

Publication Report



Quarterly Acute Hospital Activity and NHS Beds Information for Scotland

Quarter ending September 2015

Publication date - 22 December 2015



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Introduction

This quarterly publication summarises information on different aspects of hospital care, sourced from hospital administrative systems across Scotland. It is designed to provide timely, high level hospital activity and beds statistics.

This release includes:

- Newly published information on quarterly inpatient, day case and outpatient activity, and bed statistics for NHSScotland up to September 2015, with trends back to September 2010.

Points to Note

Estimations / provisional data

It should be noted that outpatient, inpatient, day case and beds figures may include an element of estimation for any incomplete or outstanding data submissions. Therefore, data for the latest time period should be treated as provisional as subsequent data submissions could be lower or higher than the estimated values. The data tables which accompany this report identify statistics where estimation has been used. Specific issues are as follows:

Outpatient

- There are occasions when some NHS Boards are not able to submit ISD(S)1 outpatients data to ISD. Where possible, data gaps have been filled using SMR00. Please note that SMR00 data are provisional and it may be revised in future publications, in particular for most recent quarters. In areas where it has not been possible to use SMR00 as an alternative data source, data have been estimated using the last complete data submission. Recently NHS Highland has experienced difficulties in submitting their data, as a result this publication includes NHS Highland outpatient from SMR00 from June 2014 onwards for new outpatients. Further details can be found in the 'outpatients estimates' sheet of the following table [Quarterly NHS outpatient activity hbt Dec15.xlsx](#)

Beds

NHS Grampian

- This publication contains bed statistics submitted by NHS Grampian from their local system. Between March 2011 and June 2014, NHS Grampian was unable to submit beds statistics to ISD due to system implementation problems.
- After exploring several methods trying to tie up ISD(S)1 data with SMR01 data for bed days, all of which proved unsuccessful, we have taken a very simple approach to estimate the numbers of available beds for All Acute Specialties, All Acute Surgical combined and All Acute Medical combined for Grampian to cover the period December 2010 – June 2014.
- For these three groups of specialty codes, we fitted straight lines joining up the last and first known data points for each of the four quarters. For example, we joined up September 2010 with September 2014 to estimate the same quarter in intervening years (i.e. this line provided estimates for September 2011, September 2012 and September 2013).

- We then replicated this for the other three quarters (i.e. December 2009 with December 2014 to estimate the December figures; March 2010 with March 2015 to estimate the March figures; and June 2010 with June 2015 to estimate the June figures).
- We used this method to maintain the known seasonality effects through the year. We then averaged across the four quarters to provide estimates for annual data.
- However, for all other individual specialties (and all specialties combined) we have suppressed the figures for the period December 2010 – June 2014 for Grampian because we have not estimated these missing data.

NHS Highland

- Similarly NHS Highland has been unable to submit complete data to ISD since quarter ending March 2014. As a result NHS Highland data have been suppressed for quarters ending March 2014 to September 2015. NHS Highland is working with Data Management to try and resolve data submission issues. They have recently undertaken a bed audit which will help to identify and address any outstanding issues with the ISD(S)1 hospital beds data extract. Further information about this can be found in the [data issues and completeness document](#) which accompanies this report.
- We are still suppressing data for Mar 2014 onwards because we have not yet received enough known data to attempt to fill in the gap.

Key points

Outpatients

- There were over 365,000 new outpatient attendances in July - September 2015, an increase of 1.5% from last quarter.
- Around 1 in 10 new outpatient appointments were not attended by patients in July - September 2015, which represents a slight increase from the previous quarter but is similar to the quarter ending September 2014.
- Return outpatient attendances have seen a reduction of around 1% since last quarter.

Inpatient and day case patients

- There was an increase of approximately 2% in the number of patients treated in hospital as either an inpatient or as a day case patient between quarters ending September 2014 and September 2015. Comparing with quarter ending September 2010 data show an increase of about 12%.

