

To: West Kent Health and Wellbeing Board

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Subject: Health Inequalities Action Plan Update – Tonbridge & Malling

Summary

This report aims to provide the West Kent Health and Wellbeing Board with an outline of local activity relating to health inequalities and an update on progress against the Tonbridge & Malling Health Inequalities Action Plan (2013 to 2016).

Recommendations

The Board is asked to note the content of the report and our monitoring data in Annex 1 and advise how Board Members would like to be involved in the development of our new Plan, which will be launched next year.

1. Background

- 1.1 Both the Tonbridge & Malling Health Action Team (HAT) and Health Improvement Officer Study Group (HIOSG) have as one of their key aims the reduction of health inequalities. In the case of the HAT we aim to bring health partners working in the district together and membership consists of representation from both the wider health and housing sectors, including a number of voluntary sector members. The HI OSG is attended by representatives from a number of frontline Council services, to collectively review ways of working that will both improve the health of our residents in general and reduce health inequalities.
- 1.2 The health of people in Tonbridge & Malling is generally better than the England and Kent average. However, some significant differences in life expectancy exist between our communities. By exploring more detailed data at borough, ward and lower super output area level and utilising our existing knowledge of our communities we have been able to set five priorities in partnership with our key stakeholders; demonstrating a holistic approach to tackling health inequalities.

These are outlined below:

- Unhealthy weight in children and adults
- Falls prevention
- Dementia awareness
- Alcohol and substance misuse
- Smoking related deaths

2. Mind the Gap Health Inequalities Plan

- 2.1. In June 2013 the Tonbridge & Malling Health Inequalities Action Plan 2013 to 2016 was presented to and approved by Members at the Communities and Health Advisory Board. This plan is underpinned by KCC's Joint Strategic Needs Assessment for Kent and supports the outcomes and priorities set out in KCC's Kent Joint Health and Wellbeing Strategy (2014-17) and the Children and Young People Health and Wellbeing Strategy.
- 2.2. The actions and priorities identified in our 'Health Inequalities Action Plan' can be categorised into Marmot's (2010) six Life-course Objectives, in line with the Kent Plan:
 - Give every child the best start in life (Conception – 9 months and from 9 months)
 - Enable all children, young people and adults to maximise their capabilities and have control over their Lives
 - Create fair employment and good work for all
 - Ensure a healthy standard of living for all
 - Create and develop healthy and sustainable places and communities
 - Strengthen the role and impact of ill health

Each of our Services have identified how their work can contribute to the Plan and reducing local health inequalities and these are reflected in Annex 1.

3. Progress

- 3.1 Since the Plan was adopted in 2013 significant progress has been made through the HIOSG in bringing Services together to deliver health improvement. In particular developing an understanding of "Place Based Health" across our services and how our work that contributes to the development of this model.
- 3.2 In respect of the main HAT priorities there have been improvements in the rates of obesity in children in year 6 and a slight improvement in the rates of hip fractures in over 65's. Excess weight and obesity rates in adults have remained similar, as has the rates of hospital stays for alcohol related harm and smoking

related deaths. There has been an increase in alcohol related hospital admission rates for under 18's.

4. Future Working Arrangements

- 4.1. The position regarding devolution has been outlined in detail in the Tunbridge Wells report, the Tonbridge & Malling are part of this cluster, along with KCC, Sevenoaks and Tunbridge Wells. Consistent with the view expressed by the Tunbridge Wells report authors we envisage that these proposals will have a positive impact on the delivery of health improvement and focus around the wider determinants of health.
- 4.2. A new Health Inequalities Action Plan will be produced in 2017 to run until 2020, this will again reflect our local priorities and link with the KCC Plan.

5. Conclusion

- 5.1 The Health Inequalities Action Plan provides a focus for the work undertaken by the Council and its partners to tackle the health inequalities in our communities. It is hoped that this will be further developed through the new Plan and that the good work that has begun to integrate across this area can be built on to achieve strong local outcomes.

