

<b>Report title:</b> Mid and South Essex NHS Foundation Trust operational update	
<b>Report to:</b> Health Overview Policy and Scrutiny Committee	
<b>Report author:</b> Mid and South Essex NHS Foundation Trust	
<b>Date:</b> 4 April 2024	<b>For:</b> Discussion
<b>Enquiries to:</b> Richard Buttress, Democratic Services Manager ( <a href="mailto:richard.buttr3@essex.gov.uk">richard.buttr3@essex.gov.uk</a> ) or Emma Hunter, Senior Democratic Services Officer ( <a href="mailto:emma.hunter@essex.gov.uk">emma.hunter@essex.gov.uk</a> )	
<b>County Divisions affected:</b> Not applicable	

## 1. Introduction

Mid and South Essex NHS Foundation Trust has three strategic goals, focused on quality of care, equity for our population and opportunities for our people. We consider our annual objectives against this strategy in the context of the needs of the mid and south Essex population, and the integrated care strategy of our system partners.

In this report to the Committee, the Trust presents updates on planned improvements and operational data, as well as additional information about improvements to its cancer performance and waiting lists.

## 2. Action required

To note the contents of the report.

## 3. Operational update from the Trust

### 3.1 Urgent and emergency care

Across the Trust's three emergency departments (EDs), performance against the four-hour standard in February was 68.1%, as of 25 March it stands at 71%.

- Achieving 76% performance remains a priority, and we are planning to deliver 77% four-hour performance in 2024/25.
- The Trust has undertaken a number of schemes to improve urgent and emergency care delivery. These include:
  - Initiatives at Basildon Hospital to direct trauma and orthopaedics cases to the fracture clinic, provide early access for stable early pregnancy, and make the referral process for surgery smoother
  - Work in progress at Broomfield Hospital to improve processes for non-admitted patients in ED, with an aim to discharge 90% of non-admitted patients in four hours
  - At Southend Hospital, the Trust has increased triage capacity, opened a six-chair Clinical Decision Unit for non-admitted patients, and on 28 March will open the 16-bed medical referral unit on Dowsett ward, the first part of the £8million redevelopment of the ED. This will allow GP referrals to be immediately referred away from ED, avoiding admissions and ensuring that all admitted patients receive a full assessment

- The Trust is also reforming medical staffing in its hospitals to support capacity and flow, involving the recruitment of 101 medical doctors across the Trust for the new medical model which will better match demand with workload and substantially reduce expenditure on agency staff
- Work is underway across the Integrated Care System to reduce ambulance arrivals through Unplanned Care Coordination Hubs.

### **3.2 Ambulance handovers**

- The Trust continues to receive a very high number of patients at its three EDs.
- Performance improved in February. 83.2% of the ambulances were handed over in under 30 minutes, up from 77% in January; and 41.9% handed over in under 15 minutes, up from 38.2% in December. This has continued to improve, and as of 25 March the Trust has achieved the target of 90% handed over within 30 minutes.
- The Trust is performing well compared regionally. In February, the average handover time at the Trust was 24 minutes, compared to 37 minutes in the east of England and 49 minutes in the Midlands. Ambulance demand is up 18% since April 2022, and 30% up at Southend Hospital.
- Work has started to standardise rapid assessment, treatment and ambulance handovers processes, including by close working with system partners.

### **3.3 Discharges from hospital**

- The Trust remains in a good position both regionally and nationally for the numbers of patients waiting to be discharged from its hospitals. 47.8% of patients are in hospital for at least seven days, and of those over seven days 26.2% stay for over 14 days, performing better than the regional performance in both aspects.
- This year the Trust and system have a priority to further reduce length of stay to improve flow and increase discharges to community capacity, including intermediate care beds and virtual wards.
- Throughout 2023/24 the Trust-wide length of stay has improved by 1.2 days.
- The Trust's Integrated Discharge team works closely with community and social care partners to maintain good discharge. Currently there are an average of 150 patients awaiting discharge or medically fit, and the plan is to reduce this further in 2024/25.

