ROTHERHAM BOROUGH COUNCIL - REPORT TO MEMBERS

1. Meeting:- Adult Services and Health Scrutiny Panel

2. Date:- 2nd December 2010

3. Title:- Joint Strategic Needs Assessment

4. Directorate:- Commissioning & Partnerships

5. Summary

Local Authorities and Primary Care Trusts are under a statutory duty, under the Local Government and Public Involvement in Health Act to produce a Joint Strategic Needs Assessment (JSNA) which establishes the current and future health and social care needs of the Rotherham population. It informs the strategic priorities and targets which informs commissioning priorities with a view to helping improve outcomes and reduce health inequalities.

Rotherham's Joint Strategic Needs Assessment is available and can be viewed on the Rotherham MBC and NHS Rotherham intranet. This was produced by the Joint Commissioning Team working in collaboration with various key partners in Local Authority, Health and the Voluntary and Community sector in February 2009.

The Rotherham's JSNA is currently being refreshed which is due to be completed by end of March 2011.

6. Recommendations

It is recommended that the Adult Services and Health Scrutiny Panel;

Note the Joint Strategic Needs Assessment refresh programme

7. Proposals and Details

7.1 Why we need a JSNA

Since 1 April, 2008, Local Authorities and Primary Care Trusts are under a statutory duty under the Local Government and Public Involvement in Health Act to produce a Joint Strategic Needs Assessment (JSNA). The JSNA forms the basis of a new duty to co-operate. This partnership duty involves a range of statutory and non-statutory partners, informing commissioning and the development of appropriate, sustainable and effective services.

The coverage of the JSNA is defined by the Department of Health's JSNA Core Dataset, which was published on 1st August, 2008. Rotherham's JSNA fully complies with the DH Core Dataset. It is anticipated that a revised JSNA Core data set will be published from the DH in December 2010 which will inform the refresh programme.

7.2 The Refresh Programme

The Joint Commissioning Team is co-ordinating the refresh of the current JSNA, working in partnership with the RMBC Commissioning Team.

Phase one of this process has focused on updating and validating the current statistical data and supporting analysis and interpretations. Sections within the document have been re-written to reflect current priorities and emerging trends observed since the last publication. The refresh programme has highlighted radical changes in the landscape such as Mental Health, therefore indicating a much more in-depth needs analysis. The time allocated for this area and its analysis has therefore been extended to continue into the phase 2 of the refresh programme.

User perspective and wider community engagement will be considered during phase 2 which will include various consultation activities to reflect user perspective within the JSNA.

There are 4 key areas which are being strengthened within the Rotherham JSNA which includes:

- Migrants (e,g asylum seekers, refugees, family joiners, international students)
- Vulnerable adults (Homelessness, Domestic Violence, Offenders, HIV and AIDS, Teenage Pregnancy)
- The third sector (Engagement and potential asset to community RNIB,
 Stroke Association, Age Concern, Crossroads, Alzheimer's Society, Citizen
 Advice Bureau, Turning Point)
- Financial Implications

7.3 Emerging Needs

- Population trend in Rotherham indicates an expected increase by 5.5% by 2010 with a further 9.8% by 2030.
- The gap between the over 50 age group (1 in 3 people) and the under 16 (1in 5 people) is widening.
- The over 85 age group will significantly increased to 9,800, which represents a 50% increase by the Year 2028.
- The number of people with a social care need is predicted to increase by 26% in the next 10 years. The number of people with a high or very high need is also predicted to increase by 26%.
- It is estimated that in 2015 there will be 28,199 people over 65 in Rotherham with a limiting long-term condition. By 2025, it is estimated that the number will have risen to 33,831
- This has been a significant increase in unemployment (17.3%) over the last two years, as the number of people has increased to 26,170 who are claiming out-of-work benefits.
- This has led to an increased demand in rented accommodation due to increasing the number of repossessions.
- Rotherham is currently 58th most deprived Borough out of 354 English districts.

