

A large, solid green decorative wave shape curves across the middle of the slide, starting from the left edge and tapering off towards the right edge.

JSNA & JHWS workstream

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This paper aims to:

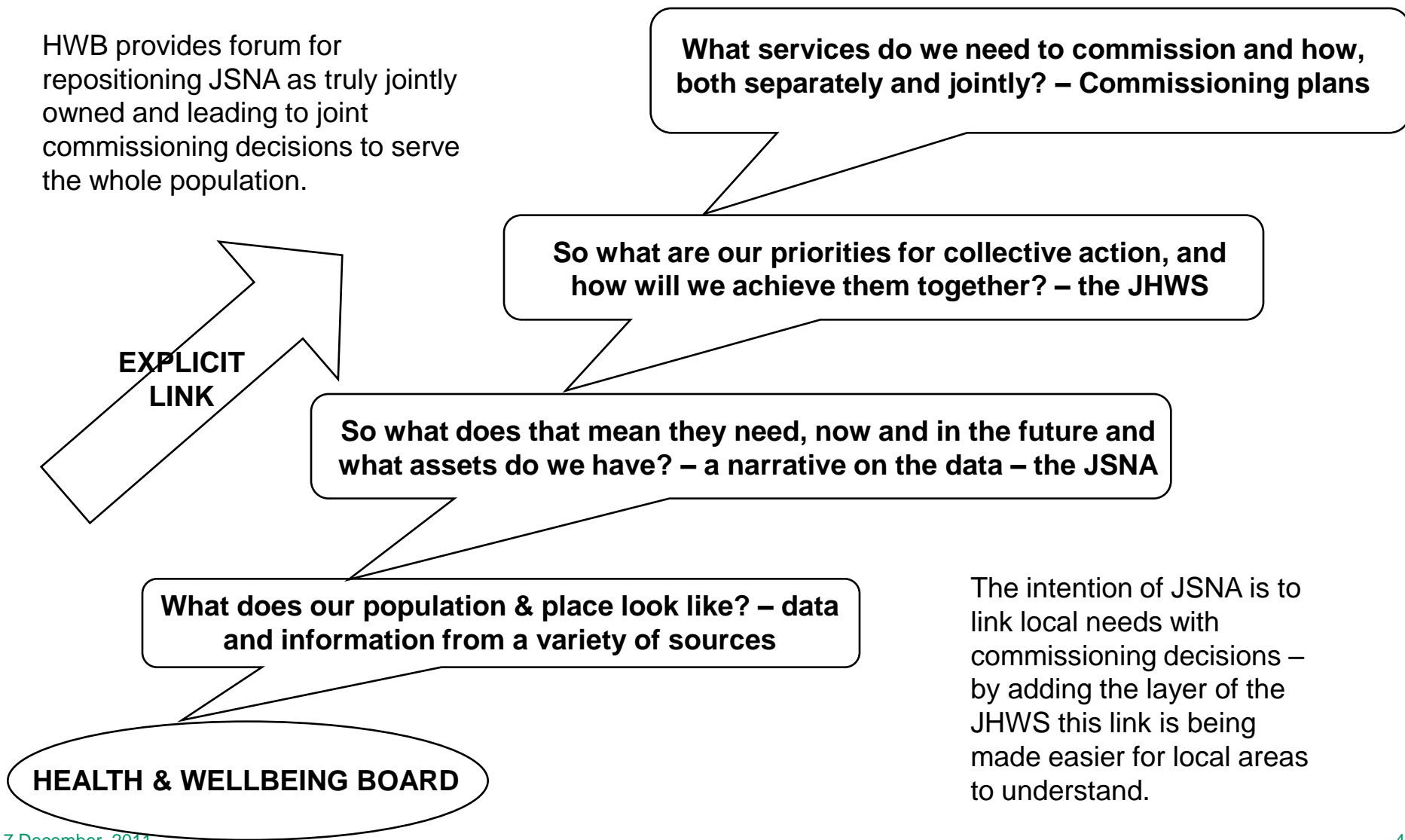
- Lay out the background to the JSNA from previous work
- Set out the direction of travel in the new system, including:
 - What JSNAs and joint health and wellbeing strategies will look like and how they fit together
 - What work is underway to support health and wellbeing boards
- Look at the what work is upcoming, including:
 - Publication of *Joint Strategic Needs Assessments and joint health and wellbeing strategies explained*
 - When draft statutory guidance will be available
 - Wider resources

Learning from the past

- The previous JSNA programme reported that progress since 2007 has been good, but there are still too many poor quality JSNAs
- It is key to understand what characterises the “leaders” & “those that follow”
 - Leaders:
 - history of good partnerships
 - excellent leadership
 - able to manage risk appropriately
 - drive innovative investments and new ways of working
 - understand the importance of a recognition of ‘place’ and share responsibility to improve wellbeing across all public agencies
 - typically endorsement and support for JSNA at the highest organisational or political level
 - recognition that the JSNA is a shared problem solving exercise with ‘teeth’
 - Most leading areas have ‘picked up the JSNA and run with it’, creating bespoke JSNA processes and products that make sense locally.
 - Those that follow:
 - Typified by single agency dominance of the JSNA (usually but not exclusively public health)
 - enduring confusion as to whether form or function matters most, such as a belief that the JSNA is foremost an exercise in data collation and information publishing
 - usually oppose granting a mandate to JSNA to lead strategic priority setting and influence commissioning and decision-making
- The health and wellbeing board provides an opportunity to refresh and support good JSNAs within the context of true partnership working across agencies, with the added joint health and wellbeing strategy to link to commissioning decisions and encourage integrated and joint commissioning.

