

HEALTH SELECT COMMISSION

Date and Time:- Thursday 20 November 2025 at 5.00 p.m.

Venue:- Rotherham Town Hall, The Crofts, Moorgate Street, Rotherham. S60 2TH

Membership:- Councillors Keenan (Chair), Yasseen (Vice-Chair), Adair, Ahmed, Baum-Dixon, Brent, Clarke, Duncan, Garnett, Harper, Havard, Knight, Reynolds, Tarmey, Thorp, Fisher and Harrison.

Co-opted Member David Gill representing Rotherham Speak Up.

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

Rotherham Council advocates openness and transparency as part of its democratic processes.

Anyone wishing to record (film or audio) the public parts of the meeting should inform the Chair or Governance Advisor of their intentions prior to the meeting.

AGENDA

1. Apologies for Absence

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

2. Minutes of the previous meeting held on 2 October 2025 (Pages 5 - 20)

To consider and approve the minutes of the previous meeting held on 2 October 2025 as a true and correct record of the proceedings and to be signed by the Chair.

3. Declarations of Interest

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

4. Questions from members of the public and the press

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

5. Exclusion of the Press and Public

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

For Discussion/Decision:-

6. Draft Adult Social Care Mental Health Strategy 2026-2029 (Pages 21 - 46)

This item is to receive a presentation in relation to the Draft Adult Social Care Mental Health Strategy 2026-2029 and its development, giving Health Select Commission Members and opportunity to consider the Strategy and make recommendations ahead of its presentation to Cabinet in December 2025.

7. Rotherham Place Partners Winter Plan 2025-26 (Pages 47 - 58)

To receive a presentation setting out the Rotherham Place Partners Winter Plan for 2025-26.

8. Health Select Commission Work Programme - 2025/26 (Pages 59 - 60)

To consider the Health Select Commission's work programme for 2025/26.

For Information/Monitoring:-

To receive and note the contents of any reports routinely submitted to the Health Select Commission for information and awareness.

9. South Yorkshire, Derbyshire and Nottinghamshire Joint Health Overview and Scrutiny Committee

The most recent South Yorkshire, Derbyshire and Nottinghamshire Joint Health Overview and Scrutiny Committee took place on 21 October 2025. The minutes of this meeting have not yet been published.

10. Health and Wellbeing Board Annual Report (Pages 61 - 99)

This item is to receive a copy of the Health and Wellbeing Board Annual Report as approved by the Health and Wellbeing Board in July 2025 for information purposes.

11. Urgent Business

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



JOHN EDWARDS,
Chief Executive.

**The next meeting of the Health Select Commission
will be held on Thursday 22 January 2026
commencing at 4.00 p.m.
in Rotherham Town Hall.**

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HEALTH SELECT COMMISSION
Thursday 2 October 2025

Present:- Councillor Keenan (in the Chair); Councillors Yasseen, Baum-Dixon, Brent, Clarke, Duncan, Garnett, Harper, Havard, Thorp and Harrison.

Apologies for absence:- Apologies were received from Ahmed, Knight, Tarmey and Fisher.

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

21. MINUTES OF THE PREVIOUS MEETING HELD ON 31 JULY 2025

Resolved:-

That the minutes of the meeting held on 31 July 2025 were approved as a true and correct record of the proceedings.

22. DECLARATIONS OF INTEREST

The following declarations of interest were made:-

Member	Agenda Item	Interest Type	Nature of Interest
Councillor Garnett	Agenda Item 6 – TRFT Annual Report	Personal Interest	Employment with TRFT

23. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no questions from members of the public or press.

24. EXCLUSION OF THE PRESS AND PUBLIC

There were no items on the agenda that required the exclusion of the press or members of the public.

25. PHYSICAL ACTIVITY FOR HEALTH (SPORT ENGLAND)

The Chair welcomed Councillor Baker-Rogers, Cabinet Member for Adult Care and Health and Gilly Brenner, Public Health to the meeting and invited Councillor Baker-Rogers to introduce the report and presentation.

The Cabinet Member, Adult Care and Health established the recommendations from the report and underlined the importance of increasing physical activity in terms of impact on population health in the context of lower than national average physical activity levels within the Borough.

They explained that the funding secured reflected a small part of overarching partnership work, which aimed to improve engagement, encourage system learning and embed physical activity within Rotherham's communities in a meaningful and sustainable way.

The presentation, led by the Public Health Consultant, centred on the Sport England Place Expansion Programme and its implementation in Rotherham through the Moving Rotherham Partnership.

They explained that the rationale for Rotherham's selection as a Place Expansion area was twofold. Firstly, the Borough faced some of the poorest health outcomes in the country, with high levels of physical inactivity, long-term ill-health, and entrenched health inequalities. Almost one in three adults in Rotherham were inactive, doing less than 30 minutes of exercise or physical activity per week, and inactivity was disproportionately concentrated in areas of deprivation and amongst people with long-term conditions and disabilities.

Secondly, Rotherham had demonstrated strong readiness for collaborative work. The Moving Rotherham Partnership was already well-established, and the Borough had a reputation for effective cross-sector collaboration, which made it an ideal candidate for Sport England's investment in systemic change. The programme was not intended to deliver isolated interventions but to embed physical activity into the fabric of everyday life within Rotherham's communities. Sport England's emphasis on system change meant transforming environments, services, and community engagement in a coordinated way.

The Public Health Consultant outlined that the development grant awarded in April 2025, following Cabinet approval in March, enabled the Council and its partners to increase capacity and begin implementing a whole system approach. An action plan was developed to track progress and align partner activities with the programme's goals and the initiative was aligned with national strategies such as the NHS Long-Term Plan, the Department for Culture, Media and Sport's Get Active Strategy, and local frameworks including the Rotherham Health and Wellbeing Strategy.

They described that the programme was structured around five strategic aims, the first of which focused on strategy and coordination. Partners were brought together under a shared vision, and a data and research officer was appointed to support evidence-based decision-making. This role involved gathering insight from communities and analysing data to inform future planning, including a bid for a main award in spring 2026. Systems leadership was also promoted, encouraging organisations to

understand their roles in promoting physical activity and to work collaboratively.

The second aim was to increase physical activity across the population. This involved improving access to information and opportunities, ensuring that residents knew what activities were available and how to participate. A system leaders' group and the Big Active Network were established to facilitate communication and coordination. The Big Active Network was open to anyone in Rotherham interested in supporting the initiative. A newsletter and extranet site were launched to share updates and news, such as recent coverage of disability football initiatives. Branding and communications work was also commissioned to unify messaging and promote awareness of physical activity opportunities. The goal was to build a shared identity around Moving Rotherham and to use behavioural change techniques to encourage participation.

The third aim targeted decreasing inactivity, particularly among sedentary populations. The focus was on making physical activity a natural part of daily life rather than something that required special effort. Projects included green space engagement led by Flux, which explored how local parks and outdoor areas could be better utilised to support physical activity. Previous public engagement had shown that residents valued being active in green spaces, especially with their families, and saw mental health benefits from being outdoors. The Yorkshire Sport Foundation conducted community pilots in target wards with high levels of inactivity, working with residents to identify strengths and opportunities for increasing activity. These pilots considered diverse needs, recognising that different cohorts, such as older adults or South Asian women might require tailored approaches. The work also aligned with South Yorkshire's newly launched walking, wheeling, and cycling strategy, which aimed to create safe and enjoyable environments for children and families to be active.

The fourth aim addressed inequality of access to physical activity. People with long-term conditions and disabilities were particularly disadvantaged, and the programme sought to make physical activity more inclusive. A strand of work led by a member of the Public Health Team focused on inclusive physical activity, bringing together a network of stakeholders and hosting events with specialist speakers. The goal was to adapt mainstream physical activity offers to be more accessible to people with physical and learning disabilities and neurodiversity. The Every Move Counts referral hub, run by Connect Healthcare, allowed clinicians to refer patients with long-term conditions to supportive coaching. This coaching helped individuals find activities that were enjoyable and sustainable, whether that meant joining a specialist exercise class for COPD (Chronic Obstructive Pulmonary Disease) patients or engaging in gardening, dance, or walking football. The emphasis was on long-term engagement rather than short-term programmes, with activities tailored to individual preferences and motivations.

The fifth aim focused on children and young people. Having recognised that children often started life active but may drop out as they age, the programme sought to foster lifelong engagement with physical activity. Successful events such as the school baton relay and school games, held as part of the Children's Capital of Culture initiative, demonstrated the power of inclusive and fun activities. These events brought together children who had not previously participated in sport, and anecdotal feedback showed that some children were inspired to continue running and exploring local opportunities like the weekly children's park run in Rosehill Park. The programme aimed to build on this legacy, embed co-production and family-focused approaches. It encouraged multigenerational activity, where parents and children were active together, which was seen as key to sustaining physical activity across throughout life.

The Public Health Consultant advised members that since March 2025, considerable progress had been made. Key roles were filled, including a programme coordinator and a data lead. Community pilots, inclusive seminars, and branding initiatives were launched. Governance structures were refreshed, with the Moving Rotherham Board overseeing strategic delivery and the Big Active Network supporting broader engagement. The programme had built strong momentum and fostered collaboration across sectors.

They confirmed, however, that several challenges were identified. The tight timeline for preparing a bid for a main award in April 2026 posed significant pressure, particularly in terms of gathering high-quality engagement material and translating it into actionable intelligence. Sustaining partner engagement was another challenge, especially as the number of partners continued to grow. Whilst growth was positive, it required careful coordination to ensure alignment. Ensuring community expectations were managed was also crucial. Although the funding was substantial, it needed to be carefully allocated across multiple initiatives, and there was a need to communicate clearly about what could realistically be achieved.

The Public Health Consultant concluded by inviting Health Select Commission Members to join the Big Active Network and contribute to the ongoing work.

The Chair thanked the Cabinet Member and Public Health Consultant for the report and presentation and invited comments and questions from Members.

Councillor Duncan asked for clarification on the refreshed governance structures and how the service would ensure that governance functioned effectively.

The Public Health Consultant explained that whilst the Moving Rotherham Board had existed previously, its membership had been reviewed to

better reflect the evolving partnership. A new Systems Leaders Group was introduced to support Sport England's systems leadership approach. This group included key delivery partners such as Places Leisure and Rotherham United Community Trust, alongside representatives from the voluntary and community sector, including Age UK and Voluntary Action Rotherham. Additionally, the Big Active Network was formalised to ensure regular engagement with individuals and organisations not directly involved in delivery but still committed to the movement. The governance structure reported into the Health and Wellbeing Board, with an update scheduled for November 2025.

Councillor Duncan also asked how the service would ensure that partners remained engaged and committed to the shared vision and strategic aims.

The Public Health Consultant acknowledged the challenge that posed and noted that each organisation faced its own pressures. However, they expressed confidence in the strength of local partnerships and cited Sport England's praise for Rotherham's collaborative spirit. She shared an example of Places Leisure sponsorship of the Rotherham 10K and securing national investment to support Couch to 5K programmes, which demonstrated how partners actively contributed in real terms to the broader vision.

Councillor Paul Thorp asked whether future funding would shift from system development to direct delivery of activities.

The Public Health Consultant confirmed that whilst the second round of funding would still be modest, it would focus more on sustainable delivery. She explained that rather than funding short-term classes, the emphasis would be on infrastructure, training, and community-led initiatives. For example, investment might support marked walking routes or heritage trails, which would require less ongoing funding than instructor-led sessions. They stressed the importance of sustainability and the need to build capacity within communities.

Councillor Thorp also raised concerns about cycling infrastructure and the accessibility of walking football. He suggested that safer cycling routes through parks would be more family-friendly and asked whether existing groups like U3A could be supported.

The Public Health Consultant acknowledged Councillor Thorps concerns but noted that walking football was already being delivered by various organisations and that the programme aimed to connect and support existing providers. They described a successful collaboration between Yorkshire Cricket and a local youth organisation, where training was provided to enable delivery in underserved areas.

Councillor Havard asked whether the programme linked with physiotherapy services, and cited resident concerns about broken equipment and limited support in some parts of the Borough.

The Public Health Consultant responded that early conversations were underway between Connect Healthcare and Places Leisure to explore embedding physiotherapy into leisure centres. She described how the Every Move Counts referral programme was designed to support individuals transitioning from physiotherapy into sustainable physical activity.

Councillor Havard also asked about the likelihood of securing the main Sport England award in April 2026 and the criticality of that to long term programme success.

The Public Health Consultant expressed confidence. They noted that Sport England expected a submission and would work with the Council to ensure it was appropriately framed.

Councillor Havard sought reassurance regarding extending activities to rural areas within the Borough such as Rother Valley.

The Public Health Consultant explained that whilst initial engagement had been targeted based on inactivity and deprivation data, the ambition was for a borough-wide movement. They welcomed insights from ward members to inform programme expansion and confirmed that Every Move Counts programme was accessible across Rotherham. Mapping work was underway to identify gaps in provision and ensure equitable access.

Councillor Brent expressed concerns regarding individuals who had negative experiences with sport in school for example, which had resulted in them becoming disengaged. They asked how the strategy would engage those people who felt excluded from traditional physical activity and group sports.

The Public Health Consultant acknowledged the importance of individual relationships with physical activity and emphasised the programme's focus on fun and inclusivity. They described how the school games targeted children who disliked PE and offered alternative activities like mountain biking and parkour. They also outlined growing interest in orienteering and other non-competitive forms of physical activity.

Councillor Clarke raised concerns about the accessibility of the Bike Hub, and reflected that it was often located centrally and not available within outlying wards.

The Public Health Consultant agreed to raise the issue with the transport team and highlighted the South Yorkshire Walking, Wheeling and Cycling Strategy's emphasis on enjoyment and accessibility. They expressed hope that future investment would allow for broader outreach.

Councillor Baum-Dixon echoed concerns about rural wards and noted that deprivation could be masked by surface-level affluence and that

loneliness and isolation were significant issues. They suggested working with local stakeholders such as parish councils and community halls to extend reach into outlying communities.

The Public Health Consultant welcomed the insight and encouraged ward members to contribute to their ward plans. They emphasised the social benefits of physical activity in the context of loneliness and isolations and the importance of system change to broaden opportunities throughout the Borough.

Councillor Baum-Dixon also raised the issue of cycle lane connectivity and the need to support individuals transitioning out of competitive sport due to age or injury.

The Public Health Consultant acknowledged the importance of life transitions and described how the programme aimed to support people in finding new forms of activity. They cited national campaigns like 'This Girl Can' and 'We Are Undefeatable' as examples of efforts to re-engage people with physical activity. They also shared an anecdote about participation in the British Heart Foundation's Strong Woman Challenge and how informal peer encouragement could spark renewed interest in physical activity.

Councillor Yasseen focused on the broader cultural shift required to address physical inactivity and obesity. They advocated for a more focused approach centred on walking and cited national survey data showing its popularity.

The Public Health Consultant agreed that walking was a fundamental part of the solution and described plans to support walk leader training and community-led walking initiatives, but emphasised the intention was diversification rather than focussing on one targeted activity. They also acknowledged the importance of engaging small community organisations with deep local connections to further that intention.

Councillor Yasseen wanted to understand more about capital investment in green spaces and the criteria used to identify targeted sites.

The Public Health Consultant clarified that the Playing Pitch Strategy was part of the broader Moving Rotherham Partnership programme and was not funded by Sport England. That was intended to assess community assets and inform future funding bids from sports governing bodies. They explained that initial engagement with green spaces was based on inactivity data and existing community engagement opportunities but confirmed that all areas of the Borough would be considered for future capital investments.

Councillor Harper asked about funding for football facilities and green spaces.

The Public Health Consultant reiterated that the programme aimed to attract additional funding from external sources and that Sport England had previously supported capital projects like solar panels for leisure centres. They emphasised the importance of gathering intelligence from all wards to maximise funding opportunities.

The Chair wanted to understand how people with disabilities, particularly those with complex needs, were being supported to increase their physical activity levels.

The Public Health Consultant explained that a dashboard was being developed to map data and community insights. They described the Inclusive Physical Activity Network, which aimed to mainstream accessibility in general activities and offer tailored opportunities and shared examples such as adaptive climbing and disability cycling, and highlighted recent news coverage of inclusive football initiatives.

The Chair thanked the Public Health Consultant for the responses provided and requested that any further questions members had were provided to the Governance Advisor who would liaise with service in order to obtain responses at a later stage.

Resolved:-

That the Health Select Commission:

1. Noted the Sport England Place Expansion Programme was a facilitator of wider activity work led and coordinated through the Moving Rotherham partnership to embed physical activity as part of everyday lives.
2. Considered the opportunity to champion the Moving Rotherham ambition within their wards and communities, promoting and identifying opportunities for residents to engage in physical activity and supporting collaboration across sectors.
3. Requested that service provide an update on the main bid in April 2026 and the implications of its success or otherwise on delivery of the overall ambition at an appropriate stage once this was known.

26. TRFT ANNUAL REPORT

The Chair welcomed Bob Kirton, Managing Director, Helen Dobson, Chief Nurse, and Dr Mike Richmond, TRFT Board Chair to the meeting and invited the Managing Director to introduce the report and presentation.

The Managing Director, TRFT noted that the annual report had been launched at the Trust's Annual General Meeting the previous week. They explained that whilst the full presentation at that meeting had included

around 80 slides, a condensed version was presented to the Health Select Commission, which focussed on key highlights from the past year.

The Managing Director, TRFT expressed gratitude to all TRFT staff who had contributed to delivering safe care to patients and the public of Rotherham. They emphasised the Trust's pride in its achievements and its commitment to continuous improvement. Amongst notable accomplishments was the Trust's strong performance in research and clinical audit. Over 3,000 patients had been recruited into research studies, more than 200 local clinical audits had been reviewed, and the Trust had participated in 95% of national clinical audits and 100% of eligible national confidential inquiries.

