

HEALTH AND WELLBEING BOARD

Venue: Wentworth Woodhouse **Date:** Wednesday 6 March 2024
Time: 9.00 a.m.

A G E N D A

1. To determine if the following matters are to be considered under the categories suggested in accordance with Part 1 of Schedule 12A to 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. Minutes of the previous meeting (Pages 3 - 16)
8. Diabetes is Serious: Supporting people with Diabetes in Rotherham (Pages 17 - 25)
Hannah Morrow, Diabetes Sheffield, to present
9. Neighbourhood Working and Ward Priorities (Pages 27 - 74)
Martin Hughes, Head of Neighbourhoods to present
10. Pharmaceutical Needs Assessment - Supplementary Update (Pages 75 - 93)
Lorna Quinn, Public Health, to present
11. Prevention and Health Inequalities Strategy and Action Plan Update (Pages 95 - 104)
Rebecca Bench/Ben Anderson to present
12. Annual Update - Physical Activity/Moving Rotherham Board (Pages 105 - 122)
Gilly Brenner, Public Health, to present
13. Annual Update - Combating Drugs Partnership (Pages 123 - 132)
Ben Anderson, Director of Public Health, to present
14. Updated Suicide Prevention and Self-Harm Action Plan (Pages 133 - 178)
Ruth Fletcher-Brown, Public Health, to present
15. Update on Health and Wellbeing Strategy Action Plan (Pages 179 - 212)

For Information

16. Items escalated from Place Board
17. Better Care Fund (Pages 213 - 231)

- BCF Covering Report and BCF Quarter 3 Template
BCF Frailty Pathway Deep Dive
18. Rotherham Partnership Place Board - Partnership Business (Pages 233 - 242)
Minutes of meetings held on 20th December, 2023 and 17th January, 2024
 19. Rotherham Partnership Board ICB Business (Pages 243 - 251)
Minutes of meetings held on 20th December, 2023 and 17th January, 2024
 20. Date and time of next meeting
Wednesday, 26th June, 2024, commencing at 9.00 a.m. venue to be confirmed

HEALTH AND WELLBEING BOARD

24th January, 2024

Present:-

Councillor Roche	Cabinet Member, Adult Social Care and Health
	In the Chair
Ben Anderson	Director of Public Health
Richard Chillery	RDaSH (sub for Toby Lewis)
Nicola Curley	Strategic Director, Children and Young People's Services
Chris Edwards	Executive Place Director
Shafiq Hussain	Chief Executive, VAR
Sharon Kemp	Chief Executive, RMBC
Jason Page	Medical Director, Rotherham Place
Ian Spicer	Strategic Director, Adults, Housing and Public Health
Paul Woodcock	Strategic Director, Regeneration and Environment
Michael Wright	Deputy Chief Executive, Rotherham Foundation Trust (representing Richard Jenkins)

Report Presenters:-

Rebecca Bench	Public Health
Chris Clark	Doncaster MBC
Cathy Harris	Sheffield Hallam University
Katy Lewis	Carers Strategy Manager, RMBC
Sue Turner	Public Health Specialist, Public Health
Rebecca Woolley	Public Health Specialist, Public Health

Also Present:-

Councillor Castledine-Dack	
Alex Hawley	Public Health Consultant, Public Health
Clare Smith	Deputy Place Director, Rotherham ICB
Leonie Wieser	Policy Officer, RMBC
Dawn Mitchell	Governance Advisor, RMBC

Apologies for absence were submitted by Councillors Cusworth and Foster, Laura Kosciwicz (South Yorkshire Police), Toby Lewis (RDaSH), Shayne Tottie (South Yorkshire Fire and Rescue) and Andrew Turvey (TRFT).

63. DECLARATIONS OF INTEREST

There were no Declarations of Interest made at the meeting.

64. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no members of the public in attendance and the member of the press present had no questions.

65. COMMUNICATIONS

There were no communications to report.

66. MINUTES OF THE PREVIOUS MEETING

Resolved:- That the minutes of the previous meeting held on 22nd November, 2023, be approved as a true record.

Further to Minute No. 48, the Chair reminded Board members that the next meeting would be on Wednesday, 6th March, 2023, at Wentworth Woodhouse.

67. ROTHERHAM'S APPROACH TO WEIGHT AND WEIGHT STIGMA

Rebecca Bench, Public Health, RMBC, gave the following powerpoint presentation:-

Twelve Months on

- Compassionate approach was introduced to the Board in January 2023; this presentation is a reflection of what has been done in the last 12 months
- The key focus of the work is to embed the core principles of the compassionate approach in practice and maximise long term health gains
- Aims are to encourage a personalised approach to healthy weight, to reduce stigma and remove barriers to successful lifestyle change(s)

Context

- There was a growing movement and evidence base that supported taking a 'compassionate approach' to weight to achieve long term outcomes
- This approach involved:-
 - Actively tackling weight stigma and body shaming
 - Focussing on healthy habits and sustained behaviour change over time rather than on weight loss as the primary success measure
 - Emphasising the importance of social change over individual 'lifestyle choices'
 - Taking a person-centred and holistic approach
 - Addressing the wider and commercial determinants

What does this mean in practice

- Language and communications
- Workplace wellbeing and training
- Wider determinants of health
- Commissioning and service delivery
- Data and measuring success/change

Overview of Developments – Influencing Residents

- Training – a range of people and organisations trained including development day for 0-19 years and school catering

- Recruitment – 3 extra nursery nurses to enable a 3 to 4 month supportive visit
- RotherHive – Sections of eating well and moving more now included
- Advertising and sponsorship policy in development and would include consideration of the commercial determinants of health
- Planning – the planning process being used to support a healthier food system

Overview of Developments – Strategic

- Working Group – currently meeting on a quarterly basis and developing a partnership action plan to help embed compassionate approach into Rotherham
- JSNA – language around weight and obesity changed to reflect compassionate approach
- Food Network – incorporated into the action plan for the Food Network
- National consultation – e.g. review of NICE guidance for weight management
- Best Start and Beyond Framework – the compassionate approach was one of the lenses
- South Yorkshire Mayor – looking at public transport advertising (similar to London Transport)

Case Study – Rotherham Healthwave

- T2 Weight Management Services (and Smoking Cessation) have been recommissioned – launched October 2023
- Emphasis in the new Service on
 - Personalisation
 - Diversity of the offer
 - Measuring wider outcome measures (including mental health and wellbeing) rather than just weight
 - Sustainability

Case Study – Moving Rotherham

- 4 priorities – Active Champions, Active Environments, Active Communities and Active Communications
- Increased focus on wider physical activity and health opportunities with a new sub-group and action plan
- Focus of actions was on normalising physical activity for everyone, embedding physical activity into everyday life including widening opportunities to be active outdoors and supporting the least active to become more active such as through social prescribing

Case Study – Language and Communications Toolkit

- Came from feedback given by members of the Compassionate Approach Working Group in August
- The purpose of the toolkit was to inform and provide examples of compassionate language and communication. It included sections on writing, conversations and imagery

- Presented to the Working Group in November. Full draft sent out shortly after. Feedback was positive particularly around the writing and imagery sections. Potential for the conversation section to be condensed
- Next steps would be to create a condensed conversation guide and trialling it with contact workers. To be sent out to communication leads

Case Study – Supporting People with Long Term Conditions

- Work to reach out to patients with Diabetes and engage them in weight management interventions
- Script was carefully constructed, considering the impact of stigma and communicating risk in neutral terms. Positive outcomes reported
- Training also in development within TRFT to embed this approach more widely through MECC training which would help to ensure this approach was applied to working with out long term conditions patients

Next Steps

- The Working Group was currently meeting on a quarterly basis with an action plan in place
- Priorities that had been identified:-
 - Developing our data to measure and monitor the impact of this approach
 - Mapping of current Weight management and Intervention Services and resources
 - Promoting the language and communication toolkit as a resource for staff
 - Continuing to roll out training including for Adult Social Care staff
 - Aligning the compassionate approach to strengths-based approaches in Adult Social Care
 - Exploring how we support schools and the wider Health and Social Care workforce to embed the approach
 - Developing our approach to evaluation and measuring success
 - Engaging local people around the compassionate approach including aligning to the 'Say Yes' campaign
 - Reviewing learning from Diabetes programme and consider how this could be incorporated into other programmes e.g. Health Checks

Discussion ensued on the presentation with the following issues raised:-

- Diabetes UK was very keen to establish a much closer working relationship in Rotherham and share their wide range of training facilities
- The launch of the Rotherham Weight Service had already seen take-up in excess of the previous contract and had received positive feedback from those using the Service. The Service focussed on long term sustainability and learning. As yet there were no long term outcomes; the impact of approach now being delivered needed to be a future focus

- The need for statistics to illustrate those who engaged with the Service and if it had made a change to the underlying issues
- Compassionate approach was not unique to Rotherham and was an approach that was being embedded nationally
- Recognition that there were a lot of barriers for people and hopefully a fresh approach would break those down

Rebecca and Sue were thanked for their presentation.

Resolved:- (1) That the progress made to embed a compassionate approach to weight and weight stigma over the last 12 months be noted.

(2) That a further report be submitted in 6 months on the impact of the programme.

68. VCSE - STATE OF THE SECTOR IN ROTHERHAM

Shafiq Hussain, VAR, introduced Cathy Harris, Centre of Regional Economic and Social Research, Sheffield Hallam University, who had been conducting the research in the South Yorkshire VCSE.

Cathy gave the following powerpoint presentation of the initial findings:-

Purpose and Methods

- To gain an up-to-date picture of the voluntary and community sector in South Yorkshire
- Previous Rotherham state of the sector survey conducted in 2015
- Significant challenges recently due to Covid-19 pandemic and the cost of living rises
- 2 strands of research
 - Administrative data analysis (using publicly available datasets)
 - Online survey of VCSE organisations – 326 responses overall (103 of which worked in Rotherham)

What does the Voluntary and Community Sector in Rotherham look like

- A total of 750 registered third sector organisations in Rotherham
- 654 charities, 56 CICs, 26 societies and 14 CASCs
- Estimated 3,778 employees, 4,218 volunteers and 1,759 trustees

How is the Voluntary and Community Sector in Rotherham funded

- 32% Grants from trusts and/or foundations
- 23% Fees and earned income
- 16% Grants from public sector
- 11% Service delivery
- 8% Public donations including legacies
- 6% Other
- 3% Business donations/sponsorships

What does the Voluntary and Community Sector in Rotherham do

- 88% Supporting health and wellbeing
- 82% Increasing community participation, cohesion and belonging
- 73% Meeting individual needs
- 42% Supporting volunteering and other voluntary and community organisations
- 35% Improving skills and providing employment opportunities
- 33% Facilitating creativity and the arts
- 30% Influencing and campaigning on causes
- 20% Improvement and protecting the environment and animal welfare
- 19% Meeting local economic needs
- 10% Supporting and promoting faith

What are the key challenges

- 37% Level of demand for services
- 36% Income
- 34% Ability to meet demand for services
- 25% Recruitment of volunteers
- 22% Retention of volunteers

What support is needed

- Demand for services was growing exponentially as the availability of other advice and information services was decreasing yet sourcing funding to cover the demand was incredibly difficult and time consuming
- Most funding opportunities were fragile and short term
- It was risk for a voluntary organisation to increase its capacity to meet the demand without secure funding to underpin it – people needing the service were desperate and the issues they were presenting with increasingly complex

It was noted that the full report would be available for the next Board meeting. However, sustainability was one of the key challenges faced by a charity/third sector organisation and they were not able to meet the level of current demand with their funding not covering their costs.

Resolved:- That the presentation be noted.

69. FOETAL ALCOHOL SPECTRUM DISORDER PROJECT

Chris Clark, Doncaster MBC, gave the following powerpoint presentation on the 2 year funded project for One Adoption South Yorkshire overseen by RAA Leadership programme for Centres of Excellence on the development of a FASD Pathway:-

Staffing

- All staff were now fully employed and the commissioning agreement completed.
- There were:-
 - Project Manager – 3 days per week
 - Assistant Education Psychologist – 2.5 days per week
 - Senior Education Psychologist – 1 day per week
 - Education Psychologist - ½ day per week
 - Business Support – 3 days per week

Key Project Deliverables

- Foetal Alcohol Spectrum Disorder (FASD) Pathway development and implementation
- Education Psychologist contribute towards support for adopted children with FASD in school
- Work with the Integrated Care Board (ICB) to develop an understanding of effects of FASD and develop initial support services
- Reduction of temporary/permanent exclusions for adopted children with FASD
- Development of SEND support plans for adopted children with FASD
- Work with Virtual Schools to design a single integrated offer across South Yorkshire
- Education Psychologist to link with universities, national and international research to develop approaches for supporting children with FASD
- Education Psychologist will work directly with adopted children affected by FASD

Key Challenges

- Recruitment to all positions
- Identifying numbers affected by FASD in South Yorkshire
- Benchmarking to demonstrate impact
- Identifying clinical staff as part of Assessment and Diagnosis Working Group
- Measuring the impact of the project across the 2 years due to FASD being currently under identified
- Ensuring development of FASD pathway was scalable beyond the One Adoption Service

Work to Date

- Formation of Steering Group
 - Oversight and guidance of project
- Sub-Board
 - Oversight of working groups and feed into Steering Group on progress, issues and key decisions
- Prevention and Awareness Working Group
 - Led by Angela Fawcett (Deputy Chief Nurse) and Mandy Craig (SCSP Vulnerability Manager)

- Intervention and Support
One Adoption South Yorkshire including service users with lived experience
- Assessment and Diagnostic
First meeting arranged for 5th February
Working Group key attendees

Assessment and Diagnostic – Considerations

- What does diagnosis/assessment look like
- Who does the diagnosis
One Service
Multi-disciplinary team
Clinical or non-clinical with relevant training
Public or private service
- When/how to identify who needs diagnosis
- Separate assessment or part of a neurodevelopment pathway assessment

Next Steps

- Work with Neurodevelopmental Working Group through ICB
- Identify clinical lead for Assessment and Diagnosis (A&D) Working Group
- Identify who needs to be part of Assessment and Diagnosis Working Group
- Set up initial meeting programme
- NICE Quality Guidelines: how to implement for FASC
- Consider funding options: 2 year funding, Adoption Support Fund, other

Useful Links

- National FASC – [Home - National FASD](#)
- FASD Learning with Hope – [FASD: Learning with Hope – Our family's journey toward a bright future \(wordpress.com\)](#)
- NICE Quality Standards – [Fetal alcohol spectrum disorder \(nice.org.uk\)](#)
- Me and my FASC – [Me and My FASD - Me & My FASD](#)

Discussion ensued on the presentation with the following issues raised:-

- It was hoped to link the project in with the neurodevelopmental pathway, however, the difficulty currently was getting the correct people involved with the Neurodevelopmental ICB Group
- Attempts were being made to ensure it was part of the whole pathway and separate. Currently there were separate assessments and the FASD assessment appeared to be the last resort after all other routes explored first. There were close links with ASD and ADHD disorders to get the diagnosis

- Currently the only specific clinics for a FASD diagnosis were in the south of England, Edinburgh and Glasgow

Chris was thanked for his presentation:-

Resolved:- (1) That the presentation be noted.

(2) That a further presentation be made in 12 months to ascertain the impact and progress of the project.

70. **CARERS STRATEGY - STATUS UPDATE JANUARY 2024**

Katy Lewis, Carers Strategy Manager, presented an update on the progress made in association with The Borough That Carers – Strategic Framework 2022-25 Creating a Carer Friendly Rotherham.

The report focussed on the progress made against the strategic aims in the first 2 areas of focus in the Strategy i.e. Carer Cornerstones and creating communities of support. The Council and partners had worked to deliver the actions with unpaid carers being placed at the heart of the process through their direct involvements in The Borough That Cares Strategic Group.

The report highlighted:-

- Borough that Carers Strategic Framework formally launched on 24th November, 2022 and published on the Council's website
- Permanent post of Carers Strategy Manager appointed in July 2023
- Bi-monthly updates against Aim 3 of the Health and Wellbeing Board action plan 2022-2025 submitted
- Rotherham was leading the consortia with Sheffield, Barnsley and Doncaster to prepare an Expression of Interest for submission to the Accelerating Reform Fund. The total potential funding to be allocated to Rotherham was a minimum of £168,000 to support project delivery across February 2023 to March 2025.
- Programme of engagement with 11 carers groups that supported carers of people with a variety of issues
- Update of the carers' pages on the Council website
- New Terms of Reference agreed and The Borough That Cares Strategic Group now known as The Borough That Cares Network Group
- Evaluation completed of the Emergency Care Scheme and options for the renewal of contract identified and agreed
- Better Care Fund allocation for unpaid carers utilised in the provision of 19 small grants issued to community groups for projects focussing on improving carers' health and wellbeing
- New actions aligned to the final year priorities identified in The Borough That Cares Strategic Framework to be proposed to the Board in March 2024 for 2024/25

- Equality analysis of the support for unpaid carers in Rotherham in progress and an action plan developed where required

Discussion ensued with the following issues raised/clarified:-

- As part of the Community Navigators' annual work programme, promotion of the service would take place and ascertain what was on offer and where carers were engaging
- The advice and information pages were good examples of what was available but it would be enhanced in co-production with key stakeholders
- The small schemes grant scheme had been very successful during its 6 months
- Currently there was no timescale for the production of the action plan. The Borough That Cares Network Group had agreed new terms of reference and developing an action plan aligned to the focus of the strategic framework

Katy was thanked for her presentation.

Resolved:- (1) That the update be noted.

(2) That the new milestones for 2024/2025 be submitted to the Board's March meeting.

71. **AIM 4 UPDATE BY BOARD SPONSORS**

Paul Woodcock, Strategic Director, Regeneration and Environment gave the following powerpoint presentation:-

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

- Deliver a loneliness plan for Rotherham
- Promote health and wellbeing through arts and cultural initiatives
- Ensure Rotherham people are kept safe from harm
- Develop a Borough that supports a healthy lifestyle

Priority 1 – Deliver a loneliness plan for Rotherham

Key area of progress include

- The loneliness action plan has been updated and in delivery
- Work was taking place on the JSNA chapter on loneliness which would include qualitative information from some of Rotherham's inclusion groups (veterans, carers, neurodiverse adults and parents and carers of children with SEND)
- Delivery of revised MECC loneliness training would commence in February
- Ensure the Board was involved in informing local priority setting and was able to take local issues relating to health and wellbeing into account in strategic planning

- Ward priority setting would take place after the May 2024 elections with publication scheduled for September 2024. Council services and partners would be invited to contribute to local intelligence in advance of May 2024 to help inform priority setting

Priority 2 – Promote health and wellbeing through arts and cultural initiatives

Key areas of progress include

- Rotherham Show took place on 2nd and 3rd September 2023 attracting an estimated audience of 88,918
- The Council continued to deliver on the design of the Children's Capital of Culture programme
- The second annual UPLIFT Skate and Arts Festival took place in April 2023 with an estimated audience of 6,000 and featured a Teenage Market celebrating young makers and entrepreneurs
- WoW Rotherham took place in June 2023 with elements of the programme designed and delivered by Children's Capital of Culture Trainee Festival makers
- Activities were being delivered in libraries for people of all ages to connect, be active and learn new skills and widen the accessibility of Library Services through Pop-up libraries, reading gardens, Makerspaces, Authors' visits and performances, fun palaces
- 1,000 people attended fun palaces in October at various venues across the Borough. Skills shared included origami, gardening, crochet, wood turning, cake decorating, brass bands, gaming and keyboarding
- The Makerspace Project culminated in an exhibition at Riverside House from works produced at all 5 libraries. Groups of school children and members of the public had a go at using equipment and materials to make pinch pot birds, 3D pavilions, 2D clay figures and sewed pyjamas and hearts for the neonatal ward

Priority 3 – Ensure Rotherham people are kept safe from harm

Key areas of progress include

- Work was ongoing to embed referral pathways with key partners in Rotherham through the Home Safety Partnership Referral Scheme and Safe and Well checks
- Safeguarding Board Chairs meetings were now established to maintain the relationship between the Safeguarding Boards and work on crosscutting issues
- Delivery of vaccination programme for Covid-19 and Flu. 40,651 Covid vaccinations had been given in Rotherham in 2023. This equated to a 74% Autumn vaccination uptake
- This was now business as usual and delivery and uptake would be monitored at service level with assurance received by the Health Protection Committee

Priority 4 – Develop a Borough that supports a healthy lifestyle

Key areas of progress include

- A Borough-wide MECC training offer on physical activity had been developed. A new training offer agreed from Yorkshire Sport to be rolled out in train-the-trainer model to social prescribers, health care assistants and care homes to support wider understanding of benefits and opportunities for physical activity for all
- Rotherham Food Network was now established. Membership was still growing and actions were on track. Further detail, including action plan, was shared with the Health and Wellbeing Board in November 2023
- Work was ongoing to enable all partner staff to support neighbourhoods and communities to thrive. A partnership offer of training on strength based approaches was being rolled out. General awareness training was delivered via an e-learning package and now available to all IT enabled Council staff. Training for Place partners was being commissioned this quarter

Next Steps

Priority 1 – Delivery a loneliness plan for Rotherham

- A presentation on Ward priority setting was scheduled for the March Health and Wellbeing Board

Priority 3 – Ensure Rotherham people are kept safe from harm

- Work with other partnership boards on crosscutting issues in relation to safety and safeguarding. The next Safeguarding Chairs meeting was planned for early March to focus on outcomes frameworks and performance monitoring
- The Combatting Drugs Partnership for Rotherham will present their annual progress update to the Health and Wellbeing Board in March

Priority 4 – Develop a Borough that supports a healthy lifestyle

- Annual update from the Moving Rotherham Board will be submitted to the Health and Wellbeing Board in March
- A workshop was being organised on Spatial Planning, Climate and Health

Discussion ensued with the following issues raised/clarified:-

- Despite the austerity cuts, Rotherham had not any library closures and the central library was to be re-located
- The publication of the Ward priority setting, due to the May elections, would cover the type of information and activity that would be undertaken and provide details of what they might look like but the Ward plans were not expected until September/October

Ben Anderson, Director of Public Health, reported that over the last year just over 91% of Rotherham children aged 5 years had had 2 doses of the MMR vaccination, below the 95% World Health Organisation target. Targeted work around MMR capture in particular communities would be taking place as well as work on catching up on MMR vaccinations, particularly for those children that had missed opportunities for

vaccination during the pandemic and those parents who may now be re-evaluating their decision given the higher prevalence of Measles currently.

Resolved:- That the update be noted.

72. UPDATE ON HEALTH AND WELLBEING STRATEGY ACTION PLAN

Leonie Wieser, Policy Officer, presented the update on the Health and Well-Being Board Strategy Action Plan (January 2024).

The plan outlined progress against agreed priorities, highlighting where actions were completed, on track, at risk of not meeting milestones or off track.

Resolved: That the update be approved.

73. ITEMS ESCALATED FROM PLACE BOARD

Winter Pressures

Chris Edwards, ICB, reported that it had been extremely pressurised but not as pressured this winter as it had been in 2023 and currently the winter plan seemed to be working. The Foundation Trust was at level 1-4, tending to be at level 3 most of the time, as was the situation for the rest of South Yorkshire.

The winter plan was successful and, although the system was extremely challenged, it was coping.

Mental Health Services had specific problems and challenges nationally but were working as well as they could be.

74. BETTER CARE FUND

A meeting of the Executive was to be shortly.

75. HEALTH AND WELLBEING STRATEGY AIMS ALIGNMENT WITH ICP STRATEGY

Further to Minute No. 54 of the previous meeting, the Board noted the 2023 Integrated Care Strategy for South Yorkshire aligned with the Rotherham Health and Wellbeing Strategy 2018-2025 (refreshed 2022).

76. NHS SOUTH YORKSHIRE INTEGRATED CARE PARTNERSHIP BOARD

The unadopted minutes of the public meeting of the NHS South Yorkshire Integrated Care Partnership Board held on 27th September, 2023, were submitted for information and noted.

77. ROTHERHAM PLACE BOARD ICB BUSINESS

The minutes of the meeting of the Rotherham Place Board ICB Business held on 18th October and 15th November, 2023, were submitted for information and noted.

78. ROTHERHAM PLACE BOARD PUBLIC PARTNERSHIP BUSINESS

The minutes of the Rotherham Place Board held on 18th October and 15th November, 2023, were submitted for information and noted.

79. DATE AND TIME OF NEXT MEETING

Resolved:- That a further meeting of the Health and Wellbeing Board be held on Wednesday, 6th March, 2024, at Wentworth Woodhouse commencing at 9.00 a.m.

Diabetes is Serious

Working Together in Rotherham

We estimate that over 5 million people now live with diabetes across the UK

7.45% of the adult English population have a diabetes diagnosis

Over one million of those people live in the North of England



Rachel Martin

Health System Engagement Lead

rachel.martin@diabetes.org.uk

Hannah Morrow

Volunteer Outreach and Partnerships Officer

hannah.morrow@diabetes.org.uk



DiABETES UK
KNOW DIABETES. FIGHT DIABETES.

Working in partnership with South Yorkshire ICB

Working to engage and support local diabetes communities between April 23 and March 25:

- Engagement and support events
- Awareness raising, information and training
- Together Type 1 youth programme
- Support and patient information packs for community pharmacies (tbc)
- Signposting to Diabetes UK support



Why Diabetes is Serious

- Diabetes is relentless. It requires constant decision-making and careful self-management to stay well with the condition
- For too many people, diabetes still leads to serious complications and even, sadly, early death
- With the right care and support, many life-altering diabetes-related complications can often be prevented
- The National Institute for Care Excellence (NICE) recommends eight routine checks for people with diabetes, nine if you include routine diabetic eye screening, which have been shown to reduce the chances of developing complications.
- Health systems have made significant progress in improving access to routine care since the pandemic, but this progress is not taking place on an equal basis.

Diabetes Care in Rotherham 2022-23*

1,300 people registered with t1 diabetes and 16,025 people registered with t2 or other diabetes in 2022-23

Proportion of people with diabetes who received all 8 care processes in 2022-23 ranged from 21.4% to 76.5% depending on GP practice

Over 9,000 non-diabetic hyperglycaemia registrations

Across all PCNs, the Urine Albumin health check had the lowest completion rate

People living in deprivation are more likely to develop type 2 diabetes

People living in deprivation are less likely to access the care/support they need, and more likely to develop diabetes related complications and have poorer outcomes

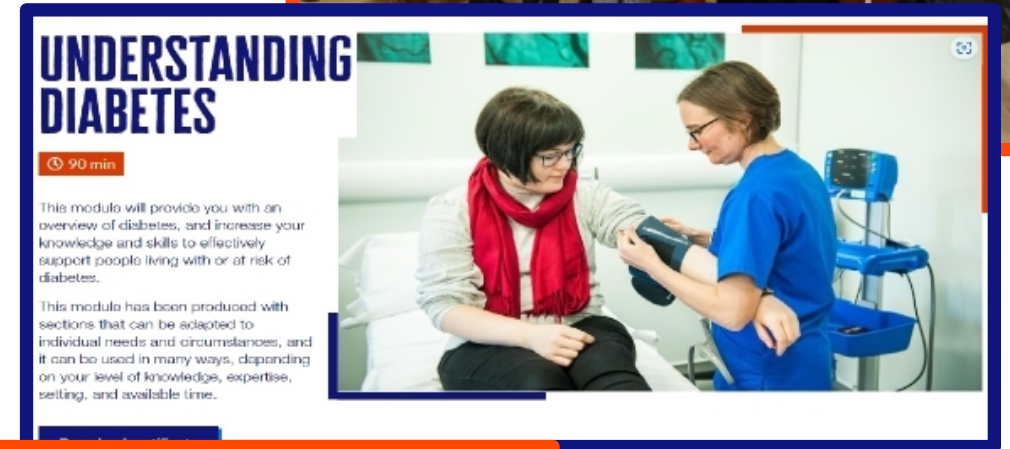
Community Engagement

Training and support

- Diabetes awareness training for frontline staff (in person or online)
- Train the trainer model for voluntary and community groups
- Awareness talk for staff and volunteers (Lunch and Learn)

Libraries training

- 55 library staff have completed our online CPD module.



Community Engagement



- Diabetes and Me Day at New York Stadium
- Community group awareness talks

- Diabetes support group relaunch
- Children and young people's event



How can you help?

Get in touch or sign up for our monthly health system update North@diabetes.org.uk

Get involved: [Together Type 1 | Diabetes UK](#)

Take up our training or awareness offers: Hannah.morrow@diabetes.org.uk

Join our campaigns: [Campaigning | Get involved | Diabetes UK](#)

Share our awareness and training offer with your teams and networks.

Become micro-volunteer

Scan me



"I love being a micro-volunteer, it feels like each little thing has the power to make such a big difference!"

How we can help you

Reports & data sources

- [DUK Diabetes is Serious Report 2023](#)
- [Tackling Inequalities Commission full report](#) and [Exec Summary](#)
- [National Diabetes Audit - NHS Digital](#)

Diabetes training & leadership programmes

- [CPD online training modules](#)
- [Clinical Champions](#)
- [Discovering Leadership](#)

Information & resources

- Free diabetes information to download or order in print from our [online shop](#)

Awareness

- Talks for employers and community groups
- Training for community workers
- Training for carers
- Information stands at events
- [Volunteering - North of England | Diabetes UK](#)



THANK YOU FOR FIGHTING DIABETES

We'd love to stay connected with you by sending you our monthly updates!

To sign up email:

north@diabetes.org.uk

www.diabetes.org.uk



Diabetes UK Chat: Your Friends in the North



@diabetesuknorth

DiABETES UK
KNOW DIABETES. FIGHT DIABETES.

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Neighbourhood Working and Ward Priorities



Martin Hughes – Head of Neighbourhoods, ACEx

Thriving Neighbourhoods Strategy

‘Every neighbourhood in Rotherham to be a thriving neighbourhood, where people are able to work together to achieve a good quality of life.’

‘Ensuring communities are at the heart of everything we do to make people feel happy, safe and proud.’

[neighbourhood-strategy \(rotherham.gov.uk\)](https://rotherham.gov.uk/neighbourhood-strategy)



What we want to achieve

- Neighbourhoods that are **safe and welcoming** with good community spirit
- Residents are **happy, healthy** and loving where they live with
- Residents have the opportunity to use their **strengths, knowledge and skills** to achieve what is important to them



Ward-based Model

- 25 wards since May 2021
- 59 Elected Members
- Mix of 2 & 3 Member wards
- Sit within 3 Localities (North, Central & South)
- Range of services and partners aligned, e.g. Neighbourhoods, Housing, Streetscene & SY Police



Role of Councillors



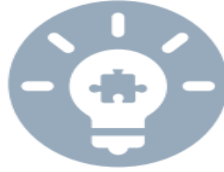
Orchestrator:
bringing people together,
mediating and helping to broker
relationships



Steward of place:
ensuring local
resources
are targeted
appropriately in
line with their
ward priorities
and plan,
including the
investment of
their devolved
ward budgets



Advocate:
acting on behalf
of all residents



Entrepreneur:
problem solving
by working with
the community
and partners to
find solutions to
local issues



Buffer:
exploring
solutions to
reduce the
impact of
unforeseen
issues, such as
the Covid-19
Pandemic and
the Cost of Living
Crisis, particularly
for those who are
most vulnerable



Catalyst:
empowering
residents and
community
organisations
to achieve their
ambitions



Sensemaker:
explaining local
issues, the role
of services and
any decisions
that have been
taken which
impact on the
neighbourhood



Adapted from 'The 21st Century Councillor', University of Birmingham

The Neighbourhoods Team

- Head of Neighbourhoods
- 3fte Senior Neighbourhood Co-ordinators (North, Central & South)
- 12.5fte Neighbourhood Co-ordinators (named officer for each of 25 wards)
- 3fte Neighbourhood Support Officers (North, Central & South)
- Parish Council Liaison Officer
- Town Centre Community Co-ordinator
- Senior Communications Officer

[Neighbourhoods - Neighbourhoods Team Contacts \(sharepoint.com\)](#)

Place-based approach

Elected Members, council services, police, parish councils, community groups, residents and other stakeholders working collaboratively within a neighbourhood to -

- tackle locally identified issues (ward priorities/plans)
- bring communities together through a range of enjoyable activities, cultural and social events, which inspire hope and pride in Rotherham

Integrated Working

Corporate Peer Challenge Recommendation - Building on the Neighbourhood working model, develop a clearer and shared understanding of integrated locality working across the public sector

1. Establish a Thriving Neighbourhoods Workstream Board to oversee the continued development.....
2. Implement proposals to:
 - Improve the effectiveness of the structures set up to tackle community safety, crime & ASB was functioning across wards and locality areas.
 - Ensure roll out of Family Hubs is integrated into wider neighbourhood / locality working
 - Provide opportunities to promote Early Intervention & Prevention and tackle Health Inequalities across neighbourhoods / localities.
3. Deliver a strengths-based approach learning and development programme for Officers and Members

Ward Priorities & Plans

- Elected Members set their ward priorities after the May '21 elections
- Informed by ward data, input and **advice from council services and partners** and community intelligence / consultation
- Updated annually – latest version published in June 2023
- Ward Plans detail how the priorities will be tackled – targeted service delivery, projects, activities, etc.
- Inform Council and partners decision making, policies, strategies, service plans and resource allocation
- **New ward priorities to be agreed after May 2024 elections** – published in autumn 2024

Ward Priorities & Plans

Most common themes –

- Community safety and ASB
- Environment, parks and green spaces
- Cleanliness of public realm and streets
- **Physical and mental health & wellbeing**
- Poverty / Cost-of-Living
- Transport, roads and road safety
- Community empowerment and infrastructure

[Ward Plans – Rotherham Metropolitan Borough Council](#)

[Neighbourhoods - Ward Priorities summary .pdf - All Documents \(sharepoint.com\)](#)

[Neighbourhoods - Ward Priorities themes.docx - All Documents \(sharepoint.com\)](#)

Aim 1 - All children get the best start in life and go on to achieve their potential

13 wards reference Children, Young People & Families

Kilnhurst & Swinton East Ward - Every child making the best start in life

- Activities for children in deprived areas
- Improving children's play areas
- School travel safety initiatives
- Engaging schools in local democracy



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

9 wards reference Mental Health



Hoober ward – Improve wellbeing by bringing people together whilst addressing loneliness, isolation and mental health

- Promote local activities
- Support existing community groups and encourage new groups
- Work with community groups to set up a community networking partnership
- Continue to support bringing people together to prevent loneliness and isolation
- Promoting help and support available to residents particularly in relation to the cost-of-living crisis

Aim 3 - All Rotherham people live well for longer

3 wards reference supporting Older People

Maltby East Ward - Support residents health and wellbeing

- Promoting healthy lifestyle
- Support existing and new community groups thrive and develop
- Supporting initiatives that improve older people's quality of life
- Tackling loneliness and isolation in line with 5 ways of wellbeing



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

All 25 wards include priorities that impact on the wider determinants of health



Anston & Woodsetts Ward - Cleaner streets, lanes and open spaces and protect the environment

- Work with council services to encourage tougher enforcement on fly-tipping and littering.
- Support and develop community initiatives to reduce litter, dog fouling and fly-tipping.
- Ensure our green spaces are properly maintained and looked after.
- Ensure that the voice of the community is heard in any proposed planning developments

Strengths-Based Working

Being 'strengths-based' means focusing on **what people and communities have** and how they can **work together**. This involves drawing on people's **skills, knowledge and experience** to improve things locally **instead** of looking at what a **community needs or lacks**.



Strengths-based working

Recognises and builds on the skills, resources, knowledge, experience and heritage within our communities and empowers residents to find creative solutions to the local issues that matter most to them.

