

Health Update

JHOSCs

Oct/Nov 2023

NHS North East London: Update

- Analysis by QMUL's Clinical Effectiveness Group has found that as a system, NEL ranks first in England in key cardiovascular disease outcomes including management of hypertension, chronic kidney disease, heart disease and stroke, and people at high CVD risk..
- This year 12 projects across North East London have been shortlisted for the 2023 HSJ Awards. Our Barking & Dagenham, Havering and Redbridge team were finalists in the [Primary Care Initiative of the Year](#) category for Quality Assured Diagnostics in Primary Care; and our communications and engagement team, in partnership with councils and voluntary sector partners has been shortlisted for a national PR Week award for our campaign work that encouraged more than 80,000 children vaccinated against polio
- The frame for the new St George's Health and Wellbeing Hub is now finished, marking the completion of a major phase of the project. The multi-million-pound new facility will provide easy access to a range of health, social care and community services all under one roof including GP services, outpatient clinics, mental health services, and diagnostic facilities for earlier cancer diagnosis. There will also be an integrated café and education facilities, community meeting spaces, as well as a sensory, dementia-friendly communal garden. The centre is scheduled to complete in spring 2024 and will help provide high quality, joined up health and care services in the community for people now and in the future.
- Our organisation restructure is nearing completion. We look forward to driving meaningful improvements in health, wellbeing, and equity; enabling all parts of the health and care system to work collaboratively; improving patient and public participation (both in developing health and care solutions and in taking control of their own health); and for our staff to have fulfilling and enriching careers in the ICB. A description of the organisational structure is attached as a separate document for information only.

Freedom for staff to Speak Up (FTSU)

Our thoughts are with the families who've been devastated by Lucy Letby's murders and attempted murders and with the many staff at the Countess of Chester Hospital who did their best for the infants and their relatives. Letby's deplorable crimes go against everything the NHS stands for. The trial established Letby's guilt. The [independent inquiry](#) will look at the lessons the NHS can learn from her crimes.

Amanda Pritchard, CEO of NHS England, has issued [a letter](#) in response to the verdict outlining the actions we have been asked to take (in particularly around Fit and Proper Persons) and to remind staff of all the ways they can speak up when they have concerns about safety.

All NHS organisations in north east London have:

- reflected on the outcomes of the trial and looked at how the NHS responds when people raise concerns about safety
- reminded staff about their duty to speak up when they have concerns
- reiterated the various ways which staff can use to raise concerns (and the independent routes available if they have any concerns), and restated our commitment that staff will be listened to.

For example: All trusts have stepped up activity during FTSU month (October). BHRUT and Barts Health are re-promoting the service across digital channels and staff engagement events reminding them of hour to speak up and raise concerns, with the FTSU guardian attending corporate induction and visiting staff across hospitals. ELFT and NELFT have drop-ins, specific advisor roles, presence at staff networks etc.

The NHS is founded on a [common set of principles and values](#) that bind together the communities and people it serves – patients and public – and the staff who work for it. We hold to these principles that say: “Respect, dignity, compassion and care should be at the core of how patients and staff are treated not only because that is the right thing to do but because patient safety, experience and outcomes are all improved when staff are valued, empowered and supported.”

Operose / Centene

Operose Health has made London ICBs aware that its ownership, currently with Centene, is under review.

Operose Health has given us reassurances that this will not impact on its day-to-day operations, or its ability and commitment to delivering high quality patient care, and that it will continue to meet all contractual obligations.

We have made clear to Operose Health our expectations and the requirements of their contracts during this process, and they will continue to keep us informed.

