Publication Report

Audiology Waiting Times

Quarter ending 31 March 2011

Publication date – 31 May 2011

An Official Statistics Publication for Scotland
Contents

About ISD.......................................................................................................................... 2
Official Statistics................................................................................................................ 2
Introduction ....................................................................................................................... 3
Key points ......................................................................................................................... 4
Results and Commentary.................................................................................................. 5
Glossary............................................................................................................................ 8
List of Tables................................................................................................................... 10
Contact............................................................................................................................ 11
Further Information.......................................................................................................... 11
Appendix ......................................................................................................................... 12
  A1 – Background Information ...................................................................................... 12
  A2 – Data Quality ........................................................................................................ 13
  A3 – Publication Metadata (including revisions details)............................................... 18
  A4 – Early Access details (including Pre-Release Access) ......................................... 20
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 (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie 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](#).
Introduction

In 2007, the Cabinet Secretary for Health and Wellbeing stated that "A whole journey waiting time target of 18 weeks from general practitioner referral to treatment ... by December 2011" with Audiology services to be measured as part of this 18 weeks Referral To Treatment target (18 Weeks RTT).

Information relating to audiology waiting times in NHS Boards has been collected nationally since April 2007 with a revised dataset introduced in December 2008. Information is provided in an aggregated form by local heads of audiology services. ISD does not obtain the detailed, patient based, information for audiology that it does for other hospital specialties, however systems are being developed to report progress towards the 18 Weeks RTT target. Audiology data is under development and ISD is actively working with NHS Boards to improve the consistency and completeness of these data.

NHS Boards are working with Scottish Government and ISD to update systems in order to improve information capture to support the measuring and reporting of the whole patient journey from referral to treatment. While systems are implemented, a pragmatic interim solution is to measure and report the best available information about the different ‘stages’ of the journey:

- for a first contact appointment
- from assessment to fitting of hearing aid(s)
- from assessment to treatment (where treatment is other than fitting of a hearing aid)
- from fitting of hearing aid(s) to review (this final stage is not subject to the 18 Weeks RTT target)

These ‘stages’ of the journey are an indicator of progress towards the 18 Weeks RTT target.

Audiology patients are currently subject to the current 'stage of treatment' waiting times targets. Information about these targets is available here.
Key points

- These data are developmental. ISD is actively working with the NHS Boards to improve the consistency and completeness of these data.
- For those patients recorded as seen during quarter ending March 2011, 73.0% waited no longer than 12 weeks for a first contact appointment, 80.1% waited no longer than 12 weeks from assessment to fitting of hearing aid(s) and 97.4% waited no longer than 12 weeks from assessment to treatment (excluding fitting of hearing aids). This compares to 76.2%, 83.9% and 95.1% at month end December 2010, respectively for the three stages.
- For those patients recorded as waiting at month end March 2011, 79.7% were waiting no longer than 12 weeks for a first contact appointment, 90.1% were waiting no longer than 12 weeks from assessment to fitting of hearing aid(s) and 57.2% were waiting no longer than 12 weeks from assessment to treatment (excluding fitting of hearing aids). This compares to 64.7%, 79.2% and 72.4% at month end December 2010, respectively for the three stages.
- As NHS Boards progress towards managing their patients along an 18 Weeks Referral To Treatment pathway, several NHS Boards have brought in ‘one-stop’ clinics, where patients can be assessed and treated in a single appointment. From January 2011, NHS Boards have the option to record ‘one-stop’ patients separate from the stages of treatment.
**Results and Commentary**

Due to improvements in data quality, Scotland level figures are available for the second quarter.

The charts below detail the percentage of patients waiting and patients seen who experienced a wait for a first contact appointment (Chart 1), from assessment to fitting of hearing aid(s) (Chart 2) and from assessment to treatment (where treatment is other than fitting of a hearing aid) (Chart 3) for NHS Scotland.

