

SEVENOAKS DISTRICT STRATEGIC BOARD

13 November 2013 at 7.00 pm
Conference Room, Argyle Road, Sevenoaks

AGENDA

Membership:

Chairman: Cllr. Fleming Vice-Chairman: Cllr. Brookbank

District Councillors Members

Cllrs. Mrs Bosley, Clark, Davison, Grint, Ramsay and Searles

The County Councillors for the 7 County Electoral Divisions representing the Sevenoaks District:

County Cllrs: Brazier, Chard, Mrs. Crabtree, Gough, Parry and Pearman

	<u>Pages</u>	<u>Contact</u>
Apologies for Absence		
1. Minutes	(Pages 1 - 6)	
Minutes of the meeting held on 11 September 2013.		
2. Declarations of Interest		
Any declarations not already registered.		
3. Actions from the last meeting	(Pages 7 - 8)	
4. Health	(Pages 9 - 66)	Hayley Brooks Tel: 01732 227272
Health Inequalities Action Plan and Presentation		
5. Youth Provision	(Pages 67 - 68)	Nigel Crocker KCC
Report Update		
6. Troubled Families		Jackie Marks KCC
Verbal update		

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| 7. | Children Local Operational Group
Verbal update | Nick Fenton
KCC |
| 8. | Libraries
Verbal Update | Angela Slaven
KCC |
| 9. | Education
Report Update | (Pages 69 - 70)
Richard Dalziel
KCC |

EXEMPT ITEMS

(At the time of preparing this agenda there were no exempt items. During any such items which may arise the meeting is likely NOT to be open to the public.)

To assist in the speedy and efficient despatch of business, Members wishing to obtain factual information on items included on the Agenda are asked to enquire of the appropriate Contact Officer named on a report prior to the day of the meeting.

Should you require a copy of this agenda or any of the reports listed on it in another format please do not hesitate to contact the Democratic Services Team as set out below.

For any other queries concerning this agenda or the meeting please contact:

The Democratic Services Team (01732 227241)

SEVENOAKS DISTRICT KENT LOCALITY BOARD

Minutes of the meeting held on 11 September 2013 commencing at 7.00 pm

Present: Cllr. Fleming (Chairman)

Cllrs. Brazier, Brookbank, Clark, Crabtree, Davison, Gough, Grint, Parry and Ramsay

Apologies for absence were received from Cllrs. Mrs. Bosley, Chard, Pearman and Searles

1. Minutes

Resolved: That the minutes of the meeting of the Sevenoaks District Kent Locality Board held on 6 March 2013, be approved and signed by the Chairman as a correct record subject to the word 'Some' being added before 'Members' to the beginning of the eighth paragraph of Minute 36.

2. Declarations of Interest

There were no declarations of interest.

3. Actions from the last meeting of the Board

The completed actions were noted.

4. Draft paper on the Sevenoaks District Strategic Board

In May 2013, it was announced that Locality Boards across Kent would not continue in their present form. The Board considered a report that set out the background to Locality Boards and sought approval to work with the County Council to set up a Sevenoaks District Strategic Board. The setting up of local arrangements to replace the Sevenoaks District Kent Locality Board had the support of the Leader of Kent County Council. The Board was asked to consider the report and make any recommendations to Governance Committee.

A paper was tabled requesting Members to approve the following amendment to the terms of reference:

- amending number 1 to remove the word "Cabinet" to read "...and 7 Sevenoaks District Council Members"
- the addition of a new number 2 "The Leader of Sevenoaks District Council will have the power to rotate/amend the District Council membership as appropriate" with sequential numbering appropriately changed.

Members were also asked to agree an amendment that the proposed Strategic Board delivery structure be noted.

Agenda Item 1 Sevenoaks District Kent Locality Board - 11 September 2013

In response to a question, the Head of Business Transformation and Programmes at Kent County Council (KCC) confirmed that the arrangements did not need to be formally confirmed through the KCC committee process.

The Chief Officer Communities and Business, advised that the funding referred to in the report was received as part of the Performance Reward Grant for Kent received from central government for the Local Area Agreement. The District Council administered this and partners could bid for project in order to deliver the community plan. An Officer group appraised the applications according to the Scheme guidelines.

Action 1: The Guidelines to be circulated prior to the next meeting.

Members noted that the future of the Sevenoaks District Local Children's Trust Board within the proposed delivery structure, was yet to be determined. The Chief Officer Communities and Business advised that KCC were proposing to take forward Local Children's Arrangements through existing Health and Wellbeing Boards, with district level Local Operational Groups. This proposal had not yet been formally agreed. If it was agreed, the 'Sevenoaks District Children's Local Operational Group' was likely to be one of the groups able to assist delivery of the Community Plan and therefore appeared on the organisational structure chart.

Resolved: That it be RECOMMENDED to Governance Committee to recommend to Council that:

- a) the creation of a Sevenoaks District Strategic Board which builds on the working arrangements of the previous Sevenoaks District Kent Locality Board, be approved;
- b) the draft terms of reference as amended, be approved; and
- c) the proposed Strategic Board delivery structure, be noted.

5. Education

The Area Education Officer (North Kent) KCC, tabled an [update](#) on education matters within the area. He confirmed that all projects were on budget and on time. He had visited Otford Primary the day before, handover was not until 16 September 2013 but a contingency plan was in place. Sevenoaks Primary had moved in on time and had been able to deliver at the start of the school term. He requested that he have access to the Sevenoaks District Council Local Housing Plan so that it could be factored into the forecasting for migration / indigenous growth and birth rate.

6. Health

The Chief Officer Communities and Business advised that there were Member representatives on both Health and Wellbeing Boards. The West Kent and Weald Clinical Commissioning Group (CCG) were progressing well and were getting out lots of data at meetings to identify priorities. They had also set up an integrated health and social care group to look at joint commissioning needs. Task Groups had been set up to look at

issues in more depth. The three groups which had been set up were: tobacco control; childhood obesity; and falls prevention.

The Dartford, Gravesham and Swanley CCG started later, it had held several meetings informally and the first meeting to be held in public would be in November 2013. As yet the terms of reference were not yet agreed. A commissioning group was due to be set up.

County Cllr. Gough reported that there had been a 'Mapping the Future Event' looking at integrated commissioning. Cllr. Davison advised that the West Kent and Weald Clinical Commissioning Group (CCG) had held three or four public meetings as it had been the only way he had been able to attend. The Chairman requested that a map or flow diagram be circulated to Members in order to see how the different groups interacted etc. with details of who attended on behalf of KCC and SDC.

Action 2: County Cllr. Gough to provide a simple flow diagram to be emailed to Members.

7. Youth Provision

The Area Youth Officer (KCC) reported that eight months into the new commissioned service regime there were issues in certain areas especially regarding CXK provision. There was a vacancy at the Swanley Centre, the detached team had been working well in Westerham area. The CXK team had pulled out of New Ash Green due to aggressive behaviour problems. They were working with the local PCSO and KCC to address this. There was to be a meeting the following week to review the contract with CXK. House in the Basement in Sevenoaks was going well, as was the West Kent Extra Partnership working well in Edenbridge.

Members expressed concern that it had not been possible to recruit to the Swanley Centre. The Area Youth Officer responded that the assistant to the full time worker position had stepped up, and Dartford were supporting where possible. However they did not wish to appoint below the desired skill level and unfortunately this had not yet been met.

The meeting that would be held the following week with CXK was to assess whether intervention was needed.

Local members for New Ash Green were surprised that CXK had encountered problems as they did not believe local organisations such as HAWK ever had. With regards to the use of the council van by CXK the Chief Officer Communities and Business reported that CXK had advised that they had not yet been able to purchase the van they required and she was reluctant to withdraw its use whilst it was enabling them to do work in our community. She had investigated charging for its use but this would invalidate the insurance of the vehicle.

Action 3: Local Members to be kept informed of CXK performance

The Head of Business Transformation and Programmes advised that he would report back to the Director of Service Improvement.

8. Troubled Families

Members considered the update report on the 'Trouble Families Project'. The Chief Officer Communities and Business was happy to have a briefing meeting with the project Co-ordinator with the new County Council members, it was agreed that this would be helpful. The Head of Business Transformation and Programmes praised the Chief Officer Communities and Business in her work supporting the project locally. There was great expectation on delivery from Central Government yet the reality was that this was about long term sustainable change.

9. 2013 Community Plan Annual Report

Members considered and noted the Sevenoaks District Sustainable Community Action Plan 2013 – 2013 Annual Report.

10. Quarter 1 monitoring for the 2013 - 2016 Community Plan

Members considered the Quarter 1 Community Plan Monitoring Summary. The Chairman and Chief Officer Communities and Business had attended a meeting with the new Police Commissioner. The Chief Officer Communities and Business had spoken with the local Chief inspector and had been reassured that the second quarter would show an improvement. Burglaries other than Dwelling had been on an upward trend, relating mostly to garden sheds and outbuilding. Response teams were coming out of Ebbsfleet or Tonbridge

Data was awaited for respite care, support and adaptations. There had been a slight increase in child poverty but future quarterly reports would be able to include trend analysis.

11. Children's Centre Consultation and Local Children's Trust Board arrangements

Members considered the KCC Children's Centres Document entitled 'Shaping the future of Children's Centres in Kent.' Concern was expressed as to whether resources could be being stretched too far and the outcome be detrimental to service delivery. A Member was disappointed at the age of the statistics used and queried that projected population figures were down when Education earlier in the agenda were increasing primary intake.

The Early Intervention Delivery Manager (North) KCC, replied that he would look into the projected population figures; the age of the statistics was as a result of when the consultation began. With regards to staffing, whilst there was a difference to operational delivery he was not aware that there would be any job losses.

12. Libraries

An [update](#) on the progress of the future Library Services Programme was tabled. It was agreed that the Members Working Group should meet one more time.

THE MEETING WAS CONCLUDED AT 9.08 PM

CHAIRMAN

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ACTIONS FROM THE MEETING HELD ON 11.09.13			
Action	Description	Status and last updated	Contact Officer
ACTION 1	That the guidelines for the Performance Reward Grant for Kent be circulated	To be updated at the meeting	Chief Officer Communities and Business
ACTION 2	A flow diagram of how the intergrated commissioning groups interacted with each other	To be updated at the meeting	County Councillor Gough
Action 3	Local Members to be kept informed of CXK performance	To be updated at the meeting	Chief Officer Communiites and Business

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SEVENOAKS DISTRICT HEALTH INEQUALITIES ACTION PLAN

Sevenoaks District Strategic Board – 13 November 2013

Report of Chief Officer Communities & Business

Status: For Consideration

Also considered by: Economic & Community Development Advisory Committee – 24 October 2013
Cabinet – 5 December 2013

Key Decision: No

Executive Summary: The Sevenoaks District Health Inequalities Action Plan sets out objectives and actions that will help to reduce health inequalities across the District.

This report supports the Key Aim of reducing health inequalities and improve health and wellbeing for all

Portfolio Holder Cllr. Hogarth

Contact Officer(s) Hayley Brooks Ext. 7272

Recommendation to Sevenoaks District Strategic Board:

Members' views are sought.

Recommendation to Cabinet:

That the Sevenoaks District Health Inequalities Action Plan be agreed and adopted.

Reason for recommendation: Adoption of the Action Plan will assist in reducing health inequalities within the Sevenoaks District.

Introduction and Background

- 1 Members may recall that the Health & Social Care Act 2012 set up a new Public Health Service called Public Health England. At the local level in Kent, responsibility for the public health function has been given to Kent County Council.
- 2 District Councils in Kent have been asked to lead on the production of an action plan which can demonstrate how the County-wide objectives can be delivered locally. The Sevenoaks District Health Inequalities Action Plan is set out at Appendix A.
- 3 Widespread consultation has taken place starting with workshops led by Professor Chris Bentley to help determine local actions to meet identified priorities. The

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Sevenoaks District Health Action Team and the Health Liaison Board have also been consulted.

Sevenoaks District Health Overview

- 4 Calculation of life expectancy at birth is a national measurement used to assess differences between affluent and deprived wards. The draft Action Plan shows that the overall difference in life expectancy in the Sevenoaks District based on ward differs by 6 years for men and 11.6 years for women.
- 5 The 2012 Sevenoaks District Health Profile set out the key health priorities for the Sevenoaks District:
 - There is a significant difference in life expectancy between the most deprived and most affluent wards.
 - The District has the second highest prevalence of Type 2 Diabetes in West Kent and this number is expected to rise over the next 15 years.
 - Around 16.1% of year 6 children in the District are classified as obese and with 23.9% of adults being classed as obese.
 - An estimated 18% of adults smoke.
 - Six out of the 74 smallest measurable areas in the District are more deprived than the UK average.
 - 11.6% of children in this District are in families on out of work benefits and children in two wards are within the top 20% of child poverty levels in relation to the county and national average.
- 6 The Action Plan provides a framework and tools to identify, analyse and evaluate actions that can contribute to reducing health inequalities in the Sevenoaks District.
- 7 The Action Plan sets out six objectives and actions to reduce health inequalities across the District:
 - Give every child the best start in life
 - 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 prevention

- 8 A copy of the draft Action Plan is available on the Council’s website with the agenda papers and a copy is available in the Members’ Room. Officers will be pleased to answer any questions relating to the detail of the draft Action Plan in advance of the meeting.
- 9 The draft Action Plan will also be considered at an informal meeting of the Health Liaison Board in November 2013.

Key Implications

Financial

- 10 Sevenoaks District Council received £130,741 from Kent County Council in 2013/14 for the delivery of prevention programmes and it is hoped that this funding will also be received in 2014/15.

Legal Implications and Risk Assessment Statement.

- 11 There are no legal implications relating to this report.

Risk	Mitigation
Health interventions are scaled back for 2014/15 due to a reduction in funding	Health interventions will be targeted at those in the greatest need

Equality Impacts

Consideration of impacts under the Public Sector Equality Duty:		
Question	Answer	Explanation / Evidence
a. Does the decision being made or recommended through this paper have potential to disadvantage or discriminate against different groups in the community?	No	The Action Plan will have a positive impact in reducing health inequalities across the District.
b. Does the decision being made or recommended through this paper have the potential to promote equality of opportunity?	Yes	
c. What steps can be taken to mitigate, reduce, avoid or minimise the impacts identified above?		N/A

Sustainability Checklist

- 12 A sustainability checklist has been completed and published on the website.

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Conclusions

- 13 The Sevenoaks District Health Inequalities Action sets out objectives and actions that will help to reduce health inequalities across the District. Members' views will be taken into account in the final Action Plan.

Appendices

A copy of the Sevenoaks District Health Inequalities Action Plan is available on the website and a hard copy is available in the Members' Room and Argyle Road Reception.

Background Papers:

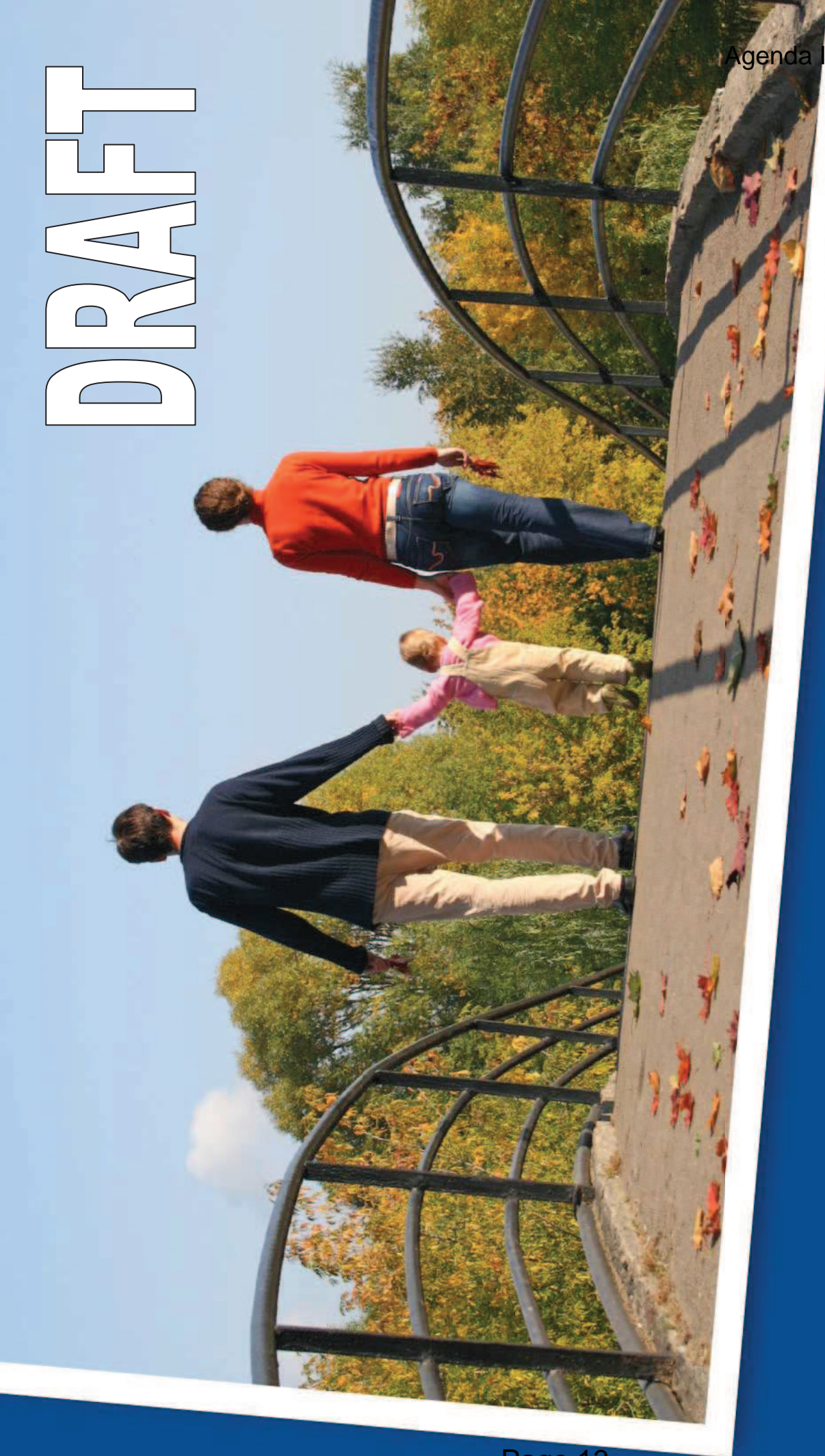
[Sevenoaks District Community Plan](#)

[Public Health Outcomes Framework Indicators](#)

Lesley Bowles

Chief Officer – Communities & Business

DRAFT



Sevenoaks District's Health Inequalities Action Plan

MIND THE GAP Building bridges to better health for all



Sevenoaks
DISTRICT COUNCIL

2013/15

Foreword

*Cllr Peter Fleming
Leader of Sevenoaks District Council*



The Sevenoaks District Community Plan is delivered by a range of partners who are committed to working together to deliver outcomes for residents of the Sevenoaks District.