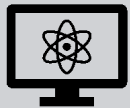
Rotherham Council will:

- Place communities at the heart of everything we do
- Always ask and listen to ensure we are addressing the things that matter to residents
- Be innovative in how we involve residents so that it maximises their skills and knowledge
- Problem solve collaboratively with communities
- 'Work with' communities and not 'doing to' them
- Identify and support the motivation to act within communities
- Nurture relationships within neighbourhoods
- Build the capacity and resilience of the community and local community organisations

Learning and development offer

Level 1 – General Awareness

- Understand the meaning of asset-based approaches
- Have the knowledge to know how to contribute towards asset-based approaches
- Be aware of what Rotherham's definition and key commitments are



Level 2 - Enhanced

- Understand what working in an asset-based approach way means for you
- Identify the protective factors that support health and well being
- Have the confidence to engage local communities in activities that are meaningful and empowering



Level 3 – Practitioner

- Identify assets within local communities and bring them together
- Empower communities to act and do things for themselves
- Acknowledge and build on what people value the most within their local communities
- Lead on and support community centred events



Level 4 – Place partners

- Demonstrate knowledge and understanding of the relevant theories and strategies
- Apply knowledge, skills and understanding across community and professional contexts
- Empower the workforce, changing the relationships between users and providers



Communication & Engagement

Monthly ward e-bulletins - [Rotherham Metropolitan Borough Council - Sign up to receive News from your Neighbourhood email bulletins \(govdelivery.com\)](#)

Social media and website - [Your neighbourhood – Rotherham Metropolitan Borough Council](#)

Traditional media – newsletters, flyers and press releases

Consultation and Engagement - providing opportunities for residents and community organisations to have their say

Opportunities for the Health & Wellbeing Board

- Ward priorities/plans are helping to deliver the four Aims and Strategic Priorities – **embed into service delivery**
- Board membership / organisations informing future ward priorities – **provide data, local intelligence, inequalities, etc.**
- Place-based working - **Strengthen partnership working within neighbourhoods**; focus on early intervention & prevention
- Strengths-based working – helping communities to help themselves; **joint training and development**

Find Out More

- Visit Website - [Your neighbourhood – Rotherham Metropolitan Borough Council](#)
- Sign up to ward e-bulletins - [Rotherham Metropolitan Borough Council - Sign up to receive News from your Neighbourhood email bulletins \(govdelivery.com\)](#)
- Contact -
martin.hughes@rotherham.gov.uk
neighbourhoods@rotherham.gov.uk

Summary of Ward Priorities – 2023/24

Ward	No.	Priorities
Anston & Woodsetts	1	<u>Represent all areas of our community</u> <ul style="list-style-type: none"> • Ensure all residents from all areas of the ward feel included and represented, including North Anston, South Anston, Woodsetts and Thorpe Salvin. • That residents in rural area like Turnerwood, Lindrick Dale, Netherthorpe and Cinder Hill have a voice. • Involve and work with local community groups across the ward to make Anston and Woodsetts Ward an even better place to live and work.
	2	<u>Make people feel safe</u> <ul style="list-style-type: none"> • Work with the police to tackle crime and anti-social behaviour in hotspot areas • Highlight the specific issues around rural crime and support initiatives to tackle it • Work to make our roads safer with speed reduction and safety schemes coupled with working with the police and community for better enforcement. • Highlight the overuse of our village roads by HGVs and speeding traffic
	3	<u>Cleaner streets, lanes and open spaces and protect the environment</u> <ul style="list-style-type: none"> • Work with council services to encourage tougher enforcement on fly-tipping and littering. • Support and develop community initiatives to reduce litter, dog fouling and fly-tipping. • Ensure our green spaces are properly maintained and looked after. • Ensure that the voice of the community is heard in any proposed planning developments
	4	<u>Improvements to our public transport and roads system</u> <ul style="list-style-type: none"> • Protect our local bus and rail services and work towards increased accessibility of all areas of our ward to high quality public transport including road and rail. • Work with residents to prioritise for repairs and resurfacing work on our roads and pavements.
	5	<u>Develop initiatives to support local businesses</u> <ul style="list-style-type: none"> • Explore opportunities around creating a Local Business Forum • Champion local businesses in the ward • Increased connectivity to high-speed broadband where possible
	6	<u>To support voluntary and community organisations</u> <ul style="list-style-type: none"> • To continue to support groups through the Community Leadership Fund and to identify other funding opportunities • To support networking opportunities for local organisations to come together to share ideas and best practice

Summary of Ward Priorities – 2023/24

Aston & Todwick	1	<u>To develop and support initiatives around anti-social behaviour, crime and community safety, particularly in hotspot areas</u> <ul style="list-style-type: none"> • Support setting up of Neighbourhood Watch schemes with South Yorkshire Police • Pop up crime safety events, particularly in hotspot areas
	2	<u>To support residents and community organisations with the cost-of-living</u> <ul style="list-style-type: none"> • Offering budgeting advice through HSBC in schools to children and parents • Linking in with food and clothing campaigns such as organisations that reduce waste, school clothing banks • Promote Energy Know How • Offering guidance to access the Government's cost-of-living support
	3	<u>To support and develop initiatives to improve the local environment</u> <ul style="list-style-type: none"> • Community clean up days • Support for litter picking groups • Improve parks • Dog fouling • Improve pavements
	4	<u>To explore opportunities to engage and support local businesses</u> <ul style="list-style-type: none"> • Towns and Villages funded project in Todwick
	5	<u>To develop and support initiatives around road safety</u> <ul style="list-style-type: none"> • Road safety on the A57 • Speeding • Potholes • Tackling congestion next to the A57
	6	<u>To develop and support initiatives to improve bus services</u> <ul style="list-style-type: none"> • Live bus signs • Work with bus companies to improve bus routes around the ward

Summary of Ward Priorities – 2023/24

Aughton & Swallownest	1	<u>Develop & support initiatives that will improve health & wellbeing and tackle poverty</u> <ul style="list-style-type: none"> • Develop and support activities for children and young people • Develop and support initiatives that address mental and physical health • Develop and support initiatives that address social isolation • Develop initiatives that support people to address the cost-of-living crisis
	2	<u>Develop & support initiatives around crime and community safety</u> <ul style="list-style-type: none"> • Raise awareness and promote initiatives that address domestic abuse and exploitation • Speeding traffic and traffic management • Raise awareness and promote home, vehicle and personal safety
	3	<u>Develop and support initiatives that will improve the environment and the neighbourhood</u> <ul style="list-style-type: none"> • Reducing flytipping and littering • Encouraging people to take pride and ownership of public spaces, including reporting issues to relevant services

Summary of Ward Priorities – 2023/24

Boston Castle	1	<u>Continue to address community safety</u> <ul style="list-style-type: none"> • Use the Community Action Partnership element of the regular ward briefings to receive and respond to reports of crime/anti-social behaviour • Ensure a focus on the town centre and surrounding areas, including the development of the Towns and Villages funded work on Wellgate • Explore what actions are being taken to address any substance misuse issues • Use the ward briefings to receive reports in respect traffic management
	2	<u>Support activities around the cost-of-living</u> <ul style="list-style-type: none"> • Link up with RotherFed projects and promote other related work • Support local food banks/social supermarkets • Provide support to schools and community groups who are working with local families
	3	<u>Support activity that promotes community cohesion given the cultural diversity in the ward</u> <ul style="list-style-type: none"> • Support new / existing groups who seek to bring people together • Support communities / groups to develop celebration events / festivals • Support projects raising awareness of different cultures • Support projects working with communities of interest covering issues e.g. age, disability, race, religion etc
	4	<u>Promotion of information/services that provide support for adults who want to build skills and/or need support to access employment opportunities</u> <ul style="list-style-type: none"> • Link up with existing projects including the Council's Employment Solutions and Financial Inclusion teams, and Multiply and Advance • Promote adult education opportunities

Summary of Ward Priorities – 2023/24

Bramley & Ravenfield	1	<u>Continue supporting community & local groups with the cost-of-living</u>
	2	<u>Improving road safety and addressing crime & anti-social behaviour</u> <ul style="list-style-type: none"> • School road safety • Speeding • Off-road biking • Reducing flytipping • Continue to support Bramley & Wickersley Neighbourhood Watch group • Continue to tackle crime and ASB through a partnership approach via the Community Action Partnership
	3	<u>Improving the environment and enhancing community facilities</u> <ul style="list-style-type: none"> • Litter picking • Allotments • Improving outdoor spaces & facilities • Enhancing community safety resources • Street cleansing
	4	<u>Bringing people together and improving mental & physical well-being</u> <ul style="list-style-type: none"> • Intergenerational projects • Community events • Supporting community groups and our Parish Councils / Parish Meetings • Supporting activities for children, young people & families

Summary of Ward Priorities – 2023/24

Brinsworth	1	<u>A cleaner and greener Brinsworth</u> <ul style="list-style-type: none"> • Support litter picking, community clean ups and environmental improvement days • Develop and support tree planting schemes and enhance the natural environment through wildflower and bulb planting opportunities • Work with schools to raise awareness of nature and protecting the natural environment
	2	<u>A safer Brinsworth</u> <ul style="list-style-type: none"> • Work with the Police, local groups, and partners to tackle issues in hotspot areas and deliver community safety events • Support road safety initiatives • Support initiatives that ensure people of all ages feel safe within their neighbourhood
	3	<u>A community focused Brinsworth</u> <ul style="list-style-type: none"> • Support local community groups and organisations to develop and deliver community-based activities • Work with schools in Brinsworth to develop a programme of activities and opportunities for students to participate in • Engage with libraries, community centres and Parish Councils and support them to deliver projects and activities within the ward • Support community cohesion initiatives that bring people together
	4	<u>A more active Brinsworth</u> <ul style="list-style-type: none"> • Encourage families to become more active by taking part in the Brinsworth Jubilee Trail • Support and develop projects that will increase the appeal and usage of parks and open spaces • Support local sports clubs and recreational grounds to maintain amenities and continue to provide a variety of options to stay active • Support projects that promote healthy lifestyles, physical and mental health

Summary of Ward Priorities – 2023/24

Dalton & Thrybergh		<p><u>Overarching Priority – Ensure all citizens have access to help and support in relation to the cost-of-living crisis</u></p> <p>The impact of the cost of living on people and communities is a theme that is anticipated to run throughout all ward priorities. Helping to support and enable people, particularly those who are the most vulnerable or impacted the greatest, will be central to neighbourhood working</p>
	1	<p><u>Improve facilities and opportunities for children, young people, and families</u></p> <ul style="list-style-type: none"> • Places/spaces/equipment • Activities/opportunities • Community group support <p>Identifying and improving the places, spaces and equipment used by and for the benefit of children, young people and families remains a key priority. Every child and young person have the right to access activities and opportunities. Working with community groups and organisations to support and enable them to provide initiatives and opportunities is essential to achieving this priority.</p>
	2	<p><u>Build strong, empowered neighbourhoods that value diversity</u></p> <ul style="list-style-type: none"> • Community infrastructure • Community involvement • Community action <p>Building stronger neighbourhoods is fundamental to empowerment, cohesion, and sustainability. This can only be achieved by working together, including, and involving people, and ensuring everyone is represented. Developing an infrastructure of support, connecting people, groups and communities will encourage greater collaboration, inclusivity, self-organisation, and community action</p>
	3	<p><u>Ensure neighbourhoods are safe, clean, tidy, and celebrated</u></p> <ul style="list-style-type: none"> • Crime and anti-social behaviour • Environment • Culture, history & heritage <p>Ensuring neighbourhoods are places where residents feel safe, proud and enjoy living is vital to people's quality of life. Working collaboratively with the community, partners, and services across the Council to identify and tackle issues, find shared solutions, and increase community ownership and action. Celebrating and shining a light on the people, places, history, and heritage that make the ward a great place</p>
	4	<p><u>Contribute to the improvement of health and wellbeing of local citizens</u></p> <ul style="list-style-type: none"> • Access to information & services • Healthier lifestyles • Social connectedness • Green spaces <p>The ward has a high level of deprivation, which is inevitably linked to poorer health outcomes and inequalities. Adopting a 'population health' approach facilitates cross-organisational working and considers the wider factors that impact health, such as access to information and services, green spaces, good quality housing, exercise, and social connectedness. Addressing and improving these factors is essential to improving the health and wellbeing of citizens.</p>

Summary of Ward Priorities – 2023/24

Dinnington	1	<u>Improve the local environment</u> <ul style="list-style-type: none"> • Community clean-up days • Litter picking • Replace broken street furniture and invest in new where required • Grounds maintenance (hedge trimming and grass cutting etc.) • Support ecological work in the ward including Queen Elizabeth II Community Woodland • Ensure litterbins are well maintained and emptied in a timely manner
	2	<u>Support crime prevention strategies and target anti-social behaviour in hotspot areas</u> <ul style="list-style-type: none"> • Dinnington market and interchange • Communities should feel empowered to help improve their local area through reporting • Support and advocate for improvements to road safety and mitigate the impact of off-road bikes
	3	<u>Back initiatives to improve the built environment and local economy</u> <ul style="list-style-type: none"> • Improvements to Dinnington Town Centre and new developments • Support and promote local businesses, working with them to improve the town centre and markets area.
	4	<u>To support improvements to highway maintenance</u> <ul style="list-style-type: none"> • To encourage residents to report issues. • Raise awareness of the different ways to report issues to the council • To promote investment in greener travel
	5	<u>To support and develop initiatives to improve wellbeing</u> <ul style="list-style-type: none"> • Help residents with cost-of-living support including access to advice, guidance and budgeting • Foster community spirit by empowering local residents to form groups to act for and with their communities • Celebrate community heritage

Summary of Ward Priorities – 2023/24

Greasbrough	1	<u>Continue to develop Greasborough's green spaces</u> <ul style="list-style-type: none"> • Complete the Towns & Villages project on Brimmagem Fold including the installation of a metal engraved panel and audio post • Explore the possibility of extending the Greasbrough Park Pavilion • Complete the Ward Housing Hub project which will improve a piece of housing land on Elm Grove including planting, seating and play equipment for younger children
	2	<u>Support activity around the cost-of-living</u> <ul style="list-style-type: none"> • Link up with RotherFed projects and promote other related work • Explore the possibility of using the library as an emergency food bank which would also provide items for babies
	3	<u>Support activity bringing people/communities together</u> <ul style="list-style-type: none"> • Support community activity including those projects funded through the Dragons Den event • Support the development of new / existing groups
	4	<u>Support activity promoting healthy lifestyles</u> <ul style="list-style-type: none"> • Support community activity including any on the Greasbrough Rec MUGA and any arranged by local community groups
	5	<u>Continue to deal with the 'here and now', by receiving / responding to reports covering crime/anti-social behaviour, traffic and housing</u> <ul style="list-style-type: none"> • Use the Community Action Partnership element of the regular ward briefings to receive and respond to reports of crime/anti-social behaviour • Use the ward briefings to receive reports in respect of estate and traffic management

Summary of Ward Priorities – 2023/24

Hellaby & Maltby West	1	<u>Protecting and improving the environment</u> <ul style="list-style-type: none"> Improving local facilities including green spaces and parks Work with community, stakeholders and council departments to reduce dog fouling, fly-tipping and street litter in the ward Work with partners and business to reduce litter and anti-social behaviour around Hellaby Industrial Estate
	2	<u>Support and develop initiatives to increase community and individuals' health and wellbeing</u> <ul style="list-style-type: none"> Supporting communities and families on cost-of-living Supporting community groups and partners deliver events and social clubs Combating loneliness and isolation Supporting employment schemes Supporting new and existing community groups thrive
	3	<u>Identify and support initiatives that improve road safety</u> <ul style="list-style-type: none"> Road traffic management schemes Speed watches and community engagement activities.

Summary of Ward Priorities – 2023/24

Hoover	1	<u>Improving road safety</u> <ul style="list-style-type: none"> • Work with partners to address local concerns • Make good use of Rotherham Council's Local Neighbourhood Transport Improvement Plan where need arises • Work with schools to help alleviate parking problems outside schools
	2	<u>Addressing environmental issues and making good use of green spaces for everyone</u> <ul style="list-style-type: none"> • Reduce fly-tipping – community skip days, signage, enforcement • Reduce dog fouling - signage, enforcement • Reduce litter - signage, litter-picks, enforcement • Promote recycling – posters, education • Improve community facilities • Continue to consult with the whole community throughout the ward • Set up a consultation event capturing young people's voice
	3	<u>Tackling crime and anti-social behaviour</u> <ul style="list-style-type: none"> • Working in partnership with police and other partner agencies • Work with partners to promote reporting of crime and anti-social behaviour using a variety of mediums • Deliver high visibility walkabouts with partner agencies and the community to address local issues
	4	<u>Improve wellbeing by bringing people together whilst addressing loneliness, isolation and mental health</u> <ul style="list-style-type: none"> • Promote local activities • Support existing community groups and encourage new groups • Work with community groups to set up a community networking partnership • Continue to support bringing people together to prevent loneliness and isolation • Promoting help and support available to residents particularly in relation to the cost-of-living crisis

Summary of Ward Priorities – 2023/24

Keppel	1	<u>Improve safety and appearance of St Johns Green</u> <ul style="list-style-type: none"> • Work with partners to develop the Towns and Villages Fund proposal to improve the appearance of the area • Continue to monitor and respond to crime/anti-social behaviour • Continue to support the St Johns Green Stakeholder Group
	2	<u>Improve appearance of the environment</u> <ul style="list-style-type: none"> • Supporting green initiatives, such as tree planting and community clean-up days • Supporting local community groups or organisations with local environmental projects, such as gardening, wildlife & litter picking • Provide Rotherham Council Grounds Maintenance with areas to enable 3 clean-up days to be carried out • Ensure CCTV cameras are in the right places providing coverage of fly tipping hotspot areas
	3	<u>Address road safety concerns</u> <ul style="list-style-type: none"> • Ensure implementation and evaluation of the Rotherham Council Local Neighbourhood Transport Improvement projects are carried out • Respond to community concerns in respect of reported locations by working with partners to improve road safety • Ensure delivery of regular speed watches and activities to tackle off-road biking and parking concerns
	4	<u>Promote opportunities for bringing people together and enhancing community spirit</u> <ul style="list-style-type: none"> • Supporting projects/initiatives that promote positive mental health and wellbeing • Promoting services that provide financial advice & support, particularly in response to the cost-of-living & energy crisis • Supporting activities & groups within Keppel ward with projects such as digital inclusion, post-pandemic recovery and tackling social isolation • Support projects & activities for children & young people • Work with partners to install Christmas trees at several locations throughout the ward
	5	<u>Improve community safety by continuing to address crime/Anti-Social Behaviour</u> <ul style="list-style-type: none"> • Continuing regular Community Action Partnership meetings, working collaboratively with partners, including South Yorkshire Police & Housing • Working with to tackle off-road biking and parking concerns • Working with partner agencies to tackle drug related issues • Proactive provision of target hardening resources, advice and information
	6	<u>Improve facilities for young people</u> <ul style="list-style-type: none"> • Ensure every child gets the best start in life by working with partners and local community groups to support projects for children & young people • To improve the play areas within the ward

Summary of Ward Priorities – 2023/24

Kilnhurst & Swinton East		<u>Overarching Priority</u> – to support the community with the cost-of-living crisis
	1	<u>Every child making the best start in life</u> <ul style="list-style-type: none"> • Activities for children in deprived areas such as mini farm visits and Santa's grottos • Improving children's play areas • School travel safety initiatives • Engaging schools in local democracy
	2	<u>Every adult secure, responsible and empowered</u> <ul style="list-style-type: none"> • Working towards reducing social isolation in the ward • Support residents of Charles Street to use their Neighbourhood Centre • Trial a free coffee morning at Kilnhurst Resource Centre
	3	<u>A strong community in a clean, safe environment</u> <ul style="list-style-type: none"> • Clean-up of the Swinton canal • Community skip days • Working with partners to resolve anti-social behaviour
	4	<u>Extending opportunity, prosperity and planning for the future</u> <ul style="list-style-type: none"> • Towns and Villages funding • Working with schools on career opportunities

Summary of Ward Priorities – 2023/24

Maltby East	1	<u>Improving opportunities and facilities for children and young people</u> <ul style="list-style-type: none"> • Support local activities for families • Help connect children and young people to initiatives which aim to improve their wellbeing and job opportunities
	2	<u>Support residents health and wellbeing</u> <ul style="list-style-type: none"> • Promoting healthy lifestyle • Support existing and new community groups thrive and develop • Supporting initiatives that improve older people's quality of life • Tackling loneliness and isolation in line with 5 ways of wellbeing
	3	<u>Develop and support initiatives to improve community safety and the environment</u> <ul style="list-style-type: none"> • Partnership working with Council departments, Police and community to deliver projects which tackle anti-social behaviour and crime. • Walkabouts and community engagement • Facilitate multi-agency meetings and events • Promote and support Police initiatives, including encouraging the reporting of crime and anti-social behaviour • Road safety • Environmental crime
	4	<u>Support Maltby's local economy and improve the high street environment</u> <ul style="list-style-type: none"> • Engage with local business to identify opportunities to improve Maltby High Street • Support businesses and the Police tackle anti-social behaviour and crime • Support and develop activities and initiatives to encourage shoppers back to the High Street

Summary of Ward Priorities – 2023/24

Rawmarsh East	1	<u>Improving the physical environment</u> <ul style="list-style-type: none"> • Tackle hotspot areas suffering from fly-tipping and littering • Support initiatives that improve the look of the area • Towns and Villages Fund • Clean up Rawmarsh Cenotaph
	2	<u>Celebration of Parkgate 200-year anniversary</u> <ul style="list-style-type: none"> • Series of community events throughout the year to celebrate the Parkgate 200-year anniversary • Support Rawmarsh and Parkgate Local History Group activities
	3	<u>Facilities and activities for children and young people</u> <ul style="list-style-type: none"> • Expand range of activities of young people • Education projects including encouraging young people to read • Improve physical and mental health and well-being
	4	<u>Explore opportunities to improve the health and wellbeing of local residents</u> <ul style="list-style-type: none"> • Identify projects that aim to improve mental health and wellbeing • Support activities that promote physical activities • Provide advice and information on energy saving and cost-of-living crisis
	5	<u>Tackling crime and anti-social behaviour</u> <ul style="list-style-type: none"> • Support partnership working initiatives that make people feel safe where they live or work • Create initiatives that address issues in hotspot areas

Summary of Ward Priorities – 2023/24

Rawmarsh West	1	<u>Improvements to the local community</u> <ul style="list-style-type: none"> • Tackle hotspot areas suffering from fly-tipping and littering • Development of nature walk between Warren Vale and Rosehill Park • Improvements to area/village centres – Towns & Villages Fund
	2	<u>Facilities and activities for local people</u> <ul style="list-style-type: none"> • Support local community groups • Encouraging residents to use local facilities including the Rawmarsh library • Identify/support voluntary and charitable organisations
	3	<u>Celebration of Parkgate 200-year anniversary</u> <ul style="list-style-type: none"> • Series of community events throughout the year to celebrate the Parkgate 200-year anniversary • Support Rawmarsh and Parkgate Local History Group activities
	4	<u>Tackling crime and anti-social behaviour</u> <ul style="list-style-type: none"> • Support partnership working initiatives that make people feel safe where they live or work • Create initiatives that address issues in hotspot areas • Identify common themes across Rawmarsh and address as a whole

Summary of Ward Priorities – 2023/24

Rother Vale	1	Support and contribute to a clean and green environment
	2	Support and develop community safety
	3	Support health, economic and social issues
	4	Support initiatives and events that encourage community cohesion and develop and understanding of diverse communities

Summary of Ward Priorities – 2023/24

Rotherham East	1	<u>Continue to oversee delivery of the Eastwood Village action plan</u> <ul style="list-style-type: none"> • Use the ward briefing to receive progress reports in respect of Eastwood Village with a focus on crime/anti-social behaviour, the environment and housing
	2	<u>Support activity around the cost-of-living</u> <ul style="list-style-type: none"> • Link up with RotherFed projects and promote other related work • Use community bases – including the new Hub at Badsley to deliver cost-of-living activity • Support local food banks/social supermarkets
	3	<u>Support activity that will improve people's employment prospects and enhance personal development</u> <ul style="list-style-type: none"> • Link up with existing projects including the Council's Financial Inclusion and Advance services • Use community bases including the new Hub at Badsley to deliver activity related to employment and personal development
	4	<u>Support activity which will improve the built environment</u> <ul style="list-style-type: none"> • Oversee the delivery of the Towns and Villages project on Doncaster Road
	5	<u>Continue to deal with the 'here and now', by receiving / responding to reports covering crime/anti-social behaviour, traffic and housing</u> <ul style="list-style-type: none"> • Use the Community Action Partnership element of the regular ward briefings to receive and respond to reports of crime/anti-social behaviour • Use the ward briefings to receive reports in respect of estate and traffic management

Summary of Ward Priorities – 2023/24

Rotherham West	1	<u>Continue to address crime/anti-social behaviour and environmental issues</u> <ul style="list-style-type: none"> • Use the Community Action Partnership element of the regular ward briefings to receive and respond to reports of crime and anti-social behaviour • Ensure a particular focus on Ferham through a multi-agency partnership approach • Continue to oversee activity being undertaken to address concerns in Masbrough and Henley • Use the ward briefings to receive reports in respect traffic management
	2	<u>Continue to look at improvements to green spaces</u> <ul style="list-style-type: none"> • Explore opportunities to improve safety of and provision in Ferham Park, Winterhill and Bradgate Park • Undertake an audit of play area provision to inform possible future improvements • Continue to explore opportunities for improving other sites such as land off Meadowhall Road and St Thomas' Church
	3	<u>Support activity that focuses on the cost-of-living</u> <ul style="list-style-type: none"> • Link up with RotherFed projects and promote other related work • Support local food banks/social supermarkets • Provide support to schools and community groups who are working with local families
	4	<u>Support activity that focuses on mental wellbeing and physical mental health</u> <ul style="list-style-type: none"> • Support organisations and groups who are delivering activity to improve both mental/physical wellbeing • Support community events and festivals
	5	<u>Promote information and services that provide support to carers</u> <ul style="list-style-type: none"> • Support organisations/groups who are delivering activity to support unpaid carers • Promote organisations who can provide benefit advice to carers

Summary of Ward Priorities – 2023/24

Sitwell	1	<u>Continue to work with partners to mitigate the impact of flooding</u> <ul style="list-style-type: none"> Continue to receive reports from the Council in respect of local flood defence work Continue to receive reports in respect of community activity including the use of £12k awarded by South Yorkshire Community Foundation Establish if any further works are required in areas previously affected by flood incidents
	2	<u>Work with local partners to improve provision for both young people and elderly</u> <ul style="list-style-type: none"> Engage with local schools/youth providers regarding any support they need to ensure provision Explore the possibility of using ward budgets to improve green spaces e.g. Herringthorpe Valley Park Engage with local churches/Parish Council/existing groups regarding any support they need to ensure provision for elderly
	3	<u>Work with partners to improve the environment</u> <ul style="list-style-type: none"> Engage with the Council's Grounds Maintenance service to identify any pockets of land possibly requiring improvement Explore the possibility of using ward (Housing) budgets to improve housing land e.g. Greystones, Hunger Hill, Sorrell Sykes etc, following walkabouts involving Councillors and Housing officers Oversee the delivery of the Towns and Villages Fund project at The Stag Explore the possibility of making improvements to the Whiston Worrygoose island roundabout including the installation of a Christmas tree Continue to develop/promote walking routes in and around the ward
	4	<u>Road safety and traffic</u> <ul style="list-style-type: none"> Explore the possibility of using Local Neighbourhood Road Safety funding to develop projects which will reduce speeding e.g. on Broom Lane, Guilthwaite Hill etc, and encourage careful driving through the installation of signs e.g. "...Welcomes Careful Drivers"
	5	<u>Crime and Anti-Social Behaviour</u> <ul style="list-style-type: none"> Use the Community Action Partnership element of the regular ward briefings to receive and respond to reports of crime/anti-social behaviour

Summary of Ward Priorities – 2023/24

Swinton & Rockingham		<u>Overarching Priority</u> – supporting the community with the cost-of-living crisis and the health and wellbeing impact
	1	<u>Environmental Improvements</u> <ul style="list-style-type: none"> • Reduce fly-tipping – community skip days, signage, CCTV and enforcement action • Reduce dog fouling - signage, enforcement, free poo bag scheme at Swinton library and trial of a dog poo bag dispenser in hot spot location. • Reduce littering – education, signage, community litter picks, enforcement, litter bins in key locations • Delivery of area improvement projects – tree planting projects • Wildlife support projects – wildflowers, bug hotels and pond improvements at Pottery Ponds
	2	<u>Enhancing facilities and activities for children and young people</u> <ul style="list-style-type: none"> • Play area improvements – Thomas Street • Park improvements – Queen Street Park / Bow Broom Field • Engagement with local young people
	3	<u>Community facility / activities improvements including celebrating local heritage</u> <ul style="list-style-type: none"> • Celebrate local heritage – continued support to the Pottery Ponds work • Support the provision of community facility improvements – Civic Hall, St Margaret's Church Hall development • Provision of activities for children and young people – sports camps • Work with community groups to enable community events / activities to take place to enhance community cohesion throughout the ward – such as Remembrance Sunday, Christmas, Easter
	4	<u>Addressing crime and anti-social behaviour and improving community safety</u> <ul style="list-style-type: none"> • Encourage residents to report issues – 'Know Who To Contact' leaflets to be delivered to targeted areas when issues arise. Articles in monthly e-bulletins • Undertake high visibility walkabouts with partner agencies and the community to address local issues. • Support schools experiencing road safety issues • Speeding vehicles – speed camera van, community speed watch, purchase of ward Vehicle Activated Speed sign. • CCTV – ward CCTV camera / Safer Streets CCTV cameras

Summary of Ward Priorities – 2023/24

Thurcroft & Wickersley South	1	<u>Build a stronger, cohesive community</u> <ul style="list-style-type: none"> • Encourage and empower community groups, including both Parish Councils • Improve resident engagement • Improve community facilities, amenities and opportunities • Support individuals, families and businesses to navigate the cost-of-living crisis • Address social isolation
	2	<u>Support crime prevention strategies and target antisocial behaviour</u> <ul style="list-style-type: none"> • Work in partnership with local Police to identify and address local crime • Promote the importance of reporting crime and support residents to do so • Focus on projects which address the root causes of crime and antisocial behaviour • Carry out targeted work to address issues with off road vehicles
	3	<u>Develop and improve the local environment</u> <ul style="list-style-type: none"> • Community clean up days • Support businesses and shops along Green Arbour Road and encourage people to shop local • Supporting local people and working in partnership with stakeholders to improve public spaces

Summary of Ward Priorities – 2023/24

Wales	1	<u>To support and develop initiatives to improve the local environment</u> <ul style="list-style-type: none"> • Support and develop local litter picking groups • Raise awareness and education around environmental issues working with local schools and community groups • Community clean up days • Towns & Villages fund
	2	<u>To support and develop initiatives to improve residents mental and physical health and wellbeing</u> <ul style="list-style-type: none"> • To support residents during the cost-of-living crisis by exploring advice and guidance opportunities
	3	<u>Reduce Anti-Social Behaviour and crime in the hotspot areas</u> <ul style="list-style-type: none"> • Identify opportunities to increase facilities and activities for young people in Kiveton
	4	<u>To support local community and voluntary organisations</u> <ul style="list-style-type: none"> • To continue to support through the Community Leadership Fund and to identify other funding opportunities • To support networking opportunities for local organisations to come together to share ideas and best practice

Summary of Ward Priorities – 2023/24

Wath		<u>Overarching Priority</u> – Supporting the community by sharing information, with help and support specifically in relation to fuel poverty and the cost-of-living crisis
	1	<u>Address crime and anti-social behaviour</u> <ul style="list-style-type: none"> • Working in partnership with police and other partner agencies to address local issues including local action plans and high visibility walkabouts. • Encourage reporting • Build stronger community cohesion • Work with schools to help alleviate parking problems at drop off and pick up times • Improve road safety working with partners and the community to address local concerns, including making good use of the RMBC Highways scheme where areas are identified. • Speeding • Drug use / dealing
	2	<u>Help maintain an attractive and welcoming environment</u> <ul style="list-style-type: none"> • Reduce fly-tipping – community skip days, signage, enforcement • Reduce dog fouling - signage, enforcement • Reduce litter - signage, litter picks, enforcement • Promote recycling – posters, education
	3	<u>Improving and enhancing community facilities and green spaces, to ensure they are well used and accessible to all</u> <ul style="list-style-type: none"> • Support existing community groups and encourage new groups • Establish new ways of bringing people together to improve wellbeing and prevent loneliness and isolation. • Improve existing facilities • Consult with young people to see what they want • Promote existing, affordable activities for people of all ages • Exploring opportunities to share information providing health and support specifically in relation to the cost-of-living crisis
	4	<u>Explore opportunities to enhance Wath Town Centre including -</u> <ul style="list-style-type: none"> • Support with consulting with local business and stakeholders • Work with partners to develop best results from Levelling Up fund

Summary of Ward Priorities – 2023/24

Wickersley North	1	<u>Improving community safety by continuing to address crime & anti-social behaviour</u> <ul style="list-style-type: none"> Continuing regular Community Action Partnership meetings, working collaboratively with partners, including South Yorkshire Police and Housing Working with partners to improve road safety, including regular speed watches and activities to tackle off-road biking and parking concerns Working with partner agencies to tackle drug-related issues Take part in community walkabouts and street surgeries, encouraging residents to report issues from their neighbourhood Enhance lighting in Wickersley Park, in partnership with Wickersley Parish Council Representing residents on licensing and planning consultations Proactive provision of target hardening resources, advice and information
	2	<u>Improving our streets and green spaces, so the community can access & enjoy them</u> <ul style="list-style-type: none"> Improving roads, pavements, green spaces, parks and street cleanliness Accessing the Towns and Villages Fund to enhance local amenities in Wickersley centre (Tanyard area) Organising clean-up days and skip days with the community Encourage positive engagement of private and Council housing tenants, including producing a tenancy handbook
	3	<u>Promote opportunities for bringing people together, enhancing community spirit and improving mental & physical wellbeing</u> <ul style="list-style-type: none"> Supporting projects/initiatives that promote positive mental health and wellbeing Promoting services that provide financial advice and support, particularly in response to the cost-of-living and energy crises Supporting activities and groups within Neighbourhood Centres and community centres across Wickersley North, with projects such as digital inclusion, post-pandemic recovery and tackling social isolation Support projects and activities for children and young people
	4	<u>Support a clean & safe environment</u> <ul style="list-style-type: none"> Supporting green initiatives, such as tree planting and community clean-up days Supporting local community groups or organisations with local environmental projects, such as gardening, wildlife and litter picking

More information regarding neighbourhood working and activities taking place within wards can be found here - [Your neighbourhood – Rotherham Metropolitan Borough Council](#)

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Ward Priorities 2023/24 – main themes

Ward	Culture, Arts & Heritage	Environment, Parks & Green Spaces	Cleanliness of public realm and streets	Community Safety & ASB	Transport, Roads & Road Safety	Older People	Physical and Mental Health & Wellbeing (inc. Isolation & Loneliness)	Children, Young People & Families	Economy, Local Business & Employment	Poverty / Cost of Living	Communities – • Involvement/ Empowerment • Infrastructure/ Assets • Cohesion • Diversity	Other
Anston & Woodsetts		✓	✓	✓	✓				✓		✓	
Aston & Todwick		✓	✓	✓	✓				✓	✓		
Aughton & Swallownest			✓	✓	✓		✓	✓		✓		
Boston Castle				✓	✓				✓	✓	✓	
Bramley & Ravenfield		✓	✓	✓	✓		✓	✓		✓	✓	
Brinsworth		✓	✓	✓	✓		✓	✓			✓	
Dalton & Thrybergh	✓	✓		✓			✓	✓		✓	✓	
Dinnington	✓	✓	✓	✓	✓				✓	✓		
Greasbrough		✓		✓	✓		✓			✓	✓	
Hellaby & Maltby West		✓	✓		✓		✓		✓	✓	✓	
Hoober		✓	✓	✓	✓		✓	✓		✓	✓	
Keppel		✓	✓	✓	✓		✓	✓	✓	✓	✓	Digital Inclusion
Kilnhurst & Swinton East		✓	✓	✓	✓	✓	✓	✓	✓	✓		
Maltby East				✓		✓	✓	✓	✓		✓	
Rawmarsh East		✓	✓	✓			✓	✓		✓	✓	

Ward Priorities 2023/24 – main themes

Ward	Culture, Arts & Heritage	Environment, Parks & Green Spaces	Cleanliness of public realm and streets	Community Safety & ASB	Transport, Roads & Road Safety	Older People	Physical and Mental Health & Wellbeing (inc. Isolation & Loneliness)	Children, Young People & Families	Economy, Local Business & Employment	Poverty / Cost of Living / Covid Recovery	Communities – • Involvement / Empowerment • Infrastructure/ Assets • Cohesion • Diversity	Other
Rawmarsh West		✓	✓	✓					✓		✓	
Rother Vale		✓	✓	✓			✓		✓		✓	
Rotherham East		✓	✓	✓	✓				✓	✓		
Rotherham West		✓	✓	✓	✓		✓			✓	✓	Supporting Carers
Sitwell		✓		✓	✓	✓	✓	✓				Flooding
Swinton & Rockingham	✓	✓	✓	✓	✓		✓	✓		✓	✓	
Thurcroft & Wickersley South		✓	✓	✓			✓		✓	✓	✓	
Wales		✓	✓	✓			✓			✓	✓	
Wath		✓	✓	✓	✓		✓	✓	✓	✓	✓	
Wickersley North		✓	✓	✓	✓		✓	✓	✓	✓	✓	Support to tenants Digital Inclusion
	3	22	20	24	18	3	19	13	15	19	19	

Full version of the ward plans can be found here - [Ward Plans – Rotherham Metropolitan Borough Council](#)

Rotherham Pharmaceutical Needs Assessment – Supplementary update

Lorna Quinn – Public Health Intelligence
Principal

Context

- A full PNA was conducted in 2022.
- As agreed at Health and Wellbeing Board (H&WbB), RMBC agreed to hold a steering group annually to review any emerging needs or changes to provision and make recommendation to H&WbB (this occurred 05/10/2023).
- NHSE/I will continue to send notification of closures to RMBC public health team.
- The steering group and associated notifications deemed that this supplementary update was required to notify Health and Wellbeing Board of pharmacy changes and highlighted changes that require a supplementary update.
- This update has been done with reference to the 2022 update where pharmaceutical services were deemed sufficient.

Provision of services



As of January 2023, there were 64 Pharmacies including seven distance selling pharmacies in Rotherham.

As of November 2023, there were 61 Pharmacies in Rotherham.

01/01/2023					16/10/2023				
40-hour	100-hour	DSP	DAC	Total	40-hour	100-hour	DSP	DAC	Total
51	5	7	1	64	50	4	6	1	61

Time period	Population*	Total Community pharmacies	Community pharmacies per 100,000 population
January 2023	265,807	64	24.1
November 2023	265,807	61	22.9

There were an average of 21.3 community pharmacies per 100,000 people in the UK as of 2017. This figure has been used as a benchmark.

Despite the closures of the three pharmacies, the included population in a 15-minute walk of a pharmacy, as of November 2023, remains at 85.9%.

Reduced hours

- Three permanent closures (Rotherham Direct Pharmacy, Maltby Pharmacy, and Superdrug Pharmacy);
- Reductions to the core opening hours of four 100-hour pharmacies;
- Reductions to the supplementary opening hours of five 40-hour pharmacies (Pickfords Pharmacy, Well, North Anston Pharmacy, Superdrug Pharmacy (now closed), and Weldricks Pharmacy).

Total opening hours per week (01/01/2023)	Total opening hours per week (16/10/2023)	Reduction in opening hours per week
3291.41	3010.16	281.25

Opening hours

- There are currently four 100-hour pharmacies in Rotherham
- All four 100-hour pharmacies have reduced their opening hours following a valid application to the ICB and
- One 100-hour pharmacy has closed since 01/01/2023 (Maltby Pharmacy (FAA29), 8 Blyth Road, Maltby, Rotherham, S66 8JD closed on 17/09/2023).

100-hour reduction application received with criteria met	100-hour pharmacies that have not applied to reduce core hours	Number of 100-hour pharmacies that have closed since 01/01/2023
4	0	1

Opening times

Opening times	01/01/2023	06/11/2023	Narrative
Later than 21:00 Monday to Friday	5	0	There are now no pharmacies open later than 21:00 Monday-Friday in Rotherham
Later than 21:00 on Saturday	5	0	There are now no pharmacies open later than 21:00 Saturday in Rotherham
Open on a Sunday	9	8	There is a reduction of one pharmacy open on a Sunday.

