

ONE MEDWAY COUNCIL PLAN

2024/28

Proud to be Medway



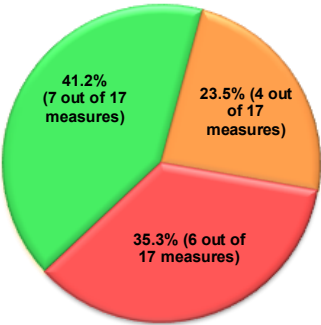
Q4 2024/25 Health & Social Care Overview & Scrutiny Committee

Summary of all performance indicators

There are 24 performance indicators for the One Medway Council Plan 2024/28 relevant to this committee.

Appendix 1

Performance

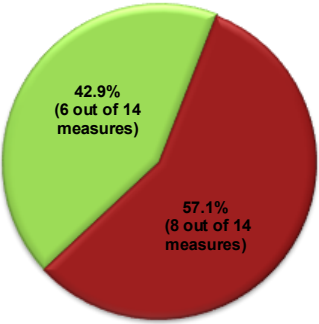


Performance - key
Green means met or exceeded target
Amber means slightly below target
Red means significantly below target

This chart shows the performance for 17 measures as 7 are unavailable:

- 41.2% (7 out of 17 measures) met or exceeded target.
- 23.5% (4 out of 17 measures) were slightly below target (less than 5%).
- 35.3% (6 out of 17 measures) were significantly below target (more than 5%).

Direction of Travel



Direction of Travel - key
Green means positive travel
Blue means static
Red means negative travel

This chart shows the direction of travel for 14 measures:

- 42.9% (6 out of 14 measures) had an upward long trend.
- 0.0% (0 out of 14 measures) had a static long trend.
- 57.1% (8 out of 14 measures) had a downward long trend.

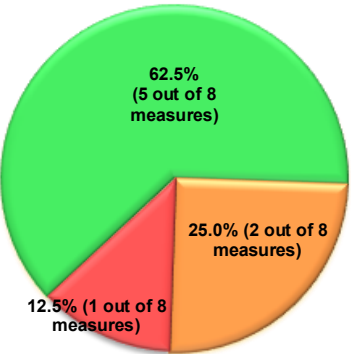
Delivering quality social care and community services

- Provide effective, targeted support for our most vulnerable residents to enable them to fulfil their potential and improve their quality of life.
- Support people of all ages to live the most happy, healthy, independent life possible, utilising assistive technologies.
- Ensure that services support children in care to thrive, fulfil their potential, build meaningful relationships and make good transitions to adulthood, so that they can live as independent lives as possible in their communities.
- Provide creative, cultural and community services and facilities across Medway that everyone can access and benefit from.
- Support our children and young people to ensure they are safe, secure and stable.
- Support all adults, including those living with disability or physical or mental illness to live independently and stay safe.
- People in Medway live independent and fulfilled lives into an active older age.

Summary of all performance indicators for this priority

There are 12 performance indicators for the One Medway Council Plan 2024/28 which fall under this priority.

Performance

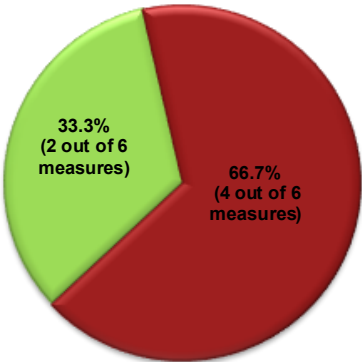


Performance - key
Green means met or exceeded target
Amber means slightly below target
Red means significantly below target

This chart shows the performance for 8 measures as 4 are unavailable:

- 62.5% (5 out of 8 measures) met or exceeded target.
- 25.0% (2 out of 8 measures) were slightly below target (less than 5%).
- 12.5% (1 out of 8 measures) were significantly below target (more than 5%).

Direction of Travel



Direction of Travel - key
Green means positive travel
Blue means static
Red means negative travel

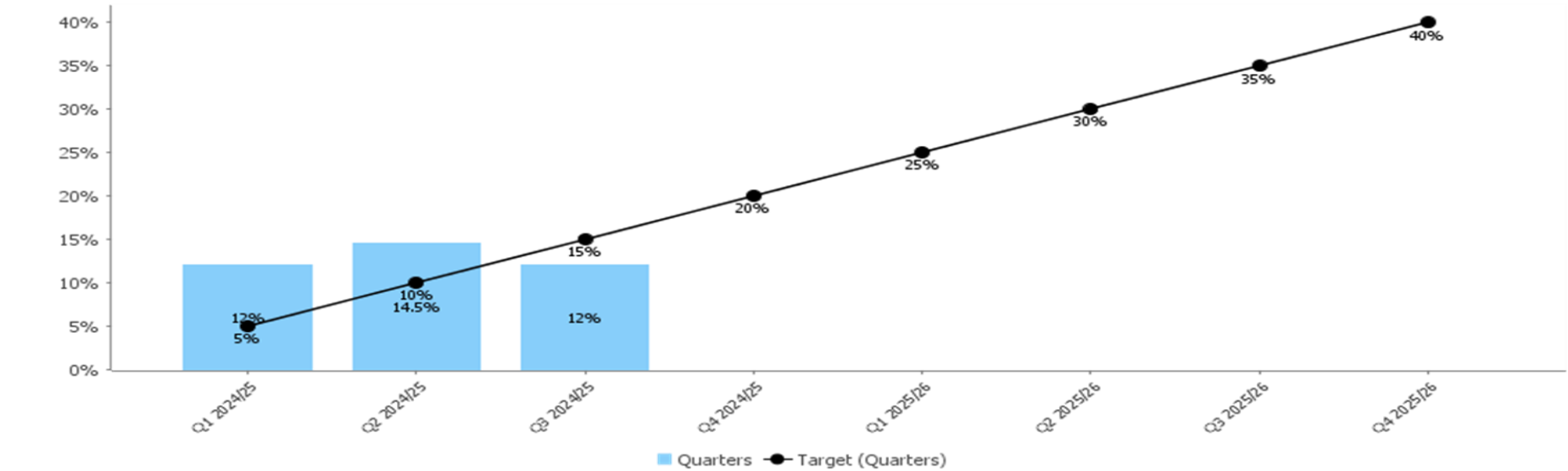
This chart shows the direction of travel for 6 measures:

- 33.3% (2 out of 6 measures) had an upward long trend.
- 0.0% (0 out of 6 measures) had a static long trend.
- 66.7% (4 out of 6 measures) had a downward long trend.

Provide effective, targeted support for our most vulnerable residents to enable them to fulfil their potential and improve their quality of life

- 1.02 Commissioned domiciliary care workers MECC training

Appendix 1



Aim to Maximise
Red (downward long trend)

Reported in arrears. By 2027/28, 80% of commissioned domiciliary care workers will have undertaken Making Every Contact Count (MECC) training. The contract requires 20% of all staff to be trained in MECC by the end of year one, and for each year thereafter, giving a total of 80% of staff trained by the end of the contract 31 March 2028. For KPI reporting purposes, the number of staff to have undergone training is broken down into 5% for each quarter. There are four upcoming MECC training slots. Each training sessions accommodates 18 people. Providers were informed of the available MECC training sessions during monthly contract management meetings and reminded to book as soon as possible.

Outcome

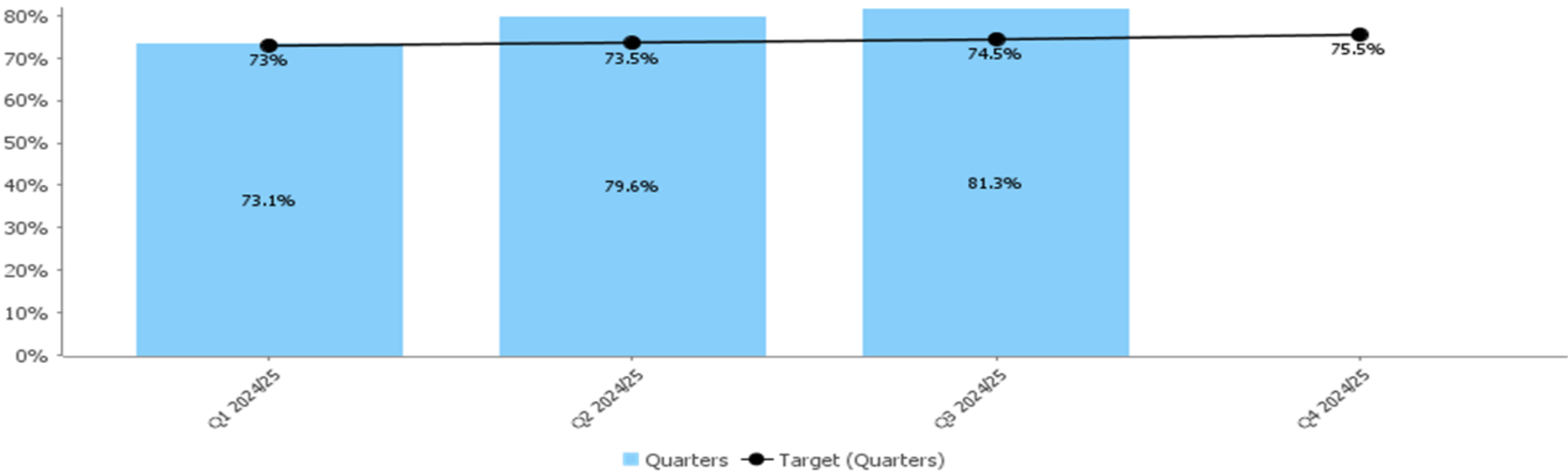
During Q3, 12% of the providers workforce had undergone MECC training. The target of 15% has not been met. This may be due to one of the homecare providers leaving the framework and an increase in employed staff.

