MINUTES OF A MEETING OF THE
PEOPLE OVERVIEW & SCRUTINY SUB COMMITTEE
Appointment Centre Room 7 & 8, Town Hall, Romford
13 January 2026 (7.00 pm)

Present:

COUNCILLORS

Conservative Group	Jason Frost (Chairman) and Judith Holt
Havering Residents' Group	Robby Misir and Christine Smith
Labour Group	Frankie Walker (Vice-Chair)

All decisions were taken with no votes against.

9 **CHAIRMAN'S ANNOUNCEMENTS**

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

10 **APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS**

Apologies were received for the absence of Councillors Jacqueline Williams and co-optee Julie Lamb.

11 **DISCLOSURE OF INTERESTS**

There were no disclosures of interests.

12 **MINUTES**

The minutes of the previous meeting held on 16th September 2025 were agreed as a correct record, subject to the addition of Ian Rusha to those present.

13 **BHRUT WINTER DEMAND MANAGEMENT**

The Sub-Committee received a presentation on the winter demand within BHRUT.

Officers provided a detailed overview of the unprecedented winter pressures facing the Trust. It was reported that attendance at Queens Hospital A&E continued to break records each month. Although the department had originally been designed for approximately 325 attendances per day, it was

now frequently dealing with nearly double that number, resulting in severe overcrowding and increasing reliance on corridor care. It was stressed that the current estate was no longer fit for purpose and that the Trust remained committed to securing the £35 million funding required for the long-planned redevelopment of the emergency department.

It was also described that challenges had been faced due to a significant rise in flu cases, with several wards occupied by flu-positive patients. A further three to four wards were filled with patients awaiting onward community support. Staff were additionally adjusting to the recent implementation of the new Electronic Patient Record, which had initially slowed administrative processes but was expected to stabilise and soon improve performance.

Mental-health-related attendances were also continuing to increase with A&E becoming a default place of safety for many patients. Officers then highlighted the recent move of dialysis services from Queens to St George's, which had created a calmer, more appropriate environment for patients while releasing vital space for future A&E expansion.

During discussion, Members raised concerns about nursing home conveyances, noting that some care providers appeared to be defaulting to ambulance calls rather than carrying out initial triage. Questions were also asked about awareness of the frailty advice line and whether key partners, including care homes, had been provided with correct communication materials. Members sought further clarification regarding the operational status of King George Hospital, the short-term impact of the EPR rollout on waiting times, and the extent to which care-package approvals by the local authority contributed to delays to discharge.

Officers confirmed that communication relating to the frailty advice line would be refreshed and redistributed, including posters and digital notices. They reaffirmed that King George Hospital remained a fully functioning 24-hour A&E and was strategically used to alleviate pressure on Queens. Members were advised that the initial slowdown linked to the EPR rollout had largely been resolved and there should not be any further effects on long-term performance.

The Committee noted the report and made no recommendations.

14 HEALTHWATCH HAVERING ANNUAL REPORT & SAME DAY ACCESS REPORT

The Sub-Committee received a the Healthwatch Havering Annual Report for 2024/25 and Same-Day Access report.

Officers explained that Healthwatch had engaged with a substantial number of residents throughout the year and had published ten reports on local health and social care issues. Officers described the long-term development of the St George's Health and Wellbeing Hub which had taken many years

to bring into operation and had only narrowly proceeded due to late-stage hesitation from central government.

Officers then summarised findings from A&E patient surveys, noting a high proportion of patients who had been sent to A&E by their GP or who had attended because they could not get a GP appointment. Concerns were raised about under-utilisation of alternatives such as Urgent Treatment Centres. Officers also emphasised that despite over 200 defibrillators being registered in the borough, fewer than a quarter were publicly accessible. Healthwatch had successfully persuaded two churches to install publicly available units, and further outreach work, especially in schools, continued.

