

1. Background

At the last meeting of the Joint Strategic Needs Assessment Steering Group (JSNA SG), there was a wide-ranging discussion on the role of the Group going forward and in particular its relationship with the newly established Integrated System Performance and Intelligence Group (ISPIG). This paper summarises those discussions and recommends a way forward.

2. The Joint Strategic Needs Assessment Steering Group

The JSNA SG's terms of reference include the following statement:

The aim of the Joint Strategic Needs Assessment Steering Group (JSNA SG) is to lead, on behalf of the Plymouth Health and Wellbeing Board (H&WB), the JSNA process in Plymouth, ensuring that it produces high quality evidence to guide all strategy and commissioning processes that impact on population health and wellbeing. This includes the provision of the health and health-related information required for the effective commissioning of services to improve health and reduce health inequalities. The JSNA is not one single document, but a suite of data, information, intelligence and insights.

Prior to the last meeting of the JSNA SG, the Group's Chair (Kelechi Nnoaham, Director of Public Health) and Lead Officer (Robert Nelder, Consultant in Public Health Intelligence) met to discuss the agenda for the forthcoming meeting and in particular whether the JSNA SG was effectively fulfilling the aim as stated above.

As both the Chair and Lead Officer had concerns about the effectiveness of the JSNA SG (as currently constituted) in fulfilling its stated aim, it was decided that the meeting on 28th May 2015 would include on the agenda an item entitled 'the role of the JSNA SG going forward.' This item would be introduced and the discussion led by the JSNA SG Chair.

The discussion that took place at the JSNA SG meeting on 28th May highlighted the fact that there was a disconnect between the work undertaken by the JSNA SG and those individuals and organisations responsible for developing strategy and commissioning processes that impact on population health and wellbeing. It was also agreed that rather than the JSNA SG as a whole producing intelligence 'products', the discussion tended to focus on the aspects of the Public Health Team's workplan – in particular those related to Public Health Intelligence.

At this meeting the Chair also took the opportunity to introduce the JSNA SG to the ISPIG. The role of the ISPIG was described and the potential for the ISPIG to take over responsibility for production of the JSNA was discussed.

3. The Integrated System Performance and Intelligence Group

The ISPIG's draft terms of reference include the following statement:

The aim of the Integrated System Performance and Intelligence Group (ISPIG) is to consider system performance and intelligence in its widest sense. It will focus on system, rather than operational, performance. The ISPIG will provide regular intelligence and system intelligence reports to the Integrated Commissioning Board (ICB) and will ensure the production of the Joint Strategic Needs Assessment (JSNA). Although the focus of the ISPIG will be on Plymouth, the geographical scope of the work will need to be flexible depending on the nature of the work and any boundary issue which may arise. The focus of the group will be to generate actionable intelligence to explain variation.

Clearly the responsibility for the production of the JSNA, as mentioned in the draft terms of reference, is subject to the approval of the Health and Wellbeing Board (HWB) who remain the responsible body for the JSNA.

Membership of the ISPIG will include commissioners, providers (primary care, community, and acute), local authority (public health and social care), the Academic Health Sciences Network and South Western Ambulance Services Trust. The membership of the group will be updated as necessary. The members will elect a Chair, in the first instance this is Kelechi Nnoaham (Director of Public Health). The Vice Chair is Paul Hardy (Chair of the Western Locality).

The ISPIG's membership includes individuals who hold very senior positions within their respective organisations including a number of Assistant Director level post-holders from across the health and social care community. In contrast the JSNA SG's membership tended to include people who were involved in less strategic roles.

Given the nature of the ISPIG membership, it can be seen that the 'disconnect' (between intelligence-related products and commissioning decisions) highlighted by the existing JSNA SG process can be overcome if production of the JSNA becomes the responsibility of the ISPIG.

It has been recognised that the ISPIG does not currently include a community voice. The most effective way of gathering this insight is being investigated by the Council's Head of Co-operative Commissioning.

4. Recommendation(s)

- Production of the JSNA becomes the responsibility of the ISPIG.
- The JSNA SG meeting planned for the coming year are cancelled.
- The Director of Public Health (as Chair of the ISPIG) provides updates to the HWB on the ISPIG workplan and in particular the ongoing development of the JSNA in Plymouth.
