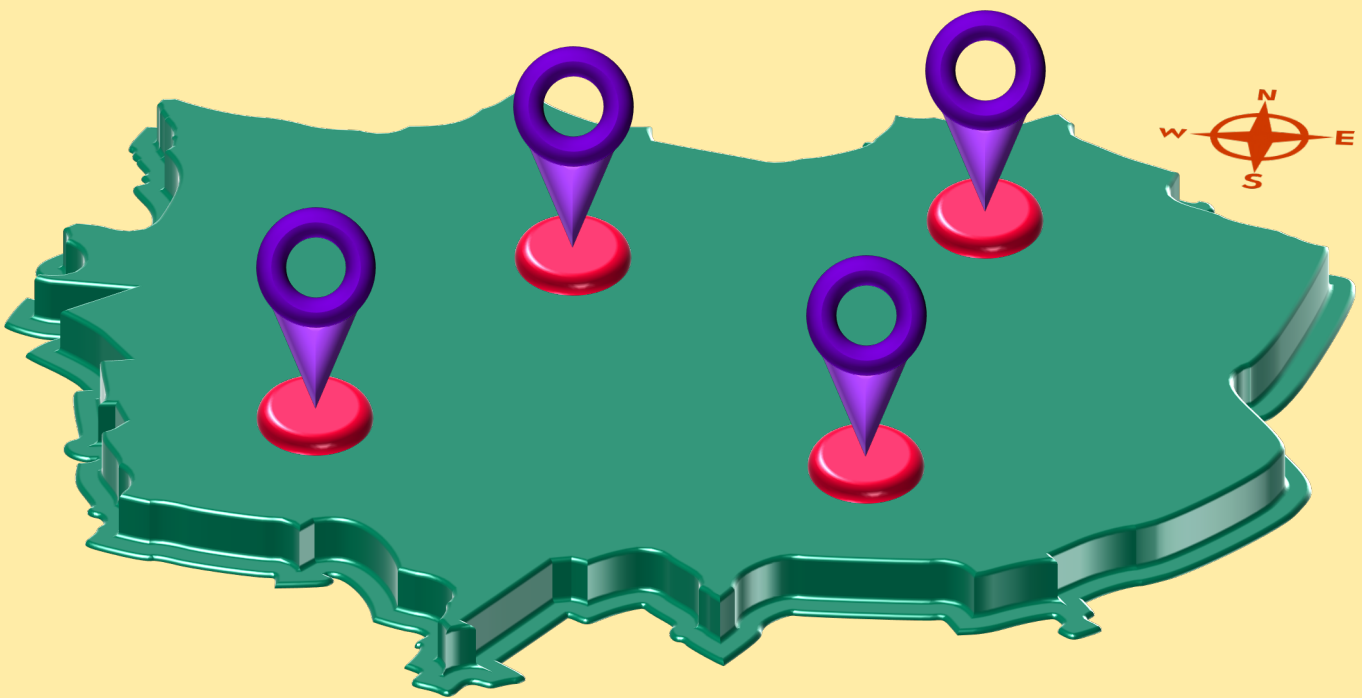


# A place-based Joint Strategic Needs Assessment for Coventry

Project Initiation Document (PID)



16 May 2018 (v1.4)

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## Document Location

<https://coventrycc.sharepoint.com/teams/ChiefExec/PublicHealth/Insight/Documents/JSNA 2019 PID.docx>

## Revision History

Revision date	Summary of Changes
11/04/2018	1.0 First draft
12/04/2018	1.1 Revised following feedback from Liz Gaulton
16/04/2018	1.2 Revisions to the steering group and working group
19/04/2018	1.3 Clarification to deliverables and governance following Public Health Senior Management Team
16/05/2018	1.4 Refreshed for clarity following internal planning discussion; added plan-on-a-page

## Distribution

This document has been distributed to

Name	Date of Issue	Version
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## A place-based Joint Strategic Needs Assessment (JSNA) for Coventry

### PURPOSE AND OBJECTIVE

The JSNA is a means by which local leaders across health and care work together to understand the assets and needs of all people in Coventry. This plan sets out how we will develop a place-based JSNA for Coventry to provide a story of the place to help partners understand local assets and needs.

