

South Gloucestershire



Primary Care Trust



## Health Overview and Scrutiny Committee

28<sup>th</sup> May 2008

### Joint Strategic Needs Assessment (all wards)

#### Purpose

To provide a briefing on local work on the production of a Joint Strategic Needs Assessment.

#### Background

The Local Government and Public Involvement in Health Act 2007 requires PCTs and local authorities to produce a Joint Strategic Needs Assessment (JSNA). The JSNA should fulfill the need identified in *Our health, our care, our say* for Directors of Public Health, Adult Social Services and Children's Services to undertake regular strategic needs assessments of the health and wellbeing status of their populations. The JSNA should inform the priorities and targets set by Local Area Agreements and lead to agreed commissioning priorities that will improve outcomes and reduce health inequalities.

Further information on JSNAs is available at

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_081097](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_081097)

The PCT and LA have had initial discussion on the scope and timescale for producing the JSNA. Much of the content of the JSNA already exists in documents such as the DPH reports, PCT commissioning framework and council strategic documents such as the Children and Young people's plans. It is proposed that a rapid collation of existing work is undertaken, including some new data on areas of shared priority, to be ready by the Autumn and to be used as a basis for wider consultation. This document outlines a suggested content and structure of the JSNA .

#### Scope and purpose of JSNA

The JSNA is intended to inform the Sustainable Community Strategy (SCS) and Local Area Agreement (LAA) and to be repeated in line with the three year refresh of the LAA. In South Gloucestershire the SCS and LAA have already been produced, drawing on a host of existing needs assessment work. This "disjunction" in timescales has the advantage that the JSNA can be seen as an iterative process, with the first version of the JSNA (2008) being a starting point for further refinement. It will

- Pull together the many data sources which currently exist into one document, accompanied by analysis and highlighting emerging themes

- Develop our engagement with local residents, especially those who get a “raw deal” in dialogue about health and care needs and services
- Support more detailed local planning to achieve the strategic objectives in the Community strategy and local area agreement
- Support other strategic planning such as the Bristol Health Services Plan (BHSP) and the Council Plan, services for Disabled Children and planning for population growth
- Serve as a basis for the next refresh of the LAA

### **Proposed timescale**

An important part of the JSNA process is to include the views of local residents and service users in the analysis of needs. It is proposed that a two stage approach is adopted, first a fast assembly of data and information (including the outcome of existing consultation and involvement). This will be done to the following timescale

Finalise scope structure and heading	May 2008
Consult on structure and headings	May – June 2008
Overview and Health Committee	May 2008
South Gloucestershire Council briefing	June 2008
Article in South Gloucestershire News	June 2008
Gather contributions, data commentary	April - July 2008
Editing	August 2008
Publication	October 2008

The October document will suggest key priorities and ask a series of questions, to be used as a basis for wider engagement, consultation and consequent redrafting over the following 3-6 months.

### **Structure and content**

Proposed structure and content of the initial document is outlined in Appendix 1. A Project Initiation Document is attached at Appendix 2 and Communication Plan at Appendix 3.

Chris Payne  
Mike Hennessey  
Mike Connolly

**Director of Public Health**  
**Head of Strategic Support Services**  
**Head of Specialist Care and Inclusion Services**

## JSNA – draft structure

	Initial Lead	Comments, sources etc
Context	Health	
What is a JSNA	Health	
Theoretical models, diagrams	Health	
Need, demand, want	Health	
<b>Health and Social Care Needs – whole population</b>		
Demographics	Health	
Rising birth rate	Health	
Economy, employment, educational achievement, poverty	Health	
Access and other issues for people in rural areas	Health	
Housing and accommodation needs. Homeless/Temporary Accommodation	Health	
Transport	Health	
<b>Big picture health trends – whole population</b>		
Life expectancy. Heart Disease and Cancer	Health	
Obesity, physical activity	Health	
Prisons. Health inequalities – deprivation, ethnicity, gypsies and travellers	Health	
Long Term Illnesses. Diabetes, Heart Disease, Cancer, Mobility needs, Dementia, Asthma, COPD, Head Injuries	Health	
Sexual Health and reproductive health	Health	HPA toolkit
Preventative Measures	Health	
<b>Adults with particular needs</b>		
Physical Disability, equipment	Adult	
Learning Difficulty	Adult	Care to Citizenship 2006 - 2011
Sensory impairment	Health	PSI Strategy

