

REGISTERED COMPANY NUMBER: 08415314 (England and Wales)  
REGISTERED CHARITY NUMBER: 1151343



HEALTHWATCH SHROPSHIRE  
(A COMPANY LIMITED BY GUARANTEE)

TRUSTEES' REPORT AND

UNAUDITED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2020

## HEALTHWATCH SHROPSHIRE

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**Reference and administrative details**

**Trustees (Board Members)**

Vanessa Barrett, Chair  
David Beechey  
Michael Terrence Harte, Deputy Chair  
Steve Price  
Angela Saganowska (to 10/01/2020)  
Frederick David Voysey  
Denise Walker  
Robert Douglas Welch  
Anne Wignall

**Company registered number**

08415314

**Charity registered number**

1151343

**Registered office**

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**Company secretary**

Ms S Homden

**Chief Officer**

Miss LR Cawley

**Independent Examiner**

TCA (Shrewsbury) LLP  
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**Bankers**

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## **Chair's Statement for year ended 31<sup>st</sup> March 2020**

### **Chair's Statement, Vanessa Barrett**

I am very proud of the work of Healthwatch Shropshire during 2019-20. There were several changes within our small staff team at the start of the year but their enthusiasm and commitment to engaging with the people of Shropshire in every way they can has led to some high-quality work.

This annual report gives you a flavour of the wide range of activities undertaken by our staff team and wonderful volunteers, and how we share what people tell us about their experiences to influence organisations and services to improve the care they provide.

Towards the end of the 2019/20 year came Covid-19. In common with the whole country, this has radically changed how Healthwatch Shropshire works, but has had a far more extreme impact on the NHS and Care Sectors. In the coming year we will continue to try to learn about people's experiences during this period, and equally importantly to discover what changes in services and the way they are delivered have worked really well and will be important to continue going forward into the 'post-Covid' world.

I want to mention just one of our many programmes during 2019. Our work with focus groups on the NHS Long Term Plan, engaging with people with Dementia and their carers, led us to set up a number of visits to Care Homes across the county. We were heartened to see the efforts made to create a 'dementia-friendly' environment in almost all the homes we visited, and even more by the overwhelmingly positive feedback we received from residents and their relatives on the caring attitudes of Care Home staff. Our thoughts and best wishes are with the health and care sectors in the daily struggle to meet the challenges presented by Covid-19.

## **Trustee's Report for the year ended 31<sup>st</sup> March 2020**

The Board Members (who are trustees of the charity and also directors of the company for the purposes of the Companies Act) present their annual report together with the financial statements of Healthwatch Shropshire (the company) for the 1<sup>st</sup> April 2019 to 31<sup>st</sup> March 2020. The Board Members confirm that the annual report and financial statements of the company comply with the current statutory requirements, the requirements of the company's governing document and the provisions of the Statement of Recommended Practice (SORP), applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1<sup>st</sup> January 2015) as amended by Updated Bulletin 1 (effective 1<sup>st</sup> January 2015).

Since the charitable company qualifies as small under section 383, the strategic report required of medium and large companies under The Companies Act 2006 (Strategic Report and Directors Report) Regulations 2013 is not required.

### **1. Introduction**

The Health and Social Care Act 2012 established Healthwatch as the independent consumer champion for health and social care in England, with a local Healthwatch in every Local Authority area in England. Our role is to ensure that local decision makers and health and care services put the experiences of people at the heart of their work. Everything we say and do is informed by our connection to local people. Our sole focus is on understanding the needs, experiences and concerns of people of all ages and backgrounds who use health and social care services and to speak out on their behalf.

From 1st April 2016, Healthwatch Shropshire (HWS) has also held the contract for the Independent Health Complaints Advocacy Service for people who receive NHS services in Shropshire and for Shropshire residents who receive NHS services outside the county.

In the autumn of 2017 Healthwatch Shropshire successfully responded to the invitation tender to provide local Healthwatch services in Shropshire and the Independent Health Complaints Advocacy Service (IHCAS) for the period from April 2018 for three years, with the possibility of an extension until the end of March 2023. Due to a significant funding cut the decision was made for the organisation to become a four-day service with the office being open Monday to Thursday.

### **Purpose and Aims**

The purposes of Healthwatch Shropshire are set out in the Articles of Association:

- To provide information and advice to the general public about local health and social care services



- To make the views and experiences of members of the general public known to health and social care providers
- To enable local people to have a voice in the development, delivery and equality of access to local health and care services and facilities, and
- To provide training and the development of skills for volunteers and the wider community in understanding, scrutinising, reviewing and monitoring local health and care services and facilities.

Based on the Articles and guidance from Healthwatch England (HWE), Healthwatch Shropshire (HWS) has determined its own purpose:

*To be the recognised independent voice of the people of Shropshire in seeking to improve their experience of Health and Social Care services.*

## **2. Structure, governance and management**

### **a. Constitution**

Healthwatch Shropshire (HWS) is a charitable company limited by guarantee and was set up and is governed by its Articles of Association, which established the objects and powers of the charitable company.

Its registered charity number is 1151343 and its company number is 08415314. Members of the charitable company are required to contribute an amount not exceeding £1 to the assets of the charitable company in the event of its winding up. The Board Members are the trustees of the charity and directors of the company and have no beneficial interest in the charitable company.

### **b. Method of appointment or election of Board Members**

The governance of the charity is the responsibility of the Board Members who are elected and co-opted under the terms of the Articles of Association.

Board Members, who are volunteers, are recruited, when the need arises, from the Associate Membership and also from the people of Shropshire in an open and transparent process. Vacancies are advertised as widely as possible. Board Members are elected for a period of three years.

All potential candidates to become Board Members must:

- live in Shropshire\* OR
- work for/represent a voluntary or community group in Shropshire\* OR
- be registered with a GP Practice in Shropshire\*

(\*By 'Shropshire' we mean the area covered by Shropshire Council and Shropshire Clinical Commissioning Group).

#### c. Policies adopted for the induction and training of Board Members

All candidates for Board Membership undergo an induction training session prior to interview. This is to ensure that any new Board Members fully understand the responsibilities that are being taken on and have an insight into the work of Healthwatch Shropshire (HWS). New Board Members have the opportunity to spend some time with the staff team and the Chair and are given key documents about HWS. Additional training is offered as need is identified.

Board Members have adopted a process of appraisal of individual Board Members on an annual basis and regularly review the structure and effectiveness of the Board and its Committees.

#### d. Organisational structure and decision making

The maximum number of Board Members is 12. At the end of the year in March 2020 the Board comprised eight members.

The staff complement at the end of the year was six, all part time since April 2018 when HWS became a four-day service (Monday to Thursday). Staff changes that continued into 2019-20 had an impact on capacity and activity during periods of recruitment. All posts had been recruited to by May 2019.

