

London Borough of Waltham Forest

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North East London

Health Update – May 2025

Meeting name: INEL JHOSC

Presenter: Zina Etheridge, Chief Executive

Date: 13 May 2025

NHS North East London: Update

Careers hub for NEL

Earlier this year we launched [our brand new careers hub](#), helping our residents to explore different adult social care and health careers, find and apply for jobs, and find out about work experience and apprenticeships opportunities.

An individual's health and the economy are inextricably linked. Analysis by the NHS Confederation showed that the economic activity of a local area is heavily influenced by the area's health status. The proportion of workers off due to long-term sickness is a recognised proxy measure for general morbidity.

Additionally, the NHS is an important local employer itself. Its employees significantly contribute to the productivity and economic activity of local areas, but is currently experiencing labour and skills shortages. Improving individuals' health can drive an inclusive economy and promote the role of the NHS as an anchor institution.



The new careers hub provides access to a range of tools and resources, including:

- Skills assessments
- Guides to the skills and qualifications needed for different roles
- Employment opportunities for students with learning difficulties, disabilities and/or Autism
- Guidance on becoming a volunteer or an ambassador.

We'll continue to improve and add to the hub, including the addition of case studies and testimonies from those already working in health and adult social care jobs.

NHS North East London: Update

Medications shortages

We are aware that some people are currently affected by supply issues of some medications. There are two main areas of concern that we are aware of:

- obtaining medication for the ongoing management of ADHD, and;
- access to pancreatic enzyme replacement therapy (PERT) medicines

What we are doing in north east London:

- We are working closely with local pharmacies, GPs, and hospitals to ensure patients can get the medicines they need.
- Providing advice to prescribers in GP practices on alternative brands or treatments where needed
- Working with a regional procurement centre to import PERT from other countries, which will increase the availability of PERT to community pharmacies in north east London
- Working with specialist teams and pharmacy services in hospitals to ensure prescribers in GP practices, and community pharmacies can access the support they need to help the patients they prescribe PERT for.

NHS North East London: Update

Staff survey results

The 2024 staff survey results were published in March. The full report is available on the [national staff survey website](#) along with all other participating NHS organisations. We had a fantastic response rate this year of 79%, which gave us a real picture of where we are as an organisation.

We were pleased to see a positive shift in the right direction, with an improvement from last year almost across the board. This reflects the way that collectively we have been building our organisation in ways which enable our staff to do their best work.

Some highlights include:

- The number of staff having appraisals has increased by nearly 20% (from 46% to 65%)
- The number of staff recommending the organisation as a place to work has increased by 7% (from 32% to 39%)
- There is an increase in the number of staff who feel their team has shared objectives (increasing from 55% to 65%)
- Staff have a more positive view of managers with scores improved across several areas, ranging from 70% to 79%.

Even though the future is unclear we will continue to invest in our workforce. Some of the areas we know we need to focus on include:

- Health and wellbeing – making sure staff feel supported to have a work life balance and that workloads are manageable
- Bullying and harassment – ensuring staff feel safe to speak up
- Ensuring all our staff with protected characteristics are supported and enabled to thrive.

NHS North East London: Update

Changes to ICBs

On 13 March we had the announcement that NHS England (NHSE) will reduce in size by half and be merged into the Department of Health and Social Care (DHSC). We will need to reduce ICB resource by half as well, by quarter 3 2025/6 (October-December). There has been a focus in government announcements that ICBs will focus in future on strategic commissioning. We are not clear as yet what ICBs are expected to do with other essential functions.

The timescale and manner in which announcements about ICB resource reductions have been made means that we have had limited time to work through what this all means so far. It is clear that we will need a fundamental rethink of our operating model which takes account of our statutory duties and our objectives for north east London and will need to look at everything we do.

We know already that it will be extremely challenging to achieve this within the new resource limit. The ICB will need to look very different by early 2026 – and this will go substantially beyond just a reduction in size. It is a very difficult period for our staff, and many will be deeply worried about what it means for them personally. When we have more clarity about the future and have worked through the changes in more detail, we will be clearer about the impact on local people.

