

## **REPORT OF THE DIRECTOR OF PUBLIC HEALTH**

### **NOTTINGHAMSHIRE JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) WORK PROGRAMME 2020-21**

#### **Purpose of the Report**

1. To seek approval of the Joint Strategic Needs Assessment (JSNA) work programme 2020-21 and proposed products which have been developed through the JSNA prioritisation process.

#### **Information**

##### **Background**

2. The JSNA is a statutory responsibility of the Health & Wellbeing Board, including its development, application, access and use by partner organisations. It is the process of assessing the current and future health and wellbeing needs of people in Nottinghamshire, and the evidence base about what works to address these needs.
3. This work informs the [Joint Health & Wellbeing Strategy](#) (for which Nottinghamshire County Council, NHS Nottingham & Nottinghamshire Clinical Commissioning Group, and NHS Bassetlaw Clinical Commissioning Group are jointly and statutorily responsible) and the joint action and commissioning priorities of partner organisations. The JSNA for Nottinghamshire County currently comprises 40 topic chapters and other supporting information which is published on [Nottinghamshire Insight](#). A list of JSNA chapters is available in appendix 1.
4. Nottinghamshire's first JSNA was published in 2008. The Health & Social Care Act 2013, the emergence of the Nottingham & Nottinghamshire Integrated Care System and South Yorkshire & Bassetlaw Integrated Care System, and other changes to local NHS commissioning represent important changes to the context in which the JSNA is used. The JSNA process needs to adapt to properly address these arrangements.
5. In order to develop the 2020-21 JSNA work programme it was agreed that an annual prioritisation would be trialled, with the JSNA Steering Group overseeing this process. This aims to secure a clear and timely steer from partners about topics of joint interest and strategic importance.

6. In December 2019, the Health & Wellbeing Board were invited to support the development of this process by proposing JSNA chapters that reflect emerging issues of joint interest and strategic importance across Nottinghamshire. The deadline for topic submissions for the 2020-21 prioritisation was 3 February 2020.
7. In addition to the Health & Wellbeing Board, other key partners were directly consulted with and encouraged to submit appropriate topic suggestions. These included NHS Nottingham & Nottinghamshire Clinical Commissioning Group, NHS Bassetlaw Clinical Commissioning Group, Nottinghamshire County Council (Adult Social Care, Public Health, Children & Families, Place), the Children & Families Alliance, the Nottinghamshire Office of the Police & Crime Commissioner, and Healthwatch.

### **Outcomes from the JSNA prioritisation process**

8. A total of eight formal topic submissions were received. A prioritisation matrix, previously shared with the Health & Wellbeing Board on December 2019, was used to formally assess JSNA chapter proposals based upon various factors, including upcoming commissioning intentions, changes in national strategies, emerging issues, local priorities, and areas of increasing need.
9. All eight submissions were reviewed and scored initially by either a Public Health or Clinical Commissioning Group colleague. The submissions were then collectively assessed by the JSNA Steering Group in March 2020 to ensure a thorough and consistent approach to scoring.
10. All of the topic suggestions that were received highlighted important areas with substantial impacts on health and wellbeing. However, it was agreed that full JSNA chapters as they currently exist in Nottinghamshire were not the most appropriate product for all eight topics. In order to achieve maximum effectiveness, the JSNA Steering Group concluded that JSNA chapters should not replicate existing work already happening within Nottinghamshire, and that resources are allocated to producing JSNA chapters that will have the greatest impact within the system (e.g. directly informing an upcoming commissioning review).
11. Discussions took place on what products could be developed when a full JSNA chapter is not deemed to be the most appropriate product at the current time, but where greater insight and understanding into that topic area would be beneficial. The JSNA Steering Group proposes that different products are produced depending on the required need.
12. The initial work programme developed was due to be presented for approval at the Health & Wellbeing Board on 6 May 2020. However, due to the implications of COVID-19, Health & Wellbeing Board meetings were temporarily suspended from March until 24 July 2020.
13. The JSNA Steering Group reviewed the draft work programme in September 2020 in light of changes resulting from the pandemic. Feedback received from colleagues highlighted that some priorities had now changed since the initial prioritisation in March 2020 and it would not be feasible to deliver the initial work programme as planned.
14. The JSNA 2020-21 work programme was therefore reviewed to take this into consideration. The following topics are now proposed:

Topic	Submitted on behalf of	Proposed product
Children and young people who are looked after, and care leavers	Nottinghamshire County Council (Public Health)	Full JSNA chapter
Carers	Nottinghamshire County Council (Adult Social Care)	Full JSNA chapter
Speech, language and communication needs in Children & Young People	Nottinghamshire County Council (Public Health)	Insight theme page <i>(and a potential product to be determined to meet any identified gaps)</i>
Air quality	Broxtowe Borough Council	Insight theme page

15. The JSNA chapter and the Insight theme page are products currently produced, examples of which are included in appendix 2 and appendix 3.

