

September 2024



## Frimley Cancer and Elective care backlogs

### Purpose of report:

This report outlines the backlogs for cancer and elective (planned) care across Frimley ICS, the progress made in addressing these and actions being taken to reduce further. In addition, it outlines the work being undertaken to increase diagnostic capacity.

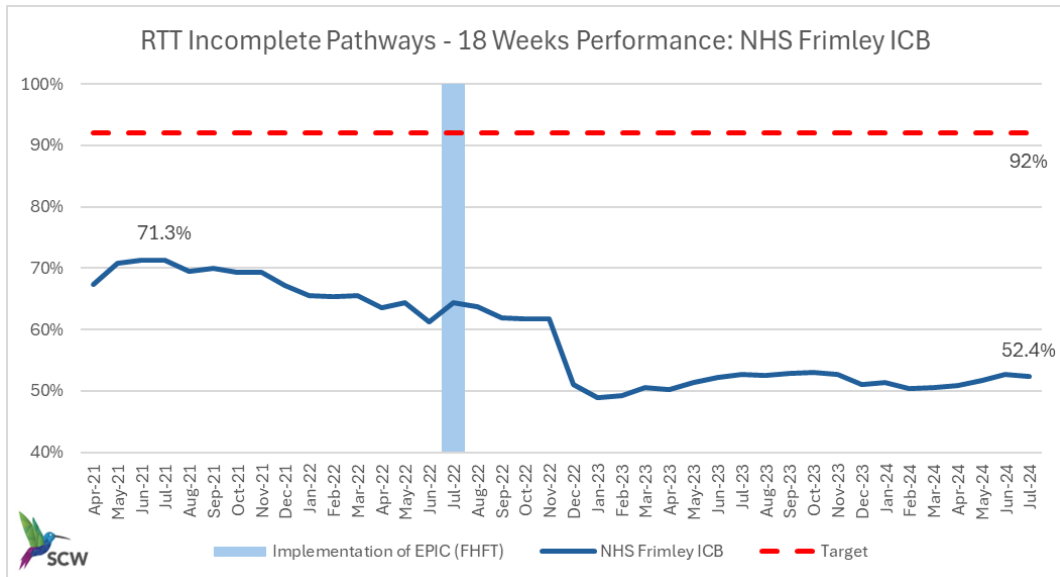
### Introduction:

1. Frimley Integrated Care Board (FICB) covers one acute Trust - Frimley Health Foundation Trust (FHFT) which includes three main hospital sites – Frimley Park Hospital, Wexham Park Hospital and Heatherwood Hospital, all of whom provide elective care and cancer services for the local population.
2. Waiting time targets have long been a part of the NHS performance requirements, however following the disruption and delays caused by covid the focus has been on addressing and reducing the number of patients waiting for treatment.
3. Prior to the covid pandemic, most patients were seen and treated within 18 weeks of their referrals. During the pandemic, waiting lists grew as services were reduced to redirect resources and keep the general public safe from risk of infection.
4. The last 12 months has seen further challenges in terms of reducing waiting lists due to the capacity lost due to Industrial Action that has been taken by doctors.
5. NHS England (NHSE) set out an ambition to reduce the volume of patients waiting long periods for elective care. Apart from patient choice and some allowance for complexity, the following timescales were originally set as follows:
  - 5.1. By March 31<sup>st</sup> 2022 no patient should wait over 104 weeks (2yrs)
  - 5.2. By March 31<sup>st</sup> 2023, no patient should wait over 78 weeks (1.5yrs)
  - 5.3. By March 31<sup>st</sup> 2024, no patient should wait over 65 weeks (1.25yrs)
  - 5.4. By March 31<sup>st</sup> 2025, no patient should wait over 52 weeks (1 year)

6. Due to challenges nationally in achieving these targets these have been amended and current expectations are:
  - 6.1. Zero 104 week waits
  - 6.2. Zero 78 week waits
  - 6.3. By September 30<sup>th</sup> 2024 no patient should wait more than 65 weeks
  - 6.4. By March 31<sup>st</sup> 2024 no patients should wait more than 52 weeks.
  
7. The three standards relating to cancer are as follows:
  - 7.1. Minimum of 77% of patients to receive their diagnosis or ruling out of cancer within 28 days of referral by March 25, moving to 80% by March 2026.
  - 7.2. Minimum of 96% of patients to commence treatment within 31 days of the decision to treat for all cancer patients
  - 7.3. There is a national ambition that 70% of patients will commence treatment within 62 days of their referral or consultant upgrade, with an ambition to increase this to 85%.
  
8. Ensuring there is sufficient diagnostic capacity to support both cancer and elective activity is recognised as a key contributing factor to a systems ability to reduce waiting times.

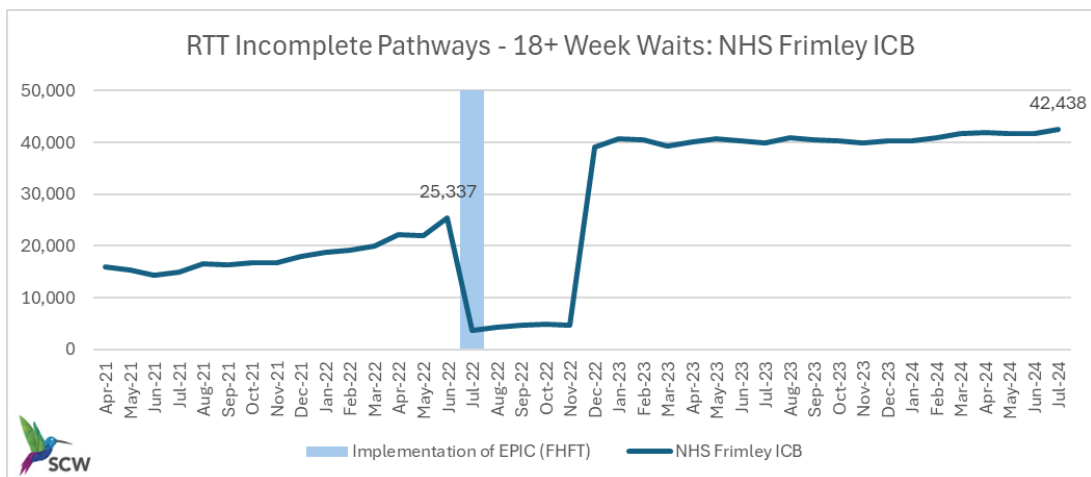
<b>Current position</b>
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9. Restoring planned services equitably is a core principle of the NHS's elective recovery programme. Frimley ICS has continued to work closely with regional NHSE colleagues to reduce the volume of patients waiting for elective care.
  
10. There is a constitutional standard, often referred to as the 18-week or Referral-To-Treatment (RTT) target, where 92% of patients should be waiting no more than 18 weeks from referral to first consultant-led treatment. NHS Frimley ICB 18 weeks performance currently (Jul-24) sits at 52.4% (42,438 out of total waiting list 89,095). Performance has been improving since February-24.