Bed statistics

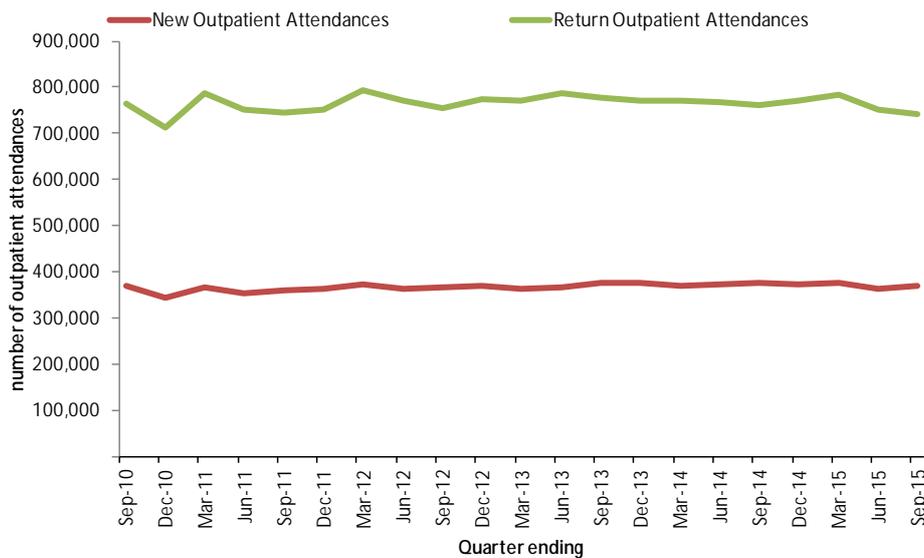
- There was a reduction of around 2% in the average number of available staffed beds in acute specialties since last quarter for Scotland excluding Grampian and Highland NHS Boards. However, the transfer of acute services to the new Queen Elizabeth University Hospital may have had an impact on data completeness for the Board in the last quarter, which could explain part of the reduction observed above for Scotland excluding Grampian and Highland NHS Boards.
- Comparing with quarter ending September 2010 data in acute specialties show a reduction of around 4% for Scotland excluding Grampian and Highland NHS Boards. A long term trend in these figures is not available for Scotland due to problems of submission from several Boards' patient admission systems.

Results and Commentary

1. Quarterly Outpatient Activity

Chart 1 shows the trend of new and return outpatient attendances in NHSScotland over the last five years.

Chart 1: Quarterly outpatient activity for patients treated in NHSScotland for quarters ending September 2010 to September 2015^P



^P Provisional. Please note that SMR00 data are taken from a live system and can be updated for a number of quarters by NHS Boards. Data are therefore provisional and may be revised in future publications. Further details can be found in [Table 1](#).

Source: The main source of information for this chart is ISD(S)1; however, SMR00 has been used to fill data gaps in some areas where Boards have not been able to submit ISD(S)1 data.

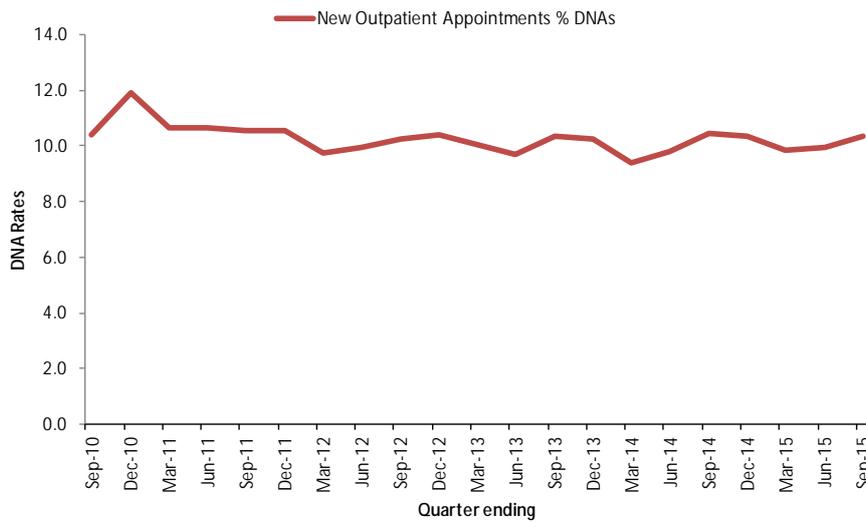
Health Board data relating to [Chart 1](#) are provided in the following table

[Quarterly NHS outpatient activity hbt Dec15.xlsx](#)

The number of new outpatient attendances has remained relatively steady over the past five years, at around 367,000 for NHSScotland. The number of return outpatient attendances remained at around 764,000 for most of the time period, with a small reduction of 5% since quarter ending March 2015.

