HARROW'S

JOINT STRATEGIC NEEDS ASSESSMENT REFRESH

2009 - 2013

A story of success, complexity and diversity

Produced in partnership with Harrow Local Authority, NHS Harrow and partners

25th February 2010





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Joint Strategic Needs Assessment Refresh 2010-2013 (15.1.10 Draft)

What is the Joint Strategic Needs Assessment?

The development of a Joint Strategic Needs Assessment (JSNA) is a requirement from the Department of Health that is placed upon the Directors of Public Health, Adult and Children's Services. The duty is outlined in the Local Government and Public Involvement Act 2007 and in the Guidance on Joint Strategic Needs Assessment 2007.

The guidance describes the JSNA as a systematic method for reviewing the health and well-being needs of a population, taking account of those groups or individuals whose needs are not being met, who are experiencing poor outcomes, or for whom special arrangements may be necessary. It aims to understand short-term needs (three to five years), and long-term needs (five to ten years).

The JSNA is a **strategic** assessment tool, providing a top level, holistic view of the most relevant key needs and service requirements.

The purpose of the JSNA is to identify areas for priority action through commissioning strategies and the Council's Transformation Project Plan. The JSNA should underpin the Sustainable Communities Strategy and Local Area Agreements, and address outcomes described in the National Indicator Set.

The first JSNA was produced in November 2008 in partnership between Harrow Council and Harrow Primary Care Trust (now known as NHS Harrow).

Refresh of JSNA 2008

The JSNA of November 2008 has been reviewed and refreshed to provide up to date information. Different stakeholders have been engaged and consulted, including a workshop with the voluntary sector, health and local authority colleagues. The following table provides an outline of the stages of the JSNA refresh process:

Stage One Outputs August – September 2009

Review of original data and update of the source document to reflect changes

Stage Two Outputs November – December 2009

Consultation

- Identify how the information in the JSNA has been used by different organisations
- Review the key themes and priorities identified through consultation for the next three-year period.

Stage Three Outputs December 2009 – February 2010

Identify outcomes, produce JSNA Refresh document and develop an action plan

Stage Four Outputs March 2010

Update website and circulate the refreshed materials

Stage Five Outputs November 2010 - February 2011

Carry out a yearly review of the progress to deliver the action plan

Source document

The source document provides demographic information about Harrow, particularly in the context of ethnic diversity and its socio-economic profile. It gives information about income deprivation, housing, environment, crime, community cohesion, children and adults in need, older people, BME older people, carers, safeguarding from abuse, education, and healthy lifestyles. The source document also provides information about inequalities in education, housing, morbidity and mortality rates and highlights a number of key findings from the data.

How the JSNA 2008 has been used by different organisations

Feedback from a variety of community and statutory organisations demonstrated that the information in the JSNA had been broadly used to support aspects of their current work and future planning. The following examples give a flavour of how the JSNA was used.

- The voluntary sector has used it to understand local needs and demographics, and to support funding applications.
- The JSNA has been used to inform various strategy documents that include the PCT Strategic Commissioning Plan, Joint Analytical Group's Strategic Report, local authority's Housing Strategy for Older People, the Community Safety Plan and the Integrated Commissioning Strategy.
- It has been used to highlight information and service gaps, e.g. lack of data collection of learning disabilities and dual diagnosis needs assessments.
- The JSNA has led to more partnership work between the statutory and voluntary sector e.g. joint work between the Somali community and police to enhance crime awareness and a youth conference Somali women's mental health event in partnership with PCT.
- The JSNA has also led to the development of new services and initiatives.
 Examples include:
 - Domestic violence support
 - o Employment pathways for drug users following treatments
 - Posts to support carer and user engagement and service development
 - o Shop4Support, and community equipment retail model
 - Development of Older people's services (e.g. matrons for long-term conditions, re-ablement, intermediate care pathways)
 - o Development of the personalisation agenda
 - Launch of Harrow Vitality News magazine
 - o Support meetings in sheltered housing establishments
 - Information and screening events to highlight prevention of strokes and high blood pressure
 - Development of Expert Patient Programme
 - Events and training sessions by MIND on religion, culture and BME women

Key themes

Consideration of data in the source document as well as feedback from consultations helped to identify the following key themes for the coming three years:

- 1. Sustainable development and enterprise
- 2. Prevention and safeguarding
- 3. Personalisation, with emphasis on choice and control
- 4. Services for children and young people, including education
- 5. People with mental health needs
- 6. Older people
- 7. Carers
- 8. Environment
- 9. Crime
- 10. Housing
- 11. People with a learning disability
- 12. People with a physical or sensory disability

Ensuring equality and the provision of culturally appropriate services is Integral to all of these themes and has therefore not been separated into another section. Equally the need to ensure that people at the transition between services is integral to many of the key themes.

