

# Forward Planner Financial Year April 2026 to March 2027 - **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	Lead	28 May 2026	30 July 2026	24 Sept 2026	26 Nov 2026	28 Jan 2027	25 March 2027
<b>Quality of Care</b>							
QAC Committee – Chairs Report	LS	X	X	X	X	X	X
Perinatal Improvement Assurance Committee – Chairs Report	SLC	X	X	X	X	X	X
Dissolvment Review of Perinatal Improvement Assurance Committee ( <i>time-limited Committee</i> )	SLC					X	
Patient/ Staff Story ( <b>video</b> )	BG/ CPO	Staff Story	Patient Story	Patient Story	Staff Story - FTSU	Patient Story	Patient Story
Complaints and PALS Annual Report	BG		X				
Complaints and PALS Bi-Annual Update	BG					X	
Serious Incidents (including learning and Duty of Candour) Annual Report	MH				X		
Safeguarding Annual Report ( <i>NB. Serious Case Reviews reported via Private meeting</i> )	BG/ CPO		X X			X	
Learning Disabilities, Autism and Mental Capacity Act Annual Report	BG/ CPO		X				
Maternity Incentive Scheme (NHSR self-assessment for Board sign-off) - <i>Annual confirmation of delegation of oversight by Board to Assurance Committee</i> - <i>Annual confirmation of the Maternity Safety Champion</i> - <b>Director of Midwifery</b> required to be in attendance	BG/ MH					X	X X
HCAI Annual Report (and escalation in year as required)	MH GH/ JM		X				
Mortality Annual Report (and escalation in year as required)	MH					X	
Leaning from Deaths Q Report	MH	X		X	X		X
<b>Escalation</b> as required of issues related to SMHI, HSMR, Clinical Risk (outside of appetite)	MH						
Patient Safety Incident Response Plan 2024-2027	MH						X
Patient Safety Incident Response Framework Policy	MH						X
Regulatory Compliance and progress against action plans ( <b>assurance or escalation as required</b> )	Execs						
Safer Staffing (Hard Truths) - <b>format to be refined for assurance</b>	BG	X	X	X	X	X	X
Mixed Sex Accommodation Breaches – format to be confirmed	BG						
<b>People and Culture</b>							
Workforce Committee – Chairs Report	AS	X	X	X	X	X	X
Freedom to Speak Up Bi-Annual Updates	FtSUG	Annual Report			X		
Executive Assurance of Freedom to Speak Up	BB/ CPO	X					
Staff Survey – Overview and Actions	CPO						X
Staffing Quality Indicators	CPO	<i>IQPR</i>	<i>IQPR</i>	<i>IQPR</i>	<i>IQPR</i>	<i>IQPR</i>	<i>IQPR</i>
Annual Establishments Review	CPO			October Timeout			
Equality, Diversity and Inclusion (EDI) Compliance Update: - <i>WRES/ WDES annual submission requirements</i> - <i>Gender Pay Gap</i>	CPO	X X X			X		
Belonging and Inclusion Action Plan Progress	CPO	X					
Guardians of Safe Working Annual Report	GoSW	X					
Assurance of 'Improving Working Lives of Resident Dr' Plans – <b>Date TBC</b>	MH						
Medical Revalidation Annual Report	MH			X			
Violence against staff Annual Report	CR	X			X		
Employee Relations Cases Annual Report (including staff grievances)	CPO		X				
Board Engagement with Staff Network Leads ( <b>how and what to be defined</b> )	CPO			October Timeout	X		
Board Assurance of AfC Job Planning Process ( <i>NB. delivery delegated to WRF Cttee</i> )	CPO				X		
Leeds Health and Care Academy Annual Report	CPO		X				
<b>Escalation</b> as required of issues related to staffing, training compliance and grievances	CPO/ MH						
<b>Access and Delivery Of Services</b>							
Integrated Quality and Performance Report (IQPR)	Execs	X	X	X	X	X	X

