

Collaboration Update

January 2024

Introduction

- Barts Health and BHRUT have been working together along with Homerton Healthcare as the North East London Acute Provider Collaborative (APC) since July 2022 (building on the previous acute alliance).
- The APC supports the population health goals of the NEL Integrated Care System by providing strategic leadership for the transformation of acute clinical services in defined areas, including planned care, cancer and critical care.
- Within the APC, Barts Health and BHRUT has already established a 'closer collaboration' in October 2021 intended to focus together on the enablers of more effective and rapid local delivery of APC clinical strategy. Key enablers include leadership, workforce, informatics and corporate services.
- This paper outlines progress made to date within the APC and the 'closer collaboration' and outlines how these will continue to develop into 2024/25 and beyond.

Why Collaborate?

Because by doing so we can deliver better services to our Patients

- NHS England expects all trusts providing acute and mental health services to be part of one or more provider collaboratives.
- Their stated purpose is to:-
 - *Reduce unwarranted variation and inequality in health outcomes, access to services and experience*
 - *Improve resilience by, for example, providing mutual aid*
 - *Ensure that specialisation and consolidation occur where this will provide better outcomes and value*

In north-east London we believe that collaboration will provide the platform to deliver world class healthcare to our local populations while reducing health inequalities

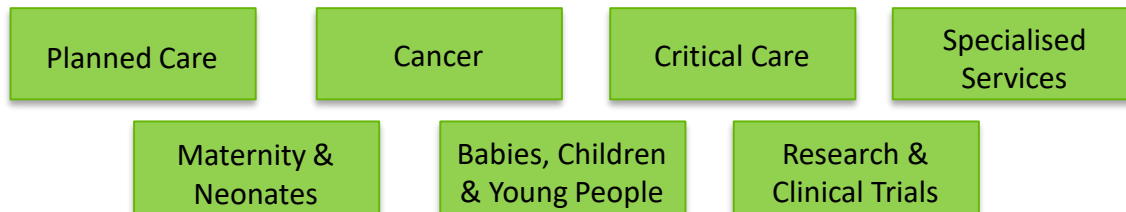


Acute Provider Collaboration (APC)

- We will shape clinical strategy at an APC level, and have established a **Clinical Strategy group**, led by the Homerton Healthcare CEO to lead this



- The APC will provide strategic leadership for the transformation of acute clinical services in defined areas, including:



Benefits achieved to date include:

- Planned care backlog reduction through mutual aid across NEL
- Extension of the successful NEL critical care retrieval service to cover the London region
- NEL cancer performance is consistently strong compared with other ICS

Barts Health & BHRUT – Closer Collaboration

Between us we have a significant asset base



6 acute/specialist hospitals
1 community hospital across
a footprint of six London
Boroughs and City of London



c30,000 staff half of
whom are from Black
and ethnic
communities
Many of our staff live
in the boroughs our
organisations serve



5 Emergency Departments seeing
over 800,000 people in the last
year



c3000 inpatient beds



4 maternity units and 2
freestanding birth centres
delivering over 20,000 babies in
the last year



£3bn spend on
healthcare



Barts Life Sciences will transform
the future of healthcare, locally
as well as globally, from a new
life sciences campus in
Whitechapel



The rich diversity of the communities we serve and our partnerships at Place with Local Authorities, Voluntary Community and Faith organisations and with Primary Care

Barts Health & BHRUT – Closer Collaboration



- **Our closer collaboration was founded on an extensive well-received engagement process in summer 2021**, which examined the case for closer collaborative working between the two Trusts.
- Our organisations face **similar performance challenges** in ever-more constrained economic circumstances.
- We want to **attract and retain talented leaders** to sustain improvement in the longer term.
- We can **draw on our joint assets** - including successful experience of collaboration across the Barts Health group of hospitals, and a strong quality improvement methodologies in both organisations.
- We want to learn from each other, **sharing skills and knowledge** across our Trusts
- We think that by working more closely together on targeted programmes **we can accelerate improvement**

Closer collaboration

How Barking, Havering and Redbridge University Hospitals and Barts Health are working together to improve services for their patients



Barts Health & BHRUT – Closer Collaboration

There are a number of focussed areas where we believe will provide benefit to patients, staff and the communities we serve

Clinical – creating the conditions that enable clinicians to collaborate more easily and effectively

- We believe we can achieve even more for patients if we embed collaboration more broadly and deeply in the way we work. We want to create the conditions in which our clinicians collaborate more easily and our hospitals routinely work together, for the benefit of our patients.
- Our aim is that wherever they live, our patients have fair access to the best possible care, through strong local hospitals with links to specialist facilities

Digital – creating a digital infrastructure that improves clinical decision-making leading to better health outcomes, engages patients and makes work easier for our staff

- We have secured £44m funding for BHRUT to procure an electronic patient record (EPR) for the first time.
- This will enable patients' health records to be viewed by NHS clinicians anywhere in North East London and will provide a platform for greater clinical collaboration and developed shared pathways of care.
- The BHRUT EPR implementation will maximise the learning from Barts own experiences and the expertise of a shared Chief Information Officer
- Work is underway to procure and implement a maternity digital solution across both organisations

Workforce – redesigning our workforce and improving the working lives of our staff which will positively impact the wider community

- Greater opportunity to develop a flexible staffing model rather than compete for staff, particularly in more specialised areas (both clinical and corporate)
- Harmonising medical and bank rates to reduce inequity, reduce reliance on agency and create more sustainable, high performing teams

Corporate Services – greater effectiveness and efficiency through being able to operate corporate services and purchase at scale

- Streamline corporate services more rapidly enabling those services that need to operate at scale to do so, whilst retaining relationship-based services locally where needed
- Implementing shared systems to increase efficiencies
- We have already shared our non-emergency patient transport service