SFHPHP11

Analyse and interpret data and information about the health and wellbeing and related needs of a defined population

Overview

This standard covers analysing and interpreting data and information on health and wellbeing and related needs for the population with whom an individual works. This standard is most likely to be relevant to practitioners who undertake needs assessment for the population with which they work to inform their own and their colleagues' future practice.

Users of this standard will need to ensure that practice reflects up to date information and policies.

Performance criteria

You must be able to:

- P1 select an analytical method and related system that are appropriate to
  - P1.1 the nature and form of the data
  - P1.2 the purpose for which the results are to be used
- P2 structure and analyse the data and information correctly using the selected methods and systems
- P3 look at all of the data and information available for the piece of work in hand, in whole and in part, and identify the key aspects that emerge in relation to its purpose and audience
- P4 make an initial description and summary of
  - P4.1 the information provided by the analysis
  - P4.2 the information not provided by the analysis
  - P4.3 issues emerging from the analysis
- P5 iterate between the analysis and interpretations to identify further information
- P6 compare own interpretations with those that others have made in similar areas of work for corroboration and/or contradiction
- P7 produce a final description and summary of
  - P7.1 the information provided by the analysis
  - P7.2 the information not provided by the analysis
  - P7.3 issues emerging from the analysis

Knowledge and understanding

You need to know and understand:

K1 the types of data and information:
  K1.1 community and population views of health and wellbeing needs and outcomes
  K1.2 routinely available data on reproduction, disability, illness, disease and death
  K1.3 data on the use of services (such as health and social care services)
  K1.4 data on measures to manage disability, illness and disease
  K1.5 data on the relationship between the physical environment and health and wellbeing
  K1.6 data on the relationship between the social environment and health and wellbeing
  K1.7 census data - key indicators and projections
K2 the difference between qualitative and quantitative data and how to use the two together - the limitations of different forms of data
K3 the concepts of validity and reliability in relation to the design of data collection, collation and analysis
K4 the range of qualitative and quantitative data analysis methods available and the purpose of each
K5 how to analyse quantitative and qualitative data validly and reliably
K6 how the social construction of illness (and other related concepts) may affect the analysis and make cross-comparisons between different societies
K7 how to summarise and present information and the key issues emerging from it, in written, diagrammatic, graphic and pictorial, and audio form
K8 how to compare local populations with other populations identifying localities or groups with poor health and wellbeing using secondary data
K9 how to compare the health and wellbeing needs of different socio-economic groups (using data on socio-economic status and health needs)
K10 how to compare a locality with other populations through examining the scale of health and wellbeing problems in terms of incidence or prevalence
K11 how to assess the importance of different risk factors in a given population, including socio-economic, lifestyle, ethnic and genetic factors
K12 how to frame research questions for the collection and analysis of data and information about health and wellbeing and related needs
K13 ethical issues and legislative requirements surrounding data and information (e.g. small numbers and confidentiality)
K14 the profile of the local area with which the worker is concerned

  - K14.1 communities (neighbourhoods, communities of interest, communities of identity)
  - K14.2 agencies and workers (across all sectors)
  - K14.3 health and wellbeing: equalities and inequalities
  - K14.4 illness: incidence, types, levels, problems and contributing factors, the likely extent of unreported illness and disability
  - K14.5 structures and amenities
  - K14.6 cultural diversity, community groups, formal and informal leaders, networks

- K15 the meaning of `hard to reach' groups and the importance of involving such groups
- K16 methods and approaches of community involvement
- K17 the ways in which communication can be altered for different needs and contexts and how to respond to differences in the way that people communicate
- K18 the specific legislation, guidelines of good practice, charters and service standards that relate to the work being undertaken and the impact of these on the work
- K19 the services, policies and priorities of the worker's agency and how it relates to other agencies in the sector
- K20 the data storage and retrieval systems used by agencies working in health improvement
- K21 the codes of practice and protocols about confidentiality and information sharing between agencies working in partnership
- K22 own role and responsibilities and from whom assistance and advice should be sought if necessary
- K23 the application of the principles of equality, diversity and anti-discriminatory practice to work
- K24 how to develop one's own competence and skills in line with changes in knowledge and practice; how the worker's area and scope of practice are changing, the evidence which is available on the work and the implications of this for their own skill and knowledge base

Additional Information

External Links

This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: IK2 Information collection and analysis
Level: 2

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