

Royal London Urgent & Emergency Care and Elective Care

Health & Adults Scrutiny Sub-Committee

Tower Hamlets

16th October 2023

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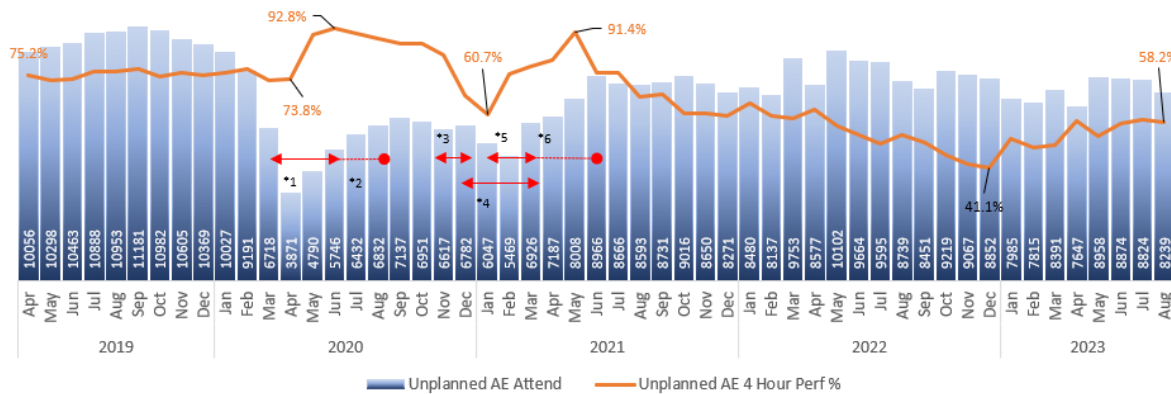
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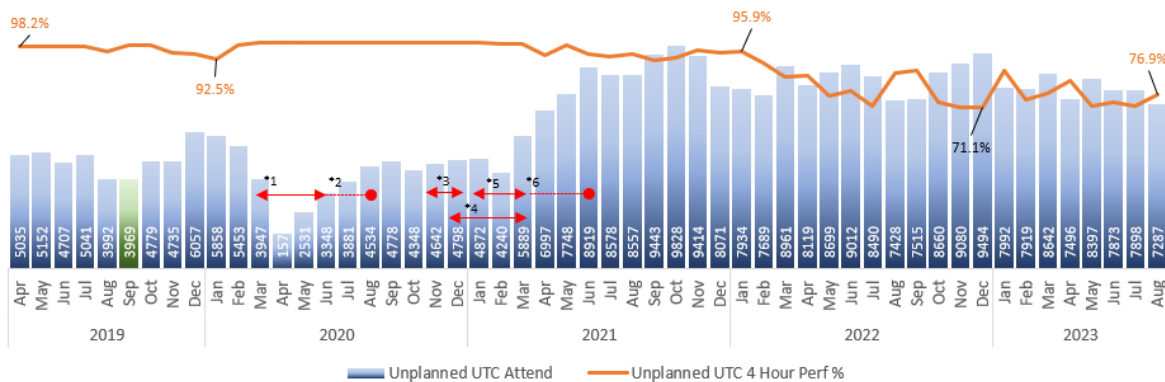
Urgent & Emergency Care Performance Summary

The Royal London: A&E Unplanned 4 hour Performance April 2019 to August 2023



- National target 76% by end of 23/24
- Performance declined following re-opening post lockdowns
- UTC a significant factor

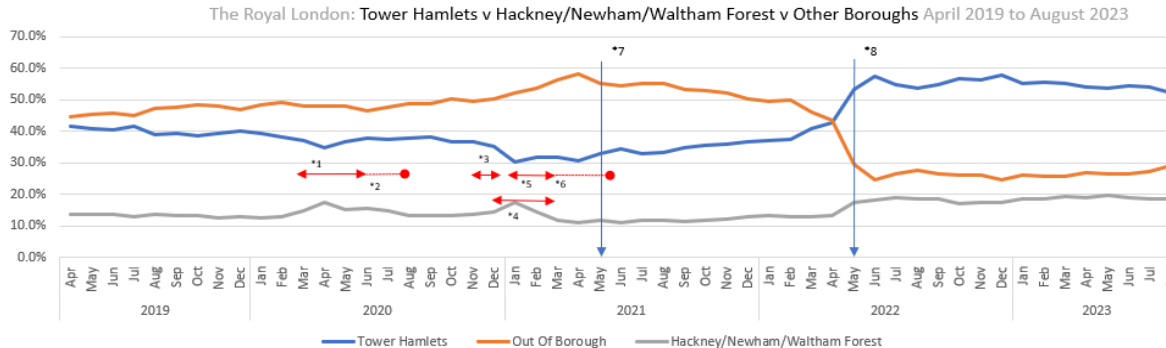
The Royal London: UTC Unplanned 4 hour Performance April 2019 to August 2023



