

Meeting title:	Trust Board					
Date of the meeting:	14 August 2025					
Title:	UHL's Deliverables for 2025/26 – Q1 Progress Update (July 2025)					
Report presented by:	Simon Barton, Deputy Chief Executive					
Report written by:	Ashley Epps, Head of Strategy					
Action – this paper is for:	Decision/Approval		Assurance	X	Update	X

Purpose of the Report

This report summarises progress to-date at the end of Quarter 1 in delivery of the Trust's 10 key priorities and deliverables for 2025/26.

Recommendation

It is recommended that the TLT & Trust Board:

- Notes the performance highlights and delivery progress to-date

Background

In February 2025, following a collaborative process between the UHL Board, Executive and senior clinical leadership, the Trust launched a set of annual priorities and deliverables for 2025/26.

All clinical and operational leaders were requested to review their plans to ensure alignment with these strategic priorities and deliverables. Specialty service plans were updated to include commitments to support each deliverable. Each CMG's key commitments for 2025 in relation to the ten 10 deliverables, along with a summary of their delivery achievements since launch of the specialty service plans in October 2024.

In April, through the Results Delivery Office (RDO) and engagement of a broad range of clinical and operational leads, a series of performance targets were developed to identify what success will look like for each of the ten deliverables. Associated trust-wide workstreams were mobilised to achieve these targets. **Appendix A** sets out the latest performance in relation to these targets and progress-to date in workstream delivery. These highlights will continue to be shared with EPM on a quarterly basis and will complement broader updates on delivery of the Trust's long-term Organisational Strategy, 'Leading in healthcare, trusted in communities' (2023-30).