### PLAN-ON-A-PAGE

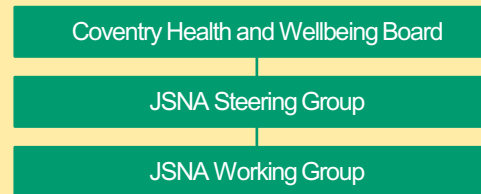


### SCOPE & APPROACH

This plan covers the development of a place-based JSNA. The refresh of the Health and Wellbeing Strategy – which is subject to a separate strategy. We propose a minimal, practical PRINCE2 'waterfall' process mixed with agile – that is, minimal documentation and an iterative development process.

### GOVERNANCE & STRUCTURE

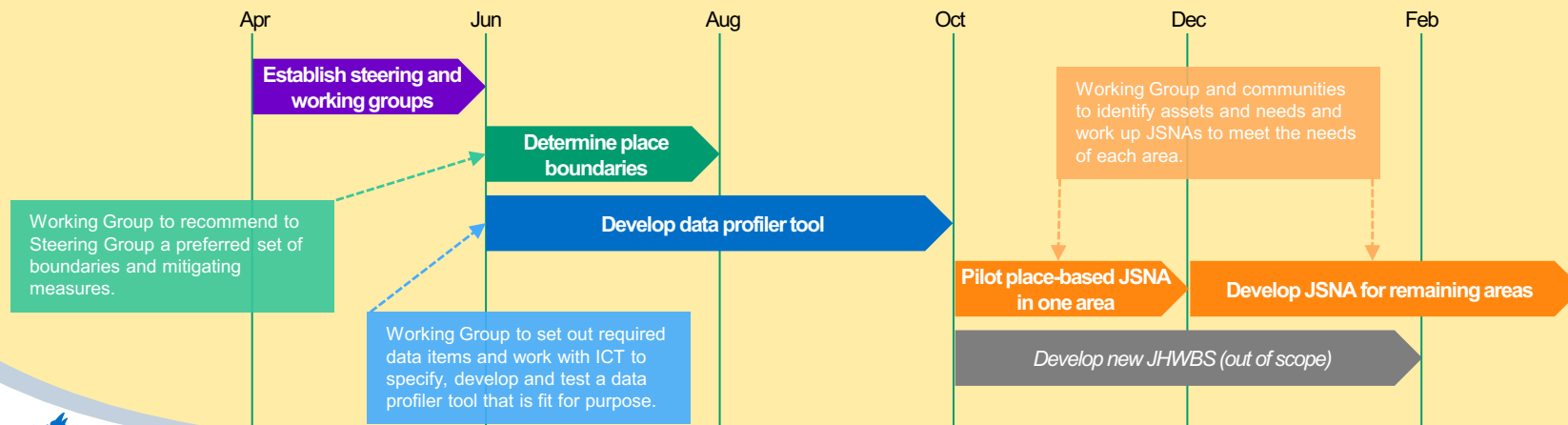
Chaired by the Director of Public Health, the steering group, made up of director-level representatives, will make decisions about the project on behalf of the HWBB



← Holds overall statutory responsibility for the JSNA

← Chaired by the Insight Manager (Intelligence), the working group will take forward the work. The working group membership will be officer/analyst level and membership will flex based on need.

### DELIVERABLES



# Background

## Context

The Joint Strategic Needs Assessment (JSNA) is a means by which local leaders across health and care work together to understand and agree the assets and needs of all people in Coventry. It is owned by the Coventry Health and Wellbeing Board (HWBB). The production of a JSNA, along with a Joint Health and Wellbeing Strategy (JHWBS) is a statutory requirement placed upon the HWBB under the Health and Social Care Act 2012.

The JSNA brings together, in one place, data, information and resources about key health and social care issues affecting Coventry residents, and supports the planning and commissioning of health, wellbeing and social care services. An effective JSNA helps the HWBB set its priorities and strategy and helps inform strategic commissioning across the health and care system.

The JSNA is more than just a document; it is a process that involves the collection of 'hard' evidence from data sources, as well as consultation with local stakeholders and partners to understand the key issues facing local communities.

## Case for change

The current JSNA process was completed in 2016. The data was recently updated in January 2018 with:

- refreshed data – the latest data available as of January 2018;
- the addition of a colourful set of flash facts outlining data for each theme; and
- an accompanying set of slides being delivered by the Insight Team to HWBB partners who would like to know more about the production and content of the JSNA.

