

Public Agenda

Title of Meeting:	Rotherham Place Board: Partnership Business
Time of Meeting:	10.00am – 10.45am
Date of Meeting:	Wednesday 17 September 2025
Venue:	John Smith Room, Town Hall, Rotherham
Chair:	Chris Edwards
Contact for Meeting:	Lydia George: lydia.george@nhs.net Wendy Commons: wcommons@nhs.net

Apologies:	R. Jenkins, Chief Executive, The Rotherham 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

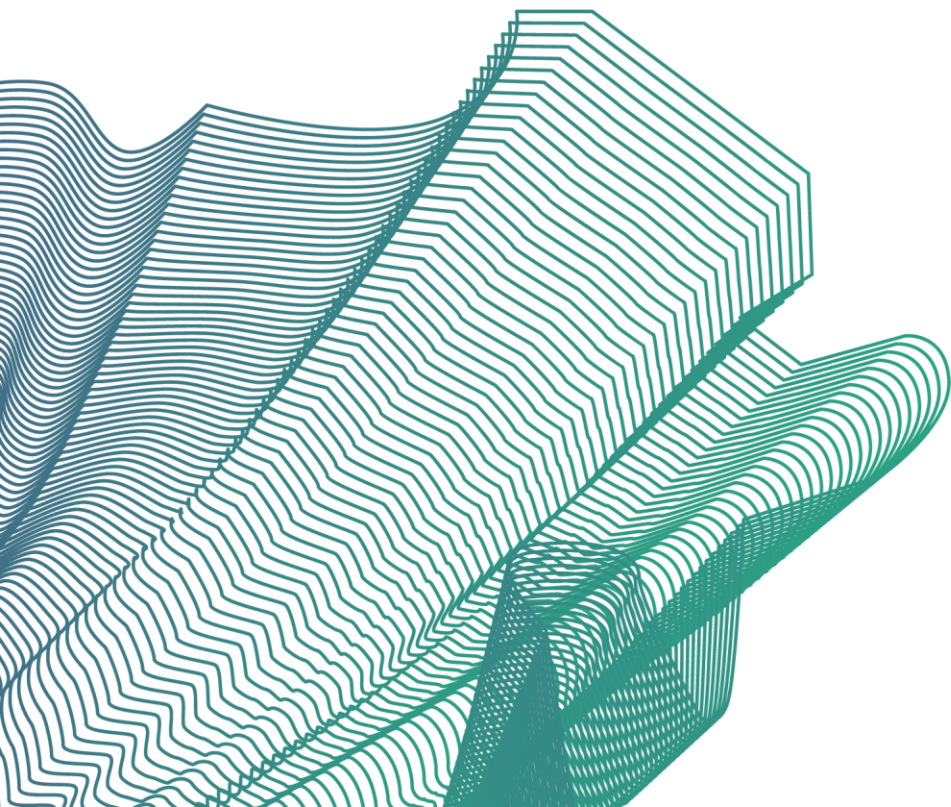
Item		Time	Pres By	Encs
1	Public & Patient Questions: <i>The Chair will take questions in writing prior to meetings and will try to respond during the meeting. However, there may be occasions when a response has to be issued in writing afterwards. This being the case, responses will be published as an item for information at the next meeting.</i>		Chair	Verbal
Business Items				
2	Prevention & Health Inequalities Update	10 mins	Sue Panesar	Enc 2
3	Rotherham Winter Plan Update	10 mins	Steph Watt	Enc 3
4	Healthwatch Annual Report 2024-25	10 mins	Kym Gleeson	Enc 4
5	Rotherham Place Partnership Update – <i>for information</i>	5 mins	Claire Smith	Enc 5
Standard Items				
6	Communication to Partners/ Promoting Events & Consultations	5 mins	Chair	Verbal
7	Draft Minutes and Action Log from Public Place Board from 16 July 2025 – <i>for approval</i>	5 mins	Chair	Enc7i & 7ii
8	Risks and Items for escalation to appropriate board (e.g. <i>Health & Wellbeing Board, ICB Board</i>)		Chair	Verbal
9	Future Agenda Items: Standing Items: <ul style="list-style-type: none"> • Updates from all Groups (as scheduled) • Achievements (as and when received) • Feedback from SY ICP Meeting – Bi-Monthly • Bi-Monthly Place Partnership Update 			Verbal
10	Date of Next Meeting: There will be no meeting in October. The next meeting will be held on: Wednesday 19 November 2025 at 9.30 –10.30am John Smith Room, Rotherham Town 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
MMC	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
OOA	Out of Area
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
SATOD	Smoking at Time of Delivery
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 Spotlight – Prevention and Health Inequalities

Wednesday 17th September 2025



South Yorkshire
Integrated Care Board

**Rotherham, Doncaster
and South Humber**
NHS Foundation Trust

The Rotherham
NHS Foundation Trust

Rotherham
Metropolitan
Borough Council



What's working well

- Development session held with partners on the 28th April
- Engagement with partners and agreement on the new template to be used for the Prevention and Health Inequalities Action Plan for 25/26
- Introduction of a New Teams Channel for external collaborators to be able to update the Action Plan
- Preparations underway to hold a Chronic Pain workshop in September
- Stronger links have been established for the programme with Housing and Neighbourhoods
- Staff recruited for the Sports England Place Expansion Programme
- Work has been undertaken around the rural health toolkit
- Development of Humanitarian Group Action Plan

Challenges and Risks

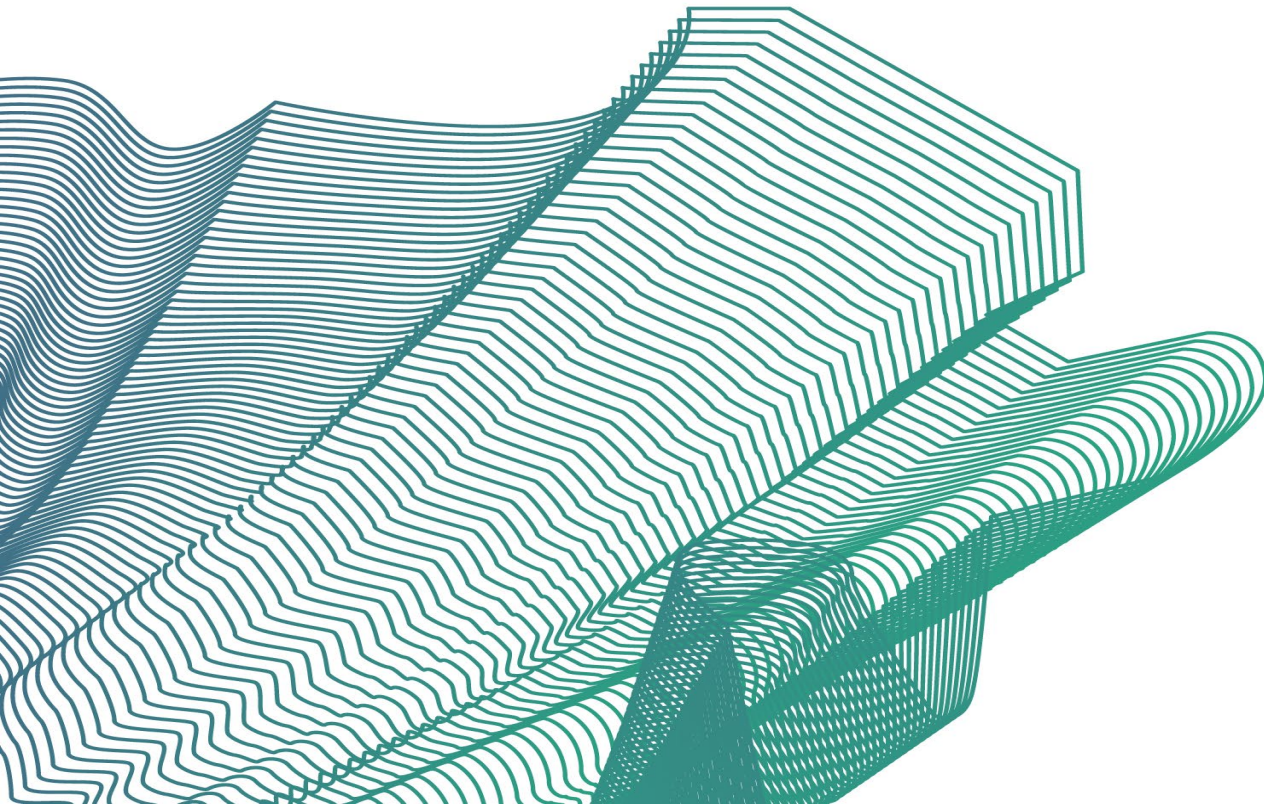
- Impact of poverty and the cost of living
- Financial position across the system
- Organisational leadership changes across the system
- Maintaining momentum across the system
- Data-sharing and having a single narrative around health inequalities

