

Meeting of the Board of Directors

December 2025

Subject / Title	Trust report																
Author(s)	Executive Directors																
Presented by	Roger Spencer, Chief Executive																
Summary / purpose of paper	This report brings together the key issues for the Board of Directors in relation to our performance, strategy, workforce, the Greater Manchester system landscape, the regulatory landscape and other pertinent matters within the scope of the board's responsibilities.																
Recommendation(s)	The board is asked to review the contents of the paper.																
Background Papers	Integrated Performance, Quality and Finance Report Finance Report																
Risk Score	See Board Assurance Framework																
EDI impact / considerations																	
Link to: ➤ Trust's Strategic Direction ➤ Strategic Objectives	<ol style="list-style-type: none"> 1. To deliver safe, effective & equitable care 2. To deliver excellent financial and operational performance 3. To provide integrated clinical, research and education services 4. To be an excellent place to work and attract the best staff 5. To transform our services to improve access and reduce health inequalities 6. To provider leadership within the wider NHS cancer system 																
Acronyms or abbreviations contained in the report	<table> <tbody> <tr> <td>NHSE</td> <td>NHS England</td> </tr> <tr> <td>FDS</td> <td>Faster Diagnosis Standard</td> </tr> <tr> <td>PDR</td> <td>personal development review</td> </tr> <tr> <td>GM</td> <td>Greater Manchester</td> </tr> <tr> <td>VIP</td> <td>Value Improvement Programme</td> </tr> <tr> <td>EPR</td> <td>electronic patient record</td> </tr> <tr> <td>AI</td> <td>Artificial Intelligence</td> </tr> <tr> <td>NIHR</td> <td>National Institute for Health & Care Research</td> </tr> </tbody> </table>	NHSE	NHS England	FDS	Faster Diagnosis Standard	PDR	personal development review	GM	Greater Manchester	VIP	Value Improvement Programme	EPR	electronic patient record	AI	Artificial Intelligence	NIHR	National Institute for Health & Care Research
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Trust Report
December 2025 (November data)

Introduction

The Christie continues to be a high-performing organisation, strategically well positioned, with no current issues requiring escalation and a projected achievement of annual objectives across all strategic domains.

This consolidated view of the Trust's operational and strategic performance summarises the current position with regard to board capability assessment, compliance with operational requirements, progress against our annual strategic milestones all within the context of national policy developments. Further details on the items in the report can be obtained from the links provided. Risks to our strategic milestones are reported in detail in the Board assurance Framework and details of operational performance are in the Integrated Performance, Quality & Finance report.

Board Capability

The Christie's Board Capability self-assessment provides assurance of the board's leadership capacity, governance maturity, and preparedness to meet national performance expectations.

Our self-assessment of full compliance against the [NHS England provider capability](#) domains was approved at the September Public Board and submitted to NHSE by their October deadline. The table below summarises the position with all domains rated Green, with no escalation required. A declaration of full compliance has accordingly been made to NHSE.

NHSE Board capability domain	Relevant Indicators	Evidence	RAG rating
1. Strategy & Leadership	Oversight Framework segment; national ranking	NOF Segment 1, Q2 ranked 7 th nationally NHS Acute & Specialist Trusts.	Green
2. Quality of Care	62-day cancer standard; Faster Diagnosis Standard; nurse staffing	62-day and FDS remain above target. Nurse staffing consistently at/above safe 1:8 ratio.	Green
3. Workforce	Sickness absence; PDR compliance; training compliance	Sickness 4.93% (lowest in GM). PDR compliance (87.2%) and mandatory training compliance (94.9%)	Green
4. Partnerships & System Role	GM Collaborative contributions; national audits	Leadership in Cancer Alliance. Lead GM aseptic programme. OECI reaccreditation confirms global top-tier status.	Green
5. Financial Sustainability	Monthly surplus; VIP delivery	Surplus (£5m) on plan; value improvement plan target achieved.	Green
6. Improvement & Innovation	Clinical trial set-up; AI pilots; EPR milestones	Research set-up below 60-days. Digital/AI projects and Future Christie milestones progressing to plan.	Green



Operational Performance – Month 8 Position

The Trust's national ranking and Segment 1 status confirm our continued strong external assurance of our leadership and capability.

The Christie continues to perform strongly across all domains. We remain in Segment 1 of the NHS Oversight Framework, the highest possible rating, and at Q2 are ranked 7th nationally among acute and specialist providers. This position reinforces our international standing as one of the top 25 global cancer centres as reported at the September board meeting.

Performance across quality, operational, financial and workforce domains remain compliant with requirements. Full details are provided in the Integrated Performance Report.

Strategic Objectives – Month 8 Position

Progress against the 2025/26 annual milestones of each of our six strategic objectives is currently rated Green, with risks actively managed and oversight of risks clearly assigned to committees or the board and tracked through the Board Assurance Framework.

Strategic Objective 1: Safe, Effective and Equitable Care

Quality remains consistently high, with proactive risk management and a maturing learning culture providing strong assurance on patient safety.

- Overall Status: Green
- BAF Risks: 0 ≥15
- Committee Oversight: Quality Assurance Committee
- Executive Lead: Executive Chief Nurse

There were no significant adverse quality variances in October. One operational risk currently scores 12 or above and risks are actively monitored via the Risk & Quality Governance Committee, with mitigation plans in place.

