

Annual Public Meeting

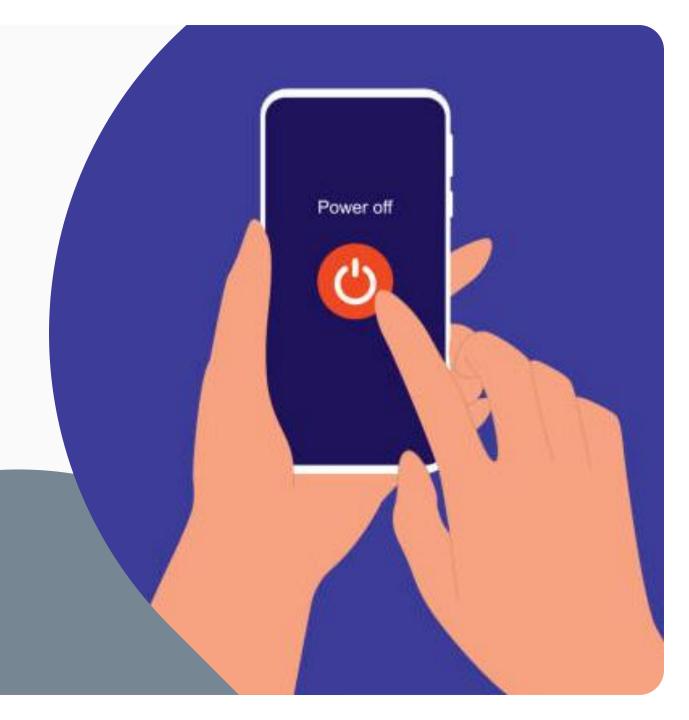
11 September 2025



Switch phones to silent / off

No fire alarm planned today

We will finish by 7pm



Agenda

17:30	Welcome Andrew Moore, Chair
17:35	Our year in review Richard Mitchell, Chief Executive
17:45	Annual accounts and financial reporting for 2024/25 Lee Bond, Chief Financial Officer
17:55	A look forward: Leading in healthcare, trusted in communities Richard Mitchell, Chief Executive
18:10	Questions from the public
19:00	Meeting close

Our strategic framework

Vision: Leading in healthcare, trusted in communities

Five goal areas High-quality care for all

A great place to work

Partnerships for impact

Research and education excellence

Financial sustainability

Our UHL values









Embedding health equality and inclusion in all we do

Enablers of success

Continuous improvement approach









https://www.youtube.com/watch?v=DSmRryRO8Rg



2024/25 Annual accounts and financial reporting

Lee Bond, Chief Financial Officer

Our financial statements

- Our financial statements have been prepared on a 'Going Concern' basis and have been independently audited
- Over the last five years our audit opinion has consistently improved and continues to be unqualified
- We continue to produce our annual accounts within the national timetable
- Our Annual Report and Accounts 2024/25 with full accounts and audit opinion are available on our website: www.uhleicester.nhs.uk

Independent Auditor's report

In our opinion, the financial statements:

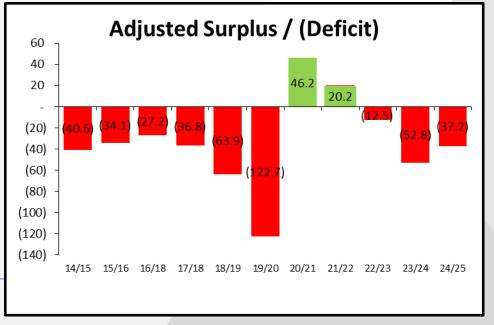
- Give a true and fair view of the financial position of the Group and the Trust as of 31 March 2025 and of the Group's and the Trust's income and expenditure for the year then ended
- Have been properly prepared in accordance with the accounting policies directed by the Secretary of State for Health and Social Care with the consent of HM Treasury on 23 June 2022 as being relevant to NHS Trusts in England and included in the Department of Health and Social Care Group Accounting Manual 2024/25
- Have been prepared in accordance with the requirements of the National Health Service Act 2006 (as amended)

Adjusted financial performance

The financial plan for 2024/25 was set at breakeven. The final reported outturn was a £37.2 million deficit as a result of:

- undelivered cost improvements
- material increases in the cost of delivering urgent and emergency care, driven by actual activity being greater than plan
- pay pressures in year

	2024/25
	£m
Surplus / (Deficit) for the	
Period	(77,773)
Remove impact of	
consolidating NHS	
Charitable Fund	1,874
Remove net impairments not	
scoring to the Departmental	
Expenditure Limit (DEL)	45,175
Remove I&E Impact of	
capital grants and donations	(6,514)
Adjusted Financial	
Performance Deficit	(37,238)