Staff Team at end of March 2020:

Chief Officer	Lynn Cawley	
Information Officer	Brian Rapson	
Volunteer Officer & Secretary to the Board	Steph Dunbar	<i>(Maternity leave started 17/02/20)</i>
Community Engagement & Communications Officer	Jayne Morris	
Enter & View Officer and Health Complaints Advocacy Coordinator	Alli Sangster-Wall	<i>(Joined 01/05/19)</i>
Administrative Officer	Patricia McInnes	
Company Administrator (Fixed Term Contract)	Bethany Kennedy	<i>(Maternity Cover from 03/02/20)</i>

In addition, at year end Healthwatch Shropshire (HWS) had a team of 15 volunteers to support its work programme. The volunteer roles are:

- Enter & View Authorised Representative (9) - conduct and report on Enter & View visits



- Engagement Volunteers (6) - help to raise awareness of HWS in their communities throughout Shropshire including representing HWS at information stands at locations across the county

Associate Members are people of Shropshire who are interested in the work of Healthwatch Shropshire (HWS) but do not wish to be as actively involved as volunteers. At the end of March 2020, HWS had 70 Organisation Associate Members (69 last year) and 217 Individual Associate Members (217 last year).

### *Our governance*

Board Members are lay people and volunteers. Healthwatch Shropshire (HWS) has regularly held Board meetings in public during 2019-20 at different community venues across Shropshire. There are four Committees of the Board, each with its own Terms of Reference, to which the Board has delegated some of its responsibilities to enable the business of HWS to be delivered in a timely manner but the Board remains accountable. The Committees are:

- Business
- Enter & View
- Intelligence
- Marketing

The public voice is also represented on our Stakeholder Group, which has involvement from commissioners and major providers, including the independent and voluntary sectors, and Shropshire Patient Group (made up of representatives from primary care patient groups across Shropshire). The primary purpose is to ensure the future overall effectiveness of HWS by providing a peer-to-peer strategic forum for the interchange of information, ideas and perspective pertinent to the work of HWS. The group met once this year to approve our key priorities. We have continued to communicate with members informally throughout the year.

### *How we make relevant decisions*

A Decision-Making policy is published on the web site, [www.healthwatchshropshire.co.uk](http://www.healthwatchshropshire.co.uk). The relevant decisions are included in Board meeting minutes and published on the web site.

- **How we choose which health and social care services we are looking to cover with our activities:**  
Feedback from members of the public on the quality of health and social care services is considered by the Intelligence Committee and recommendations made as to the most appropriate response. This information is also used to inform the Enter & View planning process as well as engagement activities. The findings of Enter & View visits (conducted by volunteers) also help to inform the forward work programme. 'Hot Topics' enable Healthwatch Shropshire to encourage feedback on a particular topic.



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- **Whether to request information, make a report or a recommendation:**  
Feedback received from members of the public informs decisions about activities, which include whether to request additional information from providers and commissioners, make a report or a recommendation. These decisions are taken by the Board Committees, which include volunteers.
- **Which premises to Enter & View and when those premises are to be visited:**  
The Enter & View programme is informed by intelligence Healthwatch Shropshire (HWS) receives from members of the public. It also receives requests from:
  - Shropshire Telford and Wrekin Provider Information Sharing Meeting that takes place every two months
  - Quarterly meetings with the Care Quality Commission, Shropshire Council and Shrewsbury and Telford Hospital Trust (SaTH)
  - Regular meetings with the other local NHS Trusts

The Enter & View Committee includes four Board Members, one of whom is also an Authorised Representative and directly involved in conducting Enter and View visits, one other Authorised Representative and one volunteer who is not an Authorised Representative.

- **Whether to refer a matter to an Overview & Scrutiny Committee:**  
The Board will make these decisions based on evidence and recommendations from the Intelligence Committee. HWS meets with the Chairs of the Health Overview and Scrutiny Committee and the Health and Wellbeing Board in order to triangulate intelligence.

#### **e. The involvement of the public and volunteers**

##### *Delivering our statutory activities*

Healthwatch Shropshire volunteers are involved in a wide range of our activities. Volunteers represent HWS at meetings across health and social care, including attending the Board meetings of NHS Trusts operating locally. Volunteers help promote the existence and work of Healthwatch Shropshire (HWS) by supporting our community engagement activities, for example, volunteers have attended promotional stalls in local hospitals and distributed leaflets to key locations local to them. In a large and sparsely populated county like Shropshire, having a good geographical spread of volunteers is important to help us have a presence across the county in all our activities.

Importantly volunteers also support HWS in its involvement with the local transformation programmes (e.g. Acute Hospital Reconfiguration, Local Maternity System Review).

For more on the role of our volunteers see our website page:

<http://healthwatchshropshire.co.uk/content/get-involved>



**f. Related party relationships**

Healthwatch Shropshire has no related party relationships.

**g. Risk management**

Healthwatch Shropshire has a Risk Management Matrix to enable it to identify and manage effectively the external risks faced by the charity. Annual reviews take place involving Board Members and staff and the Matrix is regularly updated for Business Committee and Board meetings.

**h. Healthwatch Trademark Licence Agreement**

We can confirm that Healthwatch Shropshire has signed and returned to Healthwatch England the Healthwatch Trademark agreement (which covers the logo and the Healthwatch brand) and that we are using this trademark when undertaking work on our statutory Activities as covered by the licence agreement.

### **3. Objectives and Activities**

**a. Policies and objectives**

Healthwatch Shropshire has continued to approve and review the key policies and supporting procedures that underpin the delivery of its work programmes. Key policies are available on our website. Policies are reviewed regularly, the frequency being determined by the reviewing panel.

The priorities for the year are informed by the people of Shropshire through the intelligence received, engagement and Healthwatch Shropshire's understanding of the context that it is working in. Key priorities for the year 2019-20 were agreed as:

1. Mental health and well-being - e.g. 0-25 services, quality of dementia care in care homes
2. Adult Social Care - e.g. partnership work around discharge and care at home
3. Primary Care - e.g. access, technology and shared care records, out-of-hours
4. Prevention and Social Prescribing - e.g. community resilience

The role of the IHCAS is to provide information and advocacy support to people living in Shropshire and anyone using NHS services in Shropshire to make a formal NHS complaint.

**b. Activities for achieving objectives**

Healthwatch Shropshire (HWS) works to meet its statutory requirements and deliver on its objectives by:

- Raising the profile of HWS through effective marketing and networking
- Enabling people to access the services HWS provides easily
- Delivering a structured programme of engagement
- Delivering the Enter & View programme
- Supporting volunteers
- Delivering the signposting and information service
- Capturing and analysing information
- Developing partnerships through effective networking
- Delivering the Research Grants scheme (up to 2017)
- Keeping up to date with work planning, policies procedures and governance
- Continuing to develop ways of capturing people's experience and complaints

The IHCA Service meets its objectives by:

- Providing people with information about the NHS complaints process and their options within that process to empower them to make a formal complaint and have their voice heard. This information is given verbally over the phone or face to face and people are given access to the step-by-step guide we have produced by post, email or on our website.
- Providing the support of a Health Complaints Advocate to help them to put their complaint in writing, navigate the complaints process and attend meetings to discuss their complaint.

