

HIGHLAND NHS BOARD	Assynt House Beechwood Park Inverness IV2 3BW Tel: 01463 717123 Fax: 01463 235189 www.nhshighland.scot.nhs.uk	
MINUTE of MEETING of the POPULATION HEALTH AND PLANNING COMMITTEE	02 October 2025 at 3.00pm	

Present:

Gerard O'Brien, Non-Executive Director (Chair)
 Gareth Adkins, Director of People and Culture
 Alex Anderson, Non-Executive Director
 Emily Austin, Non-Executive Director
 Heledd Cooper, Director of Finance
 Sarah Compton-Bishop, Board Chair
 Fiona Davies, Chief Executive
 Jennifer Davies, Director of Public Health and Policy
 Arlene Johnstone, Chief Officer for Highland Health and Social Care Partnership
 Karen Leach, Non-Executive Director
 Philip MacRae, Non-Executive Director
 Richard MacDonald, Director of Estates, Facilities and Capital Planning
 David Park, Deputy Chief Executive
 Carol Spratt, Service Manager
 Allyson Turnbull-Jukes, Non-Executive Director

In Attendance:

Natalie Booth, Board Governance Assistant
 Kristin Gillies, Interim Head of Strategy and Transformation
 Jo McBain, Director of Allied Healthcare Professionals
 Nathan Ware, Governance and Corporate Records Manager
 Dominic Watson, Head of Corporate Governance

1 WELCOME AND APOLOGIES

The Chair welcomed everyone to the meeting. An apology for absence was received from L Bussell.

1.2 Declarations of Interest

No Declarations of Interest were received.

2 PERFORMANCE AND SERVICE DELIVERY

2.1 Development of the Strategic Framework 2025/2026

The Interim Head of Strategy and Transformation presented slides outlining the development of NHS Highland's Strategic Framework for 2025/2026. The Board had previously agreed to bring forward the cease date for the "Together We Care" strategy to 2026, with the new framework scheduled for presentation in March 2026 ahead of a 10-year strategy in 2026 to 2027. Key milestones included Board approval in May 2025, publication of three strategic products in June, and development sessions held in August and September with support from Public Health Scotland and Senior Leadership Teams. The three products, Operational Improvement Plan, Service Renewal Framework, and Population Health Framework, shared themes of person-centred care, equity, and community focus, with 170 actions identified.

A population health model adapted from the King's Fund was proposed, with an August workshop highlighting the need for a flexible, outcome driven framework to address health inequalities and support system wide collaboration. Governance structures were being mapped to support delivery, with input from committees and advisory groups. Engagement materials, including infographics and naming ideas such as "Healthy Future" and "Highland Cares," were in development, alongside a proposed naming competition to encourage staff and stakeholder involvement. The strategy aimed to balance financial sustainability with ambition, shift focus from services to population needs and promote data informed decision making.

In discussion, the following points were raised:

- The Chief Executive highlighted the importance of using data and insight to confidently influence national policy, ensuring a two-way dialogue with government that reflects local priorities.
- Members agreed the strategy must reflect local priorities, not just replicate government policy, with population data guiding meaningful action.
- The Board Chair supported a Highland-focused strategy and felt a clear, community-based plan would help navigate future uncertainty and address inequalities effectively.
- The Deputy Chief Executive emphasised the strategy must be ambitious yet realistic, recognising constraints while providing a clear reference point to guide both tactical and strategic discussions.
- Members appreciated the clarity of the four pillars diagram and supported starting with local needs rather than trying to meet all external strategic objectives.
- The Director of Public Health and Policy welcomed the committee's focus and stressed the need to combine data, insight, and evidence to strengthen efforts and improve outcomes for the local population.
- The Chief Executive stated that improving population health required the Board to focus beyond direct care, developing new skills, methods, and communication to support ambitious, outcome-driven change.
- Members warned without clear communication; staff may resist change and stressed the strategy must be simple and easily understood at all levels.
- The Interim Head of Strategy and Transformation supported visual tools like the four pillars to aid staff understanding and engagement.
- Members stressed the importance of clear community communication and balancing local authority with government direction.
- The Director of People and Culture reflected on the importance of clearly defining outcomes and outlining key steps within a route map to guide delivery. He noted that previous strategies were overly aspirational and lacked practical milestones, stressing the need for a balanced, flexible approach with realistic timeframes.
- The Chief Executive described the strategy as a clear, simple message above the surface, supported by detailed planning beneath, to ensure proportionate delivery within organisational capacity.