Innovative projects were highlighted, including the use of virtual reality goggles during operations to improve patient experience, which had yielded positive outcomes. Another initiative involved the use of an orthopaedic robot to assist with precise limb movements during surgery. The Trust was also exploring the acquisition of a robot for abdominal procedures, commonly used in teaching hospitals, and was preparing a case to secure national funding for this.

Significant progress had been made in the area of learning from deaths and serious incidents. The Trust had minimised delays in death registrations and expanded the medical examiner service to include community deaths. Families had responded positively to being contacted by the medical examiner's office, and the service had maintained high scrutiny completion rates for all deaths within the Trust.

The Chief Nurse presented workforce developments. They confirmed the appointment of the Trust's first Director of Midwifery, which was a joint post with Barnsley Hospital, aimed at strengthening maternity services which had come under significant national scrutiny. The Trust had also appointed its first Chief Allied Health Professional, representing nine of the fifteen allied health professions within the organisation, ensuring their voices were heard at senior levels.

The Chief Nurse also reported record recruitment of registered nurses for two consecutive years, primarily from the local population through partnerships with local universities. This proactive approach had allowed the Trust to anticipate and fill workforce gaps, particularly in preparation for winter pressures. In autumn alone, 100 new recruits were being onboarded. Retention efforts had also been successful, with nursing turnover reduced from 13.5% to 8% over three years. Specialty areas such as maternity and children's nursing were fully staffed with no workforce gaps.

They explained that the Trust had also invested in improving patient experience. Initiatives included a wheelchair hub to address accessibility issues, and a bespoke complaints training tool modelled on a Monopoly board to help staff resolve concerns in real time. There was also the "This

Is Me” campaign which introduced a passport system for patients with additional needs, which ensured they received personalised care and the Purple Butterfly scheme which supported bereavement care with culturally sensitive resources available in every clinical area. Additionally, the Carers Partner Promise was launched to improve support for carers, including 24/7 visiting access and practical assistance such as parking support.

The Chief Nurse outlined the Trust’s three quality priorities for the year. The first was diabetes management, addressing a condition which affected 16% of the local population. This initiative aimed to improve care and reduce hospital stays and was extended into a second year due to its scale and success. The second priority focused on pain management, which had been completed successfully and was nominated for a national award. The third priority addressed frailty. While some progress had been made, the targets were ambitious and not fully met, prompting continuation of the work into the current year.

The Managing Director, TRFT resumed the presentation and discussed operational performance. They acknowledged that while the Trust was not yet where it aspired to be, it was performing ahead of national expectations. Urgent and emergency care had seen a significant rise in attendances, leading to increased admissions. Despite these pressures, performance had improved, particularly in ambulance handover times, which was a key safety indicator.

Elective care performance had been previously presented in detail to the Commission, and while benchmarks were being met, the Trust aimed for further improvement. In cancer and diagnostic services, the Trust had made notable progress, especially in meeting the Faster Diagnostic Standard. The diagnostics team had been commended for their exceptional national performance, which was critical to timely cancer treatment.

The Managing Director, TRFT highlighted the Trust’s role as an integrated provider, with increasing activity in community services. A major development was the multi-agency approach to transfer of care, ensuring patients received support in the most appropriate setting. The virtual ward initiative had been so successful that the Trust planned to rebrand it as “Hospital at Home,” reflecting the hands-on care provided in patients’ homes. This approach aimed to reduce unnecessary hospital admissions and build public confidence in community-based care.

They also discussed the Trust’s involvement in a national neighbourhood programme, which sought to integrate health, care, and voluntary sector services at the local level. Although the programme did not come with substantial funding, it offered valuable resources and networking opportunities. The Trust committed to reporting on its progress in due course.

The Chair thanked the Managing Director and Chief Nurse for the report and presentation and invited comments and questions from Members.

Councillor Thorp enquired about the professionalisation of nursing, specifically the impact of degree-led qualifications.

The Chief Nurse responded by affirming that nursing had been a graduate profession for decades and that this was essential for developing the critical thinking and clinical leadership required in modern healthcare. However, she stressed that compassion and care were equally vital and could not be taught through academic study alone. The Trust valued its support staff, including nursing associates and healthcare assistants, and ensured that caring values were embedded across all roles, regardless of qualification level.

Councillor Thorp also reflected on the increased use of digital technologies, including chatbots, AI-assisted radiology booking, and other innovations mentioned in the report.

The Managing Director, TRFT explained that the Trust had received a global award for clinician satisfaction with its digital systems. They described the implementation of Netcall in imaging services, which efficiently managed high volumes of calls, particularly on Monday mornings, by automatically allocating appointment slots. AI was being piloted in clinical areas such as endoscopy, where it enhanced surveillance for polyps during routine procedures and AI was also used to predict missed appointments (DNAs), allowing the Trust to proactively engage patients and improve attendance rates.

Councillor Thorp expressed concern about chatbots potentially alienating patients, especially those less comfortable with technology and the potential for those approaches to deepen digital exclusion.

The Managing Director, TRFT acknowledged the issue and reassured the Commission that the Trust monitored digital engagement closely. If patients failed to respond to messages via the NHS app within 48 hours, the Trust followed up using traditional methods such as letters and phone calls. He also highlighted collaborative work with the Council and commissioners to address digital exclusion, including free SIM card provision and digital literacy support through libraries.

Councillor Havard raised a question about the increasing use of weight loss injections and whether this trend had impacted public health in Rotherham.

The Managing Director, TRFT noted that while specific local data was unavailable, regional commissioning conversations confirmed rising usage. The Chief Nurse added that most prescriptions were private, raising concerns about a two-tier system. NHS access was limited and tightly regulated, with few cases seen in hospital settings. No adverse

side effects had been reported locally, but the Trust would continue monitoring the situation.

Councillor Havard also asked a question about physiotherapy services. They were aware that residents had travelled to Rotherham Hospital only to receive leaflets rather than hands-on treatment. She asked whether such services could be decentralised to neighbourhood health hubs.

The Managing Director, TRFT acknowledged the concern and described existing community services such as Breathing Space and the Park Rehab Centre, which included gyms and a hydrotherapy pool. These facilities supported cancer patients through the Active Together programme. They agreed that neighbourhood-level expansion was a priority and welcomed further feedback.

Councillor Duncan referred to the Trust's response to health inequalities and asked for clarification on digital weight management tools, smoking cessation services and the impact these had on surgical and wider health outcomes.

The Managing Director, TRFT explained that the Digital Weight Management Service was a national pilot targeting patients for whom weight was a barrier to surgery. Over 400 patients had participated, with positive outcomes including an average weight loss of 9 kg and improved fitness levels. The pilot had reached many residents in deprived areas. Regarding smoking cessation, The Managing Director, TRFT stated that 15% of adults in Rotherham still smoked, with higher rates among manual workers. The Trust participated in the South Yorkshire QUIT programme, reaching 90% of inpatients and offering nicotine replacement therapy to half of those identified as smokers. He emphasised the health benefits of quitting and the importance of linking hospital-based interventions to long-term lifestyle changes.

Councillor Clarke asked about declining staff confidence in reporting unsafe medical practices, referencing a 5% drop in survey scores.

The Chief Nurse responded that while there had been a slight dip, the Trust remained one of the highest-performing organisations regionally and nationally. They noted that staff survey response rates had increased significantly, from 38% to over 60% in recent years. The Trust was working to improve communication about how reported concerns were addressed. The Freedom to Speak Up Guardian played a key role in this, offering anonymous reporting and presenting quarterly updates directly to the board. The Chief Nurse stressed the importance of ensuring all staff felt empowered to raise concerns and were confident that action would be taken.

Councillor Harrison raised a question about financial sustainability. They referred to the Trust's reliance on non-recurrent savings and asked what steps were being taken to achieve recurrent efficiencies and develop a

sustainable financial plan.

The Managing Director, TRFT acknowledged the challenge and stated that whilst the Trust had achieved a balanced position last year, it remained dependent on temporary funding. They outlined several strategic priorities, including reducing sickness absence, cutting non-contracted pay, and improving recruitment and retention. The Trust was also pursuing efficiencies through shared services with Barnsley Foundation Trust, particularly in back-office functions and procurement. The Managing Director, TRFT highlighted the importance of maintaining separate identities for each organisation whilst leveraging their similarities to drive savings. They also mentioned ongoing efforts to develop a shared IT system across the South Yorkshire system.

The Chair thanked the Managing Director and Chief Nurse, TRFT for the responses provided and requested that any further questions members had were provided to the Governance Advisor who would liaise with the Trust in order to obtain responses at a later stage.

Resolved:-

That the Health Select Commission:

1. Noted the contents of the TRFT Annual Report.
2. Requested that TRFT report back to the Commission at appropriate intervals on its progress in respect of reducing waiting times.
3. Requested that TRFT attend a future meeting (date TBA) to provide more detail around its approach to responding to learning from serious incidents and audits, ideally providing examples of where the approach had been evidenced and the targeted improvements realised.

27. SAFEGUARDING ADULTS BOARD STRATEGIC PLAN 2025-2028

The Chair welcomed Moira Wilson, Rotherham Safeguarding Adults Board (RSAB) Independent Chair and Jackie Scantlebury, Safeguarding Adult Board Manager to the meeting and invited them to introduce the report and presentation.

The RSAB Independent Chair presented the new three-year strategic plan, as required under the Care Act. They began by emphasising that the plan was designed to span the three years, allowing for phased implementation rather than immediate delivery of all objectives. The strategic plan had been developed collaboratively during a partnership development session held in January, ensuring that the priorities reflected a multi-agency consensus.

Five key priorities were identified for the 2023–2026 period:

1. Communication, Engagement and Voice

The board placed this as its top priority and recognised the importance of hearing directly from individuals with lived experience of safeguarding issues, as well as carers.

It was acknowledged that challenges had previously been encountered in this area, and the Board was committed to improving its responsiveness and inclusivity. Elected members were invited to play a vital role in this process by feeding back safeguarding concerns raised by constituents, reinforcing their position as community connectors.

2. Prevention and Early Intervention

The second priority focused on proactive safeguarding, supporting individuals to feel protected from abuse or neglect before issues arose. The strategic plan included detailed actions aimed at embedding early intervention approaches across partner organisations.

3. Leadership and Partnership

The Board reaffirmed its commitment to strong multi-agency collaboration. The Independent Chair expressed pride in the breadth of representation, which included the local authority, police, health commissioners and providers, the voluntary sector, fire and rescue services, and probation. The Cabinet Member for Adult Care and Health was noted as a key member of the Board. The presentation stressed that safeguarding adults could not be achieved in isolation and that continued partnership development was essential.

4. Making Safeguarding Personal

This long-standing principle was reaffirmed as a core objective. The Board aimed to ensure that safeguarding practices remained person-centred across all organisations. Plans were in place to audit how well this approach was embedded, how it was experienced by individuals, and how it could be strengthened further.

5. Learning and Development

The final priority addressed the need for ongoing training across the system. The Board recognised the importance of maintaining a robust multi-agency training offer, tailored to different levels of

responsibility from general awareness for all staff to specialist safeguarding roles. Given the natural turnover of personnel, the Board committed to ensuring that safeguarding knowledge remained current and widespread.

The RSAB Independent Chair concluded by noting that an action plan and tracking tool would underpin the strategy, assigning key actions to relevant subgroups and enabling progress monitoring.

The Chair thanked the RSAB Independent Chair for the report and presentation and committed the Health Select Commission Members to posing questions in relation to the strategy at a forthcoming Health Select Commission meeting at which the RSAB Annual Report was also due to be heard.

28. HEALTH SELECT COMMISSION WORK PROGRAMME - 2024/25

Resolved:-

That the Health Select Commission:

1. Approved the work programme.
2. Agreed that the Governance Advisor was authorised to make any required changes to the work programme in consultation with the Chair/Vice Chair and report any such changes back to the next meeting.

29. SOUTH YORKSHIRE, DERBYSHIRE AND NOTTINGHAMSHIRE JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE

The Chair advised members that the next South Yorkshire, Derbyshire and Nottinghamshire Joint Health Overview and Scrutiny Committee (JHOSC) was due to take place on 21 October 2025.

They requested that members reviewed the agenda for this meeting once published, and contacted the Chair and Governance Advisor regarding any questions or comments to be raised during that meeting.

The Chair also requested that Health Select Commission Members who had comments, queries or questions they would like to discuss further in relation to the JHOSC minutes included in the agenda pack channel these via the Chair and Governance Advisor.

30. ADULT SOCIAL CARE LOCAL ACCOUNT 'HOW DID WE DO?'

The Chair requested that Health Select Commission Members who had comments, queries or questions they would like to discuss further in relation to the Adult Social Care 'How Did We Do?' Local Account channel these via the Chair and Governance Advisor.

31. HEALTH AND WELLBEING STRATEGY

The Chair requested that Health Select Commission Members who had comments, queries or questions they would like to discuss further in relation to the Health and Wellbeing Strategy channel these via the Chair and Governance Advisor.

32. URGENT BUSINESS

No urgent business was formally raised by the Chair during the meeting. However, the Chair wished to formally acknowledge the valuable contributions made by Scott Matthewman whilst supporting the Health Select Commission in the role of Link Officer, and to formally welcome Emily Parry-Harries to that role following her appointment as the Director of Public Health.

ROTHERHAM COUNCIL
ADULT SOCIAL CARE MENTAL HEALTH STRATEGY 2026 - 2029



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WELCOME

This strategy sets out our vision for how we intend to support adults in Rotherham who are facing mental ill health.

Rotherham Council is committed to ensuring people live their best lives, in their local communities, close to home, with the people important to them. We have designed this strategy to support meeting that commitment.

This strategy was shaped by talking directly to adults in Rotherham who have experienced mental ill health, as well as their families, carers, support networks and organisations that provide mental health services in the borough.

In Rotherham, we have developed the Four Cornerstones in partnership with people with lived experience, partners and support organisations, which we believe are essential for ensuring that good practice is achieved. These are:

Welcome and Care

Value and Include

Communicate

Work in Partnership

We recognise that when these values are integrated into practice, trust is developed and progress in achieving positive outcomes is made.

This strategy has been developed to align with and reinforce Rotherham's broader vision for social mental health services. It complements key initiatives, including the Adult Social Care Strategy 2024 - 2027, Rotherham Dementia Strategy, Homeless Prevention and Rough Sleeper Strategy 2023 - 2026 and the Rotherham Health and Wellbeing Strategy - Better Mental Health for All initiatives.

The Rotherham Council Adult Social Care Mental Health Strategy 2026 - 2029 aligns with several key strategies supported by the Health and Wellbeing Board:

- **Better Mental Health for All** – focuses on early intervention, prevention and the mental wellbeing of the whole population, considering wider social factors.
- **Suicide Prevention and Self-Harm Action Plan (2025–2028)** – aims to reduce suicides through collective responsibility, early intervention, and support for those affected.
- **Loneliness Action Plan** – addresses loneliness as a public health issue, working to help people of all ages in Rotherham feel more connected and supported.

Ultimately, the strategy focuses on achieving the best mental health outcomes for adults across Rotherham. We recognise the importance of putting the person at the heart of everything we do. This means involving people in the things that matter to them and designing our mental health services around the views of people who need them.



Cllr Joanna Baker-Rogers,
Cabinet member for
Adult Care and Health



Ian Spicer,
Strategic Director for
Adult Care, Housing and
Public Health

MENTAL HEALTH IN ROTHERHAM

The demand for flexible and integrated mental health services in Rotherham is growing.

Between 2012 and 2022, the prevalence of depression in Rotherham rose from 8.8% to 17.3%, exceeding the national average of 13.2%. This represents a rise in affected individuals from approximately 18,000 to 37,000 over the ten-year period.

As of August 2025, 460 individuals were receiving support from Adult Social Care in Rotherham with mental health identified as their Primary Support Reason. This marks a 21% increase, compared to the 380 individuals recorded at the end of the 2022/2023 year.

Over the past three years, around 11-12% of all individuals receiving Adult Social Care support in Rotherham have had mental health as their Primary Support Reason. This aligns closely with the national average of 12%.

Mental health in Rotherham is recognised as a vital part of overall wellbeing, shaping how individuals think, feel and connect with others. It evolves throughout life, influenced by personal experiences and wider social factors. Mental ill health can affect anyone, regardless of age, background, or role, whether they are a carer, parent, young adult, or older person.

Good mental health is supported by elements such as secure employment, strong social networks, safe and stable housing, financial security, access to green spaces, and meaningful connections within the local community.

Rotherham also promotes the [Five Ways to Wellbeing](#)

Be Active

Connect

Give

Keep Learning

Take Notice

Five practical steps to enhance mental wellbeing. Together, these factors help build resilience, reduce isolation, and improve quality of life across all age groups.



MENTAL HEALTH STATISTICS

Public Health and Housing services have been key in the delivery of this Mental Health strategy.

Housing plays a critical role in supporting the mental health pathway within Adult Social Care (ASC), acting as both a foundation for recovery and a platform for support.

Mental ill health is a growing public health concern. We know it can range from everyday worries, through to long term conditions. People with higher rates of wellbeing have lower rates of illness and mental ill health.

Rotherham's Mental Health Needs Assessment (RHNA) provides a picture of health needs across the local population, including mental health and wellbeing data.

Data from the Rotherham Data Hub, Public Health's 'Engagement on Loneliness', the Joint Strategic Needs Assessment (JSNA), and the Rotherham Parent Carer Forum have all contributed to informing this strategy.



Wellbeing (JSNA Data, 2022–23)

10.4 % of adults (aged 16+) in Rotherham reported a low happiness score.

24.3 % of adults (aged 16+) reported a high anxiety score.

Loneliness (JSNA Data, 2022–23)

7.4 % of adult residents in Rotherham reported feeling lonely 'often or always' or 'some of the time'.



