Joint Strategic Needs Assessment (JSNA) update

Summary

1. This report provides the Board with an update on progress made on the JSNA since they last met in October 2014. The Board are asked to note the update and agree the approach for managing the emerging recommendations from the JSNA process. This is set out in paragraphs 5, 6 and 7 of this report.

Background

2. Under the Health and Social Care Act 2012, all Health and Wellbeing Boards are under a duty to prepare a Joint Strategic Needs Assessment jointly led by City of York Council and NHS Vale of York Clinical Commissioning Group. The York JSNA, first developed in 2012, is subject to regular updating, as well as ongoing further investigation into areas of strategic importance. The JSNA is available to view at [www.healthyork.org](http://www.healthyork.org)

3. The Health and Wellbeing Board has committed to receive regular updates on how work on the JSNA is progressing.

Main/Key Issues to be Considered

4. Since the last update report the following progress has been made:

   Emerging Recommendations

5. Work is ongoing to manage the recommendations arising from the JSNA work; these have previously been presented to the Board.

6. It is proposed that delivery against the recommendations will be managed by the appropriate sub-board, partnership board or organisation.
Officers are currently looking at the allocation of the recommendations and will be contacting people shortly to discuss these further. The recommendations will feed into the next refresh of the Health and Wellbeing Strategy.

7. The Health and Wellbeing Board are asked to agree to the appropriate sub board, partnership or organisation being allocated the management of the recommendations emerging from the JSNA work.

Frail/Elderly Deep Dive Work
8. The work on the frail/elderly deep dive is nearing completion. It is anticipated that this will be published on the JSNA website by the end of November 2014. An engagement event will follow around this piece of work early in the New Year with recommendations following shortly after that. There are some key areas to note which are broadly around prevention of frailty conditions in the older adult population, definition of older adults and how we view service provision to meet their needs and integration of health and social care services.

Website Updates
9. The website hosting the JSNA is continually developing. Recent developments include a text to speech function and PDF downloads for all content. In addition to this work is taking place in conjunction with York People First to provide the JSNA in easy read format.

Consultation
10. Consultation on the JSNA is an ongoing process. After each deep dive is published an engagement event is held which helps to formulate recommendations and identify gaps. These events are open to key stakeholders and members of the public. To date we have held one event around the poverty deep dive content. Two further events are planned, the first around the mental health deep dive on 8th December 2014 and then in the New Year an engagement event around the frail/elderly deep dive.

11. In addition to this voluntary sector, patient voice and lay representatives sit on the JSNA Steering Group.
12. Conversations around the possibility of holding a session specifically to look at the ways health and social care professionals use the JSNA are just starting. It is hoped that if this happens it will help us identify where improvements to the website and content may need to be made to ensure the JSNA can adequately inform commissioning processes.

Options

13. There are no specific options for the Board to consider however they are asked to note the update and more specifically to agree the approach for managing the recommendations emerging from the JSNA which is set out in paragraphs 5, 6 and 7 of this report.

Analysis

14. Not applicable.

Strategic/Operational Plans

15. The Health and Wellbeing Board have a statutory duty to produce a Joint Strategic Needs Assessment.

Implications

16. There are no known implications associated with the recommendations in this report. However, as the JSNA specific recommendations emerge implications for individual organisations may become apparent.

Risk Management

17. The production of a JSNA and delivery against emerging recommendations is resource intensive and this needs to be managed to ensure a fit for purpose JSNA is produced and kept updated.

18. There are risks around whether we have adequately engaged health and social care professionals in the JNSA process to date and a risk that because of this the recommendations arising from the JSNA may not be delivered.
Recommendations

19. The Health and Wellbeing Board are asked to note this update and to agree to the sub boards being allocated the management of any recommendations emerging from the JSNA work.

Reason: To update the Board on progress made with the JSNA

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Specialist Implications Officer(s) None

Wards Affected: All

For further information please contact the author of the report

Background Papers:
Joint Strategic Needs Assessment - www.healthyork.org

Annexes
None

Glossary
JSNA – Joint Strategic Needs Assessment
NHS – National Health Service
PDF – Portable Document Format