- The Board Chair emphasised that ambition and a clear, deliverable plan must work together to build confidence and maintain momentum in achieving strategic goals.
- The Deputy Chief Executive reflected on next steps, noting the discussion had helped shape thinking around strategy development. The executive team was formulating a plan, with committee oversight to validate progress, and emphasised the importance of regular engagement and consultation to ensure alignment and pace.

The Committee:

- **Approved** the outline and approach to the development of the strategic framework to enable a refreshed NHS Highland strategy.
- **Approved** the timeline that we are following to develop the Strategic Framework and then the 10-year strategy.
- **Accepted moderate assurance** from the report.

3. COMMITTEE FUNCTION AND ADMINISTRATION

3.1 Committee Terms of Reference

The Committee Chair opened the Committee Terms of Reference discussion, and emphasised committee's role in supporting strategic deliberations and scrutiny and proposed noting the current terms of reference and revisiting them as needed.

During discussion, the following points were raised:

- Members cautioned against progressing without a clear development plan and called for a structured programme outlining the stages of strategy creation, enabling proactive monitoring and coordination across subcommittees.
- Members warned that the committee could become a dumping ground for unrelated issues and stressed the importance of maintaining focus by developing population health metrics and ensuring the committee remains aligned with its core purpose.
- The Chief Executive strongly supported protecting the committee's time and focus, stating it must not absorb business-as-usual items. She outlined changes to the Executive Directors Group to better connect committee outputs and reiterated the committee's mission-critical role in driving ambitious change.
- The Board Chair proposed a three-phase lifecycle for the committee: validating the refreshed strategy, evidencing transformation, and developing outcome metrics.
- The Director of People and Culture acknowledged that some items lacked a reporting home and confirmed they would be assigned appropriately, supporting clear committee roles without overlap.
- Members highlighted the importance of shifting mindset towards wider determinants of health rather than traditional service metrics and encouraged members to adopt a broader perspective when evaluating population health outcomes.
- The Director of Public Health and Policy reinforced the importance of preserving the committee's purpose, proposing metrics to guide strategy and emphasising system-wide understanding and intervention.
- The Chief Executive cautioned against binary decisions, advocated combining metrics with preventative data, and emphasised using data to manage loss perceptions and support positive change.

The Committee **noted** the Committees Terms of Reference with any changes and suggested enhancements to be made as progress continued.

3.2 Committee Workplan

The Committee Chair advised the agenda planning was expected to continue collaboratively, with development likely emerging from the suggested work plan, while the committee remained flexible rather than following a fixed programme.

During discussion, the following points were raised:

- The Deputy Chief Executive proposed delaying the next meeting to allow thorough preparation and urged pacing discussions to ensure a well-founded strategy.
- The Chief Executive supported a flexible timeline for strategy development, prioritising quality over speed. She suggested continuing with the current strategy until the new one is ready, ensuring confidence in long-term planning.
- Non-Executive Board Members and Executive Leads were asked to reflect on the Terms of Reference and consider the impact, if any on the Terms of Reference and Workplans of their respective committees.

The Committee **noted** the Committees Workplan and **agreed** to cancel the November 2025 meeting.

4 ANY OTHER COMPETENT BUSINESS

No AOCB items were raised.

5 Date and Time of Next Meeting:

To be advised.

Close of meeting – 16:16 pm