What needs to happen next

- Completion of the Prevention and Health Inequalities Action Plan for 25/26
- Present the Action Plan at Public Health SMT on 24th September
- Present the Action Plan at the Health and Wellbeing Board in November 2025
- Build on work around chronic pain and partnership working

Rotherham Winter Plan 2025-6

Place Board - September 2025



Rotherham
Clinical Commissioning Group
**Rotherham, Doncaster
and South Humber**
NHS Foundation Trust

The Rotherham
NHS Foundation Trust

Rotherham 
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Borough Council



High Level Summary Rotherham 2024-5

Winter 2024-5 Performance

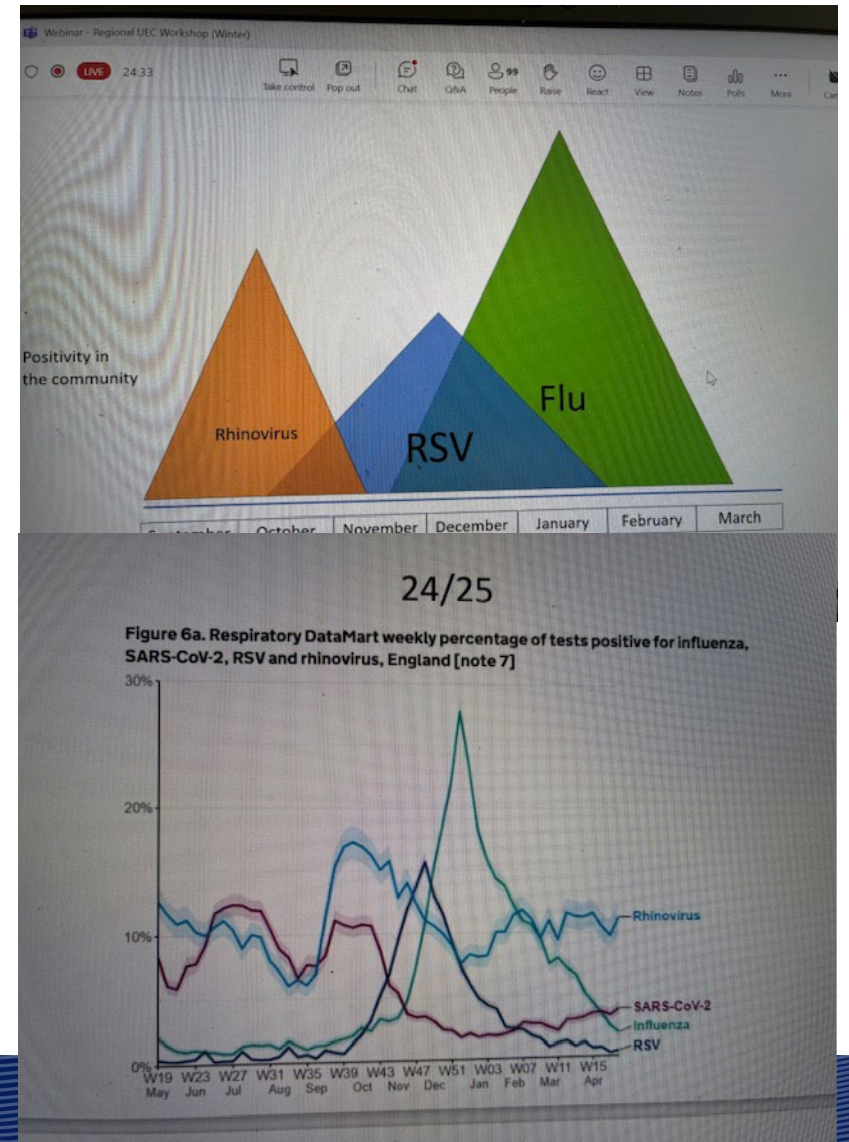
- Despite extensive development of admission avoidance pathways and activity to improve system flow, we have seen unprecedented levels of demand in the Emergency Department, particularly in quarter 4, which is higher than the national average
- The average number of attendances is c300 per day, compared to modelling for 260. It peaked on 13 March with 381 attendances
- This impacts on the number of admissions, beds open (including SDEC bedded care which impacts on flow) and discharge pathways
- TRFT flu vaccination rate compared favourably with region
- At year end system performance was 65.8% against a target of 78.8%, with YAS performance for cat 2 handovers at 27.11
- Rotherham was an outlier for NCTR

The Current Position

- In a relatively good position going into winter
- New medical SDEC
- Multi-disciplinary Transfer of Care Hub for complex admission avoidance and discharge
- High impact work/proactive care
- Increased capacity virtual ward, tech enabled
- Enablement waiting lists reduced from high of 66 to record low of 9, 13 Aug 25 with investment agreed for D2A
- System flow roles
- 4 hour performance
- Discharge ready
- New ED attendance normal 300 + playing out through system flow and pressure on discharge care co-ordination and community pathways
- Escalation beds still open
- High levels of scrutiny expected
- Still work to do

National Learning re Vaccinations 2024-5

- Importance of vaccination uptake to reduce attendances/staff sickness
- Plan for peaks based on southern hemisphere and monitor actual impact, with flexibility to adapt plans
- Need to build annual leave/staff sickness into plans
- Review IPC what has and hasn't worked and how connects with overarching plan
- Consider how staff vaccination programme can be incentivised



National priorities for 2025-6	Rotherham Plans
Improve vaccination uptake and reduce sickness	<p>Targeted plans to increase citizen/staff vaccination rates in primary care, public health and TRFT. TRFT aiming for 5% increase</p> <p>Staffing/resources based on Southern Hemisphere – peak from New year /Feb? and national data</p> <p>Staff wellbeing support and targeted rotas to cover annual leave/sickness</p>
Increase the number of people receiving urgent care in primary, community and mental health settings including UCR and virtual ward	<p>Increased access to primary care /ARI hub</p> <p>TOCH co-location for enhanced MDT working, reducing delays</p> <p>Investment in enablement to embed D2A pathway and release capacity for UCR and virtual ward</p> <p>Remote tech to support ‘amber’ acuity including SDEC hypertension</p> <p>Community X Ray pilot for care homes</p> <p>Enhanced mental health offer – safe space, crisis support, on-line/text support</p>
Meet the 45 minute ambulance handover standard	<p>W45 live from September with wider Place support</p>
Improve flow through hospitals including reducing 12 hour and discharge waits	<p>ACT/RMBC service re-design service improvements – releasing capacity</p> <p>Additional clinical staffing / porters based on demand</p> <p>Increased capacity for care co-ordination /timely decision making via TOCH</p> <p>Roll out of TOCH form complete, reduced delays</p> <p>Extended transport hours</p> <p>Reduced TTOs and Age UK TTO delivery service</p>
Set local targets to improve discharge times	<p>5% reduction planned. Focus on discharge ready date and pathway delays. Review of system flow in community bed base. New system escalation process.</p>
Reduce lengths of stay for those requiring overnight emergency admissions	<p>Understanding demand in ED targeted actions</p> <p>Medical SDEC opened July 2025 reducing need for overnight admission</p> <p>Extended/consistent SDEC opening</p>

National Performance Metrics 2025-6

- Reduce ambulance wait times for Cat 2 (stroke, heart attack, sepsis and major trauma) from 35 minutes to 30
- Eradicate ambulance handover delays, max 45 minutes
- Ensure 78% of people who attend ED are admitted, transferred or discharged within 4 hours
- Reduce number of patients waiting over 12 hours for admission or discharge
- Reduce the number of people waiting over 24 hours in ED for mental health care
- Tackle discharge delays initially focussing on those over 21 days (14 and 7 days). Aim for complex discharge within 48 hours
- Increase the number of children seen within 4 hours

Organisation Development, Communications and Engagement

- ‘Rplace – Working Together - Better’ whole system working together to support right care, time, place and reduce pressure on individuals/teams
- Connector champions
- Targeted organisational development work
- Comms and engagement plan with national, SY ICB and local plans aligned
- Local comms informed by understanding ED demand analysis
- Agree cross system weekly messages re performance/priorities and targeted actions

Governance and Assurance

- Urgent and Emergency Care Group (July-Sept)
- RPET, RMBC & TRFT assurance (Sept)
- **Place Board (sign off Place plan for national assurance) Sept)**
- Health and Wellbeing Board (Nov)
- ICB Board Assurance: NHSE Requirement (Sept)
- Health Select Committee (Nov)
- National KLOEs (throughout winter)
- Winter resilience scenario testing (Sept – Oct)