The Mind the Gap Action Plan supports key actions in the Sevenoaks District Community Plan. We want Sevenoaks to be a place where people have healthy lifestyles and where health inequalities are reduced.

From our consultations, we know that transport to local health facilities is an issue for many people who do not drive, particularly in rural areas. Residents are concerned to make sure that the health needs of children and young people are taken into account and that we improve access to health advice and information including advice about drug and alcohol misuse. It is also important to maintain access to the District's leisure facilities, open spaces and to the countryside and to continue to provide healthy lifestyle activities.

We are aware of the challenges we face in planning the health and social care needs of an ageing population because people are living longer and we know that both diabetes and dementia will increase over the next 15 years. This is why it is so important to reduce health inequalities across the District now, to prepare for the challenges of the next 15 years. I welcome this plan and look forward to seeing the improvements that it will make.

*Professor Chris Bentley
Visiting Chair of Public Health at
Sheffield Hallam University*



Kent County Council, together with its strategic partners, is strongly committed to addressing the health inequalities, which they have identified as a significant issue across the County.

Through my former role as Head of the Health Inequalities National Support Team, I worked with the 70 most deprived areas with the poorest health across England, supporting them to develop and deliver on effective strategies to narrow the gap with those more fortunate. Kent has been keen to draw on the lessons learned from this national programme.

The Strategy is evidence based, and in order to achieve a real difference in the health and wellbeing of the population, they are taking good account of system, scale and sustainability of the constituent programmes. I am very pleased to acknowledge the extensive use that is being made of my 'Christmas Tree' framework in this plan. This brings together an approach which balances development of good quality services with attention to how the population uses the services, and is supported to do so. This is often neglected. I am confident that, with practical action, this approach can have a real impact.

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Introduction

1. Health Inequalities in Kent
2. Who Will do what
3. What this Plan will do to tackle Health Inequalities in Kent
4. The Tools We Use

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Objectives

1. Give every child the best start in life
2. Enable all children, young people & adults to maximise their capabilities and have control over their lives
3. Create fair employment & good work for all
4. Ensure a healthy standard of living for all
5. Create and develop healthy and sustainable places and communities
6. Strengthen the role and impact of ill health Prevention

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What people in Sevenoaks District think

“High priority should be given to helping people get out and about”

“Encouraging a healthy lifestyle and addressing drug and alcohol misuse can only improve the lives of our communities and help cut down anti-social behaviour & crime”

“Reducing fuel poverty could also help the ageing population.”

“Schemes such as the Why Weight programmes are valuable”

“Leisure facilities are critically important especially if we are to harness the legacy of the Olympics”

Agenda Item 4

Introduction

1. What is Health Inequalities?

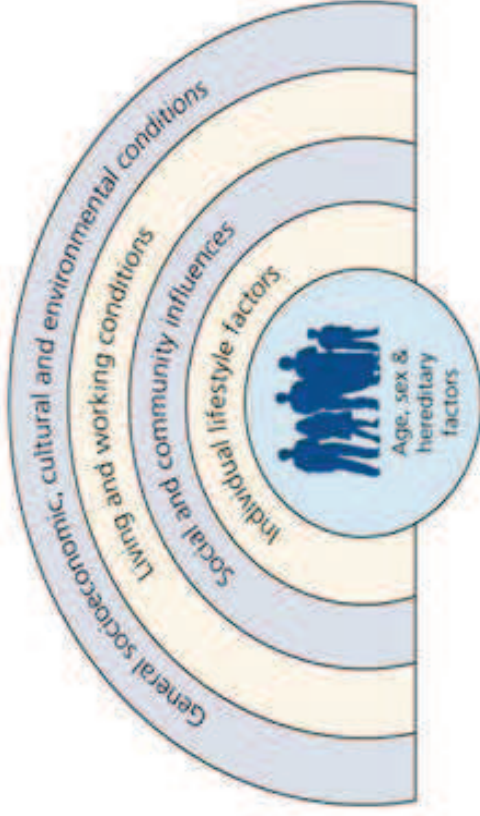
Health inequalities is the result of a mixture of factors including:

- the long-term effects of a disadvantaged social position
- differences in access to information, services and resources
- differences in exposure to risk
- lack of control over one's own life circumstances
- a health system that may reinforce social and economic inequalities.

These factors all affect a person's ability to withstand the biological, social, psychological and economic that can trigger ill health, these factors are demonstrated in Figure 1. They also affect the capacity to change behaviour.

Measures of health inequality are not primarily about health but about socio-economic status which has an impact on health and can lead to disease. Relative deprivation impacts on a person's ability to participate in or have access to employment, occupation, education, recreation, family and social activities and relationships which are commonly experienced by the mainstream. People in deprived circumstances often do not present with major health problems until too late. Barriers to presentation include structural issues such as poor access and transport; language and literacy problems; poor knowledge; low expectation of health and health services; fear and denial and low self esteem.

Figure 1



Dahlgren and Whitehead (1991)

2. Sevenoaks District Health Overview

The overall impression of affluence in Sevenoaks District masks local pockets of urban and rural deprivation. Forecasts show that in the period of 2010-2026, we will see a 31% increase in people over the age of 65 and a 62.99% increase in the people over 85. This will have a significant impact on the future provision of housing and health services in this District. In addition, we know that both diabetes and dementia will continue to increase over the next 15 years. Although the District overall is relevantly healthy, in comparison with England and Kent averages, when this data is broken down to ward level it shows inconsistencies relating to access to services and significant health inequalities across areas.

From the 2012 Sevenoaks District Health Profile we know that the key health priorities for this District include:

- There is a significant difference in life expectancy between the most deprived and most affluent wards, therefore increasing health inequalities within the District.
- The District has the second highest prevalence of Type 2 Diabetes in West Kent and this number is expected to rise over the next 15 years. Type 2 Diabetes increasing the risk factors of long term health conditions including heart disease, stroke, kidney failure and blindness and can reduce the life expectancy of a person by up to 10 years.
- Around 16.1% of year 6 children in the District are classified as obese and an estimated 18% of adults smoke with 23.9% of adults being classed as obese. These are all below the England average but still cause health inequalities within the District. The rate of higher risk drinking is higher than the UK average at 23.7%.
- Six out of the 74 smallest measurable areas in the District are more deprived than the UK average.
- 11.6% of children in this District are in families on out of work benefits and children in two wards are within the top 20% of child poverty levels in relation to the county and national average.

2013 Sevenoaks District Community Plan Consultations

Recent changes introduced by 2012 Health & Social Care Bill means significant changes came into force from April 2012 which will change the way health services are delivered, giving greater control for spending and commissioning services to GP's and upper tier local authorities taken over the responsibility for public health services.

From this Council's Community Plan consultations with local residents and stakeholders, we know that:

- Not all groups have equal access to services, facilities and opportunities
- Transport to local health facilities is an issue for many people who do not drive, particularly in rural areas.
- Residents were concerned to make sure that the health needs of children and young people were taken in to account
- Access improvements are needed to health advice and information including advice about drug and alcohol misuse.
- Local residents also told us that it is important to maintain access to the District's leisure facilities, open spaces and countryside to provide healthy lifestyle activities.

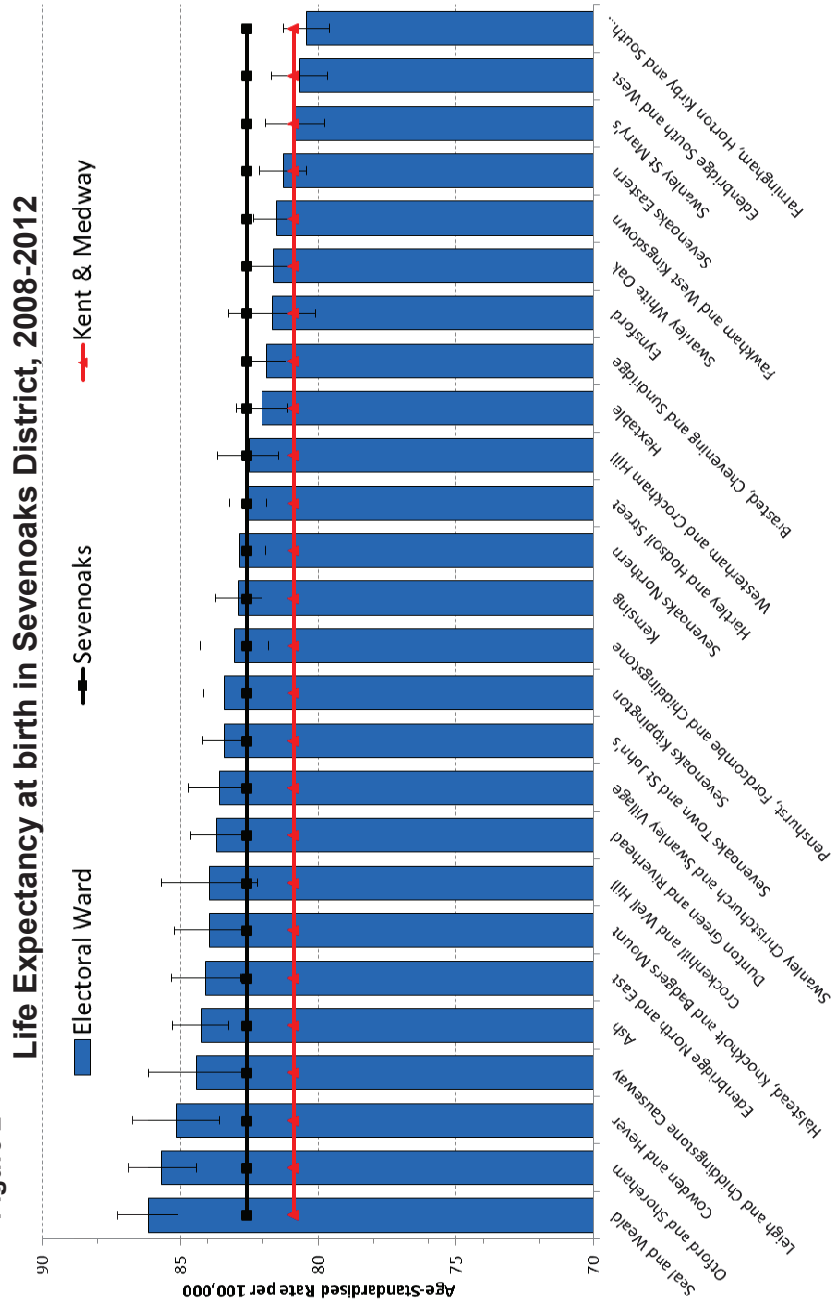
Health Inequalities in Sevenoaks District

The calculation of life expectancy at birth is a national measurement used to assess the differences between more affluent and deprived wards. The chart at Figure 2 demonstrates the difference in life expectancy at ward level across Sevenoaks District which shows the health inequalities across this District. This shows that the overall difference in life expectancy based on the ward in which you live can differ by 6.2 years. Areas of isolation and deprivation have contributing factors as well as lifestyle, environment, and social standings.

“All age All Cause Mortality” is the accepted measure of the overall health status of communities. By showing mortality rates charted to deprivation we can demonstrate the overall mortality gap between the richest and poorest in Sevenoaks District.

There is also a difference in life expectancy between different wards in the District with men in more deprived areas having 6 years shorter life expectancy than those from less deprived areas and women having 11.6 years shorter life expectancy.

Figure 2



Source: PHMF, ONS, Kent & Medway Public Health Observatory

3. What this Plan will do to tackle Health Inequalities in Sevenoaks District

We will aim to reduce health inequalities in this District by reducing the gap in health status between our richest and poorest communities, through effective partnership working with key agencies, the voluntary sector and local residents.

Most importantly we will improve health and wellbeing for everyone in Sevenoaks District but we will aim to “improve the health of the poorest fastest” so that more people will live longer in better health and the difference in life expectancy within and between communities will reduce.

This action plan will be delivered and monitored by the Sevenoaks District Health Action Team which provides a health deliver sub-group of the locality Health and Wellbeing Boards and the Local Strategic Partnership and contributes to delivering the key priorities identified by residents within the Sevenoaks District Community Plan. It will also contribute to the wider Kent ‘Mind the Gap’ Health Inequalities Action Plan.

The Economic Benefit of Reducing Inequalities will yield tangible results for individuals, families and communities. For example, each teenage pregnancy avoided will save a total of £400,000 in extra costs to the taxpayer in health, benefits, tax from earnings and lost productivity. 1,180 more people in Sevenoaks District were helped to stop smoking in 2012/13 and on average every smoker who quits will save over £2000 pa. Every pound invested in tobacco control and smoking cessation will save £11 in health, social care and related costs.

4. Who will Do What

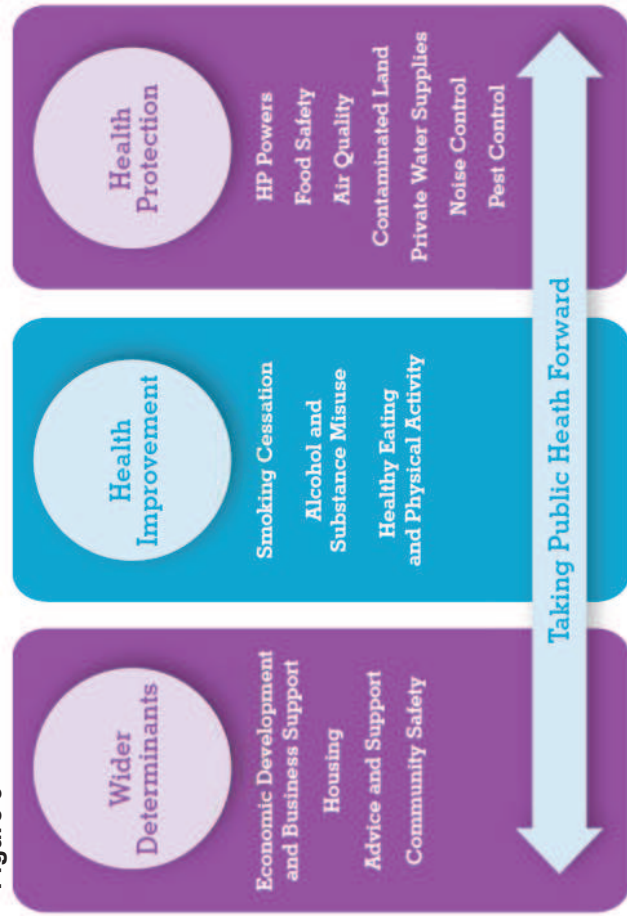
This Action Plan provides a framework and tools to identify, analyse and evaluate actions that can contribute to reducing health inequalities in Sevenoaks District. This Action Plan uses the Marmot principles to reduce health inequalities and his recommended life course objectives, from birth to end of life, to improve people’s health throughout each stage of their life course. Within the Action, each objective maps the priorities for this District, in line with the Kent priorities, and highlights the higher priorities for this District that need additional work, through targeted interventions and partnership working.

Each objective provides the evidence data to support the high priorities, whether this is because it being worse than the England or Kent average, or a gap in service provision has been identified. From pages 35, the detailed Action Plan sets out the actions that partners will deliver to achieve the health outcomes and highlights the higher priorities which will be monitored through the Sevenoaks District Health Action Team. Other identified priorities (highlighted grey in the Action Plan) will also be monitored to assess the direction of travel of each action to ensure this work continues to be delivered to make improvements.

Sevenoaks District Council

Although the main responsibility for Public Health sits with the upper tier local authority ie Kent County Council, the public health reforms enhance the role of District Councils in improving health and wellbeing outcomes for local residents. From environmental services, housing and open spaces, to the provision of leisure facilities and supporting economic growth, district council services have a vital impact on the wider determinants of health, as well as a major role in health improvement and health protection, as shown in Figure 3.

Figure 3



Source: District Councils' Network – District Action on Public Health

Sevenoaks District Council recognises the importance of reducing health inequalities. The Sevenoaks District Community Plan creates a long-term, sustainable vision for the Sevenoaks District and sets out the community's priorities for a action, reflecting what people have told us is important to them. Improving the health and wellbeing of residents and reducing health inequalities plays a vital role within all six elements of this Council's vision, including making Sevenoaks District a place with:

- **Safe Communities**
A safer place to live, work and travel
- **Healthy Environment**
People can have healthy lifestyles, access to quality healthcare and health inequalities are reduced.