Actions

There are discussions taking place with the workforce development team to offer additional and bespoke MECC Bitesize training sessions for the homecare providers. During a monthly contract meeting, providers shared their preferences for training times and dates. This information has been forwarded to the workforce development team, who will arrange suitable training slots to encourage attendance and help work towards meeting the KPI target

Provide effective, targeted support for our most vulnerable residents to enable them to fulfil their potential and improve their quality of life
- 1.03 By 2027/28 the proportion of people who received short-term services during the year, who previously were not receiving services, where no further request was made for ongoing support have increased to 80%

Appendix 1



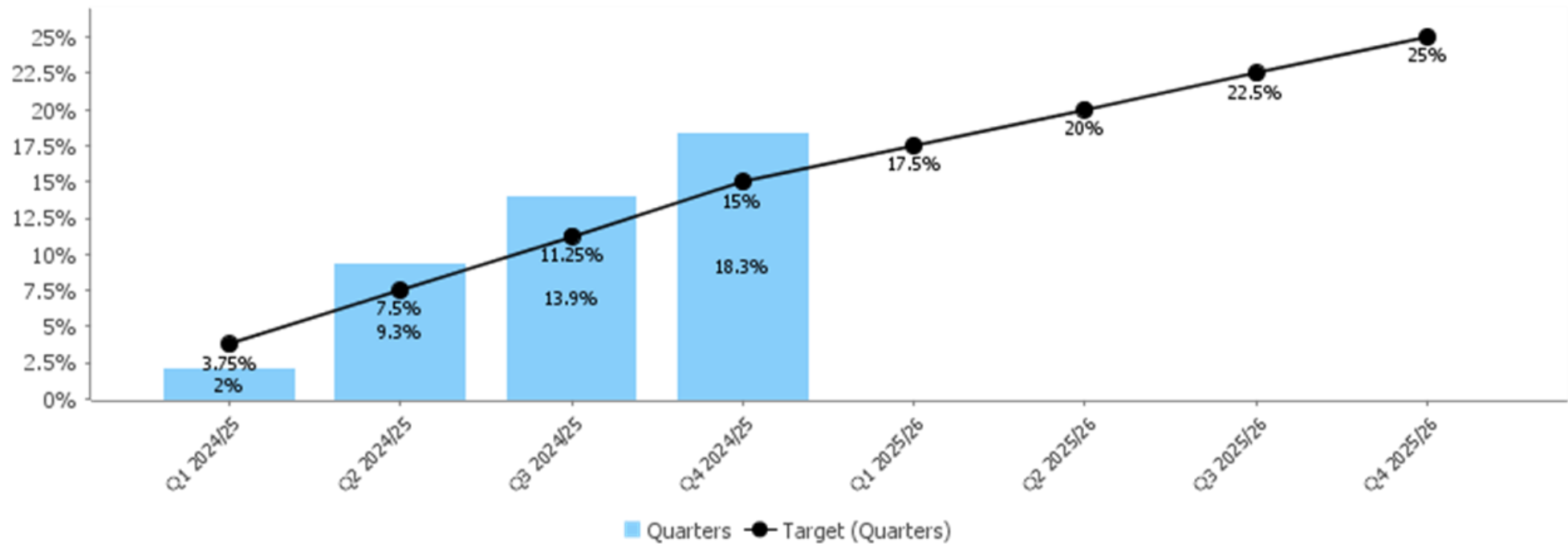
Aim to Maximise
Data unavailable (no long trend)

Due to a data incident within MCH the data needed to calculate this measure for December is not available. The social work and occupational therapy pilot in place in locality 1 has proved successful in preventing, reducing and delaying the need for ongoing services and has produced positive outcomes. This has been achieved through identifying where joint visits, at an early opportunity, can be undertaken to provide advice & signposting, equipment or an enablement package of care to maximise independence. Transformation funding has been agreed to roll out the is pilot during Q2 across in Early Help & Preventing Localities 2&3.

Support people of all ages to live the most happy, healthy, independent life possible, utilising assistive technologies

- 1.04 Assistive Technology for long-term care or reablement in adult social care

Appendix 1



Aim to Maximise Green (upward long trend)

The value represents the number of assistive technologies used in long term care (LTC) or enablement (ENB) settings in Adult Social Care (ASC). This indicator is cumulative.

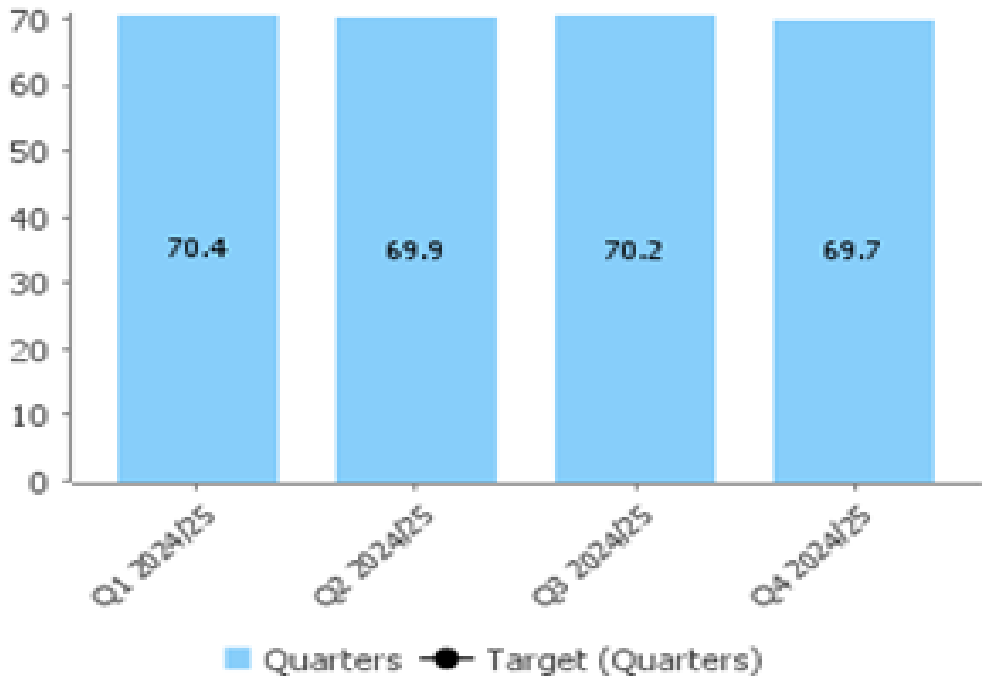
Long term care(LTC) users which are clients that use this service to support care packages with no end date installations have now met the stepped 15% target for the year and historically with the dedicated Assistive Technology champion within Adult Social Care localities and review teams is now active and providing excellent support.

Enablement (ENB) where users are helped to further improve out of the hospital setting for a period of up to 6 weeks – Target successfully achieved.

Intelligent Lilli (which is an Assessment tool which passively monitors users to ensure that they are safe and well living at home and provides reports that can help with care assessments and reviews) the shortfall from Q3 has been eradicated with current Users now on target of 52 with 134 families now supported so far.

Support all adults, including those living with disability or physical or mental illness to live independently and stay safe

- 1.14 By 2027/28, the proportion of people who receive long-term support who live in their home or with family is similar to the national average



**Aim to Maximise
Data only (downward long trend)**

This is a new national measure. Targets will be agreed following the publication of the first data set. This was due in the latter half of 2024 but has not been published yet.

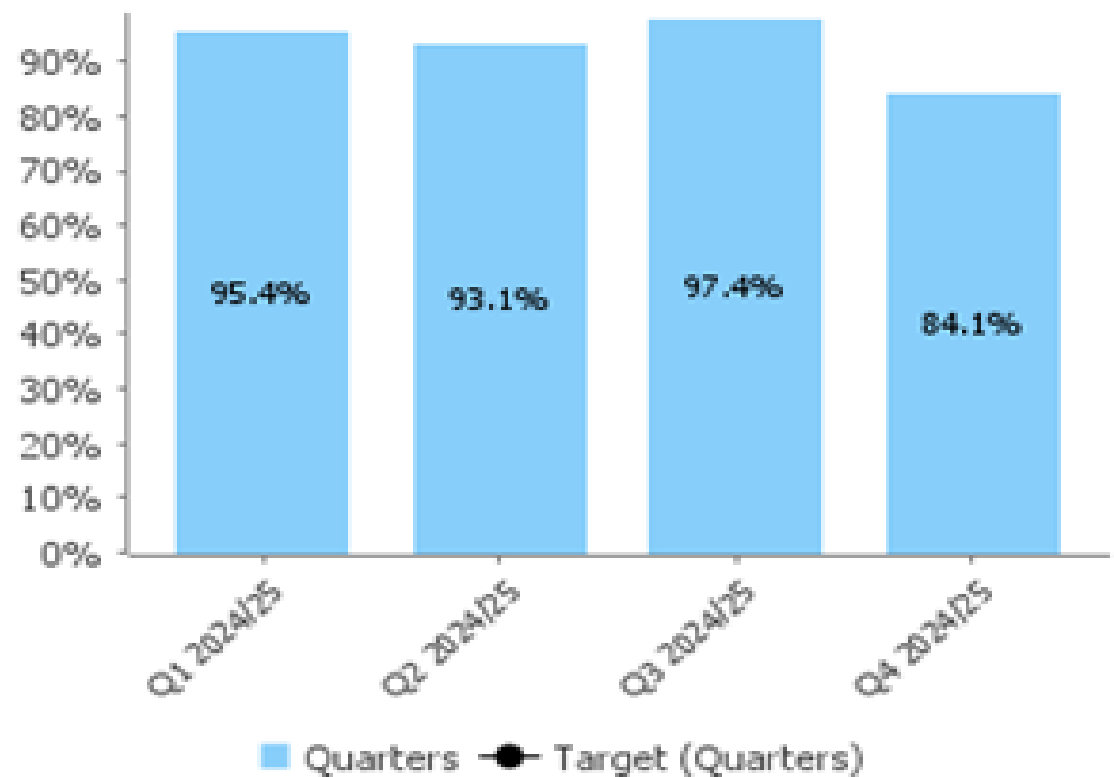
Local data shows that 2057 out of 2950 (69.7%) clients receive services in the community, a small drop from the Q3 outturn. This should be viewed as indicative as the final national methodology for calculating this metric has not been published yet. The national outturn for adults with a learning disability is 81.6%, with 78.7% in the South East, in Medway this is 78.7% (this is all clients irrespective of review status). A Project Officer has been appointed to undertake an end-to-end review of the Carer's offer and takes up post from 1 April 2025.

Adult Social Care are moving to an allocated model for people who have a learning disability and or Autism. This will enable us to ensure the right support is in place and that we respond to crisis effectively, supporting people to remain at home. We continue to work with partners to run pilots and keep updated with assistive technology and, where appropriate, AI to support people's independence. The Transition Service are aiming to start working with young people earlier than 17. This will strengthen well planned transitions to adulthood, including implementing support for young people to remain at home with their families.

