

Minutes	
Title of Meeting:	PUBLIC Rotherham ICP Place Board
Time of Meeting:	9:00am – 10:00am
Date of Meeting:	Wednesday 2 March 2022
Venue:	Via Zoom (and broadcast live on CCG You Tube Channel)
Chair:	Chris Edwards
Contact for Meeting:	Lydia George 01709 302116 or Lydia.george@nhs.net

Apologies:	Richard Jenkins, The Rotherham NHS Foundation Trust Ben Anderson, Rotherham MBC Shafiq Hussain, Voluntary Action Rotherham
Conflicts of Interest:	General declarations were acknowledged for Members as providers/commissioners of services.

#### **Members Present:**

Chris Edwards (**CE**), (Chair) Chief Officer, Rotherham Clinical Commissioning Group Sharon Kemp (**SK**), Chief Executive, Rotherham MBC

Kathryn Singh (**KS**), Chief Executive, Rotherham, Doncaster & South Humber Foundation Trust Cllr David Roche (**DR**), Joint Chair H&WB Board, Rotherham MBC

Richard Cullen (RC), CCG Chair & Joint Chair H&WB Board, Rotherham CCG

Gok Muthoo (GM), Clinical Director, Rotherham GP Federation

Ian Atkinson (IA), Executive Place Director/Delivery Team Chair, Rotherham CCG Michael Wright (MW), Deputy Chief Executive, The Rotherham NHS Foundation Trust

#### In Attendance:

Lydia George (**LG**), Strategy & Delivery Lead, Rotherham CCG
Nathan Heath (**NH**), Assistant Director, Education & Inclusion, Rotherham MBC
Suzie Joyner (**SJ**), Director of Children's Services, Rotherham MBC
Gordon Laidlaw (**GL**), Head of Communications, Rotherham CCG/ICP
Steph Watt (**SW**), Urgent & Community Place Programme Manager, TRFT
Leonie Weiser (**LW**), Policy & Partnerships Officer, RMBC
Wendy Commons (**WC**), ICP Support, Rotherham CCG

Item Number	Business Items	
1	Public & Patient Questions	
No questions had been received from members of the public.		
2	Transformation Group Updates	

### 2i Children & Young People – SEND (Nathan Heath)

NH highlighted the areas working well including:

- The SEND strategic Board and Education Recovery Cell have clear oversight and regular reporting on outcomes and a successful bid has enabled piloting of a 'Team Around the School'
- As part of implementing the graduated response the SEN toolkit is in place and includes the sensory model
- Joint commissioning is well-established with local senior leaders having a thorough understanding of local areas needs and those requiring further development

• The Rotherham Parent Carers Forum actively ensure the voices of Children and Young People with Special Educational Needs (SEN) are heard.

However, as part of the graduated response it is imperative to fully embed the SEND toolkit to ensure that those with the roles and responsibilities for supporting people with SEND can do so. This includes ensuring consistency across children's, young people's and families' experiences or services and including health and social care partners contributions into EHC plans.

NH advised that the Written Statement of Actions (WSOA) had been submitted to Ofsted who immediately accepted it and gave positive feedback on the approach outlined to tackling the significant areas of weakness.

Cllr Roche expressed concern about the bullet point presented that stated "the JSNA lacks focus on health and care needs" and that this had not been raised with the Health & Wellbeing Board. NH explained that this comment came from the Ofsted appraisal local area SEND inspection. From the Council's perspective there is a breadth of information available on children and your people but this currently has a strong education context and work is taking place now to ensure this is expanded to include areas around development spaces that directly link to SEND needs which will provide a wider level of detail and information to better inform Council and Place planning going forward.

Noting that embedding the toolkit will be important, SK asked what evidence there would be to give Members' confidence that it was taking place and helping improve the quality of the service and experience received. NH confirmed that there will be a high-quality graduated approach to embed the SEND toolkit in the extended workforce which will give clarity on roles and responsibilities by way of mandatory engagement. A range of key measures and data will be monitored and presented to the SEND panel to give assurance that SEND needs assessments match provision and access. Responses will also be audited to ensure people's experience improves and variations reduce.

Place Board thanked NH for the level of detail provided in the update and asked that thanks were conveyed to the Group for their work on SEND and the WSOA.

2ii Mental Health, Learning Disability & Neurodevelopmental – Adult Severe Mental Health in the Community inc Perinatal Mental Health (lan Atkinson) Deferred to next meeting.

Action: WC for agenda

### 2iii Urgent & Community Care – Front Door (Steph Watt)

SW explained that 'front door' is cluster of projects focussed on reducing admissions and facilitating discharge home. The Integrated Community Clinical Assessment Service is the element being reported on today. This provides an integrated MDT for admission avoidance and discharge home focussing on residents receiving right level of care, at right time, in right place, depending on level of need and national standards.

The initial pilot has been completed and phase 1 will be reinforcing the nursing skills with ANPs but also including therapy, reablement and a link worker from the voluntary sector. This triage service will work as an integrated MDT with a particular focus on complex cases.

Phase 2 will be looking to expand the services and widen into out of hours support relating to surgery and to bring more specialisms into the MDT eg GP out of hours, paramedics, social workers etc

In parallel virtual wards will be developed to support people at home with acute respiratory infection and frailty. This will be an acute respiratory infection virtual ward and a clinical lead and project manager have been recruited using national funding.

However, on-going system pressures are impacting on capacity to design and develop new ways of working as well as the recruitment challenges on health and social care. The

logistics of working across health and social care are challenging in terms of cultural, different perspectives, co-location, sharing records and funding, although work taking place nationally in the White Paper is helping to reduce some barriers with work also taking place with 111 to align the directory of services with health and social care.

