

HEALTH AND WELLBEING BOARD

22nd June, 2022

Present:-

Councillor David Roche	Cabinet Member, Adult Social Care and Health Chair
Ben Anderson	Director of Public Health
Councillor Cusworth	Cabinet Member, Children and Young People
Chris Edwards	Chief Operating Officer, Rotherham CCG
Dr. Jason Page	Governance Lead, Rotherham CCG
Natalie Palmer	Healthwatch Rotherham
Katherine Singh	RDaSH
Ian Spicer	Strategic Director, Adult Social Care
Michael Wright	Deputy Chief Executive, Rotherham Foundation Trust (representing Richard Jenkins)

Report Presenters:-

Ruth Fletcher-Brown	Public Health
Kate Gray	Public Health
Sally Jenks	Public Health
Lorna Quinn	Public Health
Amanda Raven	Community Safety
Rebecca Woolley	Public Health

Also Present:-

Councillor Aveyard	
Leonie Weiser	Policy Officer

Apologies for Absence

Richard Cullen, Shafiq Hussain, Sharon Kemp, Alison Smith, Councillor Thompson, Shayne Tottie and Paul Woodcock.

1. DECLARATIONS OF INTEREST

There were no Declarations of Interest made at the meeting.

2. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

The Chair invited the member of the public present to ask his question:-

“A lot of work has been taking place in South Yorkshire with regard to Stroke Services and reviewing Services. I would like to understand the role of this Board in the prevention of strokes which were devastating to the patients as well as a great deal of resources both in health and social care.”

The Chair replied that the key role of the Board was prevention and integration. A Board agenda item today was the Prevention and Health Inequalities Strategy and action plan part of which was around prevention of long term conditions including CVD, hypertension etc. It was part of the

Strategy going forward as well as part of the NHS long term plan. There had been an active role in the reconfiguration of the Hyper Acute Stroke Service to improve performance and heavily involved in consultation with the public to ensure that Rotherham patients had the best outcomes. Work was taking place to bring health checks to Rotherham and it was planned to include blood pressure checks when someone attended for a CT scan.

3. COMMUNICATIONS

(1) The Chair reported that this was the last meeting of the Health and Wellbeing Board in its current form due to the forthcoming Integrated Care Partnership. Richard Cullen, Vice-Chair, would no longer be a member of the Board due to the changes that were taking place.

The Chair thanked Richard for the work that he had undertaken on behalf of the Board.

(2) The Chair had met with Honour Rhodes from the Tavistock Clinic with regard to a request to consider Rotherham signing a Relationship Charter. This was to be discussed at the Executive Group with a view to inviting her to a future meeting of the Board.

4. MINUTES OF THE PREVIOUS MEETING

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

Arising from Minute No. 57(2) (B:Friend), it was noted that there was no update to report.

Arising from Minute No. 58 (Director of Public Health Report), it was noted that it would be discussed at the Executive Group meeting the following week.

Resolved:- That the minutes of the previous meeting held on 16th March, 2022, be approved as a true record.

5. ROTHERHAM SUICIDE PREVENTION AND SELF-HARM ACTION PLAN 2022-23

Ruth Fletcher-Brown, Public Health Specialist, presented the Rotherham Suicide Prevention and Self-Harm Action Plan 2022-2023.

Suicide prevention was a priority area within the South Yorkshire and Bassetlaw Integrated Care System (ICS) and joint work was taking place across the ICS to address the following areas:-

- Working with the media in relation to suicide prevention
- Establishing, implementing and evaluating one real time surveillance data system across South Yorkshire, Rotherham Safer Neighbourhood Service. South Yorkshire Police had been doing this work for years and had been key in sharing good practice across the region
- Supporting those people bereaved and affected by suicide
- Working with Sheffield University to conduct an audit of coroners' records to build up a richer narrative about the wider personal, economic and societal factors that contributed to the suicide that could be used to inform the development of future local and ICS level suicide prevention work

Locally suicide prevention was a priority area within the Rotherham Place Plan and the Health and Wellbeing Board Strategy.

The action plan detailed the governance arrangements, both the national and local picture and a findings summary of the South Yorkshire and Bassetlaw suicide audit.

It was noted that a second suicide prevention symposium would be held on 12th October in Rotherham.

Discussion ensued with the following issues raised/clarified:-

- A local increase had started to be seen in the number of deaths by suicide which was also reflected across some areas in South Yorkshire. The real time data submitted was being monitored
- Work was taking place with Communications colleagues with regard to possibly relaunching the Be the One Campaign in September
- Work would also be launched in September for children and young people that had been bereaved by suicide

Resolved:- That the report be approved.