These practices in NEL are run by AT Medics (which is owned by Operose – a UK subsidiary of Centene)

- Loxford – Redbridge
- Lucas Avenue – Newham
- Carpenters Practice – Newham
- E16 - Albert Road – Newham
- Trowbridge – City & Hackney
- Goodmans Fields – Tower Hamlets
- Victoria Medical – Barking and Dagenham (short-term caretaking contract)

Month 5 System Financial Position

Organisations	Year to date			Reported Forecast			Finance Recovery Plan			
	Plan £m	Actual £m	Variance £m	Plan £m	Actual £m	Variance £m	FRP Expected YTD £m	Variance from FRP £m	M1-5 Adjusted Actuals (IA) £m	Adjusted Variance from FRP £m
BHRUT	(2.9)	(19.5)	(16.6)	(0.2)	(0.2)	0.0	(15.5)	(4.0)	(16.0)	(0.5)
Barts Health	(11.6)	(42.5)	(30.9)	(27.8)	(27.8)	0.0	(36.8)	(5.6)	(36.3)	0.5
East London NHSFT	0.6	(2.4)	(3.0)	5.4	5.4	0.0	(1.8)	(0.7)	(2.3)	(0.6)
Homerton	(0.1)	(7.5)	(7.4)	0.2	0.2	0.0	(5.4)	(2.1)	(6.7)	(1.3)
NELFT	2.4	2.2	(0.2)	7.0	7.0	0.0	2.4	(0.2)	2.5	0.1
Total NEL Providers	(11.6)	(69.7)	(58.0)	(15.3)	(15.3)	0.0	(57.1)	(12.6)	(58.8)	(1.8)
NEL ICB	6.4	(9.6)	(16.0)	15.4	15.4	0.0	(9.4)	(0.1)	(9.6)	(0.1)
NEL System Total	(5.2)	(79.2)	(74.0)	0.0	0.0	0.0	(66.5)	(12.7)	(68.4)	(1.9)

- The month 5 year-to-date ICS position against the plan is a deficit of £74m. This is made up of a provider deficit of £58m and a ICB deficit of £16m. The drivers of the year-to-date position are inflation, the cost of industrial action (IA), slower than planned delivery of cost improvement plans, payroll pressures (including agency) and run rate pressures such as prescribing.
- In line with the operating plan and national reporting protocol the forecast position remains as breakeven. There is a substantial risk to delivery of this and as a result a formal finance recovery plan (FRP) has been developed. The FRP has identified potential mitigations to the year-to-date run rate position but there is still a risk to delivery of £55m. Work is continuing to identify further cost improvement measures.
- The FRP trajectory assumed that the deficit at month 5 would be £66.5m. The ICS is therefore almost £13m behind trajectory, although almost £11m of this relates to the cost of industrial action. Once the impact of industrial action is factored in to the position the ICS approximately £2m off the FRP trajectory.

Finance Recovery Plan

The Finance Recovery plan has been agreed by partners organisations across the ICS, and a financial recovery director has been appointed to support delivery of the 2023/24 plan, including identification of further stretch plans.

Measures put in place include:

- Enhanced grip and control, including the appointment of a system financial improvement director and system wide financial governance.
- Enhanced governance reporting into the ICS Executive Committee which brings together key system partners.
- Double lock approval process for expenditure over £50k.
- Ban on non-clinical agency and vacancy freeze (with exceptions). Restrictions of some non-pay expenditure.
- Identifying best practice and implementing more widely.
- Development of further stretch efficiency schemes, review of investments and other funding.

BHRUT



Urgent and emergency care

- In July, we improved Type 1 performance against the national target by over 20%, compared with February 2023.
- At Queen's Hospital, this was the first time our Type 1 performance has been above 50% since October 2019 (excluding Covid-19 lockdowns). At King George Hospital, September is on track to be the third consecutive month where Type 1 performance has been over 50 per cent, up from 25 per cent in February.
- For these most seriously ill patients, we have moved from being the worst performing trust in the country to being above 19 others and we are no longer bottom of the table in London.
- In July we saw the highest ever number of patients referred to mental health services via A&E – 413, of whom 244 were at KGH. The average length of stay in the departments was 22 hours. Seventy of these patients (up from 59 in June) waited more than 36 hours to leave our Trust to a service better equipped to look after them.

Our finances

- We're continuing work to cut the deficit - £15.9m year to date - in ways that aren't detrimental to quality and safety.
- We're still spending too much on agency workers rather than using our Bank staff and total headcount remains too high. One factor outside of our control is the £1.7m adverse impact of inflation.
- The cost of the industrial action by junior and senior doctors to the end of August, including lost income due to reduced clinical activity, has cost our Trust £5.9m.

