

Pathology Transformation Programme Report

Trust Board

Thursday, 27 November, 2025

Presented for:	Information
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Previous Boards/Groups:	None

Our Annual Commitments for 2025/26 are:

Recognise and act upon moments that matter to our patients	✓
Support our patients to get home a day sooner	✓
Be in the top 25% for patient experience and efficiency in outpatients	✓
Support each other to act with kindness and compassion	✓
Reduce our carbon footprint by creating greener patient pathways	✓
Support our staff to manage every £ wisely	✓
Make best use of our estate, equipment and digital assets	✓

Risk Appetite Framework				
Level 1 Risk	(✓)	Level 2 Risks	(Risk Appetite Scale)	Impact
Workforce Risk	✓	Workforce Supply Risk - We will deliver safe and effective patient care through having adequate systems and processes in place to ensure the Trust has access to appropriate levels of workforce supply.	Cautious	Moving Towards
Workforce Risk	✓	Workforce Deployment Risk - We will deliver safe and effective patient care through the deployment of resources with the right mix of skills and capacity to do what is required.	Cautious	Moving Towards

Risk Appetite Framework				
Level 1 Risk	(✓)	Level 2 Risks	(Risk Appetite Scale)	Impact
Operational Risk	✓	Physical Assets Risk - We will optimise patient outcomes and experience, workforce experience, and Trust financial benefit through the effective management of our premises and equipment.	Cautious	Moving Towards
Clinical Risk	✓	Capacity Planning Risk - We will ensure that capacity is planned to meet the demand for elective and non-elective (acute) admissions to our hospitals, managing this risk to provide safe treatment and care to our patients.	Cautious	Moving Towards
Clinical Risk	✓	Patient Safety & Outcomes Risk - We will provide high quality services to patients and manage risks that could limit the ability to achieve safe and effective care for our patients.	Minimal	Moving Towards
Financial Risk	✓	Financial Management & WRP - We will deliver sound financial management and reporting for the Trust, aiming to at least break even, with no material variances to forecast.	Cautious	Moving Towards
Financial Risk	✓	Change Risk - We will deliver change aligned to the Trust's strategy on time and to budget with benefits achieved and no significant adverse impacts, focussing on the delivery of large-scale capital developments.	Cautious	Moving Towards
Financial Risk	✓	Supply Chain Risk - We will manage suppliers in a manner that protects the Trust's interests and service to our patients.	Cautious	Moving Towards
External Risk	✓	Partnership Working Risk - We will maintain well-established stakeholder partnerships which will mitigate the threats to the achievement of the organisation's strategic goals.	Open	Moving Towards
External Risk	✓	Strategic Planning Risk - We will deliver Our Vision "to be the best for specialist and integrated care" through the delivery of a set of Strategic Goals and operating in line with Our Values.	Cautious	Moving Towards

Key Points	
<p>This report provides a summary update in relation to the operationalisation of the Centre for Laboratory Medicine (CfLM) and the Acute Hospital Lab (AHL) and the close down of the Pathology Operational Readiness Programme and Board.</p> <p>It celebrates the unprecedented scale and complexity of activities that have been achieved and provides an overview of those that remain either as residual activities or part of the wider and ongoing Pathology Transformation.</p> <p>The completion of the disposal of the Old Medical School (OMS) is due to happen in January 2026 to Scarborough Group International (SGI) and they intend on converting the building into a HealthTech Innovation Hub as the first phase of the Innovation Village.</p> <p>Members are advised that the information contained in this report is accurate as at 20 November 2025. .</p>	<p>Information</p>



1.0 Summary

- 1.1 This Building the Leeds Way (BtLW) Programme Report presents an update to the Trust Board regarding the delivery of the Pathology Transformation Programme and specifically the operationalisation of the new Centre for Laboratory Medicine (CfLM) and Acute Hospital Lab (AHL). This report reflects progress as of Thursday 20th November 2025 in relation to the closure of governance arrangements implemented to support the implementation phase and critical operationalisation delivery activities.

2.0 Background

- 2.1 Following the completion and delivery of the two construction projects, the CfLM and the AHL it was recognised that the Pathology Transformation Programme was entering a new implementation phase and that governance arrangements should reflect the move to focus on operationalising the facilities in order to start realising the benefits stated within the business case.
- 2.2 In March 2025, the Pathology Transformation Programme entered a critical 12-week period that would enable it to take a material step forwards towards achieving operationalisation. Whilst the end of this 12-week period (30 May 2025) would not see all services fully transferred and operating from the new facilities (i.e. a fully operationalised state), the completion of key activities during that period would impact the forecast operationalisation date. If key activities were not achieved, there posed high risk of delays extending beyond six-months due to supplier controls being implemented. In particular in relation to Clinisys (LIMS supplier), the implementation of the Laboratory Information Management System and upcoming supplier change freeze.
- 2.3 A revised governance and delivery arrangement was implemented at this critical stage that has supported collaboration, decision-making, efficiency in delivery and has ensured a clearer level of oversight on key priorities. It has also provided increased programme delivery resource support; improved agility in the ways of working; improved agility in decision-making and in assessing the impact of decisions; improved collaboration and the effective management of inter-dependencies; and increased and improved the flow of communication and information. Alongside this, the Programme has built upon lessons learned from the LIMS 1 (Phase 1) Release in December 2024, in particular in relation to communications support. To ensure continued focus and agility during the remaining complex operationalisation period these governance structures remained in place beyond the 12 week period with revised management and reporting arrangements from the beginning of June.
- 2.5 Having now achieved its primary objective to ensure completion of key activities related to the implementation of the Laboratory Information Management System and Managed Service Contract equipment that had previously posed a high risk of delays and having relocated the majority of transferring services to become operational in the CfLM or AHL the Operational Readiness Programme and related Implementation Phase governance have now closed down. The final meeting of the Pathology Operational Readiness Programme Board took place on Tuesday 4th November 2025.

