

Public Agenda			
Title of Meeting:	Rotherham Place Board: Partnership Business		
Time of Meeting:	9.30am – 10.30am		
Date of Meeting:	Wednesday 15 May 2024		
Venue:	The Spectrum, Coke Hill, Rotherham, S60 2HX		
Chair:	Chris Edwards		
Contact for Meeting:	Lydia George: <u>lydia.george@nhs.net</u> Wendy Commons: <u>wcommons@nhs.net</u>		
Apologies:	R. Jenkins, Chief Executive, The Rotherham NHS Foundation Trust T Lewis, Chief Executive, Rotherham, Doncaster and South Humber NHS Foundation Trust		
Conflicts of Interest:			
Quoracy:	No Partnership Business shall be transacted unless the following are present as a minimum: a) one Member from each of the ICB and RMBC; and b) two Members from any of the following Partners: TRFT, VAR, RDASH or RPCLG		

ltem		Time	Pres By	Encs
1	Public & Patient Questions: The Chair will take questions in writing prior to meetings and will try to respond during the meeting. However, there may be occasions when a response has to be issued in writing afterwards. This being the case, responses will be published as an item for information at the next meeting.		Chair	Verbal
	Business Items			
2	Palliative and End of Life Care Update	10 Mins	Emma Royle	Enc 2
3	Rotherham Hospice Update	10 mins	Mat Cottle-Shaw	Enc 3
4	Achievements	5 mins	Claire Smith	Enc 4
5	Place Partnership Update	5 mins	Claire Smith	Enc 5
	Standard Items			
6	Communication to Partners	5 mins	Chair	Verbal
7	Draft Minutes and Action Log from Public Place Board from 17 April 2024 – <i>for approval</i>	5 mins	Chair	Enc 7i & 7ii
8	Risks and Items for escalation to appropriate board (e.g. Health & Wellbeing Board, ICB Board)		Chair	Verbal
9	 June Items: Update from Director or Public Health Digital Workforce Safeguarding Adult Review reports Standing Items: Updates from all Groups (as scheduled) Achievements (as and when received) Feedback from SY ICP Meeting – Bi-Monthly Bi-Monthly Place Partnership Newsletter (May) 			
10	Dates of Next Meeting: Wednesday 19 June 2024 at 9.30am	–10.30am -	- Rotherham Towr	n Hall

	GLOSSARY			
A&E	Accident and Emergency			
BAME	Black Asian and Minority Ethnic			
BCF	Better Care Fund			
C&YP	Children and Young People			
CAMHS	Child and Adolescent Mental Health Services			
CHC	Continuing Health Care			
COI	Conflict of Interest			
CQC	Care Quality Commission			
DES	Direct Enhanced Service			
DTOC	Delayed Transfer of Care			
EOLC	End of Life Care			
FOI	Freedom of Information			
H&WB	Health and Wellbeing			
IAPT	Improving Access to Psychological Therapies			
ICB	Integrated Care Board			
ICP	Integrated Care Partnership			
ICS	Integrated Care System			
IDT	Integrated Discharge Team			
JFP	Joint Forward Plan			
JSNA	Joint Strategic Needs Assessment			
KPI	Key Performance Indicator			
KLOE	Key Lines of Enquiry			
LAC	Looked After Children			
LeDeR	Learning Disability Mortality Review			
LES	Local Enhanced Service			
LIS	Local Incentive Scheme			
LOS	Length of Stay			
LTC	Long Term Conditions			
ММС	Medicines Management Committee			
MOU	Memorandum of Understanding			
NHS LTP	NHS Long Term Plan			
NHSE	NHS England			
NICE	National Institute for Health and Care Excellence			
OD	Organisational Development			
PCN	Primary Care Network			
PTS	Patient Transport Services			
QIA	Quality Impact Assessment			
QIPP	Quality, Innovation, Productivity and Performance			
QOF	Quality Outcomes Framework			
RDaSH	Rotherham Doncaster and South Humber NHS Foundation Trust			
RHR	Rotherham Health Record			
RLSCB	Rotherham Local Safeguarding Childrens Board			
RMBC	Rotherham Metropolitan Borough Council			
RPCCG	Rotherham Primary Care Collaborative Group			
RTT	Referral to Treatment			
SEND	Special Educational Needs and Disabilities			
SIRO	Senior Information Risk Officer			
TRFT	The Rotherham NHS Foundation Trust			
UECC	Urgent and Emergency Care Centre			
VAR	Voluntary Action Rotherham			
VCS	Voluntary and Community Sector			
VCSE	Voluntary, Community and Social Enterprise sector			
YAS	Yorkshire Ambulance Service			



Rotherham Place Board

Palliative and End of Life Care –

Update May 2024

Emma Royle, Senior Development and Transformation Manager, SY ICB, Rotherham Place