16. For Speech, language and communication needs in children & young people, it was agreed to initially collate the existing resources and insight from across the system into a theme page to determine what work was underway. A decision would then be made if this existing work meets the required need or if any further JSNA type product could be developed. This could involve the development of a 'topic profile and vision pack' following a similar format to the JSNA chapter structure (Appendix 1) yet in a shorter (a maximum of 20 pages) and more visual format. From initial discussions with partners this flexible approach has been positively received.

17. Other topics submitted and considered within the initial prioritisation included:

- Cardio vascular disease
- Excess weight in children, young people & adults
- Housing
- Improving health & wellbeing of women and girls.

18. These will be re-reviewed at a later date for consideration in a future work programme.

19. It is important to note that whilst every effort will be made to adhere to this work programme, completion of JSNA work remains dependent on the current COVID-19 situation. Ongoing changes may continue to impact the ability to deliver the work programme as planned.

### Other Options Considered

20. The proposal is based on the requirement to develop the current JSNA process to ensure all JSNA products are aligned to joint strategic commissioning intentions, strategies, or a framework for action, in order to fulfil the statutory duty.

### Reasons for Recommendation

21. To seek approval of the JSNA work programme 2020-21 and agreement of the proposed products.

## **Statutory and Policy Implications**

22. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **Financial Implications**

23. There are no financial implications arising from this report.

## **RECOMMENDATION**

1) That the Health & Wellbeing Board approve the Joint Strategic Needs Assessment (JSNA) work programme 2020-21 and proposed products, which have been developed through the JSNA prioritisation process.

**Jonathan Gribbin**  
**Director of Public Health**  
**Nottinghamshire County Council**

## **For any enquiries about this report please contact:**

Amanda Fletcher  
Public Health Consultant | Nottinghamshire County Council  
Telephone: 0115 804 3040 | Email: [amanda.fletcher2@nottscc.gov.uk](mailto:amanda.fletcher2@nottscc.gov.uk)

Lucy Hawkin  
Public Health & Commissioning Manager | Nottinghamshire County Council  
Telephone: 0115 804 2899 | Email: [lucy.hawkin@nottscc.gov.uk](mailto:lucy.hawkin@nottscc.gov.uk)

## **Constitutional Comments (SS 16/10/2020)**

24. This report and the recommendation are within the power and remit of the Health and Wellbeing Board.

## **Financial Comments (DG 16/10/20)**

25. There are no direct financial implications arising from this report.

## **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

[Guidance for the Approval of Joint Strategic Needs Assessment \(JSNA\) Chapters](#)  
Health & Wellbeing Board (5 September 2018)

[Joint Strategic Needs Assessment Progress and Development](#)  
Health & Wellbeing Board (4 December 2019)

[Joint Health & Wellbeing Strategy 2018-22](#)  
Health & Wellbeing Board

**Electoral Division(s) and Member(s) Affected**

- All

## APPENDIX 1: JSNA CHAPTERS

The Nottinghamshire JSNA chapters are available on Nottinghamshire Insight:  
[www.nottinghamshireinsight.org.uk/research-areas/jsna](http://www.nottinghamshireinsight.org.uk/research-areas/jsna)

JSNA topic chapter	Current position / year of completion
<b>Cross-cutting themes</b>	
JSNA executive summary	Continually updated as chapters approved
Oral Health	2020
Tobacco	2020
Self-harm	2019
Sexual health and HIV	2019
Health and Homelessness	2019
Substance Misuse	2018
The People of Nottinghamshire: population, demography & wider determinants	2017
Suicide Prevention	2016
Excess weight in children, young people and adults	2016
Air Quality	2015
Diet and Nutrition	2015
Physical Activity	2015
Infection Prevention and Control	2015
Carers	2014
Road Safety	2013
<b>Children and young people</b>	
Avoidable injuries in children and young people	2019
1001 Days: From conception to age 2	2019
Early Years and school readiness	2019

<b>JSNA topic chapter</b>	<b>Current position / year of completion</b>
Children and Young People with Special Educational Needs and Disabilities (SEND)	In progress, completion to be confirmed
Emotional Health & Wellbeing	In progress, completion to be confirmed
Teenage Pregnancy	2017
Child Poverty	2016
Youth Offenders	2014
Breastfeeding and healthy start programme	2014
<b>Adults and vulnerable adults</b>	
Learning disability	2019
Autism	2019
Cancer	2019
Domestic abuse	2019
Dementia	In progress, completion to be confirmed
Viral hepatitis	2017
Stroke	2017
Mental health (adults & older people)	2017
Suicide prevention	2016
<b>Older people</b>	
End of Life Care	2017
Loneliness and Social Isolation	2016
Falls and Bone Health	2015
Winter warmth and excess winter deaths	2014

## **APPENDIX 2: JSNA CHAPTER FORMAT**

### **Chapter template:**

#### **What do we know?**

- 1) Who is at risk and why?
- 2) Size of the issue locally
- 3) Targets and performance
- 4) Current activity, service provision and assets
- 5) Local views
- 6) What is on the horizon?
- 7) Evidence of what works

