West Berkshire – JSNA Review

Report being considered by:	Health and Wellbeing Board
On:	24th September 2026
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1. Purpose and Executive Summary

1.1 This report presents the findings of the review of the West Berkshire Joint Strategic Needs Assessment (JSNA), sets out a refreshed vision for its future development, and proposes strengthened governance and a co-produced action-planning process.

1.2 The JSNA is the statutory assessment of the current and future health and wellbeing needs of the population. It should provide the evidence that shapes local priorities, informs commissioning and supports action to reduce health inequalities.

1.3 During 2025/26, West Berkshire Council and Health and Wellbeing Board partners undertook a review of the current JSNA. The review identified that while the JSNA is well regarded as a reliable source of data and intelligence, there is significant opportunity for it to become a stronger driver of decision-making, partnership working and action.

1.4 The ambitions and proposals to progress this are set out in Section 7 of the paper. These will address the findings from the review process which indicate a need for further development of the JSNA. This will position the JSNA as the key intelligence resource supporting delivery of Health and Wellbeing Board priorities and improving outcomes for residents.

1.5 Following the Government's announcement of the creation of the new Ridgeway Council, the recommendations have intentionally been kept at a high level. As the JSNA development plan progresses, these recommendations will be reviewed and refined to reflect any implications arising from local government reorganisation. Throughout the development process, opportunities will be sought to align with Oxfordshire County Council to ensure that any improvements to the JSNA can be carried forward and are more likely to be sustainable during the transition to the new Ridgeway Council.

1.6 The JSNA steering group will keep abreast of the new Thames Valley ICB Population Health Unit so we can align work moving forward.

2. Recommendation(s)

2.1 The Health and Wellbeing Board is asked to:

(a) Note the findings of the JSNA review and the case for strengthening the JSNA as West Berkshire's shared evidence base for strategic decision-making, commissioning, neighbourhood health development and action to reduce health inequalities.

(b) Approve the refreshed vision for the JSNA set out in sections 4.4–4.6 and endorse Option 3, the comprehensive improvement programme, as the basis for its future development.

(c) Agree that strengthened multi-agency governance arrangements be established to oversee the JSNA and establish a JSNA working group to co-produce a detailed action plan and define priorities. Existing JSNA analytical capacity and core outputs will continue as business as usual while the working group develops the future JSNA approach.

Financial
There are possible financial implications associated with an improved JSNA including the need for additional tools and resources to strengthen the JSNA e.g. including an asset mapping functionality. Any costs will be covered through the Public Health Ringfence Grant.
Human resources
There are no HR implications set out within this paper.
Legal
As set out in the body of this report, the Council has a statutory duty (shared with the ICB) to produce a Joint Strategic Needs Assessment in accordance with the Local Government and Public Involvement in Health Act 2007, reinforced and updated by the Health & Social Care Act 2012 and subsequent amendments under the Health Care Act 2022. The policy changes of 2025 and 2026 have created a formal requirement for JSNA evidence to inform NHS commissioning decisions at the neighbourhood level which support a review and strengthening of the JSNA.
Risk management
Currently the KPI report for this project is highlighted as amber, as the work to progress the recommendations is slightly behind schedule. However, work is progressing at pace, and there is an existing JSNA that remains accessible whilst the project to make improvements is agreed and progressed.
Council Strategy
The JSNA links to strategic priorities such as thriving communities, healthy lives and equal opportunities and ensures that health evidence shapes local service delivery and policy. The JSNA supports the wider council ambition to be more data and intelligence led.
Other Implications

Equalities Impacts: Neutral
There are no impacts arising directly as a result of this report. However, the JSNA will be expected to identify specific health and wellbeing needs and inequalities that affect different groups, which is a prerequisite for evidence-based decision making that promotes fairness and inclusion.
Data Impacts: Neutral
None
Environmental Impacts: Neutral
None
Health Impacts: Positive
The JSNA is an important tool to help identify health and wellbeing needs across our communities.

Consultation and Engagement:	Stakeholders from across West Berkshire Council and partner organisations, including the NHS, Healthwatch, voluntary sector, responded to the JSNA survey which has shaped the recommendations underpinning this paper.

