

MINUTES OF THE SYSTEM FINANCE, ESTATES AND DIGITAL COMMITTEE

HELD ON TUESDAY 25 JUNE 2024 VIA MS TEAMS AT 1.30PM

Present:		
Jill Dentith	JED	Non-Executive Director (Chair)
Dawn Atkinson	DA	Programme Director – ICS Digital Programme - on behalf of Jim Austin
Cath Benfield	CB	Deputy Chief Finance Officer, DCHS
Linda Garnett	LG	Interim Chief People Officer, ICB
Keith Griffiths	KG	Chief Finance Officer, ICB
Peter Handford	PH	Chief Finance Officer, DCHS
Steve Heppinstall	SH	Chief Finance Officer, CRH
Tamsin Hooton	TH	Programme Director, Provider Collaborative, JUCD
Rachel Leyland	RL	Deputy Director of Finance, DHcFT - on behalf of James Sabin
Mike Naylor	MN	Director of Finance, EMAS
Stuart Proud	SP	Non-Executive Director, DCHS
Sue Sunderland	SS	Non-Executive Director and Audit Chair, ICB
Craig West	CW	Associate Director of Finance (System Planning) – on behalf of Jason Burn
Susan Whale	SW	Director of System PMO & Improvement
In Attendance:		
Debbie Donaldson	DD	EA to Keith Griffiths, (Minute Taker) ICB
Apologies:		
Jim Austin	JA	Chief Information & Transformation Officer, DCHS/Chief Digital Information Officer, JUCD
Jason Burn	JB	Interim Director of Finance - Operations & Delivery/Deputy CFO, ICB
Chris Clayton	CC	Chief Executive Officer, ICB
Simon Crowther	SC	Chief Financial Officer/Deputy CEO, UHDB
Claire Finn	CF	Director of Operational Finance, UHDB
Ian Lichfield	IL	Non-Executive Director, UHDB
James Sabin	JS	Director of Finance, DHcFT
Item No.	Item	Action
FE2425/401	Welcome, Introductions and Apologies Apologies were received from Jim Austin, Chris Clayton, Claire Finn, Jason Burn, James Sabin, Ian Lichfield, and Simon Crowther.	
FE2425/402	Confirmation of Quoracy The Chair declared that the meeting was quorate.	
FE2425/403	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. Declarations declared by members of the System Finance, Estates and Digital Committee are listed in the ICB's Register of Interests	

	<p>and included with the meeting papers. The Register is also available either via the Executive Assistant to the Board or the ICB website at the following link:</p> <p>www.derbyandderbyshire.icb.nhs.uk</p> <p>No declarations of interest were made.</p>	
<p>FE2425/404</p>	<p>Any points arising from previous ICB Board Meeting</p> <p>The Chair highlighted the following:</p> <ul style="list-style-type: none"> • It was noted that there had not been an ICB Board meeting since the last Committee meeting. However, there had been a Board Development Session held on 20 June 2024, primarily regarding Primary Care and the Joint Forward Plan. • The Primary Care element had been interesting in terms of thinking about efficiency and how we could build this into our efficiency programme as we moved forward. • The Chair reported that we needed to think about how we were capturing some of those new initiatives in Primary Care and building them into the efficiency programme. • Keith Griffiths reported that on the back of the discussions at the Board Development Session, he felt it would be a good idea to bring something to this Committee regarding the financing arrangements and the financial strategy that was emerging from NHSE regarding PODs. With a focus of how this would affect us and particularly regarding what we wanted to do with that money to improve the service and reduce health inequalities. • Keith Griffiths reported that we also needed to bring a short summary, at a future date, regarding the funding for Primary Care over the last 3-4 years. This would include the funding mechanisms and risks around supporting PCNs and Provider Boards. • Keith Griffiths requested that both items be scheduled on the same agenda for the August meeting of this Committee. The Chair requested that these two items be included on the forward planner. 	<p>KG</p>
FINANCE		
<p>FE2425/405</p>	<p>M2 System Finance Report</p> <p>Craig West presented M2 System Finance Report and highlighted the following key points:</p> <ul style="list-style-type: none"> • On 2 May 2024 JUCD submitted a financial plan for 2024/25 to deliver a planned deficit of £68.8m (excluding the technical adjustment relating to UK GAAP treatment of the PFI). • At the System Review Meeting (SRM) with the national team on 10 May 2024, JUCD was challenged to improve the position further. • It was noted that there had then been a national requirement for all Systems to re-submit their plans on 12 June 2024 and JUCD 	

	<p>submitted a revised financial plan to deliver a planned deficit of £50.0m, in line with the Revenue Financial Plan Limit set for the ICS.</p> <ul style="list-style-type: none"> • It was noted that Systems who had submitted a plan in line with their Revenue Financial Plan Limit would receive a non-recurrent deficit support revenue allocation in 2024/25 equal to the value of their deficit limit. Effectively for JUCD this would take us to a breakeven position for this year. It was expected we would start to receive this allocation in M4. That deficit support would need to be paid back and on top of this, Systems would be expected to operate within their total allocation; we would be expected to manage and absorb all other pressures. • Due to the timing of this updated plan submission, the national reporting requirements for M2 were based on information included in the original plan submission (2 May). This paper therefore included figures in line with those nationally reported but also provided details of the plan submitted on 12 June. • Payments would be amended for M3 