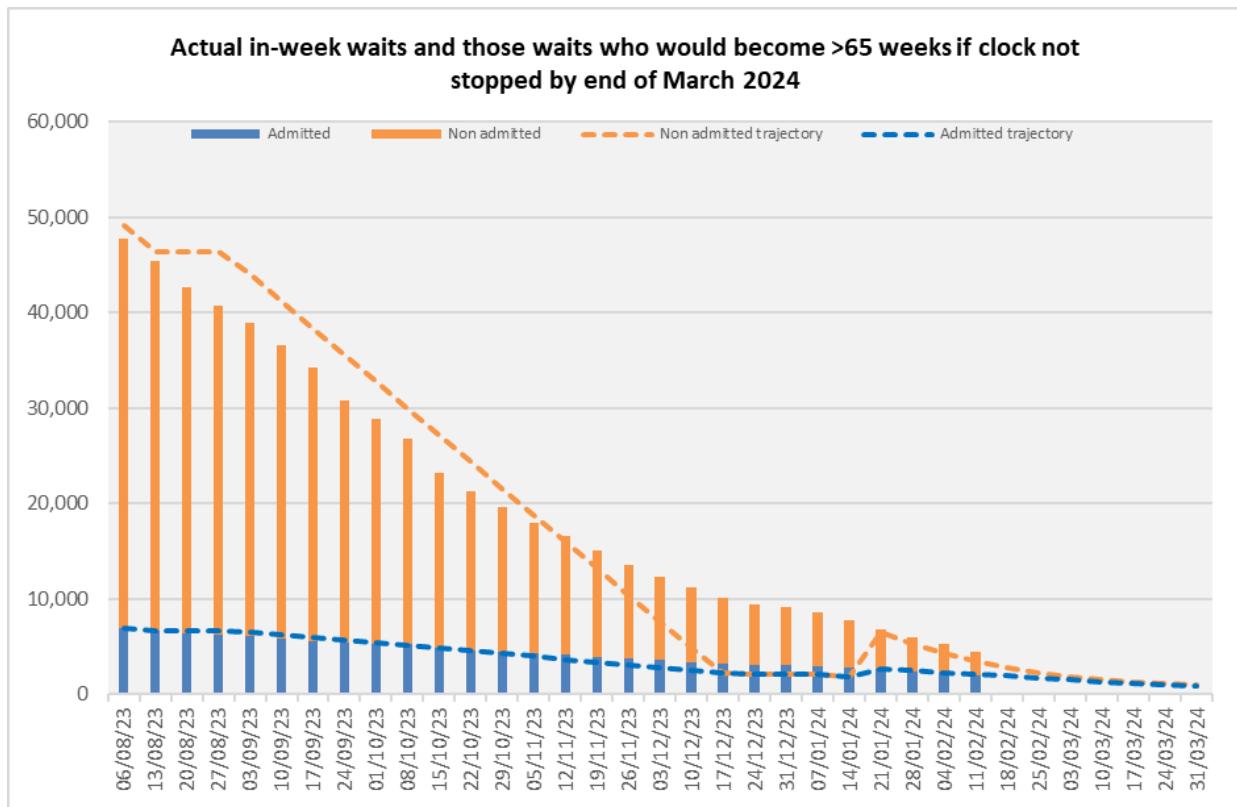
### **3.4 Cancer performance**

- The Trust continues to work on improving cancer performance.
- The Trust has a target that 75% of people are given their cancer diagnosis within 28 days by March 2024 – the faster diagnosis standard (FDS). Performance was 57.9% in January, down from 62.2% in December. Both Christmas holidays and the January strikes affected this. The performance for March is expected to be 71% which is behind the target.
- Colorectal cancer and dermatology FDS have improved, but breast cancer has not met the expected 92% performance which would have allowed the Trust to meet the overall 75% standard. This was a combination of increased referrals in south-west Essex and limited one-stop clinic capacity. A full action plan will be implemented including improved triage pathways, as less than 5% of 1,300 referrals per month have cancer, and an increase in one-stop capacity. The 77% diagnostic standard will be met in 2024.
- The Trust plans to have no more than 475 patients waiting over 62 days to start to receive treatment by the end of March 2024. As of 18 March this number was at 495 patients.
- Specific measures to improve performance include:

