

Inpatient, Day case and Outpatient stage of treatment waiting times

(Formerly known as New Ways)

Monthly & quarterly data to 31 December 2011

Publication date – 28 February 2012



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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.

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- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
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- 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.

Introduction

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 Scottish Government and NHS Scotland have agreed a set of waiting times targets to improve services for patients. Details of these can be found at [Scotland Performs](#). The Scottish Government continues to be committed to improving information on waiting to provide a clear and transparent picture of NHS performance.

The NHS have been engaged since 1 January 2008 in the implementation of new waiting list rules and definitions: 'New Ways of defining and measuring waiting times'. This very complex project involved thousands of NHS staff and makes the process (or pathway) of waiting more transparent to the public; including patients who formerly would have been excluded from waiting times standards.

There is no continuity from the previous method of measuring waiting and the new method. Please see the [National Statistics notice](#) for more information.

Given the level of new data collection involved, some impact on the quality of data was expected, and observed, as the 'New Ways' of recording patient activity and waiting times were implemented. Data published in previous quarters are updated in this publication to reflect ongoing work by NHS Boards to improve data quality. Further information is discussed on the [data quality](#) page.

ISD put in place a process to judge the fitness for publication of statistics derived from the new waiting times data warehouse, and published [a document](#) in May 2008 describing the process. This same process has been used for this publication. ISD also used management information available to NHS Boards to help evaluate the quality of key statistics relating to national waiting times standards. On the basis of these processes, ISD determined which figures required clarification in footnotes or, in a small number of cases, could not be shown.

From the 31 March 2010 the national standard was expanded to cover new outpatient referrals from all sources rather than only referrals from a GP/GDP. There are some data quality issues relating to patients referred from a non-GP/GDP source prior to the introduction of the new target. As a result, new outpatient data covering all sources of referral is only shown from quarter ending 31 March 2010 and is based on referrals received from 1 April 2009 onwards. Data previously published for only GP/GDP referrals is available in the [archive](#).

ISD are now reporting on NHS Boards performance at all cataract assessment clinics. Previously, only patients waiting for an assessment at a consultant-led clinic were reported.

'Inpatient, Day case and Outpatient stage of treatment waiting times' is the new name for this publication. It was formerly referred to as 'New Ways' or 'Waiting Times and Waiting Lists'.

Key points

- At 31 December 2011, 97.1% of new outpatients (all sources of referral) had been waiting 12 weeks or less. This is the statistic used by NHS Boards from 31 March 2010 to measure performance against Scottish Government waiting times standards for new outpatients. This compares to a figure of 98.8% at 30 September 2011 [[Table 1](#)].
- At 31 December 2011, 93.3% of inpatients and day cases were waiting less than the 9-week national standard. 9 weeks is the new national standard that came into place on 31 March 2011 replacing the previous 12-week standard. This is the statistic used by NHS Boards to measure performance against Scottish Government waiting times standards for inpatients and day cases. This compares to a figure of 97.9% at 30 September 2011 [[Table 3](#)].
- During quarter ending 31 December 2011, approximately 96.1% of new outpatients seen (all sources of referral) and 94.8% for inpatients and day cases admitted had waited less than the respective 12 and 9 week standards [[Table 2](#) & [Table 4](#)].

Results and Commentary

These statistics are derived from the new waiting times data warehouse and are subject to revision by some NHS Boards. See footnotes of tables for more details.

New Outpatients – patients waiting at month end

Key points:

- From 31 March 2010, the national waiting times standard states that patients should wait no longer than 12 weeks for all referral sources. The latest available information shows that 97.1% of patients covered by the waiting times standard (around 203,000 out of a total of 209,000) had been waiting 12 weeks or less at 31 December 2011. This compares to a figure of 98.8% at 30 September 2011 [[Table 1](#)].
- The total number of patients on the waiting list was recorded as 212,000 and of these, 7.5% were unavailable for an appointment on 31 December 2011. This compares to 11.6% at 30 September 2011 [[Chart 2](#) and [Chart 3](#)].
- The 12-week national standard for all referral sources came into place from 31 March 2010, having previously been set at 15 and 18 weeks for General Medical Practitioner or General Dental Practitioner referrals only.

The information in this section presents a summary of waiting times information on patients covered by the [national waiting times standard](#) set by the Scottish Government; Scottish residents waiting for a new NHS appointment at a consultant/dentist-led outpatient clinic following referral.

[Chart 1](#) and [Table 1](#) demonstrate how the national standard for outpatients has changed since the introduction of New Ways and show the length of time that patients still on the waiting list have been waiting at month-end Census dates. These figures are used by NHS Boards to measure performance against Scottish Government waiting times standards. Comparable information for patients seen is available in '[New Outpatients – patients seen during the quarter](#)'. See [Appendix A1](#) for further information on why both measures are published.

Chart 1: Ongoing waits for patients on waiting list, New Outpatient appointment, NHS Scotland

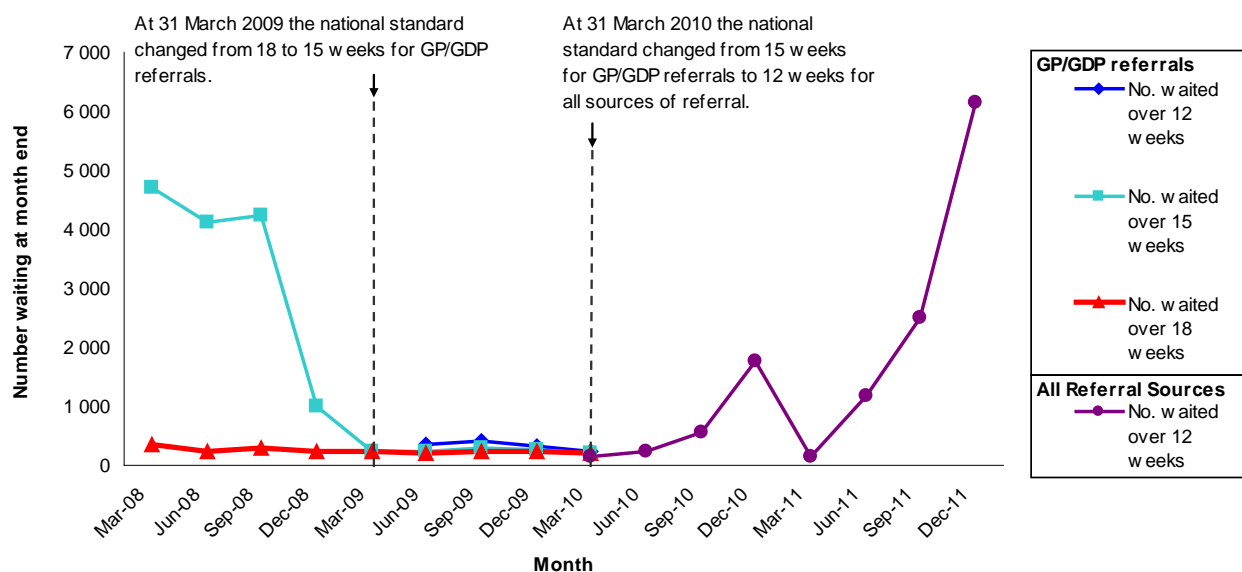


Table 1 - Ongoing waits for patients on Waiting List: New Outpatient appointment, Scotland

All referral sources (referrals received on or after 1 April 2009)

Month ending	Total waiting	Number waiting over 12 weeks
31-Dec-11	208 890	6 141
30-Nov-11	210 201	4 161
31-Oct-11	211 650	2 924
30-Sep-11	212 503	2 496
31-Dec-10	196 435	1 769

Prior to 31 March 2010, the national standard was 15 weeks for GP/GDP referrals only and prior to 31 March 2009, the national standard was 18 weeks.

GP/GDP referral sources

Month ending	Total waiting	Number waiting over 12 weeks	Number waiting over 15 weeks	Number waiting over 18 weeks
31-Mar-10	148 633	237	214	207
31-Mar-09	145 760	n/a	243	221
31-Mar-08	163 505	n/a	4 706	359

Notes (for Chart 1 and Table 1):

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
2. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for medical or social reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero. [Further information](#) on availability is available.
3. Cataract and cardiac patients have been excluded from the key tables in this publication as the new outpatient waiting time targets do not apply. These patients have a Whole Journey waiting time standard of 18 weeks which is reported separately in the [Whole Journey section](#) of this publication.

NHS Scotland data for census date 31 March 2008 onwards and comparable information by NHS Board of treatment is given in [Table A1b](#).

Under 'New Ways' definitions, if a patient is unavailable for treatment and unable to accept an offer of appointment then this is recorded. If a patient informs the hospital that they will be unable to accept an appointment because, for example, they are on holiday for a fortnight, then this is recorded as Social Unavailability. If a patient is medically unable to undergo a procedure because, for example, they have another medical issue such as raised blood pressure that makes treatment inadvisable then this is recorded as Medical Unavailability.

Chart 2 shows the proportion of patients on the waiting list by available or unavailable at month-end census dates. [Chart 3](#) focuses on the unavailable patients.

Chart 2: Availability of patients on Waiting List - New Outpatient appointment, NHS Scotland

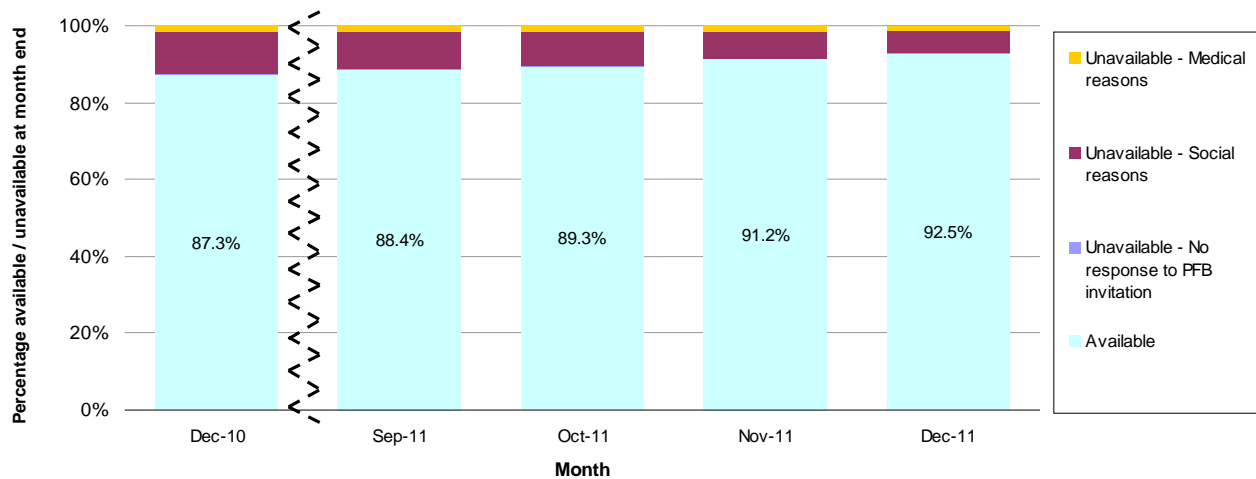
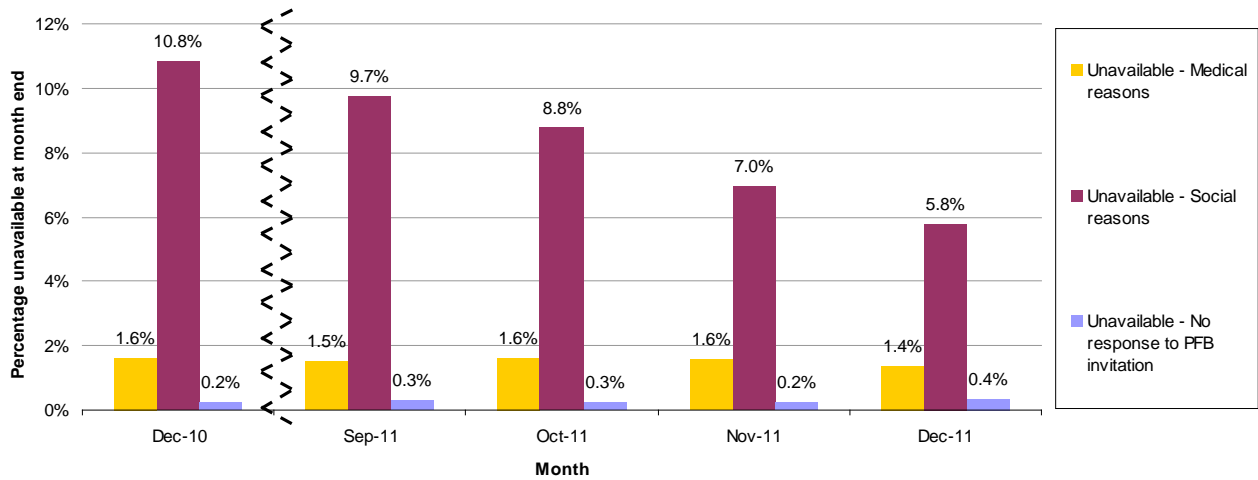


Chart 3: Unavailability of patients on Waiting List - New Outpatient appointment, NHS Scotland



Notes (for [Chart 2](#) and Chart 3):

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
2. PFB = Patient Focused Booking. A system where patients are asked to contact the hospital to arrange a convenient time for their appointment.
3. For patients added to the waiting list from 1 April 2009, all periods of social or medical unavailability are deducted from the calculation of wait.

