work is underway to establish agreement between the ICB and Derby and Derbyshire Public Health teams to have shared ownership of JSNA transformation, reflecting the shared statutory duty. A clear joint commitment will support embedding the JSNA in strategic decision making across the system which will be the focus of phase 2 of the transformation.

3.2 Stakeholder Engagement

3.2.1 Stakeholder survey

A survey was conducted with ICB, local authority and third sector partners to identify if, how and when organisations across Derbyshire use the data and intelligence contained in the JSNA. Feedback was gathered on what needs to change which will inform the workforce development and communication plan.

3.2.2 Engagement events

Following the survey, two engagement events were held in order to gain insight from partners across the system on both how to ensure that a transformed approach to the JSNA could inform their, and their organisations, strategic decision-making and how they could contribute to the transformation. These events showed how people use data and intelligence tools and what they require to support their work and accessibility needs.

3.3 Evidence Reviews

A report carried out by the Public Health Knowledge and Intelligence Team in Derbyshire County Council reviewed JSNAs from around the country and undertook an analysis to determine the broad characteristics of each, including their make-up, development, automation, positives and negatives. This has provided key learning points and informed the JSNA transformation plan.

3.4 Completion of the automated Derbyshire Compendium prototype

A PowerBI dashboard tool proof of concept has been developed by the Derbyshire Public Health Knowledge and Intelligence Team and tests the options for a data repository, a critical element for underpinning the evidence base in the Derbyshire JSNA. Many of the 'good' JSNAs in the report had some level of data automation. The tool we have developed provides local granularity and easy access functionality that our engagement partners requested. Derby City and Nottingham City are developing similar Power BI tools and increasing numbers of JSNAs are using similar approaches. This tool will be ready to share with system partners in 2023.

3.5 Designing JSNA Summaries: Trailblazer Pilots

Three Trailblazer Pilots have been conducted to trial an approach to the authoring of the insight and needs sections of JSNA. The approach has been tested with Public health staff who have no experience of JSNA authoring. This has tested the approach and generated learning from the staff involved for future workforce development. This learning is also informing Phase Two.

4. Phase Two of the transformation (23/24)

This paper has summarised the progress of Phase One of the transformation of the Derbyshire JSNA as of March 2023.

The key aims of Phase Two will be formal adoption of a joint and collaborative approach, launch of the JSNA and prioritising summaries and deep dives based on strategic needs. HWB members are asked to endorse the adoption of the approach to delivery of content and expansion of JSNA use across the system.

5. Alternative Options Considered

5.1 Do nothing

The current JSNA approach is out of date and not fit for purpose. There is an increasing system requirement for an effective JSNA process. Not completing the JSNA transformation programme is not favoured as this would result in

lack of evidence based decisions that are not adequately informed by the needs of our population.

6. Implications

6.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

7. Consultation

7.1 Derbyshire County Council Corporate Management Team, JUCD Strategic Intent Executive Group (SEIG) and JUCD Strategic Intelligence Group (SIG) have been informed about the JSNA transformation programme.

Health and wellbeing partners have been consulted through surveys and engagement workshops.

Derby City Council public health have been engaged to agree alignment and collaboration and we are sharing learning.

8. Background Papers

8.1 Initial Paper proposing to transform the JSNA approach was presented on [7th July 2022](#).

9. Appendices

9.1 Appendix 1 – Implications

10. Recommendation(s)

That the Health and Wellbeing Board:

- a) Note the progress delivered in Phase One of the JSNA Transformation.
- b) Support the development and implementation of a jointly owned approach to the transformation of the JSNA.

11. Reasons for Recommendation(s)

11.1 The JSNA underpins the Health and Wellbeing Strategy refresh, ICS strategy, NHS Five year forward view and Public health and adult social care strategies. A continuation of the transformation programme will support these strategies with evidence and insight.

Report Authors: Shirley Devine, Thomas Dunn, Dale Burton

Contact details: shirley.devine@derbyshire.gov.uk

Thom.Dunn2@derbyshire.gov.uk

Dale.Burton@derbyshire.gov.uk

Organisation: Derbyshire County Council

HWB Sponsor: Ellie Houlston, Director of Public Health

Appendix 1

Financial

- 1.1 The JSNA transformation undertaken to date is funded through the core public health grant; however, future financial planning will be required. Sustainable funding and joint commissioning options with JUCD will be explored in the next phase of development.

Legal

- 2.1 Following the implementation of the Health and Care Act 2022 on 1 July 2022, clinical commissioning groups (CCGs) have been abolished and their functions have been assumed by integrated care boards (ICBs).
- 2.2 The Health and Care Act 2022 also amends section 116A of the Local Government and Public Involvement in Health Act 2007, renames 'joint health and wellbeing strategies' to 'joint local health and wellbeing strategies' and replaces references to 'clinical commissioning groups' with 'integrated care boards'.
- 2.3 Health and Wellbeing Boards continue to be responsible for the development of Joint Strategic Needs Assessments and joint local Health and Wellbeing Strategies. However, they must now have regard to the Integrated Care Strategy when preparing their joint local Health and Wellbeing Strategies in addition to having regard to the NHS Mandate.