

| Minutes | |
|----------------------|---|
| Title of Meeting: | PUBLIC Rotherham ICP Place Board |
| Time of Meeting: | 9:00am – 10:00am |
| Date of Meeting: | Wednesday 4 May 2022 |
| Venue: | Via Zoom |
| Chair: | Chris Edwards |
| Contact for Meeting: | Lydia George 01709 302116 or Lydia.george@nhs.net |

| Apologies: | Richard Jenkins, Chief Executive, The Rotherham NHS Foundation Trust Kathryn Singh, Chief Executive, Rotherham, Doncaster & South Humber NHS Foundation Trust |
|------------------------|--|
| 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 Richard Cullen (**RC**), CCG Chair & Joint Chair H&WB Board, Rotherham CCG Shafiq Hussain (**SH**), Chief Executive, Voluntary Action Rotherham Gok Muthoo (**GM**), Medical Director, Rotherham GP Federation Cllr David Roche (**DR**), Joint Chair of Health & Wellbeing Board, Rotherham MBC Ian Atkinson (**IA**), Executive Place Director/Delivery Team Chair, Rotherham CCG Ben Anderson (**BA**), Director of Public Health, Rotherham MBC Michael Wright (**MW**), Deputy Chief Executive, The Rotherham NHS Foundation Trust

In Attendance:

Lydia George (LG), Strategy & Delivery Lead, Rotherham CCG
Alex Hawley (AH), Consultant in Public Health, Rotherham MBC
Gordon Laidlaw (GL), Head of Communications, Rotherham CCG/ICP
Garry Parvin (GP), Joint Head of Commissioning LD & Autism, Rotherham CCG/MBC
Matt Pollard (MP), Rotherham Care Group Director, RDaSH
Helen Sweaton (HS) Joint Assistant Director CYPS Commissioning, Rotherham CCG/MBC
Steph Watt (SW), Urgent & Community Place Programme Manager, TRFT
Leonie Weiser (LW), Policy Officer, Rotherham MBC
Wendy Commons (WC), ICP Support, Rotherham CCG

| Item Number | Business Items | |
|---|------------------------------|--|
| 1 | Public & Patient Questions | |
| There were no questions from members of the public. | | |
| 2 | Transformation Group Updates | |

2i Children & Young People – First 1001 Days (Alex Hawley)

AH highlighted that there had been a reconfiguration of the public health teams to align each public health consultant with one of the four aims of the health and wellbeing strategy. A best start and beyond framework is being developed to provide a more cohesive strategic approach for the 0-19s service. It will be overseen by a new 'Best Start and Beyond Sub Group which will report into the Early Help Strategic Group.

The tender for the 0-19s service is now open with a specification developed to optimise the ability of the service and allow flexibility for an inclusive and responsive service. The best start and beyond framework will enable the service to be integrated within a system covering pre-conception to transition to adulthood with a key focus on the first 1001 days.

A scoping exercise had taken place last year to map commissioned health services and identify non health services. A draft framework has been developed along with an action plan to deliver the first 1001 days which H&WBB will consider in June. An example of one of the key actions will be a breast-feeding friendly borough declaration to help change Rotherham into a place that will foster an environment for healthy feeding choices, give our children the best start to life and provide life-long benefits.

Commissioning a service for the next 10 years has some risks but the mitigation for this has been to provide a well-designed but adaptable specification to meet both central government policy and regional changes.

Next steps will be to agree the terms of reference for the Early Help Strategic Group and best start and beyond sub-group which holds its inaugural meeting in June with one of its first tasks being to look at gaps in existing action plans and inform priorities.

Following a query from BA about whether there are links across maternity into the health visitor pathway following the Ockenden Review, Helen Sweaton reassured Members that Rotherham is in a strong position in responding to the review and rated good with midwifery services. However, some work is being carried out to ensure that feedback is escalated and used as effectively as it can be and to ensure that maternity services, both in Rotherham and regionally continue to be good and improve.

Members noted the update and thanked AH and HS.

2ii Mental Health, Learning Disability & Neurodevelopmental – Delivering the NHS Long Term Plan for People with a Learning Disability/Autism (lan Atkinson) IA gave an overview on transforming care, the neurodevelopmental pathway and a briefing on Section 117, after care in the community.

Transforming Care

IA advised that transforming care is a national programme to prevent and reduce people with a learning disability being inappropriately detained in mental health hospitals. There are currently 3 people in the borough in CCG commissioned bed and two in NHS England commissioned beds. We have plans to resettle two people, one person has been in a long-term CCG bed and will be discharged in August/September 2022 back into South Yorkshire with capital funding and joint working support.