NHS Scotland data for census date 31 March 2010 onwards and comparable information by NHS Board of treatment is given in [Table A1b](#) and [Table C1](#).

Please note that the information in this section relates mostly to patients added to the waiting list on or after 1 April 2009 (for more information please see the [Appendix A1 - Data Quality](#)). Information on the number of patients added to the waiting list prior to 1 April 2009 is available [here](#).

New Outpatients – patients seen during the quarter

Key points:

- During the quarter ending 31 December 2011, 96.1% of patients seen (around 307,000 from a total of 320,000 referred from all sources) waited 12 weeks or less. This compares to the quarter end 30 September 2011 figure of 96.5% [Table 2].
- One half of patients seen at outpatient departments during the quarter ending 31 December 2011 waited 36 days or less (median). This compares to the quarter end 30 September 2011 of 37 days or less [Table 2].
- The 90th percentile wait indicates the maximum time 9 out of every 10 patients waited. For the quarter ending 31 December 2011 this was 81 days. This is the same as quarter end 30 September 2011 [Table 2].

The information in this section presents a summary of waiting times information on patients covered by the [national waiting times standard](#) set by the Scottish Government; Scottish residents seen for a new NHS appointment at a consultant/dentist-led outpatient clinic following referral.

Chart 4 and [Table 2](#) demonstrate how performance against the national standard for new outpatients has changed since the introduction of New Ways. This shows the length of time that patients admitted for treatment waited at quarter end dates. Comparable information for patients waiting is available in '[New Outpatients – patients waiting at month end](#)'. See [Appendix A1](#) for further information on why both measures are published.

Chart 4: Completed waits for patients seen, New Outpatient appointment, NHS Scotland

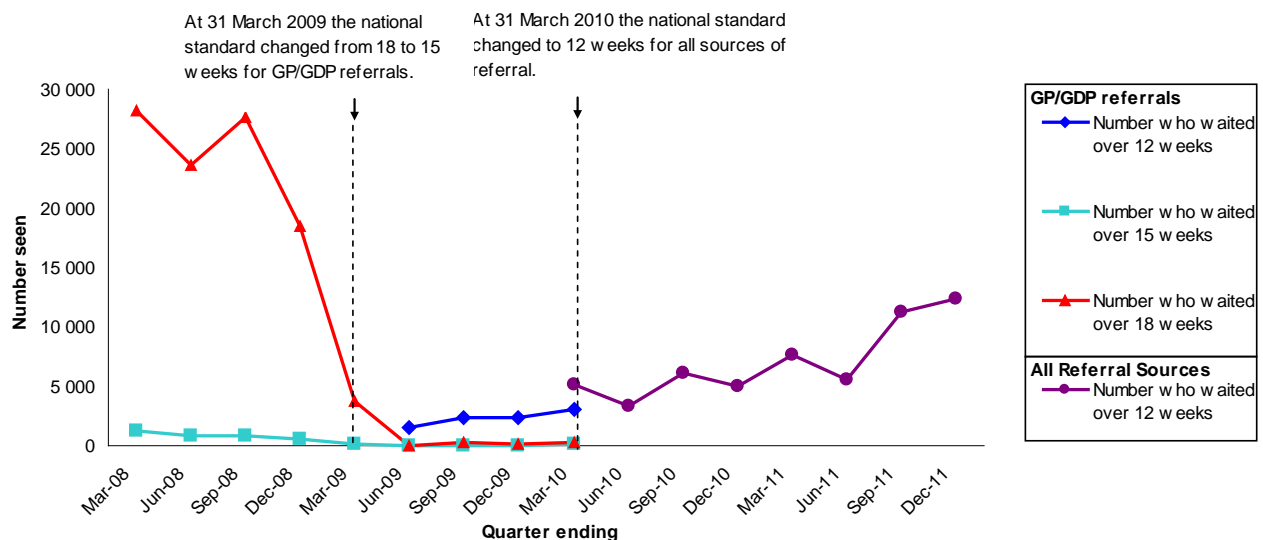


Table 2 - Completed waits for patients seen: New Outpatient appointment, Scotland

All referral sources (referrals received on or after 1 April 2009)

Quarter ending	Total seen	Number who waited over 12 weeks	Median wait (days)	90 th percentile (days)
31-Dec-11	319 837	12 420	36	81
30-Sep-11	322 442	11 239	37	81
31-Dec-10	302 074	5 062	36	80

Prior to 31 March 2010, the national standard was 15 weeks for GP/GDP referrals only and prior to 31 March 2009, the national standard was 18 weeks.

GP/GDP referral sources

Quarter ending	Total seen	Number who waited over 12 weeks	Number who waited over 15 weeks	Number who waited over 18 weeks	Median wait (days)	90 th percentile (days)
31-Mar-10	230 261	3 123	316	122	42	78
31-Mar-09	235 101	n/a	3 785	165	43	87
31-Mar-08	201 960	n/a	28 235	1 225	43	112

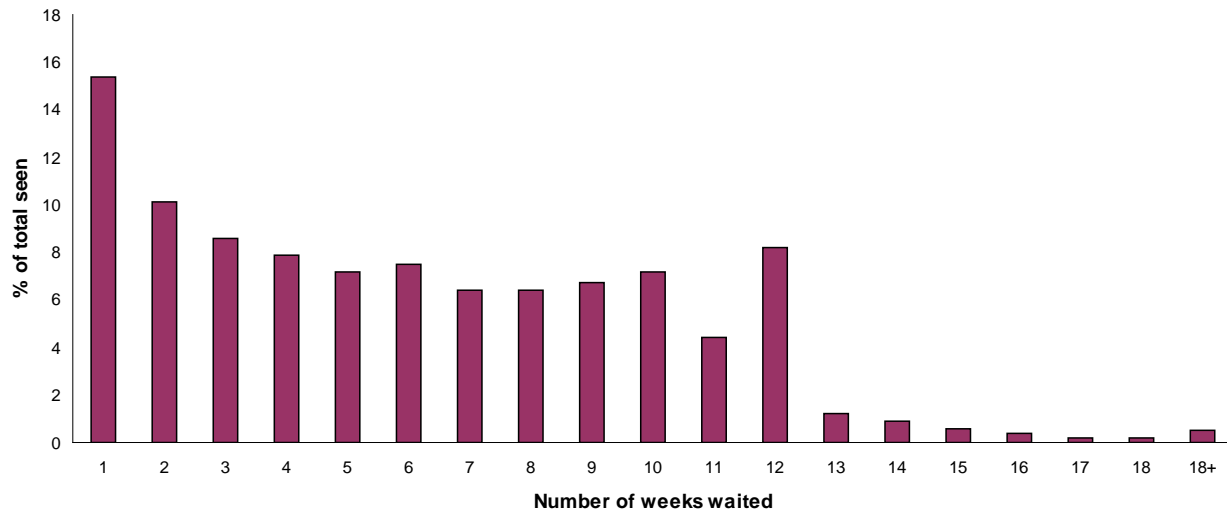
Notes (for [Chart 4](#) and Table 2):

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
2. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for medical or social reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero. [Further information](#) on availability is available.
3. Cataract and cardiac patients have been excluded from the key tables in this publication as the new outpatient waiting time targets do not apply. These patients have a Whole Journey waiting time standard of 18 weeks which is reported separately in the [Whole Journey section](#) of this publication.

NHS Scotland data for quarter ending 31 March 2008 onwards and comparable information by NHS Board of treatment is given in [Table A1a](#) and [Table J1](#).

[Chart 5](#) presents a distribution of waiting times for new outpatients with completed waits during each quarter. These patients are covered by the [national waiting times standard](#) set by the Scottish Government.

Chart 5: Distribution of completed wait for patients seen during quarter ending 31 December 2011, New Outpatient appointment, NHS Scotland



Notes (for Chart 5):

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
2. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for medical or social reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero. [Further information](#) on availability is available.
3. Cataract and cardiac patients have been excluded from the key tables in this publication as the new outpatient waiting time targets do not apply. These patients have a Whole Journey waiting time standard of 18 weeks which is reported separately in the [Whole Journey section](#) of this publication;
4. 1 week = 0 - 7 days, 2 weeks = 8 - 14 days,....18+ weeks = greater than 127 days.

NHS Scotland data for quarter ending 31 March 2010 onwards and comparable information by NHS Board of treatment is given in [Table B1](#).

Please note that the information in this section relates mostly to patients added to the waiting list on or after 1 April 2009 (for more information please see the [Appendix A1 - Data Quality](#)). Information on the number of patients added to the waiting list prior to 1 April 2009 is available [here](#).

New Outpatients – waiting list activity

Key points:

- During the quarter ending 31 December 2011 around 402,000 patients (referred by any source) were removed from a waiting list for a new outpatient appointment. Of these, 80.9% of patients were removed because they had attended an appointment; 8.2% were removed because they were referred back to their GP; 4.9% were removed because they no longer required treatment; 1.5% were transferred; and 4.5% were removed for other reasons [[Chart 6](#) and [Chart 7](#)].
- Approximately 433,000 new outpatients were booked during the quarter ending 31 December 2011. The 'Did Not Attend' (DNA) rate was 9.5%, 'Could Not Attend' (CNA) rate was 8.1% and the '[Cancellation by Service](#)' rate was 4.8% [[Chart 8](#)].

Additions to list

Additions to the waiting list provide a measure of the demand being placed on the health service. During quarter end 31 December 2011, approximately 397,500 patients were added to the waiting list for a new outpatient appointment. This is less than the previous quarter (quarter ending 30 September 2011; 409,500) and more than the same period of the previous year (quarter ending 31 December 2010; 381,500).

Removals from list

Approximately 402,000 patients were removed from the waiting list during quarter ending 31 December 2011. Of these, 325,500 were removed because they attended an appointment. Other reasons for removing a patient from the waiting list include the patient no longer requiring treatment, being transferred elsewhere or being referred back to their GP, which may be because the patient did not attend their appointment.

The charts below present information about reason for removal from the waiting list for a new NHS appointment at a consultant/dentist-led outpatient clinic.

[Chart 6](#) shows the proportion of patients removed from the waiting list by the reason for removal during quarterly periods. [Chart 7](#) focuses on those patients who were removed for reasons other than *attended*.

