

HCT Stakeholder bulletin

Your regular update from HCT

Bulletin 4 – October 2020

Welcome to our regular update on HCT services. We are continuing to address the three national priorities in Phase 3 of the COVID-19 response:

- Service recovery to near-normal levels - maximising capacity/activity
- Preparation to meet demand pressures for winter and COVID-19 spike(s)
- Locking in beneficial changes, population health and addressing inequalities; staff support

Our plans for providing services over winter will ensure we are ready to respond to anticipated additional seasonal demands and future COVID-19 surges. We also continue to focus on recovering our planned care services and maintaining our enhanced Discharge Home to Assess, Prevention of Admission and Covid Rehabilitation services. We are delivering sustained reductions in waiting times and further increases in activity levels across many services. This bulletin has more detailed information about our current performance and how we are supporting the wider system. The infographic below shows our current highlights.



Message from our outgoing Chief Executive, Clare Hawkins



“At the end of this month, I leave the Trust after nine and a half years. Whilst I am excited to be moving onto new opportunities, I am obviously sad to be leaving the Trust and my colleagues who have been such a huge part of my life. As HCT celebrates ten years on 1 November, I have been reflecting on all that we have achieved together. HCT has become an ambitious, innovative and highly performing organisation that continues to put patients at the heart of all it does. Of course, there have been many challenges along the way and some tough times, most recently rising to the national challenge of the Covid-19 pandemic. During my tenure, I

am particularly proud that we have:

- Embedded our values and are more innovative, caring and agile
- Maintained our *Good* rating from the Care Quality Commission and made substantial progress towards achieving an *Outstanding* rating
- Embraced a new vision and direction to reflect our ambitious plans for integrated care
- Responded superbly to the COVID-19 pandemic by grasping opportunities to deliver new services
- Made the organisation more inclusive and a great place to work through a range of initiatives, such as our BAME Network and Staff Council
- Played a full role in the development of the new Integrated Care System for Hertfordshire and West Essex
- Been finalists for, and won, numerous national awards

“I am embarking on a portfolio career, which will include working with the NHS’ national Chief Nursing Officer, Ruth May, on leadership development and service transformation. I am about to start a six-month role within NHSx as Senior National Adviser for Community Care on the Joining up Care programme board, focusing on supporting care homes and community services to prepare for more digital applications and service provision. NHSx oversees the digital transformation of care, with teams from the Department of Health and NHS England and Improvement. I hope that we will be able to help pilot new technology here in Hertfordshire and West Essex.

“I’d like to thank all of my colleagues from HCT and across the Hertfordshire and West Essex system, both past and present, for making this role so enjoyable. It has been an absolute privilege to be the CEO at HCT and to work with you all.”

HCT’s new Chief Executive joins the Trust on 2 November



Elliot Howard-Jones joins HCT as Interim Chief Executive on Monday 2 November. He is currently Director of Performance and Improvement in the NHS England East of England regional team and is widely known across the Hertfordshire and West Essex system.

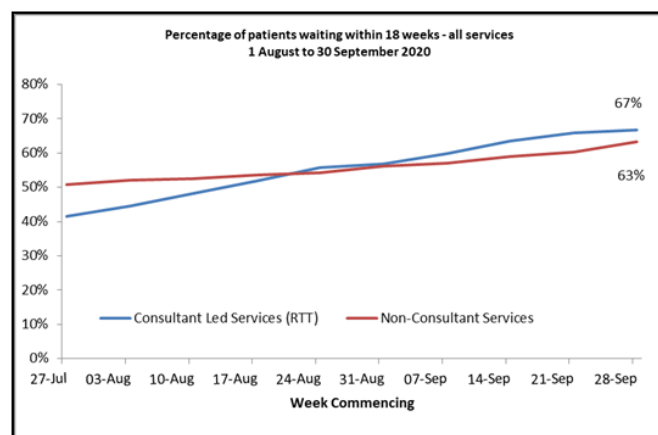
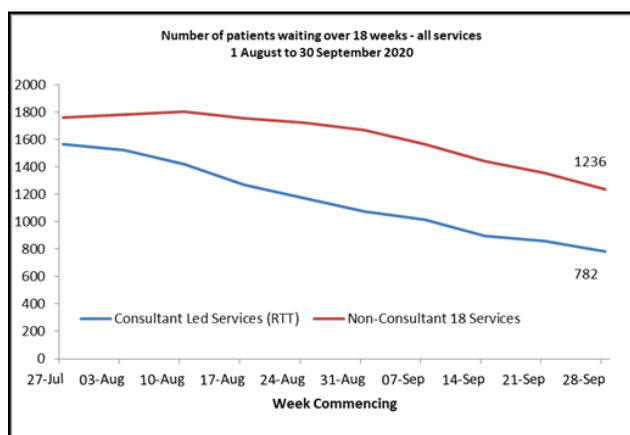
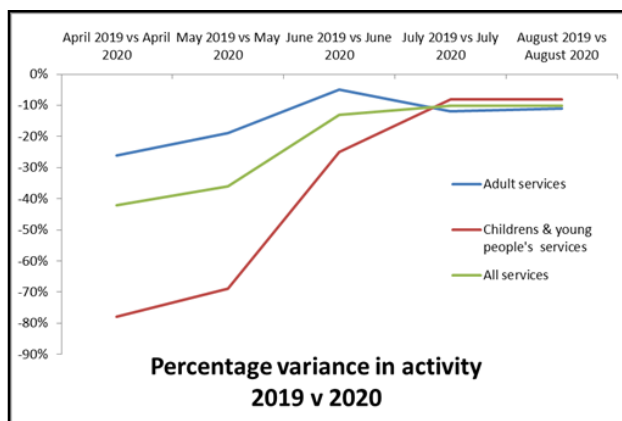
Elliot is looking forward to meeting and working with our partners and stakeholders in his new role.

