

LONDON BOROUGH OF CROYDON

REPORT:	HEALTH AND WELLBEING BOARD	
DATE OF DECISION	21 MARCH 2023	
REPORT TITLE:	Update on Croydon's JSNA	
CORPORATE DIRECTOR / DIRECTOR:	Rachel Flowers, Director of Public Health	
LEAD OFFICER:	Dr Jack Bedeman, Consultant in Public Health Email: jack.bedeman@croydon.gov.uk Telephone: 22616	
LEAD MEMBER:	Councillor Yvette Hopley, Cabinet Member of Health and Adult Social Care	
DECISION TAKER:	Health and Wellbeing Board	
AUTHORITY TO TAKE DECISION:	Constitution of the London Borough of Croydon - Part 4.L It is a function of the Health and Wellbeing board to encourage, for the purpose of advancing the health and wellbeing of people in Croydon, persons who arrange for the provision of any health or social care services in Croydon.	
KEY DECISION?	No	REASON: N/A
CONTAINS EXEMPT INFORMATION?	No	Public
WARDS AFFECTED:	N/A	

1 SUMMARY OF REPORT

- 1.1 The Croydon Joint Strategic Needs Assessment (JSNA) is a collection of information relating to the health and wellbeing needs of our population. This report is an update of content that has been added to the JSNA since the topic last came to the Health & Wellbeing Board in October 2021 and a summary of the challenges faced.
- 1.2 They key items to note are;
- 1.2.1. The JSNA is publicly available and sits on the Croydon Observatory (linked to from the Croydon Council website)

- 1.2.2. Key items that have been updated include the Key Dataset, Borough Profile, a number of data profiles / factsheets and the Pharmaceutical Needs Assessment
- 1.2.3. Key challenges remain in updating the JSNA that include collaboration, resource, South West London processes and system-wide approaches

2 RECOMMENDATIONS

For the reasons set out in the report [and its appendices], the Health and Wellbeing Board is recommended:

- 2.1 to approve the update to JSNA content
- 2.2 to note the challenges and, if deemed necessary by the Board, discuss how to overcome these

3 REASONS FOR RECOMMENDATIONS

- 3.1 To allow the Health and Wellbeing Board, in accordance with its Terms of Reference, to be responsible for reviewing the JSNA in order to give the Council the opinion of the Board on whether the Council is discharging its duty to have regard to the joint strategic needs assessment and joint health and wellbeing strategy in discharging the Council's functions.

4 BACKGROUND AND DETAILS

- 4.1 A Joint Strategic Needs Assessment (JSNA) is continuous, systematic process for assessing the health and wellbeing needs of a population to inform decision making that will improve the health and wellbeing outcomes and reduce inequalities.
- 4.2 The Local Authority and the NHS via Local Health and Wellbeing Boards have a joint, statutory duty to produce a JSNA, a Joint Health and Wellbeing Strategy and ensure that LA, CCG and NHS England commissioners take the JSNA into account for planning and redesigning health and care services.
- 4.3 A JSNA has no set format; local areas are free to manage and design a JSNA as they see fit. They should be owned by all organisations within the Health and Wellbeing Board.
- 4.4 In 2019, Public Health England produced a '10 top tips' for best practice of a JSNA
- 4.5 The [JSNA page](#) on the Croydon Observatory (found under the health and wellbeing tab) has been formatted as per the last HWBB meeting with content now falling under the five main themes: population overview, population groups, wider determinants,

healthy behaviours and health conditions. Each section is made up of a number of different document types.

4.6 There have been data updates to the JSNA content itself, since October 2021 the following documents have been updated;

4.6.1 Croydon key dataset (updated quarterly)

4.6.2 Croydon borough profile (updated biannually)

4.6.3 Data profiles (all updated annually). Specific topics that have been updated are life expectancy, personal wellbeing, child obesity, housing affordability, recorded crime, sexual health profile, diagnosed conditions, suicide

4.6.4 Detailed profiles (/ needs assessments updated as required). The Pharmaceutical needs assessment has been updated since October 2021

4.7 Challenges remain with regards to the JSNA

4.7.1 Collaboration is needed with NHS/SWL colleagues to provide data where there are gaps

4.7.2 Unclear processes around JSNA with SWL

4.7.3 Resource

4.7.4 System wide approach

5 ALTERNATIVE OPTIONS CONSIDERED

5.1 N/A

6 CONSULTATION

6.1 The development of any product forming a part of the JSNA involves consultation with multiple local partner organisations and departments, including with patients, clients and the public where appropriate.

