

Dawn Scrafield
Chief Executive
Mid and South Essex NHS FT

NHS England - East of England
West Wing, Victoria House
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17 March 2026

Dear Dawn,

Formal notice of non-compliance with December 2020 Enforcement Undertakings

I am writing to notify Mid and South Essex NHS Foundation Trust (“the Licensee”) of non-compliance with specific enforcement undertakings first accepted on 18 December 2020 under section 106 of the Health and Social Care Act 2012. This letter sets out the areas of non-compliance, the evidence supporting that position and next steps.

Maternity Services - Undertaking 2.2.5

Work with the Nursing and Midwifery Council and the General Medical Council to co-produce and implement a Culture and Organisational Development (OD) improvement plan which addresses the cultural and professional behaviours highlighted in the August 2020 CQC report. A responsive plan will be in place, and implementation in train, by end December 2020.

Observation and outcome:

- Whilst we acknowledge progress within the Maternity undertakings, and a completed number of actions, the undertaking remains incomplete, as the Licensee has not fully implemented the Culture and OD improvement plan by December 2020.

Delayed Diagnosis and Treatment of Cancer Patients Cancer Services - Undertakings 4.1 and 4.2

4.1: Deliver the Cancer Improvement Plan to agreed timescales/milestones.

4.2: Provide assurance that recommendations from the Royal College of Surgeons (RCS) review of Urological cancers (Nov 2020) are addressed or have robust plans in place.

Observation and outcome:

- Whilst we acknowledge the Licensee delivered a Cancer Improvement Plan to the agreed timescales, that did not result in the expected performance improvements. Subsequent agreement was reached with the Licensee in 2024 that would achieve delivery of Faster Diagnosis Standard (FDS) and 62-day performance 65% or above, which have not been achieved to date. During the same period, agreement was also made to achieve a 62-day backlog <50% of fair shares; however, we acknowledge that this measure is no longer relevant, as backlogs are no longer managed on a fair shares basis, national priorities shifted to 62-day performance, and the national data required to monitor fair share backlogs is no longer provided.

- Whilst the Trust has made significant steps to provide the assurances that the recommendations from the RCS review of Urological cancers are addressed and plans in place, we are satisfied that the remaining outstanding actions can be addressed in the context of new undertakings.

Elective Backlog Growth - Undertakings 5.2 and 5.3:

5.2: Deliver the March 2021 maximum threshold for >52-week waits (6,900), overseen by SOAC with evidence-based adjustments if assumptions shift.

5.3: Submit a Board approved improvement trajectory in Q4 2020/21 to eradicate the >52-week backlog during 2021/22, with month-on-month reductions in Q1 2021/22.

Observation and outcome:

- At the end of March 2021, the >52-week trajectory (6,900) was not met, with an actual performance figure of 8,051.
- Elective recovery did not eradicate the >52-week backlog during 2021/22.
- Subsequent years have led to a continued worsening position and failure to meet >52-week expectations.

Next steps

NHS England acknowledges the Licensee's non-compliance with several elements of the 2020 enforcement undertakings. We also recognise that the context in which those undertakings were introduced has changed significantly, including the impact of the pandemic, periods of reduced National/Regional/System Provider oversight, shifting annual planning requirements, and evolving operational pressures. In light of this, and as part of our approach to retiring historic undertakings, the 2020 undertakings will now be formally closed, with immediate effect.

NHS England will instead be working with the Board with a view to agreeing a new set of enforcement undertakings that reflect the Licensee's current licence breaches and current performance concerns, incorporating the most up-to-date regulatory standards and Tier 1 exit criteria. These new undertakings will provide a refreshed and transparent framework for improvement, aligned to the Licensee's operational and quality risks.

Formal notice of proposed enforcement undertakings for Board consideration will follow in due course. In the meantime, the Licensee is expected to continue engaging fully with National and Regional oversight processes and to maintain its focus on delivering measurable improvement across Maternity, Cancer and Elective pathways.

Failure to comply with any future undertakings will render the Licensee liable to further formal action by NHS England, including the potential imposition of discretionary requirements under section 105 of the Act and other appropriate regulatory measures.

Yours sincerely,



Clare Panniker
Regional Director
NHS England – East of England

CC Andy Wood, Chair, Mid and South Essex NHS FT