The role of pharmacies in meeting the health needs of people in Rotherham for Public Health commissioned services – substance use

As of December 2023, there were 60 pharmacy contracts with 'We Are With You':

- 49 of which dispense methadone
- 39 of which provided supervised consumption in the month
- 11 offering needle exchange (a reduction of 1)

For supervised consumption, the total from April 2022 to February 2023 were 1,971.

For May 2023-December 2023, there were 1,582 supervised consumptions. This is in line with the previous year's figures therefore does not indicate a reduction of provision.

The role of pharmacies in meeting the health needs of people in Rotherham for Public Health commissioned services – Sexual health (EHC)

- There were 29 pharmacies signed up to provide free EHC in Rotherham at the time of the PNA, however as of January 2023, this decreased to 28 pharmacies.
- Since then, this has reduced sharply to 15 pharmacies.
- Limited information is available to the sexual health commissioned service as to why 'Well' and 'Weldricks' have not signed up however, it has been noted this may be impacted by resource issues in pharmacies.

Next steps and recommendation

Further work is being explored around access to pharmacies for supervised consumption and needle exchange, and EHC.

Notification of future pharmacy changes will be reviewed by the pharmaceutical needs assessment steering group, chaired by the Public Health Intelligence Principal, and will be notified to the Health and Wellbeing Board as appropriate.

It is recommended that the Health and Wellbeing Board note the reduction in out-of-hours pharmacy opening hours, and the reduction in pharmacies providing free emergency hormonal contraception.

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Rotherham Pharmaceutical Needs Assessment Supplementary Update

February 2024

(Original document published 2022)

Lorna Quinn, Public Health Intelligence Principal, Rotherham Metropolitan
Borough Council

Introduction to pharmaceutical needs assessment

The purpose of a Pharmaceutical Needs Assessment (PNA) is to assess and set out how the provision of pharmaceutical services can meet the health needs of the population of a Health and Wellbeing Board's area for a period of up to three years. The original PNA was published in 2022 covering 2022-2025, this can be found here [rotherham-pharmaceutical-needs-assessment-2022-to-2025](https://www.rotherham.gov.uk/data/).

PNAs are primarily used to make commissioning and development decisions. Under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, a person who wishes to provide pharmaceutical services must apply to NHS England and NHS Improvement (NHSE/I) to be included in the relevant pharmaceutical list by proving they are able to meet a need for, or improvements or better access to, pharmaceutical services as set out in the relevant PNA. There are exceptions to this, such as applications for benefits not foreseen in the pharmaceutical needs assessment or to provide pharmaceutical services on a distance-selling (internet or mail order only) basis. The PNA and this associated supplementary update are designed to contribute to, and become an integral part of, the Rotherham JSNA – available for review at <https://www.rotherham.gov.uk/data/>.

As agreed at Health and Wellbeing Board (H&WbB), there was agreement to hold a steering group annually to review any emerging needs or changes to provision and make recommendation to H&WbB, and that NHSE/I will continue to send notification of closures to RMBC public health team. The steering group meeting occurred 05/10/2023 and coupled with associated notifications, it was deemed that this supplementary update was required to notify the Health and Wellbeing Board of pharmacy changes.

The purpose of this briefing is to review the current PNA to determine if there are any gaps in provision due to changes that have arisen since the PNA was conducted in October 2022 noting that loss of opening hours does not necessarily create a gap in service if there is an alternative provision that patients can access.

Current provision of pharmaceutical services

Premises at which pharmaceutical services are provided.

As of January 2023, there were 64 Pharmacies including 7 distance selling pharmacies. As of November 2023, there were 61 Pharmacies including 6 distance selling pharmacy (figures 1 and 2, and table 1).

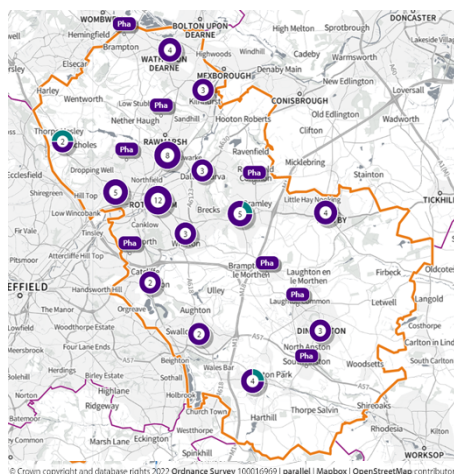


Figure 1: premises at which pharmaceutical services were provided at the time of the 2022 PNA.

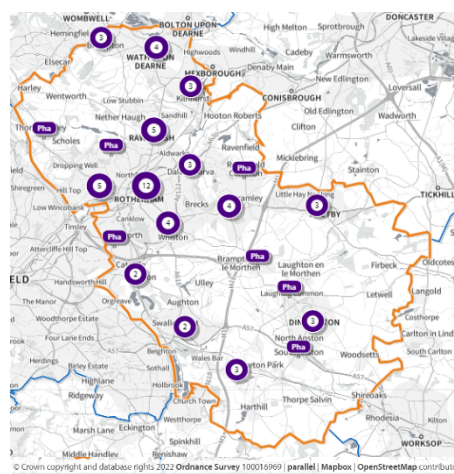


Figure 2: premises at which pharmaceutical services were provided November 2023.

Key

Single Pharmacy



Multiple pharmacies located too close together to be able to display separately without increasing the resolution

This comprises of fifty 40-hour pharmacies, four 100-hour pharmacies, six distance selling premises, and one dispensing appliance contractor (table 1).

01/01/2023					16/10/2023				
40-hour	100-hour	DSP	DAC	Total	40-hour	100-hour	DSP	DAC	Total
51	5	7	1	64	50	4	6	1	61

Table 1: Pharmacy type as of January 2023 and October 2023.

Definitions:

40-hour – Pharmacies that have 40 core opening hours per week. The contractor may choose to open the pharmacy for more than 40 hours; these are known as supplementary opening hours and can be removed by the contractor with five weeks' notice.

100-hour – Pharmacies that were subject to a 100-hour condition although they may now be opening fewer than 100 hours per week following changes to the pharmaceutical regulations which came into effect on 25 May 2023.

DSP – Distance Selling Pharmacy. There are specific conditions that apply to this type of pharmacy. A DSP must not provide essential services to a person who is present at the pharmacy, or in the vicinity of it. The pharmacy procedures for the premises must be such as to secure the uninterrupted provision of essential services, during the opening hours of the premises, to persons anywhere in England who request those services, and the safe and effective provision of essential services without face-to-face contact between any person receiving the services, whether on their own or on someone else's behalf, and the applicant or the applicant's staff.

DAC – Dispensing Appliance Contractor

Pharmaceutical service providers per 100,000 people

For the purposes of determining whether the number of pharmacies in Rotherham is sufficient for the population size of Rotherham and whether there is sufficient choice, it was determined that the total number of pharmacies per head of population should be comparable with, or better than, the national average. The Pharmaceutical Services Negotiating Committee (PSNC) no longer publishes regular national figures, but a 2019 publication comparing the availability of pharmaceutical services across Europe found that there was an average of 21.3 community pharmacies per 100,000 people in the UK as of 2017. This figure was used as a benchmark.

From January 2023 to November 2023, assuming no change in population, there was a reduction from 24.1 pharmacies per 100,000 population, to 22.9 pharmacies per 100,000 population. This remains above the benchmark of 21.3 per 100,000 (table 2).

Time period	Population*	Total Community pharmacies	Community pharmacies per 100,000 population
January 2023	265,807	64	24.1
November 2023	265,807	61	22.9

Table 2: Community pharmacies per 100,000 population.

*Based on 2021 Census population and assuming no change in population.

Total reduction in community pharmacy opening hours

There has been a reduction in opening hours of 281.25 hours per week. The loss of opening hours has resulted from the below changes (table 3):

- Three permanent closures (Rotherham Direct Pharmacy, Maltby Pharmacy, and Superdrug Pharmacy).
- Reductions to the core opening hours of four 100-hour pharmacies (Rawmarsh Pharmacy, Dinnington Pharmacy, Wickersley Pharmacy, and Tesco Pharmacy).
- Reductions to the supplementary opening hours of five 40-hour pharmacies (Pickfords Pharmacy, Well, North Anston Pharmacy, Superdrug Pharmacy (since closed), and Weldricks Pharmacy).

Total opening hours per week (01/01/2023)	Total opening hours per week (16/10/2023)	Reduction in opening hours per week
3291.41	3010.16	281.25

Table 3: Opening hours reduction for Rotherham pharmacies.

Opening times

There are now no pharmacies open later than 21:00 Monday-Friday in Rotherham, previously there were five. There are now no pharmacies open later than 21:00 Saturday in Rotherham, previously there were five. There is a reduction of one pharmacy open on a Sunday with eight remaining open, however previously there were nine (table 4). A details list is provided in table 5.

Opening times	01/01/2023	06/11/2023	Narrative
Later than 21:00 Monday to Friday	5	0	There are now no pharmacies open later than 21:00 Monday-Friday in Rotherham
Later than 21:00 on Saturday	5	0	There are now no pharmacies open later than 21:00 Saturday in Rotherham
Open on a Sunday	9	8	There is a reduction of one pharmacy open on a Sunday.

Table 4: Out-of-hours opening hours for Rotherham pharmacies.

ODS Code	Pharmacy Name	Contractor Name	Address	Postcode	Reason for reduction	Number of hours per week	Effective Date	Notes
FWM47	Rotherham Direct Pharmacy	Pharma-Clinic Ltd	Eastwood	S65 1QY	Permanent closure	40	03/05/2023	
FAA29	Maltby Pharmacy	The Maltby Partnership Ltd	Maltby	S66 8JD	Permanent closure	100	17/09/2023	
FYR33	Superdrug Pharmacy	Superdrug Stores Plc		S60 1QU	Permanent closure	51	14/10/2023	
FNL37	Rawmarsh Pharmacy	Corner Boys Ltd	Rawmarsh	S62 6LW	Reduction to core opening hours of 100-hour pharmacy	15	04/07/2023	Pharmacy has 79 core opening hours + 6 supplementary hours
FCQ19	Dinnington Pharmacy	Dinnington Partnership Ltd	Dinnington	S25 2EZ	Reduction to core opening hours of 100 hour pharmacy	21.5	17/08/2023	
FGM85	Wickersley Pharmacy	Morthen Road Ltd	2 Morthen Road	S66 1EU	Reduction to core opening hours of 100 hour pharmacy	17.75	29/08/2023	
FQN92	Tesco Pharmacy	Tesco Stores Limited	Wath-upon-Deerne	S63 7DA	Reduction to core opening hours of 100 hour pharmacy	22	29/08/2023	
FD752	Pickfords Pharmacy	Pickfords Pharmacy Ltd	Brampton	S73 0TW	Change of supplementary opening hours	2.5	27/02/2023	Remove supplementary opening hours Monday-Friday 17:30-18:00. Total reduction of 2.5 hours per week
FAN95	Well	Bestway National Chemists Ltd	Wickersley	S66 1AA	Change of supplementary opening hours	1	19/03/2023	Decrease opening hours on Saturday from 09:00-14:00 to 09:00-13:00. Total reduction of 1 hour per week.
FE454	North Anston Pharmacy	Avicenna Retail Ltd	North Anston	S25 4DB	Change of supplementary opening hours	4	03/04/2023	Remove supplementary opening hours Saturday 09:00-13:00. Total reduction of 4 hours per week. Pharmacy now closed on Saturdays.
FYR33	Superdrug Pharmacy	Superdrug Stores Plc		S60 1QU	Change of supplementary opening hours	2.5	19/06/2023	Remove supplementary opening hours Monday-Friday 08:30-09:00. Total reduction of 2.5 hours per week. *Please note, this pharmacy also closed following this change – row 4 of table*
FR709	Weldricks Pharmacy	H I Weldrick Ltd	Maltby	S66 8JE	Change of supplementary opening hours	4	18/09/2023	Decrease opening hours on Saturday from 09:00-17:00 to 09:00-13:00. Total reduction of 4 hours per week.

Table 5: Detailed changes to Rotherham pharmacies.

100-hour pharmacies

Under the National Health Service (Pharmaceutical Services) Regulations 2005 (regulation 13(1)(b)), primary care trusts were required to grant applications for inclusion in a pharmaceutical list where the applicant undertook to provide pharmaceutical services for at least 100 hours per week. Such pharmacies became known as “100-hour pharmacies”.

Whilst the ability to apply to open a new 100-hour pharmacy was removed from the regulations with effect from 1 September 2012, the requirement on these pharmacies to continue to be open for 100 hours per week was carried into the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. NHS England could not vary or remove this “100 hours condition” (regulation 65(3)). With effect from 25 May 2023, the 2013 regulations have been amended so that a pharmacy contractor can now apply to the relevant Integrated Care Board (ICB) to reduce the total core opening hours of their 100-hour pharmacy. These applications must be granted where they meet the requirements of the regulations. The requirements are that the pharmacy will still have:

- at least 72 core opening hours per week;
- core opening hours between 5pm and 9pm Monday to Saturday;
- core opening hours on a Sunday between 11am and 4pm, if the pharmacy currently has core hours at these times. The contractor may introduce a rest break provided it is no longer than one hour, and starts at least three hours after the pharmacy opens and ends at least three hours before it closes, and
- the changes must not reduce the total number of core opening hours on a Sunday.

Additionally, the contractor must provide the ICB with at least five weeks’ notice of the proposed changes.

The four 100-hour pharmacies in Rotherham have reduced their opening hours following a valid application to the ICB and one 100-hour pharmacy has closed (Maltby Pharmacy (FAA29) closed on 17/09/2023) (table 6).

Total 100-hour pharmacies 16/10/2023	100-hour reduction application received with criteria met	100-hour pharmacies that have not applied to reduce core hours	Number of 100-hour pharmacies that have closed since 01/01/2023
4	4	0	1

Table 6: Changes to 100-hour pharmacies in Rotherham.

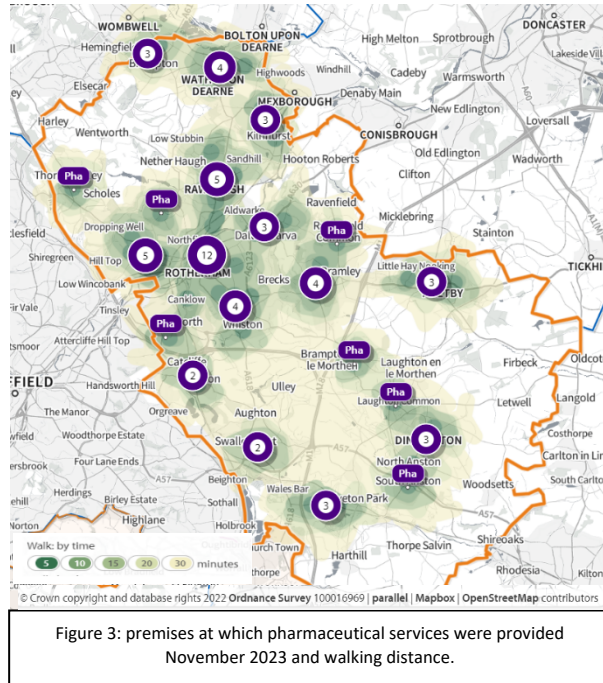
Availability and access according to distance

For the purposes of determining whether residents require better access and towards identifying improvements for pharmaceutical services the proportion of the population within 15-minute walk of a provider pharmaceutical services was reviewed. This indicator was selected because rates of car ownership are not uniform across the population.

In analysing availability in the PNA, consideration was given to whether there is sufficient access to pharmaceutical services across the population as a whole and how access differs according to deprivation and age – both factors which are associated with poorer health.

There is no national guidance or definition of sufficient access, but where possible, comparisons were made with figures included in the 2022 PNA.

In November 2022, 85.9% of the population of Rotherham lived within a 15-minute walk of a Rotherham-based pharmaceutical service provider. Despite the closures of the three pharmacies, the included population as of November 2023 remains at 85.9%, due to proximity of other pharmacy provision (figure 3).



The role of pharmacies in meeting the health needs of people in Rotherham for Public Health commissioned services

As sufficiency was deemed appropriate as of the PNA in November 2022, data has been collated covering the pharmacy closures to determine use of these.

During Jan-December 2022 at Rotherham pharmacies (based on postcode of the pharmacy), the total number of prescriptions dispensed (professional fees) was 7.1 million. Based on the contractor code of the three pharmacy closures, FWM47, FAA29, and FYR33, the three closed pharmacies' total number of prescriptions were 260,000. This contributed to 4% of total prescriptions during this time.

Substance use services

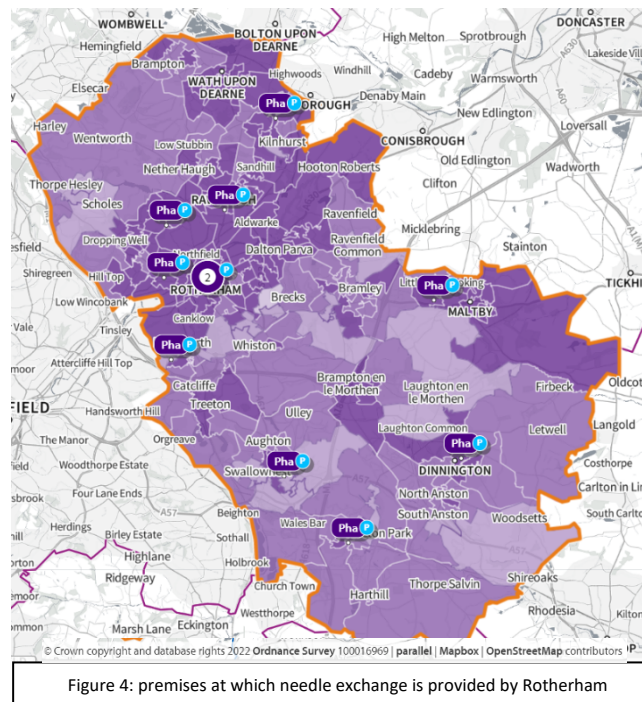
As needle exchange and the supervised consumption of substance use medicines are commissioned by the Council, it was not envisaged that within the lifetime of the pharmaceutical needs assessment (2022-2025) there is, or will be, a need for either service to be commissioned as part of pharmaceutical services.

Data for pharmacy contracts was provided by 'We Are With You', the commissioned provider for drug and alcohol services in Rotherham.

As of December 2023, there were 60 pharmacy contracts: 49 of which dispense methadone, 39 of which provided supervised consumption in the month, and 11 offering needle exchange.

For needle exchange, there was a reduction of one pharmacy providing this in October 2023; previous to this, there were twelve providing this service. The pharmacies offering this service are shown in figure 4.

For supervised consumption, the total from April 2022 to February 2023 were 1,971, and these were supported by the previous commissioned provider, 'Change Grow Live'. As the drug and alcohol service moved to a new provider, data for 'We Are With You' (new provider), is available from May 2023-December 2023. This shows 1,582 supervised consumptions during this time period and is in line with the previous year's figures.



Sexual Health services

Emergency hormonal contraception (EHC) provision is commissioned by the Council and is available in selected pharmacies in Rotherham.

There were 29 pharmacies signed up to provide free EHC in Rotherham at the time of the PNA, however as of January 2023, this decreased to 28 pharmacies. Since then, this has reduced sharply to 15 pharmacies, most notably due to 5 'Well' pharmacies no longer signing up, in addition to 4 'Weldricks' pharmacies. Please note, all pharmacies can supply EHC (except for where a pharmacy chooses not to, for example on religious grounds) but only 15 provide free EHC (other pharmacies require this to be paid for by the customer). Limited information is available to the sexual health commissioned service as to why 'Well' and 'Weldricks' have not signed up however, it has been noted this may be impacted by resource issues in pharmacies.

In addition to pharmacies, free EHC is also available at the sexual health service at The Rotherham Foundation Trust open Monday to Thursday 8.30am to 7.30pm, Friday 9am to 5pm and Saturday 10am to 2pm.

Data shows that April 2022 to March 2023, there were 438 EHC given to women within community pharmacy settings. Data was not available for the 2022 PNA to determine number of EHC provided by each pharmacy however this is being monitored moving forward.

Summary and recommendation

Since January 2023, data show that there have been reductions to the total number of community pharmacy opening hours in Rotherham. Since the PNA was conducted, there have been three pharmacy closures, four pharmacies with a reduction to 100-hour opening times, and five pharmacies with a reduction to 40-hour openings. There are now 22.9 pharmacies per 100,000 population; previously there were 24.1 per 100,000. Data available at the time of writing does not indicate a change in provision for supervised consumption or needle exchange, however, there has been a notable reduction of pharmacies providing free emergency hormonal contraception.

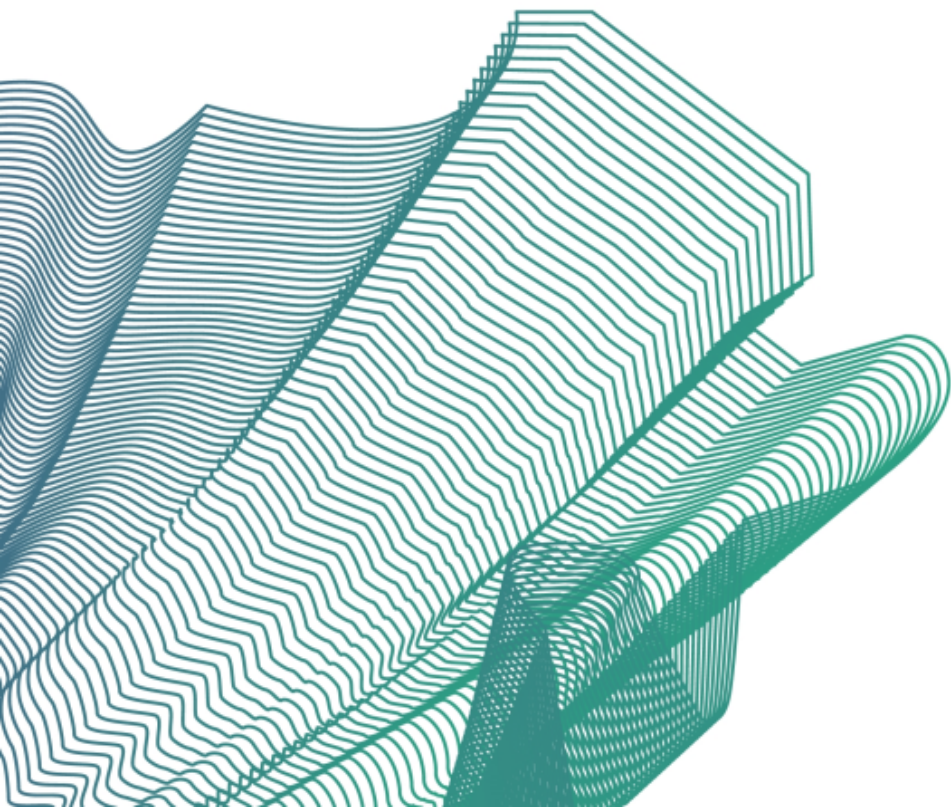
Notification of future pharmacy changes will be reviewed by the pharmaceutical needs assessment steering group members, chaired by the Public Health Intelligence Principal, and will be notified to the Health and Wellbeing Board as appropriate.

It is recommended that the Health and Wellbeing Board note the reduction in out-of-hours pharmacy opening hours, and the reduction in pharmacies providing free emergency hormonal contraception.

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Update on the Prevention and Health Inequalities Strategy

Health and Wellbeing Board
6th March 2024



Context

- Our Prevention and Health Inequalities Strategy and (live) Action Plan was first adopted in **April 2022**
- Rotherham's Place Plan was refreshed last year, with prevention and health inequalities now being a crosscutting workstream rather than an 'enabler'
- Although the action plan has always been live, work has taken place to take stock of where we are and ensure alignment with the Place Plan and other key strategic documents

People in Rotherham live well for longer

Strengthen our understanding of health inequalities

Improve the understanding of health inequalities in Rotherham

Ensure that partners have access to bespoke data products

Ensure that data around health inequalities informs commissioning, decision-making and service-delivery

Develop the healthy lives prevention pathway

Reduce the prevalence of smoking in Rotherham and narrow the gap between our most and least deprived communities

Increase the proportion of people in Rotherham who are a healthy weight

Reduce alcohol-related harm for people in Rotherham

Support older people in Rotherham to retain their independence and age well

Support the prevention and early diagnosis of chronic conditions

Reduce the health burden of cardiovascular disease in Rotherham

Improve the management of diabetes

Reduce the health burden of chronic respiratory disease in Rotherham

Increase the proportion of cancer diagnoses made at stage 1 or stage 2

Ensure people get support with their mental health at the earliest possible stage

Tackle clinical variation and promote equity of access and care

Narrow the gap in maternity outcomes for ethnic minority women and women from deprived communities

Reduce premature mortality for people with learning disabilities, autistic people and those with severe mental illnesses

Improve access to social prescribing for ethnic minority communities

Mitigate against digital exclusion

Harness partners' roles as anchor institutions

Improve the health and wellbeing of our workforce across the place partnership

Employ people from deprived communities and inclusion groups in Rotherham

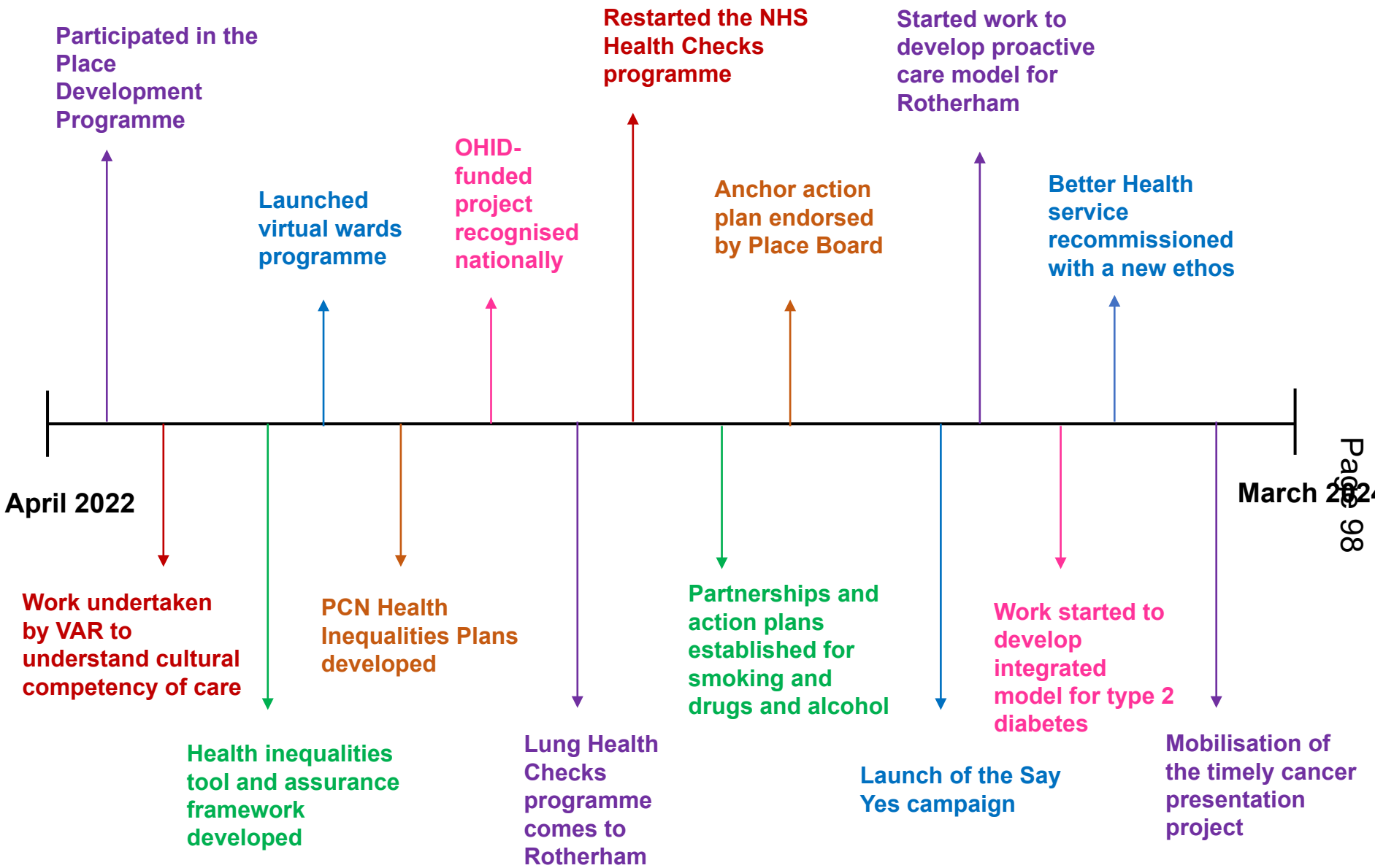
Increase our local spend to support Rotherham's economy

Reduce our environmental impact

Advocate for prevention across the wider system

ROTHERHAM

ROTHERHAM PLACE PARTNERSHIP | HEALTH AND SOCIAL CARE



Key messages from engagement with partners

- Already have a strong framework - the five priorities still feel like the right ones to focus the action plan around
- Funding, resources, capacity
- Need to be clear on our focus
- Lived experience and community intelligence/engagement
- Reaching our underserved communities
- Assurance of the inclusivity of our universal offer
- The complexity of the system and question of how we support frontline staff to navigate this
- Emphasis on personalisation and a holistic approach – focussing on both mental and physical health

1. Deliver against the clinical areas in the Core20Plus5 and Prevention High Impact Intervention frameworks.
2. Develop our approach to Population Health Management in Rotherham, including supporting the development of tools, reporting, data-sharing arrangements, resources and approaches based on evidence of need.
3. Strengthen our approach to personalisation in Rotherham.
4. Prevent and delay care needs through technology-enabled care.
5. Embed strengths-based approaches to social care in Rotherham to increase self-care, reduce social isolation and promote independence.
6. Develop our proactive care model.
7. Raise awareness around our local prevention offer and promote self-management through delivery of the Say Yes campaign. *Link with Comms and Engagement Enabler Group*
8. Review our prevention pathway with the aim of reducing duplication and improving the inclusivity of our offer for Plus groups (including people with SMI and LD.)
9. Build exercise into long-term conditions pathways.
10. Explore opportunities to make our health and social care services more inclusive for people living in poverty.
11. Increase the representation of ethnic minority communities at every level of our workforce, with a focus on recruitment, retention and progression. *Link with Workforce and OD Enabler Group*
12. Build the understanding of our collective workforce around prevention and health inequalities to support us to make every contact count. *Link with Workforce and OD Enabler Group*

Progress since September

- Expansion of the outcomes framework and health inequalities tool to incorporate profiles for our Core20Plus5 clinical areas and ethnic minority communities.
- Engagement with over 1200 people with LTCs in Maltby and Dinnington.
- Launch of the Say Yes campaign following approval at PLT.
- Delivery of the Better Health service seeing positive early outcomes and feedback from both service-users and professionals.
- Partnership working around the development of an integrated service model for diabetes, including a prevention workstream.
- Recruitment underway to establish a Prevention Team within Adult Social Care.
- Mobilisation of the timely cancer presentation project.
- Rollout of cultural competency training within primary care.
- Engagement with partners around chronic pain.
- Work underway to expand the remit of the Healthy Hospitals programme within TRFT.



Next steps

- Recommission the falls prevention service and use learning to inform the development of the wider exercise in clinical pathways programme.
- Undertake a self-assessment against the national personalisation model and understand areas for improvement in Rotherham.
- Continue to engage local people in Maltby and Dinnington and present insights to Place partners and key stakeholders.
- Review services and roles across health and social care that contribute to prevention through social prescribing (and other complementary enablers.)
- Deliver against the Say Yes action plan and evaluate impact.
- Work with the Workforce and OD Enabler Group to build the understanding of the workforce around prevention and health inequalities and on EDI.
- Develop stronger links with RMBC Housing, building on successes such as work to address damp and mould.

Recommendations

That the Health and Wellbeing Board:

- Notes the update on the Prevention and Health Inequalities Strategy.
- Endorses the next steps that have been outlined.

Contact

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Strategic Physical Activity Update

March 2024

Gilly Brenner, Consultant in Public Health

Chris Siddall, Head of Sport, Leisure and Strategic Partnerships

Nick Wilson, Development Manager, Yorkshire Sport

Sport England Place Expansion

- Rotherham chosen for Sport England Place Expansion Programme.
- National programme £190m of investment on an additional 80-100 places which have greatest need.
- Recognition of readiness of the Moving Rotherham Board partnership
- Acknowledgement of the progress of the partnership, strength of relationships, strategic recognition of the importance of physical activity and its inclusion in a range of key strategies



Next steps

- Sport England and LGA facilitated Systems Leadership training for Moving Rotherham partnership members in Rotherham
- Review data and engagement findings to develop Theory of Change model and refresh Moving Rotherham Action Plan
- Application for development bid stage of Place Partnership Expansion programme



Active Champions

- Women's Euro legacy programme
368 hours of volunteer time contributed.
- Training to social prescribers / link workers to increase awareness of benefits of physical activity and confidence.
- A new Sport and Physical Activity subgroup for Rotherham Children's Capital of Culture.
- South Yorkshire Mayor visit to Rotherham Parkrun.



Active Environments

- Uplift festival
- Rotherham 10K
- Rotherham Show Moving Rotherham zone
- The Opening School Facilities Fund
- Sport England Swimming Pool Support Fund
- Leisure Centre success stories
- Herringthorpe Stadium refurbishment.
- PlayZone facilities
- British Orienteering mapping and events
- Cycle lane infrastructure improvements
- 26 Primary schools working with Modeshift Stars



Active Communities

- Bikeability training
- Bike Hub bike loans, bikes checked and bike training
- The Rotherham Healthwave physical activity sessions
- RUCT community sessions, including Active Through Football
- Training to care home activity coordinators
- £53,567 awarded to community groups through Sport England Together Fund



Active Communications

- The RotherHive website includes 'moving more' section and a local activity finder.
- The Say Yes prevention campaign was launched at Rotherham Show with 'Say Yes to joining in' with the activities.

<https://rotherhive.co.uk/moving-more/>



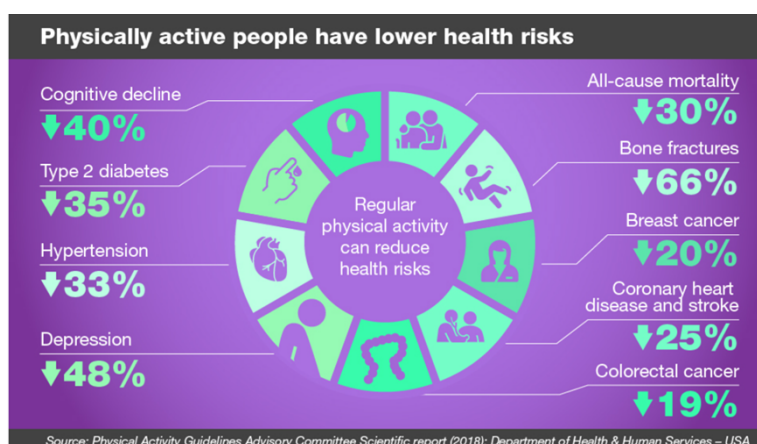
Recommendations

- To note the update in this report
- To note the intention to update the action plan in light of the recently announced Sport England Place Expansion funding opportunities
- That members of the Health and Wellbeing Board champion opportunities for physical activity across the system, recognising its value in reducing inequalities and improving health and wellbeing outcomes and continue to identify opportunities to incorporate physical activity into organisational and borough strategic plans and delivery

BRIEFING	TO:	Health and Wellbeing Board
	DATE:	6 th March 2024
	LEAD OFFICER	Gilly Brenner, Consultant in Public Health Chris Siddall, Head of Sport, Leisure and Strategic Partnerships Nick Wilson, Development Manager, Yorkshire Sport
	TITLE:	Strategic approach to physical activity update

Background

- 1.1** Physically active people have better health and wellbeing outcomes. Inactivity is distributed unequally with higher rates of inactivity in areas of deprivation, across certain demographic groups and in those with long-term health conditions. Inactivity in Rotherham is greater than the national average, with almost 1 in 3 inactive (<30 min/week). Improvements in physical activity levels across the population would reduce the health risks associated with prematurely developing long-term conditions and would improve healthy life expectancy which contributes to wider economic benefits, such as a healthier workforce¹.



- 1.2** An increased focus on wider physical activity in Rotherham began with the Local Authority Healthy Weight Declaration which was signed in January 2020. A strategic review of physical activity then took place in July 2021 with a broad range of stakeholders involved in visioning and developing a plan of action. This culminated in a final Big Active Conversation workshop in January 2023. From this approach an action plan was shared with Health and Wellbeing Board in March last year. The over-arching actions identified through this work are overseen by the Moving Rotherham Board, under which sits a Wider Physical Activity and Health Subgroup and a separate set of working groups under the theme of Sports, Facilities and Events. The priorities of Moving Rotherham are summarised under the themes: *Active Champions, Active Environments, Active Communities and Active Communications*.
- 1.3** This report summarises the range of achievements and progress over the last year and the intentions for the coming year. It should be noted that this is just a snapshot of some of the key work across partners and cannot cover the breadth or totality of the expansive work on this agenda.

