

Written evidence submitted by the Independent Age response

About Independent Age

Independent Age's mission is to ensure that as we grow older, we all have the opportunity to live well with dignity, choice and purpose. Founded over 150 years ago, we are an established voice for people in later life, their families and carers. We offer free and impartial advice and information, as well as providing connection services to improve wellbeing and reduce loneliness. In addition, we use the knowledge and understanding gained from our frontline services to campaign on issues that affect older people.

We are responding to this inquiry as we have evidence and recommendations around the impact of the NHS elective backlog on older people in England. This submission focuses on the key issues of the backlog and waiting times, and the impact these have on older people.

For more information about this submission please contact publicaffairs@independentage.org

Current NHS backlog and waiting times

Accessing treatment in a timely manner was a challenge before the outbreak of COVID-19 in March 2020. Years of funding issues, together with growing demand for NHS services - only partly explained by our ageing population¹ and staffing shortages - led to deterioration in hospital performance and other services across the board.² The pandemic has greatly exacerbated the issue.

By the end of September 2021, there were 5,834,421 people waiting for hospital treatment.³ Of these, over 300,000 have been waiting a year or more. Even more concerning, over 12,000 patients have been waiting two years or more - a trend that has been increasing over the last six months.

Our recent report, *Patiently Waiting*⁴, explored older people's experiences of waiting for elective treatment in England. As part of this, nationally representative polling carried out by YouGov for Independent Age found that 10% of people aged 50+ reported that they were on a waiting list.¹ However, half of these people had not received any confirmation from the NHS, suggesting that official waiting time figures may be underestimating the scale of need.

At Independent Age, we have heard directly from older people who are deteriorating as they wait months and years for treatment - living with daily pain, anxiety and uncertainty. In order to improve their experiences and quality of life, we want to see:

- The government make 'waiting well' a priority for the NHS, including personalised care management plans for those waiting 6 months or more for treatment.
- Funding for community healthcare to help people better prepare for, and recover from, treatment.
- A health and care workforce plan at both national and local levels to meet the rising needs of older patients preparing for and recovering from treatment.

¹Independent Age commissioned a nationally representative YouGov survey of about 8,000 people aged over 50, and another poll of about 4,000 adults aged over 18 in Great Britain, asking questions about people's experience, needs and priorities when waiting for treatment on the NHS. The poll ran 12-20 July 2021.

The disproportionate impact of waiting lists on older people

While NHS waiting times disaggregated by age are not available, severe delays in access to elective care are likely to have disproportionately impacted people aged 65 and above, who are more likely than any other age group to have multiple conditions or require elective hospital care.⁵ This includes common life-enhancing procedures such as joint replacements and cataract removal. In September 2021, there were 699,823 people waiting for orthopaedic treatment⁶ – it is likely a large proportion of these were people in later life.

At Independent Age, we have recently carried out research into older people's experiences of waiting for elective treatment on the NHS in England. People told us their physical, emotional, and mental health has deteriorated while waiting for treatment.⁷ Some have reported experiences of long periods of pain, anxiety and depression, diminished mobility, and increased care needs.

"Because I've waited so long, I'm becoming ill and my muscles are becoming weak."
(Interview participant aged 82, waiting three years).

In polling carried out by YouGov for Independent Age, 52% of people aged 50 and over waiting for treatment said they were in daily pain. A further 55% said that they have some difficulty with day-to-day activities. In interviews with older people waiting for treatment, people spoke about their difficulty with daily life due to mobility issues caused by their health condition, the loss of key coping activities during lockdown, and the impact of the pandemic on their confidence to do certain activities. Sometimes a combination of all these factors impacted their ability to go about daily life.

"I'm completely dominated by pain." (Independent Age survey respondent)

People in later life also spoke about problems with the provision of information about their treatment and the quality of communications around this. A key issue was the lack of additional information or support on managing their pain or condition while waiting for treatment. Worryingly, YouGov nationally representative polling found that only 15% of older people waiting for surgery received information about how to manage their pain and symptoms.

Tackling the backlog and supporting people to wait well

The government has announced several funding packages and initiatives to tackle the elective backlog and bring down waiting lists, including investment in surgical hubs across the country. These commitments are welcome but reducing the backlog will realistically take several years to achieve. Many older people will continue to face long waits for treatment – potentially two years or more. Yet there has been little detail in recent plans and announcements around improving care and support for those waiting for treatment.

