

HEALTH AND WELLBEING BOARD
13th January, 2021

Present:-

Councillor David Roche	Cabinet Member, Adult Social Care and Health (in the Chair)
Ben Anderson	Director of Public Health, RMBC
Steve Chapman	South Yorkshire Police
Lesley Cooper	Healthwatch Rotherham
Dr. Richard Cullen	Strategic Clinical Executive, Rotherham CCG
Chris Edwards	Chief Operating Officer, Rotherham CCG
Councillor R. Elliott	Health Select Commission
Shafiq Hussain	Chief Executive, Voluntary Action Rotherham
Suzanne Joyner	Strategic Director, Children and Young People's Services, RMBC
Sharon Kemp	Chief Executive, RMBC
Anne Marie Lubanski	Strategic Director, Adult Care, Housing and Public Health, RMBC
Councillor J. Mallinder	Improving Places Select Commission
Dr. Jason Page	Governance Lead, Rotherham CCG
Kathryn Singh	RDaSH
Michael Wright	Deputy Chief Executive, Rotherham Foundation Trust (representing Richard Jenkins)

Report Presenters:-

Colin Ellis	Occupational Health Advisor
Ruth Fletcher-Brown	Public Health Specialist
Kate Green	Public Health Specialist, RMBC
Scott Matthewman	Interim Assistant Director, for Commissioning

Also Present:-

Gavin Jones	South Yorkshire Fire and Rescue Service
Becky Woolley	Policy Officer, RMBC
Dawn Mitchell	Governance Adviser, RMBC

Apologies for absence was received from Councillor Watson and Paul Woodcock (RMBC).

130. DECLARATIONS OF INTEREST

There were no Declarations of Interest made at the meeting.

131. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no questions from members of the press and public.

132. COMMUNICATIONS

It was noted:-

The Board's response to Community Care Next Steps paper had been submitted in accordance with the 8th January, 2021 deadline. The Chair thanked Board members for providing comments.

Healthy Weight Group – any member who wished to become involved in the Group/Chair the Group should contact Becky Woolley as a matter of urgency.

133. MINUTES OF THE PREVIOUS MEETING HELD ON 11TH NOVEMBER, 2020

The minutes of the previous meeting of the Health and Wellbeing Board were considered.

Resolved:-

(1) That the minutes of the previous meeting held on 11th November, 2020, be approved as a correct record.

(2) That Sharon Kemp follow up Minute No. 124(2) (5 Ways to Wellbeing video).

Action:- Sharon Kemp to follow up

134. UPDATE FROM THE LOCAL OUTBREAK ENGAGEMENT BOARD

Sharon Kemp, Chief Executive RMBC, together with Ben Anderson, Director of Public Health, and Chris Edwards, Chief Operating Officer RCCG, gave the following verbal update on behalf of the Local Engagement Board:-

The country had gone into another national lockdown as from 4th January, 2021. Briefings had taken place across the different partners in terms of the new rules and guidance. In terms of the current restrictions, Legislation had been laid until March with review periods within which allowed different restrictions to be put in place if the Government deemed it.

Rotherham Incident Management - activity continued with the Bronze Group meeting on a daily basis; this Group met with a range of partners looking at key local issues and ensured that actions was taken.

Health Protection Board – Ben Anderson now Chaired the meeting which continued to meet weekly. The Outbreak Engagement Board meeting every 2 weeks.

Testing Facilities - There were still 4 testing facilities in Rotherham – Midland Road, Forge Island, Dinnington and Maltby. There was capacity within the system so no challenges were being seen within those testing centres. A lateral flow testing facility had now opened in Riverside House.

Community Testing - Announcements had been made recently with regard to community testing focussing on those who had to go to work and were asymptomatic. The prospectus from Government had only been received the previous evening so was currently being looked at to ascertain what was being offered to local areas and would be considered at the Local Outbreak Engagement Board.

