Rotherham Metropolitan Borough Council

HEALTH AND WELLBEING BOARD

ANNUAL REPORT 2025/2026



NHS

South Yorkshire POLICE

VoluntaryAction Rotherham

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Rotherham Metropolitan Borough Council

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FOREWORD

As the Chair of Rotherham's Health and Wellbeing Board, I am delighted to present our eighth Annual Report. Our Board continues to bring together a committed partnership of statutory, voluntary, health, and community organisations that work collectively to improve outcomes for people across the borough. This spirit of collaboration remains our greatest strength as it enables us to respond to challenges, build on local assets, and champion the needs of residents.

This year has been the first under the current Health and Wellbeing Strategy for 2025–2030. It continues to prioritise giving children and young people the best start in life, promoting good and improving physical and mental health and wellbeing, supporting people to live well for longer, and fostering healthy, safe, and resilient communities. This renewed direction reflects the changing needs of Rotherham and outlines how we will work together to reduce inequalities and empower local communities.

The Health and Wellbeing Board has used the opportunity presented by our new Strategy to evaluate our overall impact. This has meant that we have redefined our Action Plan and the metrics for measuring its effectiveness at meeting our Strategy priorities. These changes have enabled us to reassess our ways of working to focus on our output, ensuring more helpful conversations and Board meetings and utilising the leadership of Board members.

Health and wellbeing is central to the lives of our communities. Pressures such as the cost of living and inequalities shape health outcomes. The Board is determined to make meaningful progress towards supporting people in the face of these challenges. Our ambition is for every person, regardless of background, identity, or circumstance, to lead a healthy, safe and fulfilling life, supported and connected to their community.

The Board has celebrated work over the past year that has improved health and wellbeing outcomes for the people of Rotherham and championed its four strategic aims. These successes are possible through our partnership approach and shared commitment to improving health outcomes by bringing together our influence on the wider health system.

We have strengthened support for families, expanded access to mental and physical health services, and invested in prevention. We have built on our strengthened long-term ways of working, particularly those linked to safeguarding, inclusion, and accessible services. Entering 2026/27, we remain committed to ensuring that every resident has the opportunity to live well. I would like to thank the partners, volunteers, and community groups whose dedication and support have made this possible



Councillor Joanna Baker-Rogers
Chair of the Health and Wellbeing Board

ROTHERHAM'S HEALTH AND WELLBEING BOARD OVERVIEW

Rotherham's Health and Wellbeing Board brings together local leaders and decision-makers to deliver our Health and Wellbeing Strategy and to improve the health and wellbeing of people in Rotherham, reduce health inequalities, and promote the integration of services. The Board supports and encourages partnership working, shares good practice, and acts where needed to remove blockages, identify gaps, and hold organisations to account for delivery.

Organisations represented on the board include:

- Rotherham Metropolitan Borough Council
- NHS South Yorkshire Integrated Care Board (Rotherham Place)
- The Rotherham NHS Foundation Trust
- Rotherham, Doncaster and South Humber NHS Foundation Trust
- Voluntary Action Rotherham
- Healthwatch Rotherham
- South Yorkshire Police
- South Yorkshire Children and Young People's Alliance
- Rotherham Children and Young People's Partnership Board

The Board has several specific responsibilities, including overseeing the delivery of the Rotherham Health and Wellbeing Strategy, and receiving Rotherham's Joint Strategic Needs Assessment, Pharmaceutical Needs Assessment, and Child Death Overview Panel Report. Further detail around the role of the Board, including how the Board has met its statutory duties over 2025/26, is outlined below.

Health and Wellbeing Strategy

The Rotherham Health and Wellbeing Strategy is grounded in this understanding of the Rotherham borough and considers the makeup and challenges of its communities. This document provides a high-level framework that directs the Health and Wellbeing Board's activity. It supports the Board in providing leadership for health and wellbeing by making the most of collective resources within Rotherham. The strategy is developed based on the needs identified in the Joint Strategic Needs Assessment.

The four Aims of the Health and Wellbeing Strategy are to:

1. Enable all children and young people up to age 25 to have the best start in life, maximise their capabilities and have influence and control over their lives
2. Support the people of Rotherham to live in good and improving physical health throughout their lives, accessing and shaping the services and resources they need

3. Support the people of Rotherham to live in good and improving mental health throughout their lives, accessing and shaping the services and resources they need
4. Sustain an environment where detrimental impacts from commercial and wider determinants of health are reduced, and opportunities for healthier living are nurtured.

Joint Strategic Needs Assessment

The Joint Strategic Needs Assessment (JSNA) is an assessment of the current and future health and social care needs of the local population. It brings together information from various sources and partners to create a shared evidence base, which supports service planning, decision-making, and delivery. The JSNA is refreshed annually, with the next update due to be presented to the Board in June 2026. The JSNA is an interactive database that includes a section on small geographies, where relevant information can be accessed at ward level. The JSNA supports the Health and Wellbeing Board to make effective decisions to support residents of Rotherham by informing its understanding of the borough's makeup and challenges.