3. Background

3.1 The JSNA is a statutory function of the HWBB under the Health and Social Care Act 2012, updated following the Health and Care Act 2022, requiring local partners to jointly assess and understand the health and wellbeing needs of the population to inform service planning and commissioning. Recent national policy changes, including the Neighbourhood Health Framework, now require that neighbourhood health plans (from 2027/28) are explicitly informed by JSNA evidence and address the health inequalities it identifies. This represents a step change in the role of the JSNA as the core evidence base for system-wide planning and commissioning.

3.2 The JSNA is intended to be a foundational component of:

- The Joint Local Health and Wellbeing Strategy;
- Commissioning decisions across local authority and NHS/ICB partners;
- Neighbourhood health development and preventative approaches to improving population health and reducing health inequalities.

3.3 Current policy expectations and national good practice emphasise that JSNAs should:

- Be jointly owned across the system;
- Inform strategic priorities, policy development and investment decisions in an area;

- Provide a systematic assessment of needs, including both quantitative data and qualitative insight (community voice), including residents' lived experience and voluntary, community and social enterprise (VCSE) sector perspectives;
- Identify and reduce health inequalities, including for health inclusion groups;
- Be accessible and easy to navigate;
- Incorporate features such as dashboards and interactive maps for different geographies;
- Support Health in All Policies approaches.

3.4 Current JSNA provisions:

- The current West Berkshire JSNA consists of a range of resources hosted on the West Berkshire Observatory. These include, but are not limited to:

  (a) A State of the District JSNA Report – First established in 2025, this provides a concise overview of the population's health and wellbeing needs across the life course and wider determinants of health. While not intended to be exhaustive, the report highlights key issues and emerging priorities within West Berkshire.

  (b) "Deep dive" Health Needs Assessments – Detailed reports that explore specific health and wellbeing topics in depth, identifying unmet need, inequalities, and opportunities for improvement.

  (c) Topic data and neighbourhood profiles – A suite of data profiles available at District, Ward, and Lower Super Output Area (LSOA) level. These cover a wide range of demographic, social, economic, and health-related topics, including (but not limited to):

    (i) Population and Demographics

    (ii) Deprivation

    (iii) Economy and Employment

    (iv) Children and Young People's Health and Wellbeing

  (d) Data updates and other reports – For example, the Director of Public Health Annual Reports, The West Berkshire Youth Survey Report and West Berkshire Indices of Deprivation Summary Report.

3.5 However, findings from the review highlighted key limitations of the current JSNA including:

- Low regular use and unclear purpose across stakeholders;
- Lack of clear and shared system governance, engagement and communication;
- Limited interpretative commentary and action-focused insight (making clear the "So What" of quantitative findings for policies and service planning);
- Gaps in community and voluntary sector voice, service-level data and community asset mapping;
- Lack of small area analysis to inform local and neighbourhood decision making

3.6 This suggests that the JSNA is currently data rich but underutilised and has limited impact on system-level decisions.

4. Proposals and Options Considered

4.1 There is an ambition for West Berkshire Council and wider partners to become evidence-led organisations, whereby decisions, priorities, policies and the allocation of resources are consistently informed by the best available evidence, alongside professional judgement, community insight and local context.

4.2 It does not simply produce data or research. It creates the culture, capability, systems and expectations needed for evidence to be understood, challenged and used across the organisation — helping the council identify need, reduce inequalities, choose effective approaches, assess impact and learn from what works.

4.3 The JSNA can support this evidence-based approach, in setting out key information and indicators to support the decisions being made. For JSNAs to be useful, it is important that they are collaboratively developed, utilised to support decision making by all council and health partners and should incorporate both qualitative and quantitative data and public feedback.

4.4 The vision for the future Joint Strategic Needs Assessment (JSNA) is that it will be West Berkshire's trusted, shared and routinely used evidence base, bringing together data, intelligence and community voice to help councillors, staff and partners understand need, shape priorities, reduce inequalities and make better decisions for residents.