Risks and Issues



Area	Risk Description	Anticipated Impact	Mitigation Plan
A&E Attendance	Following unprecedented levels of demand in 2024-25 attendances continue to increase at the current rate	ED overwhelmed, increased waiting time, patient harm and breaches Staff burnout Increased admissions due to poor decision making	Development of alternatives pathways to ED eg xray pilot, rer virtual ward, prevention enablement, improved access to prim seasonal ARI hub Expanded SDEC offer Additional medical staffing including twilight shifts Additional clinical staffing Additional porters
Ambulance Handover	Failure to meet handover targets	Crews delayed, reducing response capacity	YAS co-located in TOCH for alternative pathways, project Chi PUSH acceptances 45 minute protocol implemented from 2 September
Acute Bed Occupancy	Insufficient capacity to meet demand	Patients backed up in ED/SDECs and short stay Outliers, Corridor care, Patient harm	Increased capacity/extended operating hours in SDECs
Primary Care Access	There is a perceived, or real, lack of primary care appointments	Patients present at ED	Investment in additional GP appointments ARI hub (with flexible start/end dates) funded from BCF winte Understanding ED demand project: Analysis of attendances to targeted action plan
Community Services	Process and system changes due to the implementation of the transfer of Care Hub leads to unintended consequences Insufficient capacity in the required pathways, particularly P1 Community commissioned bed base does not meet length of stay kpis	Patients are not tracked through into the community Discharge delays Loss of patient independence resulting in increased admissions to long term placements Delayed discharges impacting on flow Increased use of spot purchase beds	Phased implementation Tracking system being investigated, dependent on resourcing Follow up checks on a risk basis Streamlined MDTs with full partner membership. Improved re for complex discharges also used for enablement referrals More flexible resource in TOCH to allocate according to need Investment in enablement to support D2A UEC priority project to review community system flow. MDT /li leadership, membership actions and escalations
Adult Social Care	The adult social care re-design is delayed Insufficient capacity in the required pathways	Delays to the implementation of TOCH Delays to the discharge of patients or capacity to remain in community settings	Re-design implemented TOCH co-location August 2025 completed.

Area	Risk Description	Anticipated Impact	Mitigation Plan
Industrial Action	On-going Resident Doctor action with potential for others to take action	Reduced capacity. Increased delays/risk of patient harm Increased workload for those not taking IA	Contingency planning based on previous experience/national requirements
ICB re-organisation	National guidance has indicated ICBs to continue to be system co-ordinator for UEC plans in 2025-6 Reduced capacity /loss of skills/knowledge may impact on ICB's ability to deliver	System co-ordination at Place and SY level Decisions regarding funding may cause delay	Support for UEC /winter planning has continued National guidance is that ICBs will continue to be responsible for this in 2025-6 Rotherham review of responsibilities Sept – April 2026 In year impact to be reviewed when structure/timing confirmed with appropriate contingencies put in place including prioritisation of work loads



Annual Report 2024–2025

**Unlocking the power
of people-driven care**

Healthwatch Rotherham

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“The impact that local Healthwatch have is vitally important. Healthwatch are empowering their communities to share their experiences. They’re changing the health and care landscape and making sure that people’s views are central to making care better and tackling health inequalities.”

Louise Ansari, Chief Executive, Healthwatch England

A message from our Chair

Welcome to the Healthwatch Rotherham Annual Report for 2024-2025.

We have had an exciting and productive year carrying out lots of activities within Rotherham. Our priorities for 2024-25 focused on some of our seldom heard communities, building and developing relationships with these under-represented groups over a period of months. As the result of our work with these communities, we were able to:

- Collaborate with the learning disability community to design a communication card to help them to get the care that they need.
- Listen to the views of over 400 young people which led to the production of a young people's directory, to help them find support services.
- Highlight the difficulties faced by refugees in accessing health care through our case study blog, Elena's story. With the rioting we experienced over the summer, it felt particularly important to give them a voice and show the struggles they face.
- Build strong relationships with homeless support groups in Rotherham and use the voices of those people to produce a health and social care study, shining a light on some of the shocking issues they face.

We were also honoured to host 4 students on placement from the University of Sheffield. We know they gained so much from their experience and we wish them all the best for the future.

We are excited to see what the team does this next year. Although we have made a great start, we need to continue to be more inclusive and reflective of the Rotherham community and this is something that is on our agenda.



"We are proud of the amount of work that has been completed over the last 12 months with this fabulous team we have. Their hard work and diligence have really increased the profile of Healthwatch Rotherham"

Kathy Wilkinson, Healthwatch Rotherham, Chair

A message from our host organisation

At Citizens Advice Rotherham and District, we are proud to host Healthwatch Rotherham, an organisation that continues to demonstrate the impact of putting local voices at the heart of health and social care. Over the past year, Healthwatch Rotherham has extended its reach, strengthened community engagement, and consistently highlighted inequalities in access to care.

This year's achievements reflect not just the dedication of the Healthwatch team, but also the value of collaboration. From joint outreach with CARD staff at Open Arms Hubs and other community events, to developing accessible winter health advice linked to our cost-of-living support services, we have worked together to create more joined-up support for local residents.

We are especially proud of the way Healthwatch Rotherham has included under-represented groups, from refugees to young people and those with learning disabilities, ensuring their experiences influence decisions locally and across the Integrated Care System. Their commitment to listening and acting is already making a measurable difference.

As their host, we remain committed to supporting their independence, amplifying their reach, and ensuring that Healthwatch Rotherham continues to challenge, influence, and improve care across our borough.



“Healthwatch Rotherham brings real insight and challenge to health and care in our borough. We’re proud to host such a passionate, inclusive team and work alongside them in helping local voices shape better services.”

Duncan Gall, CEO Citizens Advice Rotherham & District

About us

Healthwatch Rotherham is your local health and social care champion.

We ensure that NHS leaders and decision-makers hear your voice and use your feedback to improve care. We can also help you find reliable and trustworthy information and advice.



Our vision

To bring closer the day when everyone gets the care they need.



Our mission

To make sure that people's experiences help make health and care better.



Our values are:

Equity: We're compassionate and inclusive. We build strong connections and empower the communities we serve.

Collaboration: We build internal and external relationships. We communicate clearly and work with partners to amplify our influence.

Impact: We're ambitious about creating change for people and communities. We're accountable to those we serve and hold others to account.

Independence: Our agenda is driven by the public. We're a purposeful, critical friend to decision-makers.

Truth: We work with integrity and honesty, and we speak truth to power.

Our year in numbers

We've supported more than **11,500** people to have their say and get information about their care. We currently employ **4** staff and, our work is supported by **8** volunteers.

Reaching out:



1151 people **shared their experiences** of health and social care services with us, helping to raise awareness of issues and improve care.

10407 people came to us directly (face to face, on the telephone, or by email) or via our website for clear **information and signposting** on topics such as finding an NHS dentist, help making complaints, right to choose, mental health support and finding local support groups.

4039 people have been seen through **126 outreach** engagements and events.

277 people have attended one of our **Let's Talk** events.

1540 people have received our **newsletter**.

41674 people reached through **social media** (Facebook & X).

Statutory funding:



We're funded by Rotherham Metropolitan Borough Council. In 2024/25 we received £161,262, which is £52,352 more than last year.

Our year in numbers

Championing your voice:



We published **5 topic based reports** about the improvements people would like to see in:

- Travelling to healthcare appointments and transport issues
- The healthcare experiences of autistic people and those with learning disabilities
- The healthcare experiences of refugees
- The healthcare experiences of people experiencing homelessness
- The wellbeing of young people in Rotherham

Our most popular report was:

‘How autistic people and people with learning disabilities experience healthcare’

Which highlighted, amongst other things, the struggles people have in accessing reasonable adjustments and annual health checks, as well as being listened to by healthcare services.

We have also published:

3 Enter & View reports where we have visited GP surgeries, gathering the views of patients and staff and making **32** recommendations for improvements.

12 What we heard reports which are our monthly insight reports where we highlight what we’ve heard from the public. These are shared with services to give them timely feedback as to what is, and isn’t, working.

3 quarterly insight reports which are shared at stakeholder board level meetings.

A year of making a difference

Over the year we've been out and about in the community listening to your stories, engaging with partners and working to improve care in Rotherham. Here are a few highlights.

Spring

We continued our focus on young people by attending various events throughout the year including the Dearne Valley College wellbeing event. These events led to the development of our Young People's directory.



