

Kent and Medway Integrated Care Strategy

Log Frame Report: Baseline

21/10/2024

Indicators highlighted grey are still work in progress.

Version control

Date	Change
17.10.2024	Initial baseline report
21.10.2024	Updated KCC data for indicator 6.12.

Overview

Summary

Total indicators	89	Improved: ↓ / ↑	19	Unchanged/warning: → / ▲	48	Worsened: ↓ / ↑	22
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Goal

Narrative: To reduce economic and health inequalities in Kent and Medway

Summary

Total indicators	8	Improved: ↓ / ↑	0	Unchanged/warning: → / ▲	6	Worsened: ↓ / ↑	2
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No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓ / ↑	Narrative	Reported by
G.1	By 2032, the Index of Multiple Deprivation rank of average score will have increased by 15 places so that both Kent and Medway become relatively less deprived.	Department for Levelling Up, Housing and Communities and Ministry of Housing, Communities & Local Government. English indices of deprivation. <i>Rationale: Align more closely with best performing CIPFA nearest neighbours in 2019. Swindon (Medway) and Hampshire (Kent).</i>	Time period: 2019 Kent: 93 rd place Medway: 68 th place	As of October 2024, only baseline data is available. IMD is updated and published every 3-5 years. Provisionally, the next IMD is anticipated in late 2025 although a definite release date is still not known.	Medway Council Public Health Intelligence Team
G.2 4 parts	By 2026-28, life expectancy at birth in Kent and Medway will increase by 1.5 years for males and 1 year for females. Additionally, the slope index of inequality for life expectancy at birth will decrease by 2 years for males and 0.5 years for females.	Office for Health Improvement and Disparities (OHID). Fingertips. Life expectancy at birth (indicator ID 90366) and inequality in life expectancy at birth (indicator ID: 92901). <i>Rationale: Align more closely with best performing CIPFA nearest neighbours in 2018-20. Swindon (Medway) and Hampshire (Kent).</i>	Life expectancy at birth (Female) Time period: 2018-20 to 2020-22 (3-year change) Kent: 83.2 years to 83.0 years ↓ Medway: 82.5 years to 81.9 years ↓ England: 83.1 years to 82.8 years ↓ Life expectancy at birth (Male) Time period: 2018-20 to 2020-22 (3-year change) Kent: 79.5 years to 79.0 years ↓ Medway: 78.4 years to 77.6 years ↓ England: 79.3 years to 78.9 years ↓ Inequality in life expectancy at birth (Female)	Life expectancy at birth for females has declined over the past three 3-year periods in both Kent and Medway, with Medway experiencing a more pronounced decrease. The coronavirus (COVID-19) pandemic led to increased mortality in 2020 and 2021, and the impact of this is seen in the life expectancy estimates for 2020-22. ONS. National life tables – life expectancy in the UK: 2020 to 2022. See comment above for Life expectancy at birth (Female)	Medway Council Public Health Intelligence Team
				As of October 2024, only baseline data is available.	

No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓↓ / ↑↑	Narrative	Reported by
			Time period: 2018-20 Kent: 5.6 years Medway: 6.6 years England: 7.9 years	Local authority level estimates of inequality in life expectancy at birth have not been released by the Office for Health Improvement and Disparities (OHID) for 2019-21 and 2020-22. OHID are currently waiting for small area population estimates from Office of National Statistic (ONS) in order to update the inequality in life expectancy indicator. A revised back series of small area population estimates, based on the results of the 2021 Census, is expected from ONS in October or November 2024. Once published, OHID will revise and update the inequality in life expectancy indicator.	
			Inequality in life expectancy at birth (Male) Time period: 2018-20 Kent: 7.8 years Medway: 9.4 years England: 9.7 years	See comment above for: Inequality in life expectancy at birth (Female)	
G.3 2 parts	By 2026-28, healthy life expectancy at birth in Kent and Medway will increase by 3 years for males and 1.5 year for females.	<i>Rationale: Align more closely with best performing CIPFA nearest neighbours in 2018-20. Plymouth (Medway) and Surrey (Kent).</i>	Healthy life expectancy at birth (Female) Time period: 2018-20 Kent: 63.6 years Medway: 63.6 years England: 63.9 years	As of October 2024, only baseline data is available. Local authority level estimates of healthy life expectancy (HLE) have not been released by the Office of National Statistic (ONS) for 2019-21 and 2020-22. This is due to data quality concerns. Estimates of HLE are a function of mortality rates and the prevalence of self-reported good health (derived from the Annual Population Survey [APS]). However, sample sizes of the APS have been declining,	Medway Council Public Health Intelligence Team

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				<p>especially during the coronavirus pandemic. There are therefore concerns about the robustness of this data.</p> <p>ONS are working on improving the survey methodology and sample sizes, and hope to reinstate local authority level HLE estimates by the end of 2024.</p>	
			Healthy life expectancy at birth (Male) Time period: 2018-20 Kent: 64.6 years Medway: 60.9 years England: 63.1 years	See comment above for: Healthy life expectancy at birth (Female)	
G.4	By 2031, the proportion of people from minority ethnic groups living in less deprived neighbourhoods will increase by 1 percentage point in Kent and 2 percentage points in Medway to align more closely with the underlying minority ethnic group population distributions.	Deprivation: Department for Levelling Up, Housing and Communities and Ministry of Housing, Communities & Local Government. English indices of deprivation. Ethnicity: Nomis. Office for National Statistics. Census 2021. TS021 - Ethnic group. <i>Match CIPFA nearest neighbours in 2019. Swindon (Medway) and Hampshire (Kent).</i>	Time period: 2021 Kent: 15.2% Medway: 13.6% K&M combined: 15.1%	As of October 2024, only baseline data is available. Deprivation: The Index of Multiple Deprivation (IMD) is updated and published every 3-5 years. Provisionally, the next IMD is anticipated in late 2025 although a definite release date is still not known. Ethnicity: Population data by ethnic group will likely next be available within the 2031 census. In the meantime, the Office for National Statistics (ONS) website will be monitored for any new methods developed to calculate interim population estimates by ethnic group.	Medway Council Public Health Intelligence Team

Purpose

Narrative: To support social and economic development, improve public service outcomes, and ensure services for citizens are of excellent quality and good value for money.

Summary

Total indicators	1	Improved: ↓ / ↑	1	Unchanged/warning: → / ▲	0	Worsened: ↓ / ↑	0
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No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓ / ↑	Narrative	Reported by
P.1	By 2028, the proportion of children living in relative poverty in Kent and Medway will be reduced from 18% in 2022 to 17%.	Children in Low Income Families: local area statistics, United Kingdom, financial years ending (FYE) 2015 to 2022. https://www.gov.uk/government/collections/children-in-low-income-families-local-area-statistics <i>Relative low income is defined as a family in low income before housing costs in the reference year. A family must have claimed Child Benefit and at least one other household benefit at any point in the year to be classed as low income in these statistics.</i>	Time period: 2022 to 2023 (1-year change) Kent & Medway: 18.1% to 15.7% ↓ England: 20.1% both years →	The proportion of children living in relative poverty has reduced by 2.4% between 2022 and 2023 across Kent & Medway	KCC KPHO
P.X	Economic indicators to be added.	TBC	N/A	Economic indicators to be added to align with priorities in the Kent & Medway Economic Framework, which may cover themes such as income. The Kent & Medway Economic partnership has committed to 5 high level ambitions with 21 action areas. The targets have not yet been agreed. Following approval at scrutiny committee recently, these will be turned into an implementation plan by June 2024. Indicator monitoring is being provided by the Kent Analytics team.	KCC KPHO via Kent Analytics team

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

Narrative: 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.