**Chart 1: First Contact Appointment**
The waiting times information for a first contact appointment, from assessment to fitting of hearing aid(s) and from assessment to treatment (where treatment is other than fitting of a hearing aid) relates to the stages of the patient journey from referral to treatment.
Information is also reported for waiting times from fitting of hearing aid(s) to review. This final stage is not subject to the 18 Weeks RTT target.

The information about all these stages of the patient's journey is presented in Table 1, NHS Board level data is provided in Table 2, NHS Board level data for adult patients is provided in Table 3 and NHS Board level data for paediatric patients is provided in Table 4.

These data are still under development. ISD is actively working with the NHS Boards to improve the consistency and completeness of these data.
Glossary

Patients waiting for a first contact appointment: The number of patients who have been referred to Audiology Services from any source, for assessment of any kind, waiting for a first contact appointment that will commence a new episode of care (i.e. include re-assessments). The number of patients waiting at the census date in each time band corresponds to the time that has elapsed from the receipt of the referral.

Experienced waiting time for a first contact appointment: The waiting time experienced by patients who received a first contact appointment for assessment of any kind, that commenced a new episode of care, during the quarter (i.e. include re-assessments). The number of patients seen in the time band corresponds to the length of time they waited.

Patients waiting from assessment to fitting of hearing aid(s): The number of patients waiting for fitting of hearing aid(s). The number of patients waiting at the census date in each time band corresponds to the time that has elapsed from the date of the decision that a hearing aid is to be fitted.

Experienced waiting time from assessment to fitting of hearing aid(s): The waiting time experienced by patients for fitting of hearing aid(s). The number of patients fitted with hearing aids during the quarter in the time band corresponds to the length of time that elapsed from the date of the decision that a hearing aid is to be fitted to the date of the fitting. If the hearing aid was fitted at the first contact appointment, the waiting time experienced by the patient is recorded as zero weeks.

Patients waiting from assessment to treatment: The number of patients waiting for audiology treatment other than the fitting of a hearing aid, this includes but is not limited to; treatment of balance problems, tinnitus treatment and counselling. The number of patients waiting at the census date in each time band corresponds to the time that has elapsed from the date of the decision.

Experienced waiting time from assessment to treatment: The waiting time experienced by patients for audiology treatment other than the fitting of a hearing aid, this includes but is not limited to; treatment of balance problems, tinnitus treatment and counselling. The number of patients treated during the quarter in the time band corresponds to the length of time that elapsed from the date of the decision to treat to the date of treatment. If the treatment was administered at the first contact appointment, the waiting time experienced by the patient is recorded as zero weeks.

Patients waiting from fitting of hearing aid(s) to review: The number of patients waiting for a first hearing aid review following fitting. The number of patients waiting at the census date in each time band corresponds to the time that has elapsed from the date of fitting. This final stage is not subject to the 18 Weeks RTT target.

Experienced waiting time from fitting of hearing aid(s) to review: The waiting time experienced by patients for a first hearing aid review following fitting. The number of patients who received a first hearing aid review during the quarter in the time band corresponds to the length of time that elapsed from the date of fitting.

Median: This is a measure of the typical (average) waiting time. The median is also known as the 50th percentile and signifies that 50% of patients waited up to the time shown; 50% waited longer.
90th percentile: The 90th percentile wait indicates the maximum time 9 out of every 10 patients waited. 90% of patients waited up to the time shown; 10% waited longer.

Distribution of wait to census date: 4-6 weeks: This indicator comprises those patients who waited at least 28 days and not more than 48 days. Analogous reasoning applies to the other time bands.
## List of Tables

