



North East London

NHS North East London – Health Update

July 2022

Presentation to North East London Joint Health Scrutiny and Overview
Committees

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Acute Provider Trusts (as at June 2022 unless otherwise stated)

- Our trusts continue to work towards restoring elective care services back to pre-pandemic levels. By the end of March this was close to 90% with plans to increase this further.
- Innovative 'blitz' weeks and 'super clinics' to target certain specialties with long waiting list have taken place to support restoring routine planned services
- There has been a focus on treating patients waiting over one and two years for treatment. We have reduced the 52 week wait for treatment month on month.
- Performance against the 18 week referral to treatment standard was 61.2% (February).
- The diagnostic waiting list has grown. Growth is being seen in the overall patient tracking list (PTL) mainly in the non-admitted pathway.
- We are providing patient care in the most appropriate setting and avoid unnecessary outpatient appointments through our Advice and Guidance services which are currently used for approximately 21% of patients compared to the national requirement of 12%.
- GP practices are delivering above 60% of all appointments face-to-face whilst maintaining progress with digital access for those who prefer it. Work is underway to level up investment and achievement of quality and patient outcomes across general practice.
- Mental Health performance remains challenged as a result of increased demand due to the pandemic.

Barts Health

- Covid pressures have eased at our hospitals since March and there is an encouraging decline in Covid-19 case rates. Our focus is now on reducing waiting lists.
- **Elective recovery:** In line with national commitments, we remain on track to clear 104-week waiters by July 22, and 78-week waiters by April 23, with a cancer 62-day backlog reduction to pre-pandemic levels by March 23.
- Recent projects to tackle the backlog [include a new AI tool to help detect heart disease faster](#), which was commended by Nickie Aiken MP [during her visit to St Bartholomew's](#), and [ENT](#) and [Urology 'booster weeks'](#) at Whipps Cross to generate extra surgery theatre sessions by seeking out unused surgery slots in other specialities.
- **A&E 4 and 12 Hour Performance:** In April, the Trust recorded the highest volume of A&E attendances of any trust in England. In terms of performance against the 4-hour standard, the Trust was ranked 8th best performing out of 16 trusts reporting data in London and was the best performing of the top 10 English trusts (by volume of attendances)
- **Vaccinations:** the programme for flu vaccination had now closed with 43% of staff having received their flu vaccination (as compared with an average of 46% across London trusts). In terms of Covid-19 vaccination, discussions are underway to transfer the outreach service currently provided on behalf of NEL to East London Foundation Trust over the summer months, at which point the vaccination service within Barts will close.
- **Monkeypox:** guidance for staff, visitors and patients was published across our website, intranet and social media channels
- The Trust published our operational plan for 2022/23 [which you can find here](#)

Barking, Havering and Redbridge, University Hospital Trust (BHRUT)

Investment at King George Hospital (KGH)

- Key facilities at KGH have been revamped. £5m investment has transformed our state-of-the-art Emergency Department (ED), and £5m spend has reconfigured and modernised our Intensive Therapy Unit in 10 months, increasing from eight to 12 beds.

Reducing our waiting lists

- We're continuing to tackle our backlog and as a result of 'Super Clinics', additional diagnostic sessions and teams working overtime, the number of people waiting for more than two years for treatment has reduced from 218 since the start of May to three, all of which are patient choice.
- Our innovative surgical work was recognised nationally, shared with national media, and featured in the NHS recovery plan.

Four hour performance

- Working closely with partners across NEL to help improve waiting times for patients. A special area has been created at Queen's Hospital (QH) ED to provide care on the day and reduce the number of people needing to be admitted.
- Focussing efforts on improving hospital 'flow', which includes the opening of a stroke rehabilitation unit at Goodmayes and the success of a short stay medical ward at QH that is treating and discharging patients quickly.
- Significantly reduced the length of the queue at QH. Our staff now work alongside GPs to streamline the process and improve safety. Once embedded, we will do the same at KGH.
- Collaborating with London Ambulance Service our Ambulance Receiving Centre at QH has reduced the time patients are waiting in ambulances. Since opening in November 2021, it has seen 1,747 patients and returned 12,799 hours to paramedics.

Collaboration with Barts Health

- Shane DeGaris has been appointed Group Chief Executive Officer (CEO) of Barts Health and BHRUT. He will take over in August when Alwen Williams steps down as CEO of Barts. Matthew Trainer will be Deputy Group CEO and will continue to lead BHRUT
- Two separate Vice-Chairs have also been appointed to both trusts: Mehboob Khan at BHRUT and Adam Sharples at Barts.

