

HEALTH & WELLBEING BOARD

Minutes of a meeting of the Health & Wellbeing Board held on Thursday 18 September 2025 at 2.00 pm in the Council Chamber, Third Floor, Southwater One, Telford, TF3 4JG

Present: Cllr A J Burford (Co-Chair), S Whitehouse (Co-Chair), Cllr K Middleton, S Froud, N Lee, N Pay, H Onions, C Parker and J Suckling

In Attendance: L Gordon (Member Support Officer), M Hayman (Primary Care Partnership Lead, STW) L Mills (Service Delivery Manager Health Improvement & Prevention), J Preston (ELSEC: Advanced Practitioner for Education, S Wellman (Director: Education & Skills), V Whatley (Chief Nursing Officer, ICB) and G Wright (Deputy Chief Delivery Officer, STW)

Apologies for Absence: Councillors J Williams, S J Reynolds, K L Tomlinson, P Watling, J Britton and F Mercer

HWB21 Declarations of Interest

None.

HWB22 Minutes of the Previous Meeting

RESOLVED - that the minutes of the previous meeting held on 26 June 2025 be confirmed as a correct record and signed by the Chair.

HWB23 Public Speaking

None.

HWB24 Quarterly Strategy Progress Report

Members received a report outlining the commitments of each priority lead for the coming year, with a focus on strengthening delivery and addressing ongoing challenges. It was noted that future reports would highlight key risks and areas requiring further attention, including an update that would be brought to the next meeting of the Board in November. The Service Delivery Manager for Health Improvement & Prevention provided a summary of the report, drawing attention to strong thematic links across the priority areas. Members were advised that the report reflected a coordinated approach to tackling inequalities, enhancing prevention, and improving system-wide collaboration.

In relation to inequalities, Members heard that more targeted work was being undertaken with underserved communities, including those experiencing homelessness. Examples such as the Live Well Hubs and the community blood pressure project were highlighted as successful initiatives. Members were updated on progress in cardiovascular disease prevention, including the

rollout of NHS Health Check pilots and the development of group lifestyle clinics. The role of the community and voluntary sector was acknowledged, with examples of successful signposting to appropriate services, which helped to reduce pressure on primary care.

The Board were asked to note the development of the 'Connect to Work' programme, which aimed to prevent economic inactivity through targeted one-to-one interventions. This work was supported by joint funding from the Department for Work and Pensions and the NHS. Members were informed that the Telford & Wrekin Integrated Place Partnership had agreed three main priorities and established an Accelerator Group to drive operational delivery. This group brought together leads from across the Integrated Care System to coordinate place-based action. A key theme emerging from the discussion was the resilience of the voluntary sector, which played a vital role in delivering outcomes. Members acknowledged the ongoing challenge of securing long-term funding and welcomed efforts to explore sustainable solutions.

During the discussion, Members raised concerns about reduced engagement with the Healthy Families Programme. The Service Delivery Manager for Health Improvement & Prevention confirmed that the offer was being reviewed, and engagement work was underway with families and schools to strengthen participation. Members also highlighted the importance of addressing housing and loneliness as part of the wider determinants of health and requested that these issues be considered at a future meeting. The expansion of Calm Cafés and Live Well Hubs was welcomed, with Members noting the significant impact these initiatives had on mental health and wellbeing. The Board commended the collaborative approach being taken and recognised the national acknowledgement of local work as a blueprint for best practice.

HWB25 Annual Public Health Report 2025 Towards a Smoke Free Future

The Director of Public Health introduced the report, noting that it had been some time since the Board had focused on this issue. She set out the size and scale of the challenge, highlighting both the opportunities and risks associated with vaping. While vaping can be used as a quitting aid, there were growing concerns about its impact on children and young people. The Board heard that the report followed the same style as previous updates, using case studies to illustrate key points. Members were advised that new targets had been agreed and additional funding secured through the Government's Smoke-Free Programme. Trading Standards were actively tackling illegal tobacco and vape products, and the NHS 10-Year Plan offered further opportunities to increase funding and shift prevention work into neighbourhood settings. The report also addressed the growing concern around youth vaping, noting that national grant funding had been received to support cessation services for young people. Members heard that work was underway with local providers, schools, and the licensing team to develop a

coordinated response, and the Borough's Health & Wellbeing Statement on vaping was being updated.

The Director of Public Health emphasised the need to do more to engage residents who want to quit smoking and drew attention to campaigns such as "Crush the Habit" and "Do It For...", which aimed to encourage participation in cessation programmes. She confirmed that work would continue with partners to increase referrals into these services. Members were also informed that a Bill currently progressing through the House of Lords may lead to changes in licensing and enforcement arrangements, which the Board would be updated on in due course.

The Board were asked to note the importance of promoting a Smoke-Free Alliance, drawing on evidence-based approaches from Greater Manchester and Sheffield. The Director of Public Health noted that these areas had seen a significant decline in smoking rates and stressed the importance of replicating this success locally. In addition to approving the recommendations, the Director of Public Health sought the Board's support in increasing the number of residents accessing cessation services.