Chart 6: Reason for removal from Waiting List, New Outpatient appointment, NHS Scotland

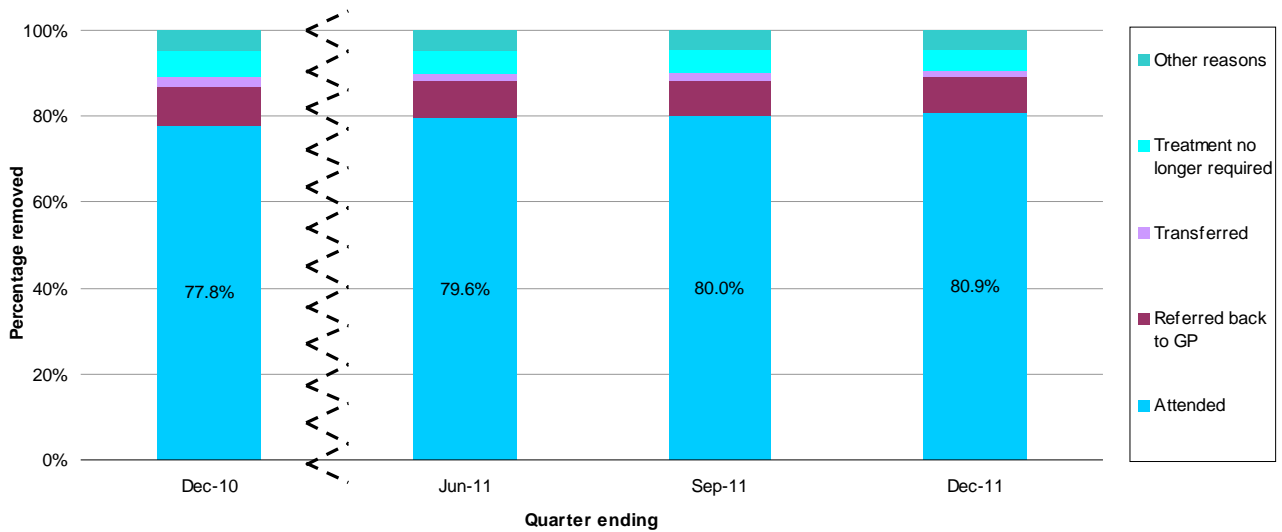
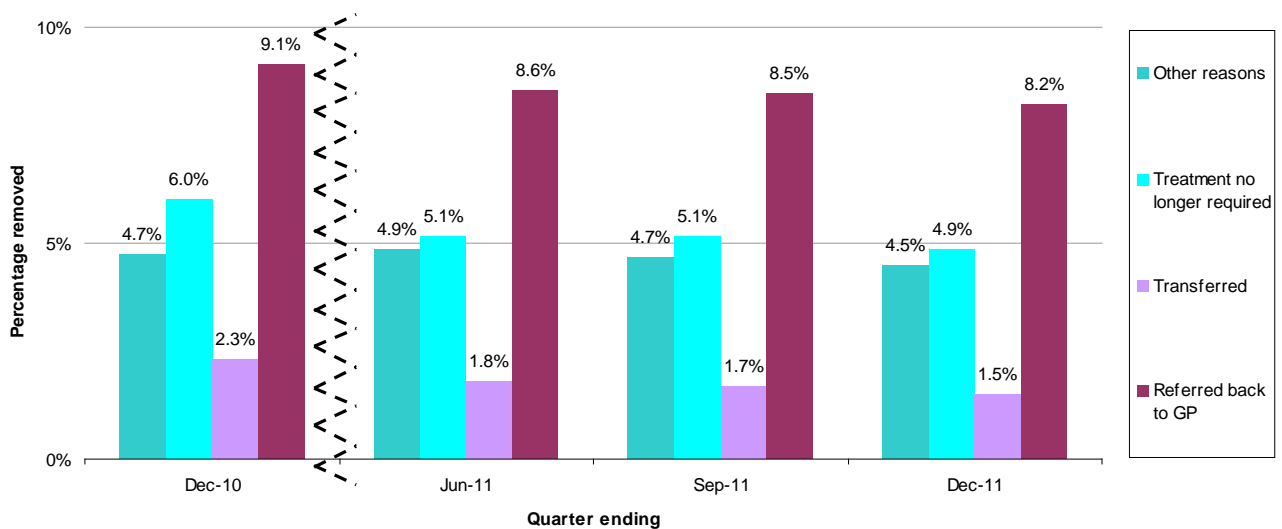


Chart 7: Reason for removal from Waiting List (excluding Attended), New Outpatient appointment, NHS Scotland



Notes (for Chart 6 and Chart 7):

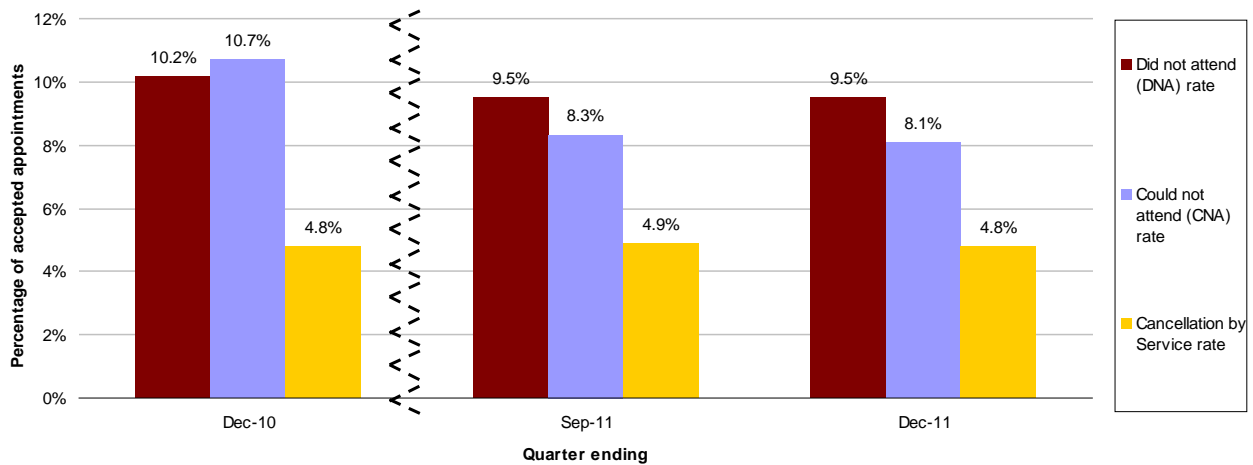
1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.

NHS Scotland data for quarter ending 31 March 2010 onwards and comparable information by NHS Board of treatment is given in [Table D1a](#).

[Chart 8](#) present's information about non attendance rates for patients accepting a new NHS appointment at a consultant/dentist-led outpatient clinic.

It shows the rate of missed appointments due to 'Did not attend' (DNA), 'Could not attend' (CNA) and '[Cancellation by Service](#)' during quarterly periods. Further information on the [definitions of these terms](#) are available.

Chart 8: Non attendance rates, New Outpatient appointment, NHS Scotland



Notes (for Chart 8):

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.

NHS Scotland data for quarter ending 31 March 2010 onwards and comparable information by NHS Board of treatment is given in [Table D1b](#).

Please note that the information in this section relates mostly to patients added to the waiting list on or after 1 April 2009 (for more information please see the [Appendix A1 - Data Quality](#)). Information on the number of patients added to the waiting list prior to 1 April 2009 is available [here](#).

Inpatients and Day cases – patients waiting at month end

Key points:

- From 31 March 2011 the national waiting times standard states that patients should wait no longer than 9 weeks for inpatient or day case treatment. The national standard had previously been set at 12, 15 and 18-weeks.
- The latest available information shows that 93.3% of inpatients and day cases covered by the national standard (around 56,000 out of a total of 60,000) had been waiting 9 weeks or less at 31 December 2011. This compares to a figure of 97.9% at 30 September 2011 [Table 3].
- The total number on waiting lists for inpatient and day case treatment at 31 December 2011 was recorded as around 67,500. Of these, 31.1% were unavailable for an appointment on 31 December 2011 (75.2% of which were due to social unavailability). This is a decrease from 36.4% at 30 September 2011 [Chart 10 and Chart 11].

The information in this section presents a summary of waiting times information on patients covered by the [national waiting times standard](#) set by the Scottish Government; Scottish residents admitted for NHS treatment as an inpatient or day case.

Chart 9 and [Table 3](#) demonstrate how the national standard for inpatient or day case has changed since the introduction of New Ways. This shows the length of time that patients waiting for treatment had waited at month end dates. Comparable information for patients seen is available in '[Inpatients and day cases – patients seen during the quarter](#)'. See [Appendix A1](#) for further information on why both measures are published.

Chart 9: Ongoing waits for patients on waiting list: Inpatient or Day case admission, NHS Scotland

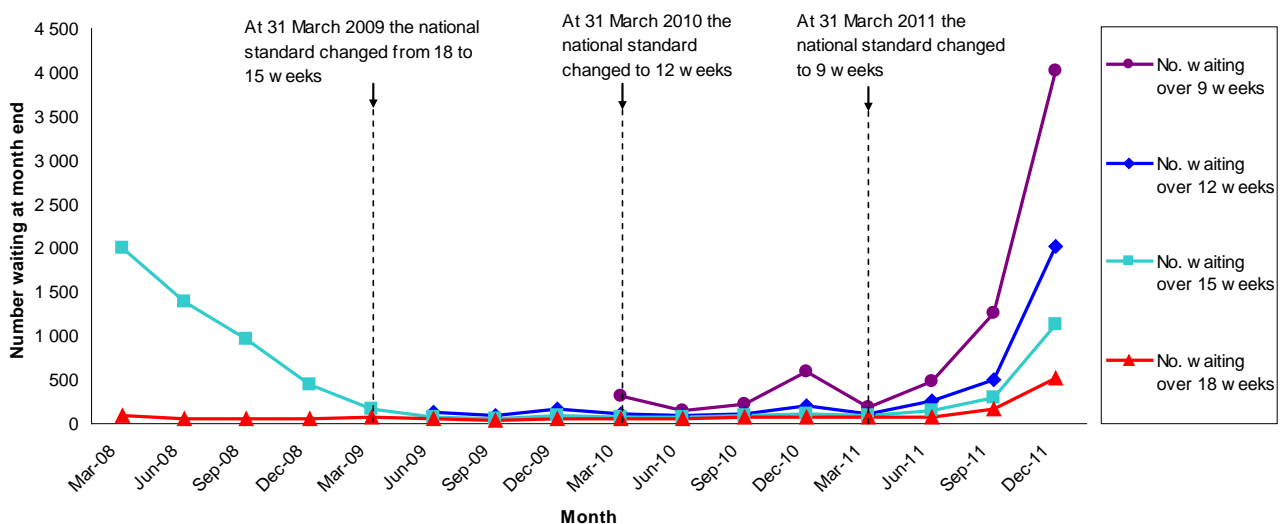


Table 3 - Ongoing waits for patients on Waiting List: Inpatient or Day case admission, Scotland

Month ending	Total waiting	Number waiting over 9 weeks	Number waiting over 12 weeks	Number waiting over 15 weeks	Number waiting over 18 weeks
31-Dec-11	59 846	4 013	2 019	1 128	510
30-Nov-11	59 760	2 579	1 160	563	325
31-Oct-11	59 332	1 715	663	429	277
30-Sep-11	59 036	1 265	505	303	158
31-Dec-10	55 631	598	210	114	78
31-Dec-09	57 742	n/a	165	90	60
31-Dec-08	59 311	n/a	n/a	443	57

Notes (for [Chart 9](#) and Table 3):

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
2. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for medical or social reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero. [Further information](#) on availability is available.
3. Cataract and cardiac patients have been excluded from the key tables in this publication as the new outpatient waiting time targets do not apply. These patients have a Whole Journey waiting time standard of 18 weeks which is reported separately in the [Whole Journey section](#) of this publication.

NHS Scotland data for Census date 31 March 2008 onwards and comparable information by NHS Board of treatment are given in [Table A2b](#).

Under 'New Ways' definitions, if a patient is unavailable for treatment and unable to accept an offer of appointment then this is recorded. If a patient informs the hospital that they will be unable to accept an appointment because, for example, they are on holiday for a fortnight, then this is recorded as Social Unavailability. If a patient is medically unable to undergo a procedure because, for example, they have another medical issue such as raised blood pressure that makes treatment inadvisable then this is recorded as 'Medical Unavailability'.

[Chart 10](#) shows the proportion of patients on the waiting list by available or unavailable at month-end census dates. [Chart 11](#) focuses on the unavailable patients.