Rotherham context

Rotherham is one of four metropolitan boroughs in South Yorkshire, divided into 25 wards that cover a wide diversity of urban, suburban, and rural areas. Rotherham developed as a major industrial centre of coal mining and steelmaking, which has shaped the borough's character. Following the decline of traditional industries, regeneration has brought new opportunities to the area, including advanced manufacturing. Rotherham's population has grown from 257,600 in 2011 to 276,595 in 2024 (Nomis). Population growth has resulted from natural increase (more births than deaths), net inward migration, and longer life expectancy. General demographic and socio-economic trends have included a growing and increasingly diverse population. The population is ageing, with a high likelihood of an increase in longer-term health conditions and age-related disabilities. Inequalities persist for workless, disabled, and low-paid people.

Ethnicity

The ethnic profile of Rotherham is continually evolving. Based on the 2021 census, the proportion of residents from ethnic minority communities increased from 8.1% in 2011 to 11.7% in 2021. The Pakistani community is the second largest ethnic group in Rotherham after white British. Rotherham's ethnic minority population is very concentrated in the inner areas of the town whilst the outer areas are 94% white British in 2021. 42% of ethnic minority residents live in areas that are amongst the 10% most deprived in the country and for some groups, the figure is higher. This compares with the borough average of 19.5%.

Age

Rotherham has an ageing population with 55,872 people aged 65 years or over. This is 20.2% of the population, above the national average of 18.4% (Office of National Statistics (ONS), 2025). The population aged 65 and over is projected to increase to 60,939 people by 2029, with over 10% of the population aged 75 or over (ONS). Rotherham has a polarised geography of deprivation and affluence.

Deprivation

Rotherham is more deprived than 82% of local authority districts in England (English Indices of Deprivation, 2025). In Rotherham the most deprived communities are concentrated in the central area of the borough whilst the most affluent areas are to the south, although the overall pattern is complex.

Health inequality

Rotherham had 56,177 people, or 21.1% of the population, with a limiting long-term health problem or disability in 2021, above the national average of 17.5%. People in the most deprived parts of Rotherham experience poorer health and a higher mortality rate than residents living in the least deprived areas. Life expectancy at birth in the borough is 77.8 years for males, compared to 79.1 years nationally, and 80.9 years for females, compared to 83.1 years nationally (2021-2023). The gap between the most deprived 10% and least deprived 10% of Rotherham residents is 9.9 years for males and 9.5 years for females.

Health inequalities are also significant in Rotherham. The average healthy life expectancy at birth was 56 years for males, compared with a national average of 61.5 years and 55.6 years for females, compared with a national average of 61.9 years (Office for Health Improvement and Disparities (OHID), 2021-23).

Gender identity

The 2021 Census also reveals 0.6% of Rotherham residents aged over 16 identify as transgender, non-binary or have a gender identity different from their sex registered at birth, compared to 0.5% nationally.

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 that sit under the Rotherham Together partnership structure. Rotherham is one of the four constitutive Places in the South Yorkshire Integrated Care System, with some Health and Wellbeing Board members providing representation at the South Yorkshire Integrated Care Partnership. The Rotherham Place Board continues to report into the Health and Wellbeing Board and takes strategic direction from the Health and Wellbeing Strategy.

South Yorkshire Integrated Care Board (NHS South Yorkshire)

Rotherham is one of the four Places constituting the South Yorkshire Integrated Care Board (ICB). The ICB is directly accountable for NHS spend, delivery, and outcomes within the IC area. It is responsible for the commissioning of healthcare services for the population of South Yorkshire and ensuring the quality and performance of those services within the ICB area. The Health and Wellbeing Board acknowledges the ongoing restructure of ICB services for South Yorkshire and the impact this has on the capacity of the organisation to contribute to Board meetings and the delivery of its Strategy. The Health and Wellbeing Board has maintained a pragmatic and flexible approach in response to ongoing uncertainty at the ICB and is supporting colleagues managing this transition wherever possible.

