

ONE Haverhill Partnership Board Meeting MINUTES 16th January 2024 10:00am

Present:

| Board Members | | |
|-------------------------|------|---|
| Andy Hunter | AH | Chair and Headteacher, Samuel Ward Academy |
| Jo Albini | JA | Business Development Manager, Citizens Advice West Suffolk |
| Andrew Bell | AB | Centre Manager, Epicentre |
| Dr David Brandon | DrDB | Clinical Lead GP, Unity Healthcare |
| John Burns | JB | Haverhill Town Council |
| Patrick Hanlon | PH | West Suffolk Council |
| Sarah Hedges | SH | Integrated Transformation Lead for West Suffolk Community and Integrated Services |
| Insp Ben Hollands | ВН | Suffolk Constabulary |
| Julia Nix DL OBE | JN | East Anglia District Manager for Department for Work and Pensions |
| David Roach | DR | Suffolk County Councillor |
| David Smith | DS | Haverhill Town Mayor |
| Warren Smyth | WS | CEO, Abbeycroft Leisure |
| Phil Stittle | PS | West Suffolk College |
| Adelle Stopher | AS | Place Programme Lead for West Suffolk, Public Health Suffolk County Council |
| Amanda Williams (10:20) | AM | National Literary Trust |
| Henry Wilson | HW | REACH Haverhill |
| In Attendance | | |
| Saffron Carter | sc | Reach Haverhill |
| Katie Chappell | KC | Reach Haverhill |
| Jon Eaton | JE | Families and Communities, West Suffolk Council |
| Colin Poole | СР | Haverhill Town Council, Clerk |
| Apologies | | |
| Cllr Bobby Bennett | RB | Suffolk County Council |



| Revd Max Drinkwater | RevdMD | Priest-in-Charge, Haverhill and Withersfield |
|---------------------------|--------|--|
| Councillor Bruce Davidson | BD | Haverhill Town Council |
| Ian Gallin | IG | Chief Executive, West Suffolk Council |
| Andrew Smith | ASm | West Suffolk Council |
| Alex Till | AT | Vice Chair and CEO, MENTA |
| Jane Lomas | JL | Haverhill Town Council, minute taker |

| Item | | ACTION |
|-----------|--|--------|
| 1. | Welcome, Declaration of Interest, Apologies | |
| | Andy Hunter welcomed everyone to the meeting. | |
| | Apologies were received from: | |
| | See above. | |
| | One member of the public was present. | |
| | Declarations of interest: | |
| | None. | |
| 2. | Previous Minutes & Matters Arising from the meeting held 28th September: | |
| | Previous minutes were approved with the following comments: | |
| | Item 6 – Stourview Medical Centre: Dr Brandon gave and update on the potential use | |
| | of the site as part of a broader proposal by the GP Federation. This was a work in | |
| | progress. | |
| | | |
| 4. | Public Speaking: | |
| | None. | |
| 5. | Integrated Health | |
| J. | Sarah Hedges, Integrated Transformation Lead of West Suffolk Community and | |
| | Integrated Services talked through a PowerPoint presentation (appended as a separate | |
| | document). Key points: | |
| | Services are now moving back in | |
| | The timing is outside of clinic times to avoid disruption to service. | |
| | Most adult services will be in by the end of February. | |
| | Some services will remain in their new community bases as this has worked well. | |
| | The provisioning of space is within the framework of the One Public Estate | |
| | Turning Point are keen to come into the health Centre. | |
| | The ICB Locality meeting feeds into the health centre process and also links into the | |
| | West Suffolk Alliance. | |
| | In terms of delivering new services the NHS has the space and access to capital, but | |
| | the availability of staff and logistics of providing services in the community rather than | |
| | centrally is the challenge. | |
| | Dr DB added that this health centre reoccupation process provided an opportunity to | |
| | work with partners to positively present the improvements in local health services that | |
| | have taken place, as it is hard to shake off the perception that nothing has improved. | |



| | AH highlighted that we need to know what to communicate, so the NHS needs to generate the messaging. DB and SH can look into how this can be provided. | DB/SH |
|----|---|-----------|
| | Children's mental health is a big issue, the Mental health in Schools team could provide a presentation for a later Board meeting. | |
| | JN highlighted the overlap between health matters and DWP working to get people into employment. | |
| | SH Highlighted that Social Prescribing now came under the ICB. A paper on the warm handover of this service is appended to these minutes. | |
| | The Chair thanked SH and DB for the update. | |
| 5. | DWP Update on Haverhill | |
| 3. | Julia Nix OBE provided a presentation on DWP activity. The link to the previous discussion on health was very relevant to the work of the DWP, as a good quality job is a boost for the mental health of a person. 2/3 rd of people on ESA have health needs. The largest cohort on ESA in Haverhill is aged 30-39, which is an unusual demographic. | |
| | Dr DB highlighted that the same demographic anomaly exists in healthcare. | |
| | Finding work trials for claimants leads to a job in 80% of cases. It would be great if more employers were willing to give claimants the chance to try a job out for a while. A discussion took place regarding the negative impact on jobseekers of not hearing back from employers. However, various Board members highlighted the logistical challenge of doing so when they are inundated with dozens of poorly executed applications. The assumption was that these are people needing to demonstrate they are applying for jobs to retain their benefits, and putting no effort into the task. JN advised that DWP have not required people to do this for years. | |
| | The in-employment rate is 78%, Unemployment 1.5%, unfilled vacancies are highest in education, transport, social care and engineering. | |
| | The Chair thanked JN for her presentation, which is appended as a separate document. | |
| 6. | Reports from Task Groups | |
| | a) CRIME & ASB (Drug & Alcohol Sub-Group) The Crime and ASB group have not met recently. The Drug and Alcohol Sub-Group has been working on how the new Turning Point contract will work as a partnership. The drug assessment methos will depend on how the client relates to a threshold level of drug use, so the assessment may be by telephone or face to face consultation. | |
| | b) INTEGRATED CARE BOARD SH encouraged members to attend and engage in the locality meetings. | |
| | c) EDUCATION, SKILLS AND EMPLOYMENT CP will call a meeting for this. PS advised that West Suffolk College is organising short courses for soft skills to aid employability. He will be interested in any suggestions from the Board for soft skills deficits to address. | CP All |



