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Dear Michael and Eluned,

Thank you for a constructive meeting last month.

As you know, the NHS is at the forefront of people's minds, and the Prime Minister has made cutting waiting lists a priority to ensure people across the UK get the care they need more quickly. We must continue to take steps to support the NHS and reduce waiting times to ensure no part of the UK is left behind. I am therefore concerned by the variation in performance across NHS services.

As we look to address this issue, it is important that the UK Government and Devolved Administrations work together to ensure that no matter where you are in the country, citizens can access vital services quickly.

In England, we are delivering on the actions set out in the NHS's Elective Recovery Implementation Plan published last February. Our target to virtually eliminate waits of longer than two years by July 2022 was achieved on time and waits for treatment of more than 78 weeks have been virtually eliminated. Although data is not collected on the same basis across the UK, recent figures show more than 73,000 people are waiting over 77 weeks for treatment in Wales, and at least 21,600 people are waiting over 78 weeks for an outpatient, daycase or inpatient appointment in Scotland.

Whilst there are common features across the approaches of England, Wales and Scotland, one area of difference relates to patient choice. In England, patients have the legal right to choose the provider for their first outpatient appointment (at the point of GP referral) for many healthcare services. Patients may choose to be treated free of charge at any provider – NHS or independent sector – provided they meet NHS standards and costs and hold a contract for the provision of services to the NHS. A Patients Association study has found that this can reduce a patient's waiting time by up to 3 months.

From October, we will proactively notify patients in England who have been waiting over 40 weeks of their right to request to be treated at a different provider if clinically appropriate, again in the NHS or in the independent sector, provided they meet NHS standards and costs, and they hold a contract for the provision of services to the NHS.

The Secretaries of State for Scotland and Wales share my desire to see patients across the UK have the same rights when it comes to accessing treatment. I would therefore be happy to facilitate a Ministerial working group session (with NI official counterparts) to share how we are implementing this choice approach in England, and to share lessons on work across the UK to tackle the elective waiting list. I would also be open to considering any request from you for patients waiting for lengthy periods for treatment in Scotland and Wales to be able to choose from alternate providers in England – NHS or independent sector – in line with the approach we are taking here, and building on the existing arrangements for cross-border healthcare.

I also believe we need to work together to ensure that health data is more comparable across the UK. It is important that all our citizens can understand the performance of the health services they are

receiving and that we can learn from what has been tried and tested in one part of the UK to improve services across the country. I welcome the work our respective teams have been doing to improve data comparability, for example through the Office for National Statistics' work to improve key UK-wide health performance metrics.

I am very keen to see this work progress and ask for your continued support in prioritising this moving forward.

In the absence of Ministers in Northern Ireland, I am copying this letter to the Department of Health in Northern Ireland and the Secretary of State for Northern Ireland.

Yours sincerely,

RT HON STEVE BARCLAY MP