

From: **[redacted - s.38(1)(b)]**
Directorate for Chief Operating Officer
22 May 2025

PS/Cabinet Secretary for Health and Social Care

**NHS WAITING TIMES - STAGE OF TREATMENT; DIAGNOSTICS - QUARTER
ENDING 31 MARCH 2025**

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NOP Long waits targets

The long wait targets, set in July 2022, are to eliminate:

- two year waits for outpatients in most specialities by the end of August 2022
- 18 months for outpatients in most specialities by the end of December 2022
- one year for outpatients in most specialities by the end of March 2023

No patients waiting over 52 weeks by end of March 2026, set in December 2024.

52 weeks

- In relation to the target to eradicate the number of new outpatients waiting over one year to be seen in most specialities by the end of March 2023, at March 2025 there were 63,406 waits longer than 52 weeks. This is a 1.8% increase compared to the previous quarter (62,306) and a 77.5% increase compared to June 2022 (35,715) when the long waits targets were announced.
- The specialties with the highest numbers waiting over 52 weeks were Dermatology (10,129), up 103.4% since June 2022 (4,979), Ear, Nose & Throat, (8,631), up 195.3% since June 2022 (2,923), and General Surgery (7,880), up 53.6% since June 2022 (5,130).

78 weeks

- Of the NOP ongoing waits, 19,889 were waiting longer than 78 weeks. This is a 7.0% increase compared to the previous quarter (18,594) and a 122.1% increase compared to June 2022 (8,954) when the long waits targets were announced.
- The specialties with the highest number waiting over 78 weeks were Dermatology (5,359), up 337.8% since June 2022 (1,224), General Surgery, (2,812), up 138.3% since June 2022 (1,180), and Gynaecology (2,442), up 173.5% since June 2022 (893).

104 weeks

- Of the NOP ongoing waits, 5,262 were waiting longer than 104 weeks. This is a 13.2% increase compared to the previous quarter (4,647) and a 85.2% increase compared to June 2022 (2,841) when the long waits targets were announced.
- Largest numbers of waits over 2 years were seen in Dermatology (2,297), up 1148.4% since June 2022 (184), Urology, (740), up 13.0% since June 2022 (655), and General Surgery (501), up 78.3% since June 2022 (281).
- **There were 112 patient waits more than three years at the end of March 2025, 31.7% lower than the previous quarter (164).**

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TTG Long waits targets (ongoing waits)

The long wait targets, set July 2022, are to eliminate:

- two years for inpatient / day-cases in most specialties by the end of Sep 2022
- 18 months for inpatient / day-cases in most specialties by the end of Sep 2023
- one year for inpatient / day-cases in most specialties by the end of Sep 2024

No patients waiting over 52 weeks by end of March 2026, set in December 2024.

52 Weeks

- The next long waits target was due on 30 September 2024, aiming to eliminate waits over 52 weeks for most specialties. Of the IPDC ongoing waits, 38,702 were waiting longer than 52 weeks. This is a -0.2% decrease compared to the previous quarter (38,766) and a 12.7% increase compared to June 2022 (34,334) when the long waits targets were announced.
- The specialties with the highest numbers waiting over 52 weeks were in Orthopaedics (11,577), down 3.2% since June 2022 (11,963), General Surgery (5,788), down 15.4% since June 2022 (6,838), and Ear, Nose & Throat (5,126), up 30.7% since June 2022 (3,921).

78 Weeks

- The latest long-waits target was due 30 September 2023 and aimed to eliminate waits over 78 weeks for most inpatient and day-case specialties. At 31 March 2025 there were 18,181 were waiting longer than 78 weeks. This is a 0.4% increase compared to the previous quarter (18,109) and a 2.4% increase compared to June 2022 (17,750) when the long waits targets were announced.
- Largest numbers of waits over 78 weeks are in Orthopaedics (4,494), down 22.4% since June 2022 (5,790), General Surgery, (2,735), down 26.3% since June 2022 (3,713), and Gynaecology (2,592), up 114.0% since June 2022 (1,211).

104 Weeks

- Of the IPDC ongoing waits, 7,969 were waiting longer than 104 weeks. This is a 6.3% increase compared to the previous quarter (7,499) and a **-16.0% decrease compared to June 2022 (9,488) when the long waits targets were announced.**

- Largest numbers of waits over 2 years are in Gynaecology (1,432), up 136.7% since June 2022 (605), Orthopaedics (1,426), down 45.4% since June 2022 (2,614), and Urology (1,338), up 6.8% since June 2022 (1,253).
- There were 1,518 patient waits more than three years at the end of March 2025, a 1.3% increase (20) from the previous quarter (1,498).

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Planned Care Recovery

1. As reported in a recent GIQ, NHS Boards have exceeded the commitment to deliver 64,000 appointments and procedures in 2024-25, funded through the £30m investment. Boards have reported delivery of 105,500 appointments and procedures as follows; over 15,800 new outpatient appointments, almost 10,700 surgeries and almost 79,000 diagnostic procedures.
2. As part of the £100m for planned care, Boards have been commissioned to commence activity, based on proposals received earlier this year, which contribute towards the March 2026 target - no patient should be waiting longer than 52 weeks. Boards have also been commissioned to deliver additional imaging and endoscopy in 25/26. Proposals sit alongside the national plans already developed for specialities such as orthopaedics and imaging. Board reporting on the activity will commence in June.
3. This activity is being delivered through additional weekend working, traditional waiting lists initiatives, including locum use, mobile scanners, extended theatre utilisation locally and through the National Treatment Centres, regional and national working, and additional clinics for outpatients. An element of the funding is recurring to build a sustainable workforce for planned care.
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Directorate for Chief Operating Officer
22 May 2025

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NHS WAITING TIMES AND WAITING LISTS: 31 March 2025

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**OFFICIAL SENSITIVE – STATISTICS EMBARGOED UNTIL 9:30,
TUESDAY 27 MAY 2025**

1. The table below shows the numbers of **ongoing waits** for a new outpatient appointment at 31 March 2025, including numbers waiting over 12, 52, 78 and 104 weeks, broken down by NHS Board.

| NHS Board; OP waiting (Ongoing Waits) | Number on waiting list | Number waiting over 12 weeks | Number waiting over 52 weeks | Number waiting over 78 weeks | Number waiting over 104 weeks | % Waiting over 52 weeks |
|--|-------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------------------|--------------------------------|
| Golden Jubilee National Hospital | 2,167 | 1,678 | 345 | 23 | 1 | 15.9% |
| NHS Ayrshire & Arran | 53,918 | 34,717 | 11,240 | 4,453 | 1,173 | 20.8% |
| NHS Borders | 11,253 | 7,322 | 1,393 | 440 | 154 | 12.4% |
| NHS Dumfries & Galloway | 13,718 | 7,084 | 175 | 39 | 14 | 1.3% |
| NHS Fife | 29,044 | 16,700 | 4,702 | 1,448 | 188 | 16.2% |
| NHS Forth Valley | 14,375 | 3,239 | 145 | 68 | 40 | 1.0% |
| NHS Grampian | 56,118 | 32,435 | 8,437 | 3,752 | 1,692 | 15.0% |
| NHS Greater Glasgow & Clyde | 160,023 | 93,640 | 5,485 | 0 | 0 | 3.4% |
| NHS Highland | 25,875 | 15,638 | 4,630 | 1,464 | 115 | 17.9% |
| NHS Lanarkshire | 57,995 | 36,414 | 5,510 | 487 | 0 | 9.5% |
| NHS Lothian | 96,255 | 59,238 | 17,319 | 6,738 | 1,813 | 18.0% |
| NHS Orkney | 1,606 | 882 | 141 | 28 | 1 | 8.8% |
| NHS Shetland | 1,524 | 655 | 47 | 6 | 2 | 3.1% |
| NHS Tayside | 34,548 | 18,076 | 3,829 | 943 | 69 | 11.1% |
| NHS Western Isles | 1,323 | 349 | 8 | 0 | 0 | 0.6% |
| NHS Scotland | 559,742 | 328,067 | 63,406 | 19,889 | 5,262 | 11.3% |

The Boards with the highest percentage of outpatient waits over 52 weeks were NHS Ayrshire & Arran (20.8%, 11,240) and NHS Lothian (18.0%, 17,319); followed by NHS Highland (17.9%, 4,630) and NHS Fife (16.2%, 4,702).

**OFFICIAL SENSITIVE – STATISTICS EMBARGOED UNTIL 9:30,
TUESDAY 27 MAY 2025**

2. The table below shows the number of ongoing waits over 52 weeks for a new outpatient appointment, by specialty, at 30 June 2022 and 31 March 2025.

| Specialty | Number waiting over 52 weeks | |
|---------------------------|------------------------------|---------------|
| | 30 June 2022 | 31 March 2025 |
| All Specialties | 35,715 | 63,406 |
| Allergy | 0 | 0 |
| Anaesthetics | 11 | 165 |
| Cardiology | 481 | 672 |
| Cardiothoracic Surgery | 5 | 1 |
| Chemical Pathology | 0 | 1 |
| Clinical Genetics | 2 | 7 |
| Clinical Neurophysiology | 2 | 8 |
| Clinical Oncology | 4 | 5 |
| Community Dental Practice | 63 | 0 |
| Dermatology | 4,979 | 10,129 |
| Diagnostic Radiography | 0 | 0 |
| Ear, Nose & Throat | 2,923 | 8,631 |
| Endocrinology & Diabetes | 1,193 | 1,041 |
| Gastroenterology | 2,962 | 1,491 |
| General Medicine | 238 | 81 |
| General Surgery | 5,130 | 7,880 |
| Geriatric Medicine | 11 | 10 |
| GP | 676 | 9 |
| Gynaecology | 3,781 | 7,684 |
| Haematology | 33 | 580 |
| Immunology | 4 | 5 |
| Infectious Diseases | 5 | 4 |
| Medical Oncology | 0 | 0 |
| Neurology | 1,583 | 2,765 |
| Neurosurgery | 194 | 527 |
| Ophthalmology | 5,551 | 6,979 |
| Oral Medicine | 111 | 1,219 |
| Oral Surgery | 4 | 571 |
| Orthodontics | 15 | 118 |
| Orthopaedics | 756 | 4,849 |
| Paediatric Dentistry | 1 | 2 |
| Paediatric Surgery | 463 | 16 |
| Paediatrics | 293 | 364 |
| Palliative Medicine | 0 | 0 |
| Plastic Surgery | 124 | 965 |
| Rehabilitation Medicine | 1 | 60 |
| Renal Medicine | 131 | 62 |
| Respiratory Medicine | 1,317 | 1,113 |
| Restorative Dentistry | 13 | 4 |
| Rheumatology | 204 | 644 |
| Urology | 2,450 | 4,741 |