Key Issues

¹ [Health matters: physical activity - prevention and management of long-term conditions - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/health-matters-physical-activity-prevention-and-management-of-long-term-conditions)

2.1	<p>Sport England Place Expansion Programme</p> <p>Rotherham has been recognised as a place for investment as part of the Sport England Place Expansion Programme.² The national programme includes £190m of investment allocated to be focused on an additional 80-100 places which have greatest need.</p> <p>We have received feedback that our selection for this programme was based on a range of factors including low activity levels in particular areas of the borough, but also in recognition of the readiness of the Moving Rotherham Board partnership to maximise this investment opportunity. In early discussions with Sport England there was strong acknowledgement of the progress of the partnership, the strength of relationships, the strategic recognition of the importance of physical activity and its inclusion in a range of key strategies and the unique opportunity arising from physical activity being strongly embedded into the Cultural Strategy and plans for the Children's Capital of Culture programme.</p> <p>Key areas of success since March 2023</p>
2.2	<p>Active Champions</p> <ul style="list-style-type: none"> • The Women's Euro legacy programme has provided events across Rotherham with 368 hours of volunteer time contributed. • Training has been provided to social prescribers / link workers to increase awareness of benefits of physical activity and confidence to signpost and support patients into opportunities. Specific new social prescribing offers which include physical activity have been commissioned, including for carers and those with mental health conditions. • A new Sport and Physical Activity subgroup for Rotherham Children's Capital of Culture has met with wide engagement from a range of partners to support delivery of physical activity opportunities as part of this exciting cultural community programme. • As part of his Year of Active Travel and the Mayor's Challenge, the South Yorkshire Mayor has been visiting and championing physical activity opportunities across the region. This included Rotherham Parkrun at Clifton Park on 10th February at which there were 266 participants and 25 volunteers.
2.3	<p>Active Environments</p> <ul style="list-style-type: none"> • Uplift festival in the Town Centre at Easter brought in 4,750 attendees with people taking part in skateboarding as well as watching professional displays and getting involved in other associated arts activities. • Rotherham 10K took place from Clifton Park in May with the biggest ever involvement of children and young people with over 500 taking part in the fun run. • Rotherham Show had over 90,000 visits across the weekend and included a Moving Rotherham zone with participation from families in football, cricket, and exercise classes as well as information, engagement and give aways with a range of partners including RUCT and Places Leisure. • The Opening School Facilities Fund has continued, with £100K funding supporting additional community activities via Rotherham school premises. • Sport England have recently awarded £480K for solar panels to improve sustainability and reduce costs of the swimming pool at Rotherham Leisure Centre • Maltby Leisure Centre has been chosen by Swim England as a Water Polo Talent Centre, one of only 5 nationally, to identify new talent in young people aged under 14 years and under 16 years old.

² <https://www.sportengland.org/news-and-inspiration/place-partnerships-expanded-help-those-greatest-need>

- Aston Leisure Centre was a finalist in the Association for Public Service Excellence (APSE) 'most improved leisure centre' in the country.
- Places Leisure continue to offer free swim and gym passes to looked after children.
- Herringthorpe Stadium has seen a 25% increase in footfall since reopening after refurbishment.
- Match-funding has recently been identified to enable PlayZone facilities, supported by Football Foundation, UK Shared Prosperity Fund, and third-party organisation to create 3 new multi-use sports facilities outdoors in areas with highest inequalities.
- British Orienteering have secured funding to map 2 new parks / woodlands in Rotherham and will host at least 2 events during Easter and Summer this year.
- Active Travel Fund improvements to Broom Road are now complete and Sheffield Road improvements are nearing completion.
- Funding from Department for Transport's Transforming Cities Fund has enabled completion of a high quality, direct cycle route between the A633 Manvers Way and Wath town centre, allowing residents and workers easy access between the key employment sites of Manvers and Wath-upon-Deane, via Manvers Way.

2.4 Active Communities

- Over 650 Bikeability training places for children delivered to date since Apr 23, including at SEND schools.
- More than 1,500 visits to the Journey Matters Bike Hub since Apr 23, with over 130 bikes loaned, over 400 bikes checked and over 360 bike training sessions.
- An e-bike pool is now available to staff at Riverside House, enabling booking of bikes for local work-related journeys thereby helping to reduce Council carbon emissions and increase physical activity opportunities.
- The Rotherham Healthwave (new provider of tier 2 weight management services) has provided a new offer for weight management, including physical activity sessions and cooking / healthy eating support. Rotherham United Community Trust are hosting a range of physical activity sessions which are very well attended.
- Additional provision for those now motivated to continue physical activity is in place through a range of additional RUCT sessions, including Active Through Football based in communities.
- Training has been delivered to care home activity coordinators around embedding physical activity opportunities for residents and staff.
- 26 primary schools are working with Modeshift Stars to gain (7) or improve (19) their accreditation for their active travel plans, including 11 new schools joining this year and with over 220 sessions delivered in schools since April 2023.

2.5 Active Communications

- The Rotherhive website now includes a 'moving more' section³ with information available to Rotherham residents on the benefits of physical activity, how to get involved in physical activity locally, including a local activity finder.
- The Say Yes prevention campaign was launched at Rotherham Show with Say Yes to moving more, and conversations with residents about their current levels of activity, activity preferences and any barriers to moving more.

2.6 Ongoing challenges

- The greatest challenge to the transformation and delivery of the Moving Rotherham ambitions remains capacity to deliver the opportunities available. The availability of

³ <https://rotherhive.co.uk/moving-more/>

	<p>funding through the Sport England Place Expansion programme can help address this challenge.</p> <ul style="list-style-type: none"> • A further challenge is the complexity and breadth of the ambition and therefore the large number of key partners involved across the system. Though this is also an opportunity and the good working relationships developed demonstrate the breadth of delivery achieved as summarised in part above. • It is proposed that the action plan shared last year for the Wider Physical Activity and Health subgroup (Appendix 1) is now reviewed in light of the Sport England Place Expansion funding and combined into a single Moving Rotherham plan.
Key Actions and Relevant Timelines	
3.1	Sport England are facilitating a Rotherham-based 2-day Systems Leadership Training session for a range of stakeholders involved in Moving Rotherham. This is in recognition of the importance of a strong system for delivering the transformation required to increase population levels of physical activity. This is in planning for late April/early May.
3.2	Following this, further work will be done to submit a development award bid to Sport England in the first stage of the Place Expansion programme. This will support increased capacity to be able to bring together and drive the breadth of activity relevant to this agenda. As part of the preparation for this award bid, further work will be done to develop a good understanding of the data and to review and consolidate a single action plan for Moving Rotherham.
Implications for Health Inequalities	
4.1	<p>Tackling inactivity will have a direct impact on tackling health inequalities. Those who are the least active are more likely to be from demographic groups who experience the greatest inequalities in health, such as those with disabilities (37% inactive compared to 18.2% with no disabilities) or living in more deprived communities (40.6% inactive in most deprived decile compared to 16.8% in least)⁴.</p> <p>Regular physical activity provides a range of physical and mental health, and social benefits, many of which are increasing issues for individuals, communities and society. These include:</p> <ul style="list-style-type: none"> • reducing the risk of many long-term conditions • helping manage existing conditions • ensuring good musculoskeletal health and reducing risk of falls • developing and maintaining physical and mental function and independence • supporting social inclusion and reducing loneliness • helping maintain a healthy weight • reducing inequalities for people with long-term conditions
Recommendations	
5.1	That members of the Health and Wellbeing Board note the update in this report.
5.2	That members of the Health and Wellbeing Board note the intention to update the action plan in light of the recently announced Sport England Place Expansion funding opportunities.

⁴ [Health matters: physical activity - prevention and management of long-term conditions - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/health-matters-physical-activity-prevention-and-management-of-long-term-conditions)

5.3	That members of the Health and Wellbeing Board champion opportunities for physical activity across the system, recognising its value in reducing inequalities and improving health and wellbeing outcomes and continue to identify opportunities to incorporate physical activity into organisational and borough strategic plans and delivery.
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Appendix 1 – Update to action plan included, but to be reviewed in light of Sport England funding

MOVING ROTHERHAM - WIDER PHYSICAL ACTIVITY AND HEALTH SUBGROUP ACTION PLAN



This workplan aligns the 4 priorities as previously defined by the Moving Rotherham Board: Active Champions, Active Communities, Active Environments and Active Communications with the 4 priorities identified as part of the strategic physical activity review. Further actions (not included here) are led by the Sports, Facilities and Events Subgroup which also contribute to the overarching Moving Rotherham priorities.

People in Rotherham are proud to live in and contribute to stronger, thriving communities by engaging with physical activity or sport.
 Moving Rotherham will:
 plan, promote and co-ordinate programmes that encourage physical activity or sport to be an everyday part of people's lives.

Moving Rotherham priority	ACTIVE CHAMPIONS <i>Develop skills and knowledge in relation to physical activity across all organisations and services, so that conversations with local people about being active happen as often as possible.</i>	ACTIVE ENVIRONMENTS <i>Help create environments that enable physical activity, whether this is outdoors in green spaces, town centres and local streets, or within schools, colleges and workplaces.</i>	ACTIVE COMMUNITIES <i>Bringing people together through physical activity has huge potential in helping local communities thrive and become vibrant places to live.</i>	ACTIVE COMMUNICATIONS <i>A Rotherham-wide 'social movement' campaign and communications plan, helping to make being active in Rotherham something that everybody does, whether this is taking a few extra steps to open the door to a carer, or running a marathon, and everything in between!</i>
Wider Physical Activity and Health priority	Strengthening social prescribing, including embedding physical activity	Employers supporting the workforce to be active.	Normalising physical activity / building a social movement	Front line workers confident to talk about and signpost to physical activity

Ref	Action	Timescale						Notes
		2023/4				2024/	2025+	
		Q1	Q2	Q3	Q4	2025		
A	Active Champions							
1	Embedding physical activity into social prescribing							
1.1	Physical activity options are readily available for social prescribers to support people to access. These are person centred and appropriate for a range of needs and preferences.				X			Activity tracker on RotherHive and training, plus additional commissioning has helped clarify offers.
1.2	Embedding the benefits of physical activity for mental and physical wellbeing into conversations to enable signposting and support from the full range of social prescribing/link worker roles	X				X		Training provided to link workers in Jan 24. Evaluation of impact of training scheduled for 3m post.
1.3	Creative commissioning to facilitate activity – move towards longer-term commissioning bringing stability to provision, including community hubs as active places and some NHS resources transferred to activity providers.						X	Further development required as part of Sport England bid.
2	Promoting physical activity through community champions							
2.1	Wider voluntary sector MECC training to support volunteers and workforce to signpost and promote physical activity.	X	X			X		Some MECC training delivered but wider programme planned as part of Sport England bid.
3	Promoting physical activity through workplace champions							
3.1	South Yorkshire-based workforce training package developed through ICB and YSF. Looking at clinical pathways and signposting opportunities.		X					YSF training delivered to link workers. PACC training in development across SY.
3.2	Care Home staff training to embed physical activity into daily provision for residents and wider opportunities eg care home Olympic event		X					Care Home support ongoing, including training to activity coordinators delivered.
3.3	Physical activity clinical champions training - physical activity training for healthcare professionals available.				X	X	X	PACC Training being reviewed by University of Sheffield team. Rotherham involved in evaluation and design.
4	Monitoring progress of strategic physical activity work							

Ref	Action	Timescale						Notes
		2023/4				2024/	2025+	
		Q1	Q2	Q3	Q4	2025		
4.1	Develop a dashboard to monitor physical activity levels in the borough and achievement of action plan		X					Current dashboard to be reviewed in line with new action plan for Sport England bid.
4.2	Wider Physical Activity and Health Subgroup oversees implementation of action plan	X	X	X	X	X	X	Good engagement from partners in the subgroup.
B	Active Environments							
1	Employers supporting the workforce to be active							
1.1	Employers encourage staff to take a break and walk, walking meetings, lunchtime group walks then lunch away from desks, include being active in regular away days.				X	X	X	Wider workforce to be considered in Sport England action plan review.
1.2	Ensuring physical activity promoted through BeWell@work scheme	X			X	X	X	Review of bewell@work scheme submissions to understand impact on activity levels being undertaken.
1.3	Developing ways of improving and promoting leisure offers to Rotherham workforces.	X						Wider workforce to be considered in Sport England action plan review.
1.4	Training for workplaces around the benefits of supporting employees' physical wellbeing eg school staff	X	X	X	X	X		Session already provided to PHSE leads. Wider work to be considered in Sport England action plan review.
2	Safer, open green and blue spaces							
2.1	Ongoing development of Rother Valley and Thrybergh Country Parks	X	X	X	X	X		Development plans continue though rising costs have necessitated reviews.
2.2	Promotion of Rotherham's open, green and blue space and ideas for use eg maps and routes and walk leader opportunities		X	X				Consider wider opportunities under action plan review.
2.3	Conduct perception studies on use of outdoor space - by different demographics eg gender, ethnicity, age.		X					Combine Better Health and other engagement findings in action plan review.
2.4	Improvements to Rotherham sports facilities led through Sports, Activity and Events subgroup.				X	X	X	See achievements in paper. Continued focus in action plan review.

Ref	Action	Timescale						Notes
		2023/4				2024/	2025+	
		Q1	Q2	Q3	Q4	2025		
3	Incorporating activity into travel							
3.1	Promotion of Modeshift stars to schools and supporting them to create travel plans.		X					See achievements in paper. Continued focus in action plan review.
3.2	Developing Rotherham Council commuting information to promote and support active travel options eg bike rental, cycle to work scheme and maps		X					Working group overseeing review of Council Travel Plan.
3.3	Promotion of facilities and recreation for walking and cycle routes			X	X			Increased information available on RotherHive including cycle paths map.
C	Active Communities							
1	Normalising physical activity in schools							
1.1	Create/renew Rotherham Schools Physical Activity Network / Conference				X			Ongoing. Integrate into reviewed action plan including subgroup on Children's Capital of Culture.
1.2	Provide opportunities to be physically active across the curriculum and deliver high quality P.E and out-of-hours activities		X					Ongoing. Integrate into reviewed action plan.
2	Normalising physical activity in health settings and provision							
2.1	Videos commissioned and created for online use for patients with long-term conditions as part of personalisation work		X	X				Not yet completed, but online content included in falls prevention exercise programme contract recommission specification.
2.2	TRFT Healthy Hospital Programme to champion physical activity for health throughout the Trust.	X		X				In progress, staffing changes have delayed broader implementation.
3	Normalising physical activity through events or provision							

Ref	Action	Timescale						Notes
		2023/4				2024/	2025+	
		Q1	Q2	Q3	Q4	2025		
3.1	Working with local communities to sustain their projects through training and support with policies and process etc.	X	X	X	X			Some positive project successes including Together Fund projects and Active through Football. Wider approach required in action plan review with Sport England bid capacity.
3.2	Support local communities with funding for setting up and maintaining local physical activity projects.	X	X	X	X			
D	Active Communications							
1	Moving Rotherham communication plan							
1.1	Develop a yearly comms plan including social media campaign and broadening reach a wider audience.			X				Say Yes campaign launched but Sport England bid to increase opportunities for capacity to expand.
2	Facilitate effective signposting to physical activity opportunities							
2.1	Develop and produce an online Rotherham activity finder which will be up-to-date, and everyone can contribute to and access.				X			Activity provider on Rotherhive. Potential for wider roll out with increased capacity in Sport England bid.
3	Facilitate networking and collaboration between physical activity champions							
3.1	Investigate opportunities for hosting Rotherham online network for routine sharing of things resources.			X				Not completed. To be considered as part of Sport England bid capacity.
3.2	Annual networking event for Moving Rotherham showcasing what has been achieved and bringing partners together to celebrate.			X				Workshop planned as update on Sport England bid, action plan review and Systems Leadership training.

Update on the Rotherham Combatting Drugs Partnership

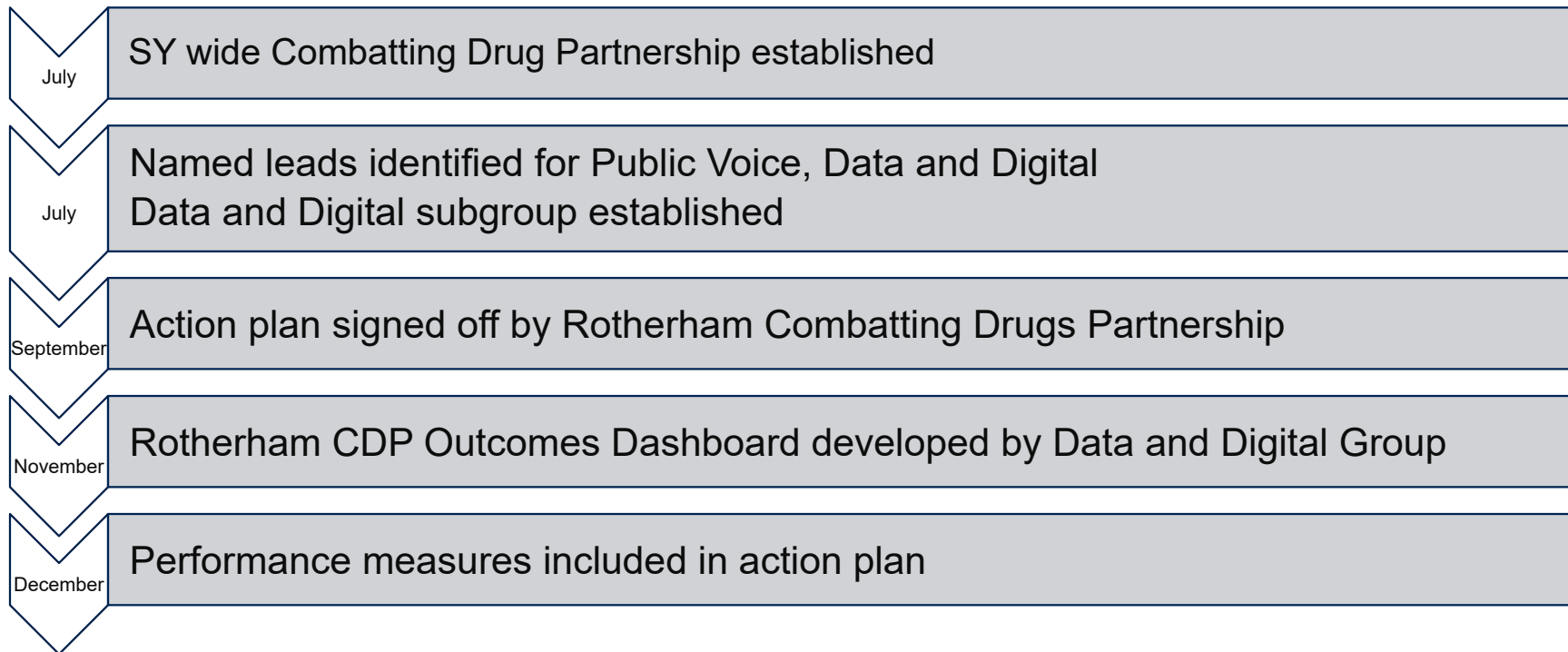
Health and Wellbeing Board

6th March 2024

Context

- The Rotherham Combatting Drugs Partnership was established in September 2022
- The partnership aims to work together across the system to deliver the aims of the National 10 Year Drug Strategy: From Harm to Hope, at a local level
 - Break drug supply chains
 - Deliver a world class treatment system
 - Achieve a shift in the demand for drugs

Rotherham CDP progress since 03/24



Rotherham Combatting Drugs Partnership: Working together to combat illegal drug use in Rotherham

Prepare

to build community resilience to reduce the impact of drug harm

- Facilitate improved information sharing including with IT systems
- Equip workers by providing education for professionals
- Develop Combatting Drugs Communications and Engagement Strategy

Prevent

to stop individuals becoming involved in drugs and support recovery and reduce harm when they do

- Develop continuity of care in criminal justice pathway
- Develop whole family approach
- Develop wider support offer and capacity for increased numbers for alcohol and drugs treatment/support

Protect

to protect those in treatment and recovery, their families and the wider community

- Develop and Deliver Harm Reduction offer
- Reduce drug related deaths
- Implement dual diagnosis pathways and improved psychological support.
- Develop and implement recovery pathway

Pursue

to reduce drug supply and related crime and bring perpetrators to justice

- Continue effective pursue response working with partners
- Develop focus on county lines/ exploitation of children in line with child exploitation strategy
- Disrupt organised crime

Key progress against action plan:

Prepare

- A local outcomes framework has been developed to measure progress against the National Combatting Drugs Outcomes Framework
- Local Drug Information System (LDIS) panel has been established to collate, evaluate and respond to intelligence concerning potent, novel or adulterated substances
- A range of drug and alcohol training sessions have, and continue, to be delivered to upskill the wider public health workforce
- Stock of educational resources have been procured and distributed to schools and higher education alongside appropriate training from the Rotherham Alcohol and Drugs Service (ROADs)

Key progress against action plan:

Prevent

- New substance misuse early help team in the family hubs began taking referrals in August enhancing early identification and access to specialist services for parents
- Work has continued to implement the revised pathway for access into detoxification and rehabilitation, enabling more individuals to benefit and increase successful treatment outcomes
- New posts are now in place in the sexual health service, working with the drugs and alcohol service to identify new clients and enhance the service offer in both services
- Drinkcoach was procured and live since April 2023. Drinkcoach is an online commissioned service that allows people to assess their drinking and receive personalised advice and support online including free coaching sessions

Key progress against action plan:

Protect

- ROADS have developed their harm reduction offer including providing Naloxone training to partners to help prevent opiate deaths
- SYP Police Drug and Alcohol Related Death Prevention Coordinator Role successfully recruited to and now supporting work improving local intelligence systems to reduce harms from drugs
- ROADS established as public involvement lead, developing plans to ensure a range of voices are heard throughout the work of the CDP
- VAR have been commissioned to develop an independent Recovery Community in Rotherham. This includes the creation of public forums and lived experience champion roles and managing recovery grants to community groups. This work will provide support for people at various stages of recovery, enabling them improve their lives and reducing the risk of relapse.

Key progress against action plan:

Pursue

- Additional 3 Drug expert witnesses are now in place to support the investigation of drug offences with appropriate knowledge, skills and experience
- To ensure effective intelligence management additional SYP Threat and Harm meetings are now chaired by the force drug lead
- Operation GROW, partnership approach to cannabis, continues to be successful
- A new Serious and Organised Crime Tasking Group to discuss intelligence relating to OCG members is now in place to set actions set at a partnership level

CDP outcomes framework: Measuring progress against the national strategy

Break drug supply chains

The number of moderate and major disruptions against organised criminals

The drug trafficking and possession

Hospital admissions for assault with a sharp object

Number of county lines closed

Deliver a world class treatment and recovery system

Numbers in treatment

Continuity of Care (those leaving prison entering community treatment within 3 weeks)

Number of drug related deaths

Hospital admissions for drug poisoning

Hepatitis C prevalence for those who inject drugs

Achieve a shift in the demand for drugs

Estimated prevalence of opiate and/or crack use

Homelessness duty owed with a drug dependency need

The number of Children in Need with concerns about drug misuse

Proportion of those in both mental health and drug treatment (where a mental health need has been identified)

Asks of the Health and Wellbeing Board

- Note the progress against the action plan
- Support the work of the Partnership

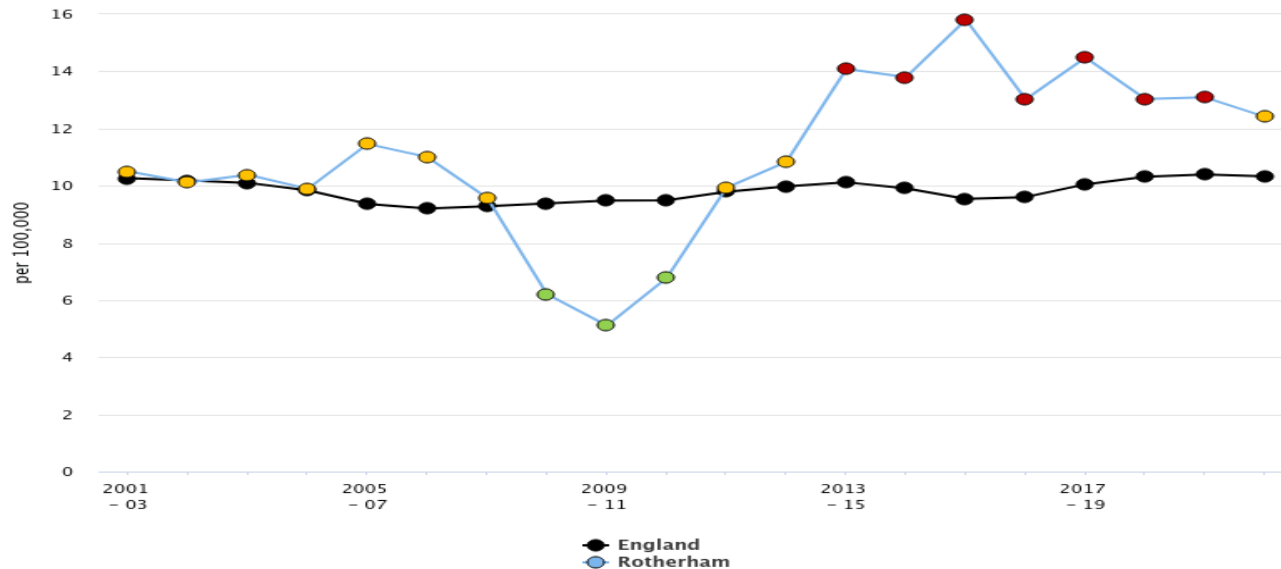
Suicide Prevention Update

6th March 2024

Ruth Fletcher-Brown
Public Health Specialist

Rotherham (All person suicides)

Suicide rate (Persons) for Rotherham

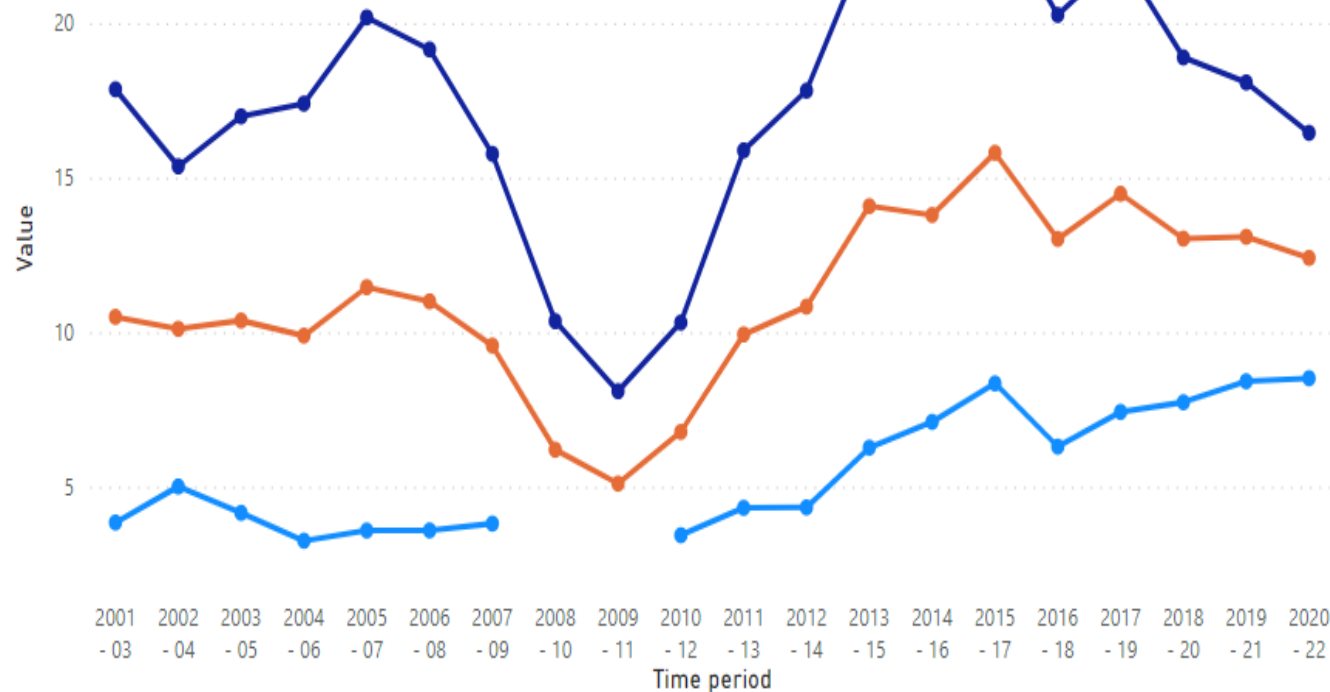


ONS data

2020-2022
rate for
Rotherham is
12.4 per
100,000
compared to
10.3 for
England

Suicide rate - directly standardised rate per 100,000

Sex ● Female ● Male ● Persons



Time period	Female	Male	Persons
2001 - 03	3.85	17.86	10.50
2002 - 04	5.01	15.37	10.11
2003 - 05	4.16	16.99	10.38
2004 - 06	3.26	17.40	9.89
2005 - 07	3.59	20.19	11.46
2006 - 08	3.59	19.15	11.00
2007 - 09	3.81	15.77	9.57
2008 - 10	3.44	10.36	6.20
2009 - 11	4.32	8.10	5.11
2010 - 12	4.34	10.32	6.78
2011 - 13	4.32	15.88	9.93
2012 - 14	4.34	17.82	10.83
2013 - 15	6.27	22.76	14.08
2014 - 16	7.10	21.15	13.80
2015 - 17	8.35	23.84	15.81
2016 - 18	6.30	20.27	13.02
2017 - 19	7.42	22.17	14.48
2018 - 20	7.74	18.89	13.03
2019 - 21	8.42	18.08	13.09
2020 - 22	8.51	16.45	12.41

Area	Recent Trend	Neighbour Rank	Count	Value		95% Lower CI	95% Upper CI
England	—	-	15,415	10.3		10.2	10.5
Calderdale	—	9	90	16.7		13.4	20.5
Darlington	—	14	45	15.9		11.6	21.3
Wakefield	—	3	149	15.8		13.2	18.3
Barnsley	—	4	99	15.4		12.5	18.8
St. Helens	—	5	73	15.2		11.9	19.1
Doncaster	—	1	118	14.7		12.0	17.3
Bury	—	8	70	14.0		10.9	17.1
Wigan	—	2	115	13.3		10.9	15.7
Rochdale	—	10	72	12.6		9.8	15.9
Rotherham	—	-	86	12.4		9.9	15.1
Kirklees	—	6	134	11.9		9.9	14.0
Telford and Wrekin	—	13	53	11.1		8.3	14.5
Gateshead	—	12	57	11.0		8.4	14.3
Bolton	—	15	83	10.9		8.7	13.5
Dudley	—	7	83	9.9		7.9	12.3
Tameside	—	11	50	8.3		6.2	11.0

What's working well- Rotherham

- Male rate for suicide is now statistically similar at 12.4 per 100,000 to the average for England (10.3)
- Continued promotion of Place Guidance document for staff and volunteers on responding to people at risk of suicide
- Bespoke training for VSC organisations
- Chronic pain workshop held with Partners in February 2024.
- Suicide awareness training running for staff across Place from January to March 2024.
- RotherHive- promoting additional topics like pain management & mental health over the life course
- Suicide Awareness session in Safeguarding Awareness week, November 2023
- Refresh of the Sudden and Traumatic Bereavement Pathway for children and young people
- Early Intervention and prevention work- as evidenced in the Prevention Concordat application
- Joint working with domestic abuse colleagues to look at actions for risk groups
- Peer to peer support groups (Survivors of Bereavement by Suicide, Andy's Man Club and ASK)
- Qwell and Kooth promoted to the public and staff

What's working well- South Yorkshire

- Strong partnership working- all 4 LAs, SYP, NHS and Voluntary and Community Sector
- New appointment for the SYP Suicide Prevention Officer
- Third memorial event for families bereaved by suicide in December 2023
- Survivors of Bereavement by Suicide groups (SOBS) operating well in all 4 LA areas
- Amparo will launch an all-age service in April 2024
- Chilypep commissioned to explore models of peer support for young people
- Chronic pain workshop in July 2024
- Reducing access to means
- Joint working on themes and addressing the needs of vulnerable and at-risk groups.

What are we worried about

- Increasing pressure on individuals and families
- Real time data has seen higher than usual numbers of suspected suicides in early 2024
- Certain themes coming through the Real Time Data system
- Rising numbers of female deaths to suicide
- Launch of the Attempted Suicide Prevention service

What needs to happen next and when

- Staff to attend the suicide awareness training (January to March 2024)
- Staff to complete Zero Suicide training if face to face training is not an option (ongoing)
- Place guidance document to be updated (March 2024)
- Launch of the Attempted Suicide Prevention service (March 2024)
- Promotion of Zero Suicide Alliance Training to the public (Spring 2024)
- Targeted work on themes and vulnerable groups identified through real time data (ongoing)
- Promotion of mental health support to children, young people and adults in Rotherham (ongoing)
- Targeted Comms campaigns as part of Be the One (spring 2024)
- Full review action plan to be completed by end of 2024.

Rotherham Suicide Prevention and Self Harm Action Plan 2024

‘Be the one to Talk, Listen and Care’

Introduction

In 2022, there were 5,642 suicides registered in England and Wales (10.7 deaths per 100,000 people); this is consistent with 2021 (5,583 deaths; 10.7 per 100,000).

- Around three-quarters of suicides registered in 2022 were males (4,179 deaths; 74.1%), equivalent to 16.4 deaths per 100,000.
- The rate for females was 5.4 deaths per 100,000 in 2022, consistent with rates between 2018 and 2021.
- Among females, the age-specific rate was highest in those aged 50 to 54 years (7.8 deaths per 100,000); in 2021 the highest rate was in those aged 45 to 49 (7.7 deaths per 100,000).
- Among males, the age-specific rate was highest in those aged 90 years or over (32.1 deaths per 100,000), followed by those aged 45 to 49 (23.0 deaths per 100,000).

[Office of National Statistics \(ONS\): Suicides in England and Wales: 2022 registrations](#)

'The effects can reach into every community and have a devastating impact on families, friends, colleagues, and others. Each one of these deaths is a tragedy. Every local area, whether its own suicide rate is high or low, should make suicide prevention a priority.' ([Local suicide prevention planning: A practice resource, 2020](#))

Suicide is not inevitable. It is often the end point of a complex history of risk factors and distressing events; the prevention of suicide must address this complexity. Suicide prevention is everybody's responsibility and cannot be left to the remit of one agency/organisation.

National strategy

The first National Strategy was published in 2012. A new national strategy was launched in 2023 to build on this work, the aims are:

- reduce the suicide rate over the next 5 years – with initial reductions observed within half this time or sooner.
- continue to improve support for people who self-harm.
- continue to improve support for people who have been bereaved by suicide.

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

The Strategy has the following priority areas:

- Improve data and evidence.
- Provide tailored and targeted support to priority groups.
- Address common risk factors.
- Promote online safety and responsible media content.
- Provide effective crisis support across sectors.
- Reduce access to means and methods.
- Provide effective bereavement support.
- Make suicide everybody's business.

The Strategy highlights the following priority groups:

- Children and young people
- Middle aged men
- People who have self-harmed
- People in contact with mental health services
- People in contact with the criminal justice system
- Autistic people
- Pregnant women and new mothers

The Office of Health Improvement and Disparities (OHID) will be refreshing local suicide prevention plan guidance to support the development of local plans in line with national priorities, including guidance on providing bespoke support to demographic groups and communities of concern. This should be complete by the end of 2024. Considering this and the late publication of the Office of National Statistics data, this action plan has been refreshed with a full update will be completed by the end of 2024.

The [DHSC Strategy](#) and [Action Plan](#) can be viewed here.

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Suicide prevention is a priority area within the South Yorkshire Integrated Care System (ICS) and joint working is taking place across the ICS to address the following areas:

- Supporting children, young people and adults bereaved and affected by suicide.
- Clear comms messaging across South Yorkshire.
- ICB members leading by example in relation to best practice.
- Using information from the Real Time Surveillance System to develop specific actions which address vulnerable and at-risk groups and high-risk locations.
- Specific actions within settings like prisons.

Locally suicide prevention is a priority area within the Rotherham Place Plan and Health and Wellbeing Board Strategy.

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

This plan outlines the actions Rotherham organisations are implementing to prevent suicides from both the national strategy and PHE guidance. This plan will be updated at the end of 2024 when the Office of Health Improvement and Disparities has produced the framework for local implementation framework.

Governance arrangements

Rotherham takes suicide prevention seriously. The multi-agency Rotherham Suicide Prevention and Self Harm Group meets quarterly and is tasked to implement this plan.

Partners represented on the Rotherham Suicide Prevention and Self-Harm Group include:

- Andy Mans Club
- Cabinet Member for Adult Care, Housing and Public Health (Also Chair of the Health and Wellbeing Board)
- NHS South Yorkshire, ICB- Rotherham (SY ICB)
- RDaSH (mental health provider)
- Rotherham NHS Foundation Hospital Trust

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

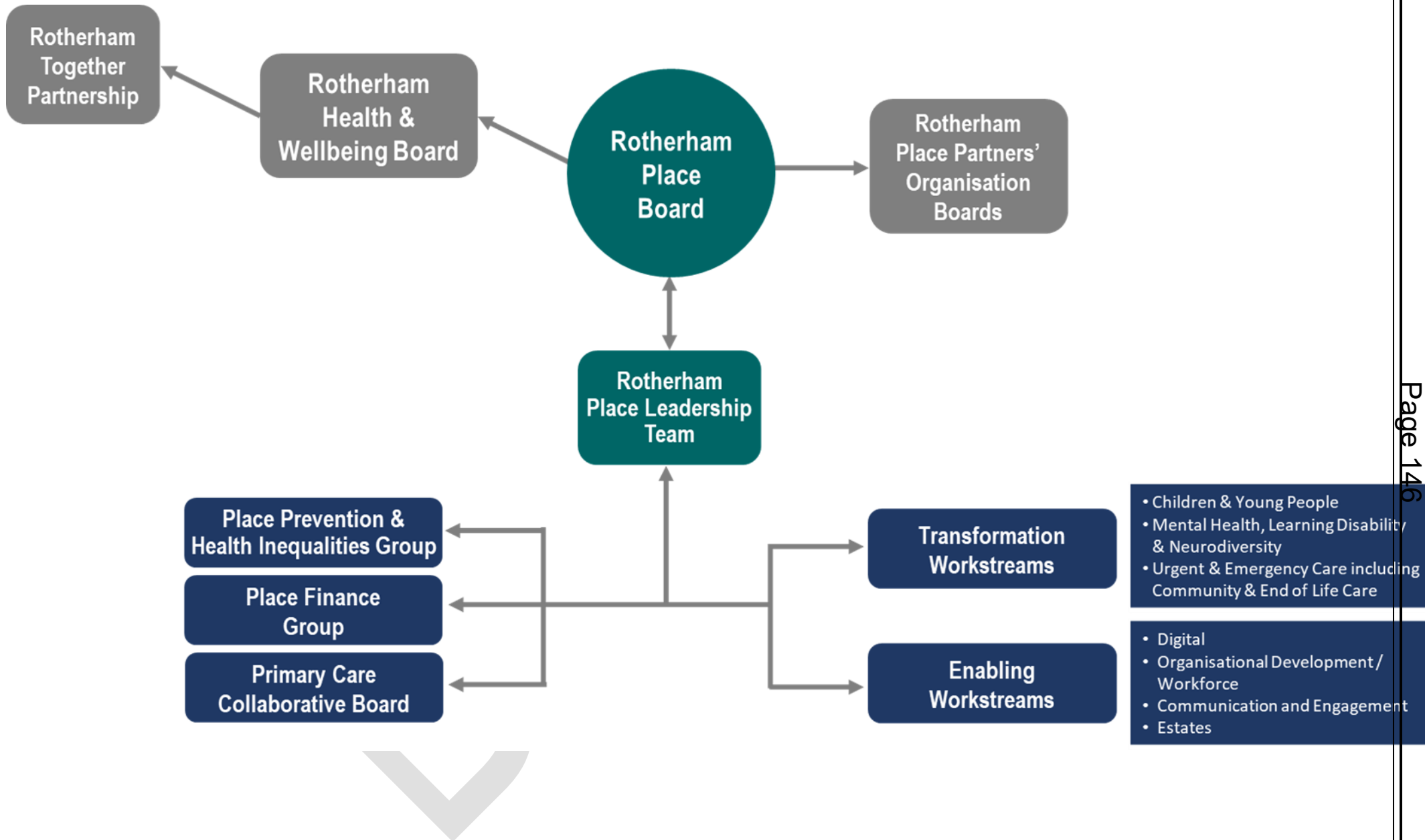
- RMBC- Adult Care, Housing and Public Health
- RMBC Children and Young People's Services
- RMBC Communications
- Rotherham MAST/Maltby Academy (Multi Agency Support Team) Strategic Leader
- Rotherham Samaritans
- Rotherham United Community Trust (RUCT).
- South Yorkshire Police
- We are With You, Rotherham Drug & Alcohol Service

The Suicide Prevention Operational Group meets every six weeks to review real time data chaired by Public Health Specialist- Lead for Suicide Prevention and Head of Service – Safeguarding and Mental Health, Adult Social Care. Members of this group include NHS, SYP, Drug and Alcohol Services, Adult Care, Children and Young People's services and domestic abuse services.

