**FOI Ref: 6206**

**Category(ies): Clinical – Performance Data**

**Subject: Non-Urgent Hospital Treatment**

**Date Received: 26/01/2022**

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| **Your request:** | **Our response:** |
| 1. The number of people currently waiting for non-urgent hospital treatment
 | There were 21,496 patients waiting for treatment at the Trust at the end of December 2021. These are not all broken down into urgent and routine patients, as this will be dependent on the clinical prioritisation decision made at the first (and subsequent) appointments. |
| 1. The latest copy of the plan to tackle this waiting list (this could be a project plan in Gantt chart format or product flow format or it could be an OGIM type document (Objectives, Goals, Initiatives, Metrics)
 | There is no plan available in this format. We have had to work in an incredibly flexible and agile manner, resetting our plan on a very regular basis.  |
| 1. The latest copy of an internal document describing progress against plan to tackle this waiting list
 | As an organisation TRFT has been under considerable pressure with more patients requiring inpatient emergency care than we have seen previously. This has been compounded by a sudden peak in demand for Covid care over the last several weeks, such that we have recently had the highest numbers of Covid patients in beds for over a year.  At the same time, when we needed the staff to be available on the ward areas, the number of staff off sick or unavailable for work over the past 2 months has hit a local high. Compounding this we have seen a month-on-month increase in patients staying for 3 weeks or more; this number has peaked at over 90 in early January. These factors combined necessitated closing elective capacity, pulling staff from our planned care work and asking them to support our emergency pathways. The demand on the staff across the Trust has been the highest we have ever seen and we can only thank them for their hard work and dedication.This phenomenal workload, the demands on the frontline staff, the reduced ability to create beds at times of need has resulted in longer waits for emergency and elective care, something we are always concerned about. We will do our best to ensure that patients waiting long times are informed of the long waits and we ask that the public remain patient and show the understanding that we have come to recognise during these unprecedented times.To respond to these challenges, we continue to review our bed capacity on a daily basis, with the aim to open our elective beds as soon as possible, when some of the pressures discussed above reduce. In the meantime, we continue to see as many patients as possible in an outpatient setting, as well as treating our most urgent patients. |