

**HEALTH SELECT COMMISSION**  
**Thursday 8 July 2021**

Present:- Councillor Yasseen (in the Chair); Councillors Baum-Dixon, The Mayor (Councillor Jenny Andrews), Aveyard, Baker-Rogers, Barley, Bird, A. Carter, Griffin, Havard, Hughes, Hunter, Thompson and Wilson. Also present was the Co-optee, Mr. Robert Parkin of Rotherham Speak Up.

Apologies for absence:- Apologies were received from Cllrs Elliott, Haleem and Wooding.

The webcast of the Council Meeting can be viewed at:-  
<https://rotherham.public-i.tv/core/portal/home>

**12. MINUTES OF THE PREVIOUS MEETING HELD ON 10 JUNE 2021**

**Resolved:-**

That the minutes of the meeting held on 8 June 2021 be approved as a true and correct record of the proceedings.

**13. DECLARATIONS OF INTEREST**

There were no declarations of interest.

**14. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS**

The Chair confirmed there were no members of press or public in attendance who wished to ask a question in respect of any items of business on the agenda.

**15. EXCLUSION OF THE PRESS AND PUBLIC**

The Chair confirmed there was no reason to exclude members of the press or public from observing any items of business on the agenda.

**16. CARERS STRATEGY UPDATE**

Consideration was given to a report providing an update on the reprofiled timeline for the project work associated with the Carers Strategy. This update followed previous reports in October 2019, which introduced a new way of working toward a consistent, robust and sustainable pathway, and in March 2020, which shared plans to deliver a Carers Programme. The council offer was noted to be part of a wider system approach, and carers had been added to the Rotherham Health and Social Care Place Plan as a key area of focus, recognising the importance they play which has been very much highlighted by Covid-19. The report outlined recent actions and next steps in delivery of the Carers Programme.

In discussion, Members expressed interest in knowing whether training accompanied the tech packages that were provided to carers. Officers provided assurances that Cross Roads had provided that added value in the physical handover of the devices where appropriate for the individual.

Members requested further details regarding the pathways by which Carers become known to the service. Officers identified the socially based events such as those hosted by the Parent Carers Forum. The Carers Crossroads coffee shop approach was also cited as an example of interface with the public which leads some people into community and support. If someone is in crisis, they can be in direct contact.

Members sought clarification whether the grant was taken up for assistive technology for people who are cared for. The response from officers described the use of grants for carers to access technology and the feedback received from carers and plans to strengthen focus groups around assistive technology.

Members expressed interest in knowing more about young carers. Answers to these questions required consultation with officers in Children and Young People's Services and were therefore offered outside the meeting.

Members requested more information about carers in isolation. Officers noted the close links between Age UK and Crossroads. Through the conversations in the focus group, isolation will be a key focus in the refreshed strategy.

Further details were requested around carers who access support in a non-digital way. Some carers became known via the vaccination programme. Work is ongoing to create a culture movement in Rotherham as a Carer-Friendly Borough. Examples were provided as to what that might look like. This would also be reflected in the refreshed strategy.

Members also asked for details around prioritisation of support for the carers in terms of costs and pressure on resources. The response from officers noted the number of carers self-identifying in the 2011 and those currently known to Adult Social Care, emphasising the importance of forthcoming census information. Officers described the reality of limited resources and the importance of taking every opportunity to help people to be as strong as possible in their own household. This includes preventative work that across the whole population, keeping people from becoming lonely, from getting ill. All of these efforts help manage potential demand. The Carers Programme serves carers who, appropriately, are not necessarily known to adult social care, but who nevertheless play a crucial role. One of the positive things that came from the pandemic is that male carers have accessed support via digital means who previously would not have been comfortable accessing support.

**Resolved:-**

1. That thanks be recorded on behalf of the Chair to all the carers and organisations who have supported and continue to support carers throughout the pandemic.
2. That the report be noted, and the next update in 12 months include equalities information.

**17. HEALTH AND WELLBEING BOARD ANNUAL REPORT**

Consideration was given to an annual report summarising the aims and accomplishments of the Health and Wellbeing Board for the 2020/21 municipal year. The report summarised work in several areas including combating loneliness, encouraging better physical health and activities, supporting young people's mental health, setting up an unpaid carers group in support of the refresh of our Carers Strategy, and placing an increasing emphasis on the wider determinants of health. The report noted the influence of the pandemic and identified health inequalities as the priority focus for further work. The report noted the upcoming refresh of the board priorities, anticipated changes brought in through the Health and Care Bill.

In discussion, Members asked about efforts to support health inequalities below ward levels, because there is deprivation within all wards. In response, the Cabinet Member for Adult Social Care and Health identified several schemes that were or will be implemented right across the Borough. The Cabinet Member also suggested Councillors reference the JSNA and ward profiles available there to generate ideas for initiatives that respond to the characteristics of the ward. The Director of Public Health also noted that some schemes are targeted by place, but most are targeted by pathway. Pathways are designed to be universal, so that everyone can access them. For example, setting up the Rotherham Community Hub. Funding constraints do sometimes require focussed efforts that sometimes become concentrated toward the centre, but the pathway approach helps ensure everyone can access the schemes. It was agreed that deprivation is not just in the centre but affects parts of the whole of Rotherham. Members were invited to email the Cabinet Member if there are areas that Members feel the Health and Wellbeing Board should be giving attention.

Members requested further information regarding bodies or boards monitoring the safeguarding partnership working. The Cabinet Member cited multiple boards which deal with safeguarding, including the Safeguarding Children's Partnership and the Safeguarding Adults Board, and multiple partner organisations including the Samaritans and Bernardos. A designated nurse for safeguarding employed by the CCG is a specialist support resource for all the partners in Rotherham for safeguarding. All services will have a safeguarding lead and have their own responsibilities for safeguarding. The Strategic Director also sits on the Health and Wellbeing Board as a statutory officer for safeguarding.

Members expressed interest in reading more details and figures associated with the activities and initiatives of the strategy delivered by the Health and Wellbeing Board. In response, Members were referred to the minutes and papers of the Health and Wellbeing Board meetings to read the full context of the strategy and its aims.

Further clarification was requested around the upcoming strategy refresh and what kinds of information will contribute to the refresh. The response noted the importance of the forthcoming census data and also the need to rescale timelines after COVID. Members were invited to put forward their priorities to feed into the refresh.

**Resolved:-**

1. That the report be noted.
2. That the refreshed strategy priorities be circulated to Members.

**18. REVISED WORK PROGRAMME**

Consideration was given to a revised programme of work which provided an outline schedule for the 2021/22 municipal year. The Chair highlighted several topics on the proposed work programme. In discussion, Members further highlighted areas of interest included in the work programme of scrutiny work for the coming year.

**Resolved:-**

1. That consideration be given to an outline work programme using the draft set out in Appendix 1 as a basis for the discussion and to agree priorities for the 2021/22 municipal year.
2. That the Chair and Governance Advisor meet with the Cabinet Member for Adult Social Care and Health, representatives of partner organisations, and officers to receive feedback on a potential schedule of work.

3. That the Governance Advisor be authorised to make changes to the work programme in consultation with the Chair and Vice-Chair to be reported back at the next meeting for endorsement.
4. That Councillor Thompson be appointed representative of Health Select Commission to the Health, Welfare and Safety Panel.

**19. URGENT BUSINESS**

The Chair confirmed there were no items of urgent business needing to be determined at the meeting.

**20. DATE AND TIME OF NEXT MEETING**

The Chair announced that the next meeting of Health Select Commission would take place 2 September 2021, commencing at 5.00 pm in Rotherham Town Hall.