

INEL JHOSC Scrutiny Committee

Response to Action (during the 2022/23 municipal year)

Action 1: Monitoring new Assurance Framework for GP Practices

Response:

There is no GP assurance framework. Where there are specific concerns around a practice we can undertake an assurance exercise around their workforce and supervision arrangements. In terms of monitoring performance practices and PCNs deliver against a national contract. We monitor the quality of primary care through a number of different routes.

- We report on GP appointments through the operating plan where we have a target of over 1m appointments per month and look at the number of planned care appointments that are bookable within 2 weeks.
- In relation to quality issues these get picked up through CQC reports, patient and healthwatch surveys etc. We develop workforce plans together with Place teams and support practices who would benefit from recruitment and retention initiatives such as becoming a training practice.
- We have a team of digital facilitators who provide training to practices on the best use and management of digital tools alongside working with EQUIP to share insight into QI methods.
- We will also be using PCN capacity and access plans from April 24 where all Primary Care Networks demonstrate delivery against their Capacity and Access Improvement Plans and these will be assessed to inform payments based on performance against their plans. This information will present an opportunity to assess progress in improving patient experience, demand management and accuracy of recording in appointment books.

Response submitted 22/10/2024

INEL JHOSC Scrutiny Committee

Response to Action from 23/01/2024

Agenda item 6: NEL Health Update

Action 25: Officers to explain the legal process behind considering whether to consent to the change of control (in ref. to page 78 of the agenda pack).

Response:

The legal requirement on a change of control is part of the APMS contract, which states that “the Contractor shall not undergo a Change of Control without the prior authorisation of the Commissioner and subject to such conditions as the Commissioner may impose”. Commissioners must then undertake due diligence to inform this consent, which is currently underway. Full details about the due diligence process will be shared at the Primary Care Contracting Sub Committee meeting where the decision will be made in public.

The due diligence process is still to be completed and the dialogue with Operose Health Ltd continues. We has anticipated taking the request for change of control to the Primary Care Contracting Sub Committee meeting in March 2024, however they are more likely to go in May after the London Mayoral elections due to take place on 2 May 2024.

Updates relating to this issue are available on our website at:

<https://northeastlondon.icb.nhs.uk/news/potential-change-of-control-of-at-medics-ltd/>

Response submitted 22/10/2024

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Response to Action from 23/01/2024

Agenda item 6: NEL Health Update

Action 26: Officers to provide data for the percentage of the eligible population who are not presenting for vaccination.

Response:

The uptake of the flu vaccination pre and post pandemic remains largely the same with about 40% of the population in North East London at risk group receiving a vaccination.

NHS NEL has administered over 4.2 million Covid vaccinations, with nearly 60% of the eligible population receiving at least one dose. NHS NEL has worked collaboratively with NHS England and local system partners to implement each seasonal booster campaign, in line with JCVI and national guidelines. This has led to a more targeted approach in offering the seasonal booster to those groups of the population who are at greatest risk from catching COVID-19.

The Autumn/Winter 2023 campaign reached 32% of the eligible population, a reflection of both the programme's success and the ongoing need for a tailored approach in a diverse community. In line with the national vaccination strategy, there has been a considerable amount of effort to engage with community groups, faith groups, community champions and voluntary and community sector organisations to increase vaccination uptake and reduce health inequalities. Whilst also offering outreach clinics in a range of community settings. A key success factor has been the number of people continuing to come forward for their first or second COVID-19 vaccine during the recent Autumn Winter COVID-19 vaccination campaign.

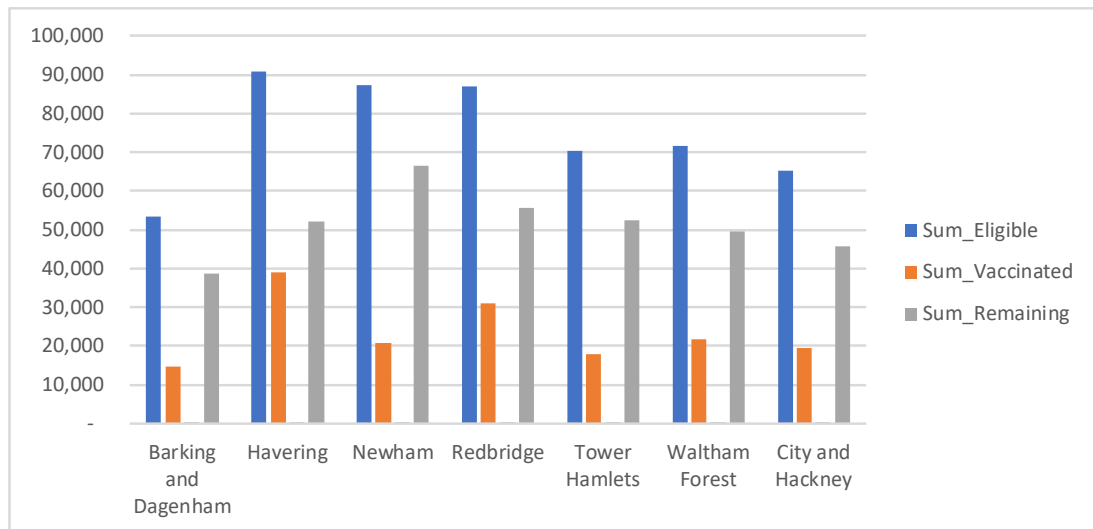
NHS NEL advocates continuing the evergreen offer (promoting first and second doses) to eligible cohorts in future vaccination campaigns to ensure vaccine access for all community members, recognizing the varying rates at which different groups come forward for vaccination.