Support all adults, including those living with disability or physical or mental illness to live independently and stay safe

- 1.15 By 2027/28 the proportion of closed safeguarding enquiries where risk is reduced or removed is better than the national percentage

Appendix 1



**Aim to Maximise
Data only (downward long trend)**

This is a new national measure. Targets will be agreed following the publication of the first data set, which is expected in the Autumn and be active for the 2025-26 year.

*Please note, this measure counts each type of abuse relevant to each enquiry, whereas OMCP1.16 counts individuals. As such there may be more enquires in this cohort than in the OMCP cohort.

Local data shows that there were 176* Safeguarding enquiries closed in quarter 4 of these 148 were resolved with the risk reduced or removed, this is 84.1% which is a decrease compared to the Q3 outturn. For the 2024-25 full year there were 950 closed enquiries*. Of these 880 were resolved with the risk reduced or removed, this is 92.6%

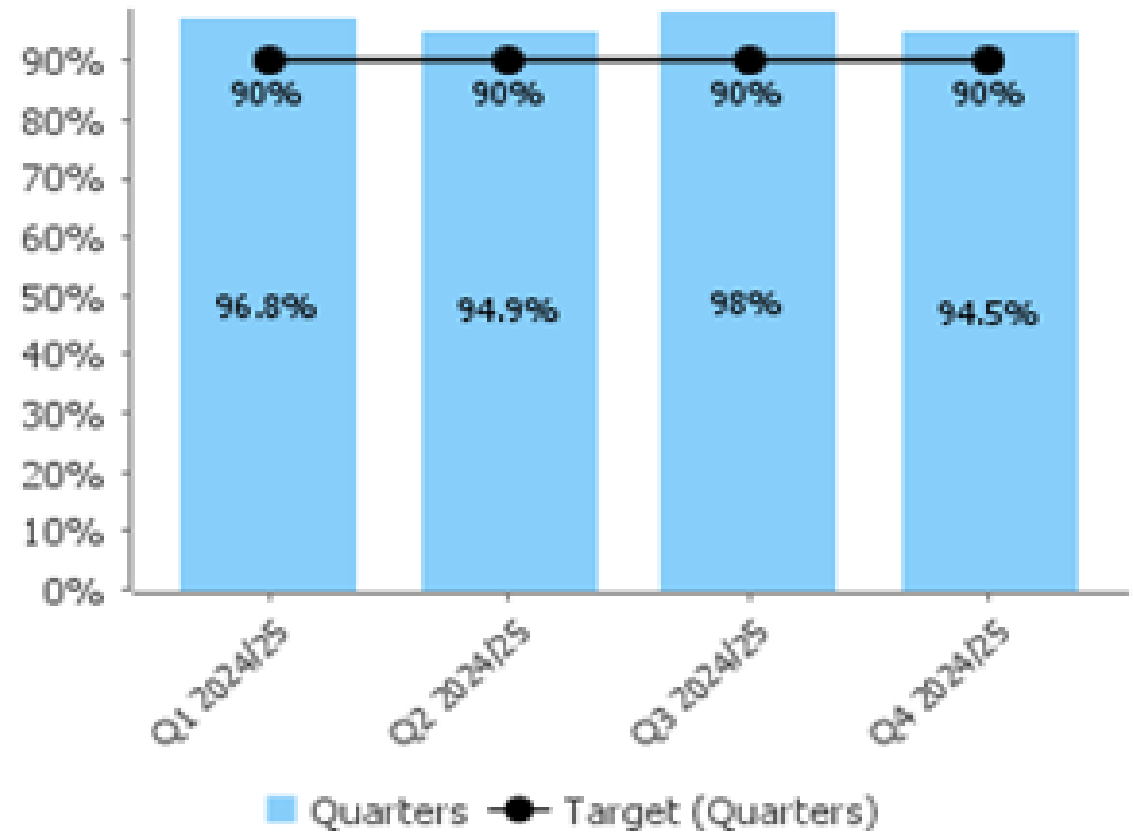
The national outturn for 2023-24 is 81%, well below Medway's performance. We will continue to monitor this area by reviewing the data fortnightly so that we are clear on, in what circumstances risk has not been able to be removed or reduced. We will use these findings to implement both strategic and operational actions to improve the outcome in this area.

Where risk remains due to circumstances beyond ASC control, for example due to lack of resource or provision, ASC will feedback to key stake holders and work collaboratively to devise and deliver strategies with a focus of addressing shortfalls in provision that could remove or reduce risk further.

Support all adults, including those living with disability or physical or mental illness to live independently and stay safe

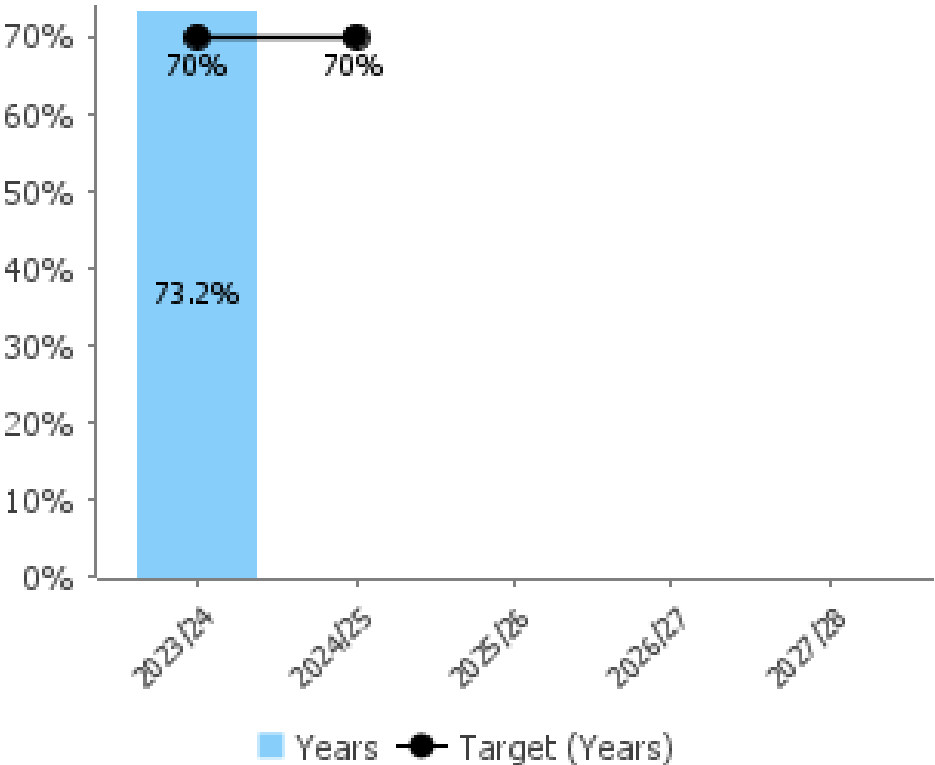
- 1.16 By 2027/28, 90% of people with a concluded safeguarding enquiry achieve either their desired outcome, or their desired outcome is partially met

Appendix 1



Aim to Maximise
Green (downward long trend)

This metric is part of Priority 1, Delivering quality social care and community services and the sub priority: Support all adults, including those living with disability or physical or mental illness to live independently and stay safe. There were 164 closed enquiries in Q4. Of these, 127 clients expressed a making safeguarding personal outcome. 94.5% (120) had outcomes achieved or partially achieved. In Q4 23% of closed enquiries did not have a making safeguarding personal outcome recorded, this was marginally better than the 24% in Q3. For the 2024-25 full year there were 853 closed enquiries. Of these 696 clients expressed a making safeguarding personal outcome. 96% (668) had outcomes achieved or partially achieved, 18.4% did not have a making safeguarding personal outcome recorded. We aim to improve this area further by evaluating data quarterly to understand the themes and trends as to why desired outcomes have not been met. The findings from the data will be utilised to devise actions aimed to improve the outcome in this area. Where outcomes that have not been met are linked to services outside of Adult Social Care, we will work collaboratively with key stakeholders to implement plans focussed on improving achieving desired outcomes.



Aim to Maximise
Green (no long trend)
Annual PI

The proportion of users reporting that they feel safe has increased by 7.2%, having fallen by 1.4% in the 2022-23 survey. This rise was greater than the 2.0% seen at national level and as a result, Medway are now 3.0% (2.1pp) above national, having been 2.0% (1.4pp) below in 2022-23. For 2023/4 National was 71.1% and our statistical neighbours 69.9%

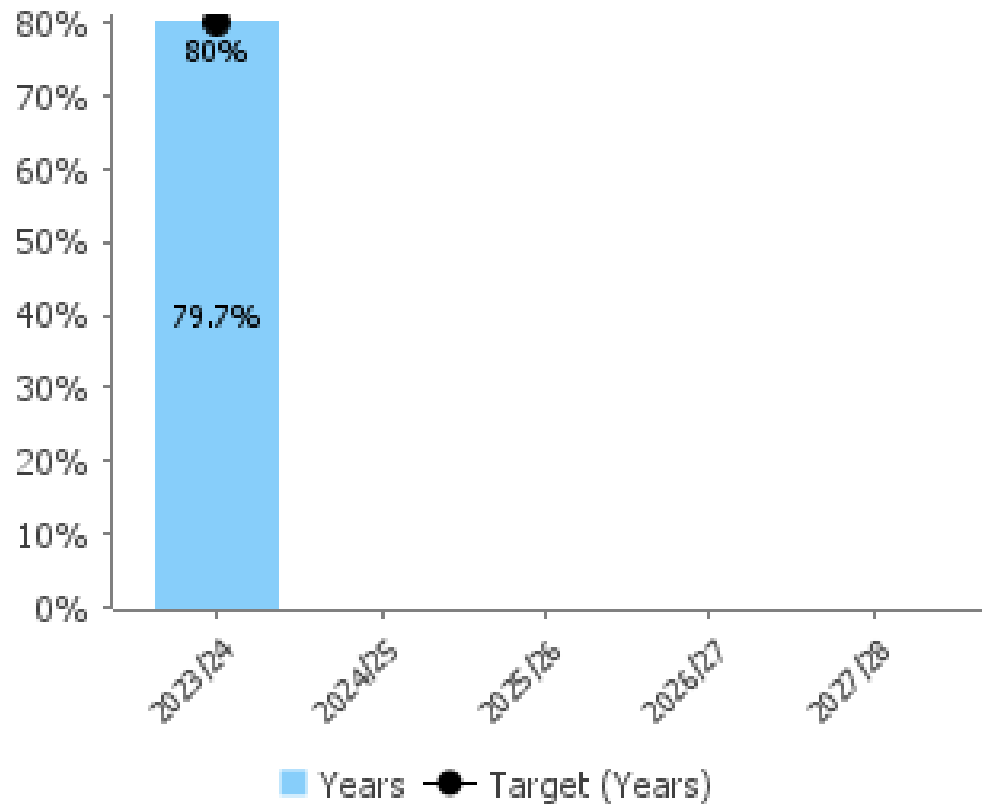
We will analyse the reasons that people reported they did not feel safe so steps can be taken to improve.

