

HEALTH AND WELLBEING BOARD
1st June, 2016

Present:-

Members:-

Dr. Julie Kitlowski	Clinical Chair, Rotherham CCG
	In the Chair
Louise Barnett	Chief Executive, Rotherham Foundation Trust
Chris Edwards	Chief Officer, Rotherham CCG
Ian Thomas	Strategic Director, Children and Young People's Services
Terri Roche	Director of Public Health
Janet Wheatley	Chief Executive, Voluntary Action Rotherham
Councillor Yasseen	Cabinet Member, Neighbourhood Working and Cultural Services

Report Presenters:-

Anna Clack	Public Health Specialist, RMBC
Miles Crompton	Policy and Partnerships Officer, RMBC
Ruth Fletcher-Brown	Public Health Specialist, RMBC
Claire Smith	Rotherham CCG

Officers:-

Nathan Atkinson	Assistant Director of Commissioning, RMBC
Richard Bellamy	Democratic Services, RMBC
Kate Green	Policy Officer, RMBC

Observers:-

Chris Bland	Rotherham Pharmaceutical Committee
Councillor Sansome	Chair, Health Select Commission
Councillor R.A.J. Turner	

Apologies for absence were received from Sharon Kemp, Tracy Holmes, G. Parkinson, Councillor Roche and Councillor Watson.

1. DECLARATIONS OF INTEREST

There were no Declarations of Interest made at this meeting. It was agreed that the Members' register of interests should be reviewed.

2. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no members of the public or the press in attendance.

3. MINUTES OF THE PREVIOUS MEETING

The minutes of the previous meeting of the Health and Wellbeing Board, held on 20th April, 2016, were considered.

Matters arising updates were provided in relation to the following items -

(i) Minute No. 69 (reference to previous minutes) – the ‘Let’s get Rotherham Active’ event had taken place on 11th May, 2016, at which 68 people had attended. Feedback had been positive. The outcome of the event and next steps were being considered by an officer meeting on 14th June and would be shared with the Board at a later date.

(ii) Minute No. 71 (Health and Wellbeing Strategy) – there was steady progress being made with the preparation of the Strategy with the Health and Wellbeing Steering Group meeting monthly since March to support the progress. There was, however, an urgent need for a lead officer to be identified to work alongside Richard Cullen GP on aim 1 of the Strategy.

(iii) Minute No. 75(a) (Health and Wellbeing Board Self-Assessment) – the self-assessment event would be taking place on the day of this Board’s next meeting, Wednesday 13th July 2016;

It was noted that the Board meeting would be an extended meeting to 12.00 Noon. The first part of the meeting, 9.00-9.30 a.m. was to conduct normal business and open to the public and observers; from 9.30 a.m. the meeting would be a closed facilitated session.

Resolved:- That the minutes of the previous meeting of the Board, held on 20th April, 2016, be approved as a correct record.

4. SOUTH YORKSHIRE AND BASSETLAW SUSTAINABILITY AND TRANSFORMATION PLAN/DRAFT INTEGRATED HEALTH AND SOCIAL CARE PLACE PLAN

Consideration was given to a report, presented by Chris Edwards, concerning the NHS Shared Planning Guidance, which asked every local health and care system in England to come together to create its own ambitious local plan for accelerating the implementation of the Five Year Forward View (5YFV). These blueprints, called Sustainability and Transformation Plans (STPs), will be place-based, multi-year plans built around the needs of local populations.

To deliver STPs, local health and care systems have come together to form 44 footprints, which collectively cover the whole of England. These geographic footprints are of a scale which should enable transformative change and the implementation of the ‘Five Year Forward View’ vision of better health and wellbeing; improved quality of care, and stronger NHS finance and efficiency by 2020/21.

It was noted that Rotherham sits within the South Yorkshire and Bassetlaw footprint which is led by Sir Andrew Cash (Chief Executive of Sheffield Teaching Hospitals).

