

Health and Wellbeing Board Annual Report, 2020/21

A healthier Rotherham by 2025



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Foreword

I am delighted as Chair of the Health and Wellbeing Board to present our annual report. Our Health and Wellbeing Board is a very successful board and is recognised as such by external bodies such as the Local Government Association. That success owes a great deal to the very strong partnerships we have built up over the past few years, which is a real hallmark of our board. I would like to thank all the partners for their strong commitment to delivering Rotherham's Health and Wellbeing Strategy and working together to improve outcomes for local people. I believe that the strength of our partnership has also been instrumental in our response to the COVID-19 pandemic, including the roll out of the successful vaccination programme in our community.

It has been an interesting year due to the COVID-19 pandemic, with the board not being able to physically meet for many months and the heavy call on member's capacity. Nevertheless, the board has continued to meet virtually throughout the pandemic, and as the report shows we have achieved much over the past year, such as our work on loneliness, encouraging better physical health and activities, supporting young people's mental health, setting up an unpaid carers group that is supporting the refresh of our Carers Strategy and placing an increasing emphasis on the wider determinants of health.

Clearly, in Rotherham we still need to do a lot more work on tackling health inequalities, including inequalities between our least and most deprived communities. The Health and Wellbeing Board has committed that this will be our main area of focus, to ensure that the health of the most vulnerable is improving the fastest.

In the coming year, we face the need to refresh our board priorities, taking into account the impact of the pandemic. We also need to consider the changes being brought in through the Health and Care Bill, including to our regional ICS. Although work is taking place, we still await further details on the impact that these changes will have on the Health and Wellbeing Board.

Once again, I would like to thank all members of the Health and Wellbeing Board who have helped to make the partnership what it is. I would also like to thank the hard work and dedication of officers who work in, and with the board from a number of partner organisations.



Councillor David Roche

Cabinet Member for Adult Social Care and Health
Chair of the Health and Wellbeing Board

A handwritten signature in black ink, appearing to read 'D Roche', with a horizontal line underneath it.

The Health and Wellbeing Board

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

Organisations represented on the board include:

- Rotherham Metropolitan Borough Council
- Rotherham Clinical Commissioning Group (CCG)
- The Rotherham NHS Foundation Trust
- Rotherham, Doncaster and South Humber NHS Foundation Trust
- Voluntary Action Rotherham
- Healthwatch Rotherham
- South Yorkshire Police
- South Yorkshire Fire and Rescue
- NHS England

The board has a number of specific responsibilities, including producing a local joint strategic needs assessment, overseeing the delivery of the joint health and wellbeing strategy, and producing an assessment of the need for pharmaceutical services.

Further detail around the role of the board, including how the board has met the statutory duties over 2020/21 is outlined below.

Joint Strategic Needs Assessment (JSNA)

One of the board's key responsibilities is to carry out a joint strategic needs assessment (JSNA) for Rotherham. The JSNA is an assessment of the current and future health and social care needs of the local population. It brings together information from different sources and partners to create a shared evidence base, which supports service planning, decision-making, and delivery.

The JSNA is hosted on a live website called 'the Rotherham Data Hub.' As part of the refresh for 2020/21 there has been a greater focus on health inequalities and data around the impact of COVID-19. The type of data incorporated in this website has also been expanded, to give a broader view of the issues facing local people.

This data will be used to inform commissioning decisions and strategy development. In particular, the findings of the updated JSNA will inform the refresh of Health and Wellbeing Board priorities and the strategic approach to tackling health inequalities.

The Rotherham Data Hub is publicly accessible at <http://www.rotherham.gov.uk/data/>.

Joint Health and Wellbeing Strategy

Joint Health and Wellbeing Strategies set out how local health needs identified in the JSNA will be addressed. They set out the priorities for local commissioning and must be taken into account by local councils and CCGs.

Rotherham's Health and Wellbeing Strategy for 2018-2025 was agreed in March 2018 and is focussed on four key aims:

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

The Health and Wellbeing Board receives regular updates against each of these four aims.

Pharmaceutical Needs Assessment (PNA)

The board has a statutory responsibility to undertake a PNA every three years. However, due to ongoing pressures across all sectors in response to the COVID-19 pandemic, the national requirement to publish renewed Pharmaceutical Needs Assessments has now been suspended until October 2022. The PNA reviews the current pharmaceutical services in Rotherham and identifies any gaps in provision through assessment, consultation and analysis of current and future local need.

The current PNA for Rotherham now runs from April 2018 to October 2022.

Principles

As well as meeting the duties outlined above, partners of the Health and Wellbeing Board have also committed to embedding the following principles in everything they do, both individually as organisations and through working in partnership:

- Reduce health inequalities by ensuring that the health of our most vulnerable communities, including those living in poverty and deprivation and those with mental health problems, learning or physical disabilities, is improving the fastest.
- Prevent physical and mental ill-health as a primary aim, but where there is already an issue, services intervene early to maximise impact.
- Promote resilience and independence for all individuals and communities.
- Integrate commissioning of services to maximise resources and outcomes.

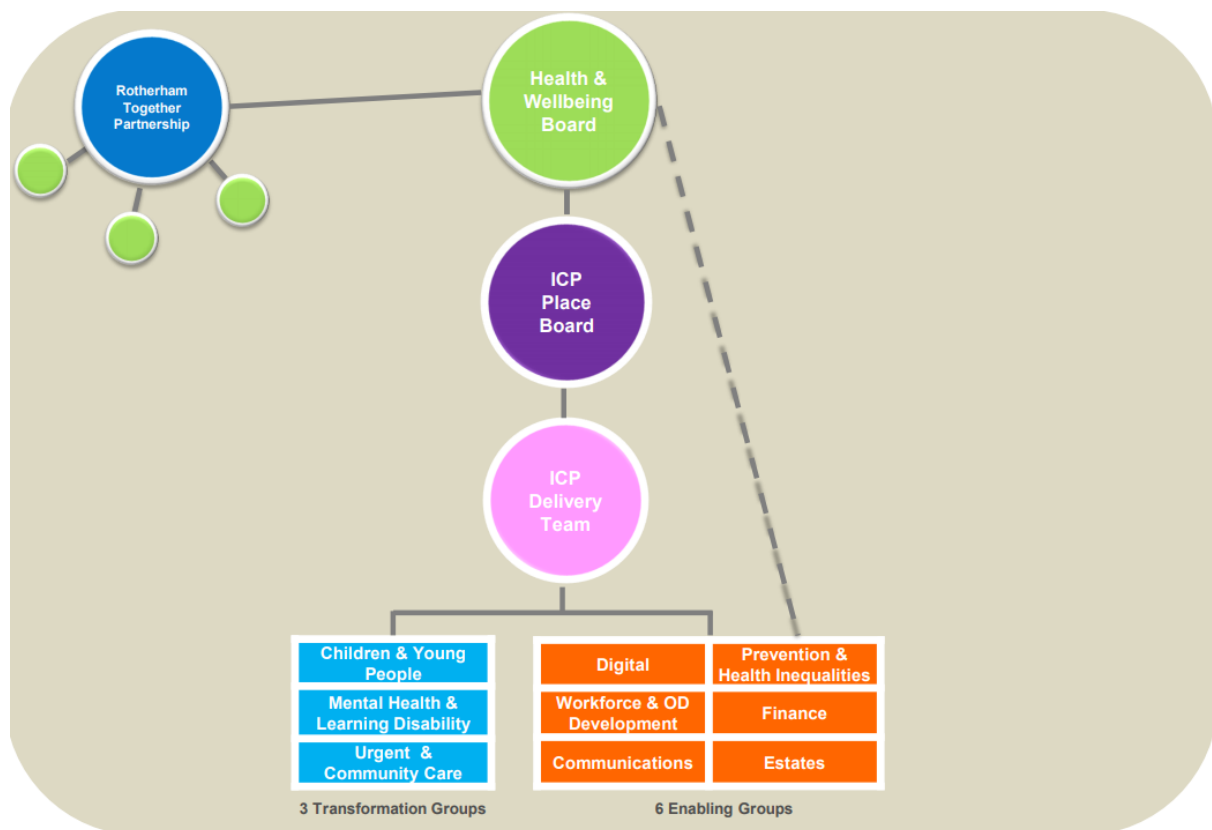
- Ensure pathways are robust, particularly at transition points, so that no one is left behind.
- Provide accessible services to the right people, in the right place, at the right time.

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, the Rotherham Together Partnership. In addition, the Integrated Care Partnership (ICP) Place Board reports into the Health and Wellbeing Board and takes strategic direction from the Health and Wellbeing Strategy.

As part of the refresh of the ICP Place Plan, a new Prevention enabling group was established. It was agreed that this group would directly report to the Health and Wellbeing Board to ensure ongoing strategic oversight of this work.

A summary of these governance arrangements is outlined in the diagram below.



Rotherham Together Partnership

The Rotherham Together Partnership brings together statutory boards such as Safer Rotherham Partnership and the Health and Wellbeing Board, with other key strategic partnerships, such as the Business Growth Board, to deliver on Rotherham's medium-term priorities. These priorities, or "game changers", are set out in the Rotherham Plan 2025.