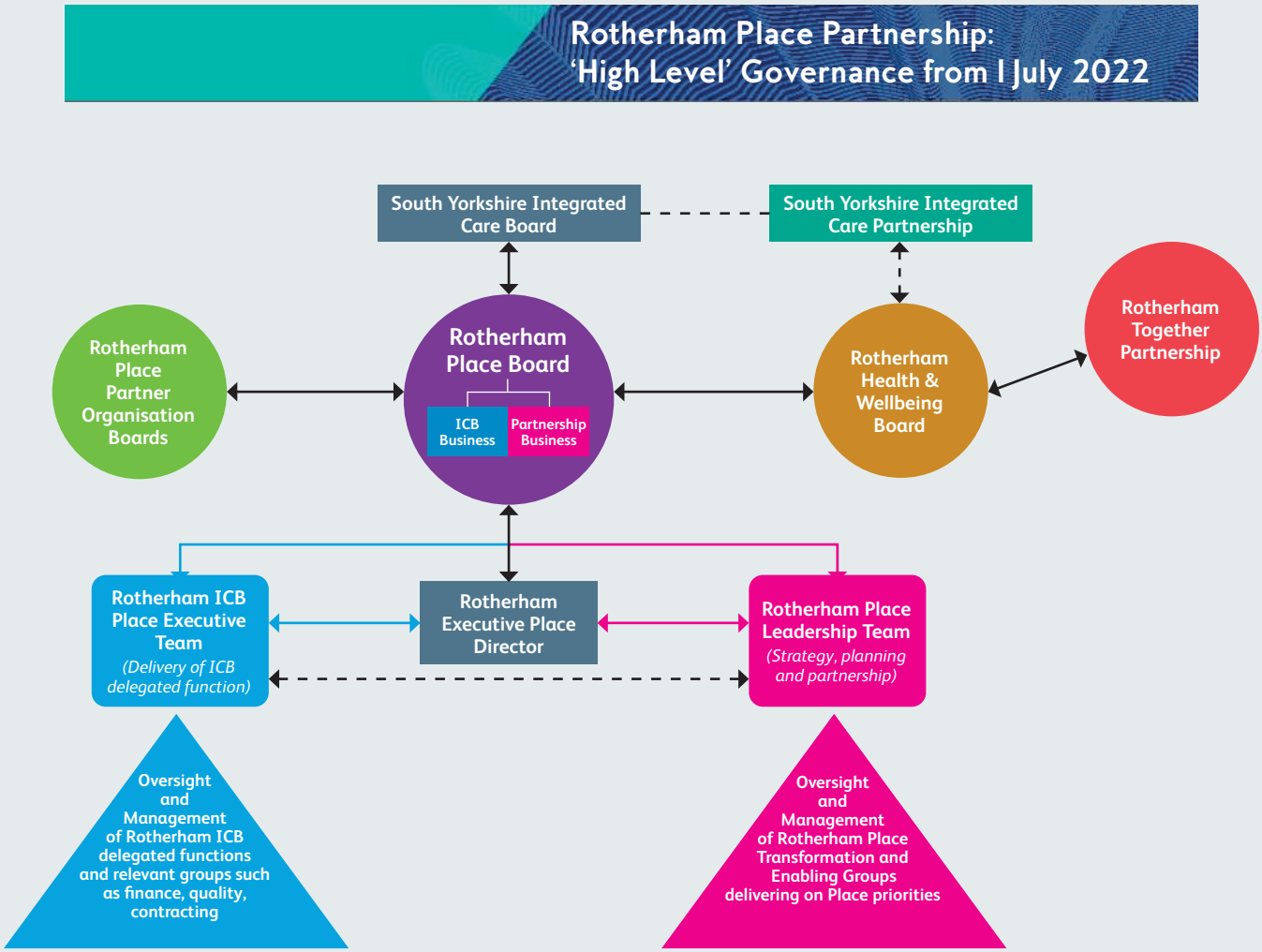
South Yorkshire Integrated Care Partnership

South Yorkshire Integrated Care Partnership (ICP) is a joint committee of the four local councils, (Rotherham, Doncaster, Barnsley, and Sheffield), and the South Yorkshire ICB. The ICP facilitates joint action to improve health and care outcomes and experiences across its population, and to influence the wider determinants of health, including creating healthier environments and inclusive and sustainable economies. Between autumn 2022 and March 2023, the Partnership oversaw development of the South Yorkshire Integrated Care Strategy, that directs sub-regional work and is complemented by the four local Health and Wellbeing Strategies. Rotherham's Health and Wellbeing Board nominated five representatives to sit on the South Yorkshire ICP. Much like the wider ICB reforms, the ICP is being restructured, and it is not entirely clear to what extent the involvement of either group in the partnership structure might be impacted moving forward.

Rotherham Place Board

Rotherham Place Board is responsible for partnership business, providing the strategic and collective leadership to deliver the ambitions of the Place Partnership. The Rotherham Place Board is the forum where all partners across health and care in Rotherham come together to formulate and agree strategies for implementing the Rotherham Place Plan. The Place Partnership is committed to achieving the best outcomes for people in Rotherham, ensuring alignment of relevant health and social care budgets so health, care, and support services can be commissioned for a place in a joined-up way. The Chair of the Health and Wellbeing Board, along with a number of other Board Members, sits on the Rotherham Place Board.

Diagram of Rotherham Place Partnership: 'High level' Governance



Rotherham Place Board (has two roles):

1. Alignment of decisions on strategic policy matters relevant to the achievement of the Place Plan.
2. Delegated authority from the ICB Board to make decisions about the use of ICB resources in Rotherham in line with its remit.

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, to ensure connectivity and appropriate oversight of issues relating to safeguarding. In 2022/23, the Safeguarding Chairs Group, bringing together the chairs of the four Boards with safeguarding responsibilities, was re-established to share and discuss joint and cross-cutting issues. Ensuring we are taking an integrated and coordinated approach to addressing issues relating to safeguarding has continued to be a focus for 2025/26. In 2025/26, a Safeguarding Board Managers group was established to deliver any priorities from the Chairs Group whilst sharing best practice and any concerns between the Boards.

Rotherham Together Partnership (RTP)

The RTP brings together statutory Boards such as the Safer Rotherham Partnership and the Health and Wellbeing Board, with other key strategic partnerships, such as the Business Growth Board, to deliver the priorities of the Rotherham Plan 2026-2036.