NHS WAITING TIMES AND WAITING LISTS: 31 March 2025

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3. The table below shows the numbers of **ongoing waits** for an admission covered by the TTG at 31 March 2025, broken down by length of wait and NHS Board.

| NHS Board; TTG patients waiting (ongoing waits) | Number on waiting list | Number waiting over 12 weeks | Number waiting over 52 weeks | Number waiting over 78 weeks | Number waiting over 104 weeks | % Waiting over 52 weeks |
|--|-------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------------------|--------------------------------|
| Golden Jubilee National Hospital | 3,754 | 810 | 37 | 3 | 1 | 1.0% |
| NHS Ayrshire & Arran | 8,097 | 5,039 | 1,702 | 676 | 248 | 21.0% |
| NHS Borders | 2,271 | 1,469 | 428 | 148 | 28 | 18.8% |
| NHS Dumfries & Galloway | 5,192 | 3,577 | 763 | 179 | 10 | 14.7% |
| NHS Fife | 8,759 | 5,069 | 662 | 79 | 11 | 7.6% |
| NHS Forth Valley | 6,756 | 4,161 | 564 | 111 | 24 | 8.3% |
| NHS Grampian | 13,788 | 9,683 | 4,580 | 2,750 | 1,664 | 33.2% |
| NHS Greater Glasgow & Clyde | 50,452 | 36,296 | 16,282 | 8,021 | 3,437 | 32.3% |
| NHS Highland | 6,358 | 3,148 | 1,010 | 558 | 347 | 15.9% |
| NHS Lanarkshire | 13,004 | 8,286 | 2,174 | 811 | 341 | 16.7% |
| NHS Lothian | 22,762 | 15,826 | 5,853 | 2,274 | 545 | 25.7% |
| NHS Orkney | 287 | 118 | 4 | 1 | 1 | 1.4% |
| NHS Shetland | 308 | 147 | 16 | 8 | 2 | 5.2% |
| NHS Tayside | 16,281 | 11,675 | 4,625 | 2,562 | 1,310 | 28.4% |
| NHS Western Isles | 367 | 91 | 2 | 0 | 0 | 0.5% |
| NHS Scotland | 158,436 | 105,395 | 38,702 | 18,181 | 7,969 | 24.4% |

**OFFICIAL SENSITIVE – STATISTICS EMBARGOED UNTIL 9:30,
TUESDAY 27 MAY 2025**

The highest percentage of TTG waits 52 weeks and over were reported in NHS Grampian (33.2%, 4,580), NHS Greater Glasgow & Clyde (32.3%, 16,282) and NHS Tayside (28.4%, 4,625).

4. The table below shows the 10 TTG specialties with the largest waiting lists at 31 March 2025, including numbers waiting over 12, 52, 78 and 104 weeks.

| Specialty; TTG Patients Waiting (Ongoing Waits) | Number on waiting list | Number waiting over 12 weeks | Number waiting over 52 weeks | Number waiting over 78 weeks | Number waiting over 104 weeks | % Waiting over 52 weeks |
|--|-------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------------------|--------------------------------|
| Orthopaedics | 45,238 | 32,896 | 11,577 | 4,494 | 1,426 | 25.6% |
| Ophthalmology | 24,958 | 13,690 | 2,511 | 758 | 232 | 10.1% |
| General Surgery | 24,078 | 15,496 | 5,788 | 2,735 | 1,100 | 24.0% |
| Ear, Nose & Throat | 15,806 | 11,529 | 5,126 | 2,578 | 1,186 | 32.4% |
| Urology | 13,137 | 8,732 | 4,012 | 2,470 | 1,338 | 30.5% |
| Gynaecology | 12,825 | 9,417 | 4,564 | 2,592 | 1,432 | 35.6% |
| Plastic Surgery | 6,907 | 4,689 | 2,160 | 1,212 | 616 | 31.3% |
| Cardiology | 3,729 | 1,620 | 158 | 43 | 2 | 4.2% |
| Paediatric Surgery | 2,683 | 1,990 | 952 | 544 | 297 | 35.5% |
| Community Dental Practice | 1,766 | 1,374 | 518 | 172 | 21 | 29.3% |

The largest list sizes for TTG were reported in Orthopaedics (45,238), Ophthalmology (24,958) and General Surgery (24,078).

5. The table below shows the number of ongoing waits longer than two years and over 18 months for IPDC treatment, by Specialty, at 30 June 2022 (just before announcement of long waits targets) and 31 March 2025 (latest).

| Specialty | Waiting over 18 months (78 weeks) | | Waiting over two years (104 weeks) | |
|---------------------------|--|--------------------------|---|--------------------------|
| | 30 June 2022 | 31 March 2025 | 30 June 2022 | 31 March 2025 |
| All Specialties | 17,750 | 18,181 | 9,488 | 7,969 |
| Anaesthetics | 20 | 5 | 5 | 2 |
| Cardiology | 27 | 43 | 6 | 2 |
| Cardiothoracic Surgery | 19 | 41 | 9 | 21 |
| Clinical Oncology | 1 | 3 | 0 | 3 |
| Clinical Radiology | 0 | 1 | 0 | 0 |
| Community Dental Practice | 78 | 172 | 15 | 21 |
| Dermatology | 0 | 1 | 0 | 1 |
| Ear, Nose & Throat | 2,412 | 2,578 | 1,583 | 1,186 |
| Endocrinology & Diabetes | 0 | 1 | 0 | 0 |
| Gastroenterology | 2 | 3 | 0 | 1 |
| General Medicine | 0 | 1 | 0 | 1 |
| General Surgery | 3,713 | 2,735 | 2,164 | 1,100 |
| GP | 0 | 0 | 0 | 0 |
| Gynaecology | 1,211 | 2,592 | 605 | 1,432 |
| Haematology | 2 | 8 | 2 | 1 |
| Infectious Diseases | 0 | 0 | 0 | 0 |
| Medical Oncology | 1 | 1 | 0 | 0 |
| Neurology | 0 | 2 | 0 | 0 |
| Neurosurgery | 300 | 318 | 140 | 208 |
| Ophthalmology | 303 | 758 | 166 | 232 |
| Oral Surgery | 81 | 29 | 35 | 3 |
| Orthopaedics | 5,790 | 4,494 | 26 | 37 |
| Paediatric Dentistry | 30 | 114 | 0 | 7 |
| Paediatric Surgery | 598 | 544 | 344 | 297 |
| Paediatrics | 2 | 9 | 518 | 616 |
| Plastic Surgery | 884 | 1,212 | 1 | 1 |
| Renal Medicine | 1 | 5 | 2 | 1 |
| Respiratory Medicine | 2 | 6 | 0 | 0 |
| Rheumatology | 0 | 0 | 2,614 | 1,426 |
| Urology | 2,273 | 2,470 | 1,253 | 1,338 |

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Health, Social Care and Sport Committee
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6 July 2022

I am writing to advise the Health, Social Care and Sport Committee that later today I will announce new targets to eliminate long waits for planned care. The targets are to eliminate:

- two year waits for outpatients in most specialities by the end of August 2022
- 18 months for outpatients in most specialities by the end of December 2022
- one year for outpatients in most specialities by the end of March 2023
- two years for inpatient / daycases in most specialities by the end of September 2022
- 18 months for inpatient / daycases in most specialities by the end of September 2023
- one year for inpatient / daycases in most specialities by the end of September 2024

I am in no doubt these targets are ambitious and will require a strong focussed approach to successfully achieve them. NHS Scotland continues to experience extreme pressure and a high level of uncertainty remains over future waves of the pandemic. However, we need to build a system that can live with the virus, which does not impact on the delivery of services such as planned care. Managing long waits must be central to this as we move towards delivering our ambition to protect, stabilise and recover planned care.

A letter has also been issued to Board Chief Executives today setting out the direction of travel. Delivery of these targets will be done through a joined up NHS Scotland approach. We will work closely with Boards, including the NHS Golden Jubilee and the Centre for Sustainable Delivery, to map the areas of greatest challenge in order to maximise support for these Boards. We will do this in various ways including through maximising theatre sessions, cross boundary working, regionally and nationally, and maximising efficiencies.

Scottish Ministers, special advisers and the Permanent Secretary are covered by the terms of the Lobbying (Scotland) Act 2016. See www.lobbying.scot

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We will put in place a robust governance process to provide strategic direction for the programmes of work, monitoring progress, and supporting local boards to embed improvements, including the introduction of new ways of delivering care that will create additional capacity.

You will also be aware that a review of the National Waiting Times Guidance is already underway. Where we are required to amend policy to provide Boards with the flexibility to work regionally or nationally then this will be expedited and updates made retrospectively as required.

I look forward to updating the Committee on our progress towards meeting these targets in the near future.

Kind regards

HUMZA YOUSAF

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Official Sensitive

Health Performance & Delivery
30 June 2022

Cabinet Secretary for Health & Social Care

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From: [redacted - s.38(1)(b)]gov.scot> On Behalf Of Cabinet Secretary for Health and Social Care

Sent: 30 June 2022 07:13

To: [redacted - s.38(1)(b)]gov.scot>; Cabinet Secretary for Health and Social Care

<CabSecHSC@gov.scot>; [redacted - s.38(1)(b)]gov.scot>

Cc: DG Health & Social Care <DGHSC@gov.scot>; Lamb C (Caroline)

<Caroline.Lamb@gov.scot>; Burns J (John) <John.Burns@gov.scot>; Permanent Secretary

<PermanentSecretary@gov.scot>; [redacted - s.38(1)(b)]@gov.scot>; [redacted -

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[redacted - s.38(1)(b)]@gov.scot>

Subject: RE: Long Waits Targets meeting

Hi [redacted - s.38(1)(b)]

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Deputy Private Secretary - Cabinet Secretary for Health and Social Care, Humza Yousaf MSP

Scottish Government, [redacted - s.38(1)(b)], St Andrews House, Regent Road, Edinburgh, EH1 3DG

[redacted - s.38(1)(b)]

E-mail: CabSecHSC@gov.scot

From: [redacted - s.38(1)(b)] @gov.scot>

Sent: 29 June 2022 16:28

To: Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>

Cc: DG Health & Social Care <DGHSC@gov.scot>; Lamb C (Caroline)

<Caroline.Lamb@gov.scot>; Burns J (John) <John.Burns@gov.scot>; Permanent Secretary

<PermanentSecretary@gov.scot>; [redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)]

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Subject: RE: Long Waits Targets meeting

Hi [redacted - s.38(1)(b)]

Following our meeting with Cab Sec on Monday [redacted - s.30(b)(i)].