**c. How our activities deliver public benefit**

Healthwatch Shropshire is working to help local people get the best out of their health and social care services, either by improving them today or helping to shape them for the future. Local people have a powerful voice and Healthwatch Shropshire is working to ensure that this voice is heard by commissioners and providers of health and social care services in order to address issues and concerns raised but also to share good practice. We achieve this through our attendance at key meetings across health and social care, most significantly this year we have increased our involvement in the Shropshire, Telford and Wrekin Sustainability and Transformation Partnership (STP) and are attending meetings across four 'clusters':

- Acute Care
- Mental Health (including learning disability and Autism)
- Prevention and Place Based Care (including Primary Care)
- Support Services (including clinical support, such as pharmacy, back office, transport and logistics and workforce)



Our voice at these meetings has been strengthened by our engagement around the STP Long Term Plan and the report produced (see page 17)

The meetings we attend give us the opportunity to remind those present of the role of Healthwatch Shropshire locally and the importance of considering the public voice when developing, providing and evaluating services. We also share relevant comments from the public with key organisations (e.g. Shrewsbury and Telford Hospital Trust, Shropshire Clinical Commissioning Group and Shropshire Council) and relevant reports and findings from the work we have undertaken. Our reports are also made public and available on our website.

The comments we receive are anonymised and recorded and stored in line with the General Data Protection Regulation (GDPR). A member of the Board acts as Data Protection Officer and is tasked with monitoring compliance with the GDPR and other data protection laws, our data protection policies, awareness-raising, training, and audits.

The work programme of Healthwatch Shropshire is primarily informed by the experiences of people of all ages, from across the county and from all backgrounds. Healthwatch Shropshire is inclusive in its approach and is working to ensure that everyone has the opportunity to have their voice heard. Although Healthwatch Shropshire uses digital technology (e.g. website) and social media to help deliver its work programme it also has a comprehensive programme of community engagement across the county to make sure that everyone has the opportunity to get involved. How this is achieved is outlined in more detail below under the heading 'Achievements and Performance'.

Healthwatch Shropshire also provides an information and signposting service which assists local people to find services and / or information to support their choices and get the care they need.

The Independent Health Complaints Advocacy Service provides an additional service to support individuals who are unhappy with care or treatment that they have received from the NHS to make a formal complaint and have their voice heard.

#### **d. Research Grant Programme**

When it was first set up, Healthwatch Shropshire was able to award grants for research projects undertaken by the voluntary and community sector in Shropshire. Each year the theme was related to people's experiences of health and social care services in the county. From 2017 there was no additional funding available from Shropshire Council and final projects to which funding was already committed have continued to be monitored. This year we received the final outstanding report from Active Carers entitled 'An Evaluation of Mental Health Carers' Assessments and the Triangle of Care in Shropshire'. It is due to be published in 2020.

## 4. Achievements and performance

### a. Review of activities

The following sections highlight the achievements of Healthwatch Shropshire in 2019-20 against the statutory activities for Healthwatch in the context of Shropshire and also reports on the Independent Complaints Advocacy Service.

### a. Review of activities

#### **The eight statutory activities of Healthwatch Shropshire are:**

- Promoting and supporting the involvement of local people in commissioning, provision and scrutiny of local care services
- Enabling local people to monitor the standard of provision of local care services and whether and how local care services could and ought to be improved
- Obtaining the views of local people regarding their need for, and experiences of, local care services and importantly to make these views known
- Making reports and recommendations about how local care services could or ought to be improved. These should be directed to commissioners and providers of care services and people responsible for managing or scrutinising local care services and shared with Healthwatch England.
- Providing advice and information about access to local care services so choice can be made about local care services.
- Formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England.
- Making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where the circumstances justify doing so, making such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about issues.
- Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.



The statutory activities for Local Healthwatch have been collated under four main headings by Healthwatch England and this report follows this approach:

- Highlights from our year
- How we've made a difference
- Helping you find the answers
- Our volunteers

**Please note that a 'restricted project' is a project for which we received external funding.**

We also report on our additional activity under the Independent Health Complaints Advocacy Service for 2019-20.

## Highlights from our year

### Health and care that works for you:

- 23 volunteers (including Board members) helped us to carry out our work. In total, they gave up 1353 hours of their time

### Providing support:

- 753 people shared their health and/or social care story with us, 37% more than last year.
- 134 people contacted the team directly asking for information or advice about local services and support
- Since it was launched in October 2019, the 'Advice and information' section of our website has been viewed 228 times

### Reaching out:

- 2678 people engaged with us face-to-face across 134 community events
- 2637 people followed us on social media channels, a 10% increase on last year
- We received 4956 hits on our website and 136 contacted us through the website

### Making a difference to care:

- We published 24<sup>1</sup> reports about the improvements people would like to see with their health and social care
- We made 126 recommendations for improvement

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<sup>1</sup> Please note that four reports were delayed due to the Covid-19 pandemic and will be published early 2020-21

## How we've made a difference

- **Listening to people**

We completed several projects this year that focused on hearing people's views about health and / or social care services. The majority resulted in a published report that presented our key findings and recommendations. However, we also did smaller pieces of focused engagement that enabled us to make contact with and hear from a specific group of people, e.g. veterans and serving personnel.

Examples of projects:

- ❖ **End of Life**

People told us about their 'Experiences of End of Life and Palliative Care Services in Shropshire' which highlighted the importance of timely communication to ensure that people were able to receive the care they wanted and expected at end of life. We heard 33 patient and family experiences some of which highlighted where things had gone well. The final report was shared with the End of Life Care Group which includes professionals from across the NHS and social care in Shropshire.

'Thank you for sharing the Healthwatch End of Life report with us. It will undoubtedly be a useful resource to improve the care of people at end of life and identify where we can all give better support to families.' (SCCG Senior Quality Lead for Care Homes)

- ❖ **Home Care**

With the support of Shropshire Council as Commissioner and Shropshire Partners in Care (SPIC) we started an engagement project to gather people's experiences of receiving home care. For the first time, Healthwatch Shropshire reached out to Domiciliary Care Agencies in Shropshire to ask for their support and seven agencies helped us to develop a questionnaire and shared it with their service users. We received 102 responses. The majority of people told us that they were very happy with the service they were receiving. The main issue highlighted was 'continuity of carer' with 17% of respondents telling us they don't see the same carers regularly. We also planned to gather views from the providers and care staff, but this was put on hold due to Covid-19. We will publish the report illustrating our findings so far in 2020-21.

People receiving Domiciliary Care are some of the most isolated and seldom heard and we will build on this initial piece of work by continuing to develop links with this sector and asking people to share their views with us.

- ❖ **Maternity Mental Health (Restricted Project)**

In late 2018 Healthwatch Shropshire was asked to be one of five local Healthwatch to contribute to a piece of national research being conducted by Healthwatch England about perinatal mental health services and share our findings with Healthwatch England by the end of March 2019.





‘The Shropshire, Telford & Wrekin Local Maternity System (LMS) welcomes this key piece of work undertaken by Healthwatch Shropshire. The LMS will use these findings from this research to help ensure perinatal mental health services meet the needs of our local population. In recognition the LMS has asked this to be routinely undertaken across the LMS footprint so we can measure the ongoing impact of improvements to perinatal mental health services and associated outcomes for women and their families.’ (LMS Programme Manager)

- Improving services

During the year we have taken a variety of issues raised by patients and service users to the service providers and commissioners. For example, we received several reports that emergency ambulances had problems locating the patient, either because the postcode of the property was not precise enough or because the caller was unsure of the exact outside location they were at. We spoke to West Midlands Ambulance Service (WMAS) and they explained the methods they use to locate patients, including using the 'what3words' system if the caller has it installed on their mobile phone. However, they were unable to tell us how often they had this problem. We wrote formally to the Chief Executive, but they could not provide the data requested. We made the Shropshire Clinical Commissioning Group aware of the issue and the WMAS response to make sure that they understand the problem and can raise it in their contract meetings.