The four Game Changers of the Rotherham Plan are:

- A Fair and Thriving Economy
- Strong and Thriving Communities
- Rotherham Gateway and the Don Valley Corridor
- Vibrant Town Centres.

The Health and Wellbeing Board is responsible for supporting Rotherham Together to deliver its four Game Changers and will contribute toward pieces of work and progress that achieve these.

Rotherham Together brings together 8 key local organisations across the borough (RMBC, South Yorkshire Police, South Yorkshire ICB, The Rotherham NHS Foundation Trust, Rotherham, Doncaster and South Humber NHS Trust, Voluntary Action Rotherham, and Rotherham and North Notts (RNN) Group) and facilitates strategic collaboration on key issues with the aim of improving quality of life for residents.

BOARD DELIVERY IN 2025/26

AIM 1: Enable all children and young people, up to age 25, to have the best start to life, maximise their capabilities, and have influence and control over their lives

Baby Packs



Cllr Cusworth, Chair of the Rotherham Children and Young People's Partnership, with a Baby Pack

The Rotherham Baby Pack programme was launched in April 2025 as a universal early help initiative. It supports families during pregnancy and the early months of a child's life. It provides every expectant mother across the borough with a Baby Pack containing essential items for the first six months of their child's life.

The programme complements the Best Start and Beyond Framework and is closely aligned with Rotherham Family Hubs. Receiving a Baby Pack supports early registration. This connection to support services offers improved health and wellbeing outcomes for newborn babies from birth. Parents have voiced the value of receiving practical support early. Families reported feeling more prepared and reassured as they approach birth and early parenthood.

Registration for the Baby Packs takes place through midwives at the 25-week antenatal appointment. Packs are delivered on behalf of the Council in partnership with maternity services at The Rotherham NHS Foundation Trust. This ensures the offer is integrated with routine antenatal care. Each pack contains a range of practical essentials for a baby's first six months. These help families to prepare for birth and early parenthood.



Baby Packs contain the essentials for all expecting Rotherham mothers.

The Baby Packs provide immediate access to essential items. They support a safe and nurturing home environment from day one. Their universal offer removes stigma and ensures all babies benefit equally, improving child outcomes. Automatic registration through maternity services creates an early contact point to Family Hubs. This welcomes families with preventative services as their child grows.

The Baby Pack programme was endorsed by the Rotherham Health and Wellbeing Board in March 2025. It has been supported by Board partners throughout 2025/26. It enables the Board to progress towards enabling every child to have the best start to life. It provides universal early years support from pregnancy, ensuring no child is disadvantaged at birth. The Baby Packs reduce financial barriers that can impact early development and parental wellbeing. They also empower parents to support their child's development.

Baby Packs are now embedded as a core component of Rotherham's Best Start and Beyond approach. As part of the expanded Best Start Family Hubs programme, Baby Packs will continue to help tackle inequalities. They will improve early outcomes and ensure every child in Rotherham has the strongest possible start in life.

Children's Capital of Culture

Rotherham became the world's first Children's Capital of Culture in 2025. This was a programme of free and accessible cultural, creative and sporting activities across Rotherham. It engaged children and families in cultural activity.

This included borough-wide festivals, workshops, performances, exhibitions, and community celebrations. These often took place in everyday local spaces rather than traditional venues. The programme was developed through extensive engagement. It utilised the creativity and lived experiences of children and young people at its heart.



Children's Capital of Culture offered fun events for young people to enjoy in Rotherham.

It responded directly to local challenges including childhood poverty and inequalities in access to opportunity. Children's Capital of Culture empowered young people and supported them to thrive. Youth leadership and governance was at the centre of the programme. Children and young people acted as ambassadors and helped to make decisions. This ensured that activity reflected their priorities and identities. The programme also created skills, training and volunteering opportunities for young people aged 16–25. It helped them develop confidence, employability skills and pathways into creative industries.

The programme was inclusive and accessible. It actively engaged children and young people from diverse communities and circumstances. Removing financial and practical barriers helped reduce inequalities in access. The programme strengthened children and young people's sense of belonging, pride and connection to the borough. Trusting them to lead and create has resulted in young people reporting increased confidence, resilience and belief in their own capabilities.

Participation in creative and physical activity supported positive mental health, social skills and developmental outcomes. The programme also created safe, welcoming spaces for self-expression and social connection. Skills development and employment pathways provided young people with greater control over their futures.



Children's Capital of Culture has helped young people to develop skills and get creative.

Children's Capital of Culture demonstrates strong delivery against Aim 1 of the Health and Wellbeing Strategy. It enables children and young people to play a leadership role in shaping cultural activity and decision-making. The programme promoted positive wellbeing, social connection and access to new experiences from early childhood through to young adulthood. It also reduced inequalities by providing free and accessible activity in communities.

The programme leaves a legacy by embedding younger voices into planning for cultural and education events. Young people reported increased confidence, a stronger sense of belonging, and pride in shaping activities that reflect their communities. It demonstrates the value of listening to children and young people as active contributors to population health and wellbeing. Children's Capital of Culture has driven an early intervention approach to addressing long-term health outcomes. It has also championed Rotherham's ambition to be a place where every child and young person can thrive.

