

## North Tyneside Joint Strategic Needs Assessment (JSNA)

### JSNA project board action plan for public feedback – updated 9 November 2010

Please note this is an ongoing plan and subject to amendment.

Feedback	Comments / plans	Action points
<p><b>Prevention – domestic abuse</b> LINK event report – June 2010</p>	<p>Domestic abuse – we recognise that this is a gap and we need to include this in the next refresh.</p>	<p>Domestic violence to be included as a topic in JSNA refresh.</p>
<p><b>Prevention – adult safeguarding in the personalisation agenda</b> LINK event report – June 2010</p>	<p>Within the full JSNA document there is mention of targeted services aimed at promoting independence and well-being. In the summary document there is specific reference to <i>adult safeguarding</i>, referring to preventative initiatives and there is also a section about personalisation.</p>	<p>Noted.</p>
<p><b>Prevention generally</b> LINK event report – June 2010</p>	<p>The joint strategic needs assessment informs the commissioning of health and social care across the borough. The council and the PCT are working closely together on preventative strategies.</p> <p>Prevention is a key objective in the NHS North of Tyne strategic plan for commissioned healthcare services, which is objective 1: Improve prevention and wellbeing in order to minimise the reliance on healthcare and there are a range of initiatives impact and improve upon people's health. <a href="http://www.northoftyne.nhs.uk">www.northoftyne.nhs.uk</a></p> <p>The council is investing significantly in cultural services to find alternative ways of prevention through a number of projects including encouraging independent living, which are all contained in the Council Plan. <a href="http://www.northtyneside.gov.uk">www.northtyneside.gov.uk</a></p>	

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<p><b>Voluntary sector should be recognised as a deliverer of services</b>            LiNk event report – June 2010</p>	<p>This is not specifically mentioned in the JSNA however both the council and the PCT commission services from the community and voluntary sector.</p>	<p>We will endeavour to keep the LiNk and VODA informed of progress.</p>
<p><b>Information not being widely available or shared with minority groups</b></p> <p><b>More awareness of minority groups</b></p> <p><b>BME LGBT &amp; those with learning and physical disabilities.</b></p> <p>LiNk event report – June 2010</p>	<p>An easy read version of the JSNA has been drafted. The website should make the JSNA more accessible, however this work is ongoing (the website is due for publication on 9 November)</p> <p>There isn't anything specific about minority groups however a new topic of migrant health has been included in the JSNA refresh, which includes some components. This is lead by public health in North Tyneside and work is being undertaken regionally about this area.</p> <p>We agreed that there should be more focus on diversity as opposed to minority groups. There are some information sources that it may be possible to include containing information on vulnerable groups, priorities groups, learning disabilities, BME and deprivation. There is also research on understanding diverse communities – although we are not sure if it mentions health issues, but may be of interest as background information.</p>	<p>This will be distributed via the website and LiNk.</p> <p>Review available sources of information</p> <p>We will include a health inequalities section in each topic for the refresh of the JSNA document this year.</p> <p>General guidance about the consideration of diverse groups will be included in the template used by topic leads for next year.</p>

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<p><b>Health measures do not promote fair access</b> LINK event report – June 2010</p>	<p>Providers of commissioned services are expected to meet the needs of the people they are providing services for and both providers and commissioners always want to hear about any specific instances where this has not been the case so that action can be taken.</p> <p>See previous comments about diversity.</p>	<p>Equality impact assessment to be considered.</p> <p>Engage with BME and other groups on the JSNA</p>
<p><b>Long term conditions priority</b> LINK event report – June 2010</p>	<p>A range of long term conditions have been included in the JSNA as topic areas, such as diabetes, stroke, heart conditions and physical and sensory impairment.</p>	<p>Ongoing engagement to identify any gaps for next year.</p>
<p><b>Stroke services</b> LINK event report – June 2010</p>	<p>The JSNA is about needs assessment not about existing commissioned services however we agree it should contain information about the future needs of this group. We agreed to include a topic summary relating to stroke.</p>	<p>Separate summaries on management of cardiovascular disease and stroke have been included in the JSNA.</p>
<p><b>Transition – child to adult services</b> LINK event report – June 2010</p>	<p>A new section has been created in the refreshed version which will include an overarching view of needs, including housing. A LINK report has been published on this issue.</p>	<p>Topic lead to be identified</p>
<p><b>Engagement</b> LINK event report – June 2010</p>	<p>This table is published on the JSNA website to reflect comments raised for consideration as part of the JSNA in North Tyneside and action taken. Engagement has been undertaken through existing networks and meetings, VODA's newsletter and the council's publication Wider Horizons publication as well as local media coverage. A feedback form has been incorporated into the website.</p>	<p>Ongoing engagement through existing routes to be collated for further refresh of the document.</p>

