

Tackling health waiting lists

We are all in favour of getting NHS waiting lists down. Patients need timely appointments and prompt treatments. The government has announced a substantial unspecified portion of the £36bn extra in one announcement over three years to tackle waiting lists, money to be shared and transferred eventually to social care. It has announced another £8bn added to future budgets. I asked some questions about how this money is going to be spent.

When I asked how many extra medical staff will be recruited using the £ 8bn I was told "We are working closely with NHS England and NHS Improvement to develop a plan for how that funding will be used including workforce requirements and additional medical posts that may be needed".

When I asked where was the plan to reduce waiting lists I was told they aim to publish "an elective recovery delivery plan " in November. They have explained that they added £1bn to this year's £1bn Elective Recovery fund and aim to spend the £8bn over the three years 2022/3 to 2024/5. When I asked about the NI surcharge money they said they are "working with NHS England and NHS Improvement to develop a plan of how that funding will be used"

When I asked how much the property costs would be of setting up new NHS diagnostic centres they told me the small and precise figure of £55m. That implies a plan with proper costings for that venture. I look forward to seeing how many centres that buys. The bigger cost will of course be staffing them. When I asked about the value for money of the Test and Trace programme I was told there will be a value for money report on that in the late autumn this year.

I was somewhat surprised by these answers. Given the strength and depth of NHS management I thought they would have put together a plan to bid for funds from the Treasury for the waiting list work. I would have expected the workforce requirements to be the main feature and cost in the plan. I would have expected the Treasury to require detail over how waiting lists were to be brought down before placing a firm sum into the budget. I would also have expected the Treasury to have pushed back on the huge Test and Trace budget to see if some of this year's allocation could be transferred to waiting list work. There are other elements in the large and fast growing health budget of the last two years that also need examining, as they should have been one off and set up costs brought on by the pandemic. There is a general attempt in the Red Book to distinguish between one off and regular spending.

Presumably the costs of establishing then standing down the Nightingales was a one off . Presumably necessary work on better controls over airflows and air cleaning to curb infection spread has all been done by now, and those items should drop out of budgets. Presumably fewer of the workforce are now having to self isolate or be off sick as the Covid case rate in hospital declines and as serious infections wane thanks to widespread vaccination. All that should help improve the ability of the hospitals to tackle backlogs

and to get staff back to more normal duties and routines. I will watch out for the plan to get the lists down, and will ask further questions to see how they are getting on. They were not able to tell me how many Chief Executives the various parts of the English NHS now employs. I would have thought someone would keep a record of that, as they all get paid.