

Local Members Interest

N/A

Health and Care Overview and Scrutiny Committee Monday 24 July 2023

Staffordshire & Stoke-on-Trent Integrated Care Board (ICB) update on Elective care performance and recovery.

Recommendation(s)

I recommend that:

- a. The committee notes the report and the actions being taken to reduce waiting times and access to services.

Report of Phil Smith, Chief Delivery Officer, Staffordshire & Stoke-on-Trent ICB

Summary

What is the Overview and Scrutiny Committee being asked to do and why?

1. The Health and Care Scrutiny Committee has quite reasonably requested a briefing on the progress being made in recovering elective care services in the wake of the disruption caused by the Covid-19 pandemic.
2. This report covers 3 separate (but related) areas of care
 - a. Elective care
 - b. Cancer services
 - c. Diagnostics
3. The purpose of the report is to provide some degree of assurance that all appropriate measures are being deployed to support recovery and sustainability of services.
4. The committee should, however, note that full backlog clearance and restoration of “normal” levels of performance are likely to take up to 5 years.
5. The report will make reference to plans that have been developed and submitted to NHS England including the 23/24 System operational plan and the draft Joint Forward plan (JFP)

Report

Background

The Covid-19 pandemic had a significant impact on the delivery of Elective care. Elective care services were effectively “closed down” for all but the highest priority cases during the height of the pandemic to make beds available for patients requiring hospital care due to covid.

When services were reintroduced, they were not at the levels previously seen due to increased infection prevention measures resulting in a reduction in productivity.

The outcome is that both locally and nationally there are significant backlogs of patients awaiting treatment.

NHS England have focussed initially on ensuring that patients waiting more than 104 weeks received treatment before them focussing on those patients waiting more than 78 weeks. The NHS operational planning guidance for 23/24 also requires local systems to have treated all 65-week waiters by the end of March 2024.

The ICB is responsible for all patients registered with GP's within Staffordshire and Stoke-on-Trent. However, NHS England reporting requirements are that local systems are performance managed by NHS England on an individual system basis. The implications of this are that whilst the ICB retains oversight of the care of Staffordshire and Stoke-on-Trent patients receiving treatment in out-of-area providers (e.g., University Hospitals of Derby and Burton, University Hospitals Birmingham, The Royal Wolverhampton NHS Trust), the local system that hosts those providers is held to account for performance by NHS England. Staffordshire and Stoke-on-Trent ICB is therefore primarily held to account for the performance of University Hospitals of North Midlands NHS Trust (UHNM) and local independent sector providers.

This report provides an update on the latest reported position related to:

- 1) Elective care
- 2) Cancer performance
- 3) Diagnostics.

1) Elective Care (data correct as of 4th July 2023)

a) 104 week-waits

NHS England required all 104-week waiters to have been treated by March 23, however Staffordshire and Stoke-on-Trent is an outlier and still has patients awaiting treatment. There were nine 104-week breaches in June at UHNM and one at Nuffield (NS), the latter being a late transfer from UHNM.

There are plans to treat all but one patient during July- whilst this patient remains as a UHNM breach they are awaiting specialist treatment out-of-area.

There are no other Staffordshire and Stoke-on-Trent patients waiting more than 104 weeks with other providers.

b) 78 week-waits

NHS England set a target to treat all patients waiting more than 78 weeks initially by the end of March 2023, but this was extended until June. However, Staffordshire and Stoke-on-Trent continues to have patients within this cohort across a range of providers.

Provider Name	Admitted	Non-Admitted
University Hospitals of Derby And Burton NHS Foundation Trust (UHDB)	18	33
The Royal Wolverhampton NHS Trust (RWT)	14	10
University Hospitals Birmingham NHS Foundation Trust (UHB)	3	3
University Hospitals Coventry And Warwickshire NHS Trust	1	
Walsall Healthcare NHS Trust	1	
Barts Health NHS Trust	1	
Stockport NHS Foundation Trust	1	
Hull University Teaching Hospitals NHS Trust	1	
Manchester University NHS Foundation Trust	1	3
Nottingham University Hospitals NHS Trust	1	

The Robert Jones And Agnes Hunt Orthopaedic Hospital NHS
Foundation Trust
Mid Cheshire Hospitals NHS Foundation Trust

1
1

Grand Total

42

51

UHNM have the largest number of 78 week waiters with 312 breaches reported in June, this is expected to reduce to 197 in July and 133 during August reflecting the expected impact of industrial action.

Nuffield are expecting 20 breaches in July, but these again are late transfers from UHNM.

