

**You are hereby summoned to a meeting of the Health Select Commission  
to be held on:-**

**Date:- Thursday, 14 December 2017      Venue:- Town Hall, Moorgate Street,  
Rotherham S60 2TH**

**Time:- 10.00 a.m.**

#### **HEALTH SELECT COMMISSION AGENDA**

1. To determine whether the following items should be considered under the categories suggested in accordance with Part 1 of Schedule 12A (as amended March 2006) of the Local Government Act 1972
2. To determine any item(s) which the Chairman is of the opinion should be considered later in the agenda as a matter of urgency
3. Apologies for absence
4. Declarations of Interest
5. Questions from members of the public and the press
6. Communications
7. Refresh of the Health and Wellbeing Strategy and the Integrated Health and Social Care Plan (Pages 1 - 24)  
Terri Roche, Director of Public Health, RMBC, to present
8. RCCG Commissioning Plan 2018-19 (Pages 25 - 37)  
Ian Atkinson, Deputy Chief Officer RCCG, to present

9. Date and time of next meeting  
Thursday, 18<sup>th</sup> January, 2018 commencing at 10.00 a.m.

### **Membership 2017/18**

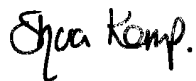
Chairman:- Councillor Evans

Vice-Chairman:- Councillor Short

Councillors Allcock, Andrews, Bird, R. W. Elliott, Ellis, Jarvis, Keenan, Marriott, Rushforth, Sansome, Whysall, Williams and Wilson.

Co-opted Members:

Vicky Farnsworth and Robert Parkin (Rotherham Speak Up) and Peter Scholey.



Chief Executive.

# **Rotherham Health and Wellbeing Strategy 2018-25**

**Health Select Commission**

**14 December 2017**

**Terri Roche, Director of Public Health**

# Purpose of session

- Provide an overview of the current strategy and why a refresh is needed
- To outline key data and intelligence
- Present a framework for the refreshed strategy for scrutiny to consider
- Provide an overview of how the Integrated Health and Social Care Place Plan aligns to the new strategy
- Present a timeline and next steps

# Health and Wellbeing Board

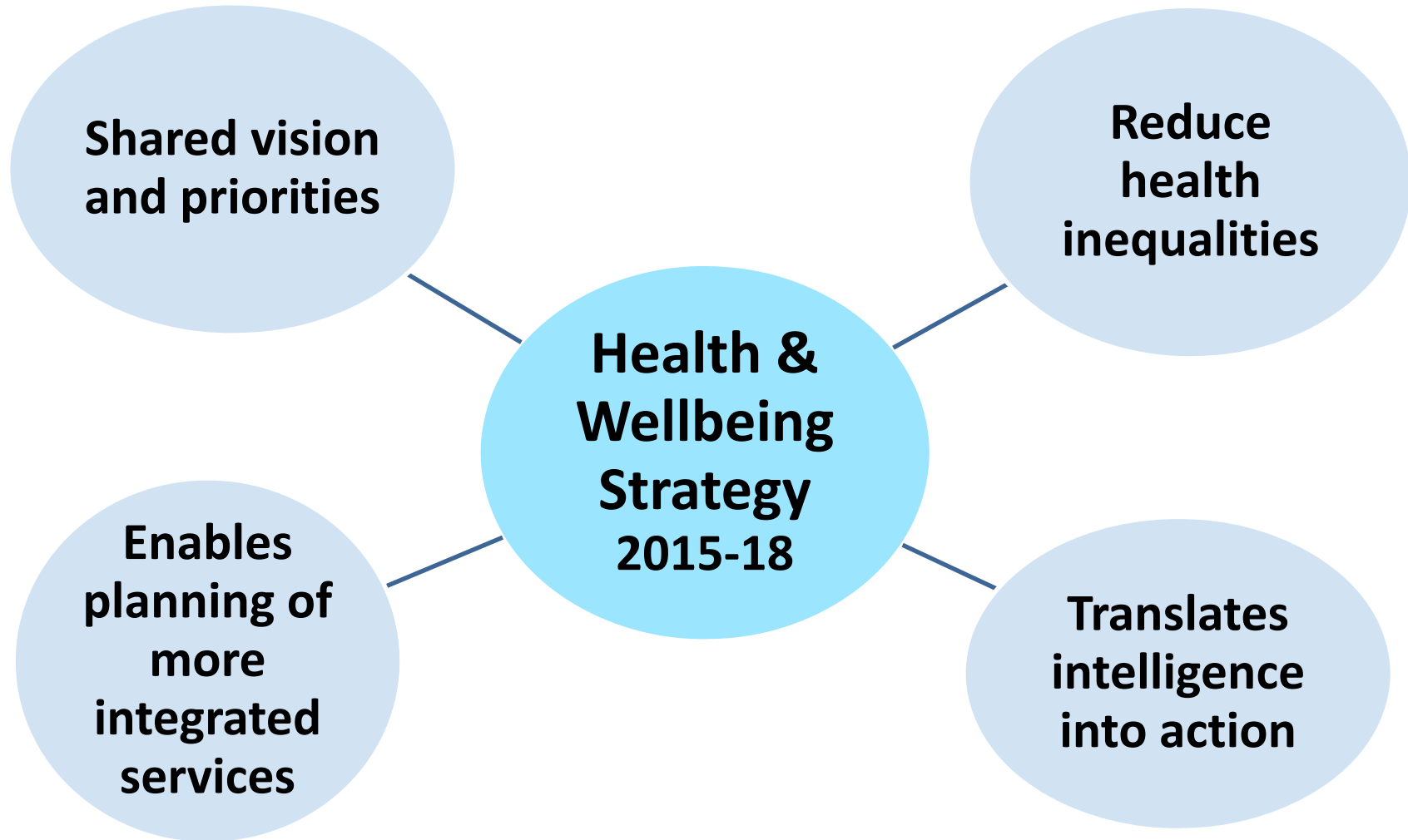
- Statutory board since 2011 – sub-committee of the council
- Includes statutory members, plus providers on the Rotherham board
- Duty to prepare Joint Strategic Needs Assessment (JSNA) and local Health and Wellbeing Strategy
- Duty to encourage integrated working between health and social care commissioners
- Provides a high-level assurance role; holding partners to account for delivery

# Health and Wellbeing Strategy

- Sets strategic priorities of the HWbB
- Not intended to include everything that all partners do
- Based on intelligence from the JSNA and other local knowledge
- Enables commissioners to plan and commission integrated services
- Service providers, commissioners and local voluntary and community organisations all have an important role to play in identifying and acting upon local priorities