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<p><b>Communication – making it easier for the JSNA to be understood by the public</b> LINK event report – June 2010</p>	<p>All the abbreviations are explained in the existing JSNA however further work will be undertaken to ensure that the refreshed document is reviewed and put in plain English where possible, in addition to the production of an easy read version.</p>	<p>To review all new additions to ensure they are easier to understand.</p>
<p><b>Alcohol problems in middle age or 50+</b> LINK event report – June 2010</p>	<p>There is a specific section for alcohol discussing chronic liver disease and hospital admissions of all age groups – we need to include an age distribution in the JSNA.</p> <p>A specific project is being undertaken to tackle hospital admissions and support people in the community with alcohol problems – we need also to find out if it possible to break down available information for this by age group.</p> <p>We agree this is important and the information will be useful for the Total Place project and to help North Tyneside Council direct a range of activities to support the Council Plan locally.</p>	<p>To include in the updated summary if possible.</p>
<p><b>More patient involvement</b> LINK event report – June 2010</p>	<p>Ongoing engagement work by the council and by NHS North of Tyne has been used to inform the existing JSNA. This will be part of the development of the engagement plan in partnership with the LINK.</p>	<p>Engagement plan developed.</p>
<p><b>Examples of the JSNA influencing commissioning</b> LINK event report – June 2010</p>	<p>Demonstrating impact was discussed at the project board meeting. We do not yet have a sense of how this can be measured, as the JSNA is in the process of stimulating commissioning plans. Evidence will need to be collated from the topic lead officers/ public health.</p>	<p>Topic leads to be asked to provide examples.</p>
<p><b>Ongoing route through local strategic partnership</b> LINK event report – June 2010</p>	<p>There are agreed terms of reference for the JSNA and ongoing work plans to review the governance structures and ensure that the JSNA feeds into key partnerships. It is clear from this that the JSNA project board should be accountable to the joint board.</p>	<p>Partnership boards updated.</p>

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<p><b>Support for carers – making sure people are better informed about the range of services and support available to them</b> Identified by member of public at area forum</p>	<p>National ‘carers direct’ website and free confidential helpline as central resource and information point is available and this has been publicised on local NHS PCT websites. A carers topic summary has been included in the JSNA.</p> <p>Dementia is a stand-alone topic on the refreshed JSNA.</p>	<p>Topic summary included.</p>
<p><b>Cancer prevention, screening and treatment, management of coronary heart disease and stroke, older people and carers ranked as top priorities</b> North West and Whitley Bay area forums (from 35 topics areas)</p>	<p>These top priorities identified by residents at council area forums to be reflected on the relevant JSNA topic summary under ‘local views’</p>	<p>‘Local views’ sections to be updated.</p>
<p><b>Suggestion to link smoking, alcohol and substance abuse</b> member of public North West area forum</p>	<p>Each topic summary details identified health needs. Separate topics doesn’t mean services aren’t joined up or that the approach to tackling health inequalities as a result of smoking, alcohol and substance abuse are looked at in isolation.</p>	<p>Noted.</p>
<p><b>New topic just on intermediate care for older people</b> member of public North West area forum</p>	<p>We recognise the importance of this topic. Developing services to provide care closer to home is in the local NHS strategic plan.</p> <p>The JSNA topic summaries identify health and social care need and are used to inform commissioning but they are not about individual services.</p>	<p>Noted.</p>

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<p><b>More recognition of the link between environment and wellbeing</b> member of public Wallsend area forum</p>	<p>North Tyneside Council policy reflects consideration of built environment on health and wellbeing.</p>	<p>Noted.</p>
<p><b>LINK report September 2010</b></p>		
<p>Feedback on actions taken as a result of member involvement appreciated</p>	<p>We are grateful for the positive comments about the action plan.</p>	<p>Noted.</p>
<p>Information and intelligence gathering across the community and voluntary sector could be done by LINK</p>	<p>Agree – we need to explore the ways of doing this as ongoing engagement on the JSNA.</p>	<p>Discussions to be held with LINK on ideas about their involvement in shaping the JSNA.</p>
<p>All strategies which affected the health of the community should dovetail together and agree. Concern that current strategies existed in isolation of each other rather than supporting a total approach.</p>	<p>We agree - this is about using the information available on the different strategies in a better way to show how they should be linked. This will also develop over time.</p>	<p>Noted - ongoing</p>
<p>Website shouldn't be only method of gathering feedback. Other routes are needed</p>	<p>The website is just one of the ways people can feedback on the JSNA and give their views on prioritisation.</p> <ul style="list-style-type: none"> <li>• Face to face at meetings with steering group members</li> <li>• Over the phone 0191 217 2599</li> <li>• In writing by writing to the PCT</li> <li>• Online website feedback form</li> </ul>	<p>Direct feedback points need to be reviewed.</p>

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Request to see further detail for each of the 35 topics.	This is being developed by the topic leads.	Summaries to be uploaded when ready to the website.
Preventative initiatives - difficulties of working with people to promote lifestyle change, when some may not want to take healthy living advice on board.	Agreed. There are currently a number of projects involving both the council and the PCT to change behaviours through social marketing projects to address this. There are also regional and national campaigns being run by the Department of Health.	Further examples to be supplied.
Giving feedback on priorities – request for template (cost benefits, numbers of people affected)	We are currently exploring methodologies for this.	Review current methodologies.
Suggestion of a panel of local residents feeding into JSNA steering group	One of the actions planned is to write to the residents' panel asking for their view.	To write to the residents' panel asking for their view.
More 'user friendly' title for the JSNA to engage people.	We agreed that the title would be simpler and have decided upon 'Health and Wellbeing Needs North Tyneside'. The name ' Joint Strategic Needs Assessment' is the term under the legislation which requires the JSNA to be produced and will need to remain on the website.	Included on the website.
People may be more willing to meet on specific subjects that interest them rather than the entire JSNA	This will be part of the discussion with the LINk mentioned above.	Noted.

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Subjective views and not just statistical information important. 'Quotations from the public could be included'	We will review existing work to see how quotes have been used in other areas.	To be considered by topic leads for the local views sections.