

RTT Active Monitoring

Reference Number: RDF1839-23 Date of Response: 19/09/23

Further to your Freedom of Information Act request, please find the Trust's response(s) below:

Please be aware that the Royal Devon University Healthcare NHS Foundation Trust (Royal Devon) has existed since 1st April 2022 following the integration of the Northern Devon Healthcare NHS Trust (known as Northern Services) and the Royal Devon and Exeter NHS Foundation Trust (known as Eastern Services).

Could you please answer the following questions about when a clock stops for Active Monitoring and referral to treatment times:

- Does the trust have a waiting list policy? Answer: Yes – Joint Access Policy across all of Devon.
- 2) What is the trusts definition of "Active Monitoring"? I can see the basic definition on the government website but cannot find a detailed version. Answer: Active monitoring is where a decision is made that the patient does not require any form of treatment currently but is to be monitored in secondary care. When a decision to commence a period of active monitoring is made and communicated with the patient, the RTT clock stops. Stopping a patient's clock for a period of active monitoring requires careful consideration on a case-by-case basis and its use needs to be consistent with the patient's perception of their wait.
- 3) What type of things count as Active Monitoring ie seeing a nurse in outpatients for dressings to a wound that won't improve till after surgery does this affect the RTT clock and stop it to start active monitoring? Answer: As per the above definition, we would only apply active monitoring if the patient does not require any kind of treatment currently but will be monitored by secondary care. E.g patient has been seen in clinic and the plan is not to do anything now but to see in 6 months to see if the condition has progressed enough to need surgery.

Each patient pathway requires individual clinical consideration but, in the scenario given, if the dressing changes are also to monitor the wound and to decide when the condition has progressed enough to need surgery then we may apply active monitoring. If the decision has been already made to list the patient for surgery and the dressings are to help the wound until the point of surgery then we would not apply active monitoring and the clock would continue.

4) How long is the duration of Active Monitoring? What is deemed too long a period as a active monitoring period?

Answer: Clinical decision based on the individual needs of each patient.

- 5) How regularly should a patient be seen during a active monitoring period? Is there a maximum recommended amount of time between monitoring visits? Answer: Please see response to question 4.
- 6) Does not having any monitoring visits for a long time nullify the active monitoring period? Answer: The frequency of monitoring visits/appointments varies depending on the needs of each individual patient