- **Caring Communities**
Children are enabled to have the best start, people can be supported to lead independent and fulfilling lives
- **Dynamic Economy**
A thriving local economy where businesses flourish, where people have skills for employment and tourism is supported.
- **Green Environment**
People can enjoy clean and high quality urban and rural environment.
- **Sustainable Economy**
People can live, work and travel more easily and are empowered to shape their communities.

Kent County Council

Kent County Council is taking on new responsibilities for Public Health and for tackling the social determinants of health inequalities. However they recognise that this will only succeed if all District and Borough Councils and our key partners across each area are engaged and committed to reducing health inequalities in their areas.

The objectives and priorities for the County are set by the Marmot review and the Kent Joint Strategic Needs Assessment and the priorities and actions within the Kent ‘Mind the Gap’ Health Inequalities Plan adjusted to meet the needs of local communities within each District.

Clinical Commissioning Groups (CCGs)

As part of the new health commissioning arrangements, the NHS Commissioning Board and CCGs will need to adopt a process that demonstrates what they have done to fulfill their health inequalities duties and partnership working. Emphasis on reducing inequalities should be focused on delivering screening and prevention programmes including Health Checks, immunisations, early diagnosis and reducing the burden of long term conditions to the right populations not just those that present themselves.

There are two CCGs covering Sevenoaks District which includes the West Kent CCG covering Sevenoaks central and south, Tunbridge Wells, Tonbridge & Malling and Maidstone locality areas. The north of the District is covered by the Dartford, Gravesend & Swanley (DGS) CCG which covers Swanley and the northern parishes of Sevenoaks District, Dartford Borough and Gravesend. Although the DGS CCG looks like it covers a smaller demographic area of the District, due to the population spread across the District and the amount of green belt land, this CCG incorporates almost half of this District’s population (42%).

Local Health and Wellbeing Boards

Each District Council holds two seats (one Member and one Officer) on the Health and Wellbeing Boards co-ordinated by each CCG clinical lead. The Boards will focus on partnership working to deliver targeted commissioned services to meet population needs and will feed into the overarching Kent Health and Wellbeing Board. Information will flow to and from the Kent level Health and Wellbeing Board and the local Boards.

Acute Services

The NHS Outcome Framework defines and supports clinical outcomes, including the reduction of health inequalities for NHS commissioners, encouraging them to work in partnership with the public health system to improve health and wellbeing and reduce health inequalities, underpinned by NICE quality standards or other accredited evidence. In particular, the outcomes frameworks should be aligned, with further shared outcomes across the NHS and public health system.

5. The Tools We Use

What do we need to do: The action this Council needs to take is summarised in this Four Point Approach, in line with the Kent Health Inequalities Action Plan:

Deliver this 4 POINT APPROACH:

- i) **Target the population appropriately** by using local intelligence, data from the JSNA, locality health profiles, community consultations
- ii) **Apply the HINST Christmas Tree Tool** to commissioning to ensure interventions are delivered effectively to achieve population outcomes.
- iii) **Assess impact** on health inequalities by applying the wellbeing screening tool and by listening to local communities
- iv) **Ownership** and delivery of priorities through locally agreed action plans and partnership working

i) **Targeting the population** - Understanding the needs of our communities.

The focus of response strategies, both county and locality based, should be targeted in accordance with the principles of equity (greater attention and investment to areas and issues of greatest need) in order to maximise and improve overall outcomes.

There is a wealth of research, information, data and sophisticated profiling tools available in Kent to help identify those areas and issues of greatest need.

- o Joint Strategic Needs Assessment and Social Care maps (www.kmpho.nhs.uk/jsna/)
- o District and Kent Health Profiles from the Department of Health (www.apho.org.uk/resource/view.aspx?QN=HP_RESULTS&GEOGRAPHY=29)
- o Key facts about the County of Kent including Deprivation, population, employment, housing can be found at KCC Research and Intelligence Unit website (www.kent.gov.uk/your_council/kent_facts_and_figures.aspx)

ii) **Strategic Commissioning**

Using the HINST Christmas Tree Model (Figure 4), The Department of Health Inequalities National Support Team (HINST) developed the Christmas Tree model to introduce greater emphasis on the Population Focus (left hand side of the model). This is needed to fully achieve effective outcomes.

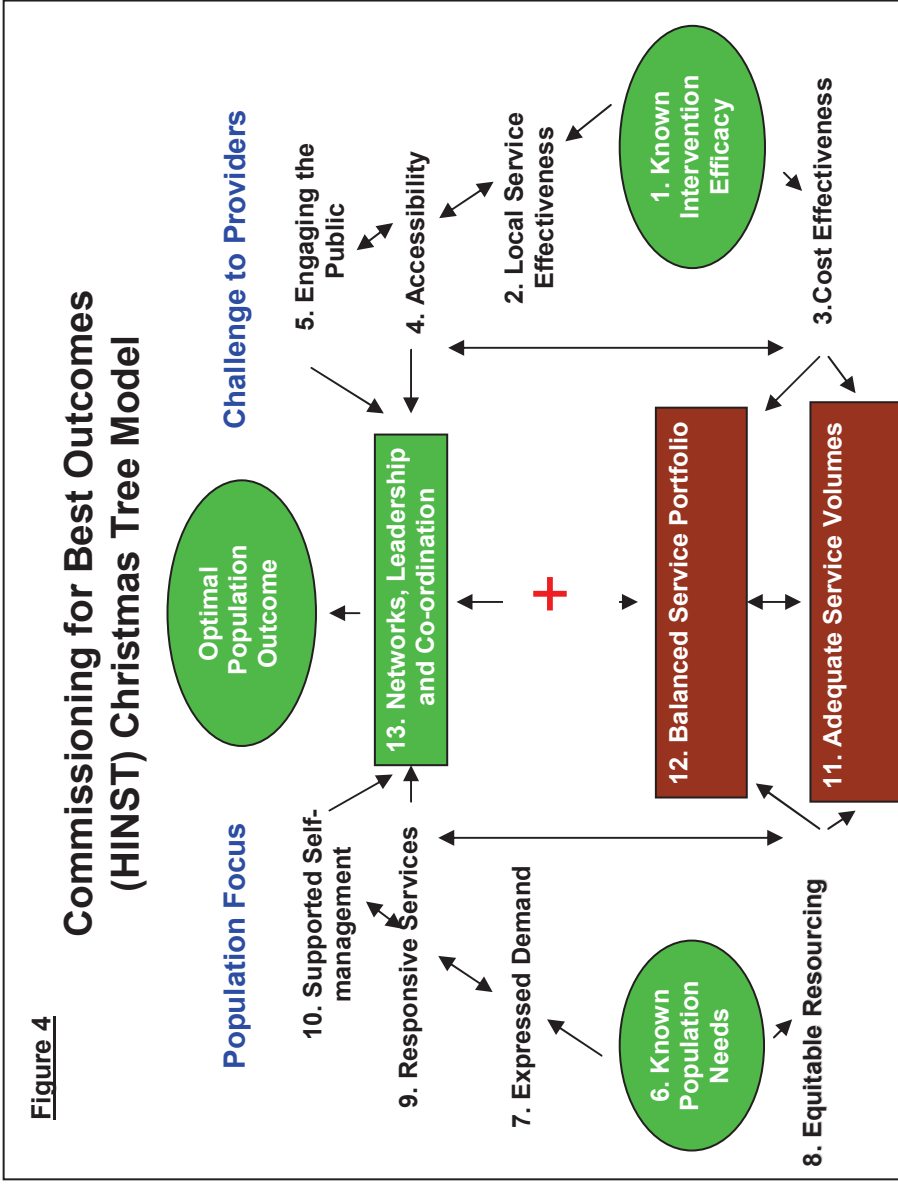
It has the potential to support commissioners to engage in the systematic delivery of the best health outcomes from a given set of interventions and ensure that local people have a voice.

iii) **Impact Assessment**

Supporting Operational effectiveness through the development of a health inequalities wellbeing screening tool will provide a model for assessing and measuring the of impact of interventions which are integral to cost effective commissioning and delivering targets and positive outcomes for the population. For example, the Mental Well-being Impact Assessment screening tool developed by the National MWIA Collaborative (England) and published in May 2011 will put wellbeing at the centre of our planning as a key part of addressing inequalities.

This approach will also provide the Health and Wellbeing Boards with evidence of improvements to facilitate access to the health premiums that the Government is proposing to use to reward progress on specific public health outcomes.

Commissioners should be aware of a range of tools available to help them assess cost benefits. The National Institute for Health and Clinical Excellence (NICE) proposed a three step approach to determine the benefits of public health interventions (2010) and recommended the need for benefits to be reported in ‘natural units’, such as life years saved and reductions in hospital admissions as well as through financial modeling.



1: Give every child the best start in life

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Improving health in the early years of life contributes considerably to better health outcomes in later life, with reduced levels of diabetes, coronary heart disease and hypertension, all of which have a significant impact on the NHS as well as wider society, children and their families.

The foundations for virtually every aspect of human development – physical, intellectual and emotional – are laid in early childhood. (Marmot Review 2010)

Key Priority for Sevenoaks District:

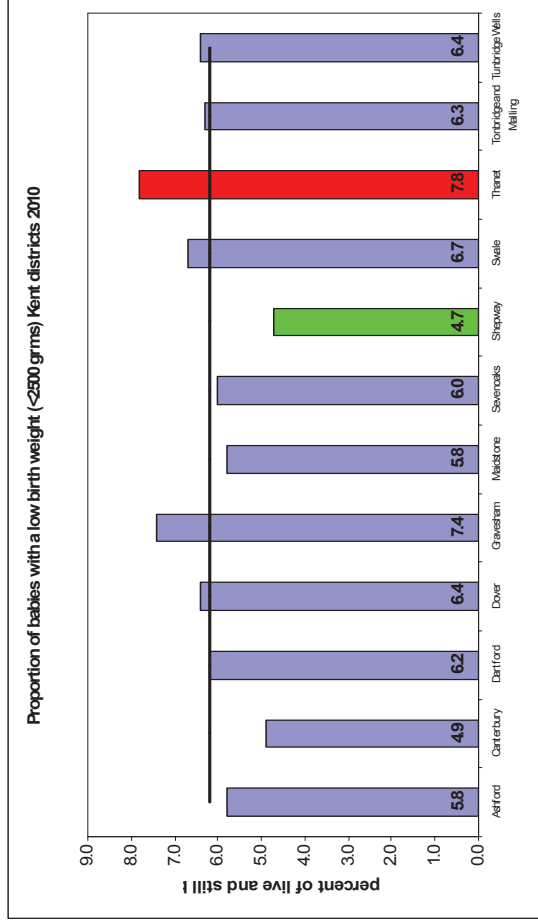
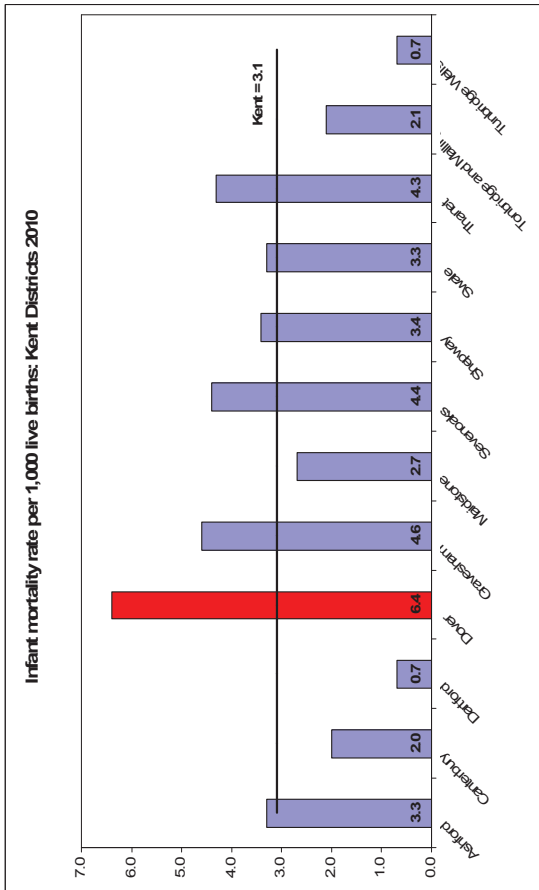
- **Help increase number of healthy births**
- **Encourage access to health services for all**
- **Promote healthy weight for children**

Objective 1(a): Give every child the best start in life (Conception-9 months)

<p>Delivered through: Maternity Matters, Infant Feeding Action Plan, Children Centres Delivery Action Plan, Sevenoaks District Teenage Pregnancy Action Plan</p>	
<p>Local Priorities:</p>	<p>1.1 Help increase the number of healthy births (High priority for Sevenoaks District)</p>
<p>Actions:</p>	<p>1.1.1 Run campaigns and deliver initiatives to promote good health in pregnancy and promotion Start4Life</p> <p>1.1.2 Ensure teenage parents receive holistic support</p> <p>1.1.3 Early identification of vulnerable parents smoking in pregnancy and work to reduce</p>
<p>1.2 Increase breast-feeding initiation rates at 6-8 weeks through Children Centre targeted locations</p>	<p>1.2.1 Positive promotion and creation of breast-feeding friendly environments</p> <p>1.2.2 Provide support to new mothers to increase the initiation and continuation of breast-feeding</p>

Objective 1(a) - Give every child the best start in life

Priority 1.1 Help increase number of healthy births



The NHS Information Centre for health and social care. © Crown Copyright.

- The overall rate for infant mortality for Kent has been consistently lower than the England and Wales rate. Infant mortality rate in Sevenoaks District is higher than the Kent average and is the third highest in Kent. This could point to a health inequality based on socio-economic circumstances.
- Low birth weight has serious consequences for health in later life. Increased viability and survival of very pre-term infants due to advances in medical technology will account for some of the very low birth rate weights. In 2008-2010 1.1% of babies born within the District had a Very Low Birthweight, higher than the Kent average of 1%. During the same time frame, 5.5% of babies born within the district were classified as Low Birthweight, below the Kent average of 6.2%.
- Smoking in pregnancy is known to affect both birth weight and incidence of infant mortality and continues to impact on the health of a child. Smoking status at time of delivery for Sevenoaks District is 12.2% (Local Tobacco Profiles for England, 2012), this rises to 43% for teenage mothers. The rate of change in smoking status amongst under 18's who are pregnant is one of the highest in Kent.
- Domestic violence is more likely to occur to women in their reproductive years, from lower socio-economic areas and often increases during pregnancy. 30% of new domestic abuse cases in England are against pregnant women.
- A particularly vulnerable group is teenage mothers who are much more likely to be posing considerable risk to both themselves and their babies. They are also highly likely to access services late, potentially further compromising their care. Teenage mothers had a statistically significant higher rate of stillbirths. Postnatally they had much lower rates of breastfeeding at both birth and at 6-8 weeks.

Objective 1(b): Give every child the best start in life (From 9 months upwards)

Delivered through: Kent Early Intervention and Prevention Team; KCHT Child and Young People’s Wellbeing Team; Putting Children First - Safeguarding and Looked After Children’s Services Improvement and Development Plan; Smokefree Homes initiative; SDC Family Healthy Weight Programmes; Troubled Families Project, Community Safety Partnership; CCGs; Patient Participation Groups; Children Centres

Local Priorities:	
Actions:	

1.3 Support parents so that they can raise emotionally and mentally healthy children	<p>1.3.1 Improve outcomes for families with crime and anti-social behaviour, absence and worklessness through the Troubled Families Programme</p> <p>1.3.2 Reduce repeat incidents of Domestic Abuse</p> <p>1.3.3 Supporting carers and child minders</p> <p>1.3.4 Give a better start for children through early intervention services for children 0-5 and their parents</p> <p>1.3.5 Help young people to feel safe from bullying at home, at school and be safe on the internet</p>
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1.4 Encourage access to health services for all (High priority for Sevenoaks District)	<p>1.4.1 Improve access to GP services and to hospitals, particularly in rural areas</p> <p>1.4.2 Making more localised – bring services out of traditional settings.</p> <p>1.4.3 Provide support for vulnerable groups to access health services</p>
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1.5 Promote Healthy Weight for Children (High priority for Sevenoaks District)	<p>1.5.1 Support parents and children to maintain a healthy weight</p> <p>1.5.2 Increase interaction between parents and children including healthy lifestyles and active play</p>
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Objective 1(b): Give every child the best start in life (9 months+)

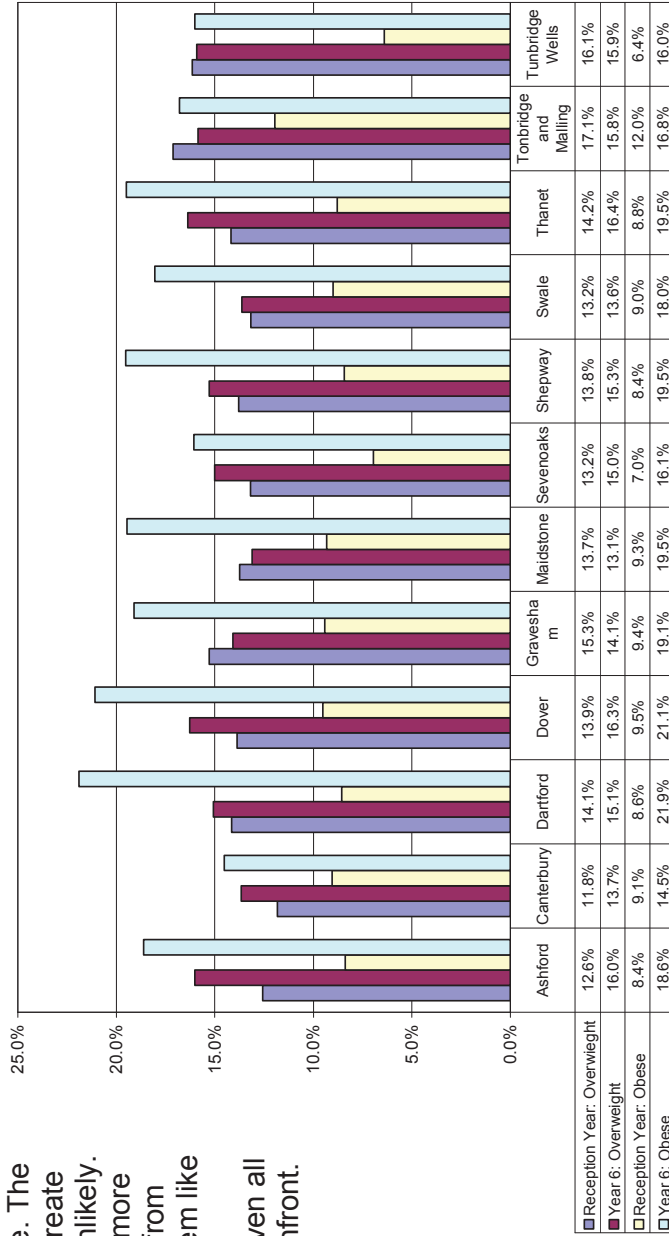
Priority 1.4 Encourage access to health services for all

GP and Dentist registrations- access to health professionals is vital to support good health outcomes and finding and visiting a GP can be more difficult for those experiencing disruption in their lives- including looked after children and the homeless. Due to the rural nature of the District, 5.7% of residents are further than 4 kilometers from a GP and 23% are further than 4km from a Dentist. Only 73% live within 8 kilometers of a hospital, drastically increasing the time it takes to receive emergency medical aid.

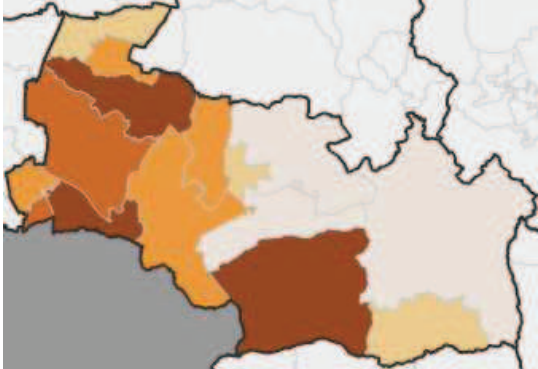
Priority 1b.3 Promote Healthy Weight for Children

Mounting evidence suggests that a critical period during which to prevent childhood obesity and its related consequences is before the age of five. The best thing we can do for children from 0-5 is create ways of life which continue to make obesity unlikely. Children who live in more deprived areas are more likely to be overweight and obese than those from the most affluent areas. Making what may seem like simple changes to daily habits (physical and nutritional) is sometimes simply too difficult given all the other difficulties many families have to confront.

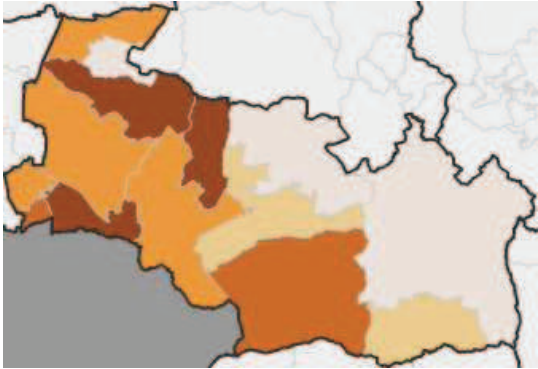
National Childhood Measurement Programme 2010/11: Percentage of overweight and obese children by year group and district



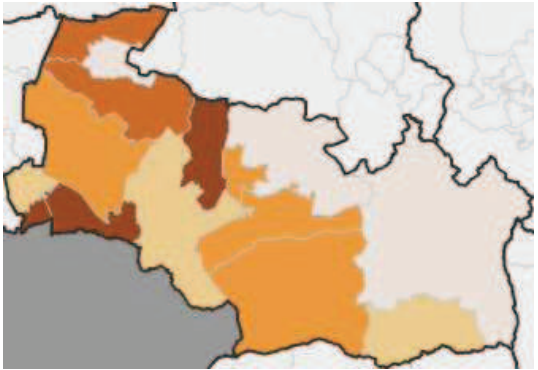
2009/2010 – 2010/2011



2008/2009 – 2009/2010



2007/2008 – 2008/2009

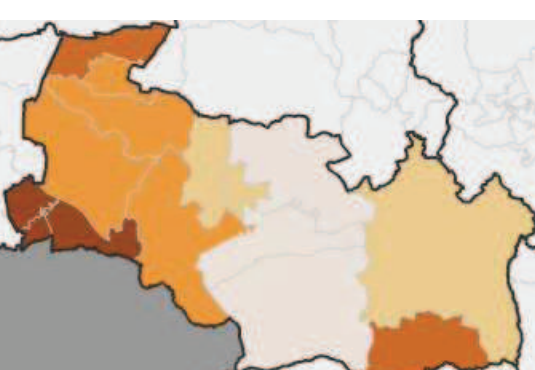
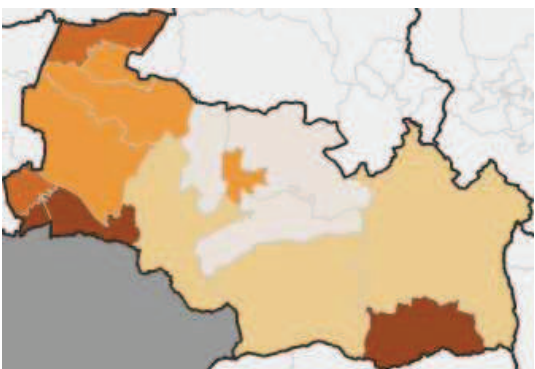
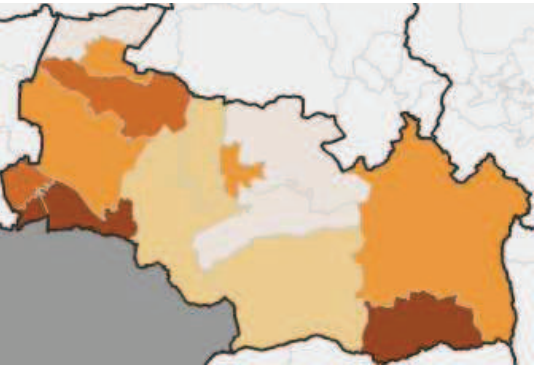


Prevalence of obesity at:

Reception year

	4.1% - 5.3%
	5.4% - 7.2%
	7.3% - 8.1%
	8.2% - 8.6%
	8.7% - 11.5%

Year 6



Source: Figures and maps from the National Obesity Observatory

2. Enable All Children, Young People and Adults to Maximise Their Capabilities and Have Control over Their Lives

Central to our vision is the full development of people's capabilities across the social gradient.

- Key Priority for Sevenoaks District:**
- **Improve educational attainment particularly at GCSE level**
 - **Support older people to keep them safe, independent and fulfilled lives**

Without life skills and readiness for work, as well as educational achievement, young people will not be able to fulfil their full potential, to flourish and take control over their lives (Marmot review 2010)

Objective 2: Enable all children, young people and adults to maximise their capabilities and have control over their lives

Delivery through: Kent Teenage Pregnancy Strategy; Adult Social Care Transformation Programme; 14-24 Strategy; Primary and Secondary Improvement Strategy; Youth Justice Plan; Anti-social behaviour Strategy; CYP; Falls Strategy; Active Lives Now; Valuing People Now

Local Priorities:	
Actions:	

2.1 Improve educational attainment particularly at GCSE level (High priority for Sevenoaks District)	<p>2.1.1 Enable more young people to have their achievements recognized</p> <p>2.1.2 Build in support and services within schools for vulnerable young people to engage</p> <p>2.1.3 Manage and support school non-attendance and increase access to services</p>
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2.2 Reduce the risk taking behaviours of young people	<p>2.2.1 Divert children and young people from crime and anti-social behavior</p> <p>2.2.2 Specialist support for alcohol and drug misuse</p> <p>2.2.3 Promote peer support interventions including youth peer educator, SAFE, health champions etc.</p>
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2.3 Support older people to keep them safe, independent and living fulfilled lives (High priority for Sevenoaks District)	<p>2.3.1 Provide access to healthy lifestyle interventions to enable older people to remain healthier and independent</p> <p>2.3.2 Partnership working to promote and develop self help services</p> <p>2.3.3 Increase referrals for home adaptations and falls prevention pathways to reduce the risk of falls</p> <p>2.3.4 Support older people and vulnerable people to remain in their own homes and live independently</p>
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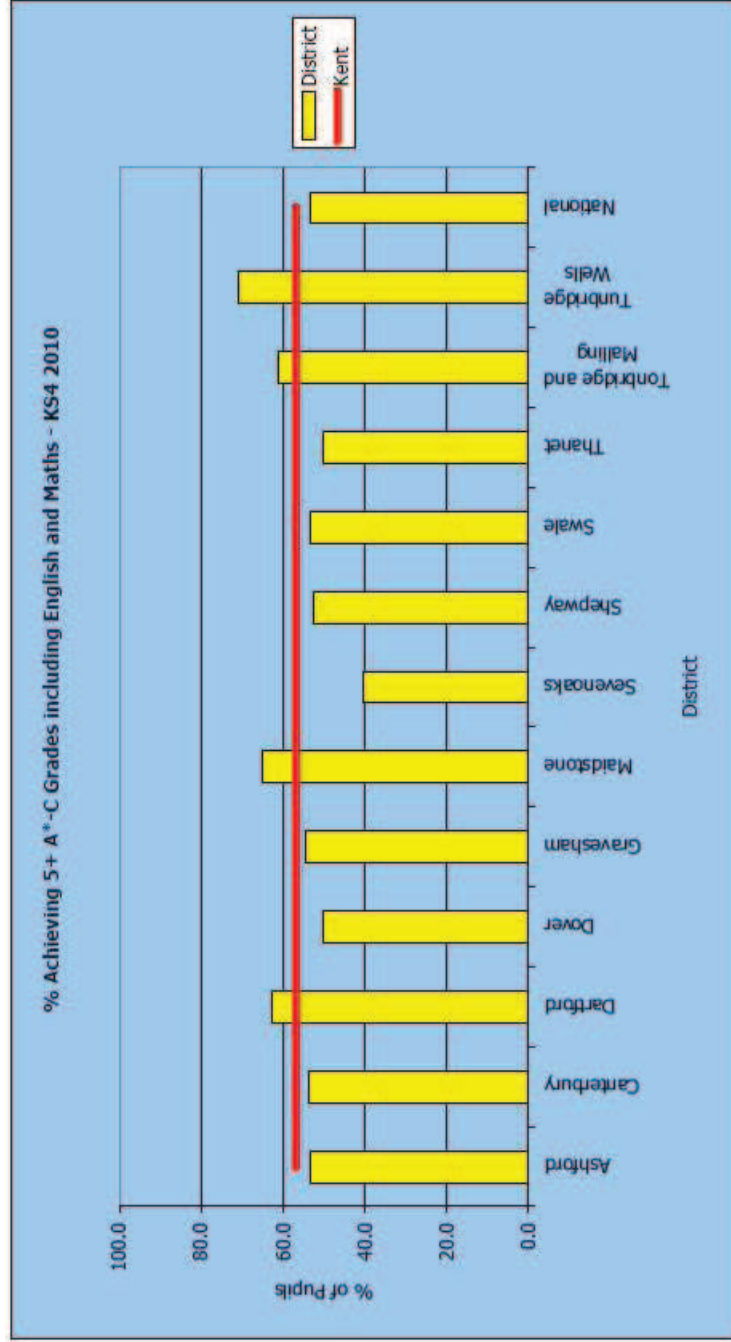
Objective 2 – Enable all children, young people and adults to maximise their capabilities and have control over their lives

Priority 2.1 Improve educational attainment particularly at GCSE level

There is a clear relationship between low educational attainment and poor health over a lifetime. For young people educational attainment supports economic wellbeing- the ability to get and keep a job which indicates better mental wellbeing and health outcomes for the rest of their lives.

There are a high number of individuals with no qualifications in the District. The proportion of individuals with no qualifications is higher than for South East as a whole but lower than Great Britain (11.1% in Sevenoaks District compared to 9.1% in the South East and 12.3% in Great Britain). The wards with the highest level of people with no qualifications or qualifications unknown are Swanley St Mary's (48.8%), Swanley White Oak (44.6%), Fawkham and West Kingsdown (41.4%), Edenbridge North and East (37.1%) and Swanley Christchurch and Swanley Village (36.9%). The level of GCSE attainment in state schools within the district is the worst in England. Sevenoaks District state schools have the worst GCSE results in the country with only 38.4% of pupils getting 5 A*-C GCSEs. Primary school results in the district vary considerably from excellent to very poor.

In Kent, children who take free school meals experience marked inequality in comparison to the achievement of their peers- including significantly lower outcomes at GCSE. Those children achieving 5+ A*-C GCSEs are more likely to experience longer term employment and have the capability to retrain at least twice during a working life. The highest uptake of Free School Meals in primary education comes from students who are residents of Swanley St Mary's, Sevenoaks Eastern and Swanley White Oak.



Priority 2.3 Support older people to live independently

The results of the 2001 Census indicated the number of people with a limiting long term illness (LLTI). Sevenoaks District has one of the lowest rates of LLTI in Kent. At 13.8% Sevenoaks District is also below the national, regional and county proportion of people with LLTI. The top three wards by disability claimants are Swanley St Mary's (1.8%), Fawkham and West Kingsdown (1.4%) and Edenbridge North and East (1.2%).

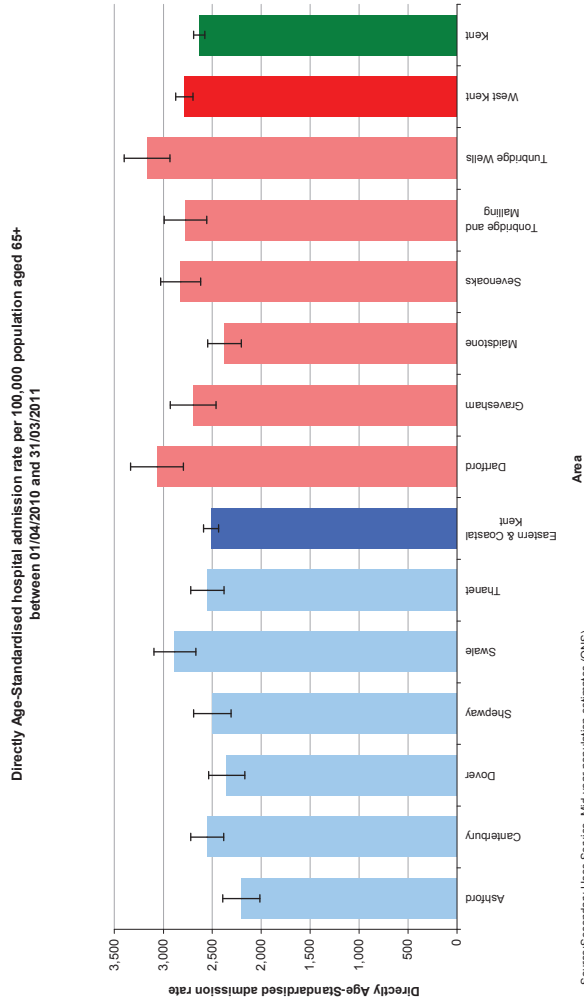
In rural areas like Sevenoaks District, elderly people can feel alienated due to various barriers to service and inadequate transport links. The wards with the highest level of older people in receipt of part of Pension Credit are Swanley White Oak (19%), Swanley St Mary's (18%), Sevenoaks Eastern (13%) and Edenbridge South and West (13%). Older people with multiple long term conditions are the main driver of cost and activity in the NHS as they account for around 70% of overall health and social care spend. They are disproportionately higher users of health services – representing 50% of GP appointments, 64% of outpatient attendances, 70% of inpatient bed days, 58% of A&E attendances and 59% of practice nurse appointments.

Falls and Fractures

Falls and fractures are a major cause of disability and the leading cause of mortality due to injury in older people aged over 65 in the UK, with large implications for the quality of life of older people who survive a fall.

Hip fracture is the most serious injury related to falls in older people, and can lead to loss of mobility and loss of independence, forcing many to leave their homes and move into residential care. Mortality after hip fracture is high: around 30% after one year. Current specialist services, particularly in West Kent, are not adequately resourced enough to risk assess all fallers (early enough) and provide or refer them to suitable interventions such as community exercise, adaptations at home and assistive technologies like telecare.

The lack of timely specialist risk assessment represents an important inequity in service leading to health inequalities both geographically as well as by age. For example the graph above suggests higher falls admission rates in West Kent compared to East Kent because of the lack of suitable specialist services in the hospital and community to deal with at risk fallers.



3. Create fair employment & good work for all

The recession is leading to increasing unemployment across Kent. The quality of work is also important with underlying low levels of stress connected to low paid and insecure work in poor conditions contributing to poorer health outcomes.