- 2.6 Outstanding and residual post-implementation activities are being driven and managed through CSU accountability processes and support for future activities related to the next stages of the wider Pathology Transformation Programme are being assessed.

3.0 Operationalisation Programme Overview

3.1 Summary Overview of Key Programme Activities and Achievements

- 3.1.1 Since the implementation of LIMS 1 (Phase 1) Release in December 2024 there has been an unprecedented level of activity and change across all areas of the Programme towards realising a fully operationalised state at the CfLM and AHL including:

3.1.2 LIMS Implementation

- Utilising the lessons learned from the December 2024 release in the planning of the subsequent release
- Collaboration and engagement across stakeholder groups (internal & external)
- LIMS 1 (Release 2) *Go Live* – Monday 19 May 2025.
- Implementation and end to end testing of LIMS 2 interfacing with the new Managed Service Contract (MSC) equipment
- All staff training and familiarisation with the new LIMS

3.1.3 MSC Implementation

- Delivery and Installation of new equipment
- Validation, verification and end to end testing of new MSC equipment and platforms by supplier and services
- Service wide staff training on new and updated equipment
- Complex removal of legacy MSC equipment from both St James and LGI Old Medical School (OMS)

3.1.4 Business Continuity and Change Management

- Extensive planning to maintain business continuity throughout all activities
- Implementation of the Change Management Planning Process with Pathology Service Leads – coordination of planning between LIMS, MSC and the moves for each service, and identification and management of dependencies.
- Transition and moves planning – mapping out the activities and requirements to support successful relocation of individual services.
- Identifying, planning and implementing new processes, training and operational procedures
- Supporting staff through the delivery of Change Management Workshops.
- Familiarisation of LTHT and WYAAT partner staff to the CfLM through tours/ welcome packs
- Conclusion of TUPE process and transfer of staff from the Mid Yorkshire Trust (MYT)

3.1.5 Service Relocations

- Successful service and staff relocation to CfLM of:
 - Blood Sciences – including Biochemistry, Haematology and Morphology

- Microbiology – including Virology/Serology and Bacteriology
- Clinical Immunology and Transplant Immunology
- Specialist Coagulation
- Central Specimen Reception
- CSU & Service Management and administration teams and Pathology IT
- Successful service and staff relocation to the AHL of:
 - Blood Sciences – including Biochemistry, Haematology and Morphology
 - Central Specimen Reception
 - Blood bank / Blood Transfusion
- Re-routing of the Pneumatic Tube System at both SJUH and LGI to enable automatic delivery of samples from ward to laboratory.
- Relocation of Point of Care Team (POCT) to temporary accommodation to enable OMS vacation
- Full service vacation from the OMS

3.2 Outstanding Programme and Future Pathology Transformation Activities

3.2.1 Having achieved the primary objectives related to the implementation of LIMS, MSC and operationalisation of the CfLM and AHL the Operationalisation Programme has closed down with any residual outstanding programme activities to be driven and managed from this time onwards through BAU accountability processes. However, it is recognised that there is a large number of activities and projects that need to be undertaken as part of the wider Pathology Transformation. In light of the scale of some of these activities, there is an ongoing focus on the governance infrastructure to support these.

3.2.2 Outstanding and future activities include :

- The relocation of the Specialist Laboratory Medicine Service from Block 46 at SJUH to the CfLM (phased move to complete by end March 2026)
- Integration of final Tranche 4 MSC equipment with LIMS following the Clinisys change freeze (April 2026)
- Further WYAAT consolidation in relation to Calderdale & Huddersfield Foundation Trust
- Lot 2 (Cellular Pathology) MSC implementation
- Lot 2 (Cellular Pathology) LIMS integration with MSC equipment
- Point of Care (POC) system updates and POC integration/interface with LIMS
- Permanent location to be identified for POCT at LGI (further service discussions required regarding sharing space)
- ICE Upgrade
- Genomics LIMS
- Operationalisation Programme Lessons Learned sessions
- WELL 'Gold' certification (following post-occupancy evaluation).

3.2.3 Old Medical School (as part of the LGI Development Site Programme)

- The completion of the disposal of the Old Medical School (OMS) is scheduled to happen in January 2026 to Scarborough Group International (SGI) and they intend on converting the building into a HealthTech Innovation Hub as the first phase of the Innovation Village. SGI are resolving security and insurance implications prior to completion. SGI have



submitted an Outline Business Case to secure grant funding from West Yorkshire Combined Authority (WYCA) for £20m. This is part of the West Yorkshire Investment Zone funding and has been allocated for this flagship project.

- 3.2.4 The Trust will commission a “lessons learned” review of the full project, encompassing the digital, equipment and building elements of this change. This is with a view to ensuring that future programmes are assigned the organisational support required to deliver successfully.

4.0 Financial Implications

- 4.1 The financial implications of this report primarily relate to:
- Delivery of operational benefits and planned efficiencies as detailed within the business case.

5.0 Risks

- 5.1 There remain a number of residual risks related to outstanding programme activities. These are being managed through the CSU accountability and assurance processes.

7.0 Publication Under Freedom of Information Act

- 7.1 This report is exempt from publication under Section 29/36/38/40/41/43 of the Freedom of Information Act 2000, as it contains information which is sensitive relating to the development and delivery of the Pathology Programme.

8.0 Recommendations

- 8.1 Members are asked to recognise the scale of change and transformation activities achieved and note this Pathology Transformation Programme report.

9.0 Supporting Information

- 9.1 There are no supporting documents included with this report.

Jenny Ehrhardt
SRO & Director of Finance
20 November 2025