| | d) VOLUNTEERING CP advised that the Volunteering In Haverhill Task Group had met on 15th January. Question marks hang over the future of the Volunteer Centre at the Link, as the statistics are not demonstrating a great social return on investment. Costs for staying at The Link are also set to rise in April, but the business model there isn't conducive to the building acting as a drop-in for people considering volunteering. The Town Council will be reviewing options. e) INTERGENERATIONAL WORKING AH is looking to repurpose this as "Cradle to Career" and will provide more information at the next Board. f) HAVERHILL SCIENCE FESTIVAL CP updated the Board on the ongoing preparations for the festival, which takes place | АН |
|----|---|---------------------|
| | 22 nd -27 th April. | |
| 7. | Any Other Business a) Website: JB advised that more work is required to bring the OHP website back up to date. JN suggested Board Members provide some positive case studies for what has been achieved. b) Masterplan: JE advised that there had been a £2m investment into Provincial House. A public realm improvement scheme is being developed. Cabinet are visiting Haverhill to see the town centre. c) JE advised Memories Are Golden dementia day care need to move out of the Unity Trust building in Park Road and are seeking new accommodation, if any of the Board can help that would be really useful. d) AH suggested it would be helpful to capture what impacts the OHP has made to date. SH highlighted the importance of the connections between partners OHP has facilitated. e) JB highlighted the usefulness of presentations to the Board, such as those given at this meeting, and they need to be heard by the public. f) AB suggested it would be useful to have a Board session on what more the Partnership can do to build civic pride. AH agreed this would be a good agenda item for the next meeting. | ALL Ops Group |
| 8. | Dates of Next Meetings | |
| 0. | Thursday, 21 st March 2024 – it was noted that this clashed with Suffolk County Council. Thursday, 20 th June 2024 Thursday, 19 th September 2024 Thursday, 19 th December 2024 will be moved to a new date in early January 2025 – propose Thursday January 16 th 2025 Held at the EpiCentre, Haverhill Research Park, Enterprise Way, Haverhill CB9 7LR | All to note |
| 9. | The Chair thanked everyone for their attendance. | |
| | Meeting closed at 11.51am | |
| | | |



Appendix 1

Sarah Hedge's presentation is appended as a PowerPoint presentation

Appendix 2 - Social Prescribing



Invitation to join the Suffolk Information Partnership and Warm Handover Referral Scheme

Does your organisation support adults, young people or families to improve their wellbeing or manage their health, care or finances? Do you feel that you would like to support your clients with other issues but don't know who to go to or don't have time to fill out numerous referral forms?

Then the Suffolk Information Partnership (SIP) and Warm Handover Referral Scheme (Warm Handover) are for you. The SIP is a <u>network of over 123 organisations in Suffolk</u>, operating countywide or just in local communities. We meet quarterly to get to know each other, share updates on our services and discuss topics of interest. We also produce a newsletter and encourage informal contact amongst partners. To find out more go to the <u>SIP website</u>. If you would like to join send a short paragraph about what your organisation does, your logo and contact details of a person from your organisation to <u>suffolkinformationpartnership@suffolk.gov.uk</u> and you will be added to the SIP mailing list and website.

The Partnership also operates the Warm Handover, a secure process where you can refer a client to several partner organisations on one referral form, providing a wider network of support that you alone could not offer. An example of this could be if you were supporting a client with loneliness and low confidence and in conversation with them you discovered they were struggling financially and were a carer in a challenging situation. By using the referral form you could link them to other organisations that can offer specialist help with these issues in a quick and safe way. Because of the need to protect clients' data, to join the referral scheme we ask for some data protection documents. You can find what is needed to join on the Warm Handover page of the SIP website. If you would like to know more or are



not sure how this might work for your organisation contact suffolkinformationpartnership@suffolk.gov.uk

Both the SIP and Warm Handover are free to join and offer you great networking and time saving benefits. We look forward to welcoming you.

Appendix 3

See separate PowerPoint "DWP Employer Engagement"