Outpatient attendances figures can be affected by patients not turning up to an offered appointment without any notice. The rate of new appointments which a patient ‘Did Not Attend’ (DNA) is shown in [Chart 2](#).

Chart 2: DNA rates (per 100 new outpatient appointments), NHSScotland for quarters ending September 2010 to September 2015^P



^P Provisional. Please note that SMR00 data are taken from a live system and can be updated for a number of quarters by NHS Boards. Data are therefore provisional and may be revised in future publications. Further details can be found in [Table 1](#).
Source: SMR00

Health Board data relating to [Chart 2](#) are provided in the following table [Quarterly NHS outpatient activity hbt Dec15.xlsx](#)

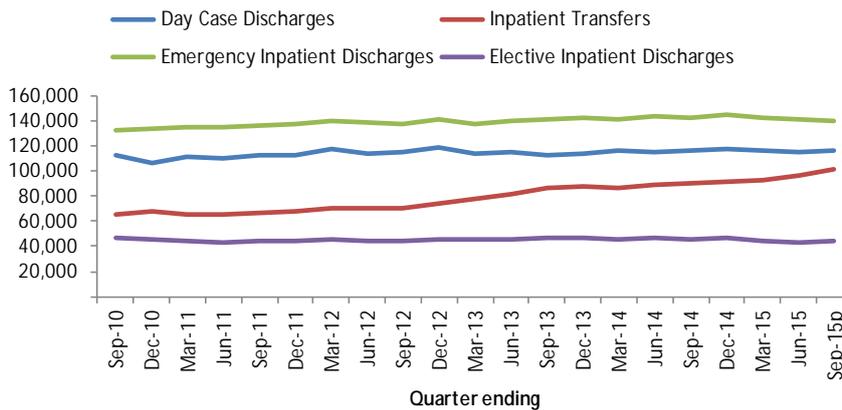
After a decrease in quarter ending March 2015, the rate of ‘Did Not Attends’ (DNAs) of new outpatient appointments has increased in the last two quarters and is now the same as the average rate over the last 5 years for NHSScotland (10.3 per 100 appointments).

The trend displays some slight seasonal variation, with higher rates of DNAs occurring in quarters ending September and December. The peak in December 2010 coincides with [extreme weather conditions](#) across Scotland.

2. Quarterly Inpatient and Day Case Activity for Acute Specialties

As well as attending hospital as an outpatient, patients can also be seen as an [inpatient](#) or [day case](#). When a patient is first admitted to hospital as an inpatient, they can be admitted as either an [emergency](#) or an [elective](#) (planned) inpatient. Patients may then need to be moved to another doctor, clinical specialty, and facility within the hospital or another hospital altogether, to receive the specialist care they require. These moves are known as [transfers](#). The chart below shows the number of inpatient /day case discharges split by admission type. The total number of inpatient discharges can be found in [Quarterly NHS inpatient activity hbt Dec15.xlsx](#)

Chart 3: Inpatient discharges by admission type, for acute specialties, in NHSScotland, for quarters ending September 2010 to September 2015^P



^P - Provisional. Please note that SMR01 data are taken from a live system and can be updated for a number of quarters by NHS Boards.

Source: Inpatient and day case discharge figures for acute specialties are sourced from SMR01 records if the level of completeness of the SMR01 data is deemed to be fit for publication (97.5% of the expected figure). If SMR01 records are not deemed to be fit-for-publication then ISD(S)1 data are used.

Health Board data relating to [Chart 3](#) is provided in [Quarterly NHS inpatient activity hbt Dec15.xlsx](#)

For the acute specialties, since September 2010:

- The number of **inpatient and day case discharges** has increased by around 44,000 (12%). It is now at around 401,000 in quarter ending September 2015
- The number of **day case discharges** has increased by approximately 3%
- The number of **emergency inpatient discharges** increased by approximately 6%
- The number of **elective inpatient discharges** has decreased by approximately 6%
- The biggest change was seen in the number of **transfers** which have increased by around 54%. This increase has been driven by changes in recording practices and service redesign to the emergency care services in some NHS Boards.

3. NHS Hospital Quarterly Beds Statistics

In order to provide an effective, safe and efficient service to patients, hospitals must balance the provision of staffed beds against anticipated demand. Historically, the total number of beds had been reducing in line with evolving models of healthcare provision which aim to reduce the frequency and duration of hospital admissions. This downward trend is currently continuing. The following indicators only take into account the use of beds by inpatients.