<table>
<thead>
<tr>
<th>Table No.</th>
<th>Name</th>
<th>Time period</th>
<th>File &amp; size</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Waiting Times for Audiology services; All Scotland (adults and paediatrics combined) waiting and patients seen for each NHS Board; monthly and quarterly census dates</td>
<td>31 July 2009 to 31 March 2011</td>
<td>Excel [29KB]</td>
</tr>
<tr>
<td>2</td>
<td>Waiting Times for Audiology services; all patients (adults and paediatrics combined) waiting and patients seen for each NHS Board; monthly and quarterly census dates</td>
<td>31 July 2009 to 31 March 2011</td>
<td>Excel [385KB]</td>
</tr>
<tr>
<td>3</td>
<td>Waiting Times for Audiology services; adults patients waiting and patients seen for each NHS Board; monthly and quarterly census dates</td>
<td>31 July 2009 to 31 March 2011</td>
<td>Excel [413KB]</td>
</tr>
<tr>
<td>4</td>
<td>Waiting Times for Audiology services; paediatric patients waiting and patients seen for each NHS Board; monthly and quarterly census dates</td>
<td>31 July 2009 to 31 March 2011</td>
<td>Excel [353KB]</td>
</tr>
</tbody>
</table>
Contact
Jamie Pearson
Principal Information Analyst
jamie.pearson@nhs.net
0131 275 7712

Michelle Kirkpatrick
Principal Information Analyst
michelle.kirkpatrick@nhs.net
0131 275 6458

General Enquires
nss.isdaudiology@nhs.net

Further Information
Further information can be found on the ISD website
Appendix

A1 – Background Information

Audiology patients are currently subject to the current ‘stage of treatment’ waiting times targets. Information about these is available [here](#).

The national maximum waiting time for the whole journey from referral to treatment will be 18 weeks from 31 December 2011. Audiology waiting times are an important component in the delivery of the 18 weeks Referral To Treatment (18 Weeks RTT) target. Audiology patient administration systems are currently being updated in order to improve information capture to support the measuring and reporting of the whole patient journey from referral to treatment.

NHS Boards are working with Scottish Government and ISD to update systems in order to improve information capture to support the measuring and reporting of the whole patient journey from referral to treatment.

While systems are implemented, a pragmatic, interim solution is to measure and report the best available information about the different ‘stages’ of the journey for audiology patients. The first contact appointment, assessment to fitting of hearing aid(s), assessment to treatment (excluding fitting of hearing aids) stages of the journey are an indicator of progress towards the 18 Weeks RTT target. NHS Boards submit to ISD the number of patients who are waiting at month end and the number of patients seen who experienced a waiting time during the quarter for the stages.

As NHS Boards progress towards managing their patients along an 18 Weeks RTT pathway, several NHS Boards have brought in ‘one-stop’ clinics, where patients can be assessed and treated in a single appointment. NHS Boards are measuring one-stop patients against an 18 Weeks RTT journey. Information relating to audiology patients on an 18 Weeks RTT pathway should be included as part of the 18 Weeks RTT data submission to ISD. These data are still under development and are not published at this stage.

From January 2011, NHS Boards have the option to record ‘one-stop’ patients in their Audiology data submission to ISD. For the quarter ending 31 March 2011, three NHS Boards have submitted waiting times information for one-stop clinics for audiology patients. Further details are shown in the Data Quality section. Other NHS Boards report one stop patients in the ‘first assessment' or ‘assessment to treatment' stages.

ISD receives aggregate Audiology data from each NHS Board and so patient information cannot be systematically validated by ISD. The derivation of the figures and data accuracy is carried out by individual NHS Boards in collaboration with ISD. Further information on data quality can be found in the Data Quality section.
A2 – Data Quality

NHS Boards are working with Scottish Government and ISD to update systems in order to improve information capture to support the measuring and reporting of the whole patient journey from referral to treatment.

While systems are implemented, a pragmatic, interim solution is to measure and report the best available information about the different ‘stages’ of the journey for audiology patients. The first contact appointment, assessment to fitting of hearing aid(s), assessment to treatment (excluding fitting of hearing aids) stages of the journey are an indicator of progress towards the 18 Weeks RTT target. NHS Boards submit to ISD the number of patients who are waiting at month end and the number of patients seen who experienced a waiting time during the quarter for the stages.

NHS Ayrshire and Arran
These data are not available due to system issues.

NHS Borders
Data for quarter ending September 2009 for patients seen only includes August and September data due to new system operational from August 2009. The number of patients seen continues to be less than the number of patients on the waiting list. Improvements in this data can be observed, NHS Borders reports that the service capacity and processes in the department have undergone improvement following the use of Lean methodology.

