Action	Proposed activities	Resources	Timescales	Engagement	Lead	Progress
Ensure that general	We are supporting the Health	Project is funded by	March 2018	This work is being led by	Dr Victor	Project
practices within	Foundation funded study which aims	Health Foundation and		colleagues in Sheffield; we will	Joseph	has
Doncaster are able to	to develop and test on-line tools for	Collaboration for		facilitate local General practice	Public	launched
support the health	general practice	Leadership in Applied		engagement and community	Health	
needs of new arrivals.	(http://www.health.org.uk/program	Health Research and		engagement via the	Consulta	
	mes/evidence-	Care Yorkshire and		Conversation Club and HARP	nt	
	practice/projects/supporting-new-	Humber (CLAHRC -YH)				
	migrants-primary-care)					
		Staff time/ support from				
		Doncaster Public Health				
		team to shape the				
		actionable tool.				
	Build on existing work to promote GP	Public Health core	December	We will work with local	Nasar	
	registration and key health messages	budget	2017	community groups to develop	Ahmed,	
	for new arrivals.			the approach and publicise the	Public	
	The work will focus on			information.	Health	
	1. What information is currently					
	available for new arrivals?					
	2. What information is needed to					
	help new arrivals navigate					
	around the health care					
	system?					
	3. Which format should this be					

Action	Proposed activities	Resources	Timescales	Engagement	Lead	Progress
	made available in					
Prioritise work streams	Assessing differences in access to	DMBC Strategy and	December	Community workshops to	Dr	In
within the Joint	outcomes of health and social care	Performance Unit	2017	discuss outcomes of this work	Rupert	process
Strategic Needs	services			and co-develop solutions	Suckling	of
Assessment		Members organisation				commissi
(http://www.teamdonc		HWBB to support data				oning
aster.org.uk/joint-		sharing				
strategic-needs-						
assessment) to assess	Phase 1 of the HNA also identified	DMBC Strategy and	December	Community workshops to	Dr	In
BME outcomes	some evidence that non-white groups	Performance Unit	2017	discuss outcomes of this work	Rupert	process
	in Doncaster continue to live in more			and co-develop solutions	Suckling	of
	overcrowded conditions; further	St Ledger Homes		which will become added to		commissi
	analysis is needed here			this action plan.		oning
	A	Construction of the construction	Dhara 1	YAZll	Constant	Duningt
	An examination of access to	Support from	Phase 1 –	Workshops with providers,	Susan	Project
	psychological therapies within	organisations and	Autumn	commissioners and patients	Hampsha	under
	Doncaster in 3 phases :	facilitation from	2017		w. Public Health	develop ment
	1. routine data analysis using	Knowledge Mobilisation Fellow – Lynne Carter	Phases 2			ment
	,	Fellow – Lyllile Carter	and 3 –		Principal	
	Care Pathway model devised by Sheffield;	DMBC Strategy and	March 2018			
	,	Performance Unit	Mai Cli 2010			
	2. sharing of findings with	remormance unit				
	providers, commissioners and					

Action	Proposed activities	Resources	Timescales	Engagement	Lead	Progress
	patients to co-create improvements where necessary; 3. Implement, and monitor the changes					
Ensure there is a mechanism to identify and address BME health and housing needs within the proposed Health and Housing Project	Work with the team to establish this work stream and associated engagement activities	In kind support from St Ledger Homes Better Care Fund	March 2018		Health and Housing Project Manager	Funding not yet agreed
Develop and promote key health messages and targeted campaigns	Ensure that current round of Pharmacy campaigns includes BME targeted messages	Pharmacies Public Health core budget	March 2018	Communication plan to be developed and will include BME groups.	Steve Betts Public Health Communi cations Lead/ Nasar Ahmed	In progress
The needs assessment report highlighted the	Within the new Public Health commissioning strategy the Due		immediate		Dr Victor Joseph	

Action	Proposed activities	Resources	Timescales	Engagement	Lead	Progress
importance of Due	Regard statement has included the					
Regard statements to	following detail					
ensure BME needs were						
identified and acted	'all commissioned services should					
upon within the	produce an equity profile on who uses					
commissioning process	the service which should be mapped					
and recommended	against population needs. In year					
work be done in this	actions to rectify significant gaps in					
area.	services should be addressed. In					
	addition all commissioned services					
	should profile the outcomes of the					
	service by protected groups and take					
	any remedial action where outcomes					
	are significantly different for					
	protected groups. These should be					
	made public.'					