University Hospitals of Leicester

Planned Care Public Health & Health Integration Scrutiny Commission

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Summary

Against a backdrop of industrial action, urgent and emergency care (UEC) pressures, a large waiting list and financial challenge, UHL has delivered a great deal of operational improvement in 2023 and teams across UHL should be proud of the progress they are driving in access for the people of Leicester, Leicestershire and Rutland. From a starting position often described as one of the most challenged in the country in both planned care and UEC– including being in Tier 1 of the National support programme for UEC, cancer and planned care at the start of the year, UHL have delivered improvement which has led to being exited from tier 1 support for all three areas in 2023 (moving to tier 2 for cancer and planned care and out of tiering for UEC). Even with this level of improvement we know we have more to do to deliver sustainable change and we do not accept where we are. The foundations for further improvement are embedded to tackle the challenging year ahead. Over the last 12 months we have enabled:

New ways of working

- Increased use of Digital solutions such as the use of AccuRX
- Early adoption of the "Going further Faster" Getting It Right First Time programme
- Mutual aid with other providers and Implemented Patient Initiated Mutual aid in line with National expectations
- Increased clinical confidence in the use of Patient Initiated Follow Ups (PIFU)
- A LLR Planned Care Partnership is in place

New capacity

- Phase one of the East Midlands Planned Care Centre opened in June 2023 See slide 9
- New capital equipment including a second surgical robot in place from October 23 and a replacement Linear accelerator October 23
- Chemotherapy "bus" in place from November 23
- Independent sector support where it has been needed the most
- Additional modular endoscopy unit at the Leicester General from July 23
- Successful international and local recruitment to Imaging teams

New investment for future improvement

- Opening of the second phase of East Midlands Planned Care Centre in December 2024
- Additional wards at the Glenfield (first ward opening March 2024)
- A second CDC at Hinckley Operational December 24 / Jan 25
- A standalone Endoscopy unit at the Leicester General Hospital Late 24 / Early 25
- East Midlands Cancer Alliance Funding

A Year of Improvement - Planned Care

Cancer

- 60% reduction in patients waiting over 62-day waits from a peak of 952 in November 2022 to 380 in November 2023.
- Sustained improvement and achievement of the Faster Diagnosis Standard from September 2023. 75% or more patients referred as a suspected cancer pathway are having a cancer ruled out or confirmed within 28 days.

Electives

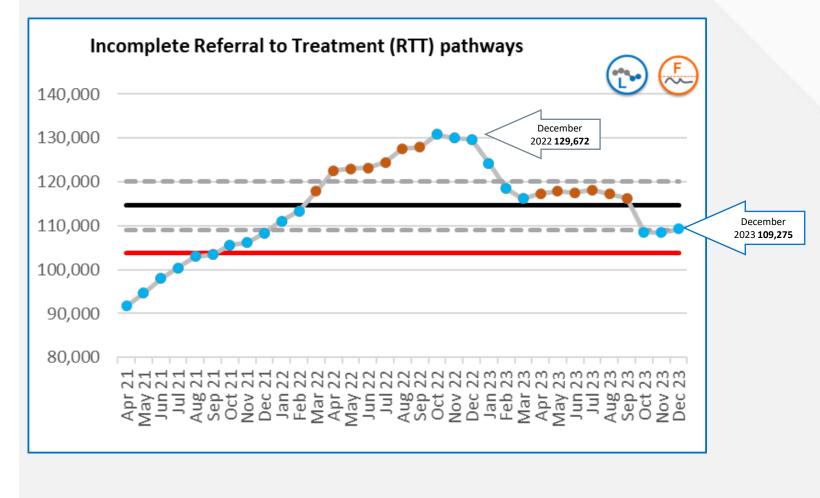
- Reducing waiting list when national picture was rising UHL's waiting list doubled to 130,000 in the first two years of covid. By December 2023 this has reduced by over 20,000 (16%).
- Delivered Zero 104+ waits, expect zero 78+ by March. For 65+ week waits we expect to have less than 200 patients at the end of March and would have been at zero without Industrial action
- Significant Productivity Improvements in theatre utilisation leading to 400 more sessions and 900 more operations by starting on time and using capacity more effectively. Early adopter of the "Getting It Right First Time Further Faster Programme".
- Length of stay reduction for Hips and Knees from 4.5 days (22/23) to 2.8 days (Dec 23) and First Day Case Hip achieved November 23
- Patient Initiated Follow ups increase from 1.5% In April 22 to over 4% by December 23, giving patients more say on when they need a follow up.