Managing our waiting times and maximising patient care

We are making good progress on increasing activity levels whilst continuing to reduce waiting times. We are prioritising those patients with the most urgent needs as well as those who have waited the longest, supported by a robust Quality Impact Assessment (QIA) process. In summary:

- Overall new referral numbers are now close to 2019 levels after a significant decrease in April, May and June. In the six weeks to the end of September, referrals were just 0.63 per cent lower than the same period last year
- Our service activity levels continue to increase - in August, activity was only ten per cent lower than in August 2019, compared with a 42 per cent reduction in April over April 2019. This is in line with the national expectation for activity recovery
- Waiting times continue to improve against all measures with 67 per cent of patients waiting under 18 weeks for our nationally reported consultant-led services. Other services show a similar improving trend. Waiting times for first appointments in Cardiology, Respiratory, Leg Ulcer and Lymphoedema services are under four weeks

These graphs show how our activity levels and waiting times are improving:



Making these improvements has been challenging whilst also balancing the demands of service recovery with winter and COVID-19 surge plans and workforce capacity. Recovering services and addressing the potential for no patients to be waiting more than 52 weeks by 31 March 2021 is especially challenging in the following services:

Adult services	Children's and Young People's Services
<ul style="list-style-type: none"> • Pain Management & Chronic Fatigue • Acute Therapies Outpatients – physiotherapy & occupational therapy • Neuro Rehabilitation • Diabetes 	<ul style="list-style-type: none"> • Speech and Language Therapy • Dental • Audiology

We are communicating with patients and service users about service restarts and to explain any delays to their treatment and care. We will share more information in our next bulletin.

Preparing our services for winter and future COVID-19 surges

We are putting comprehensive plans in place to respond to expected winter demand and any future COVID-19 surge. Our plans centre on internal and external triggers and how our services would respond. To respond to wider pressures over winter, we may have the potential to enhance some or all of the following services:

- Support into care homes and nursing homes
- Core nursing/Prevention of Admission
- Inpatient bed capacity
- Neuro Rehabilitation/Early Supported Discharge
- Discharge Home to Assess
- Minor Injuries Unit opening hours (Herts and Essex Hospital)
- Children's Observation and Rapid Assessment Service /Children's Community Nursing (West Hertfordshire)

Other news in brief

Film demonstrates benefit of HCT's Prevention of Admission service



Steven Goodyear
Prevention of Admission patient referred to HCT Referral Hub GP due to suspected DVT

A film shown at HCT's October Board meeting

demonstrates the value and benefits of our enhanced Prevention of Admission service for patients and the wider system. It features two patients who were successfully treated at home, avoiding an acute hospital admission, thanks to the GPs, pharmacists and other healthcare professionals based at our East and North

Referral Hub in Stevenage who can conduct remote consultations with patients via video conferencing. They also provide expert support and advice to our community teams, enabling them to treat a wider range of conditions in people's homes.

HCT features in NHS Providers spotlight briefing for digital innovation during COVID-19



Our initiative to support care homes with virtual ward rounds is featured in the [latest spotlight briefing from NHS Providers](#), the national membership organisation for NHS provider trusts. Our virtual ward rounds enable GPs and other clinicians to rapidly assess patients remotely, preventing avoidable hospital admissions. The service is

coordinated and run from HCT's East and North Referral Hub in Stevenage, staffed by front line clinicians and administrators.

Secondment for Tafadzwa Mugwagwa, Associate Director of Operations



Tafadzwa Mugwagwa, Associate Director of Operations for our Adult Community Services, will be taking up a secondment to Camden and Islington NHS Foundation Trust as Interim Deputy Director of Nursing on 1 December. This nine-month role will build on Taf's experience as a registered mental health nurse as well as his senior leadership experience. We wish Taf well at Camden and Islington and will keep you updated on arrangements to cover his role at HCT.

Healthcare services at HMP The Mount

HCT has provided the healthcare service at HMP The Mount in Bovingdon for many years. Following our decision not to retender for this service at the end of the contractual term, the service has now transferred to Care UK. Most of our team transferred with the service and we wish them well for the future.

HCT's new North Herts Anticoagulation service

As detailed in our September bulletin, HCT is now the new provider of the the anticoagulation service in North Hertfordshire after the service transferred to the Trust from a GP practice. The new service launched on 14 September, seeing over 400 patients between 14 and 30 September.

We want to hear your views about HCT

We would very much value your feedback on how we work with our partners and stakeholders. We would be grateful if you could complete [this short survey](#) by Friday 6 November, which should take no more than five minutes. We plan to set up a stakeholder focus group to help us review the survey findings and develop our approach. If you would be willing to take part, you can indicate your willingness in the survey or email hct.engagement@nhs.net

If you would like to get in touch with us about our pandemic response or ask any other questions about our services, please email hct.engagement@nhs.net You can also find this and previous stakeholder bulletins [here on our website](#).