

HEALTH AND WELLBEING BOARD
19th September, 2018

Present:-

Councillor David Roche	Cabinet Member, Adult Social Care and Health (in the Chair)
Tony Clabby	Healthwatch Rotherham
Dr. Richard Cullen	Strategic Clinical Executive, Rotherham CCG
Chris Edwards	Chief Operating Officer, Rotherham CCG
Carole Lavelle	NHS England
Councillor Janette Mallinder	Chair, Improving Places Select Commission
Mel Meggs	Deputy Strategic Director, Children and Young People's Services
Chris Morley	Chief Nurse, Rotherham Foundation Trust (representing Louise Barnett)
Rob Odell	District Command, South Yorkshire Police
Dr. Jason Page	Governance Lead, Rotherham CCG
Jacquie Wiltchinsky	Consultant in Public Health (representing Terri Roche)

Also Present:-

Kate Green	Public Health Specialist, RMBC
Gordon Laidlaw	Communications Lead, Rotherham CCG
Councillor Short	Vice-Chair, Health Select Commission
Janet Spurling	Scrutiny Adviser, RMBC
Hannah Upstone	Strategic Housing Assistant
6 Members of the Public	

Report Presenters:-

Tom Bell	Assistant Director of Housing
Ruth Fletcher-Brown	Public Health Specialist, RMBC
Polly Hamilton	Assistant Director, Culture, Sport and tourism
Dermot Pearson	Assistant Director, Legal Services
Sarah Watts	Strategic House Manager

Apologies for absence were received from Louise Barnett, Sharon Kemp, AnneMarie Lubanski, Kemp, Roche, Barnett, Wheatley and Watson.

11. DECLARATIONS OF INTEREST

There were no Declarations of Interest made at the meeting.

12. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

With regard to the Hospital Services Review, why have you not involved the staff in such a way that they understand the whole picture of what you are asking of them and where it may lead? In terms of consultation you have hardly grasped it with the fervour it warrants. Why have you not involved the staff inside the NHS so they understand the whole of what they are working on?

The Chair stated that, from the Council perspective, he had spoken out in public, including to the regional board, of his concerns about the lack of public consultation on the regional STP. He had argued long and hard for the Local Plan to be accountable and had insisted that it come under the Health and Wellbeing Board and, therefore, the minutes of the sub-groups belonging to the Place Board were submitted to the Board meeting. There had been at least 2 All Member seminars on the Plans to inform all Members of the Council and where they could ask questions. The Health and Wellbeing Board and the Place Board were both public meetings and the item had been included on both agendas in the “open” session. The Local Place Plan was based on what was happening locally and had formulated some of the actions but there were no cuts and no involvement in private companies. This had also been subject to public meetings and was aimed at improving the health of Rotherham people and not about bringing in another organisation.

Dr. Cullen stated that, in his view as a GP, the Place Board was part of closer working together and that was reflected through the organisations to the workers. People on the ground wanted that facility to work together more closely; they were listening to the patients and did not want duplication. The Place Board was the top part that would allow better working on the ground to improve patient care and co-ordinate the best value out of the Rotherham pound.

Chris Edwards reported that the Hospital Services Review was conducted by an independent company commissioned to produce a report. The comments regarding the length of the document and how it had been publicised would be fed back. Any major service change that affected Rotherham would legally require full public consultation and any decisions would be made in public.

The Rotherham Integrated Care Partnership Agreement would tie all representatives to make the best decisions for Rotherham people and to meet the Key Performance Indicators.

Rotherham was at the forefront of the possible changes. Can we not bring a team from the Labour Party down to look at it? We would press the local labour Party to deal with this

The Chair stated that there was no problem at all with people looking at what Rotherham had done and what intended to do.

Tony Clabby, Healthwatch Rotherham, reported that an engagement event on the Hospital Services Review had been held on 10th September at the Carlton Park Hotel at which over 40 people from hard to reach communities had attended.

13. MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting of the previous meeting of the Health and Wellbeing Board held on 11th July, 2018, were considered.

Resolved:- That the minutes of the previous meeting held on 11th July, 2018, be approved as a correct record.

