

## ROTHERHAM BOROUGH COUNCIL - REPORT TO MEMBERS

1.	<b>Meeting:</b>	<b>Cabinet</b>
2.	<b>Date:</b>	<b>28<sup>th</sup> March, 2012</b>
3.	<b>Title:</b>	<b>Health Inequalities Summit</b>
4.	<b>Directorate:</b>	<b>Public Health</b>

### 5. Summary

The Health Inequalities Summit was the conclusion to a comprehensive project investigating and addressing the health inequalities in Rotherham. The summit identified some key recommendations to help address health inequalities in the future. The purpose of this paper is to highlight to the Senior Leadership Team the outcomes of the Health Inequalities Summit and propose the future activity.

### 6. Recommendations

- **That Cabinet consider and the 10 high level actions developed from the community consultation and Summit event (in appendix 1).**
- **Support the framework for action (developed after the Rotherham Show survey and focus groups of Rotherham people expressing their views), forming a key part of the Joint Service Needs Assessment and Health and Wellbeing Strategy.**

## **7. Proposals and details**

RMBC and NHS Rotherham are working in partnership to examine the reasons for the apparent increase in health inequalities within the Index of Multiple Deprivation (IMD) 2010. Tackling health inequalities is about co-ordinating the efforts, resources and support of the NHS, RMBC and all local partners (and any future local Health and Social Care organisations). As part of the action to investigate and address the health inequalities in Rotherham, a summit took place on 1<sup>st</sup> December 2011 to plan the next steps in addressing health inequalities locally.

In preparation for the summit a comprehensive community consultation was completed in autumn 2011 and the findings were presented at the event. The event generated discussions which resulted in a series of themes being developed, these were; Look and Feel of Rotherham, Rotherham Communities, Skills for Life, Cost of Living, and Health, supported by an overarching theme of Raising Aspiration. There were 10 actions developed covering all the themes.

Cabinet are asked to consider the actions developed from the community consultation and Summit event. The actions and information from the consultation and summit will be integrated into the community strategy, the development of the 2012 Joint Strategic Needs Assessment (JSNA) and Health and Wellbeing Board Strategy. The information will support the narrative provided by the JSNA and provide the qualitative assessment of Rotherham people's views on tackling health and wellbeing.

## **8. Finance**

All activities to date have been undertaken within current resource. There may be resource implications to deliver the proposed action plan. Cabinet are asked to consider and prioritise the resources required through the JSNA.

## **9. Risks and Uncertainties**

There is the risk that health inequalities continue to increase. Effective partnerships engagement and agreeing a set of effective action will mitigate against. The further development of two way communication with communities will improve the local relevance and acceptance of targeted activities.

## **10. Policy and Performance Agenda Implications**

Successfully addressing health inequalities in Rotherham will have a positive impact on all performance targets and policy areas, conversely a failure to address this will have a negative impact.

## **11. Contacts**

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**Appendix 1: Action Plan –  
Submitted to Health and Wellbeing Board 29 February 2012**

<b>Theme</b>	<b>Deliverables</b>
<b>Raising Aspiration</b>	<ol style="list-style-type: none"> <li>1. Recognise what Rotherham has to offer and use the media to promote this e.g. Clifton Park, Rotherham Show, green spaces, play sites, walks, and the knowledge and skills of Rotherham people.</li> <li>2. Refresh and extend the “Rotherham Ambassadors” scheme – broaden involvement with communities.</li> </ol>
<b>Look and feel of Rotherham</b>	<ol style="list-style-type: none"> <li>3. Consider the health impact of all new planning applications and developments e.g. takeaways, licensed premises.</li> <li>4. Develop a commercially viable, innovative and imaginative “Town Centre offer” in recognition of the improved town centre e.g. early evening activities, café culture.</li> <li>5. Develop a scheme to regulate Private landlords and improve the quality of private for rent housing.</li> </ol>
<b>Communities</b>	<ol style="list-style-type: none"> <li>6. Develop an asset, skills and knowledge framework to fully utilise local potential in the 11 most deprived areas. Buildings, public and private, key people in the community, sports and social opportunities.</li> </ol>
<b>Skills for Life</b>	<ol style="list-style-type: none"> <li>7. Develop and promote a skills training register identifying the “trigger points”(leaving school, bereavement, divorce) for skills for life training linking to schools, colleges, jobcentres and the voluntary and community sector.</li> <li>8. Increase the volunteering and apprenticeship programme developing further opportunities across Rotherham.</li> </ol>
<b>Cost of Living</b>	<ol style="list-style-type: none"> <li>9. Action to help with cost of living including credit unions, fuel/food cooperatives, housing, and travel.</li> </ol>
<b>Health Services</b>	<ol style="list-style-type: none"> <li>10. Clinical Commissioning Group to be asked to make accessibility to GP services a priority for 2013.</li> </ol>