There is a will across Health and Wellbeing Board partners to move towards more place-based working. In addition, the current JHWBS covers 2016-19 and is due for a refresh for the 2019-22 period. These factors necessitate a fresh approach to the JSNA. The intention is to move towards a place-based approach for the JSNA to give a more in depth understanding of geographical areas within the City and inform the development of the next JHWBS. This reflects recent research evidence, developments and policy direction nationally which has seen a move towards recognising that health and care (including community-based, mental health, social care) services based around natural geographies of populations between 30,000-50,000 people would offer populations a much more complete and less fragmented services.

In addition, regionally, there has been a move towards a place-based approach to health and care. Across Warwickshire, Warwickshire County Council have developed a place-based approach to their JSNA, which has been positively received. This is a significant departure to the traditional whole population, thematic approach. The drivers for this change include:

- the requirement to support significant transformation programmes and strategies which are founded on community resilience and service delivery at locality level;
- use of the JSNA as a vehicle for engaging and involving local partners and stakeholders; and
- combining local intelligence and issues to tailor needs assessments to local needs, which ensures that the JSNA process feeds into local action plans.

Learning from Warwickshire, developing a place-based JSNA for Coventry will involve the following:

- identification of suitable geographies to be the local area building blocks. Warwickshire has 22 JSNA geographies which are profiled in stages over several years;
- each area has an average population of 25,000, defined by geospatial software and stakeholder consultation;
- boundaries designed to meet stakeholder needs as far as possible and partners are committed to using these areas for strategic planning purposes;
- producing data at the local geography level through a profiling tool developed by the Insight team at Warwickshire; and

- creating locally focussed profiles each with a local champion or sponsor and lead officer. Work is owned by a local stakeholder group and supported by an analyst. This will require significant input and commitment from partners and will have a large resource implication for the Insight and Public Health team.

The strengths of a place-based approach to the JSNA is that it is likely to bring similar benefits of locally focussed profiles and partnership involvement through local sponsors. In addition, this move will benefit services that work jointly with Coventry and Warwickshire, in particular, the Place Forum, the Coventry and Rugby Clinical Commissioning Group (CCG) and acute and community hospital trusts.

Such a move will also create new opportunities including providing support towards increased joint working between the two public health teams as resources from national government continue to become more constrained.

Potential weaknesses of a place-based approach for Coventry, is that Coventry is one city, unlike Warwickshire, where each town or locality has a clearly unique population profile. However, the footprint of the eight recently-formed Family Hubs in Coventry acts as evidence that this is possible, and indeed the Family Hubs may act as a suitable geography for Coventry. Based on Warwickshire's experience, a profiling tool can be made flexible enough to allow partners to access data and create statistical profiles to support multiple needs including commissioning decisions, Family Hubs, out of hospital localities, and the transformation of children's social care. As part of the JSNA process, it will also be essential to ensure that chosen geographies make sense to local communities.

The threats of not moving towards a place-based approach would be fragmentation and inconsistency between the approaches taken in Coventry and Warwickshire, and the failure to maximise the potential of local partnerships with community groups and the voluntary sector which is essential for delivering the NHS five year forward view and the Council Plan priority to deliver our priorities with fewer resources.

## Project definition

### Objective

To develop a place-based Joint Strategic Needs Assessment (JSNA) for Coventry, to provide a story of the place to help partners understand local assets and needs.

### Approach

The JSNA is a large, multi-stakeholder project involving lots of external partners and therefore a commonly-understood methodology like PRINCE2 would be suitable to ensure common understanding between partner organisations. However, as there are a lot of unknowns from a place-based approach to developing a JSNA, this necessitates flexibility. Therefore, we propose using a minimal, practical PRINCE2 'waterfall' process mixed with agile – this means, this PID will set out the initial plan, requirements and infrastructure – but as the JSNA develops, they can and will change.

The overall approach will be divided into stages, as set out under deliverables, below.

### Scope

The scope for this work is the Coventry health and care system. The production of the JSNA is in-scope. The production of the JHWBS for 2019-22, while both an outcome and a dependency of the JSNA, will be the scope of a separate project.

A list of stakeholders is set out under management and organisation, below.

### Dependencies

The development of the JSNA is closely linked to the development of a refreshed Coventry JHWBS for 2019-22. It is expected that the two will be interdependent: the development and piloting of an initial JSNA for

one geography will help steer the development of the JHWBS; which will, in turn, steer the development of the JSNA for the rest of the city.