Mental Health & Substance Abuse (RHNA Report, Feb 2024) Of 276 clients supported by the Rotherham Abuse Counselling Service, 29 % had a co-occurring mental health issue alongside a drug or alcohol problem.

Mental Health Crisis (RHNA Report, Apr 2023–Feb 2024).

The referral rate to crisis services was 20.5 per 1,000 of the population aged 18 and over.



Suicide Mortality Rate (JSNA data 2021–2023)

The Suicide Mortality rate in Rotherham is 12.6 per 100,000 over a three-year average.

Homelessness & Mental Health (MHCLG Data)

The proportion of homeless households in Rotherham with mental health support needs increased from 15.9 % in 2022/23 to 39.0 % in 2024/25.



MENTAL HEALTH VISION

People who have experienced mental ill-health, and their families, and carers feel empowered, their voice is respected and they receive early support to prevent a decline in their wellbeing and maintain their independence as close to home as possible.

Adult Social Care (ASC) will work with partners to ensure that people who have experienced mental ill-health, and their families, and carers:

- Receive the right support, at the right time, to maintain both their mental and physical wellbeing.
- Have the same opportunities to access support, regardless of their presenting needs.
- Can access advice and services which are closer to home to help them to sustain relationships and local connections which are important to them.
- Have their voice listened to, respected and heard.



MENTAL HEALTH PRIORITIES

We want to ensure that every resident in Rotherham can live safely, independently and well, for as long as possible within their local communities.

To do this, it is important that we ensure equal focus on both physical and mental wellbeing. This strategy sets out our commitment to how we will shape, deliver and commission adult mental health services provided by the Council.

This Mental Health Strategy is built on **three guiding principles** that people who have experienced mental ill-health, their families and carers, told us what was important to them. These guiding principles will underpin how we develop services, invest and grow our workforce, and engage with residents and people with lived experience.

People-Focussed

Caring

Respectful



Our strategy sets out the priorities for the next 3-years to ensure we can deliver on our vision for mental health services across the borough. We will achieve these priorities by:

- **Delivering** strength-based practices that draw on a person's skills, knowledge and experience to increase opportunities for them to achieve their goals and outcomes.
- **Embedding** person-centred approaches so that the person can remain in control of what happens and set their own goals, aspirations and outcomes.
- **Empowering** everyone to lead fulfilling lives, whilst also keeping them safe from harm and achieving a good quality of life.
- **Listening** to what people who have experienced mental ill-health, and their families and carers say works and does not work, to actively improve how we design and deliver mental health services.
- **Celebrating** people's unique attributes and seeking to tackle all forms of discrimination to achieve equality for all; ensuring our services reflect the diverse needs of individuals and our local communities.
- **Ensuring** everything we do is people-focussed, encourages mutual respect and reflects a caring, compassionate approach to supporting people who have experienced mental ill-health, and their families and carers.

MENTAL HEALTH PRIORITIES

Over the next three years, Adult Social Care (ASC) will focus on delivering the following priorities with partners to improve outcomes for people experiencing mental ill health, and their families and carers.

2026
to
2027

Voice

- Create a dedicated Mental Health Partnership Board so that the voice of people who have experienced mental ill-health, and their families and carers can effectively influence and shape the design and delivery of services.
- Develop new and inclusive ways for people with lived experience of mental ill health to give feedback across Mental Health services, so their voices help shape how services are delivered and how communication can be improved.

Prevent, Reduce, Delay

- Expand the Mental Health Enablement Pathway, to give more support to people who have experienced mental ill-health, and their families and carers, throughout each year of the strategy from 2026 to 2029.
- Provide support for people experiencing mental ill health through the Supporting Independence Pathway, to prevent, reduce or delay the need for more formal support.

Access

- Support the aims of the Rotherham Health and Inequalities Strategy, to reduce waiting times for Care Act Assessments for individuals experiencing mental ill health. Complete most assessments within 28 working days (excluding crisis cases), enabling earlier access to support and intervention.
- Review and improve Transition Pathways for young people experiencing mental ill health.
- Review existing barriers to accessing mental health services and referrals, especially for under-represented minority groups, to ensure everyone can get the support they need quickly, easily, and fairly.

**2027
to
2028**

Services

- Create additional mental health support provision across the borough, so that people who have experienced mental ill-health, and their families and carers can access support closer to home.
- Improve the range of clear and accessible information, advice and signposting available to people who have experienced mental ill-health, and their families and carers, so they can find the right support more easily.
- Commit to open and clear communication, share information openly and make sure everyone receiving mental health support understands the processes involved.
- Monitor and review the performance of independent mental health providers to improve the quality and accessibility of services.

Support for Families and Carers

- Ensure mental health carers in Rotherham get the support they need to stay healthy, connected and active through strong partnerships and services that meet their needs.

**2028
to
2029**

Partnership and Integration

- Work closely with partners, including Housing services and voluntary organisations, to improve collaboration and find better ways to deliver mental health services and support people's wellbeing in the community.
- Review with partners our Crisis Pathway, to make sure it meets people's needs and can respond flexibly when support is needed.

Workforce Development

- Deliver updated mental health training for practitioners and promote mental health champions throughout the 3-year strategy, with the programme completing in the final year.
- Support workforce development by strengthening partnership working and creating opportunities to share learning, good practice and expertise across teams and organisations.

SPOTLIGHT: MENTAL HEALTH ENABLEMENT

Prevention should be the foundation of good mental health services, including how a person is enabled to meet their full potential. Our Mental Health Enablement Service supports this aim and currently operates from Wellgate Court.

The enablement pathway offers up to 15-weeks of tailored support, which includes engaging support from partners to resolve issues which impact on a person's mental wellbeing. The partnership approach is used for increasing social activities, resolving housing issues and supporting a person's mental wellbeing, amongst many others. The focus is on prevention and early intervention to support resilience and provide people with support that is intended to maximise their independence. The service makes a real difference as it offers more long-term intensive support, with unique support tailored to a person's individual circumstances and needs.

Referrals to the service are via either a professional referral or a self-referral (subject to meeting the criteria).

"I wouldn't have been able to do the things I've achieved without this support."

"LC has done a fantastic job, and has literally changed our lives, we were overwhelmed we now have the house and our health back, thank you."

"I am really happy with the support I have had, I haven't felt judged."

A person can refer themselves via our **Adult Contact Team on 01709 822330**. The online referral form can be found at the following link <https://www.rotherham.gov.uk/xfp/form/208>



"KL has been such an amazing support for me, in the weeks we've done so far. I have gotten more sorted than in the year previous and things had just begun to pile up. She is always bright and chirpy, level-headed in a panic, extremely empathetic and we get on really well which is rare for me. An amazing service that I can't thank enough as it has really had a massive impact on my daily life and my mental health."

"Without this service, I wouldn't be here, it has saved my life."

VOICE

Safeguarding Adults

Safeguarding is about protecting people from abuse or neglect, and educating those around them to recognise the signs and how they can report their concerns. To keep our residents safe we know there are lots of actions we currently do and more we can do. Amongst our aims are improving mental health, developing resilience and giving choice and control to support people to stay as safe as possible.

Adult Social Care (ASC) has a Safeguarding Adult Pathway to protect vulnerable residents at risk of harm or abuse. Our Rotherham Safeguarding Adults Board (SAB) is committed to taking a partnership approach to help protect adults at risk of or experiencing neglect, harm or abuse. We make safeguarding personal by listening to, acting upon and respecting the voice and views of the person. This supports an improved quality of life, wellbeing and safety as the person is empowered to lead and direct decisions.



Our approach also includes working with partners and residents to educate them to recognise the signs of abuse and neglect, including how they can report any safeguarding concerns.

If you are worried about an adult, you can report a concern on our website <https://www.rotherham.gov.uk/worried-another-adult/Report-a-concern-about-an-adult> or call 01709 822330.

Get Involved

If you would like to get involved with shaping mental health services delivered by the Council we would love to hear from you. It is important to us that we put the person at the heart of everything we do, and that starts with listening to and acting on what you tell us.

How much you want to get involved is your choice, so if you would like to get involved to help shape our future services, please get in touch on our webpage: [Contact us – Rotherham Metropolitan Borough Council](#) or call us on 01709 822330.

Find out More

You can visit our Adult Social Care (ASC) website to find out more about mental health services. [Help with your mental health – Rotherham Metropolitan Borough Council](#)

You can also review our achievements and outcomes for the last 12 months by taking a look at 'How did we do?', our Local Account that is published each year. Issue details - [How did we do? Adult Social Care Local Account 2024-2025 - Rotherham Council](#)

MENTAL HEALTH CRISIS SUPPORT: CALL, TEXT OR EMAIL

If you or someone you know is in crisis, feeling suicidal, or needs immediate mental health support, please reach out through one of the following free and confidential services. Most are available 24 hours a day, 7 days a week (unless otherwise stated).

If there is immediate danger to life, **call 999**:

Crisis Line: 0800 804 8999

For those who are deaf or hard of hearing,
text 07974 603610

NHS 111: Call and select the mental health option

Papyrus HOPELINEUK: 0800 068 4141
(for young people under 35)

Ring Samaritans free on 116 123 (24/7)
or contact Samaritans at jo@samaritans.org

Text “EYUP” to 85258 for confidential help with anxiety, stress, loneliness, depression, self-harm, or suicidal thoughts. Available 24/7.

There are also many other organisations offering direct support for mental health. ***Please don't hesitate to reach out - help is always available.***

Safeguarding (Customer Contact Team)

Adults – 01709 822330

Safeguarding (M.A.S.H Team)

Children – 01709 336080

Mental Health Crisis Team – 0800 652 9571

RDASH Switchboard – 03000 213000

Housing Services – 01709 336009

Supported Employment – 01709 249600

Age UK Rotherham – 01709 835214

Citizen's Advice Bureau – 0808 278 7911

RotherHive: <https://rotherhive.co.uk/>

Be the One: <https://www.be-the-one.co.uk/>

Rotherham Council Adult Social Care Mental Health Strategy 2026 - 2029

Health Select Committee

20 November 2025

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Background

- Following Cabinet approval of the Adult Social Care Mental Health Review in December 2023, it was agreed to develop a co-designed Council Mental Health Strategy for Rotherham.
- This new, borough-wide strategy focuses on adults and aims to ensure parity for mental health and related services across Rotherham.
- The Rotherham Council Adult Social Care Mental Health Strategy (2026–2029) will be presented to Cabinet in December 2025, with publication scheduled for January 2026, subject to approval.



Mental Health in Rotherham

- The prevalence of depression in Rotherham increased from 8.8% in 2012 to 17.3% in 2022, surpassing the national average of 13.2%.
- As of August 2025, 460 individuals were receiving support from Rotherham Adult Social Care, with mental health recorded as their Primary Support Reason.
- Over the past three years, approximately 11–12% of all individuals supported by Rotherham Adult Social Care have had mental health as their Primary Support Reason, which is broadly in line with the national average of 12%.



Wellbeing (JSNA Data, 2022/23)

10.4% of adults (aged 16+) in Rotherham reported a low happiness score.
24.3% of adults (aged 16+) reported a high anxiety score.

Loneliness (JSNA Data, 2022/23)

7.4% of adult residents in Rotherham reported feeling lonely 'often or always' or 'some of the time'.



Mental Health & Substance Abuse (RHNA Report, Feb 2024) Of 276 clients supported by the Rotherham Abuse Counselling Service, 29% had a co-occurring mental health issue alongside a drug or alcohol problem.

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Suicide Mortality Rate (JSNA data 2021-2023)

The Suicide Mortality rate in Rotherham is 12.6 per 100,000 – three-year average.

Homelessness & Mental Health (MHCLG Data)

The proportion of homeless households in Rotherham with mental health support needs increased from 15.9% in 2022/23 to 39.0% in 2024/25.



Consultation Summary

- The consultation period took place from 8 May to 27 July 2025.
- 26 bespoke events were delivered in collaboration with organisations including Voluntary Action Rotherham, REMA, and the South Yorkshire Wahong Community.
- These events engaged over 150 participants, with 95 individuals supported to complete paper surveys.
- The online survey was widely promoted across the Borough through social media, family and friend networks, news e-bulletins, and other channels.
- A total of 227 responses were received during the consultation.
- The findings have been thoroughly analysed and have directly informed the development of the strategy.



Wider Rotherham Strategies

The Rotherham Council Mental Health Strategy 2026-2029 has been developed to align with existing strategic priorities across Rotherham. Feedback has been gathered throughout the consultation, regarding how this alignment can be achieved.

The two key strategies referenced are:

Rotherham Health and Wellbeing Strategy – which focuses on *“Supporting all people to maintain and improve their mental health throughout their lives, accessing and shaping the services and resources they need to do so.”*

The Borough that Cares Strategy 2026 – 2029 – currently being co-designed with carers, partners, and professionals, this strategy will cover all unpaid carers living in Rotherham.

MENTAL HEALTH VISION

Residents experiencing mental ill-health feel empowered, their voice is respected, and they receive early support to prevent a decline in their wellbeing and maintain their independence, as closer to home, as possible.

Adult social care will work with partners to ensure that residents experiencing mental ill health and their families carers and friends:

- Receive the right support, at the right time, to maintain both their mental and physical wellbeing.
- Have the same opportunities to access support, regardless of their presenting needs.
- Can access advice and services which are closer to home which help them to sustain relationships and local connections which are important to them.
- Have their voice listened to, respected and heard.



Values

The Strategy is founded on three guiding principles, shaped by what people with lived experience of mental ill-health, their families and carers told us matters most to them.

People-Focussed

Respectful

Caring

Themes

The themes within the strategy are shaped by the priorities identified by people with lived experience, their families, carers, professionals, and key stakeholders.

- Improving mental health services
- Preventing crisis through early support, with clear crisis support and contact points
- Ensuring people's voices are heard
- Reducing wait times for assessments and services
- Easier access to information, advice, and support
- Consistent access to services across Rotherham

Priorities 2026 - 2029

2026
to
2027

Voice

- Create a dedicated Mental Health Partnership Board so that the voice of people who have experienced mental ill-health, and their families and carers can effectively influence and shape the design and delivery of services.
- Develop new and inclusive ways for people with lived experience of mental ill health to give feedback across Mental Health services, so their voices help shape how services are delivered and how communication can be improved.

Prevent, Reduce, Delay

- Expand the Mental Health Enablement Pathway, to give more support to people who have experienced mental ill-health, and their families and carers, throughout each year of the strategy from 2026 to 2029.
- Provide support for people experiencing mental ill health through the Supporting Independence Pathway, to prevent, reduce or delay the need for more formal support.

Access

- Support the aims of the Rotherham Health and Inequalities Strategy, to reduce waiting times for Care Act Assessments for individuals experiencing mental ill health. Complete most assessments within 28 working days (excluding crisis cases), enabling earlier access to support and intervention.
- Review and improve Transition Pathways for young people experiencing mental ill health.
- Review existing barriers to accessing mental health services and referrals, especially for under-represented minority groups, to ensure everyone can get the support they need quickly, easily, and fairly.

Priorities 2026 - 2029

2027
to
2028

Services

- Create additional mental health support provision across the borough, so that people who have experienced mental ill-health, and their families and carers can access support closer to home.
- Improve the range of clear and accessible information, advice and signposting available to people who have experienced mental ill-health, and their families and carers, so they can find the right support more easily.
- Commit to open and clear communication, share information openly and make sure everyone receiving mental health support understands the processes involved.
- Monitor and review the performance of independent mental health providers to improve the quality and accessibility of services.

Support for Families and Carers

- Ensure mental health carers in Rotherham get the support they need to stay healthy, connected and active through strong partnerships and services that meet their needs.

2028
to
2029

Partnership and Integration

- Work closely with partners, including Housing services and voluntary organisations, to improve collaboration and find better ways to deliver mental health services and support people's wellbeing in the community.
- Review with partners our Crisis Pathway, to make sure it meets people's needs and can respond flexibly when support is needed.

Workforce Development

- Deliver updated mental health training for practitioners and promote mental health champions throughout the 3-year strategy, with the programme completing in the final year.
- Support workforce development by strengthening partnership working and creating opportunities to share learning, good practice and expertise across teams and organisations.

Spotlight: Mental Health Enablement

Prevention should be the foundation of good mental health services, including how a person is enabled to meet their full potential.

Our Mental Health Enablement Service supports this aim and currently operates from Wellgate Court.

Valuable feedback regarding the Mental Health Enablement Service has been gathered:

"I wouldn't have been able to do the things I've achieved without this support."

"LC has done a fantastic job, and has literally changed our lives, we were overwhelmed we now have the house and our health back, thank you."

"I am really happy with the support I have had, I haven't felt judged."

"KL has been such an amazing support for me, in the weeks we've done so far. I have gotten more sorted than in the year previous and things had just begun to pile up. She is always bright and chirpy, level-headed in a panic, extremely empathetic and we get on really well which is rare for me. An amazing service that I can't thank enough as it has really had a massive impact on my daily life and my mental health."

"Without this service, I wouldn't be here, it has saved my life."

Voice of the Resident

Safeguarding in Adult Social Care

Outlines approach of making safeguarding personal by listening to, acting upon and respecting the voice and views of the person, empowering people to stay safe, improve wellbeing, and lead fulfilling lives.

Get Involved

Outlines how people can get involved with shaping mental health services, as it's important that the person is at the heart of everything we do. This links with one of our priorities to create a Mental Health Partnership Board.

Find out More

Promotes mental health services within Rotherham and 'How Did We Do?' our Local Account for Adult Social Care.

Making Our Priorities A Reality

The Rotherham Mental Health Strategy 2026–2029 is set to be officially launched in January 2026, subject to Cabinet approval in December 2025.