Examples of larger projects/pieces of work:

❖ **Suicide prevention with the rural farming community**

Due to the high incidence of suicide in the rural farming community in Shropshire, Councillor Dean Carol and Shropshire Public Health asked for our help to find out how the farming community would receive a new information leaflet launched by the Shropshire and Telford Suicide Prevention Network to help people of all ages who are experiencing suicidal thoughts or those concerned for other's mental well-being. We took the leaflet to a livestock market in Bridgnorth and spoke to 33 farmers and associated industry workers. The people we spoke to were willing to discuss mental health and the majority knew someone who had taken their life. We shared their feedback on the leaflet and it was amended. It was also agreed that more targeted information for the farming community needs to be developed. Further engagement is planned, including a workshop focused on mental health.

The links we made doing this piece of work has enabled mental health awareness information to be distributed more widely to this community, including through social media and company websites.

❖ **Experiences of accessing primary care services (e.g. GPs, pharmacies)**

In 2015 Healthwatch Shropshire carried out a piece of research that showed patients didn't always understand how GP appointment systems worked and we are still hearing that message. Practices are now offering 'extended access' appointments, where patients are able to book routine appointments to see a GP, practice nurse, or other qualified healthcare professional, at a time which may be more convenient - in the evenings, at the weekend and during bank holidays. Patients can book appointments online and are being advised to contact their local pharmacist instead of their GP for certain conditions. We wanted to know how the patient experience has been affected.

We used a range of engagement methods to hear from as many members of the public as possible. We put out a general call for the public to share their experiences with us and spoke to people face-to-face; we also completed Enter & View visits to seven GP practices. We heard from 231 people. We also did a review of practice websites to understand how they were communicating with their patients about access to services and asked all GP practices about how they arrange services to meet the needs of their patients. Twenty-six practices responded to our questionnaire.

The publication of our findings was delayed due to Covid-19. Shropshire Clinical Commissioning Group have agreed to comment on our report and findings, and we hope to publish the report early 2020-21.



❖ **Social Prescribing for 16-25 year olds (Restricted Project)**

In 2018-19 we asked people of all ages about the barriers to accessing social prescribing. The success of this piece of work resulted in Shropshire Council Public Health asking us to speak to people again. This time we talked to young people aged 16-25 to ask them what they think about social prescribing and how it should work for them.

To reach as many people as possible we ran an on-line survey, focus groups and worked with Psychology Students from University Centre Shrewsbury (UCS). We interviewed three GPs from across Shropshire and Community Care Coordinators to get their views. Three USC Psychology Students conducted research into social prescribing for their peer group and agreed to share their findings with us.

The progress of the project was delayed by Covid-19 as some planned focus groups were cancelled and the University closed. The report summarises what we heard from 70 young people (49 through the on-line questionnaire, 17 people who took part in focus groups and five people interviewed by USC students) and five professionals with an interest in Social Prescribing for this age group (three GPs, two Community and Care Coordinators). It has been shared with Public Health and will be published early 2020-21.

‘Brilliant. We are progressing this, so it’s timely. Will look forward to seeing the full report.’ (Consultant in Public Health & NHS E Regional Facilitator - Midlands Social Prescribing Network)

❖ **The Sustainability & Transformation Partnership Long Term Plan (Restricted Project)**

A major piece of work for the Healthwatch Network this year was gathering people’s views on the NHS Long Term Plan (LTP). Locally Healthwatch Shropshire was the Co-ordinating Healthwatch working with Healthwatch Telford and Wrekin to ask people across the county #WhatWouldYouDo to improve the NHS locally. We produced a report highlighting our findings from the surveys, focus groups and public events we ran across the county.

**Engagement Highlights**

In Shropshire:

- 244 people responded to our surveys on the NHS Long Term Plan
- 132 people spoke to us face-to-face (either at focus groups with people with Dementia and their carers, focus groups with adults with learning disabilities and their carers, or at our ‘What would you do?’ public event)

Our report was shared with The Shropshire Telford and Wrekin Sustainability and Transformation Partnership (STP) membership, including the Local Authorities, Clinical Commissioning Groups and all local NHS Trusts, including the Community Trust, Mental Health Trust (Midlands Partnership Foundation Trust) and the Ambulance Trust (West Midlands Ambulance Service). Every meeting we attend across the STP continues to be an opportunity for Healthwatch Shropshire to remind them of what the public told us they want them to do:

- ✓ Improve how the NHS works so that people can get help more easily and closer to home
- ✓ Help more people to stay well
- ✓ Make care better
- ✓ Invest more money in technology

The findings of our report were the focus of our Annual Event in March. (See p.20)

‘I would like to thank Healthwatch Shropshire and Healthwatch Telford and Wrekin colleagues on producing this important report, which has reached many different people across Shropshire, Telford & Wrekin [...] Together with the views of our partners, clinicians, staff and service users we can identify what is working well, what can be improved and what is important to them. This will enable us to plan, design and deliver health and social care services that are right for our local population of Shropshire, Telford and Wrekin.’ (Sir Neil McKay - Independent Chair of the STP)

An example of the ongoing impact of this piece of work is our involvement in a task and finish group led by the Shropshire Clinical Commissioning Group (SCCG) Dementia lead who is tasked with refreshing the county’s Dementia Strategy 2017-20. Working with the SCCG, Healthwatch Telford & Wrekin and representatives from the Shropshire, Telford and Wrekin Health Economy Dementia Steering Group, our report findings were used to inform discussions and the final proposal. Our STP Long Term Plan report highlighted a lack of, and in many cases unawareness of, effective case reviews and the need for increased levels of support for people with Dementia and their carers in certain parts of the county. As a result, the group were able to work towards developing a ‘living well plan’.

‘I think the Healthwatch Shropshire project about the experiences of people living with Dementia provide an invaluable library of information for commissioners, providers and General Practitioners to learn from. It represents the best and most comprehensive research ever carried out in Shropshire, about the experiences of those affected by Dementia and must be used to improve services and support.’ (Chair of the Dementia Action Alliance)

## • Working in partnership with others

Healthwatch Shropshire uses a collaborative approach to working with service providers, commissioners, regulators and other partners to bring about change.

### ❖ Annual Event - ‘Stronger Together - How health, social care and the voluntary and community sector are working together to support you’

The year we used our Annual Event to highlight some key messages from our STP Long Term Plan report, demonstrate how we are working with others to gather people’s experiences of services, share good practice and showcase multi-agency working.



We invited five speakers from the NHS, Public Health, Housing and the voluntary and community sector (VCS) to explain the work they are doing with partners and the difference it is making. We also invited other organisations to have stands and share information about their services with a focus on prevention. The public had the opportunity to speak to service providers, ask questions and give feedback directly.

85 people attended the event including 60 members of the public (including HWS Board Members and volunteers) and 25 organisation representatives (speakers and stall holders). In the event feedback, 89% of those who attended said they would be able to use what they had heard about personally or professionally.

Questions from the audience in the room highlighted the need for more information about how the projects could be accessed and fit together. We will be working with the many organisations involved to try and achieve this through our involvement in the STP and Voluntary and Community Sector Assembly.