Summary

Total indicators	21	Improved: ↓ / ↑	9	Unchanged/warning: → / ▲	7	Worsened: ↓ / ↑	5
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No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓ / ↑	Narrative	Reported by
1.1	By 2028, pupils achieving a good level of development at the end of the Early Years Foundation Stage will have improved from 65.8% in 2021/22 to at least 70%.	Department for Education (DfE). Fingertips, Indicator ID: 90631 <i>In line with best performing CIPFA nearest neighbour in 2021/22</i>	Time period: 2021/22 to 2022/23 (1-year change) Kent & Medway combined: 65.8% to 68.3% ↑ England: 65.2% to 67.2% ↑	Kent and Medway increased by 2.5% between 2021/22 and 2022/23, compared to a 2% improvement in England.	KCC KPHO
1.2 2 parts	By 2028, the proportion 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%.	OHID, using National Child Measurement Programme, NHS Digital. Fingertips Indicator ID: 90323 A return to pre-pandemic levels.	Healthy weight: Time period: 2021/22 to 2022/23 (1-year change) Kent: 62.8% to 63.5% ↑ Medway: 57.3% to 60.8% ↑ England: 60.8% to 61.9% ↑ Severe obesity: Time period: 2021/22 to 2022/23 (1-year change) Kent: 5.1% to 5.3% ↑ Medway: 6.6% to 6.1% ↓ England: 5.8% to 5.7% →	Healthy weight: Kent has improved by 0.7% between 2021/22 and 2022/23. Medway improved by 3.5% in the same time period, and England improved by 1.1% Severe obesity: Kent saw an increase in severe obesity by 0.2%, Medway decreased by 0.5% and England decreased by 0.1% between 2021/22 and 2022/23	KCC KPHO
1.3	By 2028, the difference in rates of overweight and obesity in year 6 children in the top and bottom local quintiles of deprivation in Kent and Medway will have reduced from 12% in 2021/22 to 10%. This will be achieved by a reduction among the most deprived groups.	National Child Measurement Programme (NCMP) Return to gap in 2016/17	Time period: 2021/22 to 2022/23 (1-year change) Kent and Medway quintile 1 - 40.4% to 39.9% → Kent and Medway quintile 5 - 28.4% to 27.9% → Kent & Medway gap: 12.0% to 12.0% →	Rates of excess weight in year 6 pupils reduced slightly in the most and least deprived quintiles between 2021/22 and 2022/23. Consequently the prevalence gap stayed at 12%. This indicator is calculated using local authority submitted National Child Measurement Programme (NCMP) data. Because of this, the figures do not include Kent and Medway residents who attend schools outside of Kent and Medway districts.	KCC KPHO
1.4 3 parts	By 2028/29, the percentage of pupils who meet the expected standard in reading, writing and maths at Key Stage 2 for both	Department for Education (DfE) Key stage 2 attainment, Academic year 2023/24 - Explore education statistics -	Time period: 2022/23 to 2023/24 (1-year change) Kent SEN: 18.7% to 20.5% ↑	Key Stage 2 attainment scores increased between 2022/23 and 2023/24 for both	KCC KPHO

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	SEN and non-SEN pupils will have increased and the gap between the two will be lower than or similar to the national average.	GOV.UK (explore-education-statistics.service.gov.uk)	Kent Non-SEN: 69.6% to 71.7% ↑ Kent gap: 50.9% to 51.2% → Medway SEN: 19.2% to 20.8% ↑ Medway Non-SEN: 66.1% to 71.4% ↑ Medway gap: 46.9% to 50.6% ↑ Kent & Medway SEN: 18.8% to 20.6% ↑ Kent & Medway Non-SEN: 69.1% to 71.6% ↑ Kent & Medway gap: 50.3% to 51.1% ↑ England SEN: 20.1% to 21.5% ↑ England Non-SEN: 69.9% to 71.4% ↑ England gap: 49.8% to 50.0% →	Kent and Medway and for SEN and non-SEN groups. The gap increased in both Kent, Medway, and England between 2022/23 and 2023/24. The gap remains 1.1 % point higher in both Kent & Medway than England.	
1.5 3 parts	By 2028/29, the average attainment 8 scores for both SEN and non-SEN pupils will have increased, and the gap between the two will be lower than or similar to the national average.	Department for Education (DfE): Pupils' attainment across eight government approved qualifications. In line with best performing CIPFA nearest neighbour in 2021/22	Time period: 2021/22 to 2022/23 (1-year change) Kent SEN: 29.4% to 27.4% ↓ Kent Non-SEN: 53.0% to 50.9% ↓ Kent gap: 23.6% to 23.5% → Medway SEN: 29.7% to 29.0% ↓ Medway Non-SEN: 51.7% to 49.1% ↓ Medway gap: 22.0% to 20.1% ↓ Kent & Medway SEN: 29.5% to 27.7% ↓ Kent & Medway Non-SEN: 52.8% to 50.6% ↓ Kent & Medway gap: 23.3% to 22.9% → England SEN: 29.4% to 28.1% ↓ England Non-SEN: 52.5% to 50.0% ↓ England gap: 23.1% to 21.9% ↓	Attainment 8 scores fell between 2021/22 and 2022/23 for both Kent and Medway and for SEN and non-SEN groups. The gap decreased in both Kent & Medway and England between 2021/22 and 2022/23. The gap remains 1.0 % points higher in Kent & Medway than the England average.	KCC KPHO
1.6 3 parts	By 2028/29, the percentage of pupils who meet the expected standard in reading, writing and maths at Key Stage 2 will have increased for both disadvantaged and non-disadvantaged pupils, and the gap between the two will be lower than or similar to the national average.	Department for Education (DfE)	Time period: 2022/23 to 2023/24 (1-year change) Kent Disadvantaged: 39.4% to 42.8% ↑ Kent Non-Disadvantaged: 67.2% to 69.0% ↑ Kent gap: 27.7% to 26.2% ↓ Medway Disadvantaged: 40.4% to 44.3% ↑ Medway Non-Disadvantaged: 63.0% to 67.3% ↑ Medway gap: 22.6% to 23.0% → Kent & Medway Disadvantaged: 39.6% to 43.1% ↑ Kent & Medway Non-Disadvantaged: 66.5% to 68.7% ↑	Key Stage 2 attainment scores increased between 2022/23 and 2023/24 for both Kent and Medway and for Disadvantaged and non-Disadvantaged groups. The gap decreased in Kent and England but increased in Medway between 2022/23 and 2023/24. The gap between groups remains 3.9 % points higher in Kent & Medway than England.	KCC KPHO

