

Committee Name and Date of Committee Meeting

Cabinet – 15 September 2025

Report Title

Rotherham Health and Wellbeing Strategy 2025-30

Is this a Key Decision and has it been included on the Forward Plan?

Yes

Strategic Director Approving Submission of the Report

Ian Spicer, Strategic Director of Adult Care, Housing and Public Health

Report Author(s)

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Ward(s) Affected

Borough-Wide

Report Summary

The 2020-2025 Rotherham Joint Health and Wellbeing Strategy is due to expire this year and work has been undertaken to develop a new one for 2025-2030. The Strategy, which has been considered and approved by the Health and Wellbeing Board, is presented here for endorsement along with an overview of the methods and evidence used to develop it.

The document sets out the vision '*to enable the people of Rotherham to live happy, healthy, independent lives within thriving communities, regardless of background or personal circumstance*'. The full Strategy is appended, along with a summary of the evidence gathered during the process.

Recommendations

That Cabinet endorse Rotherham's Joint Health and Wellbeing Strategy 2025-2030.

List of Appendices Included

- Appendix 1 Rotherham Joint Health and Wellbeing Strategy 2025-2030
- Appendix 2 Evidence summary slides
- Appendix 3 Part A – Initial Equality Screening Assessment
- Appendix 4 Part B – Equality Analysis Form
- Appendix 5 Climate Impact Assessment

Background Papers

[Health and Social Care Act \(2012\) :](#)

[The 2020 Rotherham Health and Wellbeing Strategy](#)

Consideration by any other Council Committee, Scrutiny or Advisory Panel

None

Council Approval Required

No

Exempt from the Press and Public

No

Rotherham Health and Wellbeing Strategy 2025-30

1. Background

- 1.1 Under the duties set out in the Health and Social Care Act (2012), Health and Wellbeing Boards (HWBBs) are responsible for publishing a local Health and Wellbeing Strategy, which sets out the priorities for improving the health and wellbeing of its local population. This Strategy should be informed by the Joint Strategic Needs Assessment (JSNA), and should lay out how the needs of the population should be addressed.
- 1.2 The Strategy is not an end in itself, but rather facilitates the development, co-ordination and implementation of plans and interventions across the local system. It sets out the vision, priorities and ways of working agreed by the HWBB to meet the needs identified within the JSNA with the primary aims of: improving the health, care and wellbeing of local communities and reducing health inequalities.
- 1.3 The 2020-2025 Rotherham Health and Wellbeing Strategy is due for refresh this year. Since September 2024, a cross-organisational working group has met to oversee a programme of consultation and evidence review to support the development of the 2025-2030 Strategy. This work has included: interviews with Board members; a JSNA evidence review; a review of health and care related consultations undertaken during the past five years; a stakeholder survey; and direct engagement with the public.

2. Key Issues

- 2.1 The Strategy presented here covers the vision, aims and ways of working to direct the work of the Board and its partners over the next five years. The vision is: *to enable the people of Rotherham to live happy, healthy, independent lives within thriving communities, regardless of background and personal circumstance.*
- 2.2 Four aims have been developed to support the vision, which focus on: children and young people; physical health for all people; mental health for all people; and the wider determinants of health. Delivery of these aims will be supported by the Place-wide adoption of seven ways of working. These are:
 - Ensuring our practice is evidence informed
 - Applying a strong emphasis on prevention
 - Strengthening population independence and resilience
 - Tackling health inequality, and providing help to those that need it most
 - Taking a compassionate approach
 - Strengthening and making the most of community assets
 - Taking joint responsibility across the system to tackle difficult challenges
- 2.3 A clear request of the HWBB was to reduce the overall number of priorities set out in the forward plan for the Board, recognising that much of the

important work to deliver health and wellbeing outcomes in Rotherham is already being undertaken by the groups and organisations with specific remits in this area. The purpose of this Strategy is not to create an exhaustive, duplicate list of all actions being undertaken to improve and support the health of our population, but to identify what we can do better together and to challenge and support the work of the system through the lens of the aims and ways of working. This work will continue to be reported to and discussed at HWBB over the life of the Strategy.

2.4 The Board also agreed that there should be a small number of high-priority areas for the Strategy to focus on. It has therefore suggested that a process be put in place to identify priorities which:

- a) require intervention from multiple organisations working together;
- b) would have a significant impact on our general population or on one of our key vulnerable groups;
- c) are amenable to substantial, measurable progress being made within five years.

2.5 A stakeholder prioritisation event will be held in September 2025 to identify, consider and decide on a small number of key priorities for the Board to focus on over the next five years. While the priorities will be separate from the Strategy and can be refreshed or reviewed during the five year period, the mechanisms for selecting and identifying priority areas of work are a part of the Strategy.

2.6 In summary, the strategy comprises three key components, which are set out in a single page diagram (page 12 of the strategy):

- 1) the vision;
- 2) four aims;
- 3) seven ways of working.

Beyond its vision and aims, the strategy does not include specific priority outcomes to contribute to these aims, but sets out the criteria by which these will be agreed. This will take place immediately following the endorsement of the strategy, with a review expected to take place during the five year period.

3. Options considered and recommended proposal

3.1 Cabinet endorsed the existing Health and Wellbeing Strategy in 2022, following a refresh of the previous strategy. Endorsement is now sought for this proposed revised strategy, following its approval by the Board in March this year. This would give assurance with respect to the contribution of RMBC to the joint ambition of the Health and Wellbeing Board.

There are effectively three options available: 1) to endorse the strategy; 2) to endorse elements of the strategy if further changes are sought; 3) to not endorse the strategy. Option 1 is the preferred option and is the recommendation of this report.

