

| Decision number ¹ | Rec | DECISION | LEAD | PROGRESS |
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| 86/2014 | 4 | That Cabinet asks NHS England (Kent and Medway Local Area Team) to work with NHS Medway Clinical Commissioning Group (CCG) to investigate inequity in access and outcomes at GP practices and report back to the Health and Wellbeing Board with its plan to address the issue. | Elliot Howard-Jones Dr Green Alison Burchell | <p>Medway CCG is developing joint strategies with NHSE to support more integrated and community-based services in the implementation of the local primary care strategy, which is intended to address inequities in access and outcomes. In line with national planning guidance the CCG has developed a 5 year Strategy with the first two years operational plans set out in detail, informed by sessions with GPs, patients and the public events, including wider stakeholder events and a Call to Action. The strategy is aligned to the JSNA and Joint Health and Wellbeing Strategy Priority Actions.</p> <p>Two year service redesign priorities include:</p> <ul style="list-style-type: none"> • Primary care focused integrated health and social care teams – facilitating better access to physical health care • Primary care delivery models • Community service redesign programme; offering single point of access, case management and active community engagement <p>The expected outcomes include a specific focus on reducing health inequalities and mean that in five years Medway will have:</p> <ul style="list-style-type: none"> • Established clear and transparent processes that actively engage and empower local citizens to secure equality of access to care and better health outcomes. • Driven improvements across all NHS outcome domains resulting in reduced health inequality, access to the highest quality urgent and emergency care and a modern |

¹ <http://democracy.medway.gov.uk/mgAi.aspx?ID=9442>

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| | | | | model of integrated care; focusing on people not conditions. |
| 89/2014 | 7 | That Cabinet: asks the Health and Wellbeing Board to engage with members of the public and seek views on barriers to uptake of health and social care services – whether they be Council, NHS or volunteer – in the development and implementation of the Health and Wellbeing Board engagement plan in the next 12 months; and that the findings of this engagement exercise should be used to programme and target further work to address health inequalities with Council service managers, NHS colleagues and the voluntary sector. | Dr Barnett | Public Health have arranged to meet with HealthWatch Medway on 10th October to discuss whether similar work has already been undertaken and identify whether additional engagement is required. |
| 91/2014 | 9 | That Cabinet asks the Health and Wellbeing Board to identify where health equity audits may help to determine action that would reduce health inequalities across council services and those commissioned by the CCG and NHS England (Kent and Medway Local Area Team); And that the Public Health department then provides support or leads on conducting those which are determined to be the highest priority by the Health and Wellbeing Board. | Dr Barnett Elliot Howard-Jones Alison Burchell Dr Green | <p>Recently published research has shown that nationally women from more deprived areas are less likely to engage with services prior to and after birth, more likely to report that they were not treated respectfully or spoken to in a way they could understand, and more likely to have an unplanned caesarean section. Compared to the least deprived quintile, women in the most deprived quintile were significantly less likely to have had any antenatal care, be seen by a health professional before 12 weeks and to have had a postnatal check-up.</p> <p>Locally, a review in 2013 by the CQC raised concerns about maternity services. Improvements have been made as a result, however, it is not known if access to services is equitable.</p> <p>A Health Equity Audit to determine if there are inequities in access to and use of maternity services in Medway is therefore recommended to the Health and Wellbeing Board for consideration.</p> |

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