



Pride Partnership Executive

REPORT TO	Pride Partnership Executive
REPORTING OFFICER	Jane Silvester, RMBC Policy and Research Manager
SUBJECT	Joint Strategic Needs Assessment
DATE	25 th April 2008
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1 Purpose of Report

- 1.1 To provide members with information about Joint Strategic Needs Assessment and the planned approach in Rochdale borough.

2 Recommendation

- 2.1 Members are requested to note this report and support the JSNA process and outcomes

3 The Report

Background

- 3.1 Joint Strategic Needs Assessment (JSNA) is a process that will describe the current and future health and well being needs of our local population and inform and facilitate key partners to take action to meet those needs. It will inform commissioners and providers across agencies of population needs and priorities.
- 3.2 The requirement for JSNA was created in the Local Government and Public Involvement in Health Act and Rochdale Council and Heywood, Middleton and Rochdale PCT have a duty to undertake a JSNA. The responsibility for the JSNA lies with the Directors of Public Health, Adult Social Services and Children’s Services working in collaboration with Directors of Commissioning.
- 3.3 JSNA will form a crucial part of Comprehensive Area Assessment, the new performance framework, and for inspection regimes in the future. Inspectorates are already looking for evidence of the JSNA process and how it is influencing commissioning. JSNA is expected to underpin decision-making for both sustainable community strategies and Local Area Agreements, and CAA will look for evidence of this.
- 3.4 JSNA will understand the current and future health and well being needs of the population, over both the short term (3 to 5 years) and the longer term future (5-10 years) to inform strategic planning. It will look at wider well being, including employment, housing, education and environmental factors. It will incorporate quantitative and qualitative data and information.
- 3.5 The JSNA process will look at the current provision of services and identify groups and areas where needs are not being met and that are experiencing poor outcomes. It will examine all the factors that impact on health and well being, including employment, education, housing and environmental factors.
- 3.6 JSNA will use evidence of effectiveness, including best practice, local innovation and national and local research to identify whether services can be improved.

3.7 Engaging with communities and stakeholders is a key element of JSNA, with involvement in all stages from planning to delivering and evaluating. The process will actively engage with communities, patients, service users, carers and providers to develop a full understanding of needs.

Rochdale Borough JSNA

3.8 The Rochdale Borough approach to JSNA is being developed by a JSNA Board made up of Andy Zuntz (RMBC Executive Director), Jo Purcell (PCT Director of Strategy and Partnerships), RMBC Director of Adult Services or representative, Steve Titcombe, RMBC Head of Children’s Services and a representative from the Voluntary and Community Sector Partnership (to be agreed). This Board will be reviewed as the JSNA process is developed.

3.9 Rachel Snow-Miller (PCT Head of Partnerships) is the JSNA Project Manager. The project core team consists of Jane Silvester (RMBC Policy and Research Manager,) Wendy Meston (HMRPCT Consultant in Public Health) and David Bayliss (RMBC Research Officer seconded to the project), with support from RMBC and PCT research and intelligence officers as required.

3.10 The Board has agreed that the JSNA will take a phased approach. Phase one will focus on two groups / areas where we have already identified an urgent need to carry out strategic needs assessment. These are: older people, and the 3% most deprived Super Output Areas. The work on the 3% most deprived SOAs will pull together information on all social, economic and environmental factors that impact on the outcomes of the people living in those areas.

3.11 The future phases of the JSNA will look at all the different groups of people in the borough, with a particular focus on vulnerable groups, and the different geographical areas within the borough. Views on the next phases are welcome.

3.12 A plan for engagement with local communities and stakeholders is underway. It will include involving local people and groups in the planning, delivering and evaluation of JSNA. This process has already begun in terms of informing local people about JSNA and what it is. Engagement will be a major element of the JSNA work and local people and groups will be asked what their key priorities are for the future phases of the JSNA. There will be a particular focus on the views of vulnerable groups. The JSNA will not repeat work already undertaken on community engagement on needs but will need to engage further when the outputs of the JSNA information and analysis stages are complete.

3.13 The detailed findings of the JSNA will be made available to partner organisations through the Stats and Maps website in addition to creating opportunities to discuss and debate the findings. Engagement with communities and stakeholders will be through the use of different methods, and clear and simple messages will be developed to do this.

3.14 The summary timetable for 2008-09 is below. A more detailed timetable is available on request.

April	Complete Phase 1 initial data and information collection Extract relevant data and information from Planning4Care Initial work with Mosaic software Commence secondary analysis
May	Analysis
June - Aug	Initial findings reports and presentations Partner and community engagement on initial findings on for Phase 1

	Partner and community engagement on priorities for Phase 2
July – Oct	Qualitative research 3% most deprived SOAs
September	Agree Phase 2 areas and timetable
Sep – Oct	Phase 1 additional research and analysis
Nov	Seminar – discuss Phase 1 findings with commissioners
March	Audit of changes made due to JSNA process Communicate changes

4. Impact on Pride of Place

- 4.1 The JSNA will inform and support the identification of priorities in Pride of Place and the Local Area Agreement when they are reviewed and will be key to commissioning and implementation plans. The accountable bodies and the LSP will be required to demonstrate changes that have occurred due to consideration of the JSNA.

5. Floor Target Impact

- 5.1 Phase one of the JSNA will include a detailed assessment of the 3% most deprived super output areas and older people, identify gaps and inform future commissioning and service delivery in these areas. Later phases of JSNA will cover other geographical areas and deprived groups in the borough. The outcomes of the JSNA will include more focussed and effective services which should improve floor target outcomes.

6. Contribution to cohesion

- 6.1 The JSNA will look at the needs of different age groups, ethnic groups and geographical communities within the borough and facilitate better service delivery to meet those needs. The JSNA will identify inequity in outcomes, service delivery and lead to refocusing of services. This process will help reduce inequalities in the borough, and this will have a positive impact on cohesion.

7. Consultation

- 7.1 A detailed engagement plan is being drawn up for the JSNA process. The involvement of local communities and stakeholders in the design, delivery and evaluation of JSNA is seen as a critical part of the process. It will ensure that there is ownership of the JSNA by residents and partner agencies, and this will better facilitate more effective commissioning and service provision to meet the identified needs.

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