Targeted support must be provided to immediately improve people's experiences and make the investment in the NHS feel tangible for those who are waiting. Proactively supporting older people to stay well while waiting for treatment can also help to ease pressure on other health services, such as primary care.

"The only advice I've been given is to take paracetamol, no other advice than that."
(Interview participant aged 70, waiting three months)

For example, the perioperative medicine for older people undergoing surgery (POPS) service at Guy's and St Thomas' Hospital operates a full patient assessment and optimisation-based preoperative

clinic for those undergoing elective surgery. The POPS service includes preoperatively assessing older patients and treating any medical, functional, psychological and social issues, with the aim of reducing postoperative complications and making sure of a safe and effective discharge from the hospital.⁸ The POPS service is recognised locally and nationally as being of high quality, innovative and clinically effective.

We believe there are several steps the government could take to improve the waiting experience and treat it as an opportunity for people to prepare for surgery and manage their health. That is why we want to see the government embed 'waiting well' as a core part of elective recovery.

As part of this, we want every patient waiting 6 months or longer to receive a personalised care management plan to support them as they wait for treatment. These care management plans should include information on how patients can manage their health and symptoms at home and how they can stay fit before surgery. Where necessary, the plans should include referrals to physiotherapists or other healthcare professionals to help people manage their condition. The plans should also provide a point of contact if their condition deteriorates or if they have any questions or concerns. This is a key issue for older people, with Independent Age's YouGov polling showing 33% of patients waiting for treatment said a single point of contact would improve their experience most - the highest of all the proposed interventions while waiting.

In addition to care management plans, investment in tackling the backlog must look beyond hospital activity and include support for community healthcare. Community healthcare services refers to care outside hospital but separate from GP and other primary care services. It includes physiotherapy, rehabilitation and exercise classes. These services can offer advice and support to manage someone's condition, prepare them for treatment and help them recover.

A well-resourced wider community, allied healthcare and administrative workforce is needed to improve the whole elective care pathway. We are aware that community healthcare is under strain due to rising demand from the pandemic, but it plays a critical part in helping older patients prepare and recover from surgery. Community healthcare also reduces pressure on primary care, hospital administration and A&E. This area of health has already proven to be highly cost effective particularly in falls prevention.⁹

In taking this comprehensive approach, the NHS will be better able to help people maintain their health as they age, rather than just treat their ailments. It can also ease pressure on other parts of the NHS, including GP and A&E services – both of which are facing record levels of pressure currently.

Conclusion

Hospital waiting lists are at record levels and are likely to get worse before they get better. As greater users of elective care than other age groups, people in later life will continue to be badly affected by long waiting times. The response to the elective backlog so far has been focused solely on reducing waiting times, with little to no detail on supporting people to stay well, avoid deterioration and best prepare while waiting. A holistic approach to the treatment pathway is required to achieve the best outcomes for people who are waiting.

People in later life have told Independent Age that they want better communication and information while they wait, greater support to manage their health, and more preparation and advice ahead of their treatment. This is why we are calling on the government and NHS to take this opportunity to

transform the waiting period from one of anxiety to one of patient empowerment, preparation and holistic support.

December 2021

¹ [King's Fund, 2021. NHS waiting times: Our position.](#)

² [Health Foundation, 2020. The bigger picture: learning from two decades of changing NHS care in England.](#)

³ NHS England and NHS Improvement (2021). NHS referral to treatment (RTT) waiting times data September 2021.

⁴ Independent Age, 2021. [Patiently Waiting: Older people's experiences of waiting for surgery.](#)

⁵ Nuffield Trust, 2021. [Elective \(planned\) treatment waiting times.](#)

⁶ NHS England and NHS Improvement (2021). NHS referral to treatment (RTT) waiting times data September 2021.

⁷ Independent Age, 2021. [Patiently Waiting: Older people's experiences of waiting for surgery.](#)

⁸ Guy's and St Thomas' NHS Foundation Trust. [Perioperative medicine for older people undergoing surgery.](#)

⁹ Public Health England, 2018. [A structured literature review to identify cost effective interventions to prevent falls in older people living in the community.](#)