

<b>Meeting title:</b>	<b>Trust Board</b>				
<b>Date of the meeting:</b>	13 November 2025				
<b>Title:</b>	UHL's Deliverables for 2025/26 – Q2 Progress Update				
<b>Report presented by:</b>	Simon Barton, Deputy Chief Executive				
<b>Report written by:</b>	Ashley Epps, Head of Strategy				
<b>Action – this paper is for:</b>	Decision/Approval		Assurance	X	Update

**Purpose of the Report**

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

**Recommendation**

It is recommended that 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 specialty leads were supported to review their service plans to ensure alignment with these strategic priorities and deliverables. CMGs' key commitments for 2025 in relation to the 10 deliverables, and their delivery achievements since launch of the specialty service plans in October 2024, have been reviewed during their annual PRM sessions.

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. These highlights will continue to be shared with TLT on a quarterly basis.

**Supporting Documentation**

- Appendix A: Q2 2025/26 Deliverables Oversight Pack



University Hospitals  
of Leicester  
NHS Trust

# 2025/26 Deliverables Oversight Pack

Quarter 2 2025/26

# Performance Headlines

- Upward trend in adults ED attendances, although mostly offset by downward trend in paediatric attendances
- Development of neighbourhood care model will focus on managing ED demand – prioritising localities in City
- Significant reduction in outpatient DNA since May 2025 (currently surpassing target)
- Overall downward trend in over 13-week diagnostic waits, although a significant increase from July-Sept
- 6-week diagnostic wait compliance remains relatively stable overall, at c. 77% (target by end 25/26 is 95%)
- RTT performance down since July due to reduced activity - less ERF funding, WLIs, PAS – but mostly due to our monthly submission excluding pathways awaiting triage (~10-12k p/m, with majority of these being <18weeks)
- Continued significant improvements in maternity regional heatmap score
- Deterioration in cancer performance in Q2 following capacity losses in Breast, Skin and H&N in late June/July which were unforeseen. Actions are in place to recover in those specialties.
- Continued significant reductions in bank and agency spend (agency target surpassed, close to meeting bank target), however substantive remains a key challenge with spend continuing to increase
- Exceeding target on paid time for research in consultant/nurse/AHP job plans, and a slight increase in the proportion of commercial trials delivered to time and target (on track to meet target)
- Performance on Staff Survey targets places UHL as top performing trust in peer group (out of London THs)

**Annual Deliverable Metrics**

UHL, measures of performance, March 2024 - June 2025

..... Trendline

Launch of Annual Deliverables

Deliverable (s)