THE REAL

ROTHERHAM INTEGRATED CARE PARTNERS

Connect Healthcare Rotherham CIC NHS Rotherham Clinical Commissioning Group Rotherham Doncaster and South Humber NHS Foundation Trust Rotherham Metropolitan Borough Council The Rotherham NHS Foundation Trust Voluntary Action Rotherham

yourhealthrotherham.co.uk

Rotherham Health and Care Place Plan

5 Key Priorities within the Plan - updates:

1. Complete a review of PEoLC Medicine

- Local and Regional work taking place

- 2. Enhance personalised palliative and end of life care.
 - Cultural and religious considerations in palliative care, end of life and death (TRFT)

- Advance Care Planning/ Personalised Care Training

- 3. Implementation of ReSPECT across Rotherham
 - Completed. Ongoing training, monitoring and evaluation.
 - SY wide ReSPECT Group



Rotherham Health and Care Place Plan

4. Benchmark against the National PEoLC Ambitions Framework

- Adults completed – Childrens in progress. To be amalgamated with Sheffield, Barnsley and Doncaster to help form a SY wide PEoLC Action Plan

5. Inform future commissioning through patient and carer experience

- Healthwatch – SY wide work completed – further, more detailed engagement to take place



Rotherham Health and Care Place Plan

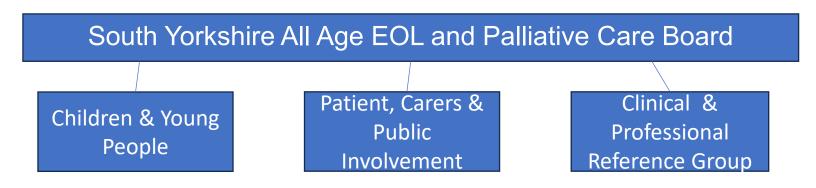
Also –

- National Audit work latest results (quarterly)
- ECHO training (ongoing programme)
- South Yorkshire Transition Care Pathway (one year project)
- Rotherham Death Café (June 2024)





SY Wide PEoLC Workstream



- SY PEoLC Strategy in final draft form following consultation
- SY Action Plan in development stage
- SY Data Dashboard completed



SY Palliative & End of Life Care Strategy

Results of feedback and next steps:

- Insightful feedback and some good challenges
- To focus on the definition from the World Health Organisation
- To include a broader social and community approach to death and dying rather than a purely medical approach
- To amended the draft Strategy to reflect a system wide approach and also to ensure that issues that particularly affect children and young people are more clearly represented
- Considering timespan of the strategy (longer than 2 years?)

Next Steps –

Strategy to be approved by the PEoLC Strategic Board, then ICB Board and Health & Wellbeing Boards.





Rotherham Place Board

Update May 2024



YTD Performance

- 117 patients cared for within the hospice
- 90%+ consistent occupancy
- 3,778 face to face visits
- 97 children supported
- 3,898 support telephone contacts
- £2.2m raised for our vital services





Planning our future

We recently completed our 4-month stakeholder research project, which included the following:

- 1. A kick-off workshop was held at the hospice including a cross section of staff, trustees, external stakeholders and volunteers. This built engagement with the project and helped shape questions relevant to the projects focus.
- 2. We conducted a public facing quantitative survey over the period of a month. In total, 656 members of the local community took part.
- 3. We then embarked on qualitative exploration with 31 members of the public completing an in-depth qualitative form and 15 individuals from identified stakeholder groups completing interviews with our researchers.



Identified priorities

- 1. Personalised care. Working to ensure care at end-of-life can be delivered based on what matters most to the patient. Not following a one size fits all mentality.
- 2. Improving and expanding community services for people to die either at home or in their preferred place in the community.
- 3. Starting support earlier, at the point a terminal diagnosis is received. The phasing out of curative care and the phasing in of palliative.
- 4. Providing good care irrespective of who a patient is, where they live or their circumstances in life.
- 5. Working more closely with local organisations and communities to ensure care is more coordinated & help people to have conversations about living and dying well.
- 6. Improving and expanding hospice facilities



Barriers to overcome

- 1. Financial sustainability
- Public awareness 74% believed they understood what our services are. 10% did not know at all.
 17% believe Rotherham Hospice is where you go when given up hope and 80% believe we are here to support people with cancer.
- 3. Charitable support



Personal experience of the Hospice No experience of the Hospice 29%

- 4. Physical assets and constraints scope for growth, respite and new day services
- 5. Workforce growth experience & home-grown talent





Next steps

- 1. Public launch of full strategy in July / August
- 2. Hospice 30th anniversary year 2026
- 3. Re-shaping our workforce to meet needs
- 4. Investment in fundraising and retail / community presence
- 5. Outreach
- 6. Developing services and solutions to help patients throughout their journey
- 7. Assess the best long-term options to meeting increasing demand
 - 1. How can we best solve our current challenges?
 - 2. Do we stay where we are?
 - 3. Do we acquire additional buildings?
 - 4. Do we refurbish existing or start a fresh elsewhere



What is the art of the possible?







