



Kent and Medway Integrated Care Strategy

Shared Delivery Plan 2024 - 2026

12 June 2024

Shared Delivery Plan Contents Page

1. [Introduction](#)
2. [Health and Wellbeing Boards statements](#)
3. [Overview of Integrated Care Strategy](#)
4. [Outcome 1 – overview and approach to delivery](#)
5. [Outcome 2 – overview and approach to delivery](#)
6. [Outcome 3 – overview and approach to delivery](#)
7. [Outcome 4 – overview and approach to delivery](#)
8. [Outcome 5 – overview and approach to delivery](#)
9. [Outcome 6 – overview and approach to delivery](#)
10. [Strategy enablers](#)
 - Research, innovation and improvement
 - System leadership and making the most of our collective resources including our estate
 - Engaging our communities
11. [Conditions for successful delivery](#)
 - Partnership working
 - Commissioning in collaboration
 - Summaries of partner plans
12. [Financial Sustainability](#)
13. [Have your say](#)
14. [Appendices](#)



Introduction and purpose

'We will work together to make health and wellbeing better than any partner can do alone.' This is our vision for the Kent and Medway Integrated Care System, which brings together all our system partners to make a significant difference, improving local services and supporting healthier living.

Our refreshed Integrated Care Strategy, which is also the Joint Local Health and Wellbeing Strategy for Kent, sets the shared outcomes that we will work as a system to achieve to improve the health and wellbeing of the Kent and Medway population. The Strategy is owned by the Integrated Care Partnership (ICP) which has a role to ensure that progress is being made against the shared outcomes. Successful delivery will require all partners in the system to play their part.

This Shared Delivery Plan will support the ICP in its assurance role. It supports the principle of subsidiarity and provides a system-level view of some of the main strategies and activities in place that will make a significant impact in delivering the shared outcomes. Some of the strategies and activities are owned by individual partners and others are being delivered in partnership as we progress on our journey as an integrated system. Delivery of these strategies and activities remains the responsibility of the partner organisation or group that owns it but bringing them together in this Shared Delivery Plan allows for greater understanding and visibility of key activity across the system. It will allow the ICP to be assured that activity is in progress against the commitments we have made in the Strategy and will signpost to where further information can be sought if needed for the shared outcomes. Should the reader wish to explore the detailed actions being undertaken, they should refer to the relevant cited plan.

Monitoring delivery through strategic indicators

The Integrated Care Strategy is supported by a set of strategic indicators which have been developed through a logical framework (logframe) matrix. The indicators will provide the ICP with information to know whether the desired impact of the shared outcomes is being realised for the population of Kent and Medway.

An illustrative selection of these indicators is included in this plan. These are examples only, and do not carry additional weight over others in the more comprehensive set within the logframe.

The Integrated Care Partnership will receive annual updates on the indicators. Where the indicators suggest that more progress is needed, the Shared Delivery Plan will support the ICP to understand the strategies and activities around a particular issue so it can receive more detailed assurance through themed or deep dive discussions.

This is the first time we have come together to jointly deliver a set of shared priorities at this scale. Effective partnership working, joint commissioning, governance and system-led oversight are all essential to the successful delivery of our strategy. This document describes our ambition for these areas and key steps to achieve this.

This document acts as the Joint Forward Plan which the NHS in Kent and Medway is required to produce, bringing together our delivery planning as a system.

The Shared Delivery Plan will be refreshed in two years to reflect the latest plans in place to deliver the strategy.

Delivering together

Kent and Medway is a large and diverse area, and the Integrated Care Strategy recognises that delivery of the shared outcomes will need to be tailored to local places and specific needs. This plan sets out only the main system-level strategies and activities that will drive work to deliver the outcomes.

Our Integrated Care System is made up of many other partners who also lead strategies and activities that will play an important role in improving the health and wellbeing of the Kent and Medway population. It would be impossible to capture all of these, and it is important that local areas and partners have the flexibility they need to meet the needs of the people they support. However, this activity is a vital part of the success of our system and the ICP will continue to develop its connections with partners across places and sectors.

The voluntary, community and social enterprise sector is an integral part of our system at every level and helps shape strategy and activity as well as providing vital support in our communities.

There are four Health and Care Partnerships comprised of local government, health, NHS and VCSE representatives. They design and deliver services to meet the needs of everyone they serve based on their local population. They can focus services on areas of greatest need, helping to reduce health inequalities and improve life expectancy.

| | | | |
|---|--|--|---|
|  1.9 million people |  2 Healthwatch organisations |  Approx 4,000 registered charities |  90,000 staff working across health and care |
|  13 housing authorities |  Over 74,000 businesses and enterprises |  14 councils 1 county, 1 unitary, 12 districts |  184 GP practices in 41 Primary Care Networks |
|  694 schools and 1,713 nurseries/early years settings |  4 Health and Care Partnerships |  325 pharmacies |  1 medical school and 3 universities |
|  7 NHS provider trusts and 1 Integrated Care Board |  642 care homes |  321 parish and town councils |  1 Police Force and 1 Fire and Rescue Service |

Role of Health and Care Partnerships and District & Borough Councils

Health and Care Partnerships and District & Borough Councils have a key role in improving health and wellbeing through local action involving key local partners including the local VCSE to deliver the priorities for their place supported by appropriate programmes of work and action plans. Together, these place-based plans will have significant impact on the overall delivery of our shared strategy. Place-based priorities and plans have been reflected in this shared delivery plan.



Service user story / vignette

Drafting notes

- *To support our communities to understand the outcomes in Kent and Medway's Integrated Care Strategy and Shared Delivery Plan, and what it means to them and their everyday lives, we are developing 'a family' that will be used to bring ambitions in the six outcomes to life.*
- *The family will consist of a grandparent, two parents, a young child and a young person under 16. The idea is to demonstrate what could happen when actions in the strategy and delivery plan become reality, similar to the Dorothy/Esther model that was used some time ago.*
- *The interactions will support services available in a relevant local area and how accessed*
- *Scenarios the family would go through will feature in the communications we do to support understanding and support for what we are working to collectively achieve.*
- *The family will strongly feature in the second phase of the communications and engagement plan after the strategy and delivery plan have been launched in April, together with real-life case studies.*



Statements from Health and Wellbeing Boards

Kent

Our strongest endorsement for the Integrated Care Strategy and this Delivery Plan is that we embrace it as the Kent Joint Health and Wellbeing Strategy and Delivery Plan for Kent. We recognise the challenges to the health of those we serve and the need to adopt, at scale, system wide approaches that tackle the whole range of wider determinants of health. This must include a central role for districts, for local communities and for people themselves in improving wellbeing as well as the County Council and NHS playing a full role in tackling the Wider determinants. We believe the actions prioritised by system stakeholders, and outlined in this Delivery plan, represent our best opportunity to improve local health and wellbeing, and reduce health inequalities.

Medway

Medway Health and Wellbeing Board fully endorses the Integrated Care Strategy and associated delivery plan, recognising their vital role in enhancing the health and wellbeing of Medway residents. We welcome the synergies between the ICS strategy and our new Medway Joint Local Health and Wellbeing Strategy, with a strong common focus on health inequalities and the building blocks of health. By explicitly outlining responsibilities and mapping these to existing work across the system, this delivery plan will help us to work seamlessly across organisations towards our common goal of a healthier and more equitable Kent and Medway.

Overview of the Integrated Care Strategy

Our vision:

We will work together to make health and wellbeing better than any partner can do alone

Together we will...

Give children and young people the best start in life

Tackle the wider determinants to prevent ill health

Support happy and healthy living for all

Empower patients and carers

Improve health and care services

Support and grow our workforce

What we need to achieve

- Support families and communities so children thrive
- Strive for children and young people to be physically and emotionally healthy
- Help preschool and school-age children and young people achieve their potential

- Address the social, economic and environmental determinants that enable people to choose to live mentally and physically healthy lives
- Address inequalities

- Support people to adopt positive mental and physical health
- Deliver personalised care and support centred on individuals providing them with choice and control
- Support people to live and age well, be resilient and independent

- Empower those with multiple or long-term conditions through multidisciplinary teams
- Provide high quality primary care
- Support carers

- Improve equity of access to services
- Communicate better between our partners when changing care settings
- Tackle mental health issues with the same priority as physical illness
- Provide high-quality care to all

- Grow our skills and workforce
- Build 'one' workforce
- Look after our people
- Champion inclusive teams

Enablers:

We will drive research, innovation and improvement across the system
We will provide system leadership and make the most of our collective resources including our estate
We will engage our communities on our strategy and in co-designing services

Shared outcome 1: Give children and young people the best start in life

We will ensure that the conditions and support are in place for all children and young people to be healthy, resilient and ambitious for their future.

What we heard:

- Improve support for those with Special Educational Needs and Disabilities (SEND) and their families
- Support families with all aspects of the wider determinants of health including mental wellbeing, finance and childcare
- Safeguarding particularly the most at risk children
- Accessible Evidence Based Parenting support
- Ensure local access to support for families

Everyone plays a role in keeping children safe. Across the system we bring together our collective information, skills and resources to strengthen our early help and safeguarding arrangements and work together to identify and tackle safeguarding priorities in our communities.

Priorities to deliver this outcome: Together we will...

Support families and communities so children thrive

We will take a whole-family approach, coproducing with children, young people and families, and looking at all elements that families need so their children can thrive, with support in safe, strong communities that addresses poverty, housing, education, health and social care. We will use our Family Hub model, bringing together universal children's services to include midwifery, health visiting, mental health, infant feeding, early help and safeguarding support for children and their families, including children with Special Educational Needs and Disabilities (SEND). We will transform how we help families access the right support, in the right place at the right time, and ensure the support they receive is joined up across organisations. We will improve the transition to adult services.

Strive for children and young people to be physically and emotionally healthy

We will set high aspirations for the health of children and young people and make this everyone's responsibility. This will include a preventative approach to keep children physically healthy, promoting healthy eating, high levels of physical activity and improving air quality. We will address health inequalities including smoking in pregnancy, breastfeeding, immunisation and childhood obesity. Children who are more likely to experience poorer outcomes, including children in care and care leavers, refugees and those who have offended, will receive more support. We will work together to help individuals, families, communities and schools build emotional resilience, tackle bullying and loneliness and provide opportunities for children, young people and families to form supportive networks and take part in social and leisure opportunities. Children and young people at most risk of significant and enduring mental health needs will receive timely and effective interventions. We will protect young people from criminal harm and exploitation, tackle the challenges caused by domestic abuse and support victims.

Help preschool and school-age children and young people achieve their potential

We will support families so that children are ready for school through co-produced, evidence-based support, including parenting support, and high-quality early years and childcare. With families we will tackle low school attendance, provide equal access to educational opportunities and ensure that young people are skilled and ready for adult life. We are committed to working with families on our collective responsibility to support children with SEND. We will strengthen the capability of mainstream early years and education settings and universal services to ensure children with SEND are included, their needs are met and they can thrive. Where specialist help is required, this will be identified early and seamlessly coordinated.

Indicators for this outcome include:

By 2028/29, the proportion of mothers smoking at time of delivery will have reduced from 10.2% to no more than 6%.

By 2028, the % of children in Year 6 who are healthy weight will be maintained at the current level of 63% and severe obesity will have reduced from 5%.

By 2028 pupil absence rates will have fallen from 7.9% to below 5%.

By 2028, pupils achieving a good level of development at the end of the Early Years Foundation Stage will have improved from 65.8% to at least 70%.

By 2028/29, the average attainment 8 scores for both SEN and non-SEN pupils will have increased, and the gap between the two groups will be 5 points lower than the national average.

I am happy and secure at school and at home

I am working hard to get the qualifications I need to achieve my ambitions

Shared Outcome 1: Shared Delivery Examples

| Children and Young People Vision Statement | Children and Young People Counselling Service | Family Hubs | SEND Improvement Plan | Healthy weight |
|---|---|--|--|--|
| <p>The Vision Statement has been co-produced with children and young people in Kent, including the Youth County Council. Engagement sessions took place in January 2024, and it is hoped that the draft statement and tagline will be circulated in April.</p> <p>The Statement is part of a wider refresh of the Strategic Framework for Children and Young People in Kent. NHS Kent and Medway have led the project in collaboration with Kent County Council. Medway Council have also been consulted to see if they would like to adopt the Vision Statement.</p> | <p>The Children and Young People Counselling Service is available to children aged 5 – 18 (including those not in education) and is part of the wider Children & Young People’s Mental Health Services pathway. The service is delivered countywide by Kent Community Health NHS Foundation Trust (KCHFT) and consists of a workforce of qualified counsellors. The intervention includes up to six individual 1-1 counselling sessions and helps children and young people to maintain their resilience throughout recovery.</p> | <p>We are in the process of implementing a Family Hub model across Kent and Medway. Family hubs will bring services for families and CYP from age 0 to 19 under one roof.</p> <p>The proposal is to integrate children’s centre services, health visiting and community-based midwifery care and youth services with other key community services. This will bring services and organisations together to provide a single point of access for families.</p> <p>The programme is due to be launched in June 2024, with wider partnership integration and sustainability planning taking place later in the year.</p> | <p>We are undertaking various initiatives to improve Special Educational Needs and Disability (SEND) services as part of the Accelerated Progress Plan (APP). For example, surgeries /workshops have been put in place to support the strengthening of health input in Education Health and Care Plans (EHCP), while a dedicated SEND Enquiries Hub has been set up to provide a consistent point of contact for parents, carers and families.</p> <p>Significant progress has also been made in specialist health services such as speech and language therapy and neurodevelopment pathways. Together with Parents is a co-produced service that offers support to parents and carers whose child has received / is awaiting a diagnosis for Neurodiversity. The service is jointly funded by Kent County Council and the NHS Kent and Medway Integrated Care Board.</p> | <p>Dartford, Gravesham and Swanley HCP is prioritising Children & Young People. Together the Health and Care Partnership are working to address health inequalities and improve the health and wellbeing of children and young people in the area. Based on their population health data there is a particular focus on obesity as a causal factor in increased levels of type 2 diabetes.</p> |
| <p>Vision Statement co-produced, agreed and shared May 2024</p> | <p>Continue delivery of the CYP counselling service Ongoing</p> | <p>Launch Family Hub programme June 2024</p> | <p>Delivery of Accelerated Progress Plan (APP) March 2025</p> | <p>DSG HCP Board to agree delivery plan June 2024</p> |

Shared outcome 1: Give children and young people the best start in life

Priority: Support families and communities so children can thrive

Whole family approach, co-producing with children, young people and families

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| The Children and Young People Programme Board will be developing joint areas of focus for 2024/25. | K&M Children and Young People (CYP) Programme Board |
| Children and Young People's Plan 2023-25 | Medway Health and Wellbeing Board |

Reduce the percentage of children living in poverty

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Kent and Medway Economic Framework | Kent and Medway Economic Partnership (KMEP) |
| Kent County Council Financial Hardship Programme Framing Kent's Future | Kent County Council (KCC) |
| Kent Association of Local Councils (KALC) cost of living initiatives | Kent Association of Local Councils (KALC) |
| Medway Continuous Improvement Plan | Medway Children's Improvement Board |
| Medway Cost of Living Crisis Response Plan | Medway Council |

Improve and join up access to local support for families

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Family Hub Programme | KCC and Medway Council Codesign with partners in districts |
| Neglect Strategy | Medway Safeguarding Children Partnership (MSCP) |
| Medway Cost of Living Crisis Response Plan | Medway Council |

