

# Kent JSNA / JHWS Evaluation

## Background

The following brief to the JSNA / JHWS steering group suggests possible steps and options for evaluating the use of the Kent JSNA and its application to the Kent JHWS which is the statutory requirement of the Kent Health & Wellbeing Board. A key consideration for the evaluation must be whether the process and content of the JSNA is fit for purpose in the new and emerging context system transformation, changing demographics and population need.

## What makes up the Kent JSNA?

As per the development process agreed last year, the Kent JSNA is comprised and made up of a set of products (all available on the Kent & Medway Public Health Observatory website [www.kmpho.nhs.uk/jsna](http://www.kmpho.nhs.uk/jsna) ) on several levels and updated at agreed intervals, led by the Kent Public Health team:

Product	Purpose	By whom	Timescale for refresh
<b>JSNA Overview Summary Report</b>	Report summarising population needs by Kent, CCG and district population as well as key programme area	Compiled by the Consultant lead for JSNA and Head of Public Health Intelligence	Every 3 years (next refresh due for 2015)
<b>JSNA Exception Report</b>	Report summarising updates and exceptions in the intervening 3 year refresh period of JSNA overview summary report	Consultant lead for JSNA	Every December
<b>JSNA Programme chapter summaries</b>	Electronic chapters describing keys issues and recommendations across 40 different programme areas and risk groups	Consultant and specialist leads for the different areas	Update to be completed by every September
<b>Health and Social Care Maps (HSCMs)</b>	Articulate needs of population at a sub Kent level across 10 key areas and up to 70 different indicators / measures	Kent & Medway Public Health Observatory. A data sub group of the JSNA / JHWS group will oversee its development process	Varies by indicator, from quarterly to yearly
<b>CCG Profiles / Needs assessments</b>	These are done at local CCG / HWBB level to articulate key priorities and gaps which build on work done at a Kent level as well	Respective consultant lead	Depends on local HWBB / CCG priorities and expectation
<b>Needs assessment and equity audits</b>	These are done across different programme areas and risk groups.	Consultant and specialist leads	Depends on local priorities and expectations
<b>All work is carried out in partnership with respective department / directorate teams</b>			

Abraham George Consultant in Public Health Kent County Council  
 Eileen McKibbin Research & Evaluation Manager Kent County Council  
 Jo Purvis Health Partnerships Officer Swale Borough Council

## What are we doing currently in terms of evaluation?

This is limited at the moment. So far, the only consistent evaluation done is the recording of number of hits to the HSCMs and requests for regular online feedback.

## Suggested scope of evaluation

It is suggested that the evaluation could be approached using a standard framework comprising of structure, process and outcomes measures:

### Structural

These relate to physical / organisational factors and / or the tools or resources that are necessary for the JSNA development process for eg:

1. Existence of a JSNA steering group and TORs that govern the development process
2. A robust process in place to prioritise new and emerging topical areas for needs analysis and assessment
3. A robust process in place to prioritise key recommendations from the Kent JSNA to the Kent JHWS  
Extraction of analytical information from KMPHO website to learn more about who uses the site currently and for what purpose

### Process

1. Number of new needs assessments completed annually by Public Health (with support from respective departments / organisations)
2. Completion of remaining JSNA products as per the previous table as per agreed timescale
3. Use of HSCMs based on number of hits and online feedback for the same

### Outcomes

1. Application of JSNA into local CCG and district commissioning plans and strategies. This could be done as a desktop exercise to determine whether and how often the JSNA products have been cited / quoted. We would need to discuss how the JSNA/JHWS group members will be able to pull this information together
2. Formal verbal feedback (jn terms on minutes from the Kent and local Health & Wellbeing boards regarding JSNA products. This could be done either when a particular needs assessment or report has been discussed at the board and / or annual feedback summing up a board's satisfaction, experience and expectations. More importantly have each board considered the JSNA product as formal part of their own respective commissioning cycles?

## Issues to consider

- Quality assurance of individual JSNA products does not currently feature in the scope of evaluation as this is a complex area of work. Examples range from level of user engagement information in the JSNA summary chapters to system modelling impact of service provision against future population need, using integrated intelligence and person level linked datasets. However this is an important part of the JSNA / JHWS evaluation strategy