2023/24 COVID-19 vaccination autumn booster uptake by PCN

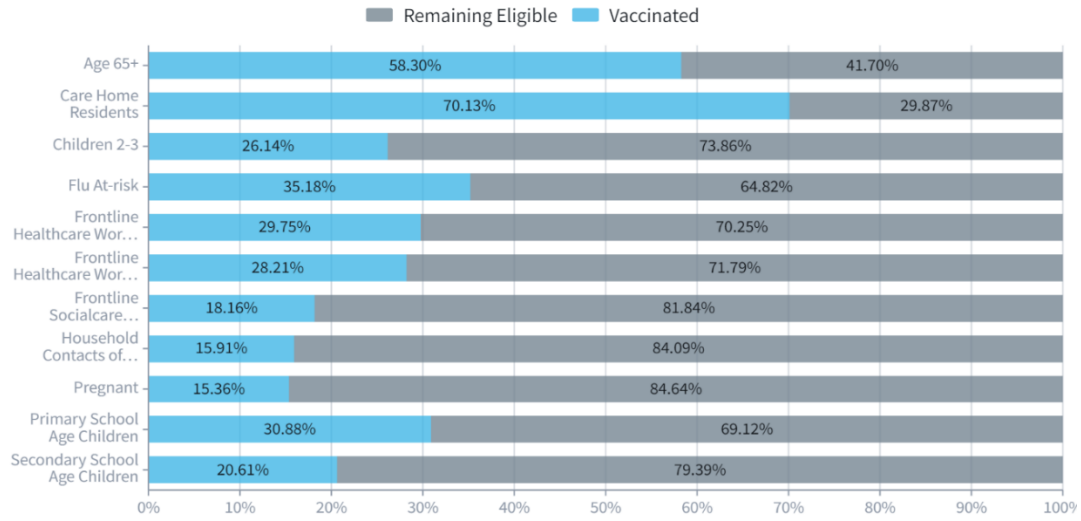
ICB: NEL Borough (All Cohorts)

(Barking and Dagenham, Havering, Redbridge, Newham, Tower Hamlets, Waltham Forest and, City and Hackney)

NEL Borough	Sum_Eligible	Sum_Vaccinated	Ave_Uptake	Sum_Remaining
Barking and Dagenham	53,468	14,645	26%	38,823
Havering	90,945	38,873	42%	52,072
Newham	87,309	20,789	24%	66,520
Redbridge	86,968	31,164	34%	55,804
Tower Hamlets	70,398	18,036	25%	52,362
Waltham Forest	71,545	21,891	29%	49,654
City and Hackney	65,240	19,544	29%	45,696
Grand Total	525,873	164,942	31%	360,931



2023/24 Flu immunisation uptake by eligible cohort in NEL



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Action 27: Officers to provide the percentage of eligible children who have received their MMR vaccine.

Response:

- The MMR vaccine protects against three infections; measles, mumps and rubella. It is offered as part of the UK national vaccination programme.
- The MMR vaccine is a live vaccine given as a single injection. The MMR vaccine gives long lasting protection with just 2 doses of the vaccine.
- The first dose is given at the age of 12 months and the second dose is given at around 3 years and 4 months, before starting school.
- In adults and older children, the two doses can be given with a one month gap between them.

Borough Level	Childhood Immunisation				
	Cohort	1st Dose	Uptake (%)	2nd Dose	Uptake (%)
Barking & Dagenham	859	706	82.2%	663	77.2%
Havering	925	841	90.9%	787	85.1%
Redbridge	1,175	1,003	85.4%	959	81.6%
Tower Hamlets	936	846	90.4%	775	82.8%
Newham	1,306	1,105	84.6%	1,051	80.5%
Waltham Forest	1,027	879	85.6%	809	78.8%
City & Hackney	628	550	87.6%	476	75.8%
NEL	6,856	5,930	86.7%	5,520	80.2%

Cohort: Patients becoming 60month within Q3 (By Dec 2023)

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Response to Action from 23/01/2024

Agenda item 6: NEL Health Update

Action 28: Officers to confirm if the North Central East London CAMHS Provider Collective rolled out the 7-day service in December 2023.