Thank

you!



Rotherham Place Board – 15 May 2024

Rotherham Place Achievements – May 2024

Lead Executive:	Claire Smith, Director of Transformation and Partnerships – NHS South Yorkshire ICB (Rotherham)		
Lead Officer:	Lydia George, Transformation and Partnership Portfolio Manager - NHS South Yorkshire ICB (Rotherham)		

Purpose:

To provide members with examples of successes and achievements across the Rotherham Place.

Background:

Rotherham Place Partnership has **many examples of its achievements** which have been enabled through clear leadership, outstanding relationships, wider partnership engagement and strong governance.

The Rotherham Health and Care Community have been working in collaboration for many years to transform the way it cares for and achieves a positive change for its population. Rotherham Place has a strong, experienced and cohesive executive leadership team who have set clear expectations and the spirit of collaboration and inclusiveness with the key aim of driving forward transformation set out in the Place Plan.

Partners are fully committed to working together to make decisions on a best for Rotherham basis to achieve the transformations set out in the 2023-25 Place Plan, which is the 4th edition. All plans have continued to build on previous successes, aiming to be a catalyst to deliver sustainable, efficient health and care, with prevention at its heart.

We are clear that by working together can we transform the way we work and improve the health and wellbeing of our population, further and at pace.

Analysis of key issues and of risks

In the past we captured our achievements through the regular spotlight presentations and updates on our priorities provided to Place Board. To make this more inclusive we produced a simple template and introduced a process which we shared across our transformation and enabling workstreams inviting colleagues to tell us about good practice/achievements in their areas of work.

We are confident that the process is capturing examples that we would not have easily identified previously and it seems to be well received across Place.

We will continue to welcome further contributions, as and when, from across the place groups and will continue to share at Place Board.

Recommendations:

Place Board members are asked to note the achievement received for this month and share within their own organisation as appropriate.



Achievements across the Rotherham Place Partnership

Name of Project/Scheme/Development	YAS Push Model – Rotherham Crisis Service
Contact for Project/Scheme/Development	Julie Thornton, RDASH Care Group Director
Form completed by (if different to above)	Julie Thornton & Natalie Howson (YAS)
Which 'Place' Group does this come under	Rotherham
Approximate time period that the Project/ Scheme/ Development was delivered / implemented	Commenced March 2023

Description

In March 2024, the PUSH model was introduced into the Rotherham Crisis Team. This is where low level mental health calls to 999 (low acuity often described as category 3-5) are directed straight through to single point of access and are picked up by the Crisis Team directly.

Over the coming months, YAS & RDASH will drill down and evaluate impact on patients using the push model to understand would they have attended UECC etc so we can quantify the benefits as well as understanding the qualitative impact this has had.

Outcomes

The desired outcomes of this new way of working are:

- Ensure patients are being seeing by the right professional, first time.
- To reduce waiting times for patients calling 999 for lower level mental health issues
- Improve pathways and patient experience.
- Reduce conveyances to A&E for inappropriate patients.
- Reduce overall patient journey time

Anything else you would like to tell?

Rotherham is the first place in Yorkshire to introduce the YAS push model into a crisis team. It is the first AMPDS Ambulance Trust to use the UCR model with mental health teams and potentially the first in the country (YAS awaiting confirmation from other trusts) to do this work.

This pilot now has 3 trusts signed up and 81 referrals in its first month with an 87% acceptance rate. Patient journey narratives will soon be available.

Rotherham Place Partnership Update: March and April 2024

Action on Prevention and Health Inequalities

Respiratory Transformation Group Driving Action - Respiratory has been selected as one of Rotherham's four high impact areas, and work has started to bring partners together to transform the current pathway. An initial workshop took place in March, which had good representation across primary care, secondary care, commissioners, public health, and social care to identify priority areas of focus for the transformation.

Building on this workshop, a partnership group has been established, which is already making progress to transform respiratory services. This has included pursuing a pilot of exercise classes to support pulmonary rehab within leisure centres and developing an alternative pathway to reduce admission to hospital, with Yorkshire Ambulance Service making direct referrals to the community respiratory team. The group will oversee a wide range of priorities relating to respiratory with a whole pathway approach and will build on the foundation of positive partnership working.