Shared outcome 1: Give children and young people the best start in life

Priority: Support families and communities so children can thrive

Ensure access to benefits for families

| Strategies / plans in place to deliver | Led by / responsible |
|--|------------------------|
| Financial Hardship Programme | KCC |
| Family Hub Programme | KCC and Medway Council |

Improve transition to adult services

| Strategies / plans in place to deliver | Led by / responsible |
|--|----------------------|
| Mental health transition | NHS Provider Trusts |
| Long term condition focus | NHS Provider Trusts |
| Adult Social Care Strategy | Medway Council |

Shared outcome 1: Give children and young people the best start in life

Priority: Strive for children and young people to be physically and emotionally healthy

Address Health Inequalities

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Kent and Medway Learning Disability and Autism (LDA) Strategy [in development] | Learning Disability and Autism Delivery Partnership |
| Smoking in pregnancy, breastfeeding, immunisation, obesity Reduce the proportion of women who smoke in pregnancy Deliver perinatal equity and equality action plan and commission for and monitor implementation of personalised care | Local Maternity and Neonatal Systems Board |
| Reduce the percentage children who are obese and overweight | Kent and Medway Children and Young People Programme Board, Dartford, Gravesham and Swanley Health and Care Partnership |
| Core20PLUS5 project <ul style="list-style-type: none"> National Institute for Health and Care Excellence (NICE) Guidance NG18: Diabetes in CYP: Diagnosis & Management Implementation of Diabetes Technology Appraisal (Hybrid-closed systems) NHSE CYP Epilepsy National Bundle of Care NHSE CYP Asthma Bundle of Care | NHS Kent and Medway K&M Children and Young People Programme Board |
| Libraries Business Plan | KCC – GET |
| Developer Contributions Guide | KCC - GET |
| Literacy Strategy (in development) | Medway Council – Education Team |
| Range of VCSE provisions and peer support initiatives | VCSE organisations |
| Cultural Strategy | Medway Council Culture and Communities |

Shared outcome 1: Give children and young people the best start in life

Priority: Strive for children and young people to be physically and emotionally healthy

Give more support to those more likely to experience poorer outcomes

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Children in Care Strategy Interest Company (CIC) Chapter Update | KCC Public Health Team |
| Children and Young People Strategy 2023-25 | Medway Health and Wellbeing Board |
| Children in Care Strategy Medway | Medway Corporate Partnering Board |
| Continuous Improvement Plan Medway | Medway Continuous Improvement Board |
| Kent and Medway Domestic Abuse Strategy Domestic Abuse Strategy Medway | Multi agency including KCC, Medway Council and NHS Medway Health and Wellbeing Board |
| Medway Joint Strategic Needs Assessment (JSNA) Community | Medway Public Health Team |
| Refugee resettlement programmes | ICB Asylum Accommodation Working Group Kent County Council |
| Looked After Children project area | K&M Children and Young People Programme Board |

Improve access to services to support young people with mental health issues to build emotional resilience and ensure timely and effective support for those with the highest mental health needs

| Strategies / plans in place to deliver | Led by / responsible |
|--|--|
| CYP Mental Health transformation and procurement project CYP Mental Health Long Term Plan and Local Transformation Plan workstreams CYP Crisis and Complex Pathway project | K&M Children and Young People Programme Board |
| Kent and Medway Domestic Abuse Strategy | Multi agency including KCC, Medway Council and NHS |
| Medway Children in Care Strategy | Medway Corporate Partnering Board |
| West Kent Health and Care Partnership children's mental health programme | West Kent Health and Care Partnership |

Shared outcome 1: Give children and young people the best start in life

Priority: Strive for children and young people to be physically and emotionally healthy

Protect young people from exploitation and criminal harm

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| Serious Youth Violence | Violence Reduction Unit, Police and Crime Commissioner |
| Prevent Duty | Kent and Medway Safeguarding Boards |
| Community Safety Plans Kent Community Safety Agreement and Action Plan | Kent Community Safety Partnership (CSP) |
| Medway Contextual Safeguarding Strategy | Medway Joint Exploration Group |

Improve levels of physical activity in young people

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Move Together – Active Kent and Medway Strategy | KCC Public Health and Medway Public Health Teams |
| Country Parks Strategy | Active Kent and Medway |
| Playground National Portfolio Organisation | Active Kent and Medway |
| Developer Contributions Guide | KCC – GET |
| Local Parish Initiatives | Kent Association of Local Councils initiatives around physical activity |
| Local Transport Plan | KCC – GET |
| Sports Strategy (TBC) | Medway Council |

Reduce the proportion of women who smoke in pregnancy

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Local Maternity and Neonatal System Delivery Plan | Local Maternity and Neonatal System Board |
| Children and Young People's Plan 2023-2025 | Medway Health and Wellbeing Board |

Shared outcome 1: Give children and young people the best start in life

Priority: Strive for children and young people to be physically and emotionally healthy

Reduce the percentage of children who are obese and overweight

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Inequalities, Prevention and Public Health Committee (IPPH) - Prevention Subcommittee Action Plan | NHS K&M |
| Whole System Obesity Plans | Kent Public Health Medway Public Health Team Medway Healthy Weight Network, Physical Activity Alliance and Food Partnership |
| DGS HCP children and young people health improvement | DGS HCP – Children and Young People Committee |

Take a preventative approach to keeping children healthy including oral health and Immunisation

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| IPPH Prevention Subcommittee Action Plan | NHS K&M Kent Public Health Team |
| Medway Oral Health Strategy | Medway Public Health Team Medway Oral Health Strategy Group |
| Trading Standards & KSS Business Plan & Community Wardens | KCC – GET |

Safeguarding

| Strategies / plans in place to deliver | Led by / responsible |
|--|--|
| Deliver Safeguarding priorities | Kent Children Safeguarding Multiagency Partnership (KSCMP) |
| Deliver the NHS Kent and Medway Safeguarding Strategy | MSCP |
| Medway Safeguarding Children Partnership Business Plan | MSCP |
| Children and Young People's Plan 2023-25 | Medway Health and Wellbeing Board |
| Continuous Improvement Plan Medway | Medway Continuous Improvement Board |

Shared outcome 1: Give children and young people the best start in life

Priority: Help preschool and school age children and young people achieve their potential

Support families so that children are ready for school

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| KCC Early Years and Childcare strategy in development | KCC – Children Young People and Education (CYPE) |
| Family Hubs | KCC and Medway Council |
| Medway Children in Care Strategy | Medway Corporate Partnering Board |
| Early Help Strategy | Early Help Partnership Board |

Support access to high quality nursery education

| Strategies / plans in place to deliver | Led by / responsible |
|---|---------------------------------------|
| KCC Early Years and Childcare strategy in development | KCC – CYPE |
| Children / Early Years Sufficiency Assessment | Medway Council – Education and Access |

Improve proportion children achieving a good level of development at end Early Years Foundation Stage including through evidence- based parenting support to all who would likely benefit

| Strategies / plans in place to deliver | Led by / responsible |
|---|------------------------------|
| KCC Early Years and Childcare strategy in development | KCC – CYPE |
| Family Hubs | KCC and Medway Council |
| Libraries Registrations and Archives Business Plan | KCC – GET |
| Early Help Strategy | Early Help Partnership Board |

Tackle low school attendance reducing pupil absence

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| School Improvement Plan | KCC |
| Attendance Action Plan | Medway Council – Education and SEND Teams |

Shared outcome 1: Give children and young people the best start in life

Priority: Help preschool and school age children and young people achieve their potential

Provide equal access to educational opportunities

| Strategies / plans in place to deliver | Led by / responsible |
|--|---------------------------------------|
| School Improvement Plan | KCC |
| Medway School Place Planning Strategy | Medway Council – Education and Access |

Ensure young people are skilled and ready for adult life

| Strategies / plans in place to deliver | Led by / responsible |
|--|----------------------------------|
| School Improvement Plan | KCC |
| Framing Kent's Future | KCC |
| Libraries Registrations and Archives Business Plan | KCC |
| Medway Children in Care Strategy | Medway Corporate Parenting Board |
| Medway Skills and Employability Plan | Medway Council |

Improve pupil attainment measured through average attainment 8 scores

| Strategies / plans in place to deliver | Led by / responsible |
|--|----------------------|
| School Improvement Plan | KCC |

Shared outcome 1: Give children and young people the best start in life

Priority: Help preschool and school age children and young people achieve their potential

Strengthen capability of mainstream settings and universal services to meet the needs of CYP with SEND

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Kent and Medway SEND Strategy | Kent SEND Improvement and Assurance Board, Medway SEND Partnership Board |
| Home to school transport | Kent SEND Improvement and Assurance Board, Medway SEND Partnership Board, KCC, Medway Council |
| Medway Local Area SEND Strategy | Medway SEND Partnership Board |

Work with families with children & young people with SEND

| Strategies / plans in place to deliver | Led by / responsible |
|--|--|
| Kent and Medway SEND Strategy | Kent SEND Improvement and Assurance Board, Medway SEND Partnership Board |
| Medway Local Area SEND Strategy | Medway SEND Partnership Board |

Provide specialist SEND support with early identification and good coordination

| Strategies / plans in place to deliver | Led by / responsible |
|--|--|
| Kent SEND Strategy | Kent SEND Improvement and Assurance Board, Medway SEND Partnership Board |
| Medway Local Area SEND Strategy | Medway SEND Partnership Board |
| Supporting parents and children and seeking feedback on referral letters | Healthwatch Kent |

Shared outcome 2: Tackle the wider determinants to prevent ill health

Address the wider determinants of health (social, economic and environmental), to improve the physical and mental health of all residents, tackle inequalities, and focus on those who are most vulnerable

What we heard:

- Target prevention activities for each community group, making the most of VCSE expertise and community assets
- Longer duration for prevention programmes
- Support for cost of living – housing, transport, food
- Extend use of social prescribing
- Improve transport access to services, jobs and social opportunities

Priorities to deliver this outcome: Together we will...

Address the economic determinants that enable healthy lives including stable employment

We will attract and support new businesses and encourage all large employers to develop as anchor organisations within their communities including all public sector organisations, procuring and employing locally in a way that optimises social value. We will support people and small businesses with the cost-of-living crisis. We will help individuals fulfil their potential by achieving secure employment through education and skills development and by supporting businesses.

Address the social determinants that enable healthy lives including social networks and safety

We will build communities where everyone belongs. We will work with communities, building on their assets to empower people to address key health and social issues including loneliness, community safety and the economic burdens from misuse of drugs & alcohol. We will further develop social prescribing and local voluntary and community capacity to meet these challenges. The importance of Active Travel, access to services, work and leisure, and best use of local Libraries, Community Hubs, music, arts and heritage opportunities are recognised. In partnership we will promote community safety, tackling crime and preventing and reducing serious violence, antisocial behaviour and discrimination that can make people feel unsafe or unwelcome.

Address the environmental determinants that enable healthy lives including housing, transport and the natural and built environment

We will plan, develop and regenerate in a way that improves quality of life for new and existing communities – across built and natural infrastructures including housing, transport and the local environment. We will incorporate the impact of climate change in all planning. We will explore how we can help people adopt sustainable ways of living and working and make best use of all our resources. We will work to provide accessible homes for life and services for all, through planning and with housing providers. We will plan to improve safety, air quality and promote physical activity.

Address inequalities

We will ensure people who need them will have access to benefits, housing, services and support through identification, signposting and a directory of local support as well as opportunities to access work through skills development and local transport. We will focus on prevention and help people, including those with mental health issues, learning disabilities and neurodiversity, to enter, re-enter and be retained in the workplace, to have secure homes, benefits and social networks and opportunities, maximising their independence.

Indicators for this outcome include:

By 2028/29, the proportion of people who feel lonely often or always will have reduced from 7.3% to no more than 5% across Kent and Medway.

By 2028/29, the percentage of the population who are in contact with secondary mental health services that are in paid employment (aged 18 to 69) will increase from 8% to above 10% in Kent and Medway.

All NHS organisations and local authorities will make progress towards their net-zero targets.

By 2028/29, the percentage of the population who are in receipt of long-term support for a learning disability that are in paid employment (aged 18 to 64) is similar to, or better than, the national average.

There is lots to do around here and I feel safe

I have been diagnosed with depression. My employer has been great working with services so I can still manage work

Shared Outcome 2: Shared Delivery Examples

| Work and Health Strategy | 'Move Together': Active Kent and Medway Strategy | Serious Violence Duty | Environmental Sustainability | Population Health Management and Addressing Inequalities |
|---|---|---|--|---|
| <p>Working in partnership with Kent and Medway Economy Partnership (KMEP) we will co-develop a Work and Health Strategy during 2024/25, which will report to the ICP. As part of this, we will also form a Health and Economy Group. KMEP is made up of businesses and local authority leaders which drives forward and monitors an economic plan for Kent and Medway.</p> <p>Activities already include a joint bid across partners for the Work Well Vanguard, a pilot service which aims to better integrate local employment and health support for disabled people and people with health conditions to start, stay and succeed in work.</p> | <p>'Move Together' is Kent and Medway's 2023 – 2027 strategy for sport and physical activity. The core vision is to get <i>more people, more active, more often</i>.</p> <p>The strategy sets out how system partners are working together to support children and young people to exercise more regularly, while also tackling the inequalities that currently prevent some young people from being more active. For example, 'The Daily Mile' is a free activity available to all schools which sees children run or jog, at their own pace, for 15 minutes a day to improve their physical, social, emotional and mental health.</p> | <p>The Duty requires specified authorities to work together through an agreed partnership arrangement to prevent and reduce serious violence.</p> <p>Kent have received an allocation of £292k for 2023/24, with the Police and Crime Commissioner (PCC) working with partner organisations including the ICB to set out a strategy which will be agreed by the new Serious Violence Prevention Board. Community Safety Partnerships are then the local partnership model for discharging the duty.</p> | <p>Kent and Medway Strategic Environment and Sustainability Steering Group support the ICS towards our shared actions. They are currently reviewing the delivery of the Green Plan to cover four key areas of procurement supply chain, primary care, estates and medicines.</p> <p>The group are exploring options for developing joint proposals to commission and fit electric vehicle charging points across our estates to best serve our fleets and staff. Additionally, they will be creating a System Wide Adaptation Strategy to help partners understand the need to plan for the impacts of climate change.</p> | <p>Each of the HCPs a uses population health management approach to segment its population and target resources accordingly to help address health care inequalities. Each HCP has a series of funded projects that seek to address an aspect of health inequalities which include: social prescribing, condition specific projects, health and housing, and mental health.</p> <p>During 24/25 working in partnership, we will refresh our plans to enable us to continue to build our knowledge and capabilities to fully embed a population health management approach for improving Core20PLUS5 outcomes across our system.</p> |
| <p>Co-produced Work and Health Strategy March 2025</p> | <p>Deliver 'Move Together' action plan March 2026</p> | <p>Serious Violence Prevention Board and Strategy established March 2025</p> | <p>System Wide Adaptation Strategy agreed March 2025</p> | <p>Deliver health inequalities funded projects and refresh population health delivery plan March 2025</p> |

Shared outcome 2: Tackle the wider determinants to prevent ill health

Priority: Address the economic determinants that enable healthy lives including stable employment

Attract and support new businesses

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| K&M Economic Framework | Kent and Medway Economic Partnership (KMEP) |
| Framing Kent's Future-Priority 1 Levelling up | Kent County Council (KCC) Inward Investment Commission |
| Libraries, Registration & Archives (LRA) Business and Intellectual Property Centres (BIPC) Trading Standards Business Advice | KCC – Growth, Environment and Transport (GET) |
| Medway 2040 | Medway Council - Regeneration |