We produced our first ever Transformation Strategy outlining our vision, what we aim to achieve and who will support us in achieving it, to improve our transparency and accountability to those we represent.



Summer

Appointment times were moved and extra bus stops added after our transport report showed that some Rotherham residents struggled to attend healthcare appointments due to poor public transport provision.



We produced a report every quarter which was presented at various boards to amplify the voice of Rotherham residents and enhance services understanding of the issues faced by those in our community.



Autumn

We raised menopause awareness through Let's Talk in collaboration with Voluntary Action Rotherham, after undertaking training to become menopause champions and advocates.



Our Strategic Advisory Board took part in a development session with Healthwatch England to help them review their role and improve how they guide our work to maximise our impact in the future.



Winter

We were commissioned by ADASS to conduct a mystery shopper exercise to assess access to social care information and support at RMBC. Our recommendations helped improve their service ahead of a peer review.



Due to increased pressure on hospital services this winter, we produced a handy guide on 'What service should I use?'. This helped people find the most appropriate service to meet their healthcare needs.



Working together for change

We've worked with neighbouring Healthwatch to ensure people's experiences of care in Rotherham, Sheffield, Doncaster and Barnsley are heard at the Integrated Care System (ICS) level, and they influence decisions made about services at NHS South Yorkshire Integrated Care System.

This year, we've worked with Healthwatch across South Yorkshire to achieve the following:

A collaborative network of local Healthwatch:



Healthwatch in South Yorkshire meet bi-weekly to share knowledge and identify any county-wide issues where collaboration would be beneficial to improve health inequalities across our area.

We work together as Healthwatch to make sure that a local representative from our network attends all high level meetings, ensuring that the needs and experiences of local residents are reflected in the planning and delivery of health and social care services at a regional level.

Building strong relationships to achieve more:



Collaborating with Healthwatch Doncaster, Healthwatch Rotherham highlights the patient voice of both communities through our position on Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH) council of governors. This helps RDaSH meet promise 4 & 5 of their 28 promises strategy, ensuring that they involve communities at every level of decision making and put patient feedback at the heart of how they deliver care.

"The feedback local Healthwatch hear in their communities and share with us at Healthwatch England is invaluable, building a picture of what it's like to use health and care services nationwide. Local people's experiences help us understand where we – and decision makers – must focus, and highlight issues that might otherwise go unnoticed. We can then make recommendations that will change care for the better, both locally and across the nation."



Louise Ansari, Chief Executive, Healthwatch England

Working together for change

We've worked together with our hosts Citizens Advice Rotherham and District (CARD) to help improve the lives of people living in Rotherham, listening to their experiences and working with partner organisations to influence decisions made about services across the borough and nationally.

Collaborative working with our host:

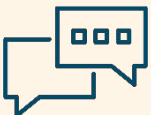
We work closely with CARD's Research & Campaign's officer to find opportunities where we can work together to promote local services, information and help for Rotherham residents on locally or nationally identified issues.



This year we produced an information article on 'Looking after your health in the winter months' which provided helpful tips and advice on how to keep well during the cost of living crisis, with links to CARD services such as food bank referrals and benefit checks. We were also able to tie this in with the project work Rotherham Metropolitan Borough Council and CARD were doing on Money Matters, the Energy Crisis Support Scheme, Pension Credit payments and the Winter fuel allowance, to provide a comprehensive information piece to help local people.

Building strong relationships to achieve more:

Throughout the year we attend various outreaches, such as the Open Arms community support hubs and Rotherham Ethnic Minority Alliance (REMA), with our colleagues at CARD to provide a 'one stop shop' for Rotherham residents needing help.



We also work together, planning and attending festival events, such as the Rotherham show, to take the opportunity to engage with local people and listen to what they have to say. This helps us get a better overall picture of the issues facing our local communities.

We have a mutual understanding of each other's work which allows us to refer individuals who come to our services to the help provided by the other. This helps us provide a complete support service to Rotherham residents.

We've also summarised some of our other outcomes achieved this year in the Statutory Statements section at the end of this report.

Making a difference in the community

We bring people's experiences to healthcare professionals and decision-makers, using their feedback to shape services and improve care over time.

Here are some examples of our work in Rotherham this year:

Creating empathy by bringing experiences to life



Hearing personal experiences and their impact on people's lives helps services better understand the issues people face.

We highlighted the unique experiences of refugees through our blog - Elena's story. Her story emphasised the inconsistencies in care she experienced from NHS services across the country and the real impact that this has had on her life. The power of Elena's words led to a request from the South Yorkshire ICB for her to present to the board in person to deepen their understanding.

Getting services to involve the public



By involving local people, services help improve care for everyone.

Veteran's at Rotherham Military Community Veterans Centre (MCVC), told us they wanted a veteran's health passport that could be used when attending healthcare appointments. Working in collaboration with The Rotherham NHS Foundation Trust (TRFT) and the veteran's at MCVC, a new health passport was developed to meet the needs of this community.

Improving care over time



Change takes time. We work behind the scenes with services to consistently raise issues and bring about change.

Throughout the year we have worked hard to raise our profile, engaging with more Rotherham residents than ever and ensuring that your feedback reaches decision makers at the highest levels. In addition to raising local issues at board meetings, our work has been highlighted by local newspapers through detailed reporting on our findings. The more we listen, the more we can influence positive change across our community. In 2024-25 we saw a 33% increase in residents sharing their experiences of health & social care services.

Listening to your experiences

Services can't improve if they don't know what's wrong. Your experiences shine a light on issues that may otherwise go unnoticed.

This year, we've listened to feedback from all areas of our community. People's experiences of care help us know what's working and what isn't, so we can give feedback on services and help them improve.

Our 'What we heard' and 'Enter & View' reports allow us to report directly back to services on a regular basis to allow them to respond to feedback and consider ways to improve their services.



Listening to your experiences

Improving support for young people

Last year, we focused on the wellbeing of young people in Rotherham to find out what matters to them, what challenges they face and what services can do to support them.

What did we do?

We gathered feedback from 445 young people across Rotherham through:

- Attending college wellbeing events
- Organising and delivering Let's Talk information sessions
- Regular ongoing engagements with schools
- Small focus groups
- Online and paper based surveys

Key things we heard:

Young people face multiple pressures that impact on their wellbeing but:

53%

of the young people we spoke to didn't know where to turn for help dealing with these.



Working in conjunction with two placement students from the University of Sheffield, we produced a Young People's directory covering information about the support services available to Rotherham's young people.

What difference did this make?

We created a QR code poster to link to our Young People's directory, which we shared with all the secondary schools, sixth forms and colleges in Rotherham. We also produced discreet, smaller handout versions that young people could pick up from us at events. Along with adding it to our website, promoting it on social media and in the local press,, we ensured it was widely available to help young people find the support that they need.

Our research also highlighted other areas that affected the wellbeing of young people in Rotherham. We already work with local colleges delivering Let's Talk information sessions on smoking & vaping, but we are now additionally delivering talks on sleep after survey results highlighted that 76% of young people thought that the amount of sleep they get affected their wellbeing in some way. We are also working on developing a new session on body image in response to the feedback we received around the biggest pressures young people face. Both sessions will improve young people's access to trustworthy help and information. Our report has also been sent to ministers to contribute the governments work on building the National Youth Strategy which will be published later in the year.

Listening to your experiences

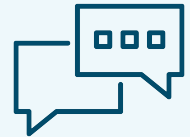
Highlighting health inequalities in the community

Some autistic people and people with learning disabilities face health inequalities which means they may not live as long or have the same access or quality of care as others.

Through surveys, focus groups and engagement work, we got feedback from 65 people who told us what worked well and what services needed to do to make the care they provide better. From this we made 12 recommendations for improvements.

Key things we heard:

- **Not everyone is given the reasonable adjustments they are entitled to**
- **Health passports aren't always known about or used as they should be**
- **Communication needs to be better**
- **People don't always feel listened to**
- **Not everyone is getting the annual health check they should have**



"Everyone should be supported as an individual... relationships are key to good healthcare."



What difference did this make?

We have added an Easy Read section to our website to help Rotherham residents get health information in a more accessible format. We have also created some of our own Easy Read information, to explain about Healthwatch, how to get help with your health and how to sort out problems with the care you receive at the hospital, doctors or dentists. We have shared these documents with other local Healthwatch and the South Yorkshire ICB for them to use. Our 'Have your say' survey is also available in Easy Read to allow everyone to have a voice and be listened to.