NHS North East London: Update

Good news from NEL

- [Transforming diabetes care for young adults in north east London - North East London](#)
- [NEL shortlisted for award by Student Nursing Times - North East London](#)
- [Delivering more cutting-edge treatments for our patients | Latest news | BHR Hospitals](#)
- [Quick procedure could cure high blood pressure | Our news - Barts Health NHS Trust](#)
- [ELFT colleagues recognised as 'Amazing Social Work Leaders' | East London NHS Foundation Trust](#)
- [New crisis support service launches in Redbridge | Read the latest NELFT \(pictured\)](#)
- [Homerton's Research and Innovation capabilities are set to grow thanks to a share of £4.75m in funding](#)





North East London

Provider Updates – May 2025



North East London

Homerton Healthcare NHS Foundation Trust

Homerton Healthcare NHS FT

Operational performance

- **ERF Performance** achieving **118.7%** against plan for **first 11 months (Apr'24 – Feb'25)**. Please treat this as provisional until NHS E release their figures.
- **Elective care performance** Trust's **Mar'25** PTL position is **36,246**. **135** patients waiting over 52 week at end of **Mar'25**. The number of pathways transferred from other NEL trusts – c. **12,096** pathways to-date.
- **Cancer – Feb'25** 62-day treatment performance is above target (**85.71 % in Feb'25**); 2ww referral performance is above target (**85.58%** for **Mar'25**).
- **4-hour emergency care performance** in **Mar'25** is **82.8 %** compared to **79.3 %** in **Feb'25**. The performance is above the target of 78%.
- **Community services:** IAPT Recovery Rate for **Mar'25** is **54.2%** against the target of 50 %. One of the new metrics for 2024/25 is, Reliable recovery rate for those completing a course of treatment and meeting caseness. For this metric, Trust achieved **50.6 %** for **Mar'25** (against the target of 48%).

Corporate activity

- **Vacancies** the Trust has been focusing on recruiting its people and has steadily reduced its vacancy rate, to 6.97% against a Trust target of 7% in March 2025. Over the last 12 months the average has been around 7.2% our time to hire has significantly reduced and is now 49.8 working days in March 25.



North East London

Barts Health NHS Trust

Barts Health NHS Trust

Operational Developments

- Our **psychological trauma support service**, set up to provide mental health care to patients who have psychological disorders following major traumatic injury, [has been expanded](#) following a £4 million boost for London's four major trauma centres, identifying patient psychological needs early and providing ongoing specialist support in and out of hospital.
- [Artificial Intelligence \(AI\)](#) is already thriving in our hospitals with around 30 different AI applications being used across our hospitals to improve patient care.
- New figures show that since the opening of our **women's health hub** in Mile End Hospital, the number of women waiting for gynaecology treatment at The Royal London Hospital has [fallen by a third](#).
- Our new [dialysis unit opened](#) at the **St George's Health and Wellbeing hub** offering a more holistic care to our renal patients.
- Our **children's cancer ward** at The Royal London Hospital is one of the first to use a [new virtual ward system](#) to enable children with cancer to spend more time at home and less time in the hospital.
- Our hospitals are now [routinely checking](#) if inpatients are smokers so they can be offered help to give up.
- We launched our **new patient interface portal**, DrDr to help improve our patient experience. This will provide appointment reminders to help reduce the numbers of patients not attending, and over time will allow patients to reschedule appointments.

Finance and planning

- We delivered on our **financial plan for 2024/25**, meeting our nationally agreed control totals
- Our plan for 2025/26 has now been submitted, setting out our ambitions to meet national targets against constitutional standards.
- We'll be working with an extremely challenging financial environment again this year, driven by inflationary pressures as well as demand for our services
- We continue to explore solutions to streamline processes and unlock efficiencies to reduce waste, avoiding duplication, and adopt innovative ways of working to ensure savings. These will be set out in our operational plans for the year.