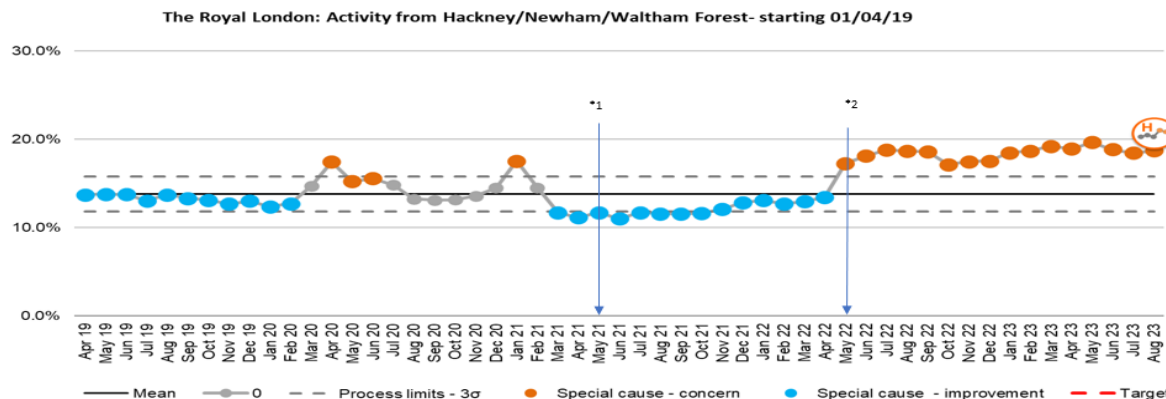
Notes
*1: 1 st National lockdown begins
*2: 1 st National lockdown exit second phase
*3: 2 nd National lockdown begins
*4: Tier 4 begins
*5: 3 rd National lockdown begins
*6: Roadmap to 3 rd lockdown ends



Urgent & Emergency Care Changing Demands



- Opening of the Elizabeth line has changed borough mobility due to change in transport links
- Hackney / Newham / Waltham Forest attendances in particular increased when second phase opened.
- Overall UTC (Type 3) attendances have increased by c.80% vs pre-pandemic levels.



Notes:

Borough taken from registered GP to data supplied by ONS, not by local health authority.

*1: Elizabeth line (26th May 2021) Liverpool St to Shenfield (Src: Crossrail)

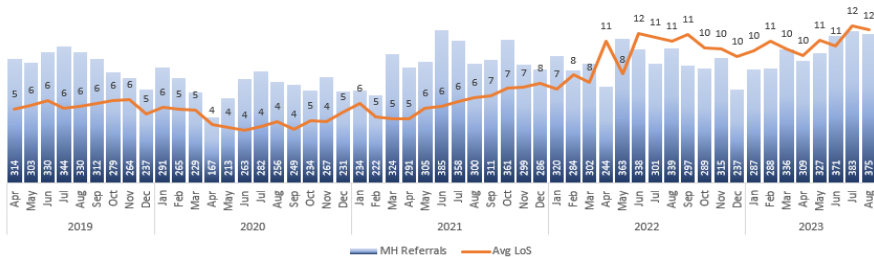
*2: Elizabeth line (26th May 2021) Paddington to Abbey Wood added (Src: Crossrail)



Urgent & Emergency Care

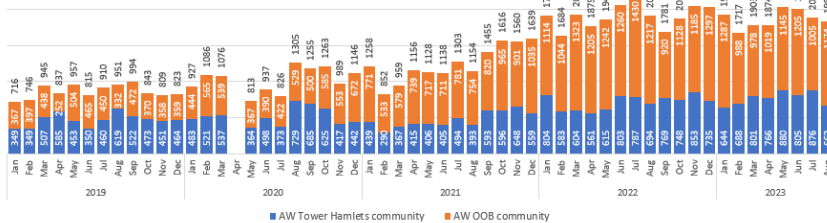
System wide challenges

The Royal London: Mental Health Referrals v Avg Length of Stay (Hours) April 2019 to August 2023

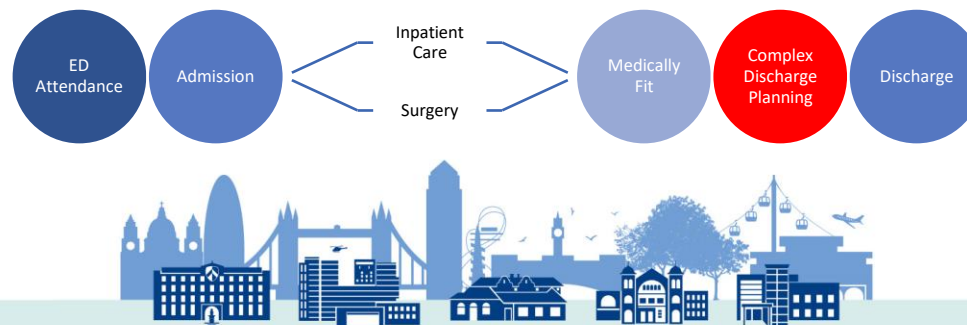


- Referrals to mental health continue to increase – up by 11% since July-19. Of those referrals c.50% require ongoing management in inpatient mental health facilities.
- Average length of stay for mental health patients has also increased to 12 hours 39minutes per patient on average, a 200% increase since July 19.