Following our recommendations, The Rotherham NHS Foundation Trust recognised the importance of sending appointment letters in an Easy Read format to help accessibility and reduce non-attendance, and are consulting with us to create these. Additionally, they are also collaborating with us to introduce an Easy Read patient information section on their website.

Working with those with lived experience, we produced a communication card for those with learning disabilities to use at health care appointments. The card highlights their personal reasonable adjustment needs and explains the Accessible Information Standard legal requirement to services.

Hearing from all communities

We're here for all residents of Rotherham. That's why, over the past year, we've worked hard to reach out to those communities whose voices may go unheard.

Every member of the community should have the chance to share their story and play a part in shaping services to meet their needs.

This year, we have reached different communities by:

- Connecting with the Chinese society to hear from a community that we rarely get feedback from.
- Attending regular outreach sessions at Rotherham Ethnic Minority Alliance (REMA) to provide information and support for people in those communities who face health inequalities due to socio-economic and communication difficulties.
- Liaising with individuals who provided in depth case studies for our projects to get their stories filmed, capturing their powerful messages, to get them seen at the highest level at the South Yorkshire ICB.



Hearing from all communities

Building relationships with the homeless community in Rotherham

We wrote a report on homelessness and the health care challenges they face.

We highlighted 4 key themes affecting this community: Mental health issues, Problems with physical health, Addiction and attitudes, Access to health care and digital exclusion, and promoted the action being taken in Rotherham to address needs and provide support.

What difference did this make?

Our regular, ongoing engagement with homeless support services in Rotherham has allowed us to provide continued help this community by helping to address their health care issues, such as making a GP appointment, signposting to mental health services or liaising with other services to support their complex needs. We were also able to highlight that the dental commissioning scheme set up to provide dental services to those experiencing homelessness, was not accepting referrals from all support services. By contacting those in charge of the scheme we were able to resolve the issue and ensure that all appropriate referrals were accepted.

Raising awareness of the Accessible Information Standard (AIS)

The AIS ensures people with disabilities or sensory losses receive information and communication support that they can access and understand.

People in the deaf community, and people with learning disabilities, told us they weren't always getting the reasonable adjustments they needed at their health care appointments. In collaboration with both communities, we created two communication cards to help them highlight their rights under the AIS.

What difference did this make?

The credit card sized communication cards were designed to be easy to carry in wallets and allow individuals to highlight their personal reasonable adjustment needs on the front, and to provide services with information about their AIS legal requirements on the back. We provided physical copies of the card to both communities and promoted their availability to other services. We have been approached by services such as The Rotherham NHS Foundation Trust, Rotherham Adult Neurodiversity Support Service (RANSS) and RDaSH, who have requested to have a supply, or have the templates, to be able to provide copies their service users. Other communities have also reached out to us to collaborate to produce a communication card to suit their needs.

Information and signposting

Whether it's finding an NHS dentist, making a complaint, or choosing a good care home for a loved one – you can count on us. This year 10,407 people have reached out to us for information, support or help finding services.

This year, we've helped people by:

- Providing up-to-date information people can trust, either face to face, by email or over the phone
- Creating, updating and sharing service directories for Young people, Mental health and Carers on our website
- Helping people access the services they need, when they need them
- Supporting people to look after their health by providing Let's Talk sessions and putting information articles on our website
- Signposting people to additional support services such as Absolute Advocacy



Raising health awareness in Rotherham

Thanks to the connections we have made across services and communities, we have provided multiple health information sessions.

Throughout 2024-2025 we increased health awareness in Rotherham by running Let's Talk sessions and connecting groups to services to provide information talks. This has enabled community groups and colleges to get appropriate and reliable information on subjects relevant to them such as Oral health, Healthy eating & living, Menopause, CPR & defibrillators, Samaritans, Digital skills and Smoking & Vaping.

Our Stoptober talks highlighted the health impacts of smoking and vaping to 120 students, with some of them vowing to try to stop as a result. We were also able to connect U3a group to Rotherham Council's digital inclusion team to help them learn how to use IT more confidently, which is increasingly important to be able to access healthcare services.

"The feedback has been super and has made students very proactive in quitting smoking which is very positive."



Supporting independence at GP appointments

When Jenny told us how she was unable to independently access her GP appointments, we stepped in to help.

Jenny's visual impairment meant that she was struggling at GP appointments to sign in, see the screens to tell her to go through to the doctor and then find the right consultation room. This meant she was having to attend her appointments with her husband which she felt impacted her independence and privacy.

Healthwatch contacted Jenny's GP practice on her behalf and arrangements have now been made for her to sign in with staff at reception. They will then either tell her when she needs to go through, or the practitioner will come and collect her. These simple changes have restored Jenny's ability to access her appointments independently and provided her with the privacy that she needed.

"Thanks for all your help. I'd not considered speaking to reception staff as I thought I had to use the electronic sign in pad"



Showcasing volunteer impact

Our fantastic volunteers have given 511 hours to support our work. Thanks to their dedication to improving care, we can better understand what is working and what needs improving in our community.

This year, our volunteers:

- Attended engagement and Let's Talk events to promote our work.
- Helped us collect and record the experiences and feedback from local communities.
- Carried out Enter and View visits to local services to help them improve.
- Carried out research, drafted reports and produced presentations for us to use in our future work.



Showcasing volunteer impact

At the heart of what we do

From finding out what residents think to helping raise awareness, our volunteers have championed community concerns to improve care.

"Being part of the Healthwatch Rotherham team has...not only boosted my confidence in many different ways but also gave me a deeper appreciation of the importance of ensuring that diverse voices are being heard and valued"

Psychology students, Coralie & Will, joined us on placement from the University of Sheffield.

"One of the most rewarding parts was the sheer amount of interaction I had with different people...listening to their stories, learning about their experiences, and gaining a much deeper understanding of the challenges people face in accessing care. It's something that no lecture or textbook could have taught me."

Coralie & Wil (placement students)



"I volunteered with Healthwatch to help give a voice to my community and shine a spotlight on the excellent and not so excellent things happening in health and social care. Since joining the team, I have seen first hand the great things that can be achieved when groups work in partnership to give a much-needed voice to patients. The training and support from the Rotherham team has been amazing and I am looking forward to a long relationship with Healthwatch Rotherham."

Tony Swindells (SAB member)



Be part of the change.

If you've felt inspired by these stories, contact us today and find out how you can be part of the change.



www.healthwatchrotherham.org.uk



01709 717130



info@healthwatchrotherham.org.uk

Finance and future priorities

We receive funding from Rotherham Metropolitan Council under the Health and Social Care Act 2012 to help us do our work.

Our income and expenditure:

Income		Expenditure	
Annual grant from Government	£161,262	Staff costs	£161,998
Additional income	£0	Operational costs	£11,642.79
		Overhead and administration costs	£21,579.02
Total income	£161,262	Total Expenditure	£195,219.81

Next steps:

Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.

We will also work together with partners and our local Integrated Care System to help develop an NHS culture where, at every level, staff strive to listen and learn from patients to make care better.

Our top three priorities for the next year are:

1. Understanding the communication difficulties experienced by people using health and social care.
2. Working with those addicted, or in recovery from addiction, to understand their experiences of health and social care and the health inequalities they face.
3. Investigating the experiences of those using social care services in Rotherham, with a particular focus on those accessing care at home.

We will continue to work with Healthwatch England to highlight the issues faced by our local communities and help them make recommendations for improvements on a local and national level.

Statutory statements

Citizens Advice Rotherham and District are the host organisation for Healthwatch Rotherham, 2 Upper Millgate, Rotherham, S60 1PF.

Healthwatch Rotherham uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement of volunteers and lay people in our governance and decision-making.

Our Healthwatch Statutory Advisory Board consists of 6 members who work voluntarily to provide direction, oversight, and scrutiny of our activities.

Throughout 2024/25, the Board met 11 times to hear what we have been doing, and what we have been hearing from the community. As well as holding us accountable to our key performance indicators, they have made decisions on matters such as appointing a new Chair and Vice Chair to the board to ensure strong, clear leadership into 2025/26. Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. They oversee the approval of our work plan priorities, making sure that we focus on topics that are important to local people, address need, develop our connections with all members of the community and have potential to have impact and influence change.

We ensure wider public involvement in deciding our work priorities by analysing the feedback we receive throughout the year and from the permanently live online survey we run which asks for opinions on what our focus should be.

Methods and systems used across the year to obtain people's experiences

We use a wide range of approaches to ensure that we engage with as many people as possible, from all community groups in Rotherham, to provide us with insight into their experience of using services.

During 2024/25, we have been available by phone and email, provided a web form on our website and through social media, attended organised events, met with community groups, run information 'Let's talk' sessions, attended regular outreach engagements and run subject specific surveys and focus groups.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website, on our social media accounts and will include it in our newsletter.

