

## **REPLACEMENT ENFORCEMENT UNDERTAKINGS 2026**

### **NHS TRUST:**

Shrewsbury and Telford Hospital NHS Trust ('the Licensee')  
Mytton Oak Road  
Shrewsbury  
SY3 8XQ

### **BACKGROUND**

NHS England accepted enforcement undertakings from the Licensee on 29 August 2024 ("2024 Undertakings"). Following a comprehensive review, NHS England was satisfied that the Licensee has complied with paragraphs 3, 5, 6 and 7 of the 2024 Undertakings relating to Quality Improvement Plan, Financial Plan, Funding Conditions and Spending approvals and System Oversight respectively and it therefore issued a compliance certificate for those undertakings.

Paragraph 4 of the 2024 Undertakings relates to an operational plan for Urgent and Emergency Care (UEC). Despite some improvements, the continuing pressures in UEC and the variation in the Licensee's performance in this area remains below the required levels of performance nationally and NHS England continues to have concerns over operational performance. The updated UEC undertakings set out below replace and supersede paragraph 4 of the 2024 Undertakings. Updated undertakings for programme management and reporting to NHS England are also retained in the form set out below and replace and supersede paragraphs 8 and 9 of the 2024 Undertakings relating to the same.

### **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").

### **GROUNDS**

#### **1. Licence**

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

#### **2. *Operational Performance – Urgent and Emergency Care***

2.1. NHS England has reasonable grounds to suspect that the Licensee has provided and is providing healthcare services for the purposes of the NHS in breach of the following conditions of its licence: NHS2.5 (a), (b), (c), (f) and (g).

## 2.2. In particular:

The Licensee has failed to meet the recovery standard in 2025/26 for the four-hour A&E performance, 12 hours waits in ED and ambulance handovers. All-type 4hr performance was 51.6% in January 2026 and remaining in common cause natural variation (plan 57%). National operational planning expectation 78% in March 2026. 12-hour Type 1 performance was 75.3% in January 2026 remaining in common cause natural variation (plan 79%). Average ambulance handover time for January was 93 minutes, against an expectation of maximum of 45 minutes

It is recognised that there have been several positive developments by the Licensee and across the Shropshire, Telford and Wrekin (STW) system in the management of UEC including:

The Licensee was a key contributor to the development and implementation of the system UEC Improvement Plan for 2024 to 2026. The second phase for 2025/26 was refreshed in February 2025 and agreed by all parties. The plan has been effectively implemented and received a positive reception from regional colleagues. It is monitored and updated as necessary via the system UEC Delivery Group, which is chaired by the group CEO of SaTH and Shropshire Community Health Trust (SCHT). A two year (2026- 28) UEC Improvement Plan is being developed by STW system partners to build on the progress during the 2024-26 UEC Improvement Plan. It is expected to be implemented April 2026

However, the performance delivery in particular for 4hr waits has not achieved the modest improvements set forth in the Licensee's operational plan for 2025/26. At month 07 (October) the plan trajectories were revised downwards, but these new trajectories have not been met. The Licensee submitted its first iteration of the Medium Term Plan (MTP) for 2026-29. It was non-compliant by a significant margin for 4 hr waits in ED 2026/27 to 2027/28. The final MTP submission February 2026 did not articulate any improvement on this position. It would be expected that the Licensee Board would have signed off both iterations of the MTP.

Despite some improvements, which reflect the enhanced approach both within the Licensee and system, the continuing pressures in UEC and the variation in the Licensee's performance in this area remains below the required levels of performance nationally. NHS England continues to have concerns regarding operational performance for UEC and he approach to delivering significant improvements.

These breaches by the Licensee demonstrate a failure of governance arrangements including, in particular, failure to establish and effectively implement systems or processes:

- (a) to ensure compliance with the Licensee's duty to operate efficiently, economically and effectively;
- (b) for timely and effective scrutiny and oversight by the Board of the Licensee's operations; and
- (c) to ensure compliance with healthcare standards binding on the Licensee.

## 2.3 Need for action:

- 2.3.1 NHS England believes that the action which the Licensee has undertaken to take pursuant to these Undertakings is action required to secure that the failures to comply with the relevant requirements of the conditions of the Licence do not continue or recur.

