

Health and Wellbeing Board (HWB) Paper

1. Reference Information

Paper tracking information	
Title:	Joint Strategic Needs Assessment (JSNA) Refresh, Progress and Next Steps
HWBS Priority - 1, 2 and/or 3:	1, 2 and 3
Outcome(s)/System Capability:	Potential to impact on all outcomes and system capabilities.
Priority populations:	All priority populations.
Civic level, service based and/or community led interventions:	Individual JSNA chapters are likely to recommend interventions in each trident of the population intervention triangle for reducing health inequalities.
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Board Sponsor(s):	Ruth Hutchinson - Director of Public Health, Surrey County Council
HWB meeting date:	15 June 2022
Related HWB papers:	<p>Adaptation of approach to JSNA during COVID-19: Intelligence to Support Recovery (Health and Wellbeing Board, June 2020)</p> <p>A renewed vision for data: driving insight-led decision making, demand management and performance to improve outcomes, including</p> <ul style="list-style-type: none"> refreshing the Joint Strategic Needs Assessment the Surrey Index – Alpha Version (Health and Wellbeing Board, June 2021)
Annexes/Appendices:	Appendix 1 - JSNA and Health and Wellbeing Strategy alignment

2. Executive summary

The process for refreshing [Surrey's Joint Strategic Needs Assessment \(JSNA\)](#) is well underway and, now that we are acclimatising to 'live with COVID-19'¹, updating the JSNA has moved on from a period of adaptation to business as usual. To be the valuable planning resource it is intended to be, the production of the JSNA must now receive fresh engagement from system partners, and resource must be carefully coordinated and balanced against parallel strategic commitments.

To recap, the JSNA is a statutory and integral part of Surrey's intelligence system capability. It should involve a continuous process of assessment and evidence-gathering that drives planning and decision making by the local system. During the COVID-19 pandemic it was necessary to initially pause, then adapt the JSNA refresh. [Community Impact Assessments](#) and [Rapid Needs Assessments](#) were published in the interim, focusing on groups thought to be those most affected by the impact of the pandemic.

In line with recommendations adopted by the Health and Wellbeing Board (HWB), a JSNA Operational and Oversight Group (organisationally representative of the local planning system) with delegated responsibility from the HWB was established in 2021 to strategically manage the JSNA refresh. It has overseen the production of an agile JSNA plan of work for 2021-22 and 2022-23. Prioritisation in the work plan is fully aligned to the Health and Wellbeing Strategy (HWBS) for Surrey and includes a focus on target population groups and reducing health inequalities, whilst continuing to publish chapters under a life-course framework focusing on critical stages and transitions in life. Several individual chapter updates are now close to sign-off and publication.

3. Recommendations

The Health and Wellbeing Board is asked:

1. To note that:
 - a JSNA Operational and Oversight Group (Oversight Group) has been established to oversee and direct the production of the JSNA refresh;
 - a comprehensive governance structure has been established underneath the Oversight Group to ensure the delivery of individual JSNA chapters; and
 - there is ambition to deliver 10 Chapter refreshes by quarter four 2022-23, although this is dependent on resourcing and engagement from the local system.
2. To approve the continuation of a life-course based structure to the JSNA, i.e., publication of chapters under a life stage matrix.² However, we also ask the

¹https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1056229/COVID-19_Response_-_Living_with_COVID-19.pdf

² <https://www.surreyi.gov.uk/jsna/>

HWB to note that chapters have been intentionally structurally aligned to HWB strategy priorities, outcomes and priority populations. This approach has already been agreed by the Oversight Group, but we are also seeking HWB approval.

3. To provide support to ensure that the local system considers and makes use of the findings from individual JSNA chapters as they are published, specifically to inform local health and care strategies and subsequent implementation plans. We propose that, subject to HWB approval, procedures are designed and embedded to HWB protocols to ensure that any strategy brought to the HWB is quality assured for its use-of, and reference-to, JSNA evidence.
4. To provide support to increase awareness of and participation in the JSNA from partners across the Surrey health and social care system.
5. To request the HWB task the Oversight Group with connecting and aligning the ongoing development of the JSNA communication plan to the work of the Health and Well-Being Board Communications Group.