Work is good – and unemployment bad – for physical and mental health. Work cannot provide a sustainable route out of poverty if job security, low pay and lack of progression are not also addressed (Marmot review 2010)

Key Priority for Sevenoaks District:

- Increase proportion of young people (16-18) & (18-24) in fulltime education, employment or training

Objective 3: Create fair employment & good work for all

Delivery through: Economic Development Strategy; Backing Kent Businesses; 14-24 Strategy; Employability Strategy

<p>Local Priorities:</p>		
<p>3.1 Improve chances of employment for people facing disadvantage</p>	<p>3.1.1 Improve opportunities for employment for disadvantaged, vulnerable groups and people on benefits</p>	<p>3.1.2 Support local charities and community groups to support adults with disabilities into work and training</p>
<p>3.2 Increase proportion of young people (16-18) & 18-24) in fulltime education, employment or training (High priority for Sevenoaks District)</p>	<p>3.2.1 Support 16-18 year olds into employment and training</p>	<p>3.2.2 Increase the number of people accessing apprenticeship and graduate opportunities</p>
<p>3.3 Support businesses to have healthy workplaces</p>	<p>3.3.1 Support employers to create healthy work places and environments for staff</p>	<p>3.3.2 Place defibrillators as AED in workplaces or as public access defibrillators (PAD) in communities</p>
<p>Actions:</p>		

Objective 3: Create fair employment & good work for all

Priority 3.2 Increase proportion of young people (16-18) & 18-24) in fulltime education, employment or training

Just under 32% of Sevenoaks pupils continue in education which is the lowest figure in the County. This figure is significantly worse than any other district and some way below the Kent average. However that's not to say that they simply just leave school. These figures do not represent the numbers of students who leave the district to continue their Post 16 education. This can be seen in the figures where 43% of students continue their education in colleges. Given that there are no colleges in Sevenoaks means that many travel across district boundaries to attend them. There are college facilities in nearby Tonbridge for example where many students from the district choose to attend. This figure more than anything represents the lack of educational facilities in the district and does not necessarily represent the quality of existing schools in Sevenoaks. The district has just 6 secondary and specialist schools which is considerably lower than boroughs like Maidstone with 14 and Canterbury with 13. Source: DfE Edubase

District	Not in Education, Employment or Training (NEET)	
	Number	%
Ashford	52	3.9
Canterbury	45	2.6
Dartford	34	2.5
Dover	42	2.9
Gravesham	26	1.9
Maidstone	55	2.8
Sevenoaks	55	9.7
Shepway	49	4.2
Swale	33	2.1
Thanet	55	3.4
Tonbridge and Malling	38	2.5
Tunbridge Wells	16	1.0
Kent	500	2.9

District	Continued in Education (School)		Continued in Education (College)	
	Number	%	Number	%
Ashford	853	63.2	319	23.6
Canterbury	1032	59.1	538	30.8
Dartford	846	61.8	378	27.6
Dover	834	56.8	467	31.8
Gravesham	770	56.5	475	34.8
Maidstone	1273	63.9	525	26.4
Sevenoaks	180	31.9	243	43.0
Shepway	662	56.5	330	28.2
Swale	1024	65.1	387	24.6
Thanet	771	47.5	660	40.6
Tonbridge and Malling	898	58.4	479	31.1
Tunbridge Wells	1174	72.1	357	21.9
Kent	10317	59.3	5158	29.7

Sevenoaks has the highest percentage of young people NEETS (not in education, employment or training) in the county at 9.7%. This is significantly higher than the Kent average and large and way above any other district. The second highest area, Shepway recorded figures of only 4.2%. Although the actual figures are similar it is the proportion within Sevenoaks that makes the district stand out. This can be related to the relatively poor GCSE results that some pupils from the district gain who are either under qualified or discouraged from entering further education, jobs or training.

It is vital to provide the right support to the right people at the right way. Poor standards of living contribute to ill health and negative mental wellbeing.

4: Ensure healthy standard of living for all

Having insufficient money to lead a healthy life is a highly significant cause of health inequalities
(Marmot Review 2010)

Key Priority for Sevenoaks District:

- **Meet the housing needs of people living in the District include affordable and appropriate housing**

Objective 4: Ensure healthy standard of living for all

Delivery through: Backing Kent People Programme; Sevenoaks District Community Plan; CYPP Kent's Poverty Strategy
 Economic Development Strategy; Backing Kent Businesses; 14-24 Strategy; Employability Strategy

Local Priorities:	
Actions:	

4.1 Provide the right support at the right time including financial capacity support and inclusion	<p>4.1.1 Support people in accessing benefits and in the transition to universal credit</p> <p>4.1.2 Provide support and advice for families regarding benefits and employment.</p> <p>4.1.3 Interventions to assist older people to down-size to more affordable and suitable accommodation</p>
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4.2 Promote opportunities to support families in poverty	<p>4.2.1 Meet the needs of vulnerable and lower income households.</p> <p>4.2.2 Provide support, advice and information to residents about debt management and financial awareness</p>
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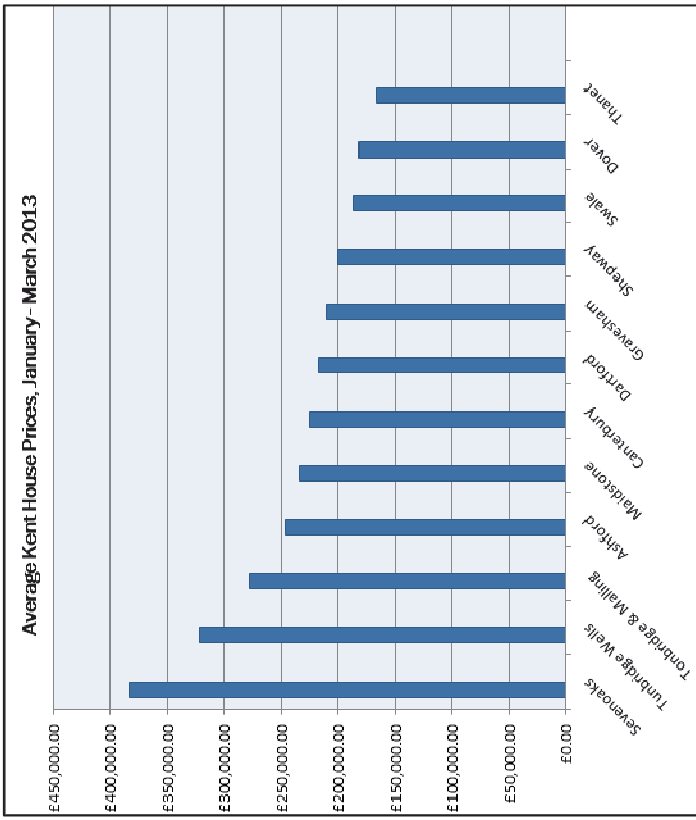
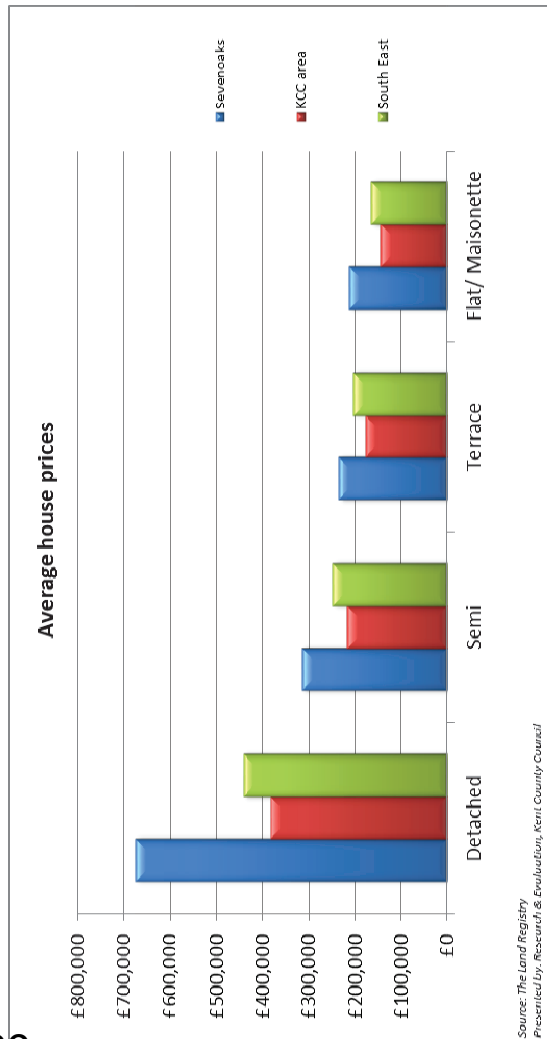
4.3 Meet the housing needs of people living in the District include affordable and appropriate housing (High priority for Sevenoaks District)	<p>4.3.1 Carry out an Older Persons Housing Needs Assessment to better understand the needs of older people</p> <p>4.3.2 Provide affordable housing to meet identified needs of vulnerable groups</p> <p>4.3.3 Work with developers, landlords and owner-occupiers to provide appropriate housing suitable for all demographics</p>
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Objective 4: Ensure healthy standard of living for all

The average house price in Sevenoaks is now 383,000 (Jan- March 2013). A rise of £15,000 on 2007 house prices. A continued shortage of affordable housing has problems for job retention and leads to a shortage of applicants for low paid jobs because the district is unaffordable. Steps need to be taken to avoid Sevenoaks becoming a 'gated' community for the wealthy.

The national Housing Federation says that in the last ten years, average house prices have risen from £126,000 to £229,000. These are even higher average prices than in our towns and cities – but wages in rural areas are on average lower than in urban centers. So the only ones who can afford to live in villages are people who have homes passed down through their family or older, wealthy people who can afford to move to the countryside to retire – or even to buy a second home that they only live in sometimes. It's pretty difficult for those under 40 to buy a home in our cities. It's even harder, indeed almost impossible, in our villages and market towns.

Not only does affordable housing help local people to continue to live in the same area as their friends and family, it also maintains the economic viability of rural communities by ensuring continued demand for key services such as shops, schools, post offices and pubs. Just a small number of new affordable homes can benefit the whole community. The number of over-65s in rural areas has risen 61% faster than in towns and cities (18% rise in rural areas compared to 11% rise in towns and cities).



The relatively low level of projected housing growth. Some 3,300 homes are due to be built in the district between 2006 and 2026. This is compared to Ashford where over 22,000 homes are expected to be built in the same period. House prices are some of the most expensive in the country and are unaffordable to many first time buyers. 93% of the district is designated green belt which restricts many development opportunities. Greenbelt restrictions on land that is able to be developed combined with unaffordable housing stock make Sevenoaks in need of affordable housing.

At the same time the amount of people aged 25-44 is expected to decrease by 12.1%. This may be due to economic factors such as unaffordable housing. The youth homelessness charity Centrepoint says nearly a million affordable homes are needed nationally by 2021 to avoid a housing crisis. Acute housing crisis combined with tough economic conditions for house builders, first time buyers and rising population makes everything worse.

5. Create and Develop Healthy and Sustainable Places & Communities

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Promoting wellbeing is at the heart of what local government is about: supporting a better life for its citizens and helping to build resilient communities, now and over the longer term

Key Priority in Sevenoaks District:

- **Sustain and support safe communities**

'Dream with me of a fairer world, but let us take the pragmatic steps necessary to achieve it'

Sir Michael Marmot October 2011

Objective 5: Create and develop healthy and sustainable places and communities

Delivery through: Find ways to integrate planning, transport, housing, environmental and health policies to address the social determinants of health in each locality. Delivery through Kent housing strategy, Supporting people, Regeneration strategy; District Community Strategies; Keep Warm Keep Well and Warm Homes Healthy people

<p>Local Priorities:</p>		
<p>Actions:</p>		
<p>5.1 Reduce homelessness and is negative impact for those living in temporary accommodation</p>	<p>5.1.1 Intervention for young people especially around mentoring on budgeting and housing</p>	<p>5.1.2 Training for front line workers on the welfare change</p>
<p>5.2 Develop our communities to be healthy places</p>	<p>5.2.1 Maintain cleanliness standards and seek to remove incidents of fly tipping as soon as possible</p>	<p>5.2.2 Work with residents on the benefits of healthy places including parks, and open spaces</p>
<p>5.3 Sustain and support safe communities (High priority for Sevenoaks District)</p>	<p>5.3.1 Consult with and involve local communities in community safety and crime issues that affect them</p>	<p>5.3.2 Working with Fire services and housing to target most vulnerable households including older people</p>
<p>5.4 Reduce Fuel Poverty by supporting development of warm homes</p>	<p>5.4.1 Support vulnerable groups who find it difficult to heat their homes</p>	<p>5.4.2 Ensure planning applications adhere to all government legislations.</p>

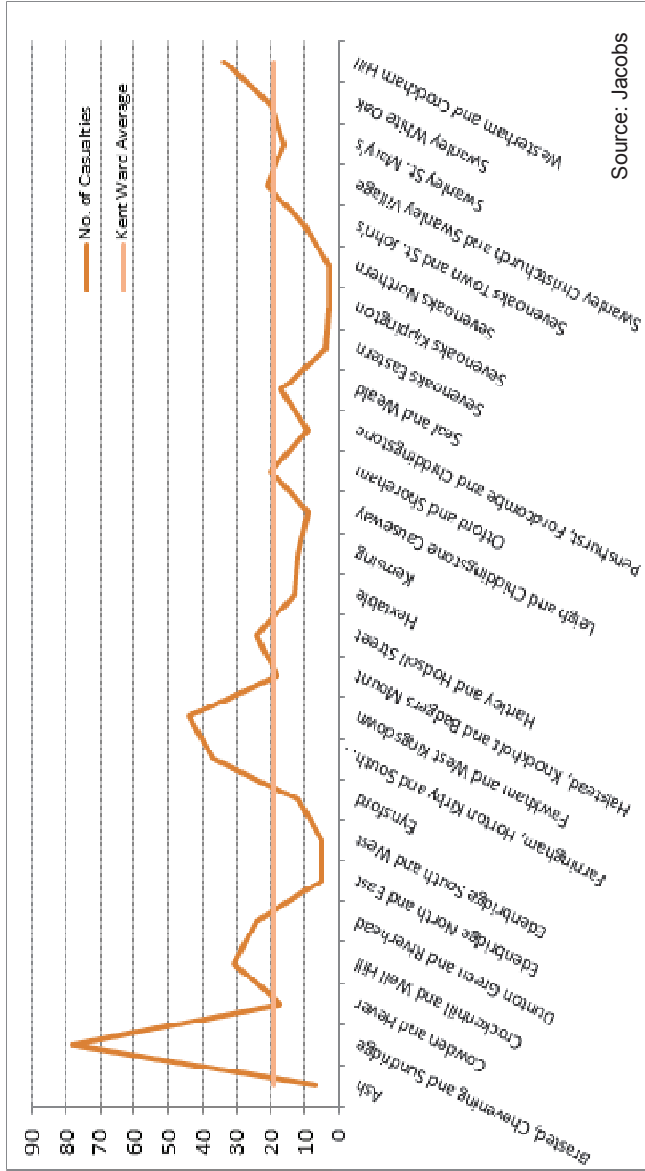
Objective 5: Create and Develop Healthy and Sustainable Places & Communities

Promoting wellbeing is at the heart of what local government is about: supporting a better life for its citizens and helping to build resilient communities, now and over the longer term

Priority 5.3 Sustain and support safe communities

Throughout Sevenoaks there are major trunk roads i.e. M25/A21 which facilitate the majority of traffic through the District. As a result figures for Road Traffic Accidents (RTAs) fluctuate depending on the area that is being assessed.

No. of Road Traffic Accident Casualties 2011-2012



Source: Jacobs

Road Safety: Injury is not only most often the cause of child death in the UK. Casualty rates for child pedestrians are estimated to be five times higher in the most affluent than least affluent wards (Social Exclusion Unit 2003).

Roads under the responsibility of KCC have seen a 2.3% decrease (493 incidents) in the total number of casualties over the past three years (2009-2012). However, when figures for Highways Agency roads are included the results see an overall **increase of 4%** across Sevenoaks District.

Sevenoaks District wards located close to motorway junctions have seen higher than average number of accidents (as shown in the diagram). Brasted, Chevening and Sundridge had the highest count of RTA casualties in Sevenoaks with a figure of 78 and ranks 11th highest of all wards in the KCC area. From the above chart it's clear to see that the wards displaying a higher than average casualty rate are those within close proximity to the junctions of the M25 (Brasted, Chevening and Sundridge) and M20 (Farningham, Horton Kirby and South Darent). Speeding and perception of speed is a high concern for residents across the District and has featured in all PACT Panel's action plans. Speed Watch training has worked well in the District with residents being trained by Kent Police to monitor the speed of vehicles passing through their community.

Fire Safety: In 2010-11 Kent Fire and rescue services attended 677 accidental dwelling fires. 2 people died and 77 people were injured as a result of accidental fires. In Kent there are on average 46 fires per year in households and household dwellings caused by smoking. This results in a total cost of £1,150,000 pa in Kent. A child from the lowest social class is nine times more likely to die in a house fire than a child from a well off home. Kent Fire & Rescue report that in Sevenoaks District there has been 17.6% increase in the number of accidental dwelling fires from 2012 to 2013.