4.5 Our vision is to create a living, iterative and collaborative JSNA that moves beyond a statutory requirement to become an accessible, interactive and actionable resource for West Berkshire. It will be the starting point for understanding our population, communities and places, and a trusted source of evidence that supports the development of ideas, strategies, policies, services and investment decisions.

4.6 The JSNA will be known, understood, valued and routinely used by councillors, officers at all levels and partner organisations. Staff will have the confidence and skills to access, interpret and apply its insights in their everyday work, whether identifying priorities, writing reports and business cases, planning services, commissioning activity or evaluating impact. By combining quantitative data with qualitative intelligence, lived experience, local knowledge and community voice, the JSNA will provide a rich understanding of need, inequalities, demand, assets and opportunities. Through supporting Health in All Policies and evidence-informed decision-making across organisations, it will become an integral part of how West Berkshire plans, delivers and improves outcomes for residents.

4.7 In West Berkshire, as part of the JSNA review views were gathered on how teams utilise the current report, and what changes may be beneficial to optimise future iterations. The initial findings of the review, together with draft recommendations, were presented to the Health and Wellbeing Board on 29th January 2026 for feedback. Following this, further engagement took place with senior leaders and teams to share the findings and provide opportunities for additional input into the recommendations.

A summary of the feedback received has been collated and incorporated into Appendix B.

4.8 The responses to the survey have been invaluable in shaping a proposal for the future of the West Berkshire JSNA. However, to feasibly implement some of the concepts and ideas against other capacity constraints, it is proposed that an incremental change process is adopted.

4.9 The key recommendations to develop the JSNA following the review are:

(1) Greater use of community voice and lived experience to ensure the JSNA reflects the experiences, needs and strengths of all communities across West Berkshire.

(2) Improved data quality, relevance & scope to ensure that intelligence drives action.

(3) More granular neighbourhood-level insight to support local decision making.

(4) Improved integration of data across organisations to ensure that the JSNA provides a comprehensive and accurate picture of need.

(5) Improved usability, navigation & design to ensure evidence can be accessed, understood, and used by decision-makers

(6) Improved communication, awareness & training to ensure there is greater and more effective use of the JSNA and engagement with stakeholders.

(7) Stronger governance and shared ownership to enable the JSNA to become a jointly owned resource.

(8) Improve NHS integration and strategic influence to ensure that the JSNA informs commissioning decisions across multiple sectors

4.10 The proposed roadmap for delivering the key recommendations and the JSNA includes the following phases. Core JSNA activity will continue throughout implementation. For example, the neighbourhood health profiles, which are due for completion by March 2027, will be delivered during this period. Any emerging priorities identified before the action plan is finalised will be progressed where appropriate.

- Phase 1: Co-design and Action Planning – September 2026 to January 2027

  Through the working group, we will engage with key stakeholders across the Council and partner organisations to refine requirements, identify priorities and develop a detailed action plan.

- Phase 2: Agreement and Mobilisation – January 2027

Present recommendations and delivery options to the Health and Wellbeing Board for approval and agree governance, ownership and resources.

- Phase 3: Implementation – February 2027 onwards

  Deliver the agreed programme of work through a JSNA Working Group, developing products, processes, skills and communications.

- Phase 4: Embedding and Review – From 2028

  Monitor use and impact, gather feedback, refresh priorities and ensure the JSNA becomes embedded in organisational decision-making.

Option	Comments
Option 1: Maintain the current JSNA approach Continue with existing inputs, structure and outputs as per Section 3.4. **This is not recommended.**	This option would require no additional resources or changes to governance arrangements, however it would not address the limitations identified in the review, respond to stakeholder feedback, or strengthen the link between intelligence and decision-making.
Option 2: Basic JSNA improvement programme Implement a structured, phased programme to address the recommendations as per 4.9, and strengthen JSNA governance. **This is not recommended.**	This option would address most of the key limitations identified in the review. However, without a co-produced approach, it may not secure sufficient shared ownership, stakeholder input or support, increasing the risk that the improved JSNA is not widely understood, adopted or used.
Option 3: Comprehensive improvement programme Covers everything in option 2, and in addition, with further collaborative and co-production work, building towards the ambition for WBC to become fully evidence led. Position the JSNA as a system wide intelligence and decision support tool. **This is the recommended option.**	This option addresses all the key limitations identified in the review, strengthens evidence-informed decision-making across the Council and partner organisations, and promotes shared ownership through a co-produced action plan. It offers the strongest opportunity to achieve the Council's ambition to become evidence-led and to ensure that partners can readily access and use the evidence they need.

