

Minutes	
<b>Title of Meeting:</b>	<b>PUBLIC</b> Rotherham Place Board: Partnership Business
<b>Time of Meeting:</b>	9.30am – 10.30am
<b>Date of Meeting:</b>	Wednesday 16 April 2025
<b>Venue:</b>	John Smith Room, Rotherham Town Hall
<b>Chair:</b>	Ian Spicer
<b>Contact for Meeting:</b>	Lydia George: lydia.george@nhs.net/ Wendy Commons: wcommons@nhs.net
<b>Apologies:</b>	Wendy Allott, Director of Financial Transformation - Roth, NHS SY ICB Anand Barmade, Clinical Director, Connect Healthcare Rotherham Mat Cottle-Shaw, Chief Executive Officer, Rotherham Hospice Chris Edwards, Rotherham Place Director, NHS South Yorkshire ICB Richard Jenkins, Chief Executive, The Rotherham NHS Foundation Trust Sharon Kemp, Chief Executive, Rotherham Metropolitan Borough Council Bob Kirton, Managing Director, Rotherham NHS Foundation Trust Toby Lewis, Chief Executive, Rotherham, Doncaster and South Humber NHS Foundation Trust Gordon Laidlaw, Head of Comms - Rotherham NHS SY ICB Dr Jason Page, Medical Director, Rotherham Place, NHS SY ICB
<b>Conflicts of Interest:</b>	General declarations were acknowledged for Members as providers/commissioners of services. However, no specific direct conflicts/declarations were made relating to any items on today's agenda.
<b>Quoracy:</b>	Confirmed as quorate.

### Members:

Ian Spicer (**IS**), Rotherham Metropolitan Borough Council  
 Alex Hawley (**BA**), Acting Director of Public Health, Rotherham Metropolitan Borough Council  
 Shafiq Hussain (**SH**), Chief Executive, Voluntary Action Rotherham  
 Andrew Russell (**AR**), Director of Nursing – Rotherham & Doncaster, NHS SY ICB  
 Jodie Roberts (**JR**), Rotherham NHS Foundation Trust (deputising)  
 Claire Smith (**CS**), Director of Partnerships Rotherham Place, NHS SY ICB (deputising)  
 Victoria Takel (**VT**), Deputy Chief Operating Officer, Rotherham, Doncaster and South Humber NHS Foundation Trust (deputising)

### Participants:

Cllr Joanna Baker-Rogers (**JBR**), Health & Wellbeing Board Chair, RMBC  
 Kym Gleeson (**KG**), Service Manager, Healthwatch Rotherham  
 Shahida Siddique (**SS**), Non-Executive Member, NHS SY ICB  
 Lydia George (**LG**), Transformation & partnership Portfolio Manager, NHS SY ICB

### In attendance:

Jude Archer (**JA**), Assistant Director of Transformation, NHS SY ICB  
 Sue Panesar (**SP**), Public Health Specialist, RMBC  
 Debbie Stovin (**DS**), Dental Programme Lead, NHS SY ICB  
 Kate Tufnell (**KT**), Mental Health & Dementia Transformation & Delivery Lead, NHS SY ICB  
 Sue Turner (**ST**), Public Health Specialist, RMBC  
 Sam Watt (**SW**), Registrar in Dental Public Health, Y&H Deanery

### Minute Taker:

Wendy Commons, Business Support Officer (Rotherham), NHS SY ICB  
 4 Observers

Item Number	Discussion Items
01/04/25	Public & Patient Questions
There were no questions from members of the public.	
02/04/25	Oral Health Needs Assessment
<p>Samantha Watt, Specialty Registrar in dental public health advised members that the oral health needs assessment was being updated as the previous version dated back to 2018. In response to a request by the Rotherham Oral Health Improvement Group to take account of new national and local data, changes to organisational roles and responsibilities for improving oral health and reducing health inequalities whilst also building in a system approach in Rotherham Place.</p> <p>SW outlined what the new OHNA will cover and advised Place Board that:</p> <ul style="list-style-type: none"> <li>– The 2023-4 national dental epidemiology survey found 23.5% of 5 year olds in Rotherham had visually obvious dentinal decay which was 22.4% higher than the national average.</li> <li>– In 2022-3 23.4% of year 6 children surveyed in Rotherham had experience of tooth decay in a least one permanent tooth – similar to SY ICB and Y&amp;H regional average, but higher than England value of 16.2%.</li> <li>– Rotherham consistently has one of the highest levels of hospital tooth extractions nationally with tooth decay still the most common reason for hospital admission in children aged between 5 and 9 years.</li> <li>– Data on the oral health of adults at Rotherham place level is limited.</li> <li>– Head and neck cancer incidence and mortality are increasing nationally with South Yorkshire higher than the national average with the incidence and late/emergency presentation of head and neck cancer.</li> </ul> <p>SW outlined the dental services including primary, community and secondary care dental service commissioned in Rotherham by South Yorkshire Integrated Care Board. In March 2024, access to primary dental care in Rotherham for adults and children was higher than nationally with 51.9% of Rotherham adults having seen an NHS dentist in the past two years compared with 40.3% nationally and 57.35 of children had seen an NHS dentist in the past 12 months compared with 55.4% nationally.</p> <p>Currently NHS dental practices in Rotherham support access to dental services through high delivery of commissioned units of dental activity (UDAs). To improve access and prevention for children and adults most in need of care it will involve changing how the dental contract is delivered to a flexible commissioning approach and swapping UDAs for sessions of care and prevention. There are currently 8 flexible commissioning practices in Rotherham.</p> <p>Going forward it is intended to look at improving oral health with more collaborative working with VCSE, partnership working with SY ICB, the development of links with other services, looking for further opportunities to work with schools etc, the expansion of water fluoridation and supporting the implementation of and utilising oral health needs assessment.</p> <p>In terms of next steps, SW asked Place Board to support the Rotherham Oral Needs Health Assessment for 2025 including its recommendations to have a system approach and a common risk factor approach.</p> <p>Place Board were also asked to consider the governance of the Rotherham Oral Health Improvement Group (OHIG) and review membership to ensure it has the right representation to deliver the recommendations.</p> <p>IS thanked SW and asked members for comments.</p>	