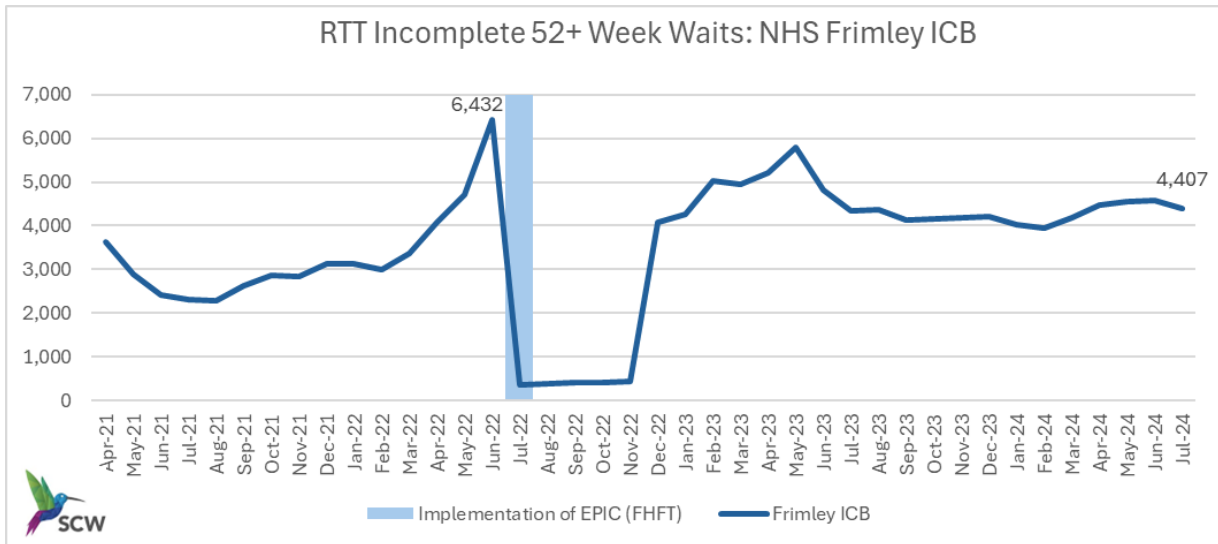
11. The following figures outline the long waiting patients and include all acute and independent sector providers with NHS Frimley ICB registered patients on their waiting list:

11.1. Patients waiting more than 18 weeks for treatment were 16,020 in April 2021. Numbers were on an upward trajectory prior to the implementation of the EPIC system at FHFT, increasing to 25,337 by June 2022. Some of this rise is due to data quality. The latest data (Jul-24) shows 42,438 patients waiting >18 weeks. Numbers over the previous months have been sitting around 40,000-mark month on month.

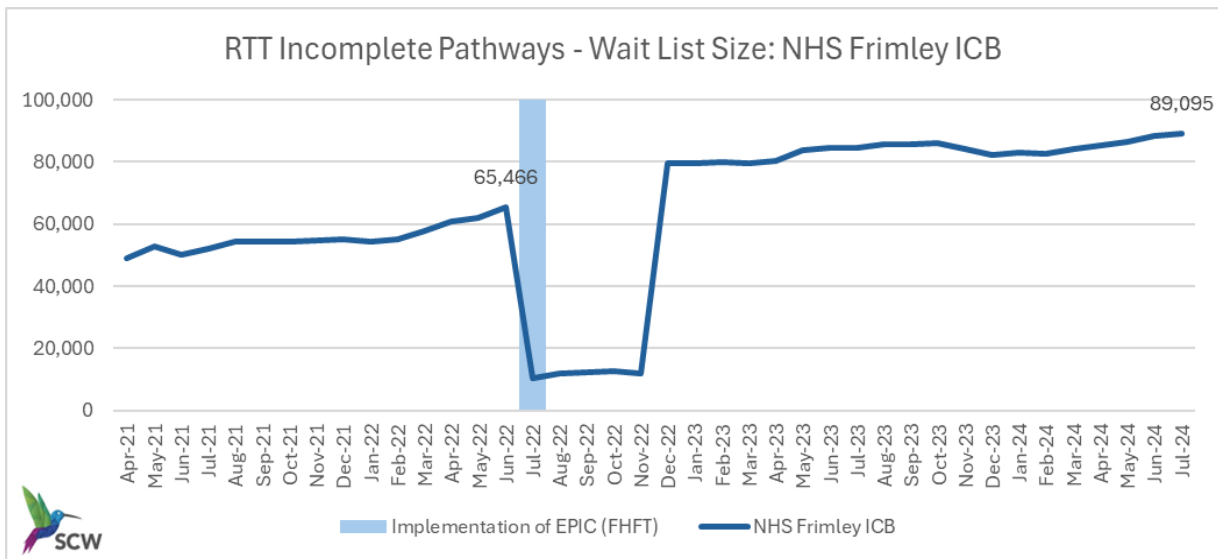


11.2. NHS Frimley ICB ranks 37<sup>th</sup> out of 42 system (Jul-24) for the percentage of waiting list over 52 weeks, with 4,407 patients (4.95% of wait list) currently waiting 52+ weeks.

11.3. In April 2021, 3,626 patients were waiting more than 52 weeks for treatment, increasing to its peak of 6,432 in May 2023. Numbers have continued to fluctuate since with the latest data (Jul-24) placing the patient count at 4,407.



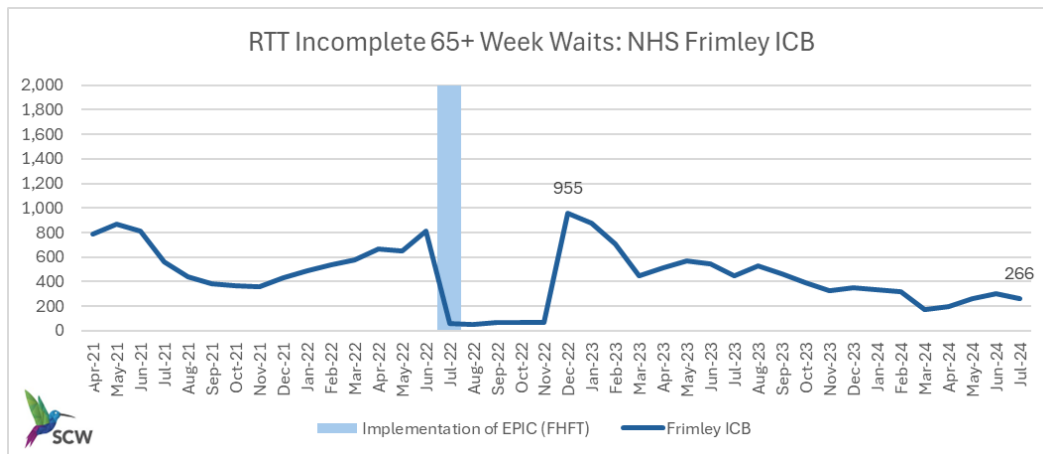
12. From April-21, the Total Wait List were on an upward trajectory prior to the implementation of EPIC system at FHFT, placing at 65,466 in June 22. Post EPIC migration, the wait list increased to a peak of over 79,729 in December 2022, again some of this is due to data quality. The wait list size has increased over the last latest month 6 months to 89,095 (Jul-24).



13. The eight specialties shown below make up around 60% of the total elective waiting list for Jul-24. These specialties tend to deliver a higher volume of routine procedures and therefore these patient groups can wait longer than those in other specialties. The specialties are T&O (Trauma and Orthopaedics), ENT (ear, nose and throat), Oral Surgery, Gynaecology, Ophthalmology, Cardiology and Urology. (The table below shows the Frimley ICB registered patients with provider breakdown, actual waiting list sizes will be larger as they will include non-Frimley ICB registered patients).

