

Minutes of the meeting of Health and Wellbeing Board held in Conference Room 1 - Herefordshire Council, Plough Lane Offices, Hereford, HR4 0LE on Monday 15 September 2025 at 2.00 pm

Board members present in person, voting:

Stephen Brewster	Voluntary and Community Sector representative
Jon Butlin	Assistant Director (Prevention), Hereford & Worcester Fire and Rescue Service
Zoe Clifford	Director of Public Health, Herefordshire Council
Kevin Crompton	Independent Chair, Herefordshire Safeguarding Adults Board
Liz Farr	Corporate Director for Children and Young People, Herefordshire Council
Councillor Carole Gandy (Chairperson)	Cabinet Member Adults, Health and Wellbeing, Herefordshire Council
Hilary Hall	Corporate Director for Community Wellbeing, Herefordshire Council
Jane Ives (Vice-Chairperson)	Managing Director, Wye Valley NHS Trust
Councillor Jonathan Lester	Leader of the Council, Herefordshire Council
David Mehaffey	Executive Director: Strategy, Health Inequalities and Integration, NHS Herefordshire and Worcestershire Integrated Care Board
Christine Price	Chief Officer, Healthwatch Herefordshire

Board members in attendance remotely, non-voting:

Gemma Dando	Substitute for Corporate Director of Economy and Environment, Herefordshire Council
Superintendent Helen Wain	West Mercia Police

Note: Board members in attendance remotely could not vote on any decisions taken.

Others present in person:

Ben Baugh	Democratic Services Officer	Herefordshire Council
David Collyer	Acting Consultant in Public Health, General Practitioner	Herefordshire Council
Ryan Davies	Public Health Training Specialist Registrar	Herefordshire Council
Alexia Heath	Post 16 Senior Advisor	
Joanne Hodgetts	Associate Director, Neighbourhood Health	NHS Herefordshire and Worcestershire Integrated Care Board
Gillian Pearson	Head of Primary Care Network Development and Partnerships	Taurus Healthcare
Alfred Rees-Glinos	Licensing Support Officer	Herefordshire Council

Others in attendance remotely:

Jan Bailey	Press and Publicity Officer	Herefordshire Council
Jon Barnes	Operational Executive Lead	Wye Valley NHS Trust
Mohamed Essoussi	Public Health Programme Officer (Strategy and Partnerships)	Herefordshire Council
Marie Gallagher	Transformation and Improvement Lead	Herefordshire Council
Sarah Shingler	Managing Director, Wye Valley NHS Trust	Wye Valley NHS Trust

17. APOLOGIES FOR ABSENCE

Apologies for absence had been received from board members: Sue Harris (Director of Strategy and Partnerships, Herefordshire and Worcestershire Health and Care NHS Trust); Simon Trickett (Chief Executive, NHS Herefordshire and Worcestershire Integrated Care Board); and Tina Russell (Corporate Director for Children and Young People, Herefordshire Council). It was also noted that Ross Cook had recently left the position of Corporate Director for Economy and Environment (Herefordshire Council).

18. NAMED SUBSTITUTES

The following substitutes were noted: Gemma Dando (Chief Operating Officer – Resident Services) was in attendance remotely for the Corporate Director for Economy and Environment; and Liz Farr (Service Director, Education, Skills and Learning) was present in person for the Corporate Director for Children and Young People.

19. DECLARATIONS OF INTEREST

No declarations of interest were identified.

20. MINUTES

The minutes of the previous meeting were received.

Resolved: That the minutes of the meeting held on 9 June 2025 be confirmed as a correct record and be signed by the Chairperson.

21. QUESTIONS FROM MEMBERS OF THE PUBLIC

No questions had been received from members of the public.

22. QUESTIONS FROM COUNCILLORS

No questions had been received from councillors.

23. BOARD MEMBERSHIP AND ARRANGEMENTS FOR THE APPOINTMENT OF THE VICE-CHAIRPERSON

The board considered suggested clarifications to the Council's constitution in relation to the number of seats allocated to NHS Herefordshire and Worcestershire Integrated Care Board (ICB) and the arrangements for the appointment of the Vice-Chairperson, for onward recommendation to full Council.

Resolved:

That the following changes to Herefordshire Council's constitution be recommended to full Council:

- a) **Paragraph 2.8.9, bullet point 8 be amended to read 'Two nominated representatives from the Integrated Care Board'; and**
- b) **Paragraph 2.8.10 (second sentence) be amended to read 'The vice-chairperson of the board shall be the chairperson of the One Herefordshire Partnership. Should this person be from an organisation that has the right to nominate to the board, then that person shall also represent their respective organisation.'**

24. FIT FOR THE FUTURE: 10 YEAR HEALTH PLAN

David Mehaffey briefed the board on the key features of the '10 Year Health Plan For England: fit for the future', published by the government in July 2025. It was noted that the plan:

- i. set out significant ambitions relevant to the key functions of the board, including to raise the healthiest generation of children ever, end the obesity epidemic, and create a smoke-free generation;
- ii. highlighted three radical shifts - hospital to community, analogue to digital, and sickness to prevention; and
- iii. identified transformative technologies – data, AI, genomics, wearables and robotics.