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			Kent & Medway gap: 26.9% to 25.7% ↓ England Disadvantaged: 44.0 to 45.4% ↑ England Non-Disadvantaged: 66.3% to 67.2% ↑ England gap: 22.3% to 21.8% ↓		
1.7 3 parts	By 2028/29, the average attainment 8 scores for both disadvantaged and non-disadvantaged pupils will have increased, and the gap between the two will be lower than or similar to the national average.	Department for Education (DfE)	Time period: 2021/22 to 2022/23 (1-year change) Kent disadvantaged: 34.8% to 32.8% ↓ Kent Non-disadvantaged: 53.4% to 51.2% ↓ Kent gap: 18.6% to 18.4% → Medway disadvantaged: 34.6% to 32.4% ↓ Medway Non-disadvantaged: 51.8% to 49.2% ↓ Medway gap: 17.2% to 16.8% → Kent & Medway disadvantaged: 34.8% to 32.7% ↓ Kent & Medway Non-disadvantaged: 53.1% to 50.9% ↓ Kent & Medway gap: 18.4% to 18.1% → England disadvantaged: 37.6% to 35.0% ↓ England Non-disadvantaged: 52.8% to 50.3% ↓ England gap: 15.2% to 15.3% →	Attainment 8 scores fell between 2021/22 and 2022/23 for both Kent and Medway for both disadvantaged and non-disadvantaged groups The gap between disadvantaged and non-disadvantaged fell between 2021/22 and 2022/23 for both Kent and Medway, but increased in England. The gap between groups remains 2.8 % points higher in Kent & Medway than England.	KCC KPHO
1.8	By 2028 pupil absence rates will have fallen from 7.9% in 2021/22 to below 5%.	Department for Education (DfE). The overall absence rate in state funded primary, secondary and special schools. In line with national targets.	Time period: 2021/22 to 2022/23 (1-year change) Kent and Medway - 7.9% to 7.8% → England - 7.6% to 7.4% →	In 2022/23 academic year the proportion of absences in Kent and Medway was 0.1% lower than 2021/22. Kent and Medway remained 0.4 % points above the absence rate for England in 2022/23.	KCC KPHO
1.9	By 2028/29, the proportion of mothers smoking at time of delivery will have reduced from 10.2% in 2021/22 to no more than 6%.	Office for Health Improvement and Disparities (OHID). Fingertips. Indicator ID: 93085.	Time period: 2020/21 to 2022/23 (2-year change) Kent & Medway ICB: 13.5% to 10.3% ↓ England: 9.6% to 8.8% ↓	Kent and Medway saw a reduction in mothers recorded as being current smokers at time of delivery of 3.2% between 2020/21 and 2022/23. It remained 1.5% higher than the England rate of 8.8%.	KCC KPHO
1.10	By 2028, the proportion of children who are up to date with the vaccinations in the NHS routine list meets the national benchmark (95%).	Cover Data: Childhood Vaccination Coverage Statistics, England, 2023-24 - NHS England Digital	Kent: vaccinations >=95%: 0/14 → Medway: vaccinations >=95%: 0/14 → England: vaccinations >=95%: 0/14 →	Data to March 2024. There are 14 vaccines, 4 at 6 months, 5 at 12 months and 5 at 5 years, none are at 95% for Kent, Medway and England.	NHS K&M ICB
1.11	By 2028, the proportion of children in care who are up to date with the vaccinations in the NHS routine list meets the national benchmark (95%).	Office for Health Improvement and Disparities (OHID). Fingertips. Indicator ID: 811.	Time period: 2022 to 2023 (1-year change) Kent and Medway: 92.3% to 92.3% → Kent: 95% to 94% ↓	From 2022 to 2023, the proportion of children up to date with vaccinations decreased in Kent and England but increased in Medway.	KCC KPHO

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			Medway: 83% to 85% ↑ England: 85% to 82% ↓	Both Kent and Medway were below the national 95% target, with an overall rate of 92.3%.	
1.12	By 2028, 80% of initial health assessments completed within 28 calendar days (20 working days) of a child or young person becoming looked after.	Department for Education (DfE) <i>Rationale: Align with local and national levels of ambition.</i>	Time period: 2022/23 to 2023/24 (1-year change) Kent: 39% to 43% ↑ Medway: 49% to 52% ↑ K&M combined: 40% to 44% ↑	From 2022/23 to 2023/24, Kent increased by 4 percentage points and Medway saw a 3 percentage point increase. Combined, Kent and Medway's overall percentage rose by 4 percentage points. 2024/25 data will be available in June 25.	Medway Council Public Health Intelligence Team
1.X	Asthma - Address over reliance on reliever medications; and decrease the number of asthma attacks in children.	TBC. Awaiting national agreement on CORE20PLUS5 indicators.		Indicator wording to be confirmed. Awaiting national agreement on CORE20PLUS5 indicators. To be reviewed against national inequalities metrics. Also, consider switching to asthma admissions deprivation gap as a proxy.	NHS K&M ICB
1.X	Diabetes - Increase access to real-time continuous glucose monitors and insulin pumps for children across the most deprived quintiles and from ethnic minority backgrounds.	TBC. Awaiting national agreement on CORE20PLUS5 indicators.		Indicator wording to be confirmed. Awaiting national agreement on CORE20PLUS5 indicators. To be reviewed against national inequalities metrics.	NHS K&M ICB
1.X	Increase proportion of children with Type 2 diabetes receiving recommended NICE care processes.	TBC. Awaiting national agreement on CORE20PLUS5 indicators.		Indicator wording to be confirmed. Awaiting national agreement on CORE20PLUS5 indicators. To be reviewed against national inequalities metrics.	NHS K&M ICB
1.X	Epilepsy - Increase access to epilepsy specialist nurses and ensure access in the first year of care for children with a learning disability or autism.	TBC. Awaiting national agreement on CORE20PLUS5 indicators.		Indicator wording to be confirmed. Awaiting national agreement on CORE20PLUS5 indicators. To be reviewed against national inequalities metrics.	NHS K&M ICB
1.X	Oral health - Tooth extractions due to decay for children admitted as inpatients in hospital, aged 10 years and under.	TBC. Awaiting national agreement on CORE20PLUS5 indicators.		Indicator wording to be confirmed. Awaiting national agreement on CORE20PLUS5 indicators. This is now part of the NHSE mandated health inequalities metrics: Reduce the gap	NHS K&M ICB

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				<p>for tooth extractions due to decay for children admitted as inpatients to hospital, aged 10 years and under caused by deprivation.</p> <p>There are likely to be significant data quality issues with this indicator as many extractions are performed in high street dentists on behalf of hospitals, but the data isn't necessarily available in hospital data.</p>	
1.X	Mental health - Improve access rates to children and young people's mental health services for 0-17 year olds, for certain ethnic groups, age, gender and deprivation.	TBC. Awaiting national agreement on CORE20PLUS5 indicators.		<p>Awaiting national agreement on CORE20PLUS5 indicators. Going to review against national inequalities metrics.</p> <p>Also, exploring creating an indicator related to children in care and mental health needs following stakeholder feedback.</p>	NHS K&M ICB

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

Narrative: 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.

Summary

Total indicators	6	Improved: ↓ / ↑	1	Unchanged/warning: → / ▲	3	Worsened: ↓ / ↑	2
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No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓ / ↑	Narrative	Reported by
2.1	By 2028/29, the proportion of people who feel lonely often or always will have reduced from 7.3% in 2020/21 to no more than 5% across Kent and Medway.	Office for National Statistics. Loneliness rates and well-being indicators by local authority. Table 1.1. <i>Rationale: Align more closely with best performing nearest neighbours in 2020/21. Dudley (Medway) and Worcestershire (Kent).</i>	Time period: 2020/21 Kent: 7.2% Medway: 7.7% K&M combined: 7.3% England: 7.3%	As of October 2024, only baseline data is available. The next release date by the Office for National Statistics is “to be announced”.	Medway Council Public Health Intelligence Team
2.2	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% in 2021/22 to above 10% in Kent and Medway.	NHS Digital. Adult Social Care Outcomes Framework (ASCOF). Indicator 1F. <i>Rationale: Align more closely with best performing nearest neighbours in 2021/22. Swindon (Medway) and Essex (Kent).</i>	Time period: 2021/22 to 2022/23 (1-year change) Kent: 8.0% to 7.0% ↓ Medway: 7.0% to 6.0% ↓ K&M combined: 8% to 7% ↓ England: 6.0% to 6.0% →	Over the one-year period from 2021/22 to 2022/23, both Kent and Medway experienced a decrease in their respective percentages, each dropping by 1 percentage point. This trend was mirrored in the combined data for Kent and Medway. In contrast, the percentage for England remained stable at 6.0%, showing no change during this period.	Medway Council Public Health Intelligence Team
2.3	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) will increase and go from worse than the national average to similar or better than the national average.	NHS Digital. Adult Social Care Outcomes Framework (ASCOF). Indicator 1E. <i>Rationale: Align performance with national trends to ensure ambitions are realistic and reflective of broader societal and economic conditions.</i>	Time period: 2021/22 to 2022/23 (1-year change) Kent: 4.0 to 3.9% → Medway: 1.8% to 2.6% ↑ K&M combined: 3.7% to 3.7% → England: 4.8% to 4.8% →	Over the one-year period from 2021/22 to 2022/23, Kent experienced a slight decrease, while Medway saw an increase. The combined data for Kent and Medway remained unchanged, as did the overall percentage for England, which showed no variation during this period.	Medway Council Public Health Intelligence Team
2.4	By 2028, the proportion of closed safeguarding enquires where risk is reduced or removed is better than the national percentage.	NHS Digital. Safeguarding adults. Section 42 and other enquiries. Table 3: Count of Concluded Section 42 Enquiries by Risk Assessment Outcome and Risk Outcome.	Time period: 2021/22 to 2023/24 (2-year change) Kent: 92% to 89% ↓ Medway: 96% to 98% ↑	Over the two-year period from 2021/22 to 2023/24, Kent experienced a decrease, while Medway saw an increase. The combined data for Kent and Medway also	Medway Council Public Health Intelligence Team