Other dependencies include:

- the continued development of a place-based JSNA in Warwickshire, particularly in the Coventry and Rugby Clinical Commissioning Group (CCG) area;
- the capacity to develop the JSNA across the agreed areas;
- agreement of the appropriate geographies for Coventry; and
- the successful identification and involvement of area sponsors.

## Deliverables

### Initial project plan

Stage	Description	Timescales
1	Establish steering group and working group	Apr-Jun 2018
2	Determine place boundaries	Jul-Aug 2018
3	Develop data profiler tool	Jul-Oct 2018
4	Pilot place-based JSNA in one area	Oct-Dec 2018
5	Develop JSNA for remaining areas	2019-

### Stage 1: establish steering group and working group

<b>Purpose</b>	Establish a steering group of senior leaders (at director level) to decide on a course of action and to agree on the work on behalf of the Board, and a working group (at officer/analyst level) to take forward the work.
<b>Key activities</b>	<ol style="list-style-type: none"> <li>1. Identify key stakeholders</li> <li>2. Identify a senior leader from stakeholder groups to be represented on the steering group and analyst from stakeholder groups on the working group</li> <li>3. Agree meeting dates, times and venues</li> <li>4. Scope out the work such as the data and intelligence required, parameters, as well as initial work towards identifying geographies</li> </ol>
<b>Dependencies and inputs</b>	Require participation and engagement from stakeholders of the Coventry Health and Wellbeing Board
<b>Owner</b>	Si Chun Lam
<b>Leads</b>	Tina Wukics

### Stage 2: determine place boundaries

<b>Purpose</b>	Determine the boundaries for each of the place-based JSNA.
<b>Key activities</b>	<ol style="list-style-type: none"> <li>1. Define what we mean by a “place” – what actually makes sense to a community and what is actually feasible</li> <li>2. Identify existing boundaries and their purposes e.g. Ward boundaries, Family Hub areas, out of hospital areas, GP clusters</li> <li>3. JSNA working group to set out a case for the most suitable set of “places” to use, consulting with all stakeholders and communities</li> <li>4. JSNA steering group to agree on a set of places</li> <li>5. JSNA steering group to identify potential community lead and professional lead to take overall responsibility for each place</li> </ol>
<b>Dependencies and inputs</b>	Dependent on the completion of Stage 1 Requires input from the JSNA Steering Group and JSNA Steering Group Requires participation from stakeholders including politicians and the community
<b>Owner</b>	Liz Gaulton
<b>Leads</b>	Si Chun Lam

### Stage 3: develop data profiler tool

<b>Purpose</b>	Collect 'hard' data for the JSNA and design a data profiler tool for the easy storage and retrieval of the data at any bespoke geography.
<b>Key activities</b>	<ol style="list-style-type: none"> <li>1. Scope out requirements for the procurement or design of a database and retrieval mechanism for combining and storing of indicators at different levels (e.g. *SOA, Ward, parliamentary constituency, local authority, CCG, local policing areas) that can be combined, sliced and diced in different ways for any bespoke geographies</li> <li>2. Collect hard indicators on the above data – a desk-based study</li> <li>3. Input place boundaries into the data profiler tool</li> <li>4. Pilot data profiler tool</li> </ol>
<b>Dependencies and inputs</b>	<p>Dependent on the completion of Stage 1. While the data profiler tool and the collection of data can take place without Stage 2; full delivery of the data profiler tool will require completion of Stage 2.</p> <p>Requires input from the Insight Team at Coventry City Council, and engagement of partners and stakeholders in addition to the JSNA Working Group</p>
<b>Owner</b>	Stella Botchway
<b>Leads</b>	Si Chun Lam

