## MINUTES OF THE POPULATION HEALTH AND STRATEGIC COMMISSIONING COMMITTEE

Present:			
Richard Wright (CHAIR)	RW	Interim Chair of NHS Derby and Derbyshire ICB	
Michelle Arrowsmith	MA	Chief Strategy & Delivery Officer, Deputy CEO, Executive lead for PHSCC, DDICB	
Avi Bhatia	AB	Representative for Clinical and Professional Leadership Group	
Robyn Dewis	RD	Director of Public Health, Derby City Council	
Linda Garnett	LG	Interim Chief People Officer, DDICB	
Keith Griffiths	KG	Chief Finance Officer, DDICB	
Dean Howells	DH	Chief Nursing Officer, DDICB	
Steve Hulme	SH	Director of Medicines Management and Clinical Policies, DDICB	
Clive Newman	CN	Director of Primary Care, DDICB	
Adedeji Okubadejo	AO	Non-Exec Director & Chair of the Quality & Performance Committee, DDICB	
Emma Pizzey	EP	GP representative	
James Reilly	JR	Non-Executive Director, DCHS	
Sardip Sandu	SS	Non-Executive Director, UHDB	
Suneeta Teckchandani	ST	Consultant Physician in Acute Medicine, Secondary Care Representative	
Chris Weiner	CW	Executive Medical Director, DDICB	
In Attendance:			
Ruth Batt	RB	Integration Director 999/111, DDICB	
Kevin Watkins	KW	360 Assurance	
Minute Takers:			
Chlinder Jandu	CJ	Corporate Administration Manager, DDICB	
Victoria Wright	VW	Executive Assistant, DDICB	
Apologies:			
Mark Powell	MP	CEO, DHcFT	

## HELD ON THURSDAY 14<sup>TH</sup> MARCH 2024, 11.30AM - 12:30PM

Item No.	Item	Action
PHSCC/2324/ 85	Welcome, introductions and apologies	
	The Chair welcomed everyone to the meeting and explained that this meeting was shorter than usual as there had also been a development session with the group that morning in place of the February development session which had been cancelled.	
	The Chair spoke about how the Development session looked at the future of the committee and emphasised that the committee wanted to focus on activities that they could ensure were adding value on the journey towards the ICS 5 year strategy.	
	The above apologies were noted as were the values and purposes of the Committee:	

	Our Values & Purpose: In delivering their roles and responsibilities, the Committee shall undertake to contribute towards delivery of the following key purposes of	
	<ul> <li>an Integrated Care System:</li> <li>Strive to improve the outcomes in population health and healthcare.</li> <li>Tackle inequalities in outcomes, experience, and access.</li> </ul>	
	<ul> <li>Enhance productivity and value for money; and</li> <li>Assist the NHS in supporting broader social and economic development.</li> </ul>	
PHSCC/2324/	Confirmation of quoracy	
86	The meeting was confirmed as quorate.	
PHSCC/2324/ 87	Declarations of Interest	
	The Chair reminded committee members of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of the ICB.	
	With reference to business to be discussed at this meeting, James Reilly (JR) declared that he had an interest in Item PHSCC/2324/93 - Long Covid 2024/25 Service Proposal. This was due to his position as Non-Executive Director at DCHS.	
	It was agreed that JR he could remain in the meeting for the item but not take part in any vote if required.	
	MINUTES AND MATTERS ARISING	
PHSCC/2324/ 88	Minutes from the meeting held on 11 <sup>th</sup> January 2024	
	The minutes from the meeting were agreed as a true and accurate record.	
PHSCC/2324/ 89	Action Log from the meeting held on 11 <sup>th</sup> January 2024	
	It was noted that there was an action from the last meeting missing from the current Action Log – Chris Weiner (CW) to bring paper back to PHSCC on the proposed CVD Prevention Plan. Victoria Wright (VW) to add this.	VW
	CORPORATE ASSURANCE	
PHSCC/2324/ 90	Risk Register Report	
	Linda Garnett joined the meeting at this point.	
	<b>Key Discussion Points:</b> Regarding the recommendation to approve closure of risk 18 relating to patients accessing their health records:	

