

# NEL Health Update

**March 2022**

**JHOSC**

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# Performance (as at Jan 2022)

- [The Government's NHS recovery plan](#) indicates that elective waiting lists will get worse before they get better and the NHSE target for eliminating two-year elective waiters has been pushed back from March to July 2022. 52-week wait breaches are targeted to be cleared by 2025.
- Mutual aid between providers addressing **elective care** waiting lists. Recruitment focusing on anaesthetic workforce. Activity levels c80%-c93% of non admitted pathway 2019/20 levels
- Overall over **cancer** 62 day wait backlog has started to reduce. Two week referrals are above pre-pandemic levels and the NEL performance against the new Faster Diagnosis Standard is 76.1% (compared to London average of 72.8%)
- The **diagnostics** waiting list has grown, but the backlog for waiting over 6 weeks has reduced
- The system is working to work to reduce delayed discharges which are due to e.g. patients:
  - awaiting medical intervention/decision
  - awaiting availability of rehabilitation bed in the community
  - awaiting availability of a nursing/residential home care bed
  - awaiting availability of resource for assessment and start of care at home
- The number of primary care appointments (Aug) 933k are above trajectory level of 826k
- Mental health performance is challenged as a result of increased pandemic demand

# Provider trusts

- Although Covid pressures have eased a little, our hospitals remain extremely busy throughout the winter months.
  - Patients are safe in our hospitals because of robust infection control standards, but these continue to impact operational effectiveness and visiting arrangements
  - High numbers of intensive care patients have incidental Covid patients (i.e. they may be admitted with another primary health problem, but Covid has added to the strain on their body)
- Over the last three months, more than 3,000 patients on the Barts Health books received quicker diagnosis by having endoscopies or ultrasound scans at BHRUT hospitals with spare capacity
- All the trusts have devoted a significant amount of time to encouraging staff to have the Covid-19 vaccine and we've seen rates of uptake increase. Despite the fact it will no longer be a legal requirement for healthcare workers to be vaccinated, we will continue to encourage colleagues to be jabbed. The vaccine is safe and effective; it saves lives; and it protects staff, patients and the communities in which we live.
- With system partners we are reviewing the proposals we published before the pandemic for creating centres of surgical excellence in our hospitals, and in due course will bring forward any revised plans for further public engagement and consultation.

# Barts Health



- Covid pressures eased during February and Barts Health currently averages about 25 new positive inpatient admissions a day, around half the most recent pandemic peak on January 12
- Winter pressures mean our hospitals remain extremely busy, particularly through high demand for emergency care. Covid-positive patients account for about 15% of general beds and about 75% of critical care beds
- Nine out of ten Barts Health staff had a first dose by the point the Government paused its vaccination mandate
- Sickness absence is normal and we are actively recruiting, but continue to work around some temporary staff shortages
- Our contractors, Serco, managed a two-week pay strike by some porters and cleaners with minimal operational impact
- As Covid pressures ease, we are reducing the backlog of patients waiting too long for routine elective treatment
- We are working up our operational plan for 2022/3 in line with national guidance to further drive elective recovery

Our most recent published performance data is here: [Board meetings and papers - Barts Health NHS Trust](#)

# NELFT and ELFT

- ELFT and NELFT are developing their approach to collaborative working with a particular focus on mental health.
- Work has taken place to improve the adult mental health pathway across north east London, resulting in no out of area placements for mental health inpatient beds. There is work underway to review the pathway and provision for those patients requiring female psychiatric intensive care.
- Both Trusts are part of the North Central and East London CAMHS Collaborative, focused on making improvements for the young people who need mental health support. This includes a reduction of inpatient admissions and length of stay for inpatients, as well as a reduction in out of area placements.
- To further develop collaborative working ELFT and NELFT are proposing to appoint a joint chair. This will provide greater assurance of closer working between the two trusts. The opportunity has arisen because both trusts currently have a chair vacancy.

## Winter

- We've experienced increased pressure on our services, as we deal with the pandemic, respond to the high demand on our Emergency Departments (EDs) and continue with our elective
- To strengthen our response, we developed a winter plan and appointed experienced geriatrician Ayo Ahonkhai as Winter Director; and introduced operational site leadership teams, to manage flow and patient safety on emergency pathways.

## Four hour performance

- We continue to treat an incredibly high number of patients and our services are under increased pressure. Last year, more than 280,000 people attended our EDs and in October we saw an 18% increase in the number of Type 1 walk ins when compared with the same month in 2019 (pre-pandemic)
- A number of initiatives introduced to help improve performance, e.g. the opening of our Ambulance Receiving Unit and Jubilee Intensive Therapy Unit at Queen's Hospital and the reopening of our upgraded children's ED at King George Hospital. Construction works on our revamped CCU at KGH scheduled to be completed by the end of March 2022.