One of the game changers is 'integrating health and social care', which requires significant input from the Health and Wellbeing Board, working closely with the Integrated Care Partnership (ICP) Place Board. The Health and Wellbeing Board

also contributes to the other game changers, particularly 'building stronger communities' and 'skills and employment'.

Integrated Care Partnership (ICP)

The ICP is made up of the local health and social care community, including the Council, CCG, providers of health and care services and the voluntary sector, who are working together to transform the way they care for the population of Rotherham.

The ICP Place Plan takes strategic direction from the Joint Health and Wellbeing Strategy and is the delivery mechanism for the aspects of the strategy relating to integrating health and social care. The Place Board regularly reports progress to the Health and Wellbeing Board, and there is a standing agenda item for the Health and Wellbeing Board to consider any issues escalated from the Place Board.

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 delivering and receiving updates from one another on annual basis, to ensure connectivity and appropriate oversight of issues relating to safeguarding. The terms of the protocol were fulfilled for 2020/21. Ensuring we are taking an integrated and co-ordinated approach to addressing issues relating to safeguarding will continue to be a priority for 2021/22.



Key dates – 2020/21

- June 2020 – The Health and Wellbeing Board agreed to refresh its priorities in line with the priorities emerging from the COVID-19 pandemic.
- September 2020 – The Health and Wellbeing Board held a session with the Health Select Commission on the findings of the Marmot Review: 10 Years on Report and the refresh of Health and Wellbeing Board priorities.
- September 2020 – A development session was held with support from the LGA.
- November 2020 – The Health and Wellbeing Board approved the renewed priorities and refreshed action plan.
- November 2020 – The ‘Integrating care: next steps’ paper was published and consultation was launched.
- January 2021 – The Health and Wellbeing Board submitted a joint response to the integrated care next steps consultation.
- January 2021 – The Chair of the Health and Wellbeing Board shared good practice from Rotherham in a national webinar held by Public Policy Exchange on tackling loneliness and social isolation.
- February 2021 – The integrated health and social care White Paper was published.
- February 2021 – The Health and Wellbeing Board ran an annual review survey with board members. The board received an average rating of 9/10 in terms of how effectively it has worked over the past year (1 being poor, 10 being excellent.)
- March 2021 – Health and Wellbeing Board members participated in a workshop with the other safeguarding boards, which included a focus on mental health as a cross-cutting issue.
- March 2021 – The Health and Wellbeing Board held an engagement session with Age UK Rotherham and Rotherham Older People’s Forum to explore the impact of the pandemic on older people.

What's worked well?



As well as partners working closely together on the response to the COVID-19 pandemic, there has also been significant progress made over the past year to support delivery of the Health and Wellbeing Strategy.

Examples of some of the achievements to deliver the strategy in 2020/21 include:

- Engaging with the Local Maternity System on the maternity transformation plan.
- 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.
- 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.
- Pooling knowledge, expertise and resources across the partnership with regards to the mental health and wellbeing of our workforce.
- 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.
- 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.

- 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.
- 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.
- 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.



Case Study: Supporting children and young people's mental health



The COVID-19 pandemic has disrupted the lives and education of children and young people – leading to anxiety, sadness, stress and uncertainty. To support young people and their mental health, it was recognised by Public Health England that the views of young people would need to be sought to establish the state of their mental health and wellbeing during the 2020/2021 pandemic and lockdowns.

Rotherham worked jointly with all secondary schools and pupil referral units to enable all children and young people aged between 11 to 17 attending an educational establishment to have their voice heard.

It has been the aim to capture the views of children and young people in three stages: the beginning of the first lockdown (March/April 2020), approximately six months into the pandemic (October 2020) and during the easing of restrictions (May/June 2021). *

Worryingly, the results from the October 2020 survey compared to June 2020 show that there was:

- A 7% increase in young people feeling anxious
- An 11% increase in young people feeling stressed
- A decline in young people feeling positive and managing problems well
- An increase in young people feeling confused, uncertain and sad

However, schools have fed back that the surveys been a valuable resource in shaping their approach to supporting children and young people with their mental health. There are many examples of positive support that schools have been put in place in response to findings from the survey, including:

- Inviting students to be a part of National Feeling Good Programme
- Developing a recovery curriculum for Years 7-11 in PSHCE
- Supporting students to work with Student Council to develop information

around joint relaxation techniques

- Development of a pathway to share a clear picture of where and how support can be accessed
- Communication to students in the form of Student Wellbeing Newsletter; Parental Wellbeing Newsletter

Young people have also fed back about the strategies they have put in place to support their mental health through the pandemic, which have included talking with friends/family, building a routine, starting a new physical activity and learning new skills – all of which align with the Five Ways to Wellbeing.