# Health and Wellbeing Strategy 2015-18

## Principles



# Need for a refresh...

- Existing strategy runs until end of 2018 – but number of national and local strategic drivers now influencing the HWbB
- An early refresh ensures the strategy remains fit for purpose, strengthening the board's role in
  - high level assurance
  - holding partners to account
  - influencing commissioning across the health and social care system, as well as wider determinants of health
  - Reducing health inequalities
  - Promoting a greater focus on prevention



# Need for a refresh...

- LGA support to the HWbB:
  - Self-assessment July 2016
  - Stepping Up To The Place workshop September 2016
- Positive feedback given about board's foundation and good partnership working
- The current strategy was published quickly after the board was refreshed (September 2015)
- Now in stronger position to set the right strategic vision and priorities for Rotherham

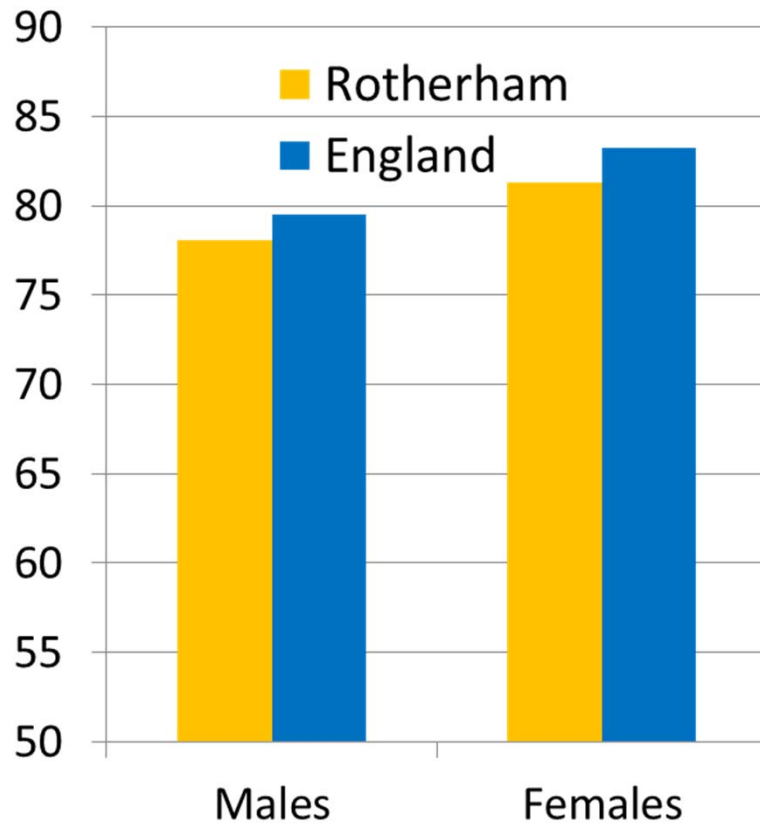
# Joint Strategic Needs Assessment

- Ageing population – rising demand for health and social care services
- More people aged 75+ living alone, vulnerable to isolation
- High rates of disability, long term sickness (more mental health conditions) and long term health conditions e.g. dementia
- Need for care rising faster than unpaid carer capacity
- High rates of smoking and alcohol abuse, low physical activity & low breastfeeding

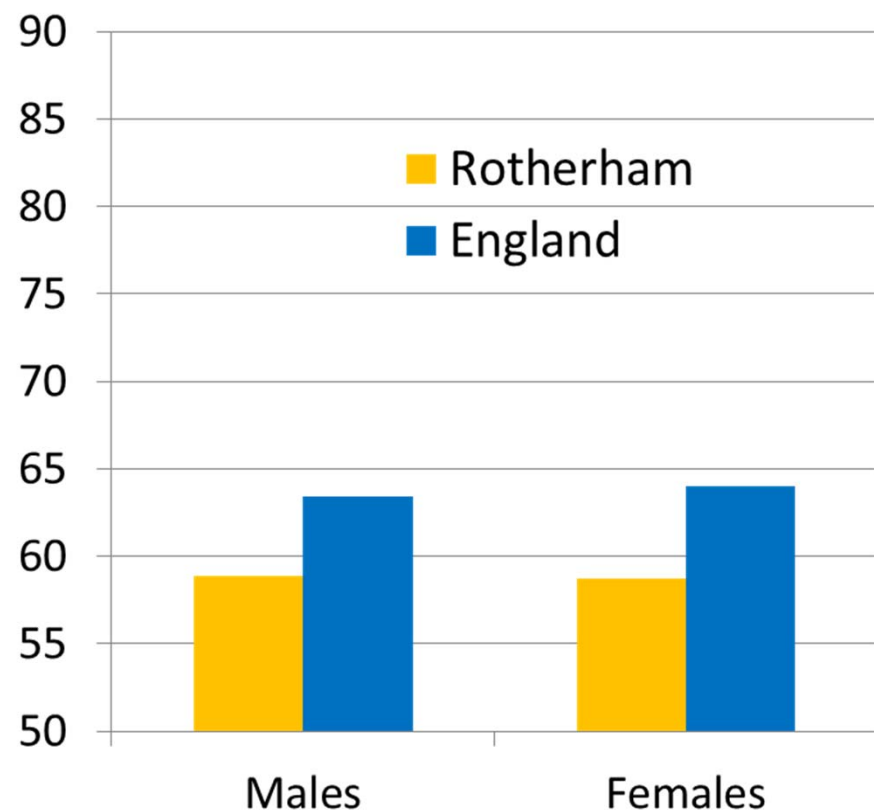
# Joint Strategic Needs Assessment

- Rising need for children's social care, esp. related to safeguarding
- Relatively high levels of learning disability
- Growing ethnic diversity, esp. in younger population, with new migrant communities
- Growing inequalities, long term social polarisation
- High levels of poverty including food and fuel poverty, debt & financial exclusion