## Reducing our waiting lists

- Despite operational challenges, we continue to tackle our waiting lists through creative surgical initiatives. As a result, the number of patients waiting for more than a year for treatment reduced from 2,430 at the end of March 2021 to 959 by the end of December. We hope to get close to zero by the summer
- The work we're doing is being recognised nationally. Our Covid secure 'green zone' at KGH was showcased on BBC News and our BONES project was positively highlighted in NHS England's delivery plan to reduce waiting lists
- BHRUT's CEO Board report can be found at: <https://www.bhrhospitals.nhs.uk/chief-executive-board-report/chief-executives-board-report-january-2022-3368>

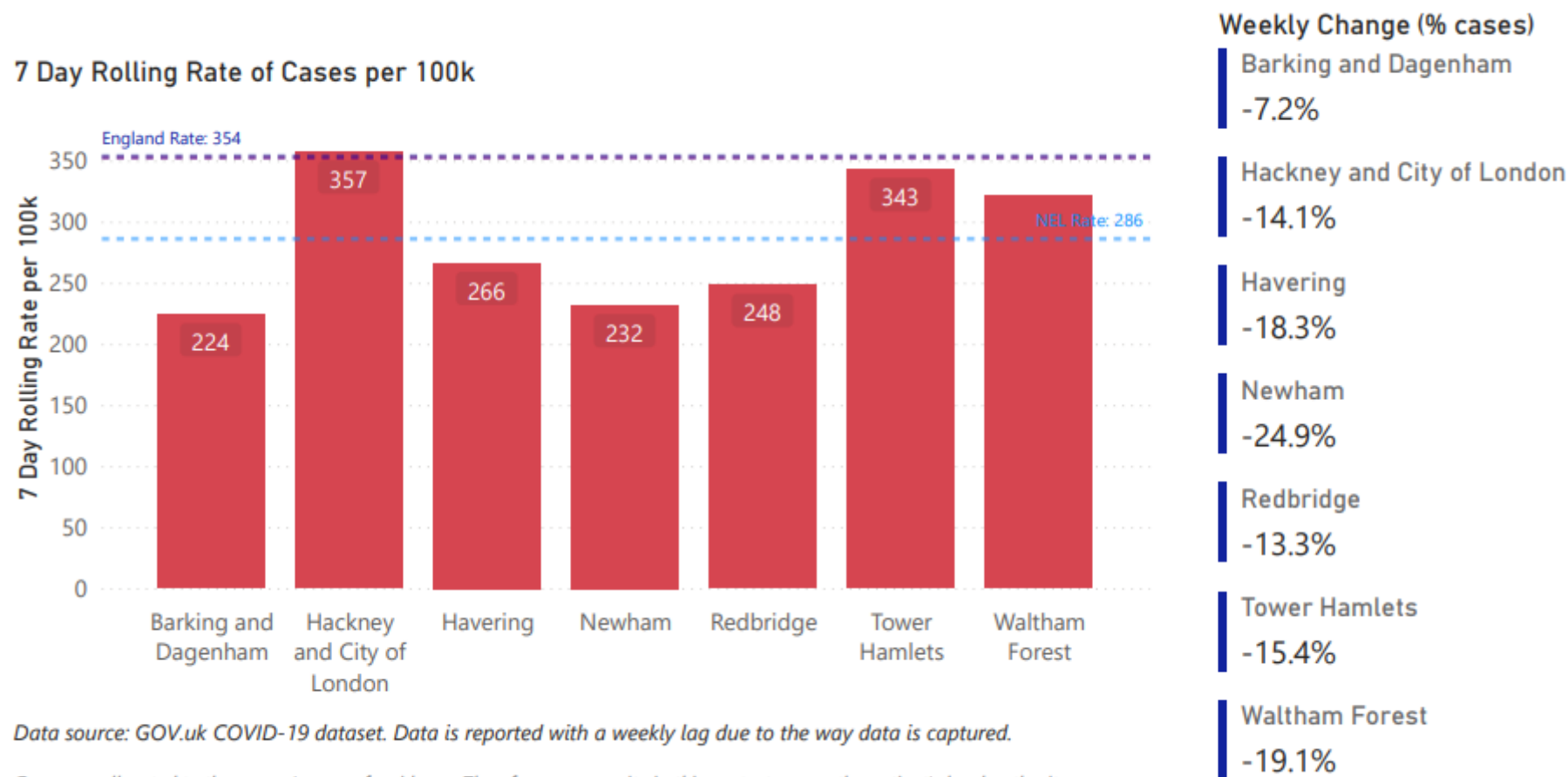
# Covid-19

- We continue to deliver the **vaccine programme** (see attachment for latest figures)
- Falling demand across London. Current perceptions are challenging e.g: Omicron is milder than other variants; family members are fully vaccinated so less personal responsibility; restrictions easing/removed so no longer a threat
- Outreach with partners to lower uptake areas and events for Orthodox Jewish community, Homeless and rough-sleepers (potentially with St John Ambulance)
- 5-11 year olds at risk and Clinically Extremely Vulnerable. Eight sites have received NHS approval. Vaccinations started 5 February. We are arranging webinars for parents
- 12-15 vaccines: Promoting walk-ins, half-term sessions, FAQs, school networks. High rates of infection affecting eligibility for second dose
- Vaccine Hesitancy Advice Service, launched to health and care workers, now rolling out to the public
- Social media promoting sites with availability and the Evergreen offer (it's never too late)
- Latest details are here: <https://www.eastlondonhcp.nhs.uk/ourplans/covid-19.htm>
- Covid-19 Booster and Flu digital marketing campaign has targeted parents with children; people who are pregnant; 18-49 with long term health conditions; 65+ (flu and booster); with additional targeting by ethnicity, geography, religion. Impressions: 15.4million with 190,922 interactions



# Covid-19

The latest data shows the number of Covid-19 cases in NEL has risen overall, although the rolling rate of cases per 100,000 people is well below the national average.



24 Feb 2022

# Long Covid

## Support for patients

As we learn more about the best way to treat Long Covid, we continue to develop our local services to support our residents. The latest information on our services is available on the following web pages:

- Waltham Forest; Barking and Dagenham, Havering and Redbridge: [www.nelft.nhs.uk/information-and-advice-on-long-covid](http://www.nelft.nhs.uk/information-and-advice-on-long-covid)
- City and Hackney [www.homerton.nhs.uk/covid-recovery-and-rehabilitation](http://www.homerton.nhs.uk/covid-recovery-and-rehabilitation)
- Newham and Tower Hamlets [www.eastlondonhcp.nhs.uk/ourplans/long-covid-in-newham-and-tower-hamlets.htm](http://www.eastlondonhcp.nhs.uk/ourplans/long-covid-in-newham-and-tower-hamlets.htm)