Chart 10: Availability of patients on Waiting List – Inpatient or Day case admission, NHS Scotland

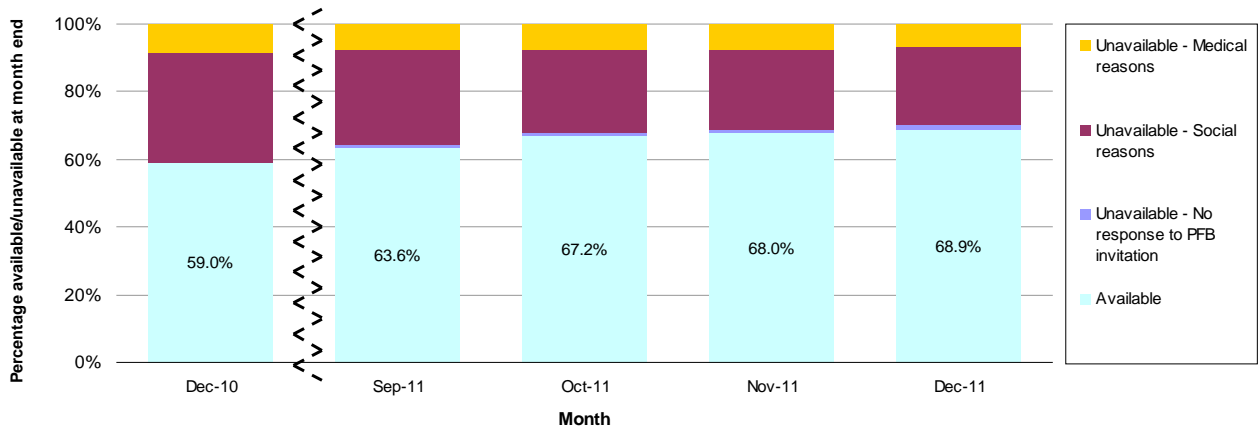
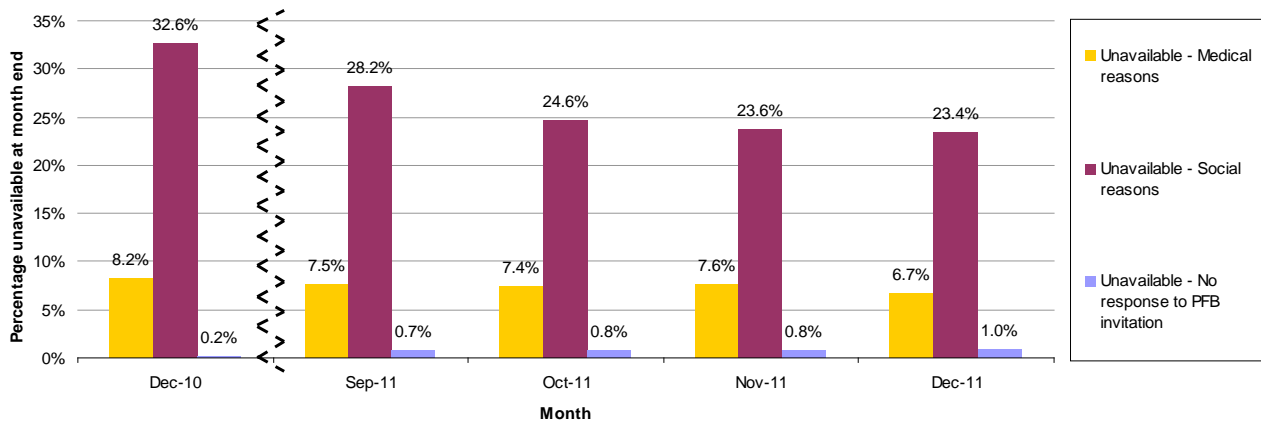


Chart 11: Unavailability of patients on Waiting List – Inpatient or Day case admission, NHS Scotland



Notes (for Chart 10 and Chart 11):

1. This analysis excludes patients referred to mental health and obstetrics specialties.
2. PFB = Patient Focused Booking. A system where patients are asked to contact the hospital to arrange a convenient time for their appointment.
3. For patients added to the waiting list from 1 April 2009, all periods of social or medical unavailability are deducted from the calculation of wait.

NHS Scotland data for Census date 31 March 2008 onwards and comparable information by NHS Board of treatment are given in [Table C2](#).

Inpatients and Day cases – patients seen during the quarter

Key points:

- During the quarter ending 31 December 2011, 94.8% of patients seen (around 85,000 from a total of 90,000) waited 9 weeks or less. This has decreased slightly from 95.9% at quarter end 30 September 2011 [Table 4].
- One half of patients admitted for inpatient and day case treatment during the quarter ending 31 December 2011 waited 24 days or less (median). This is similar to the median for quarter ending 30 September 2011 (23 days) [Table 4].
- The 90th percentile wait indicates the maximum time that 9 out of every 10 patients waited. For the quarter ending 31 December 2011 this was 61 days. This is similar to quarter end 30 September 2011 (60 days) [Table 4].

The information in this section presents a summary of waiting times information on patients covered by the [national waiting times standard](#) set by the Scottish Government; Scottish residents admitted for NHS treatment as an inpatient or day case.

Chart 12 and [Table 4](#) demonstrate how performance against the national standard for inpatients or day cases has changed since the introduction of New Ways. This shows the length of time that patients admitted for treatment waited at quarter end dates. Comparable information for patients waiting is available in '[Inpatients and day cases – patients waiting at month end](#)'. See [Appendix A1](#) for further information on why both measures are published.

Chart 12: Completed waits for patients seen: Inpatient or Day case admissions, NHS Scotland

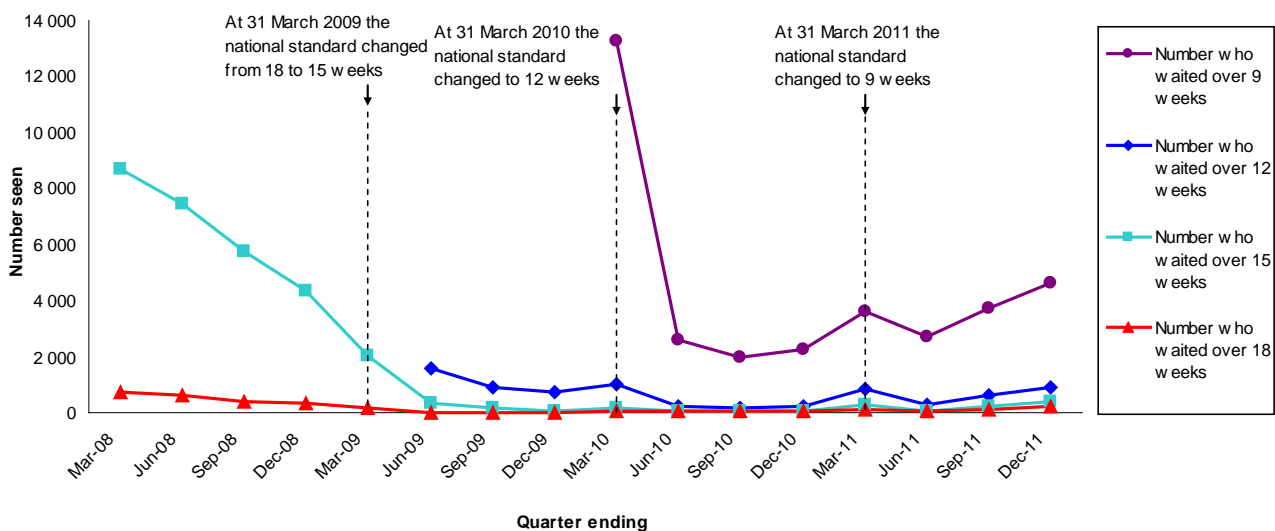


Table 4 - Completed waits for patients seen: Inpatients or Day case admission, Scotland

Month ending	Total seen	Number who waited over 9 weeks	Number who waited over 12 weeks	Number who waited over 15 weeks	Number who waited over 18 weeks	Median wait (days)	90 th percentile (days)
31-Dec-11	89 732	4 630	894	407	213	24	61
30-Sep-11	90 449	3 738	639	245	133	23	60
31-Dec-10	87 370	2 275	234	54	29	25	60
31-Dec-09	93 782	n/a	746	54	19	29	73
31-Dec-08	91 051	n/a	n/a	4 371	336	31	92

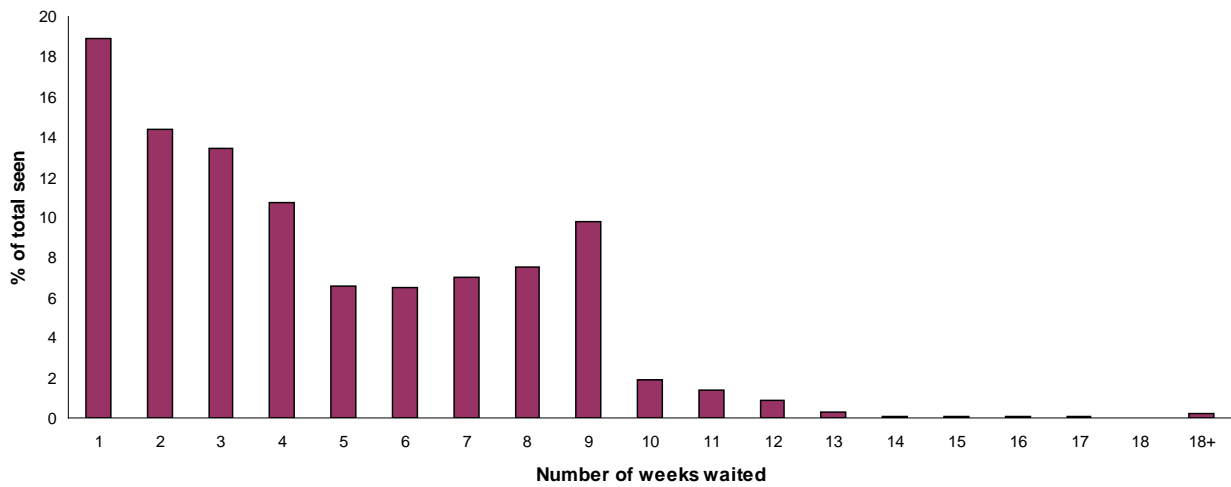
Notes (for [Chart 12](#) and Table 4):

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
2. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for medical or social reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero. [Further information](#) on availability is available.
3. Cataract and cardiac patients have been excluded from the key tables in this publication as the new outpatient waiting time targets do not apply. These patients have a Whole Journey waiting time standard of 18 weeks which is reported separately in the [Whole Journey section](#) of this publication.

NHS Scotland data for quarter ending 31 March 2008 onwards and comparable information by NHS Board of treatment are given in [Table A2a](#) and [Table J2](#).

[Chart 13](#) presents a distribution of waiting times for inpatients and day case patients with completed waits during each quarter. These patients are covered by the [national waiting times standard](#) set by the Scottish Government.

Chart 13: Distribution of completed wait for patients seen during quarter ending 31 December 2011, Inpatient or Day case admission, NHS Scotland



Notes (for Chart 13):

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
2. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for medical or social reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero. [Further information](#) on availability is available.
3. Cataract and cardiac patients have been excluded from the key tables in this publication as the new outpatient waiting time targets do not apply. These patients have a Whole Journey waiting time standard of 18 weeks which is reported separately in the [Whole Journey section](#) of this publication.
4. 1 week = 0 - 7 days, 2 weeks = 8 - 14 days,.... 18+ weeks = greater than 127 days.

NHS Scotland data for quarter ending 31 March 2008 onwards and comparable information by NHS Board of treatment are given in [Table B4](#).

Inpatients and Day cases – waiting list activity

Key points:

- During the quarter ending 31 December 2011 around 116,000 patients were removed from a waiting list for an inpatient or day case admission. Of these, 86.8% were removed because they were admitted as planned; 6.5% were removed because they no longer required treatment; 3.5% were removed because they were referred back to their GP; 1.1% were transferred; and 2.2% were removed for other reasons [[Chart 14](#) and [Chart 15](#)].
- Approximately 126,500 offers of admission for inpatient or day cases were accepted during the quarter ending 31 December 2011. The 'Did Not Attend' (DNA) rate was 2.2%, 'Could Not Attend' (CNA) rate was 8.3% and the '[Cancellation by Service](#)' rate was 7.5% [[Chart 16](#)].

Additions to list

Additions to the waiting list provide a measure of the demand being placed on the health service. During quarter end 31 December 2011, approximately 116,000 patients were added to the waiting list for inpatient or day case admission. This is slightly lower than quarter ending 30 September 2011 (118,000) and slightly higher than quarter ending 30 December 2010 (114,500).

Removals from list

Approximately 116,000 patients were removed from the waiting list during quarter ending 31 December 2011. Of these, 101,000 were removed because they attended an appointment. Other reasons for removing a patient from the waiting list include the patient no longer requiring treatment, being transferred elsewhere or being referred back to their GP, which may be because the patient did not attend their appointment.

The charts below present information about reason for removal from the waiting list for NHS treatment as an inpatient or day case.

[Chart 14](#) shows the proportion of patients removed from the waiting list by the reason for removal during quarterly periods. [Chart 15](#) focuses on those patients who were removed for reasons other than *attended*.