AIM 2: Support the people of Rotherham to live in good and improving physical health throughout their lives, accessing and shaping the services and resources they need

National Neighbourhood Health Implementation Pilot
(April 2026 - April 2027)

Rotherham was formally accepted onto the National Neighbourhood Health Implementation Programme in September 2025. This is a national pilot looking to accelerate neighbourhood-based working. It aims to increase proactive and preventative care. A Neighbourhood Compact Agreement was signed in December 2025. This set out shared principles, roles and ways of working across partners.



The National Neighbourhood Health Leads visit Rotherham and South Yorkshire Neighbour Doncaster pilot sites.

The programme aims to promote collaboration between health and community partners. It seeks to better meet the needs of residents, particularly those with multiple long-term conditions and those at risk of poor health. In November 2025, the Health and Wellbeing Board agreed to act as a feedback loop for the pilot.

The pilot officially launched in April 2026. It is being used in Rotherham to build on existing neighbourhood models and community assets. This supports the delivery of preventative treatment. It will reduce health inequalities and improve physical health outcomes across the life course.

The pilot focuses on adults with multiple long-term conditions or rising risk due to deprivation and health inequalities. Its proactive care models aim to identify people earlier. They provide personalised support before health deteriorates. Local partners are using the pilot to support broader prevention activity. This includes work on diabetes, heart health, smoking, obesity and hypertension.

As a result, residents at higher risk of poor physical health are being identified earlier. They are supported in their local communities. This supports care closer to home and helps people to manage conditions, stay independent and avoid unnecessary hospital care. Targeted prevention activity aims to reduce the burden of long-term conditions in areas experiencing the greatest health inequalities. Communities and partners are actively shaping delivery. This ensures neighbourhood models reflect local assets, needs and priorities.

The Neighbourhood Health Working pilot demonstrates progress against Aim 2 of the Health and Wellbeing Strategy. It promotes proactive and preventative approaches to physical health. By supporting residents to access easy-to-understand services and addressing health inequalities, the pilot is strengthening community and system capacity. It helps support long-term physical health and independence. This is embedding a culture of place based, person centred care across health and care partners.

Over the course of the pilot, partners will continue to test and refine neighbourhood approaches to health. This experience will inform future development. The Health and Wellbeing Board will continue to support this process. It will promote conversations to support a more preventative and integrated system. The pilot will engage with Rotherham residents to champion community voice during its programme.

Winter Plan



The Winter Plan for 2025 saw all successful schemes integrated into business-as-usual practice moving forward.

Rotherham's Winter Plan set out how health and care partners work together to prepare for increased demand. It also outlined how they manage the complexity associated with winter pressures. This was presented to the Health and Wellbeing Board in November 2025. It demonstrates how the Board updates system leaders on borough-wide plans. The Plan was coordinated by the ICB. It was delivered through a strong place-based partnership involving the Council, NHS providers, primary care and the voluntary sector.

From November to March, the Winter Plan determined how the system responded to respiratory illness and increased demand on urgent and emergency care. It also addressed the impact of cold weather on vulnerable residents.

The Winter Plan was jointly developed across local partners. These included The NHS Foundation Trust, Primary Care Services, Council Mental Health Services and Voluntary Action Rotherham. It is a co-produced piece of work. It allows partners to learn from successful approaches used in previous years.

For 2025/26 this included investment in out of hospital services to enable more people to be safely supported at home. An Acute Respiratory Infection Hub was also brought forward to respond to early increases in flu and respiratory illness. A vaccine immunisation programme against a range of diseases, including flu, was delivered with a focus on protecting vulnerable groups and the health and care workforce. This included Flu vaccines.

The opening of a new Same Day Emergency Care unit, alongside additional clinical, pharmacy and support staff, also helped relieve pressure on hospital services. Investment from the Better Care Fund strengthened joint working between health and care services across the winter period.

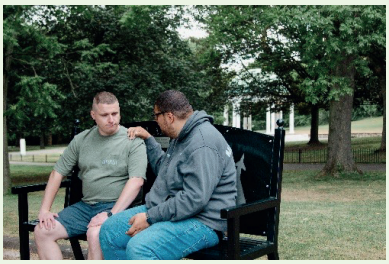
Targeted support for residents experiencing mental health crises was strengthened over the winter period with enhanced crises responses and extended safe space provision. This was part of a whole family approach that supported those most at risk during periods of heightened pressure on services.

There were many successes noted over the course of the winter plan. These included a reduction in ambulance wait times for major issues from 35 minutes to 30, a reduction in patients waiting over 12 hours for admission or discharge, and a reduction in waits of over 24-hours for mental health care.

The Winter Plan demonstrates clear progress against Aim 2 of the Health and Wellbeing Strategy by supporting residents to maintain their physical health during periods of increased risk. The measures taken ensured continued access to urgent and emergency care over a busy period for healthcare services. The health and wellbeing system comes together to support frontline services during a period of increased pressure. Winter planning in Rotherham continues to develop annually through conversations at the Health and Wellbeing Board as it allows system leaders to learn from their previous conversations to improve future responses.

