

Somerset Health and Wellbeing Board –

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Somerset: Our County – Joint Strategic Needs Assessment (JSNA) – Data Integration

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	Seen by:	Name	Date
Report Sign off	Relevant Senior Manager / Lead Officer (Director Level)	Trudi Grant	
	Cabinet Member / Portfolio Holder (if applicable)	Christine Lawrence	
	Monitoring Officer (Somerset County Council)	Julian Gale	
Summary:	This year, the Somerset JSNA looks at a pervasive ‘need’ within health, care and wellbeing, rather than the needs of a population group. It examines the need for better quality information particularly about individuals, and at data integration to support health and care professionals – and communities, too – in order to make better decisions.		
Recommendations:	The Board is asked to <ul style="list-style-type: none"> • approve the JSNA • investigate further the role the Board could play in overseeing information governance 		
Reasons for recommendations:	N/A		
Links to Somerset Health and Wellbeing Strategy	This JSNA supports the priorities in the ‘Improving Lives in Somerset’ Strategy through the proposals for joining up data to improve services and providing timely opportunities for prevention.		
Financial, Legal and HR Implications:	None directly.		
Equalities Implications:	The JSNA pays due regard to protected groups to identify health and social inequalities within the Somerset population.		
Risk Assessment:	Any failure by commissioners to fully take into account the results of JSNAs and related data when taking commissioning decisions across agencies is very likely to have detrimental impacts on service improvement and delivery and the reduction of inequalities.		

1. Background

- 1.1.** Integrating data is an obvious 'good thing' in principle, and hugely complicated in practice. There is no single, simple solution. Excellent examples exist already in Somerset – examples such as SIDeR and the innovative use of data in Brave AI. However, many problems remain, with children's data often held in silos, and even more distant from adult data. While the integration of health and adult social care is progressing well, the same cannot be said for the wider determinants of health and the voluntary sector, which will be vital to future health strategy.
- 1.2.** In particular, the JSNA for 2019 is concerned with how to join data from different organizations to understand the complexity of individuals' needs, whilst adhering to the safeguards legally established in information governance. In legislation, the General Data Protection Regulations (GDPR) of 2018 make a legal case for the appropriate sharing of information where it can assist public bodies to undertake their statutory duties.
- 1.3.** This JSNA coincides with the development of a Somerset-wide Business Intelligence (BI) strategy, which addresses similar issues, focusing on specific improvements to be made in understanding individual health need.
- 1.4.** Evidence that is used to support local decision making takes many forms. Some is qualitative, such as patient or customer satisfaction. Much quantitative information held within organizations is on available resources, such as finance or staffing, and as such is very much 'owned' by the organizations concerned. All such data contribute to the efficient provision of services.
- 1.5.** It is shown in the JSNA that whilst technically difficult, with appropriate integration software (and the necessary time, money and effort) different administrative systems can be integrated to produce, for instance, shared dashboards. The legal barriers are more complicated, but as a basic principle if joining datasets produces real public benefits then it can be achieved (and effort should not be wasted on data integration that does not produce such benefits).

2.0 Consultations undertaken

- 2.1** Case studies relating to sharing information and data integration have been sourced through the Community Council for Somerset and additional information from the One Team representative in Public Health. The Business Intelligence Working Group members have provided much useful insight into current practice.

3.0 Implications

- 3.1** The Department of Health (DH) guidance suggests that commissioning plans of CCGs, NHS England and local authorities will be expected to be informed by relevant JSNAs and the health and wellbeing strategy. Where plans are not in line,

the organisations could potentially be asked to explain why. The policy intention as cited by the DH is that *“local services which impact upon health and wellbeing will be based on evidence of local health and wellbeing needs and assets, including the views of the community; meaning that services and the way in which they are provided meet local needs.”*

4.0 Background papers

- 4.1** Draft Somerset Business Intelligence Strategy – please contact Allison Nation, Associate Director – Digital Strategy, Somerset Clinical Commissioning Group allison.nation@nhs.net