Targets & Performance

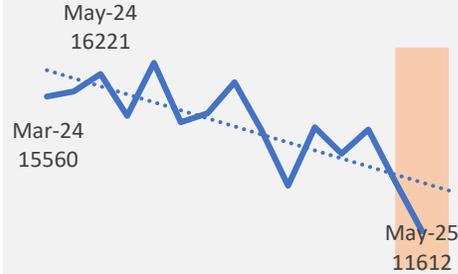
Comments

**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

**We will accelerate** work to integrate patient care, removing barriers between secondary and community services

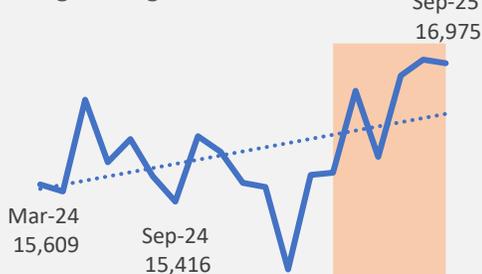
**Referrals from primary care to UHL**

Target: Reduction



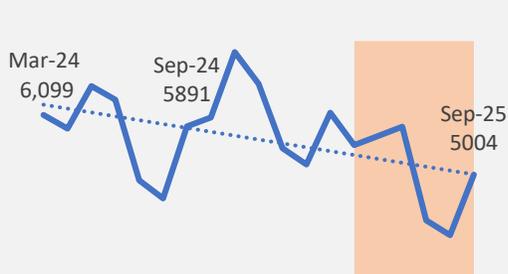
**Type 1 ED Attendances (adults)**

Target: 0% growth



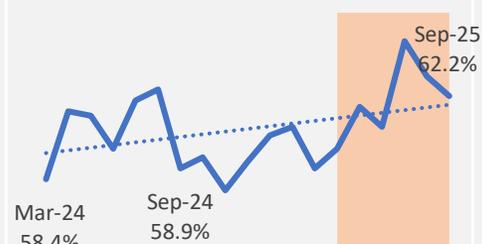
**Type 1 ED Attendances (paeds)**

Target: 0% growth



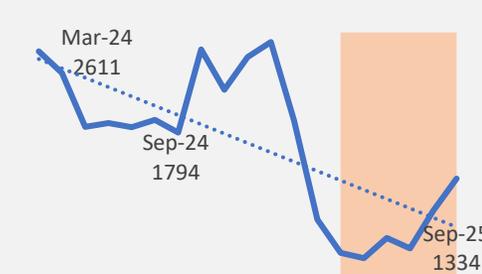
**Patients seen in A&E within 4 hours across LLR (%)**

Target: 78%



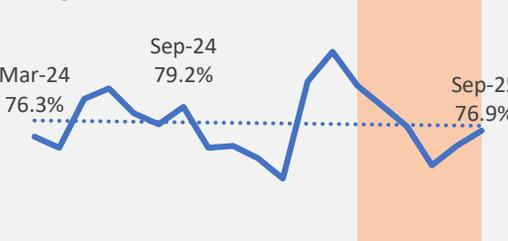
**Over 13-week waits for diagnostics**

Target: 0



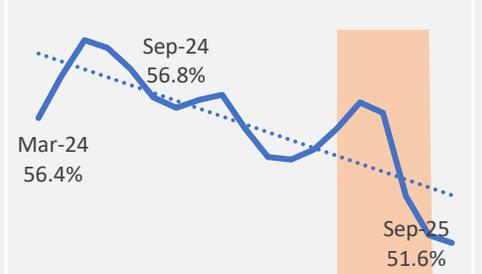
**Compliance on 6-week diagnostic test waits (%)**

Target: 95%



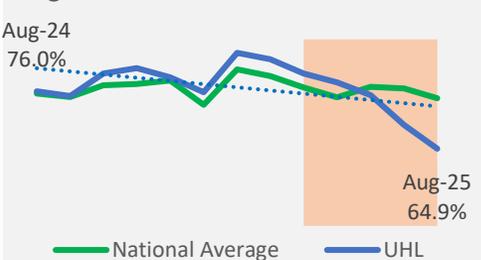
**RTT within 18 weeks (%)**

Target: 60.2%



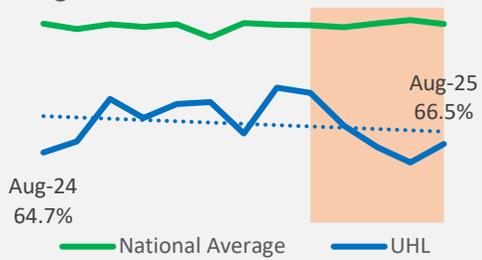
**Cancer: 28 Day FDS**

Target: 77%



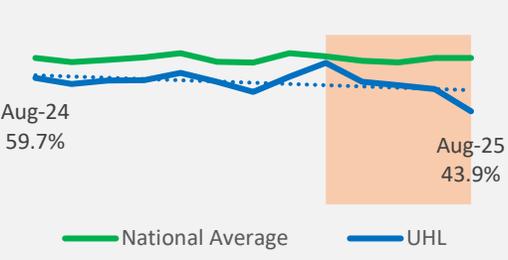
**Cancer: 31 Day**

Target: 96%



**Cancer: 62 Day**

Target: 70%



- Currently unable to map GP referrals to UHL from Q2 (since PAS move). BI working on it
- Neighbourhood health focusing on UEC demand - priority localities identified in City
- 4hr performance is on-track with trajectory
- Significant reduction in outpatient DNAs
- Over 13wk waits increased since July
- RTT down since July due to reduction in activity with less ERF funding, WLIs etc, PAS but mostly due to monthly submission excluding pathways awaiting triage

In August, on 28 Day FDS, UHL ranked 122 out of 140 Acute Trusts and 17 out of the 18 UHL Peer Trusts. The median value in our peer group was 74.2% (compared to 64.9% UHL).

We are showing a deterioration in performance in Q2 following capacity losses in Breast, Skin and H&N in late June/July which were unforeseen. Actions are in place to recover in those specialties.

**Annual Deliverable Metrics**

UHL, measures of performance, March 2024 - June 2025

..... Trendline

Launch of Annual Deliverables

**Deliverable**

**Targets & Performance**

**Comments**

**We will deliver**  
our workforce  
plan as a key  
component of  
financial plan  
delivery

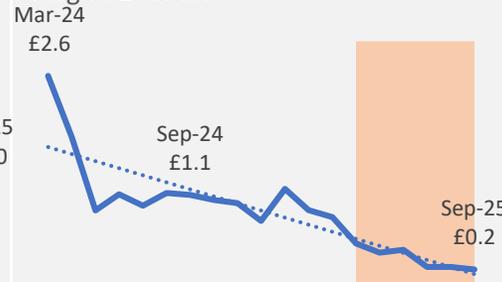
**Bank spend (£m)**

Target: £5.04m



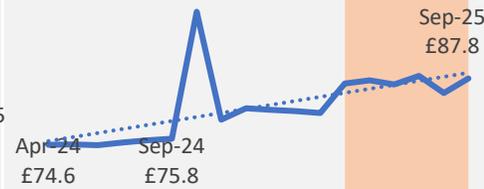
**Agency spend (£m)**

Target: £0.56m



**Substantive spend (£m)**

Target: 10% reduction in corporate, ~2% reduction across CMGs



**WLI/Insourcing and Productivity**

Target: Deliver circa £15m CIP by reducing WLI / Insourcing to 0 (excluding exceptions) and activity compensated through a 5% productivity uplift

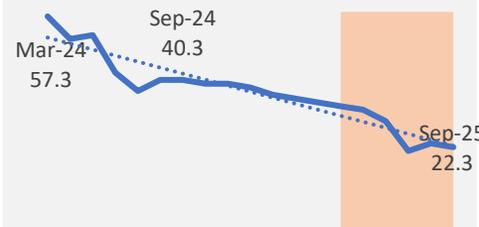
October update: Current forecast from April 25 to March 26 is £4.6m part year effect. An additional £1.1m PYE saving is to be added to trackers following a contract retender.

- Continued significant reductions in bank and agency spend (agency target surpassed, close to meeting bank target)
- Ongoing challenges around substantive workforce reduction and spend (further detail on slides 12-14)

**We will deliver**  
year one of our  
quality strategy,  
which includes  
PSIRF and the  
perinatal safety  
programme

**Maternity heatmap score**

Target: Low score / CQC Good



**SHMI Score**

Target: Equal to or below 1



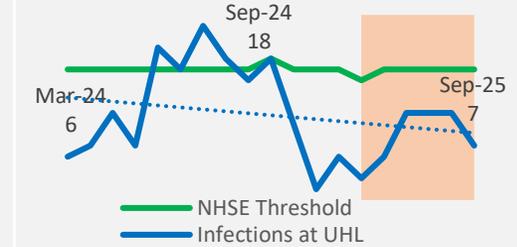
**Rate of hospital acquired pressure ulcers (per 1,000 OBDs)**

Target: 1



**Number of CDIIF Infections**

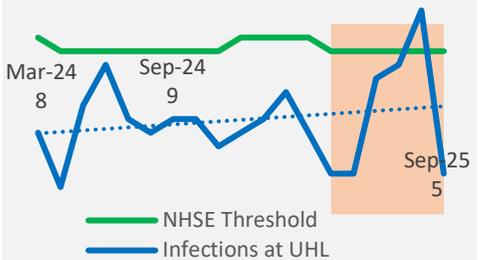
Target: Below NHSE Threshold & 5% decrease in 2025/26



- Continued strong performance in regional maternity heatmap score
- HAPU Priority 1 patients seen within triage time is consistently 92-93%. HAPU rate decreased to September 2025

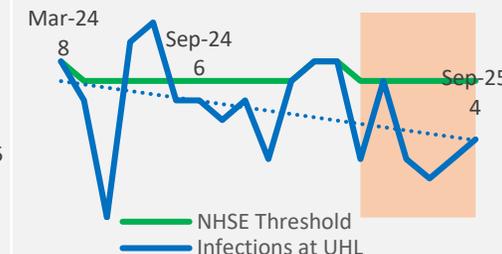
**Number of E-Coli Infections**

Target: Below NHSE Threshold & 5% decrease in 2025/26



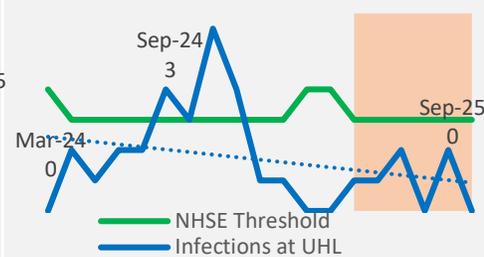
**Number of Klebsiella Infections**

Target: Below NHSE Threshold & 5% decrease in 2025/26



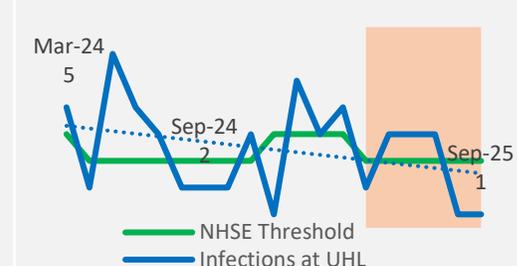
**Number of Pseudomonas Infections**

Target: Below NHSE Threshold & 5% decrease in 2025/26



**Number of MSSA Infections**

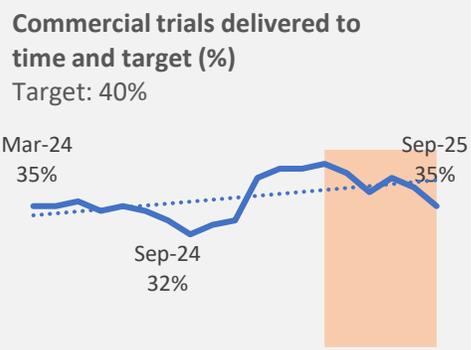
Target: Below NHSE Threshold & 5% decrease in 2025/26



- Comprehensive annual infection prevention programme established, with exception reporting when required – no infections above NHSE threshold as of Sept

Deliverable	Targets & Performance	Comments
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**We will increase** the number of colleagues taking part in research activities by 10%

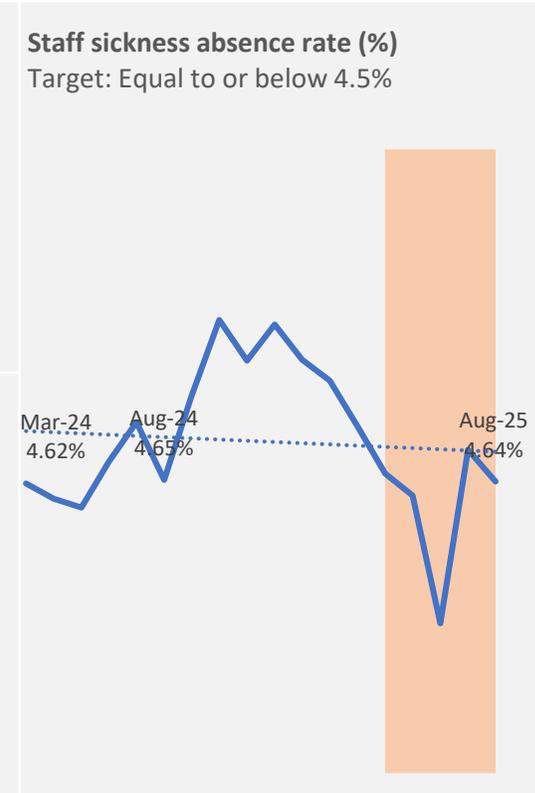
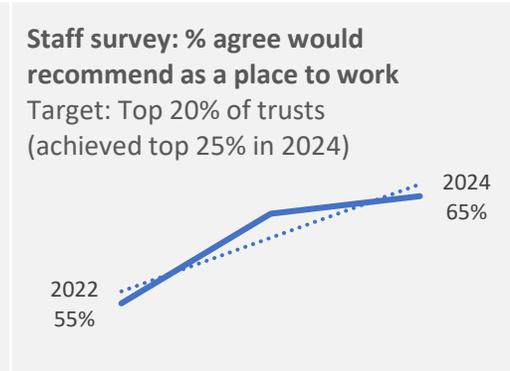
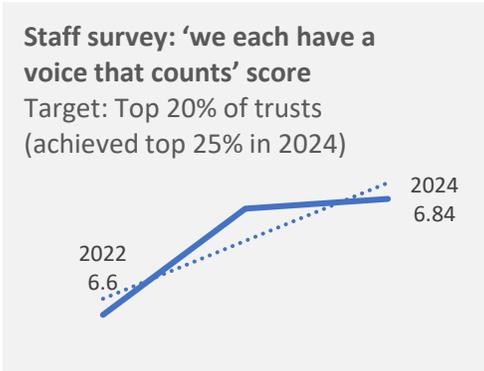
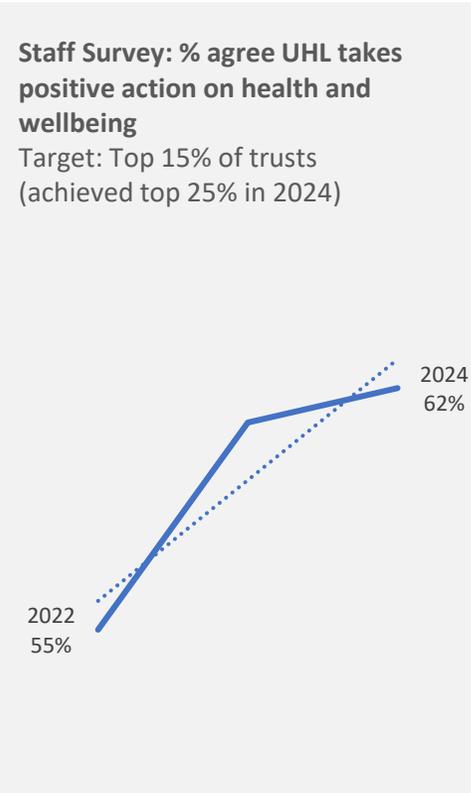


**Research time in job plans**  
Target: 0.90% of all consultants, 0.05% nurses and 1.95% AHPs have paid research time in their job plans

July update:  
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.

- Research time in job plans target surpassed
- Identifying how many more PAs we can support (likely 10)

**We will deliver** year one of our People Strategy, which includes action to tackle bullying, discrimination, and harassment; aligned to our behaviour's framework



- Focusing on reducing burnout and menopause
- Enhancing leadership offer inc. improving psychological safety
- Reviewing appraisal process and ensuring colleagues feel development is fair
- Recognition is a key priority in our RISE framework, with staff recognition schemes and a focus on equipping leaders to recognise colleagues
- Have re-launched attendance management policy and training with a focus on reducing sickness absence

**Annual Deliverable Metrics**  
UHL, measures of performance

Deliverable	Targets	Update
<p><b>We will</b> deliver major digital change, including the new PAS, BadgerNet in maternity services, and automation of workforce systems</p>	<p><b>80% reduction in paper generated at the point of care via Nervecentre Inpatient Optimisation</b></p>	<p>Current expectation is 40% reduction by March 2026 and 80% by 2027/28</p>
	<p><b>UHL is one of top 5 NHS Trusts in implementation of the FDP</b></p>	<p>UHL is a pioneer for using FDP as a data platform and is acting as a reference site for other Trusts nationally and NHS England for them to apply our approaches and learnings.</p>
<p><b>We will</b> develop our Group model with UHN, improving productivity and creating joint plans for clinical and corporate services</p>	<p><b>Collaborative clinical strategy for UHN/UHL completed and approved</b></p>	<p>Clinical Strategy approved and launched – implementation plan drafted and programme governance / workstreams in development</p>
	<p><b>Resourcing inc. 0.5 programme management support for each workstream</b></p>	<p>Identified names for support to the workstreams from UHL &amp; UHN (4 colleagues from UHL and 2 from UHN)</p>
<p><b>We will</b> work with partners to establish a Healthcare Innovation Hub for LLR</p>	<p><b>Raise over £100k Investment fund through commercial and industry partnerships</b></p>	<p>Progress is being made on the HIH – LHC have funded a project manager, who is currently being onboarded 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.</p>
<p><b>We will</b> roll out our new approach to continuous improvement, providing teams with the tools to improve care, experience, and productivity</p>	<p><b>Achieve Level 2 on the NHS Impact Continuous Improvement Cultural Maturity Self-Assessment</b></p>	<p>Based on our latest self-assessment group sessions with delegates, we can see a shift towards ‘developing’ being the highest selected category overall.</p> <p>Actions underway include QI Capability training (1.8% coverage &lt; 2% target), leadership training, re-development of appraisal process, roll-out of 5S, establishing process huddleboard. We currently have around 200 delegates with a project underway and receiving coaching.</p>