5. Appendices

Appendix A – What We Heard: Ambitions from the JSNA Review

Appendix B – JSNA Review Summary and Findings

Background Information

None

Joint Health and Wellbeing Strategy Priorities Supported

The proposals will support the following priorities:

☒ Reduce the differences in health between different groups of people
☒ Support individuals at high risk of bad health outcomes to live healthy lives
☒ Help families and young children in early years
☒ Promote good mental health and wellbeing for all children and young people
☒ Promote good mental health and wellbeing for all adults

The proposals contained in this report will support the above Health and Wellbeing Strategy priorities by:

- strengthening the JSNA as a shared evidence base for partners
- improving understanding of local need, inequalities, lived experience and service provision
- supporting evidence-based planning, commissioning and prioritisation of services and interventions to improve outcomes for residents across West Berkshire.

Governance Pathway

Committee/Body	**Date**
Corporate Board	01/09/2026
Executive Briefing	10/09/2026
Health and Wellbeing Board	24/09/2026

What We Heard: Ambitions from the JSNA Review

Strategic Priority	Outcome Sought	Ambitions
1. Inclusion, Voice and Equity	The JSNA reflects the experiences, needs and strengths of all communities across West Berkshire.	• Develop a sustainable approach to incorporating lived experience and community voice into JSNA products. • Engage VCSE partners and council teams. • Include inclusion health groups and map community assets within the JSNA. • Provide breakdowns of the data by different demographic group
2. Intelligence that Drives Action	The JSNA provides actionable intelligence that supports decision-making and commissioning.	• Introduce standardised JSNA templates, including mandatory "So What?" and "What Next?" sections. • Ensure benchmarking against England, South East and statistical neighbours. • Strengthen links between identified need, service provision and outcomes. • Establish an annual process for prioritising JSNA topics aligned to HWBB priorities.
3. Place-Based and Neighbourhood Insight	Local intelligence supports neighbourhood health, prevention and place-based decision-making.	• Develop neighbourhood, ward or priority-area profiles and dashboards. • Increase availability of small-area data and intelligence. • Align JSNA products with neighbourhood health priorities and emerging models of care.
4. Data Integration and System Intelligence	The JSNA draws on intelligence from across the health and care system.	• Map available datasets across partner organisations. • Improve data sharing and integration where appropriate. • Strengthen intelligence partnerships across the Council, NHS and other stakeholders.
5. Accessibility, Design and Usability	JSNA products are accessible, engaging and easy to use.	• Review the accessibility and usability of current JSNA resources. • Explore opportunities for dashboards, mapping tools and interactive products. • Develop consistent templates, branding and guidance for JSNA outputs. • All products will meet accessibility standards. • Produce a range of JSNA products to inform different streams of work.

6. Communication, Engagement and Capability	Awareness and use of the JSNA increases across partners and communities.	• Develop and implement a communications and engagement plan. • Create mechanisms for regular stakeholder feedback. • Deliver training and support to improve confidence in using JSNA products. • Showcase examples of how JSNA evidence has informed decision-making.
7. Governance, Ownership and Continuous Improvement	The JSNA becomes a jointly owned system resource with clear governance and accountability.	• Establish a multi-agency JSNA Steering Group. • Introduce an annual planning, review and evaluation cycle. • Develop a publication schedule for JSNA products. • Embed Health in All Policies principles within JSNA development. • Keep abreast of opportunities to utilise AI and emerging technologies to enhance JSNA production.
8. NHS Integration and Strategic Influence	The JSNA is routinely used to inform NHS planning, commissioning and transformation.	• Strengthen engagement with NHS partners to understand intelligence needs. • Increase use of JSNA evidence within commissioning, service planning and neighbourhood health development. • Explore opportunities to strengthen the role of the JSNA in strategic decision-making across the system.