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		<i>Rationale: Align performance with national trends to ensure ambitions are realistic and reflective of broader societal and economic conditions.</i>	K&M combined: 93% to 89% ↓↓ England: 91% to 91% →	showed a decline. In contrast, the overall percentage for England remained stable, showing no change during this period.	
2.5	By 2028, smoking prevalence in adults in routine and manual occupations (18-64) will have decreased to 17% from 25.6% in Kent and 28.6% in Medway in 2020.	Office for Health Improvement and Disparities (OHID). Fingertips. Indicator ID: 92445 . <i>Rationale: The aspiration of 17% is based on a simple projection using England data from 2011 to 2022 and forecasting the data to 2028. This indicator is based on a survey estimate and therefore has a wide margin of uncertainty.</i>	Time period: 2020 to 2023 (3-year change) Kent: 25.6% to 17.0% ↓↓ Medway: 28.6% to 22.0% ↓↓ England: 24.5% to 19.5% ↓↓	Between 2020 and 2023, there was a notable decrease in the percentage figures across Kent, Medway, and England. Kent experienced the largest drop, followed by Medway, with England also showing a significant decline. This highlights a consistent downward trend in all three areas over the three-year period.	Medway Council Public Health Intelligence Team
2.6	By 2028, the rate of serious violence will be lower or similar compared to the national average.	Home Office Police recorded crime and outcomes open data tables • Homicide (Offence Subgroup) • Assault with injury (Offence Subgroup) • Robbery of personal property (Offence Description)	Time period: 2021/22 to 2022/23 (1-year change) Kent: 10.1 to 9.9 per 1,000 → Medway: 12.5 to 12.4 per 1,000 → K&M combined: 10.5 to 10.3 per 1,000 → England: 11.0 to 11.2 per 1,000 →	From 2020/21 to 2022/23, the rates in Kent, Medway and England have remained relatively consistent. Kent already meets the 2028 level of ambition and drives the combined Kent and Medway value to also meet the ambition.	Medway Council Public Health Intelligence Team
2.X	Economic indicators to be added.	TBC	N/A	Economic indicators to be added to align with priorities in the Kent & Medway Economic Framework, which may cover themes such as employment rates or attracting and supporting businesses. The Kent & Medway Economic partnership has committed to 5 high level ambitions with 21 action areas. The targets have not yet been agreed. Following approval at scrutiny committee recently, these will be turned into an implementation plan by June 2024. Indicator monitoring is being provided by the Kent Analytics team.	KCC KPHO via Kent Analytics team

No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓↓ / ↑↑	Narrative	Reported by
2.X	Housing indicators to be added.	TBC	N/A	The Kent Housing Group are in the process of identifying indicators related to housing for the Kent and Medway Integrated Care Strategy, which may cover themes such as homelessness prevention, affordable housing, social housing quality, and private rental safety standards.	Kent Housing Group via Medway Council Public Health Intelligence Team
2.X	Environmental indicators to be added.	TBC	N/A	Environmental indicators to be added. May include themes such as reducing emissions. Update to follow.	KCC Strategy

Shared outcome 3: Supporting happy and healthy living

Narrative: 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.

Summary

Total indicators	20	Improved: ↓ / ↑	6	Unchanged/warning: → / ▲	7	Worsened: ↓ / ↑	7
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No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓ / ↑	Narrative	Reported by
3.1	By 2028, the proportion of adults in Kent and Medway who are physically inactive will have fallen from 22.3% in 2020/21 to 20%.	OHID (Active Lives Adult Survey Sport England) Fingertips, Indicator ID: 93015. The weighted number of respondents aged 19 and over, with valid responses to questions on physical activity, doing less than 30 moderate intensity equivalent physical activity per week in bouts of 10 minutes or more in the previous 28 days. <i>Rationale: In line with best performing CIPFA nearest neighbour in 2020/21</i>	Time period: 2021/22 to 2022/23 (1-year change) England: 22.3% to 22.6% ↑ Kent and Medway: 20.8% to 20.9% → Kent: 20.6% to 20.4% → Medway: 20.9% to 25.1% ↑	From 2021/22 to 2022/23, self-reported physical inactivity increased in Kent & Medway combined. This change was driven by an increase in Medway, as the proportion decreased in Kent over the same time period. Rates for Kent & Medway were 4.2 % points lower than the England value.	KCC KPHO
3.2	By 2028, the proportion of adults in Kent and Medway who are overweight or obese will have fallen from 64.1% in 2020/21 to 62%.	OHID (based on the Active Lives Adult Survey, Sport England), Fingertips ID 93088. the number of adults aged 18+ with a BMI classified as overweight (including obesity). <i>Rationale: In line with best performing CIPFA nearest neighbour in 2020/21</i>	Time period: 2021/22 to 2022/23 (1-year change) England: 63.8% to 64% → Kent and Medway: 65.7% to 67.1% ↑ Kent: 65.8% to 67% ↑ Medway: 67.2% to 68.1% ↑	From 2021/22 to 2022/23, the proportion of overweight or obese adults increased in Kent, Medway and England. Rates in both Kent & Medway were 3.1% points higher than England in 2022/23.	KCC KPHO
3.3	By 2028, the gap in obesity rates in adults between the top and bottom local quintiles of deprivation in Kent and Medway will have reduced to 2%, from 3.3% in 2021/22.	Quality and Outcomes Framework (QOF), Fingertips, Indicator ID: 92588. The percentage of patients aged 18 or over with a BMI greater than or equal to 30 in the previous 12 months. <i>Rationale: Smallest combined gap in past 7 years</i>	Time period: 2021/22 to 2022/23 (1-year change) Kent & Medway Q1: 10.8% to 12.8% ↑ Kent & Medway Q5: 7.2% to 8.9% ↑ Kent & Medway gap: 3.6% to 3.9% ↑	From 2021/22 to 2022/23 obesity recorded in primary care as a proportion of adult patients increased in the most and least deprived quintiles of the population. The gap between the most and least deprived increased from 3.6% to 3.9%	KCC KPHO
3.4	By 2028, hospital admissions in Kent and Medway due to alcohol will have fallen from 418.7 in 2021/22 to 395 per 100,000.	OHID, Fingertips indicators 91414 and 93764. Admissions to hospital where the primary diagnosis is an alcohol-attributable	Narrow definition: Time period: 2021/22 to 2022/23 (1-year change) England: 494 to 475 per 100,000 ↓	From 2021/22 to 2022/23, admissions where primary diagnosis is an alcohol-attributable cause fell in Kent, Medway and	KCC KPHO