# Inequalities in Life Expectancy

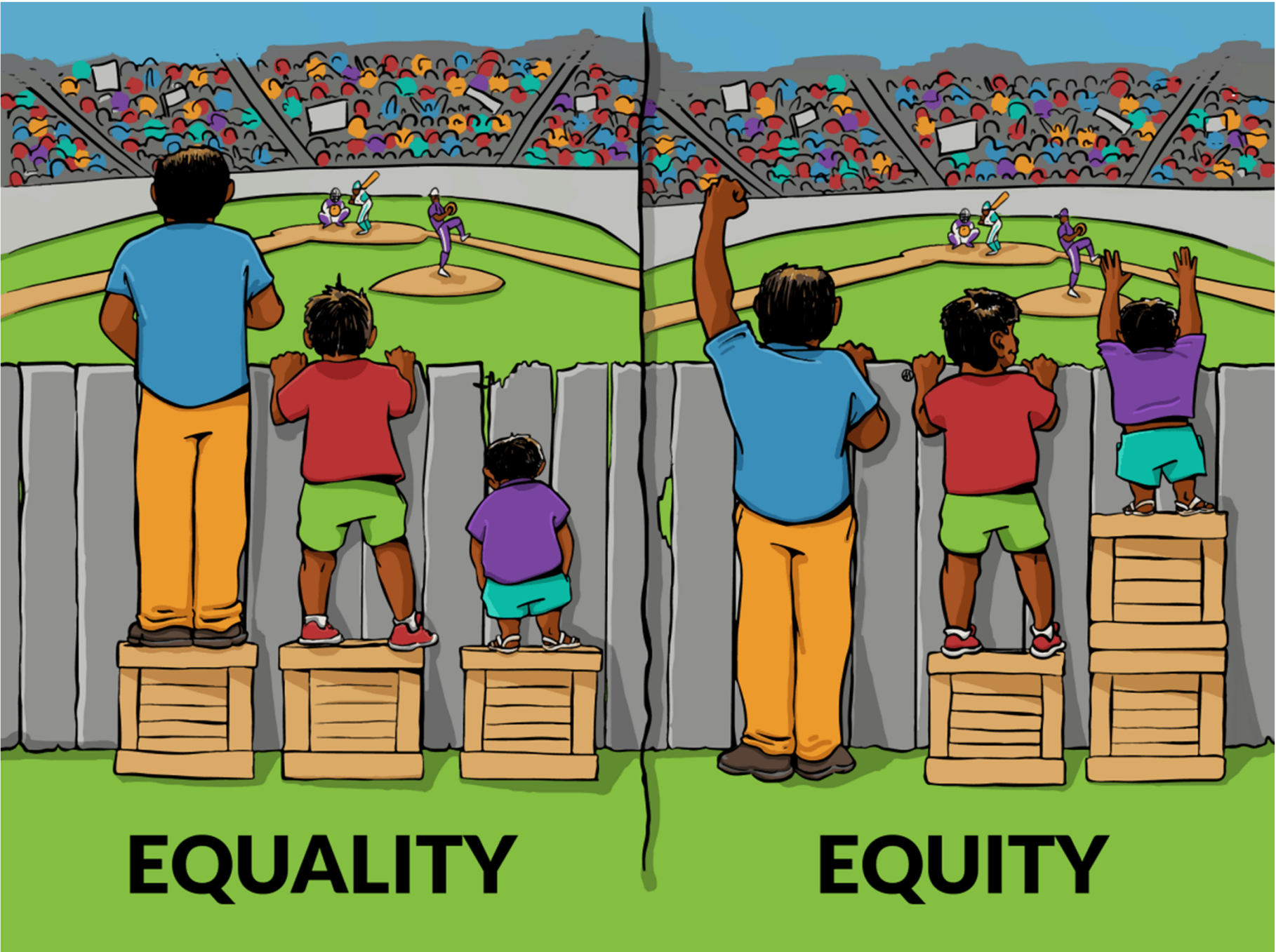


**Life Expectancy at Birth**  
**Average gap 1.65 years**



**Healthy Life Expectancy**  
**Average gap 4.9 years**

People in Hellaby Ward can expect to live an average of **6.5 years** longer than people in Rotherham East



**EQUALITY**

**EQUITY**

# Proposed refreshed strategy

- Sets strategic vision for the HWbB – not everything all partners do, but what partners can do better together
- Includes 4 strategic ‘aims’ – shared by all HWbB partners
- Each aim includes small set of high-level, shared priorities...
- Which the Integrated Health and Social Care Place Plan ‘system’ priorities will align to

# Strategic aims

**Aim 1.** All children get the best start in life and go on to achieve their potential and have a healthy adolescence and early adulthood