to reflect the movement to the agreed £50m deficit. • As at 31 May 2024, the System had a year to date position of £23.4m deficit compared with the planned deficit of £23.0m, an adverse variance to plan of £0.4m. The annual forecast was for the position to be in line with the total planned deficit by the end of the financial year. • The main reason for the variance to plan to date was the under-delivery of efficiencies. In light of the current under-delivery, together with a planned increase in delivery from Q2 there was a pressing need to quickly identify and develop opportunities into deliverable schemes in order to recover the shortfall and deliver the full efficiency target for the year. It was also important to ensure delivery was on a recurrent basis to reduce the risk to the underlying position and the impact in future financial years. • All organisations remained committed to delivering the planned position for the financial year. • The plan was ambitious and therefore contained a high value of risk and these risks were being closely monitored at this stage. • The level of efficiency was a key risk and was behind plan by £3.4m at M2. • Given the stepped increase in delivery required from Q2, and with us already being behind in M2, there was an urgent need to identify and mobilise cash releasing schemes to achieve this. • Progress had been made in ensuring the ePMO system was reflective of the efficiency position. It was noted that in light of 12 June submission, there was a need to ensure that the ePMO was updated and reconciled for M3 reporting including that latest profile. • In terms of workforce, at M2 all Providers were currently under established, mainly relating to substantive staff. This meant that total staff costs were under plan by £1.5m to date but were forecast to be in line with the plan by the end of the year. • In terms of agency costs, whilst being over plan at M2, was still below the required national maximum percentage and all organisations were forecasting to achieve their agency plan. 	
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	<ul style="list-style-type: none"> • Capital – the System currently had slippage in year to date relating to delays in the DCHS Bakewell project but was expected to finish on plan by end of the year. • The ICS Provider Capital Plans have had to be reprioritised to take into account the £1.3m reduction recently applied to the 24/25 allocation, that was as a result of the non-recurrent revenue support which had been deemed to be above our fair share level nationally. • Our reduction allocation puts further pressure on the ability to spend capital to support recovery and service improvement, which was a growing concern particularly across Provider Boards. • Risks and issues for 24/25 relating to capital were still emerging and would require more review over the coming months in order to quantify the impact on scheme delivery and the impact on meeting expected expenditure targets. • In terms of cash, both CRH and UHDB had submitted cash support requests to help manage cash balances in Q1 for 24/25. • Keith Griffiths reported that we were pretty much on track at M2. CIP was always going to be the biggest risk, and there were some mitigations in one or two organisations for the CIP performance in the first couple of months. We needed to focus on ensuring that we delivered the £169m, and the 5%; this would be challenging for every organisation. • It was hoped that the cash situation would improve once we get the £50m flowing in a few months, but in the short term, clearly there was a cash interest charge on what we had to borrow. Keith Griffiths felt that we were not in a bad place at the end of M2 despite the challenges. • Rachel Leyland referred to the capital risk, she did not want Committee to forget about the Dorms cost pressure detailed in the report to Committee last month. • Keith Griffiths reported that given the environment we were in and the prognosis for the next couple of years, we needed to ask ourselves whether we could afford the revenue consequences of the capital plans. If we were going to spend money, we needed to ensure they were fully aligned into the System and/or organisational space. It was noted that in future we could not take all the capital that was available; we may not be able to afford the consequences of that, even though there was a desperate need for capital spend. • Stuart Proud referred to the finance paper which talked about the size of the risks that we were carrying around our financial situation, £121m in terms of risk, and referred to Craig West's statement earlier that we were expected to absorb all pressures. He asked what would happen if we could not absorb all the pressures? If we were seen to not be managing our position, what would the process be around that? He then asked in terms of us having to pay back the money, if we needed to, would this be phased, or would we need to pay it back next year? • Keith Griffiths reported that we had not got another £120m risk on top of the plan that had gone in at £50m, it was the operational delivery of that plan given the scale of the CIP. If we delivered 	
