

Health Select Commission (HSC) Chair's Briefing for the Overview and Scrutiny Management Board (OSMB) meeting on 1 July 2026

Items covered since the last meeting:

At the HSC meeting on 18 June 2026 the following items were considered:

1. Rotherham Women's Health Network Introduction and Overview

The Health Select Commission undertook detailed and constructive scrutiny of the Rotherham Women's Health Network's activities and aims, critically examining the scale of local health inequalities, declining healthy life expectancy and evidence that women are often not listened to within the health system, while also interrogating system performance issues such as long routine waiting times (around 253 days), variation in referral quality and inefficiencies in care pathways that result in unnecessary delays and repeat appointments.

Members acknowledged the absence of a clear delivery model, funding and governance, highlighting risks to sustainability where the Network currently relies on professional goodwill, and explored comparative models to test whether a community-based women's health hub could improve access, flow and outcomes. Scrutiny extended beyond healthcare provision to wider determinants such as poverty and food insecurity, and emphasised the importance of maintaining patient voice and intelligence, particularly given concerns about changes to Healthwatch.

The Commission added value by emphasising women's health as a strategic inequality issue, identifying clear opportunities for system improvement, strengthening the case for a hub-based model, and translating discussion into tangible next steps, including recommending that the Network be embedded within the scrutiny function as a co-optee and that women's health priorities inform future health hub development, thereby creating a platform for ongoing oversight, influence and system-wide improvement.

The following recommendations were agreed during the meeting:

That the Health Select Commission:

1. Noted the contents of the report, recommendations and presentation received.
2. Agreed to prepare a formal report recommending that the Rotherham Women's Health Network be invited to sit as a Co-optee on the Health Select Commission, to be formally considered by the Commission at its next meeting and referred to OSMB to confirm the appointment in line with the Council's Constitution.
3. Agreed to ensure that the desire for a Women's Health Hub and the provision of relevant associated women's health services be included in considerations in relation to the Town Centre Health Hub Phase 2 as part of the consultation process and the Commission's formal pre-decision scrutiny scheduled to take place later in the municipal year.

2. Castle View Transition Plan

The Health Select Commission's consideration of the Castle View transition focused on robust scrutiny of both the delivery of the new day centre for people with autism and learning disabilities and the wider impact of the service transformation, testing the effectiveness of the phased transition from two legacy sites, the quality of engagement with customers, carers and staff, and the extent to which the new facility delivers improved outcomes in practice.

Members explored operational detail including capacity, referral pathways, workforce implications and future flexibility, while also challenging how intangible benefits such as wellbeing, independence and social inclusion would be evidenced through personalised support planning, case studies and ongoing review. Scrutiny also added value by probing learning from implementation, including responding constructively to concerns around accessibility in associated housing provision, examining how trust had been rebuilt following significant community opposition to the original proposals, and highlighting opportunities to maximise use of the facility (e.g. extended hours or broader provision) without compromising its core purpose for those with the highest needs.

The Commission's approach strengthened assurance that the transition had been carefully managed and largely successful, while ensuring continued oversight by requesting a further performance and outcomes-based review, refining expectations around qualitative and quantitative measures of impact, and reinforcing the importance of ongoing engagement, user experience and service development to maximise the significant investment and deliver sustained improvements in care quality.

The following recommendations were agreed during the meeting:

That the Health Select Commission:

1. Noted the update provided in relation to the Castle View transition.
2. Requested that a further update in relation to the performance of Castle View in relation to patient experience and outcomes in line with metrics to be agreed with the service, be presented to the Commission following the 6 month post implementation evaluation, at its 18 March 2027 meeting.
3. Requested that arrangements be made for Health Select Commission Members who have not yet had the benefit of visiting the site be afforded a tour of Castle View to inform and enhance its scrutiny of the scheduled post implementation update in March 2027.

Work programme 2025-26 updates:

- **Health, Welfare and Safety Panel appointment for 2026/27**

The Health Select Commission received and nomination for Councillor Brent, and duly appointed him as the Commission's representative on the Health, Welfare and Safety Panel for the 2026/27 municipal year.

- **Health Select Commission Work Programme 2026/27**

The Health Select Commission has approved its work programme for the 2026/27 municipal year. There are currently only two vacant slots (May 2027) available for the consideration of substantive items not yet scheduled. Five potential review topics have been submitted by the Commission, to Cllr Steele as Chair of OSMB, and the Commission will undertake topic

scoping, scoring and prioritisation of those suggestions, along with any other as directed by the Chair of OSMB, in due course.

Items to be discussed at the next meeting:

At the HSC meeting on 23 July 2026 the following items are due to be considered:

- Immunisation Programme Commissioning Changes
- Primary Care Network (PCN) Development