4. Reason for Recommendations

The success of the JSNA will depend upon all HWB member organisations. Its production requires resource from teams across the local system and engagement from a range of partners to develop the evidence base needed to improve health and wellbeing. To achieve the maximum impact possible, both the production and use of the JSNA needs to be acknowledged as a priority among all partners

Summer 2022 is a seminal moment to ensure that the relaunch of the JSNA process maintains strong momentum. Engagement with JSNA chapter production has been strong, but we need to ensure regular senior input at the JSNA Operational and Oversight Group.

The HWB also has a timely opportunity to influence operational level resourcing decisions across the system. Analytical capacity is now emerging as the need to produce real-time surveillance to manage the COVID-19 pandemic lessens. It is therefore important to ensure that the JSNA is built into the operational service plans of all HWB partners, so that all those required can assist with the development and writing of the JSNA.

As well as identifying local needs, the importance of the JSNA lies in how its evidence is used locally. The HWB have previously stated that the JSNA must be embedded to support Council and NHS organisational processes to spend money, prioritise resources and respond to need. There is an opportunity to build on the hitherto strong collaboration seen on chapter production to embed processes that will ensure that any refreshed JSNA chapters are fully utilised in local planning processes.

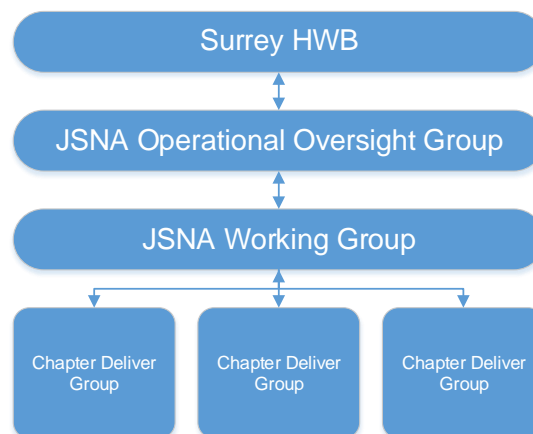
5. Detail

JSNA Background

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Nationally published guidance on JSNAs states that they are to be a *continuous* process of strategic assessment and planning³. Their purpose is to inform the setting of evidence-based Health and Wellbeing Board's priorities. They are a joint responsibility of both Local Authorities and the local NHS. They should focus on health and wellbeing needs that can be addressed by these partners, including considering wider determinants and assets. They must aim to reduce inequality. They must involve others including boroughs/districts, Healthwatch and the local community.

Governance Structure



Surrey HWB has the overall responsibility for publication of the JSNA. It delegates the responsibility and management for the JSNA to the JSNA Operational Oversight Group (Oversight Group). The Public Health Consultant (Intelligence and Insight) / DPH (Director of Public health) chairs the Oversight Group and reports to the HWB.

The **JSNA Operational Oversight Group** (Oversight Group) has representatives from Surrey County Council Public Health, Social Care, the CCGs, Voluntary Community and Faith Sector (VCFS) representation, Healthwatch, Districts and Boroughs and many other wider determinant partners. Representation from further organisations are co-opted as required. This group owns the process for final chapter sign-off.

The delivery of the JSNA will be overseen by the **JSNA Working Group**, which will report on progress to the Oversight Group and will be chaired by Public Health.

A **Chapter Delivery Group** is set up for each topic area. These groups include user voice representation, analyst support, project management support as well as relevant experts in the field from across the system. The Chapter Delivery Groups agree detailed level scoping, timelines and progress and report to the JSNA Working

³ Page 4, fourth paragraph. [Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies](#)

Group. Public Health support chapter delivery groups with project management materials to ensure consistency of approach.

Topic Selection and Progress in 2021 and 2022

The JSNA consists of 40 chapters, and, as such, must be updated across staged rounds of work.

The Oversight Group has overseen the production of an agreed plan of work for 2021-22 and 2022-23.