We will consider introducing mandatory question to ask individuals if they feel safe during our interventions such as safeguarding, My Plan, Reviews, Conversation 2 and Conversation 3.

People in Medway live independent and fulfilled lives into an active older age

- 1.18 By 2027/28, the proportion of people who use long term social care services who report having control over their daily lives is similar to, or higher than, the national average

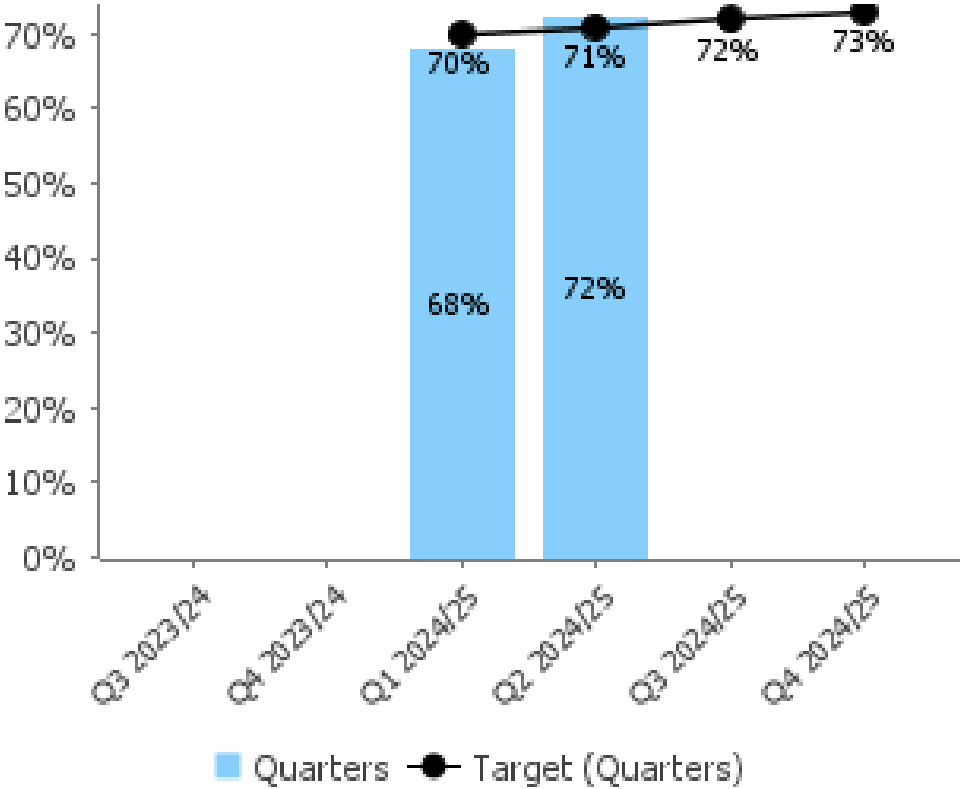
Appendix 1



Aim to Maximise
Amber (no long trend)
Annual PI

The proportion of users who felt that they had as much control over their daily life as they would want has increased by 0.8% from 79.1% in 2022-23 to 79.7% in 2023-24. Nationally, there was a 0.5% increase over the same period. Medway continues to be above national; the gap has widened slightly from 2.5% above in 2022-23 to 2.7pp above in 2023-24. It is likely that the difference between Medway and the benchmark results are not statistically significant, however the upward trend in results is noteworthy. The national outturn was 77.6% and the Statistical neighbour, 78.3% We will analyse the reasons that people reported they did not feel in control as a result of ASC interventions and identify what steps can be taken to improve.

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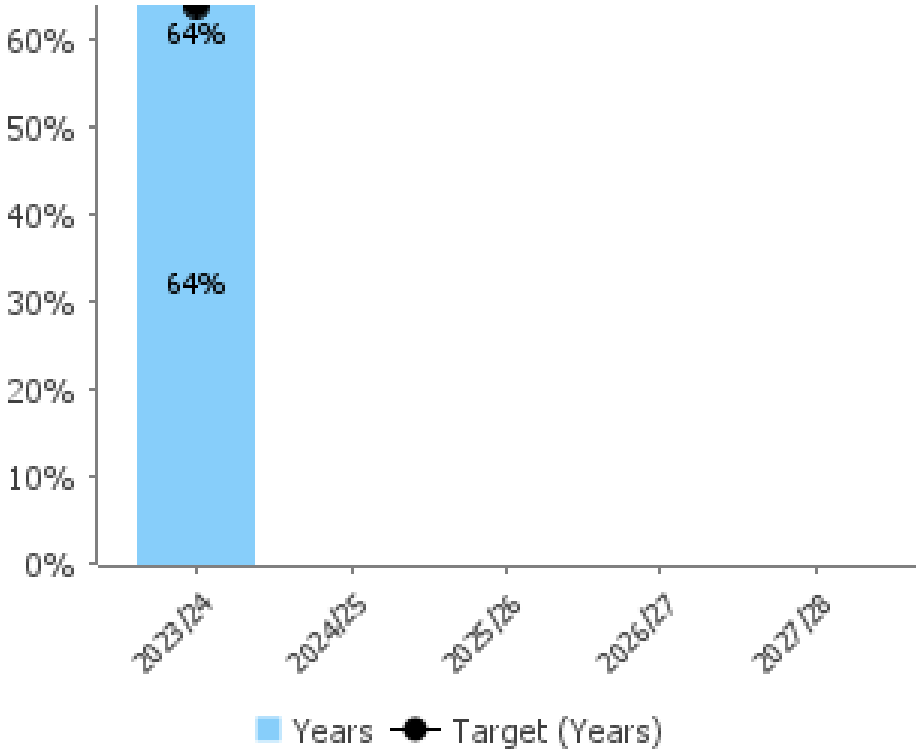


Aim to Maximise
Data unavailable (no long trend)

Due to a data incident within Medway Community Healthcare the data needed to calculate this measure is not available. The Intermediate Care and Reablement Service is a commissioned service delivered by Medway Community Health. We work closely with them to ensure that people ready to be discharged from hospital receive the most appropriate service to meet their needs. The new Intermediate Care & Reablement Service enables the provider to flex their resource to meet demands, i.e., either Home First or an Intermediate Care Bed. We are working with the Health and Care Partnership to look at other options to enable people to be discharged from hospital and decisions made about their care and support needs away from the Acute setting.

People in Medway live independent and fulfilled lives into an active older age

- 1.20 By 2027/28, the proportion of people who use adult social care services who report that they find it easy to find information about services is higher than the national average



Aim to Maximise
Green (no long trend)
Annual PI

Published data shows that shows a year on year rise in the indicative outturn of 2.1pp (3.4%). However, Medway has now dropped below the indicative scores for both national and statistical neighbours having been greater than these in 2022-23.

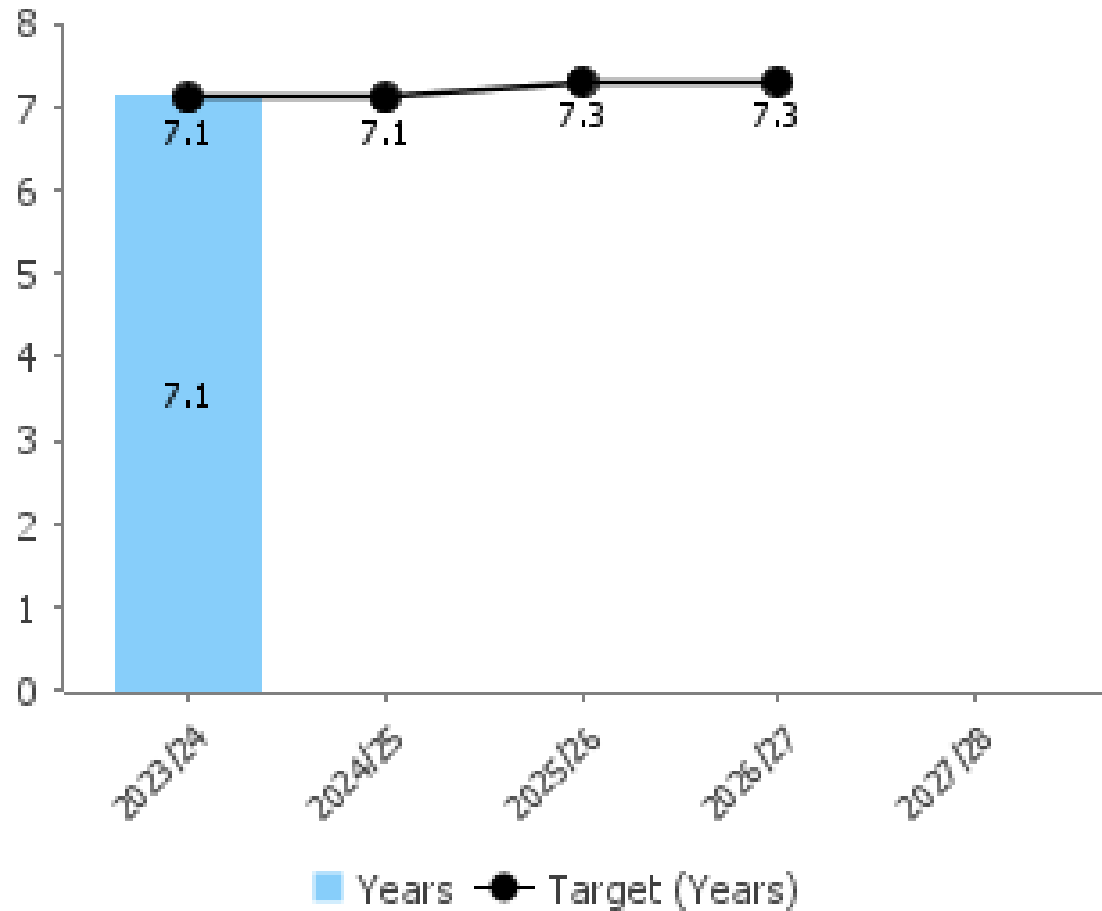
It is likely that the difference between Medway and the benchmark results are not statistically significant.

