

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**MINUTES OF THE OUR FUTURE HOSPITALS AND TRANSFORMATION COMMITTEE (OFH&TC)
MEETING HELD ON WEDNESDAY 24 SEPTEMBER 2025 AT 2.00 PM on Microsoft Teams****Voting Present:**

Mr D Moon - Non-Executive Director (Acting OFHTC Chair)
 Mr S Adams – Non-Executive Director
 Mr S Barton – Deputy Chief Executive
 Mr A Carruthers - Group Chief Technology Innovation Officer
 Mr A Furlong – Medical Director
 Mr S Linthwaite – Deputy Director of Finance (deputising for Mr L Bond, Chief Financial Officer)
 Professor T Robinson – Non-Executive Director

In Attendance:

Mr M Archer – Associate Director of Operations (Digital) (for Minute 98/25/6)
 Ms G Belton – Corporate and Committee Services Officer
 Ms R Briggs – Assistant Director of Operations (for Minute 98/25/3)
 Ms B Cassidy – Director of Corporate and Legal Affairs
 Mr C Evans – Group Digital Delivery Officer (for Minute 98/25/4 - EPR Update)
 Mr M Farooq – Head of Sustainability and Travel (for Minute 91/25 - UHL Green Plan)
 Ms D Green - Interim Programme Director
 Ms C Holroyd – Head of Sustainability and Waste (for Minute 91/25- UHL Green Plan)
 Mr R Manton - Head of Risk Assurance
 Mr W Monaghan – Group Chief Digital Information Officer
 Mr S Pizzey – Assistant Director of Strategy and Partnerships
 Mr A Quinn – EPR Programme Manager (for Minute 98/25/4 - EPR Update)
 Dr B Teasdale - Clinical Lead, Our Future Hospitals Programme
 Mr B Widdowson – Director of Estates and Facilities

RECOMMENDED ITEMS**91/25 UHL GREEN PLAN**

The Head of Sustainability and Travel presented paper E, which provided 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 the 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. It was noted that the New Hospital would be carbon neutral, however the Trust needed to address the issue of its older estate. 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.

Recommended – that the UHL Green Plan 2025-28 be endorsed and recommended onto the Trust Board for formal approval at its meeting on 9 October 2025.

DEF

RESOLVED ITEMS

92/25 WELCOME AND APOLOGIES

Apologies for absence were received from Dr A Haynes MBE, Non-Executive Director Chair, Mr P Burnett, ICB Deputy Strategy Director, Ms E Casteleijn, Director of Communications and Engagement and Mr L Bond, Chief Financial Officer.

93/25 QUORACY

The meeting was quorate.

94/25 DECLARATIONS OF INTERESTS

There were no declarations of interest.

95/25 MINUTES

Resolved – that that the Minutes of the Our Future Hospitals and Transformation Committee meeting held on 27 August 2025 (paper A) be confirmed as a correct record.

96/25 MATTERS ARISING

Paper B detailed the position of any outstanding actions from previous OFH&TC meetings.

Resolved – that any updates now provided be reflected in the next iteration of the OFH&TC action log.

97/25 BOARD ASSURANCE FRAMEWORK (BAF)

The Committee received and approved the latest iteration of the BAF relevant to its remit (paper C refers).

Resolved – that the latest iteration of the BAF relevant to the remit of the OFH&TC be received and approved.

98/25 KEY ISSUES FOR DISCUSSION

98/25/1 Capital and Revenue Investment Decision-Making – Introduction of a Strategic Planning Group

The Associate Director of Strategy and Partnerships presented, for the information of the Committee, 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 (paper D refers). 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. It was noted that this new approach would fit in with the Clinical Strategy.

Particular discussion took place regarding:-

- (i) 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;
- (ii) 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 there now existed the opportunity for influence between the SPG and CFC, and
- (iii) 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.

Resolved – that (A) the contents of this report be received and noted, and

(B)- the convening of a Strategic Planning Group be highlighted to the Trust Board.

CCSO

98/25/2 Our Future Hospitals Programme Update

The Our Future Hospitals Programme Director and the Our Future Hospitals Clinical Lead presented paper F, which provided 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 and of the fact that the LRI site was likely to be very busy in terms of planned building work. Also acknowledged was the volume of work required within a very short timescale when responding to Requests For Information (RFIs) with, for example, 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 and the proposed funding route for this. 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.

It was agreed to highlight the above-referenced information for the information of the Trust Board, in particular the delayed opening of the Endoscopy Unit.

Resolved – that (A) the contents of this report be received and noted, and

(B) relevant updates provided to the Committee as part of this update be highlighted to the Trust Board for information, in particular the delayed opening of the Endoscopy Unit.

CCSO

98/25/3 Evaluation of East Midlands Planned Care Centre – Target Operating Model

The Assistant Director of Operations and Our Future Hospitals Clinical Lead presented paper G, which provided the Committee with 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.

Resolved – that the contents of report be received and noted.

98/25/4 EPR Update

The Group Digital Delivery Officer presented paper H, which provided 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.

Resolved – that the contents of this report be received and noted.

98/25/5 Data Intelligence

Resolved – that the above-referenced item be withdrawn and re-scheduled for the next meeting to be held in October 2025.

98/25/6 Patient Administration System Replacement Update

The Associate Director of Operations (Digital) presented paper J, which provided an update on the PAS Programme since August 2025 and 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.

Discussion took place regarding a specific operational issue re triage, which represented work in progress. Also discussed was 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.

Resolved – that the contents of this report be received and noted.

99/25 ITEMS FOR NOTING

There were no items.

100/25 ANY OTHER BUSINESS

100/25/1 OFHTC Terms of Reference

The Director of Corporate and Legal Affairs reported verbally to confirm 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.

Resolved – that an update on the revised Terms of Reference for the OFHTC be submitted to the next (October 2025) meeting of the OFHTC.

**DCLA /
CCSO**

101/25 IDENTIFICATION OF KEY ISSUES FOR THE ATTENTION OF THE TRUST BOARD

Resolved – that the following items be highlighted for the approval and / or attention of the Trust Board:

- Minute 91/25 – UHL Green Plan (recommended item)
- Minute 98/25/1 – Capital and Revenue Investment Decision-Making – Introduction of a Strategic Planning Group
- Minute 98/25/3 – Our Future Hospitals Programme Update
- Minute 98/25/7 – PAS Replacement Update

102/25 DATE OF THE NEXT MEETING

It was noted that the next scheduled meeting of the Our Future Hospital and Transformation Committee would be held on Wednesday 29 October 2025 from 2pm on MS Teams.

The meeting closed at 3.15pm.

Gill Belton – Corporate and Committee Services Officer

Cumulative Record of Members' Attendance (2025-26 to date):

Present

Name	Possible	Actual	% attendance
A Haynes (Chair)	6	5	83
S Adams (from May 2025)	5	5	100
D Moon	6	6	100
T Robinson	6	2	33
S Barton	6	3	50
L Bond	6	4	67
N Bond (to June 2025)	3	0	0
A Carruthers	6	5	83
A Furlong	6	4	67
B Widdowson (from July 2025)	3	3	100

In attendance

Name	Possible	Actual	% attendance
D Green	6	4	67
R Manton	6	5	83
B Cassidy	6	2	33
H Kotecha	6	0	0
P Burnett (from June 2025)	4	3	75
M Smith – until Sept 2025	5	2	40
E Casteleijn - from Sept 2025	1	0	0
Representative from People Services	6	0	0