We have provisional arrangements in place for a visit to support announcement on Monday 4 July and have prepared the GIQ, which would be lodged tomorrow afternoon to align with the announcement.

If the Cabinet Secretary is content with the revised targets I will submit the update to FM for her clearance.

Thank you

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)] | Directorate for Health Performance and Delivery| Scottish Government
| [redacted - s.38(1)(b)] St Andrews House

| Edinburgh | EH1 3DG | [redacted - s.38(1)(b)] | [redacted - s.38(1)(b)]

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Media briefing for NHS Waiting Times

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| What | NHS Waiting times, media have come to ask about the published stats about outpatient, diagnostic and inpatient / day case waiting times. |
| Where | Zoom |
| When | Tuesday 27 th May 16:00 an 16:10 |
| Who | BBC Rep Scotland- Claire McAllister or Lisa Summers STV- Oliver Wright |
| Why | The interview is an opportunity to highlight work ongoing to tackle NHS waiting times and diagnostics through the NHS Operational Plan and increased budget. |
| Comms support | N- comms cannot sit in on pre-recs using zoom as broadcast say its does not work |
| Briefing contents | Annex A – Key points to get across and thematic lines to take; areas of challenge and lines to take; related background lines Annex B – Lines on other ‘Hot Topics’ (to be supplied by Comms) |

KEY POINTS TO GET ACROSS AND THEMATIC LINES TO TAKE

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NHS Boards have exceeded the commitment to deliver 64,000 appointments and procedures in 2024-25, funded through our additional investment of £30 million to drive action to address the longest waits. Boards have reported delivery of 105,500 appointments and procedures, as follows:

- Over 15,800 new outpatient appointments;
- almost 10,700 surgeries; and
- almost 79,000 diagnostic procedures delivered.

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Long waits are regrettable, but we are committed to providing further reductions.

We will deliver over 150,000 extra appointments and procedures in the coming year which will ensure people receive the care they need as quickly as possible

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NHS Scotland waits of more than two years on the rise- BBC News

- 'I feel forgotten after 100 weeks on urgent surgery list'

Health

ISSUE *A woman in West Dunbartonshire has been on a waiting list for urgent surgery on an ovarian cyst for 100 weeks.*

RESPONSE

Women’s Health Minister Jenni Minto said:

“Women’s health is key priority for the Scottish Government, and we were the first country in the UK to publish a Women’s Health Plan, which aims to reduce inequalities in health outcomes for women, in August 2021. Timely access to gynaecology services will be a priority in the next phase of our plan.

“Excessively long waits are not acceptable, and I sympathise with any patient whose treatment has failed to reach the standards we all expect from our health system. We are working intensively with NHS boards to reduce the length of time people are waiting for appointments and treatment.

“In 2024-25, we allocated around £630,000 to gynaecology from our £30 million targeted investment in planned care, delivering around 3,300 additional appointments and procedures. Our 2025-26 Budget provides a record £21 billion for health and social care, with almost £200 million to reduce waiting lists and improve capacity, and gynaecology is being targeted as a key priority area for additional funding.”

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MINISTERIAL ENGAGEMENT BRIEFING: CABINET SECRETARY FOR HEALTH AND SOCIAL CARE, HUMZA YOUSAF

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| <p><i>Engagement Title</i></p> | <p>Visit to NHS Forth Valley to announce the opening of the new Urology Hub.</p> |
| <p><i>Organisation/Venue and full address including postcode</i></p> | <p>Forth Valley Royal Hospital Stirling Rd, Larbert FK5 4WR</p> |
| <p><i>Parking</i></p> | <p>A small number of car parking spaces will be cordoned off in the pick-up and drop-off area in the turning circle at the front of the hospital.</p> |
| <p><i>Date and time of Engagement</i></p> | <p>Date: Monday 11 July, 2022 Time(s): 10:00 – 11:00</p> |
| <p><i>Background/Purpose</i></p> | <p>Media visit to announce the opening of the new dedicated Urology Hub in Forth Valley Royal Hospital. You will meet the Chief Executive and Directors along with staff from the Urology Dept. Comms opportunities will take place in the urology hub.</p> |
| <p><i>Relevance to Core Script</i></p> | <p>The visit is consistent with the National Performance Indicator: <i>“We cherish and protect the NHS as a force for good in our lives and provide the necessary investment and planning to ensure our health and social care systems are viable over the long term”</i></p> |
| <p><i>Briefing</i></p> | <p>A pack is provided with lines to take and background briefing.</p> |
| <p><i>Media Handling</i></p> | <p>The Communications Healthier Team has produced a news release, which will be issued at the end of the visit (around 11am), announcing the new Forth Valley Urology Hub, with accompanying social media posts. Broadcast media will be invited to the visit at the urology department for interview opportunities with the Cab Sec.</p> |

ANNEX A

ATTENDEES & PROGRAMME

| Timings | Details | Lead/ Attendees | Venue |
|----------------------|---|---|------------------------|
| 10:00 – 10:05 hrs | Introductions | [redacted - s.38(1)(b)], [redacted - s.38(1)(b)], [redacted - s.38(1)(b)], [redacted - s.38(1)(b)] | Outside main entrance |
| 10:05 – 10:10 hrs | Introductions / Ambulatory Care Centre Visit | [redacted - s.38(1)(b)], [redacted - s.38(1)(b)], [redacted - s.38(1)(b)] and [redacted - s.38(1)(b)] | Ambulatory Care Centre |
| 10:10 – 10:40 hrs | Urology Hub Visit Comms opportunity | [redacted - s.38(1)(b)], [redacted - s.38(1)(b)] | Urology Hub |
| 10:40 – 11:00 hrs | Media interviews | Cabinet Secretary and members of the Urology team. | Urology Hub |

* [redacted - s.38(1)(b)], ANP (who will be running a flexible cystoscopy list that morning), [redacted - s.38(1)(b)], ANP (who has been trained to carry out TRUS biopsies), [redacted - s.38(1)(b)], Operational Manager, [redacted - s.38(1)(b)], Senior Charge Nurse, [redacted - s.38(1)(b)], [redacted - s.38(1)(b)] and [redacted - s.38(1)(b)] from the Urology Nursing Team.

***Subject to patient consent*

NHS Forth Valley attendees

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]
Acting Director of Acute Services

[redacted - s.38(1)(b)]
Associate Medical Director

ANNEX B

Background Brief – Forth Valley Urology Hub

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The creation of a new Urology Hub at Forth Valley Royal Hospital (with three dedicated treatment rooms and two patient recovery bays) provides a one stop diagnostic and treatment service for local patients and also enabled procedures, such as circumcisions, to be taken out of a theatre environment, to increase outpatient/day case capacity and free theatre slots for more complex surgical operations. Prior to the creation of the new Urology Hub, urology procedures were carried out in either theatres or in the minor operation area within Ambulatory Care where it had to compete for space alongside all other minor operations. The Board's ability to flexibly change their capacity to suit demand is at the heart of their service redesign, and the Urology Hub, along with improved patient information and data, has enabled them to develop this flexibility further, without impacting on other services. This ensures that they can change and adapt the services they provide according to patient demand, which in turn, has enabled them to reduce their outpatient waiting list substantially, despite the pressures of the Covid-19 pandemic as illustrated in the graph below.

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MEDIA PROMPTS

Announcement of New Forth Valley Urology Hub

- I am delighted to be here today to announce the opening of new dedicated Urology Hub in the Forth Valley Royal Hospital.
- The new urology diagnostic hub at Forth Valley Royal Hospital will allow the expertise of the entire team to be based in the one area, benefitting both patients and staff.
- The delivery of more Urology Diagnostic Hubs is one of the key components of the Endoscopy and Urology Diagnostic Recovery and Renewal Plan launched by Scottish Government in November 2021.
- I would like to thank the NHS Forth Valley team for their continued hard work and determination to progress the new Hub during a time of continued significant pressure.
- Creating Diagnostic Urology Hubs will provide a one stop diagnostic and treatment service for local patients and will reduce waiting times for those with a suspicion of cancer, as well as routine patients.

KEY LINES TO TAKE

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PLANNED CARE TARGETS

- We know that long waiting times have grown as a result of the pandemic, which is why we now need to focus on treating people that are waiting too long for treatment.
- **That's why we've introduced a new set of targets for NHS Scotland to address the backlog of planned care, including the most ambitious target in the UK to eliminate one year waits.**
- The targets are to eliminate:
 - two year waits for outpatients in most specialities by the end of August 2022
 - two years for inpatient / daycases in the majority of specialities by September 2022
 - one year for inpatient / daycases in the majority of specialities by September 2024
- These targets are very ambitious and will require a strong focussed approach to successfully achieve them.
- **It is important to note that a small number of patients will be unable to have their procedure within these timeframes for personal or clinical reasons.**
- **Patients will be offered appointments as local as possible but some may be offered alternatives outwith their local health board area to reduce waiting**

times, for example, the Golden Jubilee University National Hospital or at National Treatment Centres as they become operational over the next year.

- The National Clinical Prioritisation Framework was also updated last month to provide flexibility in managing waiting lists, to ensure any patient waiting over two years is prioritised and treated, as well as those who require urgent clinical care.
- I'm in no doubt that NHS Scotland continues to experience extreme pressure and that significant uncertainty remains over future waves of the pandemic. **However, we need to rebuild a system that can live with the virus, which does not impact on the delivery of acute services such as planned care. Managing long waits must be central to this as we move towards delivering our ambition to protect, stabilise and recover planned care.**
- We have written to Boards to set out their funding allocations for 2022/23, which will support delivery of plans to achieve the targets.
- We are clear that delivery of these targets cannot be achieved local Boards alone, and must be delivered through a joined up NHS Scotland approach. We will be working closely with them, and the Centre for Sustainable Delivery to develop a clear plan which will include:
 - cross boundary working, regional and national
 - maximising theatres sessions and reducing fallow sessions
 - expanding utilising of theatres out with the local board
 - exploring options to extend working, including weekends
 - maximising efficiencies
 - robust management of waiting list
 - maximise insourcing / outsourcing opportunities
 - acceleration of high impact changes and innovation including ACRT (Active Clinical Referral Triage) and opt in PIR (Patient Initiated Review).

