

Performance Overview

NOF publication Q2 December 2025

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Explaining the league tables and our position

How we're assessed

- **CQC inspections (most recent in 2024/25)**
 - Well Led
 - Caring
 - Safety
 - Effectiveness
 - Responsiveness
- **Key National Overview Framework**
- **Patient and staff experience measures:**
 - National surveys - staff and patients
 - Friends and family test - staff and patients
 - Complaints, PALS
 - Staff turnover, sickness, vacancies
- **Model hospital: 60 benchmarking measures**



The National Oversight Framework (NOF)

- Managed by NHS England to help identify improvement opportunities
- Uses key measures to assess organisational performance:
 - Access to services, e.g. waiting times for A&E and cancer
 - Effectiveness and experience of care
 - Patient safety
 - People and performance
 - Finance and productivity
- 4 performance segments plus a 5th for Trusts receiving extra support
- The lower the segment number, the better performing the group
- Trusts forecasting a deficit cannot be in segments 1 or 2 (applies to UHCW)
- NHS England plans to publish results quarterly

About the league table

- Helpful in highlighting areas of focus - we know about these and are addressing
- Shows part of the picture, but not all:
 - Uses some of the performance measures taken from the National Outcomes Framework (NOF)
 - Doesn't take into account CQC ratings
 - Important to consider wider NOF, CQC ratings and patient/staff experience ratings
- League table approach/measures – tool still evolving
- National planning guidance – 2026/27 metrics to include quality
- Next league table publication advised c. January 2026



UHCW position for Q2 (July – Sept 2025)

UHCW moves from Segment 4 into Segment 3

Q2 Trust ranking = 96th out of 134 Trusts (one of 17 significantly improved)

(previous position 132nd out of 134 Trusts)

Pleased with reasonable progress against targeted plan to address critical improvements – focus now to sustain current position



QUALITY AND PERFORMANCE

38 trusts move league table segment

By Dave West | 11 December 2025



13 Comments

› Nine trusts rise to segment 1 (the best) and nine fall to segment 4 (the worst)

› "Capability" judgements delayed, but two trusts removed from "recovery support programme"

Thirty-eight trusts have moved segments in the NHS England league tables for the second quarter of 2025-26, despite very few recording a significant change in their performance score.

NHS England today updated the league tables – launched in September – to reflect quarter two (July-September) of this financial year.

Nearly 20 per cent (38 trusts) of the total 205 providers changed segments (see table below) from the first quarter.

Six of these were the result of the "financial override" – which means any trusts in segment 1 or 2 are downgraded to 3 if they are in deficit. Four trusts were removed from the override due to their finances improving, and two had it newly applied.

The remainder of the segment changes were due to adjustments to the trust's performance score, which is calculated based on the basket of measures in the NHS oversight framework, spanning a range of areas including finance, waiting times and staff engagement.

To try to explain trusts' moves from quarter to quarter, NHSE has applied a statistical significance test to these score changes.



University Hospitals
Coventry and Warwickshire
NHS Trust

Improvement areas since Q1 (April-July 2025)

- **Financial deficit:** substantial financial savings achieved and on plan – Sept 25 – vacancy control process/no redundancies
- **Waiting times:** Targeted improvement plans underway – overall waiting lists significantly reduced
- **Cancer Faster Diagnosis Standard (FDS)** continues to improve – 81% (target 78%) in Q2
- **Urgent care** – best in region for ambulance turnaround times – no ‘corridor care’ since 2019
- **Faster response times to patient complaints** – 98% in 25 working days
- **Dedicated coding team** for backlog activity data to NHS England post EPR implementation

Critical areas of focus

- Quality and efficiency:
 - Cancer treatment wait >62-days
 - A&E patients >12 hours and >4 hours
 - Waits in all areas >52 weeks
 - Diagnostic waits >6 weeks
 - Outpatient prescription waits
 - Delays to discharge
- Financial goals
- Complete coding post implementation of new Electronic Patient Records system