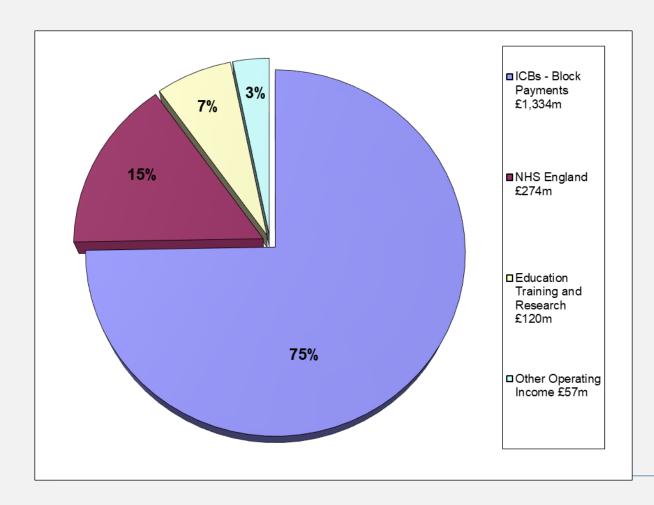
Statutory financial duties

We are required to meet certain financial duties, in order to provide assurance to the taxpayer on how public funds have been managed.

With the exception of delivering its agreed in year adjusted financial performance target, UHL achieved its statutory financial duties:

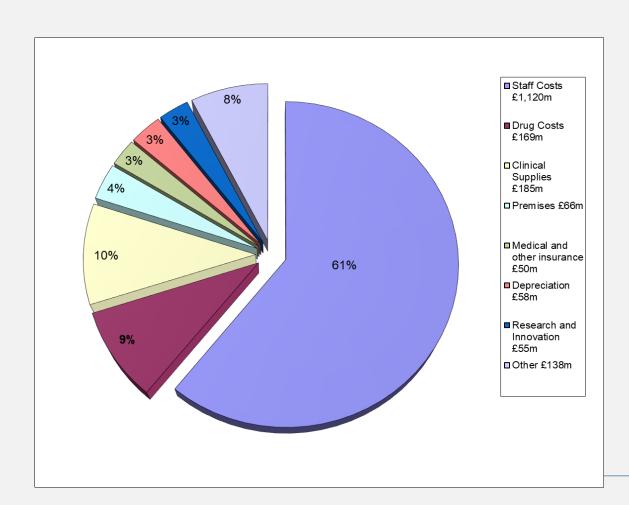
- √ 3.5% Return on Capital
- ✓ Operate within our External Finance Limit
- ✓ Operate within our Capital Resource Limit

Where our money came from



Our income in 2024/25 was £1.786 million, split between income from patient care (£1.617 million) and other operating income (£169.0 million).

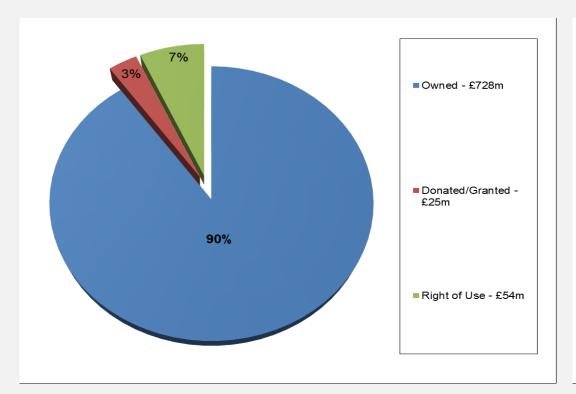
How we spent our money

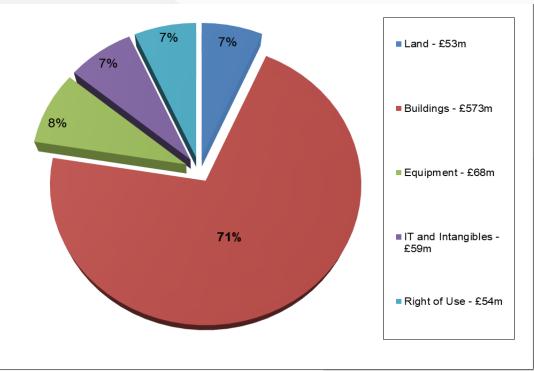


Our operating expenditure in 2024/25 was £1.841 million.

Trust Asset Base

The value of the Trust's fixed assets at 31 March 2025 was £807 million.





The buildings valuation was based on a desk-top valuation, as the full valuation was completed in 2020/21 and is only required every 5 years.