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ANNEX E

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MINISTERIAL ENGAGEMENT BRIEFING: CABINET SECRETARY FOR HEALTH AND SOCIAL CARE, HUMZA YOUSAF

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| <i>Engagement Title</i> | Media Visit to Theatre 6 in Inverclyde Royal Hospital to announce new targets to eliminate long waits for planned care. |
| <i>Organisation/Venue and full address including postcode</i> | Royal Hospital, Larkfield Road, Greenock PA16 0XN |
| <i>Parking</i> | Parking Space provided for Cabinet Secretary's car after drop of at main entrance of Inverclyde Royal Hospital. |
| <i>Date and time of Engagement</i> | Date: Monday 4 July 2022 Time(s): 12:00 – 13:00 |
| <i>Background/Purpose</i> | <p>Media visit to announce targets:</p> <ul style="list-style-type: none"> ▪ Health boards will aim to eradicate waits of more than two years in most specialities by: <ul style="list-style-type: none"> • the end of August 2022 for outpatients, and • the end of September 2022 for inpatient / daycases ▪ One year waits in most specialities for inpatient / daycases will be eradicated by September 2024. |
| <i>Relevance to Core Script</i> | The visit is consistent with the National Performance Indicator: <i>"We cherish and protect the NHS as a force for good in our lives and provide the necessary investment and planning to ensure our health and social care systems are viable over the long term"</i> |
| <i>Briefing</i> | A pack is provided with lines to take and background briefing. |
| <i>Media Handling</i> | <p>A news release setting out the new targets, with the top line that Scotland will be issued on Monday morning, ahead of the visit. Broadcast media will be invited to the visit at for interview opportunities with the Cab Sec.</p> <p>[redacted - s.38(1)(b)] for press. [redacted - s.38(1)(b)] for event management</p> |

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| <i>Official Support/ Contact Details</i> | [redacted - s.38(1)(b)] , Team Leader – Planned Care Policy & Performance [redacted - s.38(1)(b)] |
| <i>Programme For the Visit</i> | ANNEX A: Attendees & Programme ANNEX B: Background ANNEX C: Media Prompts ANNEX D: NHS GG&C FMQ ANNEX E: Waiting Times Data |

ATTENDEES & PROGRAMME

NHS Greater Glasgow & Clyde attendees

- [redacted - s.38(1)(b)], Chief Executive, NHSGGC
- [redacted - s.38(1)(b)], Clyde Sector Director
- [redacted - s.38(1)(b)], Lead Nurse, Theatres
- [redacted - s.38(1)(b)], Consultant Diabetes & Endocrinology
- [redacted - s.38(1)(b)], Consultant Anaesthetist & Lead for the IRH Surgical Hub Development
- [redacted - s.38(1)(b)], Consultant Orthopaedic Surgeon & Clinical Director
- [redacted - s.38(1)(b)], Senior Charge Nurse, Recovery & Anaesthetics

- [redacted - s.38(1)(b)] for Greenock and Inverclyde (Constituency) will also be in attendance.

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ORTHOPAEDICS

- Orthopaedic patients have been adversely affected by the pandemic with patients waiting for long period particularly for inpatient surgery. In March 2019 there were 21,777 patients on the waiting list compared with 42,256 in June 2022. 2718 patients are waiting over 2 years for surgery.
- Long waits for hip and knee arthroplasty in particular have been shown to disadvantage patients.
- Mr Yousaf met with senior Orthopaedic Consultants in March 2022 and understood the advantages of insulating capacity for planned care. This includes consistent workforce as well as available theatres and inpatient beds. This capacity when separate from unscheduled care has been proven to work consistently and efficiently.
- Good progress has been made in Orthopaedic Services with the redesign of the outpatient pathway. This is through the adoption of ACRT (Active Clinical Referral Triage) and opt in PIR (Patient Initiated Review).

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Planned Care Targets

- We know that long waiting times have grown as a result of the pandemic, which is why we now need to focus on treating people that are waiting too long for treatment.
- That's why we're introducing a new set of targets for NHS Scotland to address the backlog of planned care that has built up as a result of the pandemic, including the most ambitious target in the UK to eliminate one year waits.
- The targets are to eliminate:
 - two year waits for outpatients in most specialities by the end of August 2022
 - two years for inpatient / daycases in the majority of specialities by September 2022
 - one year for inpatient / daycases in the majority of specialities by September 2024
- These targets are very ambitious and will require a strong focussed approach to successfully achieve them. However it is important to note that a small number of patients will be unable to have their procedure within these timeframes for personal or clinical reasons.
- Patients will be offered appointments as local as possible but some may be offered alternatives outwith their local health board area to reduce waiting times, for example, the Golden Jubilee University National Hospital or at National Treatment Centres as they become operational over the next year.
- The National Clinical Prioritisation Framework was also updated last month to provide flexibility in managing waiting lists, to ensure any patient waiting over two years is prioritised and treated, as well as those who require urgent clinical care.

Q&A

Q: Are these targets deliverable?

A: I am in no doubt these targets are very ambitious and will require a strong focussed approach to successfully achieve them.

Q: What about the comments made by the outgoing BMA Scotland Chairman last week about 'politicians banging out ridiculous targets and timescales?'

A: I'm in no doubt that NHS Scotland continues to experience extreme pressure and that significant uncertainty remains over future waves of the pandemic.

However, we need to rebuild a system that can live with the virus, which does not impact on the delivery of acute services such as planned care. Managing long waits must be central to this as we move towards delivering our ambition to protect, stabilise and recover planned care.

Q: What support will the Scottish Government give to achieve the aims?

A: I am clear that delivery of these targets cannot be achieved local Boards alone, and must be delivered through a joined up NHS Scotland approach.

We will be working closely with them, and the Centre for Sustainable Delivery to develop a clear plan which will include:

- cross boundary working, regional and national
- maximising theatres sessions and reducing fallow sessions
- expanding utilising of theatres out with the local board
- exploring options to extend working, including weekends
- maximising efficiencies
- robust management of waiting list
- maximise insourcing / outsourcing opportunities
- acceleration of high impact changes and innovation including ACRT (Active Clinical Referral Triage) and opt in PIR (Patient Initiated Review).

Q: Will Boards be given additional funding to deliver the targets?

A: We will write to Boards next week to set out their funding allocations for 2022/23, which will support delivery of plans to achieve the targets.

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MINISTERIAL ENGAGEMENT BRIEFING: CABINET SECRETARY FOR HEALTH AND SOCIAL CARE, HUMZA YOUSAF

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| <p><i>Engagement Title</i></p> | <p>Media Visit to Ward 8, Perth Royal Infirmary to announce new targets to eliminate long waits for planned care.</p> |
| <p><i>Organisation/Venue and full address including postcode</i></p> | <p>Perth Royal Infirmary, Taymount Terrace, Perth PH1 1NX</p> |
| <p><i>Parking</i></p> | <p>Cabinet Secretary to arrive outside main entrance PRI (PH1 1LN for Sat Nav) and welcomed by Chief Executive [redacted - s.38(1)(b)]. Car parking spaces reserved for visitors.</p> |
| <p><i>Date and time of Engagement</i></p> | <p>Date: Wednesday 6 July 2022 Time(s): 11:45 – 12:30</p> |
| <p><i>Background/Purpose</i></p> | <p>Media visit to announce targets to eliminate:</p> <p>Outpatients</p> <ul style="list-style-type: none"> ▪ two year waits for outpatients in most specialities by the end of August 2022 ▪ 18 months for outpatients in most specialities by December 2022 ▪ one year for outpatients in most specialities by March 2023 <p>IP / DC</p> <ul style="list-style-type: none"> ▪ two years for inpatient / daycases in most specialities by September 2022 ▪ 18 months for inpatient / daycases in most specialities by September 2023 ▪ one year for inpatient / daycases in most specialities by September 2024 |
| <p><i>Relevance to Core Script</i></p> | <p>The visit is consistent with the National Performance Indicator: <i>“We cherish and protect the NHS as a force for good in our lives and provide the necessary investment and planning to ensure our health and social care systems are viable over the long term”</i></p> |
| <p><i>Briefing</i></p> | <p>A pack is provided with lines to take and background briefing.</p> |
| <p><i>Media Handling</i></p> | <p>A news release setting out the new targets, with the top line that Scotland will be issued on</p> |

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| <p><i>Official Support/ Contact Details</i></p> <p><i>Programme For the Visit</i></p> | <p>Wednesday morning, ahead of the visit. Broadcast media will be invited to the visit at for interview opportunities with the Cab Sec.</p> <p>Policy support: [redacted - s.38(1)(b)] [redacted - s.38(1)(b)]@gov.scot [redacted - s.38(1)(b)]</p> <p>Comms support: [redacted - s.38(1)(b)] - [redacted - s.38(1)(b)]@gov.scot [redacted - s.38(1)(b)]</p> <p>ANNEX A: Attendees & Programme ANNEX B: Media Prompts and Q&A ANNEX C: Background - NHS Tayside ANNEX D: Waiting Times Data</p> |
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ATTENDEES & PROGRAMME

Attendees

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| [redacted - s.38(1)(b)] Chief Executive | [redacted - s.38(1)(b)] |
|---|-------------------------|