A copy of the South Yorkshire and Bassetlaw Plan was included with the agenda and supporting documents for this meeting.

A comment was made as to whether there was adequate reference (within the local plan) to preventative work.

Resolved:- (1) That the report be received and its contents noted.

(2) That the Health and Wellbeing Board places on record that it feels appropriately engaged in the local plan (Sustainability and Transformation Plans) process and notes that the South Yorkshire and Bassetlaw Plan has to be submitted to NHS England by the due date of Thursday 30th June, 2016.

5. JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) UPDATE

Consideration was given to a report, presented by Miles Crompton (Policy and Partnerships Officer, RMBC) concerning the Joint Strategic Needs Assessment (JSNA). The report stated that the Health and Wellbeing Board has a statutory duty to evidence the needs of people in Rotherham and the JSNA assessment underpins health and social care commissioning, service development and the Health and Wellbeing Strategy.

The JSNA was refreshed as a new online resource in 2013, replacing the former fixed document format of 2011. After a period of consultation, the Health and Wellbeing Board had approved the final version of the JSNA in February 2014. The revised JSNA was used to inform the new Health and Wellbeing Strategy 2015-18.

The new JSNA format allows for updates of information so that the content is continually evolving in response to new data becoming available, or additional content being required. Contributors from a range of service areas have been asked to provide any updates required, on a quarterly basis.

The JSNA was subject to a review in 2015/16 which added a new overview of issues identified in the JSNA and made presentational changes to make it easier to find information about children and adults, and better understand the JSNA process.

The presentation and subsequent discussion about the Joint Strategic Needs Assessment highlighted the following salient issues:-

- implications of the Health and Social Care Act 2012;
- noting that the Joint Strategic Intelligence Assessment is an entirely separate process, prepared by the South Yorkshire Police and the Safer Rotherham Partnership;

- the early JSNA format had concentrated upon adult social care, although the revised document now encompasses a much wider range of issues (e.g.: domestic violence; transport, etc.);
- the JSNA includes 82 separate issues, catalogued into seven different categories;
- the emphasis upon issues affecting children and young people (eg: teenage pregnancy; smoking in pregnancy; Children in Need and living in poverty; disability and mental health);
- the specific issue of the oral health of young children (including tooth decay) – the Board noted that the statistics appeared to be in need of updating, as there was now evidence of an improving pattern being made in terms of children's oral health; it was also noted that there is no fluoridation of the water supply in the Rotherham Borough area);
- the prevalence of long-term sickness absence amongst the adult working population;
- the current life expectancy of women (81 years) and men (78 years) living in the Rotherham Borough area; the population aged over 80 years is increasing by 4% per year; the consequent demand on adult social care services;
- ethnic diversity in the Rotherham Borough area;
- the demand for food banks is increasing; some supermarkets are donating food to the food banks, in order to try and reduce the amount of food waste where the food is still fit for consumption.

It was agreed that copies of the presentation will be distributed to members of the Health and Wellbeing Board.

Resolved:- (1) That the report be received and its contents noted.

(2) That the Health and Wellbeing Board:-

(a) acknowledges that service-based contributors are being asked to provide any updates to the Joint Strategic Needs Assessment on a quarterly basis; and

(b) agrees that the Joint Strategic Needs Assessment will be subject to further review during 2016/17.

6. HEALTHY AGEING FRAMEWORK - A CO-ORDINATED WHOLE SYSTEM APPROACH TO HEALTHY AGEING FOR ROTHERHAM

Consideration was given to a report, presented by the Director of Public Health, stating that an initial draft of a Healthy Ageing Framework has been developed to raise the profile of the needs of the Rotherham Borough's ageing community and improve the coordination of the healthy ageing initiatives across Rotherham. Further stakeholder engagement will be sought to agree a vision that will drive activity forwards and improve the health and wellbeing of the Rotherham Borough's ageing population.