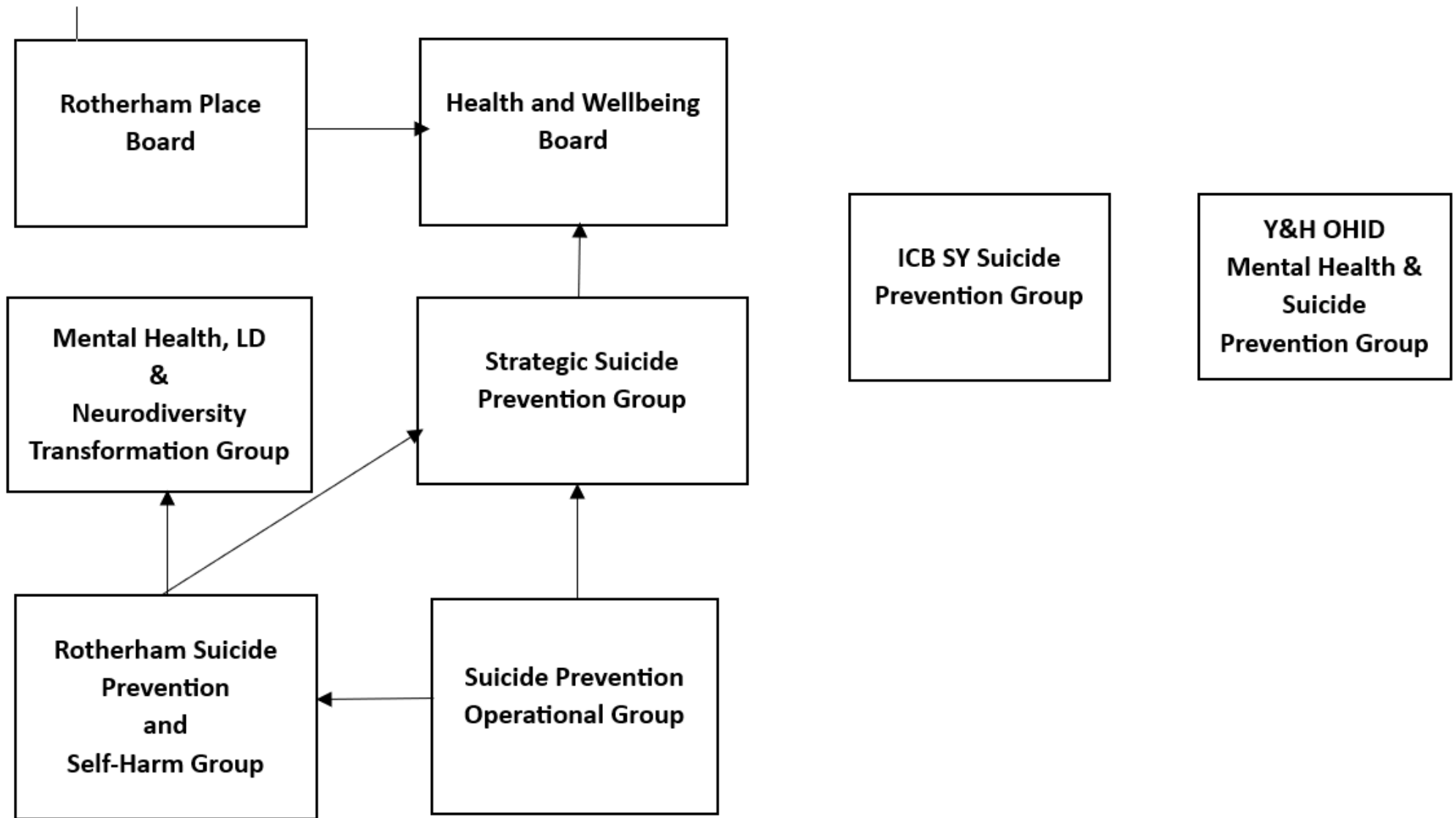
There is a Strategic Suicide Prevention Group, chaired by Director of Public Health, which ensures that prompt action is taken in response to real time data and the resourcing of necessary actions is available.

Progress against this action plan is reported monthly to the Rotherham Mental Health, Learning Disability and Neurodiversity Transformation Group, a subgroup of the Rotherham Place Plan Board. Annual updates are given to the Rotherham Health and Wellbeing Board. Issues are escalated as and when required to the Mental Health, Learning Disability and Neurodiversity Transformation Group and Strategic Suicide Prevention Group chaired by the Director of Public Health. The diagrams on pages 5 & 7 show the reporting structure for suicide prevention.

Rotherham Suicide Prevention and Self-Harm Action Plan 2024



Rotherham Suicide Prevention and Self-Harm Action Plan 2024



Rotherham Suicide Prevention and Self-Harm Action Plan 2024

National Picture

In 2022, 5,642 suicides were registered in England and Wales, equivalent to an age-standardised mortality rate (ASMR) of 10.7 deaths per 100,000 people. This rate remains the same as 2021. Suicide rates decreased in 2020 and increased in 2021, likely because of both [decreases in male suicides at the start of the coronavirus \(COVID-19\) pandemic](#) and delays in death registrations because of the pandemic.

Males continued to account for three-quarters of suicide deaths registered in 2022 (4,179 male deaths; 1,463 female deaths), a trend seen since the mid-1990s.

In 2022, the suicide rates for males (16.4 deaths per 100,000) and females (5.4 per 100,000) were consistent with rates between 2018 and 2021.

[\(Office for National Statistics: Suicides in England and Wales: 2022 registrations\)](#)

Regional Picture

By English region, the North East, North West, Yorkshire and The Humber, and the South West regions had higher rates compared with the overall England and Wales rate. The highest rate was in the North East (12.8 deaths per 100,000 people), although this decreased compared with 2021 (14.2 deaths per 100,000 people). The lowest rate in 2022 was in London (7.0 deaths per 100,000 people), which was statistically lower than any English region.

South Yorkshire

Suicide rate per 100,000 2020-2022	Barnsley	Doncaster	Sheffield	Rotherham
Person	15.4 (14.9 in 2019-2021)	14.7 (15.1 in 2019-2021)	10.0 (11.5 in 2019-2021)	12.4 (13.1 in 2019-2021)

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Male	24.5 (24.2 in 2019-2021)	20.4 (21.6 in 2019-2021)	14.7 (18 in 2019-2021)	16.5 (18.1 in 2019-2021)
Female	6.8 (6.0 in 2019-2021)	9.0 (8.7 in 2019-2021)	5.4 (5.3 in 2019-2021)	8.5 (8.4 in 2019-2021)

Local picture- Rotherham Data

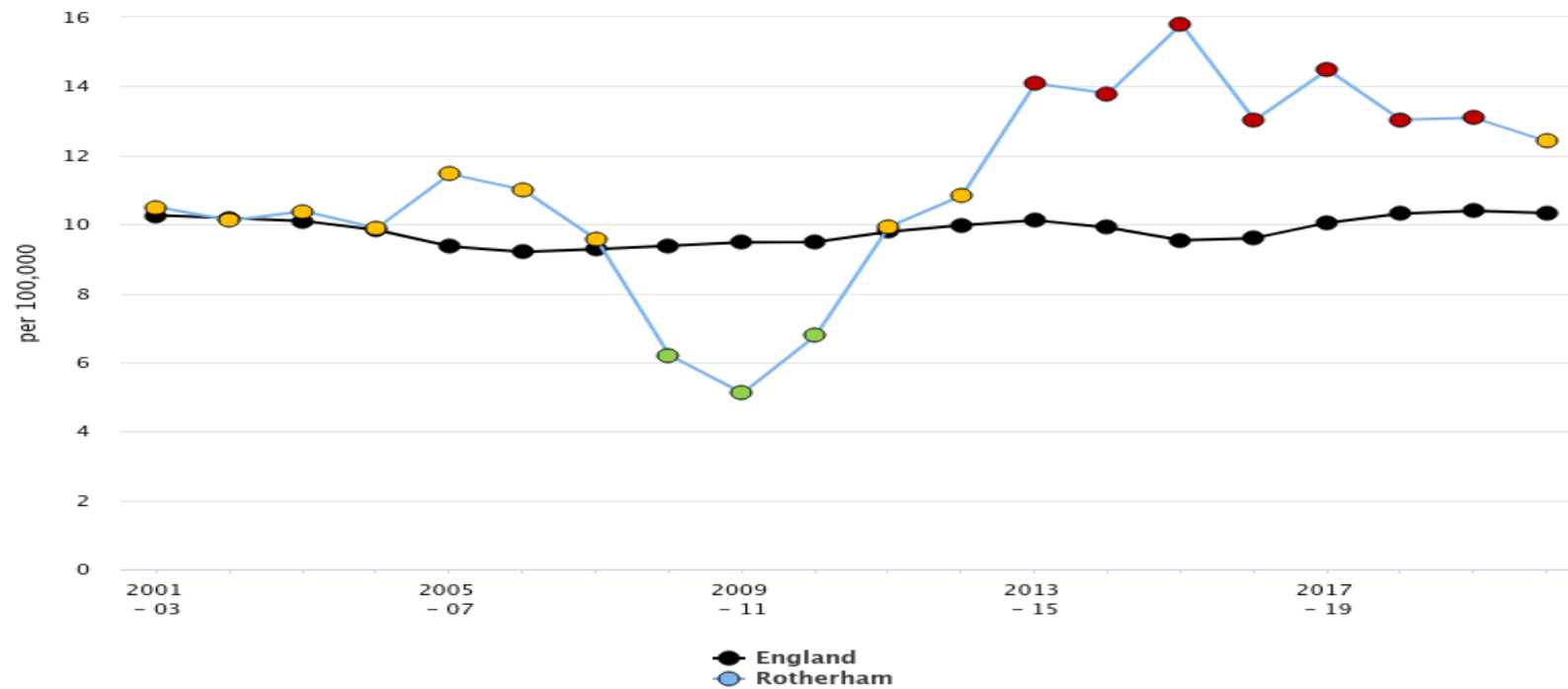
➤ **Suicide Rate Persons**

The latest suicide data shows that Rotherham has seen a small decrease in suicides from 13.1 in 2019-2021 per 100 000 to 12.4 in 2020-2022, which is now statistically similar to the average for England at 10.3 per 100,000.

Rotherham ranks 6th compared to CIPFA Nearest Neighbour local authorities.

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Suicide rate (Persons) for Rotherham



Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Suicide rate (Persons) **New data** 2020 - 22

Directly standardised rate - per 100,000

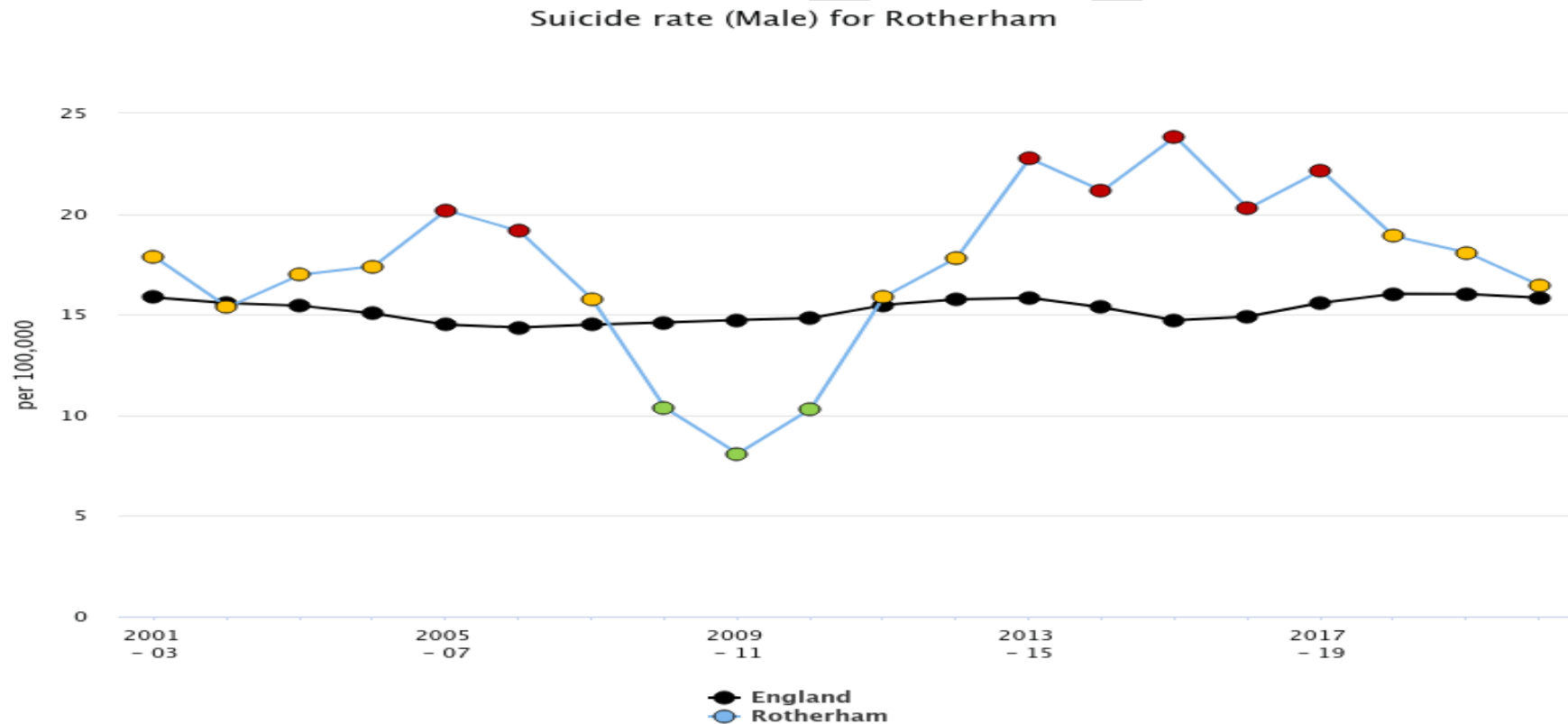
Area	Recent Trend	Count	Value		95% Lower CI	95% Upper CI
England	—	15,415	10.3		10.2	10.5
Yorkshire and the Humber region	—	1,731	12.1		11.5	12.6
Calderdale	—	90	16.7		13.4	20.5
Wakefield	—	149	15.8		13.2	18.3
Barnsley	—	99	15.4		12.5	18.8
Doncaster	—	118	14.7		12.0	17.3
York	—	69	12.9		10.0	16.3
Rotherham	—	86	12.4		9.9	15.3
Kirklees	—	134	11.9		9.9	14.0
Leeds	—	251	11.9		10.4	13.4
Kingston upon Hull	—	84	11.8		9.4	14.7
East Riding of Yorkshire	—	105	11.4		9.2	13.7
North Yorkshire UA	—	186	11.4*		9.7	13.0
Bradford	—	142	10.4		8.7	12.1
Sheffield	—	148	10.0		8.3	11.6
North Lincolnshire	—	38	8.7		6.1	11.9
North East Lincolnshire	—	32	8.0		5.4	11.3



Rotherham Suicide Prevention and Self-Harm Action Plan 2024

➤ Gender

Males still account for most of the deaths to suicide in Rotherham. However, the rate has dropped in the period 2020-2021 to 16.5 per 100,000 compared to 15.8 for England and 18.3 for Yorkshire and Humber as a region. Rotherham's rate for male deaths is statically similar to the average for England.



Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Rotherham ranks 12th for male deaths to suicide in the Yorkshire and Humber region in the period 2020-2022.

Suicide rate (Male) **New data** 2020 - 22

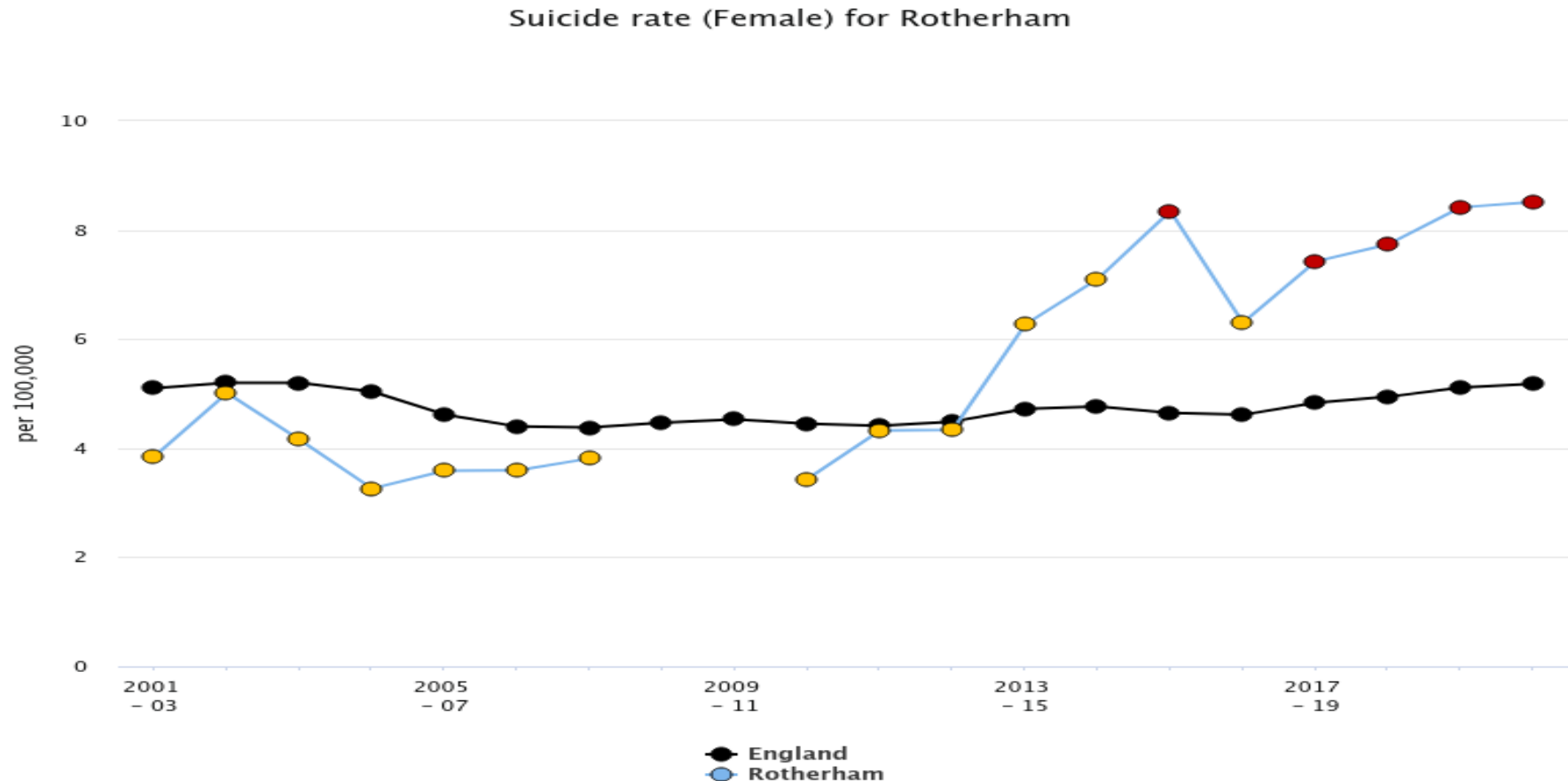
Directly standardised rate - per 100,000

Area	Recent Trend	Count	Value		95% Lower CI	95% Upper CI
England	—	11,443	15.8		15.5	16.1
Yorkshire and the Humber region	—	1,280	18.3		17.3	19.3
Calderdale	—	76	29.0		22.9	36.4
Barnsley	—	76	24.5		19.3	30.8
Wakefield	—	107	23.1		18.7	27.5
Doncaster	—	82	20.4		16.2	25.4
York	—	51	19.6		14.6	25.9
Kirklees	—	105	19.1		15.5	22.8
North Yorkshire UA	—	146	18.5*		15.5	21.6
Kingston upon Hull	—	65	18.3		14.1	23.4
East Riding of Yorkshire	—	77	17.4		13.6	21.8
Leeds	—	171	16.5		14.0	19.0
Bradford	—	109	16.5		13.3	19.6
Rotherham	—	56	16.5		12.4	21.4
Sheffield	—	106	14.7		11.9	17.6
North Lincolnshire	—	30	14.1		9.5	20.1
North East Lincolnshire	—	23	12.0		7.5	18.0

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

➤ Female deaths

Female deaths in Rotherham, whilst still lower than males have been significantly worse than the national average for England since 2017-2019. The rate in 2020-2022 is now 8.5 per 100,000, compared to 5.2 for England and 6.1 for Yorkshire and Humber.



Rotherham ranks 3rd for female deaths in the Yorkshire and Humber region in the period 2020-2022.

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Better 95% Similar Worse 95% Not compared

Recent trends: — Could not be calculated — No significant change ↑ Increasing & getting worse ↑ Increasing & getting better ↓ Decreasing & getting worse ↓ Decreasing & getting better

Suicide rate (Female) **New data** 2020 - 22

Directly standardised rate - per 100,000

Area	Recent Trend	Count	Value		95% Lower CI	95% Upper CI
England	—	3,972	5.2		5.0	5.3
Yorkshire and the Humber region	—	451	6.1		5.6	6.7
Doncaster	—	36	9.0		6.3	12.5
Wakefield	—	42	8.8		6.3	11.9
Rotherham	—	30	8.5		5.7	12.2
Leeds	—	80	7.5		6.0	9.4
Barnsley	—	23	6.8		4.3	10.3
York	—	18	6.4		3.7	10.2
East Riding of Yorkshire	—	28	5.9		3.8	8.7
Kingston upon Hull	—	19	5.5		3.3	8.6
Sheffield	—	42	5.4		3.9	7.3
Kirklees	—	29	5.1		3.4	7.2
Calderdale	—	14	5.0		2.8	8.5
Bradford	—	33	4.6		3.1	6.4
North Yorkshire UA	—	40	4.5*		3.2	6.2
North East Lincolnshire	—	9	*		-	-
North Lincolnshire	—	8	*		-	-

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

The following shows the rates across all Local Authority areas in the Yorkshire and Humber region and compares them to the national average for the period 2020-2022. The second diagram compares Rotherham for All Person Suicides to statistically similar Local Authorities:

Indicator	Period	England	Yorkshire and the Humber region	Barnsley	Bradford	Calderdale	Doncaster	East Riding of Yorkshire	Kingston upon Hull	Kirklees	Leeds	North East Lincolnshire	North Lincolnshire	North Yorkshire UA	Rotherham	Sheffield	Wakefield	York
Suicide rate (Persons) New data	2020 - 22	10.3	12.1	15.4	10.4	16.7	14.7	11.4	11.8	11.9	11.9	8.0	8.7	11.4*	12.4	10.0	15.8	12.9
Suicide rate (Male) New data	2020 - 22	15.8	18.3	24.5	16.5	29.0	20.4	17.4	18.3	19.1	16.5	12.0	14.1	18.5*	16.5	14.7	23.1	19.6
Suicide rate (Female) New data	2020 - 22	5.2	6.1	6.8	4.6	5.0	9.0	5.9	5.5	5.1	7.5	*	*	4.5*	8.5	5.4	8.8	6.4

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Suicide rate (Persons) **New data** 2020 - 22

Directly standardised rate - per 100,000

Area	Recent Trend	Neighbour Rank	Count	Value		95% Lower CI	95% Upper CI
England	—	-	15,415	10.3		10.2	10.5
Neighbours average	—	-	-	-		-	-
Calderdale	—	8	90	16.7		13.4	20.5
Wakefield	—	2	149	15.8		13.2	18.3
Barnsley	—	4	99	15.4		12.5	18.8
St. Helens	—	3	73	15.2		11.9	19.1
Doncaster	—	1	118	14.7		12.0	17.3
Bury	—	15	70	14.0		10.9	17.7
Wigan	—	5	115	13.3		10.9	15.7
Rochdale	—	12	72	12.6		9.8	15.9
Rotherham	—	-	86	12.4		9.9	15.3
Telford and Wrekin	—	11	53	11.1		8.3	14.5
Walsall	—	9	74	10.3		8.1	12.9
Dudley	—	6	83	9.9		7.9	12.3
Halton	—	7	32	9.3		6.4	13.2
North Lincolnshire	—	10	38	8.7		6.1	11.9
Tameside	—	13	50	8.3		6.2	11.0
Oldham	—	14	51	8.3		6.2	10.9



SUICIDE AUDIT FINDINGS



AIMS

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The purpose of this audit was to use information collected by Coroner's to explore suicides locally



WHAT DID WE FIND?

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Some of the things we found we knew about already from the national picture, such high numbers of white, middle-aged males from areas of higher deprivation.



METHODS

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We developed a standardised data collection form and worked closely with local Coroners and their staff.



NO SUICIDE IS THE SAME

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We were however struck by how the characteristics and circumstances of those who died differed. No suicide was the same and it can affect a wide range of people in different periods of their lives.



WHO & WHEN?

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We looked at 157 suicides from 2018 and 2019 of people who lived in Sheffield, Doncaster, Rotherham, Barnsley and Bassetlaw.



RED FLAGS?

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Those who died were often facing a combination of difficulties around the time of their death such as physical or mental health problems, difficulties with drugs or alcohol and life stressors such as relationship issues.



WHY?

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Every death by suicide is a tragic loss of life. We hope to use information collected in this way to try to guide our prevention work.



WHAT CAN BE DONE?

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The results of this audit will be used to inform local prevention strategies and we will continue to collect more information over time to improve our local knowledge of suicide.

South Yorkshire and Bassetlaw suicide audit: Summary of overall Findings

Basic Demographics:

- 79% were male.
- The mean age was 48 years.
- There was a similar mean age for males and females.
- 45 to 52 years of age was the most common age range (25%)
- Mostly white ethnicity (96%) and born in the UK (85%)

In summary:

- Over half of the people who died had one or more existing chronic or long-term health condition.
- A history of alcohol problems was mentioned in more cases than substance misuse.
- Many of those who died had received a diagnosis of a mental health problem at some point in their lives according to reports from their GP, mental health team or witness accounts.
- The life events were relationship issues (37.2%); housing issues (22.1%); work-related stressors (20.0%) and non-specific financial difficulties (17.9%) in the period prior to death.

Rotherham data:

- 88% were male.
- 40.7 % lived in most deprived area followed by 33.3% for second most deprived.
- 61% had a long-term health condition.
- 72% had any mental health condition.
- 33.3% were recorded as having a history of problems with alcohol.
- 45.5% had previously attempted to take their own life.
- 21.2% had self-harmed.
- 45.5 % had consulted with their GP in the 3 months prior to their death.
- 58.3% had consulted with their GP about their mental health.
- The life events were relationships issues, work related, housing issues, financial difficulties child protection related, bereavement and armed forces.

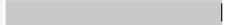
















Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Self-harm- National, Regional Picture and Local Picture

Hospital admissions due to intentional self-harm are similar to the average for England. Hospital admissions are often just the tip of the iceberg and do not reflect self-harm prevalence rates within the wider community.

Emergency Hospital Admissions for Intentional Self-Harm 2021/22

Directly standardised rate - per 100,000

Area	Recent Trend	Count	Value		95% Lower CI	95% Upper CI
England	–	93,895	163.9		162.8	164.9
Yorkshire and the Humber region	–	8,070	146.7		143.5	149.9
Barnsley	–	630	268.7		248.0	290.7
Wakefield	–	615	179.3		165.3	194.1
Kingston upon Hull	–	450	164.4		149.4	180.4
Calderdale	–	330	162.0		144.9	180.6
Doncaster	–	480	160.4		146.4	175.5
North Yorkshire UA	–	905	158.6*		148.4	169.5
York	–	340	155.3		138.9	173.1
Sheffield	–	825	143.3		133.5	153.5
Bradford	–	825	142.5		132.8	152.7
North East Lincolnshire	–	210	139.4		121.0	159.8
Rotherham	–	345	133.5		119.7	148.4
North Lincolnshire	–	215	133.0		115.6	152.3
Kirklees	–	535	122.8		112.6	133.7
Leeds	–	1,040	121.4		114.0	129.1
East Riding of Yorkshire	–	325	102.9		91.8	115.0

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Achievements in the 2022-2023 action plan

- [Be the One](#) campaign refresh in 2022.
- [Zero Suicide Alliance Training](#) has been promoted to all Health and Wellbeing Board Partners.
- A suicide prevention workshops were held during Safeguarding Awareness weeks in 2022 and 2023.
- Bespoke suicide prevention training has been delivered to Adult Care staff and SYP Sergeants.
- From January to March 2024, 12 training courses will have been delivered for frontline staff.
- Rotherham held a learning event on suicide prevention and domestic abuse in early 2023.
- [Walk with Us](#)- a toolkit for young people bereaved by suicide was launched in South Yorkshire in 2022. This was coproduced by young people with living experience working with Chilypep, a South Yorkshire young people empowerment project. It has been shared across the country and received recognition at the Local Government Chronicle Awards winner first prize in the Public/Public Partnership Award in June 2023. The resource was distributed to all Rotherham schools, child providers, Early Help and Voluntary and Community Groups.
- Refresh of the Sudden and Traumatic Bereavement Pathway for children and young people in 2023.
- [RotherHive](#), a resource for adults to access for information and advice on their mental health, has been expanded to cover other areas like pain management, keeping mentally well and mental health and life stages.
- Promotion of the Five Ways to Wellbeing messages to help people to adopt ways to look after their mental wellbeing.
- Alongside Rotherham Suicide Prevention, a review of adult social care mental health has identified ways to strengthen the crisis pathway and discharge from acute care through intervention to meet unmet social care needs. This will improve the prevention and recovery offer for people with mental-ill health.
- [Amparo](#), the SY service for those bereaved, affected and exposed to suicide has been promoted in Rotherham and staff across Place have attended awareness sessions.
- Three Memorial events for people bereaved by suicide have been held for people living in SY, 2021, 2022 and 2023. Rotherham has hosted all three Memorials.

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Helpful resources on suicide prevention

[Office of Health Improvements and Disparities, Fingertips Public Health Data: Suicide Prevention Profile](#)

[Public Health England, \(2019\), Identifying and responding to suicide clusters: A practice resource](#)

[Public Health England \(2020\) Local suicide prevention planning: A practice resource](#)

[Public Health England, \(2015\), Preventing suicide in public places: a practice resource](#)

[Public Health England \(2016\), Support after a suicide: A guide to providing local services](#)

[Support After Suicide Partnership, Help is at Hand](#)

The following action plan should be read conjunction with the following plans which support action to address the wider determinants:

- Rotherham Loneliness Action Plan
- Rotherham Better Mental Health for All Action Plan
- Rotherham Prevention and Health Inequalities Strategy and Action Plan
- Rotherham Domestic Abuse Action Plan

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Aim 1. Reducing the number of suicides amongst people receiving mental health support from across all organisations

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
1.1 To have a whole system approach to suicide prevention within acute and community mental health services. RDASH to update	<p>To implement Rotherham Doncaster and South Humber NHS Foundation Trust</p> <p style="text-align: center;">KEEPING SAFE KEEPING WELL</p> <p>Suicide Prevention Action Plan 2019 – 2021</p> <p>This action plan is being updated and the plan will continue to be implemented.</p>	RDaSH	Action Plan will be reviewed annually through the Mortality Surveillance Group chaired by the Executive Medical Director.	<p>A reduction in the number of suicides amongst people receiving mental health support:</p> <ul style="list-style-type: none"> Plan focusses on zero suicide for inpatients. Part of a Place based ambition to of a 10% reduction. 	
1.2 Staff across the health, SYP, VCS, and social care system are equipped to identify and support people at risk of suicide.	<p>1.2.1 Refresh and promotion of the Place guidance sheet to enable staff to deal with suicidal ideation.</p> <p>1.2.2 Promotion and adoption of the Zero Suicide Alliance Training.</p> <p>1.2.3 Promotion of RotherHive, Be the One,</p>	<p>1.2.1. & 1.2.2 PHS, RMBC & RDASH to update the guidance sheet.</p> <p>Place Comms and Engagement and Safeguarding leads across Place to promote.</p> <p>1.2.3 PH staff through MECC training. SY ICB Rotherham- MH</p>	<p>Guidance sheet refreshed and updated March 2024.</p> <p>Zero Suicide Alliance Training promoted via guidance sheet and through Be the One from April 2024.</p> <p>Briefing sessions for health and social care</p>	<p>A reduction in the number of suicides amongst people receiving mental health support:</p> <p>Number of staff trained across the sectors.</p> <p>Staff feeling more confident and knowledgeable.</p>	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
	<p>Hub of Hope, Amparo, to health and social care.</p> <p>1.2.4 Training programme for suicide prevention and self-harm promoted during 2024/25 with a focus on VCS and primary care.</p> <p>1.2.5 Bespoke training sessions for HWB Partners utilising themes from real time data. (SYP, primary Care, Social Care Staff).</p>	<p>Commissioning. Safe guarding leads and Safeguarding Champions/</p> <p>1.2.4 PHS & Learning and Development, RMBC.</p> <p>1.2.5 PHS, MH Lead Safer Neighbourhood Service, Head of Service – Safeguarding and Mental Health Adult Social Care (RMBC)</p>	<p>staff on RotherHive March 2024 onwards.</p> <p>Training programme launched July 2024.</p>	<p>Increasing number of visits to local websites Be the One and RotherHive website.</p>	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Aim 2. To maintain support to those bereaved and affected by suicide.