	<b>Initial Lead</b>	<b>Comments, sources etc</b>
Adults of Working Age with Mental health needs	Health	
Drugs and Alcohol Services	Health	Needs Assessment
Older People	Adult	Joint Older People Strategy
Carers	Adult	Carers Strategy
Communication support needs	Adult	
Welfare benefits	Adult	
Parents with Disabilities	Adult	
HIV		
<b>Children and Young People</b>		
Child health – leading causes of death	Health	
Emotional and behavioural and Autistic Spectrum Disorders	Health	
Maternity / newborn, improved survival, complex needs	Health	
Breast feeding, immunisation rates	Health	
Risky behaviours, alcohol, drugs, sexual health. Teenage pregnancy	Health	
Obesity	Health	
Disabled Children	Children	
Children in Care	Children	
Children in Need	Children	
Vulnerable children	Children	
Young Carers	Children	Young Carers Strategy
<b>Safeguarding</b>		
Adult	Adult	Joint Safeguarding Adults Procedures
Children	Children	
Transitions	Children	Include case studies to bring to life? (case studies)
Wider environment	Adult	
Fuel poverty	Adult	

	<b>Initial Lead</b>	<b>Comments, sources etc</b>
<b>Environment</b>		
Climate change, effect of heat, cold, flooding, access to open space and play		
Built environment – links to health	Health	
Child safety, road traffic accidents	Health	
<b>Current services</b>		
Personalisation, choice, self directed support, self assessment	Adult	Transformation Task Group
Care at or near to home, use of technology		
Single Point of Access, integration of Services		
Contestability, independent and third sector, efficiency		
World Class Commissioning, “Aiming High”		
Workforce and changing roles		
Practice Based Commissioning		
BHSP, assumptions. Bed numbers, community facilities, trends, length of stay, admission rates etc (change in service model needed, speed of change)		
<b>Children’s services</b>		
Hubs, integrated teams		
Education, mainstreaming, special schools, Education Other Than At School (EOTAS), Disabled Students, Learning Difficulties and Disabilities (LDD) Young People not in education training or employment	Children	
Primary Care inc dentistry, eye care	Health	Vision Strategy
Prison health and services, including older prisoners	Health	
Health improvement, tackling inequalities - priorities	Health	
Community development, Planning for real, Priority and rural neighbourhoods	Adult	
Shift from residential care → community, changes around sheltered	Adult	

	Initial Lead	Comments, sources etc
housing, extra care housing		
Programme budgeting / benchmarking	Health	
<b>Key challenges and priorities for investment / service change</b>		
Building Community Capacity.		
Broad shifts of investment (from benchmarking)		
Population growth, elderly – primary care and other facilities		
Prevention / chronic disease management		
Acute → community care inc support to carers		
New housing, communities, transport		
Transitions		
Obesity, Physical activity, Sexual health		
Better integration of health / care services (adults and children)		
Volunteering/advocacy/eligibility criteria		

CP  
22/04/08



# Joint Strategic Needs Assessment Project

## Project Initiation Document

**Version: V2**  
**Date: 14<sup>th</sup> May 2008**  
**Status: Draft**  
**Author: Mike Hennessey**

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## INTRODUCTION

### Background

The Local Government and Public Involvement in Health Act 2007 requires Primary Care Trusts (PCTs) and local authorities to produce a Joint Strategic Needs Assessment (JSNA). The JSNA should fulfill the need identified in Our health, our care, our say for Directors of Public Health, Adult Social Services and Children's Services to undertake regular strategic needs assessments of the health and wellbeing status of their populations. The JSNA should inform the priorities and targets set by Local Area Agreements and lead to agreed commissioning priorities that will improve outcomes and reduce health inequalities.

The JSNA will collect data from a range of stakeholders on a number of key health, care, school and well being indicators as well as socio-economic data allowing us to anticipate and therefore plan for the needs of residents, shaping our updates of the Local Area Agreement and longer term planning for the next 10 – 15 years.

### Strategic Objectives

- Provide analysis of data to show the health and well being status of local communities, to include sub-group break down, forecasting and mapping of key health and well being factors.
- Define where and which inequalities exist in terms of both access and outcomes.
- Views of the local population (including children and young people) and practitioners will be used to inform the JSNA.