**Aim 2.** All Rotherham people enjoy the best possible mental health and wellbeing and have a good quality of life

**Aim 3.** All Rotherham people live well and live longer

**Aim 4.** All Rotherham people live in healthy, safe and resilient communities

# Consultation and engagement

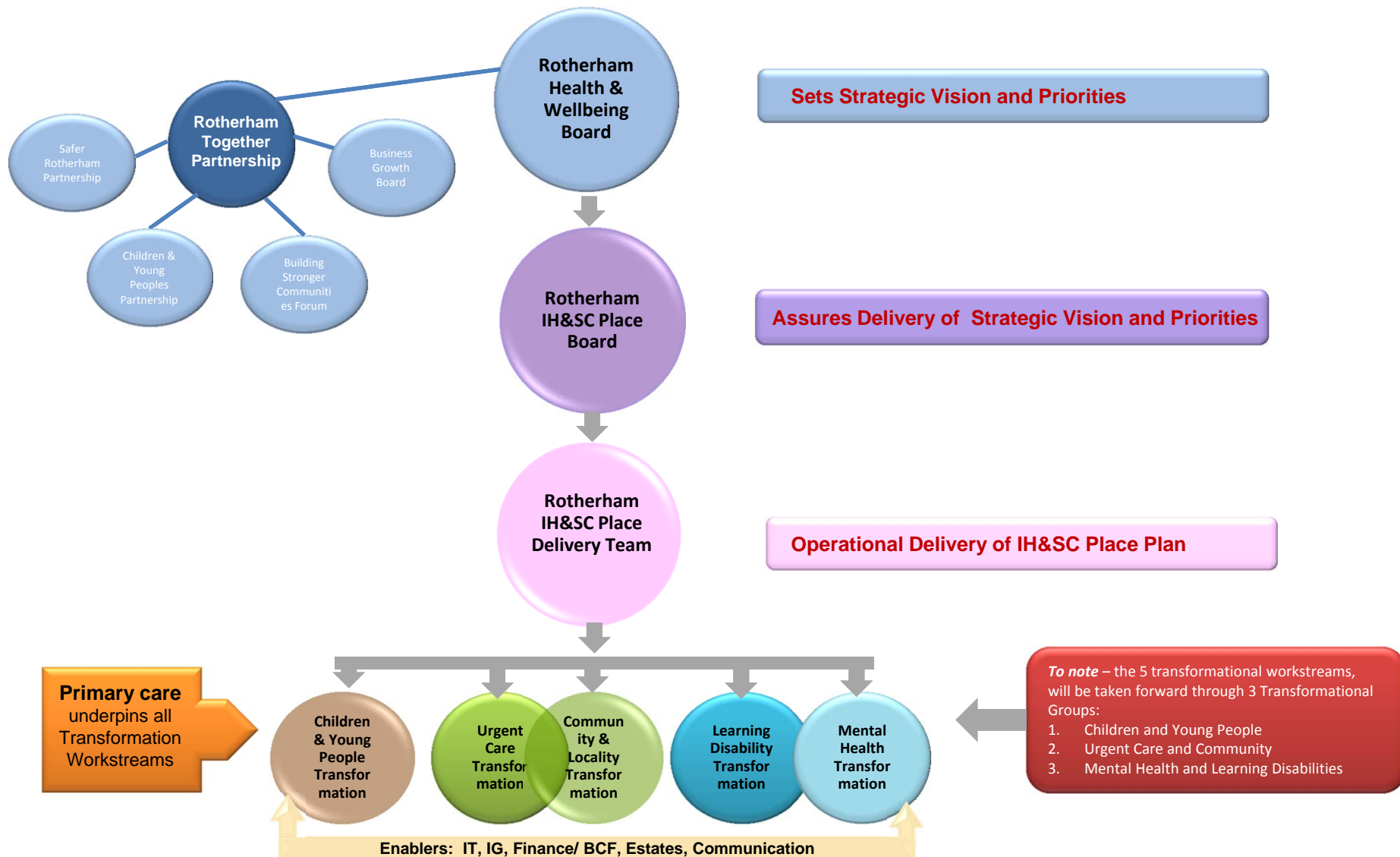
- HWbB received proposal for refresh September 2017 and framework November 2017
- IHSC Place Board received an update September 2017
- New framework shared with HWbB sponsors and theme leads for comments
- Health Select Commission December 2017
- All partners to consider taking through their own governance structures Nov – March 2018
- VAR audience with to take place January 2018
- Consider what other stakeholder engagement may be needed...