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
2.1 To provide support and early intervention to children and young people bereaved by suicide.	<p>2.1.1 To review with Partner organisations, the Child Bereavement pathway, brief all organisations and upload onto Tri-x.</p> <p>2.1.2 To continue to offer support to schools following a death by suicide and to review the effectiveness of this offer.</p> <p>2.1.3 To offer training to schools and CYPS practitioners working across the partnership re supporting children, young people and families bereaved by suicide.</p> <p>2.1.4 Amparo to work with CYP services and organisations across HWB Partners to promote the offer of support for children and young people.</p> <p>2.1.5 To continue to address the recommendations at Place from work conducted by Chilypep on the coproduced toolkit 'Walk with Us', to support CYP and families bereaved by suicide and guide organisations to provide appropriate postvention support.</p>	<p>2.1.1 PHS collaborating with partners from RMBC C&YP services, SY Police and CAMHS.</p> <p>2.1.2 EPS will contact schools to offer support and help coordinate a response.</p> <p>2.1.2 Review of offer to schools will be led by EPS and PH. The review will incorporate any feedback from families where this is available.</p> <p>2.1.3 EPS to promote & deliver a suicide bereavement course for CYPS practitioners working across</p>	<p>2.1.1 Review due July 2024.</p> <p>2.1.2 Review of Critical Incident information for schools and settings Sept 2024.</p> <p>2.1.3 Training available upon request from EPS.</p> <p>2.1.4 Amparo to commence delivery of sessions from April 2024.</p>	<p>Children bereaved or affected by suicide receiving appropriate support:</p> <p>Pathway renewed.</p> <p>Organisations to cascade updated pathway to their staff.</p> <p>Updated pathway on Tri-x.</p> <p>Critical Incident information to schools reviewed and updated.</p> <p>Positive feedback from Children, young people, and families.</p> <p>Evidence of CYPS practitioners across partner organisations attending training and measured</p>	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
		<p>partner organisations.</p> <p>2.1.4 Amparo to work with services from April 2024.</p> <p>2.1.5 PHS Lead working with SY colleagues in the ICB Suicide Bereavement Task Group and ICB Comms and Engagement.</p>		<p>improvements in knowledge and confidence.</p> <p>ICS CYPS Toolkit promoted, practitioners understand their role in supporting children, young people and families bereaved by suicide. Referrals to appropriate services.</p>	
<p>2.2 To ensure that timely, coordinated, and appropriate support is provided to adults bereaved and affected by suicide.</p>	<p>2.2.1 To continue to work with PH Leads and Commissioning Leads (SY ICB Rotherham) to contract manage the suicide listening service, Amparo, for adults (CYP from April 2024) living in SY and/or registered with a GP in SY.</p> <p>2.2.2 To promote Amparo across Place organisations with a particular focus on funeral directors, libraries, and Registrars.</p> <p>2.2.3 To promote a Survivors of Bereavement by Suicide Group (SOBS) in Rotherham.</p> <p>2.2.4 To work with SYP - Suicide Prevention Project Support Officer.</p>	<p>2.2.1 PHS Lead & SY ICB Rotherham MH Commissioning Lead, working with SYP and PH Leads across SY.</p> <p>Working with suicide prevention colleagues from across the ICS.</p>	<p>2.2.1</p> <p>2.2.1 Bimonthly contract and performance meetings held between SY ICB Rotherham, PH Leads and the Amparo.</p> <p>2.2.1 Monthly reviews reported to Strategic Suicide Prevention and the Mental Health, Learning Disability and Neurodiversity Transformation Group.</p>	<p>Adults bereaved or affected by suicide receiving appropriate support:</p> <p>Current provision reviewed on a regular basis and changes made where necessary.</p> <p>Positive feedback from people receiving support.</p> <p>SOBS peer group launched and families from Rotherham</p>	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
			<p>2.2.2 Information circulated to Place Partners with a focus on key stakeholder groups April 2024.</p> <p>2.2.2. Promotion of group through channels of communication across Place.</p>	<p>signposted to support.</p> <p>Reports of uptake to Strategic Suicide Prevention and the Mental Health, Learning Disability and Neurodiversity Transformation Group.</p>	
2.3 Frontline staff in contact with families able to offer support and signposting.	<p>Equip frontline staff to be able to offer appropriate support to families they have contact with:</p> <p>2.2.1 Use briefing sessions/newsletters/ internal training, Protected Learning Time Events/ Safeguarding Awareness workshops to promote Amparo and the importance of supporting people after suicide.</p> <p>2.2.2 To collaborate with the Provider to ensure that regular Zoom workshops raising awareness of the service, are available on a regular basis for frontline staff are available.</p> <p>2.2.3 To promote Amparo and SOBS peer support groups on Place websites, Be the One, RotherHive.</p>	<p>Representatives of the Suicide Prevention and Self Harm Group to take this action back to their organisation.</p> <p>Working with Communication Leads from: SY ICB ROTHERHAM, TFRT, RMBC, RDaSH, SYP</p> <p>Collaborating with Amparo and SOBS.</p>	<p>2.2.1 Evidence and reports to SP & SH Group.</p> <p>2.2.1 Services promoted throughout the year at various workshops and training events.</p> <p>2.2.2 Work with Provider at bimonthly contract and performance meetings commencing April 2024.</p> <p>2.2.3 Comms and Engagement Leads</p>	<p>Adults bereaved or affected by suicide receiving appropriate support:</p> <p>Staff distributing the Help is at Hand guide.</p> <p>Staff aware of the Amparo service and SOBS peer support group and know how and when to refer people into this service.</p>	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
	2.2.4 Promote the Help is at Hand guide to all services so that workers can distribute this to families: https://supportaftersuicide.org.uk/support-guides/help-is-at-hand/		to provide reassurance that services are promoted on		
2.4 For partners of the H&WB to lead by good example ensuring that staff who are affected by suicide are offered appropriate support.	2.4.1 All partner organisations to have procedures/policies in place outlining support for staff who are affected by suicide. 2.4.2 Promotion of Amparo Service to staff through staff briefings and Zoom workshops.	2.4.1 Members of the Strategic Suicide Prevention Group to lead this, working with HR Officers. (RMBC, SYP, ICB SY Rotherham, RDaSH, TRFT). 2.4.2 OD/HR within Health and Wellbeing Partner organisations.	Evidence of policies/procedures in place by December 2024.	A reduction in suicides amongst high-risk groups: Sharing of good practice across partner organisations. Evidence of written policies/procedures. Evidence of briefing information given out to managers and staff on availability of support.	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Aim 3. To promote protective factors and good mental health for all

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
3.1 To promote protective factors for children and young people.	To explore opportunities to introduce trauma-based work in all schools so that they become trauma informed and mentally healthy places for all.	RMBC C&YPS collaborating with schools. RDaSH CAMHS RDaSH Trauma and Resilience Service.		Taking appropriate training for schools, communities, and organisations	
3.2 To increase awareness amongst people living and working in Rotherham of the importance of having good mental health.	<p>3.2.1 Promotion of Rotherham Five Ways to Wellbeing Campaign www.rotherham.gov.uk/health and RotherHive and the Wellness Hive https://rotherhive.co.uk/wellness-hive/ to the public through social media.</p> <p>3.2.2 Referencing local campaigns and resources in prevention and early intervention and recovery pathways.</p>	<p>3.2.1 Comms and Engagement Leads</p> <p>3.2.2 All partners of the Health and Wellbeing Board: RMBC, SY ICB ROTHERHAM. TRFT, RDaSH, SYP and voluntary sector.</p>	Ongoing but activity reported to SP & SH Group, Better Mental Health for All Group and Mental Health, Learning Disability and Neurodiversity Transformation Group.	<p>Improved emotional resilience amongst people living and working in Rotherham:</p> <p>A range of initiatives across the borough. Partners evidencing their actions on the activity record sheet.</p> <p>Evidence of pathways referring to early intervention and prevention, evidence-based self-care, and helpful local resources.</p>	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
				<p>Case studies illustrating impact campaign is having.</p> <p>Evidence of campaign message being delivered to health and social care staff.</p>	
3.3 To promote connectedness across the life course.	<p>3.3.1 Focus groups held with vulnerable and at-risk communities re loneliness and mental wellbeing, and what helps.</p> <p>3.3.2 Roll out of Making Every Contact Count (MECC) and loneliness and mental health training</p> <p>3.3.3 Partners of HWB to implement actions within the Rotherham Loneliness Action Plan, 2023-2025.</p>	<p>PHS working with VCS partners</p> <p>Public Health and VAR for MECC mental Health. PH for MECC and loneliness.</p> <p>Ongoing, progress reported to Health and Wellbeing Board annually.</p>	<p>May 2024, report complete.</p> <p>Commencing February for Loneliness training and April for Mental Health training.</p>	<p>Joint Strategic Needs assessment chapter to incorporate findings.</p> <p>Finding incorporated into MECC training.</p> <p>Visibility of these community groups and their needs with Providers, signposting to opportunities to connect.</p> <p>Received loneliness and isolation.</p>	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Aim 4. Reducing suicides amongst high-risk groups by reaching people where they live and work.

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
4.1 To use the real time data to inform practice at a Place level	<p>4.1.1 Suicide Operational Group to continue to review all deaths by suspected suicide and deliver actions which will: address risk factors & groups, prevent contagion, support those affected.</p> <p>4.1.2 To present the real time data at bespoke training sessions for staff, using case studies to generate discussions on actions.</p> <p>4.1.3 To use real time data to update Top Tips for suicide prevention in primary care and other frontline settings.</p>	<p>4.1.1 PHS and Head of Service – Safeguarding and Mental Health, Adult Social Care, will chair Operational Group, memberships will include colleagues from CYPS, Adult Care, Adult Safeguarding, Drug and Alcohol Services, Housing, SYP, VCS, TRFT and RDASH.</p> <p>4.1.2 PHS and Head of Service – Safeguarding and Mental Health Adult Social Care, to coordinate sessions with colleagues from Learning and Development and Operational Group Leads.</p>	<p>4.1.1 Meetings take place every 6 weeks. Reports given to Strategic Suicide Prevention Group.</p> <p>4.1.2 Bespoke sessions delivered through 2024/25. Procurement of external courses from April 2024.</p> <p>4.1.3 Top Tips for Suicide Prevention updated September 2024.</p> <p>4.1.4 Themes discussed at Strategic Suicide Prevention Group and actions agreed. Findings shared with groups like Adult Safeguarding, Domestic Abuse Priority Group</p>	<p>Timely action taken to prevent suicide contagion and ensure that people affected are supported. Preventative actions can be taken.</p> <p>Partners aware of findings of Real Time Surveillance Data, using this knowledge to inform practice both at provider and commissioning levels.</p> <p>Commissioned services and pathways evidence links to suicide prevention actions.</p>	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
	4.1.4 To use real time data to inform local action plans, commissioning intentions and pathways on issues like: domestic abuse, drug and alcohol services and preventative work, debt, and money management.	4.1.3 PHS, Head of Service – Safeguarding and Mental Health Adult Social Care, RDASH Leads. 4.1.4 Members of the Strategic Suicide Prevention Group and Mental Health, Learning Disability and Neurodiversity Transformation Group.			
4.2 To ensure there are robust processes in place to prevent suicide contagion and support all those affected.	<p>4.2.1 Suicide Community Response Plan to be approved by Children and Adults Safeguarding Boards.</p> <p>4.2.2 To run a table top exercise with Partners on the Suicide Community Response Plan.</p> <p>4.2.3 Incorporate learning by exercise and promote plan.</p>	<p>4.2.1 PHS Lead working with Adult and Children's Safeguarding Leads.</p> <p>4.2.2 PHS to work with OHID Lead to plan exercise. Exercise will be attended by members of the Adult and Children Safeguarding Boards and Child Death Overview Panel.</p> <p>4.2.3 PHS and Safeguarding Leads to look at additional</p>	<p>4.2.1 by Summer 2024.</p> <p>4.2.2 Exercise run by August/September 2024.</p> <p>4.2.3 Plan adapted to incorporate learning, September 2024.</p>	Risk of suicide contagion reduced. People bereaved and affected by suicide supported.	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
		learning and amend plan.			
4.3 To equip people living and working to Rotherham to understand how to identify and support someone at risk of suicide.	<p>4.3.1 Continue to build on the success of the Be the One Campaign developing a year comms and engagement plan with a particular focus on:</p> <ul style="list-style-type: none"> - Promoting the Zero Suicide Alliance Training to the public. - Promotion of Amparo and Survivors of Bereavement by Suicide Group. - Promoting the Stay Alive App and hub of Hope - Promotion of the grassroots support to help people at risk of suicide. 	PHS, RMBC and Place Comms Lead working with Place Comms and Engagement Group, Neighbourhood Colleagues and local venues like libraries and community centres. Including the voice of people with Living Experience.	Quarterly updates to Suicide Prevention and & SH Group and the Mental Health, Learning Disability and Neurodiversity Transformation Group	<p>A reduction in suicides amongst high-risk groups:</p> <p>An increase in people understanding how to identify and support someone at risk of suicide.</p> <p>Promotion and uptake of Zero Suicide Alliance online training.</p> <p>Promotion and uptake of Amparo support.</p>	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
4.4 To provide support for those who have attempted suicide.	<p>4.4.1 Pilot the service, 'Our Rotherham' to support people who have attempted suicide and have been assessed and referred by Crisis and Home Treatment Service.</p> <p>4.4.2 Regular performance and monitoring meetings between RMBC Public Health, the Provider and RDASH to review pathways, referrals, data collection, signposting.</p>	4.4.1 RMBC Commissioning, PHS, RDASH and people with lived experience.	Pilot to commence February 2024.	<p>A reduction in suicides amongst high-risk groups:</p> <p>Building emotional resilience and increasing people's coping skills.</p>	
4.5 Increasing people's knowledge, skills and changing attitudes towards people who self-harm.	<p>To roll out a series of awareness raising courses for parents/carers and frontline staff on self-harm awareness.</p> <p>RFB to check Early Help still offer these courses.</p>	<p>L&D and PHS RMBC collaborating with Trainers from partner organisations.</p> <p>(RDASH, Early Help & Housing RMBC, VCS)</p>	Programme of training from September 2024	<p>To reduce self-harm in within the community amongst children, young people, and adults:</p> <p>Qualitative and quantitative evaluations showing an improvement in knowledge and confidence of parents/carers and frontline staff.</p>	

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
4.6 NICE (National Institute for Health and Care Excellence) guidance	4.6.1 To hold local workshop to look at Rotherham's response to self-harm, benched marked against NICE guidance. new (pathways/local guidance/action plans).	PHS Lead, MH Adult Commissioning Lead, ICB Rotherham, Members of the Strategic Suicide Prevention Group	Workshop held September 2024 Production of new pathways/ guidance/action plans in response to this- December 2024.	To reduce self-harm in within the community amongst children, young people, and adults: Staff across the system informed of the new NICE guidance. Individual services reflecting and making changes in line with new NICE guidance.	

Glossary

ICB SY Integrated Care Board, South Yorkshire
 MECC Making Every Contact Count
 ONS- Office of National Statistics
 PH- Public Health
 PHS- Public Health Specialist
 SOBS- Survivors Bereaved by Suicide
 SP & SH- Suicide Prevention and Self Harm Group

Progress Summary

Date of meeting	Actions Outstanding	Lead	Actioned By

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Date of meeting	Actions Outstanding	Lead	Actioned By

Grey	Not due to start
Red	Not on target

Rotherham Suicide Prevention and Self-Harm Action Plan 2024

Amber	Almost achieving target
Green	Achieving Target On track
Blue	Complete

Health and Wellbeing Strategy refresh for 2025

- The current Health and Wellbeing Strategy ends in 2025. With the upcoming Council Plan refresh taking place over 2024, for a 2025 sign-off, it is proposed to align the Health and Wellbeing Strategy refresh process (aligning research, consultation and engagement and priority setting, as appropriate).
- Key documents to consider in development:
- Guidance:
 - Statutory guidance on developing JSNAs and Joint Health and Wellbeing Strategies (JHWBS), setting out the purpose of both to improve health and wellbeing outcomes of the local community and reduce inequalities for all ages. JSNAs and JHWS will form the basis of local commissioning plans, across all local health, social care, public health and children's services.
 - Non-statutory DHSC guidance, setting out the relationship between Health and Wellbeing Boards and ICPs, ensuring that Integrated Care Strategy and Health and Wellbeing Strategy are complementary
- Local and regional strategies/documents:
 - Council Plan 2022-25 (to be refreshed for 2025)
 - Rotherham Plan 2022-25 (to be refreshed for 2025)
 - SY Integrated Care Strategy
 - Current Place Plan
 - Prevention and Health Inequalities Strategy
 - Other local strategies (EDI, Housing, Culture, Neighbourhoods)

Key stakeholders

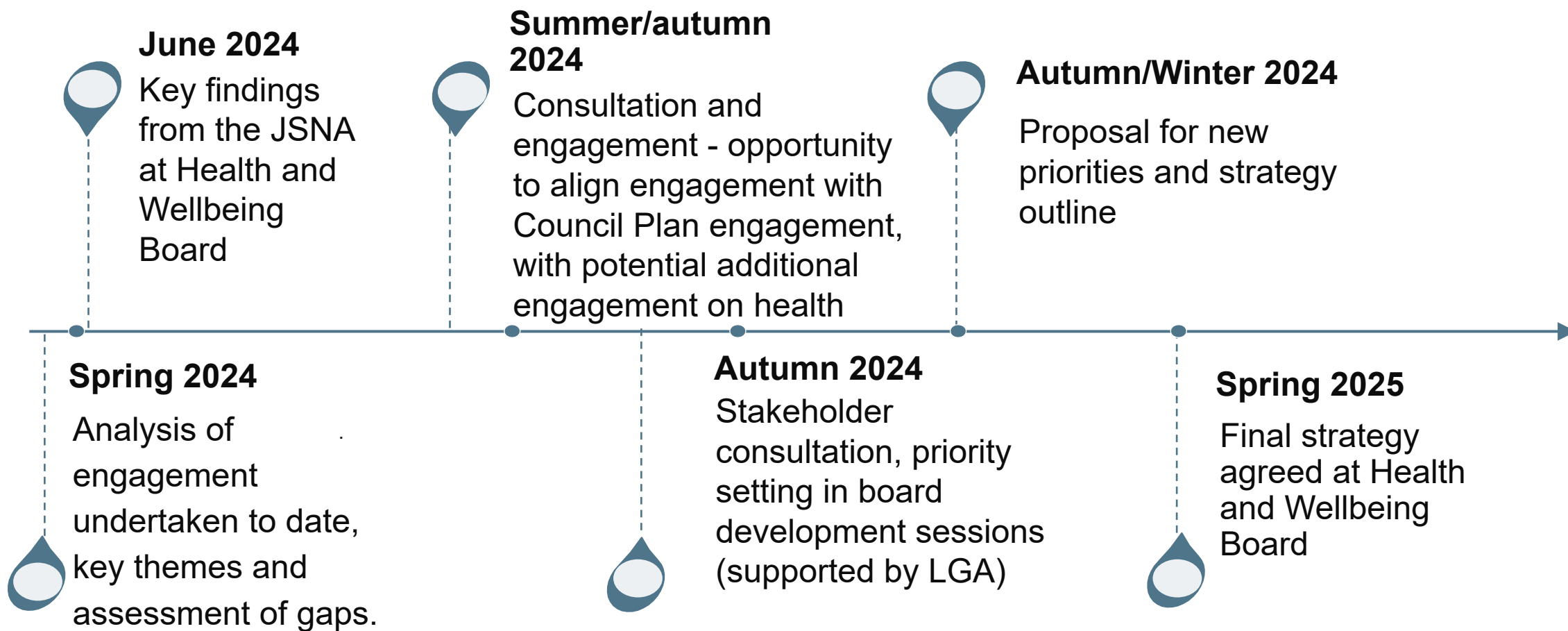
- Health and Wellbeing Board
 - chair and vice-chair
 - exec group
 - aim sponsors
 - full Board
- To maintain alignment to other local priorities/strategies/plans: Cabinet, RTP strategic partnership group, RTP CEO group
- Rotherham ICP reps, SY ICP
- Place Board:
 - To maintain alignment between Health and Wellbeing Strategy and Place Plan, to ensure Place Plan continues to function as the delivery plan for the health and social care section of the Health and Wellbeing Strategy
- Local commissioners
 - To ensure the strategy fulfils its role in guiding commissioning decisions

Rotherham Joint Health and Wellbeing Strategy

A healthier Rotherham by 2025



Draft timetable



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Health and Wellbeing Strategy Action Plan: March 2024 update

Key:

Completed
On track
At risk of not meeting milestone
Off track
Not started

Aim 1: All children get the best start in life and go on to achieve their full potential

Board sponsors: Nicola Curley, Strategic Director of Children and Young People's Services, Rotherham Metropolitan Borough Council and Dr Jason Page, Medical Director for Rotherham Place, South Yorkshire Integrated Care Board

Priority	#	Milestones	Timescale	Lead(s)	BRAG rating	Progress update
Cross-cutting	1.1	Identify gaps, opportunities, system assurance and best practice through the Best Start and Beyond Framework	Ongoing (up to March 2025)	Alex Hawley, RMBC Helen Sweaton, ICB/RMBC		<p>The terms of reference of the group have been revised at the September meeting (25th), to take oversight of Family Hubs funded workstreams to the group's remit and milestones in Place Plan. This fits very well in particular with the focus on the first 1001 days.</p> <p>Meeting frequency has changed to monthly.</p> <p>With the changes to leadership and management of the Family Hubs and Best Start in Life programme, steering group, and task and finish group arrangements and task allocation processes for the remainder of the transformation programme are currently under review, including through a</p>

						partnership-wide Maturity Self-Assessment workshop for the programme on 29 th February.
Develop our approach to give every child the best start in life.	1.2	<p>Continue to implement Breastfeeding Borough declaration, through delivery of Rotherham backs breastfeeding campaign</p> <ul style="list-style-type: none"> • Creating directory of breastfeeding friendly businesses • Explore link to Be Well at Work • Increase number of trained peer supporters by 50% 	October 2024	Sam Longley, RMBC, TBC, TRFT		<p>Work ongoing with the Rotherham Backs Breastfeeding Campaign – Business packs have been produced and promotion to commence January 2024.</p> <p>A plan in place to include Infant feeding into the Be Well at Work scheme.</p> <p>Voluntary Action Rotherham through Family Hubs working with the 0-19's to develop the peer support training and volunteer recruitment.</p> <p>Family Hub funded Infant Feeding Co-ordinator in post to develop the Infant Feeding workstream within Family Hubs.</p> <p>All Children's centres are beginning the process of</p>

						gaining Unicef Baby Friendly Initiative Accreditation.
	1.3	Analyse impact of new 3-4 months universal visit to identify opportunities to develop the healthy child programme	October 2024	Sam Longley and Michael Ng		<p>New universal 3-4 months visits have commenced. Target of 70% coverage to be achieved by Q4.</p> <p>Pilot roll out continues which started initially targeting 1st time parents, full universal offer to commence in April 2024</p> <p>Initial reporting has commenced. Evaluation process being developed. Public Health, Commissioning and Data Analysis team in place.</p>
	1.4	<p>Develop printed resources and updated website 'Giving your child the best start in life' (Family Hubs start for life offer)</p> <ul style="list-style-type: none"> • Consultation • Finalised offer 	<p>December 2024</p> <p>March 2025</p>	Alex Hawley		Discussions have taken place with VAR Family Hub Facilitator (December 2023) about involving the Parent Care Panel in reviewing current web resource and in developing future contents

		Ensure sustainable online offer by establishing ongoing website ownership	March 2025			<p>and style of the Start for Life Offer (online and printed).</p> <p>An interim Best Start to Life leaflet will be designed and printed for inclusion in Baby Packs in the Spring.</p> <p>Work on 'Phase Three' of 'Giving Your Child the Best Start in Life' website pages will continue following completion of planned Baby Packs commissioning work.</p>
1.5		<p>Delivery of the 3 Year Delivery plan for Maternity and neonatal service which aims to make care safer, more personalised and more equitable through the delivery of four high level themes:</p> <ul style="list-style-type: none"> • Listening to women and families with compassion which promotes safer care • Supporting the workforce to develop their skills and capacity to provide high quality care • Developing and sustaining a culture of safety to benefit everyone • Meeting and improving standards and structures that underpin the national ambition. 	March 2024	Sarah Petty, Head of Midwifery, TRFT		<p>Work is continuing within maternity services to achieve all aspects of the 3 year delivery plan. An action plan has been developed to address the four elements of the plan which has been agreed with the LMNS. An LMNS assurance visit took place January 2024 to assess progress against the action plan. Of the four themes within the 3 year delivery plan, evidence has been presented via board papers each month addressing the work done</p>

						within Maternity Services in each of the areas. Particular improvements have been made around theme 4, with the collection of data to highlight areas of deprivation. In the coming months, this intelligence will enable us to co-design services for the most in need mothers and babies, addressing any inequalities.
Support children and young people to develop well.	1.6	Develop and agree prevention-led approach to children and young people's healthy weight with partners, building on childhood obesity needs assessment work and using evidence from compassionate approach	January 2024	Sue Turner, RMBC		Progress update to the HWB Board delivered in January 2024. Compassionate approach working group is in place, action plan has been developed. A language/comms resource has been developed.
	1.7	Continue to support children and young people's Mental Health and wellbeing, along with schools, health and voluntary sector	Ongoing (up to March 2025)	Helen Sweaton, ICB		SEMH Continuum of Need and competency framework approved in December. Soft launch underway. Formal launch planned for SENCO network meeting in June.

	1.8	Continue to focus on improving early years take-up in targeted areas of Rotherham (Central) to have wider holistic benefit on key development measures	July 2023 July 2024	AD Education and Inclusion, RMBC		In Autumn 2023, take up of 2 year old early education is 94.2%. Take up is usually highest in this term as there are more place available. Take-up in the Central area has increased from 73% in Summer to 93.2% in Autumn and in Coleridge from 70% to 77%. The deep analysis of location of children not engaging and reasons for non-attendance is still taking place and outcome is expected later this term. We are working closely with Social Care colleagues to identify any CiN/CP children who are eligible for but not taking up 2 year old places and sharing this information so that further support can be provided.
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Aim 2: All Rotherham people enjoy the best possible mental health and wellbeing and have a good quality of life

Board Sponsors: Claire Smith, Deputy Director Rotherham Place, South Yorkshire Integrated Care Board and Toby Lewis, Chief Executive, Rotherham Doncaster and South Humber NHS Foundation Trust

Priority	#	Milestones	Timescale	Lead(s)	BRAG Rating	Progress update
Promote better mental health and wellbeing for all Rotherham people.	2.1	Progress formal sign up to the OHID prevention concordat for better mental health as a Health and Wellbeing Board	September 2023	Ruth Fletcher-Brown, RMBC		2023 11 01 OHID Panel meeting attended on the 20 th September By Cllr Riche, Ben Anderson, Kelsey Broomhead and Ruth Fletcher-Brown. Rotherham Health and Wellbeing Board confirmed as a signatory of the Prevention Concordat.
	2.2	Develop and deliver partnership communications activity focussed on mental health, building on successful campaigns and resources <ul style="list-style-type: none"> • Rotherhive • Five Ways to Wellbeing • Great Big Rotherham To Do List 	Delivery to March 2025	Sam Jackson, RMBC Gordon Laidlaw, ICB		Social media messages promoting Rotherhive and Five Ways to Wellbeing are scheduled at least once every four weeks at the moment – this is reviewed quarterly as part of the Council's overall communications plan. Regular messaging is also going out via neighbourhoods ebuletins aligned to local ward priorities.
	2.3	Refresh and deliver Better Mental Health For All action plan, focused on early intervention and	December 2022	Ruth Fletcher-Brown, RMBC		Draft action plan based on the Prevention Concordat application to be circulated to the Better Mental Health for All Group.

		prevention, developed in line with national 10-year Mental Health Plan	Delivery to March 2025			<p>Actions progressing on the JSNA chapters for mental health and loneliness- focus groups taking place with inclusion groups on loneliness, mental health and emotional wellbeing and wider determinants.</p> <p>Asset mapping being finalised and piloted before launch in April.</p> <p>Delay is due to policy change on National 10 Year Mental Health Plan (The update of the local plan was to be aligned to this national plan).</p>
Take action to prevent suicide and self-harm.	2.4	Promote suicide and self-harm awareness training to practitioners across the partnership and members of the public through internal and external communications	March 2025	Ruth Fletcher-Brown, RMBC		<p>Suicide prevention training (SPOT and SPEAK) being delivered by Papyrus to all partner organisations. This commenced in January and will finish in March 2024.</p> <p>Bespoke training sessions delivered for some VCS Partners.</p> <p>Zero Suicide Alliance training promoted through staff awareness sessions.</p>
	2.5	Deliver the Be the One campaign with annual targeted messages based on local need with support from all partners' comms and engagement leads.	Annual delivery up to September 2025	Ruth Fletcher-Brown, RMBC Gordon Laidlaw, ICB		Series of Be the One social media posts have been issued in December and January. Be the One was promoted over the Christmas and New Year period.

	2.6	To promote postvention support for adults, children and young people bereaved, affected and exposed to suicide and monitor referrals to services, including staff affected	March 2024	Ruth Fletcher-Brown, RMBC		<p>Between October and December there were 10 referrals from Rotherham to the postvention service Amparo.</p> <p>Contract meetings with Amparo re the extended service to children and young people, which commences in April 2024.</p> <p>Zoom training sessions re Amparo have been promoted to all Partner organisations.</p> <p>In December, Rotherham hosted the third Memorial event for SY families and friends who have been bereaved by suicide. Families and friends attended appreciated the safe space to remember their loved ones.</p>
Promote positive workplace wellbeing for staff across the partnership.	2.7	Promote the Be Well @ Work award to Health and Wellbeing Board partners and support sign up	Ongoing	Colin Ellis, RMBC		We are still wanting partners to come forward and sign up to the award scheme. TRFT have agreed to renew their award and we will be working together on this. Still not a very good response from partners who are not signed up to the award.
	2.8	Ensure partners are engaged in Employment is for everyone programme, promoting employment	March 2024	Colin Ellis, RMBC		Rotherham has launched employment for everyone. employment is for everyone is a project that four organisations have created in Rotherham (Speakup, Dextx, Art Works, EDLounge) supported by

		opportunities to those with SEND, and improving wellbeing at work				<p>RMBC, Community Catalysts and the South Yorkshire Integrated Care System</p> <p>Rotherham as part of a joint SY bid to the DWP has been successful and this will bring additional resource to the employment is for everyone initiative.</p> <p>This is going from strength to strength and is linked in with various partners across the region. We are linked into all four regional SEND forums and are working with a number of regional employers to promote the benefits of employing people with SEND.</p>
Enhance access to mental health services.	2.9	<p>Ensure partners are engaged in the development and mobilisation of the integrated primary/secondary care mental health transformation. This will include:</p> <ul style="list-style-type: none"> • Implementation of MH ARRS roles • Long term plan eating disorders, IPS and EIP targets by March 2024 • Implementation of Community Mental Health Integrated primary / secondary care 	March 2024	<p>Kate Tufnell, ICB- Rotherham</p> <p>Julie Thornton, RDaSH</p>		<p>There are 41 milestones identified for Community Mental health Transformation as we move in to Q4 2023/24 – final period for CMHT.</p> <ul style="list-style-type: none"> • 21 are on track for delivery/completion. • 20 are off track with mitigating actions.

		transformation programme by March 2024				
	2.10	<p>To work in partnership to enhance the Mental Health Crisis Pathway (early intervention, prevention, social care & crisis). This will require:</p> <ul style="list-style-type: none"> Partnership working to ensure an early intervention and crisis prevention model is developed Mobilisation of the Touchstone Safe Space (alternative to crisis) provision Mobilisation of social care pathways 	March 2024	<p>Andrew Wells, RMBC Julie Thornton, RDaSH Kate Tufnell, ICB – Rotherham Ruth Fletcher-Brown, Public Health</p>		<p>Mobilisation of a pilot service in Rotherham which will support people who have attempted suicide due to a life event, where their physical and mental health needs have been met.</p> <p>The service is called Our Rotherham. Mobilisation meetings are still progressing. There has been a delay with recruitment. A score card for monitoring the impact of the service has been agreed by partners on the Strategic Suicide Prevention Group.</p> <p>Crisis transformation and 111- went live with 111 (press 2 for MH) in December 2023. Smooth process so far- We are moving to phase 2 of the crisis transformation- and have a 12 month plan of areas of focus - initial meeting 6th February 2024.</p> <p>Report to highlight RDASH risks in anticipation of the RMBC changes in April 2024 to the Crisis Pathway to be presented to Rotherham Place Leadership Team in February 2024.</p>

Aim 3: All Rotherham people live well for longer

Board sponsors: Sharon Kemp, Chief Executive, Rotherham Metropolitan Borough Council and Michael Wright, Deputy Chief Executive, The Rotherham NHS Foundation Trust

Priority	#	Milestones	Timescale	Lead(s)	BRAG rating	Progress update
Ensure support is in place for carers.	3.1	Take an integrated approach to identifying and supporting carer health and wellbeing through working with partners to develop a carer health and wellbeing action plan.	April 2023 – March 2024 (as part of delivery of area of focus 2 of strategic framework)	AD Strategic Commissioning, RMBC		Completed – Action Plan in place as reported in January
	New action: Increase the flexible support options available for unpaid carers to sustain them in their caring role.					
	3.2	Through co production: <ul style="list-style-type: none"> Complete the needs assessment to identify gaps in support and provision. 	June 2024	AD Strategic Commissioning, RMBC		As agreed in January 2024, this replaces actions under 3.6 in previous plan - Ensure carers feel their role is

		Design future offer.	June 2024.			understood and valued by their community
		Undertake an options appraisal	September 2024			
		Build capacity of the agreed services/support options.	March 2025			
New action: Further develop and streamline the advice and information available for unpaid carers in line with the Care Act 2014, Care and support statutory guidance (Updated 5 October 2023) and for NHS Standard for creating health content.						
3.3		Develop a dedicated Unpaid Carers APP and digital platform for carers information and advice.	March 2025	AD Strategic Commissioning, RMBC		
		Monitor and evaluate the impact of the platform.	March 2025			
3.4		Ensure Carers are supported when they have a breakdown in care through delivery of Carers emergency services	Sept 2023	AD Strategic Commissioning, RMBC		Completed – Carers Emergency Service secured to 2027.

Support local people to lead healthy lifestyles , including reducing the health burden from tobacco, obesity and drugs and alcohol.	Develop the healthy lifestyles prevention offer/pathway				
	3.5	Deliver the communications and engagement prevention campaign 'Say Yes' and evaluate the impact and reach.	April 2024	Becky Woolley	The Say Yes communications and engagement plan for 2024 was approved by Place leadership in December and will include a focus on six key themes: alcohol; cancer; diabetes; loneliness; breastfeeding; and self-care during Winter. Work is taking place to deliver this campaign in partnership, including with Rotherham United Community Trust.
	3.6	Review the current service specification for social prescribing and recommission the service	March 2024	SY ICB Deputy Place Director	Service specification has been reviewed with partners; appropriate engagement taken place. Service has been procured and is in standstill period on track to commence 1st April 2024. Provider is now mobilising after Standstill. VAR were successful bidder and will work with Place partners to ensure service delivered is integrated across H&SC provision
	3.7	Review Rotherham Place offer for social prescribing and implement an integrated pathway (with consideration of a Lead Provider Social Prescribing Partnership Model):	September 2024	SY ICB Deputy Place Director	Integrated Social prescribing service has been procured (integrated various services including social prescribing in UECC and Mental Health with the Long Term Conditions service). Contact made with Sheffield Hallam University to appropriately review pathways across Place to support development model. Meeting in Jan 24 to proceed Review of ARR's roles has also taken place across South Yorkshire with report shared

		<ul style="list-style-type: none"> Review services and roles across health and social care that contribute to prevention through social prescribing i.e. ARRS roles, Community Connectors and Social Prescribing service 				Meeting with Hallam University took place. Continue to review ARRs roles for 24 25 contracting.
Strengthen understanding of health behaviours and health inequalities						
3.8	Engage local people in target areas to inform a proposal around self-management and holistic support for people living with physical health conditions and poor mental wellbeing.	Engagement by November 2023 Proposal tbc	Becky Woolley (Prevention & Health Inequalities Group) Andrew Turvey (Population Health Management group)			<p>This project is focussed on starting from the bottom-up to identify priority areas of action for people living with LTCs and poor mental health and wellbeing.</p> <p>The first phase has been the design and rollout of a survey through Maltby/Wickersley and Rother Valley South PCNs. There was a delay due to technical challenges, but this has now been resolved and work is back on track. Over 1,200 people living with long term conditions in Maltby and Dinnington responded to the survey.</p> <p>The next phase of this project will involve a qualitative follow-up to develop further insight and action.</p>

	3.9	<p>Explore options to coordinate community engagement activities around health at Place and develop approach to share findings</p> <ul style="list-style-type: none"> Proposal to Health and Wellbeing Board 	March 2023	Hannah Hall, TRFT		<p>Use of software and collaboration with partners being explored to support coordination of engagement and sharing of findings.</p> <p>ICB strategy in development, Rotherham leads involved in conversations regarding insights bank. Options being explored regarding dissemination of findings and follow-up action</p>
	Ensure effective partnership working on key strategic projects					
	3.10	<p>Ensure partners are engaged in implementation of Drug and Alcohol Related Death (DARD) review process including</p> <ul style="list-style-type: none"> Establishment of quarterly DARD panel meetings Analysis and review to inform upstream activity, prevention and understanding of issues to improve service delivery. 	<p>Dec 2023</p> <p>Annual review by Dec 2024</p>	Jessica Brooks, RMBC		<p>SY wide stakeholder event held on 28.09.23 to launch the DARD (and LDIS) processes.</p> <p>Quarterly meeting established. First DARD panel date set for 29/02/24.</p>

	3.11	Deliver NHSE funded pilot to support frequent attenders to ED with complex Alcohol and Mental Health needs through an outreach team providing holistic support offer.	March 2024	Amanda Marklew, TRFT		Funding confirmed to continue until end of September 2024. Hull university in situ undertaking research with service.
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Aim 4: All Rotherham people live in healthy, safe, and resilient communities

Board sponsors: Laura Kosciwicz, Chief Superintendent, South Yorkshire Police and Paul Woodcock, Strategic Director of Regeneration and Environment, Rotherham Metropolitan Borough Council

Priority	#	Milestones	Timescale	Lead(s)	BRAG rating	Progress update
Deliver a loneliness plan for Rotherham	4.1	Promote existing resources on loneliness and befriending (including VAR film: Be a good neighbour and Five Ways to Wellbeing)	March 2024	Sam Jackson, RMBC, Gordon Laidlaw ICB Kerry McGrath, VAR		Messaging on social media around loneliness and befriending are scheduled at least once a month. Be The One posts went out in January to encourage people to talk and reach out to people.
	4.2	Update and deliver loneliness action plan	Update November 2022 Delivery to March 2025	Ruth Fletcher-Brown, RMBC		Work is taking place on the JSNA chapter on loneliness, which will hopefully include qualitative information from some of Rotherham's inclusion groups (veterans, carers, neurodiverse adults and parents and carers of children with SEND). Focus group discussions with some of Rotherham's inclusion groups have commenced.

						<p>These discussion groups will run until April.</p> <p>MECC Loneliness training session held in Riverside. Further courses planned across Rotherham in libraries. The aim where possible is to align the training with Wards that have identified loneliness in their plans.</p>
	4.3	Promote volunteering opportunities	March 2024	Kerry McGrath, VAR		We currently have 73 volunteer opportunities advertised on our website.
	4.4.	<p>Ensure the board are involved in informing local priority setting and are able to take local issues relating to health and wellbeing into account in strategic planning through:</p> <ul style="list-style-type: none"> • Board members contributing intelligence and insight into annual refresh of Ward priorities • Board receiving annual report on delivery against ward priorities and impact on loneliness, and health and wellbeing 	<p>May-Sept 2024</p> <p>March 2024 tbc</p>	Martin Hughes, RMBC		<p>Ward priority setting will take place after the May' 24 elections, with publication scheduled for November 2024. Council services and partners will be invited to contribute local intelligence in advance of May '24 to help inform priority setting.</p> <p>Ward priorities presentation to be delivered to Board on 6th March 2024</p>

Promote health and wellbeing through arts and cultural initiatives.	4.5	Annual delivery of Rotherham Show, creating opportunities for communities to come together and be outdoors	September 2022 September 2023 September 2024 September 2025	Leanne Buchan, RMBC		Rotherham Show has been successfully delivered for 2023. Rotherham's largest cultural festival returned to Clifton park on 2-3 September.
	4.6	Co-design Children's capital of culture with children and young people, with focus on improving their mental health and wellbeing	March 2025	Leanne Buchan, RMBC		Children's Capital of Culture launched in February 2022. Children's Capital of Culture occupied its own area at Rotherham Show 2023, reserved exclusively for families and young adventurers.
	4.7	Deliver a series of activities in libraries for people of all ages to connect, be active and learn new skills, and widen the accessibility of library services, through: <ul style="list-style-type: none"> • Pop-up libraries • Reading gardens • Makerspaces • Authors' visits and performances • Fun palaces 	March 2025	Zoe Oxley, RMBC		The Fun Palace Ambassador, along with partners from Mind and Crossroads care, has put together an exhibition around the theme of Mental Health through February in the gallery space at Riverside. All pieces are by local Rotherham people experiencing mental health issues or those caring for them. The exhibition showcases the fantastic talent local Rotherham people possess and reduces stigma around Mental Health.

