

A new, integrated approach to endoscopy capacity

Expanding diagnostic capacity: the opportunity for private hospital groups to support NHS recovery

Across England, restoring NHS performance against key constitutional standards remains a central priority for healthcare leaders. Among the most pressing challenges is the commitment that patients should receive diagnostic tests within six weeks of referral.

Despite significant progress in expanding diagnostic activity since the COVID-19 pandemic, waiting times remain above this standard. Millions of diagnostic tests are performed every month across the NHS, yet a substantial proportion of patients still wait longer than six weeks for investigations such as imaging, physiological tests and endoscopy procedures.

Addressing this backlog requires sustained expansion of diagnostic capacity across the health system. Increasingly, national policy is recognising that this expansion cannot rely solely on NHS providers. Independent hospital groups will play a crucial role in delivering additional diagnostic activity over the coming years.

For private hospital leaders, this represents both a strategic opportunity and a practical challenge: how can organisations expand capacity quickly enough to support NHS recovery while protecting their existing private patient services?

Flexible healthcare infrastructure may offer one of the most effective answers.



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The NHS diagnostic recovery challenge

Diagnostic services sit at the foundation of modern healthcare. Without timely access to investigations, clinicians cannot confirm diagnoses, initiate treatment pathways or monitor disease progression.

The NHS constitution includes a commitment that patients should wait no longer than six weeks for diagnostic tests. This performance measure is monitored through the **DM01 diagnostic waiting times dataset**, which tracks activity and waiting times for fifteen key diagnostic procedures, including endoscopy investigations such as colonoscopy and gastroscopy.

However, meeting this standard has become increasingly difficult in recent years.

Diagnostic waiting times began to rise during the late 2010s and increased significantly during the COVID-19 pandemic when elective activity and many diagnostic services were temporarily paused. Although performance has improved since then, the system has not yet returned to its previous level.

As of recent national reporting, **around 1.7 million patients are waiting for diagnostic tests**, with several hundred thousand waiting longer than six weeks.

Reducing this backlog is essential not only for improving patient experience but also for restoring wider healthcare performance. Diagnostics represent a critical step within many clinical pathways, particularly cancer pathways.

When diagnostic investigations are delayed, the entire healthcare pathway slows down.

Community Diagnostic Centres and system expansion

To address the backlog, the NHS has launched several major initiatives aimed at expanding diagnostic capacity.

One of the most significant is the rollout of **Community Diagnostic Centres (CDCs)**. These centres provide diagnostic services outside traditional hospital environments, often located in community settings such as retail parks, health campuses or standalone diagnostic hubs.

More than **160 CDC sites are now operating across England**, delivering millions of additional diagnostic tests each year.

These centres provide a range of services including:

- ◆ CT and MRI imaging
- ◆ ultrasound investigations
- ◆ physiological tests
- ◆ pathology services
- ◆ endoscopy procedures

By separating diagnostics from acute hospital activity, CDCs aim to increase capacity while improving access for patients.

However, even with this expansion, the scale of the backlog means additional capacity is still required.

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The growing role of the independent sector

Recognising this challenge, NHS policy increasingly emphasises collaboration with independent healthcare providers.

Recent market engagement exercises have explored how independent providers could contribute more significantly to diagnostic recovery. Some estimates suggest that **up to 35 percent of diagnostic activity could be delivered by the independent sector** as part of a broader partnership between NHS organisations and private healthcare providers.

Independent hospitals already play a major role in elective recovery programmes, particularly for surgical procedures. Expanding their role in diagnostics could help accelerate the NHS recovery trajectory.

For private hospital groups, this presents a significant opportunity to expand activity and strengthen relationships with NHS commissioners.

However, expanding diagnostic services is not without its challenges.



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The infrastructure constraint facing private hospitals

Many independent hospitals were designed primarily to support elective surgical procedures rather than large-scale diagnostic programmes.

As demand for diagnostics increases, some providers face several structural constraints.

Estate limitations

Existing hospital estates may not have space for additional diagnostic rooms, particularly for complex services such as endoscopy.

Capital investment

Building new clinical facilities requires significant capital investment and lengthy planning processes. For many organisations, committing to large construction projects carries financial risk.

Protecting core business

Private hospitals must also ensure that expanding NHS activity does not disrupt their core private patient services.

Balancing these priorities can make it difficult for organisations to expand diagnostic services quickly enough to meet demand.

Endoscopy: one of the biggest opportunities

While imaging services such as CT and MRI often receive the most attention, endoscopy represents one of the most important areas for capacity expansion.

Procedures such as colonoscopy and gastroscopy are essential for diagnosing gastrointestinal diseases and cancers. Demand for these investigations continues to rise due to several factors.

First, cancer diagnostic pathways increasingly rely on endoscopy investigations.

Second, the NHS bowel cancer screening programme has expanded to include younger age groups, increasing the number of patients requiring follow-up colonoscopy procedures.