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	<ul> <li>Avi Bhatia (AB) voiced concern that the scheme is yet to be fully rolled out and about the impact this could have on General Practice staff time.</li> <li>CW highlighted that the benefits of the scheme must not be forgotten.</li> <li>Clive Newman (CN) reported that the Primary Care subgroup did not consider this to be a major risk.</li> <li>It was agreed to close the risk at committee level and monitor through the Primary Care Subgroup.</li> <li>Regarding the recommendation to approve three new confidential risks:         <ul> <li>Michelle Arrowsmith (MA) outlined each proposed new risk but queried whether the risk sat with Providers rather than this committee.</li> <li>JR and the Chair both highlighted capacity issues are not exclusive to these services.</li> <li>Steve Hulme (SH) indicated that 11C, 12C and 13C are detailing consequences not risk.</li> <li>It was agreed a new risk should be developed regarding all community service commissioning provision and the impact on population health which will be brought to the next committee meeting.</li> <li>It was agreed that the next development session would be a session on Risk and Risk review.</li> </ul> </li> </ul>	
	to the Committee. The Population Health & Strategic Commissioning Committee APPROVED CLOSURE of risk 18 relating to patients accessing their health records. The Population Health & Strategic Commissioning Committee DID NOT APPROVE three NEW confidential risks; risk 11C relating to the podiatry service, risk 12C relating to vasectomy services and risk 13C relating to Tier 3 weight	MA
PHSCC/2324/	management services. Board Assurance Framework	
91	<ul> <li>Key Discussion Points:</li> <li>With regards to strategic risks 7, 8 &amp; 9:</li> <li>The Chair felt the risks were there but had moved on a little.</li> <li>JR mentioned all due dates are quarter 4 so a reframe might be needed.</li> <li>The Chair asked if the committee put all of those actions into place, would it actually reduce risk? The committee is at stocktake point in light of the morning's discussions.</li> </ul>	

PHSCC/2324/ 92 PHSCC/2324/ 93	The Population Health and Strategic Commissioning Committee DISCUSSED the Board Assurance Framework Strategic Risks 7, 8 and 9 for quarter 4 to date. The Population Health and Strategic Commissioning Committee REVIEWED the risk score for each Strategic Risk 7, 8 and 9 for quarter 4 to date. <u>ITEMS FOR DECISION – CONFIDENTIAL</u> Non Emergency Patient Transport Contract Award This was a confidential item so the minutes have been redacted. Long Covid 2024/25 Service Proposal	
	This was a confidential item so the minutes have been redacted.	
	ITEMS FOR INFORMATION	
PHSCC/2324/ 94	<ul> <li>Monthly updates, minutes &amp; bulletins:</li> <li>Derbyshire Prescribing Group report/minutes</li> <li>JAPC Bulletin</li> <li>CPLG minutes</li> </ul>	
	CLOSING ITEMS	
PHSCC/2324/ 95	<ul> <li>Forward Planner</li> <li>The Chair indicated that the Strategic meeting should take place bi-monthly but feels a bi-monthly development meeting would be too much. MA mentioned that the scheduled April meeting could discuss the 2024-25 plan and that a development session on Risk would be scheduled along with another development session in November to look at 2025-26 planning.</li> <li>MA and the Chair to discuss.</li> <li>Post meeting note: Meeting took place on 27<sup>th</sup> March. Agreed development session in May and November. Business meetings will be alternate months (April, June, August, October &amp; December).</li> <li>JR queried the guidance for contracting in regards to the Provider Selection Regime – PSR. What does it mean, and what are the opportunities and threats? MA confirmed that the ICB is setting up a contracting and procurement group who will feed into this committee.</li> </ul>	MA/RW/ CW
PHSCC/2324/ 96	<ul> <li>Assurance questions</li> <li>Has the Committee been attended by all relevant Executive Directors and Senior Managers for assurance purposes? Yes</li> <li>Were the papers presented to the Committee of an appropriate professional standard, did they incorporate detailed reports with sufficient factual information and clear recommendations? Yes</li> </ul>	

Were papers that have already been reported on at another committee presented to you in a summary form? Yes		
Was the content of the papers suitable and appropriate for the public domain? The items for information will be summarised on the ICB Board Assurance report.		
Were the papers sent to Committee members at least 5 working days in advance of the meeting to allow for the review of papers for assurance purposes? Yes		
Does the Committee wish to deep dive any area on the agenda, in more detail at the next meeting, or through a separate meeting with an Executive Director in advance of the next scheduled meeting? YES – on risk		
What recommendations do the Committee want to make to the ICB Board following the assurance process at today's Committee meeting? <i>None all items to be included on the ICB</i> <i>Board Assurance Report</i>		
Any other business		
None.		
DATE AND TIME OF NEXT MEETING		
Date: 11th April 2024		
<b>Time:</b> 9am – 11.30am		
Venue: Derby Council House		