Statutory statements

Taking people's experiences to decision-makers

We ensure that people who can make decisions about services hear about the insights and experiences shared with us.

For example, in our local authority area, Healthwatch Rotherham is part of the Mental Health, Learning Disability, Dementia & Autism Strategic Delivery group which means we have a direct line into policymaking for some of the most vulnerable groups. This kind of representation is key to ensuring that any systemic barriers or inequalities are addressed with genuine insight from those most affected. Equally, our participation in the Primary Care Delivery Group and the hospital patient experience committee helps ensure that everyday interactions in the healthcare system—often the most impactful on patient lives—are continually improved.

We also take insight and experiences to decision-makers in South Yorkshire Integrated Care System. For example, we attend the local Place Board, acting as an independent voice for residents, ensuring their needs and experiences are reflected in the planning and delivery of health and social care services. We also share our data with Healthwatch England to help address health and care issues at a national level.

Healthwatch Rotherham's active involvement on these committees clearly demonstrates our commitment to ensuring that community voices are not just heard, but are instrumental in shaping decisions across multiple healthcare domains in Rotherham and beyond.

Healthwatch representatives

Healthwatch Rotherham is represented on the South Yorkshire Health and Wellbeing Board, South Yorkshire Integrated Care Partnerships and South Yorkshire Integrated Care Board by Kym Gleeson, Healthwatch Rotherham manager.

During 2024/25, our representative has effectively carried out this role by representing the patient, service user, and carer voice, ensuring that the local community's needs and experiences are integrated into the board's decision-making processes

Statutory statements

Responses to recommendations

We had 0 providers who did not respond to requests for information or recommendations. There were no issues or recommendations escalated by us to the Healthwatch England Committee, so there were no resulting reviews or investigations.

Enter and view

Location	Reason for visit	What you did as a result
GP Practice – Swallownest Health Centre	Feedback received from Rotherham residents	Wrote a report with recommendations – the service has followed up on some of these including adding opening hours at the entrance, clearly displaying complaint procedures and increasing signage around the reception area.
GP Practice – Woodstock Bower Surgery	Feedback received from Ferham festival	Wrote a report with recommendations – the surgery has followed these up and implemented the changes including diversifying their PPG, changing the decor to make it more dementia friendly and taking part in dementia training workshops run by one of our board members.
GP Practice – The Gate Surgery	Feedback received from Rotherham residents	Wrote a report with recommendations which the surgery took note of and responded to.

Statutory statements

2024 – 2025 Outcomes

Project/activity	Outcomes achieved
Healthwatch England (HWE) asked for local Healthwatch to provide case study contacts for their unmet social care study	We put HWE in touch with Alan who spoke to them about his experience as full time carer, looking after his wife with Alzheimer's. Alan's story was used in the article produced by HWE.
Monthly What we heard/Spotlight shares reports	The feedback we have received from Rotherham residents has been fed back to local services every month through our 'What we heard' and 'Spotlight shares' reports. This is helped services making changes quickly, where appropriate, to improve care.
Monthly newsletter	We have published a newsletter every month to let people know what we working on, highlighting current and upcoming projects and raise the awareness of what is happening in the local area
Connecting services	We regularly help connect local services with each other where the links would help provide groups with information and support. For example, we put Rotherham Hospice in touch with the Macular group to do a talk which led to the group having a tour of the hospice and further links being made with other groups. We also put Dearne Valley College in touch with multiple services such as The Rainbow Project, Kooth, Talking Therapies and the South Yorkshire Eating Disorder Association to help support their wellbeing events.

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#HealthwatchRotherham



@HWRotherham

Rotherham Place Partnership Update: July/August 2025

Rotherham Hospice Soars to New Heights with ‘Outstanding’ CQC Rating



Rotherham Hospice is thrilled to announce that, following a rigorous inspection by the Care Quality Commission (CQC), they have been awarded an overall ‘**Outstanding**’ rating, the highest possible standard of care in England. This is the first time in their history that they have achieved an ‘Outstanding’ overall rating. It marks a significant milestone for the hospice and community. This exceptional result speaks to the heart of the 2024–2030 strategy, ‘*Living Life’s Wishes*’, which commits to delivering personalised, compassionate care, fostering inclusivity, and investing in people.

The CQC rated the Hospice as ‘Outstanding’ in both ‘Well-led’ and ‘Caring’ domains, directly reflecting the first strategic aim: to ensure care is delivered based on what matters most to the patient. This means that the leadership team was recognised for creating a culture of continuous improvement, openness, and accountability – a culture where staff feel valued, supported, and empowered to provide exceptional care. In the ‘Caring’ domain, the CQC highlighted how staff and volunteers go above and beyond to treat every person with dignity, kindness, and genuine compassion. Together, these ‘Outstanding’ ratings demonstrate that at Rotherham Hospice, every decision, every moment, and every conversation is guided by the voices and wishes of patients and their families – because that’s what matters most.

Mat Cottle-Shaw, Chief Executive of Rotherham Hospice, said: *“To be rated as ‘Outstanding’ for the first time in our history is a testament to the unwavering dedication of our entire hospice family; staff, volunteers, and supporters. Achieving this during my first inspection as CEO fills me with immense pride and gratitude.*”

I want to say a heartfelt thank you to every single person who contributes to the hospice, from those who deliver care at the bedside to the supporters and volunteers who work tirelessly behind the scenes. This ‘Outstanding’ rating belongs to you all. It’s proof that our commitment to truly listening, empowering choice, and ensuring dignity in every moment is not just words on a page; it’s lived every single day because of your kindness, compassion, and unwavering support.”

This ‘Outstanding’ rating is more than an accolade; it’s a powerful validation of the Hospice mission to make sure everyone in Rotherham can easily and confidently access the very best palliative and end-of-life care. Looking ahead, they remain determined to build on this success, to expand our services and strengthen our capacity to meet the growing needs of the people of Rotherham, ensuring that everyone has access to care that honours their wishes and enriches their final days.

Chris Edwards, Deputy Chief Executive of NHS South Yorkshire ICB and Place Director for Rotherham, said: *“This ‘Outstanding’ rating is a remarkable achievement for Rotherham Hospice and a moment of real pride for our local health and care system. The hospice plays a vital role in supporting people and families across Rotherham with expert, compassionate end-of-life care. The CQC’s recognition reflects not only the skill and dedication of the hospice team, but also the strength of local partnerships that place people and their wishes at the centre. We are proud to work alongside Rotherham Hospice and celebrate this success with them.”*

The Award Winning **Rotherham Care Homes Hydration Project** was launched in 2022 to address rising rates of urinary tract infections (UTIs) and antibiotic use in local care homes, after it was discovered that care home residents were 10 times more likely to be dehydrated than residents from their own homes. Key areas of impact from the evaluation undertaken by NHS England on the eight pilot sites shows:

- 5.8% decrease in ambulance call outs to care homes in the intervention period vs baseline
- 13.1% decrease in antibiotic prescriptions in care homes in the intervention period vs baseline
- 18.2% decrease in repeat antibiotics prescriptions in care homes in the intervention period vs baseline
- 9.1% decrease in UTI admissions from care homes in 2024/25 vs 2023/24
- 32% decrease in sepsis admissions from care homes in 2024/25 vs 2023/24
- 10.6% decrease in falls admissions from care homes in 2024/25 vs 2023/24
- 41.6% decrease in dehydration admissions from care homes in 2024/25 vs 2023/24

The above is against a backdrop of overall admissions from care homes increasing across the same period. These measures are estimated to have prevented **161 admissions** over the reporting period, resulting in a saving of **1305 bed-days**.

Rotherham Dementia Event on the 23 July

Over 75 Rotherham partners attended the event which provided the opportunity for members to undertake table top exercises for the following 4 dementia topics (preventing well, diagnosing well, supporting well, and dying well) we also had a number of valuable speakers sharing presentations at the event too. The plan moving forward is to continue local discussions with partners within each of the 4 dementia topics, utilise the dementia 100 framework tool to review where we feel Rotherham services are and develop an improvement plan to empower partners and consult with patients and the community to progress this work. Initial feedback from the event includes:

Needs to be more sharing and learning events, would like to see more people with dementia and carers involvement. All very interesting and useful, look forward to what comes next

Very informative I didn't realise there was so much resource and support available

Very useful/informative

Thank you, a follow up session would be good

As an RDASH employee I had the original invite sent from a colleague and I found the whole day really interesting and relevant and would like to attend future events.

Would have been beneficial for patients and carers to be involved

Catering was excellent.