14. COMMUNICATIONS

A. The following question had been received from a member of the public on 29th July, 2018, submitted to all South Yorkshire Health and Wellbeing Boards. A South Yorkshire response had been provided. The question was:-

“The organisation in charge of the Health and Wellbeing Board i.e. the council must take these questions and statements and have them answered by the board under the Public Sector Equality Act. Circumventing any relevant policy that is not law, that would block these questions or statements, any non-compliance of this request will be subject to a legal challenge by myself (name removed) and any relevant persons or peoples to whom the issue applies.

Statement:

JSNA does not provide the full waiting list for primary care and secondary care services for assessment and diagnosis. Given that it is up to the statutory authority to deal with making sure that public sector equality is upheld will they do the following:

Question 1) Will the chair including all associated bodies that commission local services, now ask or provide waiting lists for each contract in place for assessment and diagnosis, in the NHS and provide the total cost of clearing each waiting list?

Question 2) Will the chair request that the waiting list for all Social Care services are published on a monthly basis for review emergency or otherwise, and the first assessment and provide a cost for each month to clear that waiting list?

Question 3) Will the board then provide the list to the Secretary of State for Health and Social Care, to make sure they are aware of the waiting list and hold them to account on funding the clearing of such waiting list under the health and social care act and the care act?”

A response was provided via email from the Chair which stated:-

“Thank you for your email. Unfortunately the Rotherham Health and Wellbeing Board cannot accept your request as it is not within the remit of the Board to do so.

The Health and Wellbeing Board is a strategic body whose role is to improve the health and wellbeing of the people in its area by encouraging integrated commissioning between health, social care and public health. It does not have a role in monitoring performance or waiting times, which are operational matters. You should, therefore, direct your request for information on waiting lists and the cost of clearing these lists to each individual provider of commissioned services.”

B. Peer Support Offer for Local Systems

An offer of Peer Support had been received from the Local Government Association for local systems, which included LGA NHS providers, NHS Clinical Commissioner and NHS Confederation, to provide a group of people to visit and work locally looking at what the Board was doing and how it was progressing.

However, a condition of the impending restoration of powers to the Council on 24th September, 2018, by the Secretary of State was that the Council undergo a health check in January/February, 2019.

It was felt that the Board may wish to consider the Peer Support Offer towards the end of 2019.

15. HWB STRATEGY AIM 4 UPDATE

A Draft Cultural Strategy for Rotherham 2018-2025

Polly Hamilton, Assistant Director, Culture, Sport and Tourism, presented the above document, with the assistance of a powerpoint presentation, which was developed by the Rotherham Cultural Partnership Board, an organisation formed during 2018 bringing together people and agencies that cared about Rotherham's future.

The Strategy set out Rotherham's aims for culture, leisure and green spaces and described how it would develop the local assets and resources, making the best use of what existed and building agreement about priorities for development, supporting the case for external funding and investment.

The Strategy would build understanding about how engagement with the arts, sport and natural environment could improve people's personal growth, health and wellbeing and sense of purpose. It would set out how enabling more people to participate, to get active, get create and get outdoors, would not only make sure that everyone felt part of and proud of their community but also help to strengthen the economy.

The document was out for consultation until 31st October, 2018.

The Board was asked:-

- Do you support our key goal – to enable everyone to get active, get creative and get outdoors, more often?
- Was the argument clear?
- What can you or your organisation do to support the ambitions and actions of the Strategy?
- Volunteers from NHS/CCG to develop action plan?

Resolved:- (1) That the report and presentation be noted.

(2) That representatives email Polly Hamilton with any comments on how their organisation could support the ambitions and actions of the Strategy.

ACTION: All Board members

(3) That Dr. Jason Page and Rob Odell assist with the development of the action plan.

ACTION:- Rob Odell/Jason Page

(4) That Voluntary Action Rotherham be contacted as to whether they could assist with the development of the action plan.

ACTION: Polly Hamilton

Housing Strategy Refresh 2019-2022

Sarah Watts, Strategic Housing Manager, gave the following powerpoint presentation:-

- Overview of housing in Rotherham
 - 112,000 households – largely 3 bed semi-detached houses
 - 6,500 applicants on the housing register
 - The Council owns and manages 20,500 tenanted properties, 500 leaseholders
 - 64% were owner-occupiers, 22% social rented and 14% private rented
 - 900+ overall target for homes built (SHMA) per annum
 - 600 average delivery in recent years
 - 202 sold via Right to Buy last year
- Current Strategy: The 5 Themes - Housing growth, Social housing, Private rented housing, Affordable housing and Specialist housing
- Achievements e.g. Grant funding for new homes, Shared ownership and affordable housing, Clusters Partnership – Wates, Town Centre residential programme, Excellence in Tenant Engagement Award and Selective Licensing