The committee are asked to note that this cohort is not “fixed” and these numbers reflect patients being removed from the numbers once treated but include new patients that will breach the 78 week threshold that are expected to come onto the list.

The reasons for this position are complex and include:-

- Patient choice- many patients have declined treatment offers elsewhere and others have declined appointments due to holiday plans or other personal reasons.
- Some patients whilst listed for surgery have been unwell and had to have treatment rescheduled.
- Capacity within particular specialities- in particular endoscopy where additional capacity has been secured through insourcing arrangements at UHNM.
- UHNM have also commissioned an external review of waiting list management process. The report has been discussed within their Public board and therefore not repeated here. However, action plans are being implemented in support of the recommendations made. In the meantime they are also benefitting from operational support from the National GIRFT (Getting it right first time [Getting It Right First Time - GIRFT](#)) team to streamline processes.
- Improvement plans and trajectories have been disrupted due to industrial action and with more industrial action planned the overall impact has yet to be calculated.

c) 65 week-waits

In May 2023, the Staffordshire and Stoke-On-Trent Integrated Care System (ICS) submitted a compliant plan to treat all 65- week waiters by the end of March 2024. Whilst some trajectories are slightly off- target there is both time and ambition to recover.

The reasons in part are the continued focus on the 104/78week cohorts and the impact of industrial action.

UHNM and the ICB are working closely with Independent sector providers to facilitate early recovery.

As of 25th June there were a total of 2745 patients waiting more than 65 weeks. The majority (94%) are within our local NHS Trusts. (UHNM, UHDB, RWT & UHB)

It is important for the committee to also note that throughout the pandemic a national approach was adopted to prioritisation of treatment and therefore patients will have been treated primarily based on clinical need and urgency with waiting time being a secondary consideration.

All Trusts have processes for reviewing long-waiters including “harm reviews”.

2. Cancer services.

Cancer services were prioritised during the pandemic and continue to be so.

The key measures that are currently areas of focus are:-

- 28-day faster diagnosis standard (FDS)- i.e that patients referred with a suspicion of cancer will have a definitive diagnosis within 28 days. The recovery target set out within the national planning guidance is 75% by March 24.
- 62 -day treatment target- 85% of patients with a cancer diagnosis should commence their first definitive treatment within 62 days.

These measures are reported at System level and therefore the data does not allow us to see whether Staffordshire and Stoke-on-Trent patients are receiving services compliant with the standards separately to the overall Trust performance.

The provisional data for May from UHNM indicates that 63.6% of patient received a definitive diagnosis within 28 days, an action plan is in place that aims to exceed the national target by the end of the year.

The overall position does however not reflect the variation for particular cancer types. For example in FDS standard for suspected breast cancer was 92.5% and Upper GI, Lung and paediatric all met the 85% standard whereas colorectal cancer was only 34.8% due to delays and demands on endoscopy services and histopathology.

A recovery plan for endoscopy services has commenced including recruitment of additional staff as well as redeploying staff to maintain endoscopy booking. Additional capacity has also been insourced, and weekend services have commenced to clear backlogs. In the longer-term provision for additional endoscopy services are being incorporated into the North Community diagnostic hub proposal. The business case for which has now been approved by NHS England.

The overall FDS achievement in Derbyshire was 69.5% and 70.2% in the Black Country.

Achievement level for the 62- day standard was 57.8%. The commencement of timely treatment has a clear correlation with receiving a timely diagnosis and due to the high volume of colorectal referrals the improvements in endoscopy are expected to lift overall 62-day performance going forward.

The 62-day standard achievement for Derbyshire was 56.5% and 50.8% for the Black Country.

3. Diagnostics

The national planning guidance aims for diagnostics to be delivered within 6 weeks by March 2025 for 95% of referrals.

The first phase of recovery is to eliminate 13 week breaches and this has largely been achieved within UHNM for MRI, CT and NOUS diagnostic modalities.

The main areas of challenge as reported above are endoscopy services, including gastroscopy, colonoscopy and flexi-sigmoidoscopy-At the end of May ~520 patients were waiting beyond 13 weeks for these services.

Demand and capacity modelling has now been completed for endoscopy services and planned capacity now exceeds demand allowing a recovery trajectory to be mapped and monitored. 13 week waits for endoscopy are now expected to be cleared by the end of August.

Diagnostic capacity will also increase through three designated community diagnostic centres (CDC's). Tamworth (hosted by UHDB) and Cannock (hosted by RWT) are expected to be providing services within the current financial year. The business case for a large CDC

in Stoke-on-Trent has recently been approved by NHS England. This new facility is expected to open in 2025.

Contact Details

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