ENFORCEMENT UNDERTAKINGS

LICENSEE
The Leeds Teaching Hospitals NHS Trust (**"**the Licensee")
St. James's University Hospital
Beckett Street
Leeds
West Yorkshire
LS9 7TF

1. DECISION

NHS England, on the basis of the grounds set out below, and having regard to its Enforcement Guidance, has decided to accept from the Licensee the enforcement undertakings specified below pursuant to its powers under section 106 of the Health and Social Care Act 2012 ("the Act").

2. DEFINITIONS

In this document: "the conditions of the Licence" means the conditions of the licence held by providers of NHS services under Chapter 3 of Part 3 of the Health and Social Care Act 2012. From 1 April 2023 NHS trusts have been required to hold and comply with such a licence. Prior to 1 April 2023 NHS England, acting in exercise of its functions under section 27A of the NHS Act 2006, expected NHS trusts to comply with such conditions. "NHS Improvement" means the National Health Service Trust Development Authority, which was abolished and its functions transferred to NHS England on 1 July 2022 by the Health and Care Act 2022.

3. GROUNDS

3.1 The Licensee is the holder of a licence granted under section 87 of the Act.

3.2 Issues and need for action

3.2.1 NHS England has reasonable grounds to suspect that the Trust has provided and is providing health care services for the purposes of the health service in England while failing to comply with and apply those principles, systems and standards of good corporate governance which reasonably would be regarded as appropriate for a provider of health care services to the NHS, specifically the following conditions of the Licence: NHS2(2), NHS2(4), NHS2(5)(b), NHS2(5)(c), NHS2(5)(e), NHS2(5)(f) and NHS2(6).

3.2.2 In particular:

<u>Quality and governance</u>

3.2.2.1 The identification of risks in the Trust's maternity and neonatal services during 2025 brought to attention concerns both with quality governance in the organisation alongside wider concerns about the responsiveness of the organisation and leadership to these risks.

3.2.2.2 Subsequent well-led report by Care Quality Commission concluded an overall rating of 'Requires Improvement' from the previous 'Good' assessment.

3.2.2.3 The well-led report identified concerns of a perceived or real culture related to the organisation's balance between the priorities of quality and finance. Evidence suggested this may have been affecting the escalation of concerns and business cases to improve services across the trust.

3.2.2.4 The well-led report included evidence of reflections from leaders and staff that certain aspects of the organisational strategy influenced negatively and disproportionately on the confidence to escalate matters or make decisions.

3.2.2.5 The well-led report included evidence that some key Board relationships were not as effective as they could be and appeared to impact on what was escalated and shared openly, for example, there was limited transparency at board level on the CQC enforcement action taken in relation to the maternity service.

3.2.3 Need for action:

3.2.3.1 NHS England believes that the action which the Trust has undertaken to take pursuant to the undertakings recorded here is action required to secure that the breaches in question do not continue or recur.

4. APPROPRIATENESS OF UNDERTAKINGS

4.1 In considering the appropriateness of accepting in this case the undertakings set out below, NHS England has taken into account the matters set out in its Enforcement Guidance.

UNDERTAKINGS

NHS England has agreed to accept, and the Licensee has agreed to give, the following undertakings, pursuant to section 106 of the Act:

<u>Quality and governance</u>

1.1 The Licensee will promptly take all reasonable steps to meet applicable quality standards overseen by the CQC.

1.2 The Licensee will promptly take all reasonable steps to ensure it is applying those principles, systems and standards of good corporate governance which reasonably would be regarded as appropriate for a provider of health care services to the NHS.

1.3 The Licensee will, within a timeframe to be agreed with NHS England, submit to NHS England a recovery plan ("the Recovery Plan") setting out the steps it will take to achieve the objectives outlined in paragraphs 1.1 and 1.2 above including how it will address issues and recommendations in the CQC well-led report published 24 September 2025; and any risks and mitigations to achieving the Recovery Plan. The Recovery Plan must specify timescales for completion of identified actions.

1.4 The Licensee will periodically assess and, where necessary, revise the Recovery Plan to ensure it remains deliverable and sufficient to address the objectives in paragraphs 1.1 and 1.2. The Licensee will submit any proposed amendments to the Recovery Plan to NHS England in a timely manner and will implement such amendments as NHS England approve.

1.5 The Licensee will deliver the Recovery Plan in accordance with the timescales specified in the Recovery Plan.

1.6 The Licensee will provide, at a date to be agreed with NHS England, a report demonstrating how the board is assured that the objectives in paragraphs 1.1 and 1.2 has been met.

1.7 The Licensee will ensure that the delivery of the Recovery Plan, and other measures to improve quality and governance do not compromise its overall financial position. The Licensee will keep the financial cost of its quality improvements under close review and will notify NHS England as soon as practicable of any matters with are identified as potentially having a material impact on the Licensee's overall financial position.

1.8 The Licensee will implement sufficient governance arrangements to enable delivery of these undertakings. Such governance arrangements must enable the board to:

1.8.1 obtain clear oversight over the process in delivering these undertakings;
1.8.2 obtain an understanding of the risks to the successful achievement of the undertakings and ensure appropriate mitigation; and
1.8.3 hold individuals to account for the delivery of the undertakings.

<u>Meetings and reports</u>

2.1 The Licensee will attend meetings or, if NHS England stipulates, conference or on-line calls, at such times and places, and with such attendees, as may be required by NHS England.

2.2 The Licensee will provide such reports in relation to the matters covered by these undertakings as NHS England may require.

The undertakings set out above are without prejudice to the requirement on the Licensee to ensure that it is compliant with all the conditions of its licence, including any additional licence condition imposed under section 111 of the Act and those conditions relating to:

- compliance with the health care standards binding on the Licensee; and
- compliance with all requirements concerning quality of care.

Any failure to comply with the above undertakings will render the Licensee liable to further formal action by NHS England. This could include the imposition of discretionary requirements under section 105 of the Act in respect of the breach in respect of which the undertakings were given and/or revocation of the licence pursuant to section 89 of the Act.

Where NHS England is satisfied that the Licensee has given inaccurate, misleading or incomplete information in relation to the undertakings: (i) NHS England may treat the Licensee as having failed to comply with the undertakings; and (ii) if NHS England decides so to treat the Licensee, NHS England must by notice revoke any compliance certificate given to the Licensee in respect of compliance with the relevant undertakings.

LICENSEE

Signed (Chair or Chief Executive of Licensee)

Dated:17th October 2025

NHS ENGLAND

Signed: Fiona Edwards, Chair of the Regional Support Group (North East & Yorkshire)

Dated: 17 October 2025