RTT Incomplete Pathways: Jul-24						
Treatment Function	Frimley ICB					
	Total	FHFT	RSFT	RBFT	ASPH	Other
Trauma and Orthopaedic Service	13,373	11,932	229	133	128	951
Ear Nose and Throat Service	9,043	8,388	209	92	93	261
Oral Surgery Service	6,535	4,197	1,881	41	123	293
Gynaecology Service	5,980	5,389	114	79	126	272
Ophthalmology Service	5,952	4,134	74	1,144	67	533
Dermatology Service	5,940	5,352	--	33	178	377
Cardiology Service	5,276	4,462	94	109	64	547
Urology Service	5,228	4,816	96	66	43	207

14. During 2023/24 Frimley ICB has seen no patients who have waited over 104 weeks for their treatment.
15. There has been continued progress in reducing the number of patients waiting over 65 weeks and numbers have been a downward trajectory since May 2023. However, there remain a very small number, due to the impact of industrial action and patient choice.
16. The national target is that zero patients will have waited >65 weeks by the end of September 2024. Trusts have been making good progress in reducing these numbers since September 2023, however there are still c260 patients who need to be treated.



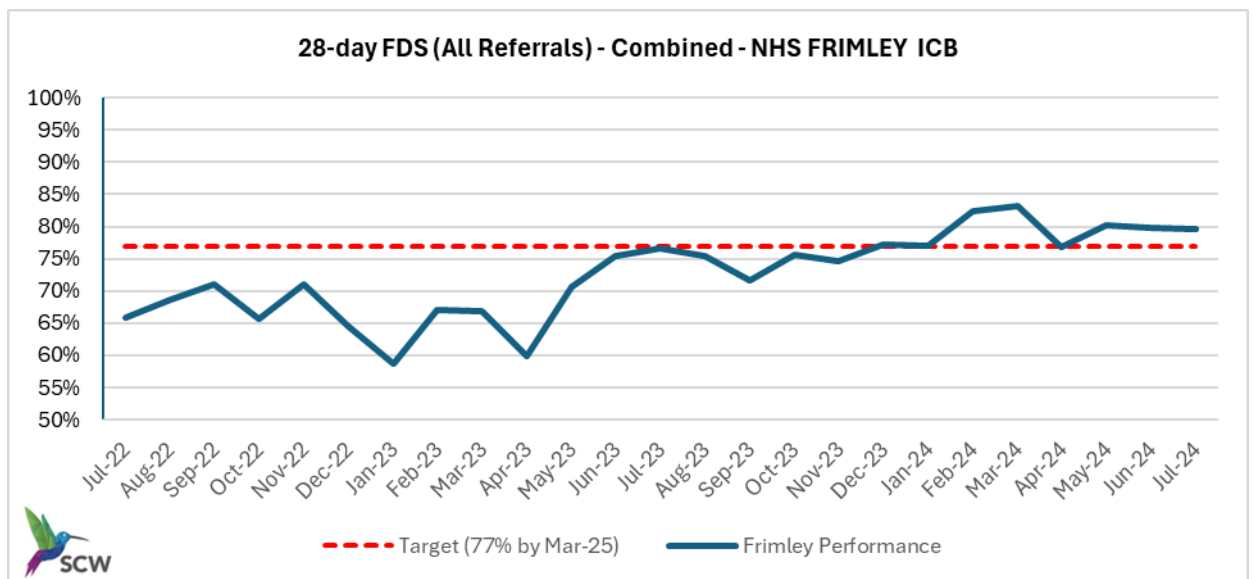
## Quality & Safety

17. FHFT undertakes regular waiting list validation and is the highest provider in region for validation levels.
18. FHFT also undertake a clinical harm review for every cancer patient who waits longer than 104 days for treatment.

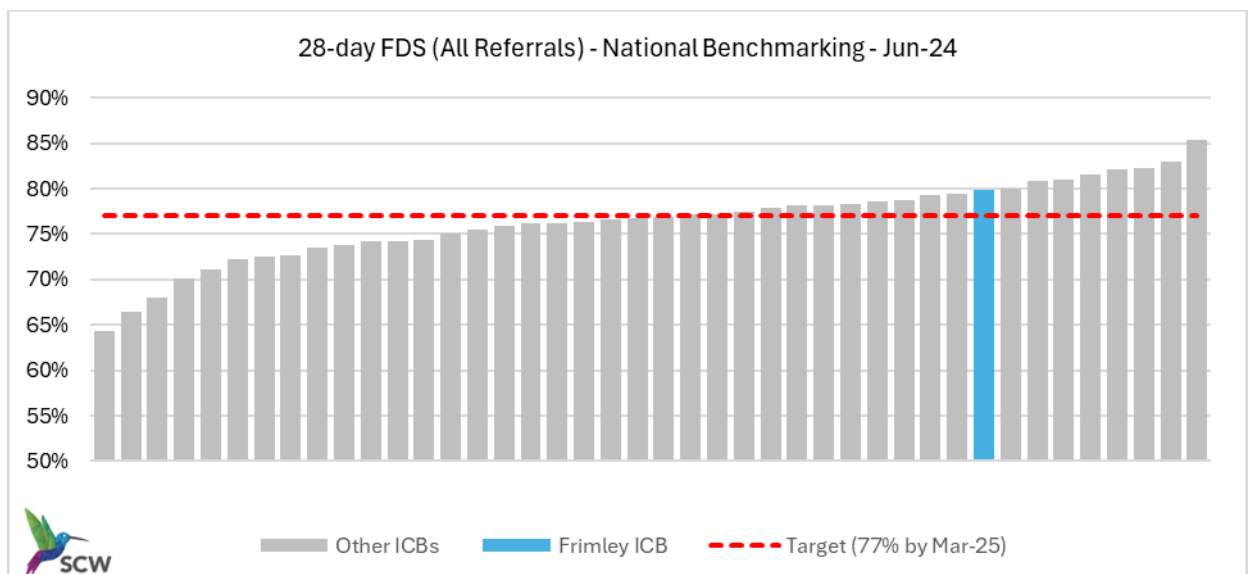
## Cancer performance

19. Patients on a cancer pathway are one of our highest clinical priorities. All providers have placed significant effort into ensuring that patients are treated as soon as possible with support from the Surrey and Sussex Cancer Alliance.