The requisite outputs included: five year strategic commissioning plans, produced by Integrated Care Boards; five year integrated delivery plans, produced by NHS providers; and neighbourhood health plans, developed by local authorities working in conjunction with partners and approved by health and wellbeing boards.

The principal discussion points included:

1. It was not certain whether the strategic commissioning plan would, in time, replace the 'NHS Five Year Joint Forward Plan'.
2. Reference was made to the similar ambitions articulated in the 'NHS Five Year Forward View', published in October 2014, and to the findings of the 'Independent investigation of the NHS in England', published in September 2024.
3. It was noted that resources had been directed towards the acute sector during the Covid-19 pandemic and the focus had now shifted back to prevention and integrated, community-based care.
4. The Chairperson noted that a new triage system had been introduced on 1 October 2025 but acknowledged ongoing public concerns around GP access and continuity. The Vice-Chairperson commented on health-seeking behaviours and the need to enhance public understanding around the appropriate use of services.
5. There was a discussion about the need for the board to review the 'Herefordshire Joint Local Health and Wellbeing Strategy 2023 - 2033' given the new policy landscape.
6. The government's 'ambition of establishing a Neighbourhood Health Centre in every community across the country' was questioned in the context of rural areas and there was a discussion about the need to make the best use of the assets available in Herefordshire.
7. The Vice-Chairperson reported that the new Wye Valley Community Diagnostic Centre was due to open shortly which would reduce pressure on the acute hospital and provide convenient access for patients.

Resolved: That

- a) **The contents of the report be noted, including the requirements to review and approve the development of Neighbourhood Health Plans; and**

- b) **Work be commenced to refresh the Health and Wellbeing Strategy, with an indicative plan for its development to be presented to the next meeting in December 2025.**

25. NEIGHBOURHOOD HEALTH PROGRAMME 2025/26

Joanne Hodgetts noted the neighbourhood health was integral to the '10 Year Health Plan For England: fit for the future' and presented the slides 'Neighbourhood Health Programme 2025/26', under the headings: *The approach for 2025/26; Priority cohorts; Herefordshire Health Programme – What have we achieved to date? What's next?; Working as Multi-disciplinary Neighbourhood Teams (MDNTs); Key challenges; and What will success look like?*

The principal discussion points included:

1. Joanne Hodgetts explained that cohort identification had been informed by data and local knowledge; the initial focus was on people living with four or more long term conditions and having had one or more hospital admission in the past 12 months.
2. The Chairperson commented that there were areas of deprivation in some market towns but there could be good access to healthcare, whereas people in more rural areas may need to travel considerable distances to reach equivalent services.
3. Zoe Clifford said that the board should not lose sight of the need to improve the health and wellbeing of the whole population, and should look upstream to minimise the number of people becoming part of such cohorts.
4. A board member commented that the neighbourhood health plan needed to be multi-tiered, so that it supported the whole population to achieve good health and wellbeing, as well as providing intensive support to those with complex needs to enable them to live their best lives outside of the hospital environment.
5. The Vice-Chairperson referred to the 20% increase in the number of acute admissions for people over the age of 65 in the last two years and to analysis around admissions for people nearing end of life. It was emphasised that congestion in the emergency department had consequential impacts on all communities.
6. A board member highlighted the need to consider the role of the voluntary and community sector in urgent neighbourhood services and MDNTs.
7. Joanne Hodgetts commented on the benefits of high impact interventions and on the potential for learning from other areas involved in the national programme. Jon Barnes added that empowering people to stay at home for as long as possible would have benefits for the system but would also provide better experiences for individuals, families and communities.

In concluding the discussion, the Chairperson noted that progress with the Neighbourhood Health Programme was likely to be a regular item of business at future board meetings.

Resolved: That the report be noted.

26. GOOD WORK FOR EVERYONE: THE RELATIONSHIP BETWEEN WORK AND HEALTH

David Collyer provided the introduction to the slides 'Good work for everyone: The relationship between work and health' and further slides were presented as follows:

- i. Alexia Heath presented the slides: *Get Britain Working Plan*; and *Get Marches Working Plan*, including objectives, key statistics, and summary of the priority groups for the Marches area.
- ii. David Mehaffey presented the slides: *Finalising the Health and Work Strategy*; *The Vision*; *Four Strategic Ambitions*; and *Strategic Outcomes – Seeking to change*.