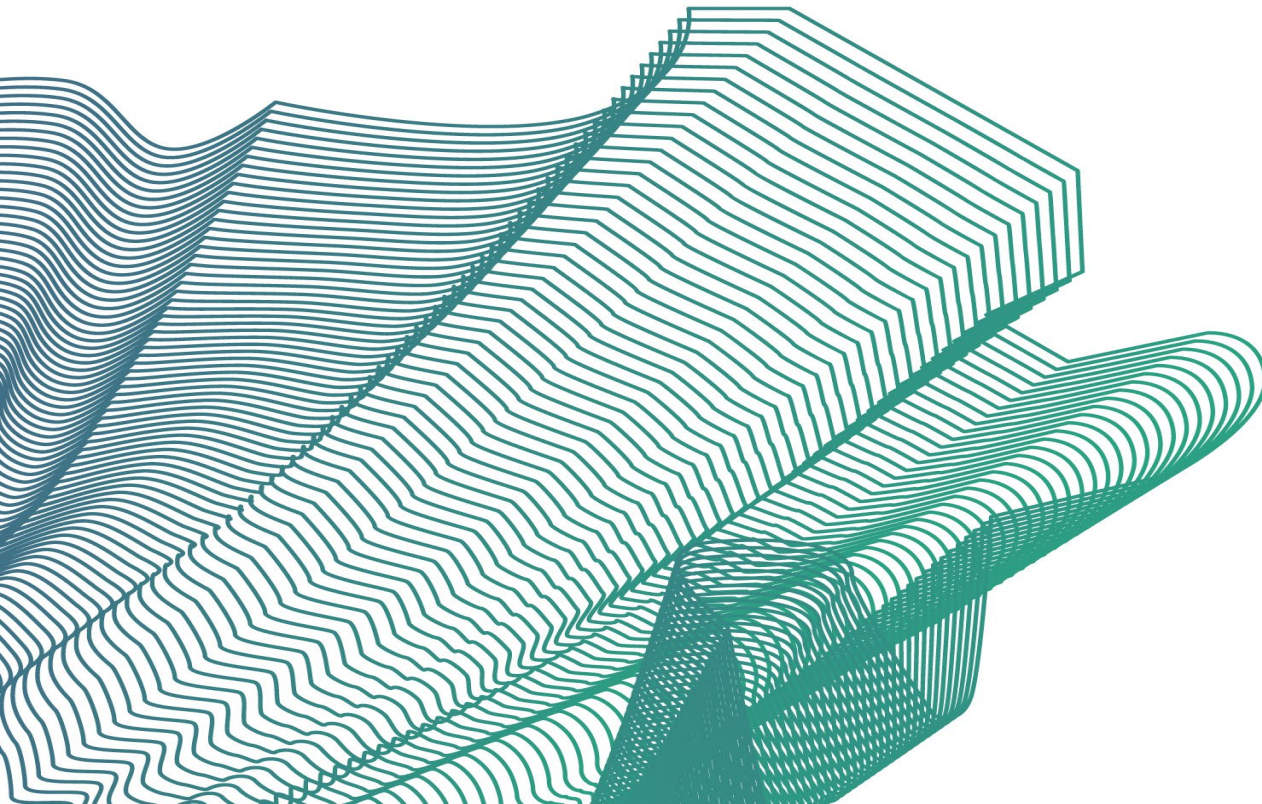
The strategy's priorities, spanning all three years, will be delivered through the following key mechanisms:

- **Mental Health Partnership Board:** To be launched in Year One (2026), this board will oversee strategic implementation. A Mental Health Strategy Working Group will be established ahead of the board's launch to support its development.
- **Comprehensive Delivery Action Plan:** This plan will outline SMART (Specific, Measurable, Achievable, Relevant, Time-bound) actions to ensure effective delivery of the strategy's priorities. It will be presented to Cabinet alongside the Cabinet Report in December 2025.

Any Questions?

Rotherham Winter Plan 2025-6

Health and Wellbeing Board
November 2025



Winter 2024-25

- Urgent and Emergency Care programme focussed on increasing out of hospital pathways as alternatives to avoidable conveyances and admissions and reducing discharge delays
- Additional monies were invested across Place to support system flow over winter utilising Section 75 Better Care monies and the national discharge fund
- Plus organisation investment by TRFT and RMBC



Winter Schemes 2024-5

Included

- Comprehensive vaccination programme co-ordinated across primary care, TRFT and the Council supporting vulnerable citizens, care homes and health and care staff
- Increased GP appointments including acute respiratory hub
- 'PUSH' community health and social care teams responding to non-critical 999 calls to reduce ambulance conveyances, including new respiratory and mental health pathways
- Increased capacity on the virtual ward
- Additional staffing resource including Consultant and resident doctor medical cover, therapy, social worker, enablement and portering resource
- Extended opening hours for Community Ready Unit with support to ensure timely medicines
- Extension of patient transport
- Home from hospital pathway to reduce waiting times
- Priority services identified for children with plans for temporary reductions elsewhere to support peak pressures
- Plans to ensure routine and emergency support for vulnerable children and family oversight
- Reduction in out of area mental health placements
- Robust mental health digital offer
- Rotherham safe space provided additional out of hours support for individuals in crisis
- Voluntary sector support through Age UK Hospital Aftercare Service, Urgent and Emergency Social Prescribers and NHS Responders providing post discharge medicine delivery service

Going into Winter 2025-26

Post winter/summer period

- Successful winter schemes embedded into business as usual
- £7M investment in new medical SDEC and ways of working
- Transfer of Care Hub co-located in the community setting
- High impact work/proactive care
- Increased capacity virtual ward, including remote tech
- Enablement waiting lists reduced from high of 66 to record low of 9, 13 Aug 25
- Impact of system flow roles
- 4 hour performance improving – 70%+
- NCTR metric improved, Metrics for 7, 14 and 21 day delays and discharges pre 5pm all compare favourably with the region and those with lower NCTR
- Understanding ED demand work to target and promote alternative pathways

Challenges

- Demand still high in community and ED
- High levels of acuity and complexity, reflecting Rotherham's aging population and demographic
- New ED attendance normal 300+, compared to c270s previously
- Playing out through system flow and pressure on discharge care co-ordination and community pathways
- Record high of 391 attendances 20 Oct 25
- Escalation beds remained open over the summer
- 30 surge beds open in October
- High levels of scrutiny
- Still work to do

National Performance Metrics 2025-6

- Reduce ambulance wait times for Cat 2 (stroke, heart attack, sepsis and major trauma) from 35 minutes to 30
- Eradicate ambulance handover delays, max 45 minutes
- Ensure 78% of people who attend ED are admitted, transferred or discharged within 4 hours
- Reduce number of patients waiting over 12 hours for admission or discharge
- Reduce the number of people waiting over 24 hours in ED for mental health care
- Tackle discharge delays initially focussing on those over 21 days (14 and 7 days). Aim for complex discharge within 48 hours
- Increase the number of children seen within 4 hours

National Learning re Vaccinations 2024-5

Importance of vaccination uptake to reduce attendances/staff sickness

Plan for peaks based on southern hemisphere and monitor actual impact, with flexibility to adapt plans

Need to build annual leave/staff sickness into plans

Review IPC what has and hasn't worked and how connects with overarching plan

Consider how staff vaccination programme can be incentivised

Community Prevalence

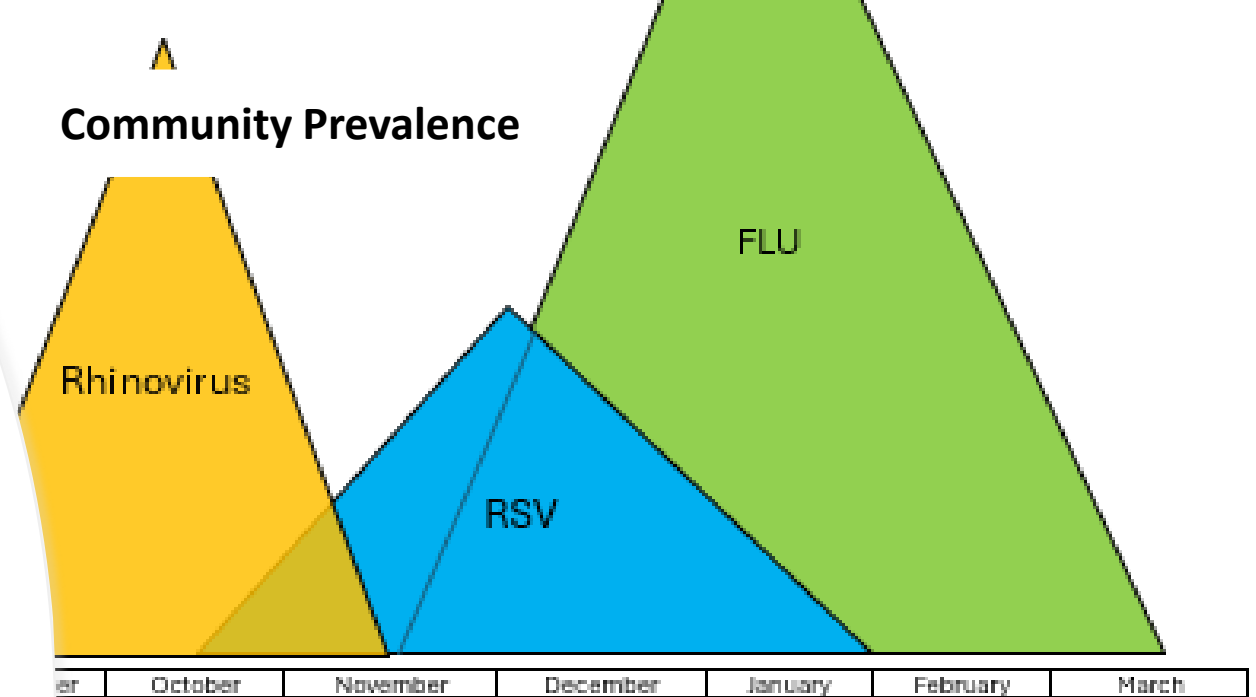


Figure 6a. Respiratory DataMart weekly percentage of tests positive for influenza, RS-CoV-2, RSV and rhinovirus, England [note 7]



National priorities for 2025-6	Rotherham Plans
Improve vaccination uptake and reduce sickness	Targeted plans to increase citizen/staff vaccination rates in primary care, public health and TRFT. TRFT aiming for 5% increase Joint working to target areas of high foot fall for over 75s/immunosuppressed. Staffing/resources based on Southern Hemisphere – peak from New year /Feb and national data. Staff wellbeing support and targeted rotas to cover annual leave/sickness
Improve access to primary care	Additional primary care appointment including Acute Respiratory Infection Hub – early opening Improved booking including on-line/app booking Additional local winter monies for PCNS
Increase the number of people receiving urgent care in primary, community and mental health settings including UCR and virtual ward	High impact respiratory, diabetes and proactive care pathways including highly complex frail patients Community based multi-disciplinary co-located Transfer of Care Hub to reduce avoidable conveyances, admissions and discharge delays through referral, triage and allocation to community pathways Investment in enablement to embed D2A pathway and release capacity for UCR and virtual ward Expansion of the virtual ward including remote tech to support ‘amber’ acuity including SDEC hypertension Community X Ray pilot for care homes Enhanced mental health offer – safe space, crisis support, on-line/text support
Meet the 45 minute ambulance handover standard	W45 live from September
Improve flow through hospitals including meeting 4 hour performance and ambulances standards, reduce 12 hour and discharge waits	ACT/RMBC service re-design service improvements – releasing capacity Additional medical, clinical staff and porters to support periods of high demand Increased capacity for care co-ordination /timely decision making via TOCH New single referral form to streamline processes and reduce delays Improved process for out of area discharges Extended transport hours Reduced TTOs and Age UK TTO delivery service
Set local targets to improve discharge times	Discharge trajectory across pathways. Review of system flow in community bed base. New dashboard and system escalation process.
Reduce lengths of stay for those requiring overnight emergency admissions	Understanding demand in ED targeted action plan Medical SDEC opened July 2025 reducing need for overnight admission, new paperless processing Extended/consistent SDEC opening

New Roles Supporting Patients, Families and System Flow

Flow capacity manager

Mrs T wanted to go home after a spell in hospital, but ward staff raised concerns regarding her safety at home due to her declining mobility, refusal to accept an increased care package, and preference to sleep on a recliner sofa instead of a profiling bed.

A Mental Capacity Assessment (MCA) determined that Mrs T lacked capacity to fully understand her own needs and the risks associated with returning home without additional support.

The System Flow Capacity Manager arranged and chaired two Best Interest Meetings to ensure effective multi-agency collaboration. Attendees included Mrs T's daughter, the Occupational Therapist, Ward Staff, Therapy Team, Mental Health Social Worker.

A home assessment was completed, and the property was deemed suitable, with recommendations for equipment to support discharge and Mrs T's future independence. Mrs T's GP practice agreed to provide ongoing medical and well-being input.

Recognising the wider impact on the family, the System Flow Capacity Manager acknowledged the daughter's stresses and arranged community support through Age UK and Social Prescribing to offer emotional and practical assistance.

Mrs T is continuing to make good progress with the support of therapy and other services

Care Home Trusted Assessment

Patient Story

Mr TD admitted on medical grounds. Has dementia and safeguarding issues. Although he had displayed challenging behaviours, he had become introverted whilst his wife, newly diagnosed with dementia, was becoming increasingly violent and aggressive towards him. She had refused to accept him back home.

The TA carried out an assessment liaising with the wider family including providing advice for support in relation to the mother's escalating care needs and 24 hour care was agreed. The TA liaised with Byron Lodge who accepted the referral without visiting. Discharged the next day with an estimated saving of £690 from bed days saved.



Organisation Development, Communications and Engagement

- Whole system working together to support right care, time, place and reduce pressure on individuals/teams
- Targeted organisational development work
- Champion roles
- Comms and engagement plan with national, SY ICB and local plans aligned
- Local comms informed by understanding ED demand analysis



Multidisciplinary
Team

Governance and Assurance

Urgent and Emergency Care Group

RPET/RMBC & TRFT assurance

Place Board

Health and Wellbeing Board

ICB Board Assurance: NHSE Requirement

Health Select Committee

National KLOEs

Winter resilience scenario testing

Risks and Issues

Area	Risk Description	Anticipated Impact	Mitigation Plan
A&E Attendance	Following unprecedented levels of demand in 2024-25 attendances continue to increase at the current rate.	ED overwhelmed, increased waiting time, patient harm and breaches. Staff burnout. Increased admissions due to poor decision making.	Development of alternative pathways to ED eg x-ray pilot, virtual ward, prevention, enablement, improved access to primary care, seasonal ARI hub. Expanded SDEC offer. Additional medical and clinical staffing including twilight shifts and porters;
Ambulance handovers	Failure to meet handover targets	Crews delayed, reducing response capacity	YAS co-located in ToCH for alternative pathways, project Chronos, PUSH acceptances 45 minute protocol implemented from 2 September.
Acute Bed Occupancy	Insufficient capacity to meet demand.	Patients backed up in ED/SDECs and short stay outliers, corridor care, patient harm.	Increased capacity/extended operating hours in SDECs.
Primary Care Access	There is a perceived, or real, lack of primary care appointments	Patients present at ED	Investment in additional GP appointments and ARI hub, (with flexible start/end dates) Understanding ED demand project: analysis of attendances targeted action plan.
Community Services	<p>Process and system changes due to implementation of the ToCH leads to unintended consequences.</p> <p>Insufficient capacity in the required pathways, particularly P1</p> <p>Community commissioned bed base does not meet length of stay KPIs.</p>	Patients are not tracked through into the community	<p>Phased implementation, OD and training sessions, comms and engagement plan Follow up checks on a risk basis Assurance dashboard to oversee delays by pathway</p> <p>Streamlined MDTs with full partner membership. Improved referral form for complex discharges also used for enablement referrals. More flexible resource in ToCH to allocate according to need. Investment to support D2A.</p> <p>UEC priority project to review community system flow. streamlined process, deep dive into delays by bed base. Targets for reduced length of stay.</p>
Adult Social Care	The adult social care re-design is delayed. Insufficient capacity in the required pathways.	Delays to the implementation of ToCH Delays to the discharge of patients or capacity to remain in community settings.	Re-design implemented. ToCH co-location August 2025 completed.
Industrial Action	On-going Resident Doctor action with potential for others to take action	Reduced capacity. Increased delays/risk of patient harm Increased work load for those not taking IA	Contingency planning based on previous experience/national requirements
ICB re-organisation	National guidance has indicated ICBs to continue to be system co-ordinator for UEC plans in 2025-6 Reduced capacity /loss of skills/knowledge may impact on ICB's ability to deliver	System co-ordination at Place and SY level Decisions regarding funding may cause delay	Support for UEC /winter planning has continued National guidance is that ICBs will continue to be responsible for this in 2025-6 In year impact to be reviewed when structure/timing confirmed with appropriate contingencies put in place including prioritisation of work loads

Health Select Commission – Work Programme 2025-2026**Chair: Cllr Keenan****Governance Advisor: Kerry Grinsill-Clinton****Vice-Chair: Cllr Yasseen****Link Officer: Emily Parry-Harries**

The following principles were endorsed by OSMB at its meeting of 5 July 2023 as criteria to long/short list each of the commission's respective priorities:

Establish as a starting point:

- What are the key issues?
- What is the desired outcome?

Agree principles for longlisting:

- Can scrutiny add value or influence?
- Is this being looked at elsewhere?
- Is this a priority for the council or community?

Developing a consistent shortlisting criteria e.g.