‘We were really pleased to have the opportunity to bring our work to others in the health and social care communities in the County. I think it is so important that we all understand what is available and how we can work together more effectively to get the best results with what money is available.’ (Sustain Housing Support)

#### ❖ Working with the CQC to improve services

Healthwatch Shropshire has quarterly information sharing meetings with Care Quality Commission (CQC) inspectors representing each of the inspection teams (e.g. GP services, hospitals, care homes, mental health services). All reports we produce are shared directly with the CQC and we also liaise with inspectors to make sure Enter & View visits to do not clash with an Inspection. The CQC ask us for any information we hold about services before their inspection (e.g. Enter & View reports, comments).

Through our involvement in the Shropshire and Telford Provider Information Sharing Meetings and quarterly meetings we work closely with the CQC and other partners to identify services we could visit to gather the views of the people using those services to contribute to the monitoring process.

In 2018-19 we completed an Enter & View report: ‘The NHS Accessible Information Standard (AIS) in GP Practices’. CQC Primary Care inspectors told us they took this report on their inspections to GP practices saying:

‘This report is really useful. We wish every local Healthwatch would do something similar.’ (CQC Primary Care Inspector)

This year they have told us they are continuing to speak to practices about the report and as a result, in October 2019 Shropshire Clinical Commissioning Group asked us to speak to 182 Practice Secretaries, Receptionists and Admin Staff from across Shropshire about the Standard and how to implement it due to our ‘extensive and informed knowledge’ of the AIS.

In January 2020 a GP Practice Manager told us they had been speaking to the CQC and were advised to look on our website for our AIS report. She thanked us for our help.

#### ❖ Working with 'Community Connectors'

The Shropshire Community Connectors Networks are made up of representatives from community groups, charities, Shropshire Council services, local businesses and other individuals who have an interest in helping or supporting local people. Healthwatch Shropshire has improved its links with the CCN this year and regularly attends meetings. We have led spotlight sessions where we have been able to explain what we do and tell members about our events, surveys and ask for help in sharing information.

'I believe the connection we have with Healthwatch Shropshire is a positive one, we welcome a wide variety of groups and individuals but having some recognisable organisations like Healthwatch Shropshire adds to the quality of information and the meetings. Hearing information directly from Healthwatch adds a depth of knowledge that is appreciated. Individuals are able to ask questions and Healthwatch can give a deeper perspective on some of the matters arising. Feedback from our members has been positive and I know that lots of people share the information and details you give. [During Covid-19] we are still operating our virtual network and we are happy to share and promote any information Healthwatch want us to.' (Oswestry CCN Organiser)

## Helping you find the answers

This year we helped people get the advice and information they need by:

- Providing advice and information articles on our website
- Answering people's queries about services over the phone, by email, or online
- Talking to people at community events
- Promoting services and information that can help people on our social media

From the question(s) people ask we are able to identify where there are gaps in information, for example:

#### ❖ Car parking charges for cancer patients

People told us that the car parking charging system at the Shrewsbury and Telford Hospital Trust (SaTH) for cancer patients was unclear and staff were interpreting the rules in various ways. We contacted SaTH and they clarified the position that patients get four months free parking when first diagnosed with cancer because it is likely that they will go through some intensive treatment over that period. This is for all treatment including out-patient's appointments. The Trust told us they will review the information on their website and will do some more communication with staff.



❖ **‘Extended Access’ appointments at Cambrian Medical Centre**

As part of our work to understand how people access Primary Care, we visited Cambrian Medical Centre in Oswestry to look at access to appointments and in particular ‘extended access’ appointments and how these are offered and advertised. We spoke to 10 people in the waiting rooms, looked around the waiting areas for information displayed about appointments and looked at the practice’s website before our visit.

What we saw and heard led to us making two recommendations suggesting they look at different ways to inform patients about the availability of extended access appointments including displaying posters and making the information more prominent on their website. The practice responded to our recommendations and made improvements.

‘Thank you for the report and visit, we are very pleased with it and would welcome a further visit from Healthwatch in future.’ (Practice Manager)

## **Our volunteers**

At Healthwatch Shropshire we are supported by 23 volunteers to help us find out what people think about services in their communities, what is working and what they would like to improve.

‘I have had a long-term interest in NHS and social care services. After I retired, I was attracted to the work of Healthwatch Shropshire as an independent organisation looking at the services delivered by the NHS and social care providers from the public’s perspective. In my role I have the opportunity to talk to people about their experiences of using services rather than reading about them in the media. I enjoy meeting people from different backgrounds, contributing to making a difference and seeing where Healthwatch Shropshire has helped make changes to services over time.’ (Jayne - Engagement Volunteer)

This year our volunteers:

- Raised awareness of the work we do at events, in the community and with health and care services
- Visited services to make sure they are providing people with the right support
- Helped support our day-to-day running
- Listened to people’s experiences to help us know which areas we need to focus on

In 2019-20 our Enter and View Authorised Representatives have undertaken 15 Enter and View visits to Care Homes, Hospital Wards and GP practices. We have published 18 Enter and View reports which are available on our website. Other volunteers have helped us by sharing their views through our Committees, supporting us with public engagement (e.g. manning stands, distributing information) and helping us to write reports.

One example of how the work of our volunteers has helped us hear from some of the most vulnerable and seldom heard people in Shropshire and see for ourselves what is being done to support them:

❖ **Enter & View volunteers report on Dementia care in care homes**

People with Dementia living in care homes can be some of the most vulnerable people and it can be difficult for them to have a voice. Healthwatch Shropshire decided to focus on Dementia care in care homes, looking particularly at choice, dignity and the care home environment. We completed a programme of Enter and View visits to eight care and nursing homes registered with CQC as providing Dementia care. Using King's Fund guidance our volunteers looked at how 'dementia-friendly' the environment was in each home.

Our volunteers spoke to 85 people in total on the visits (28 residents, 17 visitors and 40 members of staff). We found that the residents, and their relatives or friends, were overwhelmingly happy with the care they were receiving.

In total we made 43 recommendations, 23 were about the environment of the homes for example developing the use of the outside area for residents and installing dementia appropriate directional signs to toilets, nurses' station and exits.

Providers were largely positive in their responses to our recommendations with 30% of recommendations acted on immediately and providers telling us they intended to act on another 42% of our recommendations in the future.

We shared the final report with the Executive Director of Quality at Shropshire Clinical Commissioning Group who took it to the Care Sector Group.

'I am a retired Community Nurse who really appreciated the amount of healthcare that went on outside of the hospital setting as well as within. Since joining Healthwatch as an Enter & View Authorised Representative I have particularly enjoyed being involved in some fact-finding about End of Life Care out of hours. It's nice to be useful, using knowledge and life skills learnt over many years and I enjoy learning new skills, too. I like the idea that 'ordinary' people are able to have a voice anonymously about the services that they receive. It's also good to be part of a team again.' (Fran - Authorised Representative)

## **5. The Independent Health Complaints Advocacy Service (IHCAS)**

Healthwatch Shropshire's Independent Health Complaints Advocacy Service (IHCAS) aims to empower people to make a formal complaint about NHS treatment either they or a loved one has received.