We are also reaching out to local communities to raise awareness of the signs and symptoms, through activities such as:

- a long COVID patient video with translations in different languages, patient case studies and a series of webinars
- patient leaflets, including an easy-read version, and support for homeless people
- working with local community and faith groups, including schools, to understand their needs, raise awareness and provide local information on support, including non-medical services (things like housing, finance and employment support)
- working with Healthwatch on a survey of local residents, which will help shape future activities

## Support for health and care professionals

- We have launched a Long Covid Community of Practice [www.newhamtraininghub.org/programmes/nel-long-covid-community-of-practice/](http://www.newhamtraininghub.org/programmes/nel-long-covid-community-of-practice/) for all health and care professionals. This aims to provide training and guidance, and to create a network of support to help improve knowledge and skills of those managing Long Covid in any care setting, and reduce variation in care.
- It includes a training schedule [www.newhamtraininghub.org/programmes/nel-long-covid-community-of-practice/long-covid-training/](http://www.newhamtraininghub.org/programmes/nel-long-covid-community-of-practice/long-covid-training/) as well as links to national and local long COVID resources, with information on how to make referrals. [www.newhamtraininghub.org/programmes/nel-long-covid-community-of-practice/long-covid-referrals-from-primary-care/](http://www.newhamtraininghub.org/programmes/nel-long-covid-community-of-practice/long-covid-referrals-from-primary-care/)

# Cancer

Working on innovation to spot cancer sooner for local residents:

- Mile End Early Diagnosis Centre – 16,500 additional procedures a year for cancer diagnosis; phase 2 will include an additional MRI scanner for north east London
- Cytosponge – a ‘sponge in a pill’ tool to test for signs of cancer
- Colon Flag – blood analysis to help spot bowel cancer sooner
- Transnasal esophagoscopy (TNE) - a safe and inexpensive way to examine the esophagus for patients at risk of esophageal cancer and other disorders, without the need for sedation
- Piloting a free lung health check for those at most risk of lung cancer
- Improving patient communications to reduce the number of people who don’t attend their appointment

Raising awareness of signs and symptoms to encourage more people to come forward for treatment:

- Working with local mosques to raise awareness of bowel cancer
- Delivering a campaign aimed at the LGBTQI+ community around breast cancer
- Promoting awareness of lung, prostate and bowel cancer to older males in deprived areas
- Developing a creative cervical screening campaign aimed at young Muslim women
- Producing a range of materials in different languages, including animated videos translated into 15 different languages