The report included the initial draft of the vision : "to improve the health and wellbeing of the ageing community of Rotherham. Rotherham services work together seamlessly to develop healthy, independent and resilient citizens, who live good quality lives".

The principles and desired outcomes of the Framework were also listed in the report. The next steps include a stakeholder engagement event, during July 2016, to shape the vision and framework and ensure that the Healthy Ageing Framework meets the needs and expectations of all stakeholders.

Discussion took place on the transport requirements of elderly people, many of whom will rely upon public transport (especially buses and trains). The need for a continuing dialogue with the South Yorkshire Passenger Transport Executive, about this specific issue, was acknowledged by the Board.

Resolved:- (1) That the report be received and its contents noted.

(2) That a further report about the Healthy Ageing Framework be submitted to a future meeting of the Health and Wellbeing Board, during the Autumn 2016, after completion of the stakeholder engagement event and consultation.

7. BETTER CARE FUND

Consideration was given to a report of the Head of Long Term Conditions and Urgent Care (Rotherham Clinical Commissioning Group) and the Assistant Director of Commissioning (RMBC Adult Social Care) containing an overview of the Better Care Fund Plan 2016/17 which would be submitted to NHS England.

The report stated that, in early March 2016, NHS England had issued the Better Care Fund planning requirements for 2016/17, which included the completion of a financial planning template and a narrative plan with a comprehensive set of Key Lines of Enquiry. There are eight conditions, which local areas have to meet through the planning process, in order to

access funding which is included in the Key Lines of Enquiry. These eight conditions were listed within the submitted report.

The Better Care Fund Plan had been jointly developed between the Rotherham Clinical Commissioning Group (CCG) and the Borough Council and is well aligned to the priorities within the Joint Health and Wellbeing Strategy 2015-18, the CCG Commissioning 2015-19, CCG Operating Plans 2016-17 and Provider Plans.

The Health and Wellbeing Board noted that Rotherham's Better Care Fund Plan 2016/17 had been cited as an exemplar Plan within the Yorkshire and Humberside region. The Board thanked the team of officers for their work.

Resolved:- (1) That the report be received and its contents noted.

(2) That the Better Care Fund Plan 2016/17, as now submitted, be approved and submitted to NHS England.

8. BETTER CARE FUND SECTION 75 AGREEMENT 2016-17

Consideration was given to a report submitted by the Head of Long Term Conditions and Urgent Care (Rotherham Clinical Commissioning Group) and the Assistant Director of Commissioning (RMBC Adult Social Care) containing the Framework Partnership Agreement relating to the Commissioning of Health and Social Care Services from the Better Care Fund in 2016/17 (Section 75 of the NHS Act 2006 refers). It was noted that this Agreement had been approved by the Government-appointed Commissioners to the Borough Council.

Resolved:- (1) That the report be received and its contents noted.

(2) That the 'Section 75' Framework Partnership Agreement, as now submitted, be approved and submitted to NHS England by the due date of Thursday, 30th June, 2016.

9. BETTER CARE FUND QUARTER 4 SUBMISSION

Consideration was given to a report submitted by the Chief Finance Officer (Rotherham Clinical Commissioning Group) and the Assistant Director of Commissioning (RMBC Adult Social Care) containing the fourth quarterly report to NHS England regarding the performance of Rotherham's Better Care Fund.

Resolved:- (1) That the report be received and its contents noted.

(2) That the contents of this fourth quarterly report be ratified and it be noted that the report had been submitted to NHS England by the due date of Friday, 27th May, 2016.

10. DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2015-16

Consideration was given to the Director of Public Health's Annual Report 2015/16 as submitted.

The Director of Public Health has a statutory responsibility to produce an Annual Report and the Council has a statutory duty to publish it.

This report focused on an analysis of some of the key issues affecting the health and wellbeing of Rotherham's Children and Young People and explored the health inequalities that exist for children between Rotherham and the rest of England. The Report described Children and Young People's health through a life-course approach, from pregnancy and birth, through school years into young adulthood.