Supporting Documentation

- Appendix A: 2025/26 Deliverables Oversight Pack



University Hospitals
of Leicester
NHS Trust

2025/26 Deliverables Oversight Pack

July 2025

Our 2025 priorities

We have
three priorities

Transform
patient care

Strengthen
our culture

Deliver our
financial plan

They are supported by 10 key deliverables. **Together, we will:**



Deliver national planned care targets and **transform UEC pathways**



Deliver year one of our **quality strategy**, including PSIRF



Deliver year one of our **people strategy**, including action on discrimination



Deliver **major digital change**, including the new PAS



Develop our **Group model with UHN**, creating joint plans for key services



Integrate care faster, removing barriers between secondary and community



Deliver our **workforce plan** as part of financial plan delivery



Increase the number of colleagues taking part in **research**



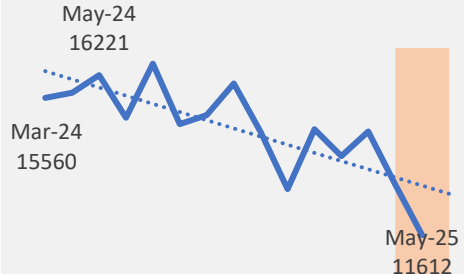
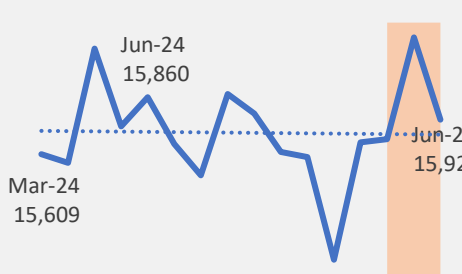
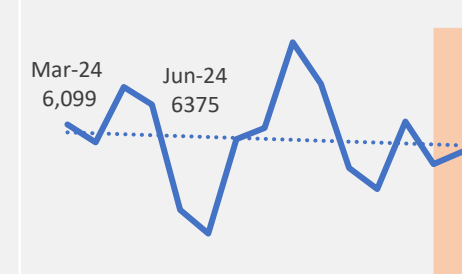
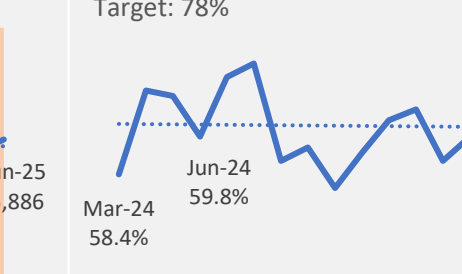
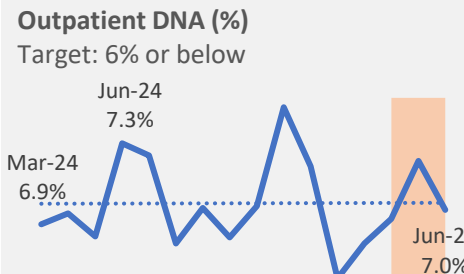
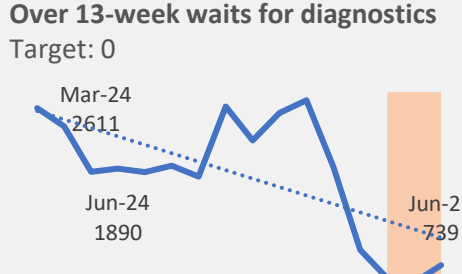
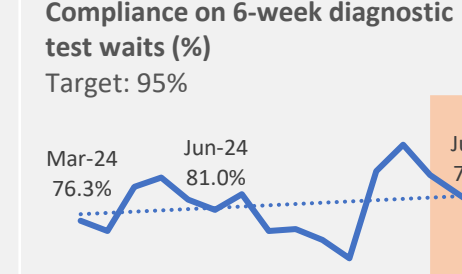
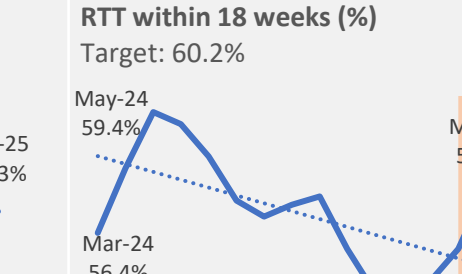
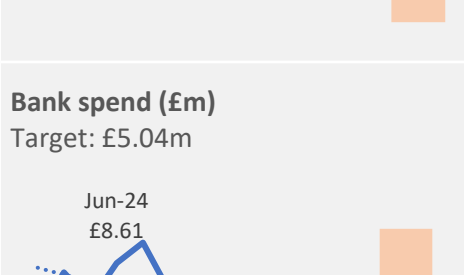
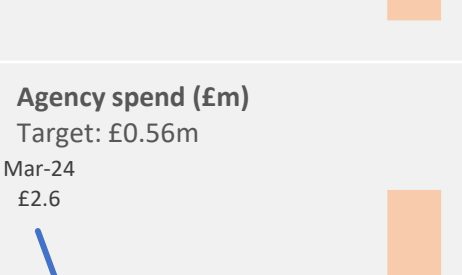
Establish the **Leicester, Leicestershire and Rutland Health Innovation Hub**



Roll out a new approach to **continuous improvement**

Headlines


- ED M3 final cut attendances overperformance of 224. Meeting trajectory for patients seen within 4hrs
- Exploring opportunities to reduce UEC demand through development of neighbourhood care model and how impact could be measured
- Significant reductions in over 13-week diagnostic waits & slight improvement in 6-week wait compliance
- Slight downward trend in RTT performance since 2024/25 although with an improvement from Apr-May 2025
- Significant reductions in agency and bank spend (comparing Q1 2024/25 and Q1 2025/26 shows 30% reduction in bank spend and 67% reduction in agency spend)
- Ongoing challenges around delivery of workforce plan
- Significant, sustained improvements in maternity regional heatmap score (now rated green)
- Considerable improvements in the proportion of commercial trials delivered to time and target, and now exceeding target for paid time for research in consultant/nurse/AHP job plans
- Performance on Staff Survey targets places UHL as top performing trust in peer group (out of London THs)