AIM 3: Support the people of Rotherham to live in good and improving mental health throughout their lives, accessing and shaping the services and resources they need

Be The One Campaign



The Be the One Campaign allowed those with real life experiences to share them with others to spread awareness.

Be The One is Rotherham's suicide prevention and mental health awareness campaign. It was launched on World Suicide Prevention Day and encourages people to talk, listen and care. It supports residents recognise signs of mental distress and to feel confident and act early when someone may be struggling.

The campaign was endorsed by the Health and Wellbeing Board in March 2025, and delivery supported by Board partners throughout 2025/26. The launch event at Arc Cinema on Forge Island in September 2025 brought together partners, community organisations and residents to reinforce suicide prevention as a collective responsibility instead of a clinical issue. The launch event included users of the Be the One service sharing their own personal experiences. Organisations were invited to commit to action and embed the campaign across workplaces. Attendees reported feeling more confident recognising when someone may be struggling and more willing to start conversations about mental health.

Be The One looks to create a shared message across Rotherham to normalise conversations about mental health and suicide prevention. It promotes the idea that anyone can intervene, whether a friend, family member, colleague or professional, by listening.



The Be the One Campaign looks to normalise mental health issues and encourage better prevention support before people reach crisis point.

By encouraging early recognition of mental health crises, the campaign supports timely signposting to local support and services. This encourages a wider approach to improve access to mental health support. An early recognition approach aligns with the Health and Wellbeing Board's commitment to the Prevention Concordat for Mental Health.

Be the One will make residents better equipped to recognise distress and feel more confident starting conversations about mental health. The campaign supports a culture shift towards seeking help being more actively encouraged and stigma being challenged. Earlier intervention will help prevent the escalation of crises whilst supporting people's recovery and reducing the impact on individuals, families and communities.

The Be The One campaign supports progress against Aim 3 of the Health and Wellbeing Strategy by promoting good mental health and emotional wellbeing support. This is done by encouraging early intervention and prevention. It improves awareness of how and where to access support in Rotherham whilst reducing stigma and strengthening community confidence to talk about mental health.

Policy Proofing Work



RDaSH set out its poverty proofing commitments in its July 2025 Promises Report.

Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH) has been working on recognising the link between poverty, financial insecurity and poor mental health outcomes. People experiencing poorer mental health are more likely to experience issues such as debt, unemployment, housing insecurity and food poverty. Financial stress can also exacerbate or trigger mental health difficulties.

RDaSH has committed to a poverty proofing approach across their mental health services in Rotherham. This work uses the lived experiences of people using services to identify where current systems unintentionally create financial hardship. Changes are then made based on these findings to reduce avoidable costs and barriers to care.

RDaSH has worked in partnership with service users, carers, frontline staff and partners to understand the design and delivery of mental health services. This work has explored whether appointment locations, times or expectations create additional costs for people on low incomes. It also considers the impacts of travel requirements, missed appointment policies, or prescription charges affect access to care. Routine support to access financial advice, welfare benefits or practical help at the point of need were also considered.

The results showed that concerns for some are the cost of transport to appointments, a lack of access to digital resources, and limited awareness of financial support. These concerns significantly affected engagement with mental health services. Stress and anxiety caused by financial pressures were not always recognised or addressed.

Many practical changes were introduced in response. Clearer information about travel options and reimbursement was provided. Increased community-based outreach appointments were offered. Stronger referral pathways for additional support were assured and increased staff awareness of poverty as a mental health risk factor.

The work has helped reduce practical and financial barriers to accessing mental health support, particularly for people living in the most deprived communities. By recognising financial stress as a factor in mental health, services can provide more compassionate support. People reported feeling better understood and not blamed for missed appointments or difficulties engaging. Feedback sessions were offered to service users to capture their feedback and discuss findings collaboratively.

This poverty proofing work demonstrates strong delivery against Aim 3 of the Health and Wellbeing Strategy by supporting good and improving mental health through tackling a key driver of distress in financial insecurity. This has allowed RDaSH to improve access to services by reducing practical and cost barriers that disproportionately affect people on low incomes. This has been done by embedding lived experience into this process so that services are shaped by the voices of people who use them. This not only addressed inequalities but also recognised that poverty and mental ill health are intricately linked and require joined up solutions.

This is part of a shift away from traditional health responses towards a more open-ended approach to mental wellbeing. Embedding poverty proofing into RDaSH services will support people to access and remain engaged in mental health services whilst strengthening links between health care services and community support. This is a strong example of system leadership in action. It demonstrates how mental health services can adapt to better meet the needs of residents and contribute to long-term improvements in wellbeing and equity across Rotherham.

AIM 4: Sustain an environment where detrimental impacts from commercial and wider determinants of health are reduced and opportunities for healthier living are nurtured

Healthy Homes Plan



RDaSH set out its poverty proofing commitments in its July 2025 Promises Report.

In September 2025, the Health and Wellbeing Board endorsed the Healthy Homes Plan for 2025 and the Housing Strategy 2025–2030. This allowed members to consider issues that sit outside of their traditional remit. Partners considered how organisations can improve health outcomes for residents by considering the wider determinants of health.