Chart 14: Reason for removal from Waiting List, Inpatient or Day case admission, NHS Scotland

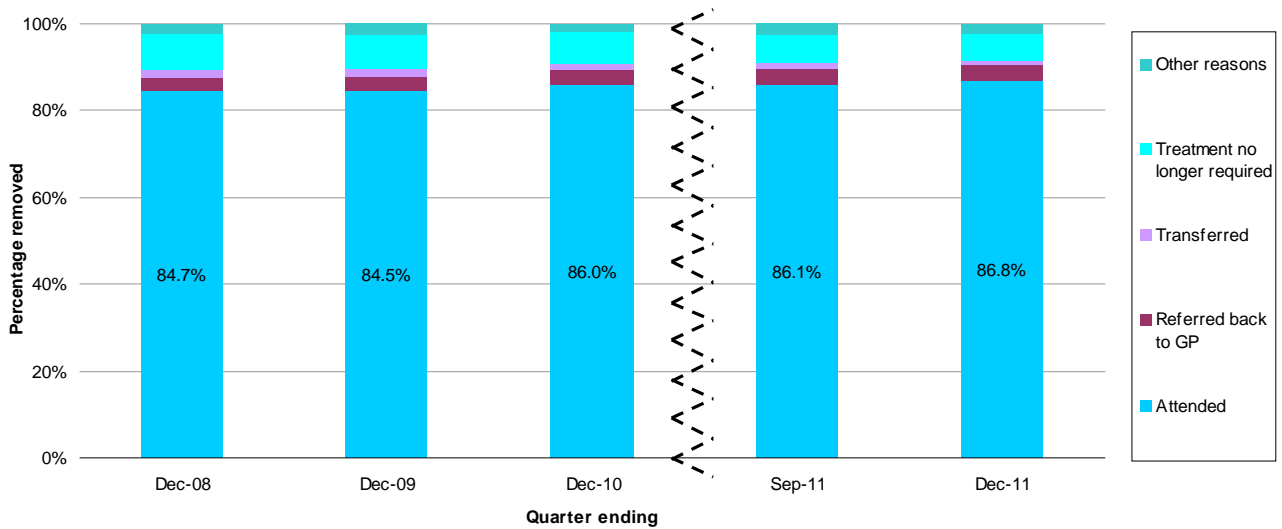
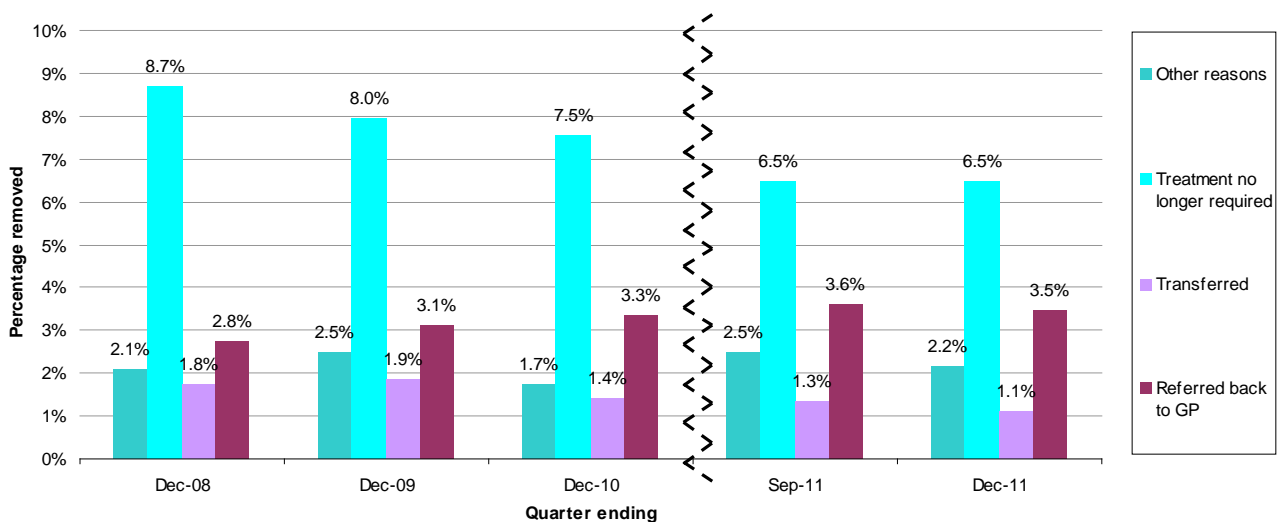


Chart 15: Reason for removal from Waiting List (excluding Attended), Inpatient or Day case admission, NHS Scotland



Notes (for Chart 14 and Chart 15):

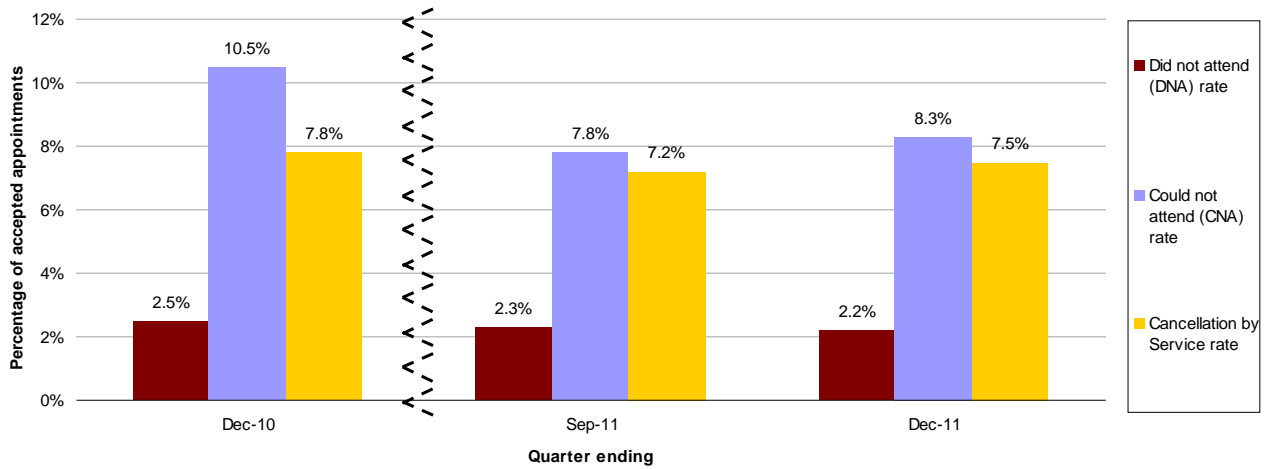
1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.

NHS Scotland data for quarter ending 31 March 2008 onwards and comparable information by NHS Board of treatment is given in [Table D2a](#).

[Chart 16](#) presents information about non attendance rates for NHS treatment as an inpatient or day case.

It shows the rate of missed appointments due to 'Did not attend' (DNA), 'Could not attend' (CNA) and '[Cancellation by Service](#)' during quarterly periods. Further information on the [definitions of these terms](#) are available.

Chart 16: Non attendance rates, Inpatient or Day case admission, NHS Scotland



Notes (for Chart 16):

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.

NHS Scotland data for quarter ending 31 March 2008 onwards and comparable information by NHS Board of treatment is given in [Table D2b](#).

“Whole Journey” waiting times for cardiac and cataract

Key points (as at 31 December 2011):

Cardiac

- Of 403 patients waiting for angiography, 99.0% were waiting equal to or less than the local target. This compares to 99.5% at 30 September 2011 [[Table 5](#)].
- Of 633 patients waiting for revascularisation, 99.8% were waiting for 9 weeks or less. This compares to 100% at 30 September 2011 [[Table 5](#)].
- Of 143 patients waiting for valve surgery, 100% were waiting for 9 weeks or less. This is the same as the percentage at 30 September 2011 [[Table 5](#)].
- Of 734 patients waiting for other cardiac surgery, 99.7% were waiting for 16 weeks or less. This compares to 100% at 30 September 2011 [[Table 5](#)].
- Statistics on patients seen at a RACPC will not be published at this time, as they require some further work in order to improve their reliability.

Cataract

- Of 2,254 patients waiting for cataract assessment, 86.0% were waiting equal to or less than the local target. This compares to 92.0% at 30 September 2011 [[Table 6](#)].
- Of 3,911 patients waiting for cataract surgery, 94.2% were waiting equal to or less than the local target. This compares to 97.1% at 30 September 2011 [[Table 7](#)].
- Of 1,522 patients waiting for cataract surgery for a second eye or at a one-stop cataract clinic, 93.9% were waiting equal to or less than the 18 week target. This compares to 97.6% at 30 September 2011 [[Table 8](#)].

Cardiac

From 31 December 2007 new waiting time standards were introduced for patients needing cardiac procedures. These standards improved upon the historic ones that set a maximum waiting time for angiography of 8 weeks and for revascularisation of 18 weeks: "By the end of 2007, no patient will wait more than 16 weeks from GP referral through a rapid access chest pain clinic or equivalent, to cardiac intervention." (Fair To All, Personal To Each, Scottish Government 2004)

Since 31 March 2010 this has been extended to cover all referral sources.

The standards go beyond the previous ones in that they cover all procedures and the entire patient journey. Cardiac patients should wait no longer than 16 weeks from referral by a General Practitioner through a Rapid Access Chest Pain Clinic (RACPC) to treatment. Patients referred for interventions via other routes ('other cardiac treatment'; H5) should wait no longer than 16 weeks from specialist decision to treat to receiving that treatment.

At present, NHS Scotland lacks systems on a national basis to capture total patient journey information. A pragmatic interim solution has been to monitor progress towards these targets by measuring and reporting the component parts of the journey. Local audits will assess the administrative processes between the different parts of the journey with the aim of minimising the gaps.

Assessment - patients seen at a RACPC following referral by any source (H1).

Investigation - patients waiting for an angiography (H2).

Intervention - patients waiting for treatment of a diagnosed cardiac disease (revascularisation, H3; valve surgery, H4).

Whilst the overall target covers all Scottish NHS Boards, these cardiac services are delivered on a regional basis and the different regions take varying approaches to achieving the maximum of 16 weeks from GP to intervention via RACPC. The north and west regional services aim to achieve the 16 week national standard by ensuring patients wait no longer than 2 weeks for RACPC assessment; 4 weeks for angiography and 9 weeks for intervention, whilst the east region (NHS Lothian, NHS Borders, NHS Fife and NHS Forth Valley) plan 1, 5 and 9 week maximums respectively for the components of this journey. The tables below summarise performance in Scotland compared to these regional plans. All three regions had previously set a target of 10 weeks for intervention.

Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for medical or social reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero. [Further information](#).

Patients seen at a RACPC are not published at this time as they require some work to improve their reliability. [Table 5](#) is based on data under development and the quality and accuracy are being monitored by ISD.

Table 5 – Cardiac patient journey: ongoing waits for patients on waiting list, Scotland

Journey component	Indicator	Census date					
		31-Dec-09	31-Dec-10	30-Sep-11	31-Oct-11	30-Nov-11	31-Dec-11
Angiography (H2)	Number on list	489	460	385	357	410	403
	Of which: number waiting over local target	11	1	2	3	2	4
Revascularisation (H3)	Number on list	401	454	518	548	535	633
	Of which: number waiting over 10 weeks	0	0	0	0	0	1
	Of which: number waiting over 9 weeks	3	1	0	0	0	1
Valve surgery (H4)	Number on list	130	142	157	158	145	143
	Of which: number waiting over 10 weeks	0	0	0	0	0	0
	Of which: number waiting over 9 weeks	1	0	0	0	0	0
Other cardiac treatment (H5)	Number on list	739	637	691	701	719	734
	Of which: number waiting over 16 weeks	0	0	0	0	0	2

Notes (for Table 5):

1. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for medical or social reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero. [Further information](#) on availability is available.

NHS Scotland data for Census date 31 March 2008 onwards and comparable information by NHS Board of treatment is given in [Table H2-H5](#).

The patient waits reported in these tables are excluded from [Table A1a](#), [Table A1b](#), [Table A2a](#), [Table A2b](#), [Table B1](#), [Table B4](#), [Table J1](#) and [Table J2](#) which refer to patients covered only by the national waiting times standard.

Cataract

From 31 December 2007 [new waiting time standards](#) were introduced for patients needing cataract procedures: “The maximum wait from referral by a GP or optometrist to surgery will be 18 weeks. This will be implemented across the NHS in Scotland by the end of 2007” (Fair To All, Personal To Each, Scottish Government 2004).

At present, NHS Scotland lacks systems on a national basis to capture total patient journey information. A pragmatic interim solution has been to measure progress towards these targets by measuring and reporting the component parts of the journey:

Assessment - patients waiting for cataract assessment at an outpatient clinic following a referral from a GP or community optometrist.

Treatment - patients waiting for cataract surgery.

Note, previously, only patients waiting for cataract assessment at a consultant-led clinic were reported. From the February 2012 publication, this has been extended to all clinics.

It is not possible to accurately measure the total journey time for each individual patient at this time. It should be noted that record linkage work has demonstrated that the majority of patients are listed for surgery very soon after their outpatient consultation (or pre-assessment linked with one stop systems), which offers a reasonable degree of confidence that this form of measurement does not hide a delay between outpatient assessment and addition to inpatient/day case waiting list.

As part of local delivery plans, NHS Boards are asked to provide cataract delivery trajectories that indicate the maximum wait their patients would be expected to wait for each of the two pathways, and to ensure that the maximum wait for both assessment ([Table 6](#)) and treatment ([Table 7](#)) pathways combined does not exceed 18 weeks. The planned journey time for each pathway varies a little across the boards. This is expected due to differing local service configurations such as outpatient clinic types and day case facilities.

[Table 8](#) shows separate information for patients undergoing cataract surgery for second eyes. It also incorporates patients who undergo their treatment under a One Stop cataract system (which combines consultation, pre-operative assessment and surgery all on the same day). These patients are subject to an 18 week target for surgery.

