

Public Trust Board paper F8

Meeting title:	Public Trust Board					
Date of the meeting:	10 October 2025					
Title:	Escalation Report: Our Future Hospitals and Transformation Committee - 24 September 2025					
Report presented by:	Dr A Haynes, OFH&TC Non-Executive Director Chair					
Report written by:	Gill Belton, Corporate and Committee Services Officer					
Action – this paper is for:	Decision/Approval		Assurance	x	Update	
Where this report has been discussed previously	Not applicable					
To your knowledge, does the report provide assurance or mitigate any significant risks? If yes, please detail which						
BAF risk 4 (Digital)						
BAF risk 5 (Estates) -1 &2						
Acronyms						
NHSE – NHS England			UHN - University Hospitals of Northamptonshire			
PAS – Patient Administration System						

1. **Purpose of the Report**

To provide assurance to the Trust Board on the work of the Our Future Hospitals and Transformation Committee (OFHTC) and escalate any issues as required.

2. **Recommendation**

2.1 To note the report.

3. **Summary**

The Committee met on 24 September 2025. The meeting was quorate and considered the following reports.

4. **Discussion Items**

4.1 **Board Assurance Framework (BAF)**

The Committee received and approved the latest iteration of the BAF relevant to its remit.

4.2 **Capital and Revenue Investment Decision-Making – Introduction of a Strategic Planning Group (in mitigation of BAF Risk 5 (1))**

The Committee received details of a proposed new structure for decision-making in terms of capital and revenue spend, alongside information as to how this new structure would overcome issues associated with the previous structure. This new structure included the convening of a Strategic Planning Group and members received information as to its proposed membership, the gateway process and next steps planned.

Particular discussion took place regarding:-

- the two different routes to Trust Board (one via the Finance and Investment Committee and one via the Our Future Hospitals and Transformation Committee) – the OFHTC would oversee transformational elements, whilst FIC would oversee financial elements and this represented a continuation of current practice;
- recognition of the critical importance of the Charitable Funds Committee (CFC) having alignment with the Trust's strategic priorities. Note was made that there was not a reporting line between the Strategic Planning Group (SPG) and the CFC; with the latter reporting directly into the Trust Board as Corporate Trustee, but the opportunity for influence between the SPG and CFC, and
- acknowledgement that the work described represented a positive step forward and that a review of the new structure would be required in time – it was confirmed that evaluations at relevant intervals would be undertaken.

The Committee received and made note of this positive proposal and highlighted it for the information of the Trust Board.

4.3 UHL Green Plan (in mitigation of BAF Risk 5(3))

The Committee received an update on the development of the Trust's Green Plan 2025-2028, assurance on how the plan had been prepared and details of the lessons learned from delivering the 2022-2025 plan. The report sought the Committee's approval of the new Green Plan, which covered the next three years, and formed the second phase in the Trust's journey from its 2021/22 baseline towards achieving Net Zero by 2040.

In discussion on this item, it was noted that the Green Plan had already been presented to the Trust's Audit Committee and that this report addressed the queries raised by the Audit Committee during its consideration of the Plan. The Director of Estates and Facilities confirmed his support of this Plan, noting the requirement of NHSE that the Plan progressed through the relevant governance mechanisms by the end of October 2025. The most significant risk lay in the capital commitment going forward and how this would be achieved, with colleagues working up business cases to harness investment. Also acknowledged was the potential for joint working between the Trust and the University of Leicester.

The Committee: (1) approved the Green Plan 2025-2028 for submission through the Trust's governance and assurance framework, including to the Sustainability Working Group, Strategy Team, TLT, Trust Board, and ICB (2) recognised the risks to UHL if the Green Plan was not delivered, including financial, operational, reputational, and regulatory impacts, and endorsed the strengthened governance and delivery arrangements (3) acknowledged the importance of costings; the Sustainability Working Group would work alongside action leads to develop detailed feasibility and costings for programmes as part of the Trust's journey to Net Zero. For now, the Green Plan's action points had been broadly grouped into different levels of investment for internal working and governance. Those that required investment would be taken forward through internal governance processes and delivered as and when external funding opportunities arose.

The Committee approved the Green Plan 2025-08 for onward approval at Trust Board, noting that this formed a standalone report on the Trust Board agenda for 9 October 2025.