The findings of these surveys are also fed into partnership meetings to shape decisions around service-delivery. This is also being picked up by the Mental Health Recovery Cell and will continue to inform recovery planning.

*These results will be available July 2021

Case study: Engaging local people on the Great Big Rotherham To-do list



The Five Ways to Wellbeing is a nationally recognised, evidence-based set of actions that enhance personal wellbeing, helping individuals feel and function well. During the pandemic people have dug deep and found resilience they didn't know they had. Many local people have made positive changes – like spending quality time with family, getting outdoors more or learning something new.

It turns out many of these things fit with the Five Ways to Wellbeing:

- being physically active
- connecting with others
- giving time or skills to support others
- learning something new
- pausing to take notice and reflect.

It will be just as important for local people to look after their wellbeing – and keep doing those positive things as Rotherham moves into recovery. A call out has gone through the press, social media, through partner organisations and community groups to learn from local people about how they have remained resilient during the COVID-19 pandemic.

Resident's ideas and suggestions will then be compiled to create The Great Big Rotherham To-Do List – a free pocket guide full of inspiration to find everyday moments of calm, interest, health and fun based on the Five Ways to Wellbeing.

The Great Big Rotherham To-Do List will be available as a fold-out planner via libraries and community groups as well as online; it will also contain information about the Five Ways to Wellbeing – simple steps that can easily be incorporated into daily life to protect physical and mental health.

Case study: Launching 'Beat the Street' to encourage local people to move more



Regular physical activity has significant health benefits, including protection against many chronic diseases, better mental wellbeing and improved quality of life. Unfortunately, evidence suggests that Rotherham people are less physically active than the national average, with only 55% of adults being physically active and 30% being physically inactive.

In the context of some of these challenges, the Beat the Street project was launched in Rotherham. Beat the Street is a free, interactive challenge that encourages people of all ages to incorporate physical activity into their daily lives by turning the area into a six-week game which incentivises walking, cycling, running, scooting and active travel.

Beat the Street is being delivered by Intelligent Health and is funded by and Rotherham Council's grant funding allocation from DfT's Sustainable Transport Access Fund and the National Lottery on behalf of Sport England.

The game is completely contactless and players take part in their family groups or support bubbles are encouraged to walk, cycle, run, wheel or scoot as far as possible within the local area, with prizes for the teams that clock up the highest number of miles.

Beeping and flashing sensors called Beat Boxes have been placed on lampposts around the area for the duration of the six-week game. Primary school pupils received a pack via school containing a fob, a card for an adult to play, and a map.

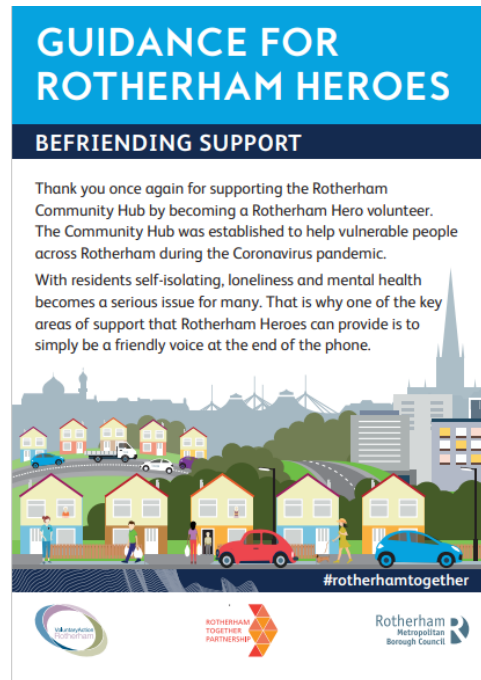
Players can form virtual teams, then walk, run, roll, scoot or cycle between the Beat Boxes scoring points with their fobs or cards as they go. The more Beat

Boxes on their journey, the more points they score for their community or school team. Each week is themed with different activities to help participants get the most out of their Beat the Street experience. There are around 14k players in Rotherham, with 87,640 miles travelled so far.

Rotherham Council Cabinet Member for Adult Social Care and Public Health, Cllr David Roche, said: “We know that lockdown has impacted people’s activity levels and Beat the Street gives a safe and stimulating way for young people and families to get out and get active with a purpose. It’s clear that now, more than ever, it is vitally important to ensure that we adopt healthy lifestyle habits around incorporating physical activity into our days and trying to travel in more active ways by walking or cycling.”