The Royal London: Admitted Medically Optimised April 2019 to August 2023



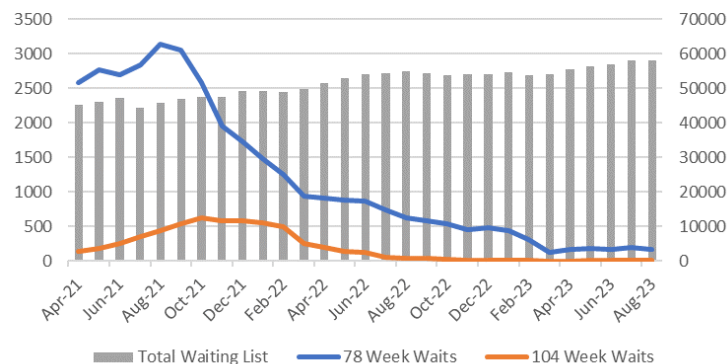
- Delays in discharge of patients that require out of hospital support post discharge has increased since pre-pandemic.
- Key challenges are nursing home / care home placement, packages of care and equipment.
- Currently an average of c.580 bed days are lost per month due to delays in discharge of complex patients.



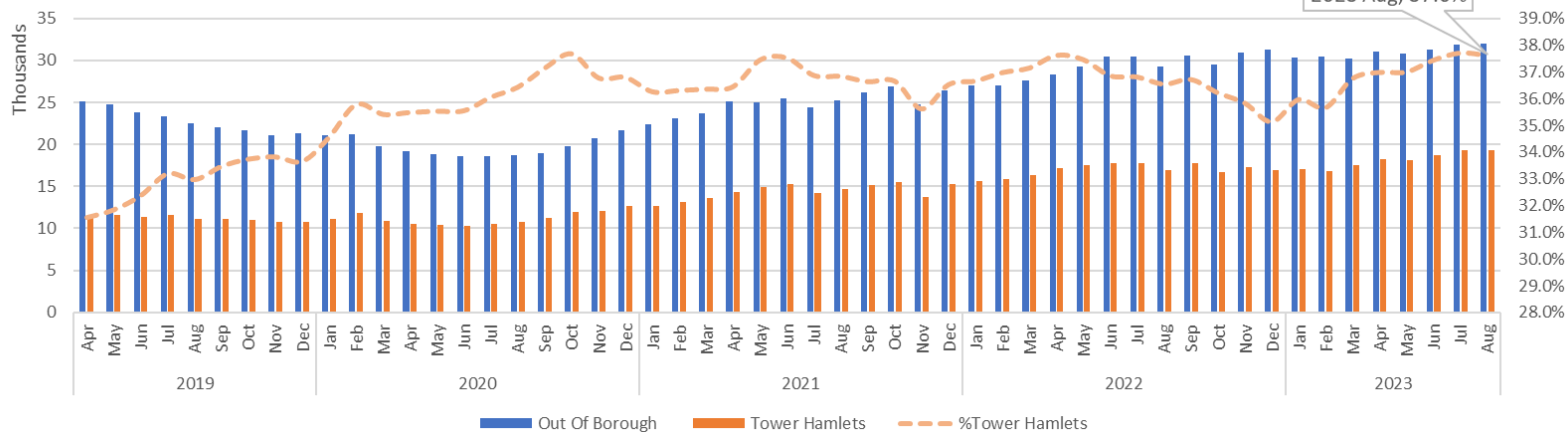
Referral to Treatment Summary

- Referral to Treatment (18 week) standards were significantly impacted by the pandemic due to significant reduction in capacity available to treat planned patients
- Waiting list has also been impacted by continued growth in referral demand from primary care – both from Tower Hamlets and beyond.
- National targets for 23/24 aim to eradicate waits of 65 weeks or more. Progress against this target is being significantly impacted by ongoing industrial action.
- However we are continuing to see a steady reduction the tail of patients waiting the longest for treatment.