<div><div><div><div><div><div></div><div>NHS</div></div><div>University Hospitals of Leicester NHS Trust</div></div></div><div><div>Annual Deliverable Metrics</div><div>UHL, measures of performance, March 2024 - June 2025</div></div><div><div>***** Trendline</div><div>Launch of Annual Deliverables</div></div></div></div>																																					
Deliverable (s)	Targets & Performance				Comments																																
<p>We will deliver national access targets in planned care and transform pathways to safely reduce the number of people accessing emergency care in our hospitals</p> <p>We will accelerate work to integrate patient care, removing barriers between secondary and community services</p>	<p>Referrals from primary care to UHL</p> <p>Target: Reduction</p>  <table><tr><th>Month</th><th>Value</th></tr><tr><td>Mar-24</td><td>15560</td></tr><tr><td>May-24</td><td>16221</td></tr><tr><td>May-25</td><td>11612</td></tr></table>	Month	Value	Mar-24	15560	May-24	16221	May-25	11612	<p>Type 1 ED Attendances (adults)</p> <p>Target: 0% growth</p>  <table><tr><th>Month</th><th>Value</th></tr><tr><td>Mar-24</td><td>15,609</td></tr><tr><td>Jun-24</td><td>15,860</td></tr><tr><td>Jun-25</td><td>15,920</td></tr></table>	Month	Value	Mar-24	15,609	Jun-24	15,860	Jun-25	15,920	<p>Type 1 ED Attendances (paeds)</p> <p>Target: 0% growth</p>  <table><tr><th>Month</th><th>Value</th></tr><tr><td>Mar-24</td><td>6,099</td></tr><tr><td>Jun-24</td><td>6375</td></tr><tr><td>Jun-25</td><td>5,886</td></tr></table>	Month	Value	Mar-24	6,099	Jun-24	6375	Jun-25	5,886	<p>Patients seen in A&E within 4 hours across LLR (%)</p> <p>Target: 78%</p>  <table><tr><th>Month</th><th>Value</th></tr><tr><td>Mar-24</td><td>58.4%</td></tr><tr><td>Jun-24</td><td>59.8%</td></tr><tr><td>Jun-25</td><td>60.8%</td></tr></table>	Month	Value	Mar-24	58.4%	Jun-24	59.8%	Jun-25	60.8%	<ul style="list-style-type: none">Primary care referrals is artificially low due to the rollout of e-triage. June data pending due to PAS roll-outED M3 final cut attendances overperformance of 224. Exploring how we link UEC demand to neighbourhood model4hr performance is on-track with trajectorySignificant reductions in 13wk diagnostics waitsSlight downward trend in RTT performanceRollout of PAS may impact productivity in short-term. June data pending due to PASSignificant reductions in bank and agency spend (comparing Q1 2024/25 to Q1 2025/26 shows a 30% reduction in bank spend and 67% reduction in agency spend)Ongoing challenges around workforce reduction – please see further detail in slide 16
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<p>Outpatient DNA (%)</p> <p>Target: 6% or below</p>  <table><tr><th>Month</th><th>Value</th></tr><tr><td>Mar-24</td><td>6.9%</td></tr><tr><td>Jun-24</td><td>7.3%</td></tr><tr><td>Jun-25</td><td>7.0%</td></tr></table>	Month	Value	Mar-24	6.9%	Jun-24	7.3%	Jun-25	7.0%	<p>Over 13-week waits for diagnostics</p> <p>Target: 0</p>  <table><tr><th>Month</th><th>Value</th></tr><tr><td>Mar-24</td><td>2611</td></tr><tr><td>Jun-24</td><td>1890</td></tr><tr><td>Jun-25</td><td>739</td></tr></table>	Month	Value	Mar-24	2611	Jun-24	1890	Jun-25	739	<p>Compliance on 6-week diagnostic test waits (%)</p> <p>Target: 95%</p>  <table><tr><th>Month</th><th>Value</th></tr><tr><td>Mar-24</td><td>76.3%</td></tr><tr><td>Jun-24</td><td>81.0%</td></tr><tr><td>Jun-25</td><td>77.3%</td></tr></table>	Month	Value	Mar-24	76.3%	Jun-24	81.0%	Jun-25	77.3%	<p>RTT within 18 weeks (%)</p> <p>Target: 60.2%</p>  <table><tr><th>Month</th><th>Value</th></tr><tr><td>Mar-24</td><td>56.4%</td></tr><tr><td>May-24</td><td>59.4%</td></tr><tr><td>May-25</td><td>57.5%</td></tr></table>	Month	Value	Mar-24	56.4%	May-24	59.4%	May-25	57.5%		
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<p>We will deliver our workforce plan as a key component of financial plan delivery</p>	<p>Bank spend (£m)</p> <p>Target: £5.04m</p>  <table><tr><th>Month</th><th>Value</th></tr><tr><td>Mar-24</td><td>£7.16</td></tr><tr><td>Jun-24</td><td>£8.61</td></tr><tr><td>Jun-25</td><td>£5.01</td></tr></table>	Month	Value	Mar-24	£7.16	Jun-24	£8.61	Jun-25	£5.01	<p>Agency spend (£m)</p> <p>Target: £0.56m</p>  <table><tr><th>Month</th><th>Value</th></tr><tr><td>Mar-24</td><td>£2.6</td></tr><tr><td>Jun-24</td><td>£1.1</td></tr><tr><td>Jun-25</td><td>£0.41</td></tr></table>	Month	Value	Mar-24	£2.6	Jun-24	£1.1	Jun-25	£0.41	<p>WLI/Insourcing and Productivity</p> <p>Target: Deliver circa £15m CIP by reducing WLI / Insourcing to 0 (excluding exceptions) and activity compensated through a 5% productivity uplift</p> <p>July update: Current forecast from April 25 to March 26 is £4.6m part year effect but we have a lot more to add to the trackers.</p>																		
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Deliverable	Targets & Performance				Comments
<div><div><div>We will deliver year one of our quality strategy, which includes PSIRF and the perinatal safety programme</div></div></div>	<div><div><div>Maternity heatmap score</div><div>Target: Low score / CQC Good</div></div><div><div><div>Mar-24</div><div>57.3</div></div><div><div>Jun-24</div><div>42.3</div></div><div><div>Jun-25</div><div>29.3</div></div></div></div>	<div><div><div>SHMI score</div><div>Target: Equal to or below 1</div></div><div><div><div>Jan-Dec 22</div><div>1.03</div></div><div><div>Jan-Dec 24</div><div>1</div></div></div></div>	<div><div><div>Rate of hospital acquired pressure ulcers (per 1,000 OBDs)</div><div>Target: 1</div></div><div><div><div>Mar-24</div><div>1.67</div></div><div><div>May-24</div><div>1.79</div></div><div><div>May-25</div><div>1.63</div></div></div></div>	<div><div><div>Number of CDIFF Infections</div><div>Target: Below NHSE Threshold & 5% decrease in 2025/26</div></div><div><div><div>Mar-24</div><div>6</div></div><div><div>Jun-24</div><div>7</div></div><div><div>Jun-25</div><div>10</div></div></div></div>	<div><div><div><div><div>Sustained improvements in regional maternity heatmap score (now rated green)</div></div><div><div>HAPU Priority 1 patients seen within triage time is consistently 92-93%. Daily review for Dolphin usage. New mattress escalation tool in place</div></div><div><div>Comprehensive annual infection prevention programme established, with exception reporting when required</div></div></div></div></div>
	<div><div><div>Number of E-Coli Infections</div><div>Target: Below NHSE Threshold & 5% decrease in 2025/26</div></div><div><div><div>Mar-24</div><div>8</div></div><div><div>Jun-24</div><div>13</div></div><div><div>Jun-25</div><div>12</div></div></div></div>	<div><div><div>Number of Klebsiella Infections</div><div>Target: Below NHSE Threshold & 5% decrease in 2025/26</div></div><div><div><div>Mar-24</div><div>8</div></div><div><div>Jun-24</div><div>9</div></div><div><div>Jun-25</div><div>3</div></div></div></div>	<div><div><div>Number of Pseudomonas Infections</div><div>Target: Below NHSE Threshold & 5% decrease in 2025/26</div></div><div><div><div>Mar-24</div><div>0</div></div><div><div>Jun-24</div><div>2</div></div><div><div>Jun-25</div><div>2</div></div></div></div>	<div><div><div>Number of MSSA Infections</div><div>Target: Below NHSE Threshold & 5% decrease in 2025/26</div></div><div><div><div>Mar-24</div><div>5</div></div><div><div>Jun-24</div><div>5</div></div><div><div>Jun-25</div><div>4</div></div></div></div>	
	<div><div><div>Commercial trials delivered to time and target (%)</div><div>Target: 40%</div></div><div><div><div>Mar-24</div><div>35%</div></div><div><div>Jun-24</div><div>34%</div></div><div><div>Jun-25</div><div>38%</div></div></div></div>	<div><div><div>Research time in job plans</div><div>Target: 0.90% of all consultants, 0.05% nurses and 1.95% AHPs have paid research time in their job plans</div></div><div><div><div>July update:</div><div>Current performance is consultants 2.69%, nurses 0.09%, and AHPs 2.2%. There will also be consultants with research PAs in their job that we don't know about as they are CMG-funded.</div></div></div></div>			
	<div><div><div>We will increase the number of colleagues taking part in research activities by 10%</div></div></div>	<div><div><div>Will open another round of applications for funding for research in summer. Identifying how many more PAs we can support - likely to be 10</div></div></div>			

