

Notice of KEY Executive Decision

Subject Heading:	Variation to the Section 256 Agreement – North East London Inequalities Funding Allocation 25-26
Decision Maker:	Barbara Nicholls, Strategic Director of People
Cabinet Member:	Councillor Ford, Cabinet Member for Health and Adult Care Services
ELT Lead:	Barbara Nicholls, Strategic Director of People
Report Author and contact details:	Sophie Barron, Senior Commissioner
Policy context:	The Health Inequalities Fund will support Havering's Health and Wellbeing Strategy priorities by targeting health inequalities at a local level by responding to community intelligence and promoting sustainable impact for communities.
Financial summary:	The report seeks permission to accept NHS funding of £661,893 via the Health Inequalities Fund for 2025-26.
Reason decision is Key	Expenditure or saving (including anticipated income) of £500,000 or more
Date notice given of intended decision:	9 th June 2025

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Relevant Overview & Scrutiny Committee:	People's Overview and Scrutiny Sub-Committee
Is it an urgent decision?	No
Is this decision exempt from being called-in?	No

The subject matter of this report deals with the following Council Objectives

People - Supporting our residents to stay safe and well **X**

Place - A great place to live, work and enjoy

Resources - Enabling a resident-focused and resilient Council

Part A – Report seeking decision

DETAIL OF THE DECISION REQUESTED AND RECOMMENDED ACTION

It is recommended that the Strategic Director of People, in consultation with the Lead Member for Adults and Health, authorises:

- the acceptance of the North East London Health Inequalities Grant Funding of £661,893 from the NHS North East London ICB;
- the variation of the terms and conditions of the Section 256 Agreement* – North East London Inequalities Funding Allocation
- the allocation of funding for use on community health services to reduce health inequalities;

AUTHORITY UNDER WHICH DECISION IS MADE

The Havering Constitution:

Scheme 3.3.3 Powers common to all Strategic Directors

1. General

- 1.1. To take any steps necessary for proper management and administration of allocated portfolios.

5. Grants

- 5.1. To apply for, accept and thereafter spend / allocate any grant funding connected with their directorate provided that any match funding or residual liabilities can be met from the existing budget of the directorate. For the avoidance of doubt this delegation shall allow the acceptance of any grant offered / allocated to the Council without any application.

STATEMENT OF THE REASONS FOR THE DECISION

The Integrated Care Board successfully bid for health inequalities funding from NHS England in 2022/23. To support the continuation of Health and Inequality schemes for 2023 until 2027 a range of projects have been identified to improve the health and wellbeing of Havering residents for 2025-26.

In accordance with clause 17.1 of the existing Section 256 Agreement, a letter written by The Havering Place Based Partnerships Board proposes to vary the Agreement with effect from 1st April 2025 (the “Effective Date”):

- At Schedule 1, Part B - Table 1 of the Health Inequalities Plan will be replaced with the updated spending plan detailed as Appendix 1 below.
- At Schedule 2, Table 2 of the Financial Schedule will be replaced with the updated funding allocation at Appendix 2 of this letter.

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The report seeks permission for London Borough of Havering to accept NHS Health Inequalities funding of £661,893 for the year 2025/26 on behalf of Havering Place Based Partnership Board for the following health inequalities projects.

Appendix 1

Havering Health Inequalities Project	Project Lead	22/23, 23/24 and 24/25 Total HI allocations to date	25/26 allocation values awarded	TOTAL
Self Service Health Check Offer	Tha.Han@haverling.gov.uk Parth.Pillai@haverling.gov.uk	£87,000	£0	£87,000
Increase over 50s uptake of benefits	Natalie.Naor@haverling.gov.uk	£107,069	£41,289	£148,358
Launch of Universal Stop Smoking Service	Natalie.Naor@haverling.gov.uk	£37,960	£0	£37,960
Launch of Stop Smoking Service for those with Serious Mental Illness	Natalie.Naor@haverling.gov.uk	£4,070	£0	£4,070
PCN MDT	N/A	£47,253	£0	£47,253
Weight Management Service	Claire.Alp@haverling.gov.uk	£80,765	£0	£80,765
Housebound model development (PCN Aligned Community Team)	s.jahir1@nhs.net	£45,595	£132,330	£177,925
Carers (Training for informal and formal carers)	e.plane@nhs.net	£82,046	£41,023	£123,069
Community Chest	Alain.Rosenberg@haverling.gov.uk Sophie.NTinu@haverling.gov.uk	£161,324	£80,000	£241,324
Mental Health & Wellbeing Outreach Service for asylum seekers and refugees	matthew.henry1@nhs.net	£367,102	£0	£367,102
Funding to JCU to support administration	Laura.Neilson@haverling.gov.uk	£50,250	£0	£50,250
Local Area Coordinators	Claire.Monmirelle@haverling.gov.uk	£400,000	£209,700	£609,700
Asthma Schools Coordinator	jessica.russell8@nhs.net bethan.stott2@nhs.net	£35,000	£0	£35,000
Hearing Loop Systems	s.byrne-ingle1@nhs.net	£2,000	£0	£2,000
Infant Feeding Coordinator	Helen.Anfield@haverling.gov.uk	£83,229	£18,424	£101,653
Review of services supporting individuals who misuse alcohol and other substances	Tha.Han@haverling.gov.uk	£8,950	£0	£8,950