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	<p>CIP and managed the workforce reductions and other commitments, then that risk should never materialise. We needed to stay on track with our commitments and the risk would diminish over the next couple of months. If we did not, and we missed our £50m we would be back in the realms of missing the target and having cash issues, and it remained to be seen what penalties would be applied nationally to any organisation in that position.</p> <ul style="list-style-type: none"> • Regarding the prognosis for 25/26 repayment, it was noted that there was a separate slide that would describe some of the legacy agreements that we still had to deal with as well as the £50m. It was noted that the finance community were working in a very difficult stretch environment currently. • Peter Handford reported that capital was badly constrained for several reasons, and we needed to think about the revenue implications, but it also constrained our ability to deliver some of the transformational changes we wanted, as capital was not necessarily adding to the cost base, it could actually be about doing something really creative to reduce the cost base we had. • Peter Handford asked at what point the support for this year may go off track, as we started reporting deficits above the £50m, he felt that was an inevitability at some point noting that we were usually back on track by the end of the year. He wondered how clear the message had gone out to organisations that it was not acceptable this year to talk about an H2 reset. • Keith Griffiths reported that currently he was not expecting an H2 reset, and it was clear that there was no additional funding. It was noted that it was early days and considering a H2 reset in 12 weeks would seem premature. He reported that the message from NHSE regarding absorbing pressures with the Junior Doctors, and possibly GPs, strike could pose an issue if they went ahead. There may be the opportunity for a H2 reset or some additional resources in Q3 or Q4 depending on the scale of the industrial actions. • Keith Griffiths stressed the importance of delivering what we had committed to deliver in the plan regardless of the election outcomes. • The Chair reported that Committee would wait for the M3 return. It was noted that there was a need to hold the line as far as we possibly could, in terms of delivering the plan as agreed in the second submission. <p>Keith Griffiths shared a single slide, entitled Financial Impact on 25/26, a copy of which would be circulated to members after this meeting for information.</p> <p>Keith Griffiths highlighted the following:</p> <ul style="list-style-type: none"> • The slide indicated what national policy meant for 25/26. • £50m to get to breakeven this year would need to be repaid. It was unclear whether this would be over 1 or 3 years. Best estimate was that it would be somewhere between £50m and £18m to be paid back next year. 	<p>DD</p>
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	<ul style="list-style-type: none"> • We already had an underlying £50m deficit that would need covering. If we had a breakeven plan for 25/26, we not only needed to pay the loan from this year, but we needed to remove the underlying deficit of £50m. • We were also continuing with the convergence policy from pre-Covid, which was circa £20m from next year; that was year 5 of the convergence policy. • Because of deficits in 22/23 and 23/24, we had further repayments totalling £16.9m, that equated to £2.8m for the second year of the 22/23-year deficit and £14m being a third of the £42m deficit that we ended with last year; this was with the repayments over a 3-year principle. • On top of that we were going to have at least a 3% CIP target to find next year. • On capital there was a potential £4m issue - because of the deficit last year we could not gain access to £2.8m worth of additional capital. In addition, as the deficit last year was deemed to be above our fair share of the deficit; a further £1.3m would be removed. • The total of these estimates was £245.9m. Whilst recognising that we do not yet know the full business rules for 25/26, and this list was not exhaustive, it provided context to the financial position for 25/26 that would need to be absorbed if the System was to achieve a breakeven in 25/26, and if NHSE applied the rules as currently articulated. • It was noted the System was moving into a very challenging times, which could change depending on what the forthcoming election. It was noted however, that the Derbyshire System was in a better position than a lot of other Systems given the scale of deficits last year and the scale of their deficits in 24/25. It was important that Committee were sighted on the political and regulatory environment. <p>The System Finance, Estates & Digital Committee NOTED the M02 Joined Up Care Derbyshire System (JUCD) financial position and the actions taken to ensure the delivery of the financial plan.</p>	
DIGITAL		
<p>FE2424/406</p>	<p>Digital Update</p> <p>Dawn Atkinson presented the Digital Update report and highlighted the following:</p> <ul style="list-style-type: none"> • Electronic Patient Record (EPR) Programme at UHDB and CRH - Following contract signing on the 16 April and the formal commencement of the programme of work with Nervecentre a high-level programme plan had been prepared and implementation timelines created. • Badgernet (replacement Maternity system) went live at UHDB last week and had gone well. • Further detailed work on the benefits realisation framework had been undertaken to determine whether efficiencies identified in 	