Thank you for the invite very useful productive day.

Think these events should be held more regularly.

Good event with such a variety of themes and presenters covering all aspects of dementia pathway.

I just wanted to say that the morning session was fantastic, the speakers were very enthusiastic and passionate about their work and it's evident that there is so much work going on around dementia. The discussions on our table were really productive and generated a lot of ideas about working together with Voluntary and Local Authorities and Health for the benefit of Rotherham Residents. I really enjoyed it

Patients/carers were expected to attend the event however for different reasons they were unable to join us on the day. We will work with patients and carers when we are in the process of consultation.

A Royal Celebration, 60 Years of Citizens Advice Rotherham! 🎉



Citizens Advice Rotherham were honoured to welcome HRH The Princess Royal to their town centre office as part of our 60th anniversary celebrations.

Her Royal Highness toured the services, met the brilliant staff and volunteers, and unveiled a commemorative plaque to mark six decades of supporting the people of Rotherham.

From advice teams to amazing partners, this event was a true celebration of everyone who's helped Citizens Advice Rotherham to reach this milestone.

Here's to the next 60 years of standing by our community, stronger than ever!

The Rotherham NHS Foundation Trust (TRFT) Same Day Emergency Care (SDEC)



The unit opened as part of a broader expansion of urgent and emergency care services. This £7 million government-funded project aims to increase capacity and provide timely treatment for patients, ultimately improving the flow of the Urgent and Emergency Care Centre (UECC) and reducing wait times.



VAR has been re-awarded the Local Infrastructure Quality Award, (LIQA) from the National Association for Voluntary & Community Action (NAVCA)

The LIQA is independently assessed, VAR have held the award for 3 years and are the only Voluntary Action / Council for Voluntary Service in South Yorkshire that holds the LIQA accreditation.

The LIQA is important in that it benchmarks VAR activities and outcomes against a set of clear criteria; and it demonstrates strengths and impact. It is designed for local VCSE infrastructure provision, (such as VAR) and assesses across the four functions of infrastructure:

- Leadership and advocacy
- Partnerships and collaborations
- Capacity building
- Volunteering

The accreditation is testimony to VARs brilliant board members, staff and volunteers who deliver the work.

Rotherham Social Prescribing UECC scheme annual report 2024/25

263 referrals from hospital teams received, top 5 referring teams are:

- Integrated Discharge Team 51
- Urgent Therapy Team 37
- Reablement Team - RMBC 35
- Healthier Hospitals Programme 26
- Community Hospital Admission Avoidance Team (UECC) 18

196 patients received a Social Prescribing assessment - 75% of referred patients engaged with the service

Service referrals:

- 199 referrals were made to micro-commissioned (funded) VCS services
- 129 referrals were made to statutory services (health / adult social care / housing)
- 67 referrals were made to non-commissioned VCS services
- 53 signposts were given to patients to help them access services

Impacts:

- When followed up 4 – 6 months after assessment, 73% of patients reported an improvement in wellbeing in at least one of the eight outcome measures.
- When followed up 4 – 6 months after assessment, 77% of patients reported they had no further hospital admissions

Table showing wellbeing improvements for patients with a low baseline wellbeing score:

Wellbeing Indicator	% with improved wellbeing at follow-up after low baseline score
Family and Friends	44%
Feeling Positive	54%
Lifestyle	50%
Looking After Yourself	65%
Managing Symptoms	69%
Money	47%
Where You Live	59%
Work Volunteering and Other Activities	53%

An NHS health facility is planned for a former Boots store in Rotherham

Councillors have backed a two-phase redevelopment that would transform the disused building on Effingham Street into a Town Centre Health Hub in two phases. Rotherham Council acquired the site, which had stood empty since 2022, in May 2024 as part of plans to take over underused town centre properties for regeneration efforts.

Phase one of the project would see Abbey Pharmacy relocate from Howard Street, freeing up space ahead of redevelopment works at the Indoor Covered Market, due to begin in February 2026. This solution avoids delays to the market project and keeps a valued health service in the town centre.

The second phase will explore the potential for the rest of the building to house GP or walk-in healthcare services, in partnership with local NHS providers.

The council says the move is part of efforts to improve access to primary care in the town centre, while bringing a prominent empty building back into use. The project also aims to support footfall and economic growth in the high street area, next to the new markets and library.

It has been inspired by a similar scheme in Barnsley, where a community diagnostic centre in the Glassworks has been credited with attracting extra visitors, additional spending and cutting levels of missed appointments due to its proximity to public transport.

Feasibility work for the second phase will begin this summer, with a focus on how the remaining space could be used by GPs or community health providers. No final decision has been made on the exact services, but officers say the building could be adapted to support a mix of health and wellbeing care.

Health services delivered in town centre locations, including Barnsley, have been shown to cut missed appointments, boost footfall for local businesses, and improve patient outcomes. The council says it hopes to mirror that success in Rotherham.



Minutes

Title of Meeting:	PUBLIC Rotherham Place Board: Partnership Business
Time of Meeting:	9.30am – 10.30am
Date of Meeting:	Wednesday 16 July 2025
Venue:	John Smith Room, Rotherham Town Hall
Chair:	Chris Edwards
Contact for Meeting:	Lydia George: lydia.george@nhs.net/ Wendy Commons: wcommons@nhs.net
Apologies:	Wendy Allott, Director of Financial Transformation - Roth, NHS SY ICB Anand Barmade, Clinical Director, Connect Healthcare Rotherham Richard Jenkins, Chief Executive, The Rotherham NHS Foundation Trust John Edwards, Chief Executive, Rotherham Metropolitan Borough Council Toby Lewis, Chief Executive, Rotherham, Doncaster and South Humber NHS Foundation Trust Ian Spicer, Deputy Chief Executive, Rotherham Metropolitan Borough Council Bob Kirton, Managing Director, Rotherham NHS Foundation Trust Kym Gleeson, Service Manager, Healthwatch Rotherham
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:

Chris Edwards (**CE**), Rotherham Place Director, NHS South Yorkshire ICB
 Mat Cottle-Shaw (**MCS**), Chief Executive Officer, Rotherham Hospice
 Alex Hawley (**AH**), Acting Director of Public Health, Rotherham Metropolitan Borough Council
 Shafiq Hussain (**SH**), Chief Executive, Voluntary Action Rotherham
 Dr Jason Page (**JP**), Medical Director, Rotherham Place, NHS SY ICB
 Jodie Roberts (**JR**), Director of Operations, The Rotherham NHS Foundation Trust (deputising)
 Andrew Russell (**AR**), Director of Nursing – Rotherham & Doncaster, NHS SY ICB
 Claire Smith (**CS**), Director of Partnerships Rotherham Place, NHS SY ICB (deputising)
 Andrew Brankin (**AB**), Rotherham Care Group Director, Rotherham, Doncaster and South Humber NHS Foundation Trust (deputising)

Participants:

Cllr Joanna Baker-Rogers (**JBR**), Health & Wellbeing Board Chair, RMBC
 Lydia George (**LG**), Transformation & Partnership Portfolio Manager, NHS SY ICB
 Shahida Siddique (**SS**), Non-Executive Member, NHS SY ICB

In attendance:

Jude Archer (**JA**), Assistant Director of Transformation, NHS SY ICB
 Helen Sweaton (**HS**), Joint Assistant Director – C&YP, RMBC/ICB

Minute Taker:

Wendy Commons, Business Support Officer (Rotherham), NHS SY ICB

Item Number	Discussion Items
24/07/25	Public & Patient Questions
There were no questions from members of the public.	
25/07/25	Maternity, Children & Young People's Update
<p>Helen Sweaton reminded Members that the key priorities for the group are:</p> <ul style="list-style-type: none"> ➤ Best Start for Life ➤ Mental health and emotional wellbeing ➤ Special Educational Needs and Disabilities ➤ Looked after Children ➤ Preparation for Adulthood <p>HS updated on progress with the priority for all children getting the best start in life and going on to achieve their potential, including:</p> <ul style="list-style-type: none"> – The publication of positive evaluations of Rotherham's pilots for diabetes family support and hospital youth workers – Updating of the start for life brochure which has been shared in baby packs and with midwifery teams. It now includes safe sleep and improved guidance on family hub registration. – First stage assessment for Children's Centres BS5 took place on 1 May 2025 with formal accreditation expected in the coming months. – In March SENCO Network TakeOver saw CAMHs and Education practitioners coming together where it was agreed to update the neurodevelopmental pathway to request two cycles of plan to review rather than two terms. Demand continues to increase significantly. – Recruitment had been successful to increase available assessments in the Child Development Centre via the children's work programme pooled budget non recurrent funding. – To improve accessibility and maintain confidence in clinical appropriateness, the pathway for neurodevelopmental assessment under patient choice via school based referral and intermediary service has been streamlined. <p>HS advised of the challenges and risks to delivering some of the priorities:</p> <ul style="list-style-type: none"> – Despite mitigations being agreed, the reduction in funding into the Smoking at Time of Delivery Service may reduce uptake of the service by the most vulnerable and may also impact on capacity to deliver the new national incentive programme. The risk register has been updated. HS will give a more detailed update to Place Board next month. – Work on waiting time trajectories in the child development centre and in CAMHs are moving forward in line with the plan already in place – Increased demand for therapy service is impacting on waiting times. Work has been done to understand demand and capacity which has informed proposals for the SEND Executive Board to further embed a graduated response. – Additional special school sites have impacted the ability of therapy service to meet the needs identified in EHCPs. – To align with the timeframe for development of technology to reach into multiple system, the timeframe for the health passport has been revised to Quarter 4 of 24/25. 	

