# Joint Strategic Needs Assessment (JSNA) Steering Group

# Thursday 15<sup>th</sup> December 2016 2.00-4.00pm Kensington Town Hall

#### Minutes

In attendance	
Colin Brodie (CB) Chair	Public Health Knowledge Manager
Jessica Nyman (JN)	JSNA Manager, Public Health
Shad Haliban (SH)	Head of Organisational Development, SOBUS
Steve Bywater (SB)	Policy Officer, Children's Services
Angela McCall (AMc) Minutes	Business Support Officer, Public Health
Jackie Rosenberg (JR)	CEO, One Westminster
Becky Powell (BP)	ASC Commissioning

**Apologies:** Angela Spence; Meenara Islam; Louise Proctor; Alex Tambourides; Amina Khatun; Angela Spence; Angeleca Silversides; Stuart Lines; Ben Gladstone; Eva Hrobonova

#### **Minutes**

### 1. Welcome and introductions

#### 2. Minutes of last meeting and matters arising

Minutes agreed.

## 3. Updates from past projects:

#### **Dementia JSNA**

- A Dementia Programme Board was formed to implement the Dementia JSNA recommendations. The Board is taking an update paper to the Health and Wellbeing Boards.
- There will be one oversubscribed befriending programme due to termination of funding in JRs work. **JR** to look into how this can be funded strategically with the CCG lead commissioners, using the auspices of the JSNA.
- CB to feed this back to Ben Gladstone.
- SH to ask at H&F CCG to help find names of key people for a coordinated approach.
- CB to take this to the Dementia Programme Board for community based provision as there needs to be a community response.

#### **End of Life Care JSNA**

o This is going to the Scrutiny Committee in Hammersmith and Fulham to review implementation, and it will go to

the H&WBBs as part of a 12-month review.

### 4. Update and feedback/discussion on current projects

#### **Young Adults JSNA**

- Going to the January and February H&WBBs.
- JN asked for comments on the recommendations.
- Primary care recommendations there is buy in from the GPs to deliver, particularly in WCC. CCGs would have to adapt it to their needs.
- Mark Jarvis was happy with the recommendation on extending the eating disorder services.
- JN is hoping to get some patient experience videos for the Health and Wellbeing Board. All to let JN know of any possible links, i.e. the Care Council, Family Nurse Partnership.

#### **Online JSNA highlight reports**

- JN to circulate links when the sites are ready.
- CB to check RVSC on community based provisions.
- Links could be included to the online directories of People First, Turning Point etc. to show that provision is not
  just formal health provision.
- SH to see if the Red Cross directory could be shared.
- SB to share child poverty information.
- o The Online JSNA should summarise trends over time and unexpected outcomes would be useful.

#### 5. Proposal for new deep dive: Children with Complex Needs

This is needed to back up a lot of work that has been going on, particularly on the Children's and Families Act. Quality of data will be a key challenge. Local levels of prevalence needs to be worked out as well as local provision so there is lots of joint, coordinated planning. Children & Families teams across the 3 boroughs should be involved to make good sense of the needs locally.

The Task and Finish Group will start meeting in January then there will be a wider stakeholder engagement workshop late January, to pull the knowledge of everyone and develop some more specific research questions. The fundamental principles need to be right, and with special needs, every child is different. Parental consultation is vital in understanding the need.

#### 6. AOB

- SH is working on the Older People's Strategy trying to meet regularly with the 3 CCGs to confirm funding for the
  most disadvantaged. Open Age does a telephone befriending service, which SH could tap into this.
- o An LBHF Young People's Youth Foundation has been founded. There is real concern around securing funding.

- o SH has the Child Poverty Strategy in circulation, which was kicked off by the Child Poverty JSNA.
- o The Pharmaceutical Needs Assessment is being refreshed.
- A JSNA around faith and health was suggested as it could pick up a lot on the communities that are missed. SH can give links for PREVENT. There is good work going on with faith groups on specific things i.e. FGM, however there is not much engagement around general health, like using an asset-based approach to tackle issues. JN & CB to look into scoping the usefulness of this.

Date of next meeting: Thursday 23<sup>rd</sup> February, 1400-1600, venue tbc.