4. Consultation on proposal

- 4.1 Consultation on the Strategy was undertaken mainly in advance of the drafting process. The information gathered informed the structure and content of the document and set the framework for agreeing priorities for the term of the Strategy. A summary of the findings of the consultation work will be published alongside the Strategy, and can be reviewed in Appendix 2 to this document.
- 4.2 The timeline is as follows:
- Working group was set up in September 2024
 - Public and stakeholder consultation exercises carried out Sept-Dec 24
 - Draft strategy shared around Board members and partner organisations: Jan-Feb 25
 - Presentation of draft for approval at HWBB March 25
 - To be taken for endorsement at SLT in July 25
 - To be taken to Cabinet for endorsement September 2025
 - Priority-setting workshop to take place September/October 25

5. Timetable and Accountability for Implementing this Decision

- 5.1
- Following Cabinet's endorsement of the 2025-2030 it will become the current strategy for the Health and Wellbeing Board.
 - A prioritisation workshop with Board members will take place in late September or early October, applying the strategy's criteria to identify a small number of priority outcomes.
 - An update will be presented to the Health and Wellbeing Board in November 2025.
 - Regular updates to the Board will be programmed within its forward plan, including updates from Aim Sponsors.

6. Financial and Procurement Advice and Implications

- 6.1 The cost associated with the design and production of the Strategy is being met within the scope of existing roles.
- 6.2 There are no immediate financial implications for the delivery of the Strategy. Any implementation of the Strategy that concerns RMBC will need to be met from existing budgets or be subject to a further decision-making process. Any cost in respect of the strategy for Place partners will need to be met from their internal budgets.
- 6.3 There are no direct procurement implications within this report.

7. Legal Advice and Implications

- 7.1 Under section 116A of the Local Government and Public Involvement in Health Act 2007, which was amended by the Health and Social Care Act 2012 as set out above, the Council is under a duty to produce a Health and

Wellbeing Strategy. This is to be informed by a Joint Strategic Needs Assessment as required by s116 Local Government and Public Involvement in Health Act 2007. This report sets out how this duty is being complied with by the Council.

- 7.2 The Health and Wellbeing Strategy as drafted is compliant with the above legislation and sets out the vision, the needs of the population and proposed actions to improve the health and well-being outcome of the local population and reduce health inequalities within the local authority's area.

8. Human Resources Advice and Implications

- 8.1 This Strategy has been collaboratively co-designed with partner organisations and consultation with other stakeholder organisations.
- 8.2 There is no specific Human Resources advice, and no implications associated with the endorsement of this Strategy.

9. Implications for Children and Young People and Vulnerable Adults

- 9.1 The first of the aims of this Strategy is to 'enable all children and young people up to 25 to have the best start in life, maximise their capabilities and have influence and control over their lives. This will ensure that support and assurance is continued throughout the Health and Wellbeing Board and all related endeavours.
- 9.2 The third of these aims is to '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 to be able to do so'. This aim will facilitate support for vulnerable adults as well as ensuring that Health and Wellbeing Board activities consider the implications on this group.

10. Equalities and Human Rights Advice and Implications

- 10.1 This Strategy development is a key enabler to ensure that adequate focus and resource is given to health inequality in Rotherham. An effective strategy will draw on the evidence from the JSNA and from the consultation work to highlight and address health inequity and provide a basis from which other partnership strategies and action plans can develop practical interventions to close gaps in health need, access, experience and outcome within our population.

11. Implications for CO2 Emissions and Climate Change

- 11.1 The effectiveness of the Health and Wellbeing Board to commit to reducing its climate impact will be considered through the Health and Wellbeing meetings which are held six times a year, as well as in the Annual Reports in line with the pre-existing structure used by the Health and Wellbeing Board.

12. Implications for Partners

- 12.1 There may be resource implications for partners, services and programmes as a result of the implementation of the Strategy. There will be a need for ongoing commitment of officer time from all partners to implement, oversee, monitor and report progress against our priorities. This Strategy enables effective partnership working to commission and deliver services and realise its aims, as well as acting where needed to remove blockages, identify gaps, and hold organisations to account for delivery.
- 12.2 In selecting a smaller number of priorities for the Strategy in this cycle, it is hoped that partners will benefit from simplicity and clarity of our streamlined priorities.

13. Risks and Mitigation

- 13.1 The complexity of need in the range of issues the Health and Wellbeing Board must address correlated with the evolving and restructuring of its priorities is a constant risk for this Strategy. This will be mitigated through the existing board review process including Annual Reports and constant engagement with suitable resources such as the Joint Strategic Needs Assessment data for the Borough.
- 13.2 In order to maximise the resources available to deliver the vision, the Board will facilitate and direct partnership working, to derive optimum value. Therefore reinforcing collaborative working amongst partner organisations across the health and wellbeing sector to secure the required commitments, and develop collaborative approaches within the existing financial envelope.
- 13.3 The long periods of time required to notice substantial improvement in health outcomes combined with the difficulty in measuring change makes assessing the performance of the board a challenge. This is mitigated where possible by the use of case studies in annual reporting to give a qualitative account of change over each year and the close monitoring of chosen priority outcomes.

14. Governance

- 14.1 The Health and Wellbeing Board is a statutory committee of the Council and is an integral part of Rotherham's wider strategic partnership structures that sit under the Rotherham Together Partnership. Following the changes to Integrated Care Systems in July 2022 Rotherham became 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.

15. Accountable Officers

Emily Parry-Harries, Director of Public Health

Approvals obtained on behalf of Statutory Officers: -

	Named Officer	Date
Chief Executive	John Edwards	25/08/25
Assistant Director, Financial Services (Deputy S.151 Officer)	Rob Mahon	18/08/25
Assistant Director of Legal Services (Monitoring Officer)	Phil Horsfield	18/08/25

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