Due to problems with the implementation of a new patient administration system, no data were successfully extracted for NHS Grampian between March 2011 and June 2014. NHS Highland has had similar problems since quarter ending March 2014. NHS Grampian's missing data were estimated and are presented in the following table [Quarterly trends in available beds Dec15.xlsx](#). More details on this estimating

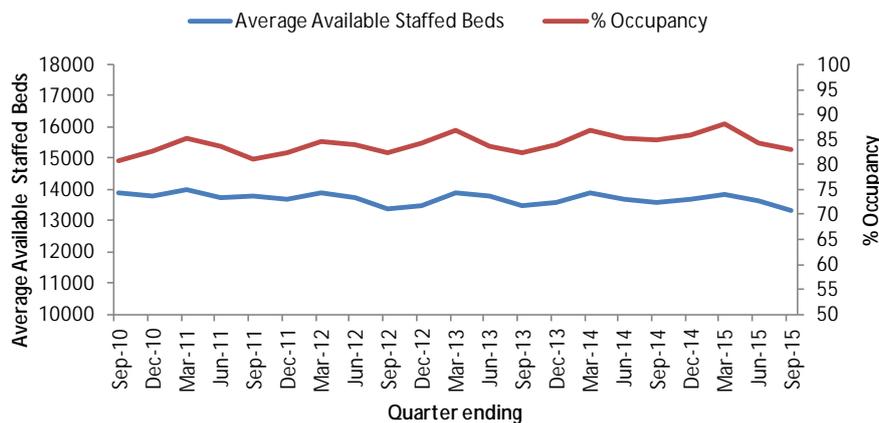
process can be found in the [Beds Methodology](#) section. As no new data have been submitted for NHS Highland it has not been possible to apply the same estimation process.

As a result, NHS Grampian and NHS Highland have been excluded from [Chart 4](#) to allow a consistent trend to be shown for the remaining NHS Boards.

3.1 Average Available Beds and Percentage Occupancy

The main unit used to measure bed provision within this publication is an [available staffed bed](#). As the number of available beds in a particular ward or specialty can vary, due to factors such as demand and seasonality (peaking in quarter ending March and falling in quarter ending September) the total number of available beds is calculated by taking the average of the number of beds available in each day of the quarter.

Chart 4: Average available staffed beds and percentage occupancy for acute specialties, NHSScotland excluding NHS Grampian and NHS Highland, quarters ending September 2010 to September 2015^P



^P - Data for quarter ending September 2015 are provisional.

Source: ISD(S)1

Health Board data relating to [Chart 4](#) can be found in the following table [Quarterly trends in available beds Dec15.xlsx](#)

The daily average number of available staffed beds in acute specialties for Scotland excluding NHS Grampian and NHS Highland for the quarter ending September 2015 was around 13,300.

The overall trend for Scotland excluding the Grampian and Highland NHS Boards shows a reduction of approximately 4% since quarter ending September 2010, and a reduction of about 2% from last quarter. However these figures are slightly affected by the reconfiguration of acute adult services in NHS Greater Glasgow and Clyde, which may have affected the Board’s latest figures.

Most NHS Boards (Borders, Grampian, Greater Glasgow and Clyde, Tayside and Western Isles) as well as the Golden Jubilee National Hospital have seen a downwards trend since quarter ending 2010, when a few others have seen their average increase (Dumfries and

Galloway, Fife, Forth Valley, Lanarkshire, Lothian and Orkney). The trends for Ayrshire and Arran and Shetland have remained stable over that period.

Table 1 below presents the percentage changes of the average available staffed beds from last quarter and since the quarter ending September 2010 at NHS Board level.

Table 1: Average available staffed beds and percentage occupancy for acute specialties, NHSScotland excluding NHS Grampian and NHS Highland, quarters ending September 2010 to September 2015^P

NHS Board¹	Sept. 2015^P	% change from last quarter	% change from quarter ending Sep 2010
Scotland - ex Grampian & Highland	13,301	-2.4%	-4.4%
Ayrshire & Arran	1,086	-2.4%	-1.2%
Borders	258	-1.5%	-27.2%
Dumfries & Galloway	537	-0.2%	3.4%
Fife	842	0.3%	10.4%
Forth Valley	665	-0.6%	16.9%
Golden Jubilee National Hospital	179	3.4%	-0.8%
Grampian	1,546	-0.6%	-11.8%
Greater Glasgow & Clyde	4,371	-4.8%	-9.7%
Lanarkshire	1,473	-0.7%	-0.9%
Lothian	2,337	-1.7%	-4.3%
Orkney	48	-0.4%	4.7%
Shetland	52	-0.9%	7.4%
Tayside	1,347	-1.5%	-6.1%
Western Isles	105	-5.4%	-17.4%

