University Hospitals of Leicester NHS
NHS Trust

Meeting title:	Public Trust Board	**Trust Board Paper J**
Date of the meeting:	12th November 2026	
Title:	Paediatric Scoliosis Update	
Report presented by:	Helen Hendley, Chief Operating Officer Gang Xu, Chief Medical Officer	
Report written by:	Helen Hendley, Chief Operating Officer	

Action – this paper is for:	Decision/Approval		Assurance		Update	x
Where this report has been discussed previously	Updates are provided to the Patient Safety Committee and Quality Committee. Appendix A was received and reviewed by UHL on 4th November.					

To your knowledge, does the report provide assurance or mitigate any significant risks? If yes, please detail which

Impact assessment

Patients: Transfer to a specialist surgical centre provides a more sustainable pathway, but continuity of care remains dependent on complete reconciliation, timely appointments, clear communication and sufficient NUH capacity.

Workforce and services: The transfer removes reliance on the single-consultant UHL model, while creating ongoing dependencies on NUH workforce, imaging and supporting specialties.

Equality, diversity and inclusion: Communications should be available in accessible formats and through appropriate interpretation routes, with additional support for families who may experience barriers to engaging with the new provider.

Finance: Any financial consequences of the transfer and review activity will be managed through the agreed commissioner and provider arrangements.

Reputation and legal: The identified harms and pathway delays remain subject to external review, PSII and regulatory oversight.

Acronyms used:
UHL – University Hospitals of Leicester NHS Trust;
NUH – Nottingham University Hospitals NHS Trust;
NHS England – National Health Service England;
PSII – Patient Safety Incident Investigation;
OPA – outpatient appointment.

Purpose of the Report

To provide an update to the Public Trust Board on the review of Paediatric Scoliosis care.

Recommendation

The Board is asked to

- note progress with the safe transfer of the paediatric scoliosis outpatient service to NUH; receive assurance that joint governance arrangements remain in place; recognise that residual risks remain while patient-level reconciliation, communication activity and the reviews are completed; and support continued reporting to the Patient Safety Committee until all actions are closed.
- note the Nottingham University Hospitals NHS Trust Board Report (Appendix A).

Summary

UHL previously provided paediatric spinal outpatient care and referred patients to Nottingham University Hospitals NHS Trust (NUH) for surgery. In a planned move, new referrals ceased being accepted by UHL from 1st April 2026 and from 1st September 2026 the paediatric outpatient service has transferred to NUH so children and young people can receive all aspects of their care in one place, in line with national recommendations.

Important work is underway to understand whether some patients should have received additional monitoring between referral and surgery, supported by an internal investigation led by NUH that is reviewing how systems and processes worked together and ensuring any improvements are made. Alongside this, NUH has launched an external review, supported by UHL and led by paediatric clinicians from outside both organisations, to examine the care of patients currently on the surgical waiting list and whether they received the level of monitoring expected.

Main report detail

Appendix A shared with the NUH Public Board on 12th November 2026 details the background, terms of reference and scope of the independent review, the cohorts of patients, progress, patient communication, service continuity and timescales.

UHL will continue to support patients and families throughout the transition and until the external review, Patient Safety Incident Investigation (PSII), final patient-level reconciliation, communications and pathway definition are complete. UHL will continue to work closely with NUH to agree clear arrangements for clinical ownership, referral thresholds, imaging, internal referrals, community links and pathways for non-scoliosis spinal patients, helping to ensure that patients and families experience a coordinated and supportive pathway.

We recognise that patients with complex respiratory and/or cardiac comorbidities may require coordinated support from specialist teams across both UHL and NUH. To reduce the potential for fragmented care, delays in assessment or optimisation, or uncertainty about clinical ownership, we will continue to support agreed multidisciplinary arrangements, clearly defined referral pathways, named clinical leads and ongoing cross-organisational oversight. These arrangements are intended to help each patient receive timely, joined-up care and provide families with greater clarity about who is supporting them at each stage of the pathway.

The external review commissioned by NUH reports to the Complex Clinical Review Assurance Group, which meets fortnightly to receive and act on emerging findings. It comprises executive representatives from both trusts, with engagement from the NHS England Midlands Team and NHS England Specialised Commissioning. An experienced Chief Medical Officer from another regional trust not involved in providing the service will chair the group independently, providing guidance, external challenge and support to ensure prompt, transparent and appropriate action.

Supporting documentation

Appendix A – Nottingham University Hospitals NHS Trust Public Board Paper (12th November 2026) Paediatric Scoliosis Update Report