People

- We are delighted to welcome Rachael Corser to be our [new Group Chief Nursing Officer](#) when Caroline Alexander steps down later this year. Rachael joins us from the NHS integrated care board for Buckinghamshire, Oxfordshire, and Berkshire West, where she has been chief nurse since 2022.
- Our hospitals scored the [highest for compassion](#) and inclusion among our seven NHS People Promise themes and are above the national average for putting a compassionate culture into practice.

Research and Innovation

- New [DNA sequencing approach](#), which analyses bacterial genetic material directly, to detect infections more accurately, is helping us fight infections and identify the right treatment for patients sooner.
- A [new approach to heart failure treatment](#) is giving patients a better quality of life and reducing their risk of being readmitted to hospital.

Further updates

- We have been awarded funding to install 393 [new solar panels](#) at Mile End Hospital, in a new project by the Department for Energy Security and Net Zero, to save energy costs.
- A new [health and life sciences hub](#) at Waltham Forest College will provide hands on experience for student, offering specialised training and placements at Whipps Cross Hospital, in an initiative to create career opportunities, and address the NHS skills shortages.



North East London

North East London Collaborative updates

Mental Health, Learning Disability and Autism Collaborative

The North East London Mental Health, Learning Disability and Autism (NEL MHLDA) Collaborative is a partnership between the NEL Integrated Care Board (ICB), East London Foundation Trust (ELFT), North East London Foundation Trust (NELFT), and the seven place-based partnerships.

The aim of the Collaborative is to work together to improve outcomes, quality, value and equity for people with, or at risk of, mental health problems and/or learning disability and autism in north east London.

Approach

We collaborate closely with service users and carers, communities, local authorities, primary care and the voluntary and community sector. The Collaborative includes a joint committee to carry out functions associated with investment, and the Programme Board to develop and deliver the Collaborative programme.

Community Healthcare Collaborative

The North East London NHS Community Collaborative (NELCC) aim is to improve community health services by working collaboratively across NHS trusts, local authorities, and other healthcare providers including, East London NHS FT, North East London NHS FT, Homerton Healthcare NHS FT and Barts Health NHS Trust. NELFT CEO, Paul Calaminus is the SRO for the NELCC.

The collaborative focuses on delivering more integrated, person-centred care, improving outcomes for local populations, and enhancing the efficiency of community health services in the region. Through this partnership, they aim to address health inequalities and ensure that patients receive the right care in the right place at the right time.

Approach

To maximise benefits, it is advantageous if we - NEL providers - work together to reduce variance, improve equal outcomes for local residents, share best practice and provide mutual aid. The CHS collaborative can continue to add value as the coordinator, enabler and conduit for community care in NEL. It brings together PLACES and providers to progress system wide solutions, share local learning and ensure impacts of potential decisions are fully articulated to give a NEL wide umbrella position to NHSE.

Mental Health, Learning Disability and Autism Collaborative

Dementia Improvement – Update

Inequity

- The Collaborative is working to improve inequity of access, particularly for people of South Asian, Asian and other Asian British ethnicities.
- It will look to work closely with community organisations to improve trust and communication as well as overcoming ‘double stigma’ – impacting groups that feel marginalised.

Staffing variations

- Despite good capacity levels in some teams, there is a wider variety of roles in others (such as pharmacy, non-medical prescribers and neurology).
- As some teams are limited to nurses, consultants and occupational therapy roles, there is a limited capacity to offer holistic services beyond diagnosis.

Diagnosis waiting times

- Challenges remain over waiting times for service users and carers, along with post-diagnostic support due to staff capacity issues.

Recommendations

- The Collaborative will look to implement a ‘multi-pronged approach’, including:
 - Reducing inappropriate referrals by improving GP assessment questionnaires.
 - Triaging; a process of helping to decide the order of treatment for service users.
 - Combining clinics to improve access to treatments for conditions affecting the brain, spine and nervous system.
 - Creating a single point of access in each trust.