Moving Rotherham Partnership recognised by Sports England - Sports England has recognised the Moving Rotherham partnership and has chosen Rotherham as a partner for the Sport England Place Expansion Programme. This is a national programme which will direct £190m of investment to 80-100 places across the country.



In selecting Rotherham as a partner, Sports England acknowledged the progress of the partnership, strength of relationships, strategic recognition of the importance of physical activity and its inclusion in a range of key strategies. The Moving Rotherham Partnership has made significant progress over the past year, which has included delivering the Women's Euro Legacy programme, training social prescribers and link workers, overseeing festivals and events (such as Uplift Festival and Rotherham 10k), awarding small grants to community groups, promoting active travel, and expanding RotherHive to include a section on Moving More.

Engaging Local People Living with Long-term Conditions - 1,221 people in Maltby and Dinnington have had their say on their experience of living with a long-term condition.

This has been a collaborative project between Primary Care Networks (PCNs), Public Health, The Rotherham NHS Foundation Trust, the South Yorkshire Integrated Care Board (Rotherham Place) and the Council's Neighbourhoods Team, and has built on Rotherham's participation in the national Place Development Programme. Maltby and Dinnington were identified as priority areas of interest in terms of multi-morbidity and opportunities for learning.

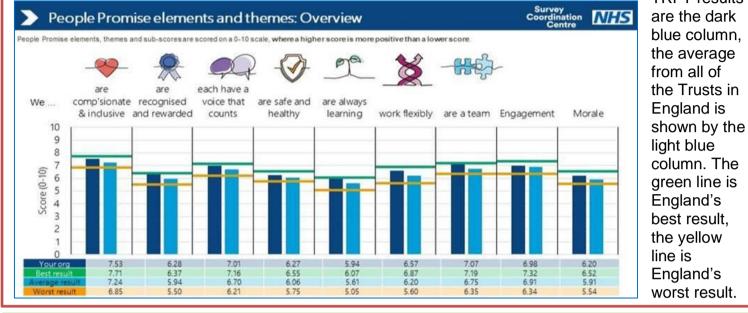
Through PCNs, a survey went out to all patients with some of the most common long-term conditions in Rotherham, and the response rate was over 50%, which has provided extremely rich data and insights. Some of the high-level findings have included that almost every respondent was living with more than one long-term condition, 32.4% had experienced poor mental health or emotional wellbeing and 24.8% reported living with some form of pain. Analysis is ongoing, but the early insights are already feeding into work programmes and helping to drive action.

More than half of those surveyed confirmed that they would be happy to be involved in further work, which offers a significant opportunity to build on these insights through further engagement events and focus groups. Planning for this next step is underway.

2023 NHS Staff Survey: Celebrating Progress

The Rotherham NHS Foundation Trust have made strong improvements in the 2023 NHS Staff survey across a range of areas and themes. The trust is immensely proud of the progress made and clear on the further improvements they want to make based on staff feedback.

In the questions about 'advocacy,' and recommending the Trust they achieved the **3rd best, 2nd best** and the best improvement in England.





All Age Autism Strategy – received at Place Board in March, builds on the progress made in the delivery of the 2020 23 strategy and sets the strategic direction and priorities for the next three years. It has been informed by co-production work undertaken with people with lived experience, including workshops with representatives from a wide range of professionals, people with autism, parents, families, carers, and local businesses. The workshops gathered rich information and

Rotherham 5-19 Neurodevelopmental pathway update

During the last 12 months the Service have worked to screen all 900 children waiting (9 month wait), meaning all children referred into the 5-19 neurodevelopmental pathway are screened within 4 weeks. Therefore, children and families know within 4 weeks if they have been accepted for assessment and receive advice, guidance, and signposting to available support whilst they are waiting (this is provided regardless to whether they are accepted for assessment).

Targeted work with education has resulted in significant improvements to the quality of referrals, this has reduced the time taken for clinicians to gather information for assessment and frees them up to spend more time with children and families, it has also reduced the length of assessments increasing the number that clinicians can complete. The referral pathway ensures implementation of the Special Educational Needs and Disability (SEND) graduated response so that we are assured children and families have access to support whilst they are waiting.

Although the number of referrals has increased over the last few years, we are making progress to reduce the waiting list and have seen both the length of time children wait for assessment and the number of children waiting reduce. Referrals are allocated based on complexity of need therefore allocations are not always taken from the longest waits. When children are taken off the waiting list and are re-referred, they are added to the waiting list with the date of their first referral, so not all children have been on the waiting list for all of the time they have been waiting. 40 children have waited longer than 156 weeks (3 years).

Rotherham Town Centre SEND Hub

A new centre for children and young people with Special Educational Needs and Disabilities (SEND) and neurodiverse adults will be located in the Rotherham Town Centre.

