Dear colleague

**Delivery plan for tackling the COVID-19 backlog of elective care**

Today we have published the Delivery Plan for Tackling the COVID-19 Backlog of Elective Care. This plan, which has been developed with expert contributions from a range of partners, both internal and external to the NHS and including patient groups, sets out a clear vision for how the NHS will recover and expand elective services over the next three years. It details ambitions, guidance, and best practice to help systems address key issues, ensuring we have a service that is fit for the future.

A central aim is to maximise NHS capacity, supporting systems to deliver around 30 per cent more elective activity by 2024-25 than before the pandemic, after accounting for the impact of an improved care offer through system transformation, and advice and guidance.

The plan will require significant investment in the capacity and skills of our staff while ensuring that our workforce is supported to deliver the task ahead. We know that you have already made strong progress on elective recovery, and this plan tries to reflect the work that you have been doing.

The impact of the COVID-19 pandemic is not limited to elective care, and it can be seen across mental health, primary and community care. It will be important to give these areas the same focus as elective care, and for the challenges in these areas to be tackled in unison.
Crucially, the plan has a strong focus on improving patient outcomes and their experience of NHS services. We want to work with you to:

1. Make progressive improvements on long waits, with a goal to eliminate waits of over one year by March 2025, and waits of over two years by July 2022. We know that some patients will still choose to wait longer, and there will be challenges in particular specialties, as before the pandemic.

2. Reduce diagnostic waiting times, with the aim of at least 95% of patients receiving tests within 6 weeks by March 2025.

3. Deliver the cancer faster diagnosis standard, with at least 75% of urgent cancer referrals receiving a diagnosis within 28 days by March 2024, and return the 62 day backlog to pre-pandemic levels by March 2023.

4. We will work with patient groups and stakeholders to better monitor and improve both waiting times and patients’ experience of waiting for first outpatient appointments over the next three years.

These ambitions are important for improving outcomes for patients, but they of course depend on returning to and maintaining low levels of COVID-19, enabling the NHS to restore normalised operating conditions and reduce high levels of staff absence.

The plan requires our collective focus to:

- **Increase capacity and separate** elective and urgent care provision, while freeing clinicians’ time for new patients and those with the greatest clinical need
- **Prioritise diagnosis and treatment** for those with suspected cancer or an urgent condition, and offering alternative locations with shorter waiting times for those waiting a long time
- **Transform the way we provide elective care**, including streamlined care and fewer cancellations, and more convenient access to surgical and diagnostic procedures, using digital tools and data to drive the delivery of services
- **Better information and support to patients**, providing personalised, accessible support to patients whilst they wait, improving outcomes and reducing inequalities in health outcomes.

Recovering elective services is going to require a huge, collective effort from systems and providers. This is not just in hospitals but across the entire health and social care system. We will only be successful in delivering these commitments if we are to draw on the collective ingenuity, determination, and resilience of teams across the country.
Finally, we would like to recognise the incredible work that is already taking place to deliver on the ambitions set out in this plan. We look forward to working with you as we continue to rise to this challenge and change the way our services are delivered for the better.

Yours sincerely,

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NHS England and NHS Improvement

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