

Registered number: 08415314
Charity number: 1151343

HEALTHWATCH SHROPSHIRE
UNAUDITED
TRUSTEES' REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019


Whittingham Riddell
chartered accountants

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

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REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITABLE COMPANY, ITS TRUSTEES AND ADVISERS
FOR THE YEAR ENDED 31 MARCH 2019

Trustees (Board Members)

Vanessa Barrett, Chair
David Beechey
Michael Terrence Harte, Deputy Chair
Daphne Lewis, Chair (resigned 30 June 2018)
Steve Price
Angela Saganowska
Frederick David Voysey
Denise Walker (appointed 28 February 2019)
Robert Douglas Welch
Anne Wignall

Company registered number

08415314

Charity registered number

1151343

Registered office

4 The Creative Quarter
Shrewsbury Business Park
Shrewsbury
Shropshire
SY2 6LG

Company secretary

Ms S Homden

Chief officer

Miss LR Cawley

Accountants

Whittingham Riddell LLP
Chartered Accountants
Belmont House
Shrewsbury Business Park
Shrewsbury
Shropshire
SY2 6LG

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REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITABLE COMPANY, ITS TRUSTEES AND ADVISERS
FOR THE YEAR ENDED 31 MARCH 2019

Advisers (continued)

Bankers

Natwest
London
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Contact details

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Fax: 01743 342179
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Website: www.healthwatchshropshire.co.uk
Twitter: @HWShropshire
Facebook: <http://www.facebook.com/HealthwatchShropshire>
Instagram: <https://www.instagram.com/healthwatchshropshire>

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CHAIR'S STATEMENT AND MESSAGE FROM THE CHIEF OFFICER
FOR THE YEAR ENDED 31 MARCH 2019

Chair's Statement, Vanessa Barrett

I was delighted and privileged to be elected Chair of Healthwatch Shropshire in July 2018, having been a Trustee since it was established five years ago. This year has seen many changes. It has not been easy to adjust to a 25% reduction in funding for 2018/19, but we made the decisions to move to smaller offices (within the same building) and to close the office on Fridays. These reductions made a significant impact on all members of our small staff team, and we feel very fortunate in their loyalty, professionalism and commitment during the several months of change, culminating in the retirement of our much-respected, long-serving Chief Officer Jane Randall-Smith.

Despite these adjustments, through our staff members, Board Trustees and volunteers, Healthwatch Shropshire (acting on behalf of local people) has continued to attend all the relevant boards, committees and events, and has been able to collect and exchange views and information that can influence decisions which affect the services provided across Shropshire. One important milestone in the local health economy was the decision to support the preferred option for the re-configuration of acute hospital services (Future Fit), after an extensive Public Consultation. HWS has contributed to every element of this major programme over the last five years and throughout 2018 we continued to attend as many of the public consultation events as possible, to ensure people had the information they needed to respond to the consultation and express their views fully.

We have used the latter part of the year to consolidate and are now in an excellent position to move forward in 2019, seeking more opportunities to serve the people of Shropshire and work to ensure they receive the optimum possible health and social care.



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CHAIR'S STATEMENT AND MESSAGE FROM THE CHIEF OFFICER
FOR THE YEAR ENDED 31 MARCH 2019

Message from the Chief Officer, Lynn Cawley

What an eventful year! I started the year as Enter & View Officer and Independent Health Complaints Advocacy Coordinator for Healthwatch Shropshire continuing to work alongside Jane Randall-Smith as Chief Officer. Following her retirement, I became Chief Officer in November 2018 and would like to thank the team and Board for their support and help in making this transition as smooth as possible. Taking on this post has only increased my respect and admiration for Jane and all that she achieved during the first five years. I would like to thank her for her encouragement and support over the years and her hard work in ensuring that the contribution of Healthwatch Shropshire is valued and respected across the health and social care system.



Lynn Cawley, Philip Dunne, Sir Robert Francis

One of my first acts as Chief Officer was to accept an invitation from Healthwatch England to attend their Parliamentary Reception at The Houses of Parliament. There I met Imelda Redmond OBE (National Director), Sir Robert Francis QC (Chair), Philip Dunne (MP for Ludlow) and other Chief Officers. This led to me being invited to speak to all the Shropshire MPs about the role of Healthwatch, our Independent Health Complaints Advocacy Service and the challenges people face accessing equitable services in our rural county.

This year Healthwatch Shropshire have started to see the impact of the reduction in income from April 2018, in particular as it meant we became a four-day service, operating Monday to Thursday. Changes in staffing this year had meant that we were also understaffed during the latter part of the year. Despite this we have continued to work to meet our statutory priorities and our own key priorities for the year.

We go into 2019-20 with a clear Forward Plan. We are also working with Healthwatch Telford & Wrekin and the Shropshire and Telford Sustainability and Transformation Partnership to complete a major piece of work for Healthwatch England and NHS England to find out people's views on the NHS Long Term Plan and local plans for health and social care services over the next five years. Work like this gives us another opportunity to engage with the people of Shropshire and make sure your voice is heard at this crucial time of service transformation. I would like to take this opportunity to say "Thank you" to everyone who has taken the time to share their views and ideas with us this year. We will continue to represent your voice at every opportunity.

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TRUSTEES' REPORT
FOR THE YEAR ENDED 31 MARCH 2019

The Board Members (who are trustees of the charity and also directors of the company for the purposes of Companies Act) present their annual report together with the financial statements of Healthwatch Shropshire (the company) for the period from 1 April 2018 to 31 March 2019. 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 January 2015) as amended by Update Bulletin 1 (effective 1 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 Director's Report) Regulations 2013 is not required.

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 run 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 end of March 2023.

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, Healthwatch Shropshire 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.

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

Structure, governance and management

a. Constitution

Healthwatch Shropshire 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 guarantee 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. One new Board Member was formally appointed in February 2019. 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.

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

d. Organisational structure and decision making

The maximum number of Board Members is 12. At the end of the year in March 2019 the Board comprised 9 members:

Vanessa Barrett
David Beechey
Michael Terrence Harte
Steve Price
Angela Saganowska
Frederick David Voysey
Denise Walker
Robert Douglas Welch
Anne Wignall

The staff complement at the end of the year was five, all part time since April 2018 when HWS became a four day service (Monday to Thursday). The list below shows the staff changes that took place during 2018-19 which had a significant impact on capacity during periods of recruitment.

Jane Randall-Smith	Chief Officer	Retired 11/10/18
Rachel Allen	Chief Officer	From 05/09/18 to 07/11/18
Lynn Cawley	Chief Officer	From 01/11/18
	Enter & View Officer / IHCAS Coordinator	To 31/10/18
<i>Vacant</i>	<i>Enter & View Officer / IHCAS Coordinator</i>	From 01/11/18
Steph Dunbar	Volunteer Officer and Secretary to the Board	
Adelle Wilkinson	Community Engagement Officer	To 31/10/18
Jayne Morris	Community Engagement & Communications Officer	From 11/12/18
Patricia McInnes	Administrative Officer	
Brian Rapson	Information Officer	

The staff team is small but reflects the funding that is available.

In addition, Healthwatch Shropshire (HWS) has a team of volunteers to support its work programme. Through the HWS volunteer role, individuals can contribute in many ways, including conducting surveys, supporting community engagement, representing HWS at a wide range of meetings and report reading. At the end of March 2019 HWS had 13 volunteers (23 last year). HWS attributes this reduction in numbers to several factors including the reduction in the number of people who have the time and availability to volunteer on a regular basis due to the need to work and family commitments and the reduction in capacity of HWS as it became a four-day service. Also, more and more organisations are becoming reliant on volunteers so there is more choice of opportunity for volunteers and more competition among recruiters.

