

Stage 2

How to conduct a needs analysis including gathering, analysing and interpreting data.

As part of the Healthy Schools enhancement model, you will undertake a needs analysis to build up a clear understanding of what the health and well-being needs are for your school population and its community. This guide explains how your school can achieve this. It should be read in conjunction with the next guide: *How to select priorities*, which focuses on how to use the information collected during this stage to select realistic priorities.

Most schools are already skilled in collecting, analysing and interpreting school data on attainment and attendance. You are now being asked to extend this same expertise to handle data relating to a relatively new subject, the health and well-being of children and young people.

As part of the enhancement model you will have access to a wide range of health and well-being data available at a national, regional, local or school level. At a local authority level you will already be able to access information from your Children and Young People's Plan (CYPP), the Joint Strategic Needs Assessment (JNSA) and the Local Area Agreement (LAA).

This local area information will help you decide whether the issues identified locally as priorities are also relevant to your own school. Your needs analysis should primarily be using data that reflects the local priorities in the CYPP and LAA.

You will consider data relating to the whole school population and also data relating to specific groups of children and young people who may need extra support such as children in care or young carers.

If you are working in a cluster of schools it may be beneficial to plan your needs analysis with other schools in the cluster.

A step by step approach for schools

Step 1 – Gathering data

Your school will need to consider what data is already available and also decide what additional data to collect.

This can be divided into three broad categories:

- > Sources of information that already exist within your local area
- > Quantitative data held by your school
- > Qualitative - perceptions of children and young people and parents/carers.

There will be local variations on what data is available to your school and the quality of this data. Your Healthy Schools Local Programme Co-ordinator will be able to signpost you to useful sources of data held locally.

A. Sources of information that already exist within your local area

The following table includes some examples of sources which will contain useful information relating to the health and well-being needs of children and young people identified in your locality.

You should be able to find these sources of information online. It is helpful to consider whether these priorities match the needs of your school.

Name of document	Information highlighted might include:	
Joint Strategic Needs Assessment (JSNA)	<p>Each local authority and its partners are required to carry out a joint strategic needs assessment which identifies the health and well-being needs and inequalities of a local population. The resulting issues identified by JSNA will inform the priorities and targets set by the Local Area Agreement (LAA). Commissioning arrangements, through the children's Trust on behalf of the local authority and partners will also be based on the needs identified in the JSNA.</p>	
Children and Young People's Plan (CYPP)	<p>Every local authority has a CYPP. Each CYPP sets out the improvements a local authority intends to make to the well-being of the children and young people in the area. It includes a needs assessment against the Every Child Matters outcomes. The plan is reviewed each year and can provide valuable up-to-date local information, including the views of children and young people in your local authority.</p>	
Local Area Agreement (LAA)	<p>A LAA is a three-year agreement between a local authority, partners and central government. The LAA describes how local priorities will be met by delivering local solutions. The LAA highlights improvement targets for your local area, called national indicators (NI). Up to 35 NI are selected as local priorities. These are complemented by a further 17 statutory targets on educational attainment and early years.</p>	
Public Health Observatory	<p>The Association of Public Health Observatories publishes health profiles¹ (a snapshot of health for each local council in England using key health indicators) and has a resource pack² (a review of the data and information needs of the JSNA process).</p> <p>The National Child and Maternal Health Observatory (ChiMat)³.</p>	<p>Each of the nine regions in England has a Public Health Observatory which can provide up to date health and well-being data including a health profile for each local authority area. The data is mainly presented at a local authority or district level.</p> <p>This has collated national published data and presents this through a number of tools.</p>

¹www.apho.org.uk/default.aspx?QN=P_HEALTH_PROFILES

²www.apho.org.uk/resource/view.aspx?RID=53885

³www.chimat.org.uk

B. Quantitative data held by your school

There will be data already held by your school which is relevant to this work. It may have been collected for other purposes or as part of your ongoing Healthy Schools work.

This information is likely to be more localised and school focused and will give you greater insight into the issues affecting your school community. It will also provide useful information about targeted groups of children and young people.