Mental Health, Learning Disability and Autism Collaborative

Strategy and Planning – Update

NEL Adult Neurodiversity Services Review

- Colleagues have been looking to improve support for neurodiverse adults in NEL – with an emphasis on autism and ADHD services.
- Initial findings show long waits for assessments, meaning a likely increase in the use of independent sector using the [NHS Choices Framework](#).
 - This gives people the right to decide which provider they would like to receive care from as an outpatient and choose the clinical team in charge of their care.
- Due to waiting time, lack of previous or current commissioning adult autism (not adequate volume) and ADHD services (none ONEL), there is ongoing work to establish how the demand can be managed.
- Across NEL, there are insufficient plans for when GPs may take over prescribing ADHD medication. This can lead to patients remaining with specialist services for longer than they need, causing capacity problems.

Mental Health, Learning Disability and Autism in 2025/26

- The Mental Health Investment Standard will be maintained. This is a commitment to increase local funding for mental health in line with the increase in funding available to Integrated Care Boards (ICBs).
- In 2025/26, we will continue to work as a Collaborative within each borough to develop a whole system plan that reflects national, NEL and borough priorities.
- The Collaborative will continue to address inequity and financial challenges while aiming to minimise the impact on quality and outcomes.

Mental Health, Learning Disability and Autism Collaborative

Strategy and Planning – Update

Specialised Commissioning Delegation

- This refers to the transfer of commissioning responsibility for services from NHS England to ICBs.
- NHS England has approved the delegation of specialised mental health services from April 2025, including:
 - Inpatient child and adolescent mental health services (CAMHS).
 - Inpatient perinatal mother and baby unit (MBU) services.
- From 2025/26, NEL ICB will be the responsible commissioner for the [North Central and East London \(NCEL\) Provider Collaborative](#).
 - This Collaborative is the lead provider for inpatient CAMHS and perinatal MBU services in north central and east London.
 - North Central London Integrated Care Board (NCL ICB) will be an associate commissioner.
 - The MHLDA Committee has reviewed the governance structure of the NCEL Provider Collaborative, to:
 - Ensure robust quality assurance and oversight by NEL ICB.
 - Provide appropriate routes for escalation, should quality concerns arise.