The Annual Report aimed to engage with professional stakeholders across the Rotherham Borough, in order to work together and deliver on a clear set of recommendations that will help improve the health and wellbeing of the Borough's Children and Young People. The recommendations are aimed at all statutory and voluntary partners across the Rotherham Borough area.

The recommendations evolved from sections in the report which highlight 'our ambitions for Rotherham'. The intention of the Public Health Annual Report is to sit alongside the Health and Wellbeing Strategy and to help inform the actions taken by the Health and Wellbeing Board. It also offers some practical interventions which will improve child health and contribute to reducing the health inequalities across the Borough. Future reports will describe progress against the recommendations and the associated action plan.

The Public Health Annual Report contained seven recommendations. The report also explained the action taken in response to the recommendations of the previous (2014) Public Health Annual Report.

The presentation and subsequent discussion highlighted the following salient issues:-

- life expectancy in the Rotherham Borough area and the impact of poverty;
- infant mortality rates; still-births and sudden infant deaths;
- accidents affecting very young children;
- physical activity and obesity amongst children and young people;
- the oral health of young children (also discussed at Minute No. 5 above);

- educating young people about positive and healthy relationships and good sexual health;
- mental health issues (including self-harm and suicide);
- the importance of the accurate recording of health data and statistics.

Resolved:- (1) That the Annual Report be received and its contents noted.

(2) That the recommendations contained within the Director of Public Health Annual Report 2015/16, as now submitted, be supported and progress on the actions taken on the recommendations be reviewed at future meetings of the Health and Wellbeing Board.

11. SUICIDE PREVENTION AND SELF-HARM ACTION PLAN UPDATE 2015-16

Consideration was given to a report, presented by Ruth Fletcher-Brown (Public Health Specialist, RMBC) providing a six months' progress report on the actions detailed in the Rotherham Suicide Prevention and Self-Harm Action Plan 2015/16. The report stated that the delivery of the Rotherham Suicide Prevention and Self-Harm Action Plan is an action within the Rotherham Health and Well Being Strategy.

Listed within the submitted report were details of the progress, as monitored by the Rotherham Suicide Prevention and Self-Harm Group, of the various actions being taken based on the six national areas for action and an additional two which are Rotherham specific.

The Board's discussion of this report highlighted the following salient issues:-

- the real-time surveillance pilot scheme in the Rotherham Borough area (with partner organisations, including the South Yorkshire Police);
- identification of any 'hot-spots' of increased rates of suicide;
- continuing partnership working with the Rotherham Youth Cabinet about mental health issues affecting children and young people;
- the value of the social marketing campaign work;
- support for bereaved families and sign-posting to appropriate services (e.g.: the Samaritans; CAMHS, etc).

Resolved:- (1) That the report be received and its contents noted.

(2) That the Health and Wellbeing Board:-

(a) accepts and endorses the report on actions taken by the Rotherham Suicide Prevention and Self Harm Group for 2015/2016;

(b) endorses the areas for future activity, including a commitment to continue Rotherham's Real Time Surveillance work and the social marketing campaign work; and

(c) receives an update report on the work of the Rotherham Suicide Prevention and Self Harm Group once per year and exception reports more frequently, as appropriate.

12. DATE, TIME AND VENUE OF THE NEXT MEETING

Resolved:- (1) That the next meeting of the Health and Wellbeing Board be held on Wednesday 13th July, 2016, at the Town Hall, Rotherham. This meeting shall be extended from 9.00 a.m.-12.00 Noon to include a developmental session for members of the Board. From 9.30 a.m. the meeting will be closed to the public and observers.

(2) That future meetings take place on: -

- extraordinary meeting in August 2016 (if deemed necessary)
- 21st September, 2016 (agenda to include a report about the Children and Young People's Services Partnership Board)
- 16th November, 2016;
- 11th January, 2017;
- 8th March, 2017.