Once the game finishes, a plan is in place to ensure sustained behaviour change in people who took part through work with primary schools, workplaces and linking into opportunities and activities already available locally via partners. Active travel will be a key focus of this plan, building on the learning from the project.

Case study: Making friendship calls to residents experiencing loneliness



The COVID-19 pandemic has radically changed the daily lives of our residents. Through following the restrictions to stay safe and protect others, the opportunity to interact with friends, family and other people in the community has significantly changed. In this context, it is not surprising that many people have experienced feelings of loneliness.

In response to the pandemic, the Rotherham Community Hub was launched in late March 2020, to provide support to any Rotherham resident affected by COVID-19. Through the Hub, Rotherham residents are linked up with Rotherham Heroes volunteers, who can provide various kinds of support, including support with loneliness. As part of this campaign, Rotherfed developed the Friendship Calls project, to offer a friendly voice over the phone to local people.

The Friendship Calls project is a no-barriers service and any Rotherham resident over the age of 18 can receive the calls. Recipients are carefully matched with a trained volunteer, who Rotherfed think will be a good fit for a weekly phone call.

A wide range of people have accessed the service – from a 21 year old student to a 105 year old gentleman – reinforcing that loneliness can affect people from all ages and from all backgrounds. These are just a few examples of the people who have accessed the service and the impact it has had on them:

- Paul is over 100. He relishes the calls he gets weekly and will play the harmonica for the volunteers over the phone. His confidence has increased and is now out and about more on his scooter!
- Steven is a man in his fifties who has served time in prison and is now out on probation. Steven really enjoys the calls as he feels that no one is judging him and he feels he can really connect to the volunteers and start building his trust

in people again.

- Angela is a young mum and the survivor of domestic abuse. These calls have built her confidence up and given her a will and strength to believe in herself again.
- Mary is a disabled lady who started receiving calls during lockdown as she was very socially isolated. The calls have built up her confidence and she has now decided to become a volunteer herself!
- Harry lives with Borderline Personality Disorder and lives on his own with no family support. He says that the calls give him a chance to have a friendly chat with someone who does not judge him, or try to change him, but someone who just lets him be 'normal' for a change.

In the first year of the Friendship Calls project:

- 290 number of people were referred to the service (159 currently active),
- 61 volunteers supported the service (49 currently active),
- 3,190 calls have been made.

Rotherfed provides support and personal development opportunities for all volunteers. This includes regular support sessions and all relevant training.

To find out more about the project, please contact Jane Owen (jane.owen@rotherfed.org/07399 888034) or Nicola Evans (nicola.evans@rotherfed.org/07376 666191).

What are we worried about?

There are large gaps in life expectancy and healthy life expectancy both within the borough and compared with the national average. Moreover, the coronavirus pandemic has exacerbated existing health inequalities, with the most disadvantaged communities being hit the hardest.

The leading causes of death in Rotherham include ischaemic heart disease (IHD), stroke, lung cancer, COPD and Alzheimer's / dementia. For a disease such as ischaemic heart disease, 93.2% of deaths are considered attributable to risk factors that are potentially preventable. The risk factors contributing the most to deaths in Rotherham are smoking, high blood pressure, high blood glucose, high BMI and high cholesterol.

Considering the picture for some of these key risk factors in Rotherham:

- Smoking prevalence in adults is higher than the national and regional averages.
- There is a high prevalence of both childhood and adult obesity with a strong correlation with areas of highest deprivation.
- A significant proportion of adults are physically inactive.

This emphasises the importance of prevention and early intervention.

Mental health and wellbeing is also a concern:

- In Rotherham, self-reported wellbeing scores for 2018/19 were significantly worse than England in relation to low satisfaction, low happiness and anxiety.
- The percentage of adults registered with GPs for depression is higher than the national average.
- Rotherham's suicide rate is higher than the national average.

What will we do next?

The impact of COVID-19 and lockdown has brought with it some new challenges that are likely to be felt within our communities for some time. Supporting local people as we move into recovery will be a key aim of the Health and Wellbeing Board, with a focus on reducing health inequalities and prevention and early intervention.

The Health and Wellbeing Board will now:

- Engage with board members to update the board's priorities and the action plan which underpins the strategy.
- Embed a prevention-led systems approach across the Place.
- Work with the South Yorkshire and Bassetlaw ICS to shape the future arrangements.
- Continue to monitor the longer-term impacts of the pandemic on our communities.
- Focus on reducing health inequalities between our most and least deprived communities.