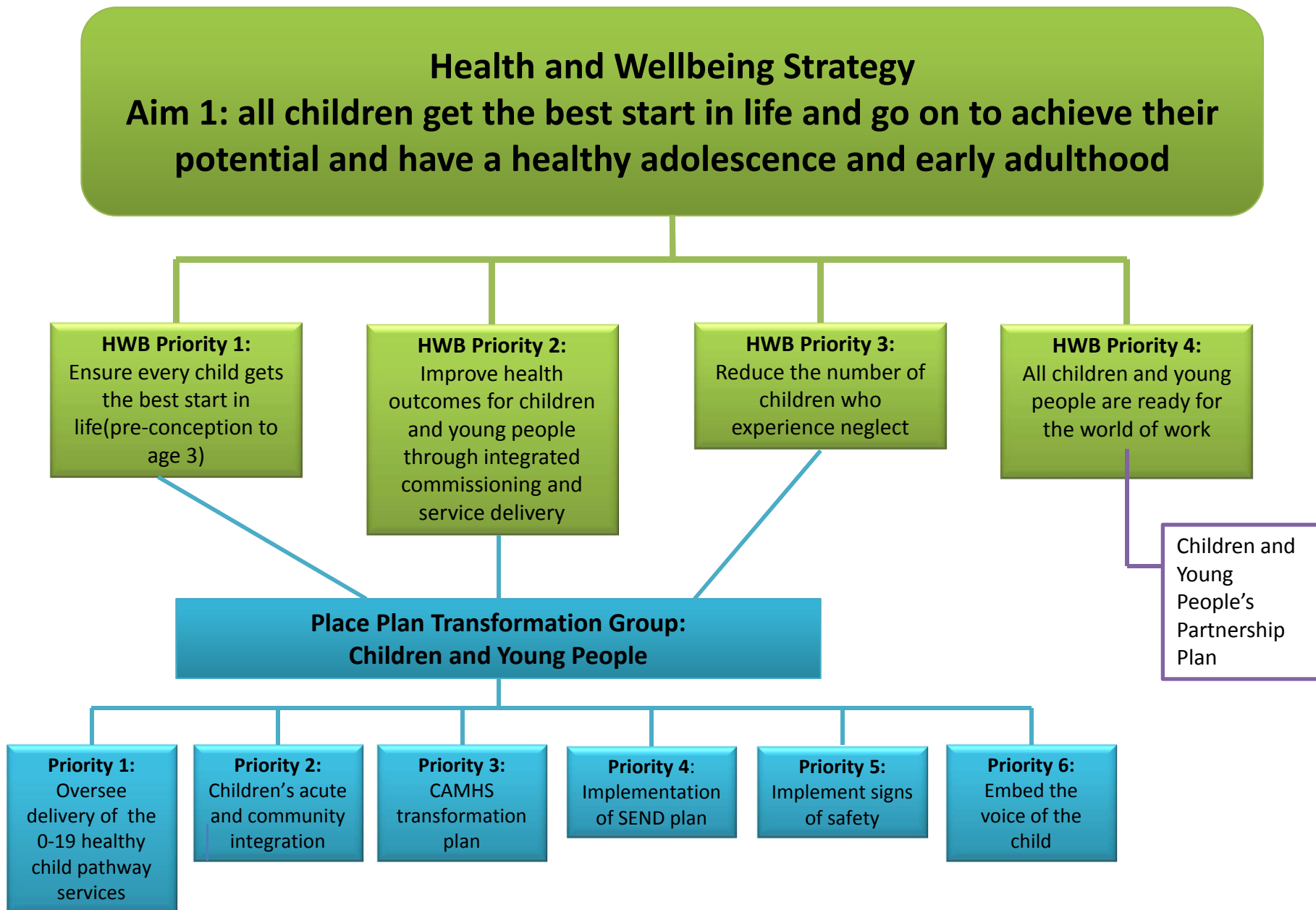


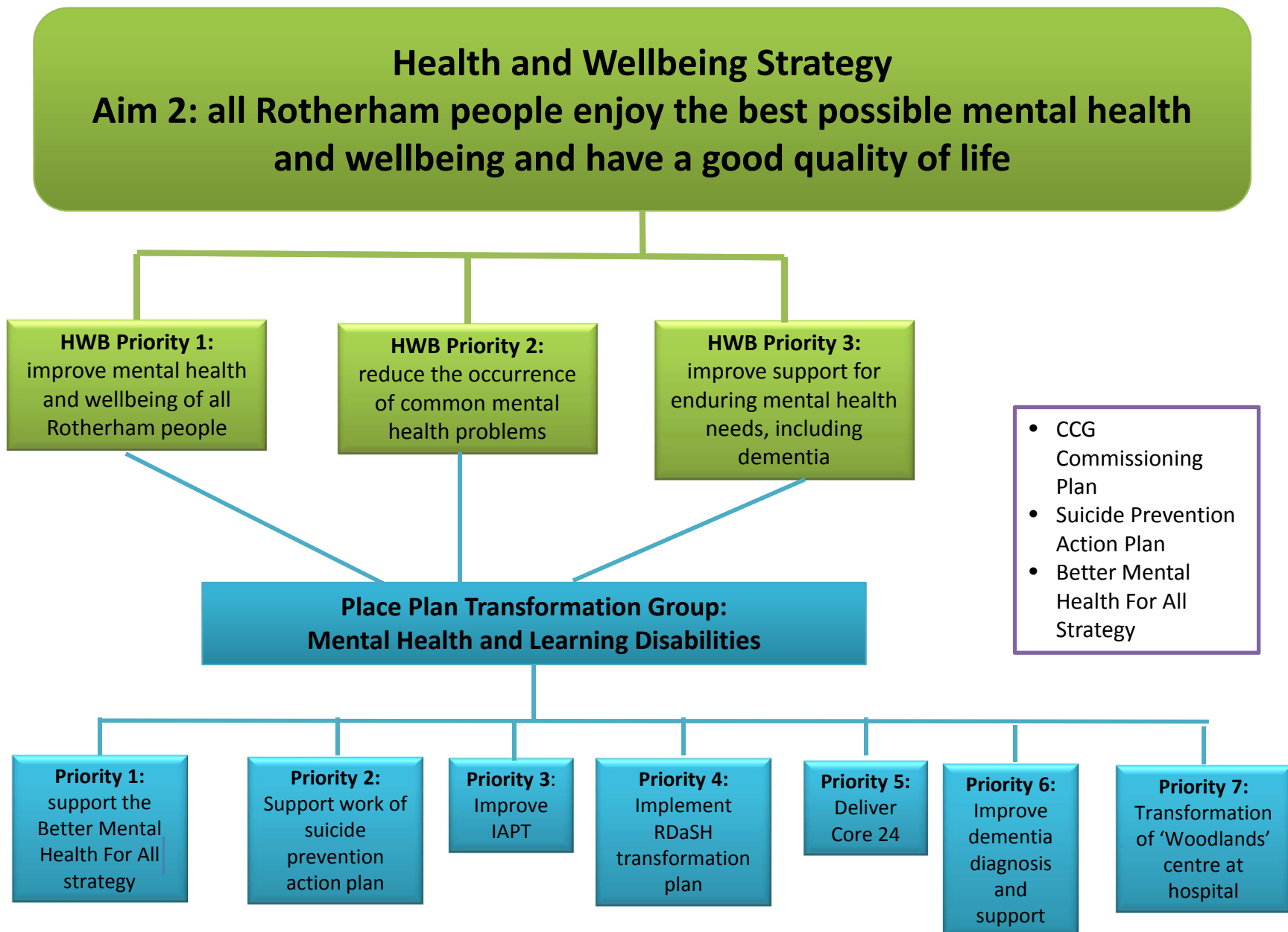
# Integrated Health and Social Care Place Plan

- Current Place Plan agreed November 2016
- Work taking place to re-align with the refreshed H&WB Strategy

# How the Rotherham Health and Wellbeing (H&WB) Strategy and Integrated Health and Social Care (IH&SC) Place Plan will align