	<p>the EPR business case could be pulled forward 25/26 and 26/27 financial years. The output of the work was being shared via the EPR governance structure.</p> <ul style="list-style-type: none"> • Derbyshire Shared Care Record (DSCR) - An option appraisal paper was received at D3B last week, regarding the continued need for the Medical Interoperability Gateway (MIG). MIG was a secure middleware technology which enabled the two-way exchange of Primary Care patient information between health and social care organisations. The DSCR was reliant upon the MIG currently for the GP data to be viewed within the DSCR to support the delivery of direct patient care. The cost of the MIG contract had increased over the last two years and an option appraisal had been undertaken to assess if alternative cost-effective solutions were available. The outcome of the review recommended using GP Connect in the long term but there was no cost-effective alternative in the short term. GP Connect was an NHSE initiative and although no costs, the accreditation process was very lengthy for suppliers and there were significant costs associated with GP Connect from a supplier's perspective to implement. Orion Health (DSCR solution supplier) was going through the full accreditation process and until this had successfully been completed MIG would continue to be required. • Cyber Security - All organisations within JUCD had active cyber security programmes. It was noted that as those organisations sought to integrate and work more closely together the risks and benefits of this would be reviewed. To be more effective in addressing the risk and responding to any incident, JUCD would co-ordinate its security. The JUCD Cyber Group was undertaking a programme of activities to progress its cyber position and the output would be shared via the appropriate organisational and system forums. • Reference was made to the cyber-attack in London affecting shared pathology systems. This was one of the areas where work on the Multi-Factor Authorisation process (MFA) was taking place. It was noted that all our organisations were well on target to achieve 100% MFA by end of June. • Digital Maturity Assessment (DMA) - The 24/25 DMA was the second assessment year for Integrated Care Systems (ICSs and Secondary Care Providers and the first year for Primary Care Practice Capabilities survey (completed by ICB Primary Care Leads)). All JUCD organisations submitted their survey questions via the portal in line with the national timelines. • DMA Validation process - The survey results validation process was scheduled to commence 13 May with survey amendments being completed 17 June. However, due to technical issues regarding how survey data was being pulled through to the results hub this was not achieved. The validation deadline had now been extended until 10 July 2024, and to support the process DMA Maturity Descriptors had been developed for all survey questions and score levels. A validation support tool had also been developed to help understand how scoring had been attributed to allow organisations to confirm and challenge levels and request changes to score where appropriate. 	
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	<ul style="list-style-type: none"> • As part of the on-going validation of ICS and Providers survey responses and attributed scores, a workshop was being held on 19 June 2024 led by the Midlands Regional team. The workshop would focus on the DMA journey and current position, ICS and Provider calibration of scores, review of the Digital Capabilities Framework status for Providers and action planning. • Digital Workforce Planning – (Attain): The final draft Digital Workforce Plan report was available following a comprehensive workforce data and analysis process. The development of the report also reviewed system and organisational digital and data strategies to ascertain the priority areas for workforce requirements to execute plans. The workforce plan report was extensive and signposted challenges and opportunities regarding the JUCD Digital, Data and Technology DDaT workforce. • Developing a delivery plan for all initiatives was the ambition, however, following discussion it was agreed to prioritise: <ul style="list-style-type: none"> • Apprenticeship Strategy: to grow the supply pipeline and support existing talent. • Career Frameworks: to maximise the skills of the workforce and support retention. • It was noted that the priorities aligned to the emerging national DDaT workforce plan action areas. • In relation to MIG it was estimated that the cost would be around £150k which would be apportioned across those Providers that currently contributed to the Shared Care Record (SCR). • The Chair noted it was important to establish joint working across different Providers to ensure a System approach to the digital challenges. <p>The System Finance, Estates & Digital Committee NOTED the Digital Programme update report.</p>	
TRANSFORMATION/CONTINUOUS IMPROVEMENT		
<p>FE2425/407</p>	<p>Transformation Report</p> <p>Susan Whale reported that this paper provided a summarised report on the System Transformation Programmes and delivery during M2 2024-25.</p> <p>The following was highlighted:</p> <ul style="list-style-type: none"> • Table 1 showed what had been transacted by way of CIP in M2 (this was subject to change), and the ePMO would be updated with the revised phasing for the new plan; this was underway and would be completed this week. • At M2 the transacted plans loaded to the ePMO totalled £11.8m against the cumulative M2 plan of £21.4m. This was an increase of £8.4m compared to £3.4m that was transacted in M1. • Of the £11.8m plans uploaded to the ePMO, £5.2m were recurrent efficiencies, 5.1% of the £102.7m recurrent plan 	

