

CROYDON JOINT STRATEGIC NEEDS ASSESSMENT STEERING GROUP

TERMS OF REFERENCE

1. Background

Joint Strategic Needs Assessment (JSNA) has been a statutory requirement of local authorities and NHS primary care trusts since 1 April 2008.¹ Original guidance set out an expectation that the JSNA be carried out jointly by the director of public health, director of adult social services and director of children's services.²

The Coalition government has since highlighted the 'equal and explicit' role of GP consortia and local authorities, including the director of public health, in preparing the JSNA, and endorsed the JSNA's key role in informing joint health and wellbeing strategies, to be developed by new Health and Wellbeing Boards.³

Croydon is an early adopter in terms of Health and Wellbeing Boards and established a shadow board in April 2011. A proposal was put to its inaugural meeting that the JSNA Board be replaced with a JSNA steering group, with responsibility for driving the JSNA process forward. The decision was also taken to merge the existing JSNA data sharing group with the steering group.

Additional proposals were made for the initiation of a new approach to JSNA in Croydon, consisting of an annual 'overview' chapter plus a rolling programme of needs assessment, to be published as and when complete rather than annually, and to be produced using a locally developed, systematic and collaborative approach. All of the above were approved by the Board.

2. Aim

JSNA was devised as a 'tool to identify groups where needs are not being met and that are experiencing poor outcomes.'⁴ The requirement for JSNA originated from a perceived need for stronger partnership working between the NHS, local government, and local communities. Community engagement has thus always been an essential element of the vision for JSNA, with the process of producing a JSNA as important as the product itself.

JSNA was originally closely tied to the need to develop world class commissioning, including practice based commissioning, in such a way as to

¹ Section 116 of the Local Government and Public Involvement in Health Act 2007

² Creating Strong, Safe and Prosperous Communities, 2008

³ Healthy Lives, Healthy People: Our Strategy for public health in England, 2010

⁴ Guidance on Joint Strategic Needs Assessment, Department of Health, 2007: pg 7

improve health and wellbeing and reduce inequalities.⁵ The landscape had changed radically since then and continues to develop, however, recent guidance from the Department of Health reaffirms the need for 'enhanced' JSNAs to more fully realise their potential to be at the heart of commissioning decisions, with local areas deciding on the most appropriate approach, and local areas building on the needs and assets identified through the JSNA to produce the new Joint Health and Wellbeing Strategy (JHWS).

The aim of the Croydon JSNA is to work in partnership to produce meaningful information on needs which effectively informs local commissioning decisions.

3. Responsibilities

This Steering group replaces the previous JSNA Board and JSNA Data Sharing groups and will report to the Health and Wellbeing Board. Its chief responsibilities will be:

- a) overseeing the production of an annual core dataset and overview chapter
- b) contributing to and agreeing a revised process for the rolling needs assessments
- c) advising the Health and Wellbeing Board on priorities for needs assessment using an agreed prioritisation tool
- d) for each topic area agreed for a deep dive needs assessment, providing advice on appropriate sources of information and data as well as on key stakeholders from across the NHS, council and community
- e) agreeing realistic project plans for both the overview chapter and each needs assessment
- f) acting as an advocate for the JSNA process, encouraging its wide usage, and actively seeking to address 'lessons learned' locally and nationally
- g) identifying risks and barriers to the successful production of each aspect of the JSNA and attempting to avoid and resolve these
- h) inviting commissioners, JSNA authors and other key stakeholders to reflect and review the implementation of JSNA recommendations, past and present
- i) providing advice and support to facilitate the successful implementation of JSNA recommendations
- j) advising the Health and Wellbeing board on perceived blockages to implementation of recommendations

4. Governance

Until further legislation is forthcoming, the JSNA is the legal responsibility of the director of public health, the executive director for children, young people and learners, and the executive director of adult services and housing. Each is represented on the executive group of the Health and Wellbeing Board. As such, the JSNA steering group will provide regular updates to the Health and

⁵ Guidance on Joint Strategic Needs Assessment, Department of Health, 2007

Wellbeing Board and seek agreement for all deep dive topics as well as for the overview chapter and individual deep dive needs assessments.

Reporting will also take into account the decision making processes of the individual responsible statutory authorities (ie, annually to the PCT management team and the council's management team and cabinet). Individual members of the steering group will be accountable to their own employing organisations.

5. Membership

Consultant in public health intelligence (chair)

Administrative support

Local authority leads for adults and adult services commissioning

Local authority leads for children and children's commissioning

Representatives from Commissioning for Croydon (C4C) and Croydon Healthcare Commissioning (CHC)

Head of commissioning for Croydon Borough Team or representative NHS data/information/research specialists

Local authority data/information/research specialists

Croydon Health Services representative

Head of health and wellbeing

Head of corporate equalities and cohesion (Croydon Council)

BME Forum representative (NHS Croydon)

Chief executive of CVA

Croydon LINK/Croydon shadow Healthwatch (two representatives)

Croydon Disability Forum

Pharmacy representative

Representative of SLAM

6. Frequency of meetings

The steering group will meet monthly in its initial stages – to be reconsidered after four meetings.

Date: June 2011

Review date: June 2012