Encourage all large employers to develop as anchor organisations

| Strategies / plans in place to deliver | Led by / responsible |
|--|-------------------------------|
| Kent and Medway Economic Framework | KMEP |
| Medway 2040 | Medway Council - Regeneration |

Optimise our role as public sector anchors including around procurement and employment

| Strategies / plans in place to deliver | Led by / responsible |
|--|---------------------------------------|
| People Strategy | NHS Kent and Medway, KCC HROD |
| Green Plan | KCC – GET |
| Procurement Policies, Social Value | KCC Procurement and Commissioning |
| Procurement Strategy | Medway Council – Legal and Governance |
| Workforce Strategy | Medway Council - HR |

Shared outcome 2: Tackle the wider determinants to prevent ill health

Priority: Address the economic determinants that enable healthy lives including stable employment

Cost of living support

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Kent and Medway Economic Framework | KMEP Medway Council Benefits and Financial Welfare Team |
| IPPH Prevention Sub-Committee | NHS K&M |
| KCC Financial Hardship Programme | KCC |
| Framing Kent's Future | KCC |
| Cost of living initiatives | KLAC Local District Councils Local Health Alliances Voluntary sector |
| Libraries, Community Wardens | KCC – GET |
| Energy and Low Emissions Strategy | KCC – GET |
| Medway Cost of Living Crisis Response Plan | Medway Council |
| VCSE support programmes | VCSE organisations |

Shared outcome 2: Tackle the wider determinants to prevent ill health

Priority: Address the economic determinants that enable healthy lives including stable employment

Education and skills development for employment

| Strategies / plans in place to deliver | Led by / responsible |
|---|----------------------|
| Kent and Medway Economic Framework | KMEP |
| Local Skills Improvement Plan | KCC – GET |
| Framing Kent's Future-Priority 1 Levelling up | KCC – GET |
| Medway Skills and Employability Plan | Medway Council |

Increase percentage of the population who are in paid employment and are in contact with secondary mental health services or who have long term support for a learning disability

| Strategies / plans in place to deliver | Led by / responsible |
|---|----------------------|
| Kent and Medway Economic Framework Local Skills Improvement Plan | KMEP |

Shared outcome 2: Tackle the wider determinants to prevent ill health

Priority: Address the social determinants that enable healthy lives including social networks and safety

Reduce Loneliness

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Social Prescribing Strategy | NHS Kent and Medway (IPPH Inequalities Subcommittee) KCC Adult Social Care Medway Social Isolation and Loneliness Action Alliance |
| Research on loneliness | Health Determinants Research Collaboration Medway |
| Focus on key districts and partnerships | District Councils and Alliances, Community Hubs |
| KALC loneliness initiatives | KALC and Parishes |
| Libraries, Community Wardens | KCC – GET |
| Kent Karrier | KCC – GET |
| Kent Cultural Strategy | KCC – GET |
| Range of programmes focused on reducing loneliness | VCSE organisations |
| Cultural Strategy | Medway Council – Culture and Communities |

Community safety including tackling crime, serious violence, anti-social behaviour and discrimination

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Kent Community Safety Partnership Action Plan | Kent Community Safety Partnership (CSP) District CSPs, Office of Police and Crime Commissioner |
| Medway Community Safety Partnership Action Plan | Medway Community Safety Partnership |
| Kent Community Safety Strategy | Kent Community Safety Partnership (CSP), District CSPs, Office of Police and Crime Commissioner (OPPC) |
| Violence Reduction Unit | OPCC |
| Trading Standards Action | KCC Trading Standards |
| Kent Design Guide | KCC – GET |
| Medway Youth Justice Plan | Medway Council – Youth Justice |

Shared outcome 2: Tackle the wider determinants to prevent ill health

Priority: Address the social determinants that enable healthy lives including social networks and safety

Deliver on Serious Violence Duty

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Kent Community Safety Partnership Action Plan | Kent Community Safety Partnership (CSP) |
| Medway CSP Action Plan | Medway CSP |
| Violence Reduction Unit | OPCC |
| Medway Youth Justice Plan | Medway Council – Youth Justice |

Reduce level of substance misuse

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Kent CSP Action Plan | KENT CSP |
| Medway CSP Action Plan | Medway CSP |
| Kent Drug and Alcohol Strategy | Kent Substance Misuse Alliance |
| VCSE programmes | VCSE organisations |
| Review of people reporting difficulties accessing mental health services due to drug and/or alcohol use | Healthwatch (Kent and Medway) and Kent and Medway Safeguarding Adults Board |

Reduce level of alcohol misuse

| Strategies / plans in place to deliver | Led by / responsible |
|--|--------------------------------|
| Inequalities Prevention and Population Health Committee (IPPH) Prevention Subcommittee Action Plan | NHS K&M |
| Kent Drug and Alcohol Strategy | Kent Substance Misuse Alliance |
| VCSE programmes | VCSE organisations |
| Trading Standards | KCC |

Shared outcome 2: Tackle the wider determinants to prevent ill health

[Acronyms](#)

Priority: Address the social determinants that enable healthy lives including social networks and safety

Social Prescribing

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Social Prescribing Strategy | NHS Kent and Medway (IPPH Inequalities Subcommittee) KCC Adult Social Care |
| Medway and Swale Social Prescribing 5 Year Plan | Medway and Swale Social Prescribing Strategy Group |
| Community Wardens | KCC – GET |
| Green Social Prescribing Network | KCC – GET |
| Kent Cultural Strategy | KCC – GET |
| Libraries | KCC – GET |
| Positive Wellbeing | KCC – GET |
| Cultural Strategy | Medway Council – Culture and Communities |

Voluntary and community capacity

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| Build Resilient Communities | KCC – SPRCA, Public Health, ASC and GET, Districts, KALC and VCSE |
| Micro-providers | KCC – Strategy, Policy, Relationships and Corporate Assurance (SPRCA) |
| Framing Kent's Future- Priority 2 Infrastructure for Communities | KCC |
| Community Wardens | KCC – GET |
| Heritage Conservation & Countryside Partnerships Volunteer programmes | KCC – GET |
| Voluntary sector alliances | VCSE alliances in each Health and Care Partnership |
| Volunteering Opportunities | Voluntary sector including Medway Voluntary Action (Medway Council commissions support capacity), VCSE Alliances, KCC – SPRCA, Kent Coast Volunteering, Kent Volunteer Partnership |
| Local Flood Risk Management Strategy-Volunteer Flood Wardens | KCC – GET |
| Community transport grant scheme | KCC – GET |
| KALC and role parishes | KALC |

Shared outcome 2: Tackle the wider determinants to prevent ill health

Priority: Address the social determinants that enable healthy lives including social networks and safety

Active Travel

| Strategies / plans in place to deliver | Led by / responsible |
|---|----------------------------------|
| Framing Kent's Future- Priority 2 Infrastructure for Communities | KCC – GET |
| Medway Active Travel Group for strategies/plans in place | Medway Council Transport Service |
| Local Transport Plan (LTP 5) (Kent Cycling & Walking Infrastructure Plan) | KCC – GET |
| NHS Kent and Medway Green Plan | NHS Kent and Medway |
| Vision Zero Road Safety Strategy | KCC – GET |
| Rights of Way Improvement Plan | KCC – GET |
| Kent and Medway Energy and Low Emissions Strategy | KCC – GET |
| Kent Environment Plan (2024 onwards) | KCC – GET |
| Kent Design Guide, Neighbourhood Plans & Strategic Planning Applications | KCC – GET |

Best use of music, arts and leisure

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| Framing Kent's Future- Priority 2 Infrastructure for Kent Cultural Strategy | KCC – GET |
| Heritage Strategy | KCC – GET |
| Creative Estuary | Essex/Kent Partnership, Arts Council England |
| District led initiatives | District Councils |
| Cultural Planning Toolkit | Creative Estuary and Kent County Council |
| Priority Places | Arts Council |
| Creative Health and Wellbeing Working Network | KCC - GET |

Shared outcome 2: Tackle the wider determinants to prevent ill health

[Acronyms](#)

Priority: Address the environmental determinants that enable healthy lives including housing, transport and the natural and built environment
Improve quality of life across built and natural infrastructures (including transport)

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| NHS K&M Estates & Infrastructure Interim Strategy | NHS Kent and Medway |
| Kent Design Guide | KCC – GET |
| Neighbourhood Plans | District Council Planning teams |
| Local Plans – Medway & districts | District Council Planning teams |
| Local Regeneration Plans | District Council Planning teams |
| Framing Kent’s Future-Priority 3 Environmental Step Change | KCC – GET |
| Kent County Council Local Transport Plan | KCC – GET |
| Local Flood Risk Management Strategy | KCC – GET and District Council Planning teams |
| Kent Waste Disposal Strategy | KCC – GET |
| Medway Housing Strategy | Medway Council – Culture and Community |
| Medway 2040 | Medway Council - Regeneration |

Tackle climate change including sustainable ways of living and working and air quality

| Strategies / plans in place to deliver | Led by / responsible |
|---|----------------------|
| NHS K&M Green Plan | NHS Kent and Medway |
| K&M energy and low emissions strategy | KCC – GET |
| Medway Climate Change Action Plan | Medway Council |
| Framing Kent’s Future-Priority 3 Environmental Step Change | KCC – GET |
| Local Transport Plan 5 | KCC – GET |
| Local Flood Risk Management Strategy | KCC – GET |
| Kent Waste Disposal Strategy | KCC – GET |
| The Kent and Medway Energy and Low Emissions Strategy priority 5-existing buildings | KCC- GET |

Shared outcome 2: Tackle the wider determinants to prevent ill health

Priority: Address the environmental determinants that enable healthy lives including housing, transport and the natural and built environment

Accessible homes

| Strategies / plans in place to deliver | Led by / responsible |
|--|--|
| NHS K&M Estates & Infrastructure Interim Strategy | NHS Kent and Medway |
| Kent and Medway Housing Strategy “A Place People Want to call Home” | Kent Housing Group |
| Better Homes – Kent County Council | KCC |
| Developer Contributions Guide | KCC – GET |
| Kent Design Guide | KCC – GET |
| Infrastructure Mapping Platform | KCC – GET |
| Local Authority Housing Strategies | Local Housing Authorities |
| Medway Housing Strategy | Medway Council – Culture and Community |
| Medway and KCC Accommodation Strategies | KCC GET and Medway Council |
| Identify needs for accessible homes including older people and those with disabilities | KCC and Medway Council |
| Ensure health professionals and others aware of disabled facilities grants | Kent Housing Group and Local Housing Authorities |

Shared outcome 2: Tackle the wider determinants to prevent ill health

Priority: Address inequalities

Ensure access to services people need

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| NHS Operational Plan | NHS K&M and provider trusts |
| Health and Wellbeing Plans | County, District, Borough & Medway councils |
| Locality Operating Model in ASC | KCC Adult Social Care |
| Framing Kent's Future- Priority 4 New Models of Care and Support | KCC Adult Social Care |
| Mental Health Together Plus programme | MHLDA Provider Collaborative |
| Adult Social Care Strategy | KCC Adult Social Care Medway Council Adult Social Care |
| Community Wardens | KCC – GET |
| Local Transport Plan 5 | KCC – GET |
| Libraries | KCC – GET |
| Developer Contributions Guide | KCC – GET |
| Medway Culture Strategy | Medway Council – Culture and Community |
| Children's Sufficiency Strategy and Commissioning Strategies | Medway Council – Children's Social Care and Public Health |
| Healthwatch work programme - Older people and the impact of the wider determinants of health on their wellbeing. Also projects focused on social isolation in under 25s, the armed forces and veterans and digital barriers to healthcare access. | Healthwatch Kent |
| Home Improvement Agencies, handyman schemes and advice to occupiers and landlords around Housing Health and Safety Rating and remediation | KCC and Medway Council |

Shared outcome 2: Tackle the wider determinants to prevent ill health

Priority: Address inequalities

Maximise independence of those with mental health issues, learning difficulties and neurodiversity

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| MHLDA Provider Collaborative Work Plan | MHLDA Provider Collaborative |
| Health Checks | NHS Kent and Medway Medway Council Public Health |
| Local Transformation Plan for Children, Young People, and Young Adults' Emotional Wellbeing and Mental Health | NHS Kent and Medway, Kent and Medway NHS and Social Care Partnership Trust Board |
| Mental Health Together programme | MHLDA Provider Collaborative |
| Learning Disability and Autism work plan | Learning Disability and Autism Delivery Partnership |
| Libraries | KCC – GET |
| Move Together – Active Kent and Medway Strategy | KCC Public Health and Medway Public Health Teams |

Improve employment rates in people with mental health issues

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Work and Health Strategy (to be developed) | KMEP and ICP |
| Individual Placement and Support service | MHLDA Provider Collaborative |
| Live Well Kent and Medway | KCC and Medway Council (delivered by Shaw Trust and Porchlight) |
| Employment Advisors in NHS Talking Therapies | NHS Kent and Medway |

Improve employment rates in people with Learning difficulties

| Strategies / plans in place to deliver | Led by / responsible |
|--|--|
| Kent and Medway LDA Strategy | Mental Health, Learning Disability and Autism Provider Collaborative |

Shared outcome 3: Supporting happy and healthy living

Help people to manage their own health and wellbeing and be proactive partners in their care so they can live happy, independent and fulfilling lives; adding years to life and life to years.

Priorities to deliver this outcome: Together we will...

Indicators for this outcome include:

What we heard:

- Improve the transition between services – communication, user experience, timeliness
- Engage with communities to tailor communication and support for each community
- Joined up services to support people who are at risk including survivors of domestic abuse and people who are homeless
- Support veterans
- Focus on adult safeguarding

Support people to adopt positive mental and physical health behaviours

We will deliver evidenced based support to individuals at an appropriate scale to enable them to choose healthy weight, healthy diet choices, physical activity, good sexual health, and minimise alcohol and substance misuse and tobacco use to prevent ill health. We will work with communities to develop community led approaches and local active and sustainable travel to support this. We will increase the use of 'making every contact count' and social prescribing to signpost and offer bespoke support where needed to help tackle inequalities using a proportionate universal approach. Additionally, by addressing socioeconomic determinants and aiding mental wellbeing we will help people adopt healthy lifestyles. We will improve health through a system wide approach to crime reduction with victim and offender support; tackling drugs, domestic abuse, exploitation and harm and violence against women and girls.

Deliver personalised care and support centred on individuals providing them with choice and control

We will use data to identify those most at risk and ensure all care is focussed on the individual with seamless transition between services, good communication, timely care and understanding of user needs and experience so they remain in control of their health and wellbeing. People living with dementia will be supported to live as well and as independently as possible with high quality, compassionate care from diagnosis through to end of life. We will improve the support we offer for women's health issues such as menopause. We will develop joined up holistic support for at risk groups including survivors of domestic abuse, people who are homeless, who misuse substances, who have mental health issues, who are veterans or who have offended.

Support people to live and age well, be resilient and independent

We will promote people's wellbeing to prevent, reduce or delay the need for care, focussing on the strengths of people, their families, their carers and their communities, enabling people to live independently and safely within their local community including by using technology. We will ensure accessible joined up multi agency working between services across health, social care, housing, criminal justice, the voluntary sector and others. With clear pathways and ongoing support for those with complex needs and overcoming barriers to data sharing. We will ensure people receive the care they need to preserve their dignity and wellbeing, to keep them independent for as long as possible and to be comfortable, dying in a place of their choosing. Further we will as a system work to ensure people, especially those who are most at risk are safe in their homes and communities.

By 2028, the % of adults in Kent and Medway who are physically inactive will have fallen from 22.3% to 20%.

By 2028, the % of adults in Kent and Medway who are overweight or obese will have fallen from 64.1% to 62%.