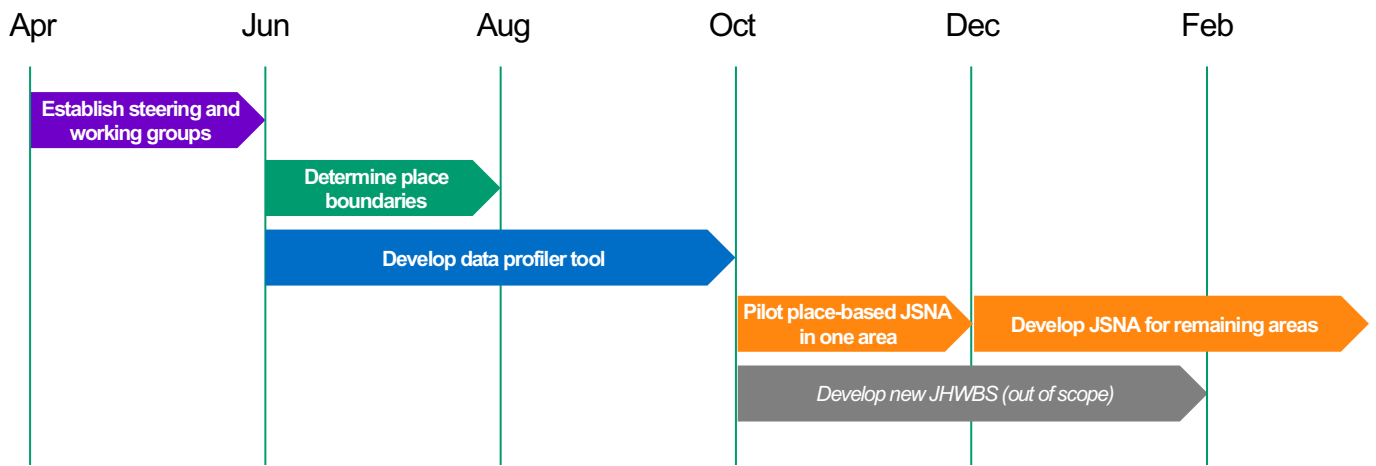
### Stage 4: pilot place-based JSNA in one area

<b>Purpose</b>	To develop a place-based JSNA in one area of the city.
<b>Key activities</b>	<ol style="list-style-type: none"> <li>1. Shortlist a number of areas to pilot the development of a place-based JSNA in consultation with the community lead and professional lead</li> <li>2. Identify one area to test the place-based JSNA</li> <li>3. Develop the JSNA – in consultation with stakeholders including communities of interest and communities of place in that place</li> <li>4. Identify assets and needs to shape the (1.) planning of services and (2.) the delivery of services</li> <li>5. Use experience to influence the development of the JHWBS</li> <li>6. Complete the pilot JSNA for one area of the city</li> </ol>
<b>Dependencies and inputs</b>	<p>Completion of all above stages.</p> <p>Engagement of stakeholders in the area.</p> <p>Influence of JSNA Steering Group to shape JHWBS around health inequalities, demand reduction, and communities/wellbeing.</p>
<b>Owner</b>	tbc
<b>Leads</b>	tbc

### Stage 5: develop JSNA for remaining areas

<b>Purpose</b>	To develop a place-based JSNA in all areas of the city.
<b>Key activities</b>	<ol style="list-style-type: none"> <li>1. To be determined, based on learning from Stage 4.</li> </ol>
<b>Dependencies and inputs</b>	<p>Successful pilot of the JSNA for one area of the city in Stage 4.</p> <p>Completion of the JHWBS.</p>
<b>Owner</b>	tbc
<b>Leads</b>	tbc

### Timescales

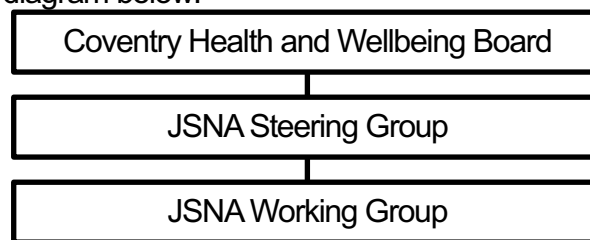


## Management and organisation

### Governance

The Coventry Health and Wellbeing Board (HWBB) holds overall responsibility for the JSNA. It's delivery will be overseen by a steering group chaired by Liz Gaulton, Director of Public Health, and a working group chaired by Liz Deakin, Insight Manager (Intelligence).