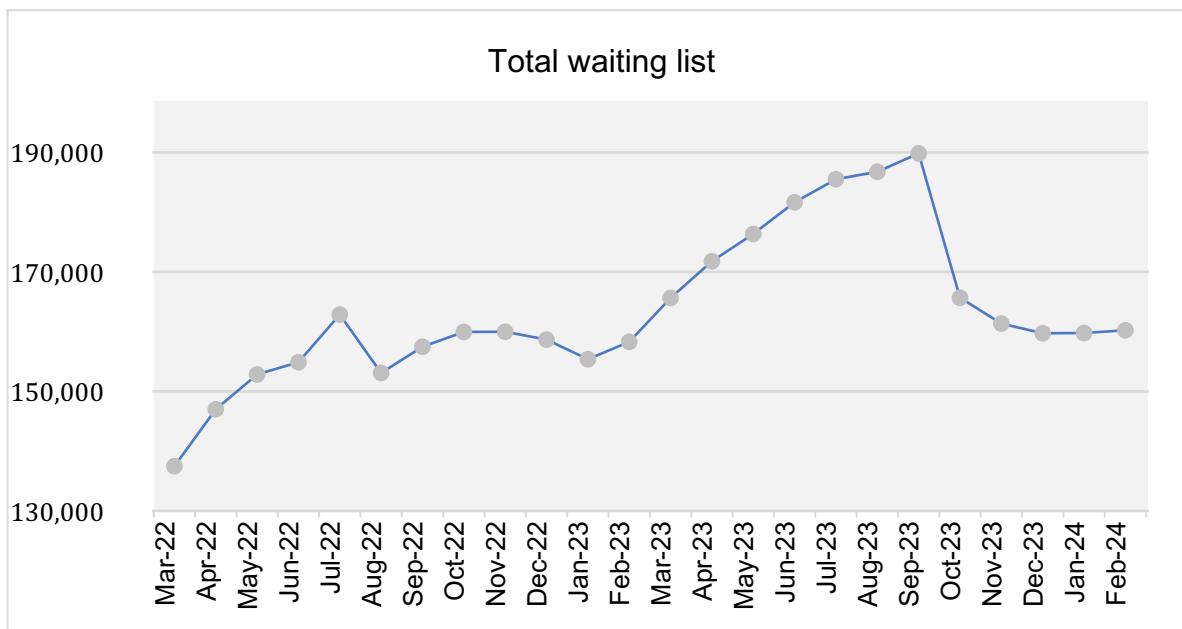
- Urology: a rapid access clinic for outpatient services will be offered in Broomfield Hospital, mirroring the service in Southend. Clinical Nurse Specialists can now carry out triage of patients in Basildon and Southend hospitals, with this due to be cascaded into Broomfield Hospital as well. Additional clinics were created in March.
- Skin: community-based tele-dermatology continues to reduce referrals coming into the Trust, additional clinics are being put on in Broomfield and Basildon hospitals so that more patients can be seen.
- Gynaecology: additional clinics are being put on, a one-stop clinic has been introduced at Broomfield Hospital where women can be seen and have scans in one session. An improved triage process has been introduced at all three hospitals.
- Breast: capacity has been brought to Basildon Hospital from elsewhere in the Trust as it is the most challenged site. This is bringing in 75 additional clinic slots per month. Across all three hospitals, additional capacity from outside the Trust has been brought in, providing 325 additional slots to reduce the backlog of patients.

### **3.5 Elective care and actions to reduce waiting times**

- We have contacted 8,000 patients waiting over 40 weeks, offering the option to receive care at another trust as part of a national programme.
- Future plans include the development of the new surgical day unit at Southend Hospital which will see over 5,000 additional surgeries undertaken when opened. From December until this opens, the Trust will use its existing capacity at weekends to start treating additional patients, with 1,200 operations planned by March 2025.
- The Trust's theatres are now more efficient, with 2,000 more cases done in 2023/24 in the same theatres compared to 2022/23, and capped utilisation of theatres is expected to be 85% from April which has allowed the average number of cases per theatre to increase.
- Braintree Community Hospital is now an accredited elective centre for orthopaedics, and an additional day case theatre procedure room is being constructed. This year the Trust has undertaken 1,856 cases to date, and in 2024/25 will undertake 3,560.
- We have installed new facilities, which over the past year include a new cardiac catheter lab at the Essex Cardiothoracic Centre and a second surgical robot at Southend Hospital allowing urological cancer surgery to increase.
- Through our outpatient transformation programme, we are developing new models of care in a range of specialties. These include referring patients directly for a test, triaging more patients before their appointment, and expanded use of patient-initiated follow up.
- Recognising the need to reduce the backlog of new and follow-up ophthalmology appointments, the Trust will open two Ophthalmology Diagnostic hubs. The first hub opened in mid-March at Orsett Hospital, and the second is planned for mid Essex later in the year. This will see an additional 20,000 outpatients per year.
- The Trust is planning to deliver 108% activity of the 2019/20 baseline year in 2024/25. This will allow – subject to strikes – the Trust to deliver the 65-week target by September 2024. This is not including the additional surgical expansion due to the Southend 23-hour day stay facility.



