

HEALTH SELECT COMMISSION

- Date and Time :-** Thursday 2 September 2021 at 5.00 p.m.
- Venue:-** Town Hall, Moorgate Street, Rotherham.
- Membership:-** Councillors Andrews, Atkin, Aveyard, Baker-Rogers, Barley, Baum-Dixon (Vice-Chair), Bird, A. Carter, Elliott, Griffin, Haleem Havard, Hughes, Hunter, Thompson, Wilson, Wooding and Yasseen (Chair).
- Co-opted Member – Robert Parkin, Rotherham Speak Up**

This meeting will be webcast live and will be available to view [via the Council's website](#). The items which will be discussed are described on the agenda below and there are reports attached which give more details.

Rotherham Council advocates openness and transparency as part of its democratic processes. Anyone wishing to record (film or audio) the public parts of the meeting should inform the Chair or Governance Advisor of their intentions prior to the meeting.

AGENDA

1. Apologies for Absence

To receive the apologies of any Member who is unable to attend the meeting.

2. Minutes of the previous meeting held on 8 July 2021 (Pages 3 - 7)

To consider and approve the minutes of the previous meeting held on 8 July 2021 as a true and correct record of the proceedings.

3. Declarations of Interest

To receive declarations of interest from Members in respect of items listed on the agenda.

4. Questions from members of the public and the press

To receive questions relating to items of business on the agenda from members of the public or press who are present at the meeting.

5. Exclusion of the Press and Public

To consider whether the press and public should be excluded from the meeting during consideration of any part of the agenda.

6. Suicide Prevention

To receive a presentation regarding an update on suicide prevention in Rotherham.

7. Rotherham Healthwatch Update

To receive an update regarding recent activities and research by Rotherham Healthwatch.

8. Work Programme Update (Pages 8 - 14)


To receive an update in respect of the scrutiny work programme.

9. Urgent Business

To consider any item(s) which the Chair is of the opinion should be considered as a matter of urgency.

10. Date and time of next meeting

The next meeting of the Health Select Commission will be held on 7 October commencing at 5pm in Rotherham Town Hall.



SHARON KEMP,
Chief Executive.

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.

Committee Name and Date of Committee Meeting

Health Select Commission – 02 September 2021

Report Title

Work Programme Update

Is this a Key Decision and has it been included on the Forward Plan?

No

Strategic Director Approving Submission of the Report

Jo Brown, Assistant Chief Executive

Report Author(s)

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Ward(s) Affected

Borough-Wide

Report Summary

To outline an updated work programme for Health Select Commission.

Recommendations

1. That the updated work programme be noted.
2. That the Governance Advisor be authorised to make changes to the work programme in consultation with the Chair, with any changes to be reported back at the next meeting for endorsement.

List of Appendices Included

Appendix 1 Work Programme – Health Select Commission

Background Papers

Agendas of Health Select Commission during the 2020/21 Municipal Year
Minutes of Health Select Commission during 2020/21 Municipal Year
Initial Work Programme Draft – 10 June 2021, Health Select Commission
Revised Work Programme – 8 July 2021, Health Select Commission

Consideration by any other Council Committee, Scrutiny or Advisory Panel

Not applicable

Council Approval Required

No

Exempt from the Press and Public

No

Updated Work Programme

1. Background

- 1.1 Overall performance of health partners is scrutinised through their quality reports, incorporating a range of national measures together with a number of locally agreed quality priorities. Adult Care and Public Health both have outcome frameworks of performance measures which enable progress to be gauged year on year and also benchmarked nationally and regionally.
- 1.2 Addressing health inequalities that exist in the borough, through health and social care strategies and plans, and through looking at the wider determinants of health should be an overarching principle.
- 1.3 The Health and social care services continue to undergo transformation and move towards more integrated working through joint commissioning, joint posts, locality working, greater co-location and multi-disciplinary teams. This work has been an important long-term programme that the Health Select Commission (HSC) has kept under scrutiny since 2015-16 and is still evolving. The recent publication of the Government's White Paper will bring changes in health care systems that will remain a focus and which will have evolving implications for how health scrutiny is conducted in the future.
- 1.4 Another continuing piece of work is scrutiny of any major changes to NHS services across South Yorkshire, Derbyshire and Nottinghamshire, undertaken by the Joint Health Overview and Scrutiny Committee, in accordance with the terms of reference for the HSC in the Council Constitution.
- 1.5 The way in which the Commission discharges its scrutiny activity is a matter for itself, having regard to the provisions of the Constitution and any direction from the Overview and Scrutiny Management Board. The IPSC has chosen to scrutinise a range of issues through a combination of pre-decision scrutiny items, policy development, performance monitoring, information updates and follow up to previous scrutiny work.
- 1.6 Health Select Commission has eight scheduled meetings over the course of 2021/22, representing a maximum of 16 hours of scrutiny per year – assuming approximately 2 hours per meeting. Members therefore have to be selective in their choice of items for the work programme. The following key principles of effective scrutiny have been considered in determining the work programme:
 - Selection – There is a need to prioritise so that high priority issues are scrutinised given the limited number of scheduled meetings and time available. Members should consider what can realistically and properly be reviewed at each meeting, taking into account the time needed to scrutinise each item and what the session is intended to achieve.
 - Value-added – Items had to have the potential to 'add value' to the work of the council and its partners.