Existing legacy [JSNA](#) and [Rapid Needs Assessments](#) chapters were first presented by Public Health to the Oversight Group, who then suggested key priorities for the first round of refreshed chapters. This produced a list of possible chapter topics that were taken through a decision-tree process and further workshops with experts to further refine priorities.

In January 2022, the Oversight Group revised planned chapters in line with the draft HWBS priorities. Changes introduced as part of this process led to the inclusion of all HWBS priority population groups within chapter proposals, and several new topic areas. **See Appendix 1.**

The chapters selected for the first round of refresh were:

JSNA Chapter	HWBS priority
1. Children and young people with additional needs and disabilities (previously referred to as SEND)	Priority population of identity
2. Substance misuse	Priority 1 & Priority population of identity
3. The Surrey context: people and places	All priority areas
4. Oral health	Priority 1
5. Mental health	Priority 2
6. Learning disabilities and/or autism	Priority population of identity
7. Screening and immunisations	Priority 1

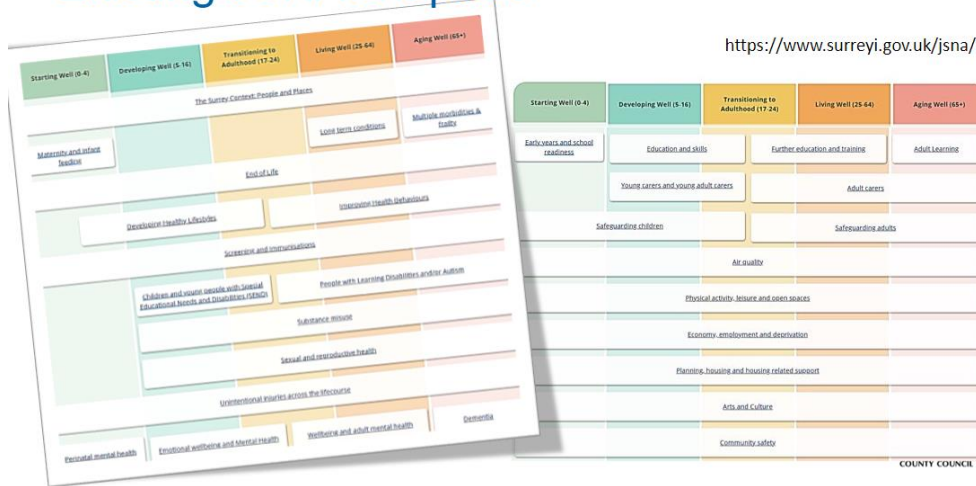
A second round of chapters for refresh will be selected by the Oversight Group by the end of August 2022. The Oversight Group will continue to use the HWB priorities and priority population groups of identity as a framework to help frame ordering. It is noted that the next stage of prioritisation must include topics central to priority 3.

The current JSNA continues to publish chapters under a **Life-Course** approach. This recognises that a person's physical and mental health and wellbeing are influenced throughout life by the wider determinants of health. These are a diverse range of

social, economic, and environmental factors, alongside behavioural risk factors which often cluster in the population, reflecting real lives. All these factors can be categorised as protective factors or risk factors.

Existing JSNA chapters

6



<https://www.surreyi.gov.uk/jsna/>

Alignment with Surrey Wide Data Strategy (SWDS)

Both the JSNA and the Surrey Wide Data Strategy (SWDS), share the aim of helping deliver better care and services to Surrey residents now, and in the future, and it will be important to closely align their development. In particular, the SWDS articulates an ambition to build a truly interoperable data ecosystem across partner organisations, and this would support the inclusion of insightful whole population, linked, person-level analytics in the JSNA. It will be important to ensure that the JSNA fully draws on all data benefits realised by the SWDS. A further paper on the SWDS will be brought to the HWB in July 2022.

6. Challenges

The process for refreshing the JSNA for the first-time post COVID-19 is in progress. However, to achieve the maximum impact possible, the production and use of the JSNA needs to be a priority among all partners within the HWB.

Consistently strong attendance at the Oversight Group needs to be ensured if this group is to manage the JSNA under devolved responsibility from the HWB. Challenges and dependencies managed at this group.