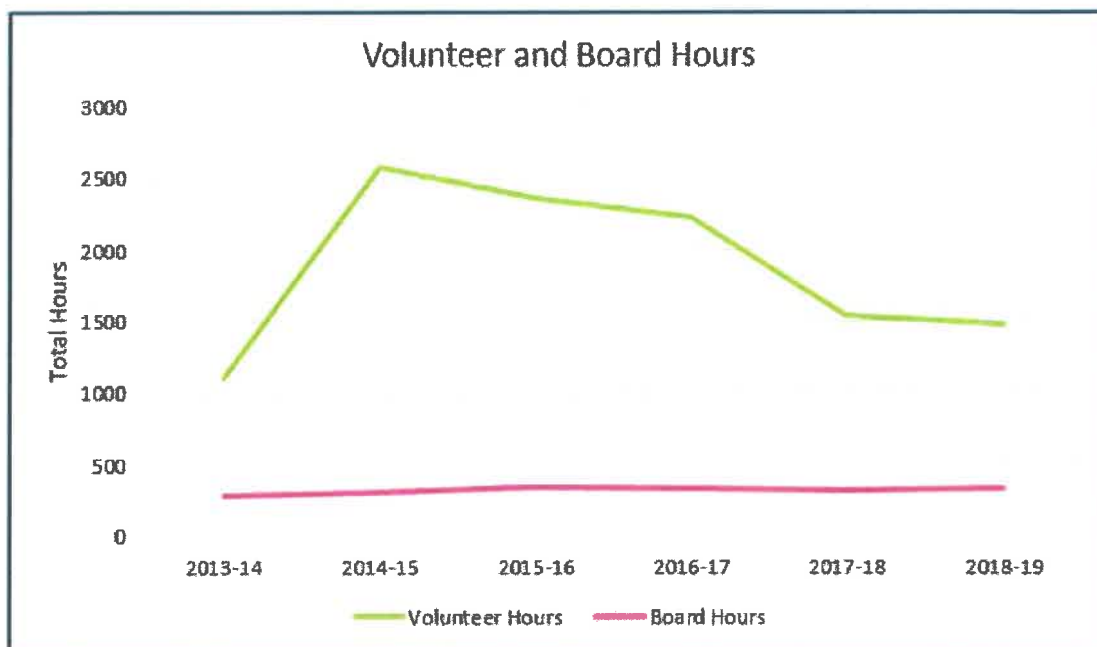
Healthwatch Shropshire formalised volunteer roles include:

- Enter & View Authorised Representative (9) – conduct and report on Enter & View visits
- Community Support Volunteer (2) - help to raise awareness of HWS in their communities throughout Shropshire
- Engagement Support Volunteer (2) - help with HWS stands at locations across the county

More information is given below under Achievements and Performance but in 2018-19, a total of 1,807 hours of volunteer time (1,855 hours last year) was given as a contribution to HWS. Of these, 332 hours reflect the hours contributed by Board Members in their governance role.

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TRUSTEES' REPORT (continued)
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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 2019, HWS had 69 Organisation Associate Members (67 last year) and 217 Individual Associate Members (216 last year).

Healthwatch Shropshire Twitter followers and Facebook page likes continue to increase and at the end of March 2019 there were:

- Twitter: over 2015 (1875 last year)
- Facebook: 213 (117 last year)

This year we have worked to develop our presence on Instagram going from 144 followers in Quarter 1 to 170 at the end of Quarter 4.

Our governance

Board Members are lay people and volunteers. Healthwatch Shropshire (HWS) has regularly held Board meetings in public during 2018-19 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

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TRUSTEES' REPORT (continued)
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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; it meets twice a year. 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.

During the last quarter of the year we reviewed policies and the Risk Management Matrix.

How we make relevant decisions

A Decision-Making policy is published on the web site, www.healthwatchshropshire.co.uk. The relevant decisions are included in Board meeting minutes and published on the web site.

- **How we undertake our activities:**
The feedback received on local 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. The findings of Enter & View visits (conducted by volunteers) also help to inform the forward work programme.
- **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 informs decisions about which services to focus on and where to plan engagement and Enter and View. "Hot Topics" enable Healthwatch Shropshire to encourage feedback on a particular topic. The additional feedback informs future activities.
- **Whether to request information:**
Feedback received from members of the public has informed decisions about activities which includes whether to request additional information from providers and commissioners. These decisions are taken by the Board Committees which include volunteers.
- **Whether to make a report or a recommendation:**
Feedback received from members of the public has informed decisions about activities which includes whether to 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 the Local Provider Information Sharing Meeting that takes place every two months, regular bi-monthly meetings with Shropshire Council, quarterly meetings with the CQC and regular meetings with the 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 regularly with the Health Overview and Scrutiny Committee, the Young People's Scrutiny Committee and the Health and Wellbeing Board in order to triangulate intelligence and ensure that the work programmes do not duplicate.

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TRUSTEES' REPORT (continued)
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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, Better Care Fund working groups and voluntary sector mental health forums. 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. Future Fit, Local Maternity System Review).

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

<http://healthwatchshropshire.co.uk/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..

Objectives and Activities

a. Policies and objectives

Healthwatch Shropshire has continued to approve and review the key policies, and supporting procedures, to underpin the delivery of its work programmes. Key policies are available on the 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 2018-19 were agreed as:

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1. Young People's Emotional Health and Wellbeing Service – to better understand the experiences of young people using (or not using) these services
2. To build on initial work on Social care, particularly domiciliary care, discharge and complaints – to encourage greater feedback on social care services
3. 'Communication' including health literacy, awareness/understanding of services covering both social care and health – working with the local health economy to ensure that communications are readily understood
4. Involvement in local transformation programmes and consultations – continuing to engage at all levels with the NHS Future Fit programme consultation, participating in the Local Maternity System Review and chairing the Maternity Voices Partnership
5. Engage with the local initiatives on prevention including social prescribing – undertaking public engagement for Healthy Lives (Health & Wellbeing Board) involving "the quieter voice" to identify barriers to accessing social prescribing

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. Strategies 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 easily access the services HWS provides
- 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
- 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

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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.

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 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 in the fortunate position of being able to award grants for research projects undertaken by the voluntary and community sector in Shropshire. Each year the theme of the grant and its accompanying conditions varied slightly but it always related to people's experiences of health and social care services in the county. A panel, with individuals representing a range of Shropshire organisations, reviewed the proposals received. Funded projects had to meet the criteria of the grant scheme and the aims of Healthwatch Shropshire. 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 draft report from the Patient and Carer Experience: Research (PACE-R) titled 'Lost in Space: Shropshire Rural Mental Health in an Age of Austerity'. This will be published 2019-20.

Achievements and performance

The following sections highlight the achievements of Healthwatch Shropshire in 2018-19 against the statutory activities for Healthwatch in the context of Shropshire and also reports on the Independent Complaints Advocacy Service.

During this year Healthwatch Shropshire became a four-day service and Jane Randall-Smith retired as Chief Officer. Her departure and that of the Engagement Officer in the third quarter required the team to work more closely to achieve our objectives and meet our statutory duties while recruiting. Lynn Cawley, previously the Enter & View Officer / IHCAS Coordinator stepped up as Chief Officer in November 2018 and Jayne Morris joined the team as Community Engagement and Communications Officer in December 2018. The team remained understaffed until the end of March 2019 when recruitment started for a new Enter & View Officer / IHCAS Coordinator.