	<p>submission for 2024-25. Providers had reported that the phasing of planned efficiencies was weighted towards the end of the financial year.</p> <ul style="list-style-type: none"> • Table 2 showed the progress that had been made at Provider level in identifying efficiency schemes for 2024-25. These figures show the split between actual identified schemes and those that remained as identified opportunities within the ePMO where risk to delivery remained. The gap shown combined the actual scheme and opportunity figures together and assumed that all identified opportunities would be realised. • Most Provider schemes currently identified were transactional rather than transformational, but this was expected to develop over the year. • The revised system financial plan was resubmitted on 12th June 2024. Follow up work was now needed to reconcile the revised plan profile from re-submission to the profile held within the ePMO. • Further work to look at efficiency plans through a transformation lens, building on the work that was completed last year, would be undertaken now that the final plan had been submitted. <p>Estates</p> <p>Cath Benfield gave an update regarding the initial estates work being undertaken and highlighted the following:</p> <ul style="list-style-type: none"> • Identifying opportunities around some short-term leasehold opportunities had commenced. These had been shared with Committee at its last meeting and with Provider Collaborative Leadership Board. • Feasibility work had commenced to review how deliverable some of those opportunities would be. Clearly there was a timeline attached to those dependent upon review dates. This also hinged on the robustness/completeness of underpinning estates data held. • There were ongoing discussions regarding how we might take the Estates Programme and Strategy forward, which would be concluded over the coming weeks. <p>Procurement</p> <p>Cath Benfield gave an update regarding the work around procurement and highlighted the following:</p> <ul style="list-style-type: none"> • This Committee had previously received updates on the work around procurement. Work was taking place looking at contract dates and aligning them to understand whether there were some opportunities for System wide procurement. • Teams were being brought together to foster a culture of collaboration and to socialise some of this work within sovereign organisations. • Provider Collaborative Leadership Board was keen to redesign and remodel back office and support functions and those 	
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	<p>discussions were in an early development stage. A steering group had been established, with leads identified, and they were moving to scope this. It was noted that we needed to understand those opportunities across all partner organisations. It was important that this work took place at scale to ensure delivery of improvements, operational efficiency, and cash releasing efficiencies.</p> <p>Susan Whale reported that the last part of the paper highlighted key achievements and milestones achieved at Delivery Board level over the last few weeks and also showed where some of the CIP programmes had already contributed, or would be contributing, towards financial efficiency.</p> <ul style="list-style-type: none"> • The Audit Chair referred to the section of the paper that reported Delivery Boards were under review and on the proposals for integrating performance and productivity assurance meetings. She asked how developed these proposals were and how they would link into the main Committee structures; she felt this was a key element to ensure we moved towards transformation and some of the transformation work. Susan Whale reported that discussions were still underway, and she hoped to report on progress in due course. • The Chair noted that Delivery Board governance was discussed at the Board Development Session. There had been conversations regarding Committees, System Committees, and the assurance that we could give up the chain of command. The Chair noted this was a work in progress but welcomed the suggestion of further reports on progress made. • Stuart Proud noted from the table in the covering document that at M2 84% of the target had either been embedded in existing schemes, or we had identified opportunities for things to be done; this felt like a healthy position to be in. However, when looking through the detail, we started to lose a little bit of assurance and that the risks were actually greater than first appeared. It was noted that UHDB had got £30m lumped in as an opportunity, Stuart Proud asked whether there were any rules/minimum requirements regarding what was uploaded onto the ePMO so that we were only getting things that were true schemes. • Susan Whale reported that the paper separated out opportunities. Opportunities had to be properly worked through with clear deliverables or a phasing plan, where the money was coming from, down to cost centre levels; there was rigor in the ePMO to move things along, but she had tried to capture the opportunities in order to work those through to get to an accurate position. In relation to the UHDB £30m position, they were working with KPMG to develop what that scheme would look like, and more information would be provided in due course. • Keith Griffiths reported on a meeting with Kathy McLean and System Executives to discuss where we were with transformation. It was noted that from that session it had been clear that the things we were looking at would help close the 5% CIP gap rather than close the underlying £50m deficit gap. We had a lot of work to do across the Provider Collaborative, our 	