By 2028, hospital admissions in Kent and Medway due to alcohol will have fallen from 418.7 to 395 per 100,000.

By 2028, the rate of emergency admissions for those who are frail will be similar to 2024, despite significant population growth.

By 2028, diabetes complications such as stroke, heart attacks, amputations, etc., will be below the rate for 2024.

By 2028, we will increase the proportion of people who receive long-term support who live in their home or with family.

I lost weight with peer support from a local group I learnt about when I visited the hospital for something else

I have care and support that enables me to live as I want to

Shared Outcome 3: Shared Delivery Examples

| Tackling Tobacco and Smoking | Healthy Weight | Dynamic Support Arrangements | Prevention of suicide and self-harm | Frailty and Ageing Well |
|--|---|---|--|--|
| <p>We have a comprehensive action plan embracing both short and long-term initiatives to combat smoking prevalence. These actions involve collaborative efforts with partners to increase referrals from demographic groups with high smoking rates, including routine and manual workers and specific ethnicities by 2025. In addition, there is an aim to increase GP referrals by 10% while establishing clear communication channels for schools, parents/carers, and young individuals. Targeted campaigns addressing vaping and its ramifications on youth will be launched, alongside the implementation of measurable metrics such as reach, impressions, and conversions to evaluate the efficacy of these actions. Alongside these actions the Tobacco Dependency Treatment Services Programme will continue to be implemented focusing on service and data quality.</p> | <p>Whole Systems Approach to Obesity programmes are operational across Kent and Medway. A Whole Systems Approach to Obesity Coordinator is assigned to each of the Health and Care Partnership geographical footprints to support implementation of the whole systems approach tailored to Place. A range of activities is underway in each Place related to food and healthy eating, infant feeding and physical activity.</p> | <p>The Kent and Medway Dynamic Support Arrangements are for children and young people with learning disabilities and/or autism who exhibit behaviours of distress and challenge that leave them at risk of current placement breakdown, admission to specialist hospital and detention or prosecution.</p> <p>Arrangements so far for Tier 4 hospitalisation and length of stay has been dramatic, with there now being only one or two young people occupying Tier 4 beds for a few months, compared to 2020 where over 20 young people were typically in Tier 4 beds at any given time, sometimes for many years.</p> | <p>There is a Kent and Medway suicide and self-harm prevention strategy 2021-2025. Kent and Medway ICS is an official signatory to national Prevention Concordat for Better Mental Health.</p> <p>The Kent and Medway Suicide prevention team (3x team members based in KCC Public Health) work with the Kent and Medway Suicide Prevention Strategic Oversight Board who oversee the programme, set direction and make financial decisions. There is also 3x quarterly Network meetings (Adults, CYP and Better Mental Health).</p> | <p>Frailty and supporting individuals to age well is a focus for each of the Health and Care Partnerships.</p> <p>Ageing and dying well is a key priority for Dartford, Gravesham and Swanley HCP working closely all local system partners to develop local pathways and service improvements to strengthen the support offered to individuals as they age.</p> <p>Medway & Swale HCP are focusing on community frailty.</p> <p>West Kent HCP are focusing on frailty and complex care.</p> <p>Healthwatch Kent are holding care home manager interviews to understand training needs and service interactions.</p> |
| <p>Increase GP referrals by 10% Launch of targeted campaigns e.g. vaping March 2025</p> | <p>Deliver Whole Systems Approach to Obesity programmes March 2025</p> | <p>Begin to work with the Criminal Justice System 2024/25</p> | <p>Deliver Kent and Medway suicide and self-harm prevention plan March 2025</p> | <p>Deliver HCP led frailty and ageing well programmes March 2025</p> |

Shared outcome 3: Supporting happy and healthy living

Priority: Support people to adopt positive mental and physical health behaviours

Evidenced based support to help people choose healthy lifestyles including through bespoke support

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Health and Wellbeing Plans | District, Borough & Medway councils |
| Medway Joint Local Health and Wellbeing Strategy (JLHWS) | Medway Public Health Team |
| IPPH Prevention Subcommittee Action Plan | NHS K&M |
| Drug and Alcohol Strategy | Kent Substance Misuse Alliance |
| Social Prescribing Strategy | NHS Kent and Medway (IPPH Inequalities Subcommittee) Kent County Council (KCC) Adult Social Care |
| Population Health Management delivery plan | NHS K&M |
| NHS Long Term Plan (LTP) Tobacco Dependence Treatment Service Programme | NHS K&M, Public Health teams |
| Stop smoking services | NHS K&M, Public Health teams |
| A Better Medway | Medway Healthy Weight Network, Medway Physical Activity Alliance, Medway Infant Feeding Strategy Group and Medway Food Partnership |
| Kent Association of Local Councils (KALC) Physical Activity initiatives | KALC |
| KALC weight loss initiatives | KALC |
| Move Together – Active Kent and Medway Strategy | Kent County Council (KCC) Public Health and Medway Public Health Teams |
| Trading Standards Activity | KCC– Growth, Environment and Transport (GET) |
| Explore Kent | KCC – GET |
| Public Rights of Way | KCC – GET |
| Country Parks & Countryside Partnerships | KCC – GET |
| Safer Active Journeys (part of Road Safety & Active Travel) | KCC – GET |

Shared outcome 3: Supporting happy and healthy living

Priority: Support people to adopt positive mental and physical health behaviours

Increase use of Making Every Contact count

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Making Every Contact Count programme | Kent Public Health Team, Medway public Health Team NHS Providers and NHS Kent and Medway |
| Libraries, Positive Wellbeing, Community Wardens | KCC – GET |
| Housing Associations, District Housing officers | Kent Housing Group |

Increase physical activity, strength and balance in older people

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| NHS K&M Ageing Well Strategy | NHS Kent and Medway |
| One You Kent | KCC Public Health Team |
| A Better Medway | Medway Public Health Team |
| Move Together – Active Kent and Medway Strategy | KCC Public Health and Medway Public Health Teams |
| Physical activity and universal wellbeing initiatives | VCSE organisations, for example Age UK |
| KALC Physical Activity initiatives | KALC |

Victim and offender support. Tackle domestic abuse, exploitation and violence against women and girls

| Strategies / plans in place to deliver | Led by / responsible |
|--|--|
| Kent CSP Action Plan | Kent Community Safety Partnership (CSP) District CSPs, Office of Police and Crime Commissioner (OPCC) |
| Medway CSP Action Plan | Medway Community Safety Partnership |
| K&M Domestic Abuse Strategy | Domestic Abuse Partnership Board |
| Police and Crime Safety Strategy and Outcomes | OPCC Kent Police |
| Tackling Violence Against Women and Girls Strategy | Kent Police |
| Domestic Abuse Strategy | Medway Safeguarding Children Partnerships (MSCP) |

Shared outcome 3: Supporting happy and healthy living

Priority: Deliver personalised care and support centred on individuals providing them with choice and control

Work together to ensure all care is focused on the individual including sharing data, seamless transition between services, good communication, understanding user needs

| Strategies / plans in place to deliver | Led by / responsible |
|--|----------------------------------|
| Kent County Council Adult Social Care Commissioning Strategy and Delivery Plan | KCC Adult Social Care |
| KMCR | All Health and Care Partnerships |
| Data sharing agreements | All Health and Care Partnerships |
| Integrated Neighbourhood teams | All Health and Care Partnerships |
| Personal Health Budgets (PHB's) | All Health and Care Partnerships |
| Engagement | All Health and Care Partnerships |
| Medway Adult Social Care strategy and Peoples Strategy | Medway Adult Social Care |
| Community Wardens | KCC – GET |
| Healthwatch Kent work programme – Accessible Information standard and reviewing if people felt their communication needs had been met in hospital outpatient departments | Healthwatch Kent |

People with dementia are supported to live as well and independently as possible

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Dementia Friendly Communities | Mental Health, Learning Disability and Autism (MHLDA) Provider Collaborative KCC Adult Social Care |
| Local Dementia Café Work | MHLDA Provider Collaborative KCC Adult Social Care |
| Community Wardens, Libraries | KCC – GET |
| Local dementia charities to support individuals, families/carers | VCSE sector |
| KALC Dementia and Carer Initiatives | KALC |

Shared outcome 3: Supporting happy and healthy living

Priority: Deliver personalised care and support centred on individuals providing them with choice and control

Improve support for Women's health issues

| Strategies / plans in place to deliver | Led by / responsible |
|--|----------------------|
| Response to national strategy – consultation phase in progress | NHS Kent and Medway |
| Healthwatch Kent work programme – women's health engagement | Healthwatch Kent |

Holistic support for at risk groups (Homeless/ Gypsy, Roma, Traveller communities/ veterans/offenders/substance misuse etc.)

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Military Covenants (Medway health fair) | Medway Council and KCC |
| Gypsy, Roma and Traveller Service | Gypsy, Roma and Traveller Service – KCC GET |
| Kent and Medway Gypsy, Roma and Travelers, Community of Practice (COP) Group | KCC |
| Medway Youth Justice Plan | Medway Youth Justice Partnership Board |

Adult safeguarding

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Kent and Medway Safeguarding Adults Board Strategic Plan 2022-25 | Safeguarding Adults Board |
| NHS Kent and Medway Safeguarding Strategy | KCC Adult Social Care Medway Council Adult Social Care |
| District Safeguarding Policies | KENT Designated Safeguarding Lead (DSL) Group |

Shared outcome 3: Supporting happy and healthy living

Priority: Support people to live and age well, be resilient and independent

Promote wellbeing to prevent, reduce or delay need for care

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Kent County Council Adult Social Care Strategy and Actions | KCC Adult Social Care Kent Public Health |
| IPPH Prevention Subcommittee action plans | NHS K&M |
| Social Prescribing and Community Navigation Strategy | NHS Kent and Medway (IPPH Committee Inequalities Subcommittee), KCC – ASC, SPRCA and GET |
| Medway Adult Social Care strategy and Peoples Strategy | Medway Council Adult Social Care |
| Move Together - Active Kent and Medway Strategy | KCC Public Health and Medway Public Health Teams |
| Kent Cultural Strategy | KCC – GET |
| Positive Wellbeing | KCC – GET |
| Community Wardens | KCC – GET |
| Libraries – Reading well collections | KCC – GET |
| Explore Kent | KCC – GET |
| Country Parks & Countryside Partnerships | KCC – GET |
| Safer Active Journeys | KCC – GET |
| Kent Karrier | KCC – GET |
| Support offers from local charities | VCSE sector |
| Medway Culture Strategy | Medway Council – Culture and Community |
| Housing based initiatives to ensure safe, secure, healthy and adapted homes | Kent Housing Group |

Shared outcome 3: Supporting happy and healthy living

Priority: Support people to live and age well, be resilient and independent

Enable people to live safely in their community including through technology

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Locality based Commissioning Model | NHS K&M, providers and Health and Care Partnerships, Kent Adult Social Care |
| Kent County Council Adult Social Care Commissioning Strategy and Delivery Plan | KCC Adult Social Care |
| Dementia Friendly communities | KCC Adult Social Care and SPRCA KALC, VCSE alliances and Districts |
| Technology enabled care | KCC Adult Social Care |
| Digital pathways and digital front door | KCC Adult Social Care |
| Ageing Well Strategy | NHS K&M and providers |
| Health and Wellbeing Plans | District, Borough & Medway councils |
| Medway Adult Social Care strategy and Peoples Strategy | Medway Council Adult Social Care |
| Supporting Better Broadband | KCC – GET |
| Community Wardens | KCC – GET |
| Libraries | KCC – GET |
| Developer Contributions Guide | KCC – GET |
| KALC dementia initiative | KALC |

Ageing and dying well with reduced deaths in hospital and death in a place of choice

| Strategies / plans in place to deliver | Led by / responsible |
|--|-----------------------|
| Ageing Well Strategy | NHS K&M and providers |

Shared outcome 3: Supporting happy and healthy living

Priority: Support people to live and age well, be resilient and independent

Multi agency working with clear pathways and ongoing support for those with complex needs

| Strategies / plans in place to deliver | Led by / responsible |
|--|--|
| NHS Operational Plan | NHS K&M and provider trusts |
| Health and Wellbeing Plans | District, Borough & Medway councils |
| Integrated Commissioning | KCC Adult Social Care |
| Care and Support Pathways | KCC Adult Social Care |
| Kent and Medway Care Record (KMCR) | NHS K&M and providers |
| K&M Domestic Abuse Strategy | Multi agency including KCC, Medway Council and NHS |
| Medway Adult Social Care strategy and Peoples Strategy | Medway Council Adult Social Care |
| Frailty pathway redesign | NHS K&M and HCPs |

Reduce self-harm and suicide

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| K&M Suicide Prevention Strategy | Kent and Medway Suicide Prevention Strategic Oversight Board |
| Mental Wellbeing Concordat | NHS Kent and Medway, Kent County Council and Medway Council |
| Mental Health Together | Mental Health, Learning Disability and Autism Provider Collaborative |
| Kent and Medway suicide and self-harm prevention strategy 2021-2025 | Kent and Medway Suicide Prevention Strategic Oversight Board |
| Suicide Prevention Strategy | KCC |

Deliver prevention with a focus on multi-morbidity in line with major conditions strategy/CMO report

| Strategies / plans in place to deliver | Led by / responsible |
|--|-----------------------------|
| NHS Operational Plan 2024/25 | NHS K&M and provider trusts |

Shared outcome 4: Empower people to best manage their health conditions

Support people with multiple health conditions to be part of a team with health and social care professionals working compassionately to improve their health and wellbeing.

What we heard:

- Increase involvement of patients and carers in care plans
- Improve access to and consistency of primary care including general practice, dentistry and pharmacy provision.
- Increase offer of support and provide flexibility for carers

“We are not always superhuman. Someone to support us to support our child.”

Priorities to deliver this outcome: Together we will...

Empower those with multiple or long-term conditions through multidisciplinary teams

We will support individuals to holistically understand and manage their conditions (such as cancer, cardiovascular disease, diabetes, dementia, respiratory disease and frailty) by using Complex Care Teams and Multi-Disciplinary Teams. This will help reduce or delay escalation of their needs. We will use a model of shared information and decision-making to empower individuals to only have to tell their story once and make informed choices about how, when and where they receive care, which will support individuals to achieve their goals. We will utilise developing technologies including telecare and telehealth, direct payments, personal health budgets, care packages and social prescribing where appropriate to support people to achieve their goals and live the life they want in a place called home.

Provide high quality primary care

We will work towards a system focused on prevention, health protection and early intervention to reduce the need for hospitalisation through ensuring people can readily access the services they need to manage their health. We will ensure all pharmacies are supporting people with health care, self-care, signposting and healthy living advice. We will improve and increase access to dentist and eye health services. We want general practice to offer a consistently high-quality service to everyone in Kent and Medway. This means improving timely access to a health care professional with the skills and expertise to provide the right support and guidance, this could be a physiotherapist, doctor, nurse, podiatrist or other primary care health and care professional. We will work across the system to support the provision of primary care, responding to the needs of new, and growing, communities and making the most of community assets.

Support carers

We will value the important role of informal carers, involve them in all decisions, care planning and provide support for their needs. We will make a difference every day by supporting and empowering carers with ready access to support and advice. We recognise the potential impact of their responsibilities on young carers and commit to reducing these challenges.

Indicators for this outcome include:

By 2028, the people describing their overall experience of making a GP appointment as good will have increased from 49% to at least 71%.

There will be an increasing number of patients with high or very high needs being supported through integrated teams by 2028.