No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓↓ / ↑↑	Narrative	Reported by
		code, or a secondary diagnosis is an alcohol-attributable external cause code. <i>Rationale: In line with best performing CIPFA nearest neighbour in 2020/21</i>	Kent: 421 to 412 per 100,000 → Medway: 405 to 371 per 100,000 ↓ Broad definition: Time period: 2021/22 to 2022/23 (1-year change) England: 1734 to 1705 per 100,000 → Kent: 1521 to 1510 per 100,000 → Medway: 1432 to 1402 per 100,000 →	England. Rates for Kent remain above the target of 395 per 100,000. From 2021/22 to 2022/23, admissions where secondary diagnosis is an alcohol-attributable external cause decreased in Kent, Medway and England.	
3.5	By 2028, 75% of cancers will be diagnosed at stage 1 or stage 2 (CORE20PLUS5).	NHS Digital's National Disease Registration Service. Fingertips, Indicator ID: 93671 <i>Rationale: In line with national target</i>	Time period: 2020 to 2021 (1-year change) England: 52.3% to 54.4% ↑ Kent: 52.6% to 54.6% ↑ Medway: No data published	Between 2020 and 2021, the proportion of cancers being diagnosed at stage 1 or 2 has increased from 52.6% to 54.6%, which is higher than England for the same year. No data was published for Medway between 2019 and 2021.	KCC KPHO
3.6	By 2028, maintain the rate of emergency admissions for those with one or more long term condition to the level it was in 2024.	OBH LTC3	Time Period Jan 2023 – December 2023 Kent & Medway 1,537/100,000	From OBH data up to Dec 2023, average monthly figure. Previous data not available, hence no comparison available.	NHS K&M ICB
3.7	By 2028, the rate of emergency admissions for those who are frail will have reduced by at least 1.5% to the rate it was in 2018 (4,556 per 100,000).	OBH FD33	Time Period Jan 2023 – December 2023 Kent & Medway 4,206/100,000	From OBH data up to Dec 2023, average monthly figure. Previous data not available, hence no comparison available.	NHS K&M ICB
3.8	By 2028, diabetes complications such as stroke, heart attacks, amputations, etc., will have reduced by at least 10% (baseline 2018-19: 177 per 100,000).	OBH DM49	Time Period Jan 2023 – December 2023 Kent & Medway 167/100,000	From OBH data up to Dec 2023, average monthly figure. Previous data not available, hence no comparison available.	NHS K&M ICB
3.9	By 2028, the suicide rate for persons will be similar or better than the England average (England currently 10 per 100,000).	ONS Suicides in England and Wales by LA	Time period: 2020-2022 to 2021-2023 (1-year change over 3 year rolling rates) England: 10.9 to 10.7 per 100,000 → Kent and Medway: 11.9 to 11.7 per 100,000 → Kent: 12.1 to 11.7 per 100,000 → Medway: 10.6 to 12.0 per 100,000 ↑	Between 2020-2022 and 2021-2023 Suicide rates reduced from 11.9 per 100,000 to 11.7 per 100,000. England reduced by a similar proportion. Suicide rates in Kent and Medway remain higher than the rates for England.	KCC KPHO
3.10	By 2028, we will increase the proportion of people who receive long-term support who live in their home or with family.	NHS Digital. Adult Social Care Outcomes Framework (ASCOF). Indicator 2E.	Baseline and latest data not yet available.	This is a new ASCOF measure (2E), and the 2023/24 data is scheduled to be published by NHS Digital in December 2024.	Medway Council Public Health Intelligence Team

No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓↓ / ↑↑	Narrative	Reported by
		<i>Rationale: Increase this indicator, but exact value to increase to is not known as this is a new measure and the data is not yet published.</i>		DHSC. Guidance. The adult social care outcomes framework 2023 to 2024: handbook of definitions.	
3.11	By 2028, the mortality rate from drug misuse in Kent and Medway will remain at a similar level, which is similar to or better than the national average.	OHID. Fingertips. Indicator ID: 92432.	Time period: 2019-21 to 2020-22 (1-year change over 3 year rolling rates) England: 5.1 to 5.2 per 100,000 → Kent and Medway: 4.3 to 4.8 per 100,000 ↑ Kent: 4.2 to 4.5 per 100,000 ↑ Medway: 6.2 to 7.6 per 100,000 ↑	Between 2019-21 and 2020-22, the mortality rate from drug misuse in Kent, Medway and England increased. Kent was lower than the rate for England, however Medway was higher in 2020-22.	KCC KPHO
3.12	By 2028, the STI testing rate will increase, going from worse than the national average to similar or better.	OHID. Fingertips. Indicator ID: 91307.	Time period: 2022 to 2023 (1-year change) England: 3790.6 to 4110.7 per 100,000 ↑ Kent and Medway: 3114.25 to 3351.68 per 100,000 ↑ Kent: 3178.7 to 3284.3 per 100,000 ↑ Medway: 2751.0 to 3731.5 per 100,000 ↑	From 2022 to 2023, the STI testing rate in Kent, Medway and England have increased. Kent and Medway were both significantly below the testing rates for England in 2023.	KCC KPHO
3.13	By 2028, flu vaccination uptake for healthcare professionals will reach or exceed the WHO target of 75%.	Source: Federated Data Platform for K&M. Seasonal influenza vaccine uptake in frontline healthcare workers in England: winter season 2023 to 2024 - GOV.UK (www.gov.uk)	Time Period: 2022/23 to 2023/24 Kent & Medway 36.7% ↓ England 42.8% ↓	23/24 HCW from ESR (39.5%) and Self-Declared Workers (35.4%). 22/23 K&M Uptake 42.6%, England Uptake 49.9%.	NHS K&M ICB
3.14 2 parts	By 2028, flu vaccination uptake for at-risk groups will reach or exceed the WHO target of 75%.	Source: Federated Data Platform for K&M	Time Period: 2022/23 to 2023/24 Kent & Medway Aged 65+ 78.6% ↓ Kent & Medway At Risk 55.25% ↑	2022/23 65+ 79.7% 2022/23 At Risk 53.95%.	NHS K&M ICB
3.15	By 2026, bowel cancer screening will meet or exceed the national acceptable performance level of 52%.	Office for Health Improvement and Disparities. (OHID). Fingertips. Indicator ID: 91720. <i>Rationale: Based on the NHS England performance thresholds:</i> - Acceptable level: ≥ 52% - Achievable level: ≥ 60% Bowel cancer screening programme standards.	Time period: 2022 to 2023 (1-year change) Kent: 72.1% to 73.8% ↑ Medway: 68.3% to 70.1% ↑ K&M combined: 71.6% to 73.3% ↑ England: 70.3% to 72.0% ↑	Over the one-year period from 2022 to 2023, Kent, Medway, and the combined data for Kent and Medway all experienced increases. Similarly, the overall percentage for England also saw an upward trend during this period.	Medway Council Public Health Intelligence Team
3.16		Office for Health Improvement and Disparities. (OHID).	Aged 25 to 49 years old Time period: 2022 to 2023 (1-year change)	Over the one-year period from 2022 to 2023, Kent, Medway, and the combined	Medway Council

No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓↓ / ↑↑	Narrative	Reported by
2 parts	By 2026, cervical cancer screening will meet or exceed the national acceptable performance level of 80%.	Indicator IDs: 93560 & 93561 . <i>Rationale: Based on the NHS England performance thresholds:</i> - Acceptable level: ≥ 80% Cervical screening programme screening standards.	Kent: 71.2% to 69.5% ↓↓ Medway: 69.6% to 68.3% ↓↓ K&M combined: 71.0% to 69.3% ↓↓ England: 67.6% to 65.8% ↓↓ Aged 50 to 64 years old Time period: 2022 to 2023 (1-year change) Kent: 74.5% to 74.4% → Medway: 73.1% to 73.6% → K&M combined: 74.3% to 74.3% → England: 74.6% to 74.4% →	data for Kent and Medway all experienced decreases. Similarly, the overall percentage for England also saw a decline during this period. Over the one-year period from 2022 to 2023, the percentages for Kent, Medway, and the combined data for Kent and Medway remained relatively stable, with only slight changes. Similarly, the overall percentage for England showed minimal variation during this period.	Public Health Intelligence Team
3.17	By 2026, breast cancer screening will meet or exceed the national acceptable performance level of 70%.	Office for Health Improvement and Disparities. (OHID). Fingertips. Indicator ID: 22001 . <i>Rationale: Based on the NHS England performance thresholds:</i> - Acceptable level: ≥ 70% - Achievable level: ≥ 80% Breast screening programme screening standards.	Time period: 2022 to 2023 (1-year change) Kent: 67.6% to 66.5% ↓↓ Medway: 61.5% to 63.7% ↑↑ K&M combined: 66.7% to 66.1% ↓↓ England: 65.2% to 66.2% ↑↑	Over the one-year period from 2022 to 2023, Kent decreased by 1.1 percentage points, while Medway increased by 2.2 percentage points. This led to a slight overall decline in the combined data for Kent and Medway.	Medway Council Public Health Intelligence Team
3.18	By 2028, at least 75% of people aged 14 or over with a learning disability will have had an annual health check.	<i>K&M data: Extracted from the NHS data warehouse, enhanced by local GP data.</i> England data: NHS Digital. Learning Disabilities Health Check Scheme. <i>Rationale: Level of ambition set in the NHS Long Term Plan.</i>	Time period: 2022/23 to 2023/24 (1-year change) NHS K&M ICB: 72.8% to 76.9% ↑↑ England: 78.13% to 77.55% ↓↓	There is a discrepancy between our local K&M data and the data published by NHS Digital. This is due to errors in SNOMED codes. Practices in K&M have cleaned their data locally, but it was not possible to resubmit the data to NHS Digital.	Medway Council Public Health Intelligence Team

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

Narrative: 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.

