

1. Introduction

1.1 Origins of the Joint Strategic Needs Assessment (JSNA)

The Commissioning Framework for Health and Wellbeing, published by the Government in March 2007, introduced the idea of a Joint Strategic Needs Assessment (JSNA). The Local Government and Public Involvement Health Act (November 2007) describes the requirement on Local Authorities and Primary Care Trusts to produce a JSNA of the health and wellbeing of their local community. Undertaking a JSNA is the joint responsibility of the Directors of Children's Services, Adult Services and Public Health. Darlington Borough Council and Darlington Primary Care Trust have worked together to produce the refreshed 2009 JSNA. The JSNA is an ongoing process and more detailed strategic assessments will be carried out in 2010 to inform the development of a refreshed *One Darlington: Perfectly Placed (Sustainable Community Strategy - SCS)* and in line with the Three-year Local Area Agreement cycle.

1.2 What the JSNA is for

- The JSNA is not a commissioning plan but rather a resource to inform commissioning intentions.
- It draws data from a variety of sources with a focus on bringing together information from health and local authorities to highlight the key issues. Key issues are those which affect a lot of people or have a significant impact on the health and wellbeing of those affected, and can be changed by local action using commissioning processes.
- It is a source for a range of information on issues that affect health and care, locating core health and social information in one document.
- The JSNA includes qualitative as well as quantitative data sets to inform a range of stakeholders.
- The JSNA is not intended for public consultation but is a resource from which to draw issues for public consultation.

1.3 JSNA and health inequalities

The aim of the JSNA is to describe the future health and wellbeing needs of the local population of Darlington to inform the strategic direction of service delivery to meet those needs. This includes identifying inequalities, that is, the avoidable differences in needs between groups of local people. Men from the least deprived areas of Darlington live 10 years longer than those from the most deprived areas, and the difference for women is 7 years (by national deprivation quintiles).

(Source: *Health Profile 2009: Association of Public Health Observatories*)

The reasons for the differences in health within Darlington and between Darlington residents and the rest of England are complex. The following summary has been adopted in Darlington as a framework for developing strategies to tackle health inequalities:

- Inequalities in opportunity – poverty, family, education, employment and environment (the wider determinants of health).
- Inequalities in lifestyle choices – smoking, physical activity, food, drugs, alcohol and sexual activity.
- Inequalities in access to services for those who are already ill or have accrued risk factors for disease.

Source: Annual Report of Director of Public Health 2006/07

Subsequent Director of Public Health annual reports have enlarged on these themes. The 2007/08 report focussed on coronary heart disease and cancer and the role of these diseases in health inequalities. The 2008/09 report focussed on the health needs of children and young people.

The JSNA links health needs analysis with patient and public views and experience. This contributes to local organisations having systems and strategies in place for ongoing, robust and regular assessments that help to establish a full understanding of current and future local needs. The JSNA for Darlington contributes to ensuring that health and social care commissioning decisions are based on sound knowledge of local needs and evidence of what works.

Future JSNAs will therefore serve as a performance monitoring tool, describing the progress towards reducing the gaps (including health inequalities) and assessing performance against national and regional targets, peer PCTs and Local Authorities.