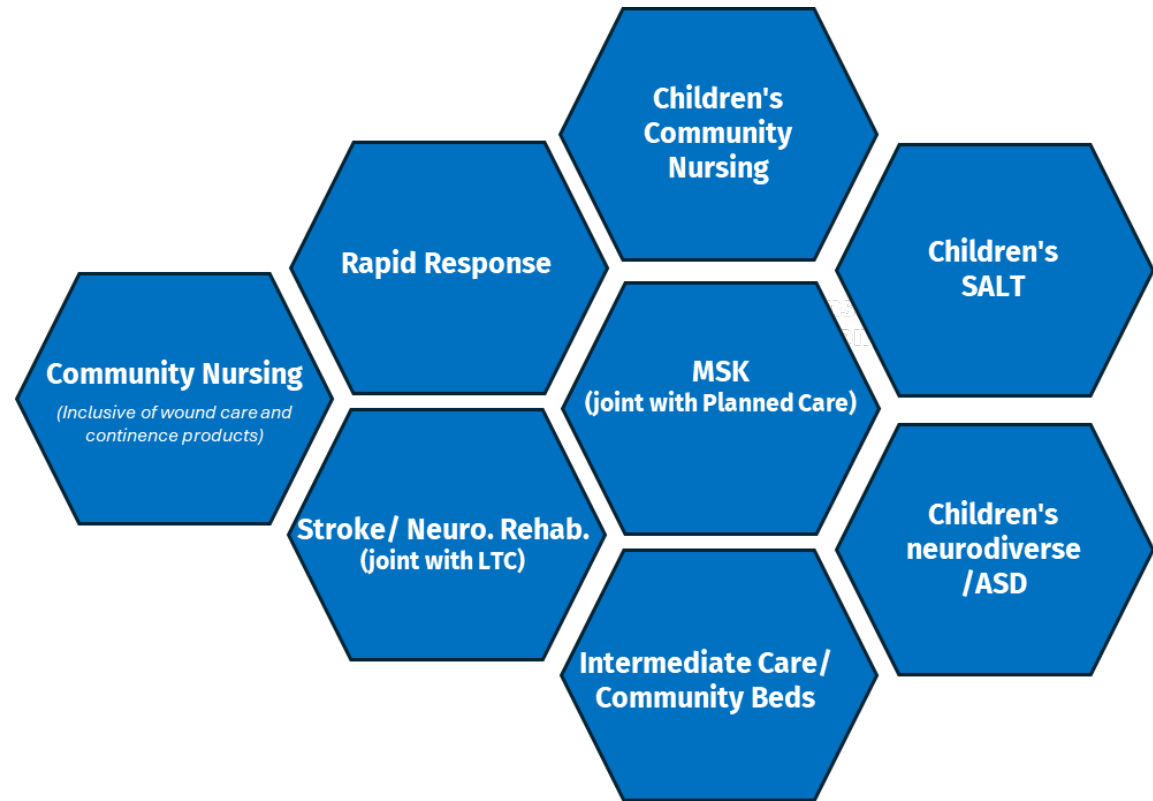
Community Healthcare Collaborative

Collaborative Improvement networks

The North East London NHS Community Collaborative (NELCC) is made up of a number of improvement networks.

The networks aim to provide consistent core services for all residents of North East London by sharing best practices, improving clinical pathways and service delivery, and reducing waiting times.

All Improvement Networks follow the Darzi principles: moving care from hospitals to communities, shifting from treating sickness to promoting prevention, and transitioning from traditional methods to digital solutions.



Community Healthcare Collaborative

Key updates from Improvement Networks

Children's Community Nursing: development of model specifications, mapping exercises to identify variations, such as a 5-day or 7-day offer, support for end-of-life and palliative care, and collaboration with 0-19 services.

Musculoskeletal (MSK): support the re-design of the current service to deliver standardised high-quality care to our patients and include a Single Point of Access (booking service).

Children's autism services: clinical chairs now appointed. Completed a baseline audit of autism assessments for children, examining the current pathway, the 'waiting well' support offer, the assessment approach and any variations, support after diagnosis, and the use of digital solutions.

Community inpatient beds: learning from our partners, linking our work to neighbourhood working and virtual ward frailty.

Rapid Response: reducing hospital admissions with a focus on catheter care, which often leads to visits to Urgent and Emergency Care.

Community and Intermediate Care Beds: developing recommendations on service redesign options by March 2025.

Dietetics: balancing support, guidance and care, alongside reviewing procurement of feeding products at best value.

Procurement: achieving best value in several areas such as continence products, dressings, equipment, enteral (tube) feeding.

The NEL Long COVID service can no longer support people after March 31, 2025. New patients with symptoms of long COVID will continue to be identified and supported through primary care and usual referral routes to appropriate specialist services.

Community Healthcare Collaborative

Key updates from other programme areas

Reducing Waiting Times: operational initiatives to reduce waiting times in services where waiting lists exceed 52 weeks. A significant focus is on children's therapy services and musculoskeletal (MSK) services.

Joint Planning for 2025/26: agree on core community collaborative strategy and priorities for the coming year with over 40 stakeholders and provide a transparent understanding of income, expenditure, and pressures across the NEL system from all our community providers.

Promoting the Impact of Community Services (PICS): collaboration with leaders from North Central London, Mid-South Essex, other London ICSs and NHS England policy and quality improvement leads to influence national strategies and establish a core community offer. Development and use of a 'Shift Left Investment Decision Evaluation Tool' to evidence the economic case for systems to increase investment in community services by quantifying the return on investment and demonstrating the system-wide impact, particularly in reducing reliance on acute care.