6. JOINT STRATEGIC NEEDS ASSESSMENT UPDATE

Lorna Quinn and Kate Gray gave the following powerpoint presentation on the Joint Strategic Needs Assessment (JSNA):-

What does the JSNA cover

- Looks at the current and future health and care needs of local populations to inform and guide the planning and commissioning of health, wellbeing and social care services within a local authority area
- Takes a wide view of health
 - Concerned with wider social factors that have an impact on people's health and wellbeing such as housing, poverty and employment
 - Identifies health inequalities

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- Identifies gaps in health and care services documenting unmet needs
- Has a wide range of inputs
 - Cross-Council and multi-partner input required
 - Nearly 300 indicators from 10 teams and bodies

What's new for 2022

- New small geography sections so users can access and compare data at a smaller geographical level in Rotherham
- Governance aspect – all sections need approval from relevant team/data lead/Directorate
- A suggested quarterly newsletter to a subscribed group which will incorporate new data where refreshed i.e. fingertips data
- A 'Rotherham profile' that details key data and will be updated quarterly alongside the newsletter
- Health Needs Assessments to be linked to appropriate JSNA document (as executive summaries)

JSNA Data Update

- Existing indicators updated
- Additional data include fingertips data on mortality, life expectancy data and Culture and Leisure

What's Next

- The JSNA is live
- Dissemination
- Training opportunities
- Steering group
- Newsletter updates

Discussion ensued with the following issues raised/clarified:-

- Prior to any decisions being made within the Council, consultation should take place with the Rotherham data hub
- A seminar be held for Elected Members to raise awareness
- The more information inputted to the JSNA the better single picture of Rotherham derived
- An "idiots guide" would be useful

Resolved:- (1) That the Joint Strategic Needs Assessment update be noted.

(2) That arrangements be made for an Elected Members seminar to take place.

7. LEARNING FROM A DOMESTIC HOMICIDE REVIEW

Amanda Raven, Community Safety Officer, gave a presentation on a Domestic Homicide Review (DHR) that had taken place in 2019. A DHR followed a death of a person aged 16+ years resulting from violence, abuse or neglect by a person or had been in an intimate relationship or a member of the same household.

The presentation set out the details of the incident and the resultant learning.

Resolved:- That the presentation be noted.

8. ROTHERHAM PREVENTION AND HEALTH INEQUALITIES STRATEGY AND ACTION PLAN

Ben Anderson, Director of Public Health, and Becky Woolley, Public Health Specialist, presented the following powerpoint presentation:-

Background and Context

- March, 2021 – Director of Public Health presented at the Health and Wellbeing Board on the features of a prevention-led system
- May 2021 – ICP Prevention and Health Inequalities Enabler Group was established to help take forward the agenda
- October, 2021 – Officer to support the work came into post
- January-March, 2022 – Strategy and action plan produced and refined by the Enabler Group
- April, 2022 – ICP Place Board agreed the Strategy and action plan

People in Rotherham live well for longer

- Strengthen our understanding of health inequalities
 - Improve the understanding of health inequalities in Rotherham
 - Ensure that partners have access to bespoke data products
 - Ensure that data around health inequalities informs commissioning, decision making and service delivery
- Develop the healthy lifestyles prevention pathway
 - Reduce the prevalence of smoking in Rotherham and narrow the gap between our most and least deprived communities
 - Increase the proportion of people in Rotherham who are a healthy weight
 - Reduce alcohol-related harm for people in Rotherham
 - Support older people in Rotherham to retain their independence and age well
- Support the prevention and early diagnosis of chronic conditions
 - Reduce the health burden of cardiovascular disease in Rotherham
 - Improve the management of diabetes
 - Reduce the health burden of chronic respiratory disease in Rotherham

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- Increase the proportion of cancer diagnoses made at stage 1 or stage 2
- Ensure people get support with their mental health at the earliest possible stage
- Tackle clinical variation and promote equity of access and care
 - Narrow the gap in maternity outcomes for ethnic minority women and women from deprived communities
 - Reduce premature mortality for people with learning disabilities, autistic people and those with severe mental illnesses
 - Improve access to social prescribing for ethnic minority communities
 - Mitigate against digital exclusion
- Harness partners' roles as anchor institutions
 - Improve the health and wellbeing of our workforce across the place partnership
 - Employ people from deprived communities and inclusion groups in Rotherham
 - Increase our local spend to support Rotherham's economy
 - Reduce our environmental impact

