

**MINUTES OF A MEETING OF THE
HEALTH & WELLBEING BOARD
Council Chamber - Town Hall
7 May 2025 (1.03 - 3.07 pm)**

Present:

Elected Members: Councillors Gillian Ford (Chairman), Oscar Ford and Paul McGeary

Officers of the Council: Sam Westrop (substituting for Mark Ansell)

NEL ICB: Narinderjit Kullar (NEL ICB) and Luke Burton (NEL ICB)

Other Organisations: Vicki Kong (NHS Clinical Director), Anne-Marie Dean (Healthwatch Havering), Paul Rose (Voluntary & Community Sector) and Beth Williams (substituting for Fiona Wheeler)

Present Online: Sarita Symon and Mark Ansell

10 CHAIRMAN'S ANNOUNCEMENTS

The Chairman reminded Members of the action to be taken in an emergency.

11 APOLOGIES FOR ABSENCE

Apologies were received for the absence of Fiona Wheeler, Andrew Blake-Herbert, Mark Ansell, Barbara Nicholls, Patrick Odling-Smee and Sarita Symon.

12 DISCLOSURE OF INTERESTS

There were no disclosures of interests.

13 MINUTES

The minutes of the previous meeting were agreed as a correct record and signed by the Chairman.

14 MATTERS ARISING

There were no matters to discuss following the previous meeting.

15 BCF

The Board was presented with a report on the delivery of the Better Care Fund (BCF).

Members noted officers were seeking approval to enter into the Section 75 agreement with the NEL ICB to govern the delivery of the BCF for 2025-26. It was explained that the partnership had moved to a Havering Place Based Partnership and had moved away from the BHR agreement for the BCF. Regional approval of the BCF was anticipated. It was clarified that, until any updates to the scope of Health & Wellbeing Boards come into effect, the oversight of the BCF would still fall under the Board.

The Board;

1. **Agreed** to enter into a section 75 agreement with Havering Place-Based Partnership, on the terms and conditions outlined in this report, to govern the delivery of the approved Better Care Fund Plan for Havering for the period 2025/2026.
2. **Delegated** authority to approve the final terms of the proposed section 75 agreement to the Cabinet Member for Adults and Health, after consultation with the Leader of the Council and the Strategic Director of People.
3. **Delegated** the function of monitoring the implementation and operation of the Better Care Fund and s75 Agreement to the Cabinet Member for Adults and Health.
4. **Delegated** authority for all necessary decisions with respect to the implementation and operation of all matters relating to the Better Care Fund and section 75 agreement to the Strategic Director of People.

16 HEALTHWATCH ANNUAL REPORT

The Board received the Healthwatch Havering annual report.

It was explained to the Board that the focus on the recent work was 'listening and sharing' and to deliver suggestions and solutions to improve services. It was noted over 1000 shared experiences with 139 residents contacting HH for advice. The Board noticed the most important report produced was on maternity.

It was noted HH participated in the Big Conversation with all London Healthwatches. They were commissioned to interact with over 100 residents on the topic of good care. Improvements had been identified and had been passed to decision makers.

Thanks was given to NHS colleagues for their work on the Deafness is not a Barrier initiative and on the St George's Health and Wellbeing Hub.

The Board **noted** the report.

17 LB HAVERING JSNA 2025

The Board was presented with the JSNA for 2025.

It was noted the JSNA covered 3 areas; Living Well, Ageing Well and Dying Well with some overlap between each of the 3 areas. Members noted the JSNA had been approved by the Adults Delivery Board in March 2025 and had been shared with the Place Based Partnership in April 2025. The Board received 9 recommendations and, if agreed, they would be monitored by the Adults Delivery Board.

The Board **approved** the London Borough of Havering JSNA 2025.

18 **TOBACCO HARM REDUCTION STRATEGY CONSULTATION**

The Board received the Tobacco Harm Reduction Strategy Consultation.

The consultation started in February 2025 and ended in March 2025. It was available online and in hard copies placed in accessible location. There was also an easy-read version of the strategy. The consultation received 125 responses with the majority having been submitted online. The majority demographic was British Women and there was an even split between current or ex-smokers and non-smokers. 79% of the respondents agreed with the 4 priorities with the supporting of quitting and stopping smoking in young people being seen as the highest priorities. Following the consultation, 1 amendment was identified which was to change the wording of 'young people' to 'children and young people'. The strategy was due to be presented to Cabinet in June 2025 for adoption.

The Board **agreed** for the Strategy to proceed to Cabinet for adoption.

19 **HEALTH PROTECTION FORUM ANNUAL REPORT 2024**

The Board received the Health Protection Forum Annual Report for 2024.

It was noted the HPF meets on a quarterly basis and that annual reports going forward will cover calendar years. It was noted in October 2024, commissioners and BHRUT agreed a new funding model for sexual health services. It was also noted all eligible children in Havering had been offered the Tuberculosis (TB) vaccine and the HPF facilitated UKHSA training for GP staff and any other staff with relevance to TB such as those dealing with homelessness.

The top priorities identified by the HPF were Air Quality, Adverse Weather, TB and changing roles/ relationships across the system.

Members questioned the rate of chicken pox self-reporting to which officers explained they would need to reply outside of the meeting as they would need to compile data from the UKHSA. It was noted that data quality was of high importance and schools needed to report cases of chicken pox more consistently.

The Board **noted** the report.

20 **JOINT LOCAL HEALTH AND WELLBEING STRATEGY UPDATE**

The Board received an update on the Joint Local Health and Wellbeing Strategy (JLHWS).

Members noted the strategy had reduced from 20 priorities to 12 which had been aligned with local health needs. The Board noted the JLHWS was out of date and in need of refreshing and aims to promote good health and narrow health inequalities. It was proposed that the Board would receive 3 priorities at each meeting to review.

The Board **agreed** for the strategy to go to consultation and **delegated** for the Chair to sign off when it was ready.

Chairman