From: Estelle Hook [mailto:Estelle.Hook@Monitor.gov.uk] On Behalf Of Communications

Sent: 16 September 2014 10:20

Subject: Response by 5pm today plse: for the urgent attention of Chief Operating Officers in acute FTs

Importance: High

Clearing RTT backlogs

This email has been sent to chief executives of acute foundation trusts. Please pass this email on to your chief operating officer. Action required by 5pm today please.

In June I wrote to you about the plans being put in place to clear RTT backlogs and improve performance on RTT standards. As you know, extra funds were made available to support additional elective activity over the period from July through to the end of October. Commissioners were asked to confirm the levels of activity expected from each provider over this period. Unfortunately, current indications are that providers' overall performance for the first two months is well below that expected detailed in those plans and we are concerned that this may reflect differences in understanding between providers and commissioners as to how firm the commitments to undertake extra activity were.

In light of this we have agreed to collate the view of all FTs as to the activity levels you are able to firmly commit to for the period September through November, both planned (those included in your contractual activity plans) and incremental additional RTT activity. In order to get a first cut picture we would like you to review today the activity plans which you have already submitted to Unify and to confirm by 5pm this afternoon (Tuesday 16 September) which of the following positions you expect to be able to achieve:

- (a) Delivery of your original baseline (contractually) planned activity and the incremental activity required to clear backlogs for July and August achieved and delivery of baseline and incremental plans for September, October and November;
- (b) Delivery of your existing baseline and incremental plans for September, October and November and recovery of underperformance against July and August plans within the same period;
- (c) Delivery of existing baseline and incremental plans for September, October and November but without recovering underperformance from July and August;
- (d) Underperformance against July and August baseline and incremental plans and current plans for September, October and November;
- (e) Other please describe

If you fall into categories (c), (d) or (e) please estimate the scale of your likely underperformance against baseline (contractually agreed) and incremental plan for each month and, if possible, the number of over 18 week waiters which will remain at the end of November.

Please submit your response to your Monitor relationship manager/Senior Regional Manager, copied to improvement@monitor.gov.uk. Regional relationship teams may also call you on Wednesday morning if any further clarification is required, particularly if your revised activity estimates are significantly different from your previous plans.

NHS England colleagues are currently refreshing the modelling work which shows, based on the figures currently available nationally, the additional amount of activity which will be required to clear the backlog of long waiters by November. Based on that information and your responses to this email, Monitor and NHS England will then agree individual plans with each Foundation Trust and local commissioner, profiled weekly between now and 30 November, and these revised plans will then need to be resubmitted to Unify.

For the activity above your original baseline plans NHS England and Monitor have agreed that this activity should be funded at a modified price of 115% of tariff, which will be approved by Monitor via a centrally agreed single local modification process which will cover all providers.

In my letter in June I also referred to the weekly PTLs which we encourage FTs to share with local commissioners. Sharing of PTLs ensures that local commissioners have the information they require, at a sufficient frequency and level of granularity, to carry out their duties in line with the NHS Constitution, and to explore proactively alternative providers of elective activity should those rights be at risk of not being fulfilled. We have been made aware by NHS England that a number of commissioners have raised concerns that the

poor quality of some PTLs is hindering their ability to deliver their own responsibilities. Whilst we recognise that the PTLs are themselves management tools, not formal reporting submissions, and as such will not be subject to scrutiny by Monitor directly, where a commissioner raises concerns over a period of time that PTL data submitted by an FT is poor, regional teams will follow this up with trusts. It is particularly important that the numbers of 52+ week waiters are validated each week prior to the submission of each weekly PTL, given the national priority quite rightly being placed on the treatment of those patients waiting the longest.

As always we appreciate your co-operation and the hard work you and your teams continue to put in to ensuring that patients receive the best possible services.

Yours faithfully

Stephen Hay

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