Performance and Data Quality: improve visibility and accountability over CHS data and governance by working with NHS England to address data anomalies, improve data quality, and establish baselines for accurate reporting and setting up a Providers Data Group to tackle issues such as waiting list discrepancies and data reporting variations.

Local developments

- **Redbridge 'Well House'** opened in February with seven beds to support people experiencing a mental health crisis safely out of hospital.
- Extending opening hours to 24/7 by end of March for the **Mental Health Crisis Assessment Hub** at Goodmayes Hospital with four new treatment areas co-designed with service users.
- **Mental health crisis café** is now out to tender in Barking and Dagenham and due to go live May 2025. Havering, Redbridge and Waltham Forest also due to go out to tender shortly.
- Capital bid submitted to support the creation of **additional acute mental health beds** at Goodmayes Hospital.



North East London

Barking, Havering and Redbridge University Hospital NHS Trust

For information only

Urgent and emergency care

- In March, 78.4% of patients were admitted, transferred or discharged within four hours of attending our A&Es. This was 3.4% above the national target of 78% and placed us 6th out of 18 acute trusts in London and once again in the top performing 25% of 121 trusts in England
- Our Type 1 performance (those who are most seriously ill) was over 50%
- March 2025 was our busiest month ever in terms of the average daily number of patients attending our hospitals (1,006 per day)
- 389 patients were referred to mental health services from our A&Es in March
- Average length of stay in A&E for mental health patients was 23 hours. We're continuing to work with NELFT to ensure these patients get the care they need quicker and in the right place

Our campaign for Queen's A&E

- In January, we launched a campaign for a new A&E at Queen's.
- The current department is not fit for purpose. It was built to care for a maximum of 325 people a day. Now it regularly sees double that; on one day in December, 752 attended the department.
- This results in too many people being cared for in our corridors and waiting too long.
- Several national media outlets have covered our campaign.
- Several of our MPs have publicly supported the campaign.



Reducing our waiting lists

- In March 2025, 69.58% of patients received their first treatment within 18 weeks of referral
- 57,240 patients were on our waiting list; the majority were waiting for an outpatient appointment
- 590 had been waiting over a year. This is the lowest number of 52-week waiters since June 2020
- We are the best acute trust in London for RTT performance

Cancer targets in February

- We met all of the cancer targets in February and expect to do the same for March.
- We also met the target for diagnostic waiting times for an 11th consecutive month.

Finance

- We ended February with a deficit of £25.6m, adverse to plan by £23.8m. Our forecast deficit by the end of the financial year is £32m
- All of our work in the coming months will be carried out in the context of the difficult financial situation facing our Trust; the healthcare system in NEL, which is under a high level of scrutiny; and the NHS more broadly. We are working with the NEL Integrated Care Board and NHS London to implement a number of financial controls that are required by NHS England.

24/7 service for stroke patients

- Our staff stepped up to provide a 24-hour, 7-day a week mechanical thrombectomy service from late October to the end of January.
- We treated 120 stroke patients from across the East of England in addition to patients referred to us locally during this period while The Royal London Hospital's specialist machine was being replaced.
- Mechanical thrombectomy is a procedure that treats the precise location of the affected clot in the brain by guiding a device through blood vessels in the brain to make repairs and remove blockages.

Other news

- [Sarah Betteley, our new Chair](#), has started with us. She joined us at a [celebration event at The House of Commons](#) for 53 of our staff who graduated from their apprenticeship in the last year
- [Our Apprenticeship and Career Hub has been rated 'Good'](#) in all areas by Ofsted following our first inspection
- [Our NHS 2024 staff survey response rate increased to 55%](#) compared to 41% in 2023 – our highest number of colleagues taking part. More staff are happy with the standard of care we provide, rising from 49% in 2023 to 52%, and would recommend our Trust as a place to work (54%, up from 51%)
- [We held our biggest ever recruitment event](#) in February offering jobs to 103 nurses including 5 learning disability nurses
- [We were jointly awarded a £6.5million research grant](#) for a study using ultrasound waves to stimulate the brain to help treat depression

