

Minutes of Board meeting in public
Held at 2pm in Central, Shrewsbury Baptist Church
Monday 10th September 2018

Present:	Vanessa Barrett	VB	Chair
	David Voysey	DV	
	Angie Saganowska	AS	
	Steve Price	SP	
	Bob Welch	BW	
	David Beechey	DB	
	Terry Harte	TH	
	Anne Wignall	AW	
	Rachael Allen	RA	
	Jane Randall-Smith	JR-S	
In attendance:	Steph Dunbar	Minute Taker	
	Miranda Ashwell	MA	
	1 member of the public		

1. Welcome, Introductions and apologies

RA was introduced to the Board as the new Chief Officer for HWS.

2. Declarations of Interest

AW declared her role as Chair of Age UK STW.

3. Social Prescribing

VB introduced MA and her role at Shropshire Council; MA gave a presentation on 'Healthy Lives Social Prescribing'.

MA said the purpose of Social Prescribing was to view the individual, or client, as a person- not as their condition. The team would be working with professionals to understand how best to address the needs of individuals.

Social Prescribing fits locally into the bigger programme of prevention work for Healthy Lives and the Health & Well Being Board (HWBB); including the Sustainable Transformation Programme (STP) and Better Care Fund (BCF). Public Health will be leading this work, alongside the Community Enablement teams and other organisations, including those outside of Health- such as the fire services.

Social prescribing is a non-medical model, that can link both medical and community work that is taking place locally, such a local groups and schemes.

Social prescribing will be aimed at addressing the health inequalities agenda; finding the people who struggle to or don't know how to access assistance, those who don't understand whether they are eligible.

MA advised that this was not a universal service at this stage, but was being slowly rolled out across the county. It was noted that the model was likely to change as it got rolled out and learning was applied.

Referrals of patients through social prescribing can be done to the larger organisations such as CAB or Age UK STW; these referrals will allow for data to be sent back to Public Health regarding patient outcomes. For smaller, more informal groups, it will be classed as signposting from social prescribing.

Measures have been put in place to help monitor impact made on individuals; including feedback from patients as well as organisations.

a) Questions

- **When social prescribing is rolled out completely, will it mean additional employment or will the role be put on to others currently in place?**
 - MA confirmed that the team will be using their own staff. Currently, candidates can only be referred via their GP practice but it is intended that any organisation working with individuals will be able to refer.

Public Health will look at the potential to enhance the existing roles, such as Community Care-coordinators, if we reach a limit of available advisors.

- **Are Housing companies being made aware of their important strategic role in addressing what housing they are building for the local needs (e.g. building with a community development inside)?**
 - MA confirmed that Public Health are working with housing organisations on these issues, outside of social prescribing. The focus of social prescribing will remain individual issues, not county/area issues.
- **Is this work being done with pharmacies?**
 - MA advised that the team are currently working with individual pharmacies in Oswestry only, at this stage. Work has been taking place with the Local Pharmaceutical Committee (LPC) to engage with other pharmacies who wish to work in the future; the team are keen that pharmacists will be able to be referrers in the same way that GPs currently are.

4. Board Meeting in Public held on 4th June 2018

a) Approval of minutes

The minutes were agreed for accuracy and signed by the Chair.

b) Action plan

There were no outstanding actions.

c) Matters arising not on the agenda

VB confirmed that HWS will submit an official response to the NHS FutureFit consultation that is reflective of the comments received.

5. Finance and H.R.

a) Management accounts to end July 2018

The accounts were discussed and accepted by the Board.

b) Volunteer recruitment

SD advised that two volunteers had recently completed training to become E&V representatives. Recruitment of new volunteers was noted to be on-going.

c) Chief Officer recruitment

VB confirmed the successful recruitment, noting that RA had been in place since 5th September. Shropshire Council have agreed to provide funding until October for JR-S to continue two days/week, to facilitate an adequate handover.

6. Governance

a) Risk Management

A report was provided for information.

A workshop to update the matrix will take place in March 2019.

Action: RA/SD to arrange workshop date

b) Forward plan 2018-19

JR-S provided a report for the 2018-19 focus of HWS.

c) GDPR

JR-S confirmed that face-to-face training session for Board and Volunteers will take place in the autumn.

Action: SD to arrange dates with Brian Rapson

7. Reporting (June- August)

a) Chairs report

A report was provided for information.

b) Board member reports

A report was provided for information.

Following a report by TH, VB offered to attend the Hospital based work stream and BW offered to help on the Transport.

Action: JR-S, RA & TH to follow up

c) Chief Officers report

A report was provided for information.

8. Current Activities

a) Reports from Committee meetings

i. Enter & View

An update was provided as part of the Chief Officer report.

ii. Intelligence

AS advised that the Committee were hoping to have a colleague from public Health attend the next meeting to provide additional context information relating to local health profile data.

iii. Marketing

AW advised that the current HWS Hot topic was focusing on Perinatal Mental Health; this was in line with a focus by HWE.

From October, HWS would be looking at the 0-25 Emotional Health and Wellbeing service.

Action: Committee to discuss transport as a future hot topic

It was suggested that HWS do a personal interest story about HWS, focusing on JR-S career and her work implementing HWS.

Action: AW to discuss w/JR-S and BR

9. Amendment to the Articles of Association

- a) **Resolve to approve the revised wording of the Memorandum and Articles and the wording of the written special resolution**

The Board agreed to the revised wording.

- b) **Resolve to deliver the written special resolution to all company members and Healthwatch Shropshire auditor**

All company members were present and signed the individual written special resolutions, during adjournment of the Board meeting. The special resolution was agreed and signed by the Chair.

Action: JR-S/RA to file documents w/Charity Commission & Companies House

10.A.O.B.- if notified in advance

There was no other business to discuss.

VB thanked JR-S on behalf of the team for her input and support throughout her time at HWS.

11. Questions from the public

There were no questions.

12. Dates of future Board meetings

22nd November, 2pm, *venue TBC*

13. Resolution to manage confidential business in a closed meeting

The resolution was agreed.