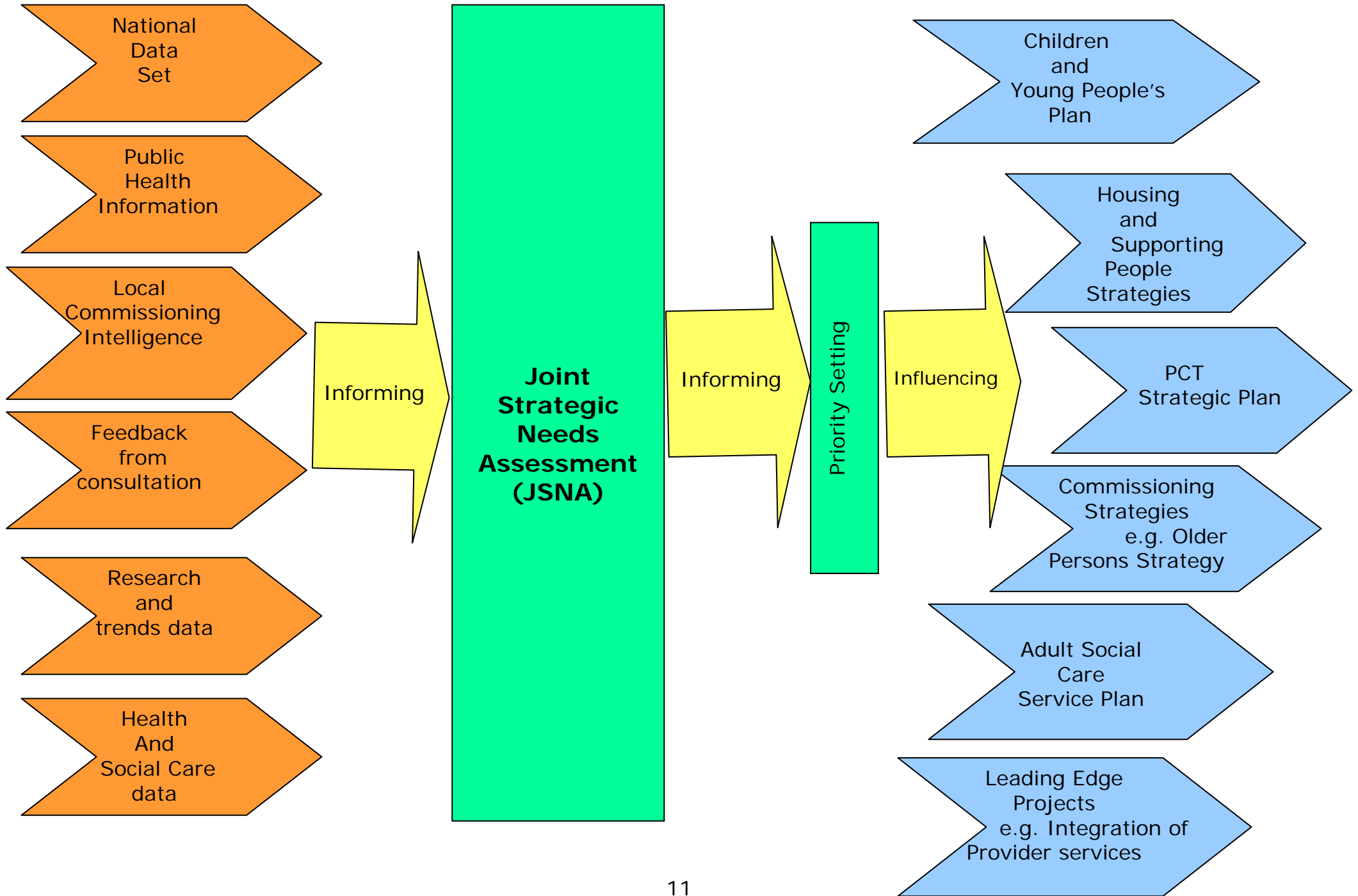
1.4 How this JSNA was compiled

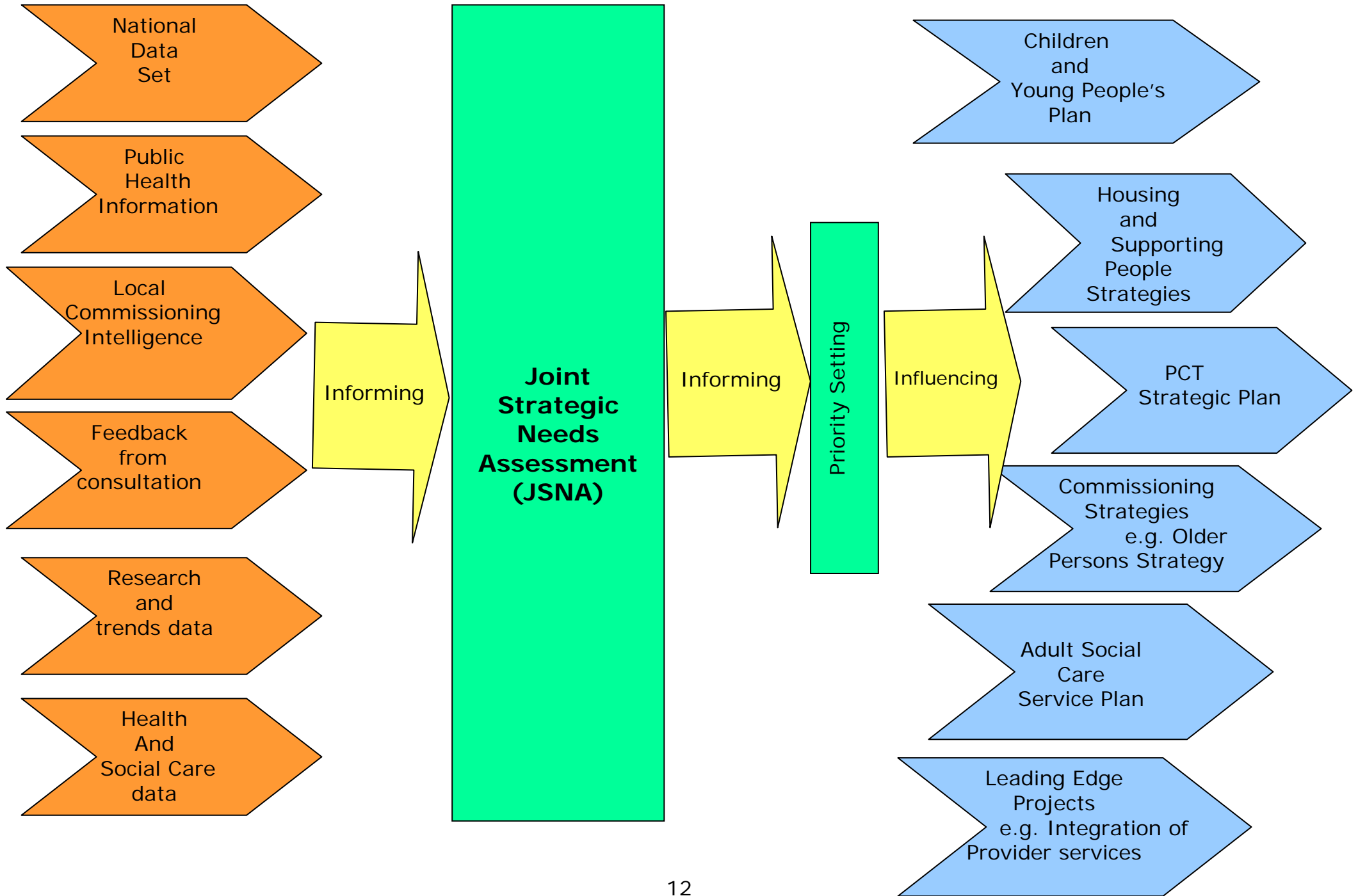
This JSNA development and refresh is the shared responsibility of the Director of Public Health, Director of Children's Services and Director of Adult Services. The process was led by representatives from Adult Social Services, Children's Services and NHS public health commissioners. The objectives were:

- To review the JSNA 2008, using local, regional and national data sources and other strategic documents (see chart below) and provide updates where available. New information and revised data have been highlighted with the symbol ** to assist the reader
- To provide, where possible, segmentation of population by health and care needs and disaggregation of data at ward level

- To benchmark Darlington performance against national, regional and peer organisations including, where feasible, its 'Statistical Neighbour'¹ Stockton PCT (*Department of Children, Schools and Families - Children's Services Statistical Neighbour Benchmarking Tool*)
- To update key messages and highlight key priorities
- To highlight progress towards achieving national and local targets in key areas

¹ Statistical neighbour models provide one method for benchmarking progress. For each local authority, these models designate a number of other local authorities deemed to have similar characteristics.





1.5 The JSNA and Our Vision

'One Darlington: Perfectly Placed' is our vision for Darlington for 2021. It is our Sustainable Community Strategy (SCS), created by the people of Darlington and is distinctively about the Borough.

It is a vision of a community that respects its unique heritage and retains its local character, friendliness and quality of life. It is also about making the most of the potential for greater prosperity, opening up aspiration and equality of opportunity for everybody, whilst building a genuinely sustainable, cohesive and caring community borough-wide.

One Vision – Two Priorities

This vision for Darlington has guided and formed the basis of the JSNA. The two components of the vision, One Darlington and Perfectly Placed, represent our priorities for the community. These priorities, focusing on people and on place, will be used to test and steer all of our projects and programmes to make sure that they are helping to achieve the vision.