Epidemiology – As of 6th January, the current data report showed that the case rate was 307.4 per 100,000 down on the previous 2 days i.e. 326 cases as of 4th January.

This level put Rotherham mid-table for Yorkshire and Humber and in the bottom 25% nationally.

With regard to the over 60's, the rate was 250.6 per 100,000, significantly lower than the national average but still a high rate and the age group which put most of the pressure on to the Trust. However, there were very high rates in younger adults. Currently the average age of patients in the Trust was in the high 50 age group rather than the over 60's.

Prevalence of the new variant of Covid in Rotherham – Data received from Public Health England this week showed that at the end of December up to ¼ of Rotherham's cases were of the new variant. It was really important for the Board to be aware that the new variant was in Rotherham but not the most prevalent variety at the moment but, because of the evolution of the disease, it was expected to become predominant over the new few weeks/months with the effects of lockdown reducing the spread. It was likely that the lockdown would reduce the spread of the old variant because of it being less transmissible.

All the health and social care workforce needed to be made aware of existence of the new variant as its high transmissibility rate did mean that any lapse in PPE and good Covid safe practice was more likely to have worse consequences. That also applied to the rest of community in terms of individuals and wider workplaces, education settings etc.

Vaccinations – There were 6 vaccination sites in Rotherham – the Hospital (focussing on health and social care staff) together with 5 primary care GP-based vaccination centres – Bramley, Anston, Wath, St. Ann's and Rawmarsh – which were patient focussed. It was a real success story with general practices in Rotherham having done a fantastic job.

The latest figure was that in South Yorkshire 72,000 people had been vaccinated already.

It was expected that Rotherham and South Yorkshire should be able to meet the Prime Minister's target of all the 4 top groups vaccinated by mid-February.

Resolved:-

That the update be noted.

135. AIM 1: ALL CHILDREN GET THE BEST START IN LIFE AND GO ON TO ACHIEVE THEIR FULL POTENTIAL

Suzanne Joyner, Strategic Director CYPS, and Dr Jason Page, Rotherham CCG, gave the following powerpoint presentation:-

Aim 1 – All children get the best start in life and go on to achieve their full potential

Priority 1: Develop our strategy for a positive 1001 days – What's Working Well

There continues to be a focus on delivering against the ambition of plans to transform maternity care

- TRFT continue to work towards achieving the Continuity of Care target of 35% by March 2021 (currently exceeding target – 38% as at December 2020)
- TRFT engaged in all of the Maternity Transformation Plan workstreams
- The prevention maternity workstream was progressing well with smoking in pregnancy, infant feeding and healthy weight taking priority
- An action being was being developed to enhance maternity engagement with BAME and vulnerable groups

Adult Care, Public Health and Housing Directorate will lead the strategic re-commissioning of the 0-19 Service:

- A Project Board has been established
- The Board was recommending that a Cabinet paper be developed with revised timelines and seeking permission to re-tender the Service acknowledging the delays that have been incurred due to the pandemic
- The revised timeline would support wider consultation and collaborative commissioning between Public Health and CYPS
- The re-commissioned Service would be fully aligned with wider children's pathways and would develop pathways with other Public Health commissioned services including Sexual Health and Weight Management

Issues to address

- It had not been possible to realise the full potential of mapping the services and support available across the first 1001 days of a child's life

- Capacity for ongoing engagement from providers and stakeholders was likely to remain challenging as the system responds to the Covid-19 pandemic
- Capacity for commissioning 0-19s and the market for provider response was challenging and may require the consideration of extension to the current contract
- For maternity there was reduced capacity within the SY&B ICS Team to co-ordinate activity across the areas until vacant posts were recruited to

Next Steps

- Refresh the Rotherham Local Maternity Transformation Plan
- Continue engagement with maternity stakeholders particularly in relation to the smoking in pregnancy, infant feeding and healthy weight priority areas of work
- Rotherham to input into the future development of the SY&B Maternity Prevention Work Plan to embed outcomes and emerging themes from consultation
- Formal agreement of 0-19 re-commission plans by RMBC Cabinet
- Implementation of plans to re-commission the 0-19 Service including full stakeholder engagement and exploration of opportunities to align delivery across services to meet the priority needs of Rotherham children and deliver the National Healthy Child Programme
- Linking in with Healthy Weight work taking place within Aim 3