JBR asked what can be done at family hubs to get bigger impact with families rather than just with the children. It was acknowledged that more work could be done with training and resources. ST will look at how to roll out a family approach.

In terms of representation on the group, SS felt that strengthening representation from the voluntary sector and including faith representation would help. She also suggested looking at how hospitals connect with people whilst they are inpatients and where medical conditions impact on their oral health as well as looking at how prescribed medications can impact and how pharmacies can assist with oral health messaging in these cases.

Debbie Stovin interjected that the flexible commissioning programme will be about working with patients that don't have a regular dentist to develop pathways and link with Trusts and Dentists to give wider holistic approach. This is expected to grow the list of dental practices.

JR will provide the name of a trust representative to involve from an operational perspective.

SS suggested that getting economic leaders involved in supporting campaigns would be another approach to be taken forward via the local Chambers of Commerce. She also recommended contacting Doncaster to enquire about the work they have done with the drug and alcohol addiction services and had a profound impact.

SH advised that as a member of the Children and Young People's Forum Consortium, he would be happy work with and to link in the work from the OHNA.

Place Board is supportive of work and approach being undertaken recognising that the resource for Children and Young People and supporting vulnerable adults falls within the remit of Rotherham Council and acknowledging that for adults commissioning is the responsibility of SYB ICB which may prove challenging to achieve financially for partners.

Place Board supported the governance provided via the Rotherham Oral Health Improvement Group (OHIG) to deliver on the recommendations of the OHNA.

## 03/04/25 Prevention and Health Inequalities Update

Sue Panesar updated members on progress made with prevention and health inequalities:

Partner engagement is working well with all partners involved. Recent work has included:

- Engagement on the refresh of the prevention and health inequalities action plan for 2025-6
- Stronger links established with housing and neighbourhoods
- Approval of spend for Sport England Place expansion programme
- Rural health toolkit work undertaken
- Humanitarian Group Action Plan developed.

SP outlined a number of challenges and risks, ie the impact of poverty and the cost of living, the system financial position, organisational leadership across the system, maintaining momentum and data sharing and health inequalities single narrative.

Going forward:

- A health inequalities development session is being arranged for Monday 28th April – all partners will be invited.
- A new Action Plan will be developed which includes accountability
- Work around chronic pain and partnership working will be built on

CS mentioned that some of the work on the health accelerator programme, which is supported with some funding from the ICB would link in with local work and should be co-ordinated accordingly. CS to discuss with SP.

**Action: CS/SP**

Members thanked SP for the update.

## 04/04/25 Mental Health Update

KT gave update on work being undertaken:

- Primary/Secondary care Integrated Community Care Pathway and enhanced workforce established.
- stronger working partnerships are being built across Rotherham and South Yorkshire ICB.
- Community capacity, patient voice and personalisation is being developed.
- a wide range of suicide prevention and self-harm training is being delivered across the borough.
- There is strong partnership working across SYICB and the 4 Local Authorities.
- the Mental Health Crisis offer (YAS MH Vehicle, Crisis Grants, Text Lines, Expansion of Crisis Team) is being improved
- A review/transformation of social care pathway is underway.
- Rotherham Dementia Network has been established
- Adult ADHD Physical Health Checks/Medication pathways take place
- Mental Health communication is strong via Rotherhive, Carers Directory, Dementia Prevention posters.

The challenges and risks were outlined:

- Demand and Complexity of individual continues to increase.
- Embed the primary / secondary care community pathway (Cultural, Recruitment and Retention).
- Improve the support available for those individuals who have attempted suicide due to a life event.
- Improve Dementia pathway (prevention, post-diagnostic and end of life).
- Improve Eating Disorder pathway across SYICB.
- Alignment of the various Mental Health Strategies and Action Plans to be refreshed over the next 9 months.
- Adult ADHD Physical Health Check / Medicine Monitoring Pathway Delayed to drug shortages.
- Lots of activity planned for 2025-26 versus capacity to deliver

Going forward the intention is to continue to embed the Primary/Secondary care Integrated Community Care Pathway and workforce in primary care (25/26), consult and mobilise the SYICB Community Eating Disorder Pathway, complete the All Age Neuro engagement plan, launch the Rotherham Vista Project, refresh of the suicide prevention and self-harm Action Plan, Better Mental Health for All and Loneliness Plan, refresh the RMBC Mental Health Strategy and undertake the Rotherham Dementia Pathway Review.