Table 6 – Cataract patient journey: waiting time for outpatient assessment: ongoing waits for patients on waiting list, Scotland

Indicator	Census date				
	31-Dec-10	30-Sep-11	31-Oct-11	30-Nov-11	31-Dec-11
Number on list	2 331	2 617	2 573	2 500	2 254
Of which: Number waiting over local target	36	209	203	255	316

Table 7 – Cataract patient journey: waiting time for surgery: ongoing waits for patients on waiting list, Scotland

Indicator	Census date				
	31-Dec-10	30-Sep-11	31-Oct-11	30-Nov-11	31-Dec-11
Number on list	3 613	4 377	4 344	4 331	3 911
Of which: Number waiting over local target	28	125	271	309	226

Table 8 – Cataract patient journey: waiting time for surgery (2nd eye clinics and one stop clinics): ongoing waits for patients on waiting list, Scotland

Indicator	Census date				
	31-Dec-10	30-Sep-11	31-Oct-11	30-Nov-11	31-Dec-11
Number on list	1 627	1 440	1 480	1 540	1 522
Of which: Number waiting over 18 weeks	3	34	57	92	93

Notes (for Table 6, Table 7 and Table 8):

1. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for medical or social reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero. [Further information](#) on availability is available.

NHS Scotland data for Census date 31 December 2008 (Table 7), 31 March 09 (Table 6) and 31 December 2009 (Table 8) onwards and comparable information by NHS Board of treatment is given in [Table I1-I3](#).

The patient waits reported in these tables are excluded from [Table A1a](#), [Table A1b](#), [Table A2a](#), [Table A2b](#), [Table B1](#), [Table B4](#), [Table J1](#) and [Table J2](#) which refer to patients covered only by the national waiting times standard.

Glossary

CNA	Could Not Attend
DNA	Did Not Attend
GDP	General Dentist Practitioner
GP	General Medical Practitioner
ISD	Information Services Division
NHS	National Health Service
RACPC	Rapid Access Chest Pain Clinic

List of Tables

Report table no.	Waiting times table ref.	Name	Time period	File & size
1	A1b	Waiting Times for a New Outpatient appointment: NHS Scotland, Ongoing waits for patients on waiting list	Month ending 31-Mar-08 to 31-Mar-10 for GP/GDP referrals and 31-Dec-09 – 31-Dec-11 for all referral sources	Excel [214kb]
2	A1a	Waiting Times for a New Outpatient appointment: NHS Scotland, Completed waits for patients seen	Quarter ending 31-Mar-08 – 31-Mar-10 for GP/GDP referrals and 31-Dec-09 – 31-Dec-11 for all referral sources	Excel [263kb]
3	A2b	Waiting Times for Inpatient or Day case admission: NHS Scotland, Ongoing waits for patients on waiting list	Month ending 31-Mar-08 to 31-Dec-11	Excel [181kb]
4	A2a	Waiting Times for Inpatient or Day case admission: NHS Scotland, Completed waits for patients seen	Quarter ending 31-Mar-08 – q/e 31-Dec-11	Excel [202kb]
5	H2-H5	Cardiac patient journey: NHS Scotland, Waiting time for Angiography, Revasc, Valve Surgery and Other Cardiac Treatment, Ongoing waits for patients on waiting list	Month ending 31-Mar-08 – 31-Dec-11	Excel [110kb]
6, 7 & 8	I1-I3	Cataract patient journey: NHS Scotland, Waiting time for Outpatient Assessment, Waiting Time for Surgery (1st eye Cataract) and and Waiting Time for Surgery (2nd Eye Cataract and One Stop Clinics), Ongoing waits for patients on waiting list	Month ending 31-Dec-08 – 31-Dec-11	Excel [75kb]

For the full list of tables released with this publication, please see the full [list of tables](#) web page

List of Charts

Report chart no.	Waiting times table ref.	Name	Time period	File & size
1	A1b	Waiting Times for a New Outpatient appointment: NHS Scotland, Ongoing waits for patients on waiting list	Month ending 31-Mar-08 to 31-Mar-10 for GP/GDP referrals and 31-Dec-09 – 31-Dec-11 for all referral sources	Excel [214kb]
2 & 3	C1	Availability of patients on the Waiting List for a New Outpatient appointment: NHS Scotland	Month ending 31-Mar-10 – 31-Dec-11 for all referral sources	Excel [235kb]
4	A1a	Waiting Times for a New Outpatient appointment: NHS Scotland, Completed waits for patients seen	Quarter ending 31-Mar-08 – 31-Mar-10 for GP/GDP referrals and 31-Dec-09 – 31-Dec-11 for all referral sources	Excel [263kb]
5	B1	Distribution of completed waits for New Outpatient appointment: NHS Scotland, Patients seen in quarter	Quarter ending 31-Mar-10 – 31-Dec-11	Excel [360kb]
6 & 7	D1a	Reason for removal for a New Outpatient appointment: NHS Scotland	Quarter ending 31-Mar-10 – 31-Dec-11 for all referral sources	Excel [296kb]
8	D1b	Non attendance rates for a New Outpatient appointment: NHS Scotland	Quarter ending 31-Mar-10 – 31-Dec-11 for all referral sources	Excel [203kb]
9	A2b	Waiting Times for Inpatient or Day case admission: NHS Scotland, Ongoing waits for patients on waiting list	Month ending 31-Mar-08 to 31-Dec-11	Excel [181kb]
10 & 11	C2	Availability of patients on the Waiting List for Inpatient or Day case admission: NHS Scotland	Month ending 31-Mar-08 – 31-Dec-11	Excel [299kb]
12	A2a	Waiting Times for Inpatient or Day case admission: NHS Scotland, Completed waits for patients seen	Quarter ending 31-Mar-08 – q/e 31-Dec-11	Excel [202kb]
13	B4	Distribution of completed waits for	Quarter ending	Excel

		Inpatient or Day case admission: NHS Scotland, Patients seen in quarter	31-Mar-08 – 31-Dec-11	[451kb]
14 & 15	D2a	Reason for removal for Inpatient or Day case admission: NHS Scotland	Quarter ending 31-Mar-08 – 31-Dec-11	Excel [339kb]
16	D2b	Non attendance rates for Inpatient or Day case admission: NHS Scotland	Quarter ending 31-Mar-08 – 31-Dec-11	Excel [255kb]

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Further Information

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

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Appendix

A1 – Background Information**Interpretation**

- This is the latest publication of waiting times statistics following the introduction of 'New Ways of defining and measuring waiting times' on 1 January 2008. 'New Ways' introduced a significant change in how the NHS Scotland collects and defines waiting times, and also how waiting lists are clinically and administratively managed.
- One very important policy aspect of this change is that many patients who would previously have been excluded from national standards for waiting are now included. This change takes account of any periods of unavailability and missed or cancelled appointments. All waiting times statistics derived from the New Ways waiting times data warehouse are produced on this basis.
- These statistics may be updated in subsequent publications and experience suggests that future revisions will be minimal.
- Under 'New Ways', patients waiting for a new outpatient consultation at a consultant-led clinic or for inpatient and day case treatment who become unavailable for medical or social reasons are no longer exempt from national waiting times standards.
- There are two measures of waiting times; monthly censuses of patients waiting at the end of each month and the reported waiting times of patients who have been seen or treated. [An explanation](#) of these two measures is available.
- Some NHS Boards have reported that certain statistics are not yet finalised and may be subject to some change. These are published, where they are considered to give a reasonable reflection of the current position and therefore to be useable by the public. In such cases, details of differences between the published figures and current local NHS Board understanding are shown in the footnotes to the relevant table.

Interpreting New Outpatient Waiting Times Statistics

ISD collect information on waiting times for various aspects of healthcare provided by NHS Scotland, including new outpatient attendances led by a consultant or dentist. Data is collected for acute specialties (those specialties primarily concerned in the surgical, medical and dental sectors) and waiting times statistics are mostly reported on patients covered by the Scottish Government's national waiting times standard; Scottish residents waiting to be seen in an acute specialty (other than homeopathy). At 31 December 2011, 212,131 patients were waiting for a consultant or dentist led clinic of whom 211,197 were covered by the national standard. The number of patients on the waiting list has increased from 199,619 one year earlier (31 December 2010). While there is an element of seasonality, the trend since early 2010 is for an increase in the number of patients waiting. Data for previous quarters and individual NHS Boards are available [here](#).

Additions to and removals from the waiting list

Data relating to [activity](#) is reported on all patients waiting for or seen at a consultant or dentist led clinic, not just those covered by the national standard. [Table D1](#) shows the number of additions to the waiting list (i.e. new referrals), removals and a breakdown of the reason for removal. During quarter ending 31 December 2011, there were 397,497 additions to the list and this reflects an increased level of demand on the service (the equivalent number of additions to the waiting list was 381,673 during q/e 31 December 2010). Meanwhile, the number of removals from the list for the three months to 31

December 2011 was 401,905. As removals exceeded additions in quarter ending 31 December 2011 the net effect is for an decrease in waiting list size. [Historic data](#) shows seasonality in waiting list management where waiting lists grow over the summer months and decline in the winter. Most (approximately 81%) of patients are removed from the list because they have attended a clinic. Other reasons for removing a patient from the waiting list include the patient no longer requiring treatment, being transferred elsewhere or being referred back to their General Practitioner (GP), which may be because the patient did not attend their appointment.

National waiting times standards

The national waiting times standard states that, from 31 March 2010, no patient should wait longer than 12 weeks for a new outpatient appointment at a consultant-led clinic. This includes referrals from all sources. Previously, the national standard was set at 18 weeks (from 31 December 2007) and 15 weeks (from 31 March 2009) and applied only to patients referred by a GP or dentist.

ISD began collecting data based on '[New Ways](#) of measuring waiting times' in January 2008. At that time, data quality focused on referrals from GPs or dentists, reflecting the national standard at that time. More recently data quality checks have encompassed all sources of referral and ISD now publish data covering all sources of referral, reflecting the new national standard, from quarter ending 31 March 2010. Data relating only to GP or dentist referrals from 2008-2010 has been [archived](#).

ISD use two ways of measuring how the national waiting times standard relates to patients waiting for a new outpatient appointment.

Ongoing waits

Firstly, it is important to monitor patients on the waiting list at a point in time (such as the end of a month or quarter; these are referred to as ongoing waits). Measuring how long those patients have waited ensures that patients are not being left on a waiting list indefinitely. This is the measure that the Scottish Government use to determine NHS Boards' performance against their waiting times targets. At 31 December 2011, 97.1% of patients (202,749 of 208,890) on the waiting list had been waiting less than the 12 week standard. Performance against the relevant targets since 2008 and at NHS Board level can be seen [here](#).

Completed waits

The second measure of performance against the national standard is the amount of time waited by patients up to when they are seen (referred to as completed waits). This measure is relevant for patients understanding how long they are likely to wait. During quarter ending 31 December 2011 half of all patients covered by the national standard were seen within 36 days (median wait) and 9 out of 10 patients were seen within 81 days (90th percentile wait). Of the 319,837 patients seen during quarter ending 31 December 2011, 307,417 (96.1%) were seen within the 12 week target. Performance against the relevant targets since 2008 and at NHS Board level can be seen [here](#).

Cataract & cardiac waits

In addition to the national waiting times standard for new outpatients, NHS Boards are working towards a target of 18 weeks for the whole patient journey, from referral to

treatment. To date, NHS Boards are reporting on [cataract](#) and [cardiac](#) pathways, so the outpatient part of these patients' journey is reported separately from the new outpatient national standard described above.

Patient related delay

A key feature of New Ways is the notion of patient responsibility. This means that the patient wait is defined as the amount of time a patient spends waiting for an appointment, following the acceptance of a reasonable offer, and is available to attend. ISD report on the number of patients on the waiting list that are 'available' or 'unavailable' and the reasons for their unavailability (see [here](#)). If a patient cancels an appointment, their waiting time is reset and they may be referred back to their GP (more information is available [here](#)).

Analysis of the combined impact of these patient related delays on the overall time patients spend on the waiting list can be found [here](#). During quarter ending 31 December 2011, 80.3% of patients experienced no such delay in their wait. This compares with a figure of 80.6% during quarter ending 31 December 2010.

Interpreting Inpatient or Day case Waiting Times Statistics

ISD collect information on waiting times for various aspects of healthcare provided by NHS Scotland including inpatient and day case admissions. Data is collected for acute specialties (those specialties primarily concerned in the surgical, medical and dental sectors) and waiting times statistics are mostly reported on patients covered by the Scottish Government's national waiting times standard; Scottish residents waiting for treatment in an acute specialty. At 31 December 2011, 67,645 patients were waiting for NHS treatment as an inpatient or day case, of whom 67,185 were covered by the national waiting time standard. Data for previous quarters and individual NHS Boards are available [here](#). The number of patients on the list at 31 December 2011 and in the previous quarter (67,016) are both above the trend seen in previous quarters (numbers waiting varies between 62,000 and 66,500) since the introduction of New Ways in January 2008.