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	<p>respective Boards and the ICB to come up with a plan for 25/26 that would give us confidence about a breakeven underlying position, which was transformation at a different scale and pace.</p> <ul style="list-style-type: none"> • Cath Benfield agreed for the need to ramp up efforts around transformation, but wanted to acknowledge the work that Susan Whale was leading with the Programme Directors and others in terms of the benefits realisation approach. If we started to articulate in a more robust way the impact of transformation we already had in train, albeit not on the scale that we needed, it would start to build confidence across the system. It was hoped that there would be a groundswell of confidence and optimism about what the transformation programme could deliver. • The Chair noted that there was obviously a lot of work going on but noted that there was still further work to do. <p>The Finance, Estates & Digital Committee NOTED the Transformation and Efficiency Report.</p>	
RISK MANAGEMENT		
<p>FE2425/408</p>	<p>Risk Report</p> <p>Craig West presented the Risk Report and highlighted the following:</p> <ul style="list-style-type: none"> • Committee was asked to approve the split of Risk 06 into two separate risks; 06A focused on the delivery of the 24/25 financial plan and 6B would focus on the delivery of the two-year breakeven. • It was proposed that 06B would have a score of a very high 15, probability of 3 and an impact of 5. • It was noted that Committee at its meeting on 28 May had moved the score of Risk 06A from a very high 20 to a very high 25 in view of the £50m deficit plan submission. • A new risk was proposed to be created (Risk 32) linked to the capital programme and delivery. The risk description, risk score and mitigations were currently being populated, and would be brought back to the next Committee meeting. • The Audit Chair referred to Risk 06A, she understood why Committee believed the risks were very high but reported that if we had a score of 5 x 5 for this risk (at this stage in the year), that effectively meant we believed we were going to fail to breakeven, and it would not give us much room for manoeuvre if things got worse. At this point in time, she felt on reflection that score would be too high; she suggested that it should be a score of 20 (4 x 5). • Keith Griffiths reported that when we last had a discussion regarding this risk, we were still trying to get a plan to live within the £50m ask, and we were not sure how we were going to do that. The plan had now gone in, which gave clear identifiable actions and opportunities for us to get to £50m and he agreed with the Audit Chairs suggestion of reducing the score for Risk 06A. • Stuart Proud reported that he felt that the score for Risk 06B was too low given the size of the task, he suggested that it should be a 4 x 5 or even a 5 x 5. 	

	<p>The System Finance, Estates and Digital Committee:</p> <ul style="list-style-type: none"> • RECEIVED and DISCUSSED both the corporate risks responsible to the Committee and the associated System Finance, Estates and Digital Committee (SFEDC) risk log. • APPROVED the split of Risk 06 into two separate risks, 06A and 06B. • APPROVED that Risk 06A should have a score of 4 x 5 and that Risk 06B should have a score of 4 x 5. • NOTED new Risk 32 linked to the Capital Programme and Delivery, this risk was currently a work in progress. 	
<p>FE2425/409</p>	<p>Board Assurance Report</p> <p>Craig West reported that two strategic risks had been identified that were the responsibility of System Finance, Estates and Digital Committee:</p> <p><u>Strategic Risk 4</u> - <i>There is a risk that the NHS in Derby and Derbyshire is unable to reduce costs and improve productivity to enable the ICB to move to a sustainable financial position and achieve best value from the £3.4 billion available funding.</i></p> <p>This risk was proposed to be increased in score from a very high 20 to a very high score of 25, effective from June 2024.</p> <p>It was noted that bearing in mind the conversation regarding Risk 06A above, Committee agreed that the score of Strategic Risk 4 should be held at a very high 20 rather than increasing to 25 as suggested in this month's BAF report.</p> <p><u>Strategic Risk 10</u> - <i>There is a risk that the system does not identify, prioritise, and adequately resource digital transformation in order to improve outcomes and enhance efficiency.</i></p> <p>This risk was scored at a high 12. Given the current financial environment and planning outturns, alongside some continuing national funding streams, no change to the current risk score had been proposed. Committee agreed with this proposal.</p> <p>Updates for Q4 were highlighted in blue. Meetings had taken place during Q1 with the relevant leads to review and update the relevant gaps and actions. There were no completed actions to detail for Q1 2024/25.</p> <p>The System Finance, Estates and Digital Committee:</p> <ul style="list-style-type: none"> • AGREED that Strategic Risk 4 score should be held at a very high 20. • AGREED that Strategic Risk 10 score should remain unchanged at a high 12. 	