Stakeholders also highlighted the following key points in relation to the JSNA:

- The JSNA should have a clear strategic thrust, and be supported by the Harrow Strategic Partnership and the Health and Well Being Partnership Board.
- Support and development is necessary in order to build the capacity of the Third Sector to address needs and to respond to change.

Mindful of a recommendation made during consultation, the sections below highlight for each key theme the main needs, how they will be addressed, and the delivery group for implementation and monitoring. Based upon these key aspects an action plan has been developed and will be used to monitor progress on an annual basis.

1. Sustainable development and enterprise

Main needs: To mitigate the impact of the recession and prepare for economic recovery. This will include ensuring measures are in place to support and grow businesses, particularly small and medium enterprises. Also to deliver coordinated employment and skills provision to residents on workless benefits. The development of planning policies and action plans for the Harrow Wealdstone Intensification Area will be critical to attracting inward investment and employment growth.

How needs are being addressed: Through: Enterprising Harrow Strategy and Core Strategy.

Delivery group: Sustainable Development and Enterprise Group.

What will the outcomes be?

To meet the performance target set in the Local Area Agreement Indicator 152 that concerns improving economic well-being relating to working age people on out of work benefits.

2. Prevention and safeguarding

Main needs: To support the local population in maximizing their health and well-being. To support early intervention, reablement, information and practical support services for vulnerable groups to maintain independence. To promote healthy lifestyles and provide community support for long-term conditions. To develop systems to identify needs of people who are not eligible to receive statutory services.

In terms of safeguarding, the main need is to ensure that freedom from exploitation and abuse is addressed by all the delivery groups identified in this report, and that a zero tolerance approach is adopted.

How needs are being addressed: Through: the development of an overarching Adults' Prevention Strategy which includes issues and key recommendations from the Health and Well Being, Integrated Commissioning, Intermediate Care and Information Access Strategies, and Harrow Council Adults and Housing Transformation Programme Plan 2008-2011.

A Safeguarding Adults Prevention Strategy and a Safeguarding Adults Training Strategy has been developed. A three-year business plan is also being developed.

Delivery group: Adult Health and Well-Being Partnership Board, Local Safeguarding Adults Board

What will the outcomes be?

Over the next three-year period the focus on Prevention will shift the balance of service development to ensure that a greater range and choice of services are provided to support more Adults to remain independent within the community

NHS Harrow aims in the short term to reduce obesity in both adults and children as well as to reduce the numbers of people who smoke from a baseline of 14.5% in 2009 to 10% by 2020. Whilst in the long term the aim is to reduce inequalities in life expectancy across Harrow.

3. Personalisation, with emphasis on choice and control

Main needs: To promote individual budgets and self-directed support wherever appropriate; market development, including development of culturally appropriate services; user and carer engagement; advocacy, advice and signposting services; develop healthy lifestyle choices.

How needs are being addressed: Through: Harrow Council Adults and Housing Transformation Programme Plan 2008-2011, Learning Disabilities Joint Action Plan, Integrated Commissioning Strategy, Market Management Strategy, Information and Advice Strategy.

Delivery groups: Transformation Programme Plan Board, Partnership Boards, The Personalisation Group, User and Carers Reference Groups, and Provider Forums.

What will the outcomes be?

- To increase the number of service users with a personal budget, and to fully implement Shop4Support that will put the service user at the centre of commissioning their support.
- Transparency service users will be aware of the budget that they have been allocated to meet their assessed needs and the cost of services they are purchasing.
- New service provision Services will be developed through a more collaborative approach to working with local providers ensuring that the shape of the local market meets the needs of the local population.
- Systems to support decision-making a range of systems to support individuals to take an individual budget will be commissioned including brokerage, advocacy, and Shop4Support.
- Outcome focused monitoring support planning will have an outcome focus that communicates the aspirations and needs of the service user. There will be an increase in customer feedback and satisfaction in the monitoring of quality outcomes in service provision.