4.4 Our Future Hospitals Programme Update (in mitigation of BAF Risk 5 (3))

The Committee received an update on the status of the Our Future Hospitals Programme with particular reference to the national and local context, an update of NHP Live Projects and Strategic Capital Live Projects, and the work being undertaken by colleagues in the Trust in their continued progression. Particular acknowledgement was made of the additional time built into the process as

a result of the Building Safety Act. Also acknowledged was the volume of work required within a very short timescale when responding to Requests For Information (RFIs) with over 600 RFIs requiring a response within 7 days in relation to the LRI UTC scheme.

An update was provided on progress with the Endoscopy Unit Scheme and it was noted that the opening date had been deferred until 5 November 2025 whilst specific issues which had arisen relating to (1) ventilation and medical gas certificates needing to be in place and (2) issues with water commissioning which were being addressed. This delay had been reported, quantified financially and was included in the income recovery plan.

Particular discussion took place regarding plans in respect of the multi-storey car park. Also discussed were the sources of funding for the Aseptic Suite, noting that a contingency plan was in place, and the work planned to be undertaken within the Aseptic Suite.

The above-referenced information is highlighted to the Trust Board for information, in particular the delayed opening of the Endoscopy Unit.

4.5 Evaluation of East Midlands Planned Care Centre – Target Operating Model *(in mitigation of BAF Risk 4(3))*

The Committee received an update on the transformation delivered to-date and that planned for implementation in respect of the East Midlands Planned Care Centre (noting that EMPCC productivity was the subject of separate reports to relevant Trust Committees).

Particular discussion took place regarding the fact that the EMPCC was delivering out-patient services with less than half of the number of staff utilised in traditional out-patient settings within the Trust and regarding any blockers to the introduction of this model across the Trust. The further dissemination of this model would be dependent upon the ability to utilise electronic notes only, with no paper processes in place, and this was planned and remained on-going work as part of the move towards full EPR capability. Note was made, though, that the physical environment had been built around supporting technology within the EMPCC, and would not necessarily be as effective elsewhere, where this was not the case. Patient flow was the main issue of consideration (in terms of whether this was managed digitally, as in the EMPCC or manually by staff, as occurred elsewhere) and there was a need to review each area to determine the most appropriate means of introducing the technology and this would require partnership working between IM&T and Operational Teams.

The Committee noted the contents of the update provided and acknowledged the inherent opportunities, which they would wish to see expedited.

4.6 EPR Update *(in mitigation of BAF Risk4 (2))*

The Committee received and noted an update on the EPR programme process since December 2024, plans and dependencies for 2025/26 and clinical risk associated with current ways of working. The Committee was requested to (1) note progress with the EPR programme as a key transformational initiative for the Trust (2) be assured that planned activities were under constant review for prioritisation and risk mitigation (3) note the risks associated with current state working and the mitigating actions being taken in relation to funding and the prioritisation of work and (4) note the actions being taken to prepare for projects that would be delivered post-PAS stabilisation.

It was noted that a valuable meeting had been held on the previous day to identify where projects could be aligned; acknowledging that this was a fundamentally significant transformation project for the Trust, requiring a multi-disciplinary approach to transforming services.

4.7 Patient Administration System Replacement Update *(in mitigation of BAF Risk 4(1))*

The Committee received and noted the contents of an update on the PAS Programme since August 2025, which included information regarding the delivery of Fast Fix 2 (FF2), progress against the PAS programme delivery action plan, Neurons ticket management and the impact of the squad model (and also included updates on 2WW and eRS, the rebaselining of technical environments in support of PAS and the wider EPR programme, and preparations for transition into business as usual (BAU).

It was noted that work was on-going in respect of the provision of a dashboard, with the intention for this to feature in future such reports to the OFHTC.

Specific discussion took place regarding the growth in the total waiting list, which represented a data quality issue and not a system issue, and further data validation was required in this respect. Also discussed was the anticipated impact upon income attributable to PAS; a series of actions were being completed in this respect, which would be undertaken by the end of September 2025. In response to a query raised re the apparent high rate of DNAs, confirmation was provided that these were not overstated.

This update was highlighted to the Trust Board for information.

5 Any Other Business

5.1 OFHTC Terms of Reference – the Director of Corporate and Legal Affairs confirmed that revised Terms of Reference for the OFHTC were being progressed and it was planned to bring an update to the October 2025 meeting of the OFHTC.