#### **What does this tell us?**

- 8) Unmet needs and service gaps
- 9) Knowledge gaps

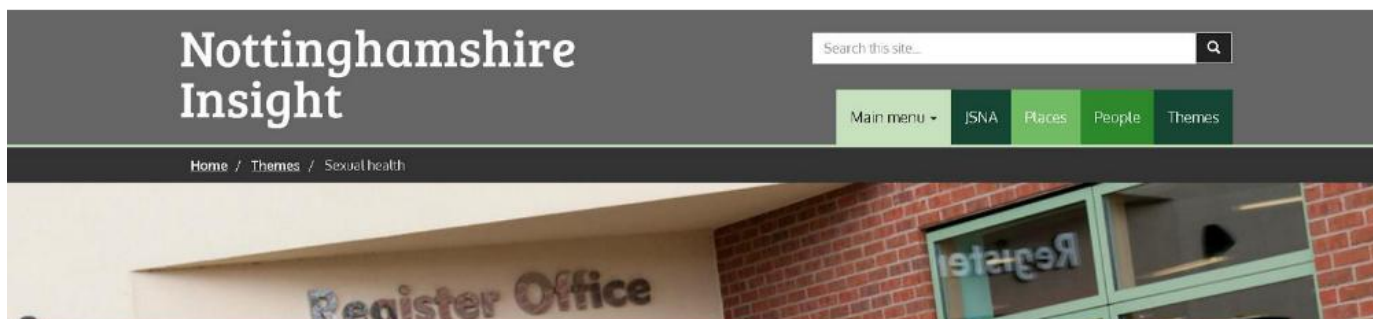
#### **What should we do next?**

- 10) Recommendations for consideration



## APPENDIX 3: INSIGHT THEME PAGE

The Nottinghamshire theme pages are available on Nottinghamshire Insight:  
[www.nottinghamshireinsight.org.uk/themes](http://www.nottinghamshireinsight.org.uk/themes)



### Sexual health

Good sexual health is an important aspect of health and wellbeing, and it is vital that people have the information, the confidence and the means to make choices that are right for them, regardless of their age, gender, ethnicity, sexual orientation, religion or belief or disability. This helps people to develop positive relationships and enables them to protect themselves and their partners from infections and unintended pregnancy.

The highest burden of sexually related ill-health is borne by groups who often experience other inequalities in health, including men who have sex with men, young people, black and minority ethnic groups, and socio-economically deprived groups.

Diagnosis of sexually transmitted infections (STIs) is rising nationally. These infections have a significant impact on the health of individuals and communities. STIs which remain undiagnosed or are not effectively treated can cause long term serious health consequences. The use of effective methods to prevent transmission, access to fast diagnosis and treatment, and good partner notification processes are all important in reducing STI prevalence and improving sexual health outcomes.

Availability and effective use of contraceptive methods is necessary to reduce STI transmission, unwanted pregnancies and termination of pregnancy. This depends on good access to contraception, information on available contraceptive methods, and skills and confidence to negotiate safer sex.

Sexual and Reproductive Health Profiles have been developed by Public Health England (PHE) to support local authorities and partners to monitor the sexual and reproductive health of their population. The data is grouped into six domains: Key Indicators, HIV and STIs, Reproductive Health, Teenage Pregnancy, Wider Determinants of Health, All indicators. The tool can be accessed by visiting [Fingertips](#) which provides a broad overview of sexual health in addition to the resources listed below.

#### JSNA Chapters

- [Sexual health and HIV \(2019\)](#)
- [Teenage pregnancy \(2017\)](#)
- [Sexual abuse \(2014\)](#)
- [Viral hepatitis \(2017\)](#)
- [Domestic abuse \(2019\)](#)

#### National Documents

- [A framework for sexual health improvement in England \(Department of Health and Social Care, 2015\)](#)
- [National Institute for Health and Care Excellence \(NICE\) guidance](#)
- [Sexual and reproductive health and HIV: applying All Our Health \(PHE, 2018\)](#)

#### Local Information

- [Teenage conceptions in Nottinghamshire: Update Nov 2015](#)
- [An assessment of the health needs of single homeless people in Nottinghamshire](#)
- [Sexual health framework for action Nottingham & Nottinghamshire \(2016-19\)](#)

#### Datasets

- [Sexual and reproductive health profiles \(PHE Fingertips\)](#)
- [Sexual and reproductive health services \(NHS Digital\)](#)
- [Teenage pregnancy data \(PHE Fingertips\)](#)
- [Sexually transmitted infections \(PHE Fingertips\)](#)
- [Sexually transmitted infections annual data tables \(PHE\)](#)
- [Students \(Census 2011\)](#)
- [HIV: Surveillance, data and management \(PHE\)](#)

#### Links

- [Indices of multiple deprivation \(2015\)](#)

#### Themes

- Census 2011
- Child poverty
- Deprivation
- Diabetes
- Disability and sensory impairment
- Economy
- Housing
- Liver Disease
- Mental health
- Physical Activity
- Sexual health**
- Tobacco