- Chief Operating Officer Acute Services, [redacted - s.38(1)(b)]
- Clinical Lead National Treatment Centre – Tayside, [redacted - s.38(1)(b)]
- Senior Nurse Surgery and Orthopaedics, [redacted - s.38(1)(b)]

| Time | Programme |
|---------|--|
| 11.45am | <p>Cabinet Secretary to arrive outside main entrance PRI (PH1 1LN for Sat Nav)</p> <p>Welcomed by Chief Executive [redacted - s.38(1)(b)] Car parking spaces reserved for visitors</p> |
| 11.50am | <p>Proceed to Ward 8, elective surgery Room available for Cabinet Secretary, with refreshments.</p> <p>Proceed to bay in ward 8 Introduced to:</p> <ul style="list-style-type: none"> • Chief Operating Officer Acute Services, [redacted - s.38(1)(b)] • Clinical Lead National Treatment Centre – Tayside, [redacted - s.38(1)(b)] • Senior Nurse Surgery and Orthopaedics, [redacted - s.38(1)(b)] • Other members of the theatre and surgical team. <p>Cabinet Secretary will be updated on the progress of National Treatment Centre - Tayside and how important it is to support the NHS Scotland Recovery Plan, as well as the positive impact it will have on Tayside patients and waiting lists.</p> <p>Opportunity to speak to patients (pre and post-operative).</p> |
| 12.15pm | Media interviews available with Cabinet Secretary in Ward 8 and outside PRI main entrance. |
| 12.30pm | Cabinet Secretary departs Perth Royal Infirmary. |

MEDIA PROMPTS

Planned Care Targets

OFFICIAL: SENSITIVE

- We know that long waiting times have grown as a result of the pandemic, which is why we now need to focus on treating people that are waiting too long for treatment.
- That's why we're introducing a new set of targets for NHS Scotland to address the backlog of planned care that has built up as a result of the pandemic.
- The targets are to eliminate:
 - two year waits for outpatients in most specialities by the end of August 2022
 - 18 months for outpatients in most specialities by December 2022
 - one year for outpatients in most specialities by March 2023
 - two years for inpatient / daycases in most specialities by September 2022
 - 18 months for inpatient / daycases in most specialities by September 2023
 - one year for inpatient / daycases in most specialities by September 2024
- These targets are very ambitious and will require a strong focussed approach to successfully achieve them.
- Patients will be offered appointments as local as possible but some may be offered alternatives outwith their local health board area to reduce waiting times, for example, the Golden Jubilee University National Hospital or at National Treatment Centres as they become operational over the next year.
- The National Clinical Prioritisation Framework was also updated last month to provide flexibility in managing waiting lists, to ensure any patient waiting over two years is prioritised and treated, as well as those who require urgent clinical care.
- It is important to note that a small number of patients will be unable to have their procedure within these timeframes for personal or clinical reasons.

Q&A

Q: Are these targets deliverable?

A: I am in no doubt these targets are very ambitious and will require a strong focussed approach to successfully achieve them.

This ambition cannot be achieved local Boards alone, and must be delivered through a joined up NHS Scotland approach.

We will be working closely with Boards, and the Centre for Sustainable Delivery, to develop a clear plan which will include:

- cross boundary working, regional and national
- maximising theatres sessions and reducing fallow sessions
- expanding utilising of theatres out with the local board
- exploring options to extend working, including weekends
- maximising efficiencies
- robust management of waiting list
- maximise insourcing / outsourcing opportunities

- acceleration of high impact changes and innovation including ACRT (Active Clinical Referral Triage) and opt in PIR (Patient Initiated Review).

Q: What do you mean by ‘in most specialties’?

A: While it is our aim to eliminate all long waits for elective care, there may be a small number of patients who - for personal or clinical reasons – who are unable to go ahead with their surgery or procedure within these timeframes.

Q: What about the comments made by the outgoing BMA Scotland Chairman last week about ‘politicians banging out ridiculous targets and timescales?’

A: I’m in no doubt that NHS Scotland continues to experience extreme pressure and that significant uncertainty remains over future waves of the pandemic.

However, we need to rebuild a system that can live with the virus, which does not impact on the delivery of acute services such as planned care. Managing long waits must be central to this as we move towards delivering our ambition to protect, stabilise and recover planned care.

Q: Will patients be expected to travel to other Boards for treatment?

A: Patients will be offered appointments as local as possible but some may be offered alternatives outwith their local health board area to reduce their waiting times and to ensure we are maximising all available capacity across the NHS Scotland estate. For example this might be at the Golden Jubilee University National Hospital or at National Treatment Centres as they become operational over the next year.

Q: Will Boards be given additional funding to deliver the targets?

A: We have prioritised funding for waiting times and will write to Boards next week to set out their funding allocations for 2022/23, which will support delivery of plans to achieve the targets.

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| NHS England | NHS Wales | NHS Scotland |
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| <p><i>We believe that the below targets relate to Referral to Treatment (RTT)*</i></p> <ul style="list-style-type: none"> • By July 2022, no one will wait longer than two years. • Eliminate waits of over 18 months by April 2023. • Eliminate waits of over 65 weeks by March 2024. • Waits of longer than a year for elective care are eliminated by March 2025. <p>Also:</p> <ul style="list-style-type: none"> • Long-waiting patients will be offered further choice about their care, and over time, as the NHS brings down the longest waits from over two years to under one year, this will be offered sooner. | <p><i>We believe that the below targets relate to Referral to Treatment (RTT)*</i></p> <ul style="list-style-type: none"> • Eliminate the number of people waiting longer than two years in most specialities by March 2023. • Eliminate the number of people waiting longer than one year in most specialities by Spring 2025. <p>Outpatients:</p> <ul style="list-style-type: none"> • No one waiting longer than a year for their first outpatient appointment by the end of 2022. | <p>The targets are to treat those patients waiting longer than:</p> <p>IPDC</p> <ul style="list-style-type: none"> • two years for inpatient / daycases in most specialities by the end of September 2022 • eighteen months for inpatient / daycases in most specialities by the end of September 2023 • one year for inpatient / daycases in most specialities by September 2024 <p>Outpatients</p> <ul style="list-style-type: none"> • two year waits for outpatients in most specialities by the end of August 2022 • eighteen months for outpatients in most specialities by the end of December 2022 • one year for outpatients in most specialities by the end of March 2023 |

***The targets above are not directly comparable:**

- Referral To Treatment (RTT) refers to the full patient pathway from GP referral to treatment/surgery if required. In England and Wales (as far as we understand), the official statistics are focused on RTT.
- Stage of Treatment refers to the different parts of the RTT pathway that can include outpatients, diagnostics and inpatient/day case treatment.
- Treatment Time Guarantee is the term used for the inpatient/day case treatment part of the RTT pathway in Scotland.

NHS Waiting Times Delivery Group – Minute, Tuesday 6 May 2025

| Standing Agenda |
|---|
| 1. Planned Care: <ul style="list-style-type: none">• Dashboard Update• Update on 25/26 plans |
| 2. [redacted – out of scope] |
| 3. [redacted – out of scope] |

Attendees

Scottish Government

- First Minister
- Cabinet Secretary for Health & Social Care
- Cabinet Secretary for Finance and Local Government
- Minister for Public Finance
- Caroline Lamb
- John Burns
- Angie Wood
- Derek Grieve

NHS representatives

- Professor Jann Gardner, CEO, NHS Greater Glasgow & Clyde
- Gordon James, CEO, NHS Golden Jubilee
- Caroline Hiscox, CEO, NHS Lothian

JB ran through the data slidedeck. He reflected on how busy the whole system is.

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NHS Waiting Times Delivery Group – 1 April 2025

First Minister (JS), Cabinet Secretary for Health and Social Care (NG), Minister for Public Finance (IM), Caroline Lamb (CL), John Burns (JB), Jann Gardner (JG), Gordon James (GJ), [redacted - s.38(1)(b)], Douglas McLaren (DM)

Notetaker: [redacted - s.38(1)(b)]

[redacted – out of scope]

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MONTHLY PLANNED CARE PERFORMANCE REPORT

This report provides a status update on NHS Boards' elective care remobilisation plans for 22/23. This month, the Planned Care team have engaged with the following Health Boards: NHS Grampian, NHS Borders, NHS Lothian, NHS Lanarkshire, GG&C and NHS Highland. A summary of these discussions can be found below.

1. NHS GRAMPIAN

| | |
|-------------------------------------|--|
| Date of Meeting | 01 June 2022 |
| Current Position | Activity (as a % of pre Covid activity as at 12 June) <ul style="list-style-type: none"> <i>i.</i> Outpatients: 80% <i>ii.</i> TTG: 76% |
| Risk | - [redacted – out of scope] - [redacted – out of scope] |
| Opportunities / Achievements | Work being undertaken on proposal to give patients two weeks thinking time to back-date consent once put on a waiting list. Intention is to mitigate the power dynamic between patient and surgeon, and give patients more time to consider their options. |
| Long Waits | <p>Analytical work has been undertaken by Grampian to establish the feasibility of implementing the upcoming 2 year wait targets. From this it was identified:</p> <ul style="list-style-type: none"> • All patients who could have waits of 2+ years at March 23 are currently on the waiting list so total exposure is known. • The list currently sits at 4,221 patients of which approx. 3050 are ESCat 3. • The majority of activity would be in General Surgery and Orthopaedics, followed by ENT and Gynaecology. • General Surgery, ENT and Gynaecology are all user of Stracathro, and no increase in access is currently expected. However, there is a risk of closure over winter. • There is a private sector option for Ortho which should add capacity when commenced (Woodend), and Dr Grays contribution is also expected to increase. Therefore improvements in this area are anticipated • No NTC contribution is expected before 31 March 2023. • Level 0 weekend list would add further capacity and can be targeted. • Reaching 2 year standard by March 23 will not be possible without significant additional capacity. |
| Confidence (RAG) rating | (To be completed by performance lead) |

OFFICIAL SENSITIVE

2. NHS BORDERS

| | |
|-------------------------------------|--|
| Date of Meeting | 01 June 2022 |
| Current Position | Activity (as a % of pre Covid activity as at 12 June) <i>i.</i> Outpatients: 94% <i>ii.</i> TTG: 48% |
| Risk | - Cardiology is an area of particular concern due to pending workforce changes. - There is concern around patients meeting the criteria for Orthopaedic joints required by Spire, Washington in the long term, as many long waits have additional needs which Spire will struggle to take – Looking into the possibility of sending shorter waiting cases in order to free up internal capacity to undertake the treatment of the more complex cases. |
| Opportunities / Achievements | - Governance Group is considering proposals to repurpose recently closed covid ward to increase elective capacity. Proposal is a 16 bedded ring fenced area with potential to increase to 22 beds for commencement from the beginning of July, initially on a phased basis due to staffing challenges. - Booking process is being reviewed to ensure capacity is maximised. - Following significant capacity issues, orthopaedics area is operational once more. |
| Confidence (RAG) rating | (To be completed by performance lead) |