- The Trust is forecast to have around 100 patients waiting over 78 weeks by the end of March. The patients that are likely to breach are 18 breast reconstruction and plastic surgery procedures, oral surgery, and a small number of other specialities due to complexity of treatment, delays for diagnostics with other providers and patient decisions to defer treatment.
- The Trust expects the total waiting list to sustain or fall due to additional treatments planned and the increased validation of the waiting list. This data validation led to the list's large fall in September.



### 3.6 Discharges from hospital

- The Trust remains in a good position both regionally and nationally for the numbers of patients waiting to be discharged from its hospitals. 47.8% of patients are in hospital for at least seven

days, and of those over seven days 26.2% stay for over 14 days, performing better than the regional performance in both aspects.

- This year the Trust and system have a priority to further reduce length of stay to improve flow and increase discharges to community capacity, including intermediate care beds and virtual wards.
- Throughout 2023/24 the Trust-wide length of stay has improved by 1.2 days.
- The Trust's Integrated Discharge team works closely with community and social care partners to maintain good discharge. Currently there are an average of 150 patients awaiting discharge or medically fit, and the plan is to reduce this further in 2024/25.

### **3.7 Diagnostics**

- Providing faster diagnostics is crucial for reducing wait times for cancer or routine care. The Trust is working to ensure patients receive tests within six weeks and achieved this for 66.9% of patients in February.
- There has been considerable improvement in audiology, neurophysiology, cystoscopy and urodynamics in February, while services including respiratory physiology and colonoscopy faced challenges due to increased demand and vacancies.
- The demand for MRI scans continues to be higher than expected, increasing the backlog. Additional CT, MRI and ultrasound capacity has been sourced, with support for gynaecology, prostate and colorectal patients.
- Interventional radiology waiting times have been higher due to demand, vacancies and industrial action, although recruitment has been successful.
- Temporary additional endoscopy facilities are now available at Orsett Hospital.

## **4 Financial Plan 2024/25**

We have been working to reduce our financial deficit against a challenging backdrop for some time. As a system we spend £2.1billion each year and run one of the largest acute hospital trusts in the country.

Despite making savings of £28million across the organisation this year, we are still forecasting an overall deficit of £29.7million (after using £89million of non-recurrent funding during 23/24). In the absence of non-recurrent funding we anticipate the deficit rising to around £102million at the end of 2024/25, after the delivery of further stretching saving opportunities.

Each organisation within the wider mid and south Essex system is continuing to develop detailed plans to improve value, building on existing programmes of work. But we recognise we need to go further and faster than we have before to significantly improve our financial position over the next 12 months.

The Trust is looking at more radical changes to deliver an affordable plan that improves performance and ensures we are spending taxpayers' money responsibly and effectively. As well as on-going work to reduce length of stay and temporary staffing costs – which we know are key drivers of the deficit – we are also working up a raft of other schemes.

We know that working more efficiently also leads to better patient care, and any action we take will need to be sustainable and drive improvement clinically – not just financially.

Our plans for financial recovery are wide-ranging, and we will be working as a healthcare system to deliver them.

## **5 News and developments**

- The Trust is undertaking a ten-year (2025-35) strategy development programme with an aim for its new strategy to be published in early 2025. It is starting engagement with partners to help feed their and views from local communities into this work over the rest of 2024. Please contribute when the team reaches out over the next two-three months.
- A student midwife at Southend Hospital has been nominated for a national award for the compassionate care she provided to women and birthing people during her work placement. Jacqueline Gray, who is in the third year of her midwifery training at Southend Hospital and Anglia Ruskin University, has been shortlisted for this year's Student Nursing Times Awards. The awards recognise rising stars in the midwifery and nursing profession and Jacqueline is one of just ten student midwives in the country to be shortlisted – a remarkable achievement.
- The NHS Clinical Entrepreneur Programme (CEP), delivered by Anglia Ruskin in partnership with the Trust, has won Best Educational Programme for the NHS at the HSJ Partnership Awards 2024. This prestigious prize, which recognises initiatives that improve the knowledge and skills of NHS staff, was presented at a ceremony in London on 21 March. Judges awarded the top "Gold" prize to the NHS Clinical entrepreneur Programme, recognising how this forward-thinking education initiative transforms healthcare through innovation, by accelerating the introduction of ground-breaking treatments and diagnostics.