This year we have had 102 contacts to the IHCA service:

- 54 people contacted us about hospital treatment
- 23 people contacted us about their GP
- 7 people contacted us about the Community Mental Health Team



- Other services people wished to complain about included Ambulance Services, Service Commissioners, Dentists and Opticians

To help people use the NHS complaints process and understand their options (including going to the Parliamentary and Health Service Ombudsman) we have produced a self-help pack which includes a 19-page step-by-step guide on 'Making a Complaint about the NHS', information on what to include in a letter of complaint and contact details for the organisation they are complaining to. We share the pack with people by post or email, or they can download it from our website.

'All communication I had was extremely helpful, friendly and supportive. I no longer felt alone in fighting my case. I cannot speak highly enough of the Healthwatch team and would recommend anyone who requires help to contact them.' - IHCAS Client

If people need more information and support to put their complaint in writing, we have a Health Complaints Advocate who will help them to navigate the NHS complaints process. Our advocates supported 25 people this year.

'I have really appreciated the help from the IHCA service. I know friends who have complained and been completely ignored but the service from IHCAS helped us get a response.' - IHCAS Client

People using the IHCA Service often need signposting to other services in addition to help to make a complaint. In the year 2019/20 we referred 20 people who contacted IHCAS to other services (including the IHCA Service for their area, Action Against Medical Accidents (AVMA), the General Medical Council (GMC), the Ockenden Review into Maternity Services and the Patient Advice and Liaison Service (PALS) if the situation was ongoing and they needed a quicker response.

Callers to the IHCAS also share their feedback on services and their experience of making a formal complaint. These comments are included in our data if they give us their consent to do so.

'I feel so much better just from having this conversation with you, it's like a weight has been lifted. I feel better already.' - IHCAS Client

## 6. Financial Review

### a. Going concern

After making appropriate enquiries, the Board Members have a reasonable expectation that the company has adequate resources to continue in operational existence for the foreseeable future. For this reason, they continue to adopt the going concern basis in preparing the financial statements. Further details regarding the adoption of the going concern basis can be found in the Accounting Policies.

## **b. Reserves policy**

Healthwatch Shropshire's income is from Shropshire Council, its Commissioner. The majority of the income is to deliver its services as set out in the contract but, in addition, for 2019-20 Healthwatch Shropshire was fortunate to have a small amount of grant funding from Healthy Lives to complete public engagement about Social Prescribing for 16-25 year olds, including barriers to access. We also received grant funding from Healthwatch England to enable us to complete public engagement about the NHS Long Term Plan and to inform the development of the Shropshire, Telford & Wrekin Sustainability and Transformation Partnership Long Term Plan.

It is good policy for a charity to hold a contingency reserve to protect the charity from disruption to its charitable work and from insolvency. In order to become a more sustainable organisation and to protect the charity from disruption to its charitable work and insolvency the Board has determined that it will build up its free reserves as part of its strategic planning. The reserve policy will be monitored and reviewed annually as part of the budget setting process and when a significant event may trigger the need for a review. Following a detailed review, the Board has determined that it will aim to hold 3 months core operating costs as a free reserve.

At 31st March 2020 the total free reserve of Healthwatch Shropshire was £54,165 (2018-19 was £49,402).

## **c. Investment policy and performance**

Healthwatch Shropshire has no investments. A policy will be developed as and when the need arises.

# **7. Plans for next year**

## **a. Future priorities:**

Healthwatch Shropshire want to make a difference to the health and social care services in Shropshire. The ways we can do that are:

- Giving people as many ways as possible to share their views with us (e.g. increased use of social media and wider promotion of our Freepost address for those who do not have access to technology)
- Making sure we know what is happening locally (e.g. attending meetings and events)
- Sharing the information, we have with the right people at the right time so it can be taken into account when reviewing and redesigning services



So this year we have decided to align our priorities with the 'clusters' of the Shropshire and Telford and Wrekin Sustainability and Transformation Partnership (STP) which cover a range of activities across health and social care. They are very similar to our 2019-20 priorities and this will allow us to follow-up some of the pieces of work we have done this year and make sure the views and comments we gather have the biggest impact possible.

In 2020-21 we will really see the impact Covid-19 has had globally, nationally and locally. We plan to use the next year to see what impact it has had on health and social care services in Shropshire. We will work to help the STP reflect on actions taken and the changes to services made during the pandemic, identify what has gone well and where improvements can be made. We will focus on:

- Mental Health (all age mental health)
- Community and Place Based Care (including Primary Care, Care Homes, Home Care and prevention)
- Acute Care (including Acute Hospital Reconfiguration, Transforming Midwifery Care)
- Workforce (including recruitment, training and support - such as access to PPE)
- Digital (how technology is being used across health and social care, particularly during the pandemic)

The wider work programme will involve all the different functions of Healthwatch Shropshire, making sure that we consider the most appropriate form of response to intelligence received.

Healthwatch Shropshire will continue to deliver the Independent Health Complaints Advocacy Service and will continue to promote the service across the county to the public and with the service providers.

## **8. Trustees' responsibilities statement**

The Trustees (who are also directors of Healthwatch Shropshire for the purposes of company law) are responsible for preparing the Trustees' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year. Under company law the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;

**healthwatch**  
**Shropshire**  
(A company limited by guarantee)

- observe the methods and principles in the Charities SORP;
- make judgments and accounting estimates that are reasonable and prudent;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charitable company's transactions and disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In preparing this report, the Trustees have taken advantage of the small companies' exemptions provided by section 415A of the Companies Act 2006.

This report was approved by the Trustees on 26<sup>th</sup> November 2020 and signed on their behalf by:

  
.....  
Vanessa Barrett, Chair



**INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF**  
**HEALTHWATCH SHROPSHIRE**

**Independent examiner's report to the trustees of Healthwatch Shropshire ('the Company')**

I report to the charity trustees on my examination of the accounts of the Company for the year ended 31 March 2020.

**Responsibilities and basis of report**

As the charity's trustees of the Company (and also its directors for the purposes of company law) you are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

Having satisfied myself that the accounts of the Company are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of your charity's accounts as carried out under section 145 of the Charities Act 2011 ('the 2011 Act'). In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5) (b) of the 2011 Act.

**Independent examiner's statement**

I have completed my examination. I confirm that no matters have come to my attention in connection with the examination giving me cause to believe:

1. accounting records were not kept in respect of the Company as required by section 386 of the 2006 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a true and fair view which is not a matter considered as part of an independent examination; or
4. the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities (applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)).

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

*C Moelwyn-Williams*

C Moelwyn-Williams  
BSc FCA  
TCA (Shrewsbury) LLP  
4 Claremont Bank  
Shrewsbury  
Shropshire  
SY1 1RW

Date: *1st December 2020*

## HEALTHWATCH SHROPSHIRE

### STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 MARCH 2020

	Notes	Unrestricted funds £	Restricted funds £	2020 Total funds £	2019 Total funds £
<b>INCOME AND ENDOWMENTS FROM</b>					
Donations and legacies		-	-	-	40
<b>Charitable activities</b>	2				
General funds		161,850	-	161,850	203,499
		<hr/>	<hr/>	<hr/>	<hr/>
<b>Total</b>		161,850	-	161,850	203,539
<b>EXPENDITURE ON</b>					
<b>Charitable activities</b>	3				
General funds		157,087	9,939	167,026	185,553
		<hr/>	<hr/>	<hr/>	<hr/>
<b>NET INCOME/(EXPENDITURE)</b>		4,763	(9,939)	(5,176)	17,986
<b>RECONCILIATION OF FUNDS</b>					
Total funds brought forward		49,402	13,712	63,114	45,128
		<hr/>	<hr/>	<hr/>	<hr/>
<b>TOTAL FUNDS CARRIED FORWARD</b>		<u>54,165</u>	<u>3,773</u>	<u>57,938</u>	<u>63,114</u>

#### **CONTINUING OPERATIONS**

All income and expenditure has arisen from continuing activities.