### BUSINESS CASE

- This project is required in order to provide the means by which South Gloucestershire Primary Care Trust and South Gloucestershire Council and other stakeholders will describe the future health, care and well being needs of their local population and the strategic direction of service delivery to meet these needs.
- The requirement to establish this project has come from the Commissioning Framework for Health and Well being, published by the Dept. of Health in 2007.
- The JSNA will provide a joint analysis of current and predicted need for both health and care services and activities to promote well being. The intention is to include an account of what people in the local community want from their services (those provided by statutory services and the wider market) and a view of the future, predicting and anticipating potential new and unmet need.
- The JSNA will provide a particular emphasis on engaging with communities and working to hear from those who get a "raw deal" from current services
- The data contained within the JSNA will inform future commissioning (and decommissioning) decisions and investment and will ensure that decisions about the allocation of resources are made fairly, efficiently and effectively.
- The data will act as an agreed baseline against which future improvements can be monitored.
- The project will end with a completed JSNA document.

## PROJECT DEFINITION

### Project Scope

- Provide analysis of data to show the health and well being status of local communities, to include sub-group break down, forecasting and mapping of key health and well being factors.
- Define where and which inequalities exist in terms of both access and outcomes.
- Views of the local population and practitioners will be used to inform the JSNA.

### Objectives

The key objective is the production of a JSNA which exceeds the minimum

### Constraints

Staff will need to be involved in data collection and analysis, communications and project management – officer time will be required; line managers will need to be aware.

### Assumptions

- All partners, the Primary Care Trust, South Gloucestershire Council Community Care and Housing Department and Children and Young People's Department agree on the need for a completed and comprehensive JSNA.
- That the findings of the completed JSNA will be used to inform partners' commissioning, strategic planning and resource allocation in the future.
- That sufficient financial and officer resource will be allocated to allow for the timely and quality completion of the JSNA.
- More efficient resource allocation for public service resources.
- Increased opportunities for health enhancing activities for the population of South Gloucestershire.
- Improved perceptions amongst the population of South Gloucestershire of access to services.
- Easier/more cost effective access to a joined-up pool of information allowing more informed decision-making.

### Dependencies

List any activities/dates, accesses, or other factors that the project is dependant upon. List also any inter-dependencies that exist between this and other projects.

### Risk and Issues

To Follow

## Acceptance Criteria

The JSNA is the vehicle through which the new duty to cooperate between PCTs and local authorities, which was a part of the Local Government and Public Involvement in Health Bill, is met.

Given the focus on prevention and demand management the JSNA can be seen as the first step in enabling a new invest-to-save approach to commissioning, which focuses far more on outcomes, processes and prevention instead of treatment.

## PROJECT ORGANISATION

Project Board	
Role	Name
Sponsor	Chief Executive Officer PCT Director CYP Director ADASS
User /customer representative	To be decided ? Exec Member for CC&HD, CYP and PCT Non Exec
Supplier / technical representative	
Project Assurance	To be decided

Project Team	
Role	Name
Project Manager	Chris Payne
Team Member	Mike Hennessey
Team Member	Mike Connolly
Team Member	Emily Van der Venter

## REPORTING

The Overarching reporting for the development of the JSNA is to the Better Health Partnership (BHP)