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<div><div><div><div>Staff Survey: % agree UHL takes positive action on health and wellbeing</div><div>Target: Top 15% of trusts (achieved top 25% in 2024)</div></div><div><div>We will deliver year one of our People Strategy, which includes action to tackle bullying, discrimination, and harassment; aligned to our behaviour's framework</div></div></div></div> <div><div><div><div>2022</div><div>55%</div></div><div><div>2024</div><div>62%</div></div></div></div>	<div><div><div><div>Staff survey: 'we each have a voice that counts' score</div><div>Target: Top 20% of trusts (achieved top 25% in 2024)</div></div><div><div>2022</div><div>6.6</div></div><div><div>2024</div><div>6.84</div></div></div></div>	<div><div><div><div>Staff survey: % agree would recommend as a place to work</div><div>Target: Top 20% of trusts (achieved top 25% in 2024)</div></div><div><div>2022</div><div>55%</div></div><div><div>2024</div><div>65%</div></div></div></div>	<div><div><div><div>Staff sickness absence rate (%)</div><div>Target: Equal to or below 4.5%</div></div><div><div>Mar-24</div><div>4.62%</div></div><div><div>May-24</div><div>4.49%</div></div><div><div>May-25</div><div>4.56%</div></div><div><div>Jun-25</div><div>3.84%</div></div></div></div>	<div><div><div><div>In 2025 we will focus on reducing burnout, menopause and suicide prevention</div><div>Enhancing leadership offer inc. improving psychological safety</div><div>Reviewing appraisal process and ensuring colleagues feel development is fair</div><div>Recognition is a key priority in our RISE framework, with staff recognition schemes and a focus on equipping leaders to recognise colleagues</div><div>June sickness rate is ESR only – Roster not yet included. Have re-launched attendance management policy and training with a focus on reducing sickness absence</div></div></div></div>	
	<div><div><div><div>Staff Survey: % agree that the organisation values their work</div><div>Target: Top 15% of trusts (achieved top 20% in 2024)</div></div><div><div>2022</div><div>40.5%</div></div><div><div>2024</div><div>47.4%</div></div></div></div>				

