CABINET MEMBER FOR HEALTH AND WELLBEING 10th June, 2013

Present:- Councillor Wyatt (in the Chair) and Councillor Buckley.

Apologies for absence had been received from Councillors Dalton, Steele and Tweed.

K5. DECLARATIONS OF INTEREST

There were no Declarations of Interest to record.

K6. MINUTES OF MEETINGS HELD ON 15TH APRIL AND 22ND MAY, 2013

The minutes of the previous meetings held on 15th April and 22nd May, 2013, were considered.

Further to Minute No. K61 (Air Quality – Local and Public Health Impact), data in relation to hospital admissions due to Asthma compared to estimated background air pollution data was considered for each of Rotherham's 21 Wards. The information was then broken down to consider the link between the two factors for children and adults.

The data suggested that the link between higher air pollution readings and asthma-related hospital admissions rates was fairly weak.

Discussion ensued on the information presented: -

- The data was limited to hospital admissions, it did not show where asthma was being well managed by GPs and home treatment, which would not usually result in hospital treatment being required;
- In-door pollution had not been considered and could be present in some homes at much higher concentrations that outdoor pollution rates;
- Rotherham's acute admissions were significantly higher compared to other areas:
- The M1 corridor ran through Rotherham and was nearby to many communities:
- There had been an 18% increase in Rotherham in motor vehicle ownership between the 2001 and 2011 censuses. However, newer vehicles were cleaner, so this increase made it hard to quantify any possible effect the increase in ownership could have had / be having.

Resolved: - (1) That the minutes of the meeting of the Cabinet Member for Health and Wellbeing held on 15th April and 22nd May, 2013, be approved as a correct record.

(2) That the information shared in relation to air pollution and asthmarelated hospital admissions be noted and it be shared with all Elected Members.

K7. HEALTH AND WELLBEING BOARD

The Chairman gave a verbal report on the main items discussed at the recent Board meeting which included:-

- Commissioning Plans;
- Locally Determined Priority Measure: Smoking.

Resolved:- That the minutes of the previous meeting of the Health and Wellbeing Board be noted.

K8. TEENAGE PREGNANCY

Consideration was given to the report submitted by Councillor J. Dalton following her attendance at the Local Government Association's Teenage Pregnancy Conference in April, 2013 (Minute No. 72 of the Health Select Commission held on 18th April, 2013, refers).

There was a range of speakers and representatives in attendance at the Conference.

Discussion ensued. It was noted that Rotherham had a continued steady decline in the number of teenage conceptions. Contributing factors to this achievement included maintaining funding to a project based in Maltby and the School Nursing Service, which was represented in all schools across the Borough. Girls who had higher levels of aspiration and educational attainment were less likely to conceive before the age of 18.

It was noted that a review into the Local Authority's Sexual Health Strategy would be undertaken over the next twelve months. The parameters of the review would include: -

- Visiting genito-urinary clinics;
- Reviewing outreach services provided in schools, children's centres and by the Rotherham Integrated Youth Support Service;
- Specialist Nurses who provided contraceptive implants;
- Contraception services provided through GP surgeries.

Discussion ensued, and the following issues were raised: -

- Teenage pregnancy and its place within the Health and Wellbeing Strategy;
- Public Health outcomes:
- Access to contraception, contraception advice and family planning and spacing advice;

- Support available following Welfare Reforms and the impacts they would have on families;
- Increased use of contraceptive implants and the need to increase sexual health awareness and education. This would need to be reflected in the Sexual Health Plan that was due to be reviewed.

Resolved: - That the information shared be noted.

K9. HEALTHWATCH ROTHERHAM - UPDATE

Further to Minute No. K62 (Healthwatch), Melanie Hall, Manager, Rotherham Healthwatch, was welcomed to the meeting. Melanie provided an update on the development of Healthwatch in Rotherham.

The 7 functions of local Healthwatch groups were: -

- 1. Gathering views and understanding the experiences of people who use services, carers and the wider community;
- 2. Making people's views known;
- Promoting and supporting the involvement of people in the commissioning and provision of local care services and how they were scrutinized;
- Recommending investigation or special review of services via Healthwatch England or directly to the Care Quality Commission (CQC);
- 5. Providing advice and information about access to services and support for making informed choices;
- 6. Making the views and experiences of people known to Healthwatch England and providing a steer to help it carry out its role as national champion;
- 7. NHS Complaints Advocacy.

Parkwood had been successful in winning the contract to set-up Rotherham's Healthwatch. Following its initial set-up by Parkwood, Healthwatch Rotherham would be run on a social enterprise model.

Efforts had been underway to open the Healthwatch Rotherham branch: -

Staffing and premises: -

- Manager had been in post since 13th May, 2013;
- Recruitment to the posts of Information and Research Officer, Engagement Worker and Advocate was underway;
- A recruitment campaign for the role of Chair and Directors of Healthwatch Rotherham's Board was underway;
- Responsibilities of the Board and of each Director would be agreed in due course, including how the Board would engage with the Health and Wellbeing Board's priority areas;
- A Town Centre location had been identified and negotiations were underway in relation to the lease;
- A launch event would be held in August, 2013.

Partnerships: -

Healthwatch Rotherham's Manager had met with a large number of partners and stakeholders to inform them of the role and remit of the organisation: -

- Area Assemblies;
- Strategic Director for Children and Young People's Services;
- Quality Surveillance;
- Clinical Commissioning Group;
- Rotherham Hospital Complaint Manager to discuss information sharing protocols;
- Small community groups to discuss working with trend data;
- Care Quality Commission to discuss co-ordination of activities;
- A future meeting would be held with representatives from the RDASH.

Information sharing and facilities: -

- Parkwood's database facility allowed for detailed statistical reports and breakdowns to be produced;
- Information sharing across Healthwatch, where appropriate, although guidance was being sought from Healthwatch England on information sharing and consent protocols.

Discussion ensued on the information provided: -

- Ensuring there was a Rotherham focus for all of the work that was undertaken;
- Maximising resources;
- Engaging Elected Members into Healthwatch Rotherham.

Resolved: - (1) That the information shared be noted.

(2) That the Healthwatch Rotherham Manager be thanked for their presentation and their contribution to the discussion.