7. CONTRIBUTION TO COUNCIL PRIORITIES

7.1 Provide the organisation with evidence and data to inform planning and decision making across a whole range of business functions.

7.2 Be the change engine for the organisation to drive improvement and deliver for our residents.

8. IMPLICATIONS

8.1 FINANCIAL IMPLICATIONS

- 8.1.1** The co-ordination of the JSNA is part of core business for the Public Health Team and therefore no additional financial resources are required.
- 8.1.2** Updating the key dataset and data profiles is part of core business for the Public Health Intelligence Team and therefore no additional financial resources are required.
- 8.1.3** It should be noted that the development of some JSNA content does require active participation of all partner organisations in Croydon.

8.1.4 Revenue and Capital consequences of report recommendation

Finance have reviewed the report and can confirm there are no financial implications at this time. All costs relating to this report are part of business as usual and can be met within existing resources.

- 8.1.5** Comments approved by Lesley Shields, Head of Finance for the Assistant Chief Executive and Resources, on behalf of the Director of Finance. (Date 09/03/2023)

8.2 LEGAL IMPLICATIONS

- 8.2.1** Under Section 116 (Health and Social Care: joint strategic needs assessments) of the Local Government and Public Involvement in Health Act 2007, an assessment of relevant needs must be prepared in relation to the Council's area, and it is for the Health and Wellbeing Board to prepare any assessment on behalf of the Council and its partner integrated care board. A further assessment must be prepared if the Secretary of State so directs and may be prepared at any time. In preparing an assessment, the Council and the integrated care board must co-operate with one another, have regard to any guidance issued by the Secretary of State, involve the local Healthwatch organisation for the area, and involve people who live or work in the area. In preparing an assessment, the Council or the integrated care board may consult any person it thinks appropriate.
- 8.2.2** Paragraph 3.5 of the Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies provides "Health and wellbeing boards will need to decide for themselves when to update or refresh JSNAs and JHWSs or undertake a fresh process to ensure that they are able to inform local commissioning plans over time. They do not need to be undertaken from scratch every year; however boards will need to assure themselves that their evidence-based priorities are up to date to inform the relevant local commissioning plans. To be transparent and enable wide

participation, boards should be clear with their partners and the community what their timing cycles are and when outputs will be published”.

8.2.3 Comments approved by the Head of Litigation & Corporate Law on behalf of the Director of Legal Services and Monitoring Officer. (Date 09/03/2023)

8.3 EQUALITIES IMPLICATIONS

8.3.1 The aim of a Joint Strategic Needs Assessment is to review the health and wellbeing needs of a population and take note of the distribution of protected characteristics in order to inform strategic and commissioning decisions that will improve health and wellbeing outcomes and reduce inequalities.

8.3.2 Data in the JSNA is broken down by protected characteristics where possible for example in the SEND profile where data can be seen to be broken down by age, sex, and ethnicity. The JSNA highlights where there are inequalities in relation to protected characteristic, an example is on the life expectancy profile where inequalities and differences in life expectancy and healthy life expectancy are shown between males and females and also differ between geographical location of residents.

8.3.3 The Joint Local Health and Wellbeing Strategy (JLHWS) is developed by the Health and Wellbeing Board to address the needs and priorities identified in the JSNA.

8.3.4 The Local Authority and NHS Integrated Care Board must take proper account of the JSNA and JLHWS in exercising their functions and the Health and Wellbeing Board can give its opinion on whether they are discharging this duty.

8.3.5 Comments approved by Gavin Handford Director of Policy Programmes and Performance, on behalf of the Equalities Manager. (Date 10/03/2023)

OTHER IMPLICATIONS

8.4 [NONE]

9. APPENDICES

9.1 *A Presentation delivered*



JSNA update for the
HWBB 2023.pptx

10. BACKGROUND DOCUMENTS

10.1 [Statutory guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies](#)

11. URGENCY

11.1 Low