North East London Foundation Trust (NELFT) and East London Foundation Trust (ELFT)

- ELFT and NELFT are continuing their approach to collaborative working across both mental and community health.
- Improvements to children and adolescent mental health services at ELFT and NELFT are in development following the successful bid of 2 additional non-recurrent funding schemes
 - 1) which will create an intensive pathway for young people who have an eating disorder as an alternative to admission
 - 2) the early partial implementation of the Child & Adolescent Mental Health Services (CAMHS) Crisis Home Treatment team – initially focused in Newham which again will offer young people in crisis intensively for a short period of time an alternative to admission.
- The recruitment process for a joint chair for ELFT and our neighbouring trust, North East London NHS Foundation Trust (NELFT) has been delayed and will recommence later this year. In the meantime, Eileen Taylor will continue in her role as Acting Chair for ELFT.
- Innovation continues to drive improvements to our services. ELFT is working with local partners to deliver a digital recovery platform for severe mental illness in City & Hackney. This helps people with severe mental illness to plan and manage their own care, supported by a digital platform that brings all the tools together in one place.
- The North Central East London (NCEL) CAMHS Collaborative have 60 children and young people (CYP) currently in inpatient units, compared to 100 in August 2020. Currently have 6 CYP in 'Out of Area' units, with 1 in Out Of Area(OOA) General Adolescent Unit (GAU) compared to 26 in August 2020. The current average length of stay for GAU and Psychiatric Intensive Care Unit (PICU) is 87 days, compared to 189 days in August 2020.

Covid-19

- We continue to deliver the vaccine programme, and demand continues to fall across London.
- Current perceptions are impacting uptake of the vaccine. This includes public views that Omicron is milder than other variants; family members are fully vaccinated so less personal responsibility; restrictions removed so no longer a threat.
- Outreach vaccinations and health and wellbeing events are taking place in lower uptake areas for homeless and rough-sleepers, asylum seekers, sex workers and traveller communities.
- For 5-11 year olds at risk and clinically extremely vulnerable we are working in partnership with Starlight to facilitate a playful approach to vaccinations with colourful centre branding, boost bags for children, information for parents, distraction toys and training for vaccination staff.
- A key challenge for 5-11 and 12-15 year olds remains the high number of children who have tested positive for Covid-19 and the three month gap required between a positive test and having a vaccine.
- Some vaccination sites are pausing over the summer and will reopen in the autumn.
- We continue to target specific activities through our borough teams focused on broader health and wellbeing and targeted in areas of greater deprivation and higher likelihood of comorbidities.

Cancer

- Recent national data on cancer standards from NHS England and NHS Improvement shows that North East London is the top performing alliance in the country in six out of 10 cancer waits standards.
- This builds on positive results from earlier this year, which showed North East London as the top performing cancer alliance out of 21 across England when it comes to achieving the [Faster Diagnosis Standard](#).
- Innovations underway to improve early diagnosis include:
 - **The Mile End Early Diagnosis Centre:** providing an additional 16,500 diagnostic procedures a year. Phase 2 will include a new MRI suite.
 - **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
 - **Targeted Lung Health Check:** a free lung health check for those at most risk of lung cancer aged 55-74 (a new pilot started in Barking and Dagenham and Tower Hamlets in July 2022)
 - **AI Tech project:** pan trust collaboration with UCL Partners, to pilot Artificial Intelligence chest X-ray reporting products – aimed at prioritising abnormal chest x-ray workload

Cancer (continued)

A number of projects are taking place to reduce inequalities in north east London, raise awareness of the signs and symptoms of cancer and increase uptake of cancer screening programmes:

Project	Summary
It's Not a Game – bowel, lung and prostate cancer awareness	An awareness project aimed at men over 45 in the more socio-economically deprived areas, working mainly in partnership with Leyton Orient Football Club.
No Time for Cancer – breast screening	An out of home and social media campaign to encourage women of screening age to make an appointment for breast screening when they receive their invitation.
Best for my Chest – breast screening	A campaign to increase uptake of breast screening by LGBTQI+, working with Live Through This and Opening Doors charities.
Muslim Sisterhood – cervical screening	A cervical screening awareness campaign to increase coverage of cervical screening in young Muslim people with a cervix, working with the Muslim Sisterhood
Jo's Trust training – cervical screening	Training for non-clinical practice staff by Jo's Cervical Trust charity to increase their confidence to discuss cervical screening with women.
Faith placed awareness – bowel cancer and screening	Delivery of a bowel cancer awareness intervention in mosques by people who are known and respected in the local community.
Womb cancer awareness (with the Eve Appeal)	An outreach project to increase awareness of signs and symptoms of womb cancer, focussing on Afro-Caribbean women.