Only data for Paediatric patients waiting for a first contact appointment is shown because these patients are seen for treatment at other Boards and included in their returns. From January 2011 NHS Boards had the option of reporting patients waiting and patients seen that experienced a wait for assessment and treatment at one stop clinics. NHS Borders reported these patients separately than the audiology stages of treatment.

For the quarter ending March 2011, 47 patients were reported as experienced a wait at a one stop clinic. Of these 47 patients, 2.1% experienced a wait over 12 weeks; 0.0% experienced a wait over 18 weeks.

For January 2011, 27 patients were reported as waiting for a one stop clinic. Of these 27 patients, 3.7% were waiting over 12 weeks; 0.0% were waiting over 18 weeks.

For February 2011, 29 patients were reported as waiting for a one stop clinic. Of these 29 patients, 0.0% were waiting over 12 weeks; 0.0% were waiting over 18 weeks.

For March 2011, 29 patients were reported as waiting for a one stop clinic. Of these 29 patients, 0.0% were waiting over 12 weeks; 0.0% were waiting over 18 weeks.

NHS Dumfries and Galloway
Data is only available from December 2009 when a new system became operational. A recent change in computer system, with use of a Patient Access System to manage Audiology service patient waiting times has taken place. Data accuracy and quality anomalies will continue to be addressed including some entered test patients for system validation.

The number of patients waiting for a first appointment continues to be high but the rate of increase has halted. NHS Dumfries & Galloway reports that new staff appointments, training and improvements in facility capacity have taken place and a reduction in maximum waiting times has resulted.

NHS Fife
No data is available for December 2009 due to a system upgrade and the retrospective data logging that is required.
No adult figures available for January 2010 and no paediatric figures available for quarter ending September 2009 and January and February 2010 due to local system issues.
The number of patients waiting has decreased in high numbers with a corresponding increase in those patients seen. NHS Fife reports the use of One Stop clinics has resulted in this change (not published).
NHS Fife reports that waiting lists are monitored regularly and action plans are developed in response to demand.
The waiting time from fitting to review must be 12 weeks according to national Quality Standards for Adult Hearing Services; therefore, individuals will remain on the waiting list until their appointment is due.
From January 2011 NHS Boards had the option of reporting patients waiting and patients seen that experienced a wait for assessment and treatment at one stop clinics. NHS Fife reported these patients separately than the audiology stages of treatment.
For the quarter ending March 2011, 433 patients were reported as experienced a wait at a one stop clinic. Of these 433 patients, 53.8% experienced a wait over 12 weeks; 0.0% experienced a wait over 18 weeks.
For January 2011, 352 patients were reported as waiting for a one stop clinic. Of these 352 patients, 6.0% were waiting over 12 weeks; 0.3% were waiting over 18 weeks.
For February 2011, 309 patients were reported as waiting for a one stop clinic. Of these 309 patients, 6.8% were waiting over 12 weeks; 0.0% were waiting over 18 weeks.
For March 2011, 704 patients were reported as waiting for a one stop clinic. Of these 704 patients, 4.0% were waiting over 12 weeks; 0.0% were waiting over 18 weeks.

**NHS Forth Valley**
Data was not available from March – June 2010 due to system issues.
NHS Forth Valley reports that booking of patients who have waited 8 weeks for a first contact appointment is current and is working to reduce this wait.
Extended working and use of locum staff is being employed to reduce Adult patients with long waits.
The service configuration model as per the Head of Audiology Service does not review reassessment patients
Less paediatric patients are seen than are waiting for a first contact appointment. NHS Forth Valley reports majority of paediatric patients are seen within 6 weeks but this data will be reviewed to ensure patients waiting are reported accurately.
The majority of adult hearing aid patients from assessment to fitting of hearing aid(s) are fitted on the same day, they have no further wait.