By 2027 we will have implemented our organisational carers strategies

By 2028, the proportion of carers who report that they are very satisfied with social services will have improved from 32.3% to at least 45%.

I can access the healthcare I need and know what options are available to me

I know what my rights as a carer are and can get timely information that is accurate, carer training and education and advice on all the possible options for my health and wellbeing, support needs and finance and housing

Shared Outcome 4: Shared Delivery Examples

| Multidisciplinary Teams | Technology Enhanced Lives | Social Prescribing and Community Navigation | Carer Support Services | Primary Care and Long-Term Condition Management |
|--|--|---|---|--|
| <p>The Fuller Stocktake sets out a detailed vision for Integrated Neighbourhood Teams which should include NHS community services, VCSE partners, urgent care providers and primary care services.</p> <p>In order to implement this approach we aim to work at multiple levels: individual practices, Primary Care Networks and across Health and Care Partnerships. The transition to a new care model and approach will take time to fully implement and deliver the desired outcomes.</p> <p>However, it will enable integrated urgent care and care for complex needs or long terms conditions. It is key to improving population health and wellbeing outcomes and mitigating health inequalities and funding has been secured to link the development of these teams across Health and Care Partnerships.</p> | <p>In November 2023, Kent County Council introduced its Technology Enhanced Lives service – a single, countywide service which supports hospital patients to be discharged to their own home through access to and use of a range of assistive and digital technology. Moving forward, Kent County Council will work with partners across the system to maximise integration opportunities.</p> <p>With funding provided by NHS England, we are also piloting a programme to drive digital across the adult social sector to improve quality, safety and personalisation of care. Working with five facilitators across Kent, we will offer the right package of care that supports people in a more flexible and efficient way.</p> | <p>Social Prescribing and Community Navigation supports people to connect with community groups and services in their local area to support mental and physical health. This helps to improve outcomes, supporting people to stay well, independent and resilient and reduce social isolation.</p> <p>Following a rapid increase in the profile and investment in these areas in recent years we developed the Kent and Medway Social Prescribing and Community Navigation Strategy which identifies a number of actions to improve the provision and quality of these services. This includes addressing inequality in access, training and competencies for staff making the referrals, and improving evaluation, with the ambition to deliver over 31,000 referrals per year by 2023/24. Implementation will be led by the four HCPs, working with the established VCSE alliances, to ensure there is a local focus.</p> | <p>The Carers’ Short Breaks Service is currently delivered by Crossroads Care Kent and is jointly funded by Kent County Council and the NHS Kent & Medway Integrated Care Board. The service provides replacement / respite care for carers so that they can take a break from their caring responsibilities.</p> <p>This service sits alongside several other commissioned services with the purpose of supporting carers, preventing people’s needs from escalating and promoting people’s well-being and independence. To improve integration across these services, work is already underway to align the Carers’ Short Break Service with the Community Navigation Service as part of a revised model. It is expected that the new model will be launched next year.</p> | <p>DGS HCP is prioritising primary and community care transformation, with Integrated Neighbourhood Teams a key component of this for 2024/25.</p> <p>Medway & Swale HCP is prioritising end to end pathway improvement across ambulatory care services as well as self-harm, frailty, INTs, cancer and dentistry.</p> <p>WKHCP is prioritising Long-Term Condition management over the next five years</p> <p>Each of the HCPs will support the implementation of the Primary Care Strategy</p> |
| <p>Integrated Neighbourhood Teams programme board and plan established September 2024</p> | <p>Complete pilot programme – digital in adult social care March 2025</p> | <p>Implementation of the Social Prescribing and Community Navigation Strategy March 2025</p> | <p>Launch new model of Carers’ Short Break Service aligned with Community Navigation Service April 2025</p> | <p>Delivery of HCP programmes and Primary Care Strategy March 2025</p> |

Shared outcome 4: Empower people to best manage their health conditions

Priority: Empower those with multiple or long-term conditions through multidisciplinary teams

Use Complex Care Teams and Multi- Disciplinary Teams to support people to manage their conditions

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Integrated commissioning | Kent County Council (KCC) Adult Social Care |
| Locality Based commissioning model | KCC Adult Social Care, NHS Kent and Medway |
| Integrated Neighbourhood Teams (INT) | NHS Kent and Medway and HCPs |
| NHS Operational Plan 2024/25 – including secondary prevention | NHS K&M and provider trusts |
| Ensure links social landlords and housing providers and mental health support services | Kent Housing Group |

Shared decision making to support individuals to achieve their goals

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Self-Directed Support | KCC Adult Social Care |
| Community Wardens | KCC – Growth, Environment and Transport (GET) |
| Positive Wellbeing | KCC – GET |

Utilise developing technologies, personal health budgets, direct payments and social prescribing to support people to achieve their goals

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Digital Pathways, Digital front door, Technology Enabled Care | KCC Adult Social Care |
| Libraries | KCC – GET |
| Developer Contributions Guide | KCC – GET |
| Social Prescribing Strategy | NHS Kent and Medway (IPPH Inequalities Subcommittee) KCC Adult Social Care |
| Adult Social Care Strategy | Medway Council – Adult Social Care |
| Healthwatch Kent work programme – review of the digital front door in a primary care network | Healthwatch Kent |

Shared outcome 4: Empower people to best manage their health conditions

Priority: Provide high quality primary care

Access to preventative, early intervention services to prevent admission to hospitals

| Strategies / plans in place to deliver | Led by / responsible |
|--|--|
| Primary Care Strategy | NHS K&M Primary Care Strategic Oversight Group and HCPs |
| Mental Health Together | Mental Health, Learning Disability and Autism Provider Collaborative |
| Long term condition management | HCPs |
| Community Wardens | KCC – GET |
| Positive Wellbeing | KCC – GET |

Ensure pharmacies support people with self-care, healthy living advice etc.

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Primary Care Strategy | NHS K&M Primary Care Strategic Oversight Group and HCPs |

Improve and increase access to dentist and eye health services

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Primary Care Strategy | NHS K&M Primary Care Strategic Oversight Group and HCPs |

Consistent high quality primary care service including access to the right professional

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Primary Care Strategy | NHS K&M Primary Care Strategic Oversight Group and HCPs |

Support the provision of primary care to meet community needs

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Primary Care Strategy | NHS K&M Primary Care Strategic Oversight Group and HCPs |
| DGS HCP priority area | DGS HCP |

Shared outcome 4: Empower people to best manage their health conditions

Priority: Support carers

Support carers, involve them and provide for their

| Strategies / plans in place to deliver | Led by / responsible |
|--|--|
| Triangle of Care action plans | NHS provider organisations |
| Kent Adult Carers' Strategy | KCC Adult Social Care |
| Medway Joint Carers Strategy | Medway Council – Adult Partnership Commissioning |
| Libraries, Community Wardens | KCC – GET |
| Local charities support for carers | VCSE sector |
| Kent Association of Local Councils (KALC) dementia and carer initiatives | KALC |

Focused support for young carers

| Strategies / plans in place to deliver | Led by / responsible |
|--|----------------------------|
| Triangle of Care action plans | NHS provider organisations |
| Local charities support for young carers | VCSE sector |

Shared outcome 5: Improve health and care services

Improve access for all to health and care services, providing services as locally as possible and creating centres of excellence for specialist care where that improves quality, safety and sustainability

What we heard:

- Broaden to incorporate all aspects of health care not just hospital services
- Timely access to all parts of health care particularly primary care services
- Improve communication and transition between all parts of health and care services
- Increase the services offered in the community and by social care

Priorities to deliver this outcome: Together we will...

Improve equity of access to health and care services

We will seek to improve the accessibility of all our services. We will ensure the right care in the right place providing care closer to home and services from a broader range of locations by making better use of our collective buildings and community assets. By taking services to individuals and continuing to offer digital help and advice, we hope to mitigate some of the social and economic reasons (such as travel costs, time off work and time out of education) why individuals do not seek (or attend) health and care services.

Communicate better between our partners especially when individuals are transferring between health and care settings

We will improve flow through the system by utilising end to end care and support planning, minimising hand offs and ensuring safe discharges by better supporting individuals leaving acute care settings when transferring to another location, sure that all partners (including individuals, carers and families) are aware of the care plan and by working as a team to minimise delays. We aim to ensure people are discharged to their home as a priority and linked to timely appropriate reablement, recovery and rehab services. Our ambition is that system partners jointly plan, commission, and deliver discharge services that maintain flow and are affordable pooling resources where appropriate and responding to seasonal pressures.

Tackle mental health issues with the same energy and priority as physical illness

We will support people of all ages with their emotional and mental wellbeing. We will improve how we support those with mental health conditions with their overall health and wellbeing, providing the integrated support they need from the right partner (such as housing, financial, education, employment, clinical care and police) when they need it and in a way that is right for them. We will work with VCSE partners to creatively support those at risk of suicide.

Provide high-quality care

We will continually seek to provide high quality of care by working in a more integrated way; expanding the skills and training of our staff; reducing the time waiting to be seen and treated and supported; streamlining our ways of working; improving the outcomes achieved; ensuring advocacy and enriching the overall experience of individuals, their carers and their families.

Indicators for this outcome include:

By 2028, waits for diagnostics will meet national ambitions.

By 2028/29, the percentage of people aged 65 and over who were still at home 91 days after discharge from hospital into reablement services will have increased in Kent to at least 85% and in Medway to be in line with the national average.

By 2025 we will meet national expectations for patients with length of stay of 21+ days who no longer meet with criteria to reside.

Inappropriate out of area mental health placements will be at or close to zero.

My family/carers and I knew when I was being discharged from hospital and what my care plan was

My appointment was by video call but there was an option to attend in person if I needed to

Shared Outcome 5: Shared Delivery Examples

| Hospital Discharge Pathways | Community Equipment Service | Better Care Fund | Mental Health Support | Transforming flow and discharge; transforming community services |
|--|---|--|--|---|
| <p>Partners continue to work across the System to find ways to manage demand on our services. For example, two new wards – offering up to 30 rehabilitation and reablement beds – were opened in East Kent last winter, thanks to a partnership between Kent Community Health NHS Foundation Trust (KCHFT), Kent County Council and East Kent Hospitals University NHS Foundation Trust, as part of East Kent’s provider collaborative.</p> <p>The first 15-bedded ward opened in December at Westbrook House in Margate and was followed by an additional 15 beds in West View in Tenterden in January. The beds will be open until April while a more integrated model of rehabilitation, recovery and reablement care is implemented.</p> | <p>Kent County Council, in collaboration with the NHS Kent and Medway Integrated Care Board, has recently commissioned a revised Community Equipment Service. The contract was awarded in October 2023 and will become operational in April. The contract covers the purchase, delivery and repairs/servicing of equipment into people’s homes. The service enables people to live more independently for longer and supports timely discharge from hospital.</p> | <p>Money from the Better Care Fund (BCF) has been used to develop ‘Transfer of Care Hubs’ across the county to improve joint working across the acute, community health, social care and voluntary and community sectors in relation to discharge planning. Weekend multi-disciplinary discharge teams have also been created to help ease flow through the system. The BCF has also been used to set up a ‘Physio / Occupational Therapy (OT) in-reach and Drop and Stop Service’. This service has helped speed up discharges and has enabled an increased number of Physio / OT assessments to be undertaken in the patient’s own home.</p> | <p>Live Well Kent will continue to be jointly funded by Kent County Council, the Kent & Medway Integrated Care Board and Medway Council. The service forms a key part of an integrated pathway across the voluntary sector and primary care mental health services, providing support for specific conditions such as depression and anxiety, as well as support with financial pressure and relationship stress. There is also a 24-7 telephone and online support service known as the Release the Pressure helpline.</p> <p>The Kent and Medway Suicide Prevention Programme also funds services and projects with the aim of reducing the risk of suicide and self-harm, including free suicide prevention training for anyone living or working in Kent and Medway.</p> | <p>Transforming flow and discharge is an area of focus for each of the HCPs. They are aiming to improve access to the right service at the right time, including urgent and emergency care.</p> <p>Improvements to urgent and emergency care aim to support people to access the right care at the right place (including through Integrated Neighbourhood Teams (INTs)). This work includes same day emergency care, urgent treatment centre use, urgent community response team model, UEC navigation and winter planning.</p> <p>Community services transformation is a shared priority for the HCPs. This also supports flow.</p> |
| <p>Integrated model of rehabilitation, recovery and reablement care developed March 2025</p> | <p>Revised Community Equipment Service launched May 2024</p> | <p>Continue to seek opportunities to develop joint commissioning March 2025</p> | <p>Deliver Live Well Kent programmes March 2025</p> | <p>Deliver Community transformation programme March 2025</p> |

Shared outcome 5: Improve health and care services

Priority: Improve equity of access to health and care services

Improve access to services

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Locality Operating Model | Kent County Council (KCC) Adult Social Care |
| Care and Support pathways | KCC Adult Social Care |
| Community Diagnostic Centres | NHS Kent and Medway |
| Medway Council Adult Social Care strategy and Peoples Strategy | Medway Council Adult Social Care |
| Community Transport Grant | KCC – Growth, Environment and Transport (GET) |
| Developer Contributions Guide | KCC – GET |

Making best use of community assets to provide more local care

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Build Resilient Communities | KCC SPRCA, Adult Social Care, Public Health and GET. Kent Association of Local Councils (KALC), VCSE Alliances |
| Micro-providers | KCC SPRCA |
| Social Prescribing Strategy | NHS Kent and Medway (IPPH Inequalities Subcommittee) Kent County Council (KCC) Adult Social Care |
| Self-directed support | KCC Adult Social Care |
| Medway Council Adult Social Care strategy and Peoples Strategy | Medway Council Adult Social Care |
| Transforming community services programme | NHS Kent and Medway |
| Green Social Prescribing | KCC – GET |
| Libraries | KCC – GET |
| Community Wardens | KCC – GET |
| Developer Contributions Guide | KCC – GET |
| Community Centres | KCC – GET |

Shared outcome 5: Improve health and care services

Priority: Improve equity of access to health and care services

Digital health and advice

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| Digital Pathways | KCC Adult Social Care |
| Digital Front Door | KCC Adult Social Care |
| Medway Council Adult Social Care strategy and Peoples Strategy | Medway Council Adult Social Care |
| Libraries E resources | KCC – GET |
| Healthwatch Kent work programme – review of Electronic Referral Optimisation System (EROS) | Healthwatch Kent |
| Primary Care Strategy | NHS K&M Primary Care Strategic Oversight Group and HCPs |

Increase early cancer diagnosis in line with Core 20plus5

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| Inequalities, Prevention and Population Health Committee (IPPH) Prevention Subcommittee action plan | NHS K&M |
| VCSE led cancer prevention programmes | VCSE sector |
| NHS Operational Plan 2024/25 | NHS K&M and provider trusts, Kent and Medway Cancer Alliance |

Identify and address any inequalities in access to elective care

| Strategies / plans in place to deliver | Led by / responsible |
|---|-----------------------------|
| NHS Operational Plan 2024/25 – including improving completeness of ethnicity data recording | NHS K&M and provider trusts |

Shared outcome 5: Improve health and care services

Priority: Communicate better between our partners especially when individuals are transferring between health and care settings

Improve flow through health and care system

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| NHS Operational Plan | NHS K&M and provider trusts, Health & Care Partnerships (HCPs), Provider Collaboratives |
| Joint Commissioning | NHS Kent and Medway, HCPs, KCC and Medway ASC, Public Health and Joint Commissioning Management Groups (JCMG) |
| Urgent and Emergency Care programmes | HCPs |

Well-coordinated discharge and care planning

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| NHS Operational Plan | NHS K&M and provider trusts, HCPs, Provider Collaboratives KCC Adult Social Care |
| Healthwatch Kent – Discharge case study in East Kent | Healthwatch Kent |