Priority 2: Support positive mental health for all children and young people – What's Working Well

- The implementation of the Mental Health Trailblazer in Schools 'With Me in Mind' was demonstrating positive outcomes
- The second mental health survey ran between 1st-26th October. 4,203 young people participated in the survey. This was a 35% increase from the 2,737 that participated in June 2020. The findings had also been shared with CYPS leadership teams and the Public Mental Health and Wellbeing COVID Group for them to identify any actions to address key areas of concern
- DFE Wellbeing for Education Return programme has been rolled out across schools during the Autumn terms. 141 participants had attended and then cascaded learning onwards in their school
- Rotherham's Neuro-Developmental Pathway had been re-designed to ensure that children were supported regardless of whether they had a formal diagnosis

Issues to address

- Children and young people were reporting that Covid-19 was having an impact on their mental health
- Whilst positive that this was being recognised, there was a need to support the school workforce and wider system to respond to children and young people's needs

- The results from the October 2020 survey compared to June 2020 showed that:
 - 7% increase in young people feeling anxious
 - 11% increase in young people feeling stressed
 - A decline in young people feeling positive and managing problems well
 - An increase in young people feeling confused, uncertain and sad

Next steps

- Schools will use the findings of the mental health survey to support children and young people across the new term
- Plans may now need to be revised in light of announcements of further school closures
- The importance of supporting staff wellbeing has been highlighted through the DfE Wellbeing for Education Return programme
- An ongoing programme of CPD and opportunities for networking/sharing good practice was being developed
- Rotherham was preparing to bid for any forthcoming opportunities to extend Future in Mind
- The annual Lifestyle Survey would integrate questions from the mental health survey in 2021
- The Covid-19 Mental Health Group and Social, Emotional and Mental Health Strategy Delivery Group would retain oversight of these areas of work

Priority 3: Support children and young people to achieve their full potential – What's Working Well

- As part of the national lockdown, vulnerable groups and children with Education, Health and Care Plans continued to have access to education despite the wider school closures. RMBC and school were prioritising access to education for these groups and other cohorts which could be determined vulnerable
- A well embedded and supported Incident Management structure was in place to support Covid-19 clusters and outbreaks. This was a supportive and multi-agency response which provided additional access to direct support for schools and their students
- The Elective Home Education (EHE) multi-agency governance group had remained a strong mechanism to make sure a strong level of support was available for students/families who had elected to home educate. Work had taken place with Ofsted to look at areas of development across this
- SEND Strategic Board had developed an outcomes framework and performance dashboard to monitor the impact of school closures and intermittent school attendance on children and young people with SEND

Issues to address

- The continued impact of Covid-19 was having on education was clear. The new national lockdown would limit the access to education for only defined groups and the wider holistic support that schools had on the wellbeing of its students would be impacted. Schools would move to supportive working practices but the face-to-face supportive interaction that was offered through school support raised a clear concern
- Increased EHE numbers across the Autumn term sat outside normal trends. The primary reason given from the elective choice to home education (60% of new students) was fears around Covid-19 and contraction of the virus in schools
- The ongoing impact of the pandemic on the wider wellbeing of children and young people was a key concern. With a number of student groups having reoccurring periods of self-isolation, the continuum of support provided by schools was being disrupted. Although schools were adapting to meet the needs of their students, the visibility of vulnerable students remained an area of concern

Next steps

- The prioritisation of EHE in discussions with school leaders, Ofsted and the DFE was an ongoing priority. Outreach work and support to provide families with the full overview of EHE responsibilities and routes of support continued to be enhanced
- Close work with school leaders to look at ways of minimising the impact of Covid-19 on school attendance, wider regular testing and daily testing would be available for secondary schools from January 2021. The prioritising of students that were vulnerable or had a Social Worker had been enhanced as part of the phased start to Spring term in the secondary phase of education