**NHS Grampian**
The number of patients seen is consistently lower than the number on the waiting list. NHS Grampian continue to report that various plans are in place to resolve this including one stop appointments, changing support of ENT clinics in addition resource shortfall will be addressed. One Stop clinics are planned for implementation June 2011 and ENT clinic support changes later in the summer of 2011.
Work is now in place to address the numbers of patients waiting from fitting of hearing aid(s) to review and NHS Grampian report a Did Not Attend or Could Not Attend rate of 16% for this cohort.

**NHS Greater Glasgow and Clyde**
The data is incomplete due to system issues in Clyde. Only Greater Glasgow figures are reported for July – November 2009, January 2010 and October – March 2011, while Clyde figures are included for December 2009, February, March and June 2010.
Clyde paediatric patients seen for first contact appointment and patients waiting and seen from assessment to treatment are included in the adult figures for quarter ending March 2010. This is due to the system being unable to split adult and paediatric data. The data is incomplete due to system issues in Clyde. Only Greater Glasgow figures are reported for July – November 2009, January 2010 and October – December 2010, while Clyde figures are included for December 2009, February, March and June 2010. Clyde paediatric patients seen for first contact appointment and patients waiting and seen from assessment to treatment are included in the adult figures for quarter ending March 2010. This is due to the system being unable to split adult and paediatric data. The number of Paediatric patients seen is less than those waiting; NHS Greater Glasgow and Clyde report a Capacity Planning review is currently underway with results due June 2011.

There is a large number of Adult patients seen who waited 10 to 12 weeks from fitting of hearing aid(s) to review but without the corresponding number waiting, all patients are reported as being offered a review appointment but a significant number refuse this if fitting is satisfactory and they are happy with their hearing aid. Plans to include Clyde data will begin with the inclusion of Royal Alexandria Hospital and Vale of Leven District General Hospital data for early summer 2011.

**NHS Highland**

No adult figures available prior to April 2010 and no paediatric figures available prior to May 2010 due to local system issues. The number of patients seen is consistently less than the number of patients waiting. The Head of Audiology advises that a significant number of patients have the clock stopped at assessment and do not proceed to treatment. Often assessments find normal hearing or mild hearing loss that does not require further treatment. On this basis there will always be less patients seen for treatment than assessment.

NHS Highland report that the data quality continues to improve and there are plans in place to continue to address any issues. They have set a deadline locally of April 2011 to achieve resolution which has proved more extensive than envisaged and an element of this work is ongoing. Paediatric patients are given an immediate appointment for assessment to fitting of hearing aid(s) and as such may be reported as seen but not waiting.

**NHS Lanarkshire**

Only ‘Total’ figures are available at census dates September 2009 – February 2010 for certain stages of the journey due to restrictions on the system. No data are available for patients seen for quarters ending September, December 2009 and January and February 2010 due to system issues. Figures are not available for April 2010 or May 2010 for certain stages of the journey due to system issues. The number of patients seen is less than the number of patients waiting and generally continues to increase in all stage of treatment categories. NHS Lanarkshire reports that resource capacity will rise by five by June 2011; changes to review patient waiting lists and triage of patients for a One Stop service will contribute to future reductions in patient numbers waiting. Data quality issues regarding closure of patient journey data and with the Audiology system used have been experienced. NHS Lanarkshire has decided to change the system used in late summer 2011.

**NHS Lothian**
Only ‘Total’ figures are available for adult patients seen from the quarter ending March 2010 to quarter ending September 2010. Distribution of waits is not available due to issues with the current system. This has been resolved for quarter ending December 2010. Paediatric data is incomplete for quarter ending September 2009 and quarter ending December 2009 and due to system issues.

The number of adult patients seen is consistently lower than the number on the waiting list. NHS Lothian reports that additional capacity has been organised, as previously reported with results feeding in by April 2011 data. As of June 2011 no patient is expected to wait more than 12 weeks.

NHS Lothian report data quality issues in retrieving data from One Stop Clinic adult patients and continue to work with the Audiology system developer in addition to exploring alternative reporting methodologies.

NHS Orkney
There are no figures relating to paediatric patients after first contact appointment. This is due to all patients being discharged and not requiring follow-up.

