

University Hospitals of Leicester NHS Trust

Progress of actions from previous UHL Trust Board meetings, and any outstanding actions arising from the Boards in Common meetings

Item no.	Minute Ref:	Action	Lead	By When	Progress Update	RAG status*
11 September 2026						
1a	TBC	Patient Story To write to Carmen and her family to personally thank them for sharing their patient story with the Trust Board.	AC A Haynes	Immediately	Complete	5
1b	TBC	Patient Story To provide a further update to the Trust Board in twelve months' time regarding the impact of the planned service changes discussed at today's meeting.	CN J Hogg	TB mtg – Aug 2027	To be scheduled accordingly.	4
2	TBC	Chief Executive's Report To provide an update re the underlying data arising from the Q1 2026/27 NHS Oversight Framework (NOF) segmentation data and performance league tables and share the link with TB members as appropriate.	GCDIO W Monaghan	TB mtg – Oct 2026	Report on agenda for October Private Trust Board meeting.	5
3	TBC	Freedom to Speak Up Q1 Report To progress the issues raised in relation to management incidents, with particular reference to the professional and scientific workforce, in discussion with the Executive Team.	CN / MD J Hogg / G Xu	For immediate progression	Dates for scheduling a discussion with the Executive Team are being explored.	4
Former Boards in Common actions:						
11 June 2026						
3.	31/26/3	Integrated Performance Report To provide an update to Ms J Houghton, Non-Executive Director regarding the rollout of PEWS (Paediatric Early Warning System) metrics.	GCN	August 2026	In discussion on this item at the public Trust Board meeting held on 11 September 2026, the Chief Nurse advised that it related to UHN. There was a plan in place at UHL utilising Nerve Centre and this action could therefore be closed. Update from Chief Nurse 24.9.26 – UHL – a meeting was held with Nervecentre in August 2026 with the current plan to aim to introduce at UHL with system upgrade scheduled for 26th November 2026. UHN position was also noted.	5

* Both numerical and colour keys are to be used in the RAG rating. If target dates are changed this must be shown using ~~strike through~~ so that the original date is still visible.

RAG Status Key:	5	Complete	4	On Track	3	Some Delay – expected to be completed as planned	2	Significant Delay – unlikely to be completed as planned	1	Not yet commenced
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Item no.	Minute Ref:	Action	Lead	By When	Progress Update	RAG status*
3 i	31/26/3	To meet with the Chair of Leicester and Leicestershire Healthwatch to understand the concerns raised by healthwatch regarding patient communications and progress outside of the meeting.	UHL DoC&E	Immediate	There is ongoing conversation between Healthwatch and UHL regarding improvements in patient communication and engagement. A quarterly meeting took place in August, and a specific follow-up will be arranged. It was noted that the public Trust Board meeting on 11 September 2026 that this action could now be closed.	5
8 May 2026						
3.3iii	22/26/3	Updated Patient Safety and Incident Response Plans to be provided	H Nemade / G Xu	September 2026	UHL Plan 2026-28 approved at 9 April Board. UHN document will be updated during 2026-27 Quarter 2. It was noted that the public Trust Board meeting on 11 September 2026 that this action could now be closed.	5
3.4.4 i	22/26/4	The UHL Board requested the Finance and Investment Committee review benefits realization of the new Endoscopy centre for capacity and activity	S Barton	December 2026	A formal Post Implementation review will be carried out. This will be reported through the Finance and Investment Committee in due course. In the meantime we will continue to monitor productivity and outputs through the monthly performance and finance reports.	4
9 April 2026						
5	20/26/2	Group Research and Innovation Report To present a proposal to Boards in Common for a single group Research and Innovation framework.	MD (UHN & UHL) / DoR&I H Nemade / G Xu / N Brunskill	BiC 7.8.26	A Group research strategy is in preparation. In discussion at the public Trust Board meeting on 11 September 2026, the Acting Chair noted that this matter was still pending and should be retained in the action log for an update as appropriate.	4
5a	20/26/2	To include greater detail in future reports of trial / research outcomes.	MD (UHN & UHL) / DoR&I H Nemade / G Xu / N Brunskill	BiC 7.8.26	Up to 1000 clinical trials are open across the Group at any one time. It is not possible to provide outcomes for all. However, trial outcome highlights of particular interest / importance will be provided in future reports to Board. In discussion at the public Trust Board meeting on 11 September 2026, the Acting Chair noted that this should be retained in the action log until	4

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					concluded – this may devolve into a quarterly report or be built into reporting systems.	
5b	20/26/2	To measure trial access across constituent populations across the Group area in order to inform possible approaches for wider inclusion in trials.	MD (UHN & UHL) / DoR&I H Nemade / G Xu / N Brunskill	BiC 7.8.26	Inclusion work takes place widely across our research infrastructure. NIHR funded infrastructure has an established inclusion strategy. Where practical and where trial data confidentiality permits, an indication of participant background can be included in future reports to Board. In discussion at the public Trust Board meeting on 11 September 2026, the Acting Chair noted that this matter was still pending and should be retained in the action log for an update as appropriate.	4

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