Discharge to their home with relevant reablement, recovery and rehab services

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| NHS Operational Plan | NHS K&M and provider trusts, Health & Care Partnerships, Provider Collaboratives KCC Adult Social Care |
| Housing related support to enable discharge and potentially enabling people to remain at home | Kent Housing Group |

System winter planning, making use of collective resource

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| NHS Operational Plan | NHS K&M and provider trusts, Health & Care Partnerships, Provider Collaboratives KCC Adult Social Care |
| Better Care Fund | NHS Kent and Medway, KCC and Medway Council |
| Resilience and preparedness | KCC – GET |

Shared outcome 5: Improve health and care services

Priority: Tackle mental health issues with the same energy and priority as physical illness

Support CYP and adults with emotional health and wellbeing

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| Mental Health Together | Mental Health, Learning Disability and Autism (MHLDA) Provider Collaborative and K&M CYP Programme Board |
| Kent and Medway Local Transformation Plan for Children and Young People | K&M Children and Young People's Programme Board |
| West Kent HCP Adult Mental Health programme | West Kent HCP |

Support those with mental health conditions with their health and wellbeing through integrated support

| Strategies / plans in place to deliver | Led by / responsible |
|---|---|
| Mental Health Together | NHS K&M |
| Mental Health delivery plan | MHLDA Provider Collaborative KCC Public Health Medway Public Health |
| Mental Health Concordat | NHS Kent and Medway, Kent County Council and Medway Council |
| Kent and Medway Local Transformation Plan for Children and Young People | K&M Children and Young People's Programme Board MHLDA Provider Collaborative |
| Mental Health Voice | Healthwatch (Kent and Medway) |

Support those at risk of suicide

| Strategies / plans in place to deliver | Led by / responsible |
|---|--|
| K&M Suicide Prevention Strategy | Kent and Medway multi-agency suicide prevention steering group |
| Kent and Medway Local Transformation Plan for Children and Young People | K&M Children and Young People's Programme Board |

Shared outcome 5: Improve health and care services

Priority: Provide high quality care

Work in a more integrated way

| Strategies / plans in place to deliver | Led by / responsible |
|--|--|
| Locality Based Commissioning Model | Provider Collaboratives, KCC Adult Social Care, HCPs |
| Integrated Commissioning | HCPs, KCC Adult Social Care and JCMG |
| Kent and Medway Care Record | NHS providers |
| Medway Council Adult Social Care strategy and Peoples Strategy | Medway Council Adult Social Care |

Expand skills and training of our staff

| Strategies / plans in place to deliver | Led by / responsible |
|--|----------------------|
| NHS People Strategy | NHS K&M |

Reduce waiting time to be seen and treated

| Strategies / plans in place to deliver | Led by / responsible |
|--|-----------------------------|
| NHS Operational Plan | NHS K&M and provider trusts |
| Establish Community Diagnostic Centres | NHS K&M |

Improve Outcomes and Experience

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| NHS Strategy 2024/25 – 2029/30 | NHS K&M, provider trusts and primary care |
| NHS Operational Plan | NHS K&M and provider trusts |
| Quality improvement plans | NHS K&M and providers |
| Person's Voice Plan | Kent County Council Adult Social Care |

Shared outcome 6: Support and grow our workforce

Make Kent and Medway a great place for our colleagues to live, work and learn

What we heard:

- Improve volunteering opportunities for staff
- Benefits for staff:
 - financial support
 - offers with local businesses
 - health and wellbeing support for example leisure facility membership offers
- Strengthen links and opportunities with education – schools, colleges and universities

Priorities to deliver this outcome: Together we will...

Grow our skills and workforce

We will work as a system to plan and put in place a workforce with the right skills, values and behaviours to keep our services sustainable. We will attract people to live, study and work in Kent and Medway, promoting all that our area has to offer. We will work with education and training providers to develop and promote exciting and diverse career and training opportunities, provide talented and capable leadership and offer flexible and interesting careers to reduce long-term unemployment and support people to return in work.

Build 'one' workforce

We will implement a long-term workforce plan which supports integration across health and care services, enabled by digital technology, flexible working and cross sector workforce mobility. We will work in true partnership with our vital and valued volunteer workforce by seeking their input to shape, improve and deliver services.

Look after our people

We will be a great place to work and learn, with a positive shared culture where people feel things work well and they can make a real difference. We will ensure staff feel valued, supported and listened to. We will support our workforce, including helping them as their employer, to proactively manage their health and wellbeing.

Champion inclusive teams

We will foster an open, fair, positive, inclusive and supportive workplace culture that promotes respect. We will grow and celebrate diversity to be more representative of our communities, empower and develop colleagues from underrepresented groups.

Indicators for this outcome:

Shared workforce indicators will be developed by partners working across the system and are likely to include measures around:

- Vacancies
- Staff wellbeing
- Sickness absence
- VCSE workforce
- Supporting employment in under-represented groups

I feel valued by my team and believe my employer cares about my health and wellbeing

I hadn't realised how many opportunities there were in health and social care, and I've been able to complete further qualifications since joining

Shared Outcome 6: Shared Delivery Examples

| Health and Care Academy | Workforce Sharing Agreement | Financial Wellbeing | Reducing Staff Harassment | Workforce planning |
|---|--|---|--|--|
| <p>We have launched the Health and Care Academy website in February 2024, with a partnership of organisations dedicated to making Kent and Medway a great place to live, learn and work. In 2024/25 we will develop the Academy as a Community Interest Company (CIC), leveraging resources such as the apprenticeship levy and wider funding channels. Additionally, we will create partnerships with colleges to ensure a better transition for students pursuing health and care T-Levels into relevant job opportunities. We are also collaborating closely with schools to create enthusiasm among students for future roles in health and care, as well as broader positions within the system.</p> | <p>We will create a partner Workforce Sharing Agreement that will support working as one in various system initiatives, such as the establishment of Home First Teams in East Kent. Further initiatives are coming that will need a unified 'one workforce' approach, which include the introduction of Family Hubs and Family First in children's services.</p> <p>In promoting professional growth, partners are committed to supporting rotational roles, facilitated by tools like the NHS Digital Staff Passport. We are embracing development sprints, enabling staff to collaboratively enhance their skills and progress in their career development across health and care roles.</p> | <p>We will create a shared space about how our organisations are supporting staff and volunteers. Building on from the Health and Wellbeing Website, we will help colleagues who find themselves under financial strain with the advice and support they need.</p> <p>Partners will help to promote the website and any new material to their staff. We will explore the possibility of a Financial Wellbeing week, giving people the chance to have more open conversations about their money and get expert advice.</p> | <p>Partner organisations will work together to create an environment that reduces the conditions in which staff experience harassment. Using good practice from other systems, we will develop a system wide understanding of the impact on the health and wellbeing of our colleagues and will ensure a collaborative approach to preventing violence and abuse.</p> <p>We will encourage staff to report all incidents, making sure their cases are effectively managed and reviewed with clear support plans in place. Reporting is vital to the understanding of the issues faced by the members of our workforce.</p> | <p>Planning for the workforce for tomorrow is a priority for each of the Health and Care Partnerships over the coming year. Whilst the skills gap may differ across the county, each HCP is facing a workforce challenge.</p> <p>Workforce is one of the foundations of the EKHCP strategy as the HCP with the largest coastline which is evidenced to impact on workforce availability.</p> <p>Each of the HCPs recognise workforce as a key enabler to achieving their priorities.</p> |
| <p>Develop the Health and Care Academy as a Community Interest Company March 2025</p> | <p>Create a partner Workforce Sharing Agreement March 2025</p> | <p>Develop the Health and Wellbeing website offer and promotion to staff March 2025</p> | <p>Use good practice examples to improve the reporting and response to staff harassment March 2025</p> | <p>Deliver HCP workforce plans March 2025</p> |

Shared outcome 6: Support and grow our workforce

Priorities:

Grow our skills and workforce*

Build 'one' workforce

Look after our people

Champion inclusive teams

| Strategies / plans in place to deliver | Led by / responsible |
|--|---|
| KCC People Strategy | KCC Human Resources & Organisation Development (HROD) |
| Medway Council Workforce Strategy | Medway Council Human Resources |
| K&M ICS People Strategy | NHS Kent and Medway People Directorate |
| HCP Specific Plans | HCPs |
| Primary Care Strategy | NHS Kent and Medway |
| NHS Strategy 2024/25 – 2029/30 | NHS K&M, provider trusts and primary care |

*Growing the workforce is not necessarily about more people but about the personal growth and development of our staff.

Enabler: We will drive research, innovation and improvement across the system

We will empower our workforce to use research evidence and develop and test innovative approaches to their work, both to improve services and to develop new knowledge. We will establish better ways to collaborate between all partner organisations and with academia for service improvement, research and innovation. This will include safely sharing data and embracing digital innovation.

| What we have committed to | Ways we may deliver this | Led by |
|---|--|--|
| Empower our workforce to use research evidence | | |
| | Develop Research and Innovation Hubs | Kent Research Innovation and Improvement, KCC |
| | Create new integrated research roles that traverse different sectors | Kent Research Innovation and Improvement, KCC |
| | Develop new Research Innovation & Improvement Unit | Kent Research Innovation and Improvement, KCC |
| | Continuous improvement approach led by our workforce | NHS K&M, ICB Improving Outcomes and Experience Committee |
| | Develop Kent Research Network for Education and Learning (KERNEL) | NHS K&M, ICB Information and Technology Board |
| | Develop an ICB research strategy to guide system partners to focus on research that addresses key needs in Kent and Medway | Kent and Medway ICB |
| | Develop a culture of conducting research and using the results of research to inform policy development and ways of delivering services | NIHR Health Determinants Research Collaboration (HDRC) Medway, Medway Council |
| Establish better ways to collaborate | | |
| | Develop a common operating model for data sharing and linkage for analytics, including research | |
| | Develop a common operating model by Information Governance leads | |
| | Bring research communities together to work in partnerships | Kent and Medway Joint Research & Innovation Collaborative |
| | Continue to build share care records and care plans with the contribution of multi-disciplinary teams and patients | NHS Kent and Medway ICB Digital and Data Board |
| | Electronic Patient Record Optimisation to ensure that all organisations across Kent and Medway ICS have an EPR in line with National Standards | NHS Kent and Medway ICB Digital and Data Board |

Enabler: We will provide system leadership and make the most of our collective resources

We will embed sustainability in everything we do through our green plan by ensuring our strategies and decision-making support social, economic and environmental prosperity now and for future generations. We will make the most of our collective resource including our estate and play our role as ‘anchor institutions’. The principle of subsidiarity will ensure our places and neighbourhoods lead the development and implementation of delivery plans for this strategy (see Chapter 11, Conditions for Successful Delivery for further information).

| What we have committed to | Strategies / plans in place to deliver | Led by |
|--|--|--|
| Environmental sustainability | | |
| Net zero carbon emissions by 2030 | NHS Green Plan KCC Net Zero Action Plan Climate Change Action Plan (Medway Council) | NHS K&M KCC Medway Council Environmental Services |
| Best use of our estate | | |
| Act as anchor institutions by using our assets and resources to benefit our communities e.g. through procurement, employment/training opportunities, how we use our estate, environmental sustainability, retain wealth in the region. | NHS K&M Estates and Infrastructure Interim Strategy Procurement plans (KCC, Medway Council, NHS K&M) NHS Green plan / Climate Change Action Plan (Medway Council) / Net Zero Action Plan (KCC) | NHS K&M Medway Council Kent County Council |
| Make best use of our collective and high-quality estate by adopting a “one public estate” approach to flexibly use our estate and optimise opportunity for co-location of services to drive greater integration | NHS K&M Estates and Infrastructure Interim Strategy Kent County Council Asset Management Strategy | NHS K&M and each of the four HCPs Kent County Council |
| Dispose of estate that is no longer suitable or does not represent value for money | NHS K&M Estates and Infrastructure Interim Strategy, linked to Joint Capital Plan Kent County Council Asset Management Strategy | NHS K&M Kent County Council |
| Develop locality-based, system-wide estates plans through our health and care Partnerships | NHS K&M Estates and Infrastructure Interim Strategy | NHS K&M |

Enabler: We will engage our communities on our strategy and in co-designing services

In developing the Integrated Care Strategy we sought to engage with our residents and as partners and we will continue to do this as we implement plans to meet these aims and improve health and wellbeing.

Involve people from all walks of life and through multiple channels

| What we have committed to | Strategies / plans in place to deliver | Led by |
|--|---|---|
| Continue to listen to the voice of those with lived experience of our services to inform the development of plans and service redesign | ICS Communications and Engagement Group Action Plan | Communications and Engagement Oversight Group |
| Develop 'Have your Say Kent and Medway' | ICS Communications and Engagement Group Action Plan | Communications and Engagement Oversight Group |
| Develop communication approaches, for example a fictional family, to bring the Integrated Care Strategy and Shared Delivery Plan to life demonstrating how delivery will impact the lives of the people of Kent and Medway | ICS Communications and Engagement Group Action Plan | Communications and Engagement Oversight Group |
| Consider developing other communication and engagement approaches such as people panels or insight banks. | ICS Communications and Engagement Group Action Plan | Communications and Engagement Oversight Group |



Conditions for successful delivery

Tackling system health and wellbeing challenges will require improved ways of working.

- Partners will need to recognise their role in tackling the full range of wider determinants of health (WDH) including through commissioning, through action in front line services and as anchor organisations.
- Delivery will require communities and individuals themselves taking action locally.
- The role of partners with a local focus and understanding of WDH including districts, local VCSE and communities is key. Local coproduced commissioning will be key.
- Prevention will be crucial and will need to be delivered at scale balancing universal support with more intense and bespoke support for those with greater needs using a proportionate universalism approach.
- Best use needs to be made of our limited resources seeking low and no cost approaches where possible.
- Local Alliances of partners will lead on defining, monitoring and delivering on the key health and wellbeing issues affecting their local populations.

This section outlines our approach to partnership working and meeting the conditions for successful delivery of our strategy.



Partnership working – Integrated Care Partnership (ICP)

The two upper-tier local authorities (Kent County Council and Medway Council) along with NHS organisations within an Integrated Care System (ICS), collaborate through a formal joint committee known as an Integrated Care Partnership (ICP). This partnership is involved in advancing the ICS's four key aims:

- Improving outcomes in population health and health care
- Tackling inequalities in outcomes, experiences and access
- Enhancing productivity and value for money
- Helping the NHS to support broader and social and economic development

A key function of the ICP is to develop the Integrated Care Strategy with system partners and stakeholders, with the ICP choosing to take a particular emphasis on addressing wider determinants of health and promoting preventive measures.

Once the strategy is established, the ICP assumes a pivotal role in overseeing its delivery and facilitate collaborative partnerships to ensure its successful delivery. Meetings are a place that supports a shared culture of collaborative working, information exchange and shared accountability.

Committee Membership

- Leader of Kent County Council
- Leader of Medway of Council
- Chair of the NHS Kent and Medway ICB
- Two elected executive members from KCC
- Two elected executive members from Medway Council
- ICB non-executive director
- ICB Member, Primary Care Perspective
- Chairs of the four HCPs
- Four Elected District Council representatives from each HCP geographies

[Click here](#) to see full list including non-voting participants.

The Inequalities, Prevention and Population Health Committee (IPPH)

The IPPH was established in accordance with the NHS Kent and Medway Integrated Care Board Constitution. The remit of the Committee is to provide oversight and direction to deliver a shared vision for improving population health, preventing ill health, reducing health inequality, and promoting physical and mental health across Kent and Medway.

