Healthier Communities Select Committee							
Report title	Comments of the Overview and Scrutiny Committee on Local NHS GP Services						
Contributors	Overview and Scrutiny Committee	Item No.	7				
Class	Part 1	Date	1 November 2017				

1. Summary

1.1 This report informs the Healthier Communities Select Committee of the comments and views of the Overview and Scrutiny Committee, arising from discussions held on Local NHS GP Services at its meeting on 31 October 2017.

2. Recommendation

2.1 The Healthier Communities Select Committee is recommended to note the views of the Overview and Scrutiny Committee as set out in section three of this referral.

3. Overview and Scrutiny Committee views

- 3.1 On 31 October 2017, the full Overview and Scrutiny Committee considered a report entitled Local NHS GP Services which included, as an appendix, the report being considered by the Healthier Communities Select Committee on the future of the Walk In Centre in New Cross.
- 3.2 The Overview and Scrutiny Committee would like to make the following comments to the Healthier Communities Select Committee in relation to the proposed closure of the Walk In Centre at New Cross:
 - 1. We have heard a number of concerns about the proposed closure.
 - We appreciate that the NHS Lewisham Clinical Commissioning Group (CCG) is likely to need more time to consider the responses received during the conclusion and we welcome that.
 - 3. We would welcome the final response from the CCG on this matter being provided to all councillors as the walk-in centre is a borough-wide service.
 - 4. We would welcome further details on GP recruitment and nurse retention bearing in mind Lewisham's population increase and Our Healthier South East London (OHSEL) / the Sustainability and Transformation Plan (STP) primary care requirements.
 - 5. Current A&E performance figures for local trusts (Lewisham, King's and Guys and St Thomas') were tabled at our meeting (attached at appendix A) and we question how this proposal will help improve performance.
- 3.3 Letters from the Save Lewisham Hospital Campaign and a response from the CCG were provided to the Chair of Overview and Scrutiny Committee. These are attached at Appendix B.

4. Financial Implications

4.1 There are no financial implications arising out of this report per se.

5. Legal Implications

5.1 The Constitution provides for Select Committees to make recommendations to the Executive or appropriate committee and/or Council arising from the outcome of the scrutiny process.

6. Further Implications

6.1 At this stage there are no specific environmental, equalities or crime and disorder implications to consider.

Background papers

<u>Local NHS GP Services</u> – report to the Overview and Scrutiny Committee, 31.10.17

If you have any queries on this report, please contact Charlotte Dale, Overview and Scrutiny Manager (ext. 48286)

A&E Waiting times

Target: The maximum four-hour wait in A&E remains a key NHS commitment and is a standard contractual requirement for all NHS hospitals. The 95% target has been replaced by operational performance trajectories which were introduced for NHS providers in July 2016.

<u>Kings College Hospital A&E Waiting Times</u>: A&E compliance in August 2017 reduced to 86.2% seen within 4 hours compared to 87.8% in July. Compliance remains below the recovery trajectory of 89.3% for the month.

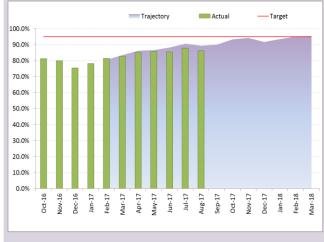
Source: Trust Board Integrated Performance Report, Month 05 (August) 2017/18

NATIONAL CONTEXT Period: July 2017 (latest published) Source: NHS England · 50.9% of Trusts in England were compliant. Trust with less than 10,000 A&E attendances per month were compliant in 75.8% of cases, whereas only 19.2% of Trusts between 10.000 and 19,999 attendances per month were compliant 18 Trusts have more than 20,000 attendances (including Kings); 1 Trust in this group was compliant in July. KCH had the 8th highest A&E attendance volume in England (of 228 Providers) KCH had the 10th highest volume of admissions via A&E (of 228 Providers)

AUGUST DELIVERY

- Aggregate compliance in August reduced to 86.2% compared to 87.8% in July.
 Compliance remains below the recovery trajectory of 89.3% for the month.
- Medical, surgical and specialist funded bed stock utilisation remains unsustainably high at 98.2% in August.
- The proportion of formally reportable delayed transfers of increased in August, absorbing on average 4.4% of the 499 medical bed-base compared to 4.0% reported in August. This excludes patients who are medically fit for discharge but have not been classified as delayed transfers under national guidance as a multi-disciplinary case review had not taken place.

A&E: Maximum waiting time of 4 hours from arrival to admission, transfer or discharge



ACTIONS TO RECOVER

The Trust continues to deliver the Here and Now programme with clinically-led work streams covering the end-to-end emergency pathway, and a number of elements of this come to fruition in Q3 as outlined below. In response to the current deviation from trajectory, we are taking the following measures:

- Additional twilight and night ED Consultant and Registrar to maintain time to first assessment
- Increased twilight and Senior Nurse/General Manager. presence to 8pm to support flow from ED to assessment units and assessment units to acute ward
- Line by line review at board rounds of patients in postacute wards to address internal delays and support discharge earlier in the day.
- Agreed to address GP indemnity issue for UCC by offering honorary contracts to increase fill rate of GP shifts.

ACTIONS TO SUSTAIN

- Clinically led working groups progressing major improvement to each step of the emergency pathway for ED, Acute Medicine, Surgery, Frailty, Flow and Complex Discharge.
- An accelerated programme of engagement with all clinical staff around the importance of delivery of the 4hour standard for safety, quality, Trust reputation; and our ability to deliver specialist and elective care is currently being rolled out, spearheaded by the CEO and Chairman.
- In response to the increase seen in MH attendances and waiting times on the DH site, a joint Medical Director led review of other solutions for emergency MH attendances is underway - to report in October.

University Hospital Lewisham A&E Waiting Times

Emergency Department performance against four hour standard

Percentage of patients treated within four hours at University Hospital Lewisham against the local target.

Month	April	May	June	July	Aug	Sept
Trajectory	92%	92%	92.4%	93%	93.5%	94%
Performance	92%	92.9%	95.1%	94.1%	95.6%	92%

Source: Information supplied on 31.10.17 by Head of Communications, Lewisham and Greenwich NHS Trust

Guy's and St Thomas' NHS Foundation Trust A&E Waiting Times

91.9% within 4 hours (Target 95%)

Source: BBC tracker - http://www.bbc.co.uk/news/health-41483322