# Joint Strategic Needs Assessment (JSNA) Steering Group

Thursday 15<sup>th</sup> June 2017 2.00-4.00pm

Westminster City Hall, 5 Strand, London, WC2N 5HR

# Minutes

In attendance	
Mark Jarvis (MJ) (Chair)	Head of Governance and Engagement, H&F WL CCG
Colin Brodie (CB)	Knowledge Manager, Public Health
Catherine Handley (CH)	JSNA Manager, Public Health
Jackie Rosenberg (JR)	CEO, One Westminster
Angela Spence (AS)	CEO, Kensington and Chelsea Social Council
Samar Pankanti (SP)	Public Health Project Manager, CL CCG
Sharon Grant	Adult's Commissioning, ASC
Charlotte Healy (CH) Minutes	JSNA Officer, Public Health
Apologies: Shad Haibathan, Sobus	

## Minutes

## 1. Welcome and introductions

#### 2. Updates from current projects:

#### a) Special Educational Needs and Disability JSNA

- CH &CH met with Jo Baty (SEND lead) to progress the SEND JSNA and ensure the JSNA and upcoming strategy will be aligned. It was discussed that the Sir Peter Gray Review should be incorporated into the JSNA as it encompasses a comprehensive review of local services, looks at supply and demand and provides qualitative feedback.
- We nearly have a full draft of the JSNA, which will be circulated to the wider group once the additional information from the Sir Peter Gray review has been incorporated.

MJ – Concerns over the recommendations feeding into the SEND strategy that may set requirements that Local Authorities and CCGs will be expected to implement. Group would like to be aware of the recommendations early on to see if they fit with STP priorities.

ACTION – CH to share draft recommendations with the wider group once first draft is in place

ACTION – ALL to suggest who the draft SEND JSNA should be circulated to for feedback

# b) Pharmaceutical Needs Assessment (PNA)

- This is a statutory requirement with the core purpose of providing a decision making tool to inform market entry decisions for providers to set up a service in a particular area.
- Like many other London Boroughs we have taken the decision to use a specialist provider to undertake the review and engagement with pharmacies.
- The procurement process has begun and providers have been invited to apply for the PNA evaluation will be w/c 26<sup>th</sup> June.

Discussion on the types of questions included in the pharmacy questionnaire (opening hours, disabled access, consultation rooms etc.). It was suggested that the relationship and data linkage between pharmacies and GPs should be looked into to ascertain where there may be communication problems. **ACTION – CB to share previous PNA questionnaire with group – attached in email** 

ACTION – CB to follow up with Janet Cree re Choosing Wisely pharmacy programme across NWL

- c) Annual Public Health Report (APHR)
  - The APHR is another statutory duty for DPH that provides a highlight of the health of the local area. We have moved towards themed reports with this year's report focusing on wellbeing, particularly mental wellbeing. The report will look at the five ways to wellbeing and will display assets and case studies showing how people can support their own wellbeing and will signpost to the services we offer.

ACTION – CH to share link for "Road to Wellbeing" interactive map created by Turning Point:

https://roadstowellbeing.communitymaps.org.uk/project/road-to-wellbeing-map

ACTION: ALL to consider how their organisations can feed in case studies and other contributions and send to CB or CH (Charlotte)

# d) Factsheets

The PHI team are producing factsheets on key issues as there is a high demand for 'snapshots' of
information with the intention that the factsheets will support and encourage evidence based
discussions and decisions. The fact sheets will by a couple of pages long and will include general
information, why it is a public health issue, key statistics and what the research is recommending.

Discussion on fact sheet topics e.g. obesity information would be beneficial as there is lots of information out there and consistency is needed, may need to be split into smaller topics such as:

- Healthy eating and buying from the supermarket
- Exercise how much difference does getting off one bus stop early make?

Discussed that JSNA is aimed at providers and commissioners rather than informing the public, however fact sheets could inform those who are on the front line and inform public health communications.

# 3. Workshop

Purpose of the workshop is to do an initial scoping of the Joint Health and Wellbeing Strategies (JHWS) and the STP to begin the process of identifying where the JSNA Steering group can support the delivery of the priorities, The discussion will be used to inform a paper from the steering group to the Health and Wellbeing Boards. The ToR for the group will also be revised to give a more formal link between the group and the H&W board.

The group reviewed the JHWS and STP priorities and identified that similar key priorities – mental health, best start in life/supporting children & families, long-term conditions, sustainable health and social care system.

Outcomes of the discussion: The group, with the help of the JSNA Manager, will map existing JSNAs and their recommendations against the priorities to identify gaps in knowledge to address over the next 4-5 years. This will inform the basis of the JSNA work programme going forward.

The group provided suggestions for the future work programme including a focus on self-care and long term health conditions, but also discussed that these will need to be confirmed through the mapping and alignment exercise.

ACTION – CH to contact Harley to better understand how the work programme is structured and to what extent it is structured around the strategy.

ACTION – CH to produce paper for H&W board and circulate allowing time for comments

ACTION - CH to begin mapping and prepare workshop for the next meeting

4. AOB

ACTION – CH (Charlotte) to send round a doodle to find out availability for next meeting (mid-August)

Date of next meeting: TBC (around mid-August)