This is part of a project between Rotherham Parent Forum Ltd (RPFL) and Rotherham Council. RPFL is made up of RPCF (Rotherham Parent Carers Forum) for families of children and young people with additional needs 0-25 years, and RANSS (Rotherham Adult Neurodiverse Support Service) for Neurodivergent Adults in Rotherham aged 18+.

The SEND Hub will be based in the Eric Manns building and will offer a range of activities, training, support, and partnership with services for the people who access, with inclusive amenities throughout to reflect the needs of the whole SEND community. RPCF and RANSS are planning to develop a timetable of daily activities, inviting organisations to deliver specific sessions based on their areas of expertise.

The timetable will be developed in coproduction with the SEND community to ensure that it provides a wide and varied offer to meet their interests and needs. The activity within the SEND Hub will all be focused on developing inclusion in a safe and familiar environment, thereby reducing social isolation, and improving wellbeing.

Work is currently taking place to develop a design specification for the SEND Hub.

Rotherham Parent Forum Ltd are a registered charity run by and for families of children and young people (aged 0 to 25) who have SEND. For more information visit: <u>https://www.rpcf.co.uk/</u>. Further information about available support can be found on the Rotherham SEND Local Offer website at: <u>https://www</u>.rotherhamsendlocaloffer.org.uk/





Rotherham Adult Neurodiversity Support Service

The extension and redevelopment of the Broom Lane practice, which was funded through the £57.5m South Yorkshire Primary Care Capital Programme, has now been completed.



Good Governance – at the February Confidential Place Board members reviewed the Place Board Terms of Reference and updated Rotherham Place Agreement. During February and March, the documents were considered by partners through their own governance arrangements ahead of the Place Board approving them at the April public meeting. The Terms of Reference for the Place Board when carrying out ICB Business (acting as the Rotherham ICB Committee) have also been updated in line with the South Yorkshire ICB requirements and will go for approval to the July ICB Board.

ROTHERHAM

A Year of Success for the Virtual Ward

In December 2022, The Rotherham NHS Foundation Trust (TRFT) opened the virtual ward to patients. The purpose of the ward is to support people at home who would otherwise be in hospital. Since opening the virtual ward team have supported around **1,760 patients** to receive hospital-standard acute care at home.



Virtual wards provide an alternative to hospital admission, or a patient staying in hospital longer than they need to. It aims to keep patients at home or in their usual place of residence, supporting patients with the acute care, treatment, and remote monitoring they need, and includes comprehensive medical assessments and access to community services. This benefits patient experience and health services by reducing pressure on hospital beds, which in turn enables those attending the Urgent and Emergency Centre to be seen quicker.



Helen Dobson, Chief Nurse at TRFT, said 'We know that patients can recover quicker in their own home, where they can try and keep as much of their normal routine as possible. We have some exceptional colleagues working in our community services with a wide range of skills that enable us to run a service like the virtual ward. The ward frees up hospital beds for those who are most in need of treatment and monitoring in a hospital environment'

Patients can be referred up to 14 days at a time, and for the treatment and management of a variety of conditions, including heart failure, delirium, acute kidney injuries and acute respiratory conditions. The ward currently looks after patients on frailty and respiratory pathways.

Virtual Ward current capacity target is 80% beds as of February (total of 100 beds) with an average length of stay of 7 days.

Goodbye - We Will Miss You!



Rotherham Place said goodbye this week to two people who have played an important role in the development and success of the Rotherham Place Partnership. **Sue Cassin**, Chief Nurse in Rotherham, retired in January after a 48 year career in the NHS. And **CIIr David Roche** retires in the near future, and this week attended his last Place Board.



And not forgetting **Oak House** which has been the home for many Rotherham NHS staff for 20 years, as PCT, CCG and now as the Rotherham ICB Place Team – many happy memories!

Minutes	Minutes			
Title of Meeting:	PUBLIC Rotherham Place Board: Partnership Business			
Time of Meeting:	9.00am – 10.15am			
Date of Meeting:	g: Wednesday 17 April 2024			
Venue:	Elm Room, Oak House, Bramley, S66 1YY			
Chair:	Chris Edwards			
Contact for Meeting:	Lydia George: lydia.george@nhs.net/ Wendy Commons: wcommons@nhs.net			
Apologies:	Richard Jenkins, Chief Executive, TRFT Toby Lewis, Chief Executive, RDaSH Dr Neil Thorman, Executive GP Lead, RPCCG Dr Anand Barmade, Medical Director, Connect Healthcare Sharon Kemp, Chief Executive, Rotherham Council Andrew Russell, Chief Nurse, NHS SY ICB			
Conflicts of Interest:	General declarations were acknowledged for Members as providers/commissioners of services. However, no specific direct conflicts/declarations were made relating to any items on today's agenda.			
Quoracy:	Confirmed as quorate.			