Discussion ensued with the following issues raised/highlighted:-

- Strong engagement with the Office of the Regional School Commissioner
- Recommended work to re-establish the Rotherham Education Strategy Group which was key and would continue to help drive that strong collaboration across the sector
- SEND Sufficiency work continued at a pace
- Was there a better understanding from the results of the Mental Wellbeing survey conducted of any impacts on children or any actions/priorities schools should be taking? This would also be picked up by the Public Mental Health and Health Wellbeing Covid Group

Suzanne and Jason were thanked for their presentation.

Resolved:-

- (1) That the presentation be noted.

(2) That the Strategic Director of Children and Young People's Services ascertain if there was a deeper analysis of the results of the Mental Wellbeing survey available.

Action:- Suzanne Joyner

136. AIM 3: ALL ROTHERHAM PEOPLE LIVE WELL FOR LONGER

Sharon Kemp, Chief Executive RMBC, gave the following powerpoint presentation:-

Priority 1: Build a social movement to support local people to be more physically active to benefit physical and mental wellbeing – What's Working Well?

The Moving Rotherham Partnership leading and supporting with:

- Launched #MovingRotherham campaign
- Sport England 'Tackling Inequalities Fund' funded 21 projects
- Shaping Places for Healthier Lives – discovery stage project looking at physical activity and green spaces
- Local 'Beat the Street' project commissioned – 'game phase' taking place from 17th March 2021
- Women's Euros taking place 2022 and local 'Legacy Plan' developed

Issues to address

- Not enough people physically active in Rotherham
- Covid-19 having deconditioning effects on older people
- Loss of lean body mass can result in decreased immunity and increased risk of infection
- Main motivation for older people to be active was social contact
- Covid shown we need to think about 'physical activity' differently – building movement into every day life

Next Steps

- Continue to push #MovingRotherham through the Rotherham Activity Partnership
- Develop local MECC physical activity training package to roll out
- Utilise free resources including Moving Professionals and Clinical Champions training where appropriate
- Communication messages linked to 'Be Active' theme as part of 5 Ways to Wellbeing

Priority 2: Ensure support is in place for carers – What's working well

- Monthly partner meetings in place to ensure unpaid carers were supported throughout the pandemic
- 142 unpaid carers had accessed the Carers Grant – C19 Funding Programme delivered by Crossroads Care on behalf of the Council
- Regular update meetings with Carers Forum in place to ensure information reaches unpaid carers in a timely manner
- Work underway with partners to refresh the Rotherham Carers Strategy

- Review of the Carers Centre underway to look at what unpaid carers would need from a future face-to-face offer
- Working with colleagues from around Yorkshire and Humber to share ideas and explore best practice to ensure the future Rotherham unpaid carer offer was of the highest quality

Issues to address

- National lockdown – creating impact on carers with increased anxiety, loneliness and isolation
- Capacity challenges due to increased requirement for organisations to support carers

Next steps

- Carer profile needs to be refreshed in light of Covid-19 as agreed at Health and Wellbeing Board (deadline of 10th March 2021)
- Evaluate carer assessments within Adult Social Care to understand the Covid-19 impact upon unpaid carers (deadline of 10th March 2021)
- Finalise the report on the future of the Carers Centre (deadline of 25th February 2021)
- Carers mapping work to look at a carer journey document that aligned with the refreshed guidance and future strategy (deadline of 29th April)

Priority 3: Develop a whole-system approach to tackling obesity in Rotherham with consideration of the impact of Covid-19

Proposal – ‘Healthy Weight Champions’ and developing local plan

- Council formally adopted Local Authority Declaration on Healthy Weight in January 2020 providing the framework for a local plan
- Develop a local NHS Healthy Weight Declaration and Partner Pledges to sit alongside
- Suggest each partner organisation nominates a ‘Healthy Weight Champion’
- Champions to work with Public Health lead to develop the local plan