- T: Time: is it the tight time, enough resources?
- O: Others: is this duplicating the work of another body?
- P: Performance: can scrutiny make a difference
- I: Interest: what is the interest to the public?
- C: Contribution to the corporate plan

Meeting Date	Responsible Officer	Agenda Item
26-Jun-25	Jayne Metcalfe, Cllr Baker-Rogers Simon Moss, Gilly Brenner and Cllr Williams Governance Advisor	Adult Contact Team Referral Pathway (Adult Social Care) Health Hub Nominate Representative to Health, Safety and Welfare Panel
31-Jul-25	Dania Pritchard, Cllr Baker-Rogers Kym Gleeson Cllr Clarke	ADASS Peer Review Healthwatch Annual Report Yorkshire Cancer Research White Rose Report Update
12-Sep-25	Governance Advisor	Access to Contraception Evidence Gathering Session
16-Sep-25	Governance Advisor, Cllr Keenan	Menopause Workshop
23-Sep-25	Governance Advisor	Access to Contraception Evidence Gathering Session
02-Oct-25	Gilly Brenner, Cllr Baker-Rogers Bob Kirton, Helen Dobson Jackie Scantlebury, Cllr Baker-Rogers Dania Pritchard, Cllr Baker-Rogers Alex Hawley, Cllr Baker-Rogers	Physical Activity for Health (Sport England) TRFT Annual Report Rotherham Safeguarding Adults Board Strategic Plan 2025–2028 How Did We Do - Adult Social Care Local Account (For Information Only) Rotherham Health and Wellbeing Strategy 2025-2030 (For Information Only)
08-Oct-25	Governance Advisor	Access to Contraception Evidence Gathering Session
20-Nov-25	Holly Smith, Cllr Baker-Rogers Steph Watt, Emily Parry-Harries Cllr Baker-Rogers	Mental Health Strategy - Pre-Decision Scrutiny Place Partners Winter Planning Health and Wellbeing Board Annual Report (For Information Only)
28-Nov-25	Jacqueline Clark, Katy Lewis and Joanne Bell	Unpaid Carer's Strategy Workshop
22-Jan-26 Extended Meeting (4pm - 7pm)	Jackie Scantlebury, Moira Wilson, Cllr Baker-Rogers Ian Spicer, Councillor Baker-Rogers Governance Advisor, Cllr Keenan Emily Parry-Harries	Rotherham Safeguarding Adults Board Annual Report and Strategic Plan Adult Social Care - CQC Inspection Access To Contraception Review Outcome and Recommendations (TBC) Director of Public Health's Annual Report (For Information Only)
26-Mar-26	Liz Howarth, Julia Jessop and Mark Tuckett Bob Kirton	Cancer Alliance Lung Clinic Update SDEC (TRFT) Implementation Update

14-May-26	TBC	NHS 10 Year Plan - Local Implications incorporating NHS Neighbourhood Health Services
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Substantive Items for Scheduling

TBC		Armed Forces Covenant - GPs commitments

Reviews for Scheduling

2025/26 municipal year		Access to NHS Dentistry - Review (to follow conclusion of Access to Contraception)

Items to be Considered by Other Means (e.g. off-agenda briefing, workshop etc)

	Jayne Metcalfe, Kirsty Littlewood	AI Implementation in Adult Social Care (Adult Contact Team Referral Pathway) Update.

Items for Future Consideration

TBC		Learning Disabilities Update (Castle View)
June/July 2026	Simon Langmead	Primary Care Network (PCN) Development
June/July 2026		Immunisation Programme Commissioning Changes
Sep-26	Garry Parvin	Consultation/Co-production engagement with HSC re All Age Autism Strategy Refresh
Early-Mid 2027	Garry Parvin	All Age Autism Strategy Pre-Decision Scrutiny
May-26		NHS Neighbourhood Health Services (Rotherham approach)
TBC	Bob Kirton	ERCP Reintroduction at TRFT
Sept/Oct 2026	Cllr Baker-Rogers, Gilly Brenner, Carole Foster	Physical Activity for Health (Sport England Main Bid and progress update)

HEALTH AND WELLBEING BOARD

ANNUAL REPORT 2024/2025

A HEALTHIER ROTHERHAM BY 2025



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FOREWORD

Rotherham's Health and Wellbeing Board (HWBB) is a multi-agency Board of equal partners, who are working together to improve the health and wellbeing of local people. The role of the Health and Wellbeing Board is to support and encourage effective partnership working, share good practice, understand and build on local assets, as well as taking action where needed to remove barriers, identify gaps, and hold organisations to account for delivery.

I am delighted, as the Chair of the Health and Wellbeing Board, to present our seventh annual report. Health and wellbeing are important to everybody in Rotherham, enabling people to lead fulfilling lives and to be actively engaged in their community. The way individuals achieve good health will differ according to their experiences, life chances, abilities, and resources.

The Health and Wellbeing Strategy contains some ambitious aims, but by working creatively and in partnership, we feel that they are achievable and that we can make long-lasting changes that will improve the health and wellbeing of all Rotherham people.

I am proud to see that the Board is a strong and effective partnership. In the five years since we produced the strategy, partners have faced huge challenges, from the Covid-19 pandemic to the surge in living costs have continued to cause real hardship across our communities. However, the connections and relationships that have been fostered through the Board enabled us to respond quickly and decisively to these challenges, mitigating the impact for local communities.

Over the past year, Board members have not only been working to improve the health and wellbeing of the town's population, but also been taking stock, assessing the progress we've made and identifying where our efforts and resources need to focus on the coming years. A development session was held in January 2025 on proposals for a refreshed Health and Wellbeing Strategy. The strategy will be endorsed by the Board and published in June 2025, setting out our updated priorities and what we intend to deliver together.

But we should also take the time to celebrate what we have already achieved. Kooth, the online mental health and wellbeing service, has been available to all children and young people aged 11-25 in Rotherham since November 2021, as part of a range of work to support children and young people's mental health and wellbeing.

A variety of programmes were delivered to welcome women and girls into football, focussing on under-represented groups, in preparation for the Women's Euros being hosted in Rotherham in summer 2022.

Libraries have launched programmes, including film screenings and death cafes, to become death positive spaces, where the public can have conversations around loss, grief, end of life planning and legacy.

The Council hosted an event at Rotherham United's New York Stadium in February 2023, which brought together partners from across South Yorkshire to discuss inequalities across a range of health outcomes.

As the cost-of-living crisis hit, the Council collaborated with local partners to develop the Warm Welcome spaces initiative, providing residents with a warm, safe place where they could receive advice and guidance and stay connected with friends and family during the winter months.

Rotherham's leaders pledged their support to make Rotherham a Breastfeeding Friendly Borough at a launch event in August 2023, to support mums to make the right choice for themselves and their babies.

£3.4m in government funding enabled the delivery of Family Hubs and the Best Start in Life programme locally. Families can now access information, advice, and support across a range of areas, including pregnancy and birth, preparation for parenthood, health and wellbeing, education and childcare, family support and parenting, and employment and training - all in one place.

In the last year, several events celebrating and championing equality, diversity, and inclusion or marking significant days, were promoted by the Council and local partners. This included Holocaust Memorial Day, International Women's Day, Carers' Rights Day, Inter-Faith Week, The Rotherham Show, Armed Forces Day, and Mental Health Awareness Week. Rotherham town centre's much-loved Christmas lights switch-on, which regularly sees attendances of 6,000 people, returned with a free programme of street entertainment, live music, outdoor market, and artworks to inspire the whole family.

I invite everyone to join us in celebrating our successes to date, as we continue to work together to improve the health and wellbeing of Rotherham people, reduce health inequalities and promote an integrated approach.



Councillor Joanna Baker-Rogers
Chair of the Health and Wellbeing Board

ROTHERHAM'S HEALTH AND WELLBEING BOARD

Rotherham's Health and Wellbeing Board brings together local leaders and decision makers to deliver our Health and Wellbeing Strategy, aiming to improve the health and wellbeing of Rotherham people, reduce health inequalities and promote the integration of services.

The Board supports and encourages effective partnership working, shares good practice, and takes action where needed to remove blockages, identify gaps, and hold organisations to account for delivery.

Organisations represented on the board include:

- Rotherham Metropolitan Borough Council
- NHS South Yorkshire Integrated Care Board (Rotherham Place)
- The Rotherham NHS Foundation Trust
- Rotherham, Doncaster and South Humber NHS Foundation Trust
- Voluntary Action Rotherham
- Healthwatch Rotherham
- South Yorkshire Police

The Board has several specific responsibilities, including producing Rotherham's Joint Strategic Needs Assessment, overseeing the delivery of the Rotherham Health and Wellbeing Strategy, and producing a Pharmaceutical Needs Assessment. Further detail around the role of the Board, including how it has met the statutory duties in 2024/25, are outlined below.

Joint Strategic Needs Assessment (JSNA)

The JSNA is an assessment of the current and future health and social care needs of the local population. It brings together information from various sources and partners to create a shared evidence base, which supports service planning, decision-making, and delivery. The JSNA is refreshed annually, and last year's update was presented to the Board in June 2024. The JSNA includes a section on small geographies, where relevant information can be accessed at ward level, or even more local level.

Rotherham context

Rotherham is one of four metropolitan boroughs in South Yorkshire. The borough is divided into 25 wards covering a wide diversity of urban, suburban, and rural areas. Rotherham developed as a major industrial centre of coal mining and steel making, which has shaped the borough's character. Following the decline of traditional industries, regeneration has brought new opportunities to the area, including advanced manufacturing.

Rotherham's population has grown from 257,600 in 2011 to 265,800 in 2021 (Census 2021). Population growth has resulted from natural increase (more births than deaths), net inward migration and longer life expectancy.

General demographic and socio-economic trends have included a growing and increasingly diverse population. The population is ageing, with a high likelihood of an increase in longer-term health conditions and age-related disabilities. Inequalities persist for workless, disabled, and low paid people, who have been adversely affected by welfare reform since 2012. Health inequalities are also significant in Rotherham: in 2021-2023, the average healthy life expectancy at birth was 56 years for males, compared with a national average of 61.5 years and 55.6 years for females, compared with a national average of 61.9 Office for Health Improvement and Disparities (OHID).

Census 2021 data indicates the borough is becoming increasingly diverse and provides an up-to-date picture of the Rotherham population. This data has been included in the report where relevant and shows how Rotherham has changed between the 2011 and 2021 censuses.

Ethnicity

The ethnic profile of the borough continues to change. Based on the 2021 census, the proportion of residents from ethnic minority communities increased from 8.1 % in 2011 to 11.7 % in 2021. Ethnic diversity is most evident amongst young people, as 20 % of school age children were from an ethnic minority background Department for Education (DFE). The Pakistani community is the second largest ethnic group in Rotherham after white British. Rotherham's ethnic minority population is very concentrated in the inner areas of the town whilst the outer areas were 94 % white British in 2021. 42 % of ethnic minority residents live in areas that are amongst the 10 % most deprived in the country and for some groups the figure is higher. This compares with the borough average of 19.5 %.

Age

Rotherham has 52,228 people aged 65 years or over. This equates to 19.6 % of the population, above the national average of 18.4 % (2021 Census). The population aged 65 and over is projected to increase to 60,939 people by 2029, with over 10 % of the population aged 75 or over (Office for National Statistics (ONS)). Rotherham has a polarised geography of deprivation and affluence. The most deprived communities are concentrated in the central area whilst the most affluent areas are to the south, although the overall pattern is complex (source: Department for Levelling Up, Housing and Communities, Index of Multiple Deprivation 2019).

Deprivation

Rotherham is in the top 20 % most deprived areas in England and 11,904 children were living in "absolute poverty" in 2022/23, according to Department for Work and Pensions figures.

Sexual orientation

2.1 % of residents in Rotherham identify as lesbian, gay, or bisexual according to 2021 Census data.

Gender identity

The 2021 Census also reveals 0.6 % of Rotherham residents aged over 16 identify as transgender, non-binary or have a gender identity different from their sex registered at birth, compared to 0.5 % nationally.

Health inequality

Rotherham had 56,177 people, or 21.1 % of the population, with a limiting long term health problem or disability in 2021, compared to 17.5 % nationally. 9.8 % of Rotherham residents have said that this limits their activity a lot, compared with the average of 7.5 % nationally. Although there have been health improvements, health inequalities remain.

People in the most deprived parts of Rotherham experience poorer health and a higher mortality rate than residents living in the least deprived areas. Life expectancy at birth in the borough is 77.8 years for males, compared to 79.1 years nationally, and 80.9 years for females, compared to 83.1 years nationally (2021-2023). The gap between the most deprived 10% and least deprived 10% of Rotherham residents is 9.9 years for males and 9.5 years for females.

Health and Wellbeing Strategy

The Health and Wellbeing Strategy provides a high-level framework which directs the Health and Wellbeing Board's activity. It supports the Board's leadership role for health and wellbeing by making the most of collective resources within Rotherham. The strategy is developed based on the needs identified in the JSNA.

The four aims of the Health and Wellbeing Strategy are:

- **Aim 1** – All children get the best start in life and go on to achieve their potential
- **Aim 2** – All Rotherham people enjoy the best possible mental health and wellbeing and have a good quality of life
- **Aim 3** – All Rotherham people live well
- **Aim 4** – All Rotherham people live in healthy, safe, and resilient communities

For each of the four aims, two Board members provide strategic oversight as 'sponsors'.

The core role of the Board sponsors is:

- To have strategic oversight and ownership of their respective aim, including:
 - Monitoring progress against aims and removing blockages.
- Providing strategic steer and identifying opportunities to develop their aim, including:
 - Action to reduce health inequalities and actions that support integration of delivery.
 - To be champions for their aim within the Board and Board activities.
 - To be champions for health and wellbeing priorities in their organisations.

GOVERNANCE

The Health and Wellbeing Board is a statutory sub-committee of the Council and is an integral part of Rotherham's wider strategic partnership structures that sit under the Rotherham Together Partnership. Following the changes to Integrated Care Systems in July 2022, Rotherham became one of the four constitutive Places in the South Yorkshire Integrated Care System, with some Health and Wellbeing Board members providing representation at the South Yorkshire Integrated Care Partnership. The Rotherham Place Board continues to report into the Health and Wellbeing Board and takes strategic direction from the Health and Wellbeing Strategy.

South Yorkshire Integrated Care Board (NHS South Yorkshire)

South Yorkshire Integrated Care Board (NHS South Yorks Rotherham) is one of the four Places constituting the South Yorkshire Integrated Care Board (ICB). The ICB is directly accountable for NHS spend, delivery and outcomes within South Yorkshire. It is responsible for the commissioning of healthcare services for the population of South Yorkshire and ensuring the quality and performance of those services. Please note that the South Yorkshire Integrated Care Board is currently undergoing a reform which will impact its current role.

South Yorkshire Integrated Care Partnership (ICP)

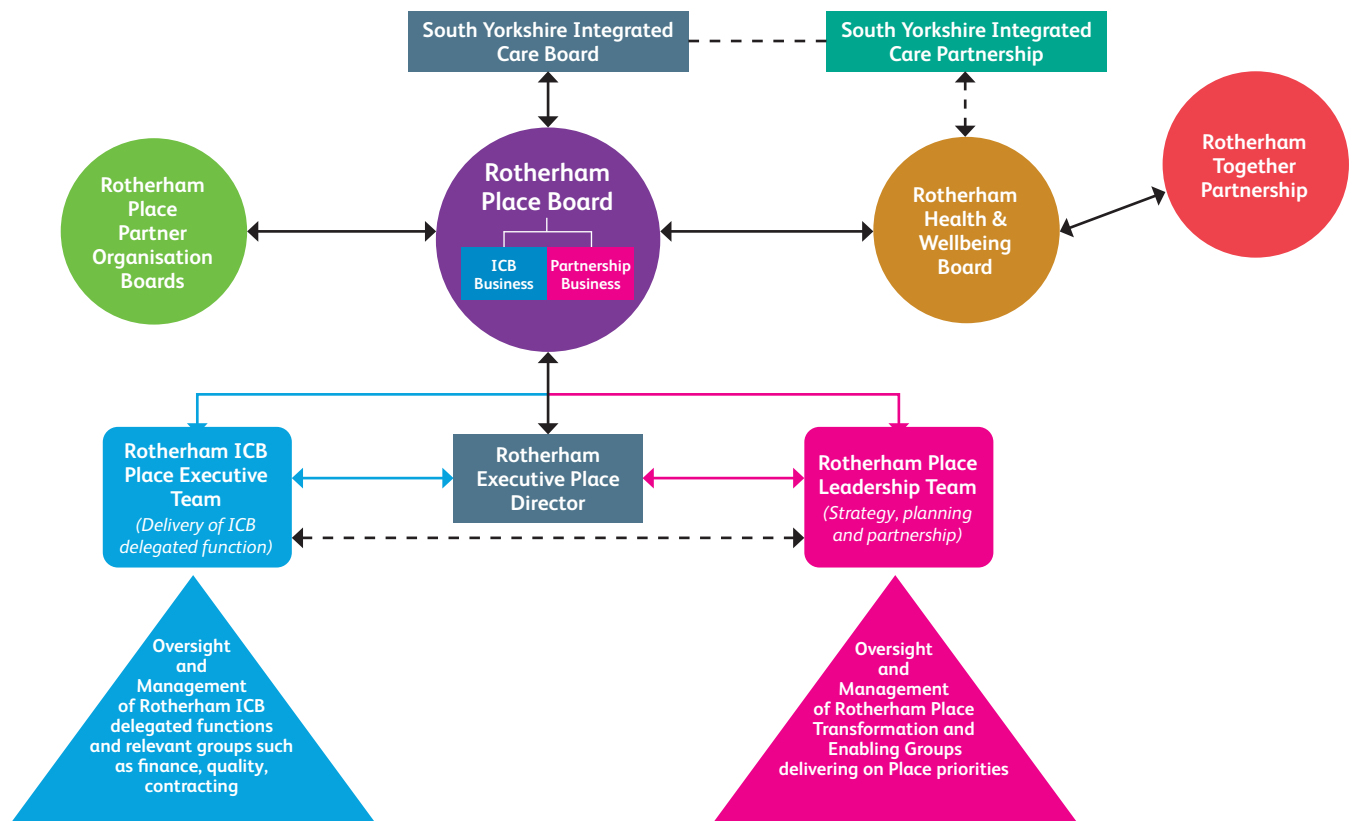
The South Yorkshire Integrated Care Partnership (ICP) is a joint committee of the four local councils, Rotherham, Doncaster, Barnsley, and Sheffield), and the South Yorkshire ICB. The ICP facilitates joint action to improve health and care outcomes and experiences across its population, and influence the wider determinants of health, including creating healthier environments and inclusive and sustainable economies. Between autumn 2022 and March 2023, the partnership oversaw development of the South Yorkshire Integrated Care Strategy, which directs sub-regional work and is complemented by the four local Health and Wellbeing Strategies. Rotherham's Health and Wellbeing Board nominated five representatives to sit on the ICP. *(Please note that the South Yorkshire Integrated Care Partnership is currently undergoing a reform which will impact its current role).*

Rotherham Place Board

The Rotherham Place Board is responsible for partnership business, providing the strategic and collective leadership to deliver the ambitions of the Rotherham Place. The Place Board is the forum where all partners across health and care in Rotherham come together to formulate and agree strategies for implementing the Rotherham Place Plan. It ensures alignment of relevant health and social care budgets so health, care, and support services can be bought once for a place in a joined-up way. The Chair of the Health and Wellbeing Board, along with several other Board Members, sits on the Rotherham Place Board.