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- Things have changed - Housing and Planning Act 2016, Policy updates, HRA Business Plan refresh, Increasing resources, Homelessness Reduction Act and Social Housing Green Paper
- The New Strategy – Vision
 - Meeting housing need through growth
 - People living in high quality homes, affordable and energy efficient homes
 - Rotherham Council being the best housing provider in the country
 - Rotherham's people can live independently in safe, healthy and vibrant communities
 - A revitalised town centre with a new urban community
- Value of new housing - More than bricks and mortar, Economic, Social value, Energy efficiency, Health, Neighbourhoods and Community engagement
- Structure – 5 Priorities
 - Providing new homes to meet Rotherham's housing needs
 - Investing in Rotherham housing stock
 - Improving health and wellbeing through housing
 - Strengthening Rotherham's economy
 - Working in partnership to deliver the Strategy
- Timetable for Refresh
 - July-October, 2018 – consultation period
 - November 2018 – first draft
 - January 2019 – final draft
- Pipeline Projects – More new homes, housing profiles and land review, transformation of Adult Care, modern methods construction and the new Repairs and Maintenance Contract
- Public Health would be interested in the work around health inequalities and the targeting of what might need to be considered specifically
- In the past enforcement had been missing; now 95% of Rotherham citizens lived in safer and warmer homes
- It had only been quite recent that the connection between Housing and health had been taken into account
- As various parts of the Borough were developed it would change what the localities had been set up to accommodate. The Locality Plan would need to adapt

- The Local Estates Forum was crosscutting and starting to develop and look at the whole of Rotherham estates and the housing implications as well as the health implications

Resolved:- (5) That the presentation be noted.

(6) That Public Health be included in the work with regard to health inequalities.

ACTION:- Sarah Watts/Jacqui Wiltchinsky

Loneliness

Ruth Fletcher-Brown, Public Health Specialist, gave a brief update on loneliness.

It was felt that the Better Mental Health For All Group contained all the partners required to address loneliness and to get the strong message across that loneliness did not just affect older people. Following discussion it not felt necessary to have a public campaign to address loneliness as the Five Ways to Wellbeing Campaign was a good tool to use

There was a strong message that anyone could experience loneliness at any point in their life. Work was taking place in the South Multi Agency Group which had identified loneliness as a key theme and from April 2019 MECC would address Loneliness. It was felt that there should be some initial pilot work and discussions were taking place with the South MAG with regard to possibly piloting some workers making MECC around Loneliness. Discussions were also taking place with Voluntary Action Rotherham with regard to their website GISMO which tried to capture all the community groups.

The Chair stated that performance indicators would be submitted to the next meeting. A Loneliness Plan was being developed and would be submitted in due course.

Councillor Short reported that there was a Loneliness project in his Ward, working with Churches Together, and a coffee morning held every week.

(7) Resolved:- That the report be noted.

(8) That the Five Ways to Wellbeing Group drive the Loneliness agenda

(9) That the Board support the need to take the Five Ways to Wellbeing message forward as partners and consideration be given as to it being the front facing message around Loneliness.

16. HWB STRATEGY AIM 2 UPDATE

Ruth Fletcher-Brown, Public Health Specialist, presented an annual update on the action detailed in 2 partnership action plans i.e. the Rotherham Suicide Prevention and Self-Harm Action Plan for 2016/2018 and the Better Mental Health for all Action Plan 2017-2020.

Both actions plans evidenced the work that all partners were carrying out to promote the mental health of people living and working in Rotherham and the prevention of suicide.

Better Mental Health for All

The action plan drew upon the evidence of what worked promoting the mental health for the whole population, for individuals who were more at risk of developing mental health problems and for those living with a mental health problem.

The co-ordination of the action plan was through a local implementation group with partners of the Health and Wellbeing Board represented. The focus of the work was linking into community assets (strengths) and connecting people within their local community. The Strategy and action plan recognised the skills, knowledge and expertise of individuals and the assets that communities and organisations had to improve mental health and wellbeing.

