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## **Health and Adult Social Care Overview and Scrutiny Committee**

**5 December 2024**

### **Medway and Swale Health and Care Partnership Delivery Plan Update with an Overview of Development of Integrated Neighbourhood Teams**

Report from: Nikki Teesdale, Director of Health and Care Integration and Improvement, Medway and Swale Health and Care Partnership

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#### **Summary**

This report provides the Health and Adult Social Care Overview and Scrutiny Committee with a comprehensive overview of the 2024–2025 Delivery Plan for the Medway and Swale Health and Care Partnership (HaCP), with a five-year perspective on the development and operation of Integrated Neighbourhood Teams (INTs). The Delivery Plan outlines strategic priorities for achieving a fully operational and effective INT model, integrating local healthcare, social care, and community services to enhance outcomes for residents. Key areas of focus include:

- **Development of Integrated Neighbourhood Teams:** Establishment of fully functioning, multi-disciplinary INTs with aligned objectives across healthcare, social care, and voluntary sectors, fostering a holistic approach to patient care in each community.
- **Workstream Progress and System Integration:** Coordination of programme workstreams that align with key health and social care priorities, ensuring seamless integration with wider system initiatives and facilitating pathways that reduce duplication, streamline care, and prioritise Population Health Management.
- **Monitoring and Evaluation:** Implementation of robust monitoring and evaluation frameworks, designed to assess INTs' impact, enhance operational efficiency, and support a sustainable integrated care model over the next five years.

By advancing a fully functioning INT structure, the HaCP Delivery Plan aims to deliver an effective and cohesive local care ecosystem that meets the diverse health, and

wellbeing needs of Medway and Swale residents, reduces health inequalities, and optimises resource utilisation across the system.

## 1. Recommendations

- 1.1. The Committee is asked to note the report.

## 2. Budget and Policy Framework

- 2.1. Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 the Council may review and scrutinise any matter relating to the planning, provision, and operation of the health service in Medway. In carrying out health scrutiny a local authority must invite interested parties to comment and take account of any relevant information available to it, and, in particular, relevant information provided to it by a local Healthwatch. The Council has delegated responsibility for discharging this function to this Committee and to the Children and Young People Overview and Scrutiny Committee as set out in the Council's Constitution

## 3. Background

- 3.1. Members of HASC asked for a comprehensive INT update at August 20<sup>th</sup> Meeting following the introduction within Medway and Swale Interim Estates Strategy being shared. A full update on this is attached at Appendix 1 of this report.

## 4. Risk management

- 4.1. The risk identified below is a risk for the Medway and Swale Health and Care Partnership, not a direct risk for Medway Council.

<b>Risk</b>	<b>Description</b>	<b>Action to avoid or mitigate risk</b>	<b>Risk rating</b>
Funding	Restricted funding for place-based programmes supporting health inequalities may hinder delivery of some of the schemes outlined in the paper.	Working to source alternative funding	BIII

For risk rating, please refer to the following table:

<b>Likelihood</b>	<b>Impact:</b>
A Very likely	I Catastrophic
B Likely	II Major
C Unlikely	III Moderate
D Rare	IV Minor

## 5. Consultation

- 5.1. Public consultation on the paper has not been required. However, extensive engagement has taken place with communities across the HaCP, including communities who are seldom heard in the system, and fall into Inclusion Health Groups who typically experience high levels of Health Inequalities. The

engagement that has taken place supports a bottom-up approach for the HaCP, which is at the very heart of the contents of this report.

## 6. Climate change implications

- 6.1. The HaCP are committed to acting to reduce the local carbon footprint and support the sustainability plan. The HaCP do have specific programmes of work that are looking at the Carbon Footprint, for example, Childhood Asthma.

## 7. Financial implications

- 7.1. There are no direct financial implications to the Council arising from this report. The expectation would be that the social care elements of the INT would be met from within existing resources. However, the Council will need to consider any potential financial implications as the project progresses.
- 7.2. Targeting health inequalities directly supports local authority social care by addressing the root causes that often drive demand for social care services. When we reduce health disparities, we help prevent the progression of chronic conditions, improve mental wellbeing, and reduce preventable health crises—all of which alleviate pressures on social care resources. By focusing on health inequalities, we enable individuals to live healthier, more independent lives within their communities, delaying or even reducing the need for intensive social care interventions. This approach also promotes economic and social resilience, as healthier communities are better positioned to contribute positively to society. Ultimately, targeting health inequalities creates a sustainable social care environment where resources are used more efficiently, and outcomes are improved for all residents.

## 8. Legal implications

- 8.1. There are no direct legal implications to the Council arising from this report

### Lead officer contact

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### Appendices

Appendix 1 – submission from Medway and Swale HCP  
Appendix 2 – NAPC INT Framework

### Background papers

None