Notes:

1. NHS Highland data are not available.

2. NHS Lanarkshire and NHS Lothian show a reduction of their average available staffed beds since quarter ending September 2010 but their overall trends show an increase over the time period. Similarly NHS Ayrshire and Arran's trend is actually fairly stable over the same period.

^P - Data for quarter ending September 2015 are provisional.

Source: ISD(S)1

Bed use is measured by [percentage occupancy](#). The fluctuation in the percentage occupancy shown in [Chart 4](#) can be explained by seasonal demand. Bed occupancy increases during winter months because of increased hospital activity at that time of year.

Over the last five years, there has been a slight increase in the all acute specialties percentage occupancy of around two percentage points from 81% in quarter ending September 2010 to 83% in quarter ending September 2015.

3.2 Throughput and Mean Stay per Episode

ISD are currently reviewing the methodology for calculating throughput and mean stay. Throughput and mean stay data using the existing methodology can be found in the following table [Quarterly trends in available beds Dec15.xlsx](#)

Beds methodology

NHS Grampian

Due to problems with the implementation of their new patient administration system, no data were successfully extracted for NHS Grampian between March 2011 and June 2014. NHS Grampian has now been able to submit bed numbers from their local system for the last five quarters.

After exploring several methods trying to tie up ISD(S)1 data with SMR01 data for bed days, all of which proved unsuccessful, we have taken a very simple approach to estimate the numbers of available beds for All Acute Specialties, All Acute Surgical combined and All Acute Medical combined for Grampian to cover the period December 2010 – June 2014.

For these three groups of specialty codes, we fitted straight lines joining up the last and first known data points for each of the four quarters. For example, we joined up September 2010 with September 2014 to estimate the intervening relevant quarters (i.e. this line provided estimates for September 2011, September 2012 and September 2013).

We then replicated this for the other three quarters (i.e. December 2009 with December 2014 to estimate the December figures; March 2010 with March 2015 to estimate the March figures; and June 2010 with June 2015 to estimate the June figures). We used this method to maintain the known seasonality effects through the year.

We finally averaged across the four quarters to provide estimates for annual data.

However, for all other individual specialties (and all specialties combined) we have suppressed the figures for the period December 2010 – June 2014 for NHS Grampian because we have not estimated these missing data.

NHS Highland

We suppressed data for March 2014 onwards because we have not yet received enough known data to attempt to fill in the gap (we only have one month's worth of data for September 2015).

Glossary

Acute Hospital Care/Activity	Acute Hospital Care/Activity includes services such as: consultation with specialist clinicians; emergency treatment; routine, complex and life saving surgery; specialist diagnostic procedures; close observation and short-term care of patients. 'Acute' hospital care includes activity occurring in major teaching hospitals, district general hospitals and community hospitals but excludes obstetric, psychiatric and long stay care services.
Average available staffed beds	The average daily number of beds, which are staffed and are available for the reception of inpatients (borrowed and temporary beds are included).
Day case	A day case patient is when a patient makes a planned attendance to a specialty for clinical care, and requires the use of a bed or trolley in lieu of a bed.
Discharge	A discharge marks the end of an episode of care. Discharges include deaths and transfers to other specialties/significant facilities and hospitals as well as routine discharges home.
Elective Admission	An elective admission is when the patient has already been given a date to come to hospital for a planned procedure or treatment.
Emergency Admission	An emergency admission occurs when, for clinical reasons, a patient is admitted at the earliest possible time after seeing a doctor.
Episode	An SMR01 episode is generated when a patient is discharged from hospital, but also when a patient is transferred between hospitals, significant facilities, specialties or to the care of a different consultant.
Inpatient	An inpatient is when a patient occupies an available staffed bed in a hospital and either remains overnight whatever the original intention or is expected to remain overnight but is discharged earlier.
Mean stay per episode	The average period in days that the average person stays in hospital for an episode.