4. Services for children and young people

Main needs: Our two key aims are to safeguard children and to narrow the gap caused by disadvantage. Our main priorities are to address educational inequalities; improve maternity services; reduce obesity, further reduce teenage pregnancy, raise awareness about binge drinking and substance misuse, improve oral health, increase update of immunisations and vaccinations; child protection; placement stability and choice; bullying; internet safety; accident prevention; reducing youth involvement in crime and fear of crime; civic engagement.

How needs are being addressed: Through: The Children and Young People's Plan 2009-2011. This reflects our shared priorities above and our identified children who may need additional help ensures we have consistency about the groups of children and families who need our help.

Delivery group: Harrow Children's Trust and its infrastructure, including Harrow Local Safeguarding Children Board.

What will the outcomes be?

To deliver the vision for children and young people agreed by the council with its partners.

To deliver the actions to achieve the priorities identified in the Harrow Children and Young people's Plan 2009-2011.

5. People with mental health needs

Main needs: To develop equality of access for black and minority ethnic communities and culturally appropriate services, transition protocols, advocacy, holistic and social models of care. To address self-harm and to support the most vulnerable within the community who have mental health needs.

How needs are being addressed: Since 2007 a range of needs assessments have been undertaken regarding people who have mental health needs, a dual diagnosis or a personality disorder. Building on this work a comprehensive needs assessment will be carried out and be used to prioritise mental health needs. There are also some specific mental health promotion activities targeting the BME groups, which have been well received.

Needs are also being addressed through the Integrated Commissioning Strategy and through Harrow Council Adults and Housing Transformation Programme Plan 2008-2011. Central North West London and other organisations ethnicity data will provide information to address needs.

Delivery groups: Mental Health Partnership Board, and the newly established Suicide Audit Group and Suicide Prevention Group.

What will the outcomes be?

- Fair, accessible and a culturally competent service to BME and hard to reach people in Harrow, including increased engagement with talking therapy and early intervention in psychosis service.
- Reduced stigma, admissions to acute ward, and a reduction of suicide or self-harm amongst BME people.
- Securing 100% data collection relating to the ethnicity of people who access mental health services in Harrow.

6. Older people

Main needs: To maintain independence of older people with increasingly complex health and social care needs. Also to support older people who are carers, self-funders, or have dementia or housing needs. To address the needs of black and minority ethnic older people.

How needs are being addressed: Through: Integrated Commissioning Strategy, Housing Strategy, Supporting People Strategy, implementation of National Dementia Strategy, development of the reablement plan.

Delivery groups: Older Peoples Partnership Board and Partnership of Older People Panel.

What will the outcomes be?

- Increase floating support for older people services.
- Provide 47 extra care sheltered housing accommodation units by 2010/11.
- Early detection and assessment for people with short-term and long-term memory problems.
- Dementia Strategy to focus on treating more people at home with an appropriate level of support for them and their carers.
- Implement the End of Life Care Strategy.

7. Carers

Main needs: To improve the carer's assessment process; person-centred support and training for carers, including respite care and emergency support, to address needs of BME carers and young carers.

How needs are being addressed: Through: Integrated Commissioning Strategy and Harrow Council Adults and Housing Transformation Programme Plan 2008-2011.

Delivery group: Carers Partnership Board.

What will the outcomes be?

- Increase the number of direct payments and breaks for carers.
- To develop a comprehensive training programme for carers in 2010/11.
- To increase the number of carers registered for the Carers Emergency Support Service.
- To increase the representation of carers on the Carers Partnership Board.
- To introduce Personal Budgets for carers.
- To increase the number of carers needs assessments.
- To develop health checks for carers
- To continue to reach 'hidden' groups and communities, e.g. Asian carers.
- To review all Service Level Agreements for carers services to ensure performance measures are linked to clear outcomes.

8. Environment

Main needs: Parks and open spaces, air quality, traffic management, biodiversity, waste management, leisure.

How needs are being addressed: Through: A refresh of the transport Local Implementation Plan with the Mayor for London, the Air Quality Action Plan, the Harrow Council Climate Change Strategy, and contributions to the Local Development Framework on allotments, tree strategy and green space strategy.

Delivery group: Sustainable Development and Enterprise Management Group.