						<p>A celebration event was held for contributors in the gallery and approximately 40 people turned up.</p> <p>The Ambassador also recently attended the latest Fun Palaces Action Research event at Arts Depot in London. The focus was diversity in all its forms and training was on barriers to access.</p> <p>Makerspace evaluations have taken place with Brightbox and discussions for plans for a Makerspace in the new central library.</p>
	4.8	<p>Utilise libraries as death positive spaces, where the public can have conversations around loss, grief, end of life planning and legacy.</p> <p>Explore legacy opportunities for programme, building on positive public response</p>	<p>March 2023</p> <p>March 2024</p>	Zoe Oxley, RMBC		<p>Death cafés in libraries are being relaunched in March after further research by staff at the central library sites. Feedback was that the name needed changing and social media response from the public reflected this too. Bereavement services and Mind would be willing to support sessions in the future.</p>

	4.9	Utilise and promote libraries as spaces for people to share experiences and response to specific health issues, including menopause and dementia, and improve community resilience	March 2025	Zoe Oxley, RMBC		<p>The Café continues to run monthly at Maltby, from 5.45pm – 6.45pm. New dates for 2024 have been shared with partners and advertised via social media.</p> <p>Adverts have been shared on Voluntary Action Rotherham's web page for volunteers to run Menopause Cafes at other Rotherham libraries. One person has expressed an interest in volunteering at Riverside House.</p>
Ensure Rotherham people are kept safe from harm.	4.10	Embed referral pathways with key partners in Rotherham through the Home Safety Partnership Referral Scheme and Safe and Well checks.	Ongoing	Toni Tranter, South Yorkshire Fire and Rescue		SYFR continue to engage with key partners working with vulnerable members of our communities. Home Safety Visits continue to take place with signposting to other services when needed.
	4.11	Work with other partnership boards on crosscutting issues relating to safety and safeguarding.	Ongoing for the duration of the plan	Board chairs, RTP		Safeguarding Board Chairs meetings are now established to maintain the relationship between the safeguarding boards and work on crosscutting issues. Next meeting planned for early March to focus on outcomes

						frameworks and performance monitoring.
Develop a borough that supports a healthy lifestyle.	4.12	<p>Progress strategic approach to physical activity in Rotherham, through four key areas:</p> <ul style="list-style-type: none"> • Active workforce • Social movements • Front line workers signposting • Local social prescribing structures 	<p>Nov 2022 (Action plan developed)</p> <p>March 2025 (Delivery)</p>	Gilly Brenner, RMBC, with Nick Wilson, Yorkshire Sport Foundation		Annual update to be presented to Health and Wellbeing Board in March 24. Action plan will now be reviewed and updated in response to Sport England Place Expansion investment opportunity.
	4.13	Hold a workshop for the board on Spatial Planning, Climate and Health	March 2024	Gilly Brenner and Sally Jenks, RMBC		Workshop agenda draft proposed and scheduled for 27th March, the invites have gone out.
	4.14	<p>Conduct research and engagement with priority groups on the development of inclusive and accessible outdoor sports facilities, through the PlayZone initiative</p> <p>Further, more in depth consultation to take place through to the spring following submission of Narrowing the Focus document to The Football Foundation.</p>	<p>Sept 2023</p> <p>January-April 2024</p>	Chris Siddall, RMBC		<p>Initial consultation has taken place with YP at Brinsworth, Dalton, Maltby, Wath and Kimberworth Park during October half term holidays.</p> <p>“Narrowing the focus” phase still ongoing. Further consultation period of 8-10 weeks to follow.</p> <p>Slight delay has been due to capacity within the team, but this has now been rectified.</p>

		Submission of final priority places documentation to The Football Foundation.	July 2024			
	4.15	Enable all partner staff to support neighbourhoods and communities to thrive, through exploring options on a partnership offer on training on strength-based approaches	March 2024	Martin Hughes, Neighbourhoods, and Lily Hall, OD		The General Awareness training (Level 1) e-learning package has been launched to all IT enabled council staff. Work is ongoing this quarter (Jan-March '24) to commission an outside organisation to deliver the Enhanced Awareness (Level 2), Practitioner (Level 3) and Place Partners (Level4) training.

Cross-cutting priorities

Priority	#	Milestones	Timescale	Lead(s)	BRAG rating	Progress update
Work in partnership to maximise the positive impact of anchor institutions across all 4 priorities	5.1	Undertake a baselining assessment regarding social value and map trend annually through the Rotherham Anchor Network.	March 2023 (baselining assessment) March annual target (trend mapping)	Karen Middlebrook, RMBC		The Council has been working with partners and local spending profile data has now been provided by the Council and NHS Rotherham Foundation Trust for financial years 2020/21 and 2021/22. This has enabled some baselining and trend analysis activity to take place between the two organisations. Work will continue to encourage other partners to participate.
	5.2	Agree our partnership approach to act as anchor institutions to reduce health inequalities in Rotherham	March 2023	Place Board (Becky Woolley, RMBC)		A proposed approach to take this agenda forward has been developed with various partnership subgroups. An action plan has been developed and was formally supported at Place Board. This has also fed into the Rotherham Together

						Partnership plan, which is the lead partnership overseeing this activity.
Support safe and equitable recovery from the Covid pandemic	5.3	Building on the VAR annual survey, explore options to assess the current position of the voluntary and community sector in partnership with stakeholders and report relevant learning to the board.	March 2023	Shafiq Hussain, VAR		<p>The Centre for Regional Economic and Social Research (Sheffield Hallam University) has conducted State of the Sector research for South Yorkshire, including a place approach.</p> <p>Rotherham State of The Sector Report (2023) details to be shared with Health and Wellbeing Board in January 2024.</p>
	5.4	Conduct strategic impact assessment of Covid-19 on residents and Council services	May 2023	Lorna Quinn		The assessment is complete with the report being circulated through appropriate channels and to be presented at the Health and Wellbeing Board in June. Findings are included in the 2023 DPH report.
	5.5	Consider further service developments to ensure differentials in access for certain patient cohorts are removed, for example by	March 2023	Michael Wright, TRFT		The TRFT health inequalities group has established a workplan to focus on six key themes in addressing equity in

		segmenting our waiting list based on wider patient needs.	Continuing to November 2023			healthcare at the Trust. These are: Understanding patient and population need, Providing patient centred care, Ensuring equity of access, Building prevention into pathways, supporting our staff, Improving the lives of our communities.
	5.6	<p>Ensure local services are informed, and able to co-produce responses to Cost of Living pressures through:</p> <ul style="list-style-type: none"> Regular meetings of Humanitarian and Communities Group Responding to issues identified by agreeing key actions and reporting annually to the board Escalating risks and challenges to the board 	<p>Ongoing</p> <p>Sept 2024 tbc</p> <p>Ongoing</p>	Martin Hughes		The Humanitarian and Communities Group are currently pulling a Delivery Plan for the 2024/25 months. Aim for this to be approved by March 2024.
Develop the Pharmaceutical	5.7	Host stakeholder consultation to support needs assessment	January 2025	Lorna Quinn, RMBC		Annual steering group meetings will be held; next one will be 2023.

Needs Assessment.	5.8	Publish updated Rotherham Pharmaceutical Needs Assessment	September 2025	Lorna Quinn, RMBC		<p>Not yet started but will commence in 2025.</p> <p>The PNA annual steering group is taking place in October 2023.</p>
Work in partnership to further develop the Rotherham Data Hub and assess population health.	5.9	Work with partnership steering group on annual refresh and development of the JSNA.	<p>April 2023</p> <p>April 2024</p> <p>April 2025</p>	Lorna Quinn, RMBC		<p>The JSNA refresh is complete and has been published for 2023. Updates will be provided through the mailing list and the steering group.</p>
	5.10	Launch annual training and promotion of the JSNA across the partnership	<p>October 2022</p> <p>October 2023</p> <p>October 2024</p>	Lorna Quinn, RMBC		<p>Training has been conducted for 2023 including with RMBC colleagues and Voluntary Community Sector colleagues.</p> <p>Further training is set to be scheduled for 2024.</p>
	5.11	Monitor population health through Outcomes Framework and report any emerging issues to the board	Ongoing	Becky Woolley, RMBC		<p>The assurance framework has been developed as part of a wider interactive health inequalities tool. Regular reporting arrangements are in place.</p>

						<p>Further development of the health inequalities tool is ongoing. Work has started to develop the ethnic minority community profile as one of the key plus inclusion groups identified within the strategy and to develop profiles for all of the clinical areas outlined within the national Core20Plus5 framework. These areas should be developed by Q4.</p>
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BRIEFING	TO:	Health and Wellbeing Board
	DATE:	6 th March 2024
	LEAD OFFICER	Steph Watt Joint Head of Adult Commissioning (Rotherham Place) E-mail: steph.watt@nhs.net
	TITLE:	Better Care Fund (BCF) Quarter 3 Template 2023/24
Background		
1.1	The purpose of this report is to agree the contents of the BCF Quarter 3 Template report which will be submitted to NHS England regarding the performance and spend and activity of Rotherham’s Better Care Fund Plan for 2023/24.	
1.2	The overall delivery of the Better Care Fund continues to have a positive impact and improves joint working between health and social care in Rotherham.	
Key Issues		
2.1	The BCF Quarter 3 template covers reporting on: national conditions, metrics, spend and activity in relation to BCF funded schemes. The BCF Quarter 3 template is attached at Appendix 1.	
2.2	Monthly templates are submitted to DHSC / NHS England to monitor spend against the Additional Discharge Fund from 30 th May 2023 until 8th April 2024.	
2.3	Below is a summary of information included within the BCF submission:	
2.4	National Conditions There is a total of 5 national conditions for 2023/24 which continue to be met through the delivery of the plan as follows: <ul style="list-style-type: none">• Confirmation that the Section 75 agreement has been finalised and signed off by the Health and Wellbeing Board.• A plan has been jointly agreed between both partner organisations.• Implementation of BCF Policy Objective 1: Enabling people to stay well, safe and independent at home for longer.• Implementation of BCF Policy Objective 2: Providing the right care in the right place at the right time.• Maintaining NHS’s contribution to adult social care and investment in NHS commissioned out of hospital services.	
2.5	BCF Metrics There is a total of five BCF metrics within the BCF Q3 Template for 2023/24 which measures the impact of the plan as follows: Avoidable Admissions - Unplanned hospitalisation for chronic ambulatory care sensitive conditions – Not on track to meet target. Challenges and any support needs – Performance in Q3 has remained challenged, potentially linked to winter pressures and industrial action. Achievements - We have seen increased use of the virtual ward and urgent community response pathways remain above target. Impact of these schemes will be clearer in Q4.	

	<p>Discharge to normal place of residence - Percentage of people who are discharged from acute hospital to their normal place of residence – On track to meet target Challenges and any support needs – Performance has been above target and remained strong in October / November. Achievements – On track supported by continued partnership working.</p> <p>Falls – Emergency admissions due to falls in people aged 65 and over (<i>New Indicator</i>) – Not on track to meet target. Challenges and any support needs – Higher than expected number of falls seen based on nationally published data (686 actual, planned level expected would be closer to 600). Achievements – Review of falls services being undertaken in 2023/24.</p> <p>Residential Care Admissions – Rate of permanent admissions to residential care per 100,000 population (65+) – Not on track to meet target. Challenges and any support needs – Overall admissions at the end of Quarter 3 are currently tracking slightly above the cumulative target (0.08%). Achievements – The service continues to explore proposals to reduce residential admission rates and is undertaking further analysis to understand the developing trend.</p> <p>Reablement – Proportion of Older People (65 years and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services (bed base and at home) – annual measure, no data currently available.</p>
2.6	<p>Spend and Activity</p> <p>Actual spend and outputs delivered to date is included within the template.</p>
2.7	<p>BCF Final Year End Template 2023/24</p> <p>A final year-end template is likely to be issued by NHS England for completion by around mid-May 2024.</p>
Key Actions and Relevant Timelines	
3.1	<p>The Better Care Fund Executive Group held on 6th February 2024 approved (on behalf of the Health and Wellbeing Board) the:</p> <p>(i) Documentation for submission to NHS England (NHSE) on 9th February 2024.</p>
Implications for Health Inequalities	
4.1	<p>Addressing health inequalities is integral to the allocation of BCF resource and funded schemes. This includes contributing to achieving the strategic aims of developing healthy lifestyles and prevention pathways, supporting prevention and early diagnosis of chronic conditions and targeting variation.</p> <p>BCF funded schemes which reduce health inequalities include social prescribing, Breathing Space and project support for the implementation of Population Health Management (PHM) priorities.</p>
Recommendations	
5.1	<p>That the Health and Wellbeing Board notes the:</p> <p>(ii) Documentation for submission to NHS England (NHSE) on 9th February 2024.</p>

Better Care Fund 2023-25 Quarter 3 Quarterly Reporting Template

1. Guidance for Quarter 3

Overview

The Better Care Fund (BCF) reporting requirements are set out in the BCF Planning Requirements document for 2023-25, which supports the aims of the BCF Policy Framework and the BCF programme; jointly led and developed by the national partners Department of Health (DHSC), Department for Levelling Up, Housing and Communities (DLUHC), NHS England (NHSE), Local Government Association (LGA), working with the Association of Directors of Adult Social Services (ADASS).

The key purposes of BCF reporting are:

- 1) To confirm the status of continued compliance against the requirements of the fund (BCF)
- 2) In Quarter 2 to refresh capacity and demand plans, and in Quarter 3 to confirm activity to date, where BCF funded schemes include output estimates, and at the End of Year actual income and expenditure in BCF plans
- 3) To provide information from local areas on challenges, achievements and support needs in progressing the delivery of BCF plans, including performance metrics
- 4) To enable the use of this information for national partners to inform future direction and for local areas to inform improvements

BCF reporting is likely to be used by local areas, alongside any other information to help inform Health and Wellbeing Boards (HWBs) on progress on integration and the BCF. It is also intended to inform BCF national partners as well as those responsible for delivering the BCF plans at a local level (including ICBs, local authorities and service providers) for the purposes noted above.

BCF reports submitted by local areas are required to be signed off by HWBs, including through delegated arrangements as appropriate, as the accountable governance body for the BCF locally. Aggregated reporting information will be published on the NHS England website.

Note on entering information into this template

Throughout the template, cells which are open for input have a yellow background and those that are pre-populated have a blue background and those that are not for completion are in grey, as below:

Data needs inputting in the cell

Pre-populated cells

Not applicable - cells where data cannot be added

Note on viewing the sheets optimally

To more optimally view each of the sheets and in particular the drop down lists clearly on screen, please change the zoom level to between 90% - 100%. Most drop downs are also available to view as lists within the relevant sheet or in the guidance tab for readability if required.

The row heights and column widths can be adjusted to fit and view text more comfortably for the cells that require narrative information.

Please DO NOT directly copy/cut & paste to populate the fields when completing the template as this can cause issues during the aggregation process. If you must 'copy & paste', please use the 'Paste Special' operation and paste 'Values' only.

The details of each sheet within the template are outlined below.

Checklist (2. Cover)

1. This section helps identify the sheets that have not been completed. All fields that appear as incomplete should be complete before sending to the BCF team.
2. The checker column, which can be found on the individual sheets, updates automatically as questions are completed. It will appear 'Red' and contain the word 'No' if the information has not been completed. Once completed the checker column will change to 'Green' and contain the word 'Yes'
3. The 'sheet completed' cell will update when all 'checker' values for the sheet are green containing the word 'Yes'.
4. Once the checker column contains all cells marked 'Yes' the 'Incomplete Template' cell (below the title) will change to 'Template Complete'.
5. Please ensure that all boxes on the checklist are green before submitting to england.bettercarefundteam@nhs.net and copying in your Better Care Manager.

2. Cover

1. The cover sheet provides essential information on the area for which the template is being completed, contacts and sign off. Once you select your HWB from the drop down list, relevant data on metric ambitions and capacity and demand from your BCF plans for 2023-24 will prepopulate in the relevant worksheets.
2. HWB sign off will be subject to your own governance arrangements which may include a delegated authority.
4. Please note that in line with fair processing of personal data we request email addresses for individuals completing the reporting template in order to communicate with and resolve any issues arising during the reporting cycle. We remove these addresses from the supplied templates when they are collated and delete them when they are no longer needed.

3. National Conditions

This section requires the HWB to confirm whether the four national conditions detailed in the Better Care Fund planning requirements for 2023-25 (link below) continue to be met through the delivery of your plan. Please confirm as at the time of completion.

<https://www.england.nhs.uk/wp-content/uploads/2023/04/PRN00315-better-care-fund-planning-requirements-2023-25.pdf>

This sheet sets out the four conditions and requires the HWB to confirm 'Yes' or 'No' that these continue to be met. Should 'No' be selected, please provide an explanation as to why the condition was not met for the year and how this is being addressed. Please note that where a National Condition is not being met, the HWB is expected to contact their Better Care Manager in the first instance.

In summary, the four national conditions are as below:

National condition 1: Plans to be jointly agreed

National condition 2: Implementing BCF Policy Objective 1: Enabling people to stay well, safe and independent at home for longer

National condition 3: Implementing BCF Policy Objective 2: Providing the right care in the right place at the right time

National condition 4: Maintaining NHS contribution to adult social care and investment in NHS commissioned out of hospital services

4. Metrics

The BCF plan includes the following metrics:

- Unplanned hospitalisations for chronic ambulatory care sensitive conditions,
- Proportion of hospital discharges to a person's usual place of residence,
- Admissions to long term residential or nursing care for people over 65,
- Reablement outcomes (people aged over 65 still at home 91 days after discharge from hospital to reablement or rehabilitation at home), and;
- Emergency hospital admissions for people over 65 following a fall.

Plans for these metrics were agreed as part of the BCF planning process.

This section captures a confidence assessment on achieving the locally set ambitions for each of the BCF metrics.

A brief commentary is requested for each metric outlining the challenges faced in achieving the metric plans, any support needs and successes in the first six months of the financial year.

Data from the Secondary Uses Service (SUS) dataset on outcomes for the discharge to usual place of residence, falls, and avoidable admissions for the first quarter of 2023-24 has been pre populated, along with ambitions for quarters 1-4, to assist systems in understanding performance at HWB level.

The metrics worksheet seeks a best estimate of confidence on progress against the achievement of BCF metric ambitions. The options are:

- on track to meet the ambition
- not on track to meet the ambition
- data not available to assess progress

You should also include narratives for each metric on challenges and support needs, as well as achievements.

- In making the confidence assessment on progress, please utilise the available metric data along with any available proxy data.

Please note that the metrics themselves will be referenced (and reported as required) as per the standard national published datasets.

No actual performance is available for the ASCOF metrics - Residential Admissions and Reablement - so the 2022-23 outcome has been included to aid with understanding. These outcomes are not available for Hackney (due to a data breach issue) and Westmorland and Cumbria (due to a change in footprint).

5. Spend and Activity

The spend and activity worksheet will collect cumulative spend and outputs in the year to date for schemes in your BCF plan for 2023-24 where the scheme type entered required you to include the number of output/deliverables that would be delivered.

Once a Health and Wellbeing Board is selected in the cover sheet, the spend and activity sheet in the template will prepopulate data from the expenditure tab of the 23-25 BCF plans for all 2023-24 schemes that required an output estimate.

You should complete the remaining fields (highlighted yellow) with incurred expenditure and actual numbers of outputs delivered to the end of the third quarter (1 April to 31 December).

The collection only relates to scheme types that require a plan to include estimated outputs. These are shown below:

Scheme Type	Units
Assistive technologies and equipment	Number of beneficiaries
Home care and domiciliary care	Hours of care (unless short-term in which case packages)
Bed based intermediate care services	Number of placements
Home based intermediate care services	Packages
DFG related schemes	Number of adaptations funded/people supported
Residential Placements	Number of beds/placements
Workforce recruitment and retention	Whole Time Equivalents gained/retained
Carers services	Number of Beneficiaries

The sheet will pre-populate data from relevant schemes from final 2023-24 spending plans, including planned spend and outputs. You should enter the following information:

- **Actual expenditure to date in column I.** Enter the amount of spend from 1 April to 31 December on the scheme. This should be spend incurred up to the end of December, rather than actual payments made to providers.
- **Outputs delivered to date in column K.** Enter the number of outputs delivered from 1 April to 31 December. For example, for a reablement and/or rehabilitation service, the number of packages commenced. The template will pre-populate the expected outputs for the year and the standard units for that service type. For long term services (e.g. long term residential care placements) you should count the number of placements that have either commenced this year or were being funded at the start of the year.
- **Implementation issues in columns M and N.** If there have been challenges in delivering or starting a particular service (for instance staff shortages, or procurement delays) please answer yes in column M and briefly describe the issue and planned actions to address the issue in column N. If you answer no in column M, you do not need to enter a narrative in column N.

More information can be found in the additional guidance document for tab 5, which is published alongside this template on the Better Care Exchange.

Better Care Fund 2023-25 Quarter 3 Quarterly Reporting Template

2. Cover

Version 2.0

Please Note:

- The BCF quarterly reports are categorised as 'Management Information' and data from them will be published in an aggregated form on the NHSE website. This will include any narrative section. Also a reminder that as is usually the case with public body information, all BCF information collected here is subject to Freedom of Information requests.

- At a local level it is for the HWB to decide what information it needs to publish as part of wider local government reporting and transparency requirements. Until BCF information is published, recipients of BCF reporting information (including recipients who access any information placed on the Better Care Exchange) are prohibited from making this information available on any public domain or providing this information for the purposes of journalism or research without prior consent from the HWB (where it concerns a single HWB) or the BCF national partners for the aggregated information.

- All information will be supplied to BCF partners to inform policy development.

- This template is password protected to ensure data integrity and accurate aggregation of collected information. A resubmission may be required if this is breached.

Health and Wellbeing Board:	Rotherham
Completed by:	Karen Smith
E-mail:	karen-nas.smith@rotherham.gov.uk
Contact number:	01709 254870
Has this report been signed off by (or on behalf of) the HWB at the time of submission?	Yes
If no, please indicate when the report is expected to be signed off:	

Checklist

Complete:

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Question Completion - when all questions have been answered and the validation boxes below have turned green you should send the template to england.bettercarefundteam@nhs.net saving the file as 'Name HWB' for example 'County Durham HWB'. This does not apply to the ASC Discharge Fund tab.

Complete	
	Complete:
2. Cover	Yes
3. National Conditions	Yes
4. Metrics	Yes
5. Spend and activity	Yes
<< Link to the Guidance sheet	

^^ Link back to top

Better Care Fund 2023-25 Quarter 3 Quarterly Reporting Template

3. National Conditions

Selected Health and Wellbeing Board:

Rotherham

Has the section 75 agreement for your BCF plan been finalised and signed off?	Yes	
If it has not been signed off, please provide the date the section 75 agreement is expected to be signed off		
Confirmation of National Conditions		
National Conditions	Confirmation	If the answer is "No" please provide an explanation as to why the condition was not met in the quarter:
1) Jointly agreed plan	Yes	
2) Implementing BCF Policy Objective 1: Enabling people to stay well, safe and independent at home for longer	Yes	
3) Implementing BCF Policy Objective 2: Providing the right care in the right place at the right time	Yes	
4) Maintaining NHS's contribution to adult social care and investment in NHS commissioned out of hospital services	Yes	

Checklist
Complete:

Yes

Yes

Yes

Yes

Yes

Yes

Better Care Fund 2023-25 Quarter 3 Quarterly Reporting Template

4. Metrics

Selected Health and Wellbeing Board: Rotherham

National data may be unavailable at the time of reporting. As such, please use data that may only be available system-wide and other local intelligence.

Challenges and Support Needs Please describe any challenges faced in meeting the planned target, and please highlight any support that may facilitate or ease the achievements of metric plans

Achievements Please describe any achievements, impact observed or lessons learnt when considering improvements being pursued for the respective metrics

Metric	Definition	For information - Your planned performance as reported in 2023-24 planning				For information - actual performance for Q1	For information - actual performance for Q2	Assessment of progress against the metric plan for the reporting period	Challenges and any Support Needs in Q3	Q3 Achievements - including where BCF funding is supporting improvements.
		Q1	Q2	Q3	Q4					
Avoidable admissions	Unplanned hospitalisation for chronic ambulatory care sensitive conditions (NHS Outcome Framework indicator 2.3i)	255.8	255.8	250.9	242.0	298.4	295.7	Not on track to meet target	Performance in Q3 has remained challenged, potentially linked to winter pressures and industrial action.	We have seen increased use of the virtual ward and urgent community response pathways remain above target. Impact of these schemes will be clearer in Q4.
Discharge to normal place of residence	Percentage of people who are discharged from acute hospital to their normal place of residence	93.5%	94.0%	93.5%	94.0%	94.4%	94.7%	On track to meet target	Performance has been above target and remained strong in October / November.	On track supported by continued partnership working.
Falls	Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000.				1,770.4	503.7	498.8	Not on track to meet target	Higher than expected number of falls seen based on nationally published data (686 actual, planned level expected would be closer to 600).	Review of falls services being undertaken in 2023/24.
Residential Admissions	Rate of permanent admissions to residential care per 100,000 population (65+)				572	2022-23 ASCOF outcome: 666		Not on track to meet target	Overall admissions at the end of Quarter 3 are currently tracking slightly above the cumulative target (0.08%).	The service continues to explore proposals to reduce residential admission rates and is undertaking further analysis to understand the developing trend.
Reablement	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services				75.4%	2022-23 ASCOF outcome: 72.5%		Data not available to assess progress	Annual measure, no data currently available.	Annual measure, no data currently available.

Checklist Complete:
Yes
Yes
Yes
Yes
Yes

Better Care Fund 2023-25 Quarter 3 Quarterly Reporting Template

6. Spend and activity

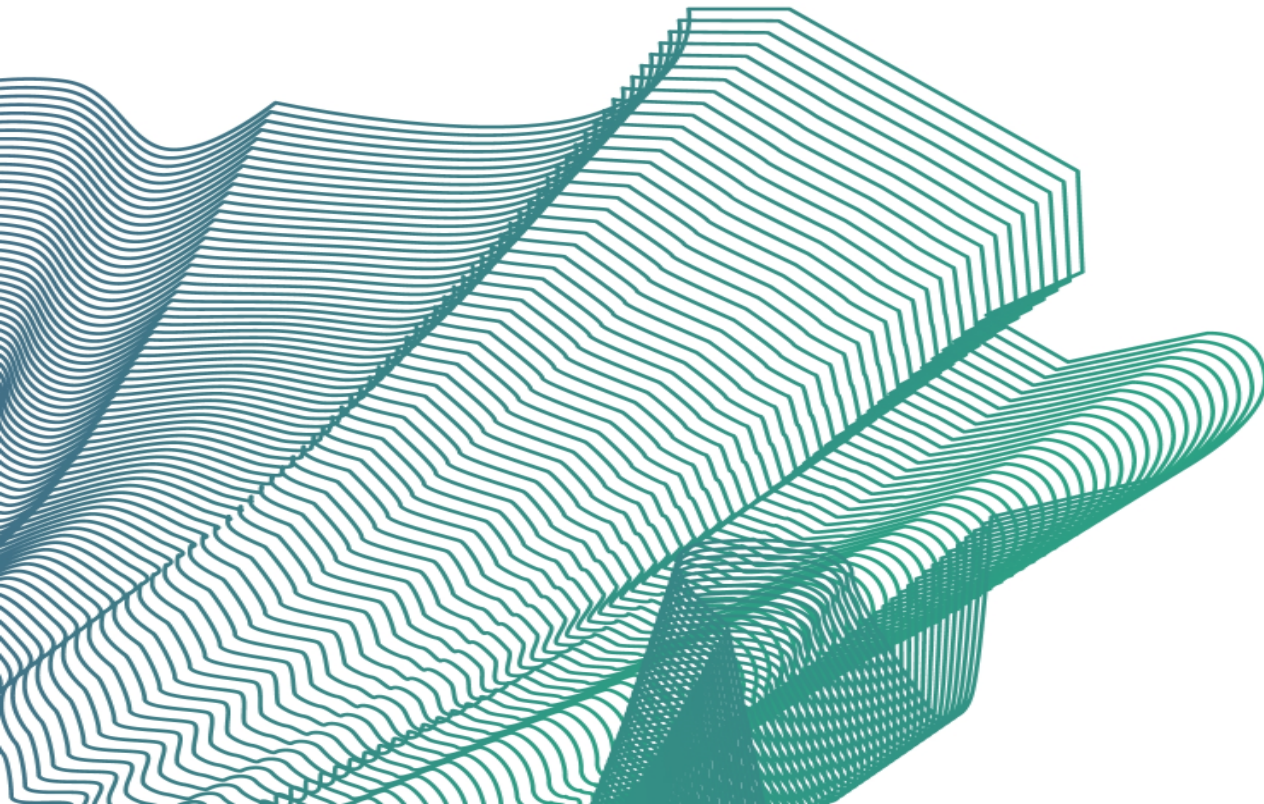
Selected Health and Wellbeing Board:

Rotherham

Checklist						Yes		Yes		Yes	Yes
Scheme ID	Scheme Name	Scheme Type	Sub Types	Source of Funding	Planned Expenditure	Actual Expenditure to date	Planned outputs	Outputs delivered to date (estimate if unsure) (Number or NA)	Unit of Measure	Have there been any implementation issues?	If yes, please briefly describe the issue(s) and any actions that have been/are being implemented as a result.
3	Reablement	Home-based intermediate care services	Reablement at home (to prevent admission to	Minimum NHS Contribution	£1,087,000	£815,000	838	648	Packages	No	
3	Domiciliary Care	Home Care or Domiciliary Care	Domiciliary care packages	Minimum NHS Contribution	£758,000	£574,000	34,022	34734	Hours of care (Unless short-term in which case it is packages)	No	
10	Disabled Facilities Grant	DFG Related Schemes	Adaptations, including statutory DFG grants	DFG	£2,193,735	£1,496,814	201	170	Number of adaptations funded/people supported	No	
10	Disabled Facilities Grant	Assistive Technologies and Equipment	Community based equipment	DFG	£870,000	£829,330	2,134	1338	Number of beneficiaries	No	
10	Additional Disabled Facilities Grant schemes	DFG Related Schemes	Other	Additional LA Contribution	£1,496,000	£0	201	0	Number of adaptations funded/people supported	No	
13	Intermediate Care	Bed based intermediate Care Services (Reablement, rehabilitation, wider short-	Bed-based intermediate care with rehabilitation	Additional LA Contribution	£1,779,038	£1,406,000	530	405	Number of placements	No	
13	Intermediate Care	Bed based intermediate Care Services (Reablement, rehabilitation, wider short-	Bed-based intermediate care with rehabilitation	Minimum NHS Contribution	£1,039,000	£821,000	374	276	Number of placements	No	
13	Intermediate Care	Bed based intermediate Care Services (Reablement, rehabilitation, wider short-	Bed-based intermediate care with rehabilitation	Minimum NHS Contribution	£1,467,000	£1,100,250	288	141	Number of placements	No	
13	Intermediate Care - Home first	Home-based intermediate care services	Reablement at home (to support discharge)	Minimum NHS Contribution	£862,000	£646,500	374	276	Packages	No	
13	Intermediate Care - Therapy	Bed based intermediate Care Services (Reablement, rehabilitation, wider short-	Other	Minimum NHS Contribution	£528,000	£396,000	374	276	Number of placements	No	
13	Intermediate Care - Therapy	Bed based intermediate Care Services (Reablement, rehabilitation, wider short-	Other	Minimum NHS Contribution	£97,000	£72,750	374	276	Number of placements	No	
13	Intermediate Care - GP Cover	Bed based intermediate Care Services (Reablement, rehabilitation, wider short-	Other	Minimum NHS Contribution	£36,000	£27,000	374	276	Number of placements	No	
13	Intermediate Care	Home-based intermediate care services	Reablement at home (to support discharge)	Minimum NHS Contribution	£367,000	£275,250	374	276	Packages	No	
14	Supported Living	Residential Placements	Supported housing	Minimum NHS Contribution	£410,000	£353,000	8	8	Number of beds/placements	No	
16	Mental Health rehabilitation services	Residential Placements	Care home	Minimum NHS Contribution	£209,000	£169,000	3	2	Number of beds/placements	No	
17	Learning Disabilities independent sector residential care/transitional placements	Residential Placements	Learning disability	Minimum NHS Contribution	£984,000	£781,000	11	10	Number of beds/placements	No	
17	Learning Disabilities Domiciliary Care	Home Care or Domiciliary Care	Domiciliary care packages	Minimum NHS Contribution	£37,000	£37,000	1,661	1661	Hours of care (Unless short-term in which case it is packages)	No	
18	Free Nursing Care	Residential Placements	Nursing home	Minimum NHS Contribution	£520,000	£390,000	98	117	Number of beds/placements	No	
25	Carers Support Services	Carers Services	Carer advice and support related to Care Act duties	Minimum NHS Contribution	£237,000	£145,000	30,000	426	Beneficiaries	No	
25	Carers Support Services	Carers Services	Carer advice and support related to Care Act duties	Minimum NHS Contribution	£23,000	£19,000	30	14	Beneficiaries	No	
25	Carers Support Services	Carers Services	Respite services	Minimum NHS Contribution	£301,000	£193,000	50	32	Beneficiaries	No	
33	Social Care Sustainability	Residential Placements	Care home	IBCF	£2,779,000	£2,084,000	79	59	Number of beds/placements	No	
33	Social Care Sustainability	Home Care or Domiciliary Care	Domiciliary care packages	IBCF	£1,527,000	£1,145,000	68,537	51403	Hours of care (Unless short-term in which case it is packages)	No	

Health and Well Being Board Rotherham High Impact Frailty Update

February 2024



Rotherham
Clinical Commissioning Group

**Rotherham, Doncaster
and South Humber**
NHS Foundation Trust

The Rotherham
NHS Foundation Trust

Rotherham
Metropolitan
Borough Council



**CONNECT
HEALTHCARE**
ROTHERHAM CIC

The Brief

- One of Rotherham's 4 high impact change projects along with ambulatory care, respiratory and diabetes
- Rotherham has an extensive, but disparate falls and frailty offer
- There are opportunities to review our offer including learning from good practice elsewhere to provide a more holistic and integrated approach

Informed by:

- National policy including NHS Long Term Plan, Frailty and SDEC national strategies, Rotherham Joint Health and Wellbeing Strategy
- Shared examples of good practice
 - The Jean Bishop Integrated Care Centre, Hull – Hull CCG
 - [Resilience-and-Independent-Living-in-Greater-Manchester.pdf \(england.nhs.uk\)](#)
 - British Geriatrics Society Blue Print
 - GIRFT and BGS: Six Steps to better care for older people in hospital www.bgs.org.uk/sixsteps
 - [NHS England » Proactive care: providing care and support for people living at home with moderate or severe frailty](#)
- Workshops held to map as is/to be including a falls workshop

High Level Summary of Falls and Frailty Services

High Level Summary of services that support frailty and falls – January 2024

Prevention/Planned

Urgent/Unplanned

Emergency/Acute
setting

Discharge

Noted that some services will cross more than one category

Community Services
- planned
Community Nursing/
Matrons
Care Homes Team
Equipment Service

Community Falls
Team (TRFT)

RMBC Adaptations
Team

Extra Care Housing

Community OT
(Occupational
Therapy) Aids and
Adaptations Team

Memory Service

Mental Health
Navigators for
Primary Care

Stroke Link Worker
for Primary Care

Crossroads -
support for
dementia
patients/carers

Stroke Association

Functional Fitness

Public Health

Community
Physicians

Carer Support
(Emergency Support
for Carer
Breakdown)

Medicines
Management Team

Social Prescribing
- Long Term Conditions
- Mental Health
- Urgent and Emergency Care
- PCN Link Workers

Community
Specialist services-
Diabetes
Continence
Respiratory
Heart failure

Rothercare

Therapy and
Dietetics
(planned and
unplanned)

Community Services
- unplanned
Transfer of Care Hub
Virtual Ward
Community Nursing
Integrated Rapid Response

Primary Care
- in-hours
- Out of Hours service
- Primary Care Networks
- GP Federation
- ARRS roles (Additional Roles)

Adult Social Care
Single Point of
Access

Older People
Mental Health
Services

The Rotherham
Hospice

111

Community Bed
Offer

999

Acute Frailty Team
and Ward (medical
and nursing)

SDEC (Same Day
Emergency Care)

Acute Mental
Health Services

CHAT (Community
Hospital Admission
Avoidance Team)

Integrated
Discharge Team

Age UK Hospital
Aftercare Service

You Ask We
Respond - Hospital
Discharge Service

Reablement

Intermediate Care
bed base

Care Homes

What's working well

- Shared commitment to supporting people to live independently for longer, home first and delivering care closer to home.
- Good partnership working across Rotherham Place at all levels, including VCS, with a willingness work together to improve frailty care
- Acute offer includes MDT approach with frailty consultant, frailty nurses, therapy (CHAT and inpatients) in SDEC/AMU
- Out of hospital pathways for all levels of acuity eg virtual ward, urgent community response, CHAT /social care deflection at the front door, VCS.
- Transfer of Care Hub provides an integrated gateway/contact point
- Emergency care paramedics / specialist paramedics to focus on community-based assessment and management (admission avoidance)

Challenges

Overarching

- Ageing population, increased demand/complexity
- Rotherham health demographic/health inequalities
- Diverse range of services, but largely siloed, doesn't address the holistic needs of the individual/ageing process
- Reactive rather than preventative

Access to information

- To navigate /access the offer
- Access to shared patient/client records

Identifying and supporting frailty

- No single, consistent, frailty assessment tool is used consistently in Rotherham
- We do not have a shared caseload or frailty MDT

Opportunities

- Develop a person centred, integrated/holistic offer focussed on prevention
- Review universal offer and identify key cohorts based on vulnerable groups/health inequalities data eg learning disabilities
- Co-production with citizens and across health, care, VCS

Emergent priorities

1. Review and develop the preventative physical activity offer
2. Conduct a proof of concept trial of a proactive care (previously known as anticipatory care) model for frailty
 - a. a person-centred, proactive “thinking ahead” approach whereby health, social care and the voluntary & community sector support and encourage individuals, their families and carers to plan ahead of any changes in their health or care needs.
 - b. The aim is to increase peoples healthy years by up to 5 more years
 - c. The approach encourages people to make positive choices about what they should do themselves, and from whom they should seek support, in the event of a flare up or deterioration in their condition, or in the event of a carer crisis
3. Review the acute frailty offer including front door, acute frailty unit and hot clinics
 - Recommendations to be drafted for approval March 2024

References/Resources |

1. [NHS England » NHS Long Term Plan](#)
2. [Prevention in social care \(scie.org.uk\)](#)
3. [NHS England » Delivery plan for recovering urgent and emergency care services – January 2023](#)
4. [Intermediate care framework for rehabilitation, reablement and recovery following hospital discharge \(england.nhs.uk\)](#)
5. [Chief Medical Officer's annual report 2023: health in an ageing society - GOV.UK \(www.gov.uk\)](#)
6. [Health Wellbeing Strategy 2018 New branding.pdf \(rotherham.gov.uk\)](#)
7. [The Way Forward for Acute Frailty Same Day Emergency Care \(SDEC\) \(1\) - SDEC Collaboration Platform - FutureNHS Collaboration Platform](#)

Frailty Specific:

[NHS England » FRAIL strategy](#)

<http://www.bgs.org.uk/FrailtyHub>

<http://www.bgs.org.uk/Blueprint> (Frailty Blueprint – 7 touchpoints & 12 recommendations)

<http://www.bgs.org.uk/elearning/2023-frailty-identification-and-interventions>

<http://www.england.nhs.uk/ourwork/clinical-policy/older-people/frailty/frailty-resources>

<http://www.acutefrailtynetwork.org.uk/>

GIRFT and BGS: Six Steps to better care for older people in hospital www.bgs.org.uk/sixsteps

[NHS England » Proactive care: providing care and support for people living at home with moderate or severe frailty](#)

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Minutes	
Title of Meeting:	PUBLIC Rotherham Place Board: Partnership Business
Time of Meeting:	9.00am – 10.15am
Date of Meeting:	Wednesday 20 December 2023
Venue:	Elm Room, Oak House, Bramley, S66 1YY
Chair:	Chris Edwards /Sharon Kemp
Contact for Meeting:	Lydia George: lydia.george@nhs.net/ Wendy Commons: wcommons@nhs.net
Apologies:	Dr Anand Barmade, Medical Director, Connect Healthcare Sue Cassin, Chief Nurse (Roth), NHS SY ICB Richard Jenkins, Chief Executive, TRFT Sally Kilgariff, Chief Operating Officer, TRFT Toby Lewis, Chief Executive, RDaSH Dr Neil Thorman, Executive GP Lead, RPCCG Michael Wright, Deputy Chief Executive, The Rotherham NHS Foundation Trust Leonie Wieser, Policy Officer, RMBC
Conflicts of Interest:	General declarations were acknowledged for Members as providers/commissioners of services. However, no specific direct conflicts/declarations were made relating to any items on today's agenda.
Quoracy:	Confirmed as quorate.

