Health Scrutiny Committee for Lincolnshire Statement on the *Quality Account* for 2025/26 of the United Lincolnshire Teaching Hospitals NHS Trust

Introduction

The Health Scrutiny Committee for Lincolnshire is the statutory body through which elected councillors scrutinise the work of NHS organisations. The Committee welcomes the opportunity to review the draft *Quality Account* for 2025/26 and recognises the Trust's continued commitment to transparency and improvement. The Committee values its role as a critical friend and offers the following comments to support further strengthening of the document.

Progress on Priorities for Improvement for 2025/26

The Committee recognises that the Trust has made progress against its stated priorities and understands the rationale for carrying these forward into 2026/27. Improvements in learning from incidents and the further embedding of the Patient Safety Incident Response Framework are particularly welcome.

However, the Committee also notes that a number of recurring challenges remain. These include long waits in Emergency Departments, delays in diagnosis and treatment, medication issues, falls, pressure ulcers and communication. The Committee is particularly concerned that delays between the decision to admit, and allocation of a bed continue to impact patient flow and experience and would welcome greater clarity on improvement actions in this area.

Falls increased overall during 2025/26, and hospital-acquired pressure ulcers rose for the first time in four years, albeit with severe harm thresholds maintained. Given the recognised increase in patient vulnerability, including within community settings, the Committee would welcome clearer evidence of how the Trust is working with system partners to prevent harm earlier and mitigate risks across the whole pathway. In relation to pressure ulcers, the Committee would welcome further assurance on the reasons for the increase in hospital-acquired cases and clearer actions to reduce significant harm, including prevention at the point of admission and continuity of care into the community.

The Committee recognises the rationale for focusing on infection prevention and control as Priority 2 and notes the reported compliance with the majority of Hygiene Code criteria. However, the remaining areas of partial compliance relate to important operational issues, including estate condition, isolation capacity, and workforce training, which will need ongoing focus. The increase in C. difficile rates, though still below the national average, reinforces the importance of maintaining improvement momentum.

With regard to patient experience, the Committee notes a mixed picture. The Friends and Family Test (FFT) remains largely positive, but the positive response rate has fallen from 89.84% to 87.53%, and complaints have risen markedly from 1,273 to 1,775.

While the document highlights key themes, the Committee considers that waiting times, identified as a prominent issue in patient feedback, are not sufficiently reflected in the narrative and should be more clearly acknowledged and addressed.

Priorities for 2026/27

The Committee accepts the Trust's decision to carry forward the same three priorities into 2026/27, recognising that they remain relevant to patient safety, quality and experience. However, the Committee considers that the priorities would be strengthened by clearer ambition, measurable targets and a more explicit link to current performance challenges and patient concerns.

- Priority 1

The Committee welcomes the focus on reducing incidents causing harm and strengthening organisational learning. However, it notes that success measures lack clear quantified targets and trajectories and would welcome more specific outcome measures, including an explicit ambition to eliminate never events.

- Priority 2

The Committee recognises the progress in infection prevention and control, but notes that some data underpinning performance appears historic and would benefit from more up-to-date reporting to strengthen assurance.

- Priority 3

The Committee welcomes the Trust's continued focus on communication, appointments and clinical practice. However, the Committee considers that waiting times, consistently highlighted in both complaints and FFT feedback, should be more prominently reflected within this priority as a key driver of patient experience.

The Committee also notes areas of concern within maternity and neonatal services, including breastfeeding outcomes and audit findings, and would expect these to be more clearly reflected within priorities and improvement actions for 2026/27.

Data, Metrics and Assurance

The Committee considers that one of the main weaknesses of the document is uneven use of data and assurance. Several sections rely on historic data (including data from 2018–2021) or datasets with limited completeness, which reduces the ability to provide a current and robust picture of performance.

For example, some domains only present data up to 2020, and audit sections frequently report "no case ascertainment" or limited submission rates. The Committee recommends that future *Quality Accounts* prioritise the inclusion of the most recent available data, alongside clear explanations where this is not possible.

The Committee also notes that response rates for patient surveys are not consistently reported. Without this context, it is difficult to assess the strength and representativeness of the findings. The Committee would therefore welcome inclusion of response rates and an explanation of how feedback is used to shape priorities and improvement actions.

In addition, the Committee would welcome greater transparency in relation to cancer performance data, including clearer presentation of activity levels and outcomes, to support meaningful scrutiny.

Presentation of the Document

The Committee recognises the challenges of balancing statutory requirements with accessibility. However, the document remains lengthy and at times difficult to navigate. The Committee recommends clearer summaries, improved data visualisation, and consistent presentation of metrics to support readability and public understanding.

Engagement with the Health Scrutiny Committee for Lincolnshire

During 2025-26, engagement with the Health Scrutiny Committee for Lincolnshire has continued, with various representatives of the Trust attending Committee meetings and submitting comments and statements for the Committee's benefit. We look forward to continued engagement with the Trust's managers, and where appropriate clinicians, in the coming year.

Conclusion

The Committee welcomes the opportunity to comment on the draft *Quality Account* and recognises progress and transparency. However, it considers that the document would be strengthened by clearer focus on measurable outcomes, benchmarking and delivery. The Committee looks forward to continued engagement and assurance of demonstrable, measurable improvements in safety, experience and quality across both hospital and community pathways.