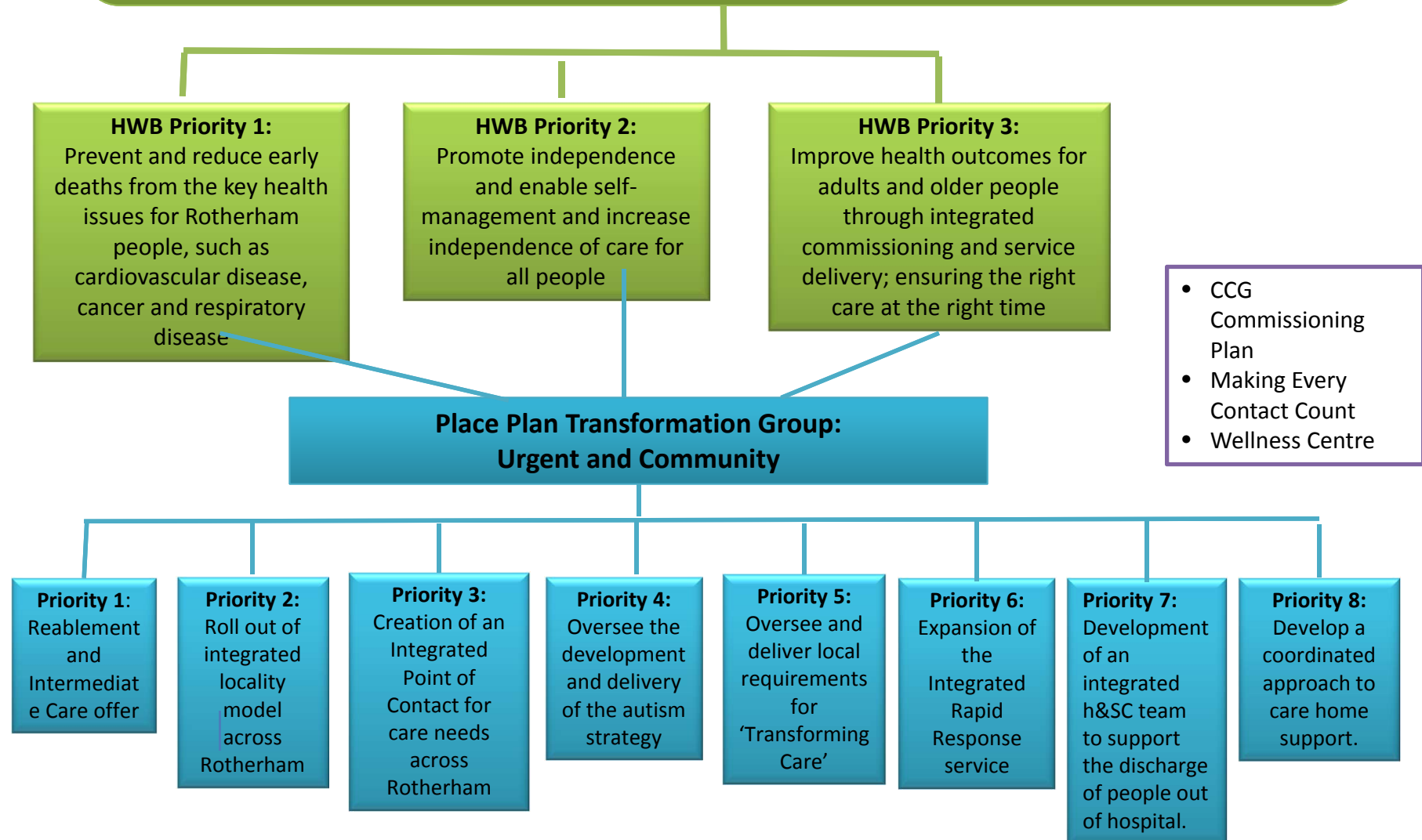






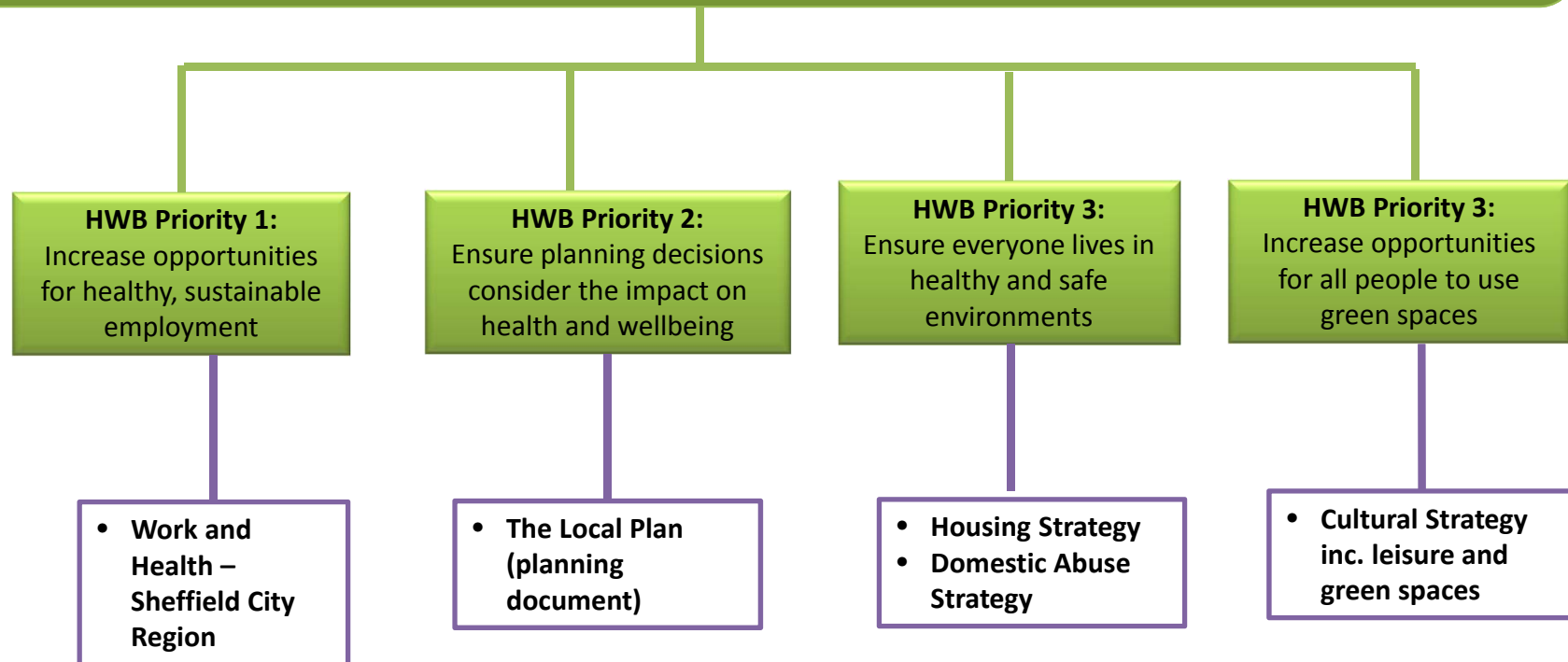
# Health and Wellbeing Strategy

## Aim 3: all Rotherham people live well and live longer



## Health and Wellbeing Strategy

**Aim 4: all Rotherham people live in healthy, safe and resilient communities**



**No direct alignment with Place Plan**

**The wider determinants of health - impacting on all other aims**

## What next...

- Full draft of strategy and IHSC Place Plan to be presented to HWbB 10 January 2018
- Continue to gather comments and feedback from stakeholders up to March 2018
- CCG Governing Body, IHSC Place Board and Cabinet to endorse strategy and IHSC Place Plan February/March 2018
- IHSC Place Board to sign off IHSC Place Plan March 2018
- HWbB to sign off strategy by April 2018

# Questions for Scrutiny

- Are the strategic aims and priorities clear about what they mean?
- Is there anything missing or needs more emphasis?
- Reducing loneliness and isolation is an emerging issue in the JSNA – how do we ensure this is addressed through the strategy?
- How can elected members, partners and residents work together to help deliver the strategy aims within neighbourhoods?



# **‘Prevention Matters’**

- The LGA will be running a workshop looking at how elected members can improve the health of their communities
- Taking place over two half days: 15<sup>th</sup> and 16<sup>th</sup> February
- Contact [sharon.crook@rotherham.gov.uk](mailto:sharon.crook@rotherham.gov.uk) to reserve a place

# Thank you!

## Key contacts:

Terri Roche, Director of Public Health

[teresa.roche@rotherham.gov.uk](mailto:teresa.roche@rotherham.gov.uk)

Kate Green, RMBC Policy and Partnership Officer

[kate.green@rotherham.gov.uk](mailto:kate.green@rotherham.gov.uk)

Lydia George, Planning and Assurance Manager

[Lydia.George@rotherhamccg.nhs.uk](mailto:Lydia.George@rotherhamccg.nhs.uk)

Current Health and Wellbeing Strategy 2015-18:

[rotherhamhealthandwellbeing.org.uk](http://rotherhamhealthandwellbeing.org.uk)

