



Bromley Health Scrutiny Sub-Committee Update 30 January 2024

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Contents

PRUH and South Sites update

- Elective recovery
- Emergency performance
- Estates and service updates

Trust-wide update

- Apollo programme: Epic and MyChart
- Finance update



Elective recovery (1)

We continue to reduce long waiters across all waiting time cohorts in line with the **NHS Elective Recovery Plan**, that addresses backlogs built up during the pandemic and through industrial action. Whilst Epic was launched successfully, we continue to work through our Stabilisation phase to support staff required with system familiarity to accelerate processes and return activity to pre-Epic levels.

Exceptionally long waits

Five patients have waited for treatment at the PRUH for over 100 weeks.

• None of these are urgent and all have plans for appointments leading to treatment in line with Patient Choice and resource availability.

Waits by specialties

We continue to address long wait cohorts across specialties

 We have 39 patients awaiting surgery and other planned interventions with waits over 78 weeks on an admitted pathway (as at 15 January 2024). Seventeen of these patients have dates for their next event booked. We also have 15 patients on a non-admitted pathway. Thirteen of these patients have dates for their next event booked. The majority of these pathways relate to Orthopaedics.

Capacity to address long

Additional capacity is critical to reducing the total waiting list further

- Our total waiting list has grown from 35,893 in August 2023 to 38,479 as at 15 January 2024 (+2,568)
- We continue to work with partners to reduce the 1,920 patients waiting over 52 weeks or either a procedure or outpatient appointment (up from 167 at last report).

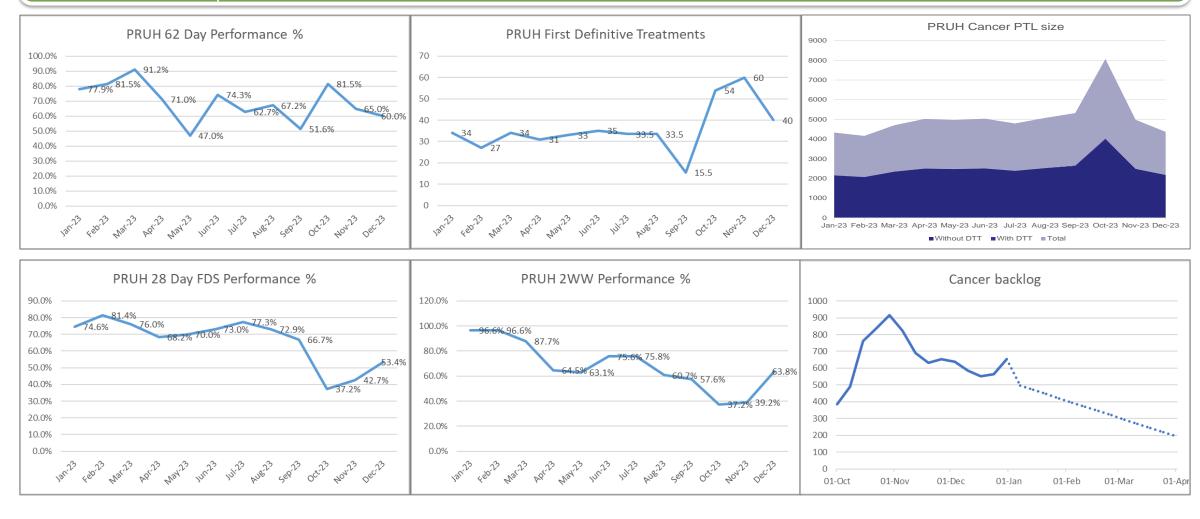
Diagnostics Waiting Times and Activity

- DM01 remains our most challenged pathway area in terms of data quality across the Trust.
- Our November 2023 compliance has reduced from 19.40% reported in October to 24.80% reported in November.
- The largest increases in breaches were seen in Non-Obstetric Ultrasound (+1,355 breaches).