Additions to and removals from the waiting list

Data relating to [activity](#) is reported on all patients waiting or who have been admitted for NHS treatment as an inpatient or day case. [Table D2](#) shows the number of additions to the inpatient / day case waiting list, removals from the waiting list and a breakdown of the reason for removal. In the quarter ending 31 December 2011, there were 116,178 additions to the waiting list, reflecting a slight drop in demand on the service from the previous quarter figure of 118,133 up to 30 September 2011. Demand peaked at 124,929 the three months to September 2009 and has fallen in most quarters since then. Meanwhile, the number of removals from the list during quarter ending 31 December 2011 was 116,090. As the number of additions was close to the number of removals in the quarter to 31 December 2011 the net effect is for the waiting list size to remain stable. Demand has exceeded removals in each quarter since quarter ending 31 March 2010. Most (86.8%) patients are removed from the list because they have been admitted for treatment. Other reasons for removing a patient from the waiting list include the patient no longer requiring treatment, being transferred elsewhere or being referred back to their General Practitioner (GP), which may be because the patient did not attend their appointment.

National waiting times standards

The national waiting times standard states that, from 31 March 2011, no patient waiting for treatment as an inpatient or day case will wait longer than 9 weeks. Previously, the national standard was set at 18 weeks (from 31 December 2007) and 15 weeks (from 31 March 2009) and 12 weeks (from 31 March 2010).

ISD use two ways of measuring how the national waiting times standard relates to patients waiting for an inpatient or day case admission.

Ongoing waits

Firstly, it is important to monitor patients on the waiting list at a point in time (such as the end of a month or quarter; these are referred to as ongoing waits). Measuring how long those patients have waited ensures that patients are not being left on a waiting list indefinitely. This is the measure that the Scottish Government use to determine NHS Boards' performance against their waiting times targets. At 31 December 2011, 93.3% of patients (55,833 of 59,846) on the waiting list had been waiting less than the 9 week standard. Performance against the relevant targets since 2008 and at NHS Board level can be seen [here](#).

Completed waits

The second measure of performance against the national standard is the time waited by patients once they have been seen (referred to as completed waits). This measure is relevant for patients understanding how long they are likely to wait. During quarter ending 31 December 2011, half of all patients covered by the national standard were seen within 24 days (median wait) and 9 out of 10 were seen within 61 days (90th percentile wait). Of the 89,732 patients seen during quarter ending 31 December 2011, 85,102 (94.8%) were seen within the 12 week standard. Performance against the relevant targets since 2008 and at NHS Board level can be seen [here](#).

Cataract & cardiac waits

In addition to the national waiting times standard for inpatient or day cases, NHS Boards are working towards a target of 18 weeks for the whole patient journey, from referral to treatment. To date, NHS Boards are reporting on [cataract](#) and [cardiac](#) pathways, so the inpatient/day case part of these patients' journey is reported separately from the inpatient/day case national standard described above.

Patient related delay

The data reported in this publication are shown from 1 January 2008 onwards. This is due to changes to the way in which waiting times are collected and reported since the implementation of 'New Ways'. The key changes are described [here](#). Data relating to waiting times prior to January 2008 can be found [here](#). A key feature of New Ways was the notion of patient responsibility. This means that the patient wait is defined as the amount of time a patient spends waiting for an appointment, following the acceptance of a reasonable offer, and is available to attend (see [here](#)). ISD report on the number of patients on the waiting list that are 'available' and 'unavailable' and the reason for their unavailability. If a patient cancels an appointment, their waiting time is reset and they may be referred back to their GP (more information is available [here](#)).

Analysis of the combined impact of these patient related delays on the overall time patients spend on the waiting list can be found [here](#). During quarter ending 31 December 2011,

64.8% of patients experienced no such delay in their treatment. This compares with a figure of 68.3% during quarter ending 31 December 2010.

Cancellation by Service (cancelled prior to admission)

Cancellation by service provides information on how NHS Boards are operating their waiting lists, the cancellation does not have a direct impact on the patient's experience.

There are a range of reasons why an appointment may be cancelled, including:

- Logistical reasons e.g. the NHS Board is unable to arrange the travel of a patient or a consultant; bad weather can have a significant impact. This is most likely to affect the island Boards and those with large rural areas.
- A system recording issue whereby a Board moves an appointment to a different facility, and the local system processes this by cancelling the initial appointment and creating a new one, even if it is at the same date and time.
- A system recording issue whereby a Board moves an appointment to a different clinic or time slot and the local system processes this by cancelling the initial appointment and creating a new one, even if it is earlier or at the request of the patient.
- Capacity issues, e.g. the Board are unable to see/treat a patient due to illness, staffing issue, holidays, lack of beds etc.
- Emergency admissions may lead to elective admissions being cancelled as surgeon's or theatre time is directed towards the emergency case.
- A public health issue leading to loss of facilities e.g. there have been a small number of cases where norovirus lead to wards being closed for a period.

The [Waiting Times Recording Manual, v4.0 Nov 2010](#) states the following guidance for the service regarding Cancellation by service:

'Cancellations resulting from operational circumstances should not result in any detriment to the patient; for example, the cancellation of a clinic at short notice or the failure of the ambulance service to collect the patient, must result in the patient being made a further reasonable offer as soon as possible.'

i.e. If a Board cancels a hospital appointment, the appointment must be re-scheduled to ensure the patient receives a further appointment within waiting time standards.

Statement on Performance Indicators

Why do we publish information on both patients still waiting and patients seen?

Waiting times statistics are of public and 'management' interest for measuring among other things how well the health system is performing and prompting management action where pressures on the standard of service required by the public are apparent. There are two statistics of interest in this regard for assessing NHS hospitals' performance:

- Waiting times of patients who are still waiting for health care at a point in time (waiting list census);
- Waiting times actually experienced by patients who have been treated.

These are different statistics that can be used for different purposes.

Patients waiting

These statistics measured at a census point show the length of time that patients on a waiting list have been waiting at the month end. This is the most useful measure for NHS managers who may need to take prospective action to make sure patient waits do not exceed the national maximum waiting time standard set by the Scottish Government.

The Scottish Government use information on Patients Waiting to performance manage waiting times standards, and these statistics have played an important intelligence role in the significant reductions seen in waiting times over the last few years.

This measure however, does not report how long patients actually waited until they received care. If a census is repeated as a routine then the maximum extra time the waiting patients may experience who are removed from the waiting list between censuses, is the time gap between censuses. Currently at national reporting level that is one month.

Another gap in the picture provided by this measure is the patients who are added to a waiting list after one census point and treated (removed from the list) before the next census point. This is not generally an issue for prospective performance management action.

Patients seen

These statistics show the complete picture of waiting time experienced by patients and is therefore a good retrospective measure of how well the NHS is performing against the standard and takes account of the gaps in the census measure described above. This is what a lay person would understand by the words of the standard set for the health service. It is not so useful for prospective management action of course because it is historic, but it may indicate issues to managers. For example where waiting list management processes might need adjustment to deal with long waiters in order to prevent them slipping over the target between census points.

Data Quality

The following is a list of known issues with data extracted from the waiting times data warehouse for publication on 30 January 2011. Other data quality issues may exist. In terms of impact, the vast majority of the data has been judged fit-for-purpose for publication. It is inevitable that any new data collection system, and especially one that represents as big a change as New Ways, will require time to settle before NHS Boards' data are recorded nationally with full consistency. NHS Boards and ISD are actively working to resolve the remaining quality issues that are understood to impact on data reliability.

Local system problems have meant that some sites have been unable to correct some erroneous retrospective information. This issue led to the requirement for ISD to filter out some records centrally. See the Filtration System section of the Data Quality page for more information.

Common data quality issues

Data completeness

Prior to the May 2010 publication, data provided by NHS Boards was required to pass central validation before being accepted into the Warehouse and therefore available for analysis. Any records which failed validation were reported back to data providers with an indication of the error and were not included in the warehouse. This resulted in data incompleteness to some extent for all Boards. The changes implemented through the New Ways refresh project ensure that the majority of records enter the data warehouse - addressing what has been a long standing issue for Boards. The refresh also introduces a 'flag' system for records so data in error can be excluded from National Statistics analysis, while allowing ISD and the Boards to monitor error records and work towards quantifying levels of completeness.

In addition, a number of Boards report that, due to issues with local systems, there may be some incompleteness in the records returned to the data warehouse at ISD. Further work is required to understand and assure these data. These issues are being addressed by ISD and the Boards.

Sites affected: NHS Fife, NHS Forth Valley and NHS Shetland.
Statistics affected: All statistics
Impact: Number of patients reported as being seen or waiting expected to be lower than the true figure.

Golden Jubilee National Hospital

The Golden Jubilee National Hospital (GJNH) Heart and Lung Centre opened at the beginning of April 2008. The centre offers all heart and lung surgery for the west of Scotland – including bypasses, heart valve surgery and other complex procedures. The centre has brought together services at the Golden Jubilee National Hospital with cardiothoracic (heart and lung) services from Glasgow's Western and Royal Infirmarys, as well as thoracic (lung) services from Hairmyres Hospital in Lanarkshire.

The wider GJNH provides a dedicated elective facility to patients throughout Scotland in order to assist in reducing waiting times. The referring Board, and not the GJNH, is responsible for supplying waiting times information to the Waiting Times Data Warehouse, but many Boards have been unable to do this at this stage.

Sites affected: Golden Jubilee National Hospital
Statistics affected: All new outpatient, inpatient and day case statistics
Impact: Only statistics for the GJNH Heart and Lung Centre are presented in this publication. Statistics for referrals from other Boards have not been presented at Board level. Additionally, the recorded number of removals from waiting list due to transfers may be too high for some Boards, as these should be recorded as admissions to the GJNH.

Tables with unavailable data at Scotland level

A small number of tables are published where data has been unavailable at Scotland level and for each individual Board in the past. The affected tables are:

- Table D2: Inpatient and day case waiting list activity – CNA/DNA/Cancellation by Service rates are not published up to 30 June 2009;
- Table I1: Cataract patient journey: waiting times for assessment – the number on the list and the number waiting over the local target are not published up to 30 June 2009 or at 31 January 2011 and 28 February 2011.

Cataract Assessment (Table I1)

Previously, only patients waiting for cataract assessment at a consultant-led clinic were reported. From the February 2012 publication, this has been extended to all clinics.

Further detail of the specific reasons for data being unavailable for the affected Boards is shown in the 'NHS Board – specific data quality issues' section of this paper.

NHS Board - specific data quality issues

NHS Ayrshire & Arran

Table D1: New outpatient appointment waiting list activity – reason for removal from list 'other reasons' is inflated due to local system issues.

Table D2: New outpatient appointment waiting list activity – reason for removal from list 'other reasons' is inflated due to local system issues.

Some data from previous quarters unavailable:

- Table I2: Cataract patient journey: waiting times for surgery – the number on the list and the number waiting over local target (up to 31 December 2009) are not published due to local recording issues.

NHS Borders

During early 2011, NHS Borders moved to a new patient management system. This has led to incompleteness in the records returned to the data warehouse at ISD. As a result, the number of patients reported as being seen or waiting during quarter ending 30 September and 31 December 2010 is expected to be slightly lower than the true figure.

This has also resulted in no data being submitted for cataract waiting times and affects the following tables:

Table I1: Cataract patient journey: waiting times for outpatient assessment – the number on the list and the number waiting over local target at 31 December 2010 to 31 March 2011 are not published.

Table I2: Cataract patient journey: waiting times for surgery – the number on the list and the number waiting over local target at 31 December 2010 to 30 September 2011 are not published.

Table I3: Cataract patient journey: waiting times for surgery (second eye and one stop clinics) – the number on the list and the number waiting over 18 weeks at 31 December 2010 to 30 September 2011 are not published.

NHS Dumfries & Galloway

Table I1: Cataract patient journey: waiting time for outpatient assessment ongoing waits for patients on waiting list – the Number on list shows only patients waiting for assessment at a consultant-led clinic. The latest figure may be inflated as all patients are added to a consultant waiting list before being triaged and placed specifically on a consultant or a nurse-led waiting list.

NHS Fife

Table C1: Availability of patients on waiting list for a new outpatient appointment – the number of patients assigned to ‘social unavailability’ may be falsely low due to local recording issues.

