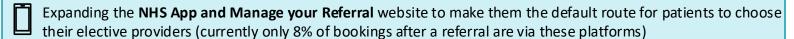
Reforming elective care for patients: An overview of the NHS plan



On 6th January 2025, the NHS published the new plan to reform elective services. With over 6.3m patients on waiting lists from October 2024 and over two fifths of these being for over 18 weeks, the need for reform is critical. The reform commits to increasing the percentage of patients treated within 18 weeks for elective treatment to 65% nationally by March 2026, and returning to the constitutional standard of 92% by March 2029.

To deliver these commitments, a comprehensive set of priorities have been published covering four areas, which involve collaboration between NHSE, ICBs, and NHS elective care providers.

Empowering patients



By March 2025, **85% of acute trusts** will enable patients to **view appointment information via the NHS App**By Sep 2025, the **minimum standards** patients should expect to experience in elective care will be published. An

existing director responsible for improving patient experience in each ICB & provider is to be named by Apr 2025 Initiatives to **collate and publish data to help reduce health inequality**, with ICBs to set clear local vision on how elective care reform will reduce these issues

Reforming Delivery

NHS and Independent Sector Partnership Agreement to be published by Jan 2025, the first of its kind in 25 years. Sets out how the NHS will work together with the independent sector to reduce the elective waiting list and support the most challenged specialties, namely ENT and gynaecology

Community diagnostic centres (CDCs) will address growing diagnostic demand by increasing capacity in 2025/26, expanding existing centres, and establishing up to five new ones. CDCs to open 12 hrs/day, 7 days/week, deliver same-day tests and consultations, and 10+ straight-to-test pathways

Quicker access for patients to common surgical procedures through 17 new and expanded **surgical hubs** by June 2025. CDC and surgical hub reform will be underpinned by investment in digital interventions e.g. FDP

Delivering Care in the Right Place

Expand Advice and Guidance (A&G) service, paying GPs £20 per request to encourage closer working with hospital specialists, allowing patients increased access and avoiding the elective waiting list

Deploy "collective care" approaches by Sep 2025, including group appointments, one-stop clinics and super clinics Expand utilisation of technology and AI to improve information sharing, patient choice and efficiency: Federated Data Platform (FDP), NHS App, electronic Referral System (e-RS) and outpatient (OP) list validation

Increase uptake of **patient-initiated follow-up (PIFU)** to at least 5% of all OP appointments by March 2029, to reduce OP follow-up appointments of lower value to both patients and clinicians by over 1 million

Aligning Funding, Performance Oversight and Delivery Standards

Update **Payment Scheme** to reflect elective priorities and focusing on activity that ends a patient's wait for care

Deliver **NHS IMPACT Clinical and Operational Excellence Programme**, to apply proven improvement approaches for elective reform, by March 2026

- NHS Oversight and Assessment Framework will assess providers and ICBs to identify and support challenged providers, and reward high-performing providers
- Further Faster 20 (FF20) programme is working with 20 trusts in areas of high economic inactivity to rapidly reduce waiting times and support people returning to the workforce
- Task and Finish Group will be set up in January 2025 to set out clear expectations for administrative practice and operational management in the delivery of elective care by September 2025