Elective recovery (2)

Our Faster Diagnosis Standard (FDS) performance continues a positive trend since October. Whilst our cancer backlog spiked in December, our longer-term run rate indicates a March backlog position of ~193. Actions in place to mitigate this position. Please note that our December data is provisional.

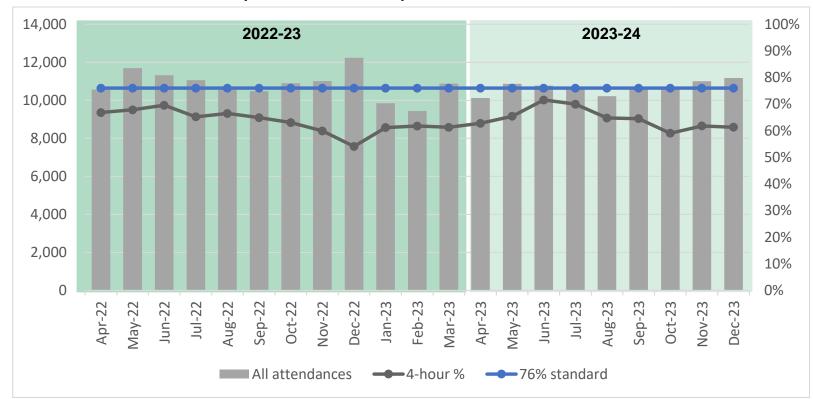




Emergency performance (1)

- Attendee levels remain lower than prior year, though variable (see over). However, the months of December and October 2023 experienced the second and fourth highest attendance levels respectively since April 2023. Overall performance against the four-hour wait target for A&E remains challenging but improving since a low in October of 59.07%. In December 2023 it was 61.33% (vs 54.12% for the prior year).
- Between 1 and 15 January 2024, the site had 14 days at either level 3 or 4 of the Operational Pressures Escalation Levels (OPEL) framework, the highest possible level of readiness and escalation actions necessary to keep patients

Total attendances and 4-hour performance since April 2022



We continue our work to address our longer lengths of stay which contribute to poor flow across the site. We have produced a comprehensive dashboard to help monitor trends and support the operationally focused Patient Flow Programme.



Emergency performance (2)

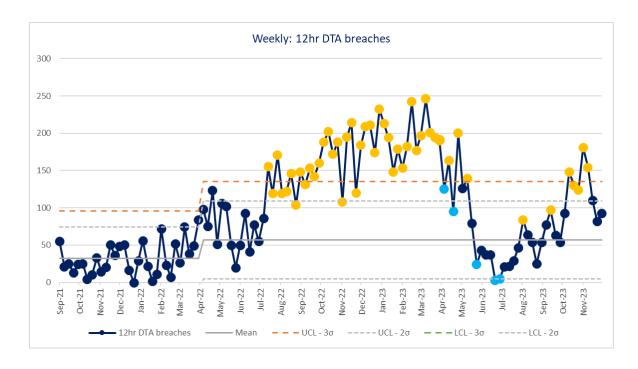
Ambulance attendances, handover and Decisions to Admit

The PRUH has a higher proportion of arrivals to the emergency department by ambulance than most, 35% in September (King's College Hospital, Denmark Hill was 32%), placing it in the 1st quartile. The number of arrivals has remained fairly stable whilst our comparative handover delay position has deteriorated during the winter months.

Decisions to admit (DTAs) decreased to 517 in November (17.23 each day) from 568 in October (18.32 each day) then up to 548 in December (17.68 each day).