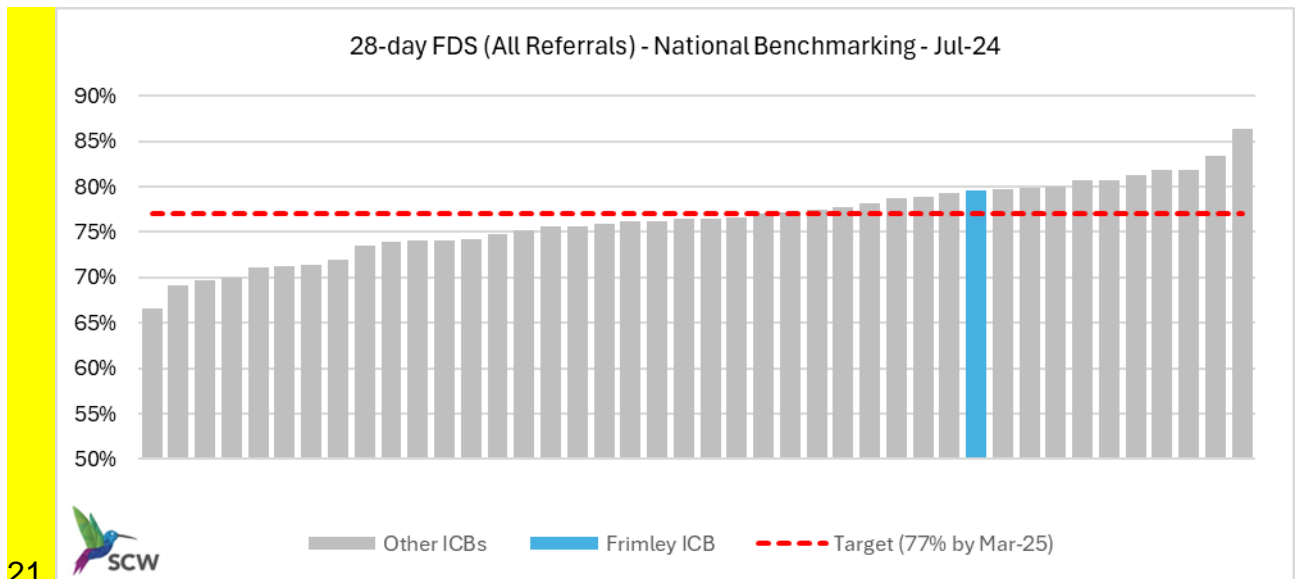
20. The faster diagnosis standard requires a patient who has been referred with suspected cancer to have a diagnosis or ruling out of cancer by day 28 of a primary care referral. Frimley ICB have strong performance enabling the system to be one of the top performing systems in England, ranking 9<sup>th</sup> out of 42 for Jun-24. (11<sup>th</sup> in Jul-24) and exceeding the standard which is set at 75% for 24/25, (National Priority: *improve performance against the 28 day Faster Diagnosis Standard to 77% by March 2025 towards the 80% ambition by March 2026* – (shown in the chart)).