The Board welcomed the report, noting the strong links to prevention and neighbourhood health, and commended the inclusion of case studies and innovative approaches such as embedded video content. Members agreed that smoking remains a significant contributor to health inequalities and life expectancy gaps and supported the recommendations set out in the report.

The Board unanimously approved the recommendations and agreed to support the development of a Smoke-Free Alliance.

RESOLVED – that the Health & Wellbeing Board endorse and support the recommendation of the Director of Public Health's 2025 Annual report, which are aimed at reducing the impact of smoking and vaping-related harm in the borough.

HWB26 Early Language Support Project Update

Members received an update on a joint project between health and education, which formed part of a two-year national pilot. The Board noted that Telford & Wrekin was one of only nine areas across the country involved in this initiative, which aimed to increase workforce capacity and address significant NHS waiting times linked to the SEND agenda. The project focused on early intervention for children with speech, language, and independence needs, delivered in partnership with the Council, Shropshire, the Integrated Care System, and Shropshire Community Health Trust.

The ELSEC: Advanced Practitioner for Education highlighted that approximately two million children in the UK experience these challenges, which can lead to poorer outcomes in Maths and English, increased mental health issues by age 11, and a higher likelihood of unemployment in adulthood. Within Telford & Wrekin, the project was now in its second

academic cycle and had expanded from eight to ten schools this year. Members heard that by the end of the academic year, the programme will have reached 2,210 children locally and that the initiative included a range of interventions, supported by the ELSEC offer.

The Board were asked to note that data from the previous year had demonstrated significant improvements. Baseline assessments of pre-school cohorts showed that 45% of children were at age-appropriate levels, 28% were close to meeting expectations, and 27% had significant difficulties. By the end of the year, 70% were at age-appropriate levels, with only 16% still struggling. For Key Stage 1 pupils, the proportion meeting age expectations rose from 31% to 85%. The ELSEC: Advanced Practitioner for Education advised that Schools have strongly supported the project, and evidence showed that children requiring additional support were now making good progress. The programme has also helped reduce waiting lists, with some children no longer requiring wider assessments.

Members heard that feedback from early years settings and mainstream schools has been overwhelmingly positive as the project moved into its second wave. Sustainability had been a key consideration throughout, and early indications suggest that Education, Health and Care Plans have remained steady rather than increasing. Outcomes for children have improved by between 5% and 20%, and three additional schools launched the programme in the weeks leading to the meeting.

The Board were asked to note risks to the project included funding, which was currently secured until July 2026. However, delays in Government announcements regarding the second wave of funding presented challenges for future planning. Staff retention was also identified as a risk due to the reliance on fixed-term contracts.

During the discussion, Members praised the project, noting that improvements were easily measurable and supported by strong evidence of long-term impact. They expressed full support for its continuation and inquired if earlier interventions could be considered. The Director: Education & Skills described the initiative as an excellent example of early intervention and prevention, aligning with the ambition for the Best Start in Life agenda. He emphasised the need to promote childhood development and noted that the work was heavily dependent on continued funding but there were plans to integrate family hub sessions and explore models such as five by five.

The Board highlighted the targeted nature of the project and its short-term impact, stressing the importance of including outcomes in future reports and continuing collaborative delivery with both health and education partners.

The Board noted the update and commended the collaborative approach and measurable impact of the project.

HWB27 GP Access Update

The Primary Care Partnership Lead for the Integrated Care Board (ICB), presented an update on access to general practice services, supported by data from July 2025. Members heard that access was improving, with positive trends in same-day and next-day appointment measures. All practices within the Primary Care Networks in Telford & Wrekin now offer extended access, and the rollout of Modern General Practice and mobile telephony systems was underway, with go-live dates confirmed. The Primary Care Partnership Lead for the ICB also outlined the introduction of quality visits, which used data-driven support to assist practices performing below national metrics.

Members were advised that GP-led appointments currently stood at 38%, compared to a national average of 48%. The Primary Care Partnership Lead highlighted upcoming contractual changes linked to the NHS 10-Year Plan, which placed greater emphasis on digital solutions. From 1 October 2025, new contract requirements were to come into effect, including the mandatory provision of online consultation tools. An audit was being undertaken to ensure all practices had these facilities in place and that they were easily accessible to patients.

The presentation included data on appointment trends and patient experience, showing improvements in access and engagement. The Primary Care Partnership Lead explained that national priorities aimed to reduce unwarranted variation in access and that the 2025 plan positions primary care as the front door to community pharmacy and mental health services. Members heard that some practices continued to face challenges and it was confirmed that support was being provided through the national Primary Medical Services programme. Recent patient survey results indicated that overall experience has improved to 75%, although six practices remained below the benchmark and were receiving targeted assistance. The Board were advised that ease of access scores had risen compared to last year, largely due to the adoption of technology solutions, and overall feedback remained positive at 80%, though it was noted that this did not provide the full picture.

The Primary Care Partnership Lead highlighted the success of Pharmacy First and Optometry First initiatives, which aimed to reduce prescription waste and improve access to care. The Board were informed that engagement with practices had been positive, and strong relationships had been established to support ongoing improvements.