10.8% of adults over the age of 18 years in Rotherham (2014/15) had depression, the average for England for the said period being 7.3%. For self-reported emotional wellbeing (2015/16) Rotherham residents reported high levels of low satisfaction with life, low happiness and high anxiety; these rates were higher than the average for England and for the Yorkshire and Humber region.

Key Actions:-

- Film and resources produced to support the Five Ways to Wellbeing campaign completed by April 2018
- Launch of the Five Ways to Wellbeing Campaign in May 2018
- Partner organisations signed up to roll out the different topic areas (Be Active, Connect, Give, Keep Learning and Take Notice) from the launch until October/November 2018
- Work now ongoing to ensure the Five Ways to Wellbeing principles were embedded in all partners' commissioning processes and provider services
- A future focus of the Better Mental Health for All Group would be to look at actions to address loneliness in line with Aim 4 of the Health and Wellbeing Strategy. The proposal was to utilise the Five Ways to Wellbeing campaign as the public campaign to combat loneliness
- The action plan was being updated with a progress report to the November meeting

Rotherham Suicide Prevention and Self-Harm Action Plan

The Plan had been written to recognise the role of all partners in addressing the complexity of preventing deaths from suicide.

The All Party Parliamentary Group (APPG) on Suicide and Self-Harm published an "Inquiry into Local Suicide Prevention Plans in England" January 2015. The APPG considered there were 3 main elements that were essential to the successful local implementation of the national strategy. All local authorities must have in place:-

1. Suicide audit work in order to understand local suicide risk
2. A suicide prevention plan in order to identify the initiatives required to address local suicide risk
3. A multi-agency suicide prevention group to involve all relevant statutory agencies and voluntary organisations in implementing the local plan

Key Actions:-

- Launch of the young people's campaign STILL on World Mental Health Day on 10th October 2017 at Oakwood School
- All Rotherham schools received an updated Critical Incident Prompt sheet from Educational Psychology in May 2017
- 6 schools piloted a Whole School Approach to mental health and emotional wellbeing during 2016-17. This work had now been shared with other schools across the Borough
- Suicide prevention training provided in May 2017 by Public Health Specialist to Crossroads and Rotherham Alzheimer's Society staff. In 2018 Youth Mental Health First aid training courses also provided to the Rotherham Parent Carers Forum and a second women's group from BME communities
- During 2017 Wentworth Valley Area Assembly identified funding for suicide prevention work in the Maltby, Hellaby and Wickersley Wards
- 4 SafeTalk suicide prevention courses delivered in March 2017
- Bereavement pathway for children who had experienced a sudden and traumatic death revised in October 2017 and re-issued to all partners. The next revision was due in October 2018
- Rotherham Samaritans launched their bereavement support project in January 2017
- The action plan was currently being refreshed and would address issues highlighted through Rotherham's real time surveillance work
- South Yorkshire and Bassetlaw had received NHS England funding for suicide prevention work for one year. The funding could not be used to support local plans in their entirety but could be used to support the national themes of:-

- Reducing suicide and self-harm in Mental Health Services
- Reducing self-harm in Community and Acute Services
- Suicide prevention in men and/or work with Primary Care

The Rotherham Suicide Prevention and Self-Harm Group had submitted initial proposals for spending the funding in the Borough to NHSE. The proposals had been supported by the Rotherham Mental Health and Learning Disability Transformation Board and were in line with priorities within the Local Plan. Discussions were still taking place as to how the funding would be divided. It was hoped to know of the outcome by the end of September.

Discussion ensued on the report with the following issues raised/clarified:-

- The 6 schools who had piloted a Whole School Approach were all meeting on a regular basis and were taking the work forward. They had presented their approach to various school meetings resulting in additional schools expressing interest
- The Whole School approach had a really strong element of environment level and local level and would feature in the new SEMH Strategy
- The participating schools had given a presentation to Children Services' Departmental meeting and looked at how it could be taken wider than schools. It had made a difference to the culture of those schools
- Rotherham CCG had bid for Trailblazer funding which would place Mental Health Workers within schools. It was hoped to hear if the bid had been successful sometime next month
- Excellent suicide prevention work had been carried out in the Wentworth Valley Area Assembly. It was now a matter of persuading individual Wards if they would fund similar work
- The refresh of the action plan gave an opportunity to establish which partners were still missing/not engaging with the work
- The Police were obviously involved in the crisis but intervention after the event to hopefully prevent a further attempt was really important
- All Healthwatch Rotherham staff had received Safe Talk training and suicide prevention training

Resolved:- (1) That the Lead Officers from their organisations continue to assist with the implementation of the Better Mental Health for All Action Plan and the Rotherham Suicide Prevention and Self-Harm Action Plan.