Occupancy (%)	Occupancy is the percentage of available staffed beds that were occupied by inpatients during the period.
Occupied Bed	An occupied bed is an available staffed bed, which is either being used to accommodate an inpatient or reserved for a patient on Pass .
Outpatient	An outpatient is a patient who attends (outpatient attendance) a consultant or other medical clinic or has an arranged meeting with a consultant or a senior member of their team outwith a clinic session. Outpatients are categorised as new outpatients or follow-up (return) outpatients.
Specialty	A specialty is defined as a division of medicine or dentistry covering a specific area of clinical activity. A full listing of specialties covered by the data sets used in this publication is available on the NHS Scotland Health & Social Care data dictionary Specialty Listing web page.
Throughput	The average number of inpatient discharges treated per bed per year [derived as: inpatient episodes / average available staffed beds]
Transfers	A transfer is where a patient will already have been admitted to hospital and is either transferred between specialties or hospital, and will be part of the same continuous inpatient stay.

Further details are available in the [NHS Scotland Health & Social Care data dictionary](#).

List of Tables

Table No.	Name	Time period	File & size
1	Average available staffed beds and percentage occupancy	September 2010 to September 2015	Excel [77kb]
2	Examples of revisions between quarters ending March 2015 and June 2015	March 2015 and June 2015	Excel [77kb]
3	Quarterly Outpatient Activity	September 2010 to September 2015	Excel [65kb]
4	Quarterly Inpatient and Day Case Activity	September 2010 to September 2015	Excel [66kb]
5	Quarterly trends in available beds	September 2010 to September 2015	Excel [1,627kb]

Note: in order to view these documents, your macro security settings will need to be set to medium. To change macro security settings using Tools, Macro, Security - set security level to Medium and re-open the report.

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Further Information

Further information can be found on the [ISD website](#)

NHS Performs

A selection of information from this publication is included in [NHS Performs](#). NHS Performs is a website that brings together a range of information on how hospitals and NHS Boards within NHSScotland are performing.

Rate this publication

Please [provide feedback](#) on this publication to help us improve our services.

Appendix

A1 – Background Information

Outpatient, inpatient and day case activity and hospital beds data are collected across NHSScotland and are based on nationally available information routinely drawn from hospital administrative systems across the country. The data sources used in this publication are the SMR00 (source for outpatients DNA information), SMR01 (source for acute specialties inpatient and day case hospital activity information) and ISD(S)1 (source for outpatient attendances and bed data) returns.

Revisions

Most of the revisions to data within this publication are planned and are due to incomplete data returns at the time of publication. All tables will be revised quarterly. In general these revisions have minimal effect on the statistics. If missing/incomplete data are significant and are due to be submitted and published in subsequent releases this will be highlighted within the notes on the affected table and the [data issues and completeness document](#). Please see the [ISD revisions policy](#) for further details.

Table 2 gives examples of changes in the data between the September and December 2015 releases.

Table 2 Examples of revisions for quarters ending March 2015 and June 2015

Scotland level ¹	March 2015 data		% change	June 2015 data		% change
	September 2015 release	December 2015 release		September 2015 release	December 2015 release	
Inpatient activity (acute specialties)	278,197	279,785	0.6%	277,322	280,062	1.0%
Day case activity (acute specialties)	115,535	116,339	0.7%	116,102	115,221	-0.8%
Outpatient activity (all specialties)	1,138,692	1,159,489	1.8%	1,123,650	1,115,149	-0.8%
Average Available Staffed Beds (acute specialties)	13,834	13,836	0.0%	13,609	13,625	0.1%

¹ Beds data are for Scotland excluding NHS Grampian and NHS Highland.

Source: SMR01 is the main source for inpatient and day case activity, ISD(S)1 is the main source for Outpatient activity and beds.

Downward revisions can occur if actual submissions are lower than estimates.

Data Sources

The data contained within this publication are predominantly based on ISD(S)1 aggregate data returns. ISD(S)1 contains summarised data by NHS Board of Treatment, hospital and specialty. This data return is in place to allow NHS Boards to report activity more frequently than that recorded on SMRs. ISD(S)1 is also the only source of bed occupancy and availability data. Where possible, missing or incomplete ISD(S)1 data have been estimated for affected NHS Boards. Estimates are based on an average of the last three submissions from the relevant NHS Boards.

The majority of outpatient attendances figures are sourced from ISD(S)1. In some areas where NHS Boards have been unable to submit ISD(S)1 outpatients data, SMR00 (patient-level outpatients records) has been used as an alternative data source. Outpatient DNA rates are obtained from SMR00.