It will include data used to inform the Ofsted self-evaluation form such as attendance figures, fixed term exclusions, travel to school, take up of school lunches, behaviour, bullying and racist incidents. This data will allow your school to consider whether the priorities identified in the key local strategic plans (e.g. Children and Young People's Plan) are pertinent to your school and an area you should consider as part of the enhancement model.

With the introduction of the Indicators of a school's contribution to well-being⁴, the following quantifiable measures are available and can be used as sources of evidence about aspects of well-being:

- > attendance and persistent absence
- > the proportion of children and young people provided with at least two hours each week of high-quality sport
- > number of permanent exclusions
- > post 16 progression, shown by the proportion of young people participating in learning in the year after they have left compulsory schooling (secondary only)
- > the uptake of school lunches.

Quantitative data:

This is data which is an output and therefore easy to measure. For example, attendance rates, number of children and young people who are overweight or obese.

Your school may want to supplement this information with additional data. This might include information about the number of children and young people who walk or cycle to school; the number of recorded bullying incidents; the number of children and young people living in poverty or the breakdown of your black minority ethnic groupings or children with English as a foreign language. It will also be useful to gather information on children in challenging circumstances in your school including the number of young carers and children in care.

⁴DCSF and Ofsted (2009) Indicators of a school's contribution to well-being

C. Qualitative - perceptions of children and young people and parents/carers

Plan your work as part of the Healthy Schools enhancement model using qualitative - perception data collected in your school through surveys, focus groups, interviews and observations with children and young people and parents/carers.

Qualitative - perception data:

This is data drawn from children and young people and parents/ carers relating to health and well-being e.g. children and young people's feelings about how safe they are in school.

The advantage of qualitative - perception data is that it can be tailored to your own school.

You will need to decide what sort of questions to ask and who you will ask.

Qualitative - perception surveys may include information on the following areas and the extent to which children and young people and parents/carers feel:

- > The school promotes healthy eating, exercise and a healthy lifestyle and (for younger children) play; discourages smoking, consumption of alcohol and use of illegal drugs and other harmful substances; gives good guidance on relationships and sexual health; helps children and young people to manage their feelings and to be resilient; promotes equality and counteracts discrimination; provides a good range of additional activities/interventions; gives children and young people good opportunities to contribute to the local community; helps people of different backgrounds to get on well, both in the school and in the wider community; helps children and young people gain the knowledge and skills they will need in the future; offers the opportunity at 14 to access a range of curriculum choices; supports children and young people to make choices that help them progress towards a chosen career/subject of further study
- > Children and young people feel safe; report bullying; know who to approach if they have a concern; enjoy school; are making good progress; feel listened to and are able to influence decisions in the school.

You do need to be sensitive when collecting and storing information gained from all children and young people. It is particularly important that you avoid stigmatising particular children or young people, when gaining information from individual children and young people.

It is useful to consider whether there are already opportunities in place to seek the opinions of specific groups or individuals. For example the Personal Education Plan (PEP) review is a good opportunity to seek the views of a child or young person in care and to find out what is going well and where they might need extra support. Confidential information, if collected should be stored in line with the guidance set by your school, local authority and government. Your Local Programme Co-ordinator can signpost your school to relevant guidance.

Checklist for step 1 – gathering data

- > Have you looked at existing data in the Joint Strategic Needs Assessment and Children and Young People's Plan?
- > Have you been able to access data at both a local and school level?
- > Have you gathered a range of data across a number of health and well-being areas?
- > Are there any areas where there is no or little data? Have you looked again for data in these areas? Does it exist? If not have you considered how you could gather this data, if it might be required?
- > Have you achieved a balance between quantitative and qualitative - perception data?
- > Have you collected data on groups that you may want to target as part of the enhancement model? For example in relation to children in care, young carers or other children in challenging circumstances?
- > If you are working with a cluster of schools, have you collected data across all the schools?

Step 2 – Analysing the data

Your school will need to collate and summarise data from a range of different sources. It is important to assess both its relevance to your school and the reliability of the data. Information is more likely to be useful if it relates to schools similar to yours and is current.

When your school looks at data from a geographical area, it may be taken from a relatively large area such as a county or unitary authority area. Sometimes these figures are available at ward level or down to smaller groups. It is important to remember that small numbers can change considerably over a relatively short time period.