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

- How we've made a difference
- Helping you find the answers

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

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.

b. Review of activities

What are the statutory activities of Healthwatch Shropshire?

1. Promoting and supporting the involvement of local people in commissioning, provision and scrutiny of local care services
2. 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
3. Obtaining the views of local people regarding their need for, and experiences of, local care services and importantly to make these views known
4. 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.
5. Providing advice and information about access to local care services so choice can be made about local care services.
6. 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.
7. 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.
8. Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.

How we've made a difference

Listening to people

Statutory Activity 3: Obtaining the views of local people regarding their need for, and experiences of, local care services and importantly to make these views known

Healthwatch Shropshire continues to work hard to ensure that local people's needs and experiences of health and social care services in Shropshire are heard and that the engagement is as far reaching as possible. Approaches we have used to obtain people's views and make them known include:

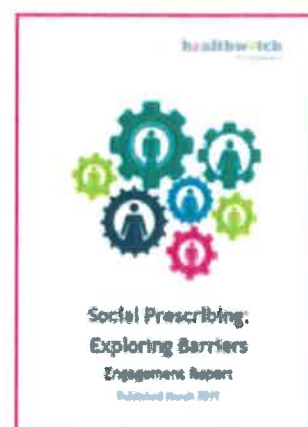
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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

1. Community Engagement:

- Attending local groups, forums and community events across the county, e.g. Rotary Clubs, Women's Institutes, See & Hear Exhibition
- The total number of community engagement events we have participated in during 2018-19 is 118 (130 last year). This reduction can be attributed to the fact we did not have a Community Engagement Officer during November and December 2018.

Social Prescribing: Exploring Barriers Engagement Report March 2019 - The Healthy Lives Programme combines the key health prevention actions of Shropshire Council, Shropshire CCG, the Voluntary Sector and NHS providers to take a collective approach to reducing demand on services and improving health and wellbeing. Social prescribing is designed to support people with a wide range of social, emotional or practical needs. In 2018 Healthwatch Shropshire were asked to engage with the public, in particular harder to reach groups including working people and young men, to understand the barriers that people might face to accessing social prescribing and produce a report. [Key priority 5]



Our findings were shared with the Healthy Lives Steering Group which is part of the Health and Wellbeing Board. The NHS England Facilitator of the Midlands Social Prescribing Network has asked that the report be added to the NHS England Portal saying:

“We are very pleased with the report that Healthwatch have produced as a result of the work they have done, (which isn’t just the usual questionnaire methodology or even focus groups) and their approach has been very flexible and down to earth in terms of reaching out to people.”

The Service Manager for Community Partnerships at Shropshire Council said:

“I know that the feedback within this report is going to be so useful in a number of ways - not just in relation to Social Prescribing. Feedback like this about life in rural areas is gold dust.”

2. Healthwatch Shropshire events:

- Arranging our own events which are by invitation or drop-in and regular engagement, e.g. Focus groups to gather views on a specific topic such as Maternity Mental Health, regular stands at the Royal Shrewsbury Hospital and the Robert Jones and Agnes Hunt Orthopaedic Hospital, Shrewsbury Market.

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TRUSTEES' REPORT (continued)
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3. Networking:

- Participating in local networks and partnership boards to share and gather experiences but also to influence decision making based on feedback and experiences and to represent the people of Shropshire, e.g. Dementia Action Alliance, Community Connectors
- Offering to provide feedback on documents (e.g. posters, leaflets) giving information to the public to ensure they are clear, easy to read and understand. [Key priority 3]

4. Tell Us:

- Healthwatch Shropshire has a variety of ways local people can tell us of their needs for and experiences of health and social care services, including telephone, email, online form on our website, social media, 'Tell Us' leaflet (with a FREEPOST option), community engagement events (see above) and by partnership working with the voluntary and community sector.

5. Enter & View:

- Speaking to patients or service users and their families / carers about their experiences during Enter & View visits allows us to speak to people who are vulnerable or disadvantaged, e.g. due to their age, disability or caring responsibilities.
- Each visit also provides an opportunity to speak to staff.

For more information on Enter & View, see p.19

6. Hot Topics:

- Healthwatch Shropshire introduced the Hot Topic approach in order to stimulate feedback on particular issues. The communications plan for each Hot Topic is supported by an engagement plan and a report on the feedback, including recommendations where possible, is published on our website.

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TRUSTEES' REPORT (continued)
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Earwax Removal Services in Shropshire - Hot Topic May 2018

Healthwatch Shropshire were approached by Shropshire Rural Communities Charity (RCC), who had been receiving feedback from people attending their sight and hearing loss groups. People reported that they were finding it increasingly difficult to access earwax removal services, even though they had previously received treatment for this. We had received a few comments on this area and so decided to look into Audiology and Hearing Loss services further to understand what the issues were for Shropshire patients and if there were common themes across Shropshire, and also understand the impact on Shropshire Patients.



The feedback we received confirmed that patients were experiencing difficulties accessing earwax removal services in primary care but that these were not uniform across the county. We followed this up by contacting all the GP practices in Shropshire to try to establish the equity of provision.

We shared our findings with Shropshire Clinical Commissioning Group and were told the detail of their current contract with GP practices and that:

'The inequity suggested from this report will be explored as part of a wider review of audiology services (across both primary and secondary care).'

7. Research:

- Prior to 2018, Healthwatch Shropshire had been in a position to fund research projects to enable us to receive feedback from hard to reach people, including the remote and isolated. One such project was completed this year and the report called 'Lost in Space: Shropshire Rural Mental Health in an Age of Austerity', focusing on the needs of rurally isolated people with mental health challenges, will be published April 2019.

Midlands Partnership Foundation Trust response to 'Lost In Space: Shropshire Rural Mental Health in an Age of Austerity':