Inpatient and day case 'acute specialties' figures are sourced from SMR01 records if the levels of completeness of the SMR01 data are deemed to be fit for publication (97.5% of the expected figure). If SMR01 records are not deemed to be fit for publication then ISD(S)1 data are used to complete the figures.

Information on SMR data completeness can be found in the [data issues and completeness document](#) and also on the [Hospital Records Data Monitoring SMR Completeness web page](#). Information on the timeliness of SMR data submissions can be found on the [SMR Timeliness web page](#). Details on completeness can also be found within the Excel data files.

For further information on the data sources and clinical coding used in this publication please refer to the following [Data Sources and Clinical Coding document](#).

Data Quality

The ISD Data Quality Assurance (DQA) team is responsible for evaluating and ensuring SMR datasets are accurate, consistent and comparable across time and between sources.

The DQA team's [assessments](#) web page contains details of past Data Quality Assurance Assessments of inpatient/day case data, including findings on the accuracy of submitted SMR01 data items used in our analysis (specialty, admission type, main condition, main operation etc). A data quality assurance assessment of SMR01 data items is underway throughout 2014/15 and will be reported back on in 2016.

A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication title	Quarterly Acute Hospital Activity and NHS Scotland Beds Information for Scotland December 2015
Description	Summary of inpatient, day case and outpatient activity and bed statistics for NHSScotland
Theme	Health and Social Care
Topic	Hospital Care
Format	Excel, PDF
Data source(s)	ISD(S)1 aggregated data returns (beds and outpatients), Scottish Morbidity Records SMR01 (inpatient and day case for acute specialties) SMR00 (outpatient)
Date that data are acquired	All data were extracted in November 2015.
Release date	22 December 2015
Frequency	Quarterly
Timeframe of data and timeliness	Data up to September 2015
Continuity of data	<p>Reports include quarterly data up to September 2015.</p> <p>Due to problems with the implementation of a new patient administration system, no data were successfully extracted for NHS Grampian between March 2011 and June 2014. NHS Highland has had similar problems since quarter ending March 2014. NHS Grampian's missing data were estimated and are presented in Table 3. More details on this estimating process can be found in the Beds Methodology section. As no new data have been submitted for NHS Highland it has not been possible to apply the same estimation process.</p>
Revisions statement	<p>All revisions to data within this publication are planned and are due to incomplete data returns at the time of publication. All tables will be revised annually or quarterly. In general these revisions have minimal effect on the statistics. If missing/incomplete data are significant and is due to be submitted and published in subsequent releases this will be highlighted within the notes on the affected table. Please see the ISD revisions policy for further details.</p>
Revisions relevant to this publication	<p>In general, revisions have minimal effect on the statistics as noted in Appendix A1 of this report.</p> <p>As agreed with our main stakeholders, we removed the Total Inpatient/Day Case Discharges for All Specialties from the Inpatient table.</p>

	<p>We also removed the 'p' (highlighting that the latest quarter was provisional) from all tables as NHS Boards' data are taken from a live database and NHS Boards revise they data regularly, including older quarters. We added a note to explain that change in each table.</p>
Concepts and definitions	See Hospital Care: Background Information
Relevance and key uses of the statistics	<p>To allow NHS Board employees to compare activity levels nationally, e.g. NHS clinical consultants interested in their specialty figures by NHS Board, NHS information managers planning capacity, to assist in the development of Service Agreements between NHS boards.</p> <p>Private companies interested in hospital activity levels in Scotland such as pharmaceutical companies, consultancy companies employed by NHS Trusts in England, advertising/media companies on behalf of clients.</p> <p>To provide statistical information for political campaigns, e.g. to halt reductions in acute NHS beds.</p>
Accuracy	<p>Please refer to Appendix A1 of this report. Summary data within this publication is also compared to previously published figures.</p> <p>Please also refer to 'Continuity of data' above.</p>
Completeness	<p>Details of data submission issues are available on the Hospital Records Data Monitoring SMR Completeness web page, while details of the associated backlogs can be found on the SMR Timeliness web page. Additional detail can also be found within the data issues and completeness document which accompanies this publication.</p>
Comparability	<p>The Office of National Statistics United Kingdom Health Statistics 2010 publication provides a single point of reference for the comparison of key figures between the four constituent countries of the UK. Hospital activity and bed statistics can be found within chapters 6 and 8 respectively. Whilst the four UK countries worked collaboratively to maximise the comparability of the figures, it is important to note that differences between the countries remain in the way that data measures are collected and classified, and because of differences between countries in the organisation of health and social services. The report includes the details of these differences where relevant.</p> <p>Hospital activity data from England, Wales and Northern Ireland are available separately but should not be directly compared with published data from Scotland.</p> <p>England - NHS Outcomes and Performance, NHS Hospital Episode Statistics (HES) Wales - Health and care statistics Northern Ireland - Hospital Statistics & Research</p>
Accessibility	It is the policy of ISD Scotland to make its web sites and