Discussion ensued on the presentation with the following issues raised/highlighted:-

- Continued participation in the Shaping Places for Healthier Lives. Now at Stage 3, the Discovery Stage, with £20,000 available for research into some of the key challenges and barriers for people actually living healthy lives. Information from that would inform a final bid application which would be up to £300,000 bid for a 3 year period
- Excellent feedback from the recipients of the electronic equipment purchased through the Unpaid Carers Grant. Work was taking place on Phase 2 to make further purchases

Sharon was thanked for her presentation.

Resolved:-

(1) That the presentation be noted.

(2) That Board members notify Kate Green of the organisation Champion by the end of January to work with Public Health lead on healthy weight.

(2) That work continue on developing a partnership Healthy Weight Plan based on the proposal taking into consideration the impact of Covid-19.

Action: All Board members/Kate Green

137. SECTION 75 FRAMEWORK AGREEMENT AND BETTER CARE FUND (BCF) CALL-OFF PARTNERSHIP/WORK ORDER

Scott Matthewman, Interim Assistant Director, for Commissioning, presented a report outlining progress on the development of a new Section 75 Framework Agreement and Better Care Fund (BCF) Call-Off Partnership/Work Order for 2020/21.

It was noted that the Council and CCG had finalised, agreed and signed the Section 75 Framework Agreement and BCF Call-Off Partnership/Work Order, and had been fully agreed by the BCF Executive Group for the current financial year.

There had been some delays nationally with the planning requirements and guidance from the centre due to the current pandemic and there had been no requirement to undertake any quarterly planning returns as normal with BCF. However, there would be a requirement for a year end summary a template for which had been produced by the national team. Once received this would be populated and fed through the governance structure around the BCF Executive Group.

There was continued dialogue with the national team and BCF lead around planning guidance for the next financial year. When known the local planning officer would be informed.

Resolved:-

That the BCF Call-Off Partnership/Work Order for 2020/21, incorporated into the Section 75 Agreement, be noted.

138. REFRESHED HEALTH AND WELLBEING BOARD PRIORITIES AND ACTION PLAN

Further to Minute No. 123 of the meeting held on 11th November, 2020, Becky Woolley, Policy Officer, presented the first update on the Health and Wellbeing Action Plan.

Good progress was being made with the majority of actions on track despite all Covid-19 pressures and none considered to be significantly off track.

A part of the refresh was how partners could understand work inequalities and strengthen the understanding particularly in light of the current pandemic. Work was taking place mapping out all the data available across the partnership and what projects were taking place with the aim of submitting a comprehensive overview which would then inform any gaps.

It was noted that a lot of work had been taking place during the pandemic centred around the Rotherham Community Hub and support that befriending had provided which was being managed through work with the voluntary and community sector.

Work continued between the 2 Rotherham Safeguarding Boards with the Board's Chair leading on some of the work.

Resolved:-

That the report be noted.

139. SUICIDE AND FIVE WAYS TO WELLBEING UPDATE

Further to Minute No. 124 of the meeting held on 11th November, 2020, Ruth Fletcher-Brown, Public Health Specialist, presented an update on suicide prevention and Five Ways to Wellbeing.

Suicide Prevention

- Currently there was little evidence specific to Covid-19 and suicide prevention, the national message was that many of the main priorities for suicide prevention remained the same during the pandemic. However it was thought that certain sub-groups may be more at risk i.e. children and young people, prisoners and people with gambling addictions
- The Local Government Association (LGA) and the Association of Directors of Public Health (ADPH) had jointly produced a briefing for Directors of Public Health on the public mental health and wellbeing issues arising from the Covid-19 outbreak. Preventing mental health problems and promoting mental wellbeing amongst people living and working in Rotherham required a whole system approach
- The Better Mental Health for All Group already existed to address the promotion of mental wellbeing for people living and working in Rotherham as well as oversight of the implementation of the Loneliness Action Plan for the Borough. This Group had formed the Rotherham Public Mental Health and Wellbeing Covid-19 Group and had included other stakeholders where gaps had been identified. Its primary purpose was to develop and implement an action plan addressing the potential mental health impacts of Covid-19 across the lifecourse. It recommended and took collaborative action on local prevention and mental health promotion planning in relation to Covid-19 in the short, medium and long term for people living and working in Rotherham