The Healthy Homes Plan outlined the impact of poor housing conditions as a major driver of health inequality. Excess cold, damp, mould, and fuel poverty were explained as linked to respiratory illness, cardiovascular disease, poor mental health and reduced healthy life expectancy. These were discussed as issues that disproportionately affect residents living in more deprived communities and contribute to residents relying on health and care services.

This enabled the Board to have productive conversations considering ways partners can support people. These included reducing fuel poverty, improving energy efficiency, tackling damp and mould, and preventing housing related illness through upstream intervention.

Conversations such as this one support the Health and Wellbeing Board to deliver Aim 4 of the Health and Wellbeing Strategy by addressing a key social determinant of health. Considering issues such as housing quality and affordability rather than limiting conversations about responding to downstream illness shifts focus to reducing health inequalities. This is due to fuel poverty and poor housing conditions being more prevalent in deprived areas. This approach sees the Board include colleagues from outside of the Board membership to champion a Health in All Policies approach.

This conversation at the Health and Wellbeing Board helped to incorporate more voice into the development of the Healthy Homes Plan. This was done by contributing the insight of several partner organisations that work with and listen to the concerns and views of vulnerable Rotherham residents. This acted as a testing opportunity for the effectiveness of a health and wellbeing related strategic document.

The Health and Wellbeing Board used its influence to guide partners through its conversation about the Healthy Homes Plan. Preventing housing related ill health will support healthier and more resilient communities. This will ensure the Board focusses on contributing to long-term sustainability of the health and care system.

Strengthening Community Resilience through the Voluntary and Community Sector

In November 2025, the Health and Wellbeing Board had an extended conversation about the impact and influence of the Voluntary, Community and Social Enterprise (VCSE) sector on the health and wellbeing system. This focused on the VCSE sector playing a critical role in addressing these wider determinants. It also included considering their role in supporting people before problems escalate to crises and how the Board can utilise this role better moving forward.

VCSE colleagues noted their awareness of problems such as social isolation, poverty, housing insecurity, digital exclusion and lack of access to advice. These are all significant contributors to poor health and widening inequalities in Rotherham. Many of these issues sit outside the direct control of health services but strongly influence physical and mental wellbeing. The VCSE organisation highlighted their value in inputting resident voice by utilising trusted relationships within communities. Their ability to reach individuals who may not engage with statutory services is invaluable to the Health and Wellbeing Board conversations.

The Board recognised VCSE organisations as core health-creating infrastructure, rather than supplementary or short-term provision. This conversation helped to understand the unique position of the VCSE sector in relation to tackling cost-of-living pressures, reducing isolation and loneliness, improving access to advice, advocacy and support, and strengthening community networks in areas of highest need.



Voluntary Action Rotherham and other VCSE organisations emphasised their value in connecting partners to the voices of residents and their communities.

The VCSE sector work demonstrates delivery of Aim 4 of the Health and Wellbeing Strategy. Their work frames the wider determinants of health to include financial insecurity, social isolation and access to support. This helped to explore avenues of building resilient communities rather than relying solely on statutory services. This better supports prevention and early intervention and reducing escalation to crises services or long-term dependency.

This illustrates how the Health and Wellbeing Board can use its system leadership role to shift focus from reactive responses to resilience and prevention. The conversation involved members in a conversation around valuing and aligning VCSE activity with population health priorities. By doing this the Board set the tone for future work in supporting healthier communities through social connection.

ITEMS FROM MEETINGS JUNE 2025 – MARCH 2026

The following items were presented and discussed at the five Rotherham Health and Wellbeing Board meetings over 2025/26. A record and all materials from each meeting can be accessed **here**.

25th June 2025

- Rotherham Breastfeeding Friendly Borough Declaration
- Joint Strategic Needs Assessment
- Rotherham Suicide Prevention and Self Harm Action Plan 2025-28
- Health and Wellbeing Annual Report 2024/25
- Health and Wellbeing Board Terms of Reference.

24th September 2025

- Director of Public Health Annual Report
- Healthy Homes Plan
- Tobacco Control Update
- Child Death Overview Panel Annual Report 2024/25
- Pharmaceutical Needs Assessment
- Evaluation of the 3-4 Months Health Visit Check.

25th November 2025

- 2025/26 Water Plan
- Working with the Voluntary and Community Sector to Provide a More Integrated Approach to Care
- School Survey Analysis
- Health and Wellbeing Strategy Update
- Health Protection Annual Report
- Rotherham Food Network
- Neighbourhood Working.

28th January 2026

- Family Hubs Update
- Health and Wellbeing Strategy Update
- The Borough That Cares All-Age Strategy 2026-31
- Public Mental Health Action Plan
- Foetal Alcohol Spectrum Disorder Project.