	products accessible according to published guidelines .
Coherence and clarity	The Acute Hospital Activity and NHS Scotland Beds information released for each publication is listed on the Hospital Care Publication page .
Value type and unit of measurement	In general, figures are shown as numbers, percentages or rates.
Disclosure	The ISD protocol on Statistical Disclosure Protocol is followed.
Official Statistics designation	The majority of information in this publication is currently classed as National Statistics. Data on Bed Statistics are classed as Official Statistics. Currently the statistics are produced in line with the Code of Practice for Official Statistics, available on the UK Statistics Authority website .
UK Statistics Authority Assessment	The Hospital Care information was assessed by the UK Statistics Authority in September 2011 and successfully received confirmation of designation as National Statistics.
Last published	29 September 2015
Next published	29 March 2016
Date of first publication	
Help email	Sophie.david@nhs.net , catherine.thomson@nhs.net
Date form completed	14/12/2015

A3 – Early Access details (including Pre-Release Access)

Pre-Release Access

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access.

Standard Pre-Release Access:

- Scottish Government Health Department
- NHS Board Chief Executives
- NHS Board Communication leads

Early Access for Management Information

These statistics will also have been made available to those who needed access to 'management information', i.e. as part of the delivery of health and care:

- Scottish Government Health Department
- NHS Grampian
- NHS Greater Glasgow and Clyde
- NHS Highland
- NHS Lanarkshire
- NHS Orkney

A4 – ISD and Official Statistics

About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

Purpose: To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

Mission: Better Information, Better Decisions, Better Health

Vision: To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD's statistical publications are currently classified as one of the following:

- National Statistics (i.e. assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (i.e. legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (i.e. still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#).

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics. Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- are produced according to sound methods, and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.

Not for publication Section

Twitter text

Enter text in the box below for publication on Twitter. Tweets should, wherever possible, contain a statistic or other item of interest rather than merely announcing the publication. Of the 140 characters (including spaces) available, the URL, hashtag and spaces account for 33, leaving 107 for your tweet.

#ISD quarterly report on #NHSScotland acute hospital activity and bed statistics to Sep-15 <http://goo.gl/wwwww> #ISDScotland

Template version history

Template Version	Current at
V1.0	18 March 2011
V1.1	31 March 2011
V1.2	27 June 2011
V1.3	May 2012
V1.4	November 2013
V1.4b	January 2015
V1.4c	November 2015

NB This page will be removed from the final PDF version of the report.

Approval for Release

This publication must be given approval for release by the relevant Assistant Director, Head of Service, Service Manager, Information Consultant or Consultant in Public Health Medicine.

I approve the release of this publication.

Name:

Date:

Publication checklist

Setting up the Template			
Use the most recent version of the Publication Report (V1.4c) and Publication Summary (V1.3b).			
Identify the correct status of statistics (Official, National or Non Official).			
	Nat Stats Logo	Front page footer text	Last 3 paras Appendix 4
National Stats (accredited)	Yes	Default	Yes
National Stats (legacy)	Yes	Default	Delete
Official Stats	No	Edit	Delete
Non Official Stats	No	Delete	Delete
Make sure embargo details are prominently and correctly displayed.			
Name your file correctly: yyyy-mm-dd-YourPublication-Report.doc or yyyy-mm-dd-YourPublication-Summary.doc			
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Template Styles have been used.			
Appropriate ALT Text has been added to every image/chart.			
File links created using following convention: http://www.isdscotland.org/Health-Topics/YourHealthTopic/Publications/yyyy-mm-dd/filename.xls			
Copy and Paste charts from Excel. Don't 'paste special' or insert/import.			
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Track Changes have been accepted and switched off.			
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