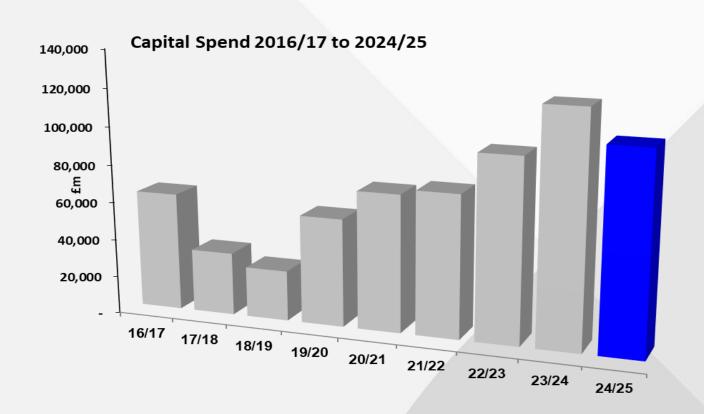
Investment in infrastructure

We invested £105 million in our capital infrastructure in 2024/25

Area of Investment	£'m
Estates Schemes including enabling works, statutory and CQC compliance and backlog schemes, lighting modernisation, Preston Lodge, Leicester Diabetes Centre and Endoscopy	50
IT Infrastructure and Digitisation	16
East Midlands Planned Care Centre	15
Medical Equipment including Hinckley Community Diagnostics Centre	8
Urgent and Emergency Care Capacity	7
New Hospitals Programme Enabling Works	4
IT end user computer devices and refresh	3
New and Replacement Linear Accelerator	2
Total Capital Expenditure	

Historic capital spend

£323 million has been invested in the last 3 years since Covid, funded through a combination of LLR system capital, nationally funded schemes, charitable donations, and grants.



Financial outlook

- The financial challenge for 2025/26 and the next few years is extremely difficult, balancing the need to treat more patients and be more productive with the reality of a constrained finances
- The LLR system deficit is forecast to reach £80 million at the end of March 2026 (this excludes deficit funding). The UHL plan is £64.8 million deficit (excluding deficit funding) and this position assumes the delivery of a £92 million CIP savings

The key challenges and risks are:

- Continued improvement in productivity and efficiency
- Workforce sustainability deliver services with a financially affordable workforce, including minimising the use of temporary staffing
- Capital investment UHL continues to provide services with a large backlog medical equipment replacement program, an ageing estate with significant backlog maintenance challenges, and a need to invest in digital technology to

drive transformation



A look forward: Leading in healthcare, trusted in communities

Richard Mitchell, Chief Executive

High-quality care for all

- UHL is a safer place to receive care now than it was 12 months ago
- Our diagnostic waiting times have improved and we will build on this further
- Cutting waiting times remains a key focus



A great place to work

The 2024 NHS Staff Survey feedback ranked us as the top teaching hospital in the Midlands and one of the best in the NHS – 66% of colleagues recommended UHL as a place to work.

We are:

- Growing apprenticeship and education opportunities
- Providing development offers that support retention
- Ensuring colleagues are safe, well, and supported



Partnerships for impact

- Continued collaboration with University Hospitals of Northamptonshire
- Strengthening community and VCSE relationships
- Integrating care, including work with GPs and partners on neighbourhood care models



Research and education

 £6.5 million for new network, led by UHL, to boost commercial research delivery across UK

 More patients involved in clinical trials and more colleagues delivering cutting edge research



Financial sustainability

- This month, we have exited the national Recovery Support Programme reflecting our improved financial governance
- Continued focus on ensuring high-quality care and services while safely reducing pay and non-pay costs



Hospital to community

Expanding our community-based services and maximising use of:

 £24.6 million Community Diagnostic Centre opened in Hinckley

 New £18 million endoscopy unit at the Leicester General Hospital

 Preston Lodge rehabilitation unit – close to the Leicester Royal Infirmary



Analogue to digital

- New Patient Administration System implemented supporting improvements in patient care
- Al innovation: European TRAIN membership, Al voice note trials, and Al Governance Office ensuring safe use
- BadgerNet in neonatal services introduced with real-time monitoring of patient information



Sickness to prevention

Second annual Prevention Report published in January

 Preventative interventions embedded as part of hospital care

 Community health events delivering tests and screening, informed by outcomes data and UHL Health Equality Partnership



UHL - UHN Group

- Ambitious collaboration serving 1.9 million people with a £2.9 billion budget and 30,000 colleagues working together across five hospitals, 19 community sites, and in people's homes
- Shared focus on sustainable services, workforce, technology, access, and research to transform care, attract talent, and shape the future of healthcare locally and nationally – our Group Clinical Strategy will be published this Autumn





Questions from the public