1st April 2026

- Combatting Drugs Partnership Update
- Loneliness Action Plan Refresh
- Health and Wellbeing Strategy Update
- Ethnicity and Unequal Ageing Programme: Experiences in Rotherham and Sheffield

Over the course of 2026/27 the Health and Wellbeing Board is planning to focus on a range of topics including but not limited to:

- Moving Rotherham
- Suicide Prevention
- Breastfeeding Friendly Borough
- Tobacco Control
- Carers
- Health Protection
- Rotherham Food Network
- Best Start Local Plan
- Public Mental Health
- Combatting Drugs
- Loneliness
- Prevention and Health Inequalities.

LOOKING AHEAD

The ambition for 2026/27 is to build upon the progress from this report and to deliver the following:

- Carry out the agreed Action Plan which sets out the core activities that the Board will oversee in 2026/27
- Continue to work collaboratively as a partnership to monitor the delivery of activities to meet the Aims and measure against the priorities of our Strategy
- Continue to support and accommodate the ongoing changes across the South Yorkshire Integrated Care System and ensure we continue to deliver against our Aims in the new and emerging landscape
- Influence other bodies and stakeholders, including those with a role in addressing the wider determinants of health, to embed health equity in all policies across Rotherham
- Continue to focus on reducing health inequalities between our most and least deprived communities
- Champion positive news stories coming from across the health and wellbeing network and share best practice across partners
- Continue to produce an annual report each year with case studies, giving people the chance to hear about what the Board has achieved and the impact it has had.

CONCLUSION

The 2025/26 Annual Report marks an important milestone as the first developed under the Rotherham Health and Wellbeing Strategy for 2025–30. This new Strategy has provided an opportunity to refresh and realign our approach by reviewing and updating our strategic priorities and Action Plan.

This renewed Action Plan sets out a strengthened programme of work, designed to maximise opportunities for meaningful and sustainable impact. It emphasises collaboration across partners, promotes innovation in tackling health inequalities, and supports a more integrated approach to improving health and wellbeing outcomes. By building on previous achievements, we aim to drive forward progress in a way that is both responsive and forward-looking.

The Health and Wellbeing Board remains committed to its leadership role in championing system-wide change. This includes fostering stronger partnerships across health, care, and community sectors, influencing the wider determinants of health, and ensuring that the voices of Rotherham residents are central to decision-making. Through this collective effort, the Board will continue to advocate for and enable changes that lead to improved, equitable health and wellbeing outcomes for all residents of Rotherham into the future.

ACRONYMS

BCF – Better Care Fund

ICB – Integrated Care Board

ICP – Integrated Care Partnership

ICS – Integrated Care System

JSNA – Joint Strategic Needs Assessment

NHS – National Health Service

ONS – Office for National Statistics

OHID – Office for Health Improvement and Disparities

PNA – Pharmaceutical Needs Assessment

RDaSH – Rotherham, Doncaster and South Humber NHS Foundation Trust

RMBC – Rotherham Metropolitan Borough Council

RNN – Rotherham and Notts Network

TRFT – The Rotherham Foundation Trust

VAR – Voluntary Action Rotherham

VCSE – Voluntary, Community and Social Enterprise (Sector)

KEY TERMS

Action Plan – Detailed plan outlining actions, responsibilities, and measures

Best Start and Beyond Framework – Local strategic approach focused on improving outcomes for children and families, particularly in the early years

Better Care Fund – National funding programme supporting integration between health and social care services

Deprivation – Lack of resources such as income, housing, or opportunities

Determinants of Health (Wider Determinants) – Social, economic, and environmental factors influencing people's health, such as housing, employment, education, and income

Early Intervention – Providing support at an early stage to prevent problems from becoming more serious or requiring more intensive services later

Family Hubs – Community-based centres that provide integrated support services for children, young people, and families

Health Inequalities – Unfair and avoidable differences in health outcomes between different groups of people, often linked to deprivation or social disadvantage

Health in All Policies – Approach that ensures health and wellbeing are considered in decision-making across all policy areas, not just healthcare

Healthy Life Expectancy – The number of years a person can expect to live in good health, without significant illness or disability

Integrated services – Different organisations working together in a joined-up way

Limiting Long-Term Condition – A chronic illness or disability that affects a person's daily activities over a long period

Neighbourhood Working/ Neighbourhood Health – Approach to delivering services at a local level, bringing together health, care, and community services to meet the needs of specific populations

Place-Based Working (Place Partnership) – Collaborative approach where organisations work together within a specific geographic area to improve outcomes for the local population

Prevention – Actions taken to reduce the likelihood of health problems occurring or worsening

Safeguarding – Protection of children and adults from abuse, neglect, and harm, ensuring safety and wellbeing

Social Determinants (of Health) – Another term for wider determinants of health, focusing on how living conditions influence wellbeing

System Leadership – Leadership that brings together multiple organisations and sectors to work collaboratively towards shared goals

Resilience – Ability of individuals or communities to cope with challenges

Universal Offer – Service or programme that is available to everyone, regardless of need or background

Upstream Intervention – Early action addressing root causes of issues before they cause more serious problems

Voluntary Sector Infrastructure – Networks, organisations, and systems that enable voluntary and community groups to operate effectively

Whole-System Approach – Coordinated way of working across organisations and sectors to address complex issues such as health inequalities

Ward - a local area within a council, represented by elected councillor(s).