The Committee has established three subcommittees that support in discharging its responsibilities. It has been agreed that the IPPH and each subcommittee will now report and assist the ICP in its role in delivering the Integrated Care Strategy.

Partnership working – Health and Care Partnerships

Health and care partnerships facilitate closer collaboration between healthcare providers and local councils, spanning social care, public health, education, planning, housing, environmental health, and leisure services.

HCPs also unite all health provider organisations in a specific area to work as one. While each organisation maintains its budget, they collaborate to allocate resources for the community's benefit. These partnerships tailor services to address local population needs, focusing on areas of high demand to reduce health inequalities and improve life expectancy.

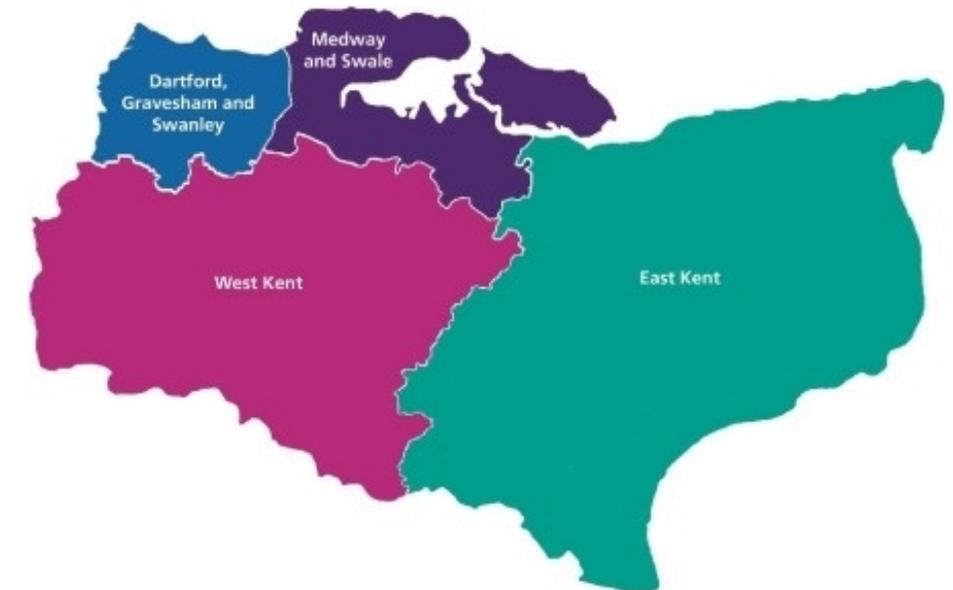
In Kent and Medway, there are four health and care partnerships: Dartford, Gravesham, and Swanley; East Kent; Medway and Swale; and West Kent. They collectively cover populations ranging from 260,000 to 700,000. For more information about your HCP, visit our [website](#).

Each of the HCPs have set their priorities for the next year, many have developed longer term priorities too, set out in a 3-5 year strategy. These HCP priorities support the delivery of the Integrated Care Strategy and have therefore been reflected in the shared outcome delivery activities above. In addition, the ICB agrees priorities with the HCPs on an annual basis, again these reflect the Integrated Care Strategy as well as the NHS Operational Planning guidance and NHS mandate.

HCPs provide progress updates on the delivery of their priorities to their Programme Boards, and therefore the ICB, within their agreed oversight timeframes. Feeding into their Programme Boards are sub-committees that meet regularly, each has a focus on at least one of the HCP priorities.

The HCPs health inequalities and population health management activities are reported to the Inequalities Prevention and Population Health Committee of the Integrated Care Partnership.

Map of the Health and Care Partnerships and Primary Care Networks in Kent and Medway



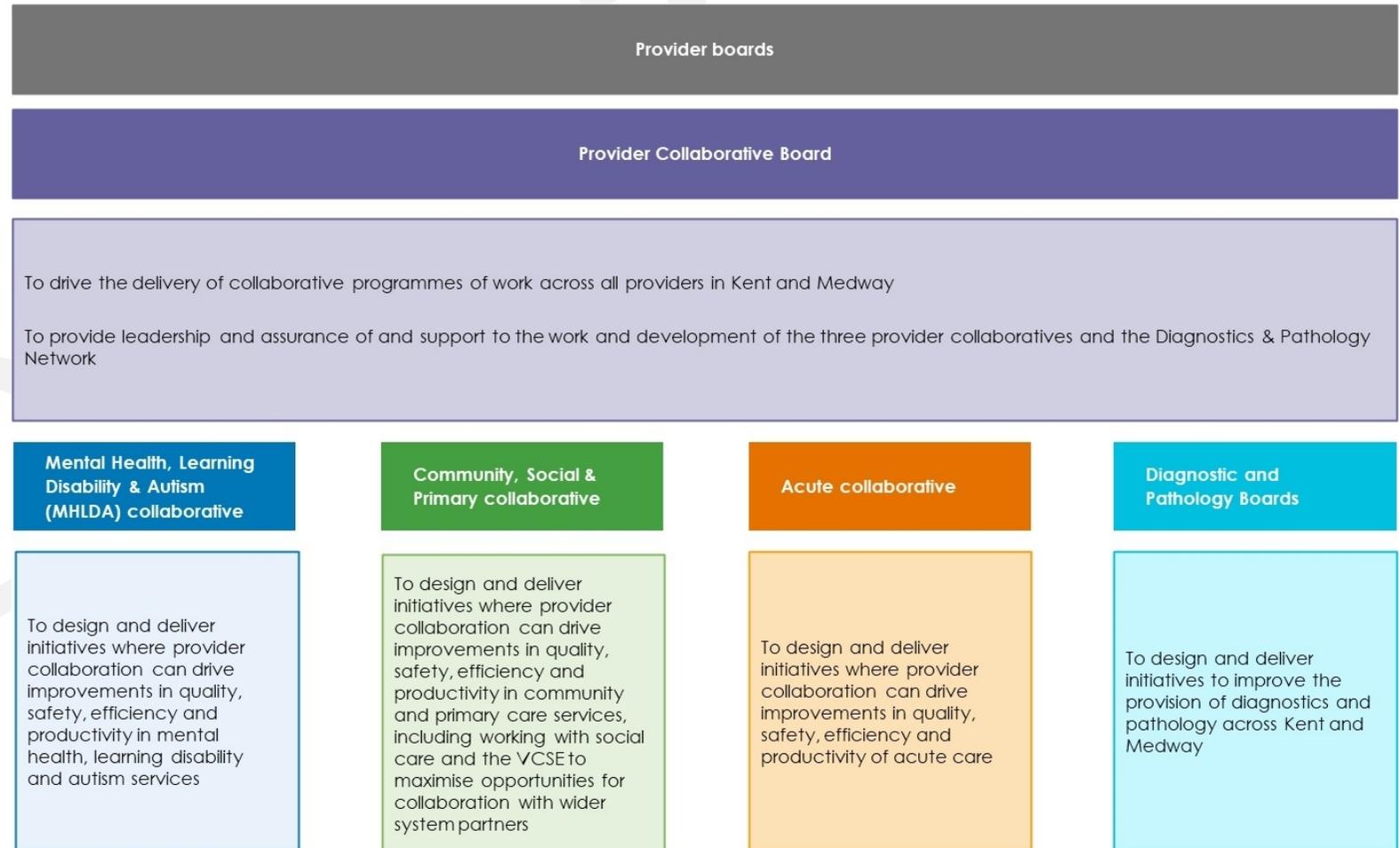
Partnership working – NHS Provider Collaboratives

Many providers across Kent and Medway work together, formally or informally to deliver more joined up care.

An NHS-led provider collaborative is a group of providers who have agreed to work together at scale to improve the care pathway for their local population. This is a significant shift in the way healthcare is organised, moving from an emphasis on organisational autonomy and competition to collaboration and partnership working. It enables providers to combine resources to address the challenges they are facing and therefore ensure more sustainable services.

The providers and ICB have an agreed set of working principles that established the provider collaboratives in October 2022 and the Provider Collaborative Board reports to the individual organisational boards.

The provider collaborative structure in Kent and Medway





Partnership Working- District Alliances

The key importance of local action, informed by local knowledge and led by local partners means that local systems are critical to improving health and wellbeing.

District councils, over time, have developed strong local partnerships led by local district level interests and statutory requirements. These partnerships involve a range of voluntary and community sector leaders as well as other partner agencies including local police, health and social care leads. These groups will meet as local Alliances or Action Teams and agree key priorities and actions to tackle health challenges and improve health. The importance of these endeavours in improving health are recognised by the increasing involvement of Kent Public health officers in supporting this work



Partnership Working – Voluntary, Community and Social Enterprise Sector

There is a huge VCSE capacity across Kent and Medway with over 4000 organisations and millions of volunteers playing a crucial role in improving health and wellbeing. Whilst the sector has a combined income of over £800m, 80% of the organisations are very small with an annual income of less than £10k.

The sector has a crucial role in understanding and addressing specific local needs. However, it faces significant challenge with increasing demand and reducing resources, both financial and people.

The sector has representatives on the Integrated Care Partnership, the Integrated Care Board and a committee of the board. Four VCSE alliances are aligned with each of the Health and Care Partnerships. These allow local organisations to meet and collaborate. At district level, VCSE partners are key members of local alliances.

NHS Kent and Medway signed a [Memorandum of Understanding](#) with the sector to embed their partnership in decision-making arrangements. Kent County Council and Medway Council have similarly close working arrangements.

The VCSE Steering Group

The VCSE Steering Group is an independent, voluntary body comprising of VCSE leaders from different parts of the sector including social enterprises. The group is a recognised and respected voice for the sector with regular engagement with Kent County Council, District Council Leaders, national bodies like NAVCA and NHS England and Kent and Medway Integrated Care System. Their role is to ensure issues facing the sector are highlighted to key stakeholders in the county and lobby to effect positive change.



Commissioning in Collaboration

Joint Commissioning is the process by which health and care services are planned, purchased and monitored by Kent County Council, Medway Council and Kent and Medway NHS working together. Our aim is to continue to join up the planning, commissioning and delivery of services to ensure that service models are well co-ordinated and provide continuity of support.

Many examples of joint working exist including services delivered through the Better Care Fund and other shared funding arrangements. There are several joint posts across the System and a joint commissioning plan in development. Commissioners work together through the Joint Commissioning Group for Adults in Kent and through the Joint Commissioning Management Group in Medway, the Kent and Medway Children's Programme Board and the Kent and Medway Learning Disability and Autism Delivery Partnership. There are additionally key commissioning links with wider system commissioners including the Office of the Police and Crime Commissioner

We will continue to seek out ways to work together, including creating joint appointments and aligning our care pathways and services so that they make sense to people who draw on our services. It is a vital part of any commissioning process that people with lived experience, communities, providers and professionals can be actively engaged in designing services which reflect local needs and opportunities, and we will ensure that services continued to be co-designed.

It is also important that services reflect the needs of local people and communities so as the System matures new models of care and ways of working will emerge, including development of Provider Collaboratives, organisations working together in new ways to deliver services locally, and delegating more commissioning to local Health and Care Partnerships.

The Kent and Medway Learning Disability and Autism Delivery Partnership

Established in January 2022, the partnership was formalised in September 2023 when NHS Kent and Medway and Kent County Council entered into a new partnership agreement (Section 75) in relation to joint working arrangements for the planning and commissioning of services for neurodivergent citizens.

The development of a system wide strategy for learning disability and autism is one of the key priorities for 2023/24. The views of people with lived experience, their families and carers has informed the development of the draft Strategy and further co design will be carried out in early 2024 with community and support groups so that we obtain the views and input of people with lived experience from as diverse backgrounds as possible and from across Kent and Medway. Engagement with the wider public will be undertaken in Spring 2024, when the draft strategy is published.

Supporting integrated approaches is one of the core purposes of an Integrated Care Partnership. Integration is joining up care for people, places and populations to improve patient experience, quality and efficiency, and reduce health inequalities. It will do this by reducing fragmentation within and across services and supporting more care out of hospital.

The ICP will continue to support the development of the key enablers of integration across the System. The key enablers to integration include joint commissioning, workforce, adoption of digital technology, data sharing, financial pooling and alignment to further join up services around people and populations



Summary of the Health & Care Partnership Priorities for 2024/25 and beyond

The table below summarises the HCP priorities, these have been agreed within the HCP as fixed priorities for the next 3-5 years. The priorities have been mapped to the Shared Outcomes of this strategy indicated by (SO) and a number. These priorities have been included above in the relevant shared outcomes page too.

| All HCPs priorities for 2024/25 | Dartford, Gravesham & Swanley HCP | East Kent HCP | Medway & Swale HCP | West Kent HCP |
|--|---|--|---|--|
| <ul style="list-style-type: none"> Flow and discharge (SO 5) Health inequalities (SO 2) Integrated Neighbourhood Teams (SO 4) Transforming community services (SO 5) Frailty (SO 3) | <ul style="list-style-type: none"> Children and Young People – inequalities, improvement in health, particularly obesity (SO 1) Ageing and dying well (SO 3) Primary and community care improvement and integration (SO 4) | <ul style="list-style-type: none"> Integrated Neighbourhood teams (SO 4) Urgent and Emergency Care (SO 5) Population health management (SO 2) | <ul style="list-style-type: none"> Transforming flow and discharge (SO 5) Community frailty (SO 3) Health inequalities (SO 2) Financial control incorporating population health management, ambulatory care services, self-harm, cancer, INTs & dentistry (SO 2, 4,5) | <ul style="list-style-type: none"> Frailty & complex care (SO 3, 5) Adult and Children’s mental health (SO 5, 1) Integrated Neighbourhood Teams (SO 4) Health Inequalities (SO 2) Discharge & Flow (SO 5) |

Summary of District & Borough Health and Wellbeing Plans (subject to confirmation and/or approval)

| District | Priorities for 2024 to 2026 |
|--------------------|---|
| Ashford | <ul style="list-style-type: none"> Housing (SO 2) Young people (SO 1) Substance misuse (SO 3) |
| Canterbury | <ul style="list-style-type: none"> Reduce poverty, maximise income and manage debt (SO1,2) Affordable housing and tackling homelessness (SO 2) Enable people to live happy and healthy lives for longer by promoting good health and wellbeing, and stopping illnesses from becoming worse or escalating (SO 2,3,4) |
| Dartford | <ul style="list-style-type: none"> Understand and address the wider determinants of health (SO2) Promoting healthy behaviours - Prevention (SO 1, 2, 3, 4) Supporting families and communities so children and young people thrive (SO1) Create a dementia friendly community (SO3) Supporting people to live and age well (SO3) Building Community Capacity (SO 1,2,3,4) |
| Dover | |
| Folkestone & Hythe | <ul style="list-style-type: none"> Ageing Well (SO 3) Prevention (SO 1,2,3,4) Building Community Capacity (SO 1,2,3,4) |
| Gravesham | <ul style="list-style-type: none"> Enable young people to thrive and grow. (SO 1,2) Support people to manage long term health conditions (SO 2,3,4) Embed a Health in All Policies (HiAP) approach at Gravesham Borough Council. (SO 2,3,4,6) Making Every Contact Count (SO 2,3,4) |

| District | Priorities for 2024 to 2026 |
|---------------------|--|
| Maidstone | |
| Sevenoaks | <ul style="list-style-type: none"> Addressing the wider determinants of health (SO 2) Promoting healthy behaviours (SO 3) Places & Communities (SO 1,2,3,4,5 & 6) |
| Swale | <ul style="list-style-type: none"> Community (SO 1,2,3,4) Economy (SO 2) Environment (SO 2) Health & Housing (SO 2) |
| Thanet | <ul style="list-style-type: none"> Frailty (SO 3) Mental Wellbeing (SO 1,2,3) Employment (SO 2) |
| Tonbridge & Malling | <ul style="list-style-type: none"> Improving mental health (SO 1,2,3) Improving children's health (SO 1) Supporting older people (SO 3) |
| Tunbridge Wells | <ul style="list-style-type: none"> Mental Health (SO 1,2,3) Loneliness & isolation (SO 2) Addictions (SO 1,2) Obesity & physical activity (SO 1,3) People with disabilities & older people (SO 3,4) |



Kent Association of Local Councils (KALC) priorities for action

| Priority |
|---------------------------------------|
| Cost of Living |
| Loneliness |
| People with dementia and their carers |
| Physical Activity |
| Weight Loss |



Financial sustainability

We need to manage the challenge of significant spending demands and cost increases within the funding available, which mainly comes from Council Tax (for local government services) and the government (for NHS and local government services). This requires taking tough spending decisions that are evidenced based and ensuring that we can continue to meet our statutory duties.