The number of Adult patients seen is greater than those waiting for a first contact appointment as the majority were seen within three weeks and were therefore not waiting by the next data submission deadline the following month.

NHS Shetland
The number of adult patients seen is consistently less than the number of patients waiting.

NHS Shetland previously reported a short term decrease in capacity due to maternity leave within the department. Departmental capacity has again returned and increased by 50% thus ensuring reduction in patient waits.

NHS Tayside
No adult figures available prior to April 2010 and no paediatric figures available prior to May 2010 due to local system issues.

The number of adult patients seen is considerably less than the number of patients waiting. NHS Tayside reports a substantive increase in the staffing establishment and two of three available posts have been filled with staff commencing May 2011. The 3rd vacant post is being readvertised.

Based on revised trajectories aim to achieve target of 9 weeks referral to assessment and 8 weeks referral to treatment by September 2011.

All of these patients were seen, however 2 patients had incorrect outcome codes applied. These outcome codes have subsequently been rectified. The experienced wait for these two patients was 4 weeks.

From January 2011 NHS Boards had the option of reporting patients waiting and patients seen that experienced a wait for assessment and treatment at one stop clinics. NHS Tayside reported these patients separately than the audiology stages of treatment.

For the quarter ending March 2011, 255 patients were reported as experienced a wait at a one stop clinic. Of these 255 patients, 82.4% experienced a wait over 12 weeks; 78.8% experienced a wait over 18 weeks.

For January 2011, 13 patients were reported as waiting for a one stop clinic. Of these 13 patients, 0.0% were waiting over 12 weeks; 0.0% were waiting over 18 weeks.

For February 2011, 8 patients were reported as waiting for a one stop clinic. Of these 8 patients, 0.0% were waiting over 12 weeks; 0.0% were waiting over 18 weeks.

For March 2011, 17 patients were reported as waiting for a one stop clinic. Of these 17 patients, 0.0% were waiting over 12 weeks; 0.0% were waiting over 18 weeks.

NHS Western Isles
No figures available prior to July 2010 due to local system issues.
NHS Western Isles provides Audiology services for adult patients only. The number of patients seen is consistently less than the number of patients waiting. More resource is being allocated to resolve this. More resources will be employed in February 2011 to resolve this, full time Lead Audiologist appointed in post 28/02/2011. This data has been audited by the Lead Audiologist.

NHS Shetland report the current waiting time for patients from fitting to review is 8 weeks and the longest wait for Paediatric patients on a waiting list is 4 weeks.
### A3 – Publication Metadata (including revisions details)