Members Present:

Chris Edwards (**CE**), Executive Place Director, NHS SY ICB Ben Anderson (**BA**), Director of Public Health, RMBC Shafiq Hussain (**SH**), Chief Executive, Voluntary Action Rotherham Gordon Laidlaw (**GL**), Head of Communications, NHS SY ICB Dr Jason Page (**JP**), Medical Director (Rotherham) NHS SY ICB Julie Thornton (**JT**), Care Group Director (Roth), Rotherham, Doncaster and South Humber NHS Foundation Trust Michael Wright (**MW**), Deputy Chief Executive, TRFT

Participants:

Wendy Allott (**WA**), Director of Financial Transformation (Roth), NHS SY ICB Lydia George (**LG**), Transformation and Partnership Portfolio Manager, NHS SY ICB Cllr David Roche (**DR**), H&WB Board Chair, RMBC Shahida Siddique (**SS**), Independent Non-Exec Member, NHS SY ICB Claire Smith (**CS**), Director of Partnerships (Roth), NHS SY ICB Helen Sweaton (**HS**), Joint Assistant Director CYPS, NHS SY ICB/RMBC Jude Wildgoose (**JW**), Assistant Director – Transformation and Delivery, NHS SY ICB

In Attendance:

Wendy Commons, Business Support Officer, Rotherham Place, NHS SY ICB

ltem Number	Discussion Items			
01/4/24	Public & Patient Questions			
There were no questions from members of the public.				
02/4/24	Public Health Director's Update			

Ben Anderson, Director of Public Health reported that cases of infectious diseases are coming down. Thanks to the successful media communications campaign in raising awareness across the borough, measles has been managed well in clinical settings. Although, he warned that the risk of spread is still likely following the post-holiday return to schools.

As reported last month, there has been a Legionella outbreak in a social housing area. Work has been taking place with the providers with positive results.

The flu season appears to have passed and respiratory diseases are much lower. There is less Covid being seen which may result in the vaccination programmes update being different.

Following the D&V outbreaks in care homes also reported last month, BA highlighted a risk with lack of resources for infection prevention and control across community settings. An interim solution is being funded non recurrently via the Better Care Fund (BCF) with dialogue taking place across the partnership around a more sustainable solution.

Members noted that this risk is on the Rotherham Place risk register.

The Chair thanked BA for the update.

03/4/24 Mental Health Update

CS advised members of the positive work undertaken in recent months on the groups priorities to embed model and primary care to deliver care closer to people. This included:

- Launch of primary care mental health hubs
- Completing the procurement for mental health peer support and community connectors
- Agreeing the adult community eating disorder pilot
- The agreement by Council cabinet of the Place Crisis Pathway Health & Social Care which will go live in April 2024.
- Developing an integrated service specification for crisis services
- Expanding the alternative to crisis offer with Rotherham Safe Space commencing a service over four evenings a week in October 2023. Qwell also continues to be well utilised
- The PUSH model for mental health has been introduced with Yorkshire Ambulance Service – the first in South Yorkshire.

CS highlighted some of the challenges and risks being faced:

ROTHERHAM PLACE PARTNERSHIP | HEALTH AND CARE

- Out of area bed days is proving challenging, in January we had no out of area patients but this fluctuates – the target for 2023/24 will not be met.
- A&E attendance increases due to increasing complexity and demand being seen across the system.
- There is also increasing demand for neurodevelopmental assessments including some under 'Right to Choose'

Going forward, work will continue on ensuring all activity is captured against the metric for access to community mental health services:

- Progress will continue with the community eating order pilot and supporting the mobilisation of the mental health peer support service.
- The mobilisation of community connectors and micro commissioning for SMI health checks with continue to be supported.
- Work will continue to understand place requirements for effective partnership working with the crisis concordat/right care right person approach.

JP suggested that it may be helpful to review the impact on primary care from the implementation of the PUSH model for mental health patients, as it is often GPs who are required to issue medication for patients who don't go to A&E.

It was noted that a dedicated protected learning time event will take place on mental health services to allow discussion with primary care colleagues about the pathway and system changes.

CE noting the progress made, thanked CS for the update and the teams for their hard work. He also acknowledged how the good partnership relationships across Rotherham have been invaluable in addressing the challenges of rising acuity and complexity seen in patients across all services.

04/4/24 Early Help Strategy Update

HS updated members advising that the 2016-19 strategy had been central to Rotherham's improvement journey, and as a result Rotherham now has an effective and mature early help system. She went on to highlight some of the key achievements over time including the development of the service having a well-equipped and well trained workforce, delivering integrated outreach and engagement with an MDT approach to its activities, such as Operation Keepsafe and Partnership Water Safety Plan.