For 2023/24 Medway was 3.9pp lower than national (67.9%) and 4.9pp lower than statistical neighbours (68.9%). Comparator results are improving at a faster rate than in Medway. The ASC Engagement Manager will consult with individuals and groups about how they prefer to access information.

Head of Transformation to develop our digital offer and other means of communication.

People in Medway live independent and fulfilled lives into an active older age
- 1.21 By 2027/28, the carer reported quality of life score is statistically similar to, or higher than, the national average

Appendix 1



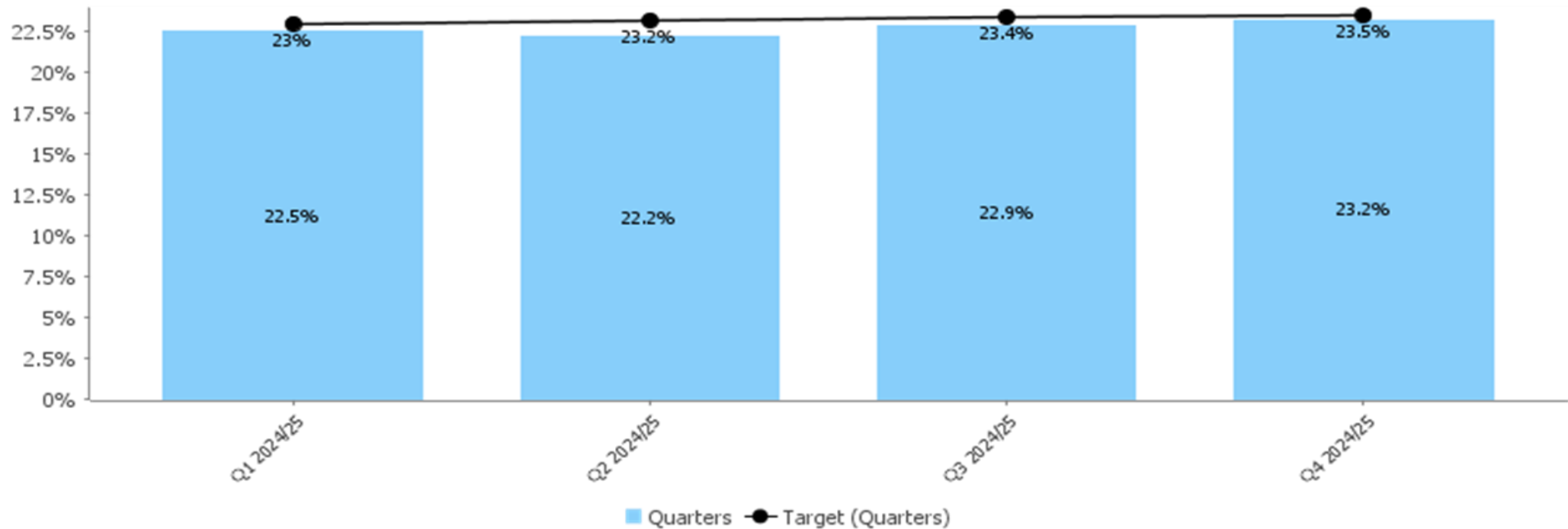
**Aim to Maximise
Green (no long trend)
Annual PI**

Validated data, shows a year-on-year decline of 0.1 point (1.4%).
For 2023-24 Medway was 0.2 points lower than national (7.3) and 0.1 points lower than the South East (7.2). This would suggest that difference between Medway's outturn and the comparators is not significantly statistically important.
We are developing a Carers offer to support Carers have an improved quality of life. A project manager has been appointed to complete this work and took up post on 1 April 2025.

People in Medway live independent and fulfilled lives into an active older age

- 1.22 By 2027/28, the proportion of long-term clients receiving support via a Direct Payment is similar to or better than the National percentage.

Appendix 1



**Aim to Maximise
Amber (upward long trend)**

The ongoing downward trend has been reversed this quarter, with a 0.3pp (1.3%) increase. Currently there are 482 clients receiving a direct payment, this is a small decrease crease on the 487 with an active DP at the end of December.

Benchmarking

For 2023-2024 the National outturn was 25.5% and the South East 25%. Both rates are lower than the 2022-23 results.

We have worked with P&I to develop PowerBI dashboards, using these will enable us to identify areas to target in order to increase DP referral and uptake. The DHSC have acknowledged that there is a fall in the take up of direct payments nationally and they are looking at the CASS (Care and Support Statutory guidance in particularly section 12 to see if there is anything that could be included to support good practice and the uptake. The DHSC are working with Think Local Act Personal (TLAP), Independent Living Group (ILG) and the national direct payment forum, of which we are an active member, with a view to revising the statutory guidance to promote the DP uptake.

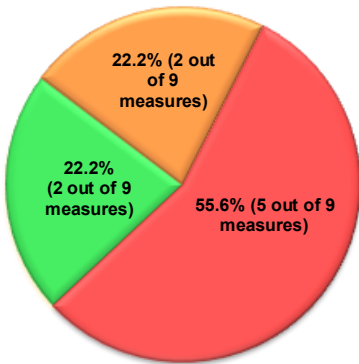
Improving health and wellbeing for all

- Empowering people to achieve good health and wellbeing through prevention, with access to local activities and services that will enable and support them to lead independent, active and healthy lifestyles.
- Support families to give their children the best start in life.
- Work collaboratively to grow participation year on year in recreational play, sport and physical activity as a means of promoting improved physical and mental health and wellbeing.
- Work in partnership with communities and organisations to address the issues that negatively affect health and wellbeing, making sure everyone has the opportunity to live long, healthy lives.

Summary of all performance indicators for this priority

There are 12 performance indicators for the One Medway Council Plan 2024/28 which fall under this priority.

Performance

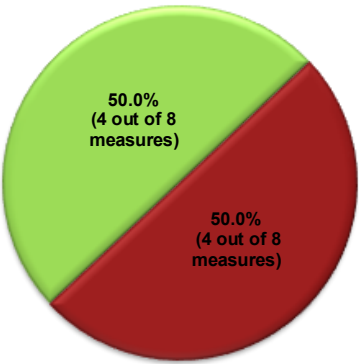


Performance - key
Green means met or exceeded target
Amber means slightly below target
Red means significantly below target

This chart shows performance for 9 measures as 4 are unavailable:

- 22.2% (2 out of 9 measures) met or exceeded target.
- 22.2% (2 out of 9 measures) were slightly below target (less than 5%).
- 55.6% (5 out of 9 measures) were significantly below target (more than 5%).

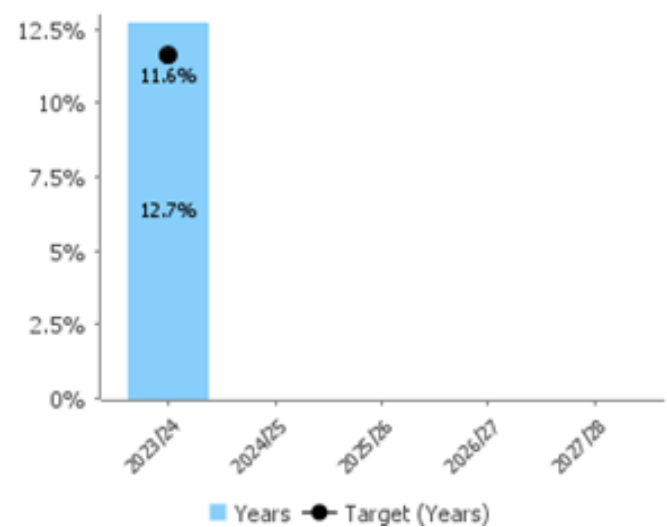
Direction of Travel



Direction of Travel - key
Green means positive travel
Blue means static
Red means negative travel

This chart shows the direction of travel for 8 measures:

- 50.0% (4 out of 8 measures) had an upward long trend.
- 0.0% (0 out of 6 measures) had a static long trend.
- 50.0% (4 out of 8 measures) had a downward long trend.

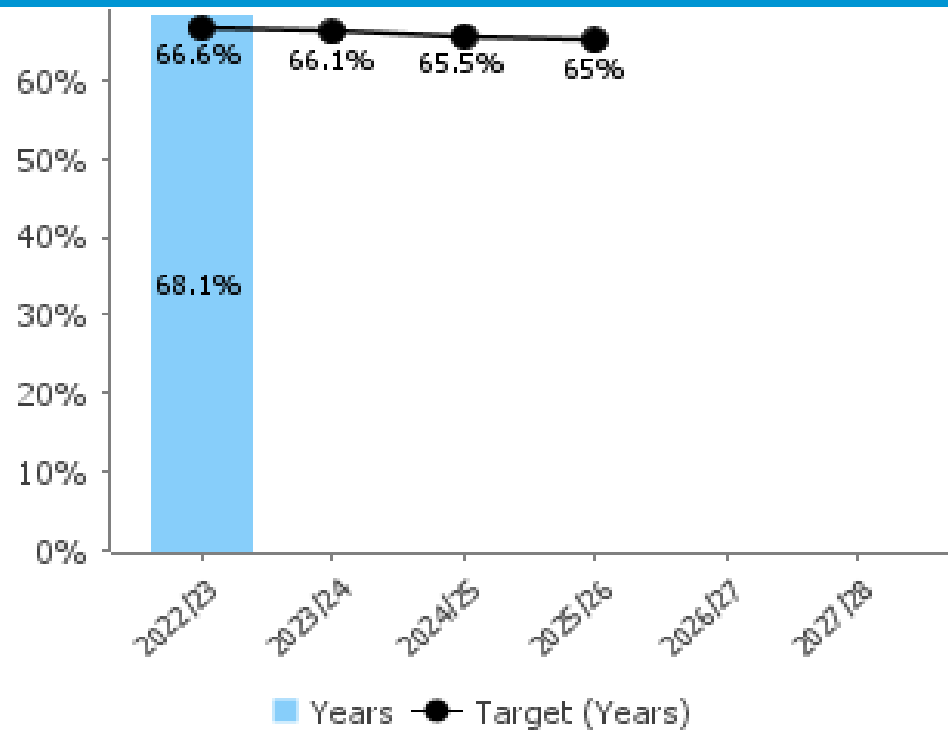


Aim to Minimise
Green (downward long trend)
Annual PI

By 2027/28, the proportion of adults (18+ years) who are self-reported smokers is statistically similar to, or lower than, the England average (comparing England and Medway values in 2026).