Prevention and HI Strategy CORE20 PLUS5 Groups

- The Prevention and Health Inequalities Strategy has drawn from the CORE20 PLUS5 approach to identify and address health inequalities. This means focussing on:
 - The most deprived 20% of the national population (36% of the Rotherham population live in the 20% most deprived areas of England)
 - In addition to deprivation, we know that there are other factors that drive health inequalities. In the Development of the Strategy, several inclusion groups for Rotherham had been identified:-
 - Ethnic minority communities
 - Gypsy, Roma and traveller communities
 - People with severe mental illnesses (SMIs)
 - People with learning disabilities and neurodiverse people
 - Carers
 - Asylum seekers and refugees
 - Those in contact with the criminal justice system

Discussion ensued with the following issues raised/clarified:-

- The Rotherham Foundation Trust had its own health inequalities plan which would be considered at its Board in July
- Staggering gap in healthy life expectancy which it was hoped the preventative approach would narrow giving people better lives and better outcomes
- A jointly funded post with South Yorkshire Sports the role of which would be exploring how to get people more active particularly in areas of deprivation and those areas of low take up of physical activity

Resolved:- (1) That the Prevention and Health Inequalities Strategy be noted and supported.

(2) That the Board be provided with regular updates as to progress made.

9. BREASTFEEDING FRIENDLY BOROUGH DECLARATION

Sally Jenks, Health Improvement Principal, presented a report on the move to establish Rotherham as a Breastfeeding Borough and have a local Breastfeeding Declaration which would clearly set out the commitment of the Council, the Health and Wellbeing Board and key partner organisations to support change.

The report provided an update on the breastfeeding work in line with 1001 days and Healthy Weight Declaration the timeline for development was initiated in February 2022 and initially planned for the next 12 months. The action was grouped into the themes of:-

Initiatives
Policy and Workplace
Communications
Training and Embedding into Practice
Contracts and Procurement

Resolved:- (1) That the Board agree to the commitment to the principle of becoming a Breastfeeding Borough by endorsing the Declaration, becoming individual and organisational champions of the Breastfeeding Declaration and committing to making Rotherham Borough breastfeeding friendly.

(2) That challenge be brought where current policies or practice hindered progress towards the aims of the Breastfeeding Declaration and aim to become a Breastfeeding Borough.

(3) That further consideration be given as to where Rotherham could best focus efforts to improve and maximise opportunities to support the agenda.

(4) That the Council-based Breastfeeding Declaration action plan, including the governance and accountability processes, be agreed.

10. HEALTH AND WELLBEING BOARD ANNUAL REPORT

The Chair presented the Health and Wellbeing Board 2021/22 annual report with the aid of the following powerpoint presentation:-

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Our 2021/22

- May 2021
Board agrees that 4 key aims would remain the headline outcomes for the Board to work towards
Prevention and Health Inequalities Group meets for the first time
- July 2021
Consultation with members on refreshed priorities was launched
- September 2021
The Health and Wellbeing Board approved the renewed priorities and refreshed action plan
- February 2022
Government publishes Joining Up Care for People, Places and Populations. The Government's proposals for health and care integration
- March 2022
Board Executive group meet the designated Chair and Chief Executive Officer of the South Yorkshire Integrated Care Board

Refreshed Strategic Priorities

- Aim 1: All children get the best start in life and go on to achieve their full potential
Develop our approach to give every child the best start in life
Support children and young people to develop well
- Aim 2: All Rotherham people enjoy the best possible mental health and wellbeing and have a good quality of life
Promote better mental health and wellbeing for all Rotherham people
Take action to prevent suicide and self-harm
Promote positive workplace wellbeing for staff across the partnership
Enhance access to Mental Health Services
- Aim 3: All Rotherham people live well for longer
Ensure support is in place for carers
Support local people to lead healthy lifestyles including reducing the health burden from tobacco, obesity and drugs and alcohol
- Aim 4: All Rotherham people live in healthy, safe and resilient communities
Deliver a loneliness plan for Rotherham
Promote health and wellbeing through arts and cultural initiatives
Ensure Rotherham people are kept safe from harm
Develop a Borough that supports a healthy lifestyle

Key Areas of Progress – Aim 1

- RMBC Catering Services have achieved a Food for Life award
- Children's services developed a team Around the School (TAS) model of working, developing targeted support for children and young people in schools with a focus on mental health wellbeing, transition and including recovery from the impact of Covid-19 on pupils' wellbeing

Key Areas of Progress – Aim 2

- Launch of the Be the One campaign in September 2021
- Between April 2021 and March 2022 Council staff delivered training to over 100 people across the partnership to increase awareness on self-harm and suicide prevention