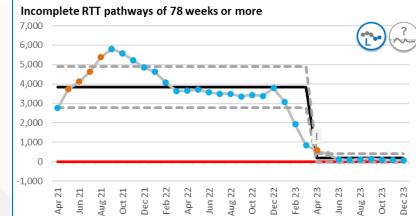
Diagnostics

Since October 22 there has been a 43% reduction in the overall waiting list and long waits have reduced by 71% for 6+ week waits and 80% for 13+ waits. Over 18,000 more tests completed YTD when compared to 22/23.

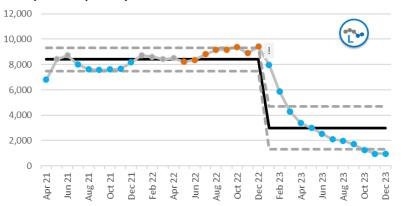
Despite this progress, we have much further to go. The next 12 months will focus on increasing productivity across theatres, outpatients and diagnostics within existing capacity at the three main sites and community hospitals, delivering planned new capacity to enable a sustainable waiting list position, improving on our processes to ensure staff are well trained and well-equipped to manage patient pathways effectively. Reducing our waits further with a focus particularly in cancer by bringing forward first appointments and diagnosing or ruling out cancer and treating patients much faster. And lastly, building on our relationships across LLR and Northamptonshire to reduce inequalities in waits.

RTT Waiting List Long Waiters

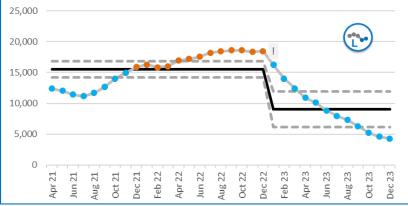




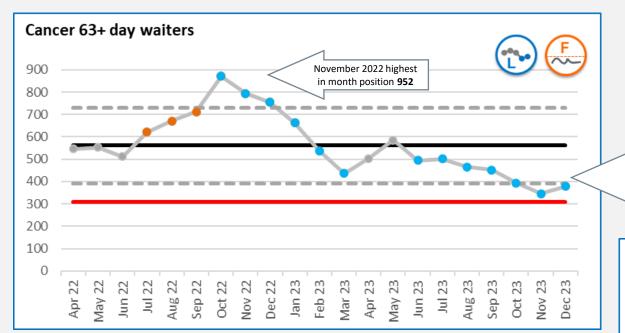
Incomplete RTT pathways of 65 weeks or more