Third, demographic change means that more people are living longer with conditions requiring diagnostic investigation.

At the same time, endoscopy services remain difficult to scale due to the specialised facilities required and the need for trained clinical teams.



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The scale of opportunity

If private hospital groups were able to expand diagnostic capacity, the potential increase in activity could be significant.

A typical two-room endoscopy facility operating seven days per week can deliver approximately **6,000 to 8,000 procedures annually**, depending on operating schedules and case mix.

The potential impact of deploying additional facilities across multiple independent hospitals is illustrated below.

Additional endoscopy facilities	Estimated annual procedures
5 facilities	30,000-40,000 procedures
10 facilities	60,000-80,000 procedures
20 facilities	120,000-160,000 procedures

At national scale, this additional capacity could make a meaningful contribution to reducing diagnostic waiting times and supporting NHS recovery.

For private hospital groups, it also represents an opportunity to expand service offerings and strengthen partnerships with NHS commissioners.

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Flexible infrastructure as a strategic solution

One of the most significant barriers to expanding diagnostic services is the time required to develop new clinical facilities.

Traditional hospital construction projects can take several years to plan and deliver. During this time, demand for diagnostic services continues to grow.

Flexible healthcare infrastructure provides an alternative approach.

Mobile and modular healthcare facilities can be deployed much more rapidly than traditional builds, allowing organisations to increase capacity in months rather than years.

These facilities can be installed adjacent to existing hospital buildings or located within nearby healthcare campuses.

For independent providers, this approach offers several strategic advantages.

Speed to market

Flexible facilities can often be deployed significantly faster than permanent construction projects. This allows private hospital groups to respond quickly to new opportunities or changes in demand.

Reduced capital risk

Because mobile or modular facilities can be leased rather than purchased, organisations can expand capacity without committing to large capital investments.

This approach provides greater financial flexibility and reduces long-term risk.

Protecting core services

Deploying dedicated diagnostic facilities allows hospitals to expand NHS activity without disrupting existing private patient services.

Separate diagnostic units can operate alongside existing hospitals while maintaining operational independence.

Scalability

Flexible infrastructure allows organisations to scale services up or down depending on demand. Mobile facilities can also be relocated if clinical requirements change.



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The role of Vanguard Healthcare Solutions

Vanguard Healthcare Solutions has extensive experience delivering flexible healthcare infrastructure across the UK and internationally.

The company's mobile and modular healthcare facilities have been used by healthcare organisations to:

- ◆ expand diagnostic capacity
- ◆ maintain services during hospital refurbishment
- ◆ deliver community diagnostic centres
- ◆ support elective recovery programmes

In the context of diagnostic recovery, Vanguard's endoscopy facilities provide a practical way for healthcare organisations to increase capacity quickly while maintaining high clinical standards.

These facilities are designed to meet the complex requirements of endoscopy services, including patient preparation areas, recovery bays and specialist equipment support.

For private hospital groups seeking to expand diagnostic activity, flexible infrastructure offers a route to increasing capacity without the delays associated with permanent construction.

A strategic opportunity for private providers

The next phase of NHS recovery will depend on collaboration between public and independent healthcare providers.

For private hospital groups, expanding diagnostic services offers a chance to play a more significant role in the national healthcare system while strengthening long-term partnerships with NHS commissioners.

However, achieving this expansion will require innovative approaches to infrastructure and service delivery.

Flexible healthcare facilities provide one of the most effective ways to achieve this goal.

By enabling organisations to expand capacity quickly, reduce capital risk and maintain operational flexibility, these solutions can support independent providers to deliver additional diagnostic services while protecting their core business.

As demand for diagnostic investigations continues to grow, the ability to scale services rapidly will become increasingly important.

Private hospital groups that invest in expanding diagnostic capacity today will be well positioned to support NHS recovery and meet the evolving healthcare needs of patients across the UK.

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Conclusion

As the NHS works to restore diagnostic performance and meet the six-week constitutional standard, collaboration with the independent sector will play an increasingly important role. Private hospital groups are uniquely positioned to support this effort, with established clinical environments, experienced teams and the ability to deliver high-quality diagnostic services at scale. Expanding endoscopy capacity within the independent sector could make a meaningful contribution to reducing waiting times, supporting earlier diagnosis and strengthening healthcare pathways across England.

However, unlocking this opportunity requires solutions that allow providers to expand quickly and flexibly, without compromising their existing services or committing to long development timelines. Flexible healthcare infrastructure offers a practical way forward. By deploying mobile or modular endoscopy facilities alongside existing hospitals, private providers can rapidly increase diagnostic capacity, respond to changing demand and support NHS recovery efforts while maintaining the agility needed in a dynamic healthcare environment. Through innovative partnerships and adaptable infrastructure, the independent sector can play a significant role in improving access to essential diagnostic services for patients across the country.

www.vanguardhealthcare.co.uk

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