

ONE Haverhill Partnership Board

Thursday, 15 January 2026 commencing at 10.00am

Board Members

Henry Wilson, MBE	HW	Chair, and Chief Executive, REACH
Dr David Brandon	DB	Clinical Lead GP, Unity Healthcare
Cllr Bruce Davidson	BD	HTC Councillor
Karen Dennis	KD	DWP, Employer Advisor for Haverhill
Rev Max Drinkwater	MD	Priest-in-Charge, Haverhill and Withersfield
Rev Cat Cox	CC	Assistant Curate, St Mary's Church
Helen Earl	HE	Epicentre Manger
Dr Simon Prestney	SP	Service Director, Unity Healthcare
Cllr David Smith	DS	Haverhill Town Councillor
Jon Eaton	JE	West Suffolk Families and Communities
Colin Poole	CP	Town Clerk, Haverhill Town Council

Apologies

Cllr John Burns	Haverhill Town Council
Cllr Nadia Cenci	Suffolk County Councillor
Ian Gallin	CEO, West Suffolk Council
Cllr Patrick Hanlon	West Suffolk Councillor
Vicky Hogg	Headteacher, Clements Primary Academy
Anne Johnson	Business Development Manager, Citizens Advice West Suffolk
Julia Nix OBE DL,	East Anglia District Manager for Department for Work and Pensions
Vicky Phillips	Deputy Town Clerk
Alex Till	Vice Chair, and CEO, MENTA

Item

ACTION

1. **Welcome**
Henry Wilson opened the meeting.

2. **Apologies**

CP read out the apologies given

3. **Declarations of Interest**

None

4. **Minutes of the meeting held Thursday 6th November 2025**

The minutes were agreed as a true record

5. **Matters arising not on the agenda**

No matters arising except those on the agenda.

6. **Public Speaking**

None

7. **Devolution and Local Government Reorganisation Update**

The meeting noted that the government consultation had concluded on Sunday 11th January. There was no further update expected until the government makes their announcement. It was noted that the government had listed Suffolk as an area asking for the county council elections to be postponed, due to LGR.

8. **Health update**

Dr Brandon gave an update on the reorganisation of health services to become coterminous with Norfolk and Suffolk. There will be a new ICB for Norfolk and Suffolk and there is an implementation programme in hand. There is also a move to have community services delivered in the community (not necessarily in primary care) rather than in hospitals. It is about redesigning outpatient services. In Suffolk, West Suffolk is leading on the development of an integrated community diabetes service, with the premise that only aspects of diabetes care that must be delivered in hospital will remain there. East Suffolk is leading on heart failure. The two will then learn from each other. Public Health data was used to choose the topics. The intention is that wraparound care reduces inpatient admissions.

The disaggregation of services from hospitals will mean new money flows into community-based activity, but without taking existing funding away from hospitals. Basing services in the community should reduce the costs for patients of having to go to hospital for outpatient appointments.

CP raised that phlebotomy was being discussed, and Nick Timothy MP had taken an interest. DB advised that large numbers of blood tests were already done in the community if ordered by a GP but for Addenbrookes hospital consultants requests, the technical process of sending and obtaining results was burdensome, as Addenbrookes IT is not aligned to work with the West Suffolk system.

HW asked what the OHP Board could do to help? DB suggested messaging to take the heat out of discussions, and counter the outdated narrative that Haverhill is poorly served. There has been huge progress in primary care provision in recent years.

SP agreed with this, highlighting the myth that the 'only' way to access GP services was through e-consult. Whilst this was the preferred method, patients could telephone or present in person, and care navigators would complete the e-consult on their behalf.

KD asked if there was a simple guide as to how to access services effectively. SP will look into this.

Action:
SP

DB suggested that when people voice dissatisfaction they should be encouraged to join the Patient Participation Group (PPG) as it was positioned to give voice to concerns directly with GP practices, and needed more (and more diverse) members.

Action:
All to note

HW asked who is the NHS lead for this narrative, so partner can help with the PR? SP volunteered to find out.

Action:
SP

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Promoting Haverhill positively

HW introduced the discussion. He strongly felt there was a need to promote the right messaging about Haverhill. For instance, Haverhill is billed as a 'market town', but the market is struggling. If we hang the reputation of our town on an aspect that isn't really positive, it feeds the negative narrative. HW felt that we should promote the town on the unquestionably good aspects, such as the innovative world-leading businesses based here – look at the reach of businesses at the EpiCentre for instance. And Haverhill's amazing community spirit – as seen in the amazing Christmas carnival parade. HW would like to see:

- a website promoting Haverhill as a place to live, visit and do business.
- an exhibition 'Made in Haverhill'.
- A positive explanation of what the 'Spirit of Enterprise' sculpture is.

DB observed that such positive messaging helps with a sense of pride and belonging, wellbeing and recruitment.

The High Street Task Group is looking to improve the vibe, and hopefully from that the 'offer' from business.

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Tackling Racism – "Kindness Matters"

The task group had met for the first time on this matter, to address intolerance and lack of respect. Promoting kindness improves mental health and wellbeing.

SP: The Action Alliance model such as the Dementia Action Alliance, may be a good model to use for this. SP also highlighted Essex County Council's work in this area: <https://www.essex.gov.uk/news/2025/introducing-kinder-essex>

DB suggested that schools could promote kindness in children with awards for acts of kindness. SP suggested that Haverhill could give Local Hero awards highlighting people who work positively for the community.