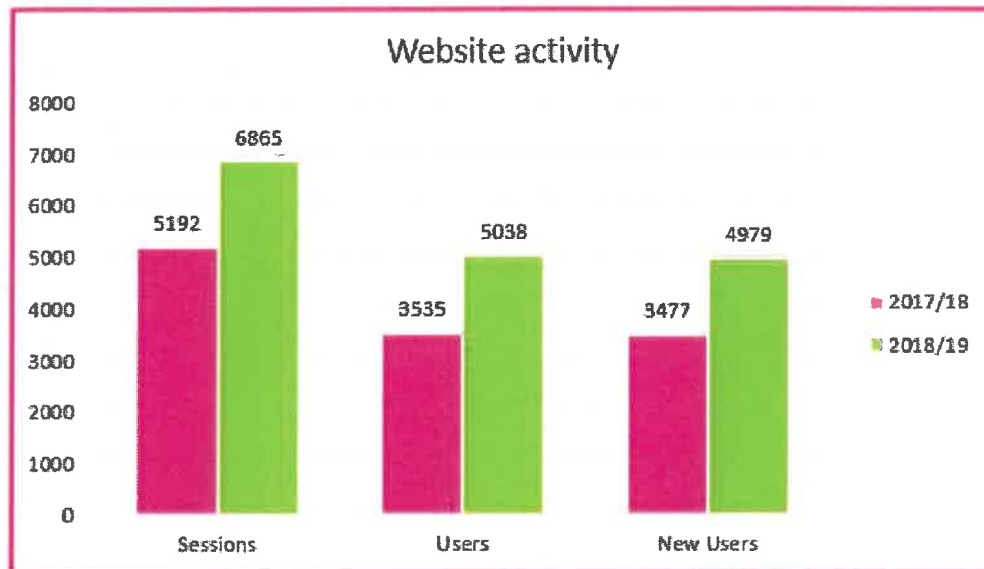
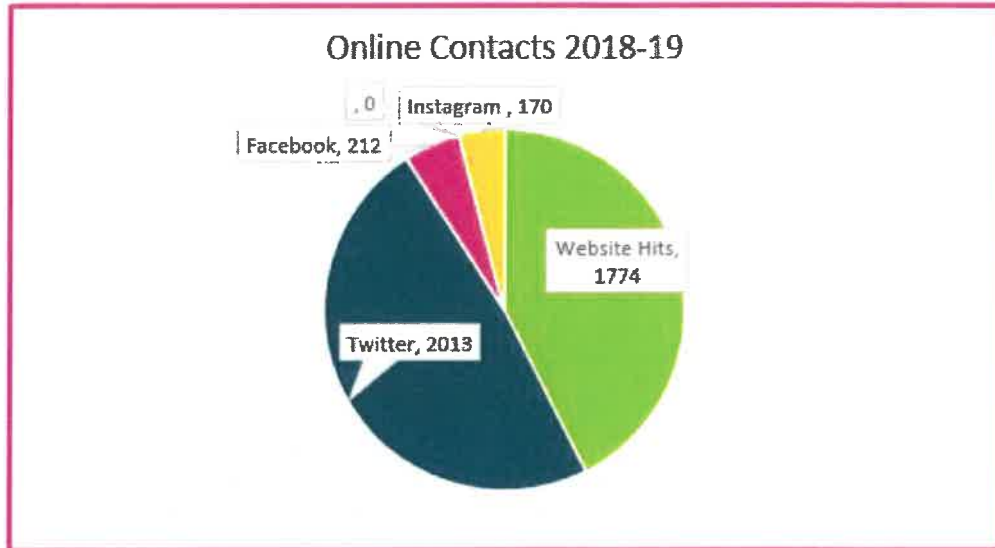
"This is a useful paper that provides information on rural complexity and it is encouraging to see the focus on rural mental health"

8. Profile raising:

- Healthwatch Shropshire makes use of local media, sending out press releases to local publications and contributing to local interest items on Radio Shropshire.
- We have expanded our use of social media this year by adding an Instagram account and already have 170 followers.

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019



- The 'Tell Us' leaflets and other literature are widely distributed around the county including in libraries, hospitals, GP surgeries, dental practices and community facilities.

9. Independent Health Complaints Advocacy Service

- Callers into the IHCA service are asked if they are happy for Healthwatch Shropshire to record their experience as a comment and include it in our intelligence. Some people decide that this is a more appropriate way to have their voice heard and do not proceed with a formal complaint.

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TRUSTEES' REPORT (continued)
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“One client told me that having me listen to him and having the chance to tell his story was enough.” - IHCAS Advocate

Healthwatch Shropshire has continued to be fully engaged with the local NHS transformation programme, NHS Future Fit and the work of the local Sustainability and Transformation Partnership (STP) [Key priority 4]. Healthwatch Shropshire has contributed to the development of the engagement programmes and supported a wide range of engagement events across the county on Future Fit. Board Members and staff represent Healthwatch Shropshire on a range of work streams to ensure the public's voice is heard.

One of the work streams of the STP is the Local Maternity system (LMS) and Healthwatch Shropshire Chaired the Maternity Voices Partnership until November 2018 following the reduction in staff capacity). Going forward the aim is for a service user to Chair this group and we will continue to encourage this. Healthwatch Shropshire continued to play an active role in the LMS, including discussions around the major review of local midwifery led units. We shared feedback with the CCG and supported the co-production programme by attending workshops and highlighting the need for equality of access across the county.

Towards the end of the year, the focus of our engagement was directed toward Maternity Mental Health Services in Shropshire at the request of Healthwatch England (see p.26). For this piece of work we spoke to 348 people. We also started to plan another piece of work for Healthwatch England to gather people's views on the future of health and social care services Shropshire to inform the Shropshire and Telford Sustainability and Transformation Partnership Long-Term Plan (see p.23). This intensive engagement followed a period of staff change where there had been a reduction in direct face-to-face engagement. These factors are reflected in the overall number of comments received this year about all services. Healthwatch Shropshire has heard views from fewer local people, with 547 comments being received this year (1030 last year).

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.

Healthwatch Shropshire has information sharing protocols in place with local service providers and commissioners in order to share individual (anonymised) comments in addition to collated intelligence. Regular meetings take place with these organisations (e.g. Hospital Trusts, Shropshire Clinical Commissioning Group, Shropshire Council) to discuss the concerns people have shared with us and highlight good practice.

Improving services

Statutory Activity 1: Promoting and supporting the involvement of local people in commissioning, provision and scrutiny of local care services

Statutory Activity 2: 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

Healthwatch Shropshire works with a team of specially trained volunteers (Authorised Representatives) to plan, deliver and report on Enter & View visits. These volunteers do not need to have any prior experience of working in or using health and social care services. They are asked to approach each visit with an open mind and ask themselves 'What do I think about what I have seen and heard?', 'Would I be happy to use this service (or for a family member or friend to use it)?'

Authorised Representatives are DBS checked and always work in teams of two or more. They are responsible for writing the report and making recommendations for service improvement, if appropriate. Involvement in all stages of the Enter & View process is encouraged, including sharing information with Healthwatch Shropshire

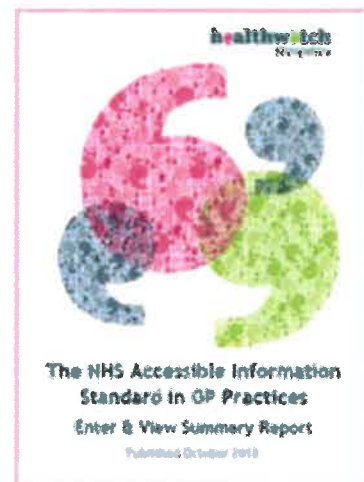
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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

about their personal experience of services to add to our intelligence and possibly prompt or inform a future visit and being a member of the Enter & View Committee. Committee membership involves deciding which services will be visited, the purpose and priority of the visit and approving draft reports. As well as identifying ways local care services could and ought to be improved, Enter & View reports aim to disseminate examples of good practice.

In 2018-19, Healthwatch Shropshire published 14 (16 last year) Enter & View reports, including one overarching report on the NHS Accessible Information Standard (AIS) in GP Practices. These Enter & View reports cover visits to a variety of health and social care settings, including acute hospital clinics and care homes. [Key priority 2]

'The NHS Accessible Information Standard (AIS) in GP Practices' - The AIS became law from 1st August 2016. HWS was supported by the Local Medical Council (LMC) and Shropshire Clinical Commissioning Group (SCCG) to undertake a first programme of visits to GP practices in the county. From November 2017 to June 2018, Healthwatch Shropshire Authorised Representatives visited nine GP practices and spoke to a total of 82 services users (patients, carers and Patient Participation Group members) and 23 staff, including Practice Managers and reception staff, to find out what they knew about the AIS and how it had affected them. We found that the Standard was not followed consistently and some staff were not aware of it or not sure of their responsibilities to apply it. In 2018 the AIS became part of the Care Quality Commission's (CQC) key lines of enquiry. This report was shared with local CQC Inspectors of Primary Care and we received the following feedback:



'This report is really useful. We wish every local Healthwatch would do something similar.'

The Enter & View Authorised Representatives and staff team have worked together to maintain the visit and reporting programme since Lynn Cawley moved from Enter & View Officer to Chief Officer from 1st November 2018. This demonstrates Healthwatch Shropshire's commitment to Enter & View and determination to complete this statutory activity despite the decreased capacity of the volunteers and staff vacancy.

Enter & View reports are available on our website:

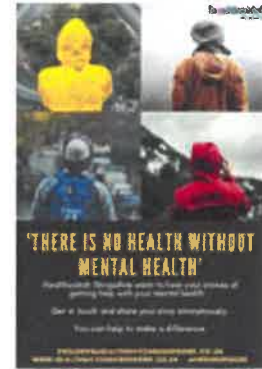
<http://www.healthwatchshropshire.co.uk/enter-view-reports-0>

A key priority for Healthwatch Shropshire this year was to better understand the experiences of children and young people using (or not using) emotional health and wellbeing services. [Key priority 1]. At the end of last year we heard that some families were feeling let down by what was at the time the Child and Adolescent Mental Health Service (CAMHS). The service changed provider and became the 0-25 Emotional Health and Well-being Service called Bee-U Emotional Health and Wellbeing. We used a variety of methods to gather as much feedback as possible, including attending carer and community groups, inviting comments through social media and the press, and running a Hot Topic.

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

BeeU - The 0-25 Emotional Health and Wellbeing Service in Shropshire Spotlight Report - Our engagement resulted in 42 comments raising 110 negative issues across 18 themes including around access to the service, waiting time and staffing levels. Our report and recommendations were shared with Midlands Partnership Foundation Trust (MPFT) as the provider and Shropshire Clinical Commissioning Group. Their response acknowledged the issues raised, in particular the lack of progress to date on providing an Autism Diagnostic Service, in part due to challenges in recruiting the specialist staff needed.



MPFT told us “It is unlikely that any one organisation can improve the current situation [around Autism diagnoses]. It requires further planning and commissioners are starting to consider how this can best be done and how to involve children, young people and their families in these plans.”

“We are keen for Healthwatch Shropshire to follow the BeeU service as our improvement work embeds.”

Statutory Activity 4: 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.

Statutory Activity 6: 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.

All Healthwatch Shropshire reports are shared with local NHS and social care providers, regulators and commissioners, once they have been approved by the Board for publication, and they are added to the HWS website. The Chief Officer will discuss key findings with Shropshire Clinical Commissioning Group at regular Quality Committee meetings, and Adult Social Care at the quarterly Shropshire and Telford Provider Information Sharing Meetings.

Reports are also sent directly to national bodies including the Care Quality Commission (CQC) for dissemination to the appropriate inspection team, NHS England and Healthwatch England to add to the information they hold about services nationally.

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During the year Healthwatch Shropshire has formally requested information from providers in writing where concerns have been raised about service provision. The information we receive can add to our intelligence and understanding of provision and can inform wider discussions.

YOU SAID, WE DID: During an Enter & View visit to a care home the visit team were concerned about the quality, texture and presentation of food. The home manager was able to explain the requirements of the residents and the responsibilities of the caterer. This then resulted in a conversation with Adult Social Care and the CQC around food and nutrition.

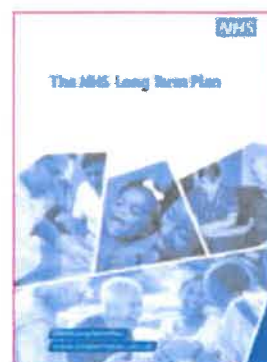
Following an Enter & View visit to another home, which had previously received a low Food Hygiene Rating from the Food Standard Agency, we contacted Shropshire Council to raise our concerns about the food. They told us that they did not routinely monitor this rating as part of their contract monitoring process but following the concerns raised by the Authorised Representatives it would be included going forward.



'You Said, We Did' reports are available on our website:

<http://healthwatchshropshire.co.uk/you-said-we-did>

Sustainability & Transformation Partnership (STP) Long Term Plan Engagement - The NHS Long Term Plan was published in January 2019 and NHS organisations were asked to come up with a local plan explaining how the priorities will be delivered in Shropshire, Telford & Wrekin. In February 2019, at the request of Healthwatch England, Healthwatch Shropshire and Healthwatch Telford and Wrekin began working together to agree our local priorities, engage with the STP and plan and promote a range of engagement activities (including questionnaires, focus groups and public events) to find out what people think to help our local NHS invest in the right support.



Engagement began March 2019.

In agreement with Healthwatch Telford & Wrekin, Healthwatch Shropshire were appointed as Co-ordinating Healthwatch by Healthwatch England and we will be responsible for gathering the feedback from engagement across the county and producing a final report in June 2019. The report will be shared with the STP and they will be required to include our findings and recommendations in the local long-term plan.

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

Working in partnership with others

This year our Enter & View and Spotlight Reports from engagement around Hot Topics and the comments we have received directly from people about their experiences of services have continued to have an impact locally, for example:

YOU SAID, WE DID: In 2018-19 Healthwatch Shropshire continued to receive comments about the Ophthalmology department at Royal Shrewsbury Hospital although the Shrewsbury & Telford Hospital Trust (SaTH) had been focused on improving the patient experience. The comments indicated that the Trust had still not got things quite right so we shared them with Patient Experience Team. As a result we found that some of the issues raised in the comments around the waiting area and communication, were already under review having been identified by staff and volunteers at the hospital, and the department was implementing solutions. We were told that the comments we shared from the public added weight to the case for change and would be used to review processes.

Royal Shrewsbury Hospital Clinic 4 (Head and Neck) Enter and View Report - After receiving comments saying that Clinic 4 was overcrowded and had poor communication systems, Healthwatch Shropshire decided that the best way of understanding the patient experience would be to ask a group of volunteers to carry out an Enter & View visit. The visit team spoke to patients and staff and observed how the clinic was run.

On the visit further concerns were raised about overcrowding, lack of suitable space for confidential conversations, inadequate signage and staff availability on the reception desk.

The Enter & View report was shared with the Ear Nose & Throat Department, which followed it up and have put in place an action plan to address our recommendations.

“Thank you for the feedback provided within the report which will be used to help make improvements for patients within the Clinic.”



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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

Statutory Activity 7: 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.

Healthwatch Shropshire hosts quarterly information sharing meetings with local CQC inspectors for

- Adult social care (residential/care homes and domiciliary care)
- Primary Care (GPs)
- Dentists
- Hospital Trusts
- Community Trust
- Mental Health Trust

These meetings are an opportunity for us to share the feedback we receive from the public and hear about the CQC's activity locally. Between meetings, the CQC will ask for any information or insights we hold about a service when planning an inspection, e.g. Enter & View report. The Enter & View Officer also informs the CQC of our intention to visit a service to prevent any clashes and to try to avoid going into a service too soon before or after a CQC inspection to reduce the pressure on the service. This year we have worked closely with the CQC to plan our visits so that we can jointly monitor any service improvements recommended.

There have been occasions when an Enter & View visit has triggered the CQC to go into a service earlier than planned.

The relationship Healthwatch Shropshire has established with local CQC inspectors means that we have not had a need to make recommendations to Healthwatch England regarding special reviews or investigations. Healthwatch Shropshire uses the Healthwatch England Customer Relationship Management (CRM) system, which facilitates the routine and automatic sharing of information with Healthwatch England. We continue to respond to calls for information and contribute to its reviews.

Statutory Activity 8: Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.

Healthwatch Shropshire shares all comments with Healthwatch England through the Healthwatch England CRM system.

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

Maternity and Mental Health Engagement - Between August and December 2018
Healthwatch England gathered experiences from 2,000 new mums and pregnant women of perinatal mental health services (the period between conception and the child's first birthday). Late 2018 Healthwatch Shropshire were asked to be one of five local Healthwatch to contribute to this piece of national research and share our findings with Healthwatch England by the end of March 2019. We had already run a Hot Topic in August 2018 hearing from seven people about their difficult experiences accessing Perinatal Mental Health Services. We followed this up by attending a range of groups/event across Shropshire, including mother and baby groups, asking people to complete questionnaires, holding focus groups and conducting interviews. Our engagement was supported by the Maternity Voices Partnership. [Key priority 4]

We spoke to 348 people including partners, staff and stakeholders from across the local maternity system, including the NHS and Public Health.

Our findings (including quantitative and qualitative data) were shared with Healthwatch England in March 2019 for inclusion in their research. We will then produce a local report early 2019-20 showing our findings in Shropshire. It is hoped that the feedback we have received will inform current service re-design and the Shropshire, Telford & Wrekin Sustainability and Transformation Partnership (STP) long-term plan for maternity services.

Helping you find the answers

Statutory Activity 5: Providing advice and information about access to local care services so choice can be made about local care services

Healthwatch Shropshire regards its information and signposting service as a crucial element of its service provision to support the people of Shropshire. It has continued to be proactive in promoting awareness of the range of services and support organisations available locally and takes great care to ensure that people are signposted appropriately.

Between April 2018 and March 2019, more than 118 people (234 last year) have been provided with information and signposting services.

At the annual Healthwatch England Conference on 3rd October 2018, Healthwatch Shropshire received a Commendation for the category: Giving people the advice and information they need.

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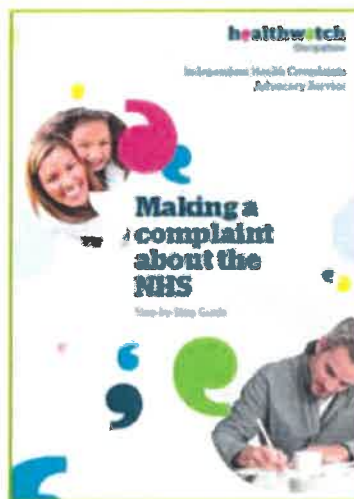
TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

Ensuring communities get the advice and information they need to make decisions about their wellbeing, care and the services that support them'.



Shropshire Together Health and Wellbeing Board (HWBB) Communication and Engagement Group: Good communication with the public and across partners is vital to ensuring that everyone has the information that they need to support their health, the health of their community and to make sure that services are used in the right way. Shropshire Together was formed to deliver the Health and Wellbeing Board's commitment to work effectively with the people of Shropshire to develop and design services, support community development and create a common language and understanding of health and wellbeing. Healthwatch Shropshire (HWS) is a key partner and co-chairs the group.

As a member of the HWBB Communication and Engagement Group, Healthwatch Shropshire works with partners to provide information in an integrated way on local services; for example on the availability and most appropriate choice of services over holiday periods. Social media is used regularly to raise awareness of services available to help people choose well. The group focuses on local priorities and the joined up approach, using a toolkit for campaigns ensures consistent messages are disseminated across the county.



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. We do this by giving them a self-help pack that 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 where to send their complaint. We explain the NHS complaints process and their options, including the right to appeal to the Parliamentary and Health Service Ombudsman if they are not happy with the outcome of their complaint. Those people who need additional information and support to put their complaint in writing are allocated a Health Complaints Advocate who will help them to navigate the NHS complaints process.

People accessing the IHCAS frequently require signposting to other services in addition to requiring assistance in making a complaint, such as those providing more general advocacy. The signposting function is an essential

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

part of the service offered, as some of these people are very vulnerable. We also signpost to other complaints advocacy organisations, e.g. Engaging Communities Staffordshire, the IHCAS provider for residents of Telford & Wrekin using NHS services in Telford, or make a professional referral with their permission if the caller has given us information about their complaint to prevent them having to repeat themselves which they can find distressing. We have referred eight people this year (11 last year).

“Through IHCAS Service and my Advocate I was able to rebuild trust with the hospital and get the assurances I needed in order for me to undertake an operation that I had become terrified of having. The outcome being that I regained my sight. My Advocate also signposted me to activities such as cycling and fencing for the blind and partially sighted that I never knew existed. I am no longer in that very low place and I have the IHCAS service to thank for that. I am over the moon with the service.” - IHCAS Client

Our volunteers

At Healthwatch Shropshire, we could not influence change and encourage improvement to our local services without the support of our team of volunteers.

In 2018-19, our team of 13 volunteers and nine Board members contributed an average of 150 hours of their time each month to Healthwatch Shropshire activities. The majority of this time was spent in their local communities, helping Healthwatch Shropshire to identify local concerns or raise areas of good practice that we can then share with services and commissioners to prompt improvement.

Fran volunteered to spend the day meeting young parents and their babies at a Baby Sensory Session where Healthwatch Shropshire was collecting parents' experiences of the support available for their mental health. Fran explained:

“I had an interesting and enjoyable day helping to encourage participation in the Healthwatch survey by the Mum's at the group. As a bonus, I got to see lots of beautiful babies and chat with their Mums about the real value of their opinions on Maternity Mental Health.”

Additionally, our volunteers visited health and social care services to see how accessible they were and made recommendations for their improvements, during Enter & View visits. These reports are shared in local libraries and on our website so that they can be accessed by the public to help them remain informed about the levels of care provided locally.

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

Chris volunteers as an Enter & View Authorised Representative, visiting wards, medical practices and care homes,

"I believe that an important way to improve the quality of service in health and social care is to listen and relay back to providers and commissioners the opinions of those individuals experiencing services.

Working as part of a team with shared goals is very satisfying."

We have volunteers on three of our four Board Committees, contributing ideas and taking an active part in steering the work that Healthwatch Shropshire carries out locally, from agreeing project work to deciding the appropriate methods of communication for 'hot topics'.

c. Investment policy and performance

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

Financial review

a. 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 2018-19 Healthwatch Shropshire was fortunate to have a small amount of grant funding from Health Lives to complete public engagement about Social Prescribing and barriers to access. We also received grant funding from Healthwatch England to enable us to complete public engagement about Maternity Mental Health Services in Shropshire.

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 2019 the total free reserve of Healthwatch Shropshire were £49,402 (2017-18 was £38,754).

Plans for next year

a. Future priorities

It is impossible to plan too rigidly when a number of transformation programmes are taking place across the local health and social care economy, e.g. Future Fit, LMS Review.

Healthwatch Shropshire has used its intelligence, local knowledge of the health and social care system, worked with its stakeholder group, volunteers, staff team and Board to identify key themes. The Health and Wellbeing board members were also invited to contribute.

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

The key priorities for 2019-20 have been identified as:

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

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.

Dissemination of the Annual Report

Healthwatch Shropshire will make the Annual Report available in the following ways:

- Local press release
- Direct engagement with local media
- Website
- Social media
- Annual Event
- Ongoing Community Engagement strategy
- Email to Associate Members (individual and organisational)
- Email to volunteers and Board Members
- Engagement with local networks
- Email to local commissioners (Shropshire Clinical Commissioning Group and Shropshire Council and providers of services)
- Sent to Healthwatch England, The Care Quality Commission, NHS England (nationally and locally), Shropshire Council's Health Overview & Scrutiny Committee

Healthwatch Shropshire will produce a concise and user friendly "Annual Review" for publication in the summer of 2019.

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

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;
- 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.

This report was approved by the Trustees, on 24/6/19 and signed on their behalf by:



Michael Terrence Harte, Deputy Chair

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INDEPENDENT EXAMINER'S REPORT
FOR THE YEAR ENDED 31 MARCH 2019

Independent Examiner's Report to the Trustees of Healthwatch Shropshire (the 'charitable company')

I report to the charity Trustees on my examination of the accounts of the charitable company for the year ended 31 March 2019.

This report is made solely to the charitable company's Trustees, as a body, in accordance with Part 4 of the Charities (Accounts and Reports) Regulations 2008. My work has been undertaken so that I might state to the charitable company's Trustees those matters I am required to state to them in an Independent examiner's report and for no other purpose. To the fullest extent permitted by law, I do not accept or assume responsibility to anyone other than the charitable company and the charitable company's Trustees as a body, for my work or for this report.

Responsibilities and Basis of Report

As the Trustees of the charitable company (and 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 charitable 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 the charitable company's accounts 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.

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INDEPENDENT EXAMINER'S REPORT (continued)
FOR THE YEAR ENDED 31 MARCH 2019

Independent Examiner's Statement

I have completed my examination. I can 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 charitable 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.

Signed: *S J Tweedie*

Dated: *26/6/19*

S J Tweedie BSc FCA DChA

Whittingham Riddell LLP

Chartered Accountants

Belmont House
Shrewsbury Business Park
Shrewsbury
Shropshire
SY2 6LG

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**STATEMENT OF FINANCIAL ACTIVITIES INCORPORATING INCOME AND EXPENDITURE ACCOUNT
FOR THE YEAR ENDED 31 MARCH 2019**

	Note	Unrestricted funds 2019 £	Restricted funds 2019 £	Total funds 2019 £	<i>Total funds 2018 £</i>
INCOME FROM:					
Donations and legacies	2	40	-	40	-
Charitable activities	3	163,457	40,042	203,499	224,262
TOTAL INCOME		<u>163,497</u>	<u>40,042</u>	<u>203,539</u>	<u>224,262</u>
EXPENDITURE ON:					
Charitable activities	9	159,223	26,330	185,553	213,340
TOTAL EXPENDITURE	4	<u>159,223</u>	<u>26,330</u>	<u>185,553</u>	<u>213,340</u>
NET INCOME BEFORE OTHER RECOGNISED GAINS AND LOSSES		4,274	13,712	17,986	10,922
NET MOVEMENT IN FUNDS		4,274	13,712	17,986	10,922
RECONCILIATION OF FUNDS:					
Total funds brought forward		45,128	-	45,128	34,206
TOTAL FUNDS CARRIED FORWARD		<u><u>49,402</u></u>	<u><u>13,712</u></u>	<u><u>63,114</u></u>	<u><u>45,128</u></u>

The notes on pages 34 to 45 form part of these financial statements.

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)
REGISTERED NUMBER: 08415314

BALANCE SHEET
AS AT 31 MARCH 2019

	Note	£	2019 £	£	2018 £
CURRENT ASSETS					
Debtors	13	25,835		39,916	
Cash at bank and in hand		54,407		49,081	
		<u>80,242</u>		<u>88,997</u>	
CREDITORS: amounts falling due within one year	14	(17,128)		(43,869)	
NET CURRENT ASSETS			63,114		45,128
NET ASSETS			63,114		45,128
CHARITY FUNDS					
Restricted funds	15		13,712		-
Unrestricted funds	15		49,402		45,128
TOTAL FUNDS			63,114		45,128

The charitable company's financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The Trustees consider that the charitable company is entitled to exemption from the requirement to have an audit under the provisions of section 477 of the Companies Act 2006 ("the Act") and members have not required the charitable company to obtain an audit for the year in question in accordance with section 476 of the Act.

The Trustees acknowledge their responsibilities for complying with the requirements of the Companies Act 2006 with respect to accounting records and the preparation of financial statements.

The financial statements were approved and authorised for issue by the Trustees on 24/6/19 and signed on their behalf, by:



Michael Terrence Harte, Deputy Chair

The notes on pages 34 to 45 form part of these financial statements.

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019

1. ACCOUNTING POLICIES

1.1 Summary of significant accounting policies and key accounting estimates

The principal accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

1.2 Basis of preparation of financial statements

The financial statements have been prepared in accordance with 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 2015) - (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Healthwatch Shropshire meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

1.3 Company status

The charitable company is a company limited by guarantee, incorporated in England. The registered office address can be found in the reference and administrative details on page 1 of this report. The members of the company are the Trustees named on page 1. In the event of the charitable company being wound up, the liability in respect of the guarantee is limited to £1 per member of the charitable company.

1.4 Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the charitable company and which have not been designated for other purposes.

Designated funds comprise unrestricted funds that have been set aside by the Trustees for particular purposes. The aim and use of each designated fund is set out in the notes to the financial statements.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charitable company for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

1.5 Income

All income is recognised once the charitable company has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019

1. ACCOUNTING POLICIES (CONTINUED)

1.6 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, 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 classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use.

Support costs are those costs incurred directly in support of expenditure on the objects of the charitable company. Governance costs are those incurred in connection with administration of the charitable company and compliance with constitutional and statutory requirements.

Grants payable are charged in the year when the offer is made except in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attaching are fulfilled. Grants offered subject to conditions which have not been met at the year end are noted as a commitment, but not accrued as expenditure.

All expenditure is inclusive of irrecoverable VAT.

1.7 Going concern

The financial statements have been prepared on the going concern basis.

The Trustees assess whether the use of the going concern basis is appropriate i.e whether there are any material uncertainties related to events or conditions that may cast significant doubt on the ability of the Charity to continue as a going concern. The Trustees make this assessment in respect of a period of one year from the date of approval of the financial statements.

1.8 Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charitable company; this is normally upon notification of the interest paid or payable by the Bank.

1.9 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

1.10 Cash at Bank and in hand

Cash at bank and in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019**

1. ACCOUNTING POLICIES (CONTINUED)

1.11 Liabilities and provisions

Liabilities are recognised when there is an obligation at the Balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Liabilities are recognised at the amount that the charitable company anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide. Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

1.12 Financial instruments

The charitable company only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

1.13 Pensions

The charitable company operates a defined contribution pension scheme and the pension charge represents the amounts payable by the charitable company to the fund in respect of the year.

2. INCOME FROM DONATIONS AND LEGACIES

	Unrestricted funds 2019 £	Restricted funds 2019 £	Total funds 2019 £	<i>Total funds 2018 £</i>
Donations	40	-	40	-

3. INCOME FROM CHARITABLE ACTIVITIES

	Unrestricted funds 2019 £	Restricted funds 2019 £	Total funds 2019 £	<i>Total funds 2018 £</i>
Charitable activities	163,250	-	163,250	223,052
Public sector grants	207	40,042	40,249	300
Other income	-	-	-	910
	163,457	40,042	203,499	224,262
<i>Total 2018</i>	<i>224,262</i>	<i>-</i>	<i>224,262</i>	

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019

4. ANALYSIS OF EXPENDITURE BY EXPENDITURE TYPE

	Staff costs 2019 £	Other costs 2019 £	Total 2019 £	<i>Total</i> 2018 £
Charitable activities (notes 5, 6, 7 & 8)	102,010	78,035	180,045	208,914
Expenditure on governance (note 9)	-	5,508	5,508	4,426
	<u>102,010</u>	<u>83,543</u>	<u>185,553</u>	<u>213,340</u>
<i>Total 2018</i>	<u>131,668</u>	<u>213,340</u>	<u>345,008</u>	

5. ANALYSIS OF EXPENDITURE BY ACTIVITIES

	Activities undertaken directly 2019 £	Grant funding of activities 2019 £	Support costs 2019 £	Total 2019 £	<i>Total</i> 2018 £
Charitable activities	161,766	-	18,279	180,045	208,914
<i>Total 2018</i>	<u>189,182</u>	<u>882</u>	<u>18,850</u>	<u>208,914</u>	

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019

6. DIRECT COSTS

	Total 2019 £	<i>Total 2018 £</i>
Volunteer & Trustee non-governance expenses	3,854	4,574
Telephone and remote broadband	1,131	572
Venue hire and events	9,757	878
Recruitment (including DBS checks)	1,353	901
Equipment	816	392
Postage	577	740
Photocopying/Internal printing	684	1,445
Marketing and publicity	2,662	545
Office stationery	232	679
Travel and subsistence	2,827	3,936
Training and development	186	582
Insurance	2,204	2,022
Consultancy	14,731	13,762
Publications/Subscriptions	316	836
Website/Software	1,324	-
Office rent	7,095	25,570
Premises costs	3,738	-
Other expenses	6,269	80
Wages and salaries	94,416	119,362
National insurance	3,632	5,481
Pension cost	3,962	6,825
	<u>161,766</u>	<u>189,182</u>
<i>Total 2018</i>	<u>189,182</u>	

7. ANALYSIS OF GRANTS TO ORGANISATIONS

	Total 2019 £	<i>Total 2018 £</i>
Grants, Charitable activities	-	882
	<u>-</u>	<u>882</u>
<i>Total 2018</i>	<u>882</u>	

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019

8. SUPPORT COSTS

	Total 2019 £	<i>Total 2018 £</i>
Sundry support costs	3,279	3,310
Financial administration	15,000	15,540
	18,279	<i>18,850</i>
	18,279	<i>18,850</i>
<i>Total 2018</i>	<i>18,850</i>	

9. GOVERNANCE COSTS

	Unrestricted funds 2019 £	Restricted funds 2019 £	Total funds 2019 £	<i>Total funds 2018 £</i>
Trustee expenses	951	-	951	796
Independent Examination fee	1,410	-	1,410	1,356
Trustees Indemnity Insurance	519	-	519	510
Venue hire/catering	140	-	140	36
Other	48	-	48	48
Professional fees	2,440	-	2,440	1,680
	5,508	-	5,508	<i>4,426</i>
	5,508	-	5,508	<i>4,426</i>

10. NET INCOME/(EXPENDITURE)

During the year, no Trustees received any remuneration (2018 - £NIL).

During the year, no Trustees received any benefits in kind (2018 - £NIL).

During the year, 8 Trustees received reimbursement of expenses amounting to £3,382 (2018 - 9 trustees - £3,730).

11. AUDITORS' REMUNERATION

The Independent Examiner's remuneration amounts to an Independent Examination fee of £1,410 (2018 - £1,356).

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019

12. STAFF COSTS

Staff costs were as follows:

	2019 £	2018 £
Wages and salaries	94,416	119,362
Social security costs	3,632	5,481
Other pension costs	3,962	6,825
	102,010	131,668

The average number of persons employed by the charitable company during the year was as follows:

2019 No.	2018 No.
5	6

Average headcount expressed as a full time equivalent:

2019 No.	2018 No.
4	4

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

13. DEBTORS

	2019 £	2018 £
Due after more than one year		
Other debtors	1,000	-
Due within one year		
Trade debtors	23,555	37,107
Other debtors	-	1,522
Prepayments and accrued income	1,280	1,287
	25,835	39,916

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019

14. CREDITORS: Amounts falling due within one year

	2019	2018
	£	£
Trade creditors	11,538	7,199
Other taxation and social security	1,604	2,379
Other creditors	1,593	2,037
Accruals and deferred income	2,393	32,254
	<hr/> 17,128 <hr/>	<hr/> 43,869 <hr/>

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019

15. STATEMENT OF FUNDS

STATEMENT OF FUNDS - CURRENT YEAR

	Balance at 1 April 2018 £	Income £	Expenditure £	Transfers in/out £	Balance at 31 March 2019 £
Designated funds					
IT Fund	6,374	-	(6,146)	(228)	-
General funds					
General Funds	38,754	163,497	(153,077)	228	49,402
Total Unrestricted funds	45,128	163,497	(159,223)	-	49,402
Restricted funds					
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	-	5,100	(788)	-	4,312
	-	40,042	(26,330)	-	13,712
Total of funds	45,128	203,539	(185,553)	-	63,114

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019

15. STATEMENT OF FUNDS (continued)

Designated Funds

The IT Fund is for set up costs involved in setting up the IT system in the new offices.

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 ideals for mental health and wellbeing before, during and after pregnancy in Shropshire.

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.

STATEMENT OF FUNDS - PRIOR YEAR

	<i>Balance at 1 April 2017 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Balance at 31 March 2018 £</i>
Designated funds					
IT Fund	-	-	-	6,374	6,374
	-	-	-	6,374	6,374
General Funds	34,206	224,262	(213,340)	(6,374)	38,754
Restricted funds					

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019

16. ANALYSIS OF NET ASSETS BETWEEN FUNDS

ANALYSIS OF NET ASSETS BETWEEN FUNDS - CURRENT YEAR

	Unrestricted funds 2019 £	Restricted funds 2019 £	Total funds 2019 £
Debtors due after more than 1 year	1,000	-	1,000
Current assets	65,103	14,139	79,242
Creditors due within one year	(16,701)	(427)	(17,128)
	<u>49,402</u>	<u>13,712</u>	<u>63,114</u>

ANALYSIS OF NET ASSETS BETWEEN FUNDS - PRIOR YEAR

	<i>Unrestricted funds 2018 £</i>	<i>Restricted funds 2018 £</i>	<i>Total funds 2018 £</i>
Current assets	88,997	-	88,997
Creditors due within one year	(43,869)	-	(43,869)
	<u>45,128</u>	<u>-</u>	<u>45,128</u>

HEALTHWATCH SHROPSHIRE
(A company limited by guarantee)

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019

17. PENSION COMMITMENTS

The charity paid pension contributions of £3,962 (2018: £5,481). There were contributions payable at the year end of £1,593 (2018: £1,522 debtor).

18. OPERATING LEASE COMMITMENTS

At 31 March 2019 the total of the Charity's future minimum lease payments under non-cancellable operating leases was:

	2019 £	2018 £
Amounts payable:		
Within 1 year	7,095	-
Between 1 and 5 years	21,285	-
Total	<u>28,380</u>	<u>-</u>

19. RELATED PARTY TRANSACTIONS

There were no related party transactions during the year.