

## FOI017/2021

Each month, your trust submits RTT incomplete pathways data to NHS England. NHS England publish it as aggregate data, showing the numbers of incomplete pathways, broken down into weekly time bands: 0-1 weeks, >1-2 weeks, >2-3 weeks, >3-4 weeks, up to a final category 52+ weeks. The 52+ weeks category is not broken down in the published data. Examples of the published data are here, in the "Incomplete Provider" tables, "Provider" worksheet:

<https://www.england.nhs.uk/statistics/statistical-work-areas/rtt-waiting-times/rtt-data-2020-21/>

1) Please provide (on an all-specialties basis, for the end of February 2021) your aggregate 52+ weeks incomplete pathways RTT data, broken down into weekly time bands: >52-53 weeks, >53-54 weeks, >54-55 weeks, and so on, up to the weekly time band containing the longest-waiting patient.

The published RTT incomplete pathways data separately identifies patients with a decision to admit, again broken down into weekly time bands, in the "Provider with DTA" worksheet of the published spreadsheets referred to above. Trusts have in recent months coded these patients by clinical priority (P1-P6), based on the guide published by the Federation of Surgical Specialty Associations ([https://fssa.org.uk/covid-19\\_documents.aspx](https://fssa.org.uk/covid-19_documents.aspx)).

However the published RTT data is not broken down by clinical priority, nor do the time bands reflect the time since decision to admit.

The clinical priority categories are:

Priority 1 (operation needed within 72 hours)

Priority 2 (surgery which can be deferred for up to four weeks)

Priority 3 (surgery which can be delayed for up to three months)

Priority 4 (surgery which can be delayed for more than three months)

Priority 5 (patients who have requested to remain on the waiting list but to defer treatment because of their concerns about covid-19)

Priority 6 (Patients who have been offered treatment but have declined to accept for non-Covid reasons, but still wish to remain on the waiting list)

Or the patient may not have been assigned a priority.

2) Please provide (on an all-specialties basis, for the end of February 2021) your aggregate waiting times for incomplete pathways with a decision to admit for treatment, broken down by priority code, and also broken down by the time waited since decision to admit (NOT the time since referral) in weekly time bands: 0-1 weeks, >1-2 weeks, >2-3 weeks, >3-4 weeks, and so on, up to the weekly time band containing the patient who has waited longest since decision to admit.

Trusts have also started coding patients who do not have a decision to admit, using the same clinical priority categories.

3) Please provide (on an all-specialties basis, for the end of February 2021) your aggregate waiting times for incomplete pathways without a decision to admit for treatment, broken down by priority code, and also broken down by the time waited since referral in weekly time bands: 0-1 weeks, >1-2 weeks, >2-3 weeks, >3-4 weeks, and so on, up to the weekly time band containing the patient who has waited longest.

If data for the end of February 2021 is no longer available, then more recent data may be provided instead, in which case please advise the census date you have used.

**Response**

Your request for information is not applicable to the Trust as it relates to reporting that is carried out in Acute Hospital Trusts.

Please note that Birmingham and Solihull Mental Health Foundation Trust (BSMHFT) explicitly provide mental health services, and is not an acute Trust where physical health services are provided.