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<i>(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))</i>							
National Oversight Framework – reporting format TBC, segments to include metrics on <ul style="list-style-type: none"> <li>- Cancer Care</li> <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>	Execs	X	X	X	X	X	X
CSU Accountability Dashboard – Executives to advise on format and reporting schedule	TH						
<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	CR			X			X
Digital Strategy Update (Annual) and CDIO Annual Report (including Fol)	PJ						X
Research and Innovation Strategy Update (Annual)	MH		X				
Nursing & Midwifery Strategy Update (Annual)	BG		X				
Commercial Strategy Update (Annual)	JE						X
People Priorities Strategy Update (Annual)	CPO						X
Health Inequalities & Public Health Strategy Update (Annual)	MH						X
Improvement Strategy 2020-25	MH/ BG					X	
Patient Safety & Quality Strategy Update (Annual)	MH/ BG		X				
Operational Transformation Strategy Update (Annual)	TH						X
Clinical Services Strategy Update (Annual)	TH						
Corporate Communication Strategy Update (Bi-annual)	JW						X
Learning Education & Training Strategy Update (Annual)	CPO						X
<i>Finance Strategy monitored Quarterly via Fundamental Financial Reviews</i>	JE						
Genomic Medicine Service Alliance	MH						X
Leeds as Anchor Institution	EC/ MH				X		
<b>Leadership</b>							
Remuneration Committee – Summary Report	JB		X (from 28 May 26)			X (from 26 Nov 26)	
Leadership Walkround Programme Annual Report	JB	X					
Senior Independent Directors report on Chairs Appraisal	SID		X				
<b>Planning</b>							
Annual Plan Submission approval (finance, activity, workforce)	Execs				X		X
Alignment of Partnership working (ad-hoc in response to system changes) – reporting TBC	EC/ MH						
Winter Plan	TH				X		X
Emergency Preparedness Annual report (including Resilience & Response Core Standards) – included in Quality Account	TH	X					
Approval of the Annual Capital Plan	JE						X
Five Year Financial Plan (Private Meeting)	JE		June Timeout				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	BB	X	X	X	X	X	X
Health & Wellbeing Board to Board meetings – dates TBC							
<b>Financial Performance and Oversight</b>							
F&P Committee – Chairs Report	MB	X	X	X	X	X	X
Financial Reporting (via IQPR)	JE	IQPR	IQPR	IQPR	IQPR	IQPR	IQPR

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Financial management (delegated to the Audit Committee)	GT		X (EoY Accounts)				
Quarterly Fundamental Financial Reviews (Private Meeting)			June Timeout	X	Dec F&P		March Timeout
<b>Productivity and Value For Money</b>							
Productivity Update – <b>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.</b>	Execs						
Waste Reduction Annual Update	JE/ CR		X				
<b>Governance, Risk &amp; Regulatory</b>							
<b>Governance</b>							
Audit Committee – Chairs Report	GT	X	X (EoY Accounts)	X		X	X
<b>Committee Annual Reports</b> (all Board Committees – assurance via Audit Committee)	CTTE CHAIRS	X					
Health & Safety Annual Report	TBC	X					
Health & Safety Policy	TBC	X					
Annual Fire Safety Report	CR						X
Annual update from NED Safety Champions	JB						X
Standing Orders, SFI & Scheme of Delegation	JB	Annual Review	As required	As required	As required	As required	As required
<b>Yearend Process, including:</b> Annual Report Annual Governance Statement Annual Accounts External Audit Opinion Quality Account	JB to lead	X		X (formal letter from External Audit)			
Annual General meeting Draft Minutes	JB				X		
Board Administration	JB	Code of Conduct and Nolan Principles	BoD Insurance & Declarations				Fit and Proper Person test
<b>Risk</b>							
Board Assurance Framework	Execs	X				X	
Corporate Risk Register	Execs	X	X	X	X	X	X
<b>Regulatory Compliance</b>							
Regulatory External Visit Register	MH/ CR	X					
NHSE Provider Licence – Self-Certification	JB		X		X		X
NHSE Provider Capability Assessment – Self-assessment (for approval)	JB		June Timeout	X		Dec Timeout	X
External review of BoD Governance (Well-led CQC) - <b>Date TBC</b>	JB						
NHSE Insightful Board self-assessment - <b>Date TBC</b>	JB						
Perinatal Improvement Plan (assurance on actions) - <b>Date TBC</b>	BG/ MH						
Well-led Response Plan (assurance on actions) - <b>Date TBC</b>	JB						
LTH Improvement Plan (assurance on actions) - <b>Date TBC</b>	Cttees						