

Appendix 3 – Action Plan

Name of audited body/partnership: _____

Page No.	Recommendation	Priority 1 = Low 2 = Med 3 = High	Responsibility	Agreed	Comments	Date
Strategic Approach						
23	R1 Agree a common strategic approach to addressing health inequalities, with agreed local and Essex-wide priorities.	3	CEO PCT/District/Borough's/CC/Unitaries	Y	Health Inequalities recognised as a key strategic issue which will be embedded into local strategies, Local priorities being agreed through Essex CEO'S and local LSP'S and LAA's.	
23	R2 Develop and agree health inequality targets locally and at LSP level, based on the identified needs.	3	CEO	Y	Targets to be developed locally using JSNA evidence and linked to LAA's priorities & LSPs plans.	
Information and joint planning						
23	R3 Exploit the full potential of the Joint Strategic Needs Assessment to identify health inequalities	2	DsPH CC and Unitary Exec Leads	Y	JSNA Document produced with focus on Inequalities at local LSP and Unitary level. Review this year to keep	Sept 08

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					data current and add any additional evidence not captured in JSNA 1	
23	R4 Improve arrangements for sharing, managing and using information across all partner agencies.	3	DsPH	Y	To be underlined by JSNA and a data Warehousing Facility providing access to key partners/agencies	Aug 08
23	R5 Consider production of a public health report for Essex County as a whole to underpin the common strategic approach.	2	Essex CC DPH	Y	Post holder now in post and will develop Public Health Report for Essex County Council drawing on JSNA. SW and SE DsPH to consider unitary reports.	July 08
23	R6 Strengthen joint planning for tackling health inequalities through the LSPs and LAAs and clarify accountability for delivery	2	CEO's	Y	Concrete Local Investment Plans to be produced to address identified inequalities and monitored through appropriate local planning fora.	Sept 08
23	R7 Ensure action is co-ordinated, strategically led and designed to meet overall objectives and priorities as well	2	CEOs	Y	Objectives and priorities agreed in LSPs & LAAs and organisation	Set 08 then 6 monthly

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	as local needs				business plans and reported to the Essex Thematic Groups and the Essex Partnership Forum/Essex Management Board and via LAA process in unitaries.	
23	R8 Develop a clear performance management framework for health inequalities, with strong Member and Non Executive involvement	2	CEOs	Y	Extend current LAA performance reporting arrangements to capture progress on local targets and respective CEO'S to report Annually to Members and Non Executives through their Cabinets and Boards	July 08
	Political involvement					
24	R9 Improve awareness and knowledge of health inequalities and their implications amongst elected members and all service areas within Essex public services.	3	DsPH?	Y	DsPH to lead and drive a programme of improving awareness of Elected Members on the health profile of inequalities at County/ District/Borough/Unitary	

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					and PCT levels.	