

## Interim Forward Planner for end of 2025/26 Financial Year - **DRAFT**

Blue text to be reported in Blue Box (i.e. For information only with assurance/ deep dives provided via the Board Assurance Committees)

Report to Board	29Jan 2026	26 March 2026
<b>Quality of Care</b>		
QAC Committee – Chairs Report	X	X
Perinatal Improvement Assurance Committee – Chairs Report	X	X
Dissolvment Review of Perinatal Improvement Assurance Committee ( <i>time-limited Committee</i> )	X	
Patient/ Staff Story ( <b>video</b> )	Patient Story	Patient Story
Complaints and PALS Annual Report		
Complaints and PALS Bi-Annual Update	X	
Serious Incidents (including learning and Duty of Candour) Annual Report		
Safeguarding Annual Report (NB. <i>Serious Case Reviews reported via Private meeting</i> )	X	
Learning Disabilities, Autism and Mental Capacity Act Annual Report		
Maternity Incentive Scheme (NHSR self-assessment for Board sign-off) - Annual confirmation of delegation of oversight by Board to Assurance Committee - Annual confirmation of the Maternity Safety Champion <b>Director of Midwifery</b> required to be in attendance	X	X X
HCAI Annual Report (and escalation in year as required)		
Mortality Annual Report (and escalation in year as required)	X	
Leaning from Deaths Q Report		X
<b>Escalation</b> as required of issues related to SMHI, HSMR, Clinical Risk (outside of appetite)		
Patient Safety Incident Response Plan 2024-2027		X
Patient Safety Incident Response Framework Policy		X
Regulatory Compliance and progress against action plans ( <b>assurance or escalation as required</b> )		
Safer Staffing (Hard Truths) - <b>format to be refined for assurance</b>	X	X
Mixed Sex Accommodation Breaches – format to be confirmed		
<b>People and Culture</b>		
Workforce Committee – Chairs Report	X	X
Freedom to Speak Up Bi-Annual Updates		
Executive Assurance of Freedom to Speak Up		
Staff Survey – Overview and Actions		X
Staffing Quality Indicators	IQPR	IQPR
Annual Establishments Review		
Equality, Diversity and Inclusion (EDI) Compliance Update: - WRES/ WDES annual submission requirements - Gender Pay Gap		
Belonging and Inclusion Action Plan Progress		
Guardians of Safe Working Annual Report		
Assurance of ‘Improving Working Lives of Resident Dr’ Plans – <b>Date TBC</b>		
Medical Revalidation Annual Report		
Violence against staff Annual Report		
Employee Relations Cases Annual Report (including staff grievances)		
Board Engagement with Staff Network Leads ( <b>how and what to be defined</b> )		
Board Assurance of AfC Job Planning Process (NB. <i>delivery delegated to WRF Cttee</i> )		
Leeds Health and Care Academy Annual Report		
<b>Escalation</b> as required of issues related to staffing, training compliance and grievances		
<b>Access and Delivery Of Services</b>		
Integrated Quality and Performance Report (IQPR) (progress on key performance indicators including waiting times, performance standards, length of stay, HCAI, quality metrics, maternity, mortality, complaints, sickness absence, mandatory training, bank and agency spend, staff engagement and finance metrics (cash, capital, revenue))	X	X
National Oversight Framework – <b>reporting format TBC, segments to include metrics on</b> - Cancer Care	X	X

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<ul style="list-style-type: none"> <li>- Elective Care</li> <li>- Mental Health Care</li> <li>- Urgent and Emergency Care</li> <li>- Effective Flow and Discharge</li> <li>- Effective out of Hospital Care</li> <li>- Patient Experience</li> <li>- Finance</li> <li>- Productivity</li> <li>- Patient Safety</li> <li>- Retention and Culture</li> </ul>		
CSU Accountability Dashboard – Executives to advise on format and reporting schedule		
<b>Strategy, Leadership and Planning</b>		
<b>Strategy; NB. Director of Operations reviewing and defining Board reporting of Strategies</b>		
Estates Strategy (Bi-annual) – including environmental sustainability and PLACE assessments		X
Digital Strategy Update (Annual) and CDIO Annual Report (including Fol)		X
Research and Innovation Strategy Update (Annual)		
Nursing & Midwifery Strategy Update (Annual)		
Commercial Strategy Update (Annual)		X
People Priorities Strategy Update (Annual)		X
Health Inequalities & Public Health Strategy Update (Annual)		X
Improvement Strategy 2020-25	X	
Patient Safety & Quality Strategy Update (Annual)		
Operational Transformation Strategy Update (Annual)		X
Clinical Services Strategy Update (Annual)		
Corporate Communication Strategy Update (Bi-annual)		X
Learning Education & Training Strategy Update (Annual)		X
<i>Finance Strategy monitored Quarterly via Fundamental Financial Reviews</i>		
Genomic Medicine Service Alliance		X
Leeds as Anchor Institution		
<b>Leadership</b>		
Remuneration Committee – Summary Report	X (from 26 Nov 26)	
Leadership Walkround Programme Annual Report		
Senior Independent Directors report on Chairs Appraisal		
<b>Planning</b>		
Annual Plan Submission approval (finance, activity, workforce)		X
Alignment of Partnership working (ad-hoc in response to system changes) – reporting TBC		
Winter Plan		X
Emergency Preparedness Annual report (including Resilience & Response Core Standards) – included in Quality Account		
Approval of the Annual Capital Plan		X
Five Year Financial Plan (Private Meeting)		March Timeout
<b>Information from Partner Meetings</b>		
West Yorkshire ISC (ICB) - dates TBC		
Leeds Place Committee - dates TBC		
WYAAT CiC – Directors Report and Draft Minutes	X	X
Health & Wellbeing Board to Board meetings – dates TBC		
<b>Financial Performance and Oversight</b>		
F&P Committee – Chairs Report	X	X
Financial Reporting (via IQPR)	IQPR	IQPR
Financial management (delegated to the Audit Committee)		
Quarterly Fundamental Financial Reviews (Private Meeting)		March Timeout
<b>Productivity and Value For Money</b>		

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Productivity Update – <i>Execs to advise – report needs to demonstrate plans in place to deliver productivity improvements as referenced in the NHS Model Health System guidance, Provider Capability Assessment, the Insightful board and other guidance as relevant.</i>		
Waste Reduction Annual Update		
<b>Governance, Risk &amp; Regulatory</b>		
<b>Governance</b>		
Audit Committee – Chairs Report	X	X
<b>Committee Annual Reports</b> (all Board Committees – assurance via Audit Committee)		
Health & Safety Annual Report		
Health & Safety Policy		
Annual Fire Safety Report		X
Annual update from NED Safety Champions		X
Standing Orders, SFI & Scheme of Delegation		
<b>Yearend Process, including:</b>		
Annual Report		
Annual Governance Statement		
Annual Accounts		
External Audit Opinion		
Quality Account		
Annual General meeting Draft Minutes		
Board Administration		
<b>Risk</b>		
Board Assurance Framework		
Corporate Risk Register		
<b>Regulatory Compliance</b>		
Regulatory External Visit Register		
NHSE Provider Licence – Self-Certification		
NHSE Provider Capability Assessment – Self-assessment (for approval)		
External review of BoD Governance (Well-led CQC) - <b>Date TBC</b>		
NHSE Insightful Board self-assessment - <b>Date TBC</b>		
Perinatal Improvement Plan (assurance on actions) - <b>Date TBC</b>		
Well-led Response Plan (assurance on actions) - <b>Date TBC</b>		
LTHT Improvement Plan (assurance on actions) - <b>Date TBC</b>		