

## Swanley and Northern Parishes Health Inequalities Project-Update

Housing & Health Advisory Committee – 7 November 2023

**Report of:** Chief Officer People & Places

**Status:** For Information

**Key Decision:** No

**Executive Summary:**

**This report supports the Key Aim of: Providing an update on Swanley and Northern Parishes Health Inequalities project for the Housing & Health advisory committee.**

Swanley and Northern parish fall within the remit of Dartford, Gravesham and Swanley Healthcare Partnership (DGS HCP). This entity has been allocated a health inequalities fund from the Kend and Medway Integrated Care Board (ICB) to engage with local communities facing health inequalities and gather insights and solutions to these challenges and barriers. Following this, the aim is that interventions that address the causes of ill health and poor health outcomes that residents in the area experience will be identified and embedded in place. The health team at Sevenoaks District Council are leading on this piece of work and are working collaboratively with local partners and stakeholders to identify and implement solutions to challenges that residents live with due to circumstances beyond their control. This briefing report is an update of the progress of this piece of work, to date.

**Portfolio Holder:** Cllr. Perry Cole

**Contact Officer(s):** Kelly Webb, Ext. 7474 & Jolanda Gjoni, Ext. 7121

**Recommendation to Housing & Health Advisory Committee**

For members to note the briefing report on the progress of the project.

**Reason for Recommendation:**

To inform Members of the Council's progress in tackling health inequality in Swanley and Northern Parishes

## Introduction and Background

1. Dartford, Gravesham and Swanley Healthcare Partnership (DGS HCP) has been allocated funds to tackle health inequalities locally. HCP Health They, and partners, partners believe they do not have enough information on how and what hard to reach communities (Adults and/or Children) need in order to access health services and improve their health outcomes. They proposed that with a small proportion of the inequalities funding to undertake targeted community development work, to inform solutions that gives full benefit to those communities with regard to the 3 greatest areas identified by public health colleagues of health inequality – obesity, diabetes, cancer screening and respiratory. This engagement would either build on existing community development projects that need more insight into a specific inequality or wider determinant area or start with a new group selected by the individual districts.
2. The money was allocated to districts by population size: Dartford 63k, Gravesham 57k, Swanley 31k. Each area can select the hard-to-reach group most relevant to either their previous work or where there is a proven drive to focus. Each district was allowed to explore which group (Adult and/or Children) they wish to work with – the groups to select from are as follows: travellers (gypsy-roma), homeless, SMI, low-income families, poor housing, ethnic minority (BAME), ethnic minority (eastern European), physical disability or learning disability.
3. The Health and communities team put in a bid for leading on this piece of work in Swanley and selected low-income families as a cohort of interest and obesity and diabetes as the two main areas of health inequality.
4. The health and communities team proposed to undertake a two-pronged approach to the community development scoping and engagement exercises in Swanley to find evidence-based feedback on the best ways to address their health inequalities and support health improvement and prevention for the short and long term. Loosely based on the Maidstone blueprint (Appendix A) developed by the West Kent HCP, it aimed to combine insights from services delivered by partners and stakeholders in the area on needs and priorities of clients with first-hand insights from residents themselves, and then work to identify themes on needs and priorities for further investigation and intervention. In addition, this insight work aims to crowdsource ideas and solutions in a co-productive method with communities in place, to foster ownership of solutions and ensure buy-in from key community champions and delivery partners.
5. We want to use a health creation approach to pinpoint actions that these communities will actually use, access and benefit from. Their feedback into the design of those interventions will ensure maximum take up and impact. This

will be achieved by securing voluntary/community sector partners to undertake specific engagement with the hard-to-reach groups to identify how they would like to access information, support and services for obesity, diabetes and screening services as well as other routine primary healthcare.

6. The health and communities team decided to split the funds and utilise half of the funds to hire a community insights officer internally who would work closely with partners and stakeholders. In addition, the remaining funds were used to hire an external, skilled and experienced community engagement organisation to undertake resident insight and utilising qualitative methods to investigate, explore and analyse resident responses. The consultant will utilise surveys, partner insights and a range of methods to develop lines of inquiry and develop a comprehensive report to be brought back to the team for further developmental work. This work will take place Oct-Dec 2023.

## **7. Key Successes & Future Developments**

8. A Community Development officer was hired internally and started work on the 1<sup>st</sup> of July 2023.
9. Work was started to collect partner and stakeholder insights and feedback and a call to action was delivered to these organisations to join the work collaboratively. Organizations such as CAB, West Kent Housing, Imago and others are updated and informed of progress and involved in the project delivery.
10. Procurement for an external organisation was completed in September 2023 and contract allocated to Engaging Kent 360. The organisation has started its mobilisation phase in liaison with the relevant officers to identify and utilise opportunities for community and resident engagement locally.
11. An interim report of findings is due at end of October 2023 with a final report being compiled and presented in December 2023.
12. Insights and information gathered to date is being analysed for themes and areas of priority with a view to put in proposals for intervention work from April 2024.

### **Other options Considered and/or rejected.**

None

### **Key Implications**

#### Financial

This is funded by DGS HCP.

#### Legal Implications and Risk Assessment Statement.

There are no legal implications associated with this report.

## Equality Assessment

The decisions recommended through this paper have a remote or low relevance to the substance of the Equality Act. There is no perceived impact on end users.

## Net Zero Implications

The decisions recommended through this paper have a remote or low relevance to the council's ambition to be Net Zero by 2030. There is no perceived impact regarding either an increase or decrease in carbon emissions in the district, or supporting the resilience of the natural environment]

Also insert any other "Key Implications" headings as appropriate such as:

- **Community Impact and Outcomes**  
This report links in with the community and any impacts.
- **Wellbeing**  
This report has a link to wellbeing due to the nature of the report.

## **Conclusions**

To update members on the Swanley and Northern Parishes Health Inequalities project.

### **Appendices**

Appendix A – West Kent Blueprint.

### **Background Papers**

DGS HCP proposal to the ICB.

**Sarah Robson**

**Deputy Chief Executive and Chief Officer – People & Places**