Summary

Total indicators	9	Improved: ↓ / ↑	2	Unchanged/warning: → / ▲	6	Worsened: ↓ / ↑	1
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No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓ / ↑	Narrative	Reported by
4.1	By 2028, 67% of patients with long term conditions say they have had enough support from local services or organisations in the last 12 months.	GP survey	Time period: GP Survey March 2024 Yes, definitely: 28% ↑ Yes, to some extent: 37% → Overall Yes: 65% ↑ National: 67.8%	Previous Survey Yes, definitely: 25% Yes, to some extent: 37% Overall: 62%	NHS K&M ICB
4.2	By 2028, the people describing their overall experience of making a GP appointment as good will have increased from 49% in 2022 to at least 60%.	GP survey	Removed from GP survey for 2024. 15 indicators around appointments, but not an overall question.	In discussion at the moment to change indicator. Has been retired from GP survey.	NHS K&M ICB
4.3	By 2028/29, the inequality in unplanned hospitalisation for chronic ambulatory care sensitive conditions will have reduced. The ratio of the rate between the most and least deprived 20% of the population will have fallen below 2.0, and will be similar to or lower than the national average.	NHS Digital. Hospital Episode Statistics.	Time period: 2021/22 to 2022/23 (1-year change) Kent & Medway ratio: 2.11 to 1.97 ↓ England ratio TBC	The ratio on admissions between the most and least deprived quintiles of the population fell from 2.11 to 0.97 in Kent & Medway between 2021/22 and 2022/23. Values for England are yet to be confirmed and have only been published up to 2020/21.	KCC KPHO
4.4	By 2028, the proportion of carers who report that they are very satisfied or extremely satisfied with social services will have improved from 31.9% in 2020/21 to at least 45%.	Survey of Adult Carers in England (SACE) taken from ASCOF <i>Rationale: In line with best performing CIPFA nearest neighbour</i>	Time period: 2018/19 to 2021/22 (3-year change) Kent and Medway: 40.0% to 31.9% ↓ England: 38.6% to 36.3% ↓	Kent & Medway saw a reduction by 8.1 % points in satisfaction amongst survey respondents between 2018/19 and 2021/22. Kent & Medway was lower than England in 2021/22 by 4.4 % points.	KCC KPHO
4.5	By 2028, reduce the rate of emergency admissions for those with learning disabilities from the 2024 baseline.	Enhanced Case Finder	Time Period: Sep 2023 - August 2024 Kent & Medway 9,609/100,000	12,303 registered as Learning Disability, 1,156 emergency admissions to Aug 2024.	NHS K&M ICB

No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓↓ / ↑↑	Narrative	Reported by
4.6	Maintain the Talking Therapies recovery rate at the 2024 value		Time Period: June 2024 Kent: 50% Medway: 47.4%		NHS K&M ICB
4.7	There will be an increasing percentage of patients with high or very high needs being supported through INTs as evidenced by having active care plans.			Metric still being devised with clinical leads.	NHS K&M ICB
4.8	By 2028, the proportion of deaths in hospital across Kent and Medway will reduce from 41% to 36%.	OHID, Fingertips indicator 93474. The annual percentage of registered deaths in each area for persons and where the place of death is recorded as hospital. <i>Rationale: In line with best performing CIPFA nearest neighbour in 2020/21</i>	Time Period: 2021 – 2022 Kent & Medway all ages: 38.6% ↓ England: 43.4% ↓	Source: Fingertips	NHS K&M ICB
4.9	By 2027 we will have implemented our organisational carers strategies.			Work in progress. Carers' Network has been established in NHS K&M ICB.	NHS K&M ICB

Shared outcome 5: Improve health and care services

Narrative: 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.

Summary

Total indicators	8	Improved: ↓ / ↑	4	Unchanged/warning: → / ▲	3	Worsened: ↓ / ↑	1
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No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓ / ↑	Narrative	Reported by
5.1	By 2025 we will meet national expectations for patients with length of stay of 21+ days who no longer meet with criteria to reside.	SUS data	Time Period Jul 2024 – Aug 2024 Kent & Medway: 23.23 ↑		NHS K&M ICB
5.2	By 2028, reduce readmissions for frail patients.	OBH	Time Period Jan 2023 to Dec 2023 Kent & Medway: 1,261 / 100,000	Data to Dec 2023	NHS K&M ICB
5.3	By 2025, percentage of 2-hour urgent community response referrals that achieved the 2-hour standard will be at or above the national standard.	UCR stats available from nationally at ICB level	Time Period June 2024 – July 2024 Kent & Medway 84% → National 84%	Latest Data: Jul 2024	NHS K&M ICB
5.4	Inappropriate out of area mental health placements will be at or close to zero.	Available nationally	Time Period June 2024 to July 2024 Kent & Medway: 10 ↓	Kent & Medway June 24: 15	NHS K&M ICB
5.5	By 2028, the percentage of patients spending more than 12 hours in an emergency department before admission matches best performing nearest neighbours.	Available nationally Source: IPR. Data 2024-08	Time Period June 2024 to July 2024 5.72% ↓	Comparison to neighbours not available as this is a locally calculated metric	NHS K&M ICB
5.6	By 2028, ambulance handover delays greater than 60 minutes matches best performing nearest neighbours.	Available nationally UEC sitrep	Time Period June 2024 to July 2024 Kent & Medway Trusts Average 0.19% ↓ South East Region Ex K&M Trusts 1.6% ↓		NHS K&M ICB

No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓↓ / ↑↑	Narrative	Reported by
5.7	By 2028, waits for diagnostics will meet national ambitions.	Available nationally	Time Period: June 2024 to July 2024 75.75% ↑	Diagnostics < 6 week wait.	NHS K&M ICB
5.8	By 2028/29, the proportion 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% (2021/22: Kent 84.5%) and in Medway to be similar to, or higher than, our statistical neighbours (2021/22: Medway lower at 61.7%).	NHS Digital. Adult Social Care Outcomes Framework (ASCOF). Indicator 2B(1). <i>Rationale: Kent and Medway have distinct baseline values. Kent aims to maintain its performance, while Medway seeks to improve and align with its statistical neighbours.</i>	Time period: 2021/22 to 2022/23 (1-year change) Kent: 84.5% to 80.6% ↓ Medway: 61.7% to 69.6% ↑ England: 81.8% to 82.3% ↑	Kent: Performance has declined from 84.5% to 80.6% over the past year, moving further away from the 85% level of ambition. Medway: Performance has significantly improved from 61.7% to 69.6% over the past year. Despite this progress, Medway remains the lowest-performing council in its peer group.	Medway Council Public Health Intelligence Team

Shared outcome 6: Support and grow our workforce

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

Summary

Total indicators	16	Improved: ↓ / ↑	0	Unchanged/warning: → / ▲	16	Worsened: ↓ / ↑	0
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Rationale for all indicators: Based on each organisation's baseline data and/or the level of ambition stated in local strategies, choosing the lowest level to ensure it is achievable and realistic for all organisations.