Where possible, your school might find it helpful to compare data on the same issue from a number of different sources, to confirm quality and rule out any misleading information.

Surprises

Data can sometimes contain surprises which your school will want to investigate further before reaching a decision about priorities. A useful step is to apply a common sense test to the data, by asking whether it seems about right. Sometimes data will present results which are misleading, especially if it was collected for different purposes or if it is out of date or it can represent a real change for example if there is a sudden population change in an area as a result of immigration, which has altered the picture. The timing of a survey may also have a significant impact on results.

If there is unexpected or conflicting data your school may wish to weigh up the pros and cons before determining needs. It is important not to dismiss unexpected results too quickly, if they don't fit with the preconceptions of your school as you may be overlooking something important.

Comparison

It is useful to make comparisons and to benchmark your health and well-being data. These comparisons may be with other local schools or against regional or national data. Your school will already have experience of doing this through benchmarking attainment data both within your school e.g. between year groups and in comparison to other schools and areas.

Trend data

It is good practice to gather and interpret health and well-being data, especially qualitative-perception data, over a number of years as this will help you identify variations on a term by term or year on year basis. Some health and well-being and behaviour change will take months or years to achieve. There may well be variability through the year and it is important to look beyond these fluctuations when identifying underlying patterns and long term trends.

Checklist for Step 2 – analysing the data

Consider the quality of the data:

- > Have you considered the date when the data was collected? Is it up to date?
- > If using the results of a survey, was a high enough response rate achieved? Were respondents representative of your school or cluster of schools? Is the data representative of all children and young people?
- > If using the results of a survey, is the data expressed in percentages, absolute numbers or as a rate (e.g. number of children hurt in road accidents per thousand)? Are you comparing like with like?
- > Has the organisation which originally collected the data provided any caveats, warnings or problems that you need to consider?
- > Have you disregarded any data that you feel could be inaccurate or misleading?

Step 3 – Interpreting the data

The final step of the needs analysis is to work out what the data is telling you and what this means for your particular school, cluster of schools and community. Your school will need to consider one key question: Does the data highlight any particular needs for our school?

You can then use this interpretation to inform the selection of both the school and local priorities. Remember to keep in mind both universal needs and those of targeted groups as part of the enhancement model.

The following exercise will help your school expand on what the story is behind the data:

- 1. Prioritise your data under three headings by using comparative data to identify either high, acceptable or low performance. You will need to decide which best describes the performance.**

Check you have a full set of information and data statements across a range of health and well-being areas and including coverage of children in challenging circumstances.

High performance	<p>Example data statements:</p> <ul style="list-style-type: none"> > 95% of children and young people walking to school > 90% take up of school meals
Acceptable performance	<p>Example data statements:</p> <ul style="list-style-type: none"> > The number of children and young people indicating that they have someone to talk to around issues to do with bullying is comparable with local and national statistics.
Low performance	<p>Example data statements:</p> <ul style="list-style-type: none"> > Percentage of children and young people identified as obese is higher than the other region comparisons > Under 18 conception rates are high in the area > 80% attendance (low in comparison to other schools and particularly low amongst young carers).

This activity/intervention will have identified health and well-being needs in your school. Next you will use these to work out possible areas for a school or local priority.

2. Prioritise your health and well-being needs

Take the possible needs (identified above as low performance areas) and ask two key questions to help you produce a short list for the next stage as part of the enhancement model:

- > Does the need link to the priorities identified by your local strategic partnerships (e.g. Children's Trust) and represented in key local documents such as the Local Area Agreement (LAA), Children and Young People's Plan (CYPP) and PCT operational plans?
- > Does the need link to priorities identified in your school improvement plan?

This activity/intervention will result in you selecting a range of needs, some of which will reflect local priorities as identified in the LAA, CYPP and PCT operational plan and school priorities, which may be outlined in the school improvement plan. The next stage is to select the two priorities that will be a focus for your school as part of the enhancement model. This is outlined in the guide: [How to select priorities](#).



For further information...

please contact your Local Programme Co-ordinator. Their contact details and more information about Healthy Schools can be found on our website:

www.healthyschools.gov.uk



Healthy Schools is a joint Department of Health and Department for Children, Schools and Families initiative

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