The need for updating the JSNA at pace, must be reconciled with several considerations, including:

- A high quality, high value, JSNA chapter meeting statutory requirements must be:
 - be meaningfully informed by Surrey’s residents
 - incorporate user-voice

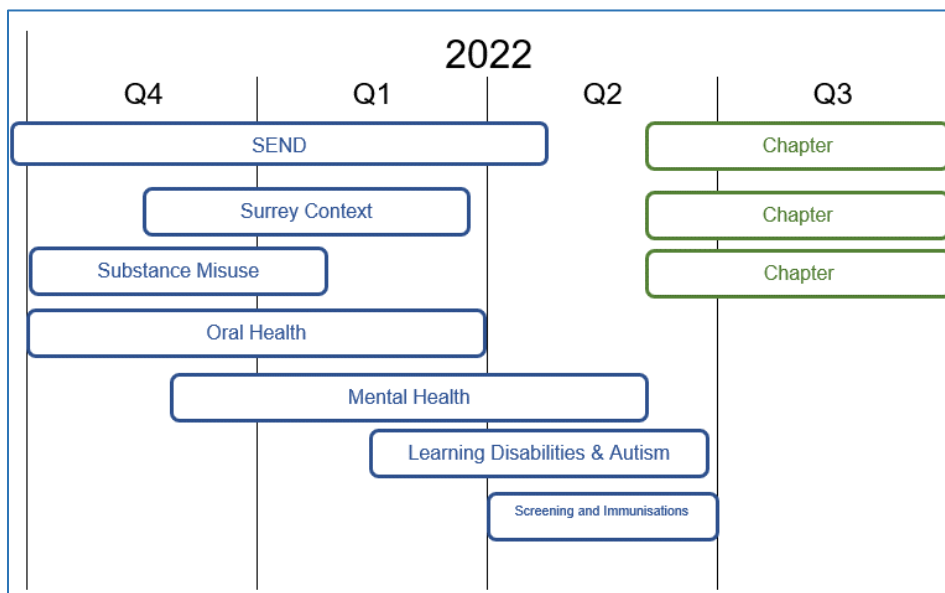
- co-produced by a range of partner organisations, and
- include a detailed and up-to-date empirical evidence base.

This comprehensive process means that an individual chapter can take around three to four months to complete. There are 40 chapters to refresh across the whole JSNA. Further resourcing and system prioritisation would be required at several levels to increase the speed of delivery. Alternatively, there may be opportunity to vary the approach taken on a chapter-by-chapter basis to reduce resourcing requirements.

- Capacity is currently a challenge right across the local health and social system and to work in partnership. When agreeing timescales and deliverables for the JSNA, different organisations are required to be respectful of competing delivery responsibilities.

7. Timescale and delivery plan

The diagram below shows the current high level chapter delivery plan for the JSNA in 2022 (including time built in for sign-off and publication processes). Subject to the HWB’s agreement, the JSNA Oversight Group has ambition to publish four refreshed chapters by the beginning of 2022-23, continue with three further ongoing chapter updates across quarter two and initiate three further chapter updates in quarter three. It will then continue with a rolling programme of chapter updates. Exact chapter timings will be agreed at Chapter Delivery Group level.



8. What communications and engagement has happened/needs to happen?

The JSNA refresh is documented as a central delivery commitment within the Public Health department's service plan for 2022-23. The JSNA is included in the Public Health department's 2022-23 communications plan, which, in turn, will seek to connect to the work of the Health and Well-Being Board Communications Group.

At chapter delivery level, strong engagement has been received from user-voice representatives and subject matter experts from initial planning to authoring responsibilities.

Recommendation 4 within this paper seeks HWB support in trying to achieve more consistent representation from senior leaders across the local system at the JSNA Oversight Group.

9. Next steps

- The work plan for the JSNA will continue to be managed by the Oversight Group and accomplished by a series of Chapter Delivery Groups overseen by a Working Group.
 - We are seeking immediate support with recommendation 4.
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Appendix 1 - JSNA and Health and Wellbeing Strategy alignment

Existing JSNA/RNA chapters and newly proposed chapters align to the HWBS priorities. NB: Bold border Chapters cover two Outcomes.