The Sub-Committee was then presented with the Same-Day Access report. It highlighted that awareness of GP hubs among residents remained low. Many practices either lacked a dedicated website or provided minimal information on booking systems and urgent care options. Residents often found it difficult to reach some hub sites using public transport, which reduced the uptake of available appointments. Members noted that GP reception teams did not consistently signpost patients to same-day hubs, even where appropriate.

Members asked questions about GP referral behaviour, communication with patients, and the accessibility of hubs across the borough. Officers acknowledged that engagement varied significantly between GP practices, with some more receptive to change than others. Members were pleased to hear officers retained confidence that the NHS North East London team would consider Healthwatch's findings when improving the model.

The Sub-Committee noted the report and made no recommendations.

15 **ADOPTION OF THE NEW EDUCATION & EMPLOYMENT SKILLS STRATEGY - PRE-DECISION**

The Sub-Committee received the proposed Education, Employment and Skills Strategy.

Officers outlined that the strategy focused on adults aged 18+ and aligned closely with the borough's Inclusive Growth and Social Value strategies. It was stated that the strategy required no new funding, being fully supported through existing grants, GLA allocations and central government contracts.

It was explained that the strategy aimed to bring adult education and employment support into closer alignment, engage residents at their point of need and guide them towards qualifications, upskilling and employment. Members noted that the Havering Adult College would continue to offer a wide curriculum including digital skills, childcare, hobby learning and vocational provision up to Level 3. Provision would operate through college centres across the borough as well as through online platforms and a new centre in Upminster was expected to broaden access.

Members questioned how the strategy linked with earlier stages of education, particularly for young people aged 18–21 who had disproportionately high unemployment rates. They asked about transitions from school to employment, the role of careers advice, the use of labour-market intelligence and how employers would be involved in shaping future curriculum. Officers responded that early-years and school-age pathways were embedded within the broader education vision and that careers advice requirements for schools were well-established. They confirmed that the Council worked with the DWP, National Careers Service and local employers to analyse skill needs and match provisions accordingly. They also acknowledged that for some learners, moving from Level 2 to 3 programmes represented a substantial increase and that it should be recognised explicitly in the Strategy.

The Sub-Committee **agreed**:

1) That the Strategy should provide clearer emphasis on the concept of the step up from Level 2 to 3
2) That a key explaining suppressed ONS population-survey data should be included in the draft.

16 APPROVAL OF THE HAVERING COMMUNITY SAFETY PARTNERSHIP PLAN 2026-29 - PRE-DECISION

The Sub-Committee received a presentation on the new three-year Havering Community Safety Partnership Plan.

Officers explained that the Plan had been developed using data from the 2024 Strategic Assessment, a multi-agency workshop and an eight-week public consultation. The recommended priorities for the next three years were reducing violence; tackling violence against women and girls, reducing reoffending, addressing anti-social behaviour, tackling acquisitive crime and improving feelings of safety across the borough.

Members noted that the nature of ASB had changed in recent years, with some social housing providers reducing their ASB staffing which made early intervention more difficult. Officers also referred to significant increases in shoplifting which had begun to affect local businesses materially. Havering remained one of the few local authorities without a dedicated ASB team and that upcoming legislative changes in the Police and Crime Act were likely to affect local responsibilities. The importance of joint tasking between Council services, police, enforcement officers and youth teams to address complex issues was highlighted.

Members questioned whether the work of community safety risked duplicating police activity and raised concerns about fly-tipping, enforcement staffing levels and specific ward-level hotspots such as Heaton and Gooshays. Officers explained that fly-tipping was legally categorised as ASB and that, despite staffing limitations, the Council made full use of re-deployable CCTV and cross-departmental intelligence to identify perpetrators. It was confirmed that additional work was being undertaken to

target hotspot wards, with youth diversion programmes and VAWG-related support delivered in partnership with local organisations.

The Sub-Committee noted the report and made no recommendations.

Chairman

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