Response:

There is now a 24/7 Crisis Service operational in ONEL that is able to respond across all Acute Sites in ONEL.

- Staff work agilely, coming into Brookside as main base. Admin and management work from Brookside.
- Handovers/huddles take place 9am and 9pm
- Any specific risk issues handed over with Brookside management in 9.15am risk meeting.
- Weekly huddles are held with BHRUT and BARTS

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Response to Action from 23/01/2024

Agenda item 6: NEL Health Update

Action 29: Officers to provide further information regarding the prevalence of testicular cancer being higher in young, white men in more affluent areas.

Response:

Due to testicular cancer being so rare. Less than 1% of all diagnosis there is no further data available beyond the information already provided.

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Response to Action from 24/04/2024

Agenda item 4: Public Participation

Action 30: Members to hear the formal response to the public speaker's speech regarding Functional Neurological Disorder (FND) services in NEL.

Response:

Archna Mathur, Director of Specialised Services and Cancer for the North East London Integrated Care Board spoke to Mr Bleakly and subsequently commissioned a recommendation paper with the clinical lead, Dr Frank Rohricht. Frank spoke to the patient, understood, and incorporated some of his feedback into the initial recommendation paper. This paper is shortly due for consideration at NEL LTC Strategic Board and once this has been presented, we will look at how we progress the concept. We will continue to provide further updates.

Response submitted 22/10/2024

INEL JHOSC Scrutiny Committee

Response to Action from 24/04/2024

Agenda item 6: NEL Health Update

Action 31: Officers to provide a response regarding Operose transferring their services to CMG in December without NHS permission.

Response:

In November 2023, NHS North East London (North East London Integrated Care Board) was notified of a potential change of control of AT Medics Ltd. AT Medics Ltd provides general practice care to patients across north east London.

NHS North East London then started a due diligence process to check that the proposed new owner of Operose Health Ltd is of good standing and assurance that the change of control would not affect service provision, with patients being able to access care in the same way and with the same practice teams.

In March 2024, we were advised that the 'change of control' had taken place on 28 December 2023. Subsequently, NHS North East London wrote to AT Medics Ltd issuing a breach notice to them on all the contracts they hold. We advised that this was considered to be a serious breach and consideration was given as to whether any further action should be taken at the Primary Care Contracts Sub-Committee in July 2024.

AT Medics Ltd holds six Alternative Provider Medical Services (APMS) contracts in north east London, these are:

- The Loxford Practice – Redbridge
- Lucas Avenue Practice – Newham
- Carpenters Practice – Newham
- E16 Health – Newham
- Trowbridge Surgery– City & Hackney
- Goodman's Field Centre – Tower Hamlets

In considering if there was any immediate further action to take, NHS North East London had to take into account a number of further factors including:

- The quality of care provided at AT Medics Ltd practices and compliance with their contract standards
- The feedback from public and patient engagement on the change of control
- The importance of continuity of care for patients
- The proportionality of issuing a termination notice and the fact that such a notice would be issued for reasons other than quality and performance

The committee reviewed these factors and found that whilst unhappy with the actions the new owner of AT Medics Ltd, have taken, given the current performance of the practices and the importance of continuity of care, we do not believe imposing a sanction of termination of contracts is proportionate at this time.

As the contracts, come up for potential extension we will carry out a comprehensive review of their performance before deciding the approach to potential extension or tendering for a new provider, as we would for all other APMS providers. All six contracts have review points for contract extension or contract end dates within the next two years with three of these occurring this year, two next year and one in two years' time.

[The full paper considered at the Primary Care Contracts Sub-Committee can be read here.](#)

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Response to Action from 24/04/2024

Agenda item 5: NEL Health Update

Action 32: Officers to check if the NEL Mental Health Crisis Network has LA representation

Response:

There are no active LA members in the monthly groups, but they are represented in some of the workstreams that have had particular resonance/overlap with them (e.g. the Right Care Right Person workstream, and the Health Based Places of Safety work). They have also been sighted on all work through the MHLDA collaborative through which they're members of, as well as through the NEL Urgent & Emergency Care board. Additionally the East London Foundation Trust, Programme Director presented to MH Crisis work to the NEL DASS group in November 2023.

Response submitted 22/10/2024