

**North West Health &
Social Care Commissioning Forum**

JSNA – What Next?

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Outline

1. What are the issues?
2. What next?
 - Process
 - Impact
 - Quality Assurance

Assessments of JSNA Process

- Birmingham HSMC February 2008 postal questionnaire: 47% areas responded
- East of England QA toolkit self assessment Summer 2008: 100% response
- WCC competencies 2,3,5 – being finalised now: all PCTs

HSMC Survey Results - Spring 2008

- Large amount of work already underway
- “A health and social care system.....in which there might be too much information from too many different sources to provide a coherent overview”
 - Many working to make existing data more accessible and easy to interrogate
 - Significant investment in software packages and data systems
- Availability of data currently weak in the following areas:
 - Mobile/transient populations and seldom heard groups
 - Social care and some local government data
- Variable joint working, not systematic but JSNA an enabler
- Patient and public involvement:
 - Less comfortable with involvement of local people
 - Need for a more coherent and systematic approach

Findings from East of England QA

Self assessment - QA Toolkit developed by CSIP in EoE completed spring/summer 2008

Initial findings:

- Some examples of excellence in parts of JSNA process
- All areas engaged at least in the data analysis
- Strength of partnership working and impact variable
- Community engagement all areas struggling

World Class Commissioning QA

WCC competencies 2, 3, 5

- Initial feedback: most PCTs scoring 1's and 2's, very few 3's

Association of Public Health Observatories (APHO) Review of JSNA data and information needs

- Development of core dataset,
- Cross-tabulated against the National Indicator Set and the Vital Signs,
- Papers on:
 - statistical validity,
 - projection methods,
 - data sharing and
 - health inequalities.
- All available on the DH JSNA website.

What next?

1. National JSNA Reference Group

2. Process:

- » Data
- » Partnership working including Third Sector
- » Community engagement
- » Evidence of effectiveness

3. Impact:

- » On partnership working
- » On commissioning
- » On outcomes

4. Quality Assurance:

- » WCC,
- » CAA

National JSNA Reference Group

Membership

- Regional JSNA leads
- National organisational leads (NHS IC, APHO, NHS Institute, IDeA, ICN, Third Sector)
- Departmental Policy leads (Health inequalities, WCC, CLG, PPI)

Terms of Reference

- Lead national JSNA work
- Coordination and linkage

National JSNA Dataset project: Making it easy to get and use the data

Project with Information Centre and APHO:

- identifying 10 LSPs to work with us on JSNA data analysis, interpretation and use
- holding series of monthly 'learning set' workshops
- aiming to showcase best practice and
- developing 'standard' methodologies for any LSPs to utilise easily with their own data.
- identifying information gaps, and
- info that could be provided nationally,
- strengthening analysis and presentation of info for decision makers.

Partnership working: Third sector roles in JSNA

- Providers
- Members of Local Strategic Partnership (LSP)
- Community engagement; advocacy; providers of information?

Ladder of participation: for community engagement (- and partnership working?)

Level 5: community control – residents have negotiated and clearly defined responsibility and control over certain services

Level 4: partnership in action – residents help deliver an agreed set of services

Level 3: partnership in decision making – residents sit down with service providers to make some decisions

Level 2: consultation – residents are consulted and their views are taken into account when decisions are made

Level 1: information – residents get information about services, plans for their neighbourhood, and about who makes decisions.

Some key issues on community engagement...

- One size does not fit all
- Capacity building is essential
- If we involve people they must be able to influence and change things
- Doorstep issues are often key
- Importance of councillors as community leaders
- Can we share real power?
- Good community engagement can:
 - make people more satisfied
 - produce better, more responsive services
 - make savings

Puzzles for the JSNA

- Softer stories? Hard data?
- How deep? how wide?
- The cart and the horse? (LAA and JSNA)
- Community engagement: Third Sector and LINKs? Third Sector through LINKs?
- Third Sector engagement: provider, community voice and advocate, AND strategic partner?

Impact

1. Partnership working including Third Sector & community engagement
2. Commissioning and strategic planning:
 - WCC
 - LA
 - Joint
 - Single agency
3. Outcomes:
 - Showing improvement in your population's health & wellbeing
 - Reducing inequalities

Quality assurance

WCC competencies 2, 3, 5

- Sufficient, robust, achievable?

CAA

- Focus on JSNA?
- How will quality of JSNA be assessed?

Embedding JSNA process into partnership working and commissioning to improve health & well-being

- Opportunity to build on existing partnerships and strengthen partnership working
- Ongoing process
- Complement core dataset with local client based and qualitative information
- Embed the JSNA into all partnership planning and commissioning cycles
- Use the JSNA to commission services to meet the needs and make a difference to health of population
- Monitor outcomes through the JSNA to show you are making a difference

Thank-you

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Any questions, comments or experiences to share?