Cancer (continued)

- We also continue to support patients living with cancer to make improvements to their quality of life. For example:
 - **Quality of Life Survey:** increasing the uptake of responses to a national patient survey which can help us make service improvements locally.
 - **Personalised stratified follow-up pathways (PSFU):** The implementation of PSFU improves patient experience and quality of life for people following treatment for cancer, as well as making services more efficient and cost-effective.
 - **Psychosocial support:** working on a programme of comprehensive mental health support for cancer patients.
 - **Prehabilitation** (the the process of improving an individual's functional capacity to enable them to withstand a forthcoming stressor, eg; major surgery, radiotherapy or chemotherapy): project underway to provide support and funding to enhance prehabilitation in north east London.

Proposed changes to healthcare – continuing healthcare policies

- We are asking anyone who lives, works or visits north east London or the surrounding area to comment on our proposals to ensure our Continuing Healthcare (CHC) and Children's Continuing Care policies are clear and fair. The overriding aim is to improve patient and carer experience, access and outcomes.
- NHS Continuing Healthcare and Children's Continuing Care is a package of care including both health and social care for:
 - Adults with significant on-going health needs or who are at the very end of their life.
 - Children and Young People's needing health and social care support for needs arising from disability, accident or illness that cannot be met by existing services alone.
- The policies have been reviewed as we know that individuals and families and carers are confused about the way in which the system work and perceived inequalities in the way people are treated. These policies are designed to positively impact on existing and new claimants, helping them navigate the system and get the right support they need, understand their rights (and responsibilities). There is no plan (and we don't expect) to make any budgetary savings, nor do we believe any individuals will be negatively affected.
- Four policies have been looked at and revised:
 - **Continuing Healthcare Placements Policy.** Describes NHS NEL's approach when placing and supporting patients in the community.
 - **Joint Funding Policy for Adults.** Describes NHS NEL's and local authorities' approach to jointly funding a package of care for a patient in the community, when a patient doesn't meet the criteria for other elements of NHS Continuing Healthcare but still requires funding for a health need that can't be met with existing services.
 - **Dispute Resolution Policy and Protocol for Adults.** This describes the approach taken to resolve a dispute when health and social care staff can't agree to a recommendation on a patient's eligibility for Continuing Healthcare funding.
 - **Respite Policy for Continuing Healthcare Eligible Adults Receiving Care at Home.** Describes the approach and amount of respite that NHS NEL' will fund for a patient's carer to take a break.

The public consultation on these proposals is anticipated to close in mid-September.

Primary Care winter access fund

In November 2021 North East London committed their winter access fund (WAF) made available by the Government to improve access for patients and support general practice during the increased pressures brought by winter. Our project focused on:

- Making funding for the recruitment of additional workforce and expansion of existing clinical capacity over the winter months of 2021/22.
- By investing and funding several schemes targeting the recurring issues that negatively impact access to general practice.

Highlights:

- Enabled practice to have additional capacity to have sufficient resilience to cope with the significant demands of diminished capacity endured through the Omicron wave during the winter of 2021/22.
- We reviewed demand and capacity across primary care, NHS 111 and our emergency departments. It showed all three experienced peak levels of capacity, so our investments into increasing primary care capacity are expected to positively impact the capacity of all providers.
- Enabled us to accelerate both local quality improvement and digital first projects ensuring that new software was not introduced in isolation, but integrated into the ongoing data strategy.
- Working together with partners such as Healthwatch to understand and compare data from local surveys and The General Practice Patient Survey (GPPS) to inform the development of patient communication and engagement programmes.
- Building on learnings from the WAF, as part of north east London's Digital First programme there are plans to create a project that will investigate the options, both in terms of how new cloud-based phone systems will be procured, what the specification will be and at what scale they should be implemented.

Enhanced access to primary care

- Primary care networks (PCNs) will take on responsibility to offer patients a new 'enhanced access' model of care, which will see GP practices open from 9am-5pm on Saturdays from October 2022.
- This replaces the current Extended Hours and Extended Access services and marks a shift in the way out-of-hours non-urgent services are provided across north east London
- There is a need for commissioners to ensure that PCNs are preparing for this transition, and that they have undertaken good engagement with existing providers to enable the service from October 2022.
- In preparation for introducing the new Enhanced Access service, PCNs and commissioners have been asked to produce and agree a plan outlining how they will develop and implement the enhanced access services in line with the local population need.
- The plan should include how the PCN will engage or has engaged with its patient population and will or has considered patient preferences, including consideration of levels of capacity and demand.
- PCNs are required to submit their plans by 31st July 2022.