Introducing an electronic patient record

- We're investing £44m in an electronic patient record (EPR) across our Trust that will be fully operational in two years' time and will improve patient safety and reduce errors
- It is being provided by Oracle Cerner and the version we're using is the same as Barts Health so we can benefit from their expertise
- Our closer collaboration means that all the relevant information – including blood tests, current medication and medical history – will be easily available to those treating patients across the integrated group's seven hospitals.

Joint Non-Emergency Patient Transport Service (NEPT)

- From October, our NEPT service (currently provided by G4S) will be provided by the Barts Health in-house service. The fleet is newer, more comfortable, and reduces carbon emissions. Approximately 77,000 patients will benefit as a result.

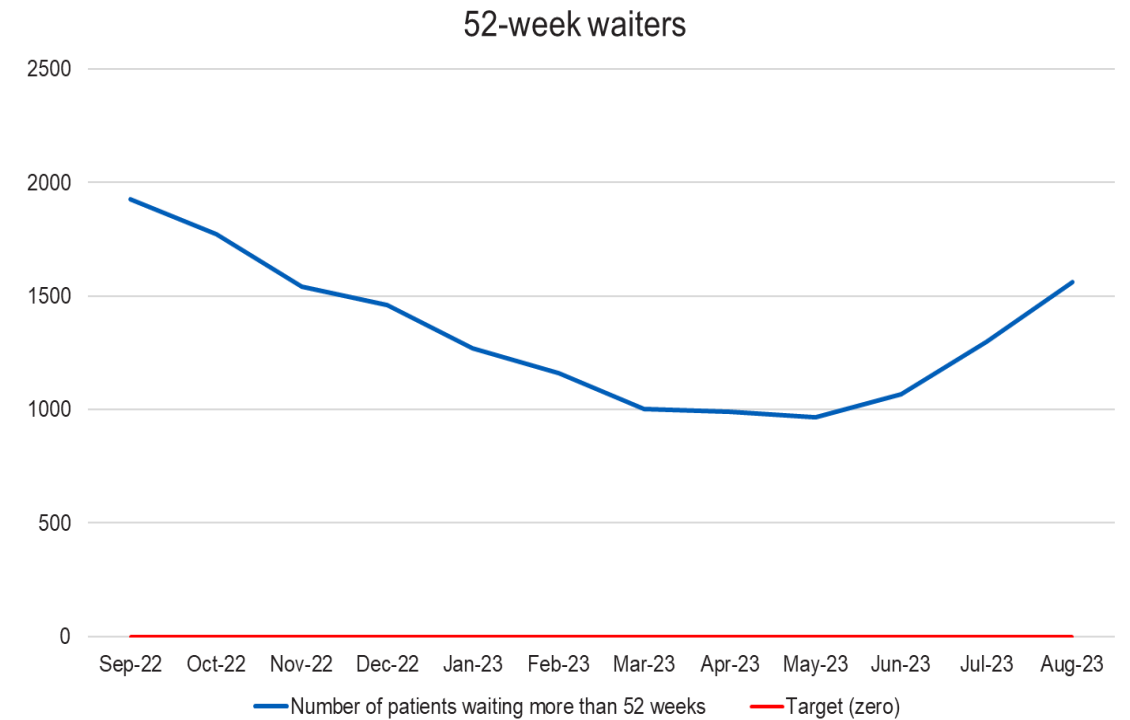


Cutting our waiting lists

- In September, 1,794 outpatient appointments, and 144 non-urgent surgeries were rearranged due to strikes by junior and senior doctors. This is in addition to previous strikes which saw us rearrange 9,332 outpatient appointments and 664 non-urgent surgeries.
- This means we cannot fulfil our pledge to reduce the number of people waiting more than a year for their treatment to zero by the end of December. At the end of July, we had 1,429 patients waiting this long
- In total, we have 65,493 people seeking treatment, the majority of whom need an outpatient appointment. We have seen a five per cent increase in referrals this year
- Our clinical teams are continuing their drive to reduce their waiting lists. Through [our two TonKIDZ weeks](#), we've reduced our ENT waiting list from more than 400 children to around 250. Tonsillectomies (removal of tonsils) make up the bulk of our paediatric waiting list