MD Suggested the benefits of 'positive exposure' of diversity, citing the excellent contributions to the Civic Service made by dancers from the Mayalee Christian community and the children from Samuel Ward School. Cllr DS agreed, these things can be done if there is a contact person who can facilitate community involvement.

CP asked whether partners had seen the series of positive messages on the digital display boards, in the run up to Christmas, and suggestion of a New year

Resolution to be kind on social media. MD said that people would take in words like kindness and such messages were positive.

KD recalled that in the 1970s there was an 'It's a knockout' type competition between businesses in town, held at the leisure centre which had been really positive. DB asked if the Lions club might be well-placed to promote this sort of activity.

CP advised that the Task Group had discussed a celebration of all cultures (very much including British culture) such as a food festival, but including music and dance. The proposed date is 16th May. The Board thought this was good, and close enough to include traditional English activities for May Day, such as a maypole. CP will take these ideas back to Sara Marsh at the Town Council.

Action:
CP

MD observed that the OHP website needs to reflect diversity.

Action:
HW

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Stourview Wellbeing Centre

Colin Poole advised that exactly one year ago Sarah Hedges and Saffron Carter attended the January 2025 OHP Board to ask for backing for the proposal to create a Health and Wellbeing Hub for Haverhill, at the old Stourview Medical Centre. Yesterday the keys were handed over to the manager and work is apace to get the building ready for opening, first as a warm space. As partners take up space, the centre will open more often, with a proper opening ceremony later in the year.

DB: The provision of a flu & covid vaccination clinic, which was identified by the ICB as an income stream and included in the budget for the Wellbeing Centre, should be co-ordinated to make sure that it doesn't cut across what surgeries do, as it is a source of income. CP confirmed he was happy to have the discussion, but observed that the vaccination clinic was previously based at Stourview and was only relocated this season because of a positive test for legionella.

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Reports from Task Groups

a) **Community Safety** – This task group was meeting soon. The Community Alcohol Partnership launch had been delayed. DB asked if there was the possibility of support from supermarkets in terms of messaging about alcohol misuse. It was thought this might be above the discretion of store managers to agree to. CP highlighted the Ipswich "Reducing the Strength" scheme <https://democracy.ipswich.gov.uk/documents/s25868/LR-19-09%20Reducing%20the%20Strength%20Guidance%20Appendix%201.pdf> which appeared to have been successful <https://eucam.info/2013/04/16/uk-ban-on-super-strength-alcohol-makes-streets-safer/> and asked if such a scheme was in place in Haverhill? This wasn't known.

b) **Integrated Care Board** – Wellbeing Hub had been covered

c) **Education, Skills and Enterprise** – We had not heard back from West Suffolk College as to whether they were willing to lead this Task Group, as they had under David Ruddy.

Action:
Deborah Barton

d) **Cradle to Career** – JE reported that he is working to pick this up again.

- e) **Science Festival** – CP confirmed that the second Haverhill Science Festival was taking place 20th-25th April 2026. Activities for schools had been organised and for the community event on Saturday 25th plans were in-hand.

Action:
All TG
Members

HW asked about the reference on the agenda to targets for task groups. CP advised that the Ops Group had wondered whether task groups could identify what they wanted to achieve in the next year, so that they had something to aim at and not just become a talking shop.

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Any other business

CSET2: CP gave a short update on the meeting HW and he attended, along with Sara Noonan and James Morriss from WSDC Economic Development, with representatives of the Greater Cambridge Partnership and a team of designers, engineers and planners working on CSET2, the off-highway busway from Cambridge biomedical campus to Babraham.

The issue was that the busway effectively terminated at Babraham, meaning onward travel was into the queuing traffic at Fourwentways. This was despite a primary purpose of the busway was to improve travel from/to Haverhill. The 'ask' was to include provision for a spur off the busway to Granta Park via the A505 junction and across the existing bridge. This would allow onward bus travel to Haverhill having bypassed the Fourwentways junction.

Whilst the CSET2 team would not build the provision, they did take on board the importance of protecting the location for such a spur, and not placing immovable infrastructure in the location. CP confirmed that OHP would attend and speak at the planning inquiry. The input from WSDC officers had been excellent, and we had been working in partnership very successfully on this topic.

Forest City: CP had attended an event in Cambridge in December, to hear more about these proposals. He had been asked to speak on how the developers might win over current Haverhill residents. CP had spoken to the meeting, and set out that he felt whilst the Forest City would provide everything the people of Haverhill could possibly want, it would do so a few miles away, destroying any hope of attracting businesses to our High Street, and offering modern housing with all facilities to hand, at the same prices as Haverhill, so undermining house prices.

The proposal, which would see a city the geographical size of Bristol centred on Great Bradley, so reaching Newmarket and Haverhill, and be four times the size of Cambridge, seems completely fanciful. But, as members noted, there were some important and influential names on the Forest City Board, so it would be foolish to ignore or refuse to engage. So the Town Council will maintain a watching brief on how this develops and ensure Haverhill's best interests are voiced.

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Date of next Meeting

Members were asked to note that Vicky Phillips will send out a new doodle poll regarding the 17th April date, as this is a Friday. We are not sure if this is a mistake or if there was a good reason, now forgotten.

Action:
All

Other dates for the year are 16th July and 15th October, both Thursdays. Members are asked to get these dates in their diary.

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Closure

The Chair thanked everyone for their attendance.

Meeting closed at 11.45am