6. Strengthen the role and impact of ill health prevention

Reducing the gap in health inequalities and educating people to make behaviour changes to their lifestyle factors can strengthen the role and impact of ill health long term and make generational changes to whole families

Key Priorities for Sevenoaks District:

- Reduce the gap in health inequalities across the social gradient
- Provide support for people with mental illness and raise awareness of mental health issues

*Many of the key health behaviours significant to the development of chronic disease follow the social gradient: smoking, obesity, lack of physical activity, unhealthy nutrition.
(Marmot Review 2010)*

Objective 6: Strengthen the role and impact of ill health prevention

<p>Delivery through: NHS Future Forum; Health Checks; QIPP; Live it Well; No Health Without Mental Health; Tobacco Control Plan; Healthy Weight Strategy; Kent Sport Framework; Alcohol Plan</p>	
<p>Local Priorities:</p>	<p>6.1 Improve access to screening</p>
<p>Actions:</p>	<p>6.1.1 Improve early diagnosis of dementia and provide services and activities to support sufferers and their carers</p> <p>6.1.2 Promote sensible drinking and ensure treatment and support services are accessible for all</p> <p>6.1.3 Increase access to sexual health and Chlamydia services for young people to reduce teenage pregnancy</p>
<p>6.2 Reduce the gap in health inequalities across the social gradient (High priority for Sevenoaks District)</p>	<p>6.2.1 Reduce the prevalence of smoking, particularly in areas of deprivation and young people</p> <p>6.2.2 Reduce the increasing prevalence of Type 2 diabetes through early detection and prevention</p> <p>6.2.3 Deliver activities to promote the benefits of increased physical activity and reduce obesity</p>
<p>6.3 Provide support for people with mental illness and raise awareness of mental health issues (High priority for Sevenoaks District)</p>	<p>6.3.1 Support vulnerable people to manage long-term mental health conditions</p> <p>6.3.2 Raise awareness of mental health issues and signpost into relevant services</p>
<p>6.4 Grow participants and partnerships to find new ways to target and deliver services</p>	<p>6.4.1 Work with Health & Wellbeing Boards to support the delivery of key priorities set out in the health inequalities agenda</p> <p>6.4.2 Co-ordinate the Sevenoaks District Health Action Team for operational partners to work holistically</p> <p>6.4.3 Develop the “Be Inspired, Be Active” legacy programme</p>

Objective 6: Strengthen Ill Health Prevention

Priority 6.2 Focus public health interventions to reduce the gap in health inequalities across the social

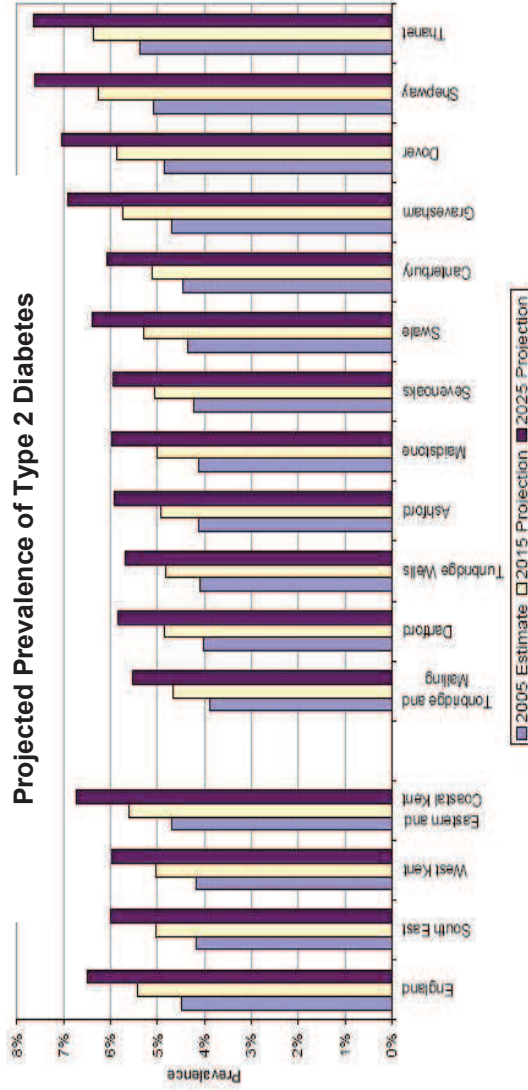
There is a huge increase in Type 2 diabetes across Diabetes prevalence predictions Kent districts 2005 – 2025 the UK, and in West Kent 10.7% of deaths in 20 – 79 year olds are estimated to be attributable to diabetes. The diagram on the right indicates that Sevenoaks District has the second highest prevalence in West Kent and is estimated that rates of diabetes will continue to increase over the next 15 years.

Obesity: Obesity can contribute to a range of health conditions, such as heart disease, high blood pressure, diabetes, indigestion and some cancers. Adult and child obesity levels are becoming an increasing issue for the health service, as greater numbers of people put on extra weight, through poor diet or insufficient exercise.

Adult obesity is far more prevalent in socially disadvantaged groups. It is estimated that approximately 28% of the Kent population is obese (354,022). In the Sevenoaks District approximately 24% of adults in the District are considered overweight or obese. Current trends indicate that more deprived wards have great problems with levels of obesity. The synthetic estimate of the prevalence of adult obesity has been mapped across electoral wards in Sevenoaks and show that Swanley St Mary's, Swanley White Oak and Fawkham and West Kingsdown have the highest level of obesity.

Smoking: Smoking is a major cause of lung cancer, cardiovascular disease and chronic obstructive pulmonary disease (COPD) and contributes to many other cancers and conditions, such as asthma or high blood pressure. Smoking prevalence in Kent is 21.34%; however there is a significant amount of variation across Kent and it is a major reason for our health inequalities. Of the 11,250 deaths of Kent residents aged 35 and over in 2008, approximately 2,250 (20%) can be attributed to smoking. Sevenoaks District has the second lowest rate of smoking prevalence rates in the County at 16.4% and with Swanley St Marys and Swanley White Oak being the only wards with prevalence more than 30%. However, a need for further work to reduce smoking in pregnancy has been identified for Sevenoaks District.

Substance Misuse: There are strong links between levels of deprivation, prevalence of problem drug use, drug related hospital admissions and mortality. Estimates indicate that there are between 3640 and 7591 problem drug users in Kent and that a further 2500 problem drug users are not engaged with services. Hospital admissions continue on an upward trend. Between October 2011 and September 2012 there was a total of 133 criminal offences relating to substance misuse which represents an increase from the previous year of 5.6%. This increase is against a county-wide decrease of 10.7%.



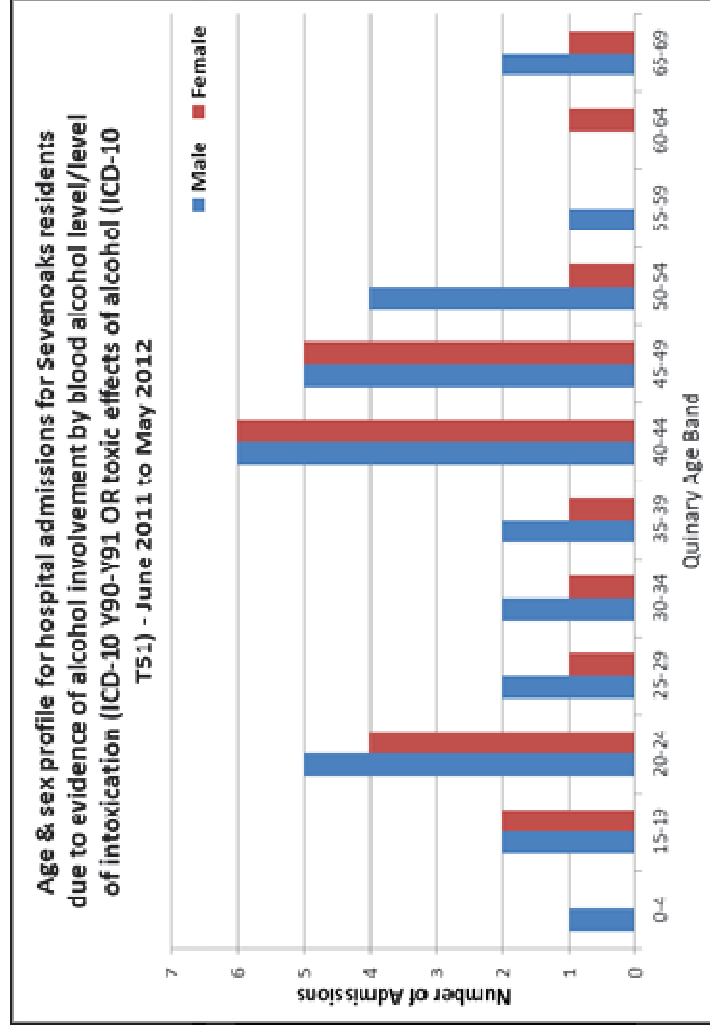
Source: York and Humber Public Health Observatory (YHPHO), 2008

Despite this, Sevenoaks still has the second lowest rate of hospital admissions relating to substance misuse in the County. 2012 data at ward level, shows that Swanley St Marys ward had the highest volume of Drug Offences, ranking 18th highest ward in the County (out of approx. 800 wards) which is in line with the trend of substance misuse linked to people in the most deprived wards.

From June 2011 to May 2012 there were a total of 281 hospital admissions for mental and behavioural disorders due to psychoactive substance use (including alcohol and drugs) in the District. This is the second lowest figure in Kent. The highest numbers of admissions in the District were found in Swanley White Oak (33 cases), Edenbridge South & West (23 cases) and Swanley St Mary's (20 cases).

Alcohol Misuse: The impact of alcohol misuse is widespread; it encompasses alcohol related illness and injuries as well as significant social impacts including crime and violence, teenage pregnancy, loss of workplace productivity and homelessness. Health inequalities are clearly evident as a result of alcohol-related harm; national data indicates that alcohol-related death rates are about 45% higher in areas of high deprivation. It is estimated that 259,103 adults in Kent are drinking at 'increasing risk' levels or 'high risk' levels.

Between October 2011 and September 2012, Sevenoaks District had a 10.2% increase on the previous year's alcohol emergency hospital admission rate. This increase is one of the largest increases in the County (only Dartford 17% and Gravesham 19% have seen a greater increase). When looking at these admission rates in greater detail, the rate for men is much higher per 100,000 population than for women which is consistent with County figures. There is also an identifiable peak in the age of those being treated; alcohol users between 20-24 and 40-50 have a significantly higher admission rate than any other age group.



Source: NHS

Priority 6.3 Mental Health

‘Mental Health, Resilience and Health Inequalities’ by Dr Freidli lays down the basic premise and research for what became the government’s strategy for mental health in 2011, “No Health without Mental Health”.

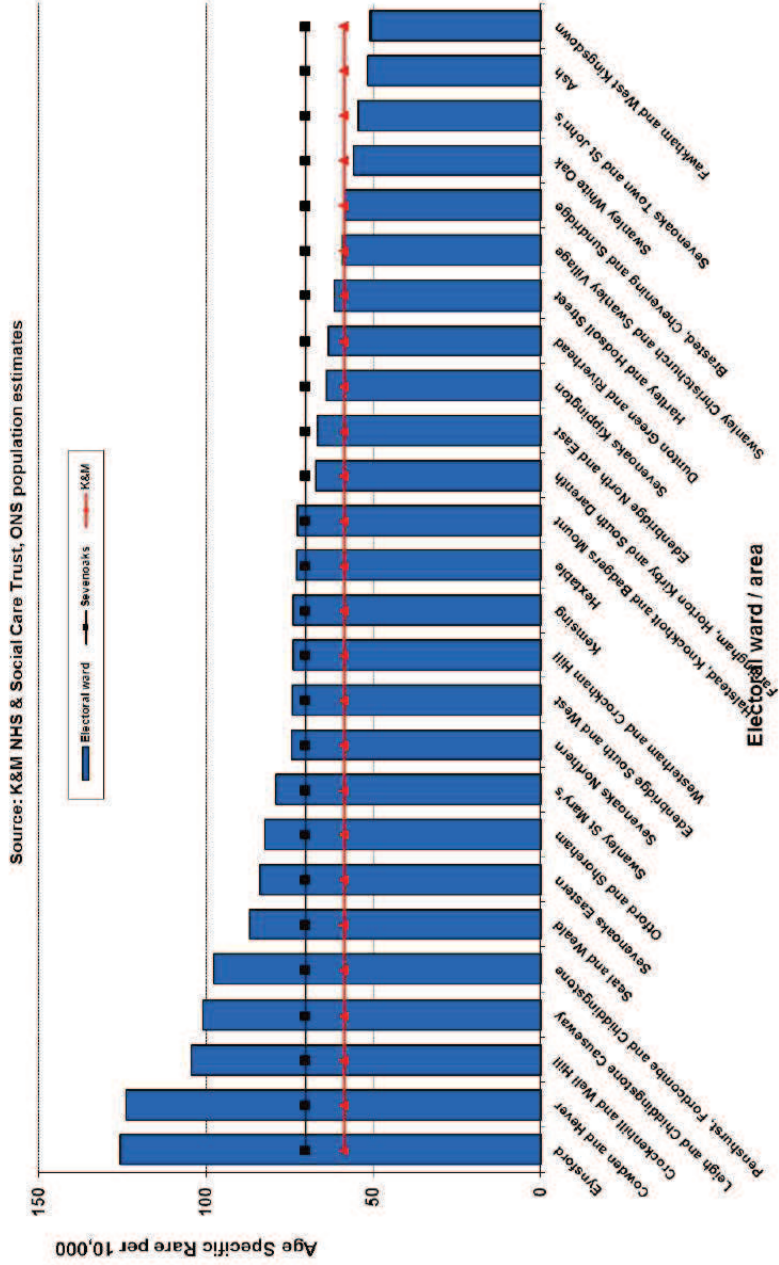
Endorsed by the WHO, Faculty of Public Health and Child Poverty Action Group it describes what we all know in our bones, that without our sense of well being, without our ability to be resilient to life’s slings and arrows *and* without understanding that chronic stress literally gets under our skin in the form of illness – we will become sick.

Sadly, although money can’t buy us happiness- it does by and large buy us security and ability to mitigate against some unexpected life events e.g. unemployment. Communities that exist in areas of greater deprivation need more than ever, the tools (both collective and individual) to cope with stresses and life events. It is fine to ask people to give up smoking, eat healthily, drink less and go to the gym more, but some of the reasons that people in more deprived areas engage in behaviours that on the surface are worse for health, are because they are struggling to find ways to cope with stress.

Chronic stress impacts on long term relationships and can even lead to violence, isolation and neglect. This is why mental well being is a core issue in tackling health inequalities. What is the antidote from a health perspective? Well obviously creating more jobs and being able to have skills to gain employment are central to this, and these are a key part of the wider Kent Strategy to tackle disadvantage. But from a well being and health perspective there are things we can do too: building social support and networks are essential for building communities (echoed in the Big Society), having good access to psychological support and places to go where you can find a shoulder to cry on, just by recognising ones emotional health and finding ways of coping can be the difference between suicide and hope. This links to the new health service mantra “make every contact count”. Everyone can do their bit.

In addition: People with a mental illness can suffer name calling, poorer access to routine services and on average live 15 years less life than other people.

Adult Mental Illness Contact* Rates per 10,000 for Electoral Wards in Sevenoaks LA - Dec 2011 to Nov 2012



Health Inequalities Action Plan 2013-15

Progress on all of the actions below have been identified as priorities for Sevenoaks District, in line with Kent health priorities. The grey actions below are already taking place and making significant progress, these will continue to be monitored to ensure that they continue to thrive. The high priority actions will be monitored closely by the Health Action as these have been identified to have the greatest need based on statistical data and health profiles.