We are committed to achieving financial sustainability but also recognise that this may be over a longer period than one financial year. By coming together to deliver our Integrated Care Strategy we are committing to jointly funding our priorities. By understanding each other better we can reduce duplication and make the most of our collective resources, pooling resources where appropriate, and removing obstacles to operational teams working together.

We will continue to work hard to provide value for money. Each organisation has annual efficiency savings targets with a comprehensive programme management approach to monitor and oversee delivery and impact of the initiatives on the quality of care we provide.

It is however acknowledged that this delivery plan is framed against a challenging financial picture and that there may be a need to reconsider the affordability of some included initiatives over time. Additionally, initiatives that can deliver at low cost and can deliver system savings will need to be prioritised.

NHS Cost Improvement Programme (CIP)

The system recognises that it will be challenging to deliver the cost improvement programme (CIP). We are working towards strengthening our CIP programme, with both operational, cross-cutting and multi-year CIP schemes which will support the system's ambition to become financially sustainable. We will also maintain a pipeline of CIP schemes that ensure that we have more schemes than are needed to achieve the required delivery levels. The ICB hosts CIP workshops across the ICS to share and generate CIP ideas and we have set up a system programme management office focused on supporting the delivery of our financial recovery programme. We will review progress monthly and undertake deep dives on areas of under achievement to be able to identify key issues preventing delivery and to unblock these.



Have your say

We need everyone to help us do things differently; it's time to make positive, long-term change to the way we plan and deliver services so that we can make meaningful changes to the health and wellbeing of Kent and Medway residents.

We want to prevent ill-health wherever possible. This Shared Delivery Plan outlines some of the work we are planning – we want to know what you think and your ideas.

There are lots of ways for you to have your say to help us plan for the future.

Your views will be listened to and will help shape our plans and strategies for the future.

You can share your thoughts on our Integrated Care Strategy and our Shared Delivery Plan or on wider issues relating to health and wellbeing by registering for our online platform:

[Have Your Say in Kent and Medway](#)

<https://www.haveyoursayinkentandmedway.co.uk/>

Here you will also find out more about some of the exciting projects underway and examples of how we are demonstrating our new future.

Alternatively, you can write to us at:

Kmicb.engage@nhs.net or

The Engagement Team

Kent and Medway ICS

Kent House

81 Station Road

Ashford

TN23 1PP



Appendices

1. Logframe matrix
2. NHS Operational Plan 2024/25
3. NHS Kent and Medway objectives 2024/25 [NHS Kent and Medway Integrated Care Board Part 1 \(07/05/2024\) \(icb.nhs.uk\)](#)
4. NHS Kent and Medway capital resource plan
[Capital resource plan :: NHS Kent and Medway \(icb.nhs.uk\)](#)
5. Kent and Medway NHS Strategy development (add link to board papers ahead of publication)
6. KCC Growth, Environment and Transport delivery of the Integrated Care Strategy
7. Acronyms

GET and the ICS Outcomes

Outcome 1

Give children and young people the best start in life

Good growth and development is fundamental to children's health and well-being and can positively impact children's opportunities and life course. GET services such as Trading Standards, Libraries and Creative and Cultural Economy ensure access to safe, nutritious food, additional educational opportunities and enrichment activities that are crucial for supporting physical, cognitive, and emotional development and building social capital.

Similarly, the environment in which children grow up significantly impacts their health, safety, and overall development. GET services such as Energy & Climate Change, Strategic Planning & Infrastructure and Countryside Development support children's health outcomes by providing a safe environment that includes access to clean air, water, and green spaces, as well as safe and stable housing. They work to improve the physical, environmental and social conditions by reducing pollution, investing in infrastructure for safe housing and communities, promoting social inclusion and equity. Additionally, GET's Community Safety services, like the Community Wardens, create nurturing and supportive social environments, free from violence and discrimination that is essential for children to develop and thrive.

Furthermore, access to safe and reliable transport is essential for children and families to access healthcare services, education facilities, and leisure activities. Highways and Transportation provide affordable and safe routes to schools and hospitals and pedestrian-friendly infrastructure both promotes physical activity and reduces the risk of accidents. Good, multi-modal transport infrastructure not only benefits children and families socially by connecting them to their communities, but it also contributes to increased physical activity, reduced traffic congestion, air pollution and the risk of food deserts, thus creating a more sustainable, healthier environment for children.

Outcome 3

Support happy and healthy living for all

GET plays an integral role in supporting happy and healthy living for all by addressing the fundamental aspects of well-being, promoting social and environmental equity and accessibility, and creating environments that support good physical, mental, and social well-being. By investing in these areas, GETs services create a sustainable environment in which people and communities can lead long, healthy and fulfilling lives.

GET services align with place-based and population health approaches to ensure the provision and sustainability of social connection, resilient communities, heritage, libraries, accessible green spaces, leisure & culture which all interact to promote a good sense of place that in turn contribute to a sense of wellbeing.

GET services not only promote wellbeing to prevent, reduce or delay the onset of preventable disease and need for care services, but it also creates health promoting environments (upstream) and delivers frontline services (downstream) that support this outcome.

Many services in GET, like Country Parks, Community Safety, Libraries and Strategic Development and Place are key partners of multi-agency partnerships that promote and support safe and resilient communities where people can live happy and socially-connected lives.

Outcome 2 is on the next slide.

GET and the ICS Outcomes

Outcome 2

Tackle the wider determinants to prevent ill health

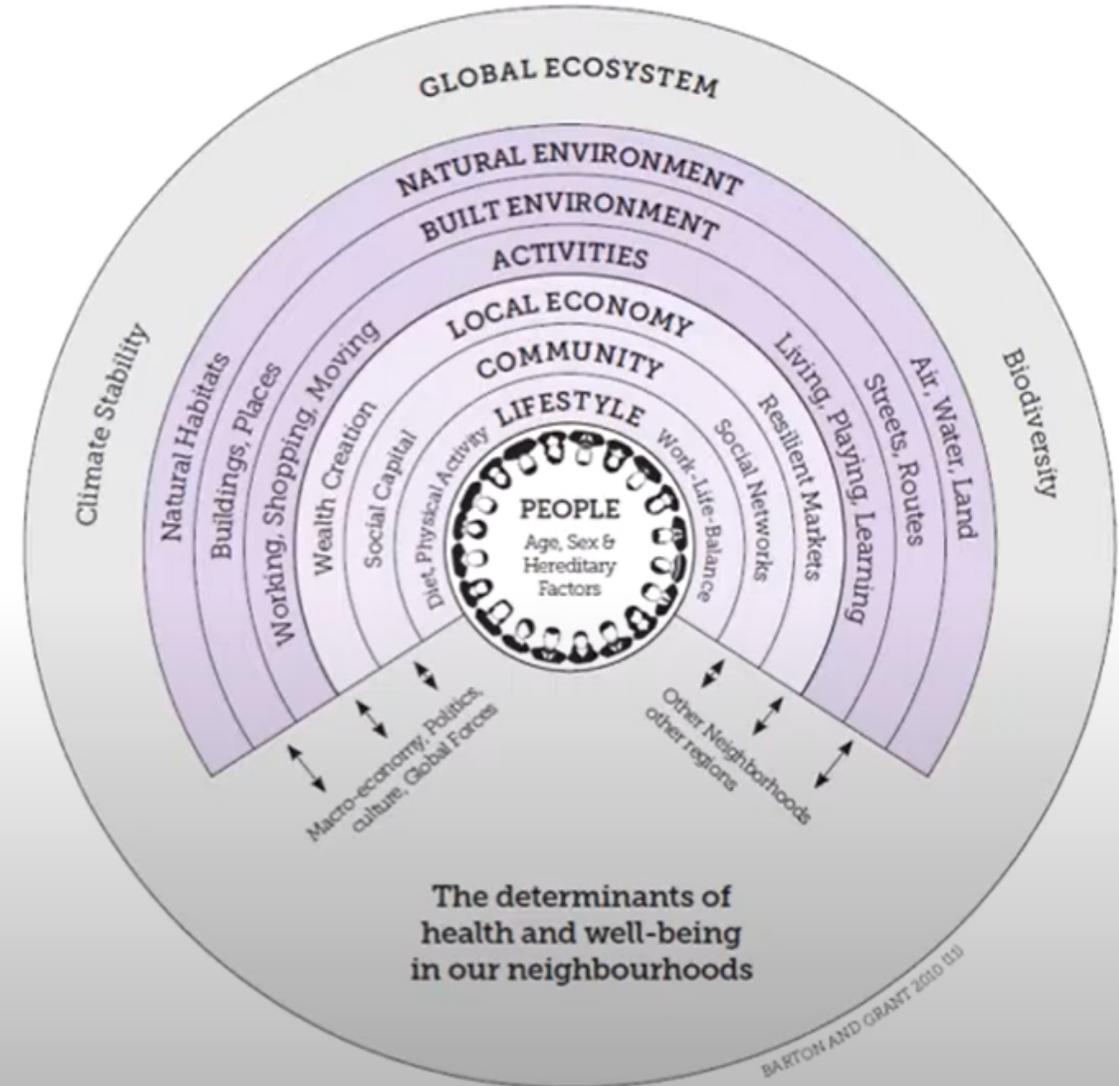
All services in GET play a crucial role in preventing illness and promoting overall being by addressing the social, economic, and environmental factors that influence services work systemically to create conditions that support people to grow, work and reduce the burden of preventable diseases and health disparities.

Socioeconomic factors like income, employment, education, and social networks impact on health outcomes. The Economy team supports a strong economy with business investment, stable employment and adequate income to reduce preventable health. Libraries address social and economic inequality by providing warm, free equipped with information to support and signpost residents to an array of services equitable access to resources and positive health opportunities, thus preventing addressing the root cause of health inequity.

Environmental services in GET tackle climate change which is now the context in which we protect health from environmental hazards and infectious diseases and will determine health. Whilst everyone will be at some risk from adverse health impacts from climate change, impacts will vary at individual level and the most disadvantaged will be disproportionately affected.

The Community Safety team and the Community Wardens provide a social safety net by working on the ground within their local community. They identify and assist disadvantaged individuals and groups by providing relevant educational resources and assistance with navigating services. This sustainable approach equips communities with the skills they need to become resilient, thus avoiding the inequitable conditions that disadvantage health in the long term.

Highways and Transportation services offer essential, safe and reliable transport for work, employment, education and social services and support the improvement of transport infrastructure. This includes public transport, walking and cycling facilities, enhancing mobility and removing barriers to accessing essential services. Additionally, work to improve road safety, reduce congestion and promote active travel contributes to the reduction of injuries and physical activity, therefore improving overall health outcomes.



GET and the ICS Outcomes

Outcome 4 Empower patients and carers

Services in GET, such as Community Safety, Positive Wellbeing, Libraries and Active Kent, provide a high quality and preventative approach to care, support and signposting services that enable and empower people to take responsibility for and manage their own health outcomes and make improvements to their overall well-being.

Investing in preventative self-care services, health education and literacy programs can empower patients and carers to make informed decisions about their health and care plans by providing them with the skills and knowledge they need to make these informed decisions.

Further to this, building strong, resilient communities with ample health-promoting infrastructure like free and accessible green spaces, recreational facilities, good transport infrastructure and social support networks enables and empowers people to look after their own mental and emotional well-being, reducing the strain on health and wellbeing services.

Outcome 5 Improve health and care services

The Community Warden Service plays an important role in ensuring that residents are receiving the correct package of care and provide essential signposting and support services directly in the homes of people who need it. They act as care navigators, ensuring people are aware of and can access the care and support services they are entitled to in order to improve their health outcomes. Community Wardens also take referrals from Adult Social Care and often provide non-clinical support for patients when discharged from hospital, potentially reducing the burden on other public health services.

Libraries also support this outcome by working in partnership with a range of health and care services to support and deliver public health campaigns and initiatives such as Talking Therapies - Improved Access to Psychological Therapies, NHS Cancer Campaigns and Population Health Management. Libraries help to raise community awareness and offer access to services such as Hearing aid clinics and One You Smokefree specialist support sessions in non-clinical, open settings.

Strategic Planning and Infrastructure play an important role in securing developer contributions to ensure there are sufficient local health and care services in communities.

Outcome 6 Support and grow our workforce

GET plays an important role in the outcome to grow our skills and workforce. GET provides and commissions services such as Visit Kent and Locate in Kent that attract people to live, study and work in Kent and promote all that our area has to offer.

GET also provides many work experience opportunities, apprenticeships, long-term placements & traineeships for people to gain skills and experience, develop their career or get back into work. The Kent & Medway Economic Plan sets out our commitment to building a workforce that has the right skills and values that supports positive public health outcomes.

GET services support people to develop their social and human capital and gain the skills and experiences they need to get into meaningful employment.

Acronyms

| Title | Acronyms |
|--|----------|
| Adult Social Care | ASC |
| Better Care Fund | BCF |
| Business and Intellectual Property Centres | BIPC |
| Children and Young People /Children, Young People and Education | CYP/CYPE |
| Community Safety Partnership | CSP |
| Dartford, Gravesham and Swanley | DGS |
| Designated Safeguarding Lead | DSL |
| East Kent | EK |
| Education Health and Care Plans | EHCP |
| Growth, Environment and Transport | GET |
| Health and Care Partnership | HCP |
| Health and Wellbeing Board | HWB |
| Inequalities Prevention and Population Health Committee (Committee of the Integrated Care Board) | IPPH |
| Integrated Care Board | ICB |
| Integrated Care Partnership | ICP |
| Integrated Care System | ICS |
| Integrated Neighbourhood Team | INT |
| Joint Commissioning Management Groups | JCMG |

| Title | Acronyms |
|---|----------|
| Joint Strategic Needs Assessment | JSNA |
| Kent and Medway Economic Partnership | KMEP |
| Kent Association of Local Councils | KALC |
| Kent Children Safeguarding Multiagency Partnership | KCSMP |
| Kent Community Health NHS Foundation Trust | KCHFT |
| Kent County Council | KCC |
| Learning Disability and Autism | LDA |
| Libraries, Registration & Archives | LRA |
| Medway Safeguarding Children Partnership | MSCP |
| Mental Health, Learning Disability and Autism | MHLDA |
| NHS England | NHSE |
| Office of the Police and Crime Commissioner | OPCC |
| Public Health | PH |
| Special Education Needs and Disabilities | SEND |
| Strategy, Policy, Relationships and Corporate Assurance | SPRCA |
| Voluntary, Community, and Social Enterprise Sector | VCSE |
| West Kent | WK |