- Overcrowding within the BME household in Rotherham is significantly high as this ranges from 13.2% - 22.8%, as compared 3.6% within the white population
- Smoking prevalence is high in Rotherham (26.4%) which is above the national average (22.21%)
- A high death rate of alcohol attributable conditions are higher than the national average for both males at 51.1, compared with 36.1 and females at 19.0, compared with 15.2 prevalence.
- Obesity prevalence for adults in Rotherham is 28.3%. This is slightly above the national estimate of 24.2% and the regional estimate of 26.3%.

7.4 Summary

These are the key issues that Rotherham MBC and NHS Rotherham will have to address over the next 5 years.

- The impact of an ageing population.
- The potential impact on health, well-being and services of the economic downturn
- The most effective way to promote healthy living initatives such as increasing physical activity and exercise, nutritional diet and raising awareness of risks of smoking and alcohol consumption
- The most effective way to reduce the gap between healthy and actual life expectancy
- The most effective way of increasing the independence of people with life limiting long-term conditions
- The most effective way of increasing independence, choice and control for people suffering with dementia and the development of new service models to address this effectively in the future
- The effectiveness of using preventative strategies to save future care costs
- Service to refelcet the changes in the demographic profile of the learning disability population

7.5 Service User Engagement

The JSNA incorporates the findings of a service user and carer engagement exercise. A wider consultation exercise was undertaken at Fairs Fayre in October 2010 to update the refresh Joint Strategic Needs Assessment. The consultation element will be widened further at a later stage. Emerging feedback during the current phase one of the consultation suggests the following:

- Support for a services which promote independence and maintain people at home
- More support for carers both in the caring task and their own well-being
- Development of low-level support services
- Targeting people who are socially isolated
- Better supported housing options including Extra Care Housing
- Alleviation of the impact of the economic downturn
- Access to transport and activities, especially in the evenings

As part of the refresh programme this area will be further strengthened during phase 2.

7.6 Next Steps

The primary purpose of the JSNA refresh is to ensure that Rotherham data is kept up to date and accurate information is made accessible to support current joint commissioning, decommissioning and reconfiguration plans, but also an opportunity to evaluate our future needs for commissioning intelligence.

The next key steps to be taken are as follows:

1 More analysis at locality level, some of our current information can only be easily expressed for the whole of Rotherham and work is needed to make more data available at area assembly level.

- 2 Continue the process of reconfiguring services so that they address future needs.
- 3 Ensuring that the refreshed JSNA is accessible to health and social care professionals so that they can access up to date information. Work to develop a web-based JSNA, which is regularly updated and incorporates all the information from the DH dataset is initiated as part of the phase 2 of this work programme.
- 4 Bring together the JSNA and the Corporate Needs assessment so that there is clear demarcation and no duplication. Work has begun in linking with various key areas such as children and substance misuse services.

8. Finance

There are no immediate financial implications. However the JSNA is now a key tool contributing to local intelligence on basic needs assessment. It informs service plans, key strategies, commissioning as well as decommissioning and reconfiguration decisions.

9. Risks and Uncertainties

There are a number of risks associated with non-endorsement of the refresh programme of the Rotherham Joint Strategic Needs Assessment. Rotherham is well placed compared to other local authorities on the development and of the JSNA. Non-endorsement of the JSNA refresh will put Rotherham back compared to neighbouring local authorities in maintaining up to date data.

The JSNA should form the basis of all joint work between RMBC, Health and the voluntary sector. It acts as a platform for strategic development and commissioning decisions. Failure to maintain a JSNA which complies with the DH Core Dataset could set back joint working arrangements.

10. Policy and Performance Agenda Implications

The development of a Joint Strategic Needs Assessment addresses the majority of the National Indicators and Vital Signs for Local Authorities and Local Authority Partnerships for Adult Health & Well-being.

The development of a JSNA is part of the Neighbourhood and Adults Service Plan. Scheduled for completion at the end of this financial year, this document constitutes the completion of this element of the plan link to the Joint Commissioning strategy.

11. Background Papers and Consultation

• JSNA Main Report: Rotherham MBC and NHS Rotherham Intranet

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