No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓ / ↑	Narrative	Reported by
6.1	By 2028, all organisations achieve a staff turnover rate of 12% or less.	Individual organisation HR data. KCC: : KCC PowerBI Medway Council: Resourcelink NHS K&M ICB: eProduct <i>Definition: Includes all staff. Voluntary and involuntary. NHS K&M ICB to exclude junior doctors.</i>	Time period: 2023/24 KCC: 11.9% Medway Council: 16% NHS K&M ICB: 11.6%	Relates to priority 1: Grow our skills and workforce. As of October 2024, only baseline data is available. The next data will be reported in: KCC: April 2025 Medway Council: April 2025 NHS K&M ICB: March 2025	Data collated by Medway Council Public Health Intelligence Team from: Medway Council KCC NHS K&M ICB
6.2	By 2028, the staff vacancy rate of all organisations will have reduced to 7%.	Individual organisation HR data KCC and Medway Council: Vacancy rate not currently recorded. NHS K&M ICB: Tableau / ESR - Vacant WTE / Establishment WTE	Time period: 2023/24 KCC: N/A Medway Council: N/A NHS K&M ICB: 7.3%	Relates to priority 1: Grow our skills and workforce. As of October 2024, only baseline data is available. The next data will be reported in: NHS K&M ICB: March 2025 Currently, Kent County Council and Medway Council do not have systems that enable vacancy rate to be reported. Both organisations will aim to report this in the future.	Data collated by Medway Council Public Health Intelligence Team from: NHS K&M ICB
6.3	By 2028, 80% of employees in Kent County Council and Medway Council report that	Individual organisation staff surveys.	Time period: 2023/24 to 2024/25 (1-year change) KCC: 75.4%	Relates to priority 1: Grow our skills and workforce.	Data collated by Medway Council

No.	Objectively verifiable indicators (OVIs)	Means of verification (MOV)	Data with trend Time period: Baseline to latest value Status Improved: ↓ / ↑ Unchanged/warning: → / ▲ Worsened: ↓↓ / ↑↑	Narrative	Reported by
	<p>they are able to access the right learning and development opportunities.</p> <p>By 2028, 65% of employees in NHS K&M ICB report that they feel supported to develop their potential.</p>	<p>Currently, the staff surveys questions related to learning and development are different between the organisations. MC and KCC surveys emphasise access to learning and development opportunities. In contrast, the NHS staff survey focuses on staff feeling supported to develop their potential. Consequently, the indicators have been phrased differently with varying levels of ambition for the councils and NHS. However, all organizations will aim to standardise their survey questions in the future.</p> <p><i>KCC I am able to access the right work-related learning & development opportunities to support my role</i></p> <p><i>Medway Council: I'm able to access the right L&D opportunities.</i></p> <p><i>NHS K&M: I feel supported to develop my potential.</i></p>	<p>Medway Council: 72% to 67% ↓</p> <p>NHS K&M ICB: 58.6%</p>	<p>As of October 2024, only baseline data is available for KCC and NHS K&M ICB. The next data will be reported in:</p> <p>KCC: March 2025</p> <p>NHS K&M ICB: March 2025</p>	<p>Public Health Intelligence Team from:</p> <p>Medway Council / KCC / NHS K&M ICB</p>
6.4	<p>By April 2028, at least 95% of employees have completed their organisation's mandatory leadership training.</p>	<p>Individual organisation workforce development data.</p> <p>KCC: iShare: L&Ds course booking system.</p> <p>Medway Council: Resourcelink and establishment list of all managers with line management responsibility.</p> <p>NHS K&M ICB: Currently not recorded.</p>	<p>KCC: 2023/24: 97.9%</p> <p>Medway Council: Total to date (Aug 2024): 50%.</p> <p>NHS K&M ICB: N/A</p>	<p>Relates to priority 1: Grow our skills and workforce.</p> <p>KCC: Managing in KCC is a mandatory programme that is well established and ensures that our managers have the core leadership and management skills required.</p> <p>Medway Council: The Complete Medway Manager training suite: running every four months for new managers.</p> <ul style="list-style-type: none"> - Pilot phase April 2023 - Evaluation of Pilot - Jan-March 2024: average 30% managers attended across the three sessions. - April-June 2024: an average of 30% remaining managers attended across the three sessions 	<p>Data collated by Medway Council Public Health Intelligence Team from:</p> <p>Medway Council KCC</p>

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				- Total to date (Aug 2024): 50% NHS K&M ICB do not currently have comparable training delivered and reported on at system level.	
6.5	By 2028, 65% of employees would recommend their organisation as a place to work.	Individual organisation staff surveys currently have different question wording, but they aim to standardise it over time. <i>KCC: I would recommend KCC as a great place to work.</i> <i>Medway Council: I would recommend the council as a place to work.</i> <i>NHS K&M ICB: I would recommend my organisation as a place to work.</i> Look to align question wording in time.	Time period: 2023/24 to 2024/25 KCC: 66.3% Medway Council: 62% (2022) to 67% (2024) ↑ NHS K&M ICB: 60.3%	As of October 2024, only baseline data is available for KCC and NHS K&M ICB. The next data will be reported in: KCC: March 2025. NHS K&M ICB: March 2025	Data collated by Medway Council Public Health Intelligence Team from: Medway Council KCC NHS K&M ICB
6.6	By 2028, all organisations will have made progress towards workforce mobility.	N/A	N/A	Specific data for this indicator is currently unavailable. Future reports will include a summary of the organisations' progress towards workforce mobility.	Data collated by Medway Council Public Health Intelligence Team from: Medway Council KCC NHS K&M ICB
6.7	By 2028, all organisations will achieve a minimum staff survey participation rate of 55%.	Individual organisation staff surveys.	KCC: 47% (2023) Medway Council: 58% (2022) to 58% (2024) ✓ NHS K&M ICB: 53.5% (2023/24)	The Kent County Council staff survey does not include a specific question to enable reporting. However, future surveys will aim to include it. As of October 2024, only baseline data is available for KCC and NHS K&M ICB. The next data will be reported in NHS K&M ICB: March 2025	Data collated by Medway Council Public Health Intelligence Team from: Medway Council KCC NHS K&M ICB

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6.8	By 2028, 90% of employees feel that their role makes a difference to patients / service users / residents.	Individual organisation staff surveys currently have different question wording, but they aim to standardise it over time. <i>KCC: Currently not recorded.</i> <i>Medway Council: One of the main reasons I work at the council is to make a positive impact on society/our residents.</i> <i>NHS K&M ICB: I feel that my role makes a difference to patients / service users.</i>	KCC: N/A Medway Council: 73% (2022) to 79% (2024) ↑ NHS K&M ICB: 87.6% (2023/24)	The Kent County Council staff survey does not include a specific question to enable reporting. However, future surveys will aim to include it. As of October 2024, only baseline data is available for NHS K&M ICB. The next data will be reported in: March 2025.	Data collated by Medway Council Public Health Intelligence Team from: Medway Council KCC NHS K&M ICB
6.9	By 2028, 65% of employees feel that their manager/organisation takes positive action on health and wellbeing.	Individual organisation staff surveys currently have different question wording, but they aim to standardise it over time. <i>KCC: I believe that positive action will be taken in response to issues I raise relating to my individual needs.</i> <i>Medway Council: The council provides me with the wellbeing support I need.</i> <i>NHS K&M ICB: My organisation takes positive action on health and well-being.</i>	KCC: 67.4% Medway Council: 60% (2022) to 55% (2024) ↓ NHS K&M ICB: 60.5%	As of October 2024, only baseline data is available for KCC and NHS K&M ICB. The next data will be reported in: KCC: March 2025 NHS K&M ICB: March 2025	Data collated by Medway Council Public Health Intelligence Team from: Medway Council KCC NHS K&M ICB
6.10	By 2028, the staff sickness absence rate will have reduced by 6%.	Individual organisation HR data. KCC: Power BI Dashboards Medway Council: Resourcelink <i>Definition: Days lost per FTE. End of year figures rather than rolling.</i> NHS K&M ICB: Tableau/ESR <i>Definition: Total WTE (whole time equivalent) days sick over 12 month period divided by total WTE days available over 12 month period, as a percentage.</i>	KCC: 8.24 days per FTE (2023/24) Medway Council: 10.0 days per FTE (1.4.23 – 31.3.24) NHS K&M ICB: 4.5% (March 2024)	NHS K&M ICB is currently investigating the feasibility of reporting lost days. Have not currently been able to report absence in comparable way	Data collated by Medway Council Public Health Intelligence Team from: Medway Council KCC NHS K&M ICB