Priority 1: Supporting people to lead healthy lives by promoting physical ill health and promoting physical wellbeing

	Outcome 1 People have a healthy weight and are active	Outcome 2 Serious conditions and diseases are prevented	Outcome 3 Substance misuse (drug, alcohol) and smoking prevalence is low	Outcome 4 The needs of those experiencing multiple disadvantage are met	Outcome 5 People are supported to live independently for as long as possible
	Maternity and infant feeding	Screening and immunisations	Substance misuse and alcohol	Surrey context	Multiple morbidities and frailty
	Developing healthy lifestyles (CYP)	Sexual and reproductive health	Developing healthy lifestyles (CYP)	Multiple morbidities and frailty	End of life
	Improving health behaviours (adults)	Long term conditions	Improving health behaviours (adults)		
		Unintentional injuries across the lifecycle			
		Oral health			

Appendix 1 - JSNA and Health and Wellbeing Strategy alignment

Priority 2: Supporting people's mental health and emotional wellbeing by preventing mental ill health and promoting emotional wellbeing (TBC)

Page 46

Outcome 1 Adults, children and young people at risk of and with depression, anxiety and other mental health issues access the right early help and resources	Outcome 2 The emotional wellbeing of parents & caregivers, babies & children is supported	Outcome 3 Isolation is prevented and those that feel isolated are supported	Outcome 4 Environments and communities in which people live, work and learn build good mental health (Proposed new outcome)
Perinatal mental health	Perinatal mental health	NEW: Loneliness and social isolation	Surrey context
Children - Emotional wellbeing and mental health	Children - Emotional wellbeing and mental health		Young carers and young adult carers
Adults - Emotional wellbeing and mental health	Adults - Emotional wellbeing and mental health		Adult carers
Dementia			

Appendix 1 - JSNA and Health and Wellbeing Strategy alignment

Priority 3: Supporting people to reach their potential by addressing the wider determinants of health

	Outcome 1 People's basic needs are met (food security, poverty, housing strategy etc)	Outcome 2 Children, young people and adults are empowered in their communities	Outcome 3 People access training and employment opportunities within a sustainable economy	Outcome 4 People are safe and feel safe	Outcome 5 The benefits of healthy environments for people are valued and maximised
Page 47	Surrey context	Early years and school readiness	Economy, employment and deprivation	Safeguarding adults	Surrey context
	Economy, employment and deprivation	Education and skills	Further education and training	Safeguarding children	Planning housing and housing related support
	Planning housing and housing related support	Adult learning		Community safety	Air quality, open spaces, green spaces
	NEW: Digital inclusion ⁴	Arts and culture			NEW: Transport and health

⁴ Related SODA work: <https://www.surreyi.gov.uk/2022/02/03/understanding-digital-exclusion-in-surrey>



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Priority populations aligned with existing JSNA/ RNA chapters

<p>Carers and young carers</p> <p>Related JSNA young adult carers</p> <p>Related JSNA adult carers</p>	<p>Children in care and care leavers</p> <p>NEW topic</p>	<p>Children and young people with Special Educational Needs and Disabilities</p> <p>Related JSNA</p> <p>Related RNA</p>	<p>People with learning disabilities and/or Autism</p> <p>Related JSNA</p> <p>Related RNA</p>	<p>Older people 80+ & those in care homes</p> <p>Related RNA: Residential Care Rapid Needs Assessment</p>
<p>Black and Minority Ethnic Groups</p> <p>Related RNA</p>	<p>Gypsy and Roma Traveller community</p> <p>Related RNA</p>	<p>Young people out of work</p> <p>Related RNA</p>	<p>People with serious mental illness</p> <p>Related JSNA</p> <p>Related RNA</p>	<p>People experiencing domestic abuse</p> <p>Related RNA</p>
	<p>People experiencing homelessness</p> <p>Related RNA</p>	<p>People with long term health conditions, disabilities, or sensory impairment*</p> <p>Related RNA</p>	<p>People with drug and alcohol problems</p> <p>Related JSNA</p> <p>Related RNA</p>	