## 2.4 Appropriateness of Undertaking:

- 2.4.1 In considering the appropriateness of accepting 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:

### 1. Operational Plan – Urgent and Emergency Care

1.1 The Licensee will, by a date to be agreed with NHS England, ensure that there is a robust UEC improvement plan (“**the UEC Plan**”) in place to recover operational performance to meet and sustain urgent and emergency care standards. Improvement trajectories will be agreed with NHS England Midlands Region with particular emphasis on

- patients being admitted, transferred or discharged within four hours
- ambulance handovers
- patients spending more than 12 hours from arrival in the Emergency Department

1.2 The UEC Plan will include actions to:

- 3.2.1. monitor the impact on quality and mitigate potential harm;
- 3.2.2. address any issues relating to the effectiveness of the leadership and management within the Emergency Department or wider organisation;
- 3.2.3. address any cultural or behavioural issues which may be acting as a barrier to improved performance;
- 3.2.4. include trajectories to show how the Licensee will meet the targets for UEC agreed with NHS England;
- 3.2.5. describe the key risks and the mitigating actions that will be taken to support the UEC Plan’s implementation;
- 3.2.6. be jointly developed with Shropshire, Telford and Wrekin Integrated Care Board (**the ICB**), West Midlands Ambulance Service NHS Foundation Trust and other system partners as required;
- 3.2.7. describe the key milestones associated with the implementation of the UEC Plan, including the deadline for completion and senior accountable officers for each milestone; and

- 3.2.8. confirm the key performance indicators which the Licensee will use to measure progress against each action, and the expected impact on overall UEC performance.
- 1.3 The Licensee will, working with system providers and the ICB, keep the UEC Plan under continuous review and will update it as required. Any proposed updates will be subject to review and approval by NHS England.
- 1.4 The Licensee will deliver the UEC Plan and will provide NHS England with a monthly report on the delivery of each of the improvement priorities identified within the UEC Plan. Reports will be submitted in writing and reviewed as part of the monthly Provider Review Meetings between the Licensee and NHS England. The Licensee will also provide more regular and / or ad hoc updates on the UEC Plan's delivery if requested by NHS England.
- 1.5 The Licensee will notify NHS England as soon as practicable when it becomes aware of matters which materially affect the Licensee's ability to deliver the UEC Plan, and the Licensee shall promptly update the UEC Plan to address those matters. The Licensee shall submit an updated UEC Plan within five working days of notifying NHS England of the proposed change. Any changes will be subject to approval by NHS England before they can be actioned by the Licensee.
- 1.6 The Licensee will ensure that the implementation of the UEC Plan does not compromise its overall financial position. The Licensee will keep the financial cost of its improvements under close review and will notify NHS England and the ICB as soon as practicable of any matters which are identified as potentially having a material impact on the Licensee's overall financial position.

## **2. Programme management**

- 2.1. The Licensee will implement sufficient programme management and governance arrangements to enable delivery of these Undertakings.
- 2.2. Such programme management and governance arrangements must enable the board to:
- 2.2.1. obtain clear oversight of progress in delivering these Undertakings;
  - 2.2.2. obtain an understanding of the risks to the achievement of the Undertakings and ensure appropriate mitigation; and
  - 2.2.3. hold individuals to account for the delivery of the Undertakings.
- 2.3. The Licensee will provide to NHS England direct access to its staff, advisors, programme leads, and the Licensee's board members as needed in relation to matters covered by these Undertakings.
- 2.4. The Licensee will ensure it has sufficient capacity and capability to deliver the improvement plans referenced above. Where deemed by NHS England to be

necessary, the Licensee will obtain external support from sources and according to a scope and timescale to be agreed with NHS England.

### **3. Meetings and reports**

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

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

3.3 The Licensee will attend monthly oversight and assurance meetings, and executive calls with NHS England to discuss its progress in the required actions as set out in this document.

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 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.

**THE LICENSEE**

Signed



Andrew Morgan  
Chair of Shrewsbury and Telford Hospital NHS Trust

Dated 18/03/2026

**NHS ENGLAND**

Signed



Rebecca Farmer  
Director of System Co-ordination and Oversight – Midlands and member of the Regional  
Support Group (Midlands)

Dated 24/03/2026