SH commented that from a voluntary sector perspective Rotherham mental health services offer worked well.

AR said that although challenging, the increase in complexity and demand also highlighted successes and showed that focussing on supporting people from the start rather than when they are in crisis is beneficial.

JBR thanked for all work being done and offered to support advising that she had a personal and professional interest in mental health.

Noting the amount of consultation taking place in Rotherham across a variety of services and the importance of co-ordinating an approach to address consultation fatigue as well as partners sharing resources already in place to avoid duplication, it was agreed to share with the Communication and Engagement Team for discussion and to consider how this can be achieved

**Action: IS/LG**

IS thanked KT for the update and she left the room.

**05/04/25**

**Communications to Partners/Promoting Events & Consultations**

- UEC Alliance event tomorrow.
- Prevention and Health Inequalities Development Session- 28 April 2025



<b>06/04/25</b>	<b>Draft Minutes and Action Log from Public Place Board</b>
<p>The minutes from the meeting held on 19 March 2025 were agreed as a true and accurate record.</p> <p>The action log was reviewed. There were no outstanding actions.</p>	
<b>07/04/25</b>	<b>Risks and Items for Escalation to Appropriate Board</b>
<p>There were no new risks to note and nothing for escalation at this time.</p> <p>However, Members noted the risk from the recent announcements made around cost reductions for NHS SY ICB and will review and determine what needs to be placed on register at a later stage when more detailed guidance allows the local impact to be assessed.</p> <p>KG advised that Healthwatch had received feedback from the public about impact on NHS services. Discussion turned to acknowledge the difficulty of discussing mitigation in the absence of further clarity and guidance. It was agreed that a standing item will be added to future PLT going forward to allow for partners to be updated on any information received and decide how it can be communicated and risk assessed.</p> <p style="text-align: right;"><b>Action: CS/LG</b></p>	
<b>08/04/25</b>	<b>Future Agenda Items:</b>
<p><b>Standing Items</b></p> <ul style="list-style-type: none"> <li>– Updates from all groups (as scheduled)</li> <li>– Bi-Monthly Place Partnership Briefing</li> <li>– Feedback from SY ICP Meetings – Bi Monthly</li> <li>– Place Achievements (as and when)</li> </ul>	
<b>09/04/25</b>	<b>Date of Next Meeting</b>
<p>The next meeting will take place on <b>Wednesday 21 May 2025</b> in the John Smith Room, Town Hall, Rotherham.</p>	

## Members

Chris Edwards (Joint Chair)	Executive Place Director/ICB Deputy Chief Executive	NHS South Yorkshire Integrated Care Board
Sharon Kemp (Joint Chair) Quarterly attendance)	Chief Executive	Rotherham Metropolitan Borough Council
Ian Spicer	Strategic Director, Adult Care, Housing and Public Health/Deputy CE	Rotherham Metropolitan Borough Council
Ben Anderson	Director of Public Health	Rotherham Metropolitan Borough Council
Richard Jenkins	Chief Executive	The Rotherham NHS Foundation Trust
Bob Kirton	Managing Director	The Rotherham NHS Foundation Trust
Shafiq Hussain	Chief Executive	Voluntary Action Rotherham
Toby Lewis	Chief Executive	Rotherham, Doncaster and South Humber NHS Foundation Trust
Dr Anand Barmade	Medial Director	Connect Healthcare Rotherham (GP Federation)

## Participants

Cllr Joanna Baker- Rogers	Chair of H&WB Board	Rotherham Health and Wellbeing Board
Claire Smith	Director of Partnerships, Rotherham Place	NHS South Yorkshire Integrated Care Board

Andrew Russell	Director of Nursing, Rotherham & Doncaster Place	NHS South Yorkshire Integrated Care Board
Dr Jason Page	Medical Director, Rotherham Place	NHS South Yorkshire Integrated Care Board
Wendy Allott	Director of Financial Transformation Rotherham Place	NHS South Yorkshire Integrated Care Board
Shahida Siddique	Independent Non-Executive Member	NHS South Yorkshire Integrated Care Board
Nicola Curley	Director of Children's Services, RMBC	Rotherham Metropolitan Borough Council
Matt Cottle-Shaw	Chief Executive	Rotherham Hospice
Kym Gleeson	Service Manager	Healthwatch Rotherham
Lydia George	Transformation and Partnership Portfolio Manager (Rotherham)	NHS South Yorkshire Integrated Care Board
Gordon Laidlaw	Head of Communications	NHS South Yorkshire Integrated Care Board
Julie Thornton	Care Group Director	Rotherham, Doncaster and South Humber NHS Foundation Trust