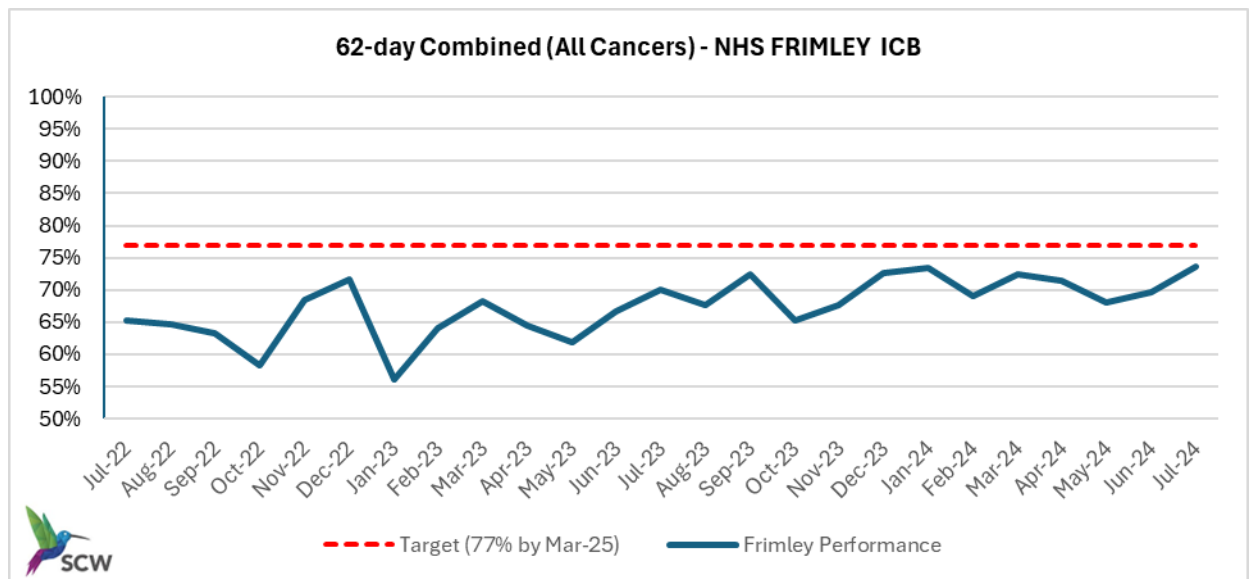
June-24 Chart – rank 9th



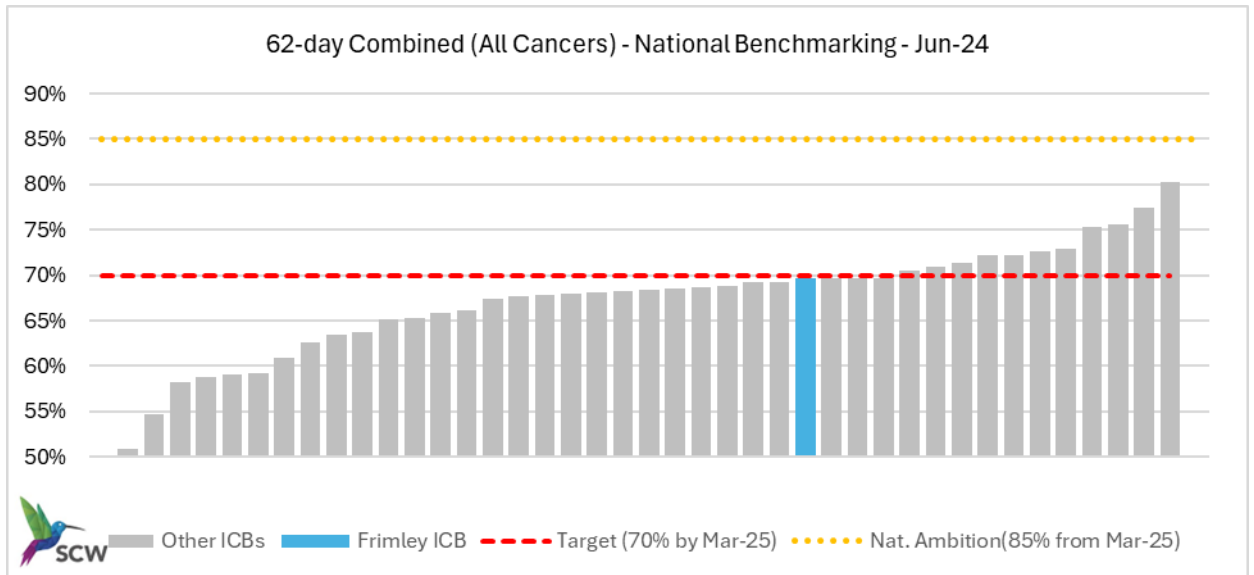
## Jul-24 Chart – rank 11th



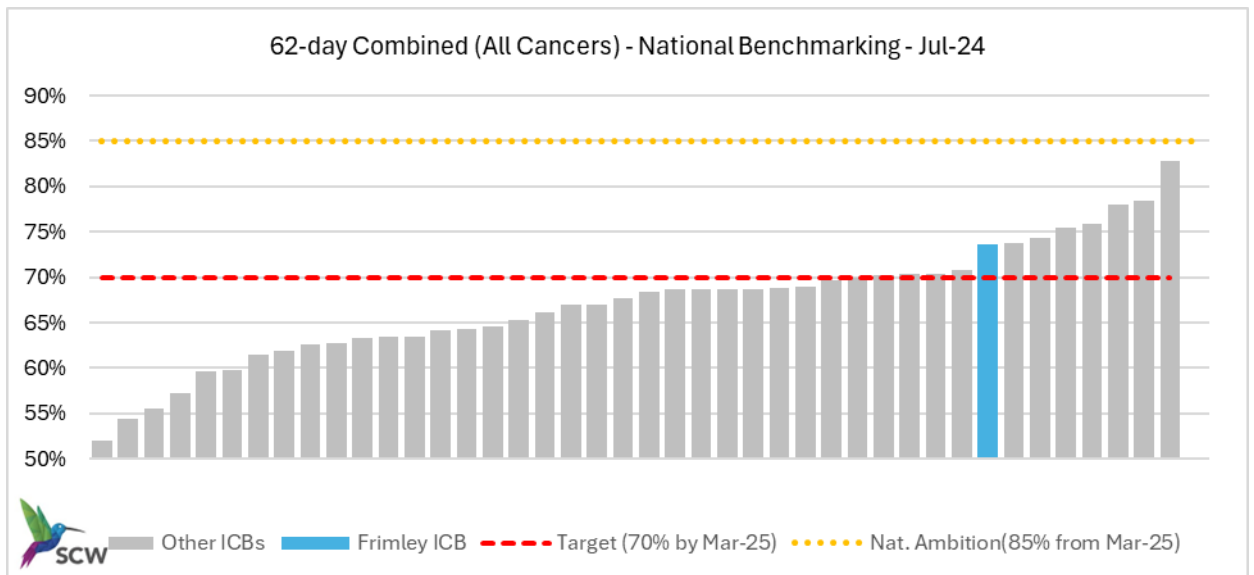
Frimley ICB ranks 15th out of 42 ICBs in England for the 62-day combined standard, achieving 70% in June, and 74% in July (ranking 8<sup>th</sup> out of 42). (*SH statement does not make current sense*). Frimley ICB achieved the 70% ambition for Mar-24, achieving 72%.



June 24 – Frimley Rank 15<sup>th</sup> (62 day waits)

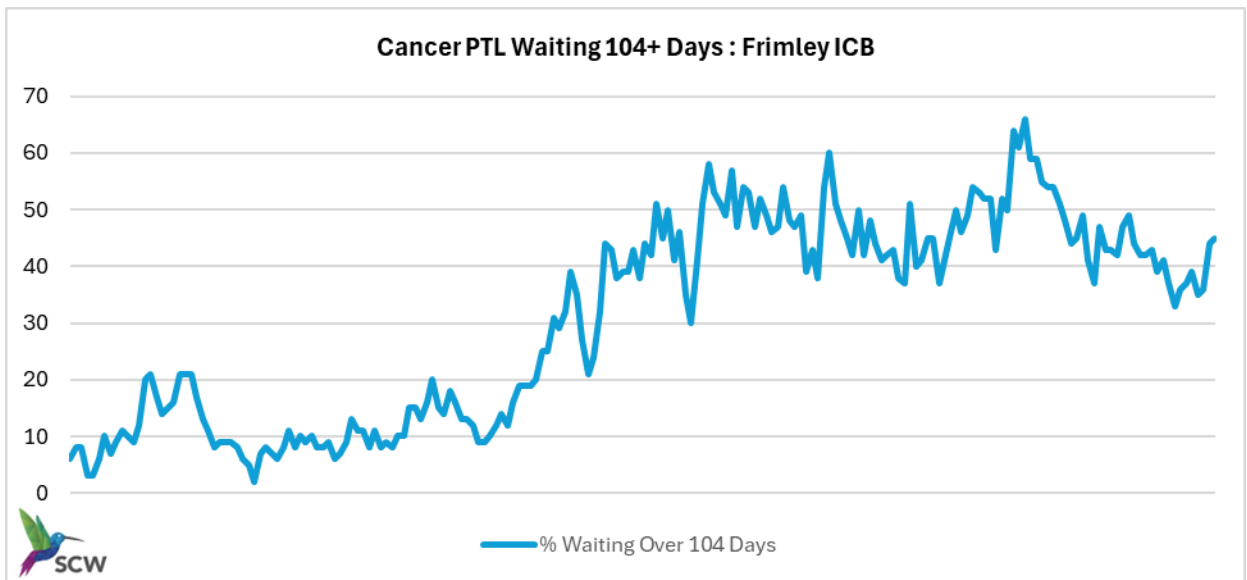
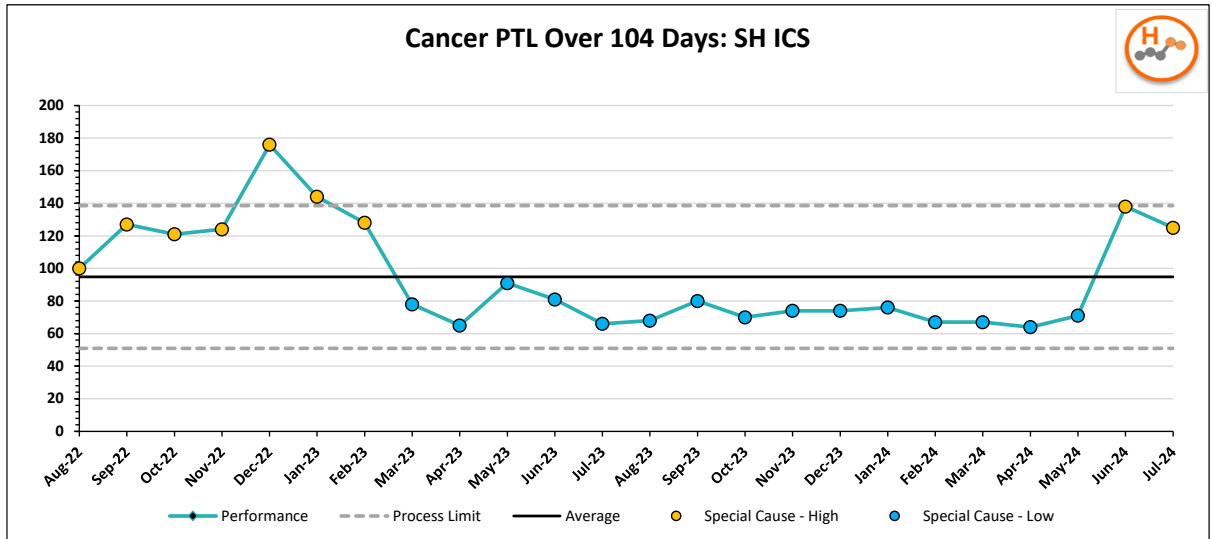