What will the outcomes be?

To meet the performance targets set in the Local Area Agreement Indicators which relate to: mode of transport for children travelling to school, active management of local sites, per capita CO2 emission, improved street and environmental cleanliness, household waste recycled and composted.

9. Crime

Main needs: Violence against women and girls, prevention of violent extremism, need for safety awareness among older people, fear of crime, hate crime, increase in alcohol-fuelled crime, drug related crime, disproportionate representation of black men in crime, youth crime.

How needs are being addressed: Through: A coordinated response comprising a broad range of enforcement and deterrence responses, interventions to support and prevent offenders from offending and support for victims.

Delivery group: Safer Harrow, led by the Safer Harrow Management Group.

What will the outcomes be?

Meeting performance targets on a national as well as on a local level through the Local Area Agreement Indicators e.g. serious violent crime, serious acquisitive crime, anti-social behaviour, arson, domestic violence, crime related to alcohol and drugs, violent extremism, community perception of crime.

10. Housing

Main needs: To increase the provision of affordable housing units of all sizes, particularly larger family units, small units for vulnerable adults, wheelchair accessible housing and lifetime homes; address the specific housing needs of older people, vulnerable adults and diverse communities; provide housing advice and signposting; enable a range of housing, care and support services promoting choice and independence for vulnerable adults living in all housing tenures.

How needs are being addressed: Through: Supporting People Strategy, Housing Strategy, Accommodation Strategy for Vulnerable Adults, and Harrow Council Adults and Housing Transformation Programme Plan 2008-11.

Delivery groups: Supporting People Commissioning Body, Transformation Programme Plan Board, Sustainable Development and Enterprise Management Group and Affordable Housing Group.

What will the outcomes be?

- Large families and vulnerable adults will be housed in homes, which more appropriately meet their physical and support needs.
- Older people and vulnerable adults will have better advice about their housing options and a wider range of options to choose from
- Supported housing schemes will enable residents to have more independence, improved quality of life and more opportunities to integrate into the community and contribute to the society and the economy
- Supported housing services will be more culturally appropriate

11. People with a learning disability

Main needs: Day service modernisation, person centred planning, improving employment opportunities and increasing housing options/reducing use of residential care, increasing choice and control by increasing the take up of individual budgets, improving transition from children to adults, developing better awareness of the needs of individuals on the autistic spectrum including Aspergers syndrome.

How needs are being addressed: A robust learning disability health needs assessment has been carried out by the public health department of NHS Harrow, which will inform the commissioning of services. Needs are also being addressed through the Integrated Commissioning Strategy and detailed action plan, and 3-year work plan to deliver excellence.

Delivery groups: Learning Disability Partnership Board and Joint Learning Disability Management Board.

What will the outcomes be?

- Day service modernisation increased service user participation in the community and active citizenship.
- Improving employment opportunities to build on the 12.5% target achieved in 2009/10.
- Increasing choice and control through greater take up of personal budgets and fully implement Shop 4 Support
- Improving access to health provision data is being collected by the annual health checks carried out by GPs this will inform work to improve access to health care for people with a learning disability.
- Establish pathways for autistic spectrum disorder and Aspergers syndrome by October 2010.

12. People with a physical or sensory disability

Main needs: To promote and enhance independence of the service user; to increase choice and control by using self assessments and encourage the take up of individual budgets; to provide comprehensive effective support to people living with HIV; to encourage, promote and assist with the wider use of the local community resources; to provide a seamless transition from hospital to the community for those people who have had a stroke.

How needs are being addressed: Through: Improving the Life Chances of Disabled People, National Service Framework for Long-Term Neurological Conditions (2005), National Strategy for Sexual Health and HIV (published in 2001), National Stroke Strategy 2007 and Integrated Commissioning Strategy.

Delivery groups: Stroke Strategy Group, Physical Disability Partnership Board and HIV/AIDS and Sexual Health Strategy Development Group

What will the outcomes be?

- 100% of people who have had stroke will be contacted by the community stroke co-ordinator and be provided with advice and information.
- To have at least 275 service users receiving self directed support
- 90% of the service users receiving a service have at least one review within the year.
- 100% of service users living with HIV, when referred, will receive a community care assessment within 28 days.
- To introduce the new Retail Model for the provision of community equipment by July 2010.