Progress reports will be made by the Project Manager to the BHP

## COMMUNICATION

Communication Plan attached

## Risk Management

Risk log to follow

## Issues Management

Issues Log to follow

## Communication & Engagement Plan V2

## Appendix 3

<b>WHAT</b> What will be communicated	<b>WHO</b> Audience or Stakeholder group	<b>WHY</b> Purpose of Communication	<b>HOW</b> Method of Communication	<b>WHEN</b> Timing of Communication	<b>WHO</b> Responsible
<b>PID/Project Plan</b>	Project Team	To agree input	Agenda item	When	MH / CP / MC
<b>PID/Project Plan</b> <b>Review of progress against the Project Plan</b>	CC&HD Directorate, CYP Directorate, SOG, PCT Management Team COMT	Approval to proceed  Information on progress against the Project Plan	Agenda item  Short written report or verbal update	Bi-monthly	MH / CP / MC
<b>PID/Project Plan</b> <b>Review of progress against the Project Plan</b>	CC&HD, CYP, PCT Staff	Information on progress against the Project Plan	Intranet briefings Staff newsletter Team briefs	Ongoing	MH / CP / MC
<b>Project outline Proposed Content, priorities and areas of focus</b>	SGC Members, Parish Councillor, PCT Board & PEC members	Raise awareness of JSNA Seek views and ensure involved in agreeing scope of JSNA. Opportunity to identify potential gaps and priorities.	'What is...' leaflet LSP Web site / intranet	May 08 June 08	CP MH
<b>Project outline Proposed Content, priorities and areas of focus</b>	Public	Raise awareness of JSNA Seek views and ensure involved in agreeing scope of JSNA. Opportunity to identify potential gaps and priorities.	'What is...' leaflet LSP Web site / intranet 'What is...' poster in public places e.g. GP surgeries, libraries etc	June 08	CP
<b>Project outline Proposed Content, priorities and areas of focus</b>	Public	Raise awareness of JSNA Seek views and ensure involved in agreeing scope of JSNA. Opportunity to identify potential gaps and priorities.	Article in Press and South Gloucestershire News	June 08	MH/MC/CP

## Communication & Engagement Plan V2

## Appendix 3

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<b>Project outline Proposed Content, priorities and areas of focus</b>	Staff – PCT & SGC	Raise awareness of JSNA Seek views and ensure involved in agreeing scope of JSNA. Opportunity to identify potential gaps and priorities.	Intranet front page link to LSP website Bridge newsletter 'What is...' poster	End May 08	CP
<b>Project outline Proposed Content, priorities and areas of focus</b>	LSP Partnership Boards/ CC&H / CYP / PCT service user groups	Raise awareness of JSNA Seek views and ensure involved in agreeing scope of JSNA. Opportunity to identify potential gaps and priorities.	Briefing paper 'What is...' leaflet LSP Web site / intranet 'What is...' poster	June 08	Lead officer for relevant group
<b>Project outline Proposed Content, priorities and areas of focus</b>	Third Sector & Community Groups	Raise awareness of JSNA Seek views and ensure involved in agreeing scope of JSNA. Opportunity to identify potential gaps and priorities.	Care Forum & CVS Newsletter Network meetings	May 08	MH
<b>Project outline Proposed Content, priorities and areas of focus</b>	Partnership Boards/ Planning Groups/ LSDGs	Raise awareness of JSNA Seek views and ensure involved in agreeing scope of JSNA. Opportunity to identify potential gaps and priorities.	Briefing paper 'What is...' leaflet LSP Web site 'What is...' poster	June 08	Lead officer for relevant group
<b>Project outline Proposed Content, priorities and areas of focus</b>	CC&HD & CYP Providers	Raise awareness of JSNA Seek views and ensure involved in agreeing scope of JSNA. Opportunity to identify potential gaps and priorities.	Provider meetings 'What is...' leaflet LSP Web site 'What is...' poster	June 08	MH / MC
<b>Project outline Proposed Content, priorities and areas</b>	CC&H / CYP / PCT service user groups	Raise awareness of JSNA Seek views and ensure involved in agreeing scope of JSNA.	Briefing paper 'What is...' leaflet LSP Web site	June 08	Lead officer for relevant group

## Communication & Engagement Plan V2

## Appendix 3

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<b>of focus</b>		Opportunity to identify potential gaps and priorities.	'What is...' poster		
<b>Project outline Proposed Content, priorities and areas of focus</b>	PCT primary, secondary (& tertiary?) providers	Raise awareness of JSNA Seek views and ensure involved in agreeing scope of JSNA. Opportunity to identify potential gaps and priorities.	Briefing paper 'What is...' leaflet	June 08	AJ
<b>Developing JSNA</b>	All	Share progress Opportunity for on going feedback Ensuring transparency and ongoing engagement	Latest working draft on LSP website with feedback facility	June – August 08	CP
<b>Opportunity to comment / feedback on near final draft</b>	All	Test out near final draft Gain input into priority focus	Stakeholder conference	October 08	CP / MH / MC

Location:	
Version:	02
Last Updated:	02 May 2008
By:	Mike Hennessey