Achievements - The Varenicline Patient Group Directions (PGD) was successfully launched and 30 pharmacies across Medway have signed up to deliver the PDG, providing good coverage to residents who wish to use this method to quit. Comms have designed a campaign to promote its availability which is proving popular. The Stop Smoking Local Incentive Scheme had 19 GP practices sign up, offered via the Sustainable Health Care Unit at the Integrated Care board. Practices were required to run a week long campaign, texting all smokers within the practice to promote Medway Stop Smoking Service and signpost them to self-referring for a quit attempt. The Local Stop Smoking Service (LSSS) Section 31 grant has been awarded 2025/26. The specialist Mental Health Smoking Cessation service has been launched.

Actions - Planning is underway for 2025/26 LSSS Section 31 grant. Testing and launch of the AI tool for Medway residents who smoke. A deeper dive will be conducted to understand the smoking habits and barriers to quit for people from Poland, Romania and Bulgaria following on from the insights work conducted in 2024/25. The Swap-to-Stop programme will be funded for 2025/26 providing free vapes to Local Authorities who apply and are approved. Medway’s application will be submitted in April 2025.



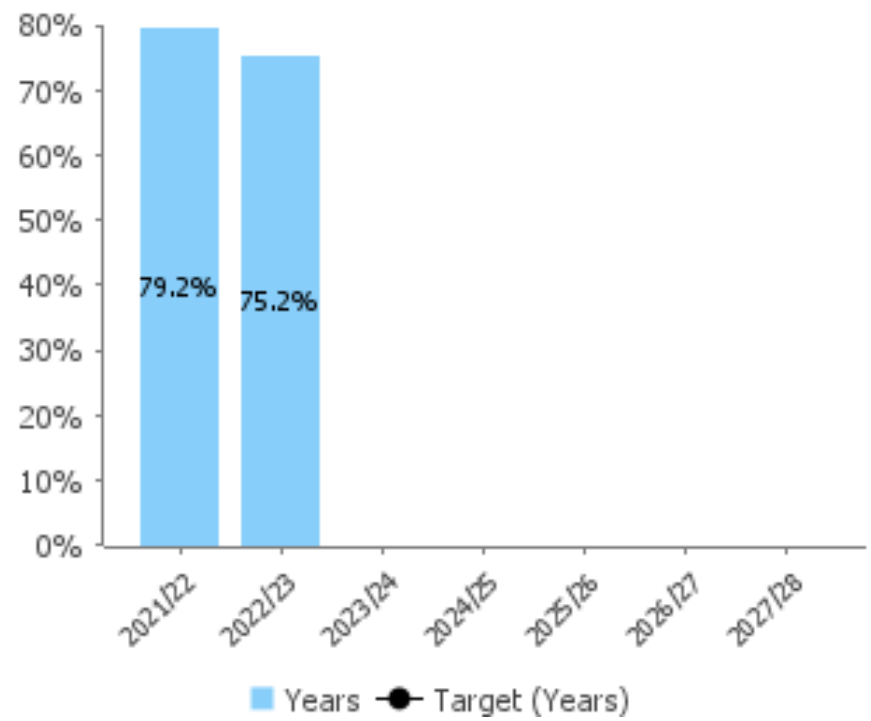
Aim to Minimise
Amber (upward long trend)
Annual PI

By 2027/28, the percentage of adults (18+) classified as overweight or obese is the same as or below 65%. The five-year target is 65%, with the incremental target for 2022/23 being 66.6%.

This performance indicator is reported 2 years in arrears.

Significant steps are being implemented to reduce adult obesity rates in Medway, across a range of programmes. These include: **Medway Food Partnership:** Collaborating with a food business expert to advance the Food Business Action from the Food Strategy and exploring funding options to develop a local food hub/social supermarket.

Healthy Way Courses: Sixteen courses were booked for this quarter, including men's only, evening, online, and Saturday courses. Neurodiversity training and a facilitator team day were held. **Healthy Way Plus (HW+) Initiatives:** Voluntary sector organisations started HW+ delivery in January with over 15 participants each. Holcombe Health Clinic is to start in March 2025. Future plans include Medway Deaf Training and Medway Diversity Forum. **Training and Outreach:** Delivered the Talking About Weight With Confidence (TAWWC) training course, presented at Greenwich University, and delivered an Eatwell guide presentation to Medway Voluntary Action (MVA) service users. **Tipping the Balance:** Exploring a redesign from Tier 3 to a Tier 2.5 service in line with National Institute for Health and Care Excellence (NICE) Guidance. **Community Oral Health Survey:** Commissioning Community Dental Services Community Interest Company (CDS CIC) to conduct the National Care Homes Oral Health Survey in Medway. The Adult Oral Health chapter of the Joint Strategic Needs Assessment (JSNA) has been approved by the Joint Commissioning Management Group (JCMG).

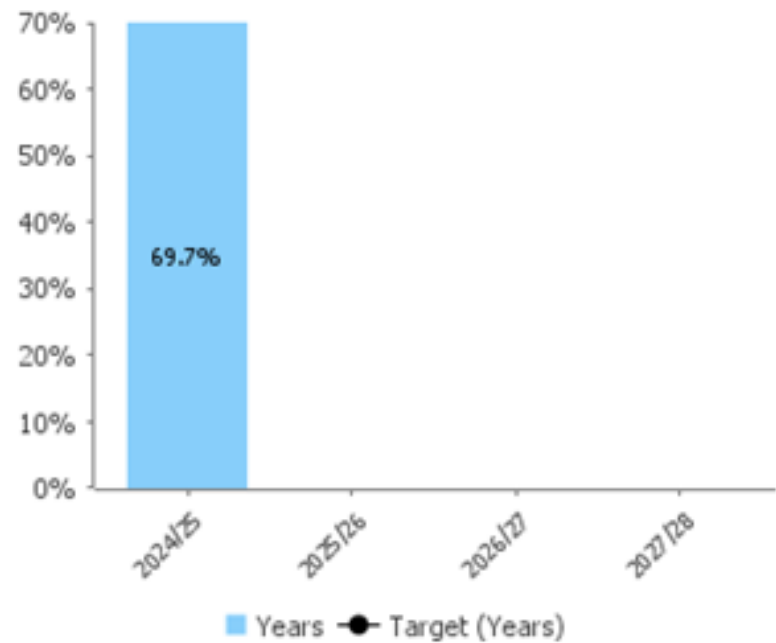


Aim to Maximise
Data unavailable (no long trend)
Annual PI.

By 2027/28, the proportion of people who report “high” or “very high” levels of life satisfaction will be similar or higher compared to the England average. This data comes from the Annual Population Survey (APS) and the Office for National Statistics. The data for 2023/24 has not yet been released. Data from the APS 2022/23 indicates that 75.2% of people reported “high” or “very high” levels of life satisfaction. All Medway Public Health interventions and actions are intended to support people to have better health outcomes and address health inequalities, these can often take years to demonstrate improvements on a population level and are influenced by macroeconomic level policies. Self-reported health, marital status and economic activity have the strongest associations with how positively we rate our life satisfaction.

Actions and Achievements

Development of the work and health strategy progresses. Devolved funding for Connect2Work programme will deliver targeted Individual Placement Support employment programmes. Life satisfaction is linked to the social determinants of health, work is underway for Medway to be a Marmot Place where health equity is a priority. Embedding the Marmot principles in strategic decision making is likely to have a positive impact on life satisfaction in the long term. Medway is hosting a stage of the prestigious Baton of Hope Tour 2025, a high-profile partnership event with small grant funding for local community groups to promote the message of hope, mental wellbeing and support.

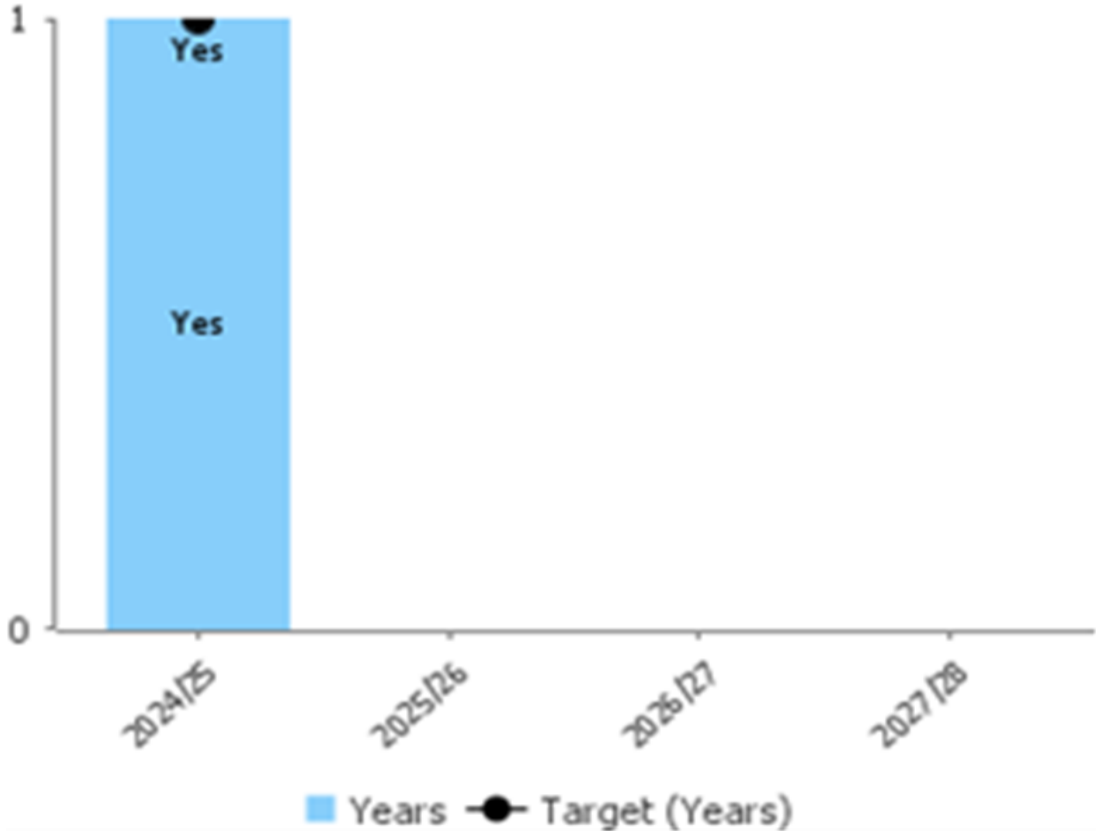


Aim to Maximise
Red (upward long trend)
Annual PI.