Q2 NOF Scores

| Domain | Metric | Q1 NOF | Q2 NOF |
|----------|---|--------|--------|
| Elective | OF0023 – Percentage of patients waiting less than 18 weeks | 3.4 | 3.1 |
| | OF0003 – Percentage of patients waiting over 52 weeks | 2.81 | 2.96 |
| | OF0106 - Difference between actual and planned 18 week elective performance | 1.0 | 1.0 |
| | OF0005 - Percentage of patients waiting over 52 weeks for community services | / | 1.0 |
| Cancer | OF0010 - Percentage of urgent cancer referrals to receive a definitive diagnosis within four weeks. | 2.99 | 1.00 |
| | OF0011 - Percentage of patients treated for cancer within 62 days of referral | 3.32 | 3.16 |
| UEC | OF0013 – Percentage of emergency department attendances admitted, transferred or discharged within four hours | 2.99 | 2.69 |
| | OF0014 – Percentage of emergency department attendances spending over 12 hours in the department | 3.14 | 2.70 |

Q2 NOF Scores

| Domain | Metric | Q1 NOF | Q2 NOF |
|----------------------------|---|--------|--------|
| Effectiveness & Experience | OF0025 - Average number of days between planned and actual discharge date | 3.16 | 2.89 |
| | OF0046 - Summary Hospital Level Mortality Indicator | 3 | 3 |
| | OF0057 – Percentage of Urgent Community Response patients seen within two hours | / | / |
| Workforce | OF0084 - Staff survey engagement theme score | 2.71 | 2.71 |
| | OF0082 - Staff sickness rate | 3.01 | 3.12 |
| Overrides | OF2000 – Does the organisation have a financial deficit? | / | / |
| | OF2001 – Is the organisation in the Provider Improvement Programme? | / | / |

Next Steps

- Continued focus on recovery
- Current winter pressures (super flu) and planned industrial action
- Shared focus on long length of stay and discharge e.g. national outlier for patients staying over 21 days. Improved position in Nov 25
- Note we are anticipating a dip in position in Q3 due to the necessary reprioritising of patients - right thing to do for patients
- Following Q3, we expect UHCW performance to be back on track
- New developments and investment in Wave 1 Neighbourhood Health (Coventry) and collaborative working with SWUFT on Warwickshire approach

Appendix 1: Specific examples of improvements

Specific service improvements

| Emergency Department | Medicine | Trauma and Neuro Services | Surgical Service |
|--|--|--|---|
| <ul style="list-style-type: none">Improved 4 hour/ 12 hour waiting list performanceBest performance in West Midlands (ambulance handovers)New larger waiting room built and opened Dec 25. | <ul style="list-style-type: none">52 weeks – improving referral to treatment position each month from 59.5% to 68.1% Oct 2025Reduced waiting times further for urgent emergency care (4 and 12 hour)Faster access for cancer diagnostics within 6 weeksImproving process for discharge planning | <ul style="list-style-type: none">Waiting list reduced by 2634 by Dec 2025Thrombectomy cases doubledDelivery of access targetsContinuing to evolve elective surgical hub at Rugby St CrossReal time sensors introduced in theatres to increase performance (start times) | <ul style="list-style-type: none">Theatre utilisation increased from 81.2% to 87.8% at RugbyInvestment in technology in theatres such as AI and robotic surgeryAdditional 287 theatre slots due to theatre efficiency programme |

Specific service improvements

Women's and Children

- Best maternity heat map in Midlands region
- Launch of best start in life hub at City of Coventry Health Centre
- 87% Faster Diagnosis Standard for Gynae cancers (all time best)
- Gynae cancer pathway redesign implemented for post-menopausal bleeding
- 12% increase paediatric performance.

Clinical Diagnostics

- New self-check in kiosks for pharmacy opened in UH Outpatients to reduce queues
- Introduction of self check in for outpatients
- Outpatient Transformation Programme underway to increase productivity
- Quicker histology results
- PET CT scan waiting times reduced to 2-3 days.

Integrated Care and Community Services

- 52 wk community waits included in metrics for first time (performance 1)
- Scheduling tool (CIVICA) go live in UEC increasing out of hospital capacity
- Implementation of therapy groups including walking groups and Pilates for improving outcomes
- Single point of access in MSK - fewer patients waiting for orthopaedic surgery
- Care home admission avoidance - reduction of 50% care home attendances over the year.

Corporate

- Financial savings - Reduced agency and bank spend e.g. 13% and 60% for Women's and Children's
- Variable pay has been reduced to more consistent rates
- Outpatients remodelling