

**Forward Planner Financial Year April 2026 to March 2027 – Updated 15 May 2026 (VH)***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
Dissolvement Review of Perinatal Improvement Assurance Committee ( <i>time-limited Committee</i> )	SLC					X	
Patient/ Colleague Story ( <b>video</b> )	BG/ SD	Staff Story Patient Story	Patient Story Colleague Story	Patient Story	Colleague Story - FTSU	Patient Story	Patient Story
Complaints and PALS Annual Report	BG		X				
Complaints and PALS Bi-Annual Update	BG					X	
Patient Safety Incidents (including learning and Duty of Candour) Annual Report	MH				X		
Safeguarding Annual Report (NB. <i>Serious Case Reviews reported via Private meeting</i> )	BG		X X	X X			
Safeguarding Bi-Annual Report	BG						X
Learning Disabilities, Autism and Mental Capacity Act Annual Report	BG/ SD		X	X			
Perinatal Mortality Review Tool (PMRT) Update (Blue Box following review by PIAC)	BG	X	X	X	X	X	X
Midwifery Staffing Report – <i>is this formal review of est and does this also relate to nursing as this seems to have dropped off reporting requirements</i>	BG		X align with safer staffing		X		
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 - Assurance of Board Maternity Safety Champions meetings with Perinatal Leadership Team - <b>Director of Midwifery</b> required to be in attendance	BG/ MH					X  X	X X
HCAI Annual Report (and escalation in year as required) – <i>includes Antimicrobial Resistance (AMR)</i>	MH		X				
Mortality Annual Report (and escalation in year as required)	MH				X	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)	BG		X			X	
Public Health and Inequalities (Blue Box following review by QAC)	MH			X			X
<b>People and Culture</b>							
People & Culture Committee – Chairs Report	AS	X	X	X	X	X	X
Freedom to Speak Up Bi-Annual Updates – <i>deferred to July</i>	FtSUG	Annual Report	Annual Report		X		
Executive Assurance of Freedom to Speak Up – <i>deferred to July</i>	BB/ SD	X	X				
Staff Survey – Overview and Actions	SD						X
Staffing Quality Indicators	SD	IQPR	IQPR	IQPR	IQPR	IQPR	IQPR
Annual Establishments Review	SD			October Timeout			
Equality, Diversity and Inclusion (EDI) Compliance Update: - WRES/ WDES annual submission requirements - Gender Pay Gap	SD	X X X			X		
Belonging and Inclusion Update /Action Plan Progress	SD	X	X	X	X	X	X
Guardians of Safe Working Annual Report	GoSW	X					
Assurance of 'Improving Working Lives of Resident Dr' Plans	MH			X			
Medical Revalidation Annual Report	MH			X			
Violence against staff Annual Report	CR	X			X		
Employee Relations Cases Annual Report (including staff grievances)	SD		X				
Board Engagement with Staff Network Leads ( <i>how and what to be defined</i> )	SD			October Timeout	X		
Board Assurance of AfC Job Planning Process ( <i>NB. delivery delegated to WRF Cttee</i> )	SD				X		
Leeds Health and Care Academy Annual Report	SD		X				
<b>Escalation</b> as required of issues related to staffing, training compliance and grievances	SD/ 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 - <b>Included in CEO report</b>	Execs	X	X	X	X	X	X
<b>Strategy, Leadership and Planning</b>							
<b>Strategy</b>							
Estates Strategy (Bi-annual) – <i>including environmental sustainability PLACE* assessments to be reported in March</i>	CR			X			X*
<b>Sustainability Annual Report</b>			X				
Digital Strategy Update (Annual) and CDIO Annual Report (including FoI)	PJ	X					
<b>Strategy updates to be defined following closure of Q4 review work by Director of Transformation</b>			X				
<i>Finance Strategy monitored Quarterly via Fundamental Financial Reviews</i>	JE						
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 <i>(we need to define process for Q report based on best practice from others)</i>	JB	X					
Senior Independent Directors report on Chairs Appraisal	SID		X				
<b>Planning</b>							
Annual Plan Submission approval (finance, activity, workforce and capital)	Execs				X		X
Alignment of Partnership working (including establishment of Leeds Place Committee in Common)	EC/ MH	X	X	X	X	X	X
Winter Plan	TH	X (post-review)			X (planning)		X
Emergency Preparedness Annual report (including Resilience & Response Core Standards) – <i>included in Quality Account</i>	TH	X					
<b>Five Year Financial Plan (Private Meeting)</b>	JE		June Timeout				March Timeout
<b>Information from Partner Meetings</b>							
<b>West Yorkshire ISC (ICB) - dates TBC</b>							
<b>Leeds Place Committee - dates TBC</b>							
<b>WYAAT CiC – Directors Report and Draft Minutes</b>	BB	X	X	X	X	X	X
<b>Health &amp; Wellbeing Board to Board meetings – dates TBC</b>							
<b>Financial Performance and Oversight</b>							
F&P Committee – Chairs Report	MB	X	X	X	X	X	X
<i>Financial Reporting (via IQPR)</i>	JE	<i>IQPR</i>	<i>IQPR</i>	<i>IQPR</i>	<i>IQPR</i>	<i>IQPR</i>	<i>IQPR</i>
<i>Financial management (delegated to the Audit Committee)</i>	GT		X (EoY Accounts)				
<b>Quarterly Fundamental Financial Reviews (Private Meeting)</b>			June Timeout	X	Dec F&P		March Timeout
<b>Productivity and Value For Money</b>							
Productivity Update – <i>Delegated to F&amp;P Cttee – annual update to Timeout meeting DATE TBC</i>	JE/ TH						
Waste Reduction Annual Update	JE		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 (all Board Committees – assurance via Audit Committee)</b>	CTTE CHAIRS	X					
Health & Safety Annual Report	Execs	X					
Health & Safety Policy	Execs	X					
<b>Annual Fire Safety Report</b>	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	JB to lead	X		X (formal letter from External Audit)			

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Quality Account							
Annual General meeting Draft Minutes	JB				X		
Board Administration (CQC Well-led)	JB	Code of Conduct and Nolan Principles	Code of Conduct and Nolan Principles	BoD Insurance & Declarations			Fit and Proper Person test
Board Development Plan							X
<b>Risk</b>							
Board Assurance Framework	Execs						X
Risk Management Policy (Approval) (last review June 2024 (2-year cycle))	DoQ	X	X				
<a href="#">Corporate Risk Register</a>	Execs	X	X	X	X	X	X
<b>Regulatory Compliance</b>							
Regulatory External Visit Register	MH	X					
<a href="#">Update on Independent Maternity Inquiry</a>	CB	X	X	X	X	X	X
NHSE Provider Licence – Annual Review (inclusion in Annual Report)	JB						X
NHSE Code of Governance – Comply or Explain (inclusion in Annual Report)	JB						X
SID report on Appraisal of the Chair (assurance overview)	SID/JB		X				
NHSE Provider Capability Assessment – Self-assessment (for approval) (dates subject to NHSE)	JB		June Timeout	X		Dec Timeout	X
External review of BoD Governance (Well-led CQC) - <a href="#">Date TBC</a>	JB						
NHSE Insightful Board self-assessment - <a href="#">Date TBC</a>	JB						
Perinatal Improvement Plan (assurance on actions)	BG/ MH	X	X	X	X	X	X
Well-led Improvement Plan (assurance on actions)	JB	X	X	X	X	X	X