2022 CQC adult inpatient survey

- We've improved in 9 out of 10 sections in the survey, which focused on patients who stayed in our hospitals for at least one night in November 2022
- Patients praised and highlighted an improvement in:
 - How we involved their families and carers and reduced noise on the ward at night, allowing them to sleep better
 - Confidence in our nurses and doctors and patients feeling included in conversations about their care
 - Respecting the care and dignity of our patients.
- Our results have seen us move from the bottom 20 per cent of all trusts, into the middle 60 per cent of trusts performing around the same. We'll now be focusing on areas where patients have told us we need to improve



NELFT and ELFT

NELFT / ELFT Updates



Leadership changes

- Paul Calaminus has joined NELFT as the CEO. Lorraine Sunduza has started as Interim CEO of ELFT along with Claire McKenna, Acting Chief Nurse and Kevin Curnow, Chief Finance Officer.

NELFT Corporate manslaughter charge

- As a result of a case dating back to 2015, on Thursday 7th September 2023 NELFT was charged with Corporate Manslaughter and Health and Safety breaches. The Trust are now engaging with the legal process.

Industrial Action

- Junior Doctors strikes occurred on 13th – 18th July, 11th – 14th August, 21st – 22nd September, 2-4th October.
- Consultants strikes occurred on 20th – 21st July, 24th – 25th August, 21st September, 2-4th October.
- *Unite the Union* strike amongst ELFT/NELFT employees occurred on 13th September.
- The two trusts have been liaising with one another to minimise disruption and continue providing quality care.

Right Care, Right Person – partnership work

- The Right Care, Right Person programme has been announced as a national initiative and work has been taking place across London since July with the NHS, social care and Metropolitan Police to develop the London wide RCRP programme. This is focused on welfare checks, Absence without official leave (AWOLs), health based places of safety, walkouts from healthcare facilities and transportation. Regular communications are planned to start in October.
- A harmonised AWOL policy across all mental health Trusts in London is being developed to ensure a consistent approach.
- On 1 November, Met Police call handlers will respond differently to mental health welfare checks and work is underway to ensure the workforce is supported to help implement this. Please be reassured that the Met Police will still respond to calls where there is a threat to life.
- NELFT and ELFT have continued to engage with police colleagues across NEL to consider implications of changes to local services.

NELFT/ELFT Updates



NELFT service updates

- 10 additional mental health treatment beds and two LD specialist beds will open at Sunflowers Court, Goodmayes, w/c 4 December 2023. The beds will enable us to improve our patient flow and reduce the length of stay of patients in A&E departments.
- The improved female Psychiatric Intensive Support Unit (PICU) pathway for North East London is already in place and working well.

Events

- NELFT AGM – Thursday 21 September
- NEL LeDeR Conference 2023 – 21 September
 - An event with shared findings from LeDeR reviews, and what is happening locally (local initiatives) aimed to improve quality of care for people with learning disabilities and autism across North East London.
- ELFT Staff Awards – Thursday, 19th October.
 - Annual awards ceremony to celebrate outstanding achievements amongst staff across the Trust.
- ELFT Research & Innovation Conference – Wednesday, 1st November.
 - Annual conference to showcase all aspects of healthcare research, including conducting studies and establishing academic partnerships.