<p>FE2425/410</p>	<p>Committee Annual Report and Self-Assessment</p> <p>The Chair reported that it was a requirement for Committees of the ICB to produce an Annual Report each financial year, as set out in the Terms of Reference.</p> <p>The Chair highlighted the following:</p> <ul style="list-style-type: none"> • Membership of this Committee had been discussed. • Timing of papers – this Committee had agreed to waive the five working day arrangement to receive papers to enable them to receive the most up to date information. • The Chair thanked members and officers for their contributions throughout the last year. • Attendance – it was noted that Ian Lichfield, Non-Executive Member, found it difficult to attend these meetings due to conflicting commitments. The Chair reported that she had requested a meeting be arranged with non-Executives who had responsibility for a finance portfolio across the System, to discuss our financial situation and representation at the meeting. • Members felt that the Committee Annual Report accurately reflected what this Committee had reviewed over the last year. <p><u>Self-Assessment 2023/24</u></p> <p>The Chair reported that members of System Finance, Estates and Digital Committee had been invited to participate in a self-assessment exercise in May 2024. This exercise was supported through an online survey tool and was issued to all members via email.</p> <p>This report provided the Committee with a summary of responses to the self-assessment. It was noted that six members responded, and the survey consisted of ten questions. Each question’s response was detailed within the report, together with the Chair’s personal thoughts and comments.</p> <p>The Chair requested a meeting with Keith Griffiths to discuss how Committee would use this information, how it could add value, and to propose a way forward. Debbie Donaldson to arrange.</p> <p>The System Finance, Estates & Digital Committee:</p> <ul style="list-style-type: none"> • APPROVED the Committee's Annual Report 2023/24. • NOTED the Committee's Self-Assessment 2023/24. 	<p>JED/DD</p> <p>DD</p>
<p>MINUTES AND MATTERS ARISING</p>		
<p>FE2425/411</p>	<p>Minutes from the Meeting held on Tuesday 28 May 2024</p> <p>The minutes from the meeting held on Tuesday 28 May 2024 were agreed as a true and accurate record.</p>	

FE2425/412	Action Log from the meeting held on Tuesday 28 May 2024 The action log was reviewed.	
CLOSING ITEMS		
FE2425/413	Any Other Business The Chair reported that this would be Linda Garnett's last System Finance, Estates and Digital Committee before she took retirement from the ICB. The Chair and Committee wished her all the best and thanked her for her hard work around workforce issues. There was no further business.	
FE2425/414	Escalations to Other Committees The Chair reported that an Assurance Report would be prepared giving key highlights from today's meeting and forwarded for inclusion within the next ICB Board agenda pack.	KG
FE2425/415	Finance, Estates and Digital Committee Forward Planner The Committee forward planner for 2024-25 was noted.	
ASSURANCE QUESTIONS		
1.	Has the Committee been attended by all relevant Executive Directors and Senior Managers for assurance purposes? YES	
2.	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	
3.	Has the committee discussed everything identified under the BAF and/or Risk Register, and are there any changes to be made to these documents as a result of these discussions? YES	
4.	Were papers that have already been reported on at another committee presented to you in a summary form? YES	
5.	Was the content of the papers suitable and appropriate for the public domain? YES	
6.	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? NO	
7.	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? Funding Mechanisms for Primary Care - Deep Dive to be schedule for August 2024 (KG)	
8.	What recommendations do the Committee want to make to the ICB Board following the assurance process at today's Committee meeting? AN ASSURANCE REPORT WOULD BE PREPARED FOR THE ICB BOARD.	
DATE AND TIME OF NEXT MEETING		
Date: Tuesday 23 July 2024		
Time: 1.30pm		
Venue: MS Teams		