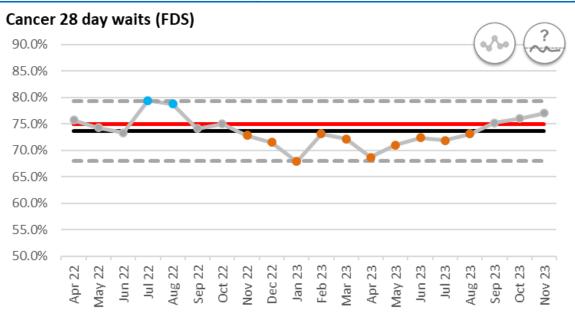


Incomplete RTT pathways of 52 weeks or more



Cancer

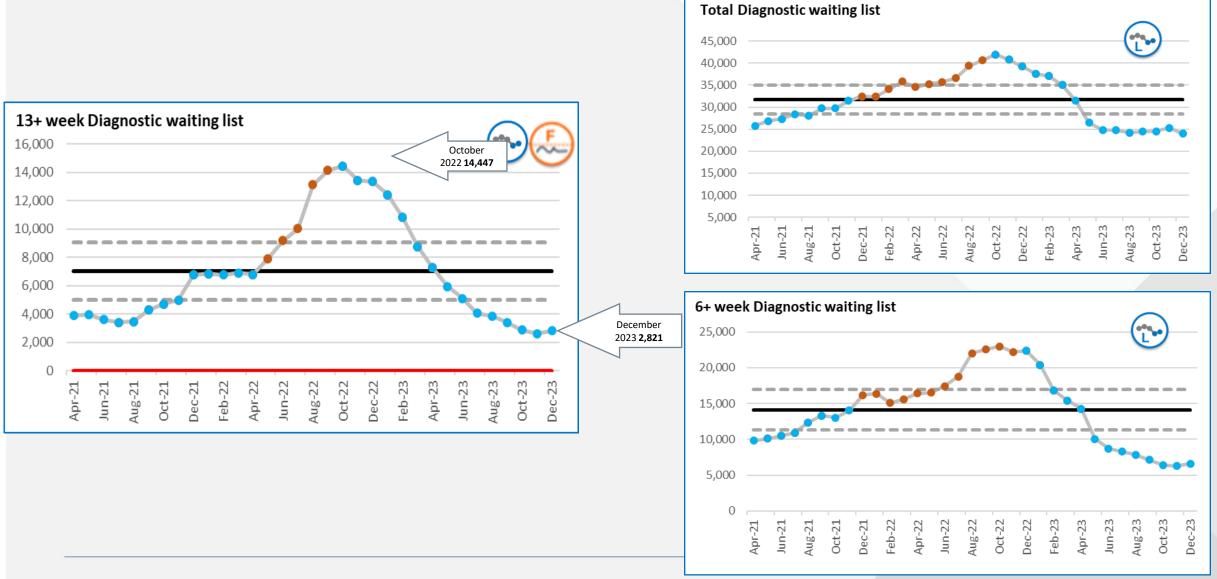




November

2023 **380**

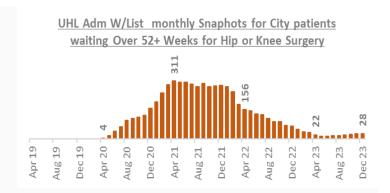
Diagnostics

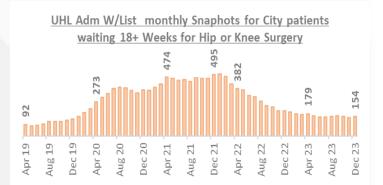


Specific Case Study: UHL Waiting List Trends for City Patients waiting for Hip or Knee Surgery

UHL Admitted Waiting List monthly Snapshot Trends for City Patients waiting for Hip or Knee







- Increased waiting list during the pandemic with patients starting to wait more than 1 year from April 2020
- Significant recovery work undertaken including protecting Orthopaedic beds at the LGH Site over the winter period.
- The Orthopaedic service launched the 'LEAP' programme in August 23, which focuses on highly efficient standardised processes. Since the launch, Orthopaedics have seen a reduction in the patient length of stay (LoS), with the overall hip and knee LoS reduction from 4.5 nights (Q4 22/23) to 2.8 nights in December 23.
- The service successfully completed their first day case Hip replacement in Nov 23 and first day case Knee in Jan 24.

Planned Care Plan for 24/25

- The interventions and benefits identified in the Planned Care Operational Plan for 24/25 align well with the delivery priorities and pledges within the LLR Five Year Joint Forward Plan.
- The focus areas will support improving health equity, delivering the right care at the right time and in the right place. The impact will be better access to elective care through plans that support a population-based approach. The 5 key interventions are:
 - Productivity and Efficiency
 - Outpatient Transformation
 - Capacity
 - Partnership
 - Process Fundamentals
- Recruiting and retaining workforce and delivering new capacity will be a critical success factor.

East Midlands Planned Care Centre (EMPCC)

- Phase 1 of the EMPCC opened in June 23. This saw one of the 2 modular theatres in use for daycase operations.
- So far 941 patients have been treated in the unit.
- In addition to the 2 theatres; from December 2024 the second phase of unit will open – this is the refurbishment of the Brandon Building. It will house 14 Outpatient rooms, 4 clean rooms and up to 36 beds seeing over 100,000 patients per year.
- The specialties are:
 - General Surgery
 - Ophthalmology
 - ENT
 - Gynaecology
 - Urology
 - Gastroenterology
 - Haematology and Oncology



