Joint Strategic Needs Assessments (JSNAs) analyse the current and future health needs of local communities. Health & Wellbeing Boards are responsible for leading the preparation of JSNAs and ensuring they are used to shape the design and delivery of local health, wellbeing and social care services. The JSNA is a shared resource for all service providers in local areas including voluntary and community organisations.

JSNAs provide the evidence base for Joint Health & Wellbeing Strategies (JHWSs) that set out the long term strategic plan for an area.

**Introduction**

The Health and Social Care Act 2012 set out a new vision for the leadership and delivery of health and social care services, where decisions about services should be made as locally as possible, involving people who use them, and the wider local community. Central to the delivery of this vision is the requirement for Local Authorities and Clinical Commissioning Groups to work together through the local Health & Wellbeing Board to prepare Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs).

**What is a JSNA?**

The JSNA process is concerned with assessment of current and future needs and should influence commissioning decisions:

- In the medium-term (3 to 5 years ahead)
- In the long-term (5-10 years ahead & beyond)
- It provides an opportunity to direct and support change that needs to happen in services that would:
  - make them more responsive to local people
  - help to reduce inequalities
  - improve engagement with marginal groups
  - promote more outcomes-focused services

A successful JSNA will:

- achieve better health and wellbeing outcomes, reduce health inequalities and lead to improve health and social care provision;
- assess the needs of local population, including all factors of health and wellbeing;
- produce a comprehensive map of local service provision;
- inform Health & Wellbeing Boards and Clinical Commissioning Groups’ plans and decisions;

“The purpose of both the Joint Strategic Needs Assessments and Joint Health & Wellbeing Strategies is to improve the health and wellbeing of the local community and reduce inequalities for all ages. They are unique to each local area.”


continued overleaf
• provide an evidence base to ensure funding is directed to areas of greatest need.

Voluntary & Community Sector contribution to JSNAs?

The Health and Social Care Act 2012, places a statutory duty on the Health and Wellbeing Board to continuously involve the local community throughout the JSNA process. More recent guidance (DoH, 2013) makes it clear that active dialogue with the local community should provide information to supplement other evidence in the JSNA.

The voluntary & community sector can bring a wide range of skills and knowledge to the process including:
• Data and information about service user needs
• Understanding of complex needs and conditions
• Engage people that lack visibility
• Knowledge about local services and gaps
• Map local provision and inform future service planning
• Evidence on the cost effective interventions and advise on quality
• Leaders in providing person centred care.

Why engage with JSNA?

Taking the time to engage with the development of your local Joint Strategic Needs Assessment can have a wide range of benefits for community and voluntary organisations including:
• Increased awareness of the needs of your users and inclusion of their voice in planning process
• Improved integration with commissioners and partnership working to establish commissioning strategies and priorities
• Greater understanding of local market and projections in demand for services
• Opportunities to identify gaps in provision and develop new and innovative services

How to engage with JSNA – top tips!

• Find out who locally is leading the JSNA process and ask how they are engaging VCS providers. You can find contact details for JSNA leads on the Health & Wellbeing Pages of the VONNE website
• Develop links with existing local networks for example VONNE’s Health & Social Care Forum or a local health network
• Be prepared to demonstrate how your group or organisation can contribute to the JSNA and how your service impacts on local priorities.
• Make sure your evidence is clear – what difference are you making to the experience of local service users and to the local health economy?

Joint Health & Wellbeing Strategies

It’s important to remember that Joint Strategic Needs Assessments don’t provide an action plan or a policy framework to reduce health inequalities and improve wellbeing – this is the role of the Joint Health & Wellbeing Strategy (JHWS).

Each Local Authority area is required to prepared a JHWS that meets the needs identified in their local JSNA. The JHWS should set a small number of key strategic priorities for action that will make a real impact on people’s lives. JHWSs should translate JSNA findings into clear local outcomes the Health & Wellbeing Board wants to achieve.

Health & Wellbeing Strategies will draw on the work of Prof. Sir Michael Marmot, who in his report, Fair Society, Healthy Lives, emphasised the wider determinants of health.

The Marmot Principles
• Give every child the best start in life
• Enable people to maximise their capabilities
• Create fair employment and good work for all
• Ensure a healthy standard of living for all
• Create and develop healthy communities
• Strengthen the role and impact of prevention
Priorities in North East Joint Health & Wellbeing Strategies

**Northumberland**: reducing alcohol related harm; tackling levels of obesity through diet and exercise; and promoting mental wellbeing.

**North Tyneside**: alcohol, cancer and mental health.

**Newcastle upon Tyne**: alcohol, smoking and obesity.

**Gateshead**: to ensure children have the best start in life; tackle the major causes of ill health through a focus on lifestyle risks, and work with communities to improve emotional health and wellbeing.

**South Tyneside**: tobacco, alcohol and obesity.

**Sunderland**: a better start and strengthening families; economic leadership and development; and supporting older people to live independently.

**County Durham**: tackling health inequalities, improving mental health and wellbeing and children’s health.

**Darlington**: reducing early deaths from heart disease, stroke and cancer, and tackling alcohol related harm.

**Stockton-on-Tees**: giving every child the best start in life, preventing ill health and tobacco control.

**Hartlepool**: smoking, alcohol abuse and improving uptake of cancer screening programmes.

**Middlesbrough**: improving health outcomes for children, tackling lifestyle risk factors (smoking, alcohol, obesity) and tackling the social causes of poor health.

**Redcar and Cleveland**: reducing smoking prevalence, reducing alcohol-related harm and improving breastfeeding rates.

**Further Information**

Regional Voices champions the work of voluntary and community organisations to improve health, wellbeing and care across England. They have produced a series of briefings and resources: www.regionalvoices.net

**Comparing apples with oranges? How to make better use of evidence from the voluntary and community sector to improve health outcomes.**
http://www.nhsconfed.org/resources/2014/08/comparing-apples-with-oranges

Statutory guidance published by the Department of Health on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies:

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