There is a suite of validated programmes for families to access both digitally and face to face and shared responsibility embedded for early help across partners with an increase in the numbers of early help assessments to almost 30%. The development of family hubs and the best start in life programme have added value for children's centre and early help sites and the Healthy Holiday's Programme, funded by the DfE is being delivered.

HS explained that there has been a big emphasis on the new strategy that focuses on the whole family approach and accentuates partnership, which is strong in Rotherham.

In 2023, in response to the independent review, the government published a new vision to transform children's social care 'Stable Homes, Built on Love' which preceded the updated multiagency statutory guidance, Working Together to Safeguard Children 2023.

Although the legislation has not changed, it states that the key worker may not necessarily have to be a social worker in future.

It is clear that a new strategy is required to address the changing environment and the government's plans to reform children's social care and early help.

The vision and key principles of the 2024-2029 Early Help Strategy have been developed across Rotherham Together Partnership, with three stages of support for children, young people and families:

- Universal and Community Family Help
- Focussed Family Help
- Specialist Family Help

A five year phased delivery plan is proposed with Phase one, the design phase being about consultation and engagement to ensure the strategy will work for everyone, followed by four years to develop the model to make sure the right tools are in place and we are reaching families and children in the right way.

JP asked about the rationale for non-social work qualified staff to undertake assessments for child in need cases rather than a social worker. HS explained that the guidance outlines the need for a social work assessment and although there is no intention to change how this is done in Rotherham currently, families often form good relationships with their early help workers who may be best placed undertake the assessment in a 'lead practitioner' role. Wider engagement and consultation with stakeholders and staff is planned and will be important before there is any commitment to change.

Members noted the update and work being done to develop the new strategy.

05/4/24 Baby Packs Scheme

BA advised Members that part of council's family friendly budget included the provision of baby packs for Rotherham newborns. Registering for the packs will also help parents to access a range of support and advice services provided through family hubs.

At the end of February the Council approved the baby packs scheme which will be funded as part of the Council's 24/25 Budget.

The packs will include high quality items that promote positive parent and child interaction and safety improving outcomes for the child. The initiative also aligns and supplements the 'Best start in Life' priority in our Place Plan as well as the 'Safe Place to Sleep Programme' across NHS SY ICB and the South Yorkshire Combined Mayoral Authority.

It will go to everyone and promote a fair and equal start for children, helping build trust and signpost families, with no stigma attached.

Place Board fully supported the scheme. LG will add it to the Place Partnership Update which is shared with all partners and their staff and will help publicly promote this excellent initiative.

Action: LG

06/4/24 Update of Rotherham Place Partnership Board Terms of Reference and Agreement

Members noted that this version had been updated with comments from partners, since they were presented at the February Place Board.

In reviewing the terms of reference for Part 2: Partnership, CE advised that Sharon Kemp, Chief Executive at Rotherham Council has taken up the role of commissioner at another council where she will be spending 2 days per week. Sharon will continue to

work in Rotherham as Chief Executive 3 days per week. SK had proposed that Ian Spicer, Deputy Chief Executive and Strategic Director at Rotherham Council becomes Joint Chair of Rotherham Place Board with CE to ensure full representation at Place Board. SK will attend Place Board on a quarterly basis.

Members agreed with the proposed arrangements for Joint Chair and subject to the changes above, **the terms of reference (part 2: partnership) were approved** by the Place Board.

Members also agreed to **approve the partnership agreement** as presented. However, should any partner wish to re-open discussions, this will be allowed. These will now progress to the Rotherham Health & Wellbeing Board for ratification in line with governance arrangements.

It was noted that the Place Board Partnership Agreement and Terms of Reference had been taken through The Rotherham NHS Foundation Trust Board and MW would advise any feedback to LG. Similarly JT will check for feedback with colleagues at The Rotherham, Doncaster and South Humber NHS Foundation Trust.

The terms of reference (part 3: ICB Committee) are being reviewed for approval in the ICB session today, after which they will be received at South Yorkshire ICB Board for approval. There were no issues raised in relation to these by Rotherham Place Board members at this session.

07/4/24 Place Plan Performance Report – Quarter 3

CS presented the performance report for the 2023-25 Health and Care Plan.

Members noted that the overall position was similar to that reported in Quarter 2 for both metrics and milestones.

There was one milestone rated red which related to LDA 4 - Supporting people with learning disability and autism, and SY ICB providing a model for safe space provision. Although a procurement exercise had been undertaken, it was deemed commercially unviable within the existing financial envelope. The plan for recovery includes revision of the service specification and a market engagement event.

With key performance indicators (KPIs), it was noted that there was one new red rated metric relating to children's neurodevelopment assessments and waiting times.