Key Areas of Progress – Aim 3

- Strengthening support for carers through the establishment of “The Borough That Cares Strategic Group”
- A variety of programmes were delivered to support local people to lead healthy lifestyles including reducing the health burden from tobacco, obesity and drugs and alcohol

Key Areas of Progress – Aim 4

- Rotherham Show was delivered in September 2021 in a Covid-safe way
- Making Every Contact Count (MECC) training was launched and delivered to over 150 people
- Public Health England (PHE) Better Mental Health Fund Befriender project was delivered

Our Challenges

- Health inequalities between our most and least deprived communities and between Rotherham and national average
- Mental health and wellbeing remains a concern and half of people aged 75 years+ live alone and were lonely
- More than 30,000 people were providing unpaid care in Rotherham
- A significant proportion of adults were physically inactive

Forward Look

- Refresh Joint Health and Wellbeing Strategy based on the agreed priorities, including delivering a loneliness plan, ensuring support was in place for carers and developing a Borough that supports a healthy lifestyle
- Engage with members across partner organisations and Board sponsors to update the Board’s action plan which underpins the Strategy
- Work with South Yorkshire and Bassetlaw ICS to shape future arrangements

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

- Acknowledgement that there were some gaps as details of the ICP were still awaited
- Several meetings that taken place with the new Chief Executive and Chair of the ICP

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- It had been a very difficult year due to the impact of Covid on key organisations and the necessary diversion of their resources
- The quarterly meetings with the South Yorkshire Health and Wellbeing Board Chairs and Chief Executives would continue
- Pleasing work carried out with schools to support children with their mental health needs that had been exacerbated by the pandemic
- The impact of the increasing levels of poverty and disadvantage in the Borough and the continuing pressure of those together with the fuel/energy crisis

Resolved:- (1) That the 2021-22 annual report be noted.

(2) That Aim updates be submitted to future Board meetings.

11. **ANNUAL REFRESH OF THE HEALTH AND WELLBEING BOARD'S TERMS OF REFERENCE**

Leonie Wieser, Policy Officer, presented the proposed refreshed Terms of Reference for the Board. It was noted that they would be submitted to the Board's September meeting following the launch of the ICP in July.

Currently there were 3 representatives of the Clinical Commissioning Group with proposals for them to be replaced by the Rotherham Place Director and 2 members of the ICP Board (Medical Director and local GP Federation). As the current Vice-Chair represented the CCG, it was proposed that the Medical Director become Vice-Chair.

With regard to venues, it was noted that Oak House was now available to host meetings of the Board.

Resolved:- (1) That the proposed terms of reference be agreed in line with the discussion at the meeting and updated as and when required.

(2) That the Medical Director, representing the ICP Board, be nominated as Vice-Chair of the Health and Wellbeing Board.

(3) That the Health and Wellbeing Board remain at its current number of members.

12. **HEALTH AND WELLBEING BOARD ANNUAL SURVEY FEEDBACK**

Leonie Wieser, Policy Officer, gave a verbal report on the annual survey feedback the response rate to which had been low.

Discussion took place on the methods used in the past to gather feedback which had included individual contact by Executive Group members and more recently a total online survey.

Resolved:- (1) That the feedback from the annual survey be noted.

(2) That the annual survey continue via the online method with 1:1 discussions arranged if requested.

13. HEALTH AND WELLBEING BOARD 2021/22 ACTION PLAN FINAL UPDATE AND REFRESH 2022-25

Ben Anderson, Director of Public Health, presented the action plan highlighting that the majority of the milestones were blue (completed) or green (on track).

It was noted that the refresh of the action plan would be submitted to the September Board meeting.

Discussion ensued on the wording of the priorities which had been agreed at the previous Board meeting. However, there was now a proposal to change the wording of the crosscutting priority slightly from “work in partnership to maximise value across the Borough” to “work in partnership to maximise the positive impact of anchor institutions’.

Also, at a meeting with the Chief Executive of Age Concern, it was requested that the mental health and health issues of those over 60 years of age be considered more specifically rather than generally. If Aim 4 was changed to “making Rotherham an Age Friendly Borough” it would be in line with the Health Inequalities Plan.

Resolved:- (1) That the action plan be noted.

(2) That the Board be kept informed on the ongoing work to refresh the action plan.

14. ISSUES ESCALATED FROM THE PLACE BOARD

There were no issues to report.

15. ROTHERHAM ICP PLACE BOARD

The minutes of the Rotherham ICP Place Board held on 2nd March and 6th April, 2022, were noted.

16. DATE AND TIME OF NEXT MEETING

Resolved:- That a further meeting of the Health and Wellbeing Board be held on Wednesday, 21st September, 2022, in Rotherham Town Hall.