# Review of NHS Rotherham CCG's Commissioning Plan

**Ian Atkinson - Deputy Chief Officer**  
**Rotherham CCG**

*Your life, Your health*

1

# Presentation Overview

- 1) Where we are now:
  - Financial position
  - Demographic Challenge.
  - Our Current Priorities, Delivery and Performance
- 2) The plan, and how we put it together
- 3) Review of priority areas
- 4) PPG Feedback

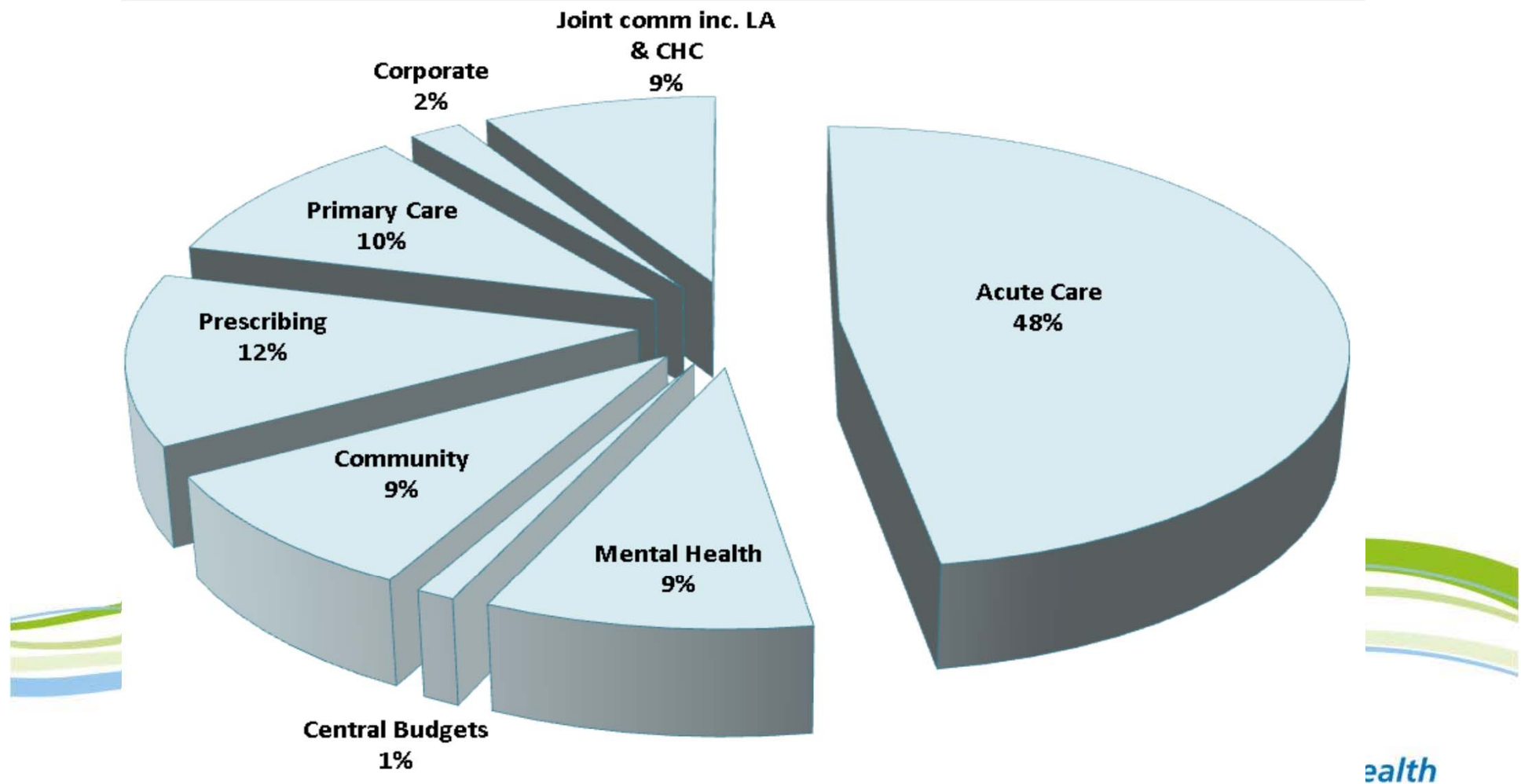
*Your life, Your health*

# Finance Allocation

- 17-18 £399 million
- Savings of £75million over 5 years 2015-20
- 17-18 savings of £15.9million
- 18-19 and beyond awaiting settlement following Autumn statement

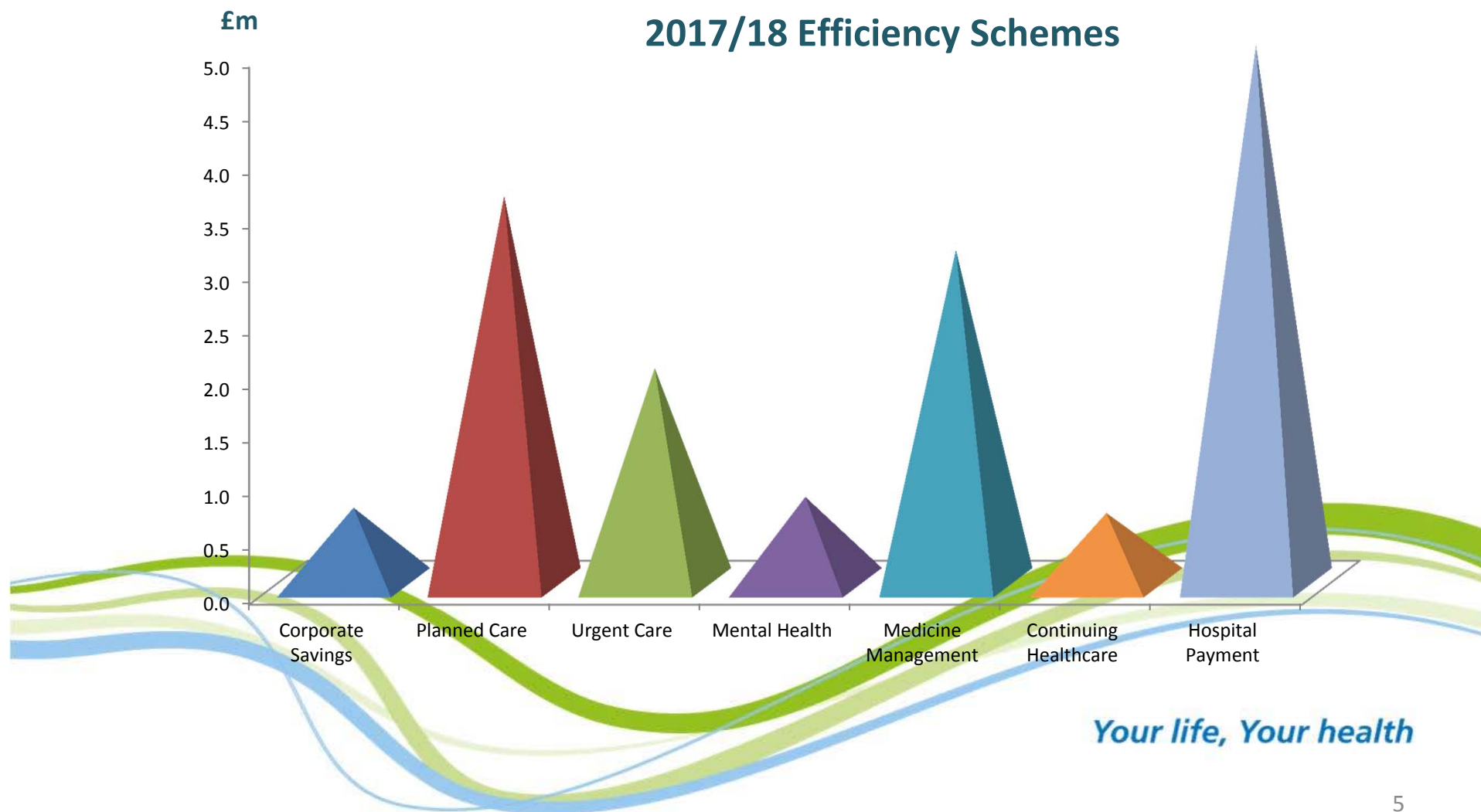
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# Where we spend our Money