The aim for health and wellbeing boards, JSNA and joint health and wellbeing strategies:

HWB provides forum for repositioning JSNA as truly jointly owned and leading to joint commissioning decisions to serve the whole population.



The intention of JSNA is to link local needs with commissioning decisions – by adding the layer of the JHWS this link is being made easier for local areas to understand.

Feedback from system:

- The guidance needs to focus on the JSNA and joint health and wellbeing strategy as a process, not a “shopping list” of groups of people – prescribing specific groups to be included creates a strong risk that such a list would be considered comprehensive to the detriment of other groups.
- An emphasis on assessing the full needs of the whole local population, across the life course
- Need for buy-in from across the health and wellbeing board – joint responsibility to input into and act upon the JSNA and joint health and wellbeing strategy
- Opportunity to tackle inequalities and wider determinants through joint working across agencies and also with local partners and their strategies
- Thinking about different data and information sources – qualitative and quantitative from a number of sources and service areas
- Making the link to commissioning – JSNA and joint health and wellbeing strategy not an end in itself, but a process to get to the services that meet the need of the local population

What work is underway

- A narrative document, *Joint Strategic Needs Assessments and joint health and wellbeing strategies explained* has been published
 - This is a high-level document setting out the context of JSNAs and joint health and wellbeing strategies for health and wellbeing board members
 - Publicly lays out the plans for developing the guidance going forward – allowing stakeholders to prepare for engagement
 - Was published as a low-key, web-based publication on 6th December 2011
- Statutory guidance on the JSNA and joint health and wellbeing strategy is being drafted
 - This will be slim and high level, in line with localism – focus on the process
 - Being informed by early implementers
- We plan to develop wider suite of resources to support health and wellbeing boards, co-produced with partners
 - Could be a number of things – aim is to provide support to health and wellbeing boards and their partners where they want it
 - Could be a range of formats – case studies, best-practice guides, or toolkits. Is about bringing in to live and delving into specific challenges health and wellbeing boards face

JSNA / JHWS narrative – *Joint Strategic Needs Assessments and joint health and wellbeing strategies explained*

- This is a high-level document setting out the context of JSNAs and joint health and wellbeing strategies for health and wellbeing board members
- Publicly lays out the plans for developing the guidance going forward – allowing stakeholders to prepare for engagement
- Aim to publish next week as a low-key, web-based publication – either on 5th or 6th December 2011

Background to development of statutory guidance and wider resources

- Government has committed to guidance on JSNAs & joint health and wellbeing strategies
- We will meet this commitment by developing:
 - Statutory guidance
 - A suite of co-produced non-statutory resources
- Both of these elements will be informed by the National Learning Network
 - In particular the learning set on JSNA and joint health and wellbeing strategies
- Also want feed in from wider stakeholders and partners
 - Engagement underway with Department for Communities and Local Government, Local Government Association, Department for Education, Home Office and Ministry of Justice
 - DH Strategic Partners already engaged (group of representative VCS organisations)
 - Will build engagement with others going forward, e.g. ADASS, ADCS, ADPH, NHS Confederation, CCG pathfinders, HealthWatch pathfinders, Inclusion Health Board etc.#
 - Also want feed in via regional networks to ensure we don't miss views or input

Development of statutory guidance

- We are not able to publish formal statutory guidance until the Health and Social Care Bill has gained Royal Assent
- We want to share draft guidance and wider learning with emerging shadow health and wellbeing boards as early as possible to support them in developing their JSNAs and joint health and wellbeing strategies ready to inform commissioning plans in for 2013/14, which will be in preparation from autumn 2012.
- Therefore, would like to test a draft version of the guidance with emerging shadow health and wellbeing boards in January 2012 to:
 - help the development of their JSNAs and joint health and wellbeing strategies
 - gain their feedback to ensure the final version of the guidance is fit for purpose.

Forward direction

- During January and the first half of February 2012 we will engage with stakeholders on the basis of the draft guidance
- This will be followed by a short public consultation of between 4 and 8 weeks. This option would allow for a number of stakeholders to engage with the draft guidance as it develops; and for interested parties to also be able to comment on the draft guidance in a transparent forum.
- We will then refine the draft before publishing the final statutory guidance after Royal Assent, before Summer Recess 2012.
- The co-produced resources will also be informed by this process – informed and driven by the National Learning Network and links with stakeholders
 - As these discussions take place, topics and themes for the “suite” will surface