In relation to the virtual ward, the acute respiratory ward is being developed with a draft pathway to be approved, self-remote monitoring models being assessed in readiness for a soft launch in the first half of 2022/23.

GM confirmed that the PCN has been involved in discussion and there is GP involvement with himself being a member of the Delivery Group and Dr David Clitherow is the GP Lead on the Transformation Group.

Members thanked SW for the update and gave positive feedback on the progress and developments reported.

## 3 Enabling Groups – Communications & Engagement

GL outlined how, during the pandemic, communications and engagement colleagues across the Place partner organisations have worked jointly to ensure clear, consistent, key messages have been conveyed to Rotherham residents on behaviours and Covid vaccination information and have adapted in ways to engage and communicate with people. Throughout that period the group has met fortnightly but has now returned to monthly meetings and is changing its focus back to Place and supporting Transformation Group work.

A key success has been supporting mental health campaigns such as the Rotherhive platform, which was built on insights from residents to support residents and clinicians at the start of the pandemic and continues to be developed. Work has also taken place on the next phase of the Be The One campaign, suicide prevention and anxiety. Mental health will remain a focus as people begin to get back to life so as to support them in dealing with their fears and anxieties.

The Group is working closely with the other enabling groups, mainly around digital inclusion and changing behaviour to support the delivery of the Prevention & Health Inequalities strategy and action plan which will become a key feature of the communications strategy moving forward.

It was also acknowledged that the group had worked closely with colleagues and partners during the significant system pressures to co-ordinate key messages out to public, particularly around access.

Having seen changes to communications teams across partner organisations, the Group is reviewing its current Terms of Reference to ensure appropriate capacity and input to the meetings continues.

Consideration is being given about how best to engage and communicate with people going forward as a shift in focus is seen with people's priorities towards fuel poverty and other wider determinants. Communication methods have changed over the past year towards more digital medians and this is expected to continue as we focus on recovery.

Next steps for the Group will be to update the Communications & Engagement strategy to align with changes in wider system and to re-define priorities. Place Board will receive the strategy for approval.

Other work will include:

- engaging with staff and the public on changes with the South Yorkshire system and implementing the legislation once the Health & Care Bill is given Royal assent
- access to mental health services will remain a focus and key priority will be around recovery plan and providing support and assurance to those on waiting lists

- consideration will be given to celebrating successes, achievements and raising the profile of the good work in Rotherham.
- Increasing digital presence for the Rotherham Place partnership.

Place Board thanked GL for the update and acknowledged the upcoming complexity of handling communications with Rotherham residents as we move from the Clinical Commissioning Group to a South Yorkshire Integrated Care Board and the importance of relationships with SY communications colleagues.

# 4 Draft Minutes from Public ICP Place Board – 2 February 2022

The minutes from the February Public Place Board were noted as a true and accurate record.

There were two outstanding actions, one around receiving the Place wide IT Services Report which is scheduled for May/Jun.

The other related to Place Board receiving an overview of full written statement of actions. Following discussion it was agreed that the presentation today updated Members sufficiently. The SEND Board is responsible for the implementation of the written statement of actions. A future spotlight update on SEND is scheduled for August Place Board at which time progress against the actions will be provided.

The action log will be updated to reflect the above.

### 5 Communication to Partners

Nothing raised.

### 6 Risks and Items for Escalation

There were no risks for escalation.

# 7 Future Agenda Items

Forward Items for Place Board

- Rotherham IC Development Plan Updates Quarterly
- Review of Place Wide IT Services Report (May/Jun)
- Transformation Group Updates (monthly) inc MH Spotlight update (deferred)
- SY Integrated Care Development Update (CE)
- Prevention & HI Strategy & Action Plan and Terms of Reference

As Place is now back to business as usual following the Covid pandemic, the ambition is to begin holding meetings in public face to face again. However, Place Board recognises that meeting digitally gives enhanced access for those who wish to view Place meetings. With this in mind and to be as open, transparent and accessible as possible, steps are being taken to facilitate both face to face and 'livestream' broadcast for the April Meeting.

Details will be placed on the CCG's website in the week prior to the meeting. (http://www.rotherhamccg.nhs.uk/integrated-care-partnership-board.htm)

# 10 Date of Next Meeting

The next meeting is scheduled for Wednesday 6 April 2022 at 9-10am.

#### **Place Board Membership**

NHS Rotherham CCG, Chief Officer - Chris Edwards (Joint Chair)
Rotherham Metropolitan Borough Council, Chief Executive – Sharon Kemp (Joint Chair)
The Rotherham Foundation Trust (TRFT), Chief Executive – Richard Jenkins
Voluntary Action Rotherham, Chief Executive – Shafiq Hussain
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Rotherham Doncaster and South Humber NHS Trust (RDaSH), Chief Executive – Kathryn Singh Connect Healthcare Rotherham Ltd (Rotherham GP Federation) – Dr G Muthoo

#### Participating Observers:

Joint Chair, Health and Wellbeing Board, Rotherham MBC - Cllr David Roche Joint Chair, Health and Wellbeing Board, Rotherham CCG - Dr Richard Cullen

#### In Attendance:

Deputy Chief Officer, Rotherham CCG – Ian Atkinson (as ICP Delivery Team Chair) Director of Public Health, Rotherham MBC – Ben Anderson Head of Communications, Rotherham CCG – Gordon Laidlaw Strategy & Delivery Lead, Rotherham CCG – Lydia George