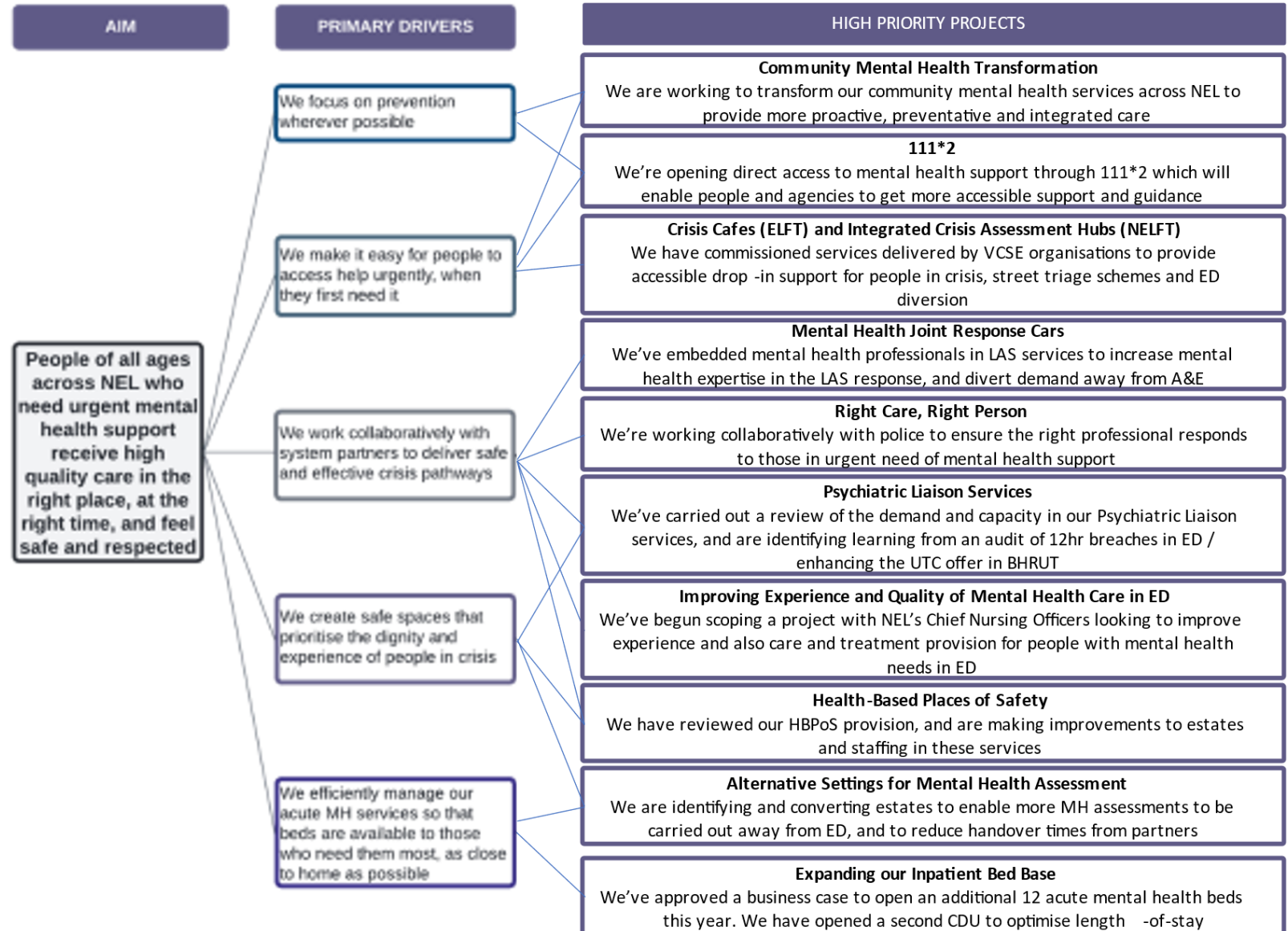
NEL Mental Health Crisis / UEC Improvement Network - Strategy



Mental Health Crisis Improvement Network

We have established a NEL Mental Health Crisis Improvement Network within our provider collaborative.