Some data from previous quarters unavailable:

- Table I1: Cataract patient journey: waiting times for outpatient assessment – the number on the list and the number waiting over local target (up to 30 September 2010) are not published due to local recording issues.
- Table I2: Cataract patient journey: waiting time for surgery - the number on the list and the number waiting over local target (up to 30 June 2009) are not published due to local recording issues.

NHS Forth Valley

Table I1: Cataract patient journey: waiting times for outpatient assessment – the number waiting over local target (up to 30 June 2009 and at 30 September 2010 and 31 December 2010) are not published due to local recording issues.

NHS Forth Valley previously reported that there was a data quality issue affecting patients seen at a new outpatient appointment. Figures may have been inflated due to the move to the new Forth Valley Royal Hospital. This affected:

Table A1a: Waiting times for a new outpatient appointment; patients referred by all referral sources; completed waits for patients seen (quarter ending 30 September 2010).

NHS Grampian

During early 2011, NHS Grampian moved to a new patient management system, with subsequent incompleteness in the records returned to the data warehouse at ISD. As a result, the number of patients reported as being seen or waiting during and the number of patients added and removed from the waiting list for quarter ending 31 March and 30 June 2011 is expected to be lower than the true figure.

Due to system issues, some data from previous quarters is unavailable:

- Table D2: Inpatient and day case waiting list activity – CNA/DNA/Cancellation by Service rates are not published for quarter ending 31 March 2010.

NHS Greater Glasgow & Clyde

During September 2011, NHS Greater Glasgow & Clyde began a staged move to a new patient management system, beginning with the Inverclyde Royal Hospital. This has led to some incompleteness in the records returned to the data warehouse at ISD. As a result, the number of patients reported as being seen or waiting during quarters ending 30 September and 31 December 2011 is expected to be slightly lower than the true figure. Some figures

reported for the quarter ending 30 September 2011 may also have been adjusted since their first publication.

NHS Highland

Outpatient figures for Argyll & Bute area – data quality potentially affected by local system outpatient extract software. A new filter list was applied after New Ways Refresh was implemented and the local system supplier is to address these issues as soon as possible.

NHS Lanarkshire

Table I1: Cataract patient journey: waiting times for outpatient assessment – the number of patients waiting for cataract assessment and the number waiting over local target (up to 30 November 2011) are not published due to local system issues.

NHS Lothian

NHS Lothian provides a national specialist service for scoliosis. Given the complexity of these cases and the very high standard of clinical care provided, it is not possible to offer treatment for these patients elsewhere in order to ensure admission within waiting time standards.

NHS Lothian report that there is a data quality issue affecting patients seen at a new outpatient appointment or patients admitted as an inpatient/day case and that this may inflate the figures for patients seen (including the number who waited longer than the 12/9 week national standards) and distort the distribution of wait. This affects tables:

- Table A1a: Waiting times for a new outpatient appointment; patients referred by all referral sources; completed waits for patients seen
- Table A2a: Waiting times for an inpatient or day case admission; completed waits for patients seen
- Table B1: Distribution of completed waits for New Outpatient appointment
- Table B4: Distribution of completed waits for an inpatient or day case admission
- Table J1: Episode length for new outpatient appointment; completed waits for patients seen
- Table J2: Episode length for an inpatient or day case admission; completed waits for patients seen

Cardiac patient journey: waiting times for Angiography (Table H2), Revascularisation (Table H3) and 'other cardiac treatment' (Table H5); ongoing waits for patients on waiting list – previously published figures for the number of patients on the list have been revised notably. NHS Lothian are working to resolve this issue.

NHS Lothian report that there are additional data quality issues affecting tables in the report, impacting on the ability to assess historical trends. Tables C1 (Availability of patients on waiting list for a new outpatient appointment) and C2 (Availability of patients on waiting list for an inpatient or day case admission) will be particularly affected. To address these difficulties, new guidance has been issued in NHS Lothian to manage waiting times and standard operating procedures prepared. However, it is not possible to revise previously published data.

NHS Orkney

Care must be taken when interpreting figures to take into account issues with infrequent services in the NHS Orkney area.

NHS Shetland

Care must be taken when interpreting figures to take into account issues with infrequent services in the NHS Shetland area.

Table C2: Availability of patients on waiting list for inpatient or day case admission – ‘medically unavailable rate’ is inflated due to local recording issues. NHS Shetland are working to resolve this issue.

Table D1: New outpatient appointment waiting list activity – figures for removal from list due to ‘other reasons’ (inappropriate referrals) may be inflated due to a local systems issue.

Some data from previous quarters unavailable:

- Table D1: New outpatient appointment waiting list activity – ‘cancellation by service rate’ (up to 30 June 2010) is not published due to local system and recording issues.

NHS Tayside

Due to a local system issue, some figures for NHS Tayside have been inflated and some of the data in the Warehouse is currently inaccurate. This issue relates to NHS Tayside’s PAS (Patient Administration System), TOPAS: Due to many AHP (Allied Healthcare Professional) and Nurse-led clinics not having a GMC (General Medical Council) number, many clinics are being recorded as consultant-led rather than AHP or Nurse-led. Therefore many of the Consultant figures in the Warehouse for NHS Tayside are too high. Data is currently unavailable due to this however NHS Tayside is working towards resolving this issue and the situation is improving.

Filtration System

The filter mechanism was introduced early in 2008, when it became apparent that, for some NHS Boards, some known errors in New Ways records could not be corrected in the files submitted to the New Ways database due to technical restrictions of their local IT systems. The errors are due to a number of reasons, including system issues with data extraction and incorrect data entry resulting in failed validation centrally. This can result in records within the data warehouse not being successfully updated.

As a contingency measure, ISD has centrally filtered these erroneous New Ways records, which are not included in the published statistics.

ISD asked each NHS Board affected to provide a file detailing the records involved and the reasons why a filter is requested. This approach was endorsed on the basis that:

- it is an interim, auditable process and the filter will be removed as soon as possible;
- records are not 'deleted' from the central data warehouse, but filtered from analysis;
- NHS Boards are required to work with their system suppliers to resolve their technical issues.

The table below shows the volume of affected records by NHS Board. These cases represent a very small percentage of the total number of records and the 'filtering' has enabled the provisional publication of related statistics. When considering the filtration system it is important to do so in awareness that this is one of a number of ways in which data quality assurance is managed; there are others, including NHS Board verification of key statistics.

Table 8 – Volume of affected records by NHS Board

NHS Board	q/e Mar-11		q/e Jun-11		q/e Sep-11		q/e Dec-11	
	IP/DC	OP	IP/DC	OP	IP/DC	OP	IP/DC	OP
NHS Ayrshire & Arran	574	130	205	208	117	34	3	0
NHS Borders	26	73	30	46	23	28	1	0
NHS Fife	91	234	76	287	83	346	29	23
NHS Forth Valley	6	255	2	187	2	80	0	6
NHS Grampian	57	250	149	354	30	530	12	57
NHS Greater Glasgow & Clyde	434	2 562	451	2 214	475	1 807	96	173
NHS Highland	2	43	8	102	3	38	1	16
NHS Lanarkshire	350	331	529	435	59	211	8	26
NHS Lothian	61	626	19	84	0	25	0	2
NHS Tayside	3	2	0	0	0	0	2	0

Notes: IP/DC - Inpatients and Day cases, OP - New Outpatients

This table shows filtered records for the last year. Data for periods prior to q/e March 2010 are given in the table [‘Number of records filtered, by NHS Board’](#).

Local 'filtering' of data

Some NHS Boards reported that they had locally 'filtered' (excluded) certain cases from submissions to the national warehouse. This was undertaken by NHS Boards who were not able, due to technical or other reasons, to make changes locally to erroneous data. The following NHS Boards advised that they had locally filtered erroneous records: Dumfries & Galloway, Fife, Forth Valley, Tayside and Western Isles.

These cases represent a small percentage of the total number of patients and the local 'filtering' has enabled the provisional publication of related statistics.

A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication title	Inpatient, Day case and Outpatient stage of treatment waiting times
Description	Monthly and quarterly summary of waiting times and waiting lists in the acute sector of NHSScotland.
Theme	Health and Social Care
Topic	Access and Waiting Times
Format	Excel workbooks and PDF
Data source(s)	Waiting Times Data Warehouse. Consists of a series of 'open' records for patients still waiting for treatment and 'closed' records when patients are removed from the waiting list. All patients who are added to a waiting list for inpatient or day case treatment, for a new outpatient appointment at a consultant or dentist-led clinic or for a return outpatient appointment where a procedure is expected to be carried out should be included. Mental Health and Obstetrics specialties are not included.
Date that data are acquired	Deadline for data submission is the 28th each month prior to the publication.
Release date	The last Tuesday of the month for each publication.
Frequency	Quarterly.
Timeframe of data and timeliness	Data from 1st January 2008 to date. There have been no delays in reporting.
Continuity of data	<p>From February 2010 publication ISD have implemented the 'Refresh Project', the key aim of which was to increase the usefulness of the New Ways Warehouse to NHS Boards, ISD and to the Scottish Government.</p> <p>Prior to 2008, waiting times data was derived using different rules that are not comparable with New Ways. Further information is available: Notice of change to National Statistics Waiting Times Statistics 2008 (New Ways)</p>
Revisions statement	Detailed information on revision to data and revisions policy is available.
Revisions relevant to this publication	<p>During September 2011, NHS Greater Glasgow & Clyde began a staged move to a new patient management system, beginning with the Inverclyde Royal Hospital. As a consequence, some figures reported for the quarter ending 30 September 2011 may have been adjusted since their first publication.</p> <p>NHS Lothian Cardiac patient journey: waiting times for Angiography (Table H2), Revascularisation (Table H3) and 'other cardiac treatment' (Table H5); ongoing waits for patients on waiting list – previously published figures for the number of patients on the list have been revised notably.</p> <p>NHS Lothian have revised figures on unavailability (Tables C1 and C2) at 30 September 2011. NHS Lothian report that this is due to some patients being inaccurately</p>

	<p>recorded as unavailable after the census date has passed and that the figure first published is a more accurate reflection of the real level of unavailability.</p>
Concepts and definitions	<p>Definitional Rules and Guidance is available: New Ways Rules & Guidance</p>
Relevance and key uses of the statistics	<p>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.</p> <p>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.</p>
Accuracy	<p>Detailed information on validation is available. The data is subject to a sign-off procedure each quarter before publication where the data for the previous quarter is confirmed by the submitting Board.</p> <p>ISD carry out detailed fitness for publication evaluation every quarter including comparisons to previous figures and expected trends. ISD also check outputs from two different analytical tools.</p> <p>ISD carried out a project in 2009 to quantify and understand the differences between New Ways and other ISD data sources (SMR00, SMR01 and ISD(S)1). For further information see heading 'Further information on New Ways'.</p> <p>ISD carried out an audit of New Ways data quality in 2008 and the details can be found here under the heading 'Data Quality Assessment Project'.</p>
Completeness	<p>ISD carried out a project in 2009 to quantify and understand the differences between New Ways and other ISD data sources (SMR00, SMR01 and ISD(S)1).</p> <p>Provisional analysis of refresh data showed that approximately 98% of data submitted to the Warehouse is published.</p> <p>For further information see heading 'Further information on New Ways'.</p>
Comparability	<p>ISD carried out a project in 2009 to quantify and understand the differences between New Ways and other ISD data sources (SMR00, SMR01 and ISD(S)1). For further information see heading 'Further information on New Ways'.</p>

	<p>Comparative waiting times information is not possible at present using these data due to 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.</p> <p>Collaborative efforts are also underway to produce comparisons to European waiting times.</p>
Accessibility	It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines .
Coherence and clarity	<p>Key statistics for the latest quarter are linked to on the main Waiting Times page of the publication. Statistics are presented within Excel spreadsheets. NHS Board and national figures are presented.</p> <p>Further features to aid clarity:</p> <ol style="list-style-type: none"> 1. Attendances and performance data by Patient Type are available in separate tables to enable users to select a single measure for analysis. 2. All tables are printer friendly. 3. All Scotland summary data are presented first, with the option to view spreadsheets down to Board level. 4. Key data presented graphically.
Value type and unit of measurement	Number of patients seen, number of patients waiting and percentage distribution of wait; by NHS Board and nationally and by patient type (i.e. inpatients/day cases, new outpatients and return outpatients).
Disclosure	The ISD protocol on Statistical Disclosure Protocol is followed.
Official Statistics designation	National Statistics.
UK Statistics Authority Assessment	Completed assessment by UK Statistics Authority. Report published July 2010.
Last published	28 November 2011
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Date of first publication	27 May 2008
Help email	nss.isdWAITINGTIMES@nhs.net
Date form completed	28 February 2012

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 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)

Early Access for Management Information

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:

Scottish Government Health Department (Analytical Services Division)
Scottish Government Health Department (Access Support Team)