Going forward the group will be focussing on:

- the plan to address the waiting time trajectories in CDC are delivered and this will be overseen by the SEND Executive Board
- Work will continue to increase capacity and throughput of assessment to reduce waiting time for children 5-19 neurodevelopmental pathway
- Development and delivery of a system wide graduated response for therapy services
- A system review of provision of therapies in special schools to consider how best to meet pupil need and ensure efficient use of resource.

JBR thanked for presentation and highlighted the success in 98% distribution of baby packs as well as the good feedback from families with parents reporting their satisfaction with contents. Members noted that these have provided an opportunity to access sometimes hard to reach families to address other issues.

Place Board thanked HS for the update and she left the meeting at this point.

26/07/25 Update from the Director of Public Health

AH announced that a new Director of Public Health had been appointed. The decision is being ratified at Council Board later today after which Partners will be notified by email.

AH updated on a number of health protection areas including:

- There are currently no concerns locally with flu or covid, although it was noted that levels continue to fluctuate as the virus mutates.
- Following recent exceedance in the levels of cryptosporidium seen in parents of young children after visiting petting farms, messages around hand washing are being reinforced.
- Infection Prevention and Control support is being given in care homes with IPC champions devising an award system which is working well and raising standards. An audit of old person's care homes is also currently underway to check IPC compliance.
- An encouraging report from Trust has shown that efforts around antibiotic prescribing for C-Diff is having a positive impact.
- The Health Protection Annual Report is largely completed and will go to the Health and Wellbeing Board.
- A national pandemic scenario, Exercise Pegasus is planned to take place in September, October and November. Rotherham partners including the Voluntary Sector and the Hospice will be required to take part and we will be advised of roles and responsibilities nearer the time. Learning from the exercise will be shared and will assist us in being better prepared going forward. AH will continue to keep partners updated.
- Gonorrhoea and Mpox vaccinations are due to be rolled out and further guidance is awaited.
- Once the new Director of Public Health is in post, a workshop will be planned to review and refresh the Health and Wellbeing Strategy. This can also be used to consider the new arrangements following the change in role for the ICB and explore the future relationship between Rotherham Place and the H&W Board.
- Place Leadership Team (PLT) has approved Phase 1 of a town centre development approved for community health services to be brought together in a

health hub which is linked to the economic regeneration of the town centre and neighbourhood hubs presenting opportunities for partners to explore.

- The Sport England Place Expansion Programme, which is known locally as Every Move Counts, has been launched with positive results. It is aimed at people with low mood, diabetes etc and there is a possibility of further funding as part of the programme.
- A consultation has been launched by the Ministry of Housing, Communities and Local Government on a proposed local government outcomes framework. RMBC intends to respond on the 15 proposed areas by the deadline of 12 September. The consultation document is available on line should partners wish to review or respond separately.
- As of July 2025, the government has set statutory targets for local authorities to improve early childhood development, aiming for 75% of children to achieve a 'good level of development' by age five, with plans to develop local 'Best Start' strategies and family hubs to support this goal. AH highlighted that family hubs will be important and are now being seen as a permanent arrangement with funding confirmation to be confirmed.

CE thanked AH for his update and support to Rotherham Place Board as the Interim DPH.

27/07/25	Fit for the Future: 10 year Health Plan for England
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The 10 Year Health Plan had been published on 3 July 2025 and CE shared the letter from Dr Penny Dash and Sir James Mackey sent to ICB and NHS Trust Chairs and Executive Teams encouraging leaders to inspire their teams to be bold and impatient for change.

In the short term, focus should be on prioritising financial discipline, delivering commitments and a relentless focus on winter preparations this year with NHS England moving to medium term planning and working with us to agree a collective delivery approach and aligning how the centre and regions work better to support us to deliver priorities by simplifying the rules and accountability.

MCS expressed disappointment from a Hospice perspective that the Plan had little about death, dying and end of life care with no clear targets, recommendations or commitment to funding.

Place Board noted the plan and acknowledged that there were several areas omitted and no implementation/delivery plan at this stage.

NHS SY ICB intends to respond to the Plan.

JBR will consider taking the presentation on the 10 Year Health Plan to Health and Wellbeing Board.

28/07/25	Rotherham Place Partnership Update
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Place Board received the update for May and June 2025. Partners are encouraged to share widely within their own organisations and Boards highlighting the good work taking place across the partnership.

29/07/25	Communications to Partners/Promoting Events & Consultations
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10 Year Health Plan – to be considered for the next Health and Wellbeing Board.

30/07/25	Draft Minutes and Action Log from Public Place Board
<p>The minutes from the meeting held on 21 May 2025 were agreed as a true and accurate record.</p> <p>The action log was reviewed. There was one amber rated action which related to the mapping of public/partner consultation activity which has been scheduled for September Place Board.</p>	
31/07/25	Risks and Items for Escalation to Appropriate Board
<p>There were no new risks to note and nothing for escalation at this time.</p>	
32/07/25	Future Agenda Items:
<p>Standing Items</p> <ul style="list-style-type: none"> - Updates from all groups (as scheduled) - Bi-Monthly Place Partnership Updates - Feedback from SY ICP Meetings – Bi Monthly - Place Achievements (as and when) 	
33/07/25	Date of Next Meeting
<p>There will be no meeting held in August as Place Board will be holding a development session, therefore the next meeting will take place on Wednesday 17 September 2025 in the John Smith Room, Town Hall, Rotherham.</p>	

Members

Chris Edwards (Joint Chair)	Executive Place Director/ICB Deputy Chief Executive	NHS South Yorkshire Integrated Care Board
John Edwards (Joint Chair)	Chief Executive	Rotherham Metropolitan Borough Council
Ian Spicer	Strategic Director, Adult Care, Housing and Public Health/Deputy CE	Rotherham Metropolitan Borough Council
Alex Hawley	Interim Director of Public Health	Rotherham Metropolitan Borough Council
Richard Jenkins	Chief Executive	The Rotherham NHS Foundation Trust
Bob Kirton	Managing Director	The Rotherham NHS Foundation Trust
Shafiq Hussain	Chief Executive	Voluntary Action Rotherham
Toby Lewis	Chief Executive	Rotherham, Doncaster and South Humber NHS Foundation Trust
Dr Anand Barmade	Medial Director	Connect Healthcare Rotherham (GP Federation)

Participants

Cllr Joanna Baker- Rogers	Chair of H&WB Board	Rotherham Health and Wellbeing Board
Claire Smith	Director of Partnerships, Rotherham Place	NHS South Yorkshire Integrated Care Board
Andrew Russell	Director of Nursing, Rotherham & Doncaster 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
Nicola Curley	Director of Children's Services, RMBC	Rotherham Metropolitan Borough Council
Matt Cottle-Shaw	Chief Executive	Rotherham Hospice
Kym Gleeson	Service Manager	Healthwatch Rotherham
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
Andrew Brankin	Rotherham Care Group Director	Rotherham, Doncaster and South Humber NHS Foundation Trust

PUBLIC ROTHERHAM PLACE BOARD ACTION LOG - 01 April 2025 - 31 March 2026

Mtg Date	Item No.	Agenda Item Title	Action Description	Timescale for Completion	Lead Officer	Action Status	Date Completed	Comments
21.05.25	19/05/2025	Communications to Partners/Promoting Events & Consultation	GL to map public/partner consultation activity taking place and share with partners.	19.11.25	GL	Amber	30.11.25	On agenda for discussion at next Comms and Engagement Group. GL awaiting input from partners to finalise document - deferred to November due to development session in October
16.07.25			No actions					