- In 2025 we will focus on reducing burnout, menopause and suicide prevention
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- Reviewing appraisal process and ensuring colleagues feel development is fair
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 University Hospitals of Leicester <small>NHS Trust</small>	Annual Deliverable Metrics UHL, measures of performance	
Deliverable	Targets	Performance
We will deliver major digital change, including the new PAS, BadgerNet in maternity services, and automation of workforce systems	80% reduction in paper generated at the point of care via Nervecentre Inpatient Optimisation	Current expectation is 40% reduction by March 2026 and 80% by 2027/28
	UHL is one of top 5 NHS Trusts in implementation of the FDP	First of type NHS Trust for implementation of FDP Data Platform
We will develop our Group model with UHN, improving productivity and creating joint plans for clinical and corporate services	Collaborative clinical strategy for UHN/UHL completed and approved	Group clinical strategy has been approved by the GCS Steering Group is is now to be approved by TLT & UHL Trust Board (August 25) and ILT & UHN Trust Board first week in September. It will be launched in September.
	Resourcing inc. 0.5 programme management support for each workstream	Identified names for support to the workstreams from UHL, but not from UHN at this stage
We will work with partners to establish a Healthcare Innovation Hub for LLR	Raise over £100k Investment fund through commercial and industry partnerships	Progress is being made on the HIH – LHC have funded a project manager, who is currently being recruited and through LAHP, DMU have identified a location on their campus. There are advanced discussions with local venture capital funders to whom a proposal has been made for investment.
We will roll out our new approach to continuous improvement, providing teams with the tools to improve care, experience, and productivity	Achieve Level 2 on the NHS Impact Continuous Improvement Cultural Maturity Self-Assessment	We are currently between ‘starting’ and ‘developing’ stages of assessment. Actions underway include QI Capability training (1.6% coverage < 4% target), leadership training, re-development of appraisal process, roll-out of 5S, establishing process huddleboard.