RLH Waiting List Profile

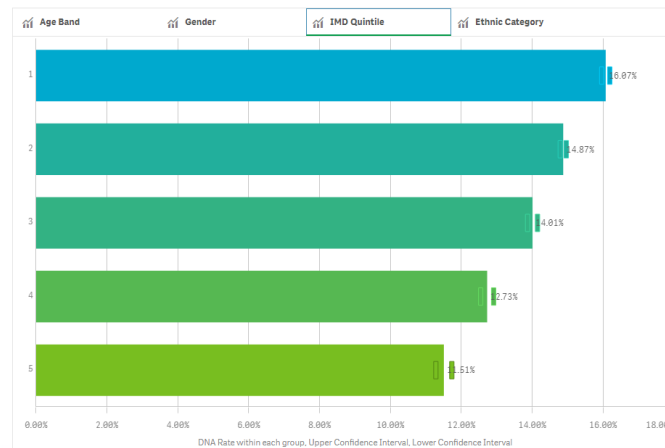
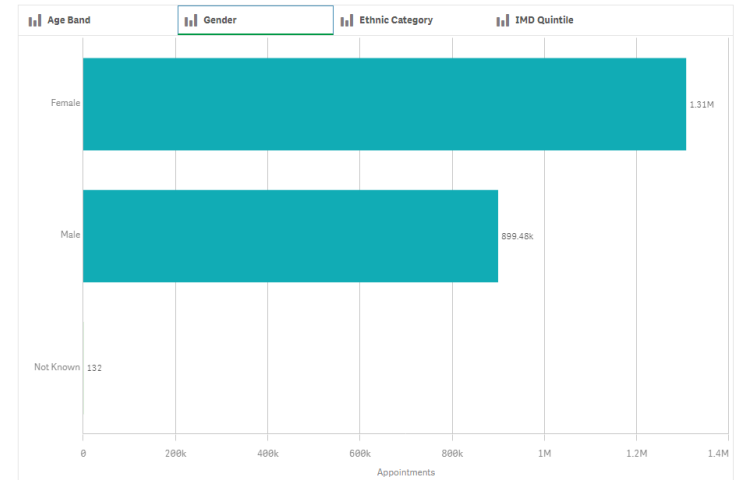
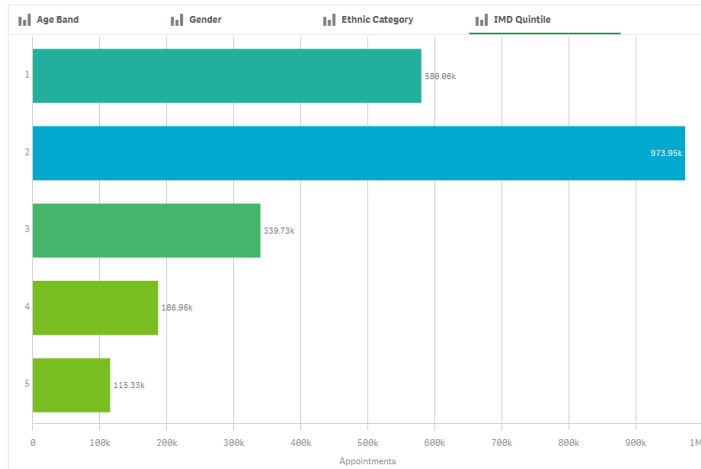


Referral To Treatment: **Tower Hamlets** v **Other Boroughs**: Apr 2019 to Aug 2023

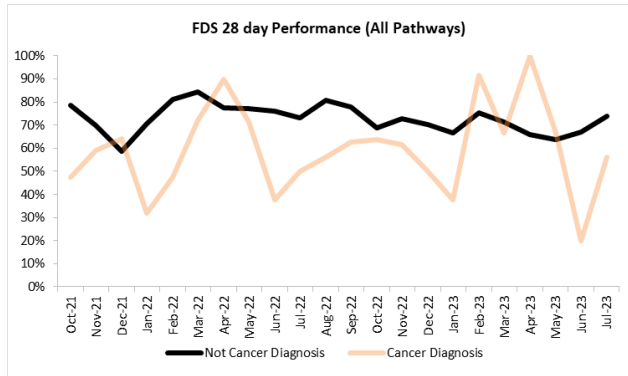


Referral to Treatment

Addressing Inequalities



Cancer & Diagnostics



- National cancer standards changed from October 2023 – reducing down to three KPIs – diagnosis (28 days), overall pathway (62 days) and treatment (31 days).
 - Barts Health is positive outlier nationally for cancer diagnosis performance – and this has improved in the last three months and is now above target.
 - Challenges remain in surgical treatment times – that have been impacted further by the industrial action.
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- Overall performance against national diagnostic standard (DM01) has declined in recent months – principally due to audiology and ultrasound performance. Recovery plans are in place.
 - National target is >95% of patients receiving a diagnostic test within 6 weeks by March 2025
 - CT and MRI have demonstrated significant improvements – are on track to be >95% by March 2024 (one year ahead of target).