3. NHS HIGHLAND

| | |
|-------------------------------------|---|
| Date of Meeting | 21 June 2022 |
| Current Position | Activity (as a % of pre Covid activity as at 12 June) <i>i.</i> Outpatients: 79% <i>ii.</i> TTG: 53% |
| Risk | - [redacted – out of scope] - [redacted – out of scope] |
| Opportunities / Achievements | - [redacted – out of scope] - [redacted – out of scope] |
| Long Waits | - Dermatology and gastro are the main areas of concern for NOPs waiting more than 104 weeks. These areas have gone out to tender for the independent sector. For IP/DC, the main areas for those waiting over 78 weeks are ENT, General surgery, gynaecology, T&O and urology. - For all specialities, per 100,000 of the population, 14% of patients in Highland have waited over 104 weeks. For T&O, close to 20% of patients have waited 104 weeks. In both cases, Highland is an outlier compared to other HBs. |

OFFICIAL SENSITIVE

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| | <ul style="list-style-type: none"> - There's currently just over 1,000 people on their waiting list over 104 weeks, and approximately 50% are in orthopaedics. NTC capacity will help reduce this, but not before March 2023. - Board will establish a subgroup to examine data and explore where they could utilise capacity elsewhere to help clear backlog. However, it is raised by colleagues that reaching the March 2023 target will not be possible in the current context of clinical prioritisation, reduced workforce and rising covid infections. |
| NTC update | <ul style="list-style-type: none"> - [redacted – out of scope] - [redacted – out of scope] - [redacted – out of scope] |
| Confidence (RAG) rating | (To be completed by performance lead) |

4. NHS Lothian

| | |
|-------------------------------------|--|
| Date of Meeting | 22 June 2022 |
| Current Position | Activity (as a % of pre Covid activity as at 12 June) <ul style="list-style-type: none"> <i>i.</i> Outpatients: 95% <i>ii.</i> TTG: 74% |
| Risk | <ul style="list-style-type: none"> - [redacted – out of scope] - [redacted – out of scope] - [redacted – out of scope] |
| Opportunities / Achievements | <ul style="list-style-type: none"> - All business processes in regard to Waiting List validation, scheduling and booking are in place and are being reinforced across all sites. - While there is little on offer from the independent sector by way of outsourcing, SPIRE have advised they would be interested in supporting some work from Autumn in Lothian. |
| Long Waits | <ul style="list-style-type: none"> - In the main, the board continues to book from the front of the queue, whilst long waits continue to grow. - As a result all patients waiting > 52 weeks as of May 22 (the majority of whom are P3/P4 day cases) will not be treated and; if not booked, trip over into the > 104 week waiting cohort by March 23. If looking further back to April, the number will be more and so the problem greater than outlined. |
| Theatre Efficiencies | - [redacted – out of scope] |
| Confidence (RAG) rating | (To be completed by performance lead) |

5. NHS Lanarkshire

| | |
|-------------------------------------|---|
| Date of Meeting | 22 June 2022 |
| Current Position | Activity (as a % of pre Covid activity as at 12 June) <i>i.</i> Outpatients: 112% <i>ii.</i> TTG: 30% |
| Risk | - [redacted – out of scope] - [redacted – out of scope] - [redacted – out of scope] - [redacted – out of scope] |
| Opportunities / Achievements | - [redacted – out of scope] - [redacted – out of scope] - [redacted – out of scope] |
| Long Waits | <u>Kings Park</u> - ortho going to work with KP to do arthroplasty long waiters, 10 per month for 4 months, until 3 rd elective theatre back in hairmyres. - Plan is to fund through working on slippage with some areas not picked up, can only sustain for a few months <u>Rosshall</u> - well underway and getting patients going through Insourcing OP - small delay, but extended previous contracts by 2 months to keep momentum - all now up and running <u>Insourcing Theatre Teams</u> - Synora – providing single theatre team at Monklands for ENT and <u>Urology</u> - working through induction currently, identifying skills as not all do full range of cases. |
| Confidence (RAG) rating | (To be completed by performance lead) |

5. NHS GG&C

| | |
|-------------------------------------|--|
| Date of Meeting | |
| Current Position | Activity (as a % of pre Covid activity as at 12 June) <i>i.</i> Outpatients: 80% <i>ii.</i> TTG: 77% |
| Risk | |
| Opportunities / Achievements | |
| Long Waits | |

OFFICIAL SENSITIVE

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| Confidence (RAG) rating | |
|------------------------------------|--|

<John.Burns@gov.scot>; [redacted - s.38(1)(b)]@gov.scot>; Chief Medical Officer
<CMO@gov.scot>; Chief Nursing Officer <CNO@gov.scot>; Deputy Chief Medical Officers
<DCMO@gov.scot>; [redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)]@gov.scot>;
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Subject: RE: Clinical Prioritisation Framework Update - Submission - 14 June 2022

Hi [redacted - s.38(1)(b)]

I can confirm that this will be picked up and a letter will be drafted following a further meeting with Cabinet Secretary around waiting time targets.

Thank you,

[redacted - s.38(1)(b)]

Team Leader Waiting Times Guidance | Directorate for Health Performance and Delivery | The Scottish Government | [redacted - s.38(1)(b)][redacted - s.38(1)(b)][redacted - s.38(1)(b)]

From: [redacted - s.38(1)(b)]@gov.scot> On Behalf Of Cabinet Secretary for Health and Social Care

Sent: 14 June 2022 14:53

To: [redacted - s.38(1)(b)]@gov.scot>; Cabinet Secretary for Health and Social Care
<CabSecHSC@gov.scot>

Cc: First Minister <firstminister@gov.scot>; Minister for Mental Wellbeing & Social Care
<MinisterMWSC@gov.scot>; Minister for Public Health, Women's Health & Sport
<MinisterPHWHS@gov.scot>; DG Health & Social Care <DGHSC@gov.scot>; Burns J (John)
<John.Burns@gov.scot>; [redacted - s.38(1)(b)]@gov.scot>; Chief Medical Officer
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Mr Yousaf states that following his conversation with officials working on the delivery framework, a letter should be drafted from him to each of the Chairs and Chief Execs. The letter should reference this update to the Clinical Prioritisation Framework and make explicit his expectation that two year (+) waits should be given priority, in line with clinical priorities.

Grateful for a reply as soon as possible please.

Kind regards,

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

Deputy Private Secretary - Cabinet Secretary for Health and Social Care, Humza Yousaf MSP
Scottish Government, **[redacted - s.38(1)(b)]** St Andrews House, Regent Road, Edinburgh, EH1
3DG

[redacted - s.38(1)(b)]

E-mail: CabSecHSC@gov.scot

From: **[redacted - s.38(1)(b)]@gov.scot>**

Sent: 14 June 2022 12:36

To: Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>

Cc: First Minister <firstminister@gov.scot>; Minister for Mental Wellbeing & Social Care
<MinisterMWSC@gov.scot>; Minister for Public Health, Women's Health & Sport

<John.Burns@gov.scot>; [redacted - s.38(1)(b)]@gov.scot>; Chief Medical Officer
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From: [redacted - s.38(1)(b)]@gov.scot> On Behalf Of Cabinet Secretary for Health and Social Care

Sent: 14 June 2022 14:53

To: [redacted - s.38(1)(b)]@gov.scot>; Cabinet Secretary for Health and Social Care
<CabSecHSC@gov.scot>

Cc: First Minister <firstminister@gov.scot>; Minister for Mental Wellbeing & Social Care
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[redacted - s.38(1)(b)]

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[redacted - s.38(1)(b)]

Deputy Private Secretary - Cabinet Secretary for Health and Social Care, Humza Yousaf MSP
Scottish Government, **[redacted - s.38(1)(b)]** St Andrews House, Regent Road, Edinburgh, EH1
3DG

[redacted - s.38(1)(b)]

E-mail: CabSecHSC@gov.scot

From: **[redacted - s.38(1)(b)]@gov.scot>**

Sent: 14 June 2022 12:36

To: Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>

Cc: First Minister <firstminister@gov.scot>; Minister for Mental Wellbeing & Social Care
<MinisterMWSC@gov.scot>; Minister for Public Health, Women's Health & Sport

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Sent: 01 July 2022 17:42

To: zzzCabinet Secretary for Health and Social Care 2021 to 2023 <zzzCabSecHSC@gov.scot>;

[redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Cc: [redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted -

s.38(1)(b)]@gov.scot>; DG Health & Social Care <DGHSC@gov.scot>; John Burns

<John.Burns@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted -

s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Subject: RE: Comms handling: Waiting Times Targets - Reducing Long Waits

PS/Cabinet Secretary

Please see attached briefing for the Cabinet Secretary's visit to Inverclyde Royal Hospital on Monday.

Please let me know if you require anything further.

Kind regards,

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)] | Deputy Team Leader - Planned Care Policy & Performance | Directorate for Chief Operating Officer [redacted - s.38(1)(b)] | St Andrew's House | Regent Road | Edinburgh | EH1 3DG | [redacted - s.38(1)(b)][redacted - s.38(1)(b)]

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot> On Behalf Of Cabinet Secretary for Health and Social Care

Sent: 01 July 2022 17:05

To: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Cc: [redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted -

s.38(1)(b)]@gov.scot>; DG Health & Social Care <DGHSC@gov.scot>; Burns J (John)

<John.Burns@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted -

s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Subject: RE: Comms handling: Waiting Times Targets - Reducing Long Waits

[redacted - s.30(b)(i)] [redacted - s.38(1)(b)]

[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

Deputy Private Secretary - Cabinet Secretary for Health and Social Care, Humza Yousaf MSP
Scottish Government, [redacted - s.38(1)(b)] St Andrews House, Regent Road, Edinburgh, EH1
3DG

[redacted - s.38(1)(b)]

E-mail: CabSecHSC@gov.scot

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Sent: 01 July 2022 16:02

To: Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>; [redacted -
s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Cc: [redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted -
s.38(1)(b)]@gov.scot>; DG Health & Social Care <DGHSC@gov.scot[redacted -
s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted -
s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -
s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted -
s.38(1)(b)]@gov.scot>

Subject: RE: Comms handling: Waiting Times Targets - Reducing Long Waits

[redacted - s.30(b)(i)] [redacted - s.38(1)(b)]

[redacted - s.30(b)(i)]