Please see the diagram on the following page.

Diagram of Rotherham Place Partnership: 'High level' Governance from 1st July 2022



Rotherham Place Board (has two roles):

1. Alignment of decisions on strategic policy matters relevant to the achievement of the Place Plan.
2. Delegated authority from the ICB Board to make decisions about the use of ICB resources in Rotherham in line with its remit.

Safeguarding

Safeguarding is a priority area of collaboration for local partners, and the Health and Wellbeing Board is a signatory to the partnership safeguarding protocol. The protocol describes the roles, functions, and interrelationship between partnership Boards in relation to safeguarding and promoting the welfare of children, young people, adults, and their families. It aims to ensure that the complementary roles of the various Boards are understood so that identified needs and issues translate to effective planning and action.

Delivering on the protocol includes each Board reporting and receiving updates from one another, to ensure connectivity and appropriate oversight of issues relating to safeguarding. Chairs of the relevant Boards continue to meet to discuss shared challenges and crosscutting issues, ensuring an integrated and coordinated approach to addressing issues relating to safeguarding.

Rotherham Together Partnership

The Rotherham Together Partnership brings together statutory Boards such as the Safer Rotherham Partnership and the Health and Wellbeing Board, with other key strategic partnerships, such as the Business Growth Board, to deliver the priorities of the Rotherham Plan 2025. The Rotherham Plan was refreshed over 2022 and relaunched in January 2023.

Health and wellbeing continue to be one of the key themes in the plan, with a particular focus on embedding prevention and acting on inequalities, improving mental health, and making sure services are integrated and accessible.

The Health and Wellbeing Board contributes to achieving the vision of the Rotherham Plan, particularly in relation to improving health and wellbeing outcomes for local people in their neighbourhoods.

Progress Over the Past Five Years

With the 2020-25 Health and Wellbeing Strategy at an end, this annual report highlights the progress made over the past five years.

In implementing this strategy, we have seen the introduction of Family Hubs in Rotherham which provide a range of support and advice services to help families live well and children have the best start in life. Rotherham was awarded Level One UNICEF accreditation as a UK Baby Friendly Borough in May 2025 and is now working towards Level Two accreditation by May 2027.

The strategy transformed key care pathways and established new health services to support patients, such as developing state-of-the-art orthopaedic surgery pathways to reduce patient waiting and recovery times and the introduction of lung health checks to detect lung cancer early.

The positive impacts of our suicide prevention and loneliness work have been nationally recognised, and the Board recently approved the Prevention Concordat for Mental Health. The Board has also implemented targeted mental health support for children and young people.

Rotherham continues to be a national leader in the design and delivery of social prescribing and voluntary sector initiatives to support good health in communities and patient groups. The Rotherhive website was launched in 2020 and has facilitated access to a range of service and groups for residents and the workers who support them.

The Health and Wellbeing Board has built a coherent strategic approach to tackle the socioeconomic determinants of health. This includes Rotherham's Sustainable Food Places Bronze award-winning food network, and promotion of physical activity through Healthwave and the voluntary sector. Several initiatives have also been developed to support staff and carers in the borough, such as workplace health checks and mental health support offers.

The following section summarises key achievements on an annual basis across the strategy's four aims.

TIMELINE OF KEY ACHIEVEMENTS FROM 2020 TO 2025

ALL CHILDREN GET THE BEST
START IN LIFE AND GO ON TO
ACHIEVE THEIR POTENTIAL

ALL ROTHERHAM PEOPLE ENJOY
THE BEST POSSIBLE MENTAL HEALTH
AND WELLBEING

ALL ROTHERHAM PEOPLE LIVE WELL
FOR LONGER

ALL ROTHERHAM PEOPLE LIVE IN
HEALTHY, SAFE AND RESILIENT
COMMUNITIES

2020 – 2021

Launching the Moving Rotherham campaign to encourage local people to be more physically active. This has included activity such as the 'Moving in Nature' project, which is focussed on engaging local people with green spaces in their area.

The implementation of the Mental Health Trailblazer in schools 'With Me in Mind.' Since children returned to school in September pilot schools are reporting a significant positive impact from having Mental Health Support Teams in their settings.

Engaging with the Local Maternity System on the maternity transformation plan.

Establishing an unpaid carers group to ensure carers have the support they need throughout the pandemic. This group has also been closely involved in the co-production of the Carers Strategy.

Pooling knowledge, expertise, and resources across the partnership with regards to the mental health and wellbeing of our workforce.

An estimated 400,000 people engaged in the Rotherham Together programme, which was developed to respond and support recovery from COVID-19. The programme focussed on three key themes: Joy, Gratitude and Hope and provided innovative and Covid-secure ways to foster connectedness.

Delivery of the Suicide Prevention and Self-harm Reduction Action Plan, including promoting information around debt advice and signposting to Rotherhive website, sharing information for people at risk of relationship breakdown, helping carers and following up missed appointments.

Tackling loneliness and social isolation during COVID-19, including reaching out to at-risk groups, raising awareness via social media, and redeveloping the MECC training.

Working with the other Boards across the Rotherham Together Partnership to deliver the safeguarding protocol, including coming together to discuss mental health as a cross-cutting issue.

**ALL CHILDREN GET THE BEST
START IN LIFE AND GO ON TO
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THE BEST POSSIBLE MENTAL HEALTH
AND WELLBEING**

**ALL ROTHERHAM PEOPLE LIVE WELL
FOR LONGER**

**ALL ROTHERHAM PEOPLE LIVE IN
HEALTHY, SAFE AND RESILIENT
COMMUNITIES**

2021 – 2022

A variety of programmes were delivered to welcome women and girls into football, focussing on under-represented groups, in preparation for the Women's Euros being hosted in Rotherham in summer 2022.

The Covid-19 pandemic disrupted the lives and education of children and young people and impacted on their mental health and wellbeing. The Council's Children and Young People Services delivered targeted support for children and young people in schools. They developed a Team Around the School (TAS) model of working, working with schools and creating new resources based on their needs, with a focus on mental health wellbeing, transition and including recovery from the impact of Covid-19 on pupils' wellbeing.

Following engagement with Public Health colleagues, the Council's Catering Services have achieved a Food for Life award. Further opportunities to improve food available in schools are being explored.

Libraries have launched programmes, including film screenings and death cafes, to become death positive spaces, where the public can have conversations around loss, grief, end of life planning and legacy.

A variety of programmes were delivered to support local people to lead healthy lifestyles, including reducing the health burden from tobacco, obesity and drugs and alcohol, including the establishment of an outreach team to support frequent attenders to the TRFT Emergency Department with complex alcohol and mental Health needs.

Making Every Contact Count training was delivered to over 150 people and the Public Health England Better Mental Health Fund Befriender project was delivered under the Loneliness Plan.

Delivered the Suicide Prevention and Self-Harm Action Plan 2020-22 and included the Be the One campaign and training to over 100 people across the partnership to increase awareness on self-harm and suicide prevention.

Formed the 'Our Borough That Cares Strategic Group' to compliment COVID-19 emergency response work and support carers in the most extreme of circumstances. These organisations remained connected and through 2021 shaped and created our Strategic Framework for 2022-2025.

ALL CHILDREN GET THE BEST
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THE BEST POSSIBLE MENTAL HEALTH
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ALL ROTHERHAM PEOPLE LIVE IN
HEALTHY, SAFE AND RESILIENT
COMMUNITIES

2022 – 2023

Rotherham was a host city in delivering a record-breaking UEFA Women's Euros 2022.

South Yorkshire and Bassetlaw Local Authorities and NHS partners have worked together to develop the 'Walk With Us' toolkit for supporting children, young people and families affected or bereaved by suicide.

Mental Health Awareness and Suicide Prevention training courses were promoted across the partnership for practitioners. In 2022-2023, 7 courses were held with 95 attendees.

During 6-12 June 2022 Carers Week, the Council organised an event, in partnership with Crossroads Care Rotherham, to offer information, support and advice to Rotherham's unpaid carers.

As part of this inclusive universal offer, the Council has commissioned youth work provision across the borough, working in partnership with the voluntary sector and launched the new universal youth offer website 'Places to Go and Things to Do' in November 2022.

Kooth, the online mental health and wellbeing service, made available to all children and young people aged 11-25 in Rotherham in November 2021, as part of a range of work to support children and young people's mental health and wellbeing.

A range of activities were delivered in libraries, including development of the Warm Welcome programme to support Rotherham people through the cost-of-living crisis.

Delivered a pilot supporting frequent attenders to the hospital's emergency department through an outreach team providing a holistic offer.

Since emerging from the pandemic, Rotherham has outperformed the national average in terms of successful completion of alcohol and non-opiate drug treatment, demonstrating our real commitment to helping more people overcome addiction locally. Rotherham has shown a steady increase.

Rotherham's leaders pledged to work towards becoming a Breastfeeding Friendly borough.

ALL CHILDREN GET THE BEST
START IN LIFE AND GO ON TO
ACHIEVE THEIR POTENTIAL

ALL ROTHERHAM PEOPLE ENJOY
THE BEST POSSIBLE MENTAL HEALTH
AND WELLBEING

ALL ROTHERHAM PEOPLE LIVE WELL
FOR LONGER

ALL ROTHERHAM PEOPLE LIVE IN
HEALTHY, SAFE AND RESILIENT
COMMUNITIES

2023 – 2024

New mobile CCTV unit launched to reduce crime and anti-social behaviour.

An independent travel training (ITT) offer was created to support children with special educational needs or disabilities.

A new diagnostic centre opened at Badsley Moor Lane, providing an out-patient respiratory and sleep physiology service.

The annual Rotherham Show took place on 2nd- 3rd September, with approximately 88,000 visitors.

Forest View - a new post-14 specialist campus opened in September 2023, providing 50 school places.

Opened a new diagnostic centre at Badsley Moor Lane. The centre has more space, equipment and staff, and with greater capacity for certain tests, is reducing waiting times.

Renewed strategic approach to physical activity through the Moving Rotherham partnership.

Installed Changing Places facilities in the gardens of Wentworth Woodhouse. The specialised toilet provides a purpose-built environment, designed specifically to help disabled visitors and individuals with complex care needs.

Introduced the Holiday Activity and Food Programme (Rotherham Healthy Holidays) to provide free holiday places for all children and young people from Foundation Stage 2 to Year 11 who are eligible.

Suicide and self-harm awareness training delivered to practitioners across the partnership and members of the public. Three training sessions have been delivered to South Yorkshire Police Sergeants in 2023.

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2024 – 2025

The Mental Health Community Connectors service was established in April 2024 as a response to NHS England guidance to improve the physical health care of adults living with severe mental illness.

The Council and local partner organisations came together and developed a programme of learning events to support Safeguarding Awareness Week, which took place from 18 to 22 November 2024.

Council opens registration for its universal baby packs.

Rother Valley and Thrybergh Country Park were the latest two locations to install a Changing Place facility to support the needs of disabled visitors.

Rotherham's Reclaim the Night returned for its tenth year on 21st November 2024.

Rotherham patients with COPD marked World COPD Day by taking part in an event designed to help them learn how to manage the condition.

New Youth Parliament members for Rotherham were elected to represent Rotherham for two years by meeting with decision-makers as well as organising events and campaigns to ensure young people's views are heard.

The biannual Rotherham Together Partnership event was held in September 2024 at The Arc Cinema in Forge Island. It allowed representatives from local organisations to come together to commemorate the opening of Rotherham's first cinema in more than 30 years and showcase the partnerships success throughout the year.

RotherHive was launched in 2020 originally as a mental health resource. It has since significantly expanded and now provides a range of verified practical mental health and wellbeing information, support, and advice for adults in Rotherham.

'Giving Your Child the Best Start in Life' guide made available for all families across Rotherham with children up to 2 years old.

The Rotherham Food Network was awarded the Sustainable Food Bronze Award; a prestigious award for tackling the food challenges that are faced by communities.

BOARD DELIVERY IN 2024/25

The following section highlights the Board's progress in delivering the Health and Wellbeing Strategy during 2024/25.

AIM I:

ALL CHILDREN GET THE BEST START IN LIFE AND GO ON TO ACHIEVE THEIR POTENTIAL

This aim is focused on two priorities:

- Develop our approach to give every child the best start in life.
- Support children and young people to develop well.

This section sets out key achievements including a case study on the work delivered under this aim.

Key achievements in 2024/2025 include:

Rotherham Council opens registration for its universal baby packs. The Council has invested £360,000 in the Rotherham baby packs, which forms part of the Council's commitment to ensuring that every child in Rotherham gets the best possible start in life. Each pack contains clothing, a toy, a book, and other useful items for the first six months, all packed in a sturdy storage box that can later be used as a memory box.

Starting from 6th January 2025, pregnant women in Rotherham whose baby were due on or after 7th April 2025 will be offered the opportunity to register to receive a baby pack. Midwives will discuss the scheme and register pregnant women for it at their 25-week appointment.

On average, there are 2,740 babies born each year who live in Rotherham, and all will be eligible to receive a pack. Continued support for children and families in Rotherham is provided through the Council's Family Hubs Network.

'Giving Your Child the Best Start in Life' guide is now available for all families across Rotherham with children up to 2- years old. The guide developed by the Council in partnership with the Family Hubs Parent and Carers Panel, facilitated by Voluntary Action Rotherham (VAR) includes information on the following services: midwifery, health visiting, family help, parent and infant mental health, early years, volunteering, and childcare.

Delivering the Family Hubs and Best Start in Life programme is a continuation of this work which improve the support for local families. Families can access this support in-person at several one-stop shops across the borough and online through the Council website.

The Rotherham Youth Cabinet provides an opportunity for young people to come together, to participate in formal governance structures. The Youth Cabinet advocates on behalf of others and works in collaboration with organisations, services, strategic leaders, and frontline workers to improve outcomes for children, young people, and adults.

In 2024, the Youth Cabinet choose to focus their time and efforts on four priority areas:

- Anti violence
- Better personal, social, health and economic (PHSE) / religious studies (RS) education in school
- Health and wellbeing
- Climate action

In 2024, Rotherham Youth Cabinet took over the Office of the Children's Commissioner as part of the Takeover Challenge where they explored health and wellbeing. The special meeting provided an opportunity to question Council Officers on children and young people's health and wellbeing and the actions being taken to support them.

New Youth Parliament members for Rotherham. The UK Youth Parliament (UKYP) enables young people aged 11-18 to use their energy and passion to change the world for the better.

Members of Youth Parliament (MYPs) in Rotherham are elected bi-annually and serve a two-year term of office. Nine candidates were supported to create their own manifestos. Schools and youth groups were also involved in the election process. Candidates are elected via a borough wide vote to represent the voice of young people in Rotherham on a local, regional, and national level. Over 4,000 people voted, which culminated in the results being announced at an event at Rotherham Town Hall.



Youth Parliament Members for Rotherham and Deputies: Giancarlo, Mabrookah, Ashaz and Jack.

ROTHERHAM AREA PARTNERSHIP IS AWARDED HIGHEST RATING BY OFSTED

Independent inspectors have praised Rotherham's services for children and young people with special educational needs and disabilities (SEND) for their 'genuine determination across the partnership that all children and young people with SEND are happy, successful and thrive' and awarded them the highest rating in their inspection report.'

Following the three-week inspection in early October 2024, Ofsted and Care Quality Commission (CQC) inspectors assessed children's services, looking at arrangements for education, health and social care services for children and young people with SEND across the borough.

There are three possible inspection outcomes in the SEND framework with Rotherham's children's services receiving the highest outcome of: 'the local area partnership's SEND arrangements typically lead to positive experiences and outcomes for children and young people with SEND. The local area partnership is taking action where improvements are needed. This means the services won't need to be inspected again for five years.

They found 'most children's and young people's needs are identified and assessed quickly and accurately' and they 'enjoy attending a range of mainstream schools and specialist provisions'. The report also highlighted that children and young people are valued and visible in their communities.

Praise from the inspectors comes from the collaborative way partners work together to provide support for children and young people with SEND. Partners include Rotherham Council, Rotherham's Integrated Care Board (ICB) and Rotherham Parent Carers Forum.

Rotherham Parent Carers Forum was particularly praised for their compassionate approach in advocating for children and young people, working in partnership with services through the Four Cornerstones, Welcome and Care, Value and Include, Communication and Partnership, to influence the culture of how services for children and young people with SEND are delivered and developed in Rotherham.

SECOND TWO-BEDROOM HOME – NEWEST ADDITION TO THE RESIDENTIAL PORTFOLIO

The refurbishment of the second two-bedroom children's home in Thurcroft was completed by August 2024, following the Ofsted registration submitted in May 2024. The Council recognises that the best way to care for our children is within our own locality, as it ensures that the Council can effectively work with a multitude of health, education, and social care professionals, as well as the children's families.

Work is taking place to transform our residential service and ensure that placements are available to meet the increasing demand on residential care homes. There continues to be a national shortage of foster placements, which enhances this demand and means that children sometimes need to be moved away from family, friends, and networks to different areas of the country. Consequently, this can impact the relationships, educational/extra-curricular achievements, health, and the emotional wellbeing of the children.

Rotherham already has a portfolio of established children's homes, including a short breaks home for children with disabilities, four residential homes, and a supported accommodation. The borough also has two emergency and a one bedded home, which provides short term support to children experiencing breakdown in their care.

The ambition in Rotherham is to allow children in care to have an upbringing that is filled with love and happiness, which contributes to long term success and maintenance of important relationships and networks that will support children throughout their lives. Whilst the Council would like all children to live in family homes, we recognise that this is not always achievable. Therefore, it is important that the Council focusses on a model that develops smaller homes, which aid in replicating a family environment.

Having smaller children's homes means that the Council can work to match each child well to their placement and core staff group, who are focused on the children's individual needs and requirements. Additionally, the smaller homes model allows for more focused attention and individualised planning for children with more complex needs.

The Council recognises that the key to success in the home is the staff team. Therefore, a scrupulous recruitment process was implemented to ensure that all staff are skilled, experienced, and equipped to work with our children. The majority of the team were in post by September 2024 and have extensive experience through working in other established homes across the service.

AIM 2:

ALL ROTHERHAM PEOPLE ENJOY THE BEST POSSIBLE MENTAL HEALTH AND WELLBEING

This aim is focused on four priorities:

- Promote better mental health and wellbeing for all Rotherham people.
- Take action to prevent suicide and self-harm.
- Promote positive workplace wellbeing for staff across the partnership.
- Enhance access to mental health services.



The impact of Rotherhive since its 2020 launch

RotherHive was launched in 2020 originally as a mental health resource, it has since significantly expanded and now provides a range of verified practical mental health and wellbeing information, support, and advice for adults in Rotherham.

Carers	Cost of Living	Debt	Depression Anxiety, Stress	Dementia
Eating Disorder	Eating Well	Gambling	Homelessness	Mental Health
Perinatal	Self-Harm/ Self-Neglect	Sleep	Smoking	Suicide Prevention

Rotherhive can support residents with a range of different issues

The Rotherhive Facebook page launched its 2024 Christmas advent calendar. In the lead up to Christmas the social media campaign covered a wide range of topics, such as debt, mental wellbeing, alcohol, self-care, gambling, sleep and coping with Christmas.

The Mental Health Community Connectors service was established in April 2024 as a response to NHS England guidance to improve the physical health care of adults living with severe mental illness (SMI) through improved physical health checks and supported follow-up interventions. The new service was developed with VCS delivering multi-disciplinary approach for people living with SMI and based on social prescribing model.

A key aspect was increasing uptake of SMI physical health checks in primary care, checks include height and weight measurements, blood tests, medication review, alcohol consumption and smoking status, diet and exercise review, access to screening and vaccinations.

Patient voice workshops were held, some of the feedback highlighted:

- A lack of prior information and advice, leading to anxiety and lack of motivation to take up appointments.
- Experiences in difficulty making contact and using appointment systems.
- On-going mental and physical illness impacting attendance and follow up.
- The need for a slow, steady approach to physical health improvements with ongoing support.

The service adapts to individual need, it is not a linear pathway but reacts to people's needs. It aims to build trusting relationships, raise awareness of different aspects of health and wellbeing, upskill to embed healthy lifestyle behaviour into everyday life, raise feelings of wellbeing, through fostering connections with others, provide a welcoming environment and peer support and enable individuals to attend and complete their physical health checks and follow up interventions.

There have been 218 referrals into the service from primary care and after three months 100% of service users have improved their Recovery of Life (ReQoL) score. ReQoL score is a measurement of quality of life for people with mental health conditions.

Going forward the service intends to:

- Co-produce physical health check resources.
- Map practice level approaches and challenges to physical health checks.
- Plan new collaborative approaches between Primary Care Networks (PCNs) and Rotherham voluntary sector.

The National Academy for Social Prescribing published a new report highlighting the measurable benefits of social prescribing. The Rotherham Social Prescribing Service is one of the services profiled in the report and mentioned in the press release:

“In Kirklees and Rotherham, frequent users of healthcare services saw GP visits and A&E attendances reduce substantially following social prescribing interventions.”

The report also suggested that social prescribing can have a positive economic impact. In Rotherham, a pre and post analysis on frequent users reported a reduction in costs up to 39 % for A&E attendances.

The full report can be found at this link, Rotherham features on page 16. New report shows impact of social prescribing on health service use and costs. [The latest news from NASP | NASP](#).

Academics at Sheffield Hallam University have been evaluating the impact of Rotherham Social Prescribing service since 2013, focusing on the long-term condition component of the service.

The National Academy for Social Prescribing (NASP) report details the services and impact.



The Rotherham Social Prescribing Hub

Headline impact on frequent users of health services were identified as: 33%-40% reduction in non-elective inpatient spells 39%-43% reduction in A&E attendances.

DOMESTIC ABUSE AND SUICIDE AWARENESS TRAINING

A domestic homicide review was conducted in December 2024 by Rotherham Doncaster and South Humber Trust (RDaSH) Crisis Team Manager and Clinical Lead, who considered how they could enhance understanding and learning around domestic abuse and suicide in the workplace. They subsequently developed a training session around suicide and domestic abuse and invited a senior project worker from Hopian (an organisation that supports adults and children affected by domestic abuse and child sexual exploitation) to join this session to provide an overview of domestic abuse services in Rotherham. The session was attended by 18 people from across different teams.

Following the initial session, Hopian requested delivery of the same session - adapted to provide an overview of the Rotherham Crisis Team to improve their understanding. There was a real sense that Hopian were confident in contacting the Rotherham Crisis Team if they have concerns for the people who access their service and understand how working in a collaborative way providing wrap around support to individuals in crisis can enhance care. Staff mentioned that they felt reassured following speaking to members of the team.

Suicide and domestic abuse are not easy matters to talk about, many of the people who experience this adversity are equally vulnerable to health inequalities and find it difficult to access or receive the support they need. RDaSH remain hopeful that through ongoing collaborative pieces of work, with voluntary community sector partners they will continue to improve the care for those who require it in Rotherham.

AIM 3:

ALL ROTHERHAM PEOPLE LIVE WELL FOR LONGER

This aim is focused on two priorities:

- Ensure support is in place for carers.
- Support local people to lead healthy lifestyles, including reducing the health burden from tobacco, obesity and drugs and alcohol.

Key achievements in 2024/2025 include:

Rother Valley and Thrybergh Country Park are the latest two locations to install a Changing Place facility to support the needs of disabled visitors. These are the eighth and ninth facilities to be installed in the borough after the Council was awarded £490,000 in government funding. These purpose-built facilities are designed to support the needs of disabled visitors and individuals with complex care requirements including people living with learning disabilities, motor neurone disease, multiple sclerosis, cerebral palsy, and other conditions.

Changing Places facilities have also been installed at Grimm & Co., Gulliver's, Magna Science Adventure Park, Rotherham United's New York Stadium, Wentworth Woodhouse, and Clifton Park Museum and Town Hall.

Ensuring support is in place for carers. The Council worked in collaboration with partners to spotlight the unwavering commitment and tireless efforts of unpaid carers. To ensure carers are aware of their rights and feel supported, a series of impactful events, ranging from open days to informative stalls were held to commemorate Carers Week, 10 to 16 June 2024. The events not only recognised the invaluable contributions that carers' make to society, but also empowered residents with essential knowledge about their rights and support available to them.



Carers Week 2024

Rotherham patients with COPD marked World COPD Day by taking part in an event designed to help them learn how to manage the condition.

The event, held at BreathingSpace, included patients, relatives, friends, carers, and colleagues learning more about managing chronic respiratory conditions. Advice given at the event included how to use an inhaler correctly, stop smoking support, information on clean air and demonstrations of two of the best exercises for COPD; and tai-chi (funded by Rotherham Hospital and Community Charity).



World COPD Day 2024

With 2.86 % of Rotherham residents having a COPD diagnosis, BreathingSpace, the hub for respiratory treatment in Rotherham, organised the event to raise awareness about COPD and how to stay healthy if diagnosed with it.

ADULT SOCIAL CARE CO-PRODUCTION BOARD

A new engagement forum has been established where residents can codesign adult social care services to ensure their experiences shape the future delivery of services. The inaugural meeting of the Adult Social Care Co-Production Board was held in April 2024. Attendees included people who had expressed an interest in helping to shape the future of adult social care services during recent events. The Board collectively agreed to brand themselves as Rotherham Adult Social Care Always Listening (RASCAL) and elected a chair and deputy chair at the first meeting. RASCAL meet on the first Wednesday of every month at Rotherham Town Hall.

The purpose of the RASCAL Board is to:

- Ensure the voices of communities are placed at the centre of decision making and governance.
- Start engagement early when developing plans and provide feedback to communities on how their engagement has influenced activities and decisions.
- Understand the community's needs, experiences, and aspirations for health and care. Using engagement to determine whether change is having the desired effect.

The Board currently comprises of 12 members, with each representative having lived experience of adult social care either themselves or as a parent, carer, or community member. The Board is diverse with representatives covering a wide range of protected characteristics.

The Council's Adult Social Care (ASC) Service facilitates and supports representatives to attend the Board wherever possible. For example, a British Sign Language (BSL) interpreter was organised to ensure that effective communication can occur within the meetings. Representatives from the Board also collaborate with colleagues within the Council's ASC Service to develop a forward plan of topics for discussion. Feedback from the meetings is captured to influence and shape service delivery.

Within the Board there are subgroup meetings that focus on specific topics, for example in October 2024, a discussion was held on the ASC website to ensure the content is informative and accessible to everyone. Currently, a newsletter and webpages are being developed as a way of demonstrating the fantastic work that is being delivered by the Board.

Mohammed Riaz, Chair of RASCAL, said, "I believe in equality, fairness, and independence. People with health conditions and disabilities deserve a voice in every decision that shapes their lives because no one knows their needs and strengths better than them."

Together we can create a difference and create a much better Rotherham that embraces inclusion and understanding.

We can do so little individually but together we can do so much.”

Sam Taylor, Deputy Chair of RASCAL, said “Being a part of the RASCAL Board is such an important opportunity to advocate for improvement and change to ASC for the people of Rotherham.

The idea and purpose of the Board is to bring together members of the public to work alongside and co-produce work with ASC Officers. I believe the RASCAL Board is the key to providing high-quality services, as you have the voice of people who are going to be accessing services provided feeding back and highlighting the strengths and weakness to the Council, who can then facilitate any changes that are needed.

Being a part of RASCAL, you have the opportunity to bring issues, experience, feedback, ideas which we discuss and work through. You are a valued voice as well as giving a realistic opinion on issues or projects that the Council bring to the meetings as well.”

ROTHERHAM FOOD NETWORK WINS A BRONZE SUSTAINABLE FOOD AWARD

The Rotherham Food Network has won a prestigious award for tackling the food challenges that are faced by communities and making local, healthy, and sustainable food available to all residents across the borough.

The Sustainable Food Place award recognises the holistic approach taken towards food and honours the positive changes made towards food issues ranging from healthy food for all to reducing food waste.

Rotherham Food Network was formed in 2022 and is a partnership made up of 26 organisations including Rotherham Council, Voluntary Action Rotherham, Rotherfed, and many more.

Achieving the bronze award recognises the steps that Rotherham has taken to raise awareness of food challenges, promote and produce locally sourced produce, tackle food poverty, and more. As well as celebrating the success of the network and its members who are actively making positive changes to Rotherham’s food sector, system, and to the way food is viewed as a society.

Rotherham Food Network is at the very beginning of their journey and welcome others to join to help improve the food system. Find out more about the Rotherham Food Network and how you can get involved [here](#).

AIM 4:

ALL ROTHERHAM PEOPLE LIVE IN HEALTHY, SAFE AND RESILIENT COMMUNITIES

This aim is focused on four priorities:

- 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.

Key achievements in 2024/2025 include:

Championing events supporting equality and inclusion. Throughout 2024, the Council and local partner organisations have actively informed and involved local residents, including underrepresented groups, in opportunities for participation.

On 11th May 2024, the Council proudly partnered with Flux Rotherham and Children's Capital of Culture to host the third Women of the World (WOW) Festival Rotherham. The festival created a space where women, girls and non-binary people come together to discuss a range of topics, challenging societal norms and ideas that create barriers for women to succeed.



Women of the World Festival Rotherham

Taking place on the weekend of 7th-8th September 2024, the annual **Rotherham Show** how saw over 45,000 people enjoy an eclectic mix of live music, dance, comedy, outdoor theatre and creative workshops.

Throughout the weekend the show celebrated the spirit of the borough and gave people the chance to enjoy an amazing free festival of culture, entertainment, and family fun.



Rotherham Show

Rotherham's Reclaim the Night returned for its tenth year on 21st November 2024. Residents were invited to attend a powerful evening of activities, workshops, and an annual walk-through Rotherham Town Centre to celebrate the past, present, and future of women's empowerment.

Rotherham marked **Holocaust Memorial Day** by holding an event on 27th January 2025. The event brought together faith leaders, dignitaries, Councillors, schools, and local residents to remember and pay tribute all those who lost their lives to genocides around the world. This year's theme was 'For a Better Future' – reflecting on how we can all help to create a better future, challenge prejudice, and speak up against Holocaust and genocide denial and distortion.



Reclaim the Night

The Council's community tension monitoring process enables the Council to track and monitor local issues, alongside any national or international events, which may threaten cohesion. This allows the Council to agree and implement actions to manage tensions, on the basis that early intervention can make a real difference in preventing incidents of public disorder and in keeping communities safe.

South Yorkshire Police produce a weekly assessment of community tensions which is shared with the Council's Community Safety Team. The assessment is then shared with an internal network of key managers of front-line services to facilitate and encourage information gathering at a community level.

Information is available via a range of sources, including front-line staff in partner organisations, Councillors, schools, and voluntary, community and faith sector contacts. Information is used to assess the following measures:

- Experienced problems – based on what people in communities 'feel.'
- Evidenced problems – actual evidence of what is happening such as reported crimes or incidents.
- Potential problems – where it is anticipated that there might be problems because of local, national or international events.

Where potential tensions are identified, appropriate routes are identified to address the issues. This may range from community engagement activities to listen to community concerns and/or provide reassurance, liaison with Neighbourhood Policing Teams to monitor for escalation of issues, right through to more formal emergency planning structures where gold, silver and bronze command structures are convened.

The Council and local partner organisations came together and developed a programme of learning events to support **Safeguarding Awareness Week**, which took place from 18th-22nd November 2024.

Safeguarding Awareness Week is nationally recognised and has been marked in Rotherham for the past sixth years. The themes of last year's event were 'Neglect and Working in Partnership.' The themes encouraged participants to consider how they can work together to establish safer cultures within workplaces and communities.

These sessions covered a range of topics, including suicide prevention, domestic abuse services, professional curiosity, alongside the launch of the Children's Neglect Strategy. Aimed at frontline workers and volunteers from adult and children's services, motivational speakers facilitated the sessions to stimulate discussion and help share best practice.



Advertising for Rotherham Safeguarding Awareness Week

LEADING ORGANISATIONS WORKING TOGETHER TO DELIVER IMPROVEMENTS FOR ROTHERHAM PEOPLE AND PLACES

The Rotherham Together Partnership was first established in 2017 and seeks to bring together local organisations, including the Council, NHS, Rotherham College, and South Yorkshire Police, alongside representatives of the private and voluntary sectors.

The aim of the partnership is to improve the quality of life for everyone in Rotherham by working together to deliver innovative projects.

Partners are driving action across several key themes set out in the Council Plan 2025 to create safe, healthy, and vibrant communities, underpinned by good quality housing, jobs and local infrastructure.

The biannual Rotherham Together Partnership event was held in September 2024 at The Arc Cinema in Forge Island. It allowed representatives from local organisations to come together to commemorate the opening of Rotherham's first cinema in more than 30 years and showcase the Rotherham Together Partnership's success throughout the year.

The event showcased the transformational work that is taking place across the borough including:

- Updates on how regeneration activity is being delivered at pace, including the Towns and Villages Fund alongside the renovation of children's play areas.
- How the borough is being revitalised through events and activities, including the Tour of Britain, Armed Forces Day and Christmas Lights Switch-On.
- Updates were provided by the Social Value Portal on how our local partners are being supported to identify tangible actions and specific initiatives that will help make the Rotherham Pound go even further.

Rotherham Council Leader and Chair of the Rotherham Together Partnership, Councillor Chris Read, said: "at this event we reflected on what has been achieved within the last six months, while looking forward to the exciting developments that are to come, such as Skills Street at Gulliver's Valley Resort; an immersive and innovative career training centre that aims to inspire and inform children, young people, and adults from across the South Yorkshire region. With over 80 people in attendance, it was a magnificent way to celebrate the opening of Forge Island".

A video has been created showcasing some of the fantastic projects, programmes, and activities that partners are delivering to respond to the needs of individuals, families, and communities in Rotherham. From restoration works at Wentworth Woodhouse, to the flagship town centre development at Forge Island, comprising of a new cinema and hotel, to inspiring creative and cultural programme, including, [UPLIFT](#) Skate and Art Festival, Roots Carnival, the partnership is working tirelessly to make Rotherham a place that everyone can be proud of. You can find out more about the partnership working happening across Rotherham on the Rotherham Together Partnership website

CHILDREN'S CAPITAL OF CULTURE: COMMUNITY FESTIVALS 2024

In 2025, Rotherham will become the world's first Children's Capital of Culture (CCoC). A programme designed and delivered by children and young people living in the borough.