Members Present:

Chris Edwards (**CE**), Chairing, Executive Place Director, NHS SY ICB
Sharon Kemp (**SK**), Chief Executive, Rotherham MBC
Ben Anderson (**BA**), Director of Public Health, RMBC
Shafiq Hussain (**SH**), Chief Executive, VAR
Claire Smith (**CS**), Deputy Place Director – Rotherham, NHS SY ICB
Julie Thornton (**JT**), Care Group Director (Roth), Rotherham, Doncaster and South Humber NHS Foundation Trust

Participants:

Wendy Allott (**WA**), Chief Finance Officer (Roth), NHS SY ICB
Andrew Clayton (**AC**), Head of Digital (Roth), NHS SY ICB
Lydia George (**LG**), Strategy & Delivery Lead - Rotherham, NHS SY ICB
Gordon Laidlaw (**GL**), Deputy Director of Communications, NHS SY ICB
Scott Matthewman (**SM**), Assistant Director – Commissioning, RMBC
Dr Jason Page (**JP**), Medical Director, NHS SY ICB
Cllr David Roche (**DR**), H&WB Board Chair, RMBC
Shahida Siddique (**SS**), Independent Non-Executive Member, NHS SY ICB

In Attendance:

Wendy Commons, Support Officer, Rotherham Place, NHS SY ICB

Item Number	Discussion Items
71/12/23	Public & Patient Questions
	There were no questions.
72/12/23	Update from the Director of Public Health
	<p>BA presented a graph showing the position across Rotherham with seasonal respiratory viruses. It was noted that incidences of Rhinovirus and RSV were starting to abate, whilst both flu and covid cases are increasing and expected to peak in January. Reassuringly, the flu vaccination being administered is a good match for the circulating strain this year which will limit illness and vaccination rates locally are good amongst the most vulnerable.</p> <p>There were still some concerns that there had been low update by 'at risk' groups. Staff uptake was also lower than previous, although it was acknowledged that some staff may have taken up alternative offers via their GP or local pharmacies rather than through their employer.</p> <p>BA highlighted other infectious diseases being monitored across Yorkshire. These included a single case of swine flu in North Yorkshire, an outbreak of measles in Sheffield which is now subsiding but where the risk of spread remains through holiday travel. In mitigation, plans are in place in Rotherham to catch up on MMR vaccinations and this will be supported by a media communications campaign.</p> <p>There was also cluster of TB being managed across the Barnsley, Rotherham and Doncaster borders as well as more cases of scabies having been notified which may relate to issues with availability of treatment. However, Rotherham is not one of the hotspots.</p> <p>CE thanked BA for the update. Given that the peak is expected in January and noting the potential risk of flu and covid peaks overlapping with the planned industrial action, an update will be scheduled for January Place Board.</p> <p style="text-align: right;">Action: BA/LG for agenda</p>
73/12/23	Rotherham Health App Briefing
	<p>Andrew Clayton, Head of Digital gave an update on the Rotherham Health App (RHA). He reminded members that the app had been purchased and implemented in 2018 to support access to GP online consultations and booking extended access services. It has continued to be developed alongside the development of the NHS App which came along in late 2018. It was the intention to have one solution for a patient facing platform integrating the Rotherham Health App with the NHS app but keeping local functionality. Unfortunately, the provider of app has advised that it is no longer able to provide a bespoke solution for Rotherham and intends to withdraw the product from the market with a mutually agreed date of 31 March 2024.</p> <p>The intention will be to transfer users to the NHS app where most of the high activity functions ie GP appointments booking, medication orders and viewing of secondary care appointments are now available. Locally, the TRFT patient engagement portal is also on the NHS App and nationally a range of online health and care services are being established including the national vaccination service.</p>

A communications plan has been developed to communicate the move with GP's, public and partners and practices will be supported to move their RHA users to the NHS App. National promotion of the NHS App has been planned nationally for the first quarter of 2024 which will coincide with the local migration.

AC advised that the functionality to replicate the booking of GP extended access appointments is not able to be replicated but work will continue with the GP federation to explore potential solutions.

The ICB has established a workstream to develop a local platform for access to online health and care services that are not covered in the NHS App and place partners are being engaged in its development to identify opportunities and requirements.

Following a request around ensuring that this change will not impact on those who are digitally excluded, AC assured members that methodical work will be undertaken practice by practice on structured programme over next three months.

Place Board noted the plans for exiting the Rotherham Health app and supported the promotion of the NHS App within organisations in readiness for 1 April 2024 migration.

74/12/23 Rotherham Place Plan Performance Report – Quarter 2

CS presented the Quarter 2 performance report for our 2023-25 Health and Care Place Plan.

CS highlighted that there are significant areas of the plan on track with no red rated milestones areas and a small number amber rated and being monitored, whilst 37 of the 58 milestones are on target and green with one already complete.

There are 47 key performance indicators (KPI) in the plan which have been chosen to give an understanding of the overall delivery of the place plan alongside the milestones. These reflected a positive picture in the main, although a considerable number were still to be confirmed at this stage. One KPI relating to the percentage of children waiting more than 18 weeks for neurodevelopmental assessment was noted as significantly off target. CS reassured Members that detailed work is taking place to understand this increase which is not demand as seen previously. RDaSH is currently revising the trajectory to show actual demand and numbers waiting.

CE congratulated teams on the favourable position reported at Quarter 2 which gave the Board assurance on progress against the plan. However as we head into the winter period and demand increases, members were cognisant that the position could be impacted.

DR complimented CS/LG on the clarity of the report's presentation.

The Quarter 2 performance position against the Place Plan was noted.

75/12/23 Place Achievements

CS presented two achievements within this month's report. One was around medicines optimisation and the other related to the development of a pathway for GPs to refer infants with a suspected cow's milk allergy or infant feeding issues.

Discussion turned to excellent work carried out in Rotherham health and care services. GL advised that the communications and engagement group have agreed to proactively look to increase submission for local and national awards to raise our profile and promote areas of good practice.

CE asked that members forward any potential appropriate awards and case studies to GL for consideration.

Action: All

JP highlighted good work undertaken on early help and CAMHS. The achievements template will be forwarded to the teams concerned for completion.

By way of celebrating success, it was agreed that the achievement submissions Place Board has received previously will be collated and the achievements template will be re-circulated to teams to encourage further examples.

Action: LG

76/12/23 Feedback from SY Integrated Care Partnership Meeting

DR advised that at a recent joint meeting of Health & Wellbeing Chairs it had been agreed to look at Childrens. The Local Government Association has been invited to come along to discuss more effective ways of working with the ICS.

JP had attended the SY ICP Meeting held on 30 November 2023 and advised that it had focussed on smoking with a consultation and presentations from local tobacco teams. There had been general support for the work to commence as soon as possible as well as support to feedback on the consultation to local MPs.

The next ICP meeting will discuss a potential proposal for safe place to sleep.

Members noted the feedback.

77/12/23 Communications to Partners

- Place Achievements
- Rotherham Director of Public Health reporting that the flu vaccination is a good match for the circulating strain this year.

78/12/23 Draft Minutes and Action Log from Public Place Board

The minutes from the meeting held on 15 November 2023 meeting were agreed as a true and accurate record.

The action log was reviewed and noted as up to date.

79/12/23 Risks and Items for Escalation to Health and Wellbeing Board

- Health App changes
- Winter pressures & Industrial action
- Place Performance Report for information

80/12/23 Future Agenda Items:

A new schedule of updates from transformation and enabling groups will commence. The first, in January will be on Learning Disabilities and Neurodiversity.

Standing Items

- Updates from all groups (as scheduled)
- Bi-Monthly Place Partnership Briefing
- Feedback from SY ICP Meetings – Bi Monthly
- Place Achievements (as and when)

81/12/23 Date of Next Meeting

The next meeting will take place on **Wednesday 17 January 2024** in Elm Room, Oak House from 9.00am – 10.00am.

Membership

Chris Edwards (Joint Chair)	Executive Place Director/ICB Deputy Chief Executive	NHS South Yorkshire Integrated Care Board
Sharon Kemp (Joint Chair)	Chief Executive	Rotherham Metropolitan Borough Council
Ben Anderson	Director of Public Health	Rotherham Metropolitan Borough Council
Richard Jenkins	Chief Executive	The Rotherham NHS Foundation Trust
Shafiq Hussain	Chief Executive	Voluntary Action Rotherham
Toby Lewis	Chief Executive	Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)
Dr Anand Barmade	Medial Director	Connect Healthcare Rotherham (GP Federation)
Dr Neil Thorman	Primary Care Representative	Rotherham Primary Care Collaborative Group

Participants

Cllr David Roche	Joint Chair	Rotherham Health and Wellbeing Board
Claire Smith	Deputy Place Director, Rotherham Place	NHS South Yorkshire Integrated Care Board
Sue Cassin	Chief Nurse, Rotherham Place	NHS South Yorkshire Integrated Care Board
Dr Jason Page	Medical Director, Rotherham Place	NHS South Yorkshire Integrated Care Board
Wendy Allott	Chief Finance Officer, Rotherham Place	NHS South Yorkshire Integrated Care Board
Shahida Siddique	Independent Non-Executive Member	NHS South Yorkshire Integrated Care Board
Ian Spicer	Strategic Director, Adult Care, Housing and Public Health	Rotherham Metropolitan Borough Council
Nicola Curley	Director of Children's Services, RMBC	Rotherham Metropolitan Borough Council
Lydia George	Strategy and Delivery Lead	NHS South Yorkshire Integrated Care Board
Gordon Laidlaw	Head of Communications	NHS South Yorkshire Integrated Care Board
Michael Wright	Deputy Chief Executive	The Rotherham NHS Foundation Trust
Sally Kilgariff	Chief Operating Officer	The Rotherham NHS Foundation Trust
Julie Thornton	Care Group Director	Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)

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Minutes	
Title of Meeting:	PUBLIC Rotherham Place Board: Partnership Business
Time of Meeting:	9.00am – 10.15am
Date of Meeting:	Wednesday 17 January 2024
Venue:	Elm Room, Oak House, Bramley, S66 1YY
Chair:	Chris Edwards/ Sharon Kemp
Contact for Meeting:	Lydia George: lydia.george@nhs.net/ Wendy Commons: wcommons@nhs.net
Apologies:	Sue Cassin, Chief Nurse (Roth), NHS SY ICB Richard Jenkins, Chief Executive, TRFT Toby Lewis, Chief Executive, RDaSH Dr Neil Thorman, Executive GP Lead, RPCCG Lydia George, Strategy & Delivery Lead (Roth), NHS SY ICB Shahida Siddique, Independent Non-Exec Member, NHS SY ICB Michael Wright, Deputy Chief Executive, TRFT
Conflicts of Interest:	General declarations were acknowledged for Members as providers/commissioners of services. However, no specific direct conflicts/declarations were made relating to any items on today's agenda.
Quoracy:	Confirmed as quorate.

Members Present:

Sharon Kemp (**SK**), Chairing, Chief Executive, Rotherham Council
Chris Edwards (**CE**), Executive Place Director, NHS SY ICB
Dr Anand Barmade, Medical Director, Connect Healthcare
Ben Anderson (**BA**), Director of Public Health, RMBC
Shafiq Hussain (**SH**), Chief Executive, Voluntary Action Rotherham
Claire Smith (**CS**), Deputy Place Director – Rotherham, NHS SY ICB
Julie Thornton (**JT**), Care Group Director (Roth), Rotherham, Doncaster and South Humber NHS Foundation Trust
Louise Tuckett (**LT**), Director of Strategy, Planning & Performance, The Rotherham NHS Foundation Trust
Andrew Russell (**AR**), Chief Nurse, NHS SY ICB

Participants:

Wendy Allott (**WA**), Chief Finance Officer (Roth), NHS SY ICB
Gordon Laidlaw (**GL**), Deputy Director of Communications, NHS SY ICB
Dr Jason Page (**JP**), Medical Director, NHS SY ICB
Garry Parvin (**GP**), Joint Head of LD, Autism & Transitions Commissioning, RMBC/ICB
Cllr David Roche (**DR**), H&WB Board Chair, RMBC (part of the meeting)

In Attendance:

Leonie Wieser, Policy Officer, RMBC
Wendy Commons, Support Officer, Rotherham Place, NHS SY ICB

Item Number	Discussion Items
82/1/24	Public & Patient Questions
There were no questions.	
83/1/24	Update from the Director of Public Health
<p>BA presented graphs showing that respiratory trends are coming down with peaks of flu and covid now passed. However, a note of caution was added that a second peak was possible following schools returning.</p> <p>There had been a significant outbreak of measles in the Midlands, which is of national concern, however Rotherham has had good uptake overall of the MMR vaccinations with known pockets of low coverage.</p> <p>Members thanked BA and noted the update.</p>	
84/1/24	Learning Disability & Neurodevelopmental Update
<p>Garry Parvin, Joint Head of Learning Disabilities, Autism and Transition Commissioning gave an update. He reminded members that two strategies have been drafted, one for people with a learning disability and one for all age autism, which have been built on engagement and co-produced. The strategies have shared priorities and also align with the South Yorkshire Integrated Care Partnership priorities.</p> <p>GP gave a broad overview of the South Yorkshire LDA programme and priorities for 23/24.</p> <p>Members were asked to note the challenges and risks. There had been an increase in the number of admissions of autistic people into mental health hospital beds. A review of Rotherham pathways is being undertaken to ensure resources and pathways are best aligned to avoid inappropriate admissions.</p> <p>Also a challenge in resources, both financial and staffing, continues to be reported by place partners and there are active conversations to deploy skill mixing to close staffing gaps.</p> <p>Going forward both strategies will be taken through Council Cabinet in February 2024 and through SY Integrated Care Board Place Executive Team in late January where Place partners will be asked to support the strategies.</p> <p>To address the Place Plan priority of supporting the development of pathways to reduce inappropriate admissions, a review of support pathways for autistic people will commence this month.</p> <p>IS welcomed the whole co-ordinated approach taken and asked what key messages Place members as a partnership can take. GP advised that raising awareness with staff that small changes can make a big impact for people and by improving communication to promote the service and what's available will help.</p> <p>AB highlighted that there are still some delays in diagnosis resulting in parents wishing to go through the Any Qualified Provider route and he was concerned that because GPs are no longer able to complete referrals, choice is being restricted.</p>	

CS reassured that work has been done with schools on ensuring that, regardless of the time taken for assessment, people are supported throughout the process. This is being monitored closely.

Although there had been delays in the rollout of the Oliver McGowan Mandatory training programme, GP assured that this was being resolved. It was acknowledged that despite the necessity for a face to face session, attendees reported it had been powerful and had an impact.

JT reported challenges for RDaSH in discharging patients with LD/ND issues to safe spaces. GP updated on the procurement process for future provision, reporting that submitted bids are being considered.

AR highlighted the possible overlap with continuing healthcare provision and discussions for development in preventative work.

Following a query from SK around employment, GP advised that work on internships and the links built with the ICB and RMBC HR teams should see an increase of people going into employment and them sharing their experiences will help measure the effect.

Replying to a query from SH, it was noted that there will be key performance indicators and milestones against the priorities in the strategies. IS confirmed that further work can be undertaken post sign off of the strategies and on the measures of success when they are socialised with Place partners as to what they wish to see.

Given the history of long waits Rotherham experienced in the past and that neighbouring ICB colleagues are undergoing similar presently, LT suggested that the learning is shared via the Mental Health LDA. This was welcomed and CE suggested Helen Sweaton, Joint Assistant Director of Commissioning, CYPS would also be keen to be involved.

Place Board thanked GP for the update.

85/1/24	Communications to Partners
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Work with the Council colleagues on socialisation of LD and autism strategies.

86/1/24	Draft Minutes and Action Log from Public Place Board
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The minutes from the meeting held on 20 December 2023 meeting were agreed as a true and accurate record.

The action log was reviewed and on track.

87/1/24	Risks and Items for Escalation to Health and Wellbeing Board
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Consideration will be given as to whether the Mental Health Review is escalated after Place Board has received a three month update in its confidential session.

88/1/24	Future Agenda Items:
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- 23/24 In Year Financial Position (Feb) – DoFs

The schedule of planned updates will be circulated with the minutes for information.

Action: WC/LG

Standing Items

- Updates from all groups (as scheduled)
- Bi-Monthly Place Partnership Briefing
- Feedback from SY ICP Meetings – Bi Monthly

– Place Achievements (as and when)

89/1/24 **Date of Next Meeting**

The next meeting will take place on **Wednesday 21 February 2024** in Elm Room, Oak House from 9.00am – 10.00am.

Membership

Chris Edwards (Joint Chair)	Executive Place Director/ICB Deputy Chief Executive	NHS South Yorkshire Integrated Care Board
Sharon Kemp (Joint Chair)	Chief Executive	Rotherham Metropolitan Borough Council
Ben Anderson	Director of Public Health	Rotherham Metropolitan Borough Council
Richard Jenkins	Chief Executive	The Rotherham NHS Foundation Trust
Shafiq Hussain	Chief Executive	Voluntary Action Rotherham
Toby Lewis	Chief Executive	Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)
Dr Anand Barmade	Medial Director	Connect Healthcare Rotherham (GP Federation)
Dr Neil Thorman	Primary Care Representative	Rotherham Primary Care Collaborative Group

Participants

Cllr David Roche	Joint Chair	Rotherham Health and Wellbeing Board
Claire Smith	Deputy Place Director, Rotherham Place	NHS South Yorkshire Integrated Care Board
Sue Cassin	Chief Nurse, Rotherham Place	NHS South Yorkshire Integrated Care Board
Dr Jason Page	Medical Director, Rotherham Place	NHS South Yorkshire Integrated Care Board
Wendy Allott	Chief Finance Officer, Rotherham Place	NHS South Yorkshire Integrated Care Board
Shahida Siddique	Independent Non-Executive Member	NHS South Yorkshire Integrated Care Board
Ian Spicer	Strategic Director, Adult Care, Housing and Public Health	Rotherham Metropolitan Borough Council
Nicola Curley	Director of Children's Services, RMBC	Rotherham Metropolitan Borough Council
Lydia George	Strategy and Delivery Lead	NHS South Yorkshire Integrated Care Board
Gordon Laidlaw	Head of Communications	NHS South Yorkshire Integrated Care Board
Michael Wright	Deputy Chief Executive	The Rotherham NHS Foundation Trust
Sally Kilgariff	Chief Operating Officer	The Rotherham NHS Foundation Trust
Julie Thornton	Care Group Director	Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)

Minutes	
Title of Meeting:	Rotherham Place Board: ICB Business
Time of Meeting:	10.15 – 11.00am
Date of Meeting:	Wednesday 20 December 2023
Venue:	Elm Room, Oak House, Bramley, S66 1YY
Chair:	Chris Edwards
Contact for Meeting:	Lydia George: lydia.george@nhs.net/ Wendy Commons: wcommons@nhs.net

Apologies:	Anand Barmade, Medical Director, Connect Healthcare Ben Anderson, Director of Public Health, RMBC Sue Cassin, Chief Nurse (Roth), NHS SY ICB Richard Jenkins, Chief Executive, TRFT Sharon Kemp, Chief Executive, RMBC Toby Lewis, Chief Executive, RDaSH Cllr David Roche, Joint H&WB Board Chair, RMBC Dr Neil Thorman, Primary Care Representative, RPCCG Julie Thornton, Care Group Director (Roth), RDaSH Michael Wright, Deputy Chief Executive, TRFT
Conflicts of Interest:	General declarations were acknowledged for Members as providers/commissioners of services.
Quoracy:	No business shall be transacted unless at least 60% of the membership (which equates to 3 individuals) and including the following are present: (1) Executive Place Director and (2) Independent Non-Executive Member.

Members Present:

Chris Edwards (**CE**), Executive Place Director (Roth), NHS SY ICB
Wendy Allott (**WA**), Chief Finance Officer (Roth), NHS SY ICB
Shafiq Hussain (**SH**), Chief Executive, VAR
Dr Jason Page (**JP**), Medical Director, NHS SY ICB
Shahida Siddique (**SS**), Independent Non-Exec Member, NHS South Yorkshire, ICB
Claire Smith (**CS**), Deputy Place Director (Roth), NHS SY ICB

Participants:

Lydia George (**LG**), Strategy & Delivery Lead - Rotherham, NHS South Yorkshire ICB
Gordon Laidlaw (**GL**), Deputy Director of Communications, NHS SY ICB

In Attendance:

Wendy Commons, Rotherham Place Board Support Officer, NHS South Yorkshire ICB

Item Number	Discussion Items
i49/12/23	<p>Place Performance Report</p> <p>CS reported that there had been no significant movement overall within the month and highlighted:</p> <ul style="list-style-type: none"> • Whilst Diagnostics and Referral to Treatment (RTT) are not meeting the target, Rotherham continues to perform well in compared to national performance • IAPT waiting is positive at 94% against a 75% target • Cancer waits are now streamlined based on the new guidance – there is some concern that the target is not being met although it is noted that the figures are place not provider <ul style="list-style-type: none"> ○ 28 day faster diagnosis – falling off slightly (73.2% vs 75% target) ○ 31 day – similar with a little dip (84.9% vs 96% target) ○ 62 day – similar with past 2 months more challenged (67.2% vs 85% target) • RTT Incomplete Pathways did not meet the 92% standard in October at 61.1% (provisional data) - there were 1095 waiters over 52 weeks, 179 over 65 weeks, 6 over 78 weeks and 0 over 104 weeks • Overall RTT continues to perform better than some other areas across South Yorkshire • Diagnostics saw improvement in October – historically, Rotherham performs well in this area. The largest breaches were in echo, cardio, MRI, CT and sleep • There was an increase in cancelled operations in Quarter 2 • A&E was in a more challenged position and slightly under local target. Data shows benchmarking against the other 13 trusts that took part in the trial. TRFT was 5th highest out of the 14 pilot sites in October. Although challenged compare well. • Yorkshire Ambulance Service category 1 and category 2 – slight increase (mean of 9 minutes 18 seconds for cat 1 vs October was 8 minutes 56 seconds) • Hand overs 15 minute turnaround for TRFT in November was 56.9%, an increase from October performance at 53.8%. • Discharges <ul style="list-style-type: none"> ○ Right to reside – 2nd best in South Yorkshire at 9.9% (Barnsley 9.5%) ○ 7+ Length of Stay – in the middle at 22.5% (Barnsley 70% and Doncaster 7%) ○ did not meet the criteria to reside but continued (7 day average) (all LOS) – a positive position with lowest number across South Yorkshire. <p>Further work and additionality are also planned to support us through winter.</p> <p>Members noted Place performance for this month.</p>
i50/12/23	<p>NHS Response to Home Office PREVENT Guidance</p> <p>CE advised that the Home Office had published the Prevent Duty Guidance on 7 September 2023 which was followed by an NHS England briefing in October. Although there were no specific recommendations or actions to be taken by Place Board, members were asked to note the points highlighted that will impact on Integrated Care Boards.</p> <p>Place Board noted the guidance and the subsequent actions for South Yorkshire ICB.</p>

i51/12/23	Rotherham Safeguarding Adults Board Annual Report
<p>CE presented the Rotherham Safeguarding Adults Board (RSAB) Annual Report for 2022-23 for information. The report gave a summary of the work completed in that period by the RSAB and its sub groups and also highlighted the Local Government Association peer challenge that had taken place in July 2023. The report highlighted three key objectives from the new RSAB 2022-25 strategic plan as back to basics, systems, processes and performance and strengthening partnership.</p> <p>Members noted the annual report and supported the message from Place Board member Cllr David Roche about promoting true partnership working and embedding safeguarding into all aspects of working life to help protect the vulnerable.</p>	
i52/12/23	ICB Board Assurance Framework
<p>Members received the risk register, issues log and Board assurance framework for information.</p> <p>Noting that there will be an update on Learning Disabilities and Neurodiversity to next month's Place Board, CS will ensure that the presentation includes some assurance for Place Board to address risk SY082 which relates to the exponential growth seen in the number of children and young people with eating disorders who are now transitioning to adult services.</p> <p style="text-align: right;">Action: CS</p> <p>The Board noted the risk register, issues log and Board Assurance Framework. No amendments were suggested.</p>	
i53/12/23	Minutes and Action Log from 15 November 2023 Meeting
<p>The minutes from the November meeting were accepted as a true and accurate record. The action log was reviewed and up to date.</p>	
i54/12/23	Communication to Partners
<ul style="list-style-type: none"> – Celebrating Rotherham good practice and achievements – This year's flu vaccination is a good match for circulating strain 	
i55/12/23	Risks and Items for Escalation
<p>None.</p>	
i56/12/23	Future Agenda Items:
<p>Standing Items</p> <ul style="list-style-type: none"> – Rotherham Place Performance Report (monthly) – Risk Register (Monthly for information) – Place Prescribing Report (Feb) – Quality, Patient Safety and Experience Dashboard (Jan) – Quarterly Medical Director Update (Feb) - JP – Public Health Directors Update – Partnership session (Jan) – BA 	

i57/12/23	Date of Next Meeting
The next meeting will take place on Wednesday 17 January 2024 from 10.15am – 11am in Elm Room, Oak House, Bramley, Rotherham S66 1WB.	

Membership

Chris Edwards (Chair)	Executive Place Director/Deputy Chief Executive, ICB	NHS South Yorkshire Integrated Care Board
Claire Smith	Deputy Place Director, Rotherham Place	NHS South Yorkshire Integrated Care Board
Wendy Allott	Chief Finance Officer, Rotherham Place	NHS South Yorkshire Integrated Care Board
Sue Cassin	Chief Nurse, Rotherham Place	NHS South Yorkshire Integrated Care Board
Dr Jason Page	Medical Director, Rotherham Place	NHS South Yorkshire Integrated Care Board
Shahida Siddique	Independent Non-Executive Member	NHS South Yorkshire Integrated Care Board

Participants

Ben Anderson	Director of Public Health	Rotherham Metropolitan Borough Council
Shafiq Hussain	Chief Executive	Voluntary Action Rotherham
Richard Jenkins	Chief Executive	The Rotherham NHS Foundation Trust (TRFT)
Sharon Kemp	Chief Executive	Rotherham Metropolitan Borough Council
Toby Lewis	Chief Executive	Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)
Cllr David Roche	Joint Chair	Rotherham Health and Wellbeing Board
Dr Neil Thorman	Primary Care Representative	Rotherham Primary Care Collaborative Group
Dr Anand Barmade	Medical Director	Connect Healthcare Rotherham
Michael Wright	Deputy Chief Executive	The Rotherham NHS Foundation Trust
Sally Kilgariff	Chief Operating Officer	The Rotherham NHS Foundation Trust
Lydia George	Strategy & Delivery Lead	NHS South Yorkshire Integrated Care Board
Nicola Curley	Director of Children's Services	Rotherham Metropolitan Borough Council
Gordon Laidlaw	Head of Communications	NHS South Yorkshire Integrated Care Board
Ian Spicer	Strategic Director, Adult Care	Rotherham Metropolitan Borough Council
Julie Thornton	Care Group Director	Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)

Minutes	
Title of Meeting:	Rotherham Place Board: ICB Business
Time of Meeting:	10.00 – 11.00am
Date of Meeting:	Wednesday 17 January 2024
Venue:	Elm Room, Oak House, Bramley, S66 1YY
Chair:	Chris Edwards
Contact for Meeting:	Lydia George: lydia.george@nhs.net/ Wendy Commons: wcommons@nhs.net
Apologies:	Sue Cassin, Chief Nurse (Roth), NHS SY ICB Richard Jenkins, Chief Executive, TRFT Sharon Kemp, Chief Executive, RMBC Toby Lewis, Chief Executive, RDaSH Cllr David Roche, Joint H&WB Board Chair, RMBC Dr Neil Thorman, Primary Care Representative, RPCCG Shahida Siddique, Independent Non-Exec Member, NHS South Yorkshire, ICB Lydia George, Strategy & Delivery Lead - Rotherham, NHS South Yorkshire ICB Michael Wright, Deputy Chief Executive, TRFT Julie Thornton, Care Group Director (Roth), RDaSH
Conflicts of Interest:	General declarations were acknowledged for Members as providers/commissioners of services.
Quoracy:	No business shall be transacted unless at least 60% of the membership (which equates to 3 individuals) and including the following are present: (1) Executive Place Director and (2) Independent Non-Executive Member.

Members Present:

Chris Edwards (**CE**), Executive Place Director (Roth), NHS SY ICB
Wendy Allott (**WA**), Chief Finance Officer (Roth), NHS SY ICB
Dr Jason Page (**JP**), Medical Director, NHS SY ICB
Claire Smith (**CS**), Deputy Place Director (Roth), NHS SY ICB
Andrew Russell (**AR**), Chief Nurse (Donc), NHS SY ICB

Participants:

Ben Anderson (**BA**), Director of Public Health, RMBC
Anand Barmade (**AB**), Medical Director, Connect Healthcare
Shafiq Hussain (**SH**), Chief Executive, Voluntary Action Rotherham
Gordon Laidlaw (**GL**), Deputy Director of Communications, NHS SY ICB
Louise Tuckett (**LT**), Director of Strategy Planning and Performance, TRFT

In Attendance:

Garry Parvin, Joint Head of LD, Autism & Transitions Commissioning, RMBC/ICB
Wendy Commons, Rotherham Place Board Support Officer, NHS South Yorkshire ICB

Item Number	Discussion Items
i58/1/24	<p>Place Performance Report</p> <p>CS reported that there had been no significant movement overall within the month and highlighted:</p> <ul style="list-style-type: none"> – Access to talking therapies remains positive with over performance against target – Cancer 28 day faster diagnosis standard was not met again in November but had slightly improved from Oct at 74.1% against the 75% target. We are struggling to meet the other cancer targets as well, in particular the 62 week referral to treatment target with performance around 68% against the 85% target. These continue to be closely monitored. – Referral to treatment is challenged In November there were 1023 waiters over 52 weeks, 149 over 65 weeks, 8 over 78 weeks but zero over 104 weeks. – Diagnostics remain positive and we are third best in country. However it was noted that there are some areas of low performance eg echo cardio which are discussed at performance meetings. – Performance against the 4 hour target improved to 62.8% from 58.3% – Ambulance handover performance dipped slightly from November with the winter pressures challenges but we are still performing better than others in South Yorkshire. – The number of GP appointments reduced slightly but are still the highest in South Yorkshire and the percentage of patients seen face to face is high at consistently over 78%. – With infection control we are seeing incidences higher than of C DIFF which is being investigated with Trust and Public Health/ICB colleagues with assurances received through appropriate forums. – Access to talking therapies treatment remains a challenge as the ICB looks at continuing commissioning arrangements with IESO to support this target – an increase in ambulatory care sensitive admission has been seen of those that could have been supported in community. This is one of the areas we have prioritised for 2024-25. – Finally, discharge home has increased to over 95% which is positive and our no criteria to reside remains reasonable <p>CE thanked CS for the summary of performance noting that the early preparation and sign off of the winter plan had contributed to the positive, strong performance from all providers and the system resilience being seen. It was agreed to reflect upon Rotherham's winter plan more fully in February.</p> <p style="text-align: right;">Action: CS</p> <p>Looking forward, work around ambulance conveyancing and improving cancer waits will be undertaken. JP/LT to discuss the appropriate timing for the latter to take place, acknowledging the current challenges of ongoing industrial action.</p> <p style="text-align: right;">Action: JP/LT</p> <p>Members noted the Place performance update.</p>

i59/1/24	Quality, Patient Safety and Experience Report
<p>JP presented the report highlighting:</p> <ul style="list-style-type: none"> – Industrial action by junior doctors continues to be of concern and remains a risk the system – National guidance is still awaited on Endoscopic Retrograde Cholangiopancreatography (ERCP) services is still awaited – Work continues on implementing the recommendations from the national paediatric audiology screening programme review, although it was noted that no significant concerns were identified. <p>In primary care four practices are under enhanced vigilance with re-inspection visits planned and visits arranged. Similarly there were five care homes being monitored under RMBC oversight.</p> <p>ICB colleagues are providing support around the statutory functions for children's safeguarding whilst additional work is being carried out to address the impact on workforce issues caused by sickness absence and planned annual leave. It was noted that a positive start had been made on a model that will work across South Yorkshire as a system working in partnership.</p> <p>Finally, JP reported that a good start has been made on work undertaken locally to prepare for the implementation of the new Patient Safety Incident Response Framework and the recording of serious incidents and the processes we will use for reviewing serious incidents going forward. Constructive discussions have taken place with both Trust partners which will continue.</p> <p>Following discussion around c-difficile and increasing cases both nationally and locally of a new strain. Although there are currently no cases in Rotherham of this monitoring will continue and plans are in place to manage if necessary.</p> <p>AR advised that work has been carried out to look at IPC provision across Place and the potential gaps, however, funding the preferred model is not easy and discussions are ongoing for Place partners to provide support and give advice to domiciliary and care settings.</p> <p>AR confirmed that the ICB is moving to an integrated system approach across South Yorkshire for continuing healthcare (CHC) services which will give more resilience to provide for the increasing complexity and support required by patients. This new approach has commenced may take time to embed.</p> <p>AR advised that following a CQC inspection at Cheswold Park Hospital and inadequate rating had been issued. This is an independent hospital in Doncaster providing secure mental health provision which is directly commissioned by NHS England. Rotherham patients placed at the facility are being identified whilst further guidance on next steps is awaited. Members were assured that in the meantime, support is being provided through the quality improvement group.</p> <p>Place Board noted the contents of this month's report.</p>	
i60/1/24	ICB Board Assurance Framework, Risk Register & Issues Log
<p>Members received the risk register, issues log and board assurance framework for information.</p>	

Place Board noted the business assurance framework and, following discussion scheduled for April's confidential session, will review the risk register and reassess risk specifically relating to the impact of implementing the revised mental health pathway and delivery model.

i61/1/24	Minutes and Action Log from 20 December 2023 Meeting
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The minutes from the December meeting were accepted as a true and accurate record. The action log was reviewed and up to date.

i62/1/24	Communication to Partners
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GL reported that communications over the winter period had been very well co-ordinated across SY and Rotherham partners and had worked well.

i63/1/24	Risks and Items for Escalation
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None at this stage (see minute i60/1/24).

i64/1/24	Future Agenda Items:
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Standing Items

- Rotherham Place Performance Report (monthly)
- Risk Register (Monthly for information)
- Place Prescribing Report (Feb)
- Quality, Patient Safety and Experience Dashboard (Mar)
- Quarterly Medical Director Update (Feb) - JP

i65/1/24	Date of Next Meeting
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The next meeting will take place on **Wednesday 21 February 2024** from 10.15am – 11am in Elm Room, Oak House, Bramley, Rotherham S66 1WB.

Membership

Chris Edwards (Chair)	Executive Place Director/Deputy Chief Executive, ICB	NHS South Yorkshire Integrated Care Board
Claire Smith	Deputy Place Director, Rotherham Place	NHS South Yorkshire Integrated Care Board
Wendy Allott	Chief Finance Officer, Rotherham Place	NHS South Yorkshire Integrated Care Board
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