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## **MINUTES OF A MEETING OF THE HEALTH & WELLBEING BOARD Council Chamber - Town Hall 30 July 2025 (1.00 - 2.56pm)**

### **Present:**

**Elected Members:** Cllr Gillian Ford (Chairman) and Cllr Natasha Summers

**Officers of the Council:** Andrew Blake-Herbert, Mark Ansell, Luke Squires and Samantha Westrop

**NEL ICB:** Kirsty Boettcher, Narinderjit Kullar, and Luke Burton

**Other Organisations:** Fiona Wheeler, Lynn Hollis, Vicki Kong (NHS Clinical Director), Anne-Marie Dean (Healthwatch Havering), Carol White, Paul Rose (Voluntary & Community Sector) and Sarita Symon

**Present Online:** Kurt Ramsden (NECS Pharmacist) and Anthony Wakhisi (Public Health Principal)

### **21 CHAIRMAN'S ANNOUNCEMENTS**

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

### **22 APOLOGIES FOR ABSENCE**

Apologies were received from Councillor Paul McGeary, Councillor Oscar Ford, Barbara Nicholls, Tara Geere, Patrick Odling-Smee and Neil Stubbings. It was noted that Luke Burton, Luke Squires and Kirsty Boettcher would arrive later.

### **23 DISCLOSURE OF INTERESTS**

There were no disclosures of interests.

### **24 MINUTES**

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

### **25 PHARMACEUTICAL NEEDS ASSESSMENT**

The Board were presented with the Pharmaceutical Needs Assessment (PNA) (NHS Pharmaceutical Regulations 2013).

This PNA examined the current provision of pharmacy services in Havering and evaluated potential gaps in service delivery.

**It covered the following areas:**

- An overview of the PNA process, including the identification of localities.
- An analysis of current and future health needs.
- A description of community pharmacies in Havering.
- An evaluation of existing service provision, accessibility, and any gaps.
- Insights into potential future roles for community pharmacies.
- An assessment of community pharmacy's contributions to the Health and Wellbeing Strategy.
- Key findings from stakeholder engagement and the statutory consultation.
- A summary of findings and the PNA statement.

**The Assessment had the following Conclusions:**

**Current provision of necessary services:**

- There is no current gap in the current provision of necessary services during normal working hours across Havering to meet the needs of the population.
- There is no current gap in the current provision of necessary services outside normal working hours across Havering to meet the needs of the population.
- No gaps have been identified in the need for pharmaceutical services in future circumstances across Havering.

**Improvements and better access:**

- There are no gaps in the provision of advanced services at present or in the future (lifetime of this PNA) that would secure improvements or better access in Havering.
- There are no gaps in the provision of enhanced services at present or in the future (lifetime of this PNA) that would secure improvements or better access in Havering.
- Based on current information no current gaps have been identified in respect of securing improvements or better access to locally commissioned services, either now or in specific future (lifetime of this PNA) circumstances across Havering to meet the needs of the population.
- Members noted that pharmacies serve broader roles than dispensing and called for greater national awareness.

The assessment requested that members note and participate in the online consultation (link given).

The Board was asked to confirm approval process for the final report as the next HWB meeting will be after statutory publication deadline (1st October 2025).

## 26 **HEALTHY WEIGHT STRATEGY ANNUAL REPORT**

The purpose of this annual report is was to provide an overview of the progress made in the first year of implementing the Havering Healthy Weight Strategy (approved by Cabinet in May 2024).

The report served as a review document for the strategy's steering group, comprising key partners across the Council, NHS, CVS, and primary care, and was presented to the Health and Wellbeing Board for further scrutiny and guidance.

The Report was introduced by Mark Ansell and presented by Luke Squires.

The Board noted the achievements, challenges, and next steps from the annual report. The board confirmed their continued support and leadership for the strategy.

Members reinforced the shared responsibility across sectors to help embed healthy weight into broader work on health inequalities and prevention.

## 27 **SUICIDE PREVENTION ANNUAL REPORT**

Members were warned that the content of this Annual Report may be emotionally challenging as it discussed suicidality and self-harm.

The report was introduced by Mark Ansell and presented by Samantha Westrop.

It was reported that there had been a significant national increase in the suicide rate in England and Wales, reaching the highest levels since 1999. This rise was observed across both males and females, all adult age groups and particularly among males aged 45–49 and females aged 50–54.

The report stated that in Havering, an average of 18 suicide deaths per year had been recorded over the past decade, with the age-standardised suicide rate remaining higher than the Outer London and Greater London averages (though no longer statistically significant).

### **The board agreed to keep the following priorities within the report:**

1. Adopt and implement a local all-age suicide prevention strategy to ensure best use of local data, intelligence and partnership working
2. Continue reviewing each suspected suicide amongst Havering residents to gather relevant information to inform prevention efforts
3. Gain clarity on the outputs of reviews conducted by wider systems partners and scope possible access to reports with timeline review and

incorporation of finding and recommendations into our local prevention efforts.

4. Scope the possibility of obtaining additional data sources for suspected suicides beyond nRTSSS.
5. Work with GP Practices across the borough to include their expertise in the suspected suicide review panel process.
6. Implement the agreed action plan resulting from the Havering strategy.

The Board approved the recommendations as set out in the report.

## 28 **NHS 10 YEAR PLAN BRIEFING**

The briefing was introduced and presented by Luke Burton.

The briefing summarised the key elements of the NHS 10 year plan.

**Members noted three major shifts and five enabling reforms.**

### **Shifts:**

1. From hospital to community
2. From analogue to digital
3. From treatment to prevention

### **Reforms:**

1. A new operating model
2. Enhanced transparency of quality of care
3. Workforce transformation
4. Innovation and technology
5. Financial sustainability

The briefing stated a strong focus on prevention, and development of Integrated Neighbourhood Teams – adopting a population health approach to supporting local people at a neighbourhood level.

Members noted and discussed the details of this update, setting out the key elements of the NHS 10 Year Plan, and the implications for the London Borough of Havering, and Havering Team at Place.

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**Chairman**