The '*One Darlington*' priority is about people and ensuring that everyone has equality of opportunity, irrespective of his or her social and material circumstances. It is about narrowing the gaps in health, educational attainment and prosperity that currently exist across the Borough and building a stronger, diverse community that reinforces shared values of respect, caring and commitment.

Darlington is '*Perfectly Placed*' in terms of its location and accessibility, and is poised to maximise its opportunity to attract business investment and increase employment and wage levels.

The Delivery Themes and Work Strands

Five themes have been defined for organising and co-ordinating programmes of work to deliver the vision. These are:

- Prosperous Darlington
- Aspiring Darlington
- Healthy Darlington
- Greener Darlington
- Safer Darlington

The themes were developed around the issues and aspirations identified through consultations with local communities, data from a variety of local, regional and national sources and Enquiry Group processes, with key input from major stakeholders. Especially pertinent to the JSNA is the Healthy Darlington theme group, the health policy group of the Local Strategic

Partnership, which has defined a series of work strands to tackle health inequalities and “narrow the gap”:

- Increasing access to sport and leisure
- Promoting health of adults via healthy workplaces
- Preventing obesity and promoting physical activity in children and young people
- Promoting emotional health and wellbeing
- Promoting health with an ageing population

The SCS and governance arrangements have been developed to ensure that crosscutting agendas are identified and implemented across all themed groups.

As such, the key areas of the Health agenda will be carried out across all themed groups. For this reason, the framework for the JSNA has been aligned to the five themes as a means of organising the data and presenting key issues that inform each of the themed groups.

1.6 JSNA and Commissioning

This ‘refreshed’ version of the Darlington JSNA includes information from the 2008 JSNA which is still current and includes updates and additional information where possible, identified with **.

Since the first JSNA (2008) was produced decisions by health and local authority commissioners have addressed priority needs including:

- “Commissioning for Citizenship”, a framework identifying four key areas:
 - Supporting greater access to universal services
 - A greater focus on early intervention and prevention
 - Maximising individual choice and control through self directed support
 - A greater use of individual social capital
- “Children and Young People’s Plan”, commissioning through formal joint commissioning arrangements in response to *Healthy Lives Brighter Futures: The Strategy for Children and Young People’s Health (2009)* and earlier government strategies e.g. *Maternity Matters (2007)*.
- The Darlington Children and Young People’s Plan (2008-2011) identifies the following priorities:
 - Promote positive health and wellbeing
 - Ensure the safety of children and young people
 - Enable children and young people to aspire, have fun and maximise their full potential through learning
 - Enable children and young people to contribute to their community and environment

- The Darlington Children's Trust is committed to delivering the vision described in *Building Brighter Futures (2007 and 2008)*. One of the mechanisms is to develop across-agency integrated area-based services. The integrated teams will focus on early intervention and prevention.
- NHS County Durham commissions health care on behalf of the people of Darlington to improve health outcomes, reduce health inequalities and to improve access to safe, patient-centred services. The majority of the key health outcome priorities are aligned with SCS, LAA and informed by JSNA 2008:
 - Reducing health inequalities
 - Increasing life expectancy
 - Reducing under 18 teenage conception rates
 - Increasing breastfeeding rates
 - Reducing smoking further by increasing the number of people quitting (including reducing smoking in pregnancy)
 - Reducing deaths due to cancer
 - Improving patient experience
 - Tackling alcohol misuse and reducing related hospital admissions
 - Reducing the prevalence of cardiovascular disease, including stroke and diabetes and improving related health services
 - Improving access to mental health services

1.7 Comprehensive Area Assessment

The Comprehensive Area Assessment (CAA) framework brings together the work of seven different inspectorates to ensure that people receive clear and impartial information about how well they are being served by their local public services, how their area compares with other areas and what the prospects for their area are in the future. The CAA focuses on the prospects for better outcomes on local priorities.

The first CAA for Darlington comments on how public services are performing in each of the SCS areas, Prosperous, Aspiring, Healthy, Greener and Safer: A brief extract is included on part of the key messages in each section. For the full report refer to www.audit-commission.gov.uk/oneplace