Our target for NHSE commissioned beds was four and we are currently at two with work taking place across the CCG, local authority colleagues and NHSE with good pathways in place to support discharge.

Rotherham GPs have been offered support to deliver health checks for people with a learning disability and focus will continue with individual practices to ensure these are offered in a timely manner.

There is concern around increasing potential admissions for autistic people with more people being diagnosed at a time when the market is pressured causing issues relating to sufficiency, cost and timeliness of response and putting in place community packages.

Work is taking place with the Integrate Care Board (ICB) and across Place partners to ensure greater awareness of autism across services universally and to promote the opportunities of working in learning disability services.

All Age Neurodevelopmental Pathway

IA reminded members of the specific updates they have received previously on the children's pathway and diagnosis work relating to the SEND inspection and the adults diagnosis pathway work but this area remains one of our highest priorities. A joint place decision to invest in a Rotherham based all age neurodevelopmental pathway had been take a few years ago and activity is now underway and has been well received. At the same time we also commissioned a post diagnostic offer from our voluntary sector provider which is receiving praise regionally.

However increasing waits are being seen for the adult element of the neurodevelopment pathway which is we are working to manage and to see whether national funding streams will extend the autism service.

Next steps include working closing with RDaSH colleague to develop a digital diagnostic neurodevelopment offer for adults, promoting the council's Employment is for Everyone programme to extend opportunities for autistic people with an engagement event at Gulliver's in June with local businesses. We will also be looking to start the conversation with stakeholders to refresh Rotherham's autism strategy.

Section 117

This is around after care in the community setting for people who have detained under the mental health act. The Policy was signed off jointly by Place partners and partners are working to mobilise and implement it. There has been discussion about who should retain and maintain the statutory section 117 list. As a result a paper is being developed to outline the options for discussion by the Mental Health and Learning Disability Board in June 2022. Place Board were asked to note.

SK asked about the increasing waits and although we have actions to try and reduce them how Rotherham compares with other areas. IA said that in relation to the adult area, we took the decision as a Place to invest in an Rotherham based All Age Neurodevelopment Pathway with recurrent provision and best modelling predicted around 18 weeks. However we have now seen increasing demand and need to reflect on whether provision is at the appropriate level for diagnoses.

MP confirmed that, particularly for the ASD diagnostic service, we have continued to build a waiting list and consequently the waiting time has grown for individuals on the list. There are currently 168 patients waiting with the longest wait being 36 weeks. A short-term digital solution has been employed to address some of the referrals but current demand is outstripping capacity.

GP explained that other areas are experiencing similar in terms of waits. However, the digital offer has had a positive impact in reducing some of the backlog.

CE thanked IA, GP and MP for the update. It was acknowledged that this priority will continue to be challenging and Place Board will take regular updates on progress.

2iii Urgent & Community Care – Sustainable Discharge (Steph Watt)

SW informed Members that an admission avoidance and discharge session had been held on 29 March to celebrate success, thanks staff for covid response and to plan for next year. It was held at NY Stadium, and virtually, with all partner representatives. It gave ten examples of good practice showing resilience and demonstrating team working. Steph gave a brief summary of each of the examples, including improving communications, work done by Age UK to support people after discharge, the discharge lounge facility and integrated working to support end of life patients.

It also showed how a new command centre has been developed to demonstrate all the different services involved in flow, outlining the benefits of benchmarking and how

Rotherham performs well against others on discharge and achieving reducing lengths of stay, one of the few trusts to do so in March this year.

Members heard that concerns for the group are around the ending of Scheme 2 funding resulting in cost and system pressures. New national guidance has now been issued to replace the coronavirus act and Scheme 2 which aligns with feedback from the event held earlier in the year.

The Phase 2 plan is under development which will form part of Place priorities going forward. Key elements will be around engagement work following Covid with patient and carers, ward by ward improvement plans will be developed to continue reducing acute and community length of stay and there will be a focus on recruitment across Place.

Members were assured that appropriate plans are in place to deliver the priorities for the Urgent & Community Care Transformation Group and thanked SW for the update.

3 Draft Minutes & Action Log from Public ICP Place Board – 6 April 2022

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

The action log was reviewed and the Review of Place wide IT services will come to the June/July meeting.

4 Communication to Partners

None to note.

5 Risks and Items for Escalation

There were no risks for escalation other than those highlighted in the updates.

6 Future Agenda Items

Forward Items for Place Board

- Rotherham IC Development Plan Updates Quarterly
- Transformation Group Updates (monthly)
- Developments on SY ICB and Future Governance Arrangements

7 Date of Next Meeting

From June, meeting dates will be rearranged to avoid a clash with the ICB Board Meeting. Revised dates will be posted on the CCG's website.

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

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