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Health and Adult Social Care Overview and Scrutiny Committee

13 October 2026

Kent Community Health and Medway Community Health Care Integration Update

Report from: Dr Clare Thomas, Deputy Chief Operating Officer Kent Community Health NHS Trust (KCHFT)
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Summary

This report provides an update from Kent Community Healthcare NHS Foundation Trust (KCHFT) and NHS Kent and Medway Integrated Care Board (ICB) about the integration of Medway Community Healthcare and Kent Community Health NHS Foundation Trust.

1. Recommendation

- 1.1. The Committee is requested to note the ICB's and KCHFT's submission, as set out at Appendix 1 to the report.

2. Budget and policy framework

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

3. Background

- 3.1. The proposed integration of KCHFT and Medway Community Healthcare (MCH) was last considered by the Committee at its meeting on 16 June 2026. The proposal involved the transfer of MCH staff and services into KCHFT,

forming a single NHS Foundation Trust to deliver more sustainable, integrated community services across Kent and Medway.

- 3.2. This integration and transfer took place on 1 October 2026 and the attached submission provides the Committee with an update on the latest position, including performance indicator information as following the previous report, the Committee requested details of the key performance indicators being monitored to provide assurance on patient access and waiting times after integration on 1 October 2026. The indicators have been selected because they are either nationally monitored or relate to services experiencing increased demand or pressure, where bringing the organisations together provides opportunities to improve access, capacity and outcomes for patients.

4. Risk management

- 4.1. There are no direct risks for the Council arising from this report.

5. Financial implications

- 5.1. There are no direct financial implications for the Council arising from this report.

6. Legal implications

- 6.1. There are no direct legal implications for the Council arising from this report.

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Appendices

Appendix 1 – submission from KCHFT and ICB

Background papers

None