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Here To Talk	Isabel.Grant-funck@haverling.gov.uk Caitlin.Paul@haverling.gov.uk	£10,000	£6,000	£16,000
Improving Mental Health Outcomes for Young Homeless People Project	Marc.Pescod2@haverling.gov.uk	£81,610	£0	£81,610
Improving access to talking therapies for children and young people with neurodevelopmental conditions (Autism, ADHD)	Rachel.OBrien@haverling.gov.uk Victoria.Hartstean@haverling.gov.uk	£45,907	£133,127	£179,034
Diabetes Team	james.frost2@nhs.net	£20,963	£0	£20,963
BeeWell	Palmela.Witter@haverling.gov.uk Sedina.Lewis@haverling.gov.uk	£37,022	£0	£37,022
TOTAL		£1,795,116	£661,893	£2,457,009

Appendix 2

	22/23 funding	23/24 funding (£492,000)	24/25 funding	25/26 funding	26/27 funding
Total ICB Funding (to remain in ICB)	£0	£2,000	£0	£0	£0
Total LA Funding (via S256)	£747,500	£490,000	£547,162	£661,893	£245,000

Following recommendation of this report, each of the Health Inequalities funded projects will seek separate governance approval for the procurement of providers and award of any contracts where applicable.

OTHER OPTIONS CONSIDERED AND REJECTED

1. Non-acceptance of funds

This option has been rejected as accepting this money will contribute towards cost of delivery for the Council whilst ensuring delivery of NICE (National Institute for Health and Care Excellence) recommended health services.

PRE-DECISION CONSULTATION

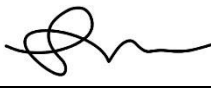
Business papers for these projects have been taken to the Havering Place Based Partnership Board which has supported the use of the Health Inequalities Funding to support these projects.

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NAME AND JOB TITLE OF STAFF MEMBER ADVISING THE DECISION-MAKER

Name: Sophie Barron

Designation: Senior Commissioner

Signature: 

Date: 30/06/2025

Part B - Assessment of implications and risks

LEGAL IMPLICATIONS AND RISKS

The Council has a statutory duty under the National Health Service Act 2006 (as amended by section 12 of the Health and Social Care Act 2012) to take such steps as it considers appropriate for improving the health of the people in its area.

Furthermore, Section 1 of the Localism Act 2011 gives the Council a general power of competence to do anything an individual can do. The recommendations in this report are in keeping with this power and the Council has the power to accept grant funding.

The agreement variation value is at £661,893.

For the reasons set out above, the Council may proceed with the acceptance of the grant and variation of the initial contract. Legal shall draft the Variation Agreement or shall review an agreement drafted by NEL. The section 256 agreement allows for variation subject to agreement between the parties and such variation is in writing.

FINANCIAL IMPLICATIONS AND RISKS

This paper seeks approval to accept the variation of the terms and conditions to the Section 256 – North East London Inequalities Funding Allocation 2025/26 and the acceptance of the North East London Health Inequalities Grant Funding allocation of £661,893 from the NHS North East London ICB for 25/26.

The Integrated Care Board successfully bid for health inequalities funding from NHS England in 2022/23. To support the continuation of Health and Inequality schemes for 2023 until 2027, a section 256 agreement was entered into and the variation for 25/26 is required to agree the 25/26 funding allocations and to update the spending plan for the projects agreed by Havering Place Based Partnership Board.

The 25/26 funding allocation is £661,893.

The total value of the agreement is £2,693,555 and the S256 agreement runs from 1st August 2022 to 31st March 2027. There has been a reduction in the total funds available over the agreement due to ICB efficiencies.

The £661,893 funding for 25/26 will cover the following projects:

Existing Health Inequalities funded projects

- Increase over 50's uptake of benefits. Allocation: £41,289
- Housebound Model development (PCN community aligned team) £132,330
- Carers – (Training for informal and formal carers) Allocation: £41,023
- Community Chest, Allocation, Allocation: £80,000
- Local Area Coordinators post, Allocation: £209,700
- Infant Feeding Coordinator Allocation: £18,424
- Barber Talk, Allocation: £6,000

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- Improving access to talking therapies for children and young people with neurodevelopmental conditions (Autism, ADHD) £133,127

Each of the Health Inequalities funded projects will seek separate governance approval for the procurement of providers and award of any contracts where applicable.