# System Efficiency

£75m over 5 years, £15m 17-18



# Changing Demographics

- Rotherham is the 52nd most deprived out of 326 districts
- **50,370** Rotherham residents (19.5%) live in the most deprived **10% of England (this has increased)**
- Rotherham has **8,640** residents (3.3%) in Ferham, Eastwood, East Herringthorpe and Canklow living in the most deprived **1% of England.**



# 2015 – 20 Priority areas

## Strategic Aims

*The CCG Strategic Aims seek to address all five H&WB Strategic Aims across all life stages and for all communities both geographical and communities of interest*

- |  |       |
|--|-------|
| 1 Primary Care                               | ▲▲▲▲▲ |
| 2 Unscheduled Care                           | ▲▲▲   |
| 3 Transforming Community Services            | ▲▲▲▲  |
| 4 Ambulance and Patient Transport            | ▲     |
| 5 Clinical Referrals                         | ▲▲▲▲  |
| 6 Medicines Management                       | ▲▲    |
| 7 Mental Health                              | ▲▲▲   |
| 8 Learning Disabilities                      | ▲▲▲   |
| 9 Maternity and Children's Services          | ▲▲    |
| 10 Continuing Health and Funded Nursing Care | ▲     |
| 11 Palliative Care                           | ▲▲    |
| 12 Specialised Services                      | ▲▲▲   |
| 13 Joint Working - local and Regional        | ▲▲▲▲  |
| 14 Child Sexual Exploitation                 | ▲▲    |
| 15 Cancer                                    | ▲▲▲   |

## Strategy delivery

- **Planned Care** - contained growth in referrals and our system is in the top 10% nationally for 18 week performance.
- **Urgent Care** - New Urgent and Emergency Care Centre now open. Focus on improving performance.
- **Primary Care** - 31 practices now inspected by CQC, 27 rated good 4 require improvement. Primary Care access data suggests best in South Yorkshire.
- **Mental Health** – Talking Therapies High Performing in access and outcomes, Dementia diagnosis rates highest in Y&H.
- **Child and Adolescent mental Health** – CQC rated good, Improved access times, ongoing journey of improvement
- **Delayed Transfer of Care** – System wide success, performance currently 1.8% (national target below 3.5%)

# The plan and how we put it together

- RCCG has to have an up to date commissioning plan
- Our GP Members recommend the plan for approval by Our Governing Body
- This year we are aligning the Rotherham Place Plan & Health and Well Being Strategy.
- **In the process, we include:** CCG member practices & stakeholders, patients and the public
- Our Governing Body and Clinical Exec have already reviewed the existing Plan and have endorsed the continuation of existing priority areas.

# Refreshing our plan

- To date GP Members, Patients groups and the PPG forums have supported the CCG in giving feedback around many of the 15 priority commissioning areas;

In particular we would welcome further views regarding our proposed approach for the following strategic priority areas:

- **Urgent care** – 111/OOH/ Primary Care – Urgent Care Model
- **Primary care** – 7 day Access, Waverley, Workforce
- **Mental health**- Talking Therapies, Crisis, Dementia
- **End of life care** – Care in Community,
- **Maternity and children** – Better Births national Strategy
- **Care homes** – Support to prevent admission

## Other sections in the Plan

The following list are areas not covered in the presentation but are very important to the CCG, feedback is welcome:

- Health & Well Being Strategy
- Joint Strategic Needs Assessment
- Medicines Management
- Continuing Care & Funded Nursing Care
- End of Life Care
- Ambulance & Patient Transport Services
- Specialised Commissioning
- Public Involvement & Promotion of Choice
- Health Inequalities
- Statutory Responsibilities
- Efficiency
- Finance
- Information Management & Technology
- Communication
- Performance & Assurance
- Risk
- The prevention of Child Sexual Exploitation will remain a priority in 2016-17

## What does all this mean?

- Increasing and significant financial challenge for local health and social care economy.
- RCCG will work with partners across the Rotherham Place, to best meet the needs of the Rotherham population.
- Generally, and where this is better for patients, RCCG wants to move services from Secondary (hospital) to Community/Primary Care.
- CCG wants to commission services in Rotherham.
- Where patient quality and outcomes can be improved, we will consider commissioning on a geographical area

# Feedback from Stakeholders

The CCG welcomes all feedback and any comments can be sent via the CCG email address [Rotherhamccg@rotherham.nhs.uk](mailto:Rotherhamccg@rotherham.nhs.uk)

The current 2016/17 Commissioning Plan is available at <http://www.rotherhamccg.nhs.uk/our-plan.htm>

The first draft version of the 2018/19 Commissioning Plan will be circulated to stakeholders for comment mid-January.

*CCG transformation capacity is finite so it is important that if new initiatives are prioritised some exiting initiatives are stopped.*