This is outlined in the structure diagram below:



### Resources and representation

#### Key people

Title	Role	Lead
<b>Project sponsor</b>	Chair the steering group and act as liaison between the HWBB and the JSNA steering group	Coventry Health and Wellbeing Board represented by Liz Gaulton – Director of Public Health
<b>Senior lead</b>	Chair the working group and act as liaison between the working group and the steering group	Liz Deakin – Insight Manager (Intelligence)
<b>Project manager</b>	Co-ordinate people and meetings	Tina Wukics – Partnership Support Officer, Coventry City Council
<b>Delivery manager</b>	Overall responsibility for delivering the JSNA	Si Chun Lam – Insight Development Manager (Place & Public Sector Transformation), Coventry City Council

#### JSNA Steering Group

- Liz Gaulton – Director of Public Health, Coventry City Council (Chair)
- Stella Botchway – Consultant in Public Health Intelligence
- Liz Deakin – Insight Manager (Intelligence)
- Si Chun Lam – Insight Development Manager (Place and Public Sector Transformation), Insight Team, Coventry City Council (Project manager)
- Tina Wukics – Partnership Support Officer, Insight Team, Coventry City Council



- Engagement lead from Coventry City Council
- Decision-maker from primary care – via Coventry and Rugby CCG?
- Representation from West Midlands Police
- Representation from Healthwatch Coventry

## JSNA Working Group

*It is anticipated that the membership of the working group will flex based on need, for instance, at the outset, the working group may only consist of analysts from the Insight Team; while in the delivery of the place-based JSNA, the working group membership as each place-based JSNA is developed will change in line with the stakeholders, including community and voluntary sector leads, of each area.*

- Liz Deakin – Insight Manager (Intelligence) (Chair)
- Si Chun Lam – Insight Development Manager (Place and Public Sector Transformation), Insight Team, Coventry City Council (Project manager)
- Tina Wukics – Partnership Support Officer, Insight Team, Coventry City Council
- Analyst from Coventry and Rugby CCG
- Analyst from University Hospital Coventry and Warwickshire (UHCW)
- Analyst from Coventry and Warwickshire Partnership Trust (CWPT)
- Analyst from West Midlands Police
- Representative / involvement from public health (Coventry City Council)
- Representative / involvement from adult social care (Coventry City Council)
- Representative / involvement from commissioning (Coventry City Council)
- Representative / involvement from children’s social care (Coventry City Council)
- Representative / involvement from education (Coventry City Council)

## Communications

Within the working group:

- Communication via SharePoint project site and by email from the project manager and through regular working group meetings

To the steering group:

- Regular communication of progress, items requiring decisions to the steering group via the chair
- Communication by exception, as circumstances demand, usually immediately, to the steering group chair

Within the steering group:

- Communication via SharePoint project site and by email from the project manager on behalf of the chair and through regular steering group meetings

To the Health and Wellbeing Board:

- Regular communication of progress to the Board, at each Board meetings

## Stakeholders

### Public sector

- Coventry City Council – local councillors
- Coventry City Council – including:
  - Adult social care (including older people, learning disabilities, mental health, etc.)
  - Children’s social care
  - Commissioning
  - Education
  - Housing and homelessness
  - Public health

- Coventry and Rugby Clinical Commissioning Group
- Coventry and Warwickshire Partnership Trust
- Coventry and Warwickshire Place Forum
- Coventry Health and Wellbeing Board
- Coventry Local Public Service Board
- West Midlands Police
- Warwickshire County Council

### Voluntary and community sector

- Healthwatch Coventry
- Partnership for Coventry
- *Communities of interest*
- *Communities of place*

### Risk register

Reference	Description	Likelihood Rating (1-5 with 5 high)	Consequence Rating (1-5 with 5 high)	Control measures
1.1	Failure to get sufficient representation from across the health and care system	2	3	Health and Wellbeing Board tasked to identify members
2.1	Failure to agree on boundaries resulting in delays/failure to develop place-based JSNA	4	5	Use multiple overlapping geographies
3.1	Insufficient skillset to develop profiler tool	3	5	Borrow from Warwickshire and/or seek external ICT support

## Resources

### Further information

- Coventry Joint Strategic Needs Assessment: <https://www.coventry.gov.uk/jsna/>
- Towards a place-based approach for the Joint Strategic Needs Assessment (briefing note to the Coventry Health and Wellbeing Board, 9 April 2018): <http://democraticservices.coventry.gov.uk/documents/s37658/Coventry%20Joint%20Strategic%20Needs%20Assessment.pdf>
- Coventry JSNA presentation slides (presentation to the Coventry Health and Wellbeing Board, 9 April 2018): <http://democraticservices.coventry.gov.uk/documents/s37667/Coventry%20Joint%20Strategic%20Needs%20Assessment%20-%20presentation.pdf>

### Contact

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