**HEALTHWATCH SHROPSHIRE (REGISTERED NUMBER: 08415314)**

**STATEMENT OF FINANCIAL POSITION**  
**31 MARCH 2020**

	Notes	2020 £	2019 £
<b>CURRENT ASSETS</b>			
Debtors	8	2,280	25,835
Cash at bank and in hand		<u>62,314</u>	<u>54,407</u>
		64,594	80,242
<b>CREDITORS</b>			
Amounts falling due within one year	9	(6,656)	(17,128)
		<u>57,938</u>	<u>63,114</u>
<b>NET CURRENT ASSETS</b>			
		<u>57,938</u>	<u>63,114</u>
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>			
		<u>57,938</u>	<u>63,114</u>
<b>NET ASSETS</b>			
		<u>57,938</u>	<u>63,114</u>
<b>FUNDS</b>	12		
Unrestricted funds		54,165	49,402
Restricted funds		<u>3,773</u>	<u>13,712</u>
<b>TOTAL FUNDS</b>		<u>57,938</u>	<u>63,114</u>

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 March 2020.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 March 2020 in accordance with Section 476 of the Companies Act 2006.

The trustees acknowledge their responsibilities for

- (a) ensuring that the charitable company keeps accounting records that comply with Sections 386 and 387 of the Companies Act 2006 and
- (b) preparing financial statements which give a true and fair view of the state of affairs of the charitable company as at the end of each financial year and of its surplus or deficit for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the charitable company.

These financial statements have been prepared in accordance with the provisions applicable to charitable companies subject to the small companies regime.

The financial statements were approved by the Board of Trustees and authorised for issue on 26 November 2020 and were signed on its behalf by:



Vanessa Barrett, Trustee



## **HEALTHWATCH SHROPSHIRE**

### **NOTES TO THE FINANCIAL STATEMENTS** **FOR THE YEAR ENDED 31 MARCH 2020**

#### **1. ACCOUNTING POLICIES**

##### **Basis of preparing the financial statements**

The financial statements of the charitable company, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) 'Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)', Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' and the Companies Act 2006. The financial statements have been prepared under the historical cost convention.

##### **Financial reporting standard 102 - reduced disclosure exemptions**

The charitable company has taken advantage of the following disclosure exemptions in preparing these financial statements, as permitted by FRS 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland':

- the requirements of Section 7 Statement of Cash Flows;
- the requirement of Section 3 Financial Statement Presentation paragraph 3.17(d);
- the requirements of Section 11 Financial Instruments paragraphs 11.41(b), 11.41(c), 11.41(e), 11.41(f), 11.42, 11.44, 11.45, 11.47, 11.48(a)(iii), 11.48(a)(iv), 11.48(b) and 11.48(c);
- the requirements of Section 12 Other Financial Instruments paragraphs 12.26, 12.27, 12.29(a), 12.29(b) and 12.29A;
- the requirement of Section 33 Related Party Disclosures paragraph 33.7.

##### **Income**

All income is recognised in the Statement of Financial Activities once the charity has entitlement to the funds, it is probable that the income will be received and the amount can be measured reliably.

##### **Expenditure**

Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

##### **Taxation**

The charity is exempt from corporation tax on its charitable activities.

##### **Fund accounting**

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

##### **Pension costs and other post-retirement benefits**

The charitable company operates a defined contribution pension scheme. Contributions payable to the charitable company's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

# HEALTHWATCH SHROPSHIRE

## NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 MARCH 2020

### 2. INCOME FROM CHARITABLE ACTIVITIES

	2020 General funds £	2019 Total activities £
Charitable activities	161,850	163,250
Public sector grants	-	40,249
	<u>161,850</u>	<u>203,499</u>

### 3. CHARITABLE ACTIVITIES COSTS

	Direct Costs (see note 4) £	Support costs £	Totals £
General funds	<u>145,689</u>	<u>21,337</u>	<u>167,026</u>

### 4. DIRECT COSTS OF CHARITABLE ACTIVITIES

	2020 £	2019 £
Staff costs	107,582	102,010
Insurance	2,935	2,204
Telephone & broadband	1,122	1,131
Postage	615	577
Marketing & publicity	513	2,662
Sundries	1,057	6,269
Travel & subsistence	2,483	2,827
Volunteer & Trustee expenses	2,332	3,854
Recruitment (including DBS)	72	1,353
Training & development	616	186
Consultancy	7,697	14,731
Publications/Subscriptions	315	316
Venue hire & events	2,995	9,757
Photocopying/internal printing	827	684
Office stationery	106	232
Equipment	722	816
Website & software	2,681	1,324
Office rent	7,095	7,095
Premises costs	<u>3,924</u>	<u>3,738</u>
	<u>145,689</u>	<u>161,766</u>

### 5. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 March 2020 nor for the year ended 31 March 2019.

# HEALTHWATCH SHROPSHIRE

## NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 MARCH 2020

### 5. TRUSTEES' REMUNERATION AND BENEFITS - continued

#### Trustees' expenses

During the year 7 Trustees (2019: 8) received reimbursement of expenses amounting to £1,215 (2019: £3,382).

### 6. STAFF COSTS

	2020 £	2019 £
Wages and salaries	99,548	94,416
Social security costs	3,567	3,632
Other pension costs	4,467	3,962
	<u>107,582</u>	<u>102,010</u>

The average monthly number of employees during the year was as follows:

	2020 <u>6</u>	2019 <u>5</u>
General		

No employee received remuneration amounting to more than £60,000 in either year.