(2) That the proposal for the Better Metal Health for All Group being the place to implement the section on loneliness within Aim 4 of the Health and Wellbeing Strategy be supported.

(3) That the revised Rotherham Suicide Prevention and Self-Harm Action Plan be submitted in December 2018.

(4) That annual progress updates be submitted to the Board on both action plans.

(5) That updates on the NHSE funding for suicide prevention and how this was being implemented locally be submitted to the Board.

ACTION: Ruth Fletcher-Brown

17. FINAL INTEGRATED CARE PLACE PLAN

Chris Edwards, Chief Operating Officer, RCCG, presented the final draft of the Rotherham Integrated Health and Social Care Place Plan for information and endorsement.

Rotherham's first Integrated Health and Social Care Place Plan (Place Plan) was published in November 2016. It had now been refreshed to facilitate alignment with the revised Health and Wellbeing Strategy agreed in April 2018.

The version attached addressed all the comments received from partners and all sections were complete with the exception of some minor additions which would be completed shortly. It should also be noted that there was an additional priority within the Children and Young Peoples Transformation Workstream in relation to Maternity and Better Births:-

The areas to be completed were:-

- Completion of milestones and KPIs for the new Maternity and Better Births priority
- Addition of a patient story for Children and Young Peoples Transformation Workstream

Resolved:- That the final draft of the Integrated Health and Social Care Place Plan be endorsed.

18. ROTHERHAM INTEGRATED CARE PARTNERSHIP AGREEMENT

The Board received the final draft of the Rotherham Integrated Care Partnership Agreement.

The Agreement was intended to strengthen the governance arrangements underpinning the Rotherham Integrated Care Partnership Place Plan and to capture the culture of how the Place Plan Board worked together.

The Agreement was based on a Memorandum of Understanding approach and aimed to provide an overarching arrangement to oversee the development of integrated multi-agency solutions for health, care and support across Rotherham. The Agreement was not intended to be

legally binding except for specific elements such as confidentiality or intellectual property. However, if areas such as payment mechanisms and risk sharing/outcomes performance were developed over time, the partner organisations would need to consider moving to a legally binding agreement in the future.

Clause 21 of the Agreement confirmed that the Council did not have the obligations of the other parties to the Agreement in relation to the South Yorkshire and Bassetlaw Integrated Care System.

Resolved:- That the Agreement be approved and the Chief Executive be delegated, in consultation with the Chair, authority to finalise and sign the Agreement.

ACTION: Councillor Roche/Sharon Kemp

19. HEALTHWATCH ROTHERHAM ANNUAL REVIEW 2017-18

The Board received, for information, the 2017-18 annual report of Healthwatch Rotherham.

Attention was drawn to the review of CAMHS undertaken by Healthwatch Rotherham. A report would be produced by the end of the month which would contain some far reaching recommendations.

20. ADULT SOCIAL CARE VISION FOR ROTHERHAM

The Board received, for information, the Adult Social Care Vision 2017-2020, which was based on 3 key themes:-

Theme 1	Act to help yourself
Theme 2	Act when you need it
Theme 3	Act to live your life

It was a very important document that set up the framework by which current decisions were made.

21. HEALTH AND CARE SELECT COMMITTEE - REVIEW OF INTEGRATED CARE SYSTEMS

The Board noted the House of Commons Health and Social Care Committee "Integrated care: organisations, partnership and systems" seventh report of session 2017-19.

22. THE LOCAL GOVERNMENT ASSOCIATION GREEN PAPER: THE LIVES WE WANT TO LEAD

The Board noted the Local Government Association Green Paper for Adult Social Care and Wellbeing "The Lives We Want to Lead".

23. INTEGRATED CARE PARTNERSHIP PLACE BOARD

The notes of the minutes of the Rotherham Integrated Care Partnership Place Board held on 6th June, 4th July and 1st August, 2018, were noted.

24. DATE AND TIME OF NEXT MEETING

Resolved:- That a further meeting be held on Wednesday, 21st November, 2018, commencing at 9.00 a.m. venue to be determined.