- For some time Rotherham had looked at suspected suicides in real time to ensure that support could be put in place for those bereaved/affected and to mitigate against further suicides. This was now collated through the ICS Real Time Surveillance Project led by South Yorkshire Police
- The real time data had been used during the pandemic to direct the actions within local plans, to offer support to those bereaved/affected/exposed to suicide and to mitigate against further suicides
- The Suicide Operational Group had updated their action plan in line with emerging risk factors during the pandemic
- Be the One Campaign promoted throughout the pandemic with a focus on women in October/November and the wider population in the leadup to Christmas/New Year. The Campaign was also promoted across the partnership as part of Safeguarding Awareness Week in November 2020
- Zero Tolerance Suicide prevention training promoted across the Council and other partners
- NHSE Suicide Prevention Funding Year 3 had enabled Rotherham to promote the third round of the small grants scheme to community groups who were addressing the underlying causes which could lead to suicide. It was led by Rotherham CCG, with input from Public Health
- The Listening Service for those bereaved/affected by suicide had been promoted throughout the pandemic. The Service and the Suicide Listening Service had been out to tender with the successful provider commencing in January 2021. Both Services were funded until January 2022
- The Care Pathway for Children and Young People Bereaved by Sudden Traumatic Death had been updated with input from practitioners and was now on the Tri-x-system for partners to adopt
- The programme of suicide prevention and self-harm training had been disrupted. Courses were being piloted and, subject to evaluation, a role out of training would be promoted in the Spring
- The Suicide Prevention Top Tips for Primary Care had been amended to include risk factors and groups emerging because of the pandemic

- Meetings had commenced by Survivors of Bereavement by Suicide (SOBS) to advertise for volunteers to be training to run a Rotherham peer support group
- Ongoing training together with ICS colleagues looking at bereavement for children and young people
- Action plans had been looked at in light of Covid-19 and updated

Public Mental Health and Wellbeing including Five Ways to Wellbeing

- Partners of the Public Health and Wellbeing Covid-19 Group had worked on an action plan which was being implemented by partners. It included work on crosscutting themes such as bereavement and loneliness
- A Rapid Mental Health Impact Assessment produced to inform decision makers on how the pandemic might have impacted upon the mental health and wellbeing of local communities
- Public Health England had recommended that local authorities capture the view of children and young people to establish the state of their mental health and wellbeing during the lockdown. Following a review by the Yorkshire and Humberside Regional Public Health Teams of surveys already undertaken, Rotherham Public Health had worked with CYPS to adapt the survey to suit the Borough. This had been administered twice in Rotherham with 4,203 young people completing the second survey. The results were given to individual schools for them to develop their own actions/responses to findings. The SEMH Strategy Group and Public Mental Health and Wellbeing Group were looking at key areas of concern to address
- RCCG's Rotherhive website promoted across all partners and information sent to employers through the Be Well@work project. The project promoted mental health resources to employers
- Joint working with RCCG to look at promoting mental health support to employers
- A variety of workshops for Council employees run by Public Health leads
- RMBC staff wellbeing toolkits shared with other partners
- Five Ways to Wellbeing campaign messages to promote mental wellbeing with staff during the Summer and Autumn months. Also used by the Creative Recovery Programme to promote activities each month

- Multi-agency task and finish group looked at mapping bereavement provision locally and nationally with the information now promoted on Rotherhive

Discussion ensued with the following issues raised/highlighted:-

- The Chair, Ruth and Becky Woolley had been asked to make a presentation at the Westminster Policy Forum later in the month on the work RMBC and its partners were doing with regard to loneliness
- It had been a whole system effort and was a really good example of Place based working
- The Bereavement Service was receiving good reviews
- Gathering evidence from post-traumatic stress from Covid especially for staff who were working on the frontline
- When there was a death by suicide work did take place to ascertain if the pandemic had been a factor and reporting thereon. Good work had been done together with the support of the local coroner

Resolved:-

(1) That the updates on suicide prevention and Public Mental Health including Five Ways to Wellbeing be noted.

