Publication Summary

18 Weeks Referral To Treatment

Quarter ending 30 September 2012

Publication date – 27 November 2012

About this Release

This statistics release details the monthly summary of 18 Weeks Referral To Treatment statistics (includes data to 30 September 2012).

Key Points

- In September 2012, 90.8% of patient journeys for which an 18 Weeks Referral To Treatment (18 Weeks RTT) waiting time could be measured were reported as being within 18 weeks. The figures for July and August 2012 were 91.7% and 91.4%, respectively.
- In September 2012, a total of 108,525 patient journeys eligible under the 18 Weeks RTT target were identified. The waiting time could be measured for 99,327 of these patients (91.5%). It was not possible to calculate the waiting time fully for 9,198 patients. NHS Boards are in the process of fully implementing upgrades to their systems to improve the data collection.
- This target was due to be delivered from 31 December 2011. This target should be delivered for 90% of patients, allowing for example, the small proportion of cases where it is not clinically appropriate for the patient to be seen and treated within 18 weeks and also to take account of any exceptional increase in demand for secondary care services.

Background

Better Health Better Care which was published in December 2007 set out a commitment: "the 18 week Referral To Treatment (RTT) standard will address the whole patient care pathway, from receipt of a GP referral, up to the point at which each patient is actually admitted to hospital for treatment".

The 18 Weeks Referral to Treatment (18 Weeks RTT) target builds on previous waiting time targets, which set maximum waiting times for stages of treatment, for first outpatient consultation, diagnostic tests and for inpatient and day case treatment. 18 Weeks RTT focuses on the entire patient journey from the initial referral to the start of treatment,

including for the first time treatment undertaken in an outpatient setting, and promotes a holistic approach to providing clinically effective, safe and efficient care in a timely manner.

The responsibility for delivering the 18 Weeks RTT target lies with the NHS Board who receives the initial referral, as this Board will be responsible for agreeing with the patient and relevant clinicians the most appropriate pathway of care. In some cases patients may be initially referred to one NHS Board and then have an onward referral to another NHS Board for treatment. Due to the constraints in current hospital information systems in linking all stages of a patient's journey to measure their waiting time as mentioned above, these statistics are presented by NHS Board of Treatment, the NHS Board in which the patient's treatment was started. NHS Boards are in the process of fully implementing upgrades to their systems to improve the data collection

The Scottish Government has determined that the 18 Weeks RTT target should be delivered for at least 90% of patients. This target allows, for example, the relatively small proportion of cases where it is not clinically appropriate for the patient to be seen and treated within 18 weeks and also to take account of any exceptional increase in demand for secondary care services.

These statistics are Official Statistics (i.e., still to be assessed by the UK Statistics Authority).

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Further Information

Further information can be found in the Full Publication Report or on the ISD website

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