Action	How	Key Partner(s)	Progress/Targets
1.1 Increase Numbers of Healthy Births (High priority for Sevenoaks District)			
1.1.1 Run campaigns and deliver initiatives to promote good health in pregnancy and promotion Start4Life	To offer information and support to women during their pregnancy, to achieve good health and wellbeing and signpost them to local services that will educate them in making positive lifestyle choices. This can be achieved by; <ul style="list-style-type: none"> • Promotion of Change4life and Start4life • Stop Smoking support • Promote local children’s Centre and parents support groups. 	Lead: Children’s Centre <ul style="list-style-type: none"> • Sevenoaks District Council • Dartford, Gravesham and Swanley Healthy Child Group • NHS Midwives • CCG’s 	
1.1.2 Ensure teenage parents receive holistic support	<ul style="list-style-type: none"> • Work with partners to deliver teenage parent support actions within the Sevenoaks District Teenage Pregnancy LIG Action Plan. • Offering teenage parents support and health education through the young and pregnant support team (YAP’s) • Identifying schools that have a high level of teenage parents and helping them link to support services. 	Lead: Children’s Centre <ul style="list-style-type: none"> • Teenage Preg. LIG • YAP Groups • KIASS • SRE School Leads & governors 	
1.1.3 Early identification of vulnerable parents smoking in pregnancy and work to reduce	Work with partners to engage with and support new parents and parents in pregnancy who smoke. Offer appropriate service including; <ul style="list-style-type: none"> - Stop Smoking Support - Increase the uptake of the Healthy Start Scheme - Providing Kent midwives with community interventions information for referrals - Signposting identified parents to the children’s 	Lead: Kent Community Health Trust <ul style="list-style-type: none"> • NHS Midwives • Children’s Centre’s • Stop Smoking Team • KIASS 	

Action	How	Key Partner(s)	Progress/Targets
	Centre		
1.2 Increase breast-feeding initiation rates and prevalence at 6-8 weeks in all parts of Kent			
1.2.1 Positive promotion and creation of breast-feeding friendly environments	<ul style="list-style-type: none"> Identify and promote 'breast-friendly' feeding locations in the District e.g. provision of 'mother only' baby feeding rooms or public retail and catering areas including libraries, cafes etc. Work with local partners to raise awareness and promote of the importance of breastfeeding, particularly for teenage mothers through a social marketing style project so it becomes the 'social norm'. 	Lead: KCHT <ul style="list-style-type: none"> Children Centre's Sevenoaks District Council 	
1.2.1 Provide support to new mothers to increase the initiation and continuation of breast-feeding	Increase access to trained advisors, champions and peers to promote and support breast feeding through: <ul style="list-style-type: none"> Breast Buddy training Post natal ward support visit Monthly breast-feeding workshops Out of hours peer support 	Lead: Children's Centres <ul style="list-style-type: none"> KCHT Midwives and Health Visitors YAP's Groups 	
1.3 Support parents so that they can raise emotionally and mentally healthy children			
1.3.1 Improve outcomes for families with crime and anti-social behaviour, absence and worklessness through the Troubled Families Programme	<ul style="list-style-type: none"> Sevenoaks District Council, Kent County Council and partners to identify and support at least 40 families within the District each year for the next three years. 	Lead: KCC <ul style="list-style-type: none"> Sevenoaks District Council Kent Police KCC Adult Social Services 	
1.3.2 Reduce repeat incidents of Domestic Abuse	<ul style="list-style-type: none"> Community Safety Partnership and Domestic Abuse Task Group raise awareness and sign post to services through West Kent Directory and Community Safety Partnership particularly targeting repeat victims. Domestic Task Group and Local Children's Trust Board to commission domestic abuse work with 	Lead: Community Safety Unit <ul style="list-style-type: none"> Sevenoaks District Council Local Children's Trust Board Kent Social Services Kent Police 	

Action	How	Key Partner(s)	Progress/Targets
	<p>children and young people to raise awareness improve self esteem and respect and improve healthy and respectful relationships.</p> <ul style="list-style-type: none"> The promotion of targeted domestic abuse interventions to reduce repeat offending including Freedom Programme, DAVSS, CDAP, ISVA New mothers to be assessed in a way similar to the Common Assessment Framework process at the new birth visit. 	<ul style="list-style-type: none"> Faith groups 	
1.3.3 Supporting carers and child minders		<p>Lead: KCC</p> <ul style="list-style-type: none"> Sevenoaks District Council KCC <ul style="list-style-type: none"> Early Intervention Team Social Services West Kent Housing Moat 	
1.3.4 Give a better start for children through early intervention services for children 0-5 and their parents	<ul style="list-style-type: none"> Sevenoaks District Council to produce a directory of early intervention projects and diversionary activities for young people, families and front line practitioners. 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> KGHT Children and Young Peoples Team KIASS HAT Children's Centres 	
1.3.5 Help young people to feel safe from bullying at home, at school and be safe on the internet	<ul style="list-style-type: none"> Kent County Council Education Team, Sevenoaks District Council Community Safety Unit and Kent Police to deliver a programme in schools to address cyber bullying and internet safety. 	<p>Lead: SDC, KCC and Kent Police</p> <ul style="list-style-type: none"> Schools 	
1.4 Encourage access to health services for all (High priority for Sevenoaks District)			
1.4.1 Improve access to GP services and to hospitals, particularly in rural areas	<ul style="list-style-type: none"> Individual GP surgeries to review surgery hours in partnership with CCG arrangements, focussing on the possibility of late night and weekend opening hours. Increase internet booking and patient facilities for GP surgeries 	<p>Lead: Clinical Commissioning groups</p> <ul style="list-style-type: none"> Patient Participation Groups 	
1.4.2 Making more	<ul style="list-style-type: none"> Encourage health professionals to look at 	<p>Lead: CCG's</p>	

Action	How	Key Partner(s)	Progress/Targets
Localised – bring services out of traditional settings.	alternative venues for their services, for example encouraging GP's to use Children's Centres for children's clinics, community centres and halls	<ul style="list-style-type: none"> Children's Centre Sevenoaks District Council Town/Parish Councils 	
1.4.3 Provide support for vulnerable groups to access health services	<ul style="list-style-type: none"> Work with Learning Disability Partnership, community groups and Seniors Actions Forum to promote health services and local/national health campaigns. Promote community transport schemes to residents living in rural and isolated communities to enable them to access medical appointments 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> Community Transport Schemes KCC VAWK Seniors Action Forum Learning Disability Partnership GP's 	
1.1.5 Promote Healthy Weight for Children (High priority for Sevenoaks District)			
1.5.1 Support parents and children to maintain a healthy weight	<ul style="list-style-type: none"> Sevenoaks District Council to work with 50 families through the Family Weight Management Programme Kent Adult Education to run family specific exercise and healthy eating workshops 	<p>Lead: Sevenoaks District Council & Kent Adult Education</p> <ul style="list-style-type: none"> KCHT Children and Young people Team KCC Public Health KCC Early Interventions Team School Leads and school nurses 	
1.5.2 Increase interaction between parents and children including healthy lifestyles and active play	<ul style="list-style-type: none"> Partners to work with Childrens Centres to offer interactive play and learn sessions for parents and their children (0-5 year olds) Sevenoaks District Council to run targeted exercise and healthy eating sessions with Childrens Centres, for example Fathers Projects, Active Play, cookery 	<p>Lead: Children's Centre</p> <ul style="list-style-type: none"> Sevenoaks District Council KCC South East Dance KCHT 	
2.1 Improve educational attainment particularly at GCSE level (High priority for Sevenoaks District)			
2.1.1 Enable more young people to have their achievements	<ul style="list-style-type: none"> Community recognition in addition to school recognition, through outreach programmes such as the HOUSE projects, youth groups and Youth 	<p>Lead: West Kent Extra</p> <ul style="list-style-type: none"> Town/Parish Councils VAWK 	

Action	How	Key Partner(s)	Progress/Targets
recognized.	<p>Forums.</p> <ul style="list-style-type: none"> Positive focus on young people in the local press through positive messages District wide partner and voluntary organisation to work with young people to deliver award schemes for young people to be promoted. Partners with positive work with young people to consult them about best rewards and how they want their achievements recognised. 	<ul style="list-style-type: none"> Sevenoaks District Council Sevenoaks Area Mind Youth Forums KCC Youth Providers 	
2.1.2 Build in support and services within schools for vulnerable young people to engage	<ul style="list-style-type: none"> Increase referrals from schools and health professionals to domestic abuse support services Improve the referral pathways between health providers and schools through CAF services Sevenoaks District Council to work with VAWK to deliver the SAFE project in schools across the District 	<p>Lead: SDC, KCHT and KCC</p> <ul style="list-style-type: none"> KCHT Childrens & Young Peoples Team School nurses KIASS VAWK SDC Community Safety Unit KCC Early Interventions Team Kent Police 	
2.1.3 Manage and support schools non-attendance and increase access services	<ul style="list-style-type: none"> Increase referrals to support organisations Young carers to be referred to Common Assessment Framework The Troubled Families Project to target the most absent pupils and offer additional support 	<p>Lead: KCC</p> <ul style="list-style-type: none"> KCC Early Intervention team KCHT Childrens young Peoples Team Sevenoaks District Council Children's Centre School Nurses Kent Social Services 	
2.2 Reduce risk taking behaviours in young people			
2.2.1 Divert children and young people from crime and anti-social behaviour	<ul style="list-style-type: none"> Anti Social Behaviour Task Group and Kent County Council Childrens Services, to work with families where possible, rather than individuals to deal with anti-social behaviour. 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> SDC Community Safety team KCC Early 	

Action	How	Key Partner(s)	Progress/Targets
	<ul style="list-style-type: none"> Work with communities more actively to find solutions to ASB through PACT Panels 	<ul style="list-style-type: none"> Interventions Team Kent Police Kent Probation Services PACT Panels 	
2.2.2 Specialist support for alcohol and drug misuse	<ul style="list-style-type: none"> Increase partnership working with youth services to provide a focus on alcohol and drug reduction 	<p>Lead: Kenward Trust</p> <ul style="list-style-type: none"> Sevenoaks District Council Trading Standards Kent Police KCC Early Interventions Team 	
2.2.3 Promote peer support interventions including youth peer educator, SAFE, health champions etc.	<ul style="list-style-type: none"> Sevenoaks District to work with VAWK to deliver SAFE project in secondary schools Young peoples services and partners to work with schools and youth groups to deliver and training peer support volunteers amongst young people 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> KCC KCHT C&YP Team VAWK KIASS HOUSE Projects SRE School Leads 	
2.3 Support older people to keep them safe, independent and living fulfilled lives (High priority for Sevenoaks District)			
2.3.1 Provide access to healthy lifestyle interventions to enable older people to remain healthier and independent	<ul style="list-style-type: none"> Seniors Action Forum to campaign on older peoples issues and achieve membership of 500 Sevenoaks District Council to continue to run targeted chair based yoga interventions in targeted areas (3 across District). Sevenoaks District Council to continue to deliver Health Walks within the District (8 walks per week) Sencio to continue to deliver their over 50's Prime Time exercise sessions (over 1,200 attendances pa) 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> Seniors Action Forum KCC Sencio Community Leisure HAT 	
2.3.2 Partnership working to deliver and promote self help services	<ul style="list-style-type: none"> Kent Home Library Service referrals Health partners to facilitate Expert Patient Programmes for people with specific long term conditions CCG's to promote and develop self care processes and systems within community and home settings 	<p>Lead: KCC & GP's</p> <ul style="list-style-type: none"> District Nurses KCC Libraries CCG's Kent Public Health 	

Action	How	Key Partner(s)	Progress/Targets
<p>2.3.3 Increase referrals for home adaptations and falls prevention pathways to reduce the risk of falls</p>	<ul style="list-style-type: none"> • Provide volunteer mentors to help people with disabilities to live independently • Promote funding, opportunities and Disabled Facilities Grants for home adaptations and assessments through SDC, KCC and Home Improvement Agency • Work in partnership to improve the falls pathway into postural stability interventions and services • SDC to continue to operate falls prevention classes across the District 	<p>Lead: KCC & SDC</p> <ul style="list-style-type: none"> • SDC Housing Team • HAT • Age UK • KCC Social Services • West Kent Housing • GP's & CCG's • Acute Services • VAWK • KGHT 	
<p>2.3.4 Support older people and vulnerable people to remain in their own homes and live independently</p>	<ul style="list-style-type: none"> • Reduce the number of inappropriate care that is residential rather than own homes • West Kent Housing delivering Care Navigator Service. Signposting help with visits and support plans and further promote the service • Come And Meet Each Other (CAMEO) project from Voluntary Action Within Kent to be run within the District • Encourage more older people to volunteer and promote staying active • Provider internet training and support enable older people to have better access to online services 	<p>Lead: KCC</p> <ul style="list-style-type: none"> • VAWK • West Kent Housing • Age UK • Sevenoaks District Council Housing Team • SDC Community Safety Unit • Kent Adult Education 	
<p>3.1 Improve chances of employment for people facing disadvantage</p>			
<p>3.1.1 Improve training, skills and education opportunities for employment for disadvantaged, vulnerable groups and people on benefits</p>	<ul style="list-style-type: none"> • SDC co-ordinates a quarterly employment and training forum for local partners to work together to address employment issues. • SDC's Economic Development to arrange employee training opportunities to help employers train staff. • Work with Job Centre Plus to identify candidates by promoting services through community fairs for pre-work readiness training. • Greater training for those affected by Dyslexia 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> • Job Centre plus • Moat • West Kent Housing • SDC Hero Project • Chambers of commerce • Colleges 	
<p>3.1.2 Support local charities and community groups to support adults with</p>	<ul style="list-style-type: none"> • Increase work with charities such as the Simon Paul foundation and Community Futures, which helps support people with physical and learning disabilities • Provide specific skills and training opportunities for 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> • KCC Libraries • Colleges 	

Action	How	Key Partner(s)	Progress/Targets
disabilities into work and training	<ul style="list-style-type: none"> vulnerable groups based on needs Create better links and understanding with local employers to increase opportunities 	<ul style="list-style-type: none"> VAWK Learning Disabilities Partnership Simon Paul Foundation Local businesses West Kent Extra 	
3.2 Increase proportion of young people in fulltime education, employment or training (High priority for Sevenoaks District)			
3.2.1 Support 16-18 year olds into training or employment	<ul style="list-style-type: none"> To work with Job Centre Plus to develop training opportunities locally. SDC to work with the Kent Foundation to identify young entrepreneurs across the district Continued partnership working with North West Kent College and K College to bring together young people and education. Work with HOUSE projects to identify needs and develop training and skills opportunities. And provide links to career and training partners. 	<p>Lead: Job Centre Plus</p> <ul style="list-style-type: none"> Sevenoaks District Council North West Kent College The Kent Foundation Chamber of commerce K College VAWK HOUSE KIASS Job Centre plus 	
3.2.2 Increase the number of people accessing apprenticeship and graduate opportunities	<ul style="list-style-type: none"> SDC to identify businesses and work with them to develop apprenticeships and training opportunities. Promote websites and agencies which offer apprenticeships. Promote Kent County Council apprenticeships Scheme. SDC to work with Voluntary Action Within Kent (VAWK) on the Graduate Volunteering Programme 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> KCC North West Kent Colleges VAWK Job Centre plus CXK KIASS 	
3.3 Support businesses to have healthy workplaces			
3.3.1 Support employers to create healthy work places and environments for staff.	<ul style="list-style-type: none"> SDC will support business growth and development, start up and home working. NHS Health checks service to be taken into workplaces to offer healthy lifestyle advice to employees. 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> KCC KCHT Chambers of 	

Action	How	Key Partner(s)	Progress/Targets
	<ul style="list-style-type: none"> Support businesses to develop a Workplace Wellbeing Charter. Develop Smoke-Free Business Awards to reduce prevalence of smoking among workers 	Commerce	
3.3.2 Place defibrillators as Automated External Defibrillators in workplaces, or Public Access Defibrillators in public areas	<ul style="list-style-type: none"> Support South East Coast Ambulance service campaign for Public Access defibrillators across Kent Sevenoaks District Seniors Action Forum are campaigning for funds and locations within the Sevenoaks District. Charities such as the British Heart Foundation are also working to rise funding and awareness of the service. Sevenoaks District Council Coordinating defib and basic first aid training for communities. 	Lead: Sevenoaks District Council <ul style="list-style-type: none"> Seniors Action Forum South East Coast Ambulance BHF 	
4.1 Provide the right support at the right time including financial capacity support and inclusion			
4.1.1 Support people in accessing benefits and in the transition to universal credit	<ul style="list-style-type: none"> Sevenoaks District Council to deliver the Housing, Energy and Retraining Options (HERO) project to provide a holistic advice service to vulnerable people. The HERO project is delivered through surgeries in rural communities to ensure that outlying areas receive the same support as central areas. 	Lead: Sevenoaks District Council <ul style="list-style-type: none"> West Kent Housing Moat KCC / Children's Centre 	
4.1.2 Provide support and advice for families regarding benefits and employment.	<ul style="list-style-type: none"> West Kent Housing – Funding for a post under the Occupational Officer to provide debt advice, making better use of stock, and managing the under 35's age bracket. Landlords offering their flats as Houses of Multiple Occupancy (HMO) for five years in Swanley as an experiment. 	Lead: West Kent Housing <ul style="list-style-type: none"> Sevenoaks District Council Landlords Moat HIA 	
4.1.3 Interventions to assist older people to down-size to more affordable and suitable accommodation	<ul style="list-style-type: none"> Deliver actions within the Under-Occupation Action Plan including initiatives to offer additional financial incentives to help with removals costs etc. Joint funded officer appointed for an initial year to support down-sizing interventions Provide a hand-holding service to help and support 	Lead: SDC Housing <ul style="list-style-type: none"> West Kent Housing Moat Landlords KCC HIA 	

Action	How	Key Partner(s)	Progress/Targets
	<p>people through this service</p> <ul style="list-style-type: none"> Work with partners to identify suitable and attractive down-sizing options through local lettings plans 		
4.2 Promote opportunities to support facilities in poverty			
4.2.1 Meet the needs of vulnerable and lower income households.	<ul style="list-style-type: none"> SDC's HERO project provides financial advice and assists with benefit claims as necessary. Sevenoaks District Council to deliver actions within Sevenoaks District Housing Strategy 	Lead: Sevenoaks District Council <ul style="list-style-type: none"> Wes Kent Housing HIA 	
4.2.2 Provide support, advice and information to residents about debt management and financial awareness.	<ul style="list-style-type: none"> Increase partnership working between the HERO project, Citizens Advice Bureau, Food banks, Churches and Voluntary Organisations that specialise in debt management. Increase public awareness of agencies that can provide information and help with debt management Increase the number of key local services that can be accessed within local communities including rural and isolated parishes. 	Lead: Sevenoaks District Council <ul style="list-style-type: none"> CAB Food banks Churches together VAWK West Kent Housing 	
4.3 Meet the housing needs of people living in the District include affordable and appropriate housing (High priority for Sevenoaks District)			
4.3.1 Carry out an Older Persons Housing Needs Assessment to better understand the needs of older people	<ul style="list-style-type: none"> Undertake a Older Persons Housing Needs study Work with partners to ensure that findings and recommendations feed into relevant planning and policy arrangements including LDF and Community Plan Produce a Housing Action Plan to reflect findings and deliver appropriate actions in partnership with others 	Lead: SDC Housing <ul style="list-style-type: none"> West Kent Housing Moat Landlords KCC SDC Planning 	
4.3.2 Provide affordable housing to meet identified needs of vulnerable groups	<ul style="list-style-type: none"> Work with housing association partners to remodel and refurbish programmes to preserve existing stock and introduce current standards Utilise S106 affordable housing planning gains to make best use of the existing housing stock to meet current needs 	Lead: SDC Housing <ul style="list-style-type: none"> West Kent Housing Moat Landlords KCC 	
4.3.3 Work with developers, landlords	<ul style="list-style-type: none"> Work with developers to design housing that can sustain tenancies through all life stages including 	Lead: SDC Housing <ul style="list-style-type: none"> West Kent Housing 	