(2) That Board members commit to the forthcoming review of the Rotherham Suicide Prevention and Self Harm Action Plan.

(3) That Board members ensure that their respective organisations maintain their commitment to the work of the Public Mental Health and Covid-19 Group.

Action: All Board Members

140. WORKPLACE WELLBEING: BE WELL @ WORK AWARD

Colin Ellis, Occupational Health Advisor, gave the following powerpoint presentation on the Rotherham Workplace Health offer to businesses:-

Our offer of support to you

- Free workplace visit
- Workplace health needs assessment
- Share workplace health information
- Provide training to support the scheme
- Accredited your business with the Be Well@Work award

Be Well@Work Award Overview

- Audit tool to demonstrate best practice in employee health and wellbeing
- Suitable for businesses of all sizes
- Includes mandatory requirements
- Allows progression – bronze, silver and gold
- Allows a business to select from a range of themes

Mandatory Requirements

- Designate a Workplace Co-ordinator
- Undertake the Workplace Health Needs Assessment
- Complete an action plan
- Undertake a number of health campaigns

Level of award

- Bronze, silver and gold
- Compulsory themes of human resources, absence management and health and safety
- Bronze - compulsory plus 3 themes
- Silver – compulsory plus 6 themes
- Gold – compulsory plus 8 themes

Optional Themes

- Consultation and communication
- Training and development
- Mental Health
- Ageing workforce
- Long term conditions/MSK
- Smoking
- Physical activity
- Healthy eating
- Drugs and alcohol

Process to achieve the award

- Undertake the Workplace Health Needs Assessment
- Decide the level of award
- Select the optional themes
- Upload the evidence onto the Create Wheel portal
- The Workplace Health Advisor checks the evidence uploaded
- Interviews with staff
- Site tour
- Post-assessment report
- Award certificate

Discussion ensued with the following issues raised/highlighted:-

- The award enabled employers to start thinking about how they could look after the wellbeing of their staff
- If any of the partners were interested to signing up to the award scheme, they should contact Colin
- The award lasted for 2 years. If an employer achieved Bronze and wanted to move onto Silver, they could be reassessed before the end of the 2 years
- A number of awareness sessions were offered e.g. mental health awareness, sleep awareness, healthy eating and alcohol awareness

- Training of Workplace Wellbeing Champions
- Close working with Barnsley and Doncaster with any good practice shared and networking
- Ability to provide for an individual GP surgery

Colin was thanked for his presentation.

141. FOOD ADVERTISEMENT

Further to Minute No. 127 of the previous meeting, Kate Green, Public Health Specialist, reported that little progress had been made due to lack of capacity within the system.

Resolved:-

That a further report be submitted to a future Board meeting when the current situation eased and capacity was available to look at it at the project in more detail.

Action: Becky Woolley/Kate Green

142. ISSUES FROM THE PLACE BOARD

Sharon Kemp, Chief Executive RMBC, and Chris Edwards, Chief Operating Officer RCCG, provided the following update:-

- The Place Board was currently operating as the Rotherham Gold Command for Health and Social Care
- Once a Government response was received regarding the Integrated Care Paper it would be shared with the Board at the appropriate time

Resolved:-

That the update be noted.

143. DATE AND TIME OF NEXT MEETING

Resolved:-

That a further meeting be held on Wednesday, 10th March, 2021, commencing at 9.00 a.m.