

APPENDIX B

ENFORCEMENT UNDERTAKINGS

LICENSEE:

Warrington and Halton Teaching Hospitals NHS Foundation Trust (“the Licensee”)
 Warrington Hospital
 Lovely Lane
 Warrington
 WA5 1QG

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”).

GROUND

1. Licence

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

2. Breaches

2.1 NHS England has reasonable grounds to suspect that the Licensee has provided and is providing health care services for the purposes of the NHS in breach of the following conditions of its licence:

2023 Licence	Summary of condition
NHS2(5)(a), (b), (c) (d), (f) and (g)	<p>The Licensee shall establish and effectively implement systems and/or processes:</p> <p>(a) to ensure compliance with the Licensee’s duty to operate efficiently, economically and effectively;</p> <p>(b) for timely and effective scrutiny and oversight by the Board of the Licensee's operations;</p> <p>(c) to ensure compliance with health care standards binding on the Licensee including but not restricted to standards specified by the Secretary of State, the Care</p>

	<p>Quality Commission, NHS England and statutory regulators of health care professions;</p> <p>(d) for effective financial decision-making, management and control (including but not restricted to appropriate systems and/or processes to ensure the Licensee's ability to continue as a going concern);</p> <p>(f) to identify and manage (including but not restricted to manage through forward plans) material risks to compliance with the conditions of its licence;</p> <p>(g) to generate and monitor delivery of business plans (including any changes to such plans) and to receive internal and where appropriate external assurance on such plans and their delivery.</p>
NHS2(7)	The Licensee shall ensure the existence and effective operation of systems to ensure that it has in place personnel on the Board, reporting to the Board and within the rest of the Licensee's organisation who are sufficient in number and appropriately qualified to ensure compliance with the Licence conditions.
CoS3	The Licensee shall at all times adopt and apply appropriate systems and standards of corporate governance and financial management.

3. Financial Planning

3.1 In particular:

- 3.1.1 the Licensee delivered a deficit £5.5m adverse to plan in Financial Year (FY) 24/25 despite being in receipt of significant deficit support funding (DSF).
- 3.1.2 in addition, of the Cost Improvement Programmes (CIPs) delivered in year, only 68% were recurrent which increased risk and the improvement challenge required in FY25/26 with an underlying deficit at the end of the year £12m worse than the out-turn deficit (excluding DSF) at £45.2m deficit.
- 3.1.3 although the Licensee is on plan at Month 6 25/26, only 36% of CIPs have been delivered recurrently and the Licensee has confirmed that it does not have a plan which would achieve its financial targets for the current financial year. This position, reported in the recent mid-year review meeting, is aligned with the risks identified by Simon Worthington in his independent review of the forecast financial positions for the Cheshire and Merseyside Integrated Care System organisations.

3.2 The matters set out above demonstrate a failure of financial governance arrangements and financial management by the Licensee, including, in particular:

3.4.1 a failure by the Licensee to adopt and apply systems and standards of corporate governance and of financial management which reasonably would be regarded as:

(a) suitable for a provider of the Commissioner Requested Services provided by the Licensee, and

(b) providing reasonable safeguards against the risk of the Licensee being unable to carry on as a going concern.

3.4.2 a failure to establish and effectively implement systems and/or processes:

(a) to ensure compliance with the Licensee's duty to operate efficiently, economically, and effectively;

(b) for effective financial decision-making, management, and control (including but not restricted to appropriate systems and/or processes to ensure the Licensee's ability to continue as a going concern); and

(c) to identify and manage material risks to compliance with the conditions of its licence including through development and delivery of forward plans; and

(d) to ensure that it has in place personnel on the Board, reporting to the Board and within the rest of the Licensee's organisation who are sufficient in number and appropriately qualified to ensure compliance with the licence conditions.

4. Performance

4.1 In particular:

4.1.1 the Licensee's A&E performance for March 2025 was 68.4%, which was a deterioration in performance compared to 12 months prior (March 2024 – 69.9% performance) and below the national ambition for 2024/25 of achieving 78%.

4.1.2 the Licensee's A&E performance in 2025/26 has continued to deteriorate. Latest published A&E performance for October 2025 shows performance of 67.5%, which ranked the Licensee in the bottom quartile of NHS acute trusts in England.

4.1.3 similarly, the Licensee's performance for percentage of patients spending over 12 hours in Emergency Department (ED) in March 2025 was 19.8%. This was an increase compared to performance 12 months prior (19.6% in March 2024).

4.1.4 the Licensee's 12 hours in ED performance in 2025/26 has similarly continued to deteriorate. Latest published 12 hours in ED performance for October 2025 shows performance of 23.6%, this has consistently been over double the national average.

The matters set out above demonstrate a failure of governance arrangements by the Licensee, including, in particular failure to establish and effectively implement systems and/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;
- (c) to ensure compliance with healthcare standards binding on the Licensee.

5. Need for Action

5.1 NHS England believes that the action, which the Licensee has undertaken to take pursuant to these undertakings, is action to secure that the breaches in question do not continue or recur.

6. Appropriateness of Undertakings

6.1 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.

1. Financial planning

1.1 The Licensee will take all reasonable steps to deliver the 2025/26 Financial Plan, as agreed with NHS England.

1.2 The Licensee will deliver a quarter-on-quarter run rate improvement from Quarter 3 2025/26 and throughout 2026/27.

1.3 The Licensee will comply with all documented actions required by NHS England through the oversight meetings, led by NHS England or its representative.

2. Funding conditions and spending approvals

2.1 Where interim support financing or planned term support financing is provided by the Secretary of State for Health and Social Care to the Licensee pursuant to section 40 of the National Health Service Act 2006, the Licensee will comply with any terms and conditions which attach to the financing.

2.2 The Licensee will comply with any reporting requests made by NHS England in relation to any financing to be provided to the Licensee by the Secretary of State for Health and Social Care pursuant to section 40 of the NHS Act 2006.

2.3 The Licensee will comply with any spending approvals processes that are deemed necessary by NHS England.

3. Performance

3.1 The Licensee will take all reasonable steps within its control to:

3.1.1 improve waiting times for patients attending A&E at Warrington Hospital, with the ambition to achieve a minimum of 78% A&E performance against the 4 hour wait time target by March 2026; and

3.1.2 as a minimum, reduce the proportion of patients spending over 12 hours in ED to at least 16.25% by 31 March 2026, as agreed as part of the 2025/26 Licensee's Operational Plan.

3.1.3 ensure that there is a robust action plan in place to address 12 hour waits in the ED. Timescales are as agreed in the overarching Emergency Department Improvement Plan.

4. Reporting

4.1 The Licensee will provide regular reports to NHS England through the oversight meetings led by NHS England or its representative on its progress in complying with the undertakings set out above.

4.2 The Licensee will attend monthly oversight meetings, or, if NHS England stipulates, conference calls, as required, to discuss its progress in meeting those undertakings. Oversight meetings will be led by NHS England or its representative, with attendees specified by NHS England.

- 4.3 The Licensee will provide NHS England with the assurance relied on by its Board in relation to its progress in delivering these undertakings, upon request.
- 4.4 The Licensee will comply with any additional reporting or information requests made by NHS England.

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 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: 9 February 2026

NHS ENGLAND



Signed (North West Regional Director and Chair of the Regional Support Group)

Dated: 11 February 2026