



Committee and Date

Health and Wellbeing Board

17 September 2026

MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 9 JULY 2026

9.45 - 11.25 AM

Responsible Officer: Michelle Dulson

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Present

Councillor Ruth Houghton – PFH Adult Social Care & Public Health, Shropshire Council
Councillor Andy Hall – PFH Children & Education, Shropshire Council (remote)
Rachel Robinson - Executive Director of Public Health, Shropshire Council/NHS STW ICB
David Shaw – Director of Children’s Services, Shropshire Council
Claire Parker – Director of Strategy & Development, NHS STW (remote)
Ben Hollands – Health and Wellbeing Strategy Implementation Manager, MPFT (remote)
Lynn Cawley - Chief Officer, Healthwatch Shropshire
Jackie Jeffrey – Lead Officer, VCSA (remote)
Claire Smout - Chief Officer, Partners in Care
Steve Ellis –Deputy Director of Operational Service Development, Shropshire Community Health NHS Trust (substitute for Claire Horsfield)
Cezar Sarbu – Service Manager, Adult Social Care, Shropshire Council (Substitute for Natalie McFall)
Carla Bickley - Associate Director of Strategy & Partnership, SATH (Substitute for Nigel Lee)

Also present: Phil Smith, Naomi Roche, Dr. Jess Harvey, Mark Trenfield, Chris Scott, Emma Pyrah, Susan Blakey, Jenny Roach, Gordon Kochane

1 Election of new Co-Chair

It was proposed, seconded and duly **RESOLVED**:

That Councillor Ruth Houghton, Portfolio Holder for Adult Social Care and Public Health be elected Co-Chair of the Health & and Wellbeing Board.

2 Apologies for Absence and Substitutions

Claire Horsfield - Director of Operations & Chief AHP, Shropshire Community Health NHS Trust
Councillor Heather Kidd – Leader, Shropshire Council
Natalie McFall – Director of Adult Social Services, Shropshire Council
Nigel Lee - Group Chief Strategy and Integration Officer, STW Community and Hospitals NHS Group
Edward Hancox - Superintendent, West Mercia Police
Vanessa Whatley – Chief Nursing Officer, NHS STW ICB

Lynn Millar – Director of Place, STW NHS, STW ICB and Staffordshire & Stoke-on-Trent ICB

3 Disclosable Interests

No interests were declared.

4 Minutes of the previous meeting

RESOLVED:

That the minutes of the meeting held on 19 March 2026 be approved and signed as a correct record.

5 Public Question Time

No public questions were received.

6 Neighbourhoods

The Board received a comprehensive introduction to the neighbourhoods agenda item, which focused on the development of a shared framework for healthy neighbourhoods within Shropshire. The discussion outlined the purpose of the item, which was to introduce the concept of healthy neighbourhoods, review the National Neighbourhood Health Framework, and ensure alignment of neighbourhood health plans with local priorities, including the Family First Partnership, adult social care transformation, and organizational ambitions. The Board's leadership role in this process was emphasised, alongside the need for a shared vision, a preventative approach, early help, proactive care, and the reduction of inequalities.

The Board was informed of the strong foundations already established, such as integrated neighbourhood teams, community and family hubs, prevention funding, outreach work, and the Council's corporate plan. The importance of building upon these assets and aligning delivery across all partners was stressed. The NHS perspective was presented, highlighting the five-year strategic commissioning plan and the significance of equal partnership between the NHS, local authority, and voluntary sector. Clarity of roles, alignment of priorities, and the tailoring of approaches to local geographies were identified as essential.

The National Neighbourhood Health Framework was presented as a key driver, with four priority cohorts identified: older people, long-term condition management, children and young people, and mental health. It was confirmed that there is strong alignment between national mandates and local priorities identified.

During the discussion, questions were raised regarding the role of the voluntary sector within the neighbourhoods framework, specifically whether it is considered a strategic partner or merely a delivery partner. It was confirmed that the voluntary sector is regarded as an equal partner in both design and delivery, contributing insight and innovation. The need for co-design and equal partnership was reiterated.

Concerns regarding the pace of change were raised, particularly in light of the voluntary sector's contract-based constraints. The Board acknowledged the need for rapid progress but recognised that different sectors operate at varying speeds. It was suggested that agile pilots and collective learning would help maintain alignment, and that smaller-scale pilots allow for greater agility. The Board noted that general practice can implement changes quickly, whereas hospitals and the voluntary sector may require more time due to commissioning and contractual processes.

Further concerns were expressed about the risk of postcode lottery and service gaps, with questions regarding how equitable access across neighbourhoods would be ensured. It was explained that neighbourhood health enables tailoring to local needs, but there are risks if some neighbourhoods progress faster than others. The Board advocated for scalable, adaptable models and collective accountability, supporting continuous learning and flexibility in boundaries to allow adaptation as required.

The value of voluntary sector assets and hubs was recognised, particularly their role in addressing health inequalities and providing trusted places for the community. The importance of sharing learning, understanding community needs, and involving partners in engagement activities over the summer was emphasised, as was the significance of IT and digital approaches.

RESOLVED:

- to note the Board's statutory leadership role in developing the Shropshire Neighbourhood Health Plan;
- to progress agreement and development of neighbourhood footprints
- to progress and confirm system leadership arrangements;
- to support alignment of existing programmes and policy to the Neighbourhood Health Framework;
- to endorse proposed next steps to mobilise neighbourhood health delivery across Shropshire;
- to agree the strategic direction towards a single Shropshire neighbourhood framework and roadmap, aligned to the national Neighbourhood Health Framework & NHS 10-year plan, Joint Health & Wellbeing Strategy, ShIPP priorities and wider place-based priorities including national children's reforms; and
- to request a future decision report setting out the preferred model, governance arrangements, resource implications, delivery roadmap and implementation considering the need for a flexible needs-led approach.

7 Healthwatch Shropshire update: 'Access to Medication in Shropshire' and 'Veterans' Experiences of Accessing Healthcare in Shropshire'

The Health and Wellbeing Board received an update from Healthwatch Shropshire, which included the presentation of two reports. The first report addressed access to medication in Shropshire, highlighting ongoing challenges faced by individuals with multiple long-term conditions. These challenges included the need for repeated visits to pharmacies, difficulties with digital access to prescriptions, and issues related to medication shortages. The report emphasised the impact of these challenges on patients, particularly in relation to transport and accessibility, and noted that while there is significant public support for local pharmacies, increased demand has placed additional pressure on pharmacy staff

and services. Recommendations from the report included actions to reduce delays and waiting times, improve communication between patients and pharmacies, and address variations in service experience across different pharmacy locations.

The second report focused on the experiences of veterans in accessing healthcare within Shropshire. It identified several key issues, including confusion among veterans regarding the benefits of identifying their status, inconsistent recognition of veteran status across services, limited understanding among professionals of the coding and entitlements related to veterans, and gaps in support during the transition from military to civilian life. The report also noted the emotional impact on veterans of having to repeatedly explain their service history, which could trigger traumatic experiences.

Recommendations included the routine identification of armed forces service across GP practices, hospitals, and community services; the simplification and standardization of recording veteran status within NHS systems; improved communication and information sharing between GP and hospital services; strengthened staff understanding of veterans' healthcare entitlements; improved public information for veterans; enhanced support and continuity of care during the transition from military to civilian life; and the development of specialist outreach and mental health support.

During the discussion, it was noted that while Healthwatch Shropshire has previously made recommendations for the sharing of good practice, there has been limited evidence of these recommendations being implemented across the system. The importance of improved system-wide learning and replication of effective practices was emphasised.

RESOLVED:

to accept and implement the recommendations from both Healthwatch Shropshire reports.

8 Children and Young People JSNA Chapter: Pregnancy and birth

The Health and Wellbeing Board reviewed the Children and Young People JSNA chapter focused on pregnancy and birth. The item was presented as an update, noting that it had previously been discussed but was now published as a final JSNA. The Board was asked to consider the recommendations within the report, which included extensive data and analysis on population needs related to pregnancy and birth.

Discussion centred on the importance of using JSNA outputs to inform service redesign and transformation, with several members emphasising that population data should underpin strategic planning and avoid duplication of effort. It was noted that many recommendations in the JSNA directly relate to ongoing neighbourhood work and national reforms, and alignment between these areas was encouraged.

Suggestions were made for future iterations of the JSNA to include progress tracking against previous positions, potentially linking to dashboard reporting for monitoring outcomes. The Board acknowledged the significant work involved in compiling the JSNA and expressed appreciation for the team's efforts.

RESOLVED:

to accept the recommendations listed in the JSNA appendix, which would underpin future work and outcomes frameworks.

9 Drug & Alcohol JSNA

The Health and Wellbeing Board considered the Drug and Alcohol Joint Strategic Needs Assessment (JSNA) chapter.

The Board noted that the recommendations aligned with both adult and children's social care agendas. It was further highlighted that these actions would inform the recommissioning of drug and alcohol services currently underway, and the Board acknowledged the significant work undertaken by the team in preparing the JSNA.

RESOLVED:

To note the recommendations contained in the report.

10 2025-26 End of Year Template and 2026-27 BCF Assurance Return

The Health and Wellbeing Board reviewed the Better Care Fund (BCF) assurance return and end of year template, which had been submitted to NHS England following prior approval from the chairs. The reports confirmed alignment with national reforms and the NHS 10-year health plan, focusing on greater integration, prevention, neighbourhood-based services, reducing hospital admissions and discharge delays, and supporting independence.

The Board noted that the BCF presents a positive picture of integrated working across health and social care and supports the transition towards more preventative, community-based care. It was also noted that future iterations of the BCF may be further aligned to place-based and neighbourhood working as part of the integration agenda.

RESOLVED:

to approve the 2026-27 BCF Assurance Return and the 2025-26 BCF End of Year Template

11 STW 5-year Strategic Commissioning Plan - ICB - including HealthHero update

The Health and Wellbeing Board received an overview of the Shropshire, Telford and Wrekin (STW) five-year strategic commissioning plan, previously approved by the Integrated Care Board (ICB). The plan establishes a five-year strategic horizon, enabling a more ambitious and transformational approach to improving health and care outcomes for local people, rooted in population need and aligned with national policy.

Key shifts outlined in the plan include moving care from hospital to community, analogue to digital transformation, a focus on prevention over sickness, improving access to services, and enhancing value and productivity. The partnership approach was emphasised, with delivery mechanisms through place and neighbourhood structures.

Risks identified in the plan include workforce alignment and development, financial pressures, productivity requirements, demand growth, digital and data readiness, system flow and demand pressures, and estates and infrastructure challenges. The Board noted the importance of joint planning and delivery, particularly joint commissioning, as a future focus.

RESOLVED:

to note the content and implications of the STW five-year strategic commissioning plan and its direction of travel as the system moves into the delivery phase.

12 Shropshire Council Corporate Plan

The updated Shropshire Council Corporate Plan for 2026–2030 was presented to the Health and Wellbeing Board. The plan focuses on rebuilding Shropshire together, addressing financial challenges and system changes. It is structured around three key elements: sustainability, which includes living within means and protecting the environment; strength, which emphasises the local economy; and resilience, which involves building strong communities, supporting independence, protecting vulnerable people, and partnership working.

Partnership working and alignment with the Health and Wellbeing Strategy are central to the plan, with care and wellbeing, economic growth, and housing identified as vital priorities. Key deliverables highlighted include children's transformation, adult social care transformation, engagement with town and parish councils, economic growth, health and care skills, housing, access to green spaces, poverty reduction, hubs, recommissioning of drug and alcohol services, and updating the Joint Health and Wellbeing Strategy.

RESOLVED:

to note the update

13 ShIPP Update

The ShIPP update was presented for noting. The Executive Director for Public Health mentioned that the next meeting will include an update on the ShIPP Prevention Partnership work, which is integral to neighbourhoods and has been a significant achievement lead by the VCSE. The update also referenced the place universal offer as part of neighbourhood working.

14 HWBB Progress against targets

The Board received an update on progress against key metrics, noting positive movement in several areas. Concerns remain regarding life expectancy targets and persistently high suicide rates. Indicators for children and young people were reported as worsening, with significant work underway to address these issues. It was agreed to bring a fuller, updated report to the next meeting, ensuring alignment with local data and ongoing strategy development.

15 Pharmacy updates

Members noted the Pharmacy updates and noted that the Pharmacy Needs Assessment had been accepted by the Board in 2025. Work is ongoing to determine whether a supplementary statement is required due to any significant changes. All updates will continue to be brought to the Board for noting, with further action pending the outcome of the assessment.

16 Health Overview & Scrutiny Committee

Noted.

17 Any other Business

The Chairman wished to record her thanks on behalf of the Board to Claire Parker, Director of Strategy & Development for NHS Shropshire, Telford & Wrekin, who would be leaving the Board after 6 years of service. She thanked Claire for her work with the Board and wished her well for the future.

<TRAILER_SECTION>

Signed (Chair)

Date: