

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

MINUTES OF THE OPERATIONS AND PERFORMANCE COMMITTEE (OPC)
MEETING HELD ON THURSDAY 25 SEPTEMBER 2025 AT 9.00 AM ON MS TEAMS

Present:

Mr S Adams - Non-Executive Director Chair
Prof T Robinson - Non-Executive Director

Non-Voting Members

Ms D Angliss – Deputy Chief Nurse
Ms H Hendley - LLR Director of Planned Care
Ms S Nancarrow - Associate Director of Operations, Cancer
Ms S Taylor – Deputy Chief Operating Officer

In Attendance:

Mr M Archer – Head of Operations, CSI CMG (for Minute 100/25/3)
Ms S Bendelow - Associate Director of Operations
Mr L Cade – Operational Lead, Imaging (for Minute 100/25/3)
Ms H Majeed - Corporate and Committee Services Officer
Mr R Manton – Head of Risk Assurance
Dr L Walker – Deputy Medical Director

RESOLVED ITEMS

94/25 WELCOME AND APOLOGIES FOR ABSENCE

Apologies for absence were received from Dr R Abeyaratne, Director of Health Equality and Inclusion; Ms S Favier, Deputy Chief Operating Officer; Mr A Furlong, Medical Director; Dr A Haynes MBE - Non- Executive Director; Ms J Hogg, Chief Nurse; Mr J Melbourne, Chief Operating Officer and Ms S Kaur, Associate Non-Executive Director.

95/25 CONFIRMATION OF QUORACY

The meeting was quorate.

96/25 DECLARATION OF INTERESTS

There were no declarations.

97/25 MINUTES

Resolved – that the Minutes of the meeting of Operations and Performance Committee held on 28 August 2025 (paper A refers) be confirmed as a correct record.

98/25 MATTERS ARISING

The Chair acknowledged improvements in the brevity and clarity of committee papers. Members were encouraged to provide feedback on the usefulness of the new format. The matters arising log was received.

Resolved – that the Operations and Performance Committee matters arising log (paper B refers) be received and noted.

99/25 CONSIDERATION OF BAF RISKS IN THE REMIT OF OPERATIONS AND PERFORMANCE COMMITTEE

99/25/1 BAF Report (paper C)

The Committee received the BAF, noting the risks within its remit. The Head of Risk Assurance advised that the risks had been reviewed and updated, there were no significant changes to report for this period. The importance of aligning Committee discussions with BAF actions was emphasised.

Resolved – that the report be received and noted.

100/25 KEY ISSUES FOR ASSURANCE

100/25/1 Report from the Deputy Chief Operating Officer and Associate Director of Operations

Resolved – that this Minute be classed as confidential and taken in private accordingly.

100/25/2 Report from the LLR Director of Planned Care

Resolved – that this Minute be classed as confidential and taken in private accordingly.

100/25/3 MRI/CT – Demand and Capacity Plan (paper F)

The Head of Operations, CSI CMG and the Operational Lead for Imaging attended to present this report. The Committee was updated on progress against the third iteration of the MRI & CT capacity plan, now expanded to include CT alongside MRI. MRI demand had surged over five years, with only a 21% increase in machine capacity, noting that productivity gains, especially from AI and protocol rationalisation could significantly reduce future equipment needs. AI-enabled MRI scanners were being trialled. While CT demand had grown by 36% since 2019/20, staffing challenges had hindered utilisation. CT productivity was based on extending operating hours through additional staffing. Discussions highlighted AI's stronger role in MRI and the importance of adapting projections to evolving clinical practices. The Committee supported the development of a costed MRI & CT capacity plan to support MES renewal and outlined the need for including benchmarking protocols, reviewing AI scanner performance, clarifying emergency vs. elective demand and integrating ERF-funded machines into baseline capacity planning.

Dr L Walker, Deputy Medical Director queried whether projections accounted for changes in clinical practice, in response, it was noted that projections assumed current practice, however, future changes could increase demand further.

The LLR Director of Planned Care emphasised the need for a robust core capacity plan and balancing emergency and elective demand.

Resolved – that a report on emergency demand be presented to OPC in December 2025.

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100/25/4 Cancer Operational Performance Report (paper G)

The Associate Director of Operations, Cancer briefed the Committee on cancer operational performance highlighting a significant deterioration in cancer standards, with July and August seeing the Trust not achieve the Faster Diagnostic Standard (FDS) for the first time since September 2023 due to unexpected capacity losses in Breast, Skin, and Head & Neck services. The 62-day and 31-day standards also deteriorated from previous months, with Skin being the largest contributor to the deterioration. The Committee discussed the impact of workforce shortages, the implementation of a new PAS system, and the need for robust escalation and early intervention processes. Recovery actions include insourcing, business cases for sustainability, increased clinic capacity, and targeted use of cancer recovery funds. Radiotherapy performance was noted as improving, with backlogs reducing.

Professor T Robinson, Non-Executive Director queried whether monthly updates were sufficient for assurance on breast cancer performance and about maintaining oversight on all areas, in response, it was noted that monthly updates were being tracked closely, with escalation processes strengthened. Oversight on all areas was maintained, with new reporting to catch early signs of deterioration. The

LLR Director of Planned Care reflected on the need for earlier intervention when performance started to decline.

The Committee supported the ongoing recovery plans, emphasised the need for clear Executive support, and agreed to maintain close oversight of both underperforming and stable tumour sites to ensure sustained improvement. The Committee Chair undertook to highlight the risks and requirements to the Trust Board to ensure prioritisation and timely action.

Resolved – that the report be received and noted.

101/25 ITEMS FOR NOTING

101/25/1 Integrated Performance Report Month 5 2025/6 (paper H)

Resolved – that the report be received and noted.

102/25 ANY OTHER BUSINESS

There were no items of any other business.

103/25 IDENTIFICATION OF ANY KEY ISSUES FOR THE ATTENTION OF OTHER COMMITTEES

Resolved – that there were no items to be highlighted for the attention of other Committees from this meeting of OPC.

104/25 IDENTIFICATION OF ANY KEY ISSUES FOR THE ATTENTION OF THE TRUST BOARD

The following issues were identified to be escalated to the Trust Board:

- Update under private Minute 100/25/2;
- Minute 100/25/3 – MRI/CT – Demand and Capacity Plan – the predicted growth in scanning demand, and
- Minute 100/25/4 – Cancer Operational Performance Report – to highlight the risks and requirements to the Trust Board to ensure prioritisation and timely action.
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105/25 ITEMS NOT RECEIVED IN LINE WITH THE WORK PLAN FOR THIS MONTH

None.

106/25 DATE OF THE NEXT MEETING

Resolved – that the next meeting of the OPC be held on Thursday 30 October 2025 at 9.00 am (via MS Teams).

The meeting closed at 10.47 am

Hina Majeed- Corporate and Committee Services Officer

Cumulative Record of Members’ Attendance 2025/26

Voting Members

<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% attendance</i>
Scott Adams (<i>from May 2025</i>)	5	4	80
A Haynes	6	5	83
A Inchley (<i>April 2025 only</i>)	1	1	100
S Kaur (<i>from May 2025</i>)	5	4	80
T Robinson (<i>from May 2025</i>)	5	4	80
J Melbourne	6	4	67
A Furlong/J Hogg	6	5	83

Non-voting Members

<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% attendance</i>
A Moore	6	0	0
L Bond	6	4	67
H Hendley	6	5	83
S Favier	6	4	67
S Taylor	6	6	100
S Nancarrow	6	6	100
S Bendelow	6	4	67