In 2024, Children's Capital of Culture had the opportunity to work closely with existing community events and festivals, supporting their growth and development whilst also enabling them to be part of our journey into 2025.

Through funding from Arts Council England, the CCoC Team were able to work with five different community festivals:

- Eastwood Fun Festival (Rotherham East ward), in June 2024
- Harthill Carnival (Wales ward), in July 2024
- Aston Carnival (Aston and Todwick ward), in August 2024
- Ferham Festival (Rotherham West ward), in August 2024
- Reclaim The Night (Boston Castle ward), in November 2024

The CCoC Team provided up to £2,000 of support to each festival, which allowed the festival organisers to enhance their offer to the communities. The Council worked with all community festivals to more strongly embed youth voice into their delivery, helping the festival organisers find opportunities to support and showcase local children and young people's talents.

Collectively, the CCoC Team worked with 499 school pupils and 130 children and young people attending youth provision in the build-up to these festivals. The festivals themselves reached well over 10,000 participants.

The outcome of working with these community festivals was huge, especially at Ferham Festival 2024. The festival took place on Saturday 17 August 2024 and saw over 2,000 people from the surrounding areas attend.

The CCoC Team worked with 154 school children across two local primary schools to explore the children's interests in visual art and music. Children at Kimberworth Community Primary School created colourful banners and posters that highlighted what their community means to them, whilst Thornhill Primary School used their musical talents to write, sing, and record a 'Thornhill Rap' that explained their favourite things about Rotherham.

The CCoC Engagement Team also worked with a local youth group based at Liberty Church to develop performance skills and, most importantly, confidence. Attended mostly by Roma-Slovak young people, the work this group of young people produced with dance company Rationale Arts was magical. Using traditional Roma dance moves mixed with hip-hop beats and tricks, the group created a unique way to show their pride in their culture and heritage. Group members, along with siblings, parents, aunties, and uncles, all performed on the main stage at Ferham Festival.

With Ferham and Masbrough being within the 10% most deprived areas in England, opportunities for children and young people to experience quality creative activities that build essential life skills, confidence, and community cohesion is crucial. By the end of the project, the young people were able to feel real pride in talking about their own culture and community. By working with these specific groups, Children's Capital of Culture have allowed these children and young people to experience arts and culture, breaking down barriers that may have limited their access to the creative industries.

Children's Capital of Culture continues to work with the Liberty Church youth group to offer rich cultural experiences to the young people who regularly attend. Building relationships with their wider families is also growing, with the hopes that multiple generations can enjoy the 2025 festival year.

ITEMS FROM MEETINGS MARCH 2024 - JANUARY 2025

This section provides a snapshot of the ongoing work across some of the partner organisations to improve the health and wellbeing of the Rotherham population.

January 2024

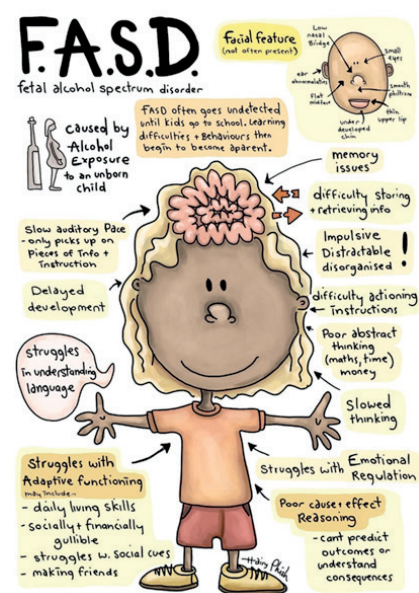
Aim 1 – All children get the best start in life and go on to achieve their potential.

Foetal Alcohol Spectrum Disorder Project

A presentation on the 2-year funded project for One Adoption South Yorkshire overseen by Regional Adoption Agency (RAA) Leadership programme for Centres of Excellence on the development of a Foetal Alcohol Spectrum Disorder (FASD) Pathway.

Key project deliverables:

- 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.



The symptoms of FASD

- 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:

- 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.

Next steps:

- Work with Neurodevelopmental Working Group through Integrated Care Board.
- Identify clinical lead for Assessment and Diagnosis (A&D) Working Group.
- Identify who needs to be part of Assessment and Diagnosis Working Group.
- National Institute for Health and Care Excellence (NICE) Quality Guidelines: how to implement for FASD.
- Consider funding options: 2-year funding, Adoption Support Fund, other.

March 2024

Item of relevance to all aims

Neighbourhood working and ward priorities

Our vision - Every neighbourhood in Rotherham to be a thriving neighbourhood, where people can 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.'

Examples of achievements that contribute towards the delivery of the Health and Wellbeing Strategy:



Neighbourhood priorities are centred around creating safe, healthy, and thriving communities.

Aim 1 – All children get the best start in life and go onto to achieve their potential.

- 13 wards reference supporting children, young people and families.
- Kilnhurst and Swinton East Ward – activities in deprived areas, improving children's play areas, school travel safety initiatives and 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 promoting the best positive mental health.
- Hooper Ward – improve wellbeing by bringing people together whilst addressing loneliness, isolation, and mental health. Promote local activities, support existing community groups to set up a community networking partnership, continue to support bringing people together to prevent loneliness and isolation and promoting help and support available to residents in relation to the cost-of-living cost.

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 and tackling loneliness and isolation in line with five 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 and 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 were properly maintained and looked after and ensure that the voice of the community was heard in any proposed planning developments.

Aim 3 – All Rotherham people live well for longer.

Annual update – Moving Rotherham Partnership

The Moving Rotherham Partnership is made up of organisations working across the borough with an interest in helping local people to be more physically active.

The partnership has developed a local strategic plan, which sets out three priority areas:

- Active champions: We want to 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.
- Active environments: We want to help create environments than enable physical activity, whether this is outdoors in green spaces, town centres and local streets, or within schools, colleges, and workplaces.
- Active communities: We want to create opportunities for people whatever their age, background or ability and use physical activity as a way for people to connect, share experiences and contribute to a thriving borough.



The wider determinants of health

The following achievements were highlighted:

- The Say yes prevention campaign was launched at Rotherham Show with ‘Say Yes to joining in’ with the activities.
- Training to social prescribers/link workers to increase awareness of benefits of physical activity and confidence.
- Active environment: Uplift Festival, Rotherham 10K, Herringthorpe Stadium refurbishment, cycle lane infrastructure improvements, play zone facilities.
- £63,567 awarded to community groups through Sport England Together Fund.
- Women’s Euro Legacy Programme 368 hours of volunteer time contributed.

June 2024

Item of relevance to all aims

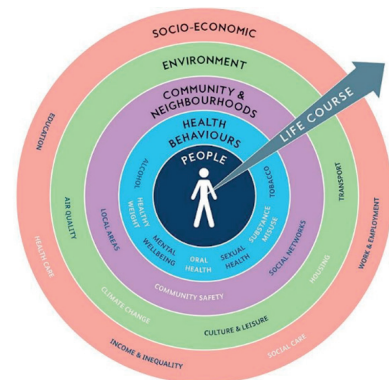
Rotherham’s Joint Strategic Needs Assessment (JSNA)

Rotherham’s Joint Strategic Needs Assessment brings together data and intelligence to inform the local understanding of the current and future health needs of Rotherham people.

A summary of key findings, interpretation and data is available below:

Health behaviours

- The Rotherham Drug and Alcohol Service (ROADS) has been supporting more people with substance and alcohol use; the number of new presentations to treatment for adults increased from 960 in 2022/23 to 1,070 in 2023/24; the number of new presentations to treatment for children aged under 18 increased from 45 in 2022/23 to 70 in 2023/24.
- There had been a significant increase in the percentage of physically active adults in Rotherham from 54.9 % in 2018 to 64.1 % in 2022/23. Despite this, health conditions which were associated with having a lower risk in physically active adults (such as CHD, Stroke and Hypertension) all had significantly higher rates in Rotherham than Yorkshire and the Humber and England.
- Smoking prevalence in Rotherham in 2023 was at 14.5 % of adults compared with 11.6 % across England. Quit rates in Rotherham had nearly doubled from 1,580 in 2018 to 3,155 in 2022.
- The proportion of adult general practice patients who were newly diagnosed with depression in Rotherham in 2023/24 was 1.5 %, the same as the England average. This has fluctuated between 2013/14 and 2023/24 but remains lower than the previous two-years.
- Around 1 in 4 (24.7 %) children aged 4-5 years were categorised as overweight or obese for the 2023/24 period, however, this was 2 in 5 (40.5 %) for children aged 10-11 years for the same period. For adults almost 3 in 4 (73.7 %) were categorised as overweight or obese in 2022/23.



The Joint Strategic Needs Profile

September 2024

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

Rotherham prevention concordat for mental health

A report on the prevention concordat which focussed on upstream interventions and the wider determinants of health was presented to the Board. It was a whole population approach and included those at greater risk supporting joint cross-sectoral action locally, including those with lived experience and the wider community. It encouraged collaborative working to address local needs and identify local assets and was about building the capacity of the local workforce to prevent mental ill health.

A presentation was delivered that focussed on the work that had taken place during the last year:

- Mental health asset mapping – statutory and voluntary sector services.
- Prevention and Health Inequalities Plan – focusing on people with mental health conditions and improving their health and wellbeing.
- Strong Partnership Groups – Better mental health for all and suicide prevention groups (Council, South Yorkshire Integrated Care Board Rotherham Place, RDASH, Voluntary Action Rotherham, South Yorkshire Police)
- New information on RotherHive – pain management, physical activity.
- Workforce development –mental health, loneliness, sleep, and suicide prevention training.
- Rotherham Social Prescribing Service – supporting residents with long-term health conditions, including those who present with a mental health condition.

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

Rotherham Loneliness Action Plan 2023-25

An update on the action plan which recognised that loneliness was experienced across the life course and could only be tackled by actions from all partners and the public was presented to the Board.

The following achievements were highlighted:

- Delivering ‘The Making Every Contact Count’ e-learning programme is designed to support learners in developing an understanding of public health and the factors that impact on a person’s health and wellbeing. 119 staff trained from January to September 2024.
- Humanitarian and Communities Group developed an action plan to respond to cost of living related issues, including tackling loneliness and isolation through the establishment of a new Rotherham Creative Health Board.



The Loneliness Action Plan on a Page.

- South Yorkshire Police Hate Crime Co-ordinator working with partners and organisations across Rotherham to raise awareness of hate crime and how to report.
- Continue to deliver the digital inclusion programme to enable residents to enjoy the benefits of getting online, including booking health appointments, and managing their health information online, apply for and access Council/Government services, and finding and applying for job vacancies online.
- Open Arms drop-in sessions – voluntary community sector partners delivering a co-ordinated response to support communities most affected by the cost-of-living crisis.

December 2024

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

Consultation for the Safer Rotherham Partnership Plan 2025-28

The Safer Rotherham Partnership brings together partner organisations to tackle crime and community safety threats across the borough, so that people are safe and feel safe.

Organisations represented include Council, South Yorkshire Police (SYP), South Yorkshire Integrated Care Partnership (ICP), Probation Service, South Yorkshire Fire and Rescue Service (SYFR), South Yorkshire Mayoral Combined Authority (SYMCA), Voluntary Action Rotherham (VAR), South Yorkshire Violence Reduction Unit and Victim Support.

The partnership is reviewing its priorities for the next 3 years. This will be informed by a comprehensive review and analysis of crime and community safety data (police and partner sources), outcomes from the Joint Strategic Needs Assessment, consultation with public and communities via online survey, events, and focus groups, including voluntary and community sector representatives, communities of interest, geographic communities, general public.



The safe Rotherham Plan brings together a range of organisations to keep people safe.

Next steps:

- The Safer Rotherham Partnership Board to agree the priorities (December 2024-February 2025)
- Final strategy was agreed in April 2025, with a delivery plan developed in June 2025.

Item of relevance to all aims

Health and Wellbeing Strategy Refresh

An update on the work taking place to produce a refreshed Health and Wellbeing Strategy for 2025.

The Strategy Steering Group was meeting monthly to shape the 4 current workstreams ensuring that the relevant priorities and focus would be embedded in the new Strategy. These were:

- A review of prior consultation and engagement exercises and existing reports pertaining to the health, wellbeing and care needs of the Rotherham communities drawing out recommendations and identified gaps in delivery.
- A review of the evidence and opportunities for developing the strategic response to population health and wellbeing needs arising from the evidence collated in the Joint Strategic Needs Assessment.
- Stakeholder engagement. A stakeholder survey for commissioner and provider organisations across Rotherham would close in mid-December. There were also cross-agency workstream events taking place.
- A programme of citizen engagement activity.

The evidence generated was used to pull together a high-level draft of the Strategy in early January.

January 2025

Aim 3 – All Rotherham people live well for longer.

The Borough that Carers Strategic Framework

The Borough That Cares Strategic Framework concludes its 3-year term in 2025.

Presentation highlighted the work undertaken over the last 3-years in the following areas of focus:

- **Focus 1 - Carers Cornerstones**
 - From May 2023 the Better Care Fund has provided £100,000 for the provision of small grants of up to £5,000 to small VCS organisations, for projects to improve the health and wellbeing of carers.
 - Updated Council website carers information pages and re-designed in readiness for launch of new corporate digital platform.
 - Carers directory published and made available in PDF format on Council webpages.
 - Bi-annual carers newsletter established; four editions published.
- **Focus 2 - Creating Communities of Support**
 - Robust co-production platform in place with the Borough that Cares Network and Adult Social Care Co-Production Board (RASCAL).
 - Held Carers Conversations co-production programme:
 - 12 co-production events in partnership with locality-based support groups focused on accessing advice and information, support services and improving health and wellbeing.
 - Example outcome - Unpaid Carers App – funding secured from the Accelerating Reform Fund.

• **Focus 3 - Carer Friendly Borough**

- Carers Week and Carers Rights Day events held across the borough – now well-established making Carers visible within communities.
- Strong links with Voluntary Action Rotherham supporting voluntary community sector unpaid carers groups.
- Adult Care Carer Link Officers established within Adult Care and Integrations Supporting Independence Team to provide additional capacity for the service's completion of Carers Assessments, in accordance with our Care Act duties, and information provision.

Next steps:

- Co-production of revised Carers Strategy 2026 – 2029
- Foundation established, so focus on:
 - NICE Guidance (NG150) supporting adult carers
 - Prevention and early intervention
 - Young Carers transition to adult carers
 - Improving equality data held
 - Completion of an equalities analysis
- Ensure Adult Care Co-Production Board (RASCAL) enables Carers to influence service design, alongside professionals and the voluntary and community sector.
- Carer involvement in LGA Peer Assessment and CQC Assurance process.

LOOKING AHEAD

The ambition for 2025/26 is to build on the work and recommendations from the last year's report and to deliver the following:

- Launch our refreshed Health and Wellbeing Strategy for 2025-2030 at September Health and Wellbeing Board meeting.
- Develop an action plan setting out the core activities that the Board will oversee in 2025-2026.
- Continue to work with Board sponsors to monitor delivery of our strategy.
- Continue to develop our relationships within the new South Yorkshire Integrated Care System and ensure each of our aims is aligned with the South Yorkshire Integrated Care Strategy.
- Continue to focus on reducing health inequalities between our most and least deprived communities.
- Influence other bodies and stakeholders, including those with a role in addressing the wider determinants of health to embed health equity in all policies.
- Produce an annual report each year with case studies, giving people the chance to hear about what has been achieved and the impact it has had.

CONCLUSION

The 2024/25 Annual Report is the final one under the Health and Wellbeing Strategy for the 2022-25 period. This has required a more reflective approach to reviewing the 2024/25 period that has contributed towards developing the new Health and Wellbeing Strategy for 2025-30. Reviewing our successes and challenges has informed the ways of working, aims and priorities of the new Strategy and will further develop the impact of the Board moving forward. The Health and Wellbeing Board will continue to work towards delivering improved health outcomes for its residents and improve the wellbeing of the people of Rotherham.

GLOSSARY

A&E	- Accident and Emergency	PSHE	- Personal, Social, Health and Economic
ASC	- Adult Social Care	RAA	- Regional Adoption Agency
BAME	- Black, Asian and Minority Ethnic	RASCAL	- Rotherham Adult Social Care Always Listening
BSL	- British Sign Language	RDaSH	- Rotherham Doncaster and South Humber Trust
CCoC	- Children's Capital of Culture	ReQoL	- Recovering Quality of Life
COPD	- Chronic Obstructive Pulmonary Disease	ROADS	- Rotherham Drug and Alcohol Services
CQC	- Care Quality Commission	RS	- Religious Studies
DfE	- Department for Education	SEND	- Special Educational Needs and Disabilities
FASD	- Foetal Alcohol Spectrum Disorder	SMI	- Severe Mental Illness
GP	- General Practice	SYFR	- South Yorkshire Fire and Rescue
HWBB	- Health and Wellbeing Board	SYMCA	- South Yorkshire Mayoral Combined Authority
ICB	- Integrated Care Board	SYP	- South Yorkshire Police
ICP	- Integrated Care Partnership	TAS	- Team Around the School
JSNA	- Joint Strategic Needs Assessment	TRFT	- The Rotherham NHS Trust Foundation
MYPs	- Members of Youth Parliament	UEFA	- Union of European Football Associations
NASP	- National Academy for Social Prescribing	UKYP	- United Kingdom Youth Parliament
NICE	- National Institute for Health and Care Excellence	ITT	- Independent Travel Training
NHS	- National Health Service	VAR	- Voluntary Action Rotherham
NHSE	- National Health Service England	VCS	- Voluntary and Community Sector
OHID	- Office for Health Improvement and Disparities	WOW	- Women of the World
ONS	- Office for National Statistics		
PCN	- Primary Care Network		
PDF	- Portable Document Format		

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