- **Ambition** – the Programme does not shy away from scrutinising issues that are of greatest concern, whether or not they are the primary responsibility of the council. The Local Government Act 2000 gave local authorities the power to do anything to promote economic, social and environmental wellbeing of local communities. Subsequent Acts have conferred specific powers to scrutinise health services, crime and disorder issues and to hold partner organisations to account.
- **Flexibility** – The Work Programme maintains a degree of flexibility as required to respond to unforeseen issues/items for consideration during the year and to accommodate any further work that falls within the remit of this Commission.
- **Timing** – The Programme has been designed to ensure that the scrutiny activity is timely and that, where appropriate, its findings and recommendations inform wider corporate developments or policy development cycles at a time when they can have most impact. The Work Programme also helps safeguard against duplication of work undertaken elsewhere.

2. Key Issues

- 2.1 Members are required to review their work programme at each meeting during the 2021/22 municipal year to give focus and structure to scrutiny activity to ensure that it effectively and efficiently supports and challenges the decision-making processes of the Council, and partner organisations, for the benefit of the people of the borough.
- 2.2 Following the discussion at Health Select Commission on 10 June 2021, a revised draft work programme for 2021/22 was developed and presented at the 8 July 2021 meeting for endorsement. In keeping with the priorities of the Council and those expressed by Commission Members, this work programme reflects continued prioritisation of mental health, care and health system changes, and accessibility of services.
- 2.3 The autumn update on health and care system changes has been deferred to the winter/early spring as a result of expected duplication with Member development session scheduled in September. This is an area in which HSC will work closely with partner organisations such as TRFT as April 2022.
- 2.4 TRFT has requested consideration of several matters where scrutiny could add value to the work currently being undertaken by the Trust, including strengthening community services and social value. These items will be added to the work programme forward plan as appropriate. A site visit will also be considered.

3. Options considered and recommended proposal

- 3.1 Members are recommended to agree priorities for the 2021-22 municipal year and contribute suggestions for the work programme.

4. Consultation on proposal

- 4.1 The work programme is subject to consultation with the Chair and Members of the Health Select Commission. Regular discussions take place with Cabinet Member, partner organisations, and officers in respect of the content and timeliness of items set out on the work programme.

5. Timetable and Accountability for Implementing this Decision

- 5.1 The decision to develop and endorse a work programme is a matter reserved to the Commission and will be effective immediately after consideration of this report.
- 5.2 The Statutory Scrutiny Officer (Head of Democratic Services) is accountable for the implementation of any decision in respect of the Commission's work programme. The Governance Advisor supporting the Commission is responsible on a day-to-day basis for the Commission's work programme. Members are recommended to delegate authority to the Governance Advisor to make amendments to the programme between meetings.

6. Financial and Procurement Advice and Implications

- 6.1 There are no direct financial or procurement implications arising from this report.

7. Legal Advice and Implications

- 7.1 There are no direct legal implications arising from this report.
- 7.2 The authority of the Select Commission to determine its work programme is detailed within the Overview and Scrutiny Procedure Rules and Responsibility for Functions parts of the Constitution. The proposal to review the work programme is consistent with those provisions.

8. Human Resources Advice and Implications

- 8.1 There are no direct human resources implications arising from this report.

9. Implications for Children and Young People and Vulnerable Adults

- 9.1 There are no implications for children and young people or vulnerable adults arising from this report.

10. Equalities and Human Rights Advice and Implications

- 10.1 Whilst there are no specific equalities implications arising from this report, equalities and diversity are key considerations when developing and reviewing scrutiny work programmes. One of the key principles of scrutiny is to provide a voice for communities, and the work programme for this Commission has been prepared following feedback from Members representing those communities.

11. Implications for CO2 Emissions and Climate Change

- 11.1 There are no implications for CO2 emissions or climate change arising from this report.

12. Implications for Partners

- 12.1 The Commission has a co-opted Member from Rotherham Speak Up who contributes to the development and review of the work programme. Where other matters are being considered for inclusion on the work programme, relevant partners or external organisations are consulted on the proposed activity and its timeliness.

13. Risks and Mitigation

13.1 There are no risks arising from this report.

14. Accountable Officer(s)

Emma Hill, Acting Head of Democratic Services and Statutory Scrutiny Officer

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This report is published on the Council's [website](#).

Appendix 1 - Work Programme

Meeting Date	Agenda Items
10 June 2021	Update on Health and Care System Changes
	Joint Strategic Needs Assessment (JSNA) Update
	COVID Briefing
	Initial Work Programme 2021/22
Quality Account	Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)
8 July 2021	Carer's Strategy Update
	Health and Wellbeing Board Annual Report 2021/22
	Revised Work Programme 2021/22
2 September 2021	Suicide Prevention
September 2021 Workshop	Mental Health Impact of Rotherham Community Hub
7 October 2021	The Rotherham NHS Foundation Trust (TRFT) Annual Report
	Acute Mental Health
October 2021 Working Group	Young Carers (with Improving Lives Select Commission)
25 November 2021	CAMHS (Children and Adolescent Mental Health Services)
	Prevention-led Strategy Systems
	Drug and Alcohol Treatment and Recovery Service Update
November 2021 Year-end Quality Accounts	RDaSH, TRFT, YAS
December 2021 Working Group	Adult Social Care Outcomes Framework (ASCOF) Performance Measures
13 January 2022	Director of Public Health Annual Report 2021
	Local Authority Declaration on Healthy Weight Update
January 2022 Working Group	COVID-19 Scrutiny – Health Care Worker Safety and Care Home Safety

24 February 2022	Equalities, access and safety of Maternity Services
	Hospital Discharge Policy and Practice
March 2022 Working Group	Accessibility and Universal Design Workshop, with emphasis on transportation and public spaces (with Improving Places Select Commission)
April 2022 Workshop	Yorkshire Ambulance Service (YAS)
April 2022 Half-Year Quality Accounts	TRFT, RDaSH and YAS
7 April 2022	Autism Strategy and Pathway Update
	Intermediate Care and Reablement Update