# Primary Care Winter Access Fund



- Practices need to enrol in the Community Pharmacy Consultation Service to access Winter Access Fund (WAF)
- Practices can claim funding of £1.16 per weighted patient for practice specific interventions to improve access through the following means:
  - Funding additional sessions from existing and new clinical staff
  - Funding of additional clinical sessions such as locums secured through banks and agencies including the NEL digital staff bank
  - Expanding the number of appointments both in-hours and extended hours
  - Additional appointments via increased capacity to include other clinical practice and PCN staff
- Enhanced support can be provided e.g. to discuss interventions, review workload and work plans and, with the use of coaches, unpick pressure points of access or service delivery.
- As part of the WAF, the Access Improvement Programme provides practice-based staff who are experienced in Quality Improvement; a coach who will work onsite and virtually; and other support over an eight week process to improve systems and processes to be embedded into the daily routine of the practice.

# Community Pharmacist Consultation Service



- The GP CPCS referral pathway is being implemented nationally across the NHS. The pathway aims to redirect minor illness from General Practice to Community Pharmacy to increase access and free-up capacity in General Practice.
- Implementing the GP CPCS is nationally mandated to access the Winter Access Fund (WAF) monies for primary care.
- Key aims include:
  - Help to alleviate pressure on general practice
  - Improve timely access for patients
  - Enable better patient care
  - Promotes self-care
  - Strengthen relationships between general practice and pharmacy
- A patient contacts their GP either on the phone, online or in person > they are triaged by the practice > a local pharmacy is alerted > a consultation with a pharmacist is arranged ASAP.

# St George's Health and Wellbeing Hub



- Engagement with the public and stakeholders ran from 22 November 2021 to 13 February 2022
- 451 people responded to the online survey, with individual residents and representatives of local community organisations attending online engagement sessions.
- Feedback was overwhelmingly positive including:
  - **87.28%** (391) of respondents **strongly supported** proposals for GP services at the Hub
  - **82.41%** **strongly supported** Frailty services being at the hub
  - **90.20%** **strongly supported** Outpatients services being at the hub
  - **91.54%** **strongly supported** Early Diagnostics being at the hub
  - **75.06%** **strongly supported** kidney dialysis services, 12.92% mildly supported. Eight people (1.78%) opposed

Participants were also able to share feedback and comments on the overall proposals. These have been themed in a number of core areas

A report outlining how feedback is addressed goes to the March meeting of the St George's Redevelopment Project Board and then will be published on the NEL CCG website

Procurement of the construction contractor has started and the project remains on track for opening the new hub by March 2024.

# Diagnostics programme and Community Diagnostic Centres (CDCs)



## Aims of the CDC national programme:

- Improve population health outcomes
- Increase capacity
- Improve productivity and efficiency
- Contribute to reducing health inequalities
- Deliver better and more personalised experience
- Support integration of care

Seeking to reprocur **community diagnostics** across BHR and TNW (C&H services are not yet due for contract renewal) – patients and Healthwatch will be involved in the process

- We are progressing our thinking and looking at a preferred CDC delivery model that is a mix of all three potential models (hub and spoke, large and standard size centres) with a spread across boroughs. They will contain centres located both on existing NHS sites and new sites in highly accessible high footfall areas such as town centres and shopping centres. This will be a medium to long-term programme, with CDCs coming online over the next 5+ years.
- CDC sites will be in addition to existing acute sites and community diagnostics provision, both of which are also being potentially enhanced over coming years to meet growing demand.
- Our first priority is the completion of the service offering at our existing early adopter sites in Mile End Hospital and Barking Community Hospital, bringing as many services online in these sites as possible in 22/23 to meet current demand. These sites have already been offering CDC services since summer 21 and have been operating successfully, so adding the remaining types of tests and capacity to make them full CDCs will give us the quickest and most certain route to ensuring patients can begin seeing the benefits of the programme.
- We will be finalising the system strategy and the remaining proposed planned sites in April and May, once our analysis of demand growth and impact on inequalities of access is complete.
- We propose writing to councils and emerging JOSCs/OSCs in late May with engagement material and an engagement plan. We are looking to engage publicly for 10 weeks from mid June – end of August with a report available in September.

# Looking ahead

- Developing a single updated **fertility policy** for north east London (see agenda) to ensure an equitable and consistent approach to access.
- Updating north east London policies for **Continuing Healthcare** (CHC) (see agenda) to ensure clarity, improve processes and procedures, and to ensure equity
- **Local Improvement Schemes** (LIS): A number of schemes in development with partners to reduce inequalities across north east London. Key priorities include access to blood testing, anti-coagulation services and respiratory services.
  - Simple wound care pilot testing different locations, offering online booking and monitoring satisfaction/ experience.