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6.11	By 2028, staff organisational diversity declaration rates will be at least 95% for the following protected characteristics; age, disability, ethnicity, faith/religion, gender, sexual orientation and transgender.	KCC: ORACLE Medway Council: Resourcelink NHS K&M ICB: Workforce Intelligence Portal (eproduct)	Age KCC: 100% (2011) Medway Council: 100% (April 2024) NHS K&M ICB: 100% (March 2024) Disability KCC: 92% Medway Council: 60% NHS K&M ICB: 81% Ethnicity KCC: 91% Medway Council: 94% NHS K&M ICB: 93% Faith or religion KCC: 84% Medway Council: 69% NHS K&M ICB: 75% Gender (Female) KCC: 100% Medway Council: 100% NHS K&M ICB: 100% Sexual orientation KCC: 83% Medway Council: 69% NHS K&M ICB: 80% Transgender KCC: 61% Medway Council: Not recorded NHS K&M ICB: Not recorded	As of October 2024, only baseline data is available for KCC and NHS K&M ICB. The next data will be reported in: KCC: April 2025 Medway Council: March 2025 The transgender option has only just been added to the system in Medway Council. Our focus for the next year will be increasing the declaration for that characteristic. NHS K&M ICB: March 2025 Transgender information not collated or held on NHS HR system.	Data collated by Medway Council Public Health Intelligence Team from: Medway Council KCC NHS K&M ICB
6.12	By 2028, each organisation's workforce is representative compared to the general working age population for the following protected characteristics; age, disability,	Individual organisation HR data. KCC: PowerBI Dashboards	Age (16 to 29 years) KCC: - Workforce: 12.6% (March 2024) - Population: 15.5% Medway Council:	As of October 2024, only baseline data is available for KCC and NHS K&M ICB. The next data will be reported in: KCC: March 2025	Data collated by Medway Council Public Health Intelligence Team from:

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	ethnicity, faith/religion, gender, sexual orientation and transgender.	Medway Council: Resourcelink NHS K&M ICB: Workforce Intelligence Portal (eproduct) Population data: Nomis. Census 2021.	<div> - Workforce: 3.4% (April 2024) - Population: 16.9% NHS K&M ICB: - Workforce: 15.8% (July 24) - Population: 15.7% </div> <div> Disability KCC - Workforce: 5.8% - Population: 17.8% Medway Council - Workforce: 5.7% - Population: 17.4% NHS K&M ICB - Workforce: 7% - Population: 17.8% </div> <div> Ethnicity (Non-white groups) KCC - Workforce: 9.4% - Population: 10.6% Medway Council - Workforce: 14.4% - Population: 15.7% NHS K&M ICB - Workforce: 32% - Population: 11.4% </div> <div> Faith or religion KCC - Workforce: 45.7% - Population: 53.4% Medway Council - Workforce: 68.5% - Population: 54.5% NHS K&M ICB: - Workforce: 61% - Population: 56.3% </div> <div> Gender (Female) KCC - Workforce: 79.7% </div>	Medway Council: March 2025 The transgender option has only just been added to the system in Medway Council. Our focus for the next year will be increasing the declaration for that characteristic. NHS K&M ICB: March 2025 Transgender information not collated or held on NHS HR system.	Medway Council KCC NHS K&M ICB

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			<ul style="list-style-type: none"> - Population: 51.2% Medway Council: <ul style="list-style-type: none"> - Workforce: 74.6% - Population: 51.0% NHS K&M ICB: <ul style="list-style-type: none"> - Workforce: 77% - Population: 51.2% Sexual orientation (LGBTQ+) KCC <ul style="list-style-type: none"> - Workforce: 3.4% - Population: 2.7% Medway Council: <ul style="list-style-type: none"> - Workforce: 3.6% - Population: 3.0% NHS K&M ICB: <ul style="list-style-type: none"> - Workforce: 3% - Population: 2.9% Transgender KCC <ul style="list-style-type: none"> - Workforce: 0.3% - Population: 0.2% Medway Council: <ul style="list-style-type: none"> - Not recorded NHS K&M ICB: Workforce <ul style="list-style-type: none"> - Not recorded 		
6.13	By 2028, each organisation will achieve a 2% increase in the percentage of employees who rate their workplace as inclusive.	Individual organisation staff surveys currently have different question wording, but they aim to standardise it over time. <i>KCC: This is an aggregate score for the questions that make up the inclusion section of KCC's survey.</i> <i>Medway Council: I feel comfortable to be myself at work without fear of discrimination.</i> <i>NHS K&M ICB: Summary score "We are compassionate and inclusive".</i>	KCC: 82.1% (2023) Medway Council: 82.6% (2024) NHS K&M ICB: 73% (2023/24)	As of October 2024, only baseline data is available for KCC and NHS K&M ICB. The next data will be reported in: KCC: March 2025 Medway Council: June 2025 NHS K&M ICB: March 2025	Data collated by Medway Council Public Health Intelligence Team from: Medway Council KCC NHS K&M ICB

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		<i>I think that my organisation respects individual differences (e.g. cultures, working styles, backgrounds, ideas, etc).</i>			
6.14	By 2028, the gender pay gap will have reduced by 10%.	KCC: ORACLE Medway Council: Resourcelink NHS K&M ICB: GOV.UK. Search and compare gender pay gap data. <i>Definition: Mean hourly pay.</i>	KCC: 10.9% (2023/24) Medway Council: 6.91% (2023/24) NHS K&M ICB: 22% (2023/24)	KCC: March 2025 Medway Council: March 2025 NHS K&M ICB: March 2025	Data collated by Medway Council Public Health Intelligence Team from: Medway Council KCC NHS K&M ICB
6.15	By 2028, the proportion of staff who experienced internal harassment, bullying or abuse will have reduced by 2%.	Individual organisation staff surveys currently have different question wording, but they aim to standardise it over time. <i>KCC: In the last 12 months have you experienced harassment, bullying or abuse at work.</i> <i>Medway Council: New question for 2024:</i> <i>(i) During the last 12 months have you personally experienced discrimination or harassment while working here</i> <i>(ii) If so, what was the nature of the discrimination or harassment (select from the Protected Characteristics – Equality Act 2010)</i> <i>(iii) During the past 12 months have you personally experienced bullying behaviour while working</i> <i>NHS K&M ICB:</i> <i>- In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from managers?</i> <i>- In the last 12 months how many times have you personally experienced</i>	KCC: 4.4% (2023) Medway Council: - Discrimination/harassment: 6% (2024) - Bullying: 8% (2024) NHS K&M ICB: - From Managers: 10.7% (2023/24) - From other colleagues: 18% (2023/24)	KCC: March 2025. Medway Council: June 2025 NHS K&M ICB: March 2025	Data collated by Medway Council Public Health Intelligence Team from: Medway Council KCC NHS K&M ICB

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		<i>harassment, bullying or abuse at work from other colleagues?</i>			
6.16	By 2028, the proportion of staff who experienced external harassment, bullying or abuse will have reduced by 2%.	<p>Individual organisation staff surveys currently have different question wording, but they aim to standardise it over time.</p> <p><i>KCC: In the last 12 months have you experienced harassment, bullying or abuse at work.</i></p> <p><i>Medway Council: In the last year have you experienced bullying, if yes by whom- Partners/Providers/Clients/Members of the public.</i></p> <p><i>NHS K&M ICB: In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from patients / service users, their relatives or other members of the public?</i></p>	<p>KCC: 11.4% (2023)</p> <p>Medway Council: - Discrimination/harassment: 1.2% (2024) - Bullying: 0.6% (2024)</p> <p>NHS K&M ICB: 26% (2023/24)</p>	<p>KCC: March 2025</p> <p>Medway Council: June 2025</p> <p>NHS K&M ICB: March 2025</p>	<p>Data collated by Medway Council Public Health Intelligence Team from:</p> <p>Medway Council KCC NHS K&M ICB</p>