South Eastern Health and Social Care Trust

Paper No: SET/151/26	
Trust Board Meeting: 30 September 2026	
Public Agenda Item 4.2	

Title of Paper:	**SEHSCT Annual Quality Report 2025/26**		
For Decision	~~**For Assurance**~~	~~**For Information**~~	~~**For Discussion**~~

1.0	**Background:**
	The Annual Quality Report 2025/26 provides a Trust-wide overview of the quality, innovation and organisational learning activity undertaken across the Trust during the year. The Report recognises and celebrates the commitment, expertise and dedication of staff and teams in delivering high-quality, safe and person-centred care. It also provides a balanced assessment of progress, identifying where improvement work remains ongoing and where further organisational focus, leadership support or resources may be required. The Report is structured around the Trust's Quality4All Strategy and reflects activity across the five themes of Transforming the Culture, Strengthening the Workforce, Measuring the Improvement, Raising the Standards and Integrating the Care A draft of the Report (**SET/152/26**) is tabled for Members to consider for approval.
2.0	**Key Issues:**
	The Annual Quality Report demonstrates growing organisational ambition in relation to quality management, improvement, implementation, innovation and learning. During 2025/26, progress included the development of improvement and learning networks, increased application of systems thinking and implementation science, stronger partnerships with academia, industry and regional organisations, and continued investment in staff capability to lead change. This year, teams were asked to move beyond describing activity and provide a clearer assessment of: • the impact and measurable benefits of their work; • the challenges and barriers affecting delivery; • the relationship between the work and the Trust's Quality Approach; and • the priorities and considerations requiring further attention during 2026/27. The Report highlights examples of measurable improvement across patient safety, access, equity, staff capability, service efficiency, digital optimisation, care closer to home, research and innovation. Examples include improvements in equitable access within Type 1 diabetes services, implementation of Enhanced Patient Care and Observation across adult inpatient wards, expansion of Hospital at Home, development of the Change Agent Network, increased patient participation in

	research and stronger use of co-design and lived experience in service improvement. The Report also identifies persistent system challenges. These include hospital and community flow, workforce and operational pressures, financial constraints, variation in practice, data quality, access to timely information and the capacity to sustain and scale successful improvements. It recognises that individual projects can demonstrate considerable benefit, but isolated success is insufficient without the organisational mechanisms, leadership, accountability and infrastructure required to embed and spread effective practice. The Report is presented as a draft to allow Trust Board members to offer challenge, identify omissions and propose final amendments before publication.
3.0	**Link to Strategic Objectives:**
	Our People ☐ Population Health & Health Inequalities ☐ Delivering Care Closer to Home ☐ Hospital Care ☐ Safety, Quality and Experience of Care ☒
4.0	**Resource Implications (inc Organisational, Financial, Human Resources):**
	1. Organisational
	The Annual Quality Report does not commit the Trust to additional expenditure. However, it identifies several areas where delivery of the proposed priorities will require greater coordination and more deliberate use of existing organisational capability. Key resource considerations include: • developing the digital, analytical and reporting capability required to optimise encompass and support real-time quality intelligence; • improving organisational processes for innovation, including information governance, procurement, ethics, evaluation and partnership working; • aligning quality improvement, workforce, operational and financial planning so that value, outcomes and responsible stewardship are considered together. The Report acknowledges that operational demand, staffing pressures and financial constraints continue to limit the time and capacity available for strategic improvement. Successful delivery of the 2026/27 recommendations will therefore require clear prioritisation, executive sponsorship and alignment of resources with the Trust's most significant quality and transformation priorities.
	2. Financial
	• integrating value based healthcare into our planning, service design, resource allocation, clinical interactions and impact evaluation.

	3. Human Resources
	• strengthening senior sponsorship and directorate accountability for the Change Agent Network, Quality Academy alumni and staff with advanced improvement expertise.
	4. Environmental Factors Yes ☐ No ☒
5.0	**Impact on Safety, Quality and Experience (SQE):**
	1. Safety
	The Annual Quality Report strengthens safety by providing Trust-wide visibility of improvement activity, emerging risks and areas where variation or further action is required. It highlights the growing use of systems thinking, structured improvement, implementation and learning approaches to support safer care, including Enhanced Patient Care and Observation across adult inpatient wards. By identifying continuing challenges in areas such as flow, workforce pressures, data quality and access to timely information, the report supports Board oversight, organisational learning and more focused action to embed and spread effective safety practices.
	2. Quality
	The Annual Quality Report provides assurance that quality activity is taking place across clinical, social care and corporate services and that teams are increasingly using structured improvement, implementation and evaluation approaches to demonstrate impact. The emphasis on quantifying impact provides greater transparency about where progress has been achieved and where evidence is still developing. It also supports a clearer connection between frontline improvement activity, organisational priorities and Board-level oversight.
	3. Experience
	The Annual Quality Report demonstrates an increasing focus on person-centred care by highlighting the use of co-design, lived experience and patient participation in research and service improvement. It provides assurance that the perspectives of patients, service users, families and staff are informing how services are developed, evaluated and improved. It is evident through the report that there is a need to strengthen these approaches consistently across the Trust. This supports greater transparency, responsiveness and partnership with those who receive and deliver care
6.0	**Key Risks and Proposals to Mitigate:**
	1. Key Risks
	Risks throughout the AQR are highlighted by services through the stated challenges and considerations on each of the summary boxes. These should be considered by services and senior managers.

	2. Proposals to Mitigate
	Directorates to consider the stated challenges and support teams to address these.
7.0	**Risk Register:**
	It is listed on BAF? Yes ☐ No ☒ Is it listed on CRR? Yes ☐ No ☒

Lead Director:	**Helen Moore, Director of Planning, Performance & Informatics (Lead Director for Quality)**
Date:	**22 September 2026**

Reasons for Paper Presentation

Decision	*Used when an item requires a formal agreement or endorsement by the meeting / committee members. Examples are approving minutes, budgets, proposals or policies.*
Assurance	*Used when an item can be measured against a certain criteria / standard. Examples are a project is on course with delivery or financial targets are being met.*
Information	*Used when an item is presented for the purpose of updating or informing the attendees without requiring a decision or action, such as reports, updates, or announcements.*
Discussion	*Used when an item is listed primarily for open discussion, brainstorming or gathering input from the members without requiring an immediate decision.*