Ambulance cumulative handover delays for all patients across London: rolling 30-day position as at 3 December 2023 (LAS data, hh:mm:ss shown)

Site			
Queen's Hospital	333:29:52		
North Middlesex Hospital	290:26:40		
Northwick Park Hospital	212:02:04		
Whipps Cross University Hospital	191:22:21		
Newham General Hospital	166:55:15		
King's College Hospital (denmark	163:46:14		
St George's Hospital (tooting)	135:17:25		
Princess Royal University Hospital	134:19:17 #8 in London		
Barnet Hospital	110:39:02		
Queen Elizabeth Hospital	107:12:33		
St Helier Hospital	102:07:08		
Ealing Hospital	94:04:28		
St Thomas' Hospital	81:08:21		
Hillingdon Hospital	74:59:19		
Kingston Hospital	71:37:46		





Strike impact on elective care

Junior doctors have taken strike action on 34 days over the last 10 months.

We reported the following number of patients affected by their recent industrial action.

No further strikes have been announced but with no agreement, we determine that further action is likely.

Junior doctors and hospital dental trainees industrial action period			Outpatient activity rescheduled
Began on Wednesday 20 December at 7.00am and finished at 7.00am on Saturday 23 December 2023	24	73	1,201
Began on Wednesday 3 January at 7.00am and finished at 7.00am on Tuesday 9 January 2024	80	59	1,286

Estates and capital updates

ENDOSCOPY UNIT

The Trust has met all ten pre-planning conditions, now subsequently discharged by Bromley planning. This position has allowed construction to begin. The cost has increased over the initial estimates due to a number of factors. These have been reviewed extensively to ensure value for money. Despite the delay, we aim to adhere to the expected completion of end of 2024/25.



RADIOLOGY UPGRADES

The new MRI 2 installation is well underway. The supplier has delivered and installed the new magnet in advance of the existing replacement. The final commissioning was completed in December 2023. The current MRI is planned to be replaced in Q4.

NEW MORTUARY OPENS

Our new mortuary facility opened on 8 January 2024, with an increased capacity of 202 fridges, four new post-mortem tables and a mixture of semi-obese, obese and bariatric units. This is also the public mortuary for Bromley and Bexley.

As well as the improved use of space, the new mortuary is fully secured with cameras and is only accessible with swipe access.

FLOW UPGRADES AND OTHER DEVELOPMENTS

A range of other capital projects across the PRUH are being undertaken. Ongoing work includes creating 16 new beds with expanded High Dependency Unit (HDU) provision and 16 neonatal cots, installing cooling units and a further power substation, plus completing a series of Omnicell upgrades. The additional estate capacity also means we can resume our ward refresh programme and upgrade their dementia friendly environments.



Apollo programme: Epic and MyChart update

Key objectives and outputs of the stabilisation phase for Epic have been agreed and the programme team have developed a plan for addressing the key issues arising. Examples of work we are doing include:



Patient communication

- Issues related to the functionality of patient communications within the system are ongoing and we are working hard to resolve. Some progress has been made allowing for text messages and letters to patients via Epic resuming in November after a temporary switch off.
- We are working to rectify an issue with our Hybrid Mail service which has led to delays in hard copy letters being sent to patients. A fix is in place and the backlog is being tackled. Patients are currently being contacted by phone as needed. This issue does not affect GP correspondence.

GP referrals

We are continuing to work through the process of ensuring all clinics can facilitate direct booking by GPs. As of early December, we have resolved this issue for over 85% of clinics Trust wide. Where required manual processes and service support are being deployed to cover bookings.

Key achievements since launch

- Over 85% of the frontline workforce across King's and Guy's and St Thomas' (GSTT) are now trained
- Over 41,000 members of King's and GSTT staff have accessed Epic since go live
- Over 150,000 patients have registered for MyChart, more than 40,000 new registrations after the launch period



Finance update

Current financial position

The Trust was reporting a £52.4 million deficit at the end of November 2023.

This represents a significant variation to our planned deficit at the start of the year of £49 million, and is driven by a number of factors, including (but not limited to):

- The costs associated with strikes
- The challenging delivery of our cost improvement schemes
- High energy costs linked to inflation
- Costs linked to caring for a high number of patients with mental health needs

We are working at pace to reduce costs, so we can reduce the deficit before the end of the financial year (March 2024)