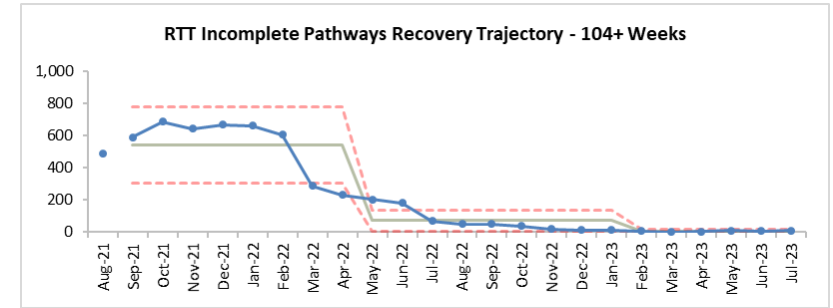
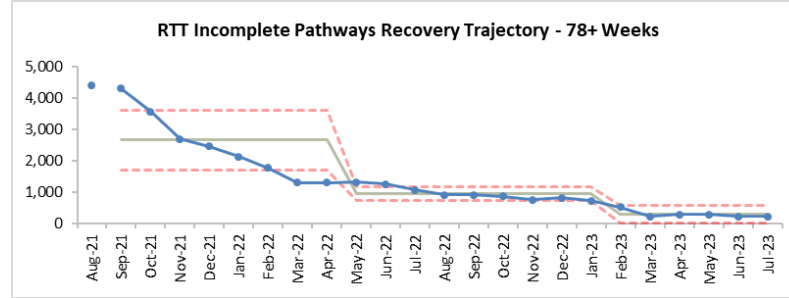
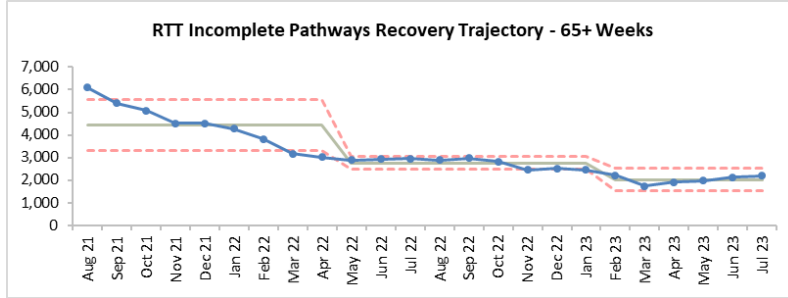
This group, which combines clinical, operational and service user leadership from a variety of providers are driving forward a programme of improvement work across the whole pathway, and building opportunities to share learning and good practise.



Barts Health

Elective recovery

Across the Barts Health group of hospitals, by the end of July 2023 there were 8 patients who have been waiting 104+ weeks for their treatment, and 234 patients waiting for more than 78 weeks.



In relation to 78+ week waiters, these have reduced over the course of the last six months with 728 patients reported at the end of January 2023 reducing to 234 at the end of July 2023, a decrease of 494 (-68%).

Impact of industrial action

- The continued disruption to services impacts our ability to establish longer term performance trajectories with confidence.
- We have also sought to continue as much elective work as possible, whilst also undertaking extensive work re-booking patients due to sequential industrial action. In July the disruption resulted in the cancellation and rebooking of 2,251 outpatient appointments, 290 day case operations, 86 elective procedures and 31 cancer patients. For the August industrial action, this led to the cancellation and rebooking of 1,658 outpatient appointments, 220 day case operations, 71 elective procedures and 37 cancer patients. We will continue to work with clinical leaders, establishing plans to mitigate disruption to services and patients.
- The industrial action is putting additional strain on the financial challenge which is already under significant pressure. We continue to work with partners across the system to help deliver a Financial Recovery Plan.

Strategic updates:

- **New joint service for non-emergency patient transport (NEPT):** From October, Barts Health will be extending our in-house service to provide transport for BHRUT patients, who previously contracted the work out to G4S. This single service will increase vehicle efficiency, achieve quicker turnaround times for patient collections, and ensure equality of experience. Both Trusts will benefit from a new fleet of 37 ULEZ compliant vehicles.
- **Redevelopment update in August:** The government has approved the outline business case for phase two of the enabling works for the redevelopment of Whipps Cross Hospital. These works include the construction of a new 500-space multi-storey car park, which must be completed before building of the new hospital itself can begin.
- **Extra funding to support urgent and emergency care:** the government announced an allocation of £2,674,000 to our hospitals as we make contingency plans for the prospect of another very busy winter. With this money, Whipps Cross plans to create a dedicated space for a round-the-clock Same Day Emergency Care (SDEC) service that will free up 28 overnight beds. The Royal London plans to expand its overnight emergency surgery by 12 beds. Newham plans to stream patients onto speedier pathways to avoid unnecessary hospital stays.