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]| Deputy Team Leader - Planned Care Policy & Performance | Directorate for Chief Operating Officer [redacted - s.38(1)(b)]|St Andrews House | Regent Road | Edinburgh | EH1 3DG | [redacted - s.38(1)(b)]

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot> On Behalf Of Cabinet Secretary for Health and Social Care

Sent: 01 July 2022 14:48

To: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>

Cc: [redacted - s.38(1)(b)]@gov.scot>; T[redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; DG Health & Social Care <DGHSC@gov.scot>; Burns J (John) <John.Burns@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Subject: RE: Comms handling: Waiting Times Targets - Reducing Long Waits

[redacted - s.30(b)(i)] [redacted - s.38(1)(b)],

[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

Deputy Private Secretary - Cabinet Secretary for Health and Social Care, Humza Yousaf MSP
Scottish Government, [redacted - s.38(1)(b)] St Andrews House, Regent Road, Edinburgh, EH1 3DG

[redacted - s.38(1)(b)]

E-mail: CabSecHSC@gov.scot

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Sent: 01 July 2022 14:45

To: Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>

Cc: [redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; DG Health & Social Care <DGHSC@gov.scot>; Burns J (John) <John.Burns@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Subject: Comms handling: Waiting Times Targets - Reducing Long Waits

[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

[redacted - s.38(1)(b)]

Senior Media Manager | Communications Health | Scottish Government [redacted - s.38(1)(b)][redacted - s.38(1)(b)][redacted - s.38(1)(b)] [redacted - s.38(1)(b)]

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Sent: 01 July 2022 13:51

To: Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>

Cc: DG Health & Social Care <DGHSC@gov.scot>; Burns J (John) <John.Burns@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Subject: FW: Waiting Times Targets - Reducing Long Waits

Communications Health & Social Care <CommunicationsHealth&SocialCare@gov.scot>;
[redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted -
s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -
s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Subject: Clinical Prioritisation Framework Update - Submission - 14 June 2022

PS/Cabinet Secretary for Health and Social Care,

Please find attached submission on the new version of the Clinical Prioritisation Framework for
Planned Care which has been issued to Health Boards and published online.

Communication colleagues, please be advised of updates to previous lines, which we are
happy to build on as needed.

Thank you,

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)][redacted - s.38(1)(b)][redacted - s.38(1)(b)]

Team Leader Waiting Times Guidance | Directorate for Health Performance and Delivery | The
Scottish Government | [redacted - s.38(1)(b)]

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Sent: 05 July 2022 15:08

To: zzzCabinet Secretary for Health and Social Care 2021 to 2023 <zzzCabSecHSC@gov.scot>; zzzFirst Minister 2021 to 2023 <zzzfirstminister@gov.scot>; zzzMinister for Parliamentary Business 2021 to 2023 <zzzzMinisterPB@gov.scot>; ParlyClerk Scotland

<ParlyClerkScotland@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>;

PQ/FMQ Team <pq/fmqteam@gov.scot>

Cc: DG Health & Social Care <DGHSC@gov.scot>; Caroline Lamb <Caroline.Lamb@gov.scot>;

John Burns <John.Burns@gov.scot>; Permanent Secretary <PermanentSecretary@gov.scot>;

[redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted -

s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted -

s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted -

s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted -

s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)]@gov.scot>

<CommunicationsHealthandSocialCare@gov.scot>

Subject: RE: Immediate - Government Initiated Question on planned care waiting times

Apologies PO,

Please see amended version.

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)] | Deputy Team Leader - Planned Care Policy & Performance | Directorate for Chief Operating Officer [redacted - s.38(1)(b)] | St Andrews House | Regent Road | Edinburgh | EH1 3DG | [redacted - s.38(1)(b)]

From: [redacted - s.38(1)(b)]

Sent: 05 July 2022 14:52

To: Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>; First Minister <firstminister@gov.scot>; Minister for Parliamentary Business <MinisterPB@gov.scot>;

ParlyClerk Scotland <ParlyClerkScotland@gov.scot>; [redacted - s.38(1)(b)][redacted -

s.38(1)(b)]@gov.scot>; ET FMQ/PQ Mailbox <ETFMQPQ@gov.scot>

Subject: NHS Waiting Times Delivery Group Slides

PS/ FM

cc. PS/ CSH, PS / CSF&LG, PS / Minister for Public Finance

Please see attached the usual slide decks provided for the First Minister's Waiting Times Delivery Group meetings.

[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

Thanks

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]



Scottish Government
Riaghaltas na h-Alba
gov.scot

From: [redacted - s.38(1)(b)] on behalf of Minister for Public Finance
Sent: 21 May 2025 10:54
To: [redacted - s.38(1)(b)] First Minister; Cabinet Secretary for Health & Social Care 2024; Cabinet Secretary for Finance & Local Government; Minister for Public Finance; Caroline Lamb; John Burns; Angie Wood; Douglas McLaren; [redacted - s.38(1)(b)] [redacted - s.38(1)(b)]; [redacted - s.38(1)(b)]; Derek Grieve
Cc: DG Health & Social Care [redacted - s.38(1)(b)]; [redacted - s.38(1)(b)] [redacted - s.38(1)(b)]; [redacted - s.38(1)(b)]; [redacted - s.38(1)(b)]; [redacted - s.38(1)(b)]; [redacted - s.38(1)(b)]; Performance and Delivery Hub Mailbox
Subject: RE: Official Sensitive: Weekly NHS Waiting Times Delivery Group Meeting - Readout 1 April 25

Hi [redacted - s.38(1)(b)]

Mr McKee is content for his interests.

Thanks

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)] | Deputy Private Secretary | Cabinet Secretary for Finance and Local Government – Shona Robison MSP | Scottish Government | St Andrew's House | Regent Road | Edinburgh | EH1 3DG | [redacted - s.38(1)(b)] | [redacted - s.38(1)(b)]

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Private Offices do not keep official records of such e-mails or attachments. Scottish Ministers, Special advisers and the Permanent Secretary are covered by the terms of the Lobbying (Scotland) Act 2016. See www.lobbying.scot

From: [redacted - s.38(1)(b)] [redacted - s.38(1)(b)] @gov.scot>

Sent: 19 May 2025 15:28

To: First Minister <FirstMinister@gov.scot>; Cabinet Secretary for Health & Social Care 2024 <CabSecHSC@gov.scot>; Cabinet Secretary for Finance & Local Government <CabSecFLG@gov.scot>; Minister for Public Finance <MinisterPF@gov.scot>; Caroline Lamb <Caroline.Lamb@gov.scot>; John Burns

<John.Burns@gov.scot>; Angie Wood <Angie.Wood@gov.scot>; Douglas McLaren

<Douglas.McLaren@gov.scot>; [redacted - s.38(1)(b)] @nhs.scot>; [redacted - s.38(1)(b)]

@gjnhs.scot.nhs.uk;

[redacted - s.38(1)(b)] @nhs.scot>; Derek Grieve <Derek.Grieve@gov.scot>

Cc: DG Health & Social Care <DGHSC@gov.scot>; [redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>

[redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>

[redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>

[redacted - s.38(1)(b)] @gov.scot>

Subject: Official Sensitive: Weekly NHS Waiting Times Delivery Group Meeting - Readout 1 April 25

PO

Colleagues,

Apologies for the delay, please find attached the minute of the NHS Waiting Times Delivery Group from 1 April 25.

| | |
|--|-------------------------------------|
| Name (title) and date of meeting | Meeting Note - Word (and eRDM Link) |
| NHS Waiting Times Delivery Group: 1 April 2025 | [redacted - s.30(b)(i)] |

Regards,

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]



| | |
|--|-------------------------------------|
| Name (title) and date of meeting | Meeting Note - Word (and eRDM Link) |
| NHS Waiting Times Delivery Group: 6 May 2025 | [redacted - s.30(b)(i)] |

Regards,

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)] | Performance & Strategic Hub Manager | Directorate for Chief Operating Officer, NHS Scotland | Performance & Delivery | Scottish Government



- eighteen months for outpatients in most specialities by the end of December 2022
- one year for outpatients in most specialities by the end of March 2023
- two years for inpatient / daycases in most specialities by the end of September 2022
- eighteen months for inpatient / daycases in most specialities by the end of September 2023
- one year for inpatient / daycases in most specialities by September 2024

Mr Yousaf, who made the announcement while visiting Perth Royal Infirmary said:

“We know that waiting times have grown as a result of the pandemic, which is why we now need to focus on treating these people that are waiting too long for treatment. That’s why I am announcing some of the most ambitious targets in the UK.

“From speaking to patients and clinicians across the country, I know there is a physical and mental consequence in having to wait a long period to be treated, that is why addressing long waits is a key focus of our plans for NHS recovery.”

Mr Alastair Murray, Chair of Scottish Committee for Orthopaedics and Trauma (SCOT) said:

"Scottish orthopaedics very much welcomes the introduction of targets to address the growing number of people waiting for essential treatment. It is hoped that the targets set out will drive ongoing efforts to reduce waiting times for orthopaedic surgery in Scotland."

The NHS will work together to reduce backlogs of care, specifically longest waiting patients, and that will mean some patients will be offered appointments outwith their local health board area to provide treatment more quickly - for example, the Golden Jubilee University National Hospital or at National Treatment Centres as they become operational over the next year.

The approach will also build on the success of the Centre for Sustainable Delivery (CFSD), which was established to drive innovation and introduce new ways of delivering care that will create additional capacity for inpatient, day case and outpatients.

The National Clinical Prioritisation Framework, will be revised to ensure any patient waiting over two years is prioritised and treated, as well as those who require urgent clinical care.

Funding for the new drive will come from the £1 billion allocated for the NHS Recovery Plan.

ENDS

[redacted - s.38(1)(b)][redacted - s.38(1)(b)]

Deputy Private Secretary to the Cabinet Secretary for Health and Social Care – Humza Yousaf

Scottish Government

E: CabSecHSC@gov.scot

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

From: [redacted - s.38(1)(b)]@gov.scot>

Sent: 05 July 2022 16:51

[redacted - s.30(b)(ii)]

[redacted - s.30(b)(ii)]

[redacted - s.30(b)(ii)]

[redacted - s.30(b)(ii)]

Regards

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)][redacted - s.38(1)(b)]

Team Leader Communications Health and Social Care

Scottish Government

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Sent: 06 July 2022 08:03

To: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; zzzCabinet Secretary for Health and Social Care 2021 to 2023 <zzzCabSecHSC@gov.scot>; zzzFirst Minister 2021 to 2023 <zzzfirstminister@gov.scot>

Cc: John Burns <John.Burns@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@transport.gov.scot>

Subject: RE: Waiting Times Targets - Reducing Long Waits

Morning [redacted - s.38(1)(b)]

Please see letter to go to H&S committee this morning. Can you send this around 10 am please in advance of the new release going out. The GIQ will be answered at the same time.