By 2027/28 the proportion of the population aged 60 to 74 screened for bowel cancer will be similar or higher compared to the national average. The latest value in Medway is 69.7%, which is statistically worse than the England value of 71.8% as the confidence intervals do not overlap. This is a slight decrease from the previous year’s value of 70.1%.

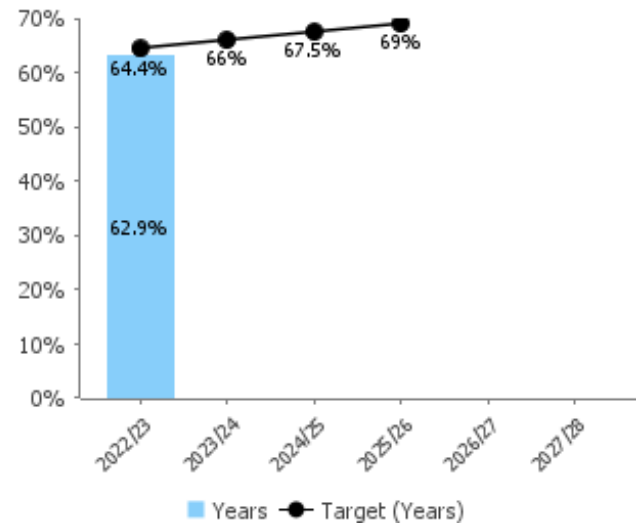
Achievements - Bowel screening in Medway falls under Theme 1 of the Joint Local Health and Wellbeing Strategy: “Healthier and Longer Lives for Everyone.” Screening is offered biennially to men and women aged 50–74. Locally it is supported by NHS England’s South East Regional Public Health Commissioning Team and the Kent & Medway Screening and Immunisation Team (K&M SIT), in collaboration with the Kent and Medway Cancer Alliance (KMCA). Medway and Swale Health and Care Partnerships (HaCP) work with the VCSEF sector on place-based initiatives, including the integration of community champions promoting screening across diverse groups. Between 2021–2024, 30% of bowel cancer cases in Medway and Swale were identified via screening. The highest diagnosis rate was observed in the least deprived quintile, while the lowest rate was in quintile 3.

Actions - The NHS Long Term Plan aims for 75% of cancers to be diagnosed at stages 1 or 2 by 2028. Increasing screening uptake is key to early diagnosis and treatment. K&M SIT is embedding training and resources across workplaces and, leading an inequalities workstream focused on improving disparities, employing NHS England’s CORE20+5 approach, to improve outcomes for all Medway residents.



Aim to Maximise
Yes/No
Green (no long trend)
Annual PI.

The Infrastructure Funding Statement along with S106 performance for first half of year was reported to RCE Overview and Scrutiny in January 2025. Q3 S106 performance was reported to the Planning Committee on 12 March 2025. Meetings have taken place with NHS and public health colleagues regarding both use of S106 funding and input to emerging Infrastructure Delivery Plan which will come to Full Council in June 2026 as part of Reg 19 Local Plan report

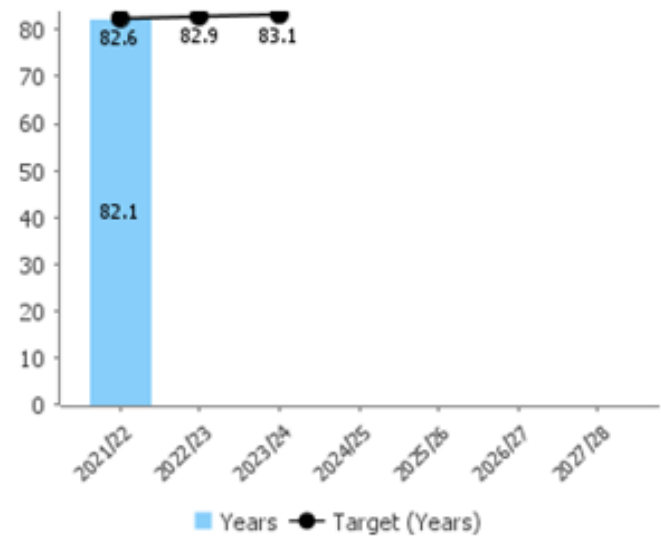


**Aim to Maximise
Amber (downward long trend)
Annual PI**

By 2027/28, the percentage of physically active adults will have increased to 69%. The four-year target is 69%, with the incremental target for 2022/23 being 64.4%. Medway Public Health continue to offer a range of interventions to support people to become more active. Medway held its first meeting in a bid to secure Place Partnership funding for up to £2 million to get Medway moving. It was attended by a wide range of stakeholders to demonstrate how Medway can work together to increase physical activity levels for our residents. Active Kent and Medway are the lead partner, and the aim is for funding to be secured in 2025. For 2024/25 the outcomes for Public Health interventions:

- 656 patients referred (year to date – YTD) for Active Referral Programme
- 359 people attended Small Steps, Big Changes courses
- 10,902 footfall for Let’s Get Active classes. Classes are for a range of people including Rehab, Stroke, Neurology, Cardiac and ethnic minority groups
- 4,815 footfall in older adults’ programmes including Extra Care Schemes, Care Homes and Walk in the Park expansion to 10 walks across Medway
- 12,448 footfall YTD for Wellbeing Walks with 272 new walkers
- 1,792 footfall YTD for Nordic Walking with 48 new walkers
- 15-20 attendees for Nordic for Parkinsons each week
- 624 footfall for cycling groups

Actions: The Better Care Fund funded Primary Falls Prevention Programme has been launched and work is underway with primary care to refer patients into the service. A second meeting to shape Medway’s application for Place Partnerships funding will happen in May 2025.



**Aim to Maximise
Red (upward long trend)
Annual PI**

By 2027/28, life expectancy at birth for females will have increased by 1 year. The final target is 83.1, taken from the baseline value of 82.1 from 2019/20. The incremental target for 2021/22 is 82.6.

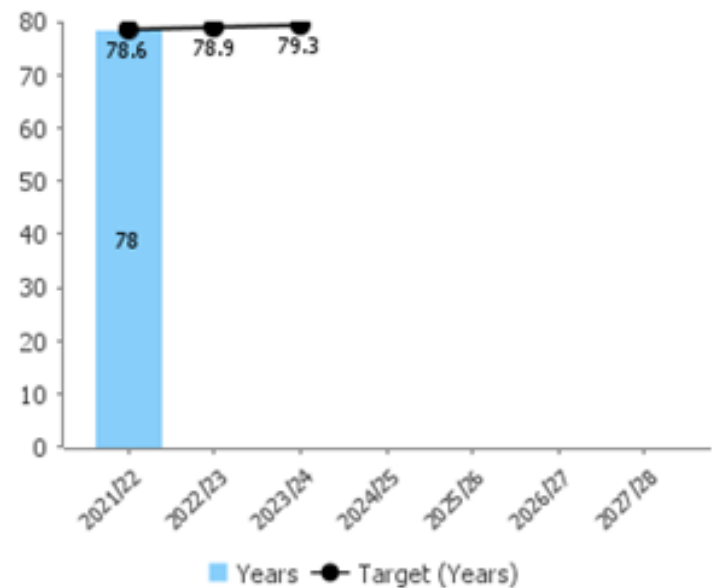
This performance indicator is measured 3 years in arrears.

Life expectancy in Medway for females was 82.1 years in 2021-23, lower than the England average of 83.1 years. Factors like smoking, obesity, and deprivation impact this. Everything that Medway Council and the NHS do has an overarching aim to increase life expectancy, as highlighted in the outcomes of the Joint Local Health and Wellbeing Strategy and the Integrated Care Strategy.

The Medway Public Health (PH) team offers various healthy lifestyle services under the ‘A Better Medway’ banner, with many accepting self-referrals. In Q4 2024/25, Medway PH have been preparing to launch a new primary Falls Management and Exercise (FaME) service for Medway residents. This 20-week programme includes physical activity and wellbeing support. Medway PH colleagues’ ‘Let’s Get Active’ class was featured in the ‘The Social Value of Group Exercise’ report, highlighting the importance of group exercise for overall wellbeing and reducing loneliness.

Medway is also in the process of becoming a ‘Marmot Place’, an initiative set up by the Institute of Health Equity. This means that Medway will be recognised as placing the reduction in health inequalities and the needs of the community at the centre of their approaches, interventions, and policies.

Additionally, the Medway Public Health Intelligence Team are currently carrying out an exploratory piece of work into healthy life expectancy in Medway.



Aim to Maximise
Red (upward long trend)
Annual PI

By 2027/28, life expectancy at birth for males will have increased by 1.5 years. The final target is 79.3, taken from the baseline value of 77.8 from 2019/20. The incremental target for 2021/22 is 78.6.

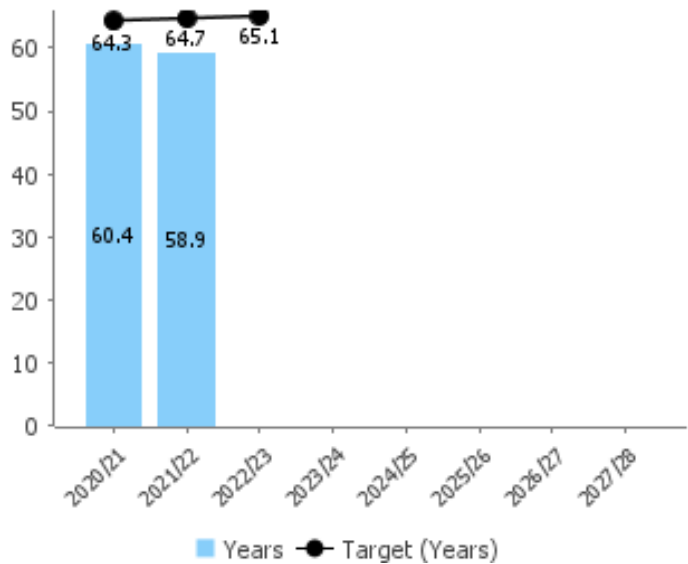
This performance indicator is measured 3 years in arrears.