Enhanced access – patient engagement

- As per NHS England recommendations, NHS North East London ran a north east London-wide patient survey from 27 June to 18 July to assist with the first requirement.
- PCNs will be provided with local breakdowns of the survey results which they can use to help inform their plans. The survey does not replace any other engagement or known local insight.
- NHS North East London will also providing PCNs with a toolkit to help organise patient engagement meetings and slides to use at the meetings.
- The level of engagement necessary to comply with legal requirements very much depends on the extent of changes to the services in the local area. Discussions on patient engagement are ongoing and will help to provide assurance that the PCNs have complied with both the requirements on patient engagement on Enhanced Access and also the core GP contract requirements on patient participation.

Proposed changes to healthcare – community diagnostic hubs

- Over the next three years the NHS in North East London expects to receive £39 million from central NHS funds to build and run Community Diagnostic Centres (CDCs).
- CDCs would be able to carry out imaging (such as x-rays and MRI scans), pathology (e.g. taking blood samples to check for diseases) and physiological measurements (such as heart rates). Our proposal is that medium-sized CDCs don't include endoscopy (using a camera on a flexible tube) at the moment as we have sufficient capacity.
- It is possible that North East London may receive further funding, however this is not guaranteed.

This year we propose to:

- Expand the two existing diagnostic sites at Mile End Hospital and Barking Community Hospital to become medium-sized CDCs.
- Look at the feasibility, costs and benefits of developing other sites in the next few years. We are looking in particular at King George Hospital in Ilford and/or St George's Health and Wellbeing Hub in Havering, St Leonard's Hospital in Hackney and on the Whipps Cross Hospital site.
- We may also look at developing smaller centres in shopping centres – for example Canary Wharf, Westfield Stratford and Liberty Romford.
- CDCs are extra facilities that would provide patients with quicker, simpler, easier, more integrated and more personal service; improve health outcomes; reduce inequalities; and improve efficiency. Patients would still be able to get tests in hospital and at GP surgeries.

The public consultation on these proposals is anticipated to close in mid-September.

Development of acute specialities and clinical services across North East London

Context

- The three Acute Trusts in North East London are developing changes and improvements to acute services, which cover a wide range of specialities. These range from how patients interact with the hospitals to how and where services are provided. They also involve clinical support services.
- These proposals vary in scope and scale with a number of them long-standing (for example, development of the East Wing at Homerton; establishment of Centres of Excellence; and alignment of day-case activity to King George's). Some of these are trust specific; others involve all or two of the hospital groups.
- Additionally, various initiatives have also arisen directly as a result of the public health emergency of the last two years and the resulting focus on recovery, including how to optimize and expedite patient access so that this is equitable for all patients across North East London (rather than at any one hospital or Trust). Some of these initiatives are the result of national policy; developed for local circumstances and needs of our population.

Developing proposals

- Formally, in terms of clinical strategies, and the various proposals referenced above, the three Trust positions are all at different stages of development. Additionally, the Acute Trusts across NEL plan to do further work together on an aligned system wide strategy, the development of which was impacted as a result of the pandemic.
- In response to the current reorganisation of NHS services and establishment of Integrated Care Systems an Acute Provider Collaborative has been created, involving Barts Health, BHRUT and Homerton. Through this, the three organisations will work to agree a single approach to service development proposals. This is to ensure that these improve outcomes in healthcare, respond to population health needs and improve inequalities in patient experience and access across the system.

Communicating developments

- The North East London Acute Provider Collaborative is meeting in July at which point this work will be commissioned formally. It is expected that a first overview of the above proposals that all three Trusts can support, including plans for engagement and consultation on these proposals, will be developed for late autumn.

Targeted Investment Fund (TIF) bids

The TIF is a £700m national fund to enable elective recovery. We have made the following bids for funding for north east London:

- **King George Hospital**
 - Extend current theatre suite from five to seven theatres.
- **Moorfields Eye Hospital**
 - Develop an ophthalmology centre in Stratford including outpatient, diagnostic and day stay theatre facilities.
- **Newham University Hospital (two schemes)**
 - Refurbish two mothballed theatres to increase elective theatre capacity
 - Construct a two-storey modular build to provide additional critical care and general adult beds.
- **St Bartholomew's Hospital**
 - Add 14 intensive care beds and 22 cardiac elective surgical beds.

Decisions on TIF bids are not likely to be made until August 2022. We will keep the committee updated about the outcome and next steps, including engagement where appropriate.