### 7. COMPARATIVES FOR THE STATEMENT OF FINANCIAL ACTIVITIES

	Unrestricted funds £	Restricted funds £	Total funds £
<b>INCOME AND ENDOWMENTS FROM</b>			
Donations and legacies	40	-	40
<b>Charitable activities</b>			
General funds	163,457	40,042	203,499
	<u>163,497</u>	<u>40,042</u>	<u>203,539</u>
<b>Total</b>	163,497	40,042	203,539
<b>EXPENDITURE ON</b>			
<b>Charitable activities</b>			
General funds	159,223	26,330	185,553
	<u>159,223</u>	<u>26,330</u>	<u>185,553</u>
<b>NET INCOME</b>	4,274	13,712	17,986
<b>RECONCILIATION OF FUNDS</b>			
Total funds brought forward	45,128	-	45,128
	<u>45,128</u>	<u>-</u>	<u>45,128</u>
<b>TOTAL FUNDS CARRIED FORWARD</b>	<u>49,402</u>	<u>13,712</u>	<u>63,114</u>



# **HEALTHWATCH SHROPSHIRE**

## **NOTES TO THE FINANCIAL STATEMENTS - continued** **FOR THE YEAR ENDED 31 MARCH 2020**

### **8. DEBTORS**

	2020 £	2019 £
Amounts falling due within one year:		
Trade debtors	-	23,555
Prepayments	<u>1,280</u>	<u>1,280</u>
	<u>1,280</u>	<u>24,835</u>
Amounts falling due after more than one year:		
Other debtors	<u>1,000</u>	<u>1,000</u>
Aggregate amounts	<u>2,280</u>	<u>25,835</u>

### **9. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR**

	2020 £	2019 £
Trade creditors	3,266	11,538
Social security and other taxes	1,277	3,197
Accruals and deferred income	<u>2,113</u>	<u>2,393</u>
	<u>6,656</u>	<u>17,128</u>

### **10. LEASING AGREEMENTS**

Minimum lease payments under non-cancellable operating leases fall due as follows:

	2020 £	2019 £
Within one year	760	7,095
Between one and five years	<u>448</u>	<u>21,285</u>
	<u>1,208</u>	<u>28,380</u>

### **11. ANALYSIS OF NET ASSETS BETWEEN FUNDS**

	Unrestricted funds £	Restricted funds £	2020 Total funds £	2019 Total funds £
Current assets	60,821	3,773	64,594	80,242
Current liabilities	<u>(6,656)</u>	<u>-</u>	<u>(6,656)</u>	<u>(17,128)</u>
	<u>54,165</u>	<u>3,773</u>	<u>57,938</u>	<u>63,114</u>

# HEALTHWATCH SHROPSHIRE

## NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 MARCH 2020

### 12. MOVEMENT IN FUNDS

	At 1.4.19 £	Net movement in funds £	At 31.3.20 £
<b>Unrestricted funds</b>			
General fund	49,402	4,763	54,165
<b>Restricted funds</b>			
National Health Service England			
Carers Voice Project	2,800	(2,800)	-
Telford & Wrekin CCG Maternity			
Voices Partnership	1,200	(573)	627
Help2Change Shropshire Healthy Living	5,400	(2,254)	3,146
Healthwatch England Sustainability & Transformation Partnership Long Term Plan Engagement	4,312	(4,312)	-
	<u>13,712</u>	<u>(9,939)</u>	<u>3,773</u>
<b>TOTAL FUNDS</b>	<u>63,114</u>	<u>(5,176)</u>	<u>57,938</u>

Net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
<b>Unrestricted funds</b>			
General fund	161,850	(157,087)	4,763
<b>Restricted funds</b>			
National Health Service England			
Carers Voice Project	-	(2,800)	(2,800)
Telford & Wrekin CCG Maternity			
Voices Partnership	-	(573)	(573)
Help2Change Shropshire Healthy Living	-	(2,254)	(2,254)
Healthwatch England Sustainability & Transformation Partnership Long Term Plan Engagement	-	(4,312)	(4,312)
	<u>-</u>	<u>(9,939)</u>	<u>(9,939)</u>
<b>TOTAL FUNDS</b>	<u>161,850</u>	<u>(167,026)</u>	<u>(5,176)</u>



# **HEALTHWATCH SHROPSHIRE**

## **NOTES TO THE FINANCIAL STATEMENTS - continued** **FOR THE YEAR ENDED 31 MARCH 2020**

### **12. MOVEMENT IN FUNDS - continued**

#### **Comparatives for movement in funds**

	At 1.4.18 £	Net movement in funds £	Transfers between funds £	At 31.3.19 £
<b>Unrestricted funds</b>				
General fund	38,754	10,420	228	49,402
Designated IT Fund	<u>6,374</u>	<u>(6,146)</u>	<u>(228)</u>	<u>-</u>
	45,128	4,274	-	49,402
<b>Restricted funds</b>				
National Health Service England				
Carers Voice Project	-	2,800	-	2,800
Telford & Wrekin CCG Maternity				
Voices Partnership	-	1,200	-	1,200
Help2Change Shropshire Healthy				
Living	-	5,400	-	5,400
Healthwatch England Sustainability &				
Transformation Partnership Long Term				
Plan Engagement	<u>-</u>	<u>4,312</u>	<u>-</u>	<u>4,312</u>
	<u>-</u>	<u>13,712</u>	<u>-</u>	<u>13,712</u>
<b>TOTAL FUNDS</b>	<u>45,128</u>	<u>17,986</u>	<u>-</u>	<u>63,114</u>

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
<b>Unrestricted funds</b>			
General fund	163,497	(153,077)	10,420
Designated IT Fund	<u>-</u>	<u>(6,146)</u>	<u>(6,146)</u>
	163,497	(159,223)	4,274
<b>Restricted funds</b>			
National Health Service England			
Carers Voice Project	3,300	(500)	2,800
Telford & Wrekin CCG Maternity			
Voices Partnership	11,642	(10,442)	1,200
Help2Change Shropshire Healthy			
Living	15,000	(9,600)	5,400
Healthwatch England Maternity &			
Mental Health Engagement	5,000	(5,000)	-
Healthwatch England Sustainability &			
Transformation Partnership Long Term			
Plan Engagement	<u>5,100</u>	<u>(788)</u>	<u>4,312</u>
	<u>40,042</u>	<u>(26,330)</u>	<u>13,712</u>
<b>TOTAL FUNDS</b>	<u>203,539</u>	<u>(185,553)</u>	<u>17,986</u>

#### **Designated Funds**

The IT Fund was for the costs involved in setting up the new IT system in the office.

## **HEALTHWATCH SHROPSHIRE**

### **NOTES TO THE FINANCIAL STATEMENTS - continued** **FOR THE YEAR ENDED 31 MARCH 2020**

#### **12. MOVEMENT IN FUNDS - continued**

##### **Restricted Funds**

National Health Service England Carers Voice Project - This fund is to support the delivery of the findings of the Carer's Voice Project; supporting the activities of both Shropshire Council and Telford & Wrekin Council.

Telford & Wrekin CCG Maternity Voices Partnership - This fund is to support the delivery of the Maternity Voices Partnership initiative in Shropshire, Telford & Wrekin.

Help2Change Shropshire Healthy Living - This fund is for engagement and research with members of the Shropshire public and users of health and care services, e.g. around barriers to accessing Social Prescribing.

Healthwatch England Maternity & Mental Health Engagement - The fund is for research to understand expectations, needs and ideas for mental health and wellbeing before, during and after pregnancy in Shropshire. This fund was fully spent in the prior year.

Healthwatch England Sustainability & Transformation Partnership Long Term Plan Engagement - This fund is for public engagement to find out what the people of Shropshire, Telford & Wrekin want from NHS services following the publication of the NHS Long Term Plan. Healthwatch Shropshire is the co-ordinating Healthwatch and will produce the report for the Shropshire, Telford & Wrekin STP so that our findings can inform the local STP long term plan to be produced Autumn 2019.

#### **13. EMPLOYEE BENEFIT OBLIGATIONS**

During the year end charitable company paid pension contributions of £4,467 (2019: £3,962). There were contributions payable at the year end of £959 (2019: £1,593).

#### **14. RELATED PARTY DISCLOSURES**

There were no related party transactions for the year ended 31 March 2020.