The Chairperson acknowledged that the partner organisations were significant employers in the county and invited board members to comment on the health and support pathways available to employees. Overviews were provided in respect of: Hereford & Worcester Fire and Rescue Service; West Mercia Police; Wye Valley NHS Trust; NHS Herefordshire and Worcestershire Integrated Care Board; and Herefordshire Council.

The Leader of the Council noted that job satisfaction and enjoyment at work were important to staff members' health and wellbeing.

- iii. Gillian Pearson presented the slides: *Talk Wellbeing – WorkWell*; and *Talk Wellbeing – Workplace Health Checks*.

In response to questions, it was confirmed that: work was being undertaken with the agricultural sector, including through Hereford Livestock Centre and local ploughing matches; and that there had been engagement with hvoss (Herefordshire Voluntary Organisations Support Service) and ECHO (Extra Choices in Herefordshire) on the Get Marches Working Plan.

Resolved: That

- a) **progress towards the priority of achieving good work for everyone be noted;**
- b) **the Herefordshire and Worcestershire ICS Health and Work Strategy be supported; and**
- c) **member organisations consider how they can contribute further to this priority.**

27. HEREFORDSHIRE PHARMACEUTICAL NEEDS ASSESSMENT 2025

Ryan Davies presented the slides 'Pharmaceutical Needs Assessment (PNA) 2025', under the headings: *Context* and *Process*; *Gap Analysis*; *Conclusions*; and *Recommendations*.

The principal discussion points included:

1. All pharmacies were required to provide essential services, including: dispensing of prescriptions; dispensing of repeatable prescriptions; disposal of unwanted medicines; promotion of healthy lifestyles; signposting people who require advice, treatment or support to relevant providers; support for self-care; and discharge medicines service.

The Chairperson questioned the extent to which dispensing practices in rural areas provided services beyond basic dispensing. Some of the challenges for dispensing practices were noted, including building space constraints.

2. Zoe Clifford commended the work undertaken on the PNA, as it provided a comprehensive summary of the current state of play in Herefordshire.
3. There was a brief discussion about the potential role of pharmacies in the development of neighbourhood health services.
4. There was also a brief discussion about the challenges for patients and family members in ordering prescriptions. It was reported that the ongoing development of the NHS App was helping to streamline processes and provide access to records, albeit recognising the need to promote digital health services and address barriers to access and use.

Resolved: That

- a) **the Pharmaceutical Needs Assessment (PNA) Draft Main Document (appendix 3 to the report) and its key statements and recommendations be noted;**
- b) **Consultation Report (appendix 1 to the report) be noted; and**
- c) **the PNA be approved in principle for publication on 1 October 2025, with final approval delegated to the PNA working group.**

28. BETTER CARE FUND (BCF) QUARTER 1 REPORT 2025-2026

Hilary Hall updated the board on Herefordshire's Better Care Fund (BCF) quarter 1 performance template 2025/26, the main points included:

- i. The delivery plan had been submitted by the deadline of 15 August 2025;
- ii. The current position with national metrics at quarter 1 was summarised as follows:
 - Emergency admissions to hospital for people aged over 65 per 100,000 population: local data showed that emergency admissions were not on track and attention was drawn to initiatives to avoid unnecessary admissions.
 - Average length of discharge delay for all acute adult patients: local data indicated promising progress.
 - Long-term admissions to residential care homes and nursing homes for people aged 65 and over per 100,000 population: there had been continuing reductions in long-term admissions.
- iii. It was reported that the BCF was underspent at quarter 1, with underspending of the Disabled Facilities Grant offsetting high levels of demand in other funding streams, particularly hospital discharge services.

Resolved: That

- a) **the Better Care Fund (BCF) 2025/26 quarter one report at Appendix 1 submitted to NHS England, be approved retrospectively by the board; and**
- b) **the ongoing work to support integrated health and care provision that is funded via the BCF be noted.**

29. WORK PROGRAMME

The work programme for the board was considered. Arising from matters identified earlier in the meeting, it was noted that the next meeting would include items on: the refresh of the Health and Wellbeing Strategy; and neighbourhood health update.

Resolved:

That the updated work programme be agreed.

Note: As this was the last board meeting to be attended by Jane Ives prior to retirement, the Chairperson thanked Jane for all the work undertaken as Vice-Chairperson of the Health and Wellbeing Board, and as Chairperson of the One Herefordshire Partnership.

30. DATE OF NEXT MEETING

The date of the next scheduled meeting in public was confirmed as Monday 15 December 2025, 2.00 pm.

The meeting ended at 4.23 pm

Chairperson