Members had discussed the issues in detail in the Confidential session and received assurance, noting that although the number of referrals has increased over the past few years, progress is being made to reduce the waiting list with both the length of time children wait for assessment and the number of children waiting has reduced.

08/4/24 Feedback from ICP Meeting – 21 March 2024

Cllr Roche advised that Members had received an update on the Safe Places for Sleeping Programme which will include delivering a bed and bedding for every child who needs it in South Yorkshire. Four test and learn pilots will be set up in Goldthorpe, Mexborough, Swinton and Gleadless which will later be evaluated.

There had also been an update on work planned with the Children & Young People's alliance, the governance approach to The Bold Ambition – the best start in life and the intention to focus on child health equity at its May meeting.

The Five Year Joint Forward Plan for South Yorkshire was refreshed with no major changes and accepted.

DR thanked CE, Gavin Boyle and Pearse Butler for their support in listening to the feedback from Health and Wellbeing Boards to the ICP, which had given he and his H&WBB colleagues confidence that these will be taken on board and refinements made as suggested.

Finally, it was noted that this will be the last Place Board Cllr Roche attends as he retires in early May. On behalf of Rotherham Place Board and its members, CE thanked Cllr Roche for his contribution to the transformation of health and social care services and partnership working in Rotherham.

JP will discuss deputising at the Integrated Care Partnership with one of his colleagues.

09/4/24 Communications to Partners

Baby packs scheme information to be shared.

10/4/24 Draft Minutes and Action Log from Public Place Board

The minutes from the meeting held on 20 March 2024 meeting were agreed as a true and accurate record.

The action log was reviewed and on track.

105/3/24 Risks and Items for Escalation to Health and Wellbeing Board

None.

11/4/24 Future Agenda Items:

- Proactive Care Update JM/CS (tbc)
- Advice on Choice for GPs and Rotherham Pathway (tbc)
- Palliative and End of Life Care Update (May)
- Maternity, Children & Young People Update (May)
- Lung health checks update JP (Jun)

Standing Items

- Updates from all groups (as scheduled)
- Bi-Monthly Place Partnership Briefing
- Feedback from SY ICP Meetings Bi Monthly
- Place Achievements (as and when)

107/3/24 Date of Next Meeting

The next meeting will take place on *Wednesday 15 May 2024* at Rotherham Hospice from 9.00am – 10.00am.

<u>Members</u>

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Chris Edwards (Joint Chair)Executive Place Director/ICB Deputy Chief Executive		NHS South Yorkshire Integrated Care Board		
Sharon Kemp (Joint Chair)	Chief Executive	Rotherham Metropolitan Borough Council		
Ben Anderson	Director of Public Health	Rotherham Metropolitan Borough Council		
Richard Jenkins Chief Executive		The Rotherham NHS Foundation Trust		
Shafiq Hussain Chief Executive		Voluntary Action Rotherham		
Toby Lewis	Chief Executive	Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)		
Dr Anand Barmade	Medial Director	Connect Healthcare Rotherham (GP Federation)		
Dr Neil Thorman	Primary Care Representative	Rotherham Primary Care Collaborative Group		

Participants

Cllr David Roche	Joint Chair	Rotherham Health and Wellbeing Board	
Claire Smith Deputy Place Director, Rotherham Place		NHS South Yorkshire Integrated Care Board	
Andrew Russell	Chief Nurse, Roth & Donc Place	NHS South Yorkshire Integrated Care Board	
Dr Jason Page	Medical Director, Rotherham Place	NHS South Yorkshire Integrated Care Board	
Wendy Allott	Director of Financial Transformation Rotherham Place	NHS South Yorkshire Integrated Care Board	
Shahida Siddique	Independent Non-Executive Member	NHS South Yorkshire Integrated Care Board	
lan Spicer	Strategic Director, Adult Care, Housing and Public Health	Rotherham Metropolitan Borough Council	
Nicola Curley Director of Children's Services, RMBC		Rotherham Metropolitan Borough Council	
Lydia George	Transformation and Partnership Portfolio Manager (Rotherham)	NHS South Yorkshire Integrated Care Board	
Gordon Laidlaw	Head of Communications	NHS South Yorkshire Integrated Care Board	
Michael Wright	Deputy Chief Executive	The Rotherham NHS Foundation Trust	
Sally Kilgariff	Chief Operating Officer	The Rotherham NHS Foundation Trust	
Julie Thornton Care Group Director		Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)	

PUBLIC ROTHERHAM PLACE BOARD ACTION LOG - 01 April 2024 - 31 March 2025

Mtg Date	Item No.	Agenda Item Title	Action Description	Ву	Action Status
17.4.24	05/04/2024	Baby Packs Scheme	LG to include in next partnership update to publicise with partners and staff.	LG	Green

Comments