Life expectancy in Medway for males was 78 years in 2021-23, lower than the England average of 79.1 years. Factors like smoking, obesity, and deprivation impact this. Everything that Medway Council and the NHS do has an overarching aim to increase life expectancy, as highlighted in the outcomes of the Joint Local Health and Wellbeing Strategy and the Integrated Care Strategy.

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**Aim to Maximise
Red (downward long trend)
Annual PI.**

By 2027/28, healthy life expectancy at birth will have increased by 1.5 years for females.

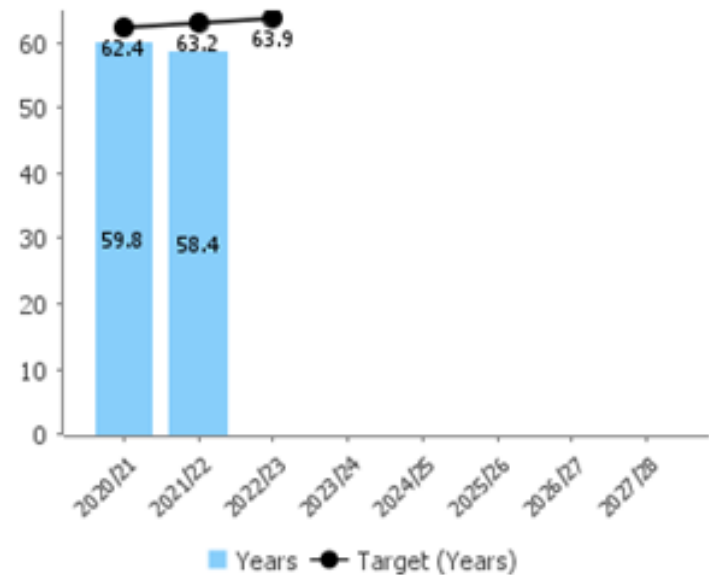
The methodology for Healthy Life Expectancy has changed and published figures are rebased. Figures in previous reports may have changed. The originally agreed targets are based on data from before this change, and new targets are being discussed.

Healthy life expectancy at birth is the average number of years a person would expect to live in good health. In Medway, the healthy life expectancy for females was 58.9 years in 2021-23, statistically similar (overlapping confidence intervals) to the England average of 61.9 years. The Global Burden of Disease suggests that key contributing factors to disability-adjusted life years (a measure for years of healthy life lost due to premature mortality and disability) since 2011 are anxiety, depression, diabetes, and COVID-19, amongst others.

The Medway Public Health (PH) team offers various healthy lifestyle services under the ‘A Better Medway’ banner, with many accepting self-referrals. In Q4 2024/25, Medway PH have been preparing to launch a new primary Falls Management and Exercise (FaME) service for Medway residents. This 20-week programme includes physical activity and wellbeing support. Medway PH colleagues’ ‘Let’s Get Active’ class was featured in the ‘The Social Value of Group Exercise’ report, highlighting the importance of group exercise for overall wellbeing and reducing loneliness.

Medway is also in the process of becoming a ‘Marmot Place’, an initiative set up by the Institute of Health Equity.

Additionally, the Medway Public Health Intelligence Team are currently carrying out an exploratory piece of work into healthy life expectancy in Medway.



**Aim to Maximise
Red (downward long trend)
Annual PI.**

By 2027/28, healthy life expectancy at birth will have increased by 3 years for males.

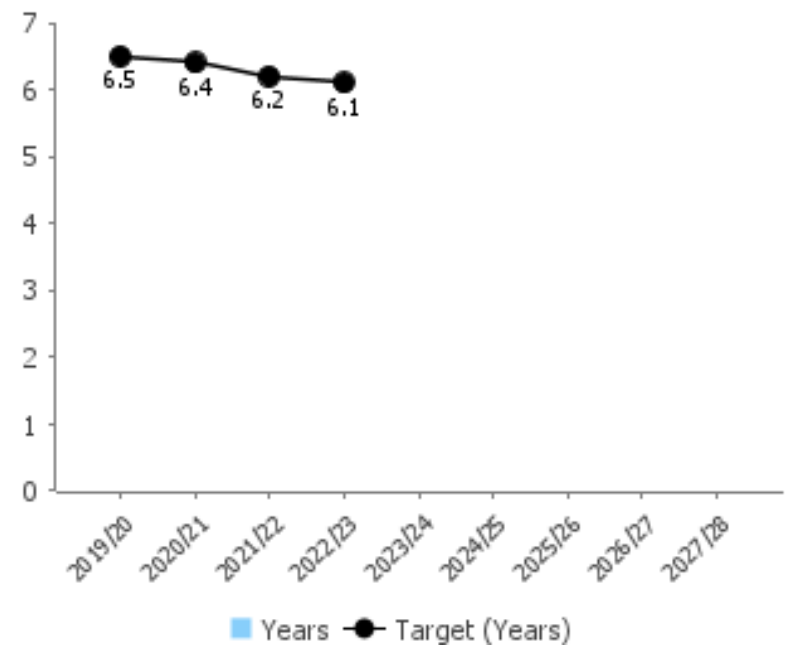
The methodology for Healthy Life Expectancy has changed and published figures are rebased. Figures in previous reports have changed. The originally agreed targets are based on data from before this change, and new targets are being discussed.

Healthy life expectancy at birth is the average number of years a person would expect to live in good health. In Medway, the healthy life expectancy for males was 58.4 years in 2021-23, statistically similar (overlapping confidence intervals) to the England average of 61.5 years. The Global Burden of Disease suggests that key contributing factors to disability-adjusted life years (a measure for years of healthy life lost due to premature mortality and disability) since 2011 are anxiety, depression, diabetes, and COVID-19, amongst others.

The Medway Public Health (PH) team offers various healthy lifestyle services under the ‘A Better Medway’ banner, with many accepting self-referrals. In Q4 2024/25, Medway PH have been preparing to launch a new primary Falls Management and Exercise (FaME) service for Medway residents. This 20-week programme includes physical activity and wellbeing support. Medway PH colleagues’ ‘Let’s Get Active’ class was featured in the ‘The Social Value of Group Exercise’ report, highlighting the importance of group exercise for overall wellbeing and reducing loneliness.

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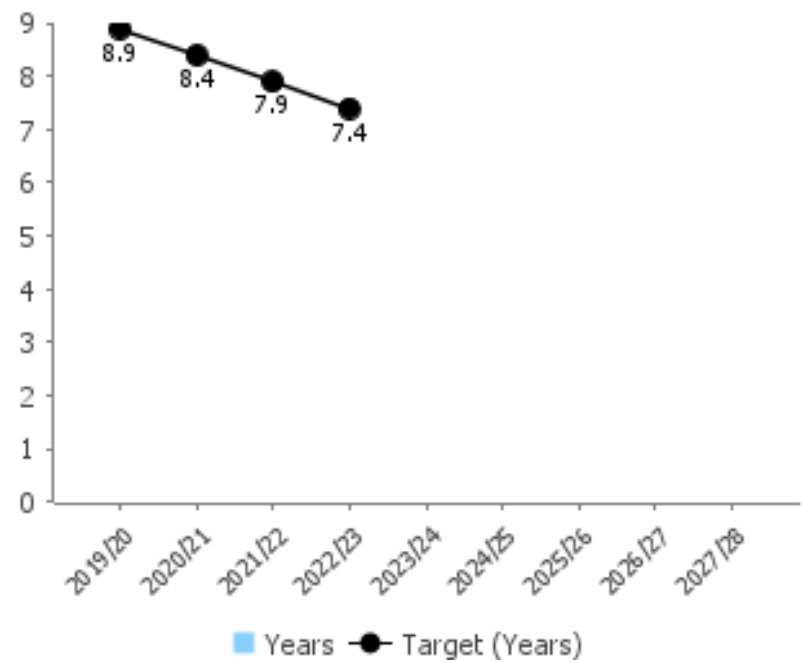
Aim to Minimise
Data unavailable (no long trend)
Annual PI.

By 2027/28, inequalities in life expectancy at birth will have decreased by 0.5 years for females. The final target is 6.1, taken from the baseline value of 6.6 from 2018/19. The incremental target for 2019 - 2021 is 6.5.

Data reported will be for 2019 - 2021. This data is calculated by the Office for Health Improvement and Disparities, using Office for National Statistics and Department for Levelling Up, Housing and Communities data. It is reported five years in arrears. The COVID-19 pandemic had a significant impact on data collection which is causing delays in the release of subnational data.

Life expectancy is a key measure of population health. Differences in life expectancy are often linked to socioeconomic factors (like income and education), demographic traits (such as ethnicity and gender), geographic regions, or specific population groups. These differences can cause inequalities in life expectancy and can be measured using levels of deprivation.

The inequality in life expectancy at birth in Medway for females was 6.6 years, compared to England (7.9 years) in 2018-20. This is in the middle quintile nationally, suggesting a smaller inequality gap compared to males in Medway.



Aim to Minimise
Data unavailable (no long trend)
Annual PI.

By 2027/28, inequalities in life expectancy at birth will have decreased by 2 years for males. The final target is 7.4, taken from the baseline value of 9.4 from 2018/19. The incremental target for 2019/20 is 8.9.

Life expectancy is a key measure of population health, often linked to socioeconomic factors, demographic traits, geographic regions, or specific population groups. These differences can cause inequalities in life expectancy, often measured using levels of deprivation.

The inequality in life expectancy at birth in Medway for males was 9.4 years, compared to England (9.7 years) in 2018-20, placing Medway in the second worst quintile nationally. This suggests a large gap in life expectancy between more and less deprived areas in Medway.

The Medway Public Health (PH) team offers various healthy lifestyle services under the 'A Better Medway' banner, with many accepting self-referrals. In Q4 2024/25, Medway PH have been preparing to launch a new primary Falls Management and Exercise (FaME) service for Medway residents. This 20-week programme includes physical activity and wellbeing support. Medway PH colleagues' 'Let's Get Active' class was featured in the 'The Social Value of Group Exercise' report, highlighting the importance of group exercise for overall wellbeing and reducing loneliness.

Medway is in the process of becoming a 'Marmot Place', an initiative set up by the Institute of Health Equity. This means that Medway will be recognised as placing the reduction in health inequalities and the needs of the community at the centre of their approaches, interventions, and policies.