

KENT AND MEDWAY JOINT HEALTH AND WELLBEING BOARD

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BRIEFING PAPER: THE KENT JOINT STRATEGIC NEEDS ASSESSMENT

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Summary

Following the STP collaboration in the delivery of the statutory duties of the Kent County Council, Medway Council and the Clinical Commissioning Groups (CCGs) as underpinned by the Case for Change¹, this paper outlines the rationale and approach to undertaking the Joint Strategic Needs Assessment (JSNA) for Kent County Council.

1. Budget and Policy Framework

- 1.1 The Joint Health and Wellbeing Board is an advisory sub-committee to the respective Health and Wellbeing Boards (HWBB) of the Kent County Council and Medway Council². Each HWBB still retains responsibility for their own statutory functions, which includes the production of individual JSNAs.
- 1.2 The Joint Health and Wellbeing Board works across the wider partnership to influence the future design and alignment of public health and social care services with health and care services at Sustainability and Transformation Partnership (STP) level, with the aim to ensure high standards of care and best outcomes for residents.

2. Background

- 2.1 Councils and Clinical Commissioning Groups (CCGs) have a statutory obligation³ to produce a JSNA, the aim of which is to provide the evidence to

¹ https://kentandmedway.nhs.uk/wp-content/uploads/2018/07/KM_STP_case_for_change_March_2018_vF2.pdf

² <https://democracy.medway.gov.uk/ieListDocuments.aspx?CId=510&MIId=4218&Ver=4>

³ <http://www.legislation.gov.uk/ukpga/2012/7/section/192>

support the development of health and wellbeing strategies and commissioning decisions for the local population.

- 2.2 The JSNA is a continuous process of strategic assessment of relevant need and planning, with the statutory guidance⁴ outlining the following for consideration in its delivery:
 - 2.2.1 Where required, collaboration between two or more local Health and Wellbeing Boards in a joint-production.
 - 2.2.2 The use of any datasets, tools and information that can provide quantitative and qualitative evidence.
 - 2.2.3 The independence to undertake JSNAs in ways best suited to local circumstances.
 - 2.2.4 The undertaking of a more detailed needs assessment⁵ in the following areas:
 - specific disease groups and/or specific geographical footprints, especially those at risk of relatively poor outcomes,
 - the wider issues that impact on health and well-being (e.g. employment, digital access, housing, planning, air quality, community safety, transport),
 - the evaluation of services and outcomes, including that from service users,
 - the use of analytical tools (e.g. simulation modelling) as an additional product, to predict and inform on future needs of population cohorts, and their demands on health and care services.
 - 2.2.5 Any or all of these contribute to the broader delivery of a JSNA.
- 2.3 With the potential for overlap in the system between Case for Change and JSNA, this paper seeks to make a case for STPs to build on work associated with statutory duties discharged by Local Authorities and CCGs, on behalf of Health and Wellbeing Boards, some of which include an obligation to undertake JSNAs.

3. Proposal

- 3.1 The scope of work and statutory activities in the Case for Change is consistent with the outputs for a JSNA; it is therefore conceivable, by potentially avoiding duplication in strategic work, to adopt the Kent and Medway STP Case for Change as the JSNA for Kent and Medway.
- 3.2 This does not preclude more detailed needs assessment, and for each upper tier Local Authority maintaining the datasets and JSNAs for local areas. For example, Medway Council intends to maintain its own JSNA development and publication process, as does Kent.

⁴ [JSNAs and JHWS statutory guidance - GOV.UK](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/612222/JSNAs_and_JHWS_statutory_guidance.pdf)

⁵ <https://www.kpho.org.uk/joint-strategic-needs-assessment>

3.3 The 10-year NHS Plan, due to be published shortly, sets the direction of travel for the local and health care system.

3.4 The Plan will set out a national context, and this needs to be locally reiterated to present a Kent and Medway picture on the priorities for delivering the 10-year Plan.

4. Risk Management

4.1 Continued improvements in the transparency and processes of Kent JSNA delivery includes the governance structure, which mitigates against the risk of criticism, if subjected to independent review.

5. Financial Implications

5.1 There are no financial implications arising from the report.

6. Legal Implications

6.1 Section 116 of the Local Government and Public Involvement in Health Act 2007, as amended by the Health and Social Care Act 2012, requires that an assessment of relevant need (that is, a JSNA) must be prepared in relation to the area of each responsible local authority. The Medway Council and Kent County Council are each the responsible local authority respectively.

6.2 It is for each Council and each of its partner clinical commissioning groups to prepare the assessment of relevant needs and for each Council to publish each assessment of relevant needs. County Councils must also involve each relevant district council. Section 196 of the Health and Social Care Act 2012 confers the responsibility for exercising the functions set out on section 116 of the Local Government and Public Involvement in Health Act 2007 to the Health and Wellbeing Board established by each local authority.

6.3 The Statutory Guidance explains that Health and Wellbeing Boards may discuss and agree their own arrangements for signing off the process and outputs and further that two or more Health and Wellbeing Boards could choose to work together to produce JSNAs, covering their combined geographical area. The scope for two or more Health and Wellbeing Boards to establish arrangements to work jointly is provided in section 198 of the Health and Social Care Act 2012. Section 198 allows for the joint exercise of functions by a Joint HWB or by a Joint Sub Committee or for the establishment of a Joint Sub Committee to advise the participating Health and Wellbeing Board's on any matter related to the exercise of their functions. In this instance the Health and Wellbeing Boards of Kent and Medway have not agreed to formally exercise this function jointly and as set out in paragraph 3.2 both Kent County Council and Medway Council intend to maintain their own JSNA development and publication process.

7. Recommendations

- 7.1 The Kent and Medway Joint Health and Wellbeing Board is asked to:
- 7.1.1 consider and comment on the paper;
 - 7.1.2 note that Kent County Council's and Medway Council's JSNA development and publication process will continue to be maintained by each authority separately; and
 - 7.1.3 recommend further discussion by the Health and Wellbeing Boards of Kent County Council and Medway Council on the proposal that the Case for Change for the STP could be developed to incorporate the JSNA's for Kent and Medway in the longer term.

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Appendices

None

Background papers

1. Health and Social Care Act 2012 - <http://www.legislation.gov.uk/ukpga/2012/7/section/192>
2. JSNA Guidance - https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/277012/Statutory-Guidance-on-Joint-Strategic-Needs-Assessments-and-Joint-Health-and-Wellbeing-Strategies-March-20131.pdf
3. Case for Change - https://kentandmedway.nhs.uk/wp-content/uploads/2018/07/KM_STP_case_for_change_March_2018_vF2.pdf
4. NHS Five Year Forward review - <https://www.england.nhs.uk/wp-content/uploads/2017/03/NEXT-STEPS-ON-THE-NHS-FIVE-YEAR-FORWARD-VIEW.pdf>.
5. NHS 10 Year Plan - still in publication (expected in November 2018).
6. The Kent JSNA - <https://www.kpho.org.uk/joint-strategic-needs-assessment>