

Grasping the Nettle: HSC Waiting List Initiatives

NICON Webinar | 5 June 2025

On 5 June, NICON held a webinar to assist members in their understanding of recently announced waiting list initiatives. Panellists included Tomas Adell, Director of Elective Care and Cancer Policy, and Lisa McWilliams, Director of Strategic Performance, who presented on the updated **Elective Care Framework Funding and Implementation Plan**, noting how it fits into the wider strategic framework.

Key messages

Addressing Northern Ireland's waiting lists, the longest in the UK, is a key Programme for Government (PfG) priority. The 2021 Elective Care Framework (ECF) originally identified a need for £700 million investment. The 2024 Framework subsequently outlined the challenging financial position which recent announcements seek to address, with 3 areas of investment including:

- £85m for red flag and time-critical care (**funded from within existing HSC baseline**)
- £50m (**additional** earmarked funding from **monitoring rounds**) for backlog clearance, focusing on longest-waiting patients
- £80m (**funded from existing HSC baseline**) to expand broader elective care capacity.

This represents the **first opportunity at scale to reduce the capacity gap and target long waiting routine patients** since ECF publication.

ECF 2024: Seven Reform Themes

Elective Care Transformation

- Establishment and expansion of dedicated elective care centres (e.g. Lagan Valley, Daisy Hill); and increased specialisation (e.g. orthopaedics, cataracts)
- Expansion of protected surgical and diagnostic capacity; reduced reliance on unscheduled care infrastructure.

Backlog Clearance

- Use of 'mega-clinics'; targeted specialty interventions (e.g. hips, knees, scoliosis)

- Relaunch of cross-border reimbursement scheme (limited to 2+ year waiters).

Quality, Efficiency & Effectiveness

- Use of "Getting It Right First Time" (GIRFT) reviews
- Benchmarking through patient-level information and costing systems (PLICS) and variation analysis.

Workforce development

- Addressing underuse of surgical time
- Expanding pre-op assessment and training posts in vulnerable specialties.

Independent Sector Engagement

- Shift from ad hoc outsourcing to strategic partnerships
- Emphasis on value for money and long-term capacity sharing.

Funding models

- Exploration of new funding mechanisms, within existing legislative constraints.

Patient Communication

- "Waiting Well" policy to be co-developed with third sector, with launch of £500k/annum charity grant scheme to support patients on long waiting lists



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Challenges

- The funding gap remains acute: full backlog clearance needs £135m/year for five years
- Workforce shortages, infrastructure limits, and unscheduled care pressures continue to hamper delivery
- Procurement, pay negotiations, and capital investment delays pose further barriers
- Risks of duplication and inefficiency without cross-system coordination.
- Highlighted risks of exacerbating inequality via cross-border schemes that require upfront payment – Albeit this was acknowledged as a small element of recently announced funding
- Called for a shift in public engagement model: from passive recipients to active partners.
- Recommended strategic analysis of health inequality impacts within waiting list data and outcomes.

Stakeholder Insights

Trust perspectives (South Eastern HSC Trust – Roisin Coulter):

- Emphasised strong support for prioritising elective care as a system-wide mission
- Urged better public communication and more explicit public responsibilities (e.g. attendance, appointment cancellation, etc.)
- Emphasised staff commitment and need for unwavering leadership to “hold the line” on reform.

Patient representative perspectives (Patient Client Council – Peter Hutchinson):

- Acknowledged structural health inequalities and warned against framing public as solely responsible

Next Steps

- Rollout of investment plans across Q3–Q4 2025, including mega-clinics and diagnostic expansion
- Publication of ‘Waiting Well’ policy and finalisation of third sector grant schemes
- Continued data collection and reporting as part of PfG monitoring obligations
- Ongoing consultation with HSC Trusts, clinicians, and patient bodies to adapt and iterate plans.