Thank you

[redacted - s.38(1)(b)]

[redacted – out of scope]

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[redacted – out of scope]

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot> On Behalf Of First Minister

Sent: 03 July 2022 18:20

To: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; First Minister
<firstminister@gov.scot>; Cabinet Secretary for Health and Social Care
<CabSecHSC@gov.scot>

Cc: Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Subject: RE: Waiting Times Targets - Reducing Long Waits

Thanks [redacted - s.38(1)(b)]. I can say with a degree of certainty that we wont have FMs clearance before 0900 tomorrow. However, in terms of establishing what happens from here, I think it is more appropriate for Cab Sec to make the decision on what happens re tomorrows visit rather than ourselves.

[redacted - s.38(1)(b)]

Deputy Private Secretary to the First Minister Office of the First Minister [redacted - s.38(1)(b)]
St Andrews House | Regent Road | Edinburgh | EH1 3DG | [redacted - s.38(1)(b)]

All e-mails and attachments sent by a Ministerial Private Office to any other official on behalf of a Minister relating to a decision, request or comment made by a Minister, or a note of a

Ministerial meeting, must be filed appropriately by the recipient. Private Offices do not keep official records of such e-mails or attachments.

Scottish Ministers, Special advisers and the Permanent Secretary are covered by the terms of the Lobbying (Scotland) Act 2016. See www.lobbying.scot

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Sent: 03 July 2022 17:24

To: First Minister <firstminister@gov.scot>

Cc: Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>; Burns J (John) <John.Burns@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Subject: RE: Waiting Times Targets - Reducing Long Waits

Thanks [redacted - s.38(1)(b)]

Sorry to push, but we would need that clearance by 9 am or a steer on whether we need to pull visit / announcement.

[redacted - s.38(1)(b)]

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot> On Behalf Of First Minister

Sent: 03 July 2022 17:21

To: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; First Minister <firstminister@gov.scot>

Cc: Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Subject: RE: Waiting Times Targets - Reducing Long Waits

Hi [redacted - s.38(1)(b)]

Nothing as yet. However, to ensure planning expectations are managed ahead of tomorrow, I should be clear that I don't expect FM to provide a steer on this until tomorrow at the earliest.

In the unlikely event that I am able to provide clearance, I'll let you know ASAP.

Thanks,

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

Deputy Private Secretary to the First Minister Office of the First Minister [redacted - s.38(1)(b)] |
St Andrews House | Regent Road | Edinburgh | EH1 3DG | [redacted - s.38(1)(b)]

All e-mails and attachments sent by a Ministerial Private Office to any other official on behalf of a Minister relating to a decision, request or comment made by a Minister, or a note of a Ministerial meeting, must be filed appropriately by the recipient. Private Offices do not keep official records of such e-mails or attachments.

Scottish Ministers, Special advisers and the Permanent Secretary are covered by the terms of the Lobbying (Scotland) Act 2016. See www.lobbying.scot

From: [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Sent: 03 July 2022 15:38

To: First Minister <firstminister@gov.scot>

Cc: Cabinet Secretary for Health and Social Care <CabSecHSC@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>; [redacted - s.38(1)(b)][redacted - s.38(1)(b)]@gov.scot>

Subject: RE: Waiting Times Targets - Reducing Long Waits

Please see submission outlining waiting times targets. If the FM is content with the targets the Cabinet Secretary will announce this during a visit on 4 July at NHS GG&C.

Thank you

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)] | Directorate for Health Performance and Delivery| Scottish Government
| 2E St Andrews House

| Edinburgh | EH1 3DG | **[redacted - s.38(1)(b)]****[redacted - s.38(1)(b)]****[redacted - s.38(1)(b)]**

[redacted - s.38(1)(b)]**[redacted - s.38(1)(b)]**

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[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

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[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

Preferred date and time

7. The proposal is to announce waiting times targets during the Cabinet Secretary’s visit to the Perth Royal Infirmary on Wednesday 6 July at approximately 11:45. Therefore, the question should be published no later than 10:00 am on 6 July in order to allow sufficient time in advance of the visit.

Draft Press Release

8. Comms is preparing a news release setting out the new targets, with the top line that Scotland will have the most ambitious target to eliminate one year waits in the UK. A draft of this will be with the Cabinet Secretary for sign off shortly. This will be issued on Wednesday morning, after the GIQ has been answered and before the media visit to Perth.

Recommendation

9. You are invited to:
- Agree to the Government Initiated Question being answered on Wednesday 6 July.
 - Approve the draft question and answer.
 - [redacted - s.30(b)(i)]

| Copy List: | For Action | For Comments | For Information | | |
|--|------------|--------------|--------------------|------------------|-------------------|
| | | | Portfolio Interest | Constit Interest | General Awareness |
| First Minister | | | | | X |
| Cabinet Secretary for Health and Social Care | X | | X | | |
| Minister for Parliamentary Business | X | | | | X |

Permanent Secretary

DG Health and Social Care

ET Programme Hub

Parliamentary Clerk

[redacted - s.38(1)(b)], Special Advisor

Communications Health & Social Care

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

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Cabinet Secretary for Health & Social Care

DELIVERY PLAN FOR REDUCING WAITING TIMES AND DELAYED DISCHARGE

PRIORITY AND PURPOSE

1. **Urgent:** Following the meeting on Wednesday 12 November and the subsequent note sent to the Cabinet Secretary for Finance and Local Government, to provide you with an outline of our delivery plan setting out our approach to reduce waiting times and delayed discharges over the remainder of 2024/25 and set out what we aim to achieve over 2025/26.

2. [redacted - s.30(b)(i)]

3. We would intend to discuss this with you in greater detail at our meeting on 12th December.

RECOMMENDATION

4. That you:

- **Note** this submission, to:
 - [redacted - s.30(b)(i)]
 - [redacted - s.30(b)(i)]
 - [redacted - s.30(b)(i)]
 - [redacted - s.30(b)(i)]
 - [redacted - s.30(b)(i)]
 - [redacted - s.30(b)(i)]
 - **[redacted - s.30(b)(i)]**
 - [redacted - s.30(b)(i)]
- **[redacted - s.30(b)(i)]**.

5. Building on your announcement to parliament on reform in Parliament on 4 June, we have been assessing the opportunities to accelerate our ambitions and provide you and the First Minister with demonstrable examples that create the capacity to deliver improvements on hospital **[redacted - s.30(b)(i)]** as well as reducing waiting times **[redacted - s.30(b)(i)]**

6. **[redacted - s.30(b)(i)]**

[redacted - s.30(b)(i)]

[redacted - s.30(b)(i)]

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[redacted - s.30(b)(i)]

- **[redacted - s.30(b)(i)]**

- [redacted - s.30(b)(i)]
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[redacted - s.30(b)(i)]

Caroline Lamb
 DG Health and Social Care

| Copy List: | For action | For information | | |
|--|------------|--------------------|-----------------------|-------------------|
| | | Portfolio interest | Constituency interest | General awareness |
| First Minister | | | | X |
| Deputy First Minister | | | | X |
| Cabinet Secretary for Finance and Local Government | | X | | |
| Minister for Social Care, Mental Wellbeing and Sport | | X | | |
| Minister for Public Health and Women's Health | | X | | |

| | |
|---------------------------|-------------------------|
| DG Health and Social Care | [redacted - s.38(1)(b)] |
| DG Communities | [redacted - s.38(1)(b)] |
| Chief Medical Officer | [redacted - s.38(1)(b)] |
| Chief Nursing Officer | [redacted - s.38(1)(b)] |
| John Burns | [redacted - s.38(1)(b)] |
| Angie Wood | [redacted - s.38(1)(b)] |
| [redacted - s.38(1)(b)] | [redacted - s.38(1)(b)] |
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| [redacted - s.38(1)(b)] | [redacted - s.38(1)(b)] |
| [redacted - s.38(1)(b)] | [redacted - s.38(1)(b)] |
| Dougie McLaren | [redacted - s.38(1)(b)] |

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| [redacted - s.38(1)(b)] | [redacted - s.38(1)(b)] |
| [redacted - s.38(1)(b)] | Derek Grieve |

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From: [redacted - s.38(1)(b)] @gov.scot>

Sent: 05 July 2022 14:17

To: zzzCabinet Secretary for Finance and Economy 2021 to 2023 <zzzCabSecFE@gov.scot>

Cc: DG Health & Social Care <DGHSC@gov.scot>; zzzCabinet Secretary for Health and Social

Care 2021 to 2023 <zzzCabSecHSC@gov.scot>; John Burns <John.Burns@gov.scot>; [redacted

- s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)]

@gov.scot>; [redacted - s.38(1)(b)] @gov.scot> [redacted - s.38(1)(b)] @gov.scot>; [redacted -

s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>; [redacted - s.38(1)(b)] @gov.scot>;

CFO : Head of CFO Unit <DLODOBCFOUHO@gov.scot>; Permanent Secretary

<PermanentSecretary@gov.scot>; [redacted - s.38(1)(b)] @gov.scot>

Subject: URGENT: AO template - NHS Waiting Times

PS / Cabinet Secretary for Finance and Economy

Please see attached NHS Waiting Times Funding AO template for clearance. Funding is critical to the delivery of the new waiting times targets to be announced by Cabinet Secretary for Health & social Care tomorrow morning, 6th July.

This funding has been cleared by the Cabinet Secretary for Health & Social Care, Permanent Secretary, DGHSC and CFO.

First Minister has also indicated today in response to a submission on the new targets that funding to reduce waiting times must be prioritised.

Many thanks

[redacted - s.38(1)(b)]

[redacted - s.38(1)(b)]

Team Leader Planned Care Policy & Performance | Directorate for Chief Operating Officer, NHS Scotland | Scottish Government | Atlantic Quay 5 | Glasgow | G2 8LU | 0300 244 9306

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