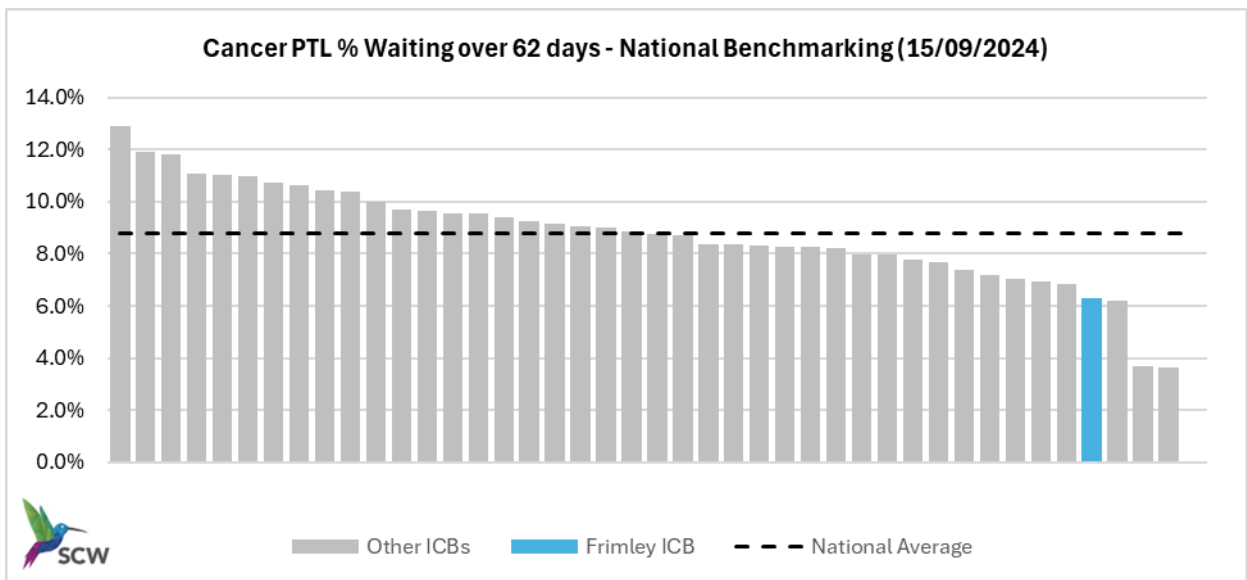
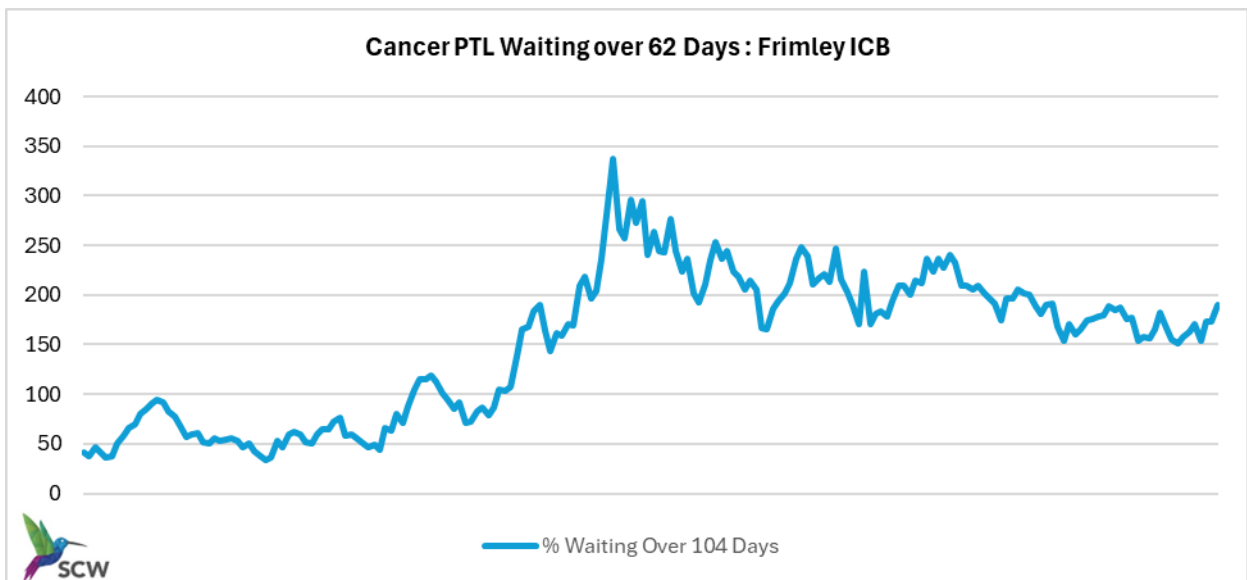
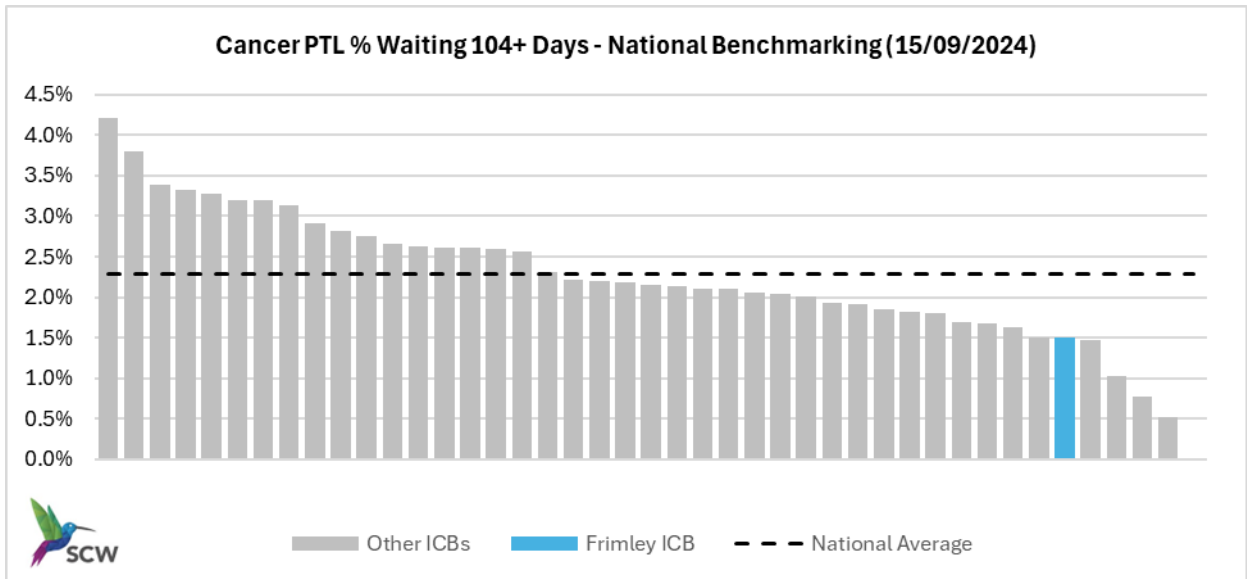
July 24 – Frimley Rank 8<sup>th</sup> (62 day waits)



22. Frimley ICB ranks 5<sup>th</sup> out of 42 systems for having the lowest proportion of wait list at more than 104 days for cancer treatment in England, as at 15<sup>th</sup> September 2024. (Frimley generally performs very well against this measure. Frimley ranks 4<sup>th</sup> out of 42 systems for the lowest proportion waiting over 62 days as well.

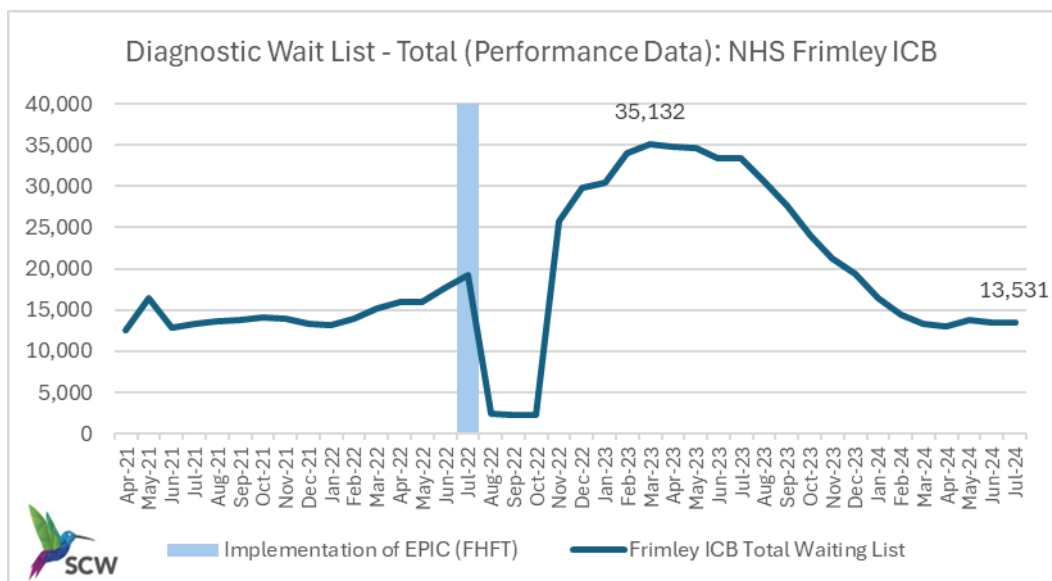
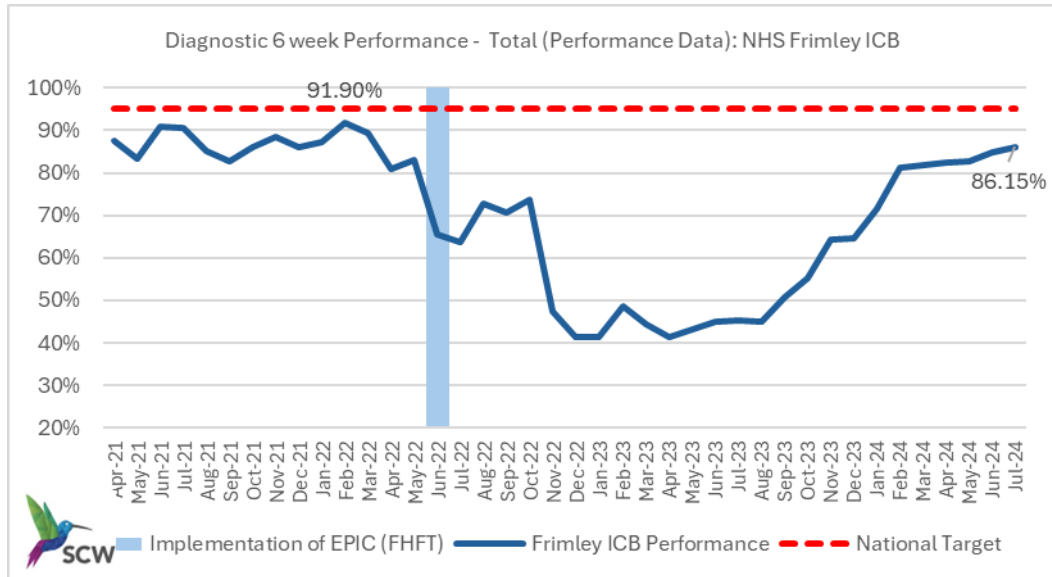


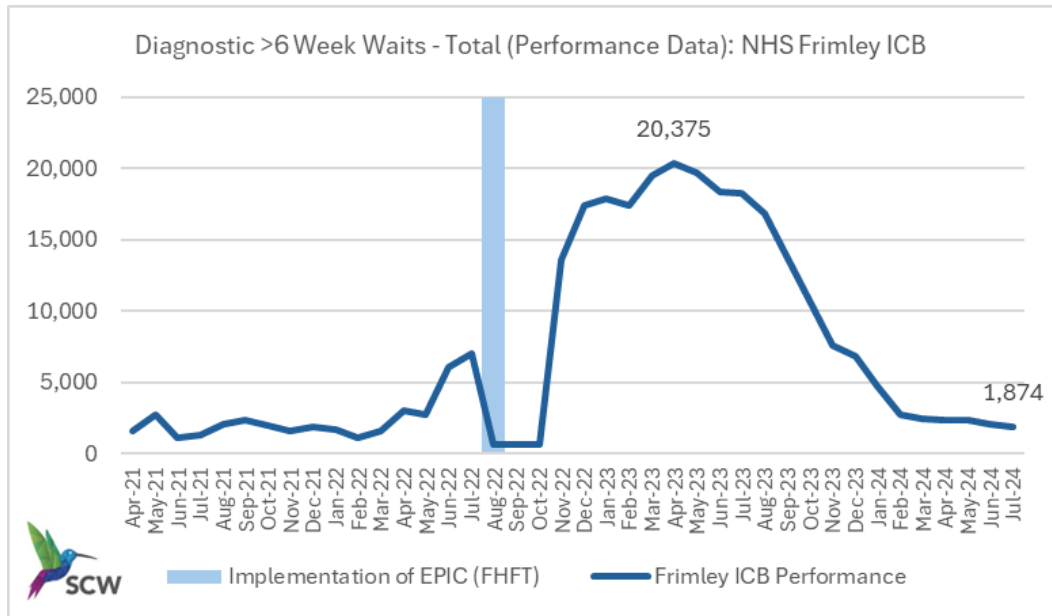




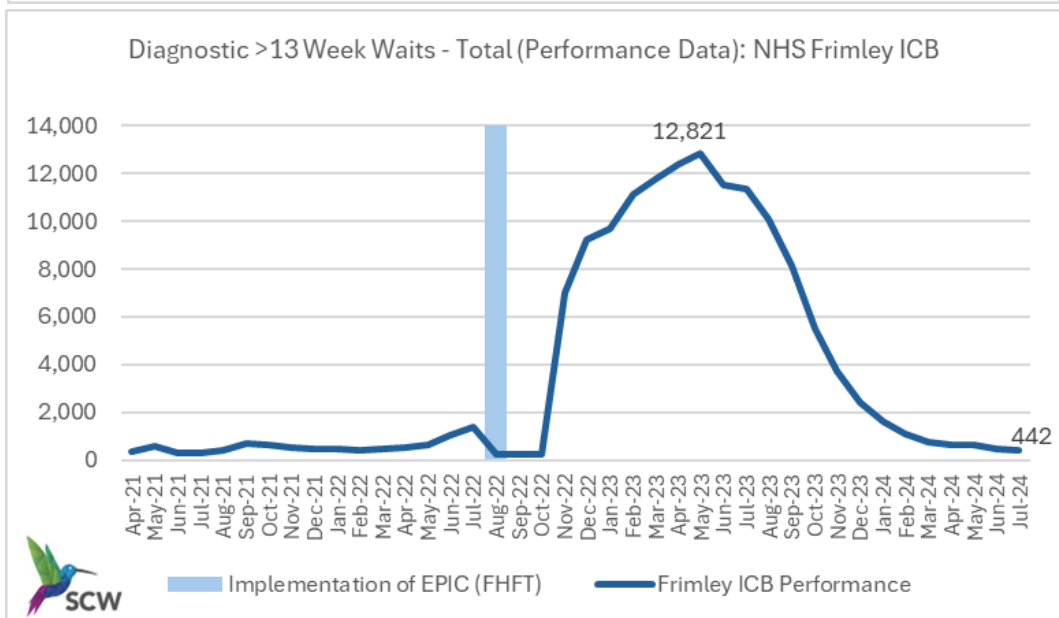
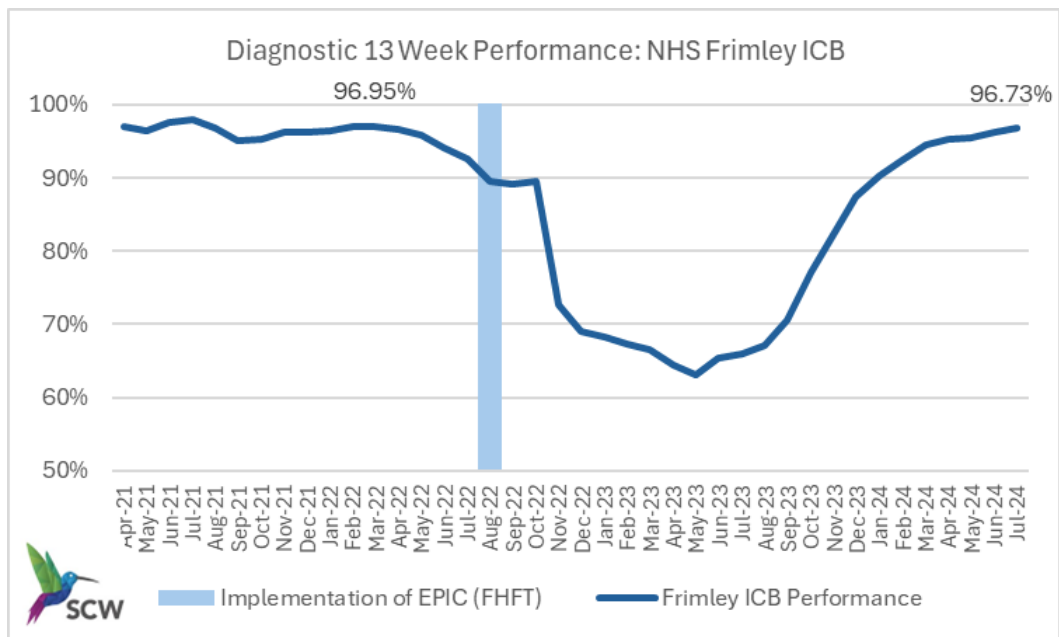
**Diagnostic performance**

23. The national target for diagnostics is that by Mar-25, 95% of patients should be seen within 6 weeks of referral for their diagnostic test. Performance maintained around <85% pre-EPIC implementation and reduced to <41% in Jan 23. (This may be due to data quality issues). Performance has continued to improve month on month with the latest figures placing at 86% (Jul-24).

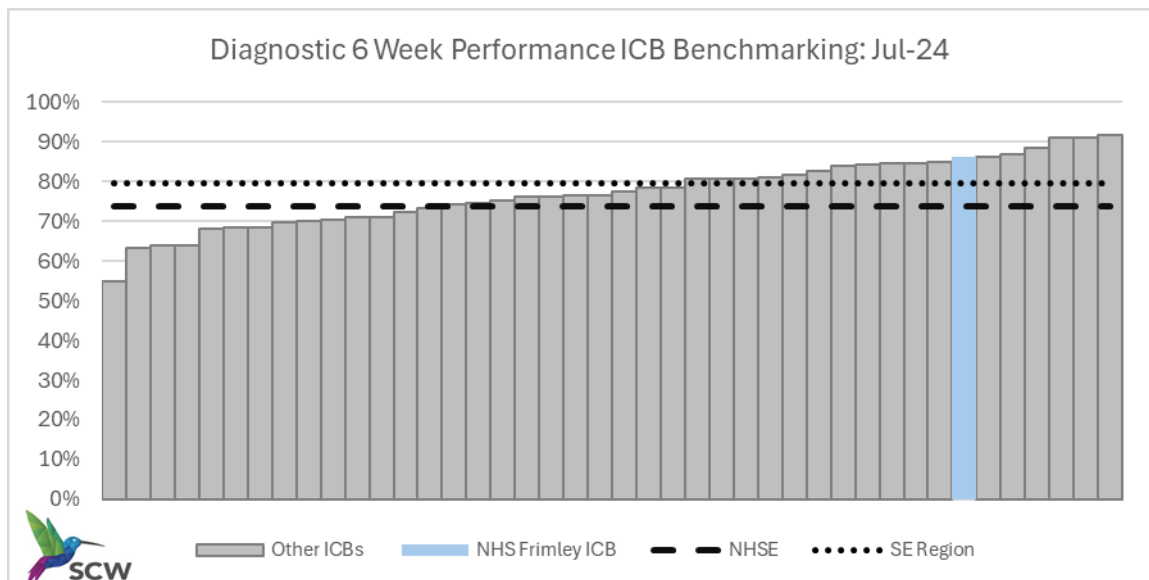




24. Pre-July 2022, on average each month, 3% of people on a diagnostic waiting list has been waiting more than 13 weeks. There was a significant increase from July 2022 to April 2023 where 13+ week waits peaked at 20,357 (35.5%). This was mainly due to data quality issues within the new EPIC system and industrial action. Numbers have now reduced to <500 patients waiting 13+ weeks as of July 2024 (3.2%).



25. NHS Frimley ICB is currently ranked 7<sup>th</sup> out of 42 systems for diagnostic 6-week performance in July 2024. Placing at 86.2% versus 91.6% for 1<sup>st</sup> place. July-2024's performance is also greater than both the SE Region (at 79.5% for July-2024) and the National Average of 73.6%.



## Digital Innovation

26. FHFT introduced the EPIC EPR system in June 2022 and whilst this is still being embedded fully within the organisation, the initial feedback from trusts and patients has been very positive. As part of this new system there is a MyFrimley Health app which will enable patients to book appointments, review information on their condition and other functions that put the patient in the driving seat of their care.
27. FHFT continues to use virtual consultation software to enable patients to undergo meaningful consultations with a health professional without having to attend a face-to-face appointment.

## Actions taken to address backlogs

28. Frimley ICS elective care team hold weekly meetings with trusts to review long waiters and provide support to help reduce this. In addition to this the ICS and Trust leadership teams meet with the regional NHSE team to share challenges and identify support and solutions.
29. FHFT undertake meetings weekly to review all long waiting and cancer patients, to ensure they are progressing their treatment as swiftly as possible and are fully sighted on any challenges associated with getting dates agreed.
30. FHFT continue to validate their patient lists so they are confident that they don't have any duplicates in the systems and pick up any errors in the way patients have been coded and rank first in region for validation levels.

31. FHFT has utilised the national DMAS (Digital mutual aid) system to facilitate transfer of appropriate patients to alternative providers where they can be treated safely in a shorter time period.
32. Mutual aid between sites within the Trust has taken place where required – typically utilising the Heatherwood site as our elective hub.
33. We continue to work closely with the Surrey and Sussex Cancer Alliance (SSCA) to support improvements in cancer care and maintain our excellent performance. To support improvements and focus for these, during 24/25, the SSCA will be developing and implementing tools to support early identification and escalation areas of challenge. This includes developing and implementing a technical statistical process escalation process, supporting Trust implementation of the Alliance optimal timed pathways and introducing a pathway analyser tool.

<b>Conclusions:</b>
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34. Frimley ICS has made good progress in reducing their long-waiting patients across elective, cancer and diagnostic waiting lists. Whilst there remain some challenges, processes for review, escalation and support have been put in place.

**Report contact:**

Alex Stamp, Deputy COO – Planned Care, Frimley Health Foundation Trust

**Contact details**

**Sources/background papers**

Frimley ICB Planned Care reporting

Surrey & Sussex Cancer Alliance Cancer Performance Report

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