Note that some health inequalities schemes may need to be commissioned by NEL ICB. Where this is the case – funds will need to be transferred back to NEL ICB when required to ensure funds are available to commission the intended services

There is no adverse impact on the council's financial position as a result of accepting this funding.

HUMAN RESOURCES IMPLICATIONS AND RISKS (AND ACCOMMODATION IMPLICATIONS WHERE RELEVANT)

2025/26 Health Inequalities funding will provide £210k towards the staffing costs of the local area coordinators employed by LBH. Total team cost are £500k+ per annum, with other council budgets contributing to the running costs of the team. All coordinators are currently employed by LBH. If the funding was not accepted, LBH would either have to find alternative LBH budgets to fund the team from and/or consider terminating existing contracts (which may give rise to a redundancy cost).

An Infant feeding coordinator has already been employed by the LBH Early Years team from October 2024. Accepting funding allows the role to continue beyond 25/26 financial year. If the funding was not accepted, LBH would either have to find alternative LBH budgets to fund the team from or consider terminating the existing contract (which may give rise to a redundancy cost).

The funding provides for an existing LBH employee to provide counselling services in schools to support children with neurodevelopmental conditions. The increase in funding for 25/26 will allow the team to recruit a second coordinator which the service are currently preparing to commence the recruit process. If the funding was not accepted, LBH would either have to find alternative LBH budgets to fund the roles and/or consider terminating the recruitment of the second coordinator and/or consider terminating the contract of the existing coordinator (which may give rise to a redundancy cost).

LBH have just employed a youth worker to support with the role out of emotional support. If the funding was not accepted, LBH would either have to find alternative LBH budgets to fund the role from or consider terminating the existing contract (which may give rise to a redundancy cost)."

EQUALITIES AND SOCIAL INCLUSION IMPLICATIONS AND RISKS

The Public Sector Equality Duty (PSED) under Section 149 of the Equality Act 2010 requires the Council, when exercising its functions, to have 'due regard' to:

- (i) The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- (ii) The need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;
- (iii) Foster good relations between those who have protected characteristics and those who do not.

Note: 'Protected characteristics' are age, sex, race, disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment.

The Council is committed to all of the above in the provision, procurement and commissioning of its services, and the employment of its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing for all Havering residents in respect of socio-economics and health determinants.

The Council seeks to ensure equality, inclusion, and dignity for all in all situations.

There are no equalities and social inclusion implications and risks associated with this decision.

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HEALTH AND WELLBEING IMPLICATIONS AND RISKS

The Health Inequalities Fund will support Havering's Health and Wellbeing Strategy priorities by targeting health inequalities at a local level.

The proposed projects will support disadvantaged or high need population groups (such as vulnerable older people in community and care settings, those adults who are more socioeconomically deprived, families with children with obesity) by prevention and by improving access to health and care and voluntary care services, and improve social interaction and cohesion.

In particular, the activities will have direct impacts on smoking cessation, weight management, healthy diet, physical activity, self-care, care of the housebound, mental health and wellbeing, Opportunity to interact socially with other people will be improved, reducing social isolation, connecting with community support networks to be able to live independently.

Indirect impacts on the population will be through empowered primary and community health and care staff who would be equipped with improved integrated clinical pathways, tools and training. In addition, these schemes link with existing services and the voluntary care sector, further potentiating and sustaining the impact.

A number of schemes that were based on the previous pilots or published evidence will receive the funding. They will tackle health inequalities at individual levels (e.g., local area coordinators, infant feeding coordinators, weight management service), community level (e.g., Community Chest, Homeless People Mental Health, Carers training, over 50s benefit uptake) and population level (e.g., self-service health check offer, BeeWell, Hear to talk Suicide Prevention). Most of these schemes have already been shown to be successful. A few have reduced their capacity as the health inequality gap or the demand has reduced.

Thus, receiving the funds will have net positive implications for the health and wellbeing of the residents.

ENVIRONMENTAL AND CLIMATE CHANGE IMPLICATIONS AND RISKS

None.

BACKGROUND PAPERS

None.

APPENDICES

None.

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Part C – Record of decision

I have made this executive decision in accordance with authority delegated to me by the Leader of the Council and in compliance with the requirements of the Constitution.

Decision

Proposal agreed

Details of decision maker

Signed

Name: Barbara Nicholls

Cabinet Portfolio held:

CMT Member title:

Head of Service title Strategic Director, People

Other manager title:

Date:

Lodging this notice

The signed decision notice must be delivered to Committee Services, in the Town Hall.

For use by Committee Administration

This notice was lodged with me on _____

Signed _____