<table>
<thead>
<tr>
<th>Metadata Indicator</th>
<th>Audiology Waiting Times</th>
</tr>
</thead>
<tbody>
<tr>
<td>Website</td>
<td><a href="http://www.isdscotland.org/isd/6042.html">http://www.isdscotland.org/isd/6042.html</a></td>
</tr>
<tr>
<td>Description</td>
<td>Monthly and quarterly summary of Audiology waiting times and waiting lists.</td>
</tr>
<tr>
<td>Theme</td>
<td>Health and Social Care</td>
</tr>
<tr>
<td>Topic</td>
<td>Access and Waiting Times</td>
</tr>
<tr>
<td>Format</td>
<td>Excel workbooks</td>
</tr>
<tr>
<td>Data source(s)</td>
<td>Aggregate counts accredited and derived from individual NHS Scotland Boards are submitted monthly to ISD using a defined Excel template. Associated with individual NHS Scotland Boards Local Delivery Plans integrated to the 18 Weeks RTT national standards.</td>
</tr>
<tr>
<td>Date that data is acquired</td>
<td>Deadline for data submission is the 22nd of each month, though files can be resubmitted up to 1 week before publication where the quality assurance process identifies differences with local figures.</td>
</tr>
<tr>
<td>Release date</td>
<td>The last Tuesday of the month for each publication.</td>
</tr>
<tr>
<td>Frequency</td>
<td>Quarterly</td>
</tr>
<tr>
<td>Timeframe of data and timeliness</td>
<td>Data from July 2009 to date. There have been no delays in reporting.</td>
</tr>
<tr>
<td>Continuity of data</td>
<td></td>
</tr>
<tr>
<td>Revisions statement</td>
<td>Historic data is not normally revised unless revision of data is required due to NHS Board resubmission of revised local data following publication.</td>
</tr>
<tr>
<td>Concepts and definitions</td>
<td>Definitions are available at <a href="http://www.isdscotland.org/isd/6074.html">http://www.isdscotland.org/isd/6074.html</a></td>
</tr>
<tr>
<td>Relevance and key uses of the statistics</td>
<td>Waiting times are important to patients and are a measure of how the NHS is responding to demands for services. Measuring and regular reporting of waiting times highlights where there are delays in the system and enables monitoring of the effectiveness of NHS performance throughout the country. The NHS in Scotland has been set a number of targets for maximum waiting times. Other uses of the data include information requests for a variety of customers, e.g. research charities; public companies; freedom of Information requests; information support to Boards; health intelligence work; parliamentary questions and HEAT targets.</td>
</tr>
<tr>
<td>Accuracy</td>
<td>These data are classified as developmental. ISD only receives aggregate data from each NHS Board where the data for the previous quarter is confirmed by the submitting Board. Although aggregated data can not be systematically validated by ISD, reported data are compared to previous figures and to expected trends. Derivation of the figures and data accuracy is a matter for individual NHS Boards. Reported data are compared to previous figures and to expected trends.</td>
</tr>
<tr>
<td>Completeness</td>
<td>100% of submitted data is used for analysis and publication.</td>
</tr>
<tr>
<td>-----------------------</td>
<td>-------------------------------------------------------------</td>
</tr>
<tr>
<td>Comparability</td>
<td>Comparative waiting times information is not possible at present using these data due inconsistencies in definitions of waiting times for treatment across the four countries. Collaborative efforts by the health departments of the four countries to produce comparable figures on waiting times is currently underway by the UK Comparative Waiting Times Group.</td>
</tr>
<tr>
<td>Accessibility</td>
<td>It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines. See attached link for further details: <a href="http://www.isdscotland.org/About-ISD/Accessibility/">http://www.isdscotland.org/About-ISD/Accessibility/</a></td>
</tr>
<tr>
<td>Coherence and clarity</td>
<td>Key statistics for the latest quarter are presented on the front Audiology page, which is linked to on the main Waiting Times page of the publication. Statistics are presented within Excel spreadsheets. Geographical hierarchies and national figures are presented. Further features to aid clarity: 1. Attendances and performance data by Adult and Paediatric patients are available in separate tables to enable users to select a single measure for analysis. 2. Tables are printer friendly. 3. Key data presented graphically.</td>
</tr>
<tr>
<td>Value type and unit of measure</td>
<td>Number of patients seen, number of patients waiting and percentage distribution of wait; by NHS Board and by patient type (adult, paediatric).</td>
</tr>
<tr>
<td>UK Statistics Authority Assessment</td>
<td>Awaiting assessment by UK Statistics Authority.</td>
</tr>
<tr>
<td>Help email</td>
<td><a href="mailto:NSS.isdAudiology@nhs.net">NSS.isdAudiology@nhs.net</a></td>
</tr>
<tr>
<td>Date form completed</td>
<td>30/11/2010</td>
</tr>
</tbody>
</table>
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 and, separately, those receiving extended Pre-Release Access.

- Standard Pre-Release Access:
  - Scottish Government Health Department
  - NHS Board Chief Executives
  - NHS Board Communication leads

Extended Pre-Release Access
Extended Pre-Release Access of 8 working days is given to a small number of named individuals in the Scottish Government Health Department (Analytical Services Division). This Pre-Release Access is for the sole purpose of enabling that department to gain an understanding of the statistics prior to briefing others in Scottish Government (during the period of standard Pre-Release Access).

- Scottish Government Health Department (Analytical Services Division)

These statistics will also have been made available to those who needed access to ‘management information’, ie as part of the delivery of health and care:

These statistics will also have been made available to those who needed access to help quality assure the publication: