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NHS England and NHS Improvement
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To:
Chief executives of all NHS trusts and
foundation trusts
CCG Accountable Officers
GP practices and Primary Care Networks
NHSEI Regional Directors
NHSEI Elective Programme Leads
Trust Medical Directors
CCG Medical Directors
Chairs of ICSs

18 September 2020

Dear colleagues,

Third Phase of NHS Response to COVID-19 - Clinical Prioritisation & Validation of Elective Waiting Lists

We wrote to you on 13 July, 2020 regarding waiting list validation and on 31 July, 2020 outlining the third phase of the NHS response to COVID-19.

Included in this letter are details of the Clinical Prioritisation programme which is needed to support the prioritisation of waiting lists.

The programme will support regions to fulfil the requirements of the [COVID-19 Phase 3 Recovery planning letter](#) which stated:

'Elective waiting lists and performance should be managed at system as well as trust level to ensure equal patient access and effective use of facilities'.

Managing elective waiting lists at system level will play a critical role in recovering elective activity. The first stage of this process is establishing a validated waiting list.

A digital solution has been commissioned for use to support Trusts and Primary Care to clinically prioritise patients on waiting lists. This digital solution – the NHS e-Review - supports the process when patients on elective waiting lists are clinically reviewed, their priority status recorded, and a clear actionable disposition to be requested.

This will support Trusts in managing the most clinically urgent patients first, in addition to enabling waiting lists to be managed at a system level. The Clinical Prioritisation programme will be supported by North of England Commissioning Support (NECS) to facilitate the rapid roll-out of NHS e-Review.

The priority is to clinically review all patients on an admitted patient care pathway to be completed by **23rd October, 2020**. Further guidance will be issued with regards to the requirements to clinically prioritise patients on waiting lists for diagnostics and outpatients appointments.

In addition, we will be taking the opportunity to more formally embed the requirements of the Evidence Based Interventions Policy into programme through the use of EBChecker, a digital solution which will be embedded into NHS e-Review to enable clinicians to validate patients' against the policy criteria to ensure that valuable resources are being utilised only in clinically appropriate circumstances.

Work is underway, led by Professor Chris Moran, Deputy National Strategic Incident Director (COVID-19) in consultation with the Royal Colleges, in order to provide further clinical guidance on clinical prioritisation definitions to support secondary and primary care clinicians.

Next steps

1. Trusts, CCGs and ICSs to nominate an Elective Care Recovery Lead to commence work with regional colleagues and NECS on the delivery of this programme by **23rd September, 2020**.
2. Trusts, CCGs and ICSs to notify ereview.programme@nhs.net of the name and contact details of the Elective Care Recovery Lead to act as a point of contact for the Regional and National e-Review programme teams.
3. The e-Review programme team will contact Trusts and CCGs/ICS Leads to agree the programme of work to be undertaken by **28th September, 2020**.
4. Trusts will be required to agree a variation to the Data Processing Agreement which has already been signed for the Data Validation Programme to enable the data set required for e-Review to be processed.
5. There is an expectation that Trusts will have clinically reviewed within e-Review and actioned their inpatient waiting lists (those on an admitted patient pathway for a procedure) by **23rd October, 2020**.

We look forward to working in collaboration with you throughout the third phase of the NHS response to COVID-19.

Yours sincerely



Pauline Philip DBE

National Director of Emergency and Elective Care

NHS England and NHS Improvement

A handwritten signature in black ink, appearing to read 'Willett', with a long horizontal stroke extending to the right.

Keith Willett CBE

Director for Acute Care and Emergency Preparedness

NHS England and NHS Improvement