Action	How	Key Partner(s)	Progress/Targets
and owner-occupiers to provide appropriate housing suitable for all demographics	<ul style="list-style-type: none"> lifetime homes and wheelchair accessible homes Inspect and accredit private rented housing to promote good standards and quality housing SDC to bring Home Improvement Agency services in-house and service improvements to be made, as identified by the Older Persons Survey. 	<ul style="list-style-type: none"> Moat Landlords KCC HIA 	
5.1 Reduce homelessness and its negative impact for those living in temporary accommodation			
5.1.1 Intervention for young people especially around mentoring on budgeting and housing	<ul style="list-style-type: none"> The Hero project to help and support young people with their housing arrangements and provide essential skills to budgeting. Through the troubled families programme, services to support young targeted individuals to reduce the likelihood of homelessness. West Kent Extra to offer start up packs with essential resources. 	Lead: Sevenoaks District Council <ul style="list-style-type: none"> West Kent Extra KCC Landlords 	
5.1.2 Training for front line workers on the welfare change	<ul style="list-style-type: none"> Housing authorities and Sevenoaks District Council to work more closely and organize support with the Citizens Advice Bureau. 	Lead: <ul style="list-style-type: none"> Sevenoaks District Council Citizen Advice Bureau West Ken Housing 	
5.2 Develop our communities to be healthy places			
5.2.1 Maintain cleanliness standards and seek to remove incidents of fly tipping as soon as possible	<ul style="list-style-type: none"> Community Safety Unit and Task and Co-ordinating Strategy Group to undertake monthly Environmental Visual Audits across the District in conjunction with local businesses and residents to deal with litter and investigate ways for people to recycle more in public places. Community Safety Unit campaign to reduce the impact of Fly Tipping and improve public perception through positive media. Environmental services to investigate County Council charges and conditions for waste management solutions 	Lead: <ul style="list-style-type: none"> Sevenoaks District Council Community Safety Unit Kent Police KCC Direct services 	
5.2.2 Work with residents on the benefits of healthy places including parks,	<ul style="list-style-type: none"> Sevenoaks District Council's Community Development department to work with partner agencies and Town and Parish councils to promote AONB and open spaces. 	Lead: <ul style="list-style-type: none"> Sevenoaks District Council Town and Parish 	

Action	How	Key Partner(s)	Progress/Targets
and open spaces	<ul style="list-style-type: none"> Deliver conservation and environmental projects to improve the access for local people to parks and open spaces including Naturally Active, outdoor gyms etc. 	<p>Council</p> <ul style="list-style-type: none"> NWKCP 	
5.3 Support Safe (High priority for Sevenoaks District)			
5.3.1 Consult with and involve local communities in community safety and crime issues that affect them	<ul style="list-style-type: none"> PACT panels to involve the local community in looking at solutions to Anti Social Behaviour and sharing good practice. Promote the speedwatch service through different media streams. Daily Tasking, CSU and the Police to ensure the mobile CCTV is used effectively to deter crime and anti-social behaviour. Positively promote the work of the CSU to encourage residents to access services and report crime. 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> PACT Local Champions CSU ASB Coordinator Kent Police 	
5.3.2 Working with Fire services and housing to target most vulnerable households including older people	<ul style="list-style-type: none"> Partners to work proactively with Kent Fire & Rescue to make service links to identify vulnerable people Partners to work together to reduce risks of fire, falls and other hazards within the home environment 	<p>Lead: Kent Fire & Rescue</p> <ul style="list-style-type: none"> SDC Housing Team West Kent Housing KCC SDC CSU 	
5.4 Reduce Fuel Poverty by supporting development of warm homes			
5.4.1 Support vulnerable groups who find it difficult to heat their homes	<ul style="list-style-type: none"> Sevenoaks District Council to work with Home Improvement Agency to offer grants to individuals that are in need. Community Safety Unit to identify vulnerable groups and provide homes with the service of the Community Wardens and PCSO to give advice SDC to encourage landlords to complete the Landlord Accreditation scheme by offering them funds to improve their homes. Sevenoaks District Council to run regular campaigns to promote energy efficiency and fuel poverty. 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> Landlords Community Safety Unit Kent Police PCSO KCC HIA Community Wardens Seniors Action Forum 	
5.4.2 Ensure planning applications adhere to	<ul style="list-style-type: none"> Planning Teams to work with partnership to consider legislation and implications related to planning 	<p>Lead: SDC Planning</p> <ul style="list-style-type: none"> SDC Housing 	

Action	How	Key Partner(s)	Progress/Targets
all government legislations	applications regarding health and wellbeing		
6.1 Improve access to screening			
6.1.1 Improve early diagnosis of dementia and provide services and activities to support sufferers and their carers	<ul style="list-style-type: none"> KCHT and Sevenoaks District Council to deliver NHS Health Checks across the district to identify those who might be at risk. Voluntary groups to work together to co-ordinate activity and support sessions across the District including dementia cafes and drop-ins GP surgeries working alongside their PPG group's to run awareness events around Dementia and improve early diagnosis. Progress with KCC dementia friendly communities project in the District. 	Lead: Sevenoaks District Council & KCHT <ul style="list-style-type: none"> Sevenoaks Area MIND Seniors Action Forum KCC CCG's PPG's Kent Libraries Age UK Alzheimer's & Dementia Support Services Alzheimer's Association 	
6.1.2 Promote sensible drinking and ensure treatment and support services are accessible for all	<ul style="list-style-type: none"> Promote sensible drinking within the District through the completion of the AUDIT-C Increase awareness of what constitutes unsafe drinking and support national and local campaigns Promote alcohol programmes and support services through the Community Safety Unit 	Lead: Community Safety Unit <ul style="list-style-type: none"> HAT Kenwood Trust CRI SDC CSU 	
6.1.3 Increase access to sexual health and Chlamydia services for young people	<ul style="list-style-type: none"> Deliver the Sevenoaks District Teenage Pregnancy LIG Acton Plan Use 'The Blue Bus' as a mobile screening service to take services to rural communities and groups of young people. Increase signposting and access from other community services 	Lead: Teenage Pregnancy LIG <ul style="list-style-type: none"> Sevenoaks District Council KCC KCHT Sexual Health nurses School nurses School SRE Leads Kent Youth Providers Children's Centres West Kent Extra 	

Action	How	Key Partner(s)	Progress/Targets
6.2 Reduce the gap in health inequalities across the social gradient (High priority for Sevenoaks District)			
6.2.1 Reduce the prevalence of smoking, particularly in areas of deprivation and young people	<ul style="list-style-type: none"> Continue to reduce the number of people smoking, within the District Make it harder for people to take up smoking, reduce prevalence, advertising, smoking areas etc. Run stop smoking clinics locally The stop smoking team to run workshops in schools and attend community events to reach 	Lead: KCHT Stop Smoking Team <ul style="list-style-type: none"> NHS Sevenoaks District HAT GP's Schools Kent Youth Providers 	
6.2.2 Reduce the increasing prevalence of Type 2 diabetes through early detection and prevention	<ul style="list-style-type: none"> Deliver targeted NHS Health Checks to identify people at risk, particular focus on the most deprived wards Attend community events and provide healthy lifestyle and healthy eating information to residents Promote weight management and exercise activities 	Lead: Sevenoaks District Council <ul style="list-style-type: none"> KCHT KCC 4 Healthy Weight Sencio Community Chef 	
6.2.3 Deliver activities to promote the benefits of increased physical activity and reduce obesity	<ul style="list-style-type: none"> Deliver community weight management programmes across the district Improve referral pathways into weight management services and programmes Deliver healthy living activities in schools around healthy lifestyle Sencio to run a programme of exercise and physical activities and offer concessions for people with disabilities and on low income/older people 	Lead: Sevenoaks District Council <ul style="list-style-type: none"> KCHT KCC Sencio GP's 	
6.3 Provide support for people with mental illness and raise awareness of mental health issues (High priority for Sevenoaks District)			
6.3.1 Support vulnerable people to manage long-term mental health conditions	<ul style="list-style-type: none"> Partners to work with support organisations to deliver targeted and supportive interventions Encourage support groups such as West Kent Housing's Lifeways Support Groups 	Lead: Sevenoaks Area Mind <ul style="list-style-type: none"> West Kent Housing 	
6.3.2 Raise awareness of mental health issues and signpost into relevant	<ul style="list-style-type: none"> Sevenoaks Area Mind to continue to deliver a range of mental health awareness workshops. Sevenoaks District Council to run awareness workshops to front line staff to equip them with 	Lead: Sevenoaks Area Mind <ul style="list-style-type: none"> Sevenoaks District 	

Action	How	Key Partner(s)	Progress/Targets
<p>services</p>	<p>valuable skill to help people with mental ill health</p> <ul style="list-style-type: none"> Actively promote the ‘five ways to wellbeing’, World Mental Health Day and other national and local campaigns 	<p>Council</p> <ul style="list-style-type: none"> HAT KCC 	
<p>6.4 Grow participants and partnerships to find new ways to target and deliver services</p>			
<p>6.4.1 Work with Health & Wellbeing Boards to support the delivery of key priorities set out in the health inequalities agenda</p>	<ul style="list-style-type: none"> SDC to attend regular CCG Health and Wellbeing Boards and co-ordinate the Officer Health Action Team and the Member Health Action Group Work proactively to achieve actions delivered from sub-groups of the Health & Wellbeing Boards Actively participate in work to develop integrated commissioning and service delivery for health and social care arrangements. 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> Health & Wellbeing boards Clinical Commissioning Group Sevenoaks District Council HAT Kent Social Services 	
<p>6.4.2 Co-ordinate the Sevenoaks District Health Action Team for operational partners to work holistically</p>	<ul style="list-style-type: none"> Sevenoaks District Council to co-ordinate quarterly meetings of the HAT ‘Mind The Gap’ Health Inequalities Plan to be delivered, progressed and monitored at quarterly meetings Invite local partners involved in delivering services relating to improving the health and wellbeing of residents and work in partnership to achieve better outcomes and reduce duplication 	<p>Lead: Sevenoaks District Council HAT</p> <ul style="list-style-type: none"> Seniors Action Forum Sevenoaks Area Mind Town & Parish Councils KCC KCHT CCG Voluntary Groups Royal British Legion Sencio Community Leisure 	
<p>6.4.3 Develop the “Be Inspired, Be Active” legacy programme</p>	<ul style="list-style-type: none"> Maximise opportunities from the legacy of the 2012 Games to increase sport and activity participation including cycling, disabled sports and volunteering 	<p>Lead: Sevenoaks District Council</p> <ul style="list-style-type: none"> Sencio Community Leisure 	

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GLOSSARY:

APHO	-	Association of Public Health Observatories
ASB	-	Anti Social Behaviour
C&YP	-	Children & Young People's
CAB	-	Citizens Advice Bureau
CCG	-	Clinical Commissioning Group
CDAP	-	Community Domestic Abuse Programme (Perpetrators)
CSU	-	Community Safety Unit
DAVSS	-	Domestic Abuse Volunteer Support Service
DGS	-	Dartford, Gravesham & Swanley
GP	-	General Practitioner
HAT	-	Health Action Team
HIA	-	Health Improvement Agency
HINST	-	Department of Health Inequalities National Support Team
ISVA	-	Independent Sexual Violence Advisors
KCC	-	Kent County Council
KCHT	-	Kent Community Health Trust
KIASS	-	Kent Integrated Adolescent Support Service
KMPHO	-	Kent & Medway Public Health Observatory
LIG	-	Local Implementation Group
MWIA	-	Mental Well-being Impact Assessment
NHS	-	National Health Service
NICE	-	National Institute for Health and Clinical Excellence
PACT	-	Partners and Communities Together
PCSO	-	Police Community Support Officer
PSHE	-	Personal, Social & Health Education
SDC	-	Sevenoaks District Council
SRE	-	Sex & Relationships Education
VAWK	-	Voluntary Action Within Kent
WK	-	West Kent
YAP	-	Young Active Parents

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Youth service issues noted at the Town and Parish Council Forum meeting held 14 October 2013

CXK Youth Services – Nigel Crocker, Team Manager Youth North Kent, Kent Integrated Youth Services (KIYS)

Nigel Crocker and his team have collated evidence relating to performance issues by CXK in the delivery of their contract from areas they visited across the District.

KCC held a meeting with CXK (with Andy Jones, Commissioning Officer KIYS, Andy Mormon, Assistant Head of Youth Services for KIYS) in September 2013 in order address countywide performance issues. This has involved CXK being issued with additional performance indicators and measures. Nigel Crocker noted that if this intervention fails, CXK's contract will be reviewed. If CXK fail to demonstrate improvements required, re-commissioning will be considered by KCC. CXK targets are:-

- 6 month delivery plan
- Local and strategic communication plan
- Core plans for staff

In addition, Nigel Crocker and Andy Jones meet with CXK on a quarterly basis. Nigel Crocker asked all Parish Clerks to feed information about CXK delivery directly to him.

CXK services in Seal, Hartley, West Kingsdown and Ash-cum-Ridley

Clerks from Seal, West Kingsdown and Ash-cum-Ridley Parish Councils expressed concerns about CXK services in their respective parishes.

The Parish Clerk for Seal said that CXK were turning up at 3.30pm in Seal and not proactively engaging young people. They had also not turned up to provide services at the times they had committed to do so.

In response to questions about withdrawing the contract from CXK, Nigel Crocker stated that KCC were pursuing performance management measures as previously stated, and were reluctant to withdraw the contract from CXK as it would take a period of several months for the tendering process to establish a new provider. This would leave communities without provision. The Parish Clerk for Ash-cum-Ridley stated that they had waited 5 months from the time they initially commissioned any services to be delivered in the area covered by the HAWK project.

HAWK stands for Hartley, Ash and West Kingsdown and is a youth partnership project run by the local Parish Councils' with a contribution from New Ash Green Village Association. The project employs a youth worker who organises activities for local young people in these areas.

The Parish Clerk for Ash-cum-Ridley Parish Council said that CXK did a couple of weeks in New Ash Green and then stopped turning up. However, it was noted that CXK have recently been in touch with the Parish Council about using the New Ash Green Youth and Community Centre.

The Ash-cum-Ridley and West Kingsdown Parish Clerks' did confirm that where the HAWK

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Youth service issues noted at the Town and Parish Council Forum meeting held 14 October 2013

project commissioned by the Parish Councils' was providing youth services they had great attendance.

The Parish Clerk from West Kingsdown also confirmed a lack of presence by CXK in their parish

The Parish Clerk from Edenbridge said that their consortium provision lead by West Kent Extra was very good and commented that KCC should consider using them to 'fill in' for the CXK areas if the contract was ever going to be withdrawn and re-commissioned.

The Parish Clerks requested recorded outcomes by CXK in the HAWK delivery area (Hartley, Ash and West Kingsdown).

It was noted that Kent Integrated Youth will carry out an evaluation of CXK services after Christmas and Nigel Crocker will attend the January Town and Parish Council Forum meeting to report progress.

Nigel Crocker said that he was aware that there had been issue with CXK and the availability of mini buses. CXK have now got three new vans for use across the county.



Further to my previous paper in September 2013, I can report that all planning and building works in respect to the schools expansion programme are on schedule in the Sevenoaks District. The Kent Commissioning Plan 2013-2018, which sets out our future plans as the strategic commissioner of education is currently being refreshed and will be updated on an annual basis.

Schools Update

There are 39 primary schools in the Sevenoaks District. The district is very diverse with some very affluent areas, a considerable number of small village schools and some schools within Swanley suffering from high levels of deprivation. Standards vary widely with many schools achieving high standards of pupil attainment.

Since March 2013 the following schools have been inspected by Ofsted:

Primary School	Judgement
Crockham Hill CE Primary School	Outstanding to Good
Edenbridge Primary School	Satisfactory to Good
Hever CE Primary School	Satisfactory to Good
Kemsing	Good to Good
Leigh Primary School	Good to Requires Improvement
Penshurst CE Primary School	Outstanding to Good
Sevenoaks Primary School	Outstanding to Good
Shoreham	Outcome pending
St Bartholomew’s Catholic Primary School	Good to Good
St Mary’s CE Primary School	Good to Requires Improvement
Sundridge & Brasted CE Primary School	Requires Improvement
West Kingsdown CE Primary School	Good to Inadequate & Requires Improvement

There are three Academies within the Sevenoaks District and no grammar school in Sevenoaks at present. The local authority is awaiting a decision from the Secretary of State regarding the satellite provision proposal.

Secondary School	Judgement
Oasis Academy (Hextable converted 01.09.13)	Awaiting Ofsted inspection as now an academy
Knole Academy	Good
Orchards Academy	Good

There is currently no grammar provision in Sevenoaks but the local authority is awaiting a decision from the Secretary of State regarding the Annex proposal.

Special School	Judgement
Furness (Behavioural, Social and Emotional Difficulties)	Special Measures May 2012 but school making reasonable progress
Milestone Academy (Profound, Severe & Complex Needs 3-19 Years)	Outstanding November 2011
Valence School (Physical Disability & Complex Medical Needs 5-18 years)	Good January 2011

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Pupil Referral Units (PRU)	Judgement
North West Kent Alternative Provision Service (Primary 7-11 years)	Outstanding June 2013
Tonbridge, Tunbridge Wells & Sevenoaks AC PRU (14-16 years)	Satisfactory September 2011
West Kent Learning Federation SSC (11-14 years)	Good November 2012



Richard Dalziel
Area Education Officer (North Kent)