During November, we received formal notification that the transplant program has been re-accredited by JACIE (Joint Accreditation Committee of the ISCT and the EBMT) for another 4 years.

Strategic Objective 2: Excellent Financial and Operational Performance

The Trust is financially stable and operationally compliant, with no deviation from plan and full delivery against agreed improvement targets.

- Status: Green
- BAF Risks: 2 ≥15
- Committee Oversight: Senior Management Committee
- Executive Lead: Executive Director of Finance

At Month 8, the Trust is delivering a financial surplus of £5 million, in line with plan. The Value Improvement Plan for 2025/26 has been achieved, and operational performance remains compliant against all major cancer standards, including the 62-day, 31-day and Faster Diagnostic Standard (FDS) metrics.

Strategic Objective 3: Integrated Clinical, Research and Education Services

The Trust is strengthening its research and academic profile, with national investment secured and a strategic education proposal in development.



- Status: Green
- BAF Risks: 0 ≥15
- Committee Oversight: Board of Directors
- Executive Lead: Director of Research and Director of Education

We are working towards the national 60-day benchmark for Research trial set-up times which have improved. Further process improvements are taking place to sustain and further improve this position.

A proposal to establish Higher Education status was shared at the November 2025 Board of Directors. This represents a strategic opportunity to strengthen our academic partnerships and reinforce our position as a centre of excellence in cancer education.

Strategic Objective 4: Excellent Place to Work and Attract the Best Staff

The Christie maintains a high performing, engaged workforce with strong, nationally leading, indicators of morale, inclusion and leadership visibility.

- Status: Green
- BAF Risks: 0 ≥15
- Committee Oversight: Workforce Assurance Committee
- Executive Lead: Director of Workforce

Workforce indicators remain strong. Mandatory training compliance stands at 94.9%, and PDR completion is at 87.2%. Sickness absence is currently at 4.93%, the lowest in Greater Manchester. The Christie continues to be rated in the top category nationally for compassionate and inclusive culture, staff engagement, morale and flexibility, as confirmed by the NHS Staff Survey 2024.

The British Medical Association has confirmed that strike action will go ahead following a vote of members. Resident doctors will stage a five-day walkout from 7am on Wednesday 17th December until 7am on Monday 22nd December.

The national Staff Survey closed on the 28th November with a 47% response rate. The Trust is expected to receive early sight of our feedback in late December. NHS England has indicated that national publication of the 2025 Staff Survey results is expected in Spring 2026.

Strategic Objective 5: Transform Services and Reduce Inequalities

Transformation is progressing as planned, with digital infrastructure and service equity both advancing in line with strategic commitments.

- Status: Green
- BAF Risks: 0 ≥15
- Committee Oversight: Board of Directors
- Executive Lead: Future Christie Director, and Director of Strategy

Our Future Christie transformation programme remains on track. The Patient Portal has been successfully rolled out, and development of a business case for a new electronic patient record (EPR) is underway. The capital programme is progressing to plan and remains within budget.

We continue to address inequalities in access to services. Notably, we have consistently achieved the Faster Diagnostic Standard target for haematology patients in Mid-Cheshire, demonstrating our commitment to equitable care across the region.



Strategic Objective 6: Leadership Within the Wider NHS Cancer System

The Christie's leadership role within the regional and international cancer system is recognised and expanding, reinforcing our strategic influence.

- Status: Green
- Key Updates: OECI reaccreditation; GM Collaborative leadership; network expansion
- BAF Risks: 0 ≥15
- Committee Oversight: Board of Directors
- Executive Lead: Director of Strategy

The Trust continues to play a leading role within the Greater Manchester Provider Collaborative, contributing to all eight shared priorities and leading the GM Aseptic programme. Our haematology network has expanded to include Macclesfield and Crewe with active plans to extend to additional sites, further consolidating our system leadership.

The table below summarises our current delivery status against the six strategic objectives, including risk ratings and committee oversight.

Strategic Objective	Risk rating	Committee oversight
1 Safe, Effective and Equitable Care		Quality Assurance Committee
2 Excellent Financial and Operational Performance		Board of Directors
3 Integrated Clinical, Research and Education Services		Board of Directors
4 Excellent Place to Work and Attract the Best Staff		Workforce Assurance Committee
5 Transform Services and Reduce Inequalities		Board of Directors
6 Leadership Within the Wider NHS Cancer System		Board of Directors

National Policy Developments

The Trust is appraised of and involved in shaping current NHS policy and well positioned to take advantage of emerging opportunities.

Recent updates to NHS England policy frameworks are directly relevant to our strategic planning. These include;

- The Q2 performance league tables for the NHS have been published. This confirms that we are ranked 7/134. [NHS England » NHS oversight framework – NHS trust performance league tables process and results](#)
- The Medium-Term Planning Framework set out the ambitions and priorities for the next three years. The financial framework and allocations including the technical guidance are set out to support the development and delivery of plans over the medium term. [NHS England » Financial framework and allocations](#)

Recommendation

To note that The Christie continues to be a high-performing organisation that is strategically well positioned and has declared full compliance with the NHSE Board capability domains.

