

From the Permanent Secretary  
Sir Chris Wormald



## Department of Health & Social Care

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Dame Meg Hillier MP  
Chair of Public Accounts Committee  
House of Commons  
London  
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Sent via email to: [pubaccom@parliament.uk](mailto:pubaccom@parliament.uk)

Dear Chair

17 June 2022

### **Re: Public Accounts Committee, Forty-Fourth Report of Session 2021-22, NHS Backlogs and Waiting Times in England**

I am writing to provide the committee with details of the performance indicators for elective and cancer care that the Department has put in its 2022-23 mandate to NHS England (NHSE), as referred to in our Treasury Minute response to recommendation 1 of the above Report:

**1: PAC recommendation: The Department must strengthen its arrangements for holding NHSE&I to account for its performance against waiting times standards for elective and cancer care. This should include specific expectations for improving waiting time performance in 2022–23. The Department should write to us alongside its Treasury Minute response to set out the specific and measurable performance indicators for elective and cancer care it has put in its 2022–23 mandate to NHSE&I.**

The mandate to NHSE sets out the strategic goals that the Government has set for NHS England in the year ahead. The 2022-23 mandate was published on 31 March 2022. It includes objectives on recovery of wider NHS services impacted by the pandemic, and on further delivery of the NHS Long Term Plan and related wider Government commitments, including elective recovery. The objective on delivery of the NHS Long Term Plan and wider Government commitments focuses on 13 priority commitments for the NHS (carried forward from the 2021-22 mandate).

The objectives on recovery in the mandate reinforce the targets set for recovery of elective and cancer waiting times standards in the [NHS Delivery Plan for tackling the COVID-19 backlog of elective care](#) (the 'Elective Recovery Plan') published by the NHS in February 2022.

The specific and measurable performance indicators for elective and cancer care in the 2022-23 mandate are as follows:

- Performance against 18-week Referral to Treatment waiting time standard.
- Number of patients on the Referral to Treatment pathway who have been waiting for 52 weeks or more.
- Referral to Treatment pathway waiting list size.
- Year on year reductions in the gap between the best and worst CCGs for all-cancer survival.

- Bowel screening coverage (for agreed age ranges, screened within the last 30 months).
- Breast screening coverage (females aged 50-70, screened within the last 36 months).
- Cervical screening coverage (females aged 25-64, attending screening within the target period).
- Proportion of cancers diagnosed at stages 1 or 2.
- Urgent two-week cancer referral performance - potentially to be replaced by the 28- day faster diagnosis standard subject to an upcoming consultation and subsequent Government agreement.
- Percentage of patients starting cancer treatment within 62 days of GP referral.
- One year cancer survival.

NHSE is expected to report on the specific metrics mentioned above on a quarterly basis.

Yours sincerely,



**SIR CHRIS WORMALD**  
**PERMANENT SECRETARY**