During the discussion, Members thanked the Primary Care Partnership Lead for their update and stressed the importance of addressing issues around GP Access and improving public confidence. The Board recognised the pressures that practices faced but noted that feedback from residents suggested that access to GP services remained inconsistent, with some practices struggling. The Chief Executive Officer of the STW ICB confirmed that work to improve GP access was ongoing and shared that he would be personally visiting all practices, with the aim of building greater confidence and transparency.

The Board noted the significance of the links to dentistry access, winter pressures, and ICB reconfiguration when considering GP access, stressing that these challenges must be addressed collectively. The Chief Executive Officer STW ICB agreed and encouraged councillors to promote patient feedback surveys to help inform future improvements. Members agreed that the Council's Health Scrutiny Committee would continue to monitor developments with GP Access, particularly at the level of individual practices.

The Board noted the presentation and welcomed the progress being made to improve access to general practice services.

HWB28 STW Healthy Ageing/Frailty Strategy

Members received a report on the approach to addressing frailty and supporting healthy ageing, as set out in the NHS STW's Healthy Ageing Strategy 2025-2028. The Board was advised that the proposals were due to go for sign-off at the Integrated Care Board and that support was sought for delivery going forward.

The Chief Nursing Officer ICB explained that frailty was a clinical term describing sudden changes in health caused by relatively minor events, which ranged from mild to severe. She stressed that frailty was not inevitable, but it had a significant impact on health and social care services. Members heard that prevention and early identification were key priorities of the strategy and drivers for change included the rapid growth of the population aged over 65 in Telford and Wrekin, with projections showing a doubling in the number of residents aged over 90 in the coming years. The Chief Nursing Officer highlighted that if no action was taken, the financial impact on services will be substantial, as illustrated in the report.

The Board heard that the approach was underpinned by neighbourhood-level, data-driven planning and aimed to change workforce mindsets to deliver more proactive care. Work was already underway with GPs to ensure appropriate care planning and coordination, and engagement with the public was to be critical to raising awareness of frailty and promoting healthy ageing objectives, which closely linked to the Council's Aging Well Strategy. Members were advised that the report set out three key shifts required to deliver change and that existing work across partner organisations must be joined up to address inequalities within this agenda.

During the discussion, Members welcomed the comprehensive nature of the report but expressed concern that this work had not been joined up sooner. The Board praised the engagement undertaken to date but stressed the importance of monitoring progress and understanding how older people perceived improvements, noting that while technology was important, some residents remain uncomfortable with digital solutions.

Members of the Board emphasised the need for alignment across organisations and highlighted work already taking place to support people

admitted following falls. It was noted that population projections were critical and were expected to place significant strain on resources if not addressed.

RESOLVED – that the Healthy Ageing Strategy 2025-2028's implementation be noted and supported by the Health & Wellbeing Board.

HWB29 Any Other Business

The Co-Chairs invited the Deputy Chief Delivery Officer, NHS STW to provide the Board with an update on the Winter Plan for 2025/2026.

The Board were asked to note that the plan was currently in draft form and would shortly be submitted to the Integrated Care Board for sign-off. Members were informed that the plan provided a clear overview of actions and timelines at national, regional, and system levels. The planning process for winter began in March and was now two months ahead of where the system was at the same point last year. This represented a significant improvement, as last year's actions were received late, placing the system on the back foot.

Members heard that direction from NHS England had been comprehensive, and an assurance visit from NHS England had already been completed, which had been successful and identified only minor learning points. The Deputy Chief Delivery Officer explained that the ICB was to receive the full Winter Plan next week, along with the Board Assurance Statement, which would be submitted to NHS England.

The Board were informed that the plan had been developed alongside the wider Urgent and Emergency Care improvement programme and included several high-impact schemes. These included the introduction of modular wards and enhanced community provision to connect primary care with acute trusts, reducing unnecessary attendances at A&E. Staffing arrangements for the festive fortnight had also been addressed. The Deputy Chief Delivery Officer noted that while there is no joint plan with Stoke and Staffordshire this year, best practice would be adopted where appropriate.

Members were advised that the plan set out clear objectives to ensure the system entered winter on a solid footing. Seasonal interventions were to be funded through the ICB, and contingency reserves had been built in to provide additional capacity if required. All schemes were to be tapered off gradually rather than ending abruptly to maintain stability.

During the discussion, Members referred to the regional stress-testing exercise, which had gone well and provided an opportunity for system-wide alignment and shared learning, and asked about the impact of reconfiguring beds and assessment areas at Princess Royal Hospital (PRH), noting that the report emphasised this was not solely about bed numbers. The Deputy Chief Delivery Officer confirmed that the changes were expected to make a significant difference by increasing assessment space, enabling more

opportunities to avoid unnecessary admissions. He explained that acute medicine will be able to turn patients around more quickly through a multidisciplinary approach.

The Board stressed the importance of supporting local residents safely and appropriately and encouraged all partners to promote vaccination uptake.

The Board noted the update and welcomed the progress made in preparing for winter pressures.

The meeting ended at 3.53pm

Chairman: _____

Date: Thursday 27 November 2025