

Publication Report



Inpatient, Day case and Outpatient stage of treatment waiting times

Monthly & quarterly data to 31 March 2013

Publication date – 28 May 2013



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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 highlight where there are delays in the system and enables monitoring of the effectiveness of NHSScotland's performance. Information Services Division (ISD) Scotland continues to be committed to improving the information on waiting times along with our key stakeholders, the NHS Boards and Scottish Government.

There have been several changes in waiting time targets and standards over the last 20 years and this has affected how ISD measure and report. The most recent change to waiting times came with the [Patient Rights \(Scotland\) Act 2011](#) establishing a legal 12 weeks Treatment Time Guarantee (TTG) for eligible patients who are due to receive planned inpatient or day case treatment from 01 October 2012. Eligible patients must start to receive that treatment within 12 weeks (84 days) of the treatment being agreed. This target is based on completed waits. Further details on this and previous waiting time targets and standards can be found in the [background information](#), with more detailed information in the [History of Waiting Times and Waiting Lists](#).

Due to the above legislative changes, ISD and NHS Boards are in the process of enhancing IT systems and data extraction processes to ensure effective and equitable management and monitoring of the treatment time guarantee. NHS Board data extracts are currently being developed to meet the changes made to the national warehouse. In the interim, NHS Boards have provided an aggregated return for patients added to the inpatient and day case waiting list on or after 01 October 2012. All other information is taken from the ISD waiting times warehouse.

Within this publication, there are 4 main sections:

- [\(1\) Inpatients and Day cases from 01 October 2012 including Treatment Time Guarantee](#) – the majority of these patents are covered by the TTG. The exceptions to this are set out in the [Regulations](#). Further details on the TTG can be found in the [background information](#).
- [\(2\) Inpatients and Day cases prior to 01 October 2012](#) – this is patients added to the waiting list prior to 01 October 2012 who are covered by the waiting time standards under 'New Ways'. NHS Boards are working to treat them as soon as it is reasonable and clinically appropriate to do so. *Caution should be taken with this cohort as the numbers are decreasing rapidly as patients are treated and therefore removed from the list.* Further details on 'New Ways' can be found in the [background information](#).
- [\(3\) New Outpatients](#) – this is patients added to the waiting list for their first appointment who are covered by the waiting time standards under 'New Ways'. ISD currently do not collect information nationally on return outpatients. Further details on 'New Ways' can be found in the [background information](#).

- [\(4\) “Whole Journey” Waiting Times for Cardiac and Cataract](#) – this is a group of patients who were being monitored over the whole period of their journey from referral to treatment. From 01 October 2012, inpatients and day cases are covered by the Treatment Time Guarantee and will be included in section (1). *Caution should be taken with this cohort as the numbers are decreasing rapidly as patients are treated and therefore removed from the list.* Meanwhile, cataract assessments take place in an outpatient setting and in the future will be included in section (3).

Data published in previous quarters may be updated in this publication to reflect ongoing work by NHS Boards to improve data quality. Further information is discussed on the [data quality](#) page.

Key points

General Points:

- This publication includes statistics on NHS Board compliance with the Treatment Time Guarantee legislation for inpatients and day cases. These data are based on aggregate returns supplied by NHS Boards. Therefore this is an interim publication until developments in local systems can supply patient level detail.
- ISD strongly recommend that users read the supporting information and accompanying footnotes for each chart and table.

(1) Inpatients and Day cases from 01 October 2012 including Treatment Time Guarantee:

- During the quarter ending 31 March 2013, 98.7% of inpatients and day cases were seen within the Treatment Time Guarantee of 12 weeks [[Table 1](#)].
- As at 31 March 2013, 52,772 patients were on the inpatient and day case waiting list, of which 9,046 were recorded as unavailable [[Table 2](#)].

(2) Inpatients and Day cases prior to 01 October 2012):

- The cohort of inpatient or day case admissions added to the waiting list prior to 01 October 2012 is decreasing rapidly as patients are treated.
- As at 31 March 2013, 1,517 patients remained on the inpatient and day case waiting list, of which 763 were recorded as unavailable [[Chart 2](#)] and [[Chart 3](#)].

(3) New Outpatients:

- At 31 March 2013, 97.5% of new outpatients (all sources of referral) had been waiting 12 weeks or less for an appointment. This compares to a figure of 97.3% at 31 December 2012. This statistic is used by NHS Boards from 31 March 2010 to measure performance against Scottish Government waiting time standards for new outpatients. [[Table 5](#)].
- During quarter ending 31 March 2013, 93.9% of new outpatients seen (all sources of referral) had waited less than 12 weeks. This compares to a figure of 94.8% at 31 December 2012 [[Table 6](#)].

(4) 'Whole Patient Journey' – Cardiac and Cataract:

- This cohort of patients includes those added to inpatient or day case waiting list prior to 01 October 2012 and as a result are decreasing rapidly as these patients are treated [[Table 7](#), [Table 9](#) and [Table 10](#)].
- Of the 3,570 patients waiting for cataract assessment as at 31 March 2013, 91.4% were waiting equal to or less than the local target [[Table 8](#)].

Results and Commentary

(1) Inpatients and Day cases from 01 October 2012 including Treatment Time Guarantee

This section covers all patients added to inpatient and day case admission waiting lists from 01 October 2012. The vast majority of these patients are covered by the Treatment Time Guarantee. Exceptions to this are diagnostic inpatient and day cases and the exemptions set out in the [Regulations](#), which are:

- assisted reproduction;
- obstetrics services;
- organ, tissue or cell transplantation whether from living or deceased donor;
- designated national specialist services for surgical intervention of spinal scoliosis;
- the treatment of injuries, deformities or disease of the spine by an injection or surgical intervention.

The latter exception around spinal treatment is intended to be a temporary exclusion. This means NHS Boards should now be working to ensure that there is the necessary capacity to deliver the Treatment Time Guarantee for patients who require such planned inpatient and day case spinal treatment.

Inpatient or Day Case admission

[Table 1](#) and [Table 2](#) show patients seen and patients waiting for inpatient or day case admission respectively. During the quarter ending 31 March 2013, 1,232 of 93,325 patients seen waited beyond the treatment time guarantee of 12 weeks (84 days). As the legislation came into force on 01 October 2012, it should be noted that for the first quarter no patients could breach the guarantee until 24 December 2012 when the 12 weeks had passed.

Table 1 – Completed waits for patients seen (added to waiting list from 01 October 2012): Inpatient or Day case admission, Scotland

Month ending	Total seen ^{1,3}	Number over 12 weeks ²
31-Mar-13	30 838	565
28-Feb-13	31 037	434
31-Jan-13	31 450	233
31-Dec-12	25 510	6
30-Nov-12	23 587	n/a
31-Oct-12	9 269	n/a

Notes:

1. The figure for October is low as the majority of patients in this month would have been added to the list prior to 1st October 2012 and therefore are not under the Treatment Time Guarantee.

2. TTG of 84 days could only be breached from 24 December 2012.

3. The above figures include (for NHS Dumfries & Galloway, NHS Grampian, NHS Greater Glasgow & Clyde, NHS Orkney, NHS Shetland and NHS Tayside) inpatient and day case patients who are attending a diagnostic test before a decision is made to treat. For more information, see the [background information](#).

Table 2 - Ongoing waits for patients on Waiting List (added to waiting list from 01 October 2012): Inpatient or Day case admission, Scotland

Month ending	Number waiting		Number unavailable		
	Total ¹	Over 12 Weeks ²	Total ^{1,3}	Medical	Patient Advised
31-Mar-13	52 722	645	9 046	2 102	6 885
28-Feb-13	52 816	722	8 349	2 143	6 169
31-Jan-13	52 643	507	8 787	2 249	6 476
31-Dec-12	48 289	78	8 168	2 110	6 058
30-Nov-12	43 626	n/a	4 923	1 635	3 288
31-Oct-12	28 538	n/a	1 945	735	1 210

Notes:

1. NHS Dumfries & Galloway, NHS Grampian, NHS Greater Glasgow & Clyde, NHS Orkney, NHS Shetland and NHS Tayside have included inpatient and day case diagnostic patients within the above figures. These patients require a diagnostic test before a decision can be made to treat. In most cases the treatment will take place on the same day. At the point the decision is made to treat, these patients are covered by the treatment time guarantee (excluding the exceptions outlined in the [Regulations](#)).

2. TTG of 84 days could only be breached from 24 December 2012.

3. The total number unavailable includes NHS Greater Glasgow & Clyde patients waiting for a diagnostic test before a decision is made to treat; who have had a period of Patient Focused Booking (PFB) unavailability applied. NHS Greater Glasgow and Clyde report 62, 37 and 59 patients with PFB unavailability for months ending Jan, Feb and March 2013 respectively. These patients are not covered by TTG.

Further information is available which details comparable NHS Board information for [Tables 1-2](#).

NHS Boards are making changes to their system extracts in order to provide patient level data to ISD; whilst ISD have developed the waiting times warehouse to capture this additional data. Once NHS Board systems are able to extract data for national purposes, the publication will be expanded to provide more detail similar to previous publications while taking into account the [Consultation on Stage of Treatment Statistics](#). In the meantime, a further breakdown of information to NHS Board level is available in the [Inpatient and Day case waiting list table](#) on the ISD website.

Prior to the 01 October 2012, the specialties of Mental Health, Obstetrics and Homeopathy were excluded from the inpatient, day case and outpatient waiting time standards. Mental Health and Homeopathy inpatients and day cases are now included under TTG and NHS Boards are working on providing this information, which is currently collected on different IT systems that are not yet able to supply waiting times information centrally. All NHS Boards have given the Scottish Government assurances that mental health patients are being treated within the TTG. Please see [data quality](#) section for further details.

While local systems are being developed to capture additional detail and provide updated data extracts to ISD not all NHS Boards have been able to provide a breakdown of the sub types of unavailability beyond the high level groupings above.

(2) Inpatients and Day cases prior to 01 October 2012

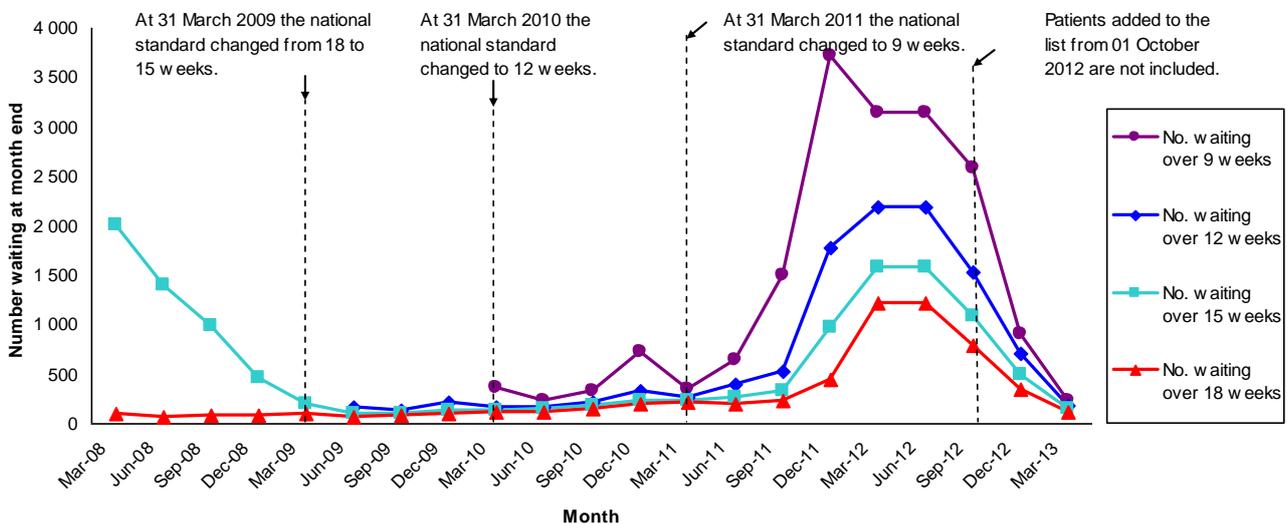
Inpatients and Day cases – patients waiting at month end

Key points:

- The cohort of inpatient or day case admissions added to the waiting list prior to 01 October 2012 is decreasing rapidly as patients are treated.
- 1,212 patients added to list prior to 01 October 2012 were waiting for an inpatient or day case treatment at 31 March 2013. Whilst, at 31 December 2012, 5,490 patients were waiting [Table 3].
- The total number on waiting lists for inpatient and day case treatment at 31 March 2013 for patients added to list prior to 01 October 2012 was 1,517. Of which, 763 were recorded as unavailable for an admission (61.1% due to patient advised unavailability) [Chart 2 and Chart 3].

Chart 1 and Table 3 demonstrate how the national waiting time 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 1: Ongoing waits for patients on waiting list: Inpatient or Day case admission, NHS Scotland (added to waiting list prior to 01 October 2012)



Notes:

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 patient advised reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero.
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 prior to 01 October 2012. 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. This only includes patients added to the inpatient and day case waiting list prior to 01 October 2012.

Table 3 - Ongoing waits for patients on Waiting List: Inpatient or Day case admission, Scotland (added to waiting list prior to 01 October 2012)

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-Mar-13	1 212	225	175	144	123
28-Feb-13	1 870	327	240	205	190
31-Jan-13	3 071	557	396	340	351
31-Dec-12	5 490	911	711	501	351

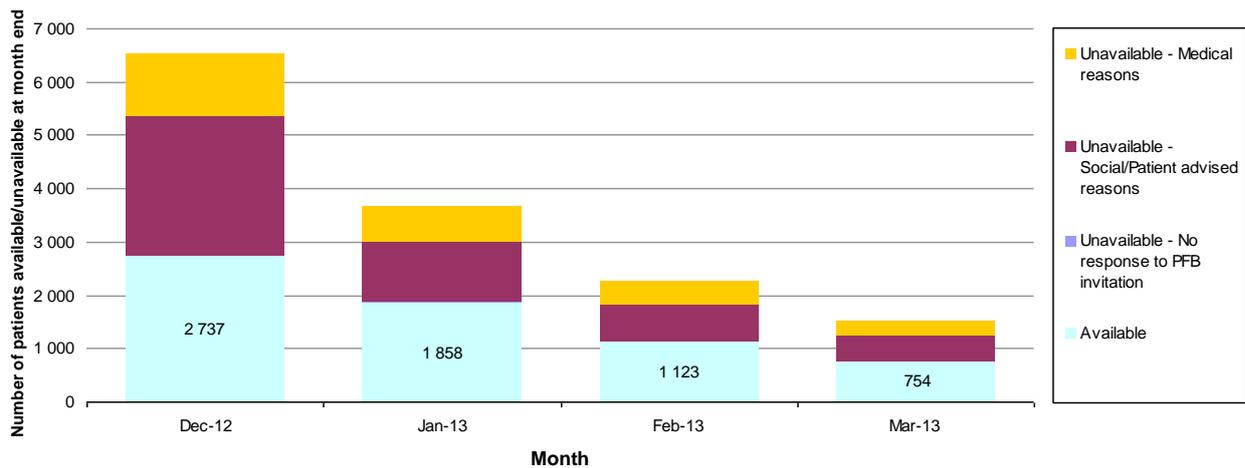
Notes:

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.
3. Cataract and cardiac patients have been excluded from the key tables in this publication as the new inpatient and day case waiting time targets do not apply prior to 01 October 2012. 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. This only includes patients added to the inpatient and day case waiting list prior to 01 October 2012.

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

[Chart 2](#) shows the number of patients on the waiting list by available or unavailable at month-end census dates. [Chart 3](#) focuses on the unavailable patients. Caution should be taken when comparing across NHS Boards as reduction in the pre 01 October 2012 cohort varies across Scotland. NHS Scotland data for census date 31 March 2008 onwards and comparable information by NHS Board of treatment is given in [Table C2](#).

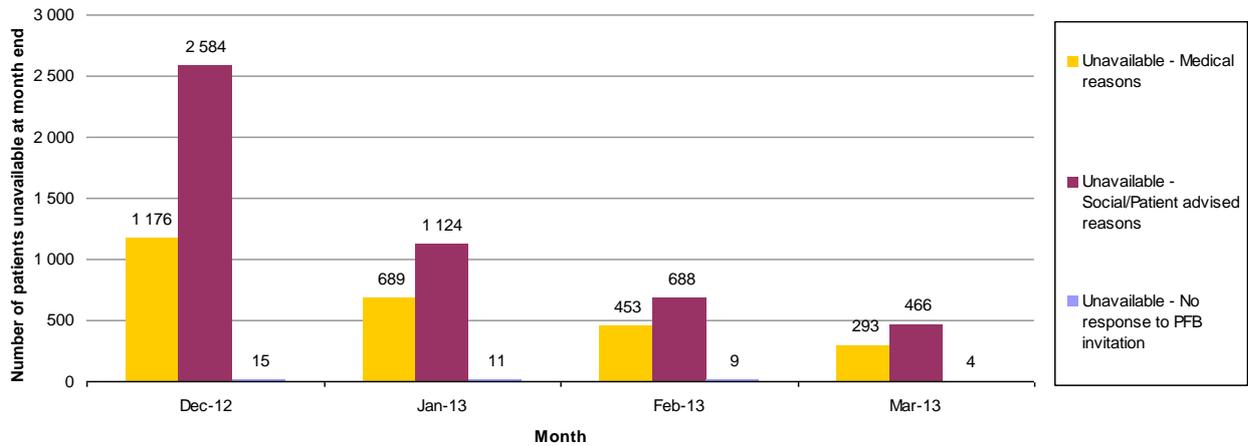
Chart 2: Availability of patients on Waiting List – Inpatient or Day case admission, NHS Scotland (added to waiting list prior to 01 October 2012)



Notes:

1. This analysis excludes patients referred to mental health and obstetrics specialties.
2. Patient Focused Booking (PFB) is 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 Patient Advised or Medical Unavailability are deducted from the calculation of wait.
4. This only includes patients added to the inpatient and day case waiting list prior to 01 October 2012.

Chart 3: Unavailability of patients on Waiting List – Inpatient or Day case admission, NHS Scotland (added to waiting list prior to 01 October 2012)



Notes:

1. This analysis excludes patients referred to mental health and obstetrics specialties.
2. Patient Focused Booking (PFB) is 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 Patient Advised or Medical Unavailability are deducted from the calculation of wait.
4. This only includes patients added to the inpatient and day case waiting list prior to 01 October 2012.

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 Patient Advised Unavailability. If a patient is medically unable to undergo a procedure i.e. they have another medical issue such as raised blood pressure that makes treatment inadvisable then this is recorded as Medical Unavailability.

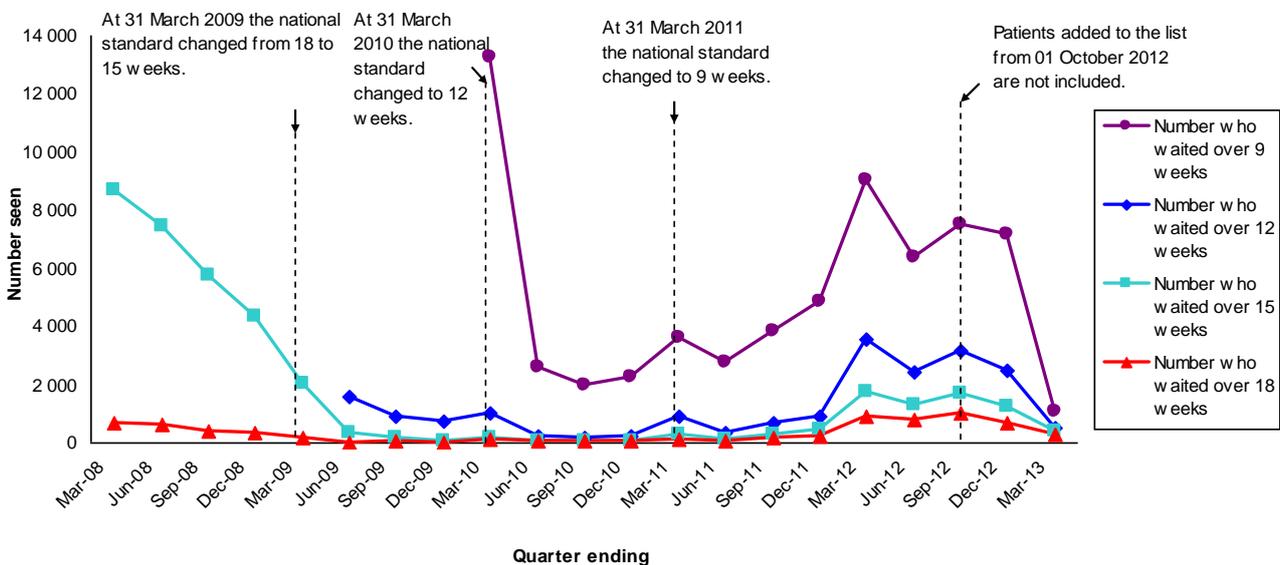
Inpatients and Day cases – patients seen during the quarter

Key points:

- The latest available information shows that 3,171 patients added to list prior to 01 October 2012 were seen during quarter ending 31 March 2013 [Table 4].

Chart 4 and Table 4 demonstrate how performance against the [national waiting time 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 4: Completed waits for patients seen: Inpatient or Day case admissions, NHS Scotland (added to waiting list prior to 01 October 2012)



Notes:

- This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
- Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for medical or patient advised reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero.
- Cataract and cardiac patients have been excluded from the key tables in this publication as the inpatient and day case waiting time targets do not apply prior to 01 October 2012. These patients have a Whole Journey waiting time standard of 18 weeks which is reported separately in the [Whole Journey section](#) of this publication.

Table 4 - Completed waits for patients seen: Inpatients or Day case admission, Scotland (added to waiting list prior to 01 October 2012)

Month /Quarter 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-Mar-13	441	173	71	52	43	59	122
28-Feb-13	869	309	148	101	82	58	120
31-Jan-13	1 861	588	304	226	155	59	119
31-Dec-12	40 920	7 172	2 502	1 247	692	46	75

Notes:

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 patient advised reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero.
3. Cataract and cardiac patients have been excluded from the key tables in this publication as the inpatient and day case waiting time targets do not apply prior to 01 October 2012. 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](#).

Inpatients and Day cases – waiting list activity

This section looks at the reasons patients are removed from the list and reasons for non-attendance.

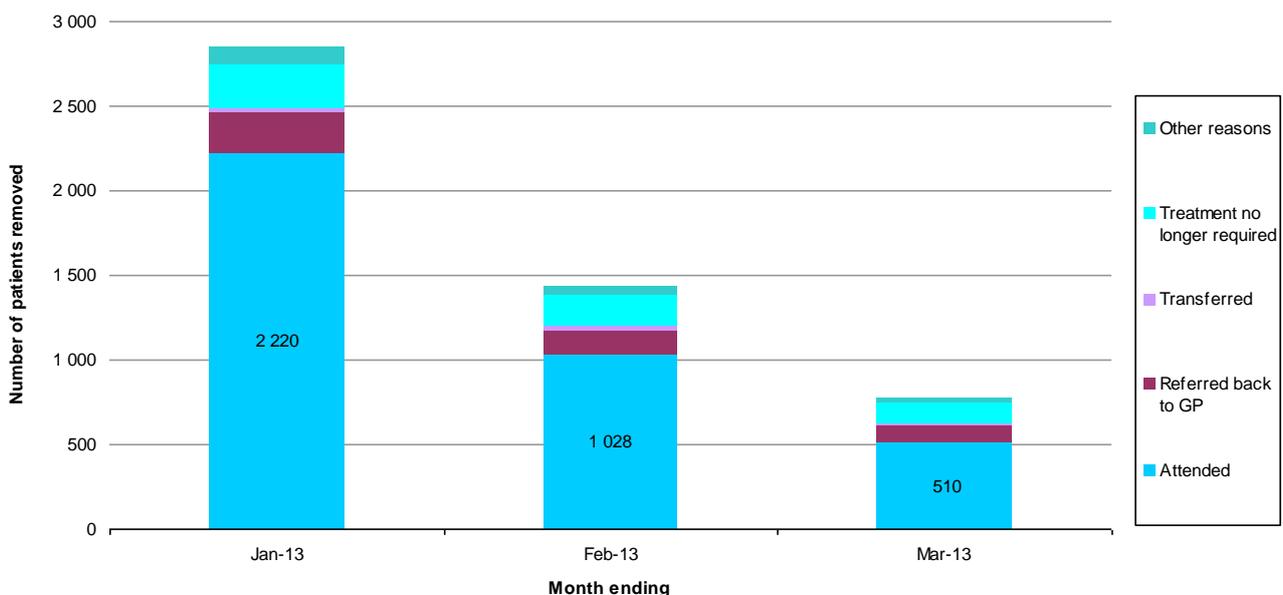
Key points:

- Based on patients added to waiting list prior to 01 October 2012 for an inpatient or day case admission, around 5,000 were removed during quarter ending 31 March 2013. Of these, 74.4% were removed because they were admitted as planned; 11.5% were removed because they no longer required treatment; 9.6% were removed because they were referred back to their GP; 1.2% were transferred; and 3.4% were removed for other reasons [Chart 5 and Chart 6].
- Approximately 5,500 offers of admission for inpatient or day cases were accepted during the quarter ending 31 March 2013. The 'Did Not Attend' (DNA) rate was 3.2%; 'Could Not Attend' (CNA) rate was 15.1%; 'Cancellation by Service' rate was 9.6% [Chart 7].

NHS Scotland data on removal from list reasons, and non-attendance reasons for quarter ending 31 March 2008 onwards and comparable information by NHS Board of treatment is given in Table D2a and Table D2b respectively.

Chart 5 shows the number of patients removed from the waiting list by the reason for removal during monthly periods for the latest quarter. Chart 6 focuses on those patients who were removed for reasons other than *attended*.

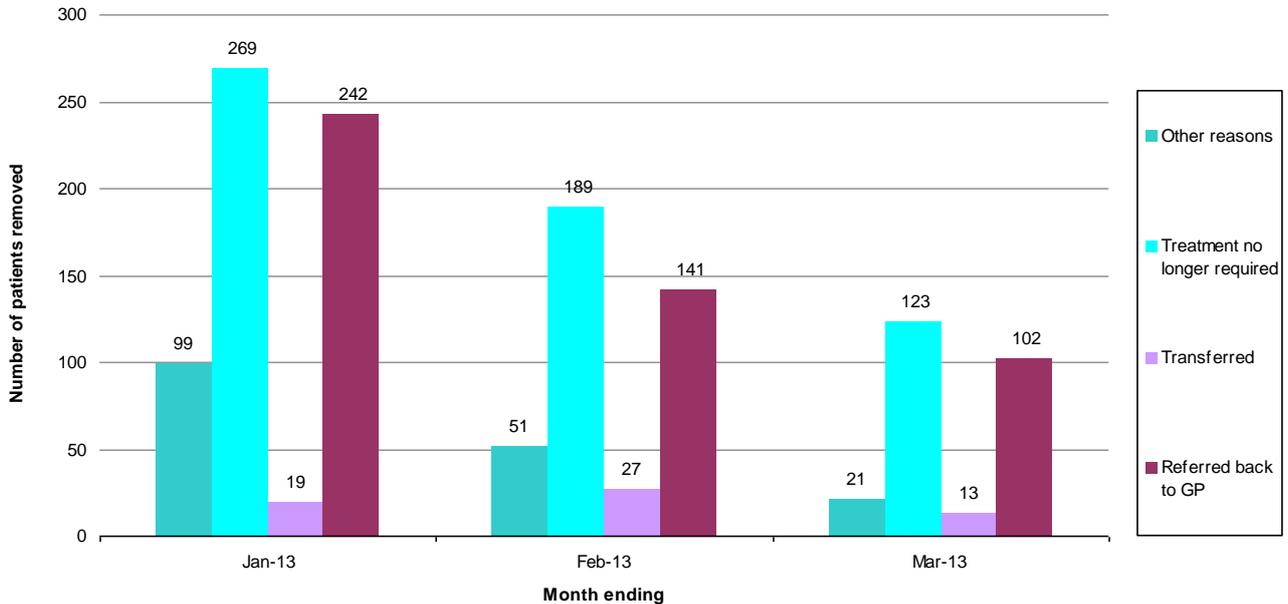
Chart 5: Reason for removal from Waiting List, Inpatient or Day case admission, NHS Scotland (added to waiting list prior to 01 October 2012)



Notes:

- This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
- Only includes patients that were added to the waiting list prior to 01 October 2012. As these patients are seen this cohort will reduce to zero.

Chart 6: Reason for removal from Waiting List (excluding Attended), Inpatient or Day case admission, NHS Scotland (added to waiting list prior to 01 October 2012)

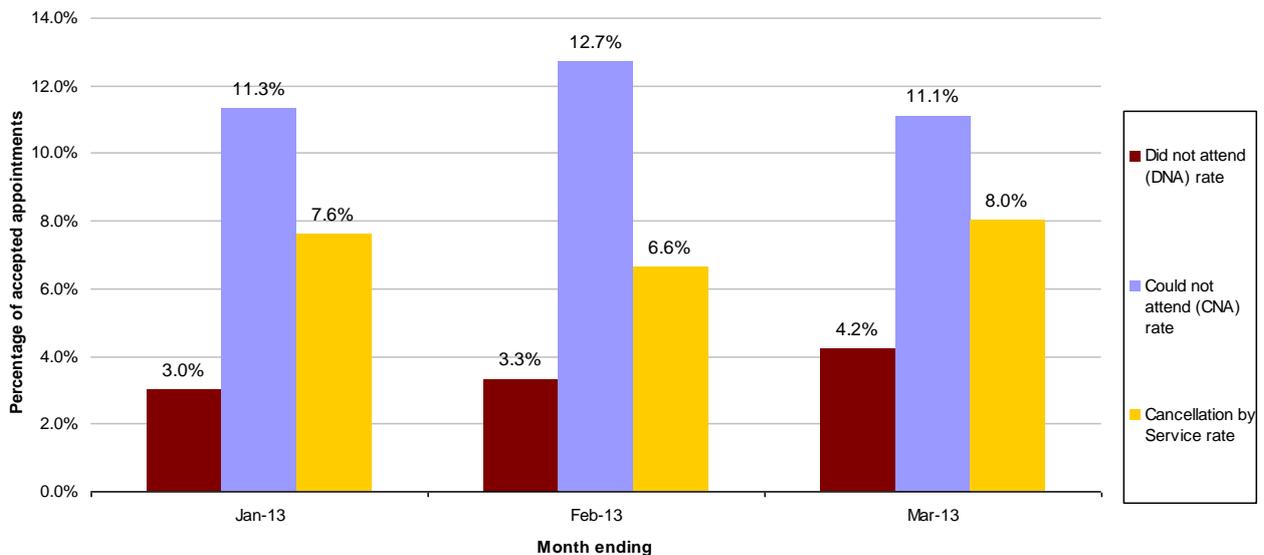


Notes:

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
2. Only includes patients that were added to the waiting list prior to 01 October 2012. As these patients are seen this cohort will reduce to zero.

Chart 7 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 monthly periods for the latest quarter.

Chart 7: Non attendance rates, Inpatient or Day case admission, NHS Scotland (added to waiting list prior to 01 October 2012)



Notes:

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

(3) New Outpatients

This section covers all new outpatients. These statistics are derived from the current data extraction process under 'New Ways' rules and are subject to revision by some NHS Boards. It is a summary of waiting times information on patients covered by the [national waiting time standard](#) set by the Scottish Government; Scottish residents waiting for a new NHS appointment at a consultant/dentist-led outpatient clinic following referral. Information is provided from the ISD waiting times warehouse.

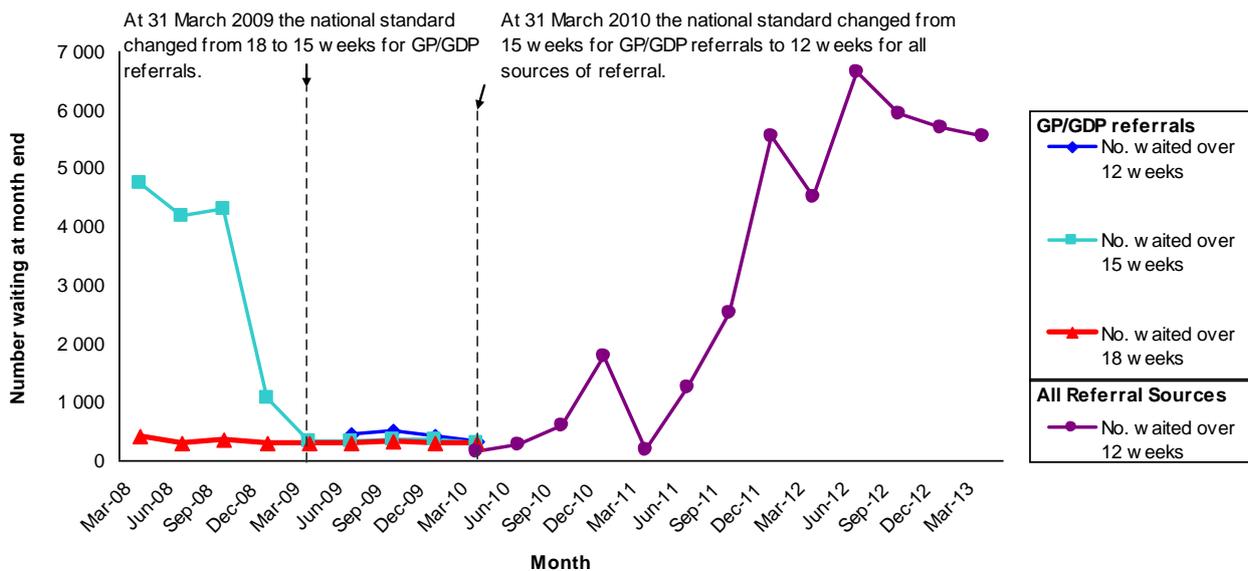
New Outpatients – patients waiting at month end

Key points:

- From 31 March 2010, the national waiting time standard states that patients should wait no longer than 12 weeks for a new outpatient appointment for all referral sources.
- As at 31 March 2013 97.5% of patients covered by the waiting time standard (approximately 5,500 out of a total of 220,000) had been waiting 12 weeks or less. This compares to a figure of 97.3% at 31 December 2012 [[Table 5](#)].
- As at 31 March 2013, the total number on waiting lists for a new outpatient appointment was around 224,500. Of which, around 8,500 were recorded as unavailable for an appointment (70.9% due to patient advised unavailability) [[Chart 9](#) and [Chart 10](#)].

Chart 8 and [Table 5](#) demonstrate how the national standard for outpatients has changed since the introduction of New Ways and shows 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 time standards.

Chart 8: Ongoing waits for patients on waiting list, New Outpatient appointment, NHS Scotland



Notes:

1. This 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.
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 to patients added to the list prior to 01 October 2012. These patients have a Whole Journey waiting time standard of 18 weeks which is reported separately in the Whole Journey section of this publication.

Table 5 - 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-Mar-13	219 477	5 557
28-Feb-13	207 863	6 425
31-Jan-13	203 812	6 262
31-Dec-12	207 981	5 697
30-Mar-12	201 919	5 550
31-Mar-11	196 537	1 789

Notes:

1. This 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.
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 to patients added to the list prior to 01 October 2012. 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](#). 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 9 presents the proportion of patients on the waiting list by available or unavailable at month-end census dates. [Chart 10](#) focuses on the percentage split of unavailable patients by reason. NHS Scotland data for census date 31 March 2010 onwards and comparable information by NHS Board of treatment is given in [Table C1](#).

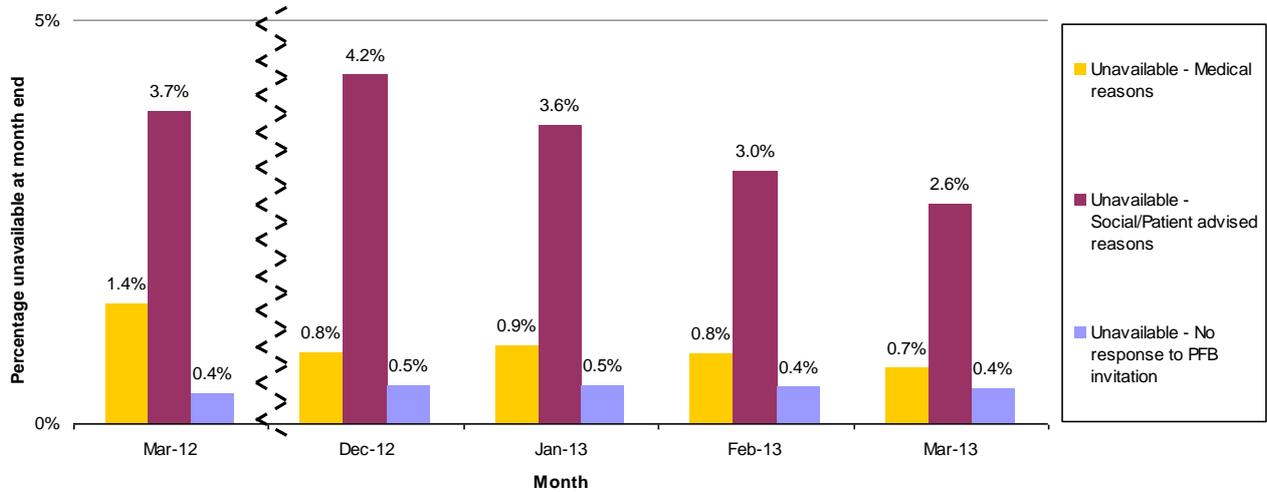
Chart 9: Availability of patients on Waiting List - New Outpatient appointment, NHS Scotland



Notes:

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
2. Patient Focused Booking (PFB) is 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 patient advised or medical unavailability are deducted from the calculation of wait.

Chart 10: Unavailability of patients on Waiting List - New Outpatient appointment, NHS Scotland



Notes:

1. This analysis excludes patients referred to mental health, obstetrics and homeopathy specialties.
2. Patient Focused Booking (PFB) is 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 patient advised or medical unavailability are deducted from the calculation of wait.

Under 'New Ways' guidelines, 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 was recorded as Social Unavailability (now known as Patient Advised Unavailability). If a patient is medically unable to undergo a procedure i.e. they have another medical issue such as raised blood pressure that makes treatment inadvisable then this is recorded as Medical Unavailability.

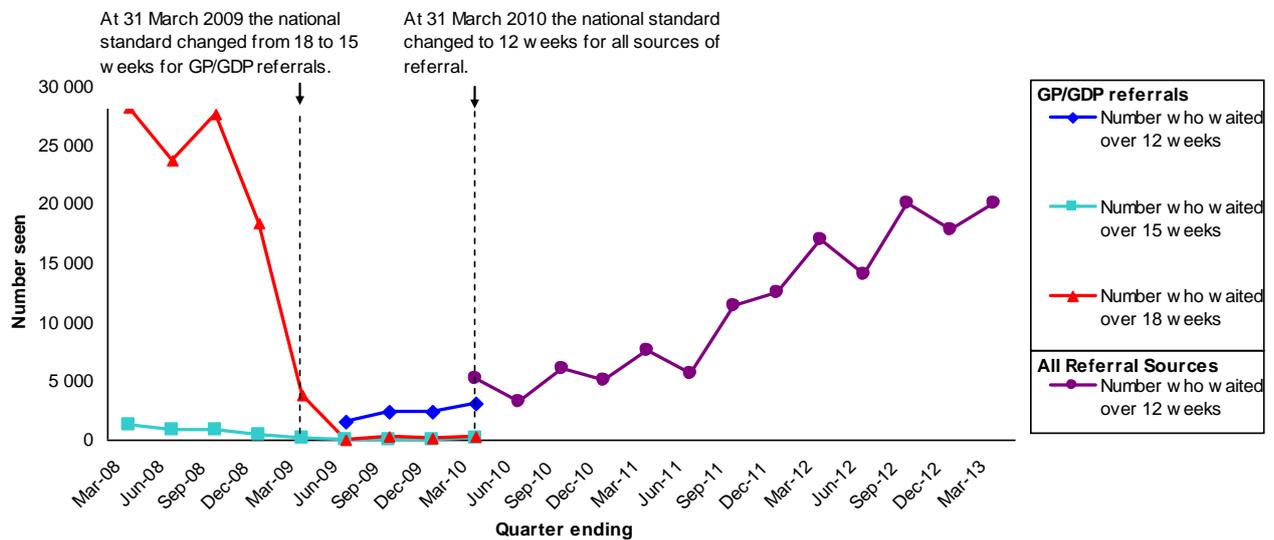
New Outpatients – patients seen during the quarter

Key points:

- During the quarter ending 31 March 2013, 93.9% of patients seen (around 20,000 from a total of 331,000 referred from all sources) waited 12 weeks or less. This compares to the quarter end 30 December 2012 figure of 94.8% [Table 6].

Chart 11 and Table 6 demonstrates 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.

Chart 11: Completed waits for patients seen, New Outpatient appointment, NHS Scotland



Notes:

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 patient advised reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero.
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 to patients added to the list prior to 01 October 2012. These patients have a Whole Journey waiting time standard of 18 weeks which is reported separately in the Whole Journey section of this publication.

**Table 6 - Completed waits for patients seen: New Outpatient appointment, Scotland.
All referral sources (referrals received on or after 1 April 2009)**

Month/Quarter ending	Total seen	Number who waited over 12 weeks
31-Mar-13	106 760	5 403
28-Feb-13	109 501	7 190
31-Jan-13	114 824	7 479
31-Dec-12	343 898	17 796
31-Mar-12	343 411	16 920
31-Mar-11	323 219	7 589

Notes:

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 patient advised reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero.
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 to patients added to the list prior to 01 October 2012. These patients have a Whole Journey waiting time standard of 18 weeks which is reported separately in the Whole Journey section of this publication.

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. 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](#).

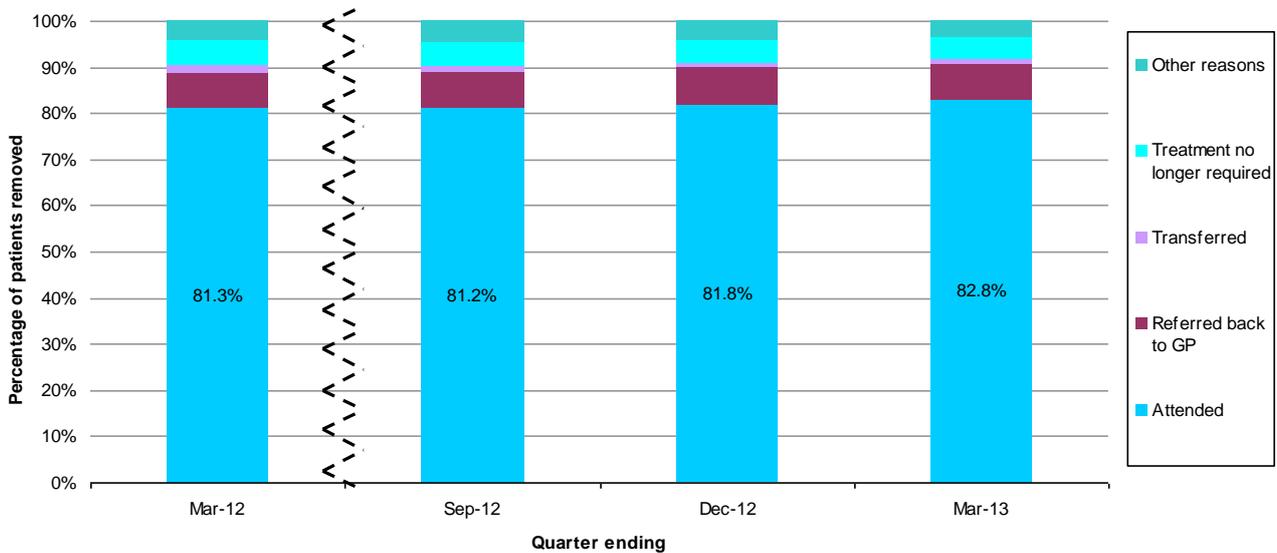
New Outpatients – waiting list activity

Key points:

- Around 407,000 patients (referred by any source) were removed from the waiting list during quarter ending 31 March 2013. Of these, 82.8% of patients were removed because they had attended an appointment; 7.9% were removed because they were referred back to their General Practitioner (GP); 4.8% were removed because they no longer required treatment; 1.1% were transferred; and 3.4% were removed for other reasons [Chart 12 and [Chart 13](#)].
- For quarter ending 31 March 2013, there had been around 434,000 new outpatient appointments booked. The 'Did Not Attend' (DNA) rate was 9.1%, 'Could Not Attend' (CNA) rate was 7.5% and the '[Cancellation by Service](#)' rate was 4.4% [[Chart 14](#)].

The majority of patients are removed from the list because they attended a new outpatient 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. Chart 12 shows the proportion of patients removed from the waiting list by the reason for removal during quarterly periods.

Chart 12: Reason for removal from Waiting List, New Outpatient appointment, NHS Scotland

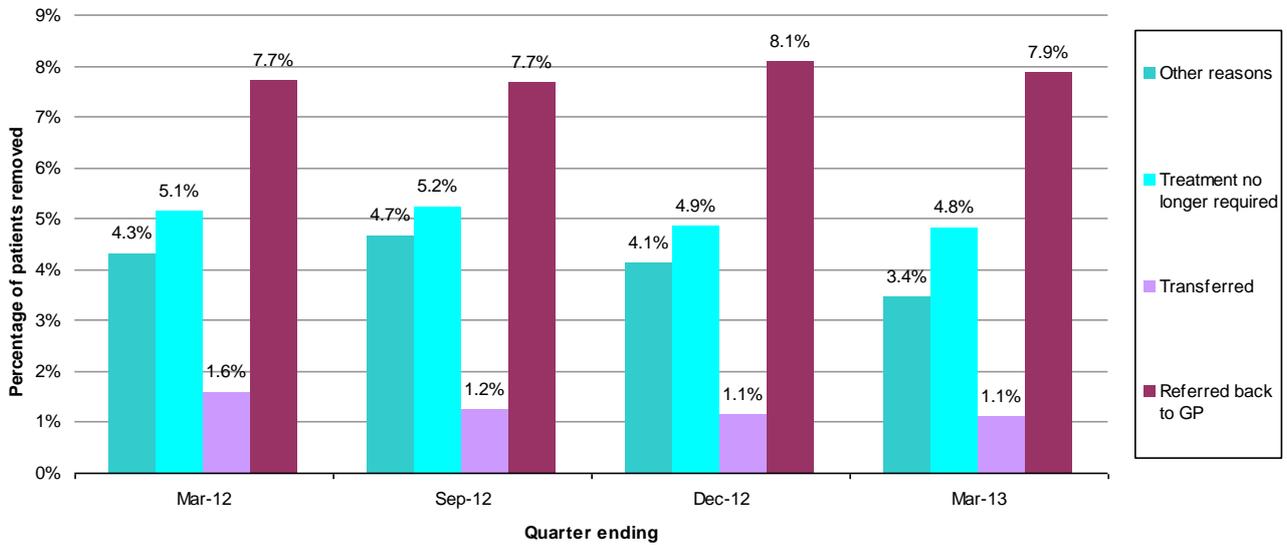


Notes:

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

[Chart 13](#) focuses on those patients who were removed for reasons other than *attended*.

Chart 13: Reason for removal from Waiting List (excluding Attended), New Outpatient appointment, NHS Scotland



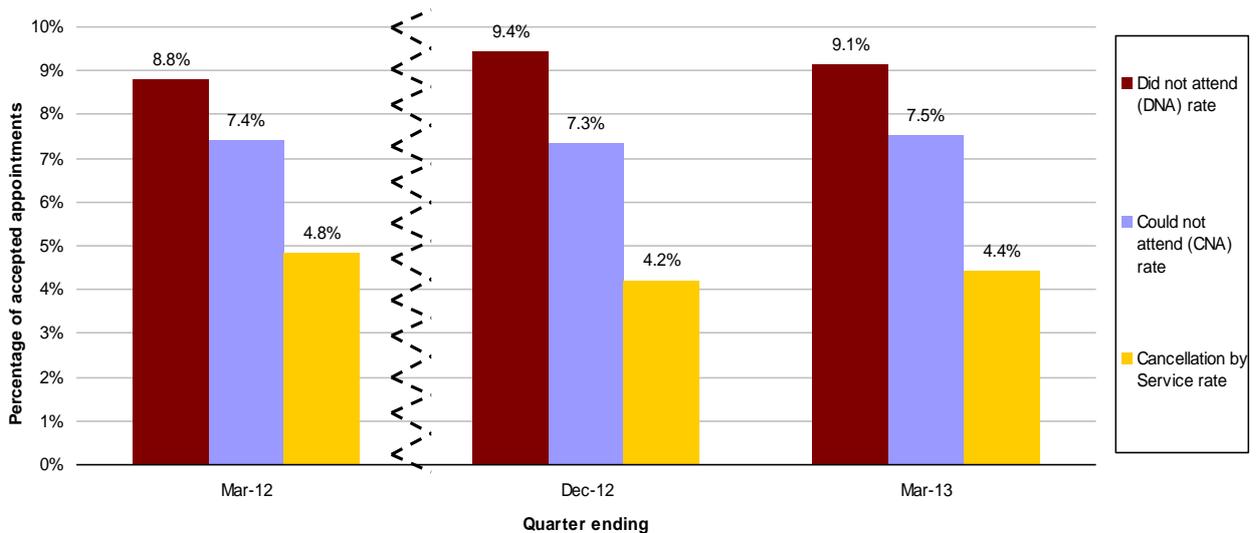
Notes:

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 14 presents 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.

Chart 14: Non attendance rates, New Outpatient appointment, NHS Scotland



Notes:

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](#).

(4) “Whole Journey” Waiting Times for Cardiac and Cataract

This group of patients are not covered by the National Waiting Time Standards.

Key points (as at 31 March 2013):

[Cardiac](#) (only included patients added to the list prior to 01 October 2012):

- Of 2 patients waiting for angiography, 100% were waiting equal to or less than the local target [\[Table 7\]](#).
- Of 8 patients waiting for revascularisation, 87.5% were waiting for 9 weeks or less [\[Table 7\]](#).
- Of 5 patients waiting for valve surgery, 100% were waiting for 9 weeks or less [\[Table 7\]](#)
- Of 27 patients waiting for other cardiac surgery, 100% were waiting for 16 weeks or less [\[Table 7\]](#).
- Statistics on patients seen at a Rapid Access Chest Pain Clinic will not be published at this time, as they require some further work in order to improve their reliability.

[Cataract](#) (includes all outpatients for assessment and inpatient or day case additions prior to 01 October 2012):

- Of 3,570 patients waiting for cataract assessment, 91.4% were waiting equal to or less than the local target [\[Table 8\]](#).
- Of 125 patients waiting for cataract surgery, 20% were waiting equal to or less than the local target [\[Table 9\]](#).
- Of 83 patients waiting for cataract surgery for a second eye or at a one-stop cataract clinic, 66.3% were waiting equal to or less than the 18 week target [\[Table 10\]](#).

Please note: Cataract and Cardiac activity for treatment will no longer be published separately once pre 01 October 2012 patients have been treated. In future these will be included in the TTG tables.

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.

Patients seen at a RACPC are not published at this time as they require some work to improve their reliability. [Table 7](#) is based on data under development and the quality and accuracy are being monitored by ISD.

Table 7 – Cardiac patient journey: ongoing waits for patients on waiting list, Scotland (added to waiting list prior to 01 October 2012)

Journey component	Indicator	Census date					
		31-Mar-11	31-Mar-12	31-Dec-12	31-Jan-13	28-Feb-13	31-Mar-13
Angiography (H2)	Number on list	425	421	9	7	5	2
	Number waiting over local target	1	1	0	0	0	0
Revascularisation (H3)	Number on list	417	674	30	22	12	8
	Number waiting over 10 weeks	0	0	4	3	2	1
	Number waiting over 9 weeks	1	0	4	3	2	1
Valve surgery (H4)	Number on list	153	158	29	17	8	5
	Number waiting over 10 weeks	0	0	0	0	0	0
	Number waiting over 9 weeks	0	0	0	0	0	0
Other cardiac treatment (H5)	Number on list	667	784	126	73	37	27
	Number waiting over 16 weeks	0	0	0	0	0	0

Notes:

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

NHS Scotland data for Census date 31 March 2008 onwards and comparable information by NHS Board of treatment is presented in [Table H2-H5](#). The patient waits reported in these tables are excluded from [Table A1a](#), [Table A1b](#), [Table A2a](#), [Table A2b](#), [Table J1](#) and [Table J2](#) which refer to patients covered only by the national waiting time 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 8) and treatment ([Table 9](#)) pathways combined does not exceed 18 weeks. The planned journey time for each pathway varies a little across the NHS Boards. This is expected due to differing local service configurations such as outpatient clinic types and day case facilities.

Table 8 – Cataract patient journey: waiting time for outpatient assessment: ongoing waits for patients on waiting list, Scotland

Indicator	Census date					
	31-Mar-11	31-Mar-12	31-Dec-12	31-Jan-13	28-Feb-13	31-Mar-13
Number on list	2 906	3 047	3 083	3 086	3 324	3 570
Of which: Number waiting over local target	58	151	344	398	331	308

Notes:

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

Table 9 – Cataract patient journey: waiting time for surgery (First eye cataracts): ongoing waits for patients on waiting list, Scotland (added to waiting list prior to 01 October 2012)

Indicator	Census date					
	31-Mar-11	31-Mar-12	31-Dec-12	31-Jan-13	28-Feb-13	31-Mar-13
Number on list	..	3 864	380	226	151	125
Of which: Number waiting over local target	..	178	139	123	105	100

Notes:

.. = not available

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

Table 10 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 10 – Cataract patient journey: waiting time for surgery (Second eye cataracts and one stop clinics): ongoing waits for patients on waiting list, Scotland (added to waiting list prior to 01 October 2012)

Indicator	Census date					
	31-Mar-11	31-Mar-12	31-Dec-12	31-Jan-13	28-Feb-13	31-Mar-13
Number on list	..	1 916	283	148	98	83
Of which: Number waiting over 18 weeks	..	93	34	33	28	28

Notes:

.. = not available

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

NHS Scotland data for Census date 31 December 2008 (Table 11), 31 March 09 (Table 10) and 31 December 2009 (Table 12) 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 J1](#) and [Table J2](#) which refer to patients covered only by the national waiting time 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
PFB	Patient Focused Booking
RACPC	Rapid Access Chest Pain Clinic
TTG	Treatment Time Guarantee
RTT	Referral To Treatment

List of Tables

Table Reference	Name	Time period	File & size
Table 1-2	Patients added to Inpatient or Day case admission waiting lists from 01 October 2012	Month ending 31-Oct-12 – 31-Mar-13	Excel [209kb]
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-Mar-13 for all referral sources	Excel [288kb]
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-Mar-13 for all referral sources	Excel [209kb]
A2a	Waiting Times for Inpatient or Day case admission: NHS Scotland, Completed waits for patients seen	Quarter ending 31-Mar-08 – 31-Mar-13	Excel [245kb]
A2b	Waiting Times for Inpatient or Day case admission: NHS Scotland, Ongoing waits for patients on waiting list	Month ending 31-Mar-08 – 31-Mar-13	Excel [202kb]
C1	Availability of patients on the Waiting List for a New Outpatient appointment: NHS Scotland	Month ending 31-Mar-10 – 31-Mar-13 for all referral sources	Excel [276kb]
C2	Availability of patients on the Waiting List for Inpatient or Day case admission: NHS Scotland	Month ending 31-Mar-08 – 31-Mar-13	Excel [247kb]
D1a	Reason for removal for a New Outpatient appointment: NHS Scotland	Quarter ending 31-Mar-10 – 31-Mar-13 for all referral sources	Excel [348kb]
D1b	Non attendance rates for a New Outpatient appointment: NHS Scotland	Quarter ending 31-Mar-10 – 31-Mar-13 for all referral sources	Excel [243kb]
D2a	Reason for removal for Inpatient or Day case admission: NHS Scotland	Quarter ending 31-Mar-08 –	Excel [326kb]

		31-Mar-13	
D2b	Non attendance rates for Inpatient or Day case admission: NHS Scotland	Quarter ending 31-Mar-08 – 31-Mar-13	Excel [294kb]
G1	All patients on waiting list for a New Outpatient appointment: NHS Scotland	Month ending 31-Mar-10 – 31-Mar-13 for all referral sources	Excel [59kb]
G2	All patients on waiting list for Inpatient or Day case admission: NHS Scotland	Month ending 31-Mar-08 – 31-Mar-13	Excel [96kb]
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-Mar-13	Excel [123kb]
I1-I3	Cataract patient journey: NHS Scotland, Waiting time for Outpatient Assessment, Waiting Time for Surgery (01 eye Cataract) 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-Mar-13	Excel [83kb]
J1	Episode length for a New Outpatient appointment: NHS Scotland	Quarter ending 31-Mar-10 – 31-Mar-13 for all referral sources	Excel [436kb]
J2	Episode length for Inpatient or Day case admission: NHS Scotland	Quarter ending 31-Mar-08 – 31-Mar-13	Excel [453kb]

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Further Information

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Appendix

A1 – Background Information

Waiting Times - History and Performance Indicators

Why are there different measurements of waiting times?

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. The targets have changed significantly over the last 20 years and are shown in [Table A1](#). There are two statistics of interest in this regard for assessing NHS hospitals' performance:

- **Patients waiting** – waiting times of patients who are still waiting for health care at a point in time (waiting list census);
- **Patients seen** – waiting times actually experienced by patients who have been treated i.e. completed waits.

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 time 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. It is a good retrospective measure of how well the NHS is performing against the target or standard. It also takes account of the gaps in the census measure described above. This is a much easier measure for the general public to understand.

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 missing the target between census points.

New Ways

In January 2008, the ‘New Ways’ of defining and measuring waiting times in the NHS in Scotland was introduced, scrapping the use of availability status codes. The waiting time targets and standards were based on ongoing waits i.e. [patients waiting](#) for treatment. Table A1 shows the targets associated with ‘New Ways’. Further information is available in [The History of Waiting Times and Waiting Lists](#) document or on the Scottish Government website at [Scotland Performs](#).

Treatment Time Guarantee

In 2011, the [Patient Rights \(Scotland\) Act 2011](#) established a legal 12 weeks Treatment Time Guarantee (TTG) for eligible patients who are due to receive planned inpatient or day case treatment from 01 October 2012. Eligible patients must start to receive that treatment within 12 weeks (84 days) of the treatment being agreed. This target is based on completed waits i.e. [patients seen](#).

This target also includes Mental Health inpatients and day cases. However, these patients are not included in this publication. The Scottish Government is seeking assurance from NHS Board Chief Executives that no Mental Health inpatient or day case has breached 12 weeks. In addition Scottish Government and NHS Boards have also agreed to manage outpatients under the same guidance. A further change that affects outpatients as well as inpatients and day cases is around unavailability. From 01 October 2012, ‘Patient advised unavailability’ replaced ‘Social unavailability’ which puts the patient in control of their own wait. Further information on the Treatment Time Guarantee can be found in [The History of Waiting Times and Waiting Lists](#), which includes links to all the supporting documents.

Table A1 – Summary of NHS Scotland Waiting Time Targets from 1991

Effective Date	Referral to Treatment	Diagnostic	Stage of Treatment
1991	18 months		
01 Apr 1997	12 months IPDC		
31 Dec 2003	9 months IPDC		
31 Dec 2005	6 months IPDC		
31 Dec 2007		9 weeks	18 weeks OP/IPDC
January 2008 – New Ways			
31 Mar 2009		6 weeks	15 weeks OP/IP
31 Mar 2010		4 weeks ¹	12 weeks OP/IP
April 2010 – New Ways Refresh			
31 Dec 2011	18 weeks		
August 2012 – Waiting Time Guidance updated to incorporate Treatment Time Guarantee ²			
01 Oct 2012			12 weeks IPDC ³

Notes:

1. This is a local target; the national target remains 6 weeks.
2. This is a legal guarantee.
3. There is an agreement between NHS Boards and Scottish Government to manage Outpatients under the same guidance.

Interpretation

- This is the latest publication of waiting times statistics following the introduction of 'New Ways of defining and measuring waiting times' on 01 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.
- These statistics may be updated in subsequent publications but 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 time 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.
- Following the introduction of the TTG, the information contained within this report on patients added to inpatient and day case lists prior to 01 October 2012 is not directly comparable with any previous report.
- Waiting time data for patients added to list from 01 October 2012 will be suitable for comparison with future publications.
- It is also important to note that the Festive period is known to cause additional pressures on NHS services, with increased attendances at Emergency Departments and increased emergency admissions further information on these pressures can be found in the [Accident and Emergency Department Activity and Waiting Times](#) publication.

Interpreting Treatment Time Guarantee (inpatient or day case admissions from 01 October 2012) Statistics

These statistics cover all patients added to inpatient and day case admission (IPDC) waiting lists from 01 October 2012. NHS Boards are making changes to their system extracts in order to provide the additional data to ISD; while ISD have developed the waiting times warehouse to capture the additional data. Once NHS Board systems are able to extract data for national purposes, the publication will be expanded to provide more detail similar to previous publications while taking into account the [Consultation on Stage of Treatment Statistics](#).

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 time targets. At 31 March 2013, 52,077 of 52,722 patients on the waiting list had been waiting less than the 12 week standard.

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 March 2013, 92,093 of 93,325 patients on the waiting list had waited less than the 12 week standard.

Interpreting New Outpatient 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 time standard; Scottish residents waiting to be seen in an acute specialty (other than homeopathy). At 31 March 2013, 224,328 patients were waiting for a consultant or dentist led clinic of whom 223,155 were covered by the national standard. The number of patients on the waiting list has increased from 204,561 one year earlier (31 March 2012). 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 March 2013, there were 418,826 additions to the list and this reflects a reduction in the level of demand on the service (the equivalent number of additions to the waiting list was 430,231 during q/e 31 March 2012). Meanwhile, the number of removals from the list for the three months to 31 March 2013 was 407,003. As additions exceeded removals in quarter ending 31 March 2013 the net effect is for an increase in waiting list size. [Historic data](#) shows seasonality in waiting list management where waiting lists usually grow over the summer months and decline in the winter. Most (approximately 83%) 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 time standards

The national waiting time 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 time 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 time targets. At 31 March 2013, 97.5% of patients (213,920 of 219,477) 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 March 2013 half of all patients covered by the national standard were seen within 38 days (median wait) and 9 out of 10 patients were seen within 83 days (90th percentile wait). Of the 331,085 patients seen during quarter ending 31 March 2013, 311,013 (93.9%) were seen within the 12 week target. Performance against the relevant targets since 2008 and at NHS Board level can be seen [here](#).

Cataract and cardiac patients

In addition to the national waiting time 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 March 2013, 85.3% of patients experienced no such delay in their wait. This compares with a figure of 82.9% during quarter ending 31 March 2012.

Interpreting Inpatient and Day case admissions (pre 01 October 2012) Statistics

Please note: These statistics cover patients added to the list prior to 01 October 2012 and are derived from the current data extraction process under 'New Ways' rules and are subject to revision by some NHS Boards.

For these patients added prior to 01 October 2012, NHS Boards are working to treat these patients as soon as possible. It is estimated that this cohort will be admitted and treated as soon as it is reasonable and clinically appropriate to do so. Care should be taken when looking at these figures as it is a diminishing cohort of patients.

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 report on patients covered by the Scottish Government's national waiting time standard; Scottish residents waiting for treatment in an acute specialty. At 31 March 2013, 1,517 patients were waiting for NHS treatment as an inpatient or day case, of whom 1,462 were covered by the national waiting time standard. 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 or who have been admitted for NHS treatment as an inpatient or day case. [Table D2](#) shows the number of additions to the inpatient or day case waiting list, removals from the waiting list and a breakdown of the reason for removal. Zero additions are reported for the most recent quarter as all stage of treatment patients were added to the waiting list prior to 01 October 2012. The number of removals from the list for the three months to 31 March 2013 was 5,054. Due to the absence of additions data it is not feasible to assess the net effect in waiting list size. Most (74.4%) 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, which may be because the patient did not attend their appointment.

National waiting time standards

The national waiting time 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), 15 weeks (from 31 March 2009), 12 weeks (from 31 March 2010) and 9 weeks (from 31 March 2011).

TTG came into affect on 01 October 2012. This replaced the 9 week standard that was in place from 31 March 2011 to 31 March 2012. ISD are working with stakeholders to review the presentation of the statistics for inpatient and day case treatment to take account of the TTG.

ISD use two ways of measuring how the national waiting time 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 time targets. At 31 March 2013, 987 patients out of 1,212 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 March 2013, half of all patients covered by the national standard were seen within 59 days (median wait) and 9 out of 10 were seen within 122 days (90th percentile wait). Please note these statistics are not comparable with previous quarters as the median and 90th percentile are based on patients added to list prior to 01 October 2012. Of the 3,171 patients seen during quarter ending 31 March 2013, 2,101 were seen within the 9 week standard. Performance against the relevant targets since 2008 and at NHS Board level can be seen [here](#).

Cataract and cardiac patients

Please note: Cataract and Cardiac activity will no longer be published separately once pre 01 October 2012 patients have been treated. In future these will be included in the TTG tables.

In addition to the national waiting time 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 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 March 2013, 7.3% of patients experienced no such delay in their treatment.

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 i.e. 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 NHS Boards and those with large rural areas.
- A system recording issue whereby a NHS 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 NHS 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 NHS 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.'

For example, if a NHS Board cancels a hospital appointment, the appointment must be re-scheduled to ensure the patient receives a further appointment within waiting time standards.

Data Quality

Inpatients and Day cases added to waiting list from 01 October 2012 including Treatment Time Guarantee

Statistics in previous publications have been derived from the national waiting times warehouse. Following the introduction of the treatment time guarantee guidance, ISD and NHS Boards are in the process of enhancing Information Technology (IT) systems and data extraction processes. This is to ensure effective and equitable management and monitoring of the treatment time guarantee. In order to be able to accommodate the guidance, local systems, extracts and the national warehouse need to be developed. The data provided from NHS Boards by aggregate return is limited and have been presented with an element of caution.

There are a number of exceptions to the Treatment Time Guarantee set out in the legislation. In conjunction with the development of local systems and extracts, NHS Boards are working on collecting and monitoring the waiting times of exempt specialties with a view to submitting to ISD for future publications.

Under 'New Ways' the specialties of mental health, obstetrics and homeopathy were excluded from the inpatient, day case and outpatient waiting time standards. However, mental health and homeopathy are included in the Treatment Time Guarantee. At present, most NHS Boards have separate Mental Health Patient Administration Systems that do not currently have the facility to extract data for national waiting time purposes. There are discussions ongoing at national and local level regarding the capture of this information with a view to submitting to ISD for future publications. In the meantime the Scottish Government have asked NHS Board Chief Executives for assurance no patient has or will wait beyond 12 weeks (84 days) for Mental Health inpatient or day case treatment.

All New Outpatients and Inpatients and Day case patients added to waiting list prior to 01 October 2012

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 NHS 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 NHS 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 NHS Boards to monitor error records and work towards quantifying levels of completeness.

In addition, a number of NHS 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 NHS 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 NHS 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 NHS 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 NHS 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.

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.

Unavailability

Users of this publication should be aware that some historical figures for NHS Lothian which relate to levels of attainment of the waiting time standard and levels of patient unavailability are now known to be inaccurate. Further information can be found in the [Pricewaterhouse Coopers report](#).

Audit Scotland carried out formal audits on all NHS Boards during 2012, their report can be found [here](#). Going forward, audits will be carried out on a regular basis. ISD will continue to work with the auditing bodies and NHS Boards to ensure robustness of data.

NHS Board - specific data quality issues

The following is a list of known issues for both:

- Data extracted from the waiting times data warehouse on 26 April 2013 for the publication of information on all new outpatients and inpatient and day case additions prior to 01 October 2012.
- Inpatient and day case for additions to list from 01 October 2012 supplied via local aggregate returns.

Other data quality issues may exist. In terms of impact, the vast majority of the data has been judged fit-for-purpose for publication. NHS Boards and ISD continuously work to resolve all known 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.

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.
- 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.
- IPDC additions from 01 October 2012 completed waits for quarter ending December 2012 have been revised due to an error in the previous extraction.

NHS Borders

During early 2011, NHS Borders moved to a new patient management system, whose implementation led to some 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 quarter ending 30 September and 31 December 2010 is expected to be slightly lower than the true figure. Also the changeover 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 June 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 June 2011 are not published.
- IPDC additions from 01 October 2012 for completed and ongoing waits for quarter ending December 2012 have been revised due to patients being incorrectly excluded with the new unavailability codes.

NHS Dumfries & Galloway

- Table I1: Cataract patient journey: waiting time for outpatient assessment ongoing waits for patients on waiting list – the numbers presented show 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. At this time there are no plans to update the extract to include nurse-led activity.

- IPDC additions from 01 October 2012 for completed and ongoing waits for quarter ending December 2012 have been revised in order to include diagnostic patients.

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.
- 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.
- IPDC additions from 01 October 2012 ongoing waits for quarter ending December 2012 incorrectly included a patient awaiting a diagnostic test and a patient with a period of unavailability which were not picked up at the time.

NHS Forth Valley

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.

NHS Forth Valley reports an increasing capacity and activity. There has also been a focus on treating patients who have been waiting the longest to be seen. However a number of specialties are experiencing significant rises in demand which has created challenges in meeting the waiting times targets. A sustainability plan has been developed to address this which includes recruiting additional staff, increasing the number of clinics and redesigning the way services are organised and delivered. These measures will take time to take effect but are expected to show improvements in waiting times performance over the next 6 – 12 months.

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

- 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 Grampian

During early 2011, NHS Grampian moved to a new patient management system, whose implementation led to some 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 Grampian report that approximately 3,800 outpatients are excluded from May 2013 publication by failing validation rule VE47 – Invalid Unavailability Type Code used. This is due to early submission of new unavailability codes to ISD warehouse ahead of TTG complaint extract being developed. New unavailability codes have been applied from 01 October 2012 for IPDC and 1 February 2013 for outpatients (OP). This will be resolved in future publications as the ISD warehouse has accelerated a change to accept new unavailability codes.

For the purposes of IPDC from 01 October 2012, NHS Grampian used the ISD warehouse to retrospectively gauge and report on waiting time activity. Due to the above issue regarding the advanced submission of new unavailability codes, NHS Grampian report that TTG figures reported are approximately 1,000 per month less than local activity.

NHS Greater Glasgow & Clyde

NHS Greater Glasgow & Clyde recently completed the first stage of a move to a new patient management system. This has resulted in some records being returned to the data warehouse at ISD that were not previously available. As a result, the number of patients reported as being seen or waiting during quarters ending 30 September and 31 December 2011 has been adjusted since publication of 28 February 2012.

For the purposes of IPDC from 01 October 2012, new unavailability codes have been introduced since 1 April 2013. This data will be submitted for future publications.

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.

- Table A1a & A1b: NHS Highland figures incorrectly included Community Child Health activity which is not a consultant led service.

For the purposes of IPDC additions from 01 October 2012, NHS Highland are developing local systems in order to provide detailed split of new unavailability codes for future publications.

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 September 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.

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.

Some historical figures for NHS Lothian which relate to levels of attainment of the waiting times standard and levels of patient unavailability are now known to be inaccurate. Further information can be found in the [Pricewaterhouse Coopers report](#). This affects all tables showing waiting times performance and tables showing patient unavailability. For the purposes of IPDC from 01 October 2012, NHS Lothian are developing local systems in order to provide detailed split of new unavailability codes for future publications.

IPDC additions from 01 October 2012 data has been revised for ongoing waits, quarter ending December 2012, using the ISD warehouse to retrospectively identify patient unavailability. Please note that this used a different methodology using data compiled at a different time.

NHS Orkney

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

For the purpose of IPDC additions from 01 October 2012, NHS Orkney upgraded their local system on 31 January 2013. Waits recorded before this date may or may not include the new coding. The use of the new unavailability codes for patients waiting from 01 October 2012 to January 2013 will therefore be a combination of new and old unavailability codes.

NHS Shetland

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

- Table A1a: NHS Shetland report an increase in the number of new outpatients waiting over 12 weeks for orthodontics. This service is run by NHS Shetland, but with a visiting service from NHS Grampian. Discussions are ongoing to see what options are available to resolve this issue.
- Not all the data on orthodontic patients are included for quarters ending December 2012 and March 2013. This data issue has only recently been highlighted and NHS Shetland are working to quantify the number of patients involved.
- 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.
- IPDC additions from October 2012 for completed and ongoing waits for quarter ending December 2012 have been revised after developing TTG compliant reports within local systems

NHS Tayside

Due to a local system issue, figures for the latest quarter for NHS Tayside have been inflated. 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.

There is a requirement through an agreed ISD process for retrospective up-date which ensures the quality of NHS Tayside’s data held within the data warehouse. This may lead to an apparent reduction in consultant-led activity and waiting list size for previous quarters.

There is work ongoing with NHS Tayside's PAS supplier to ensure that clinician codes (GMC and GDC numbers) applied within TOPAS are in an accurate format for national reporting.

NHS Tayside report that local TOPAS reporting on waiting times is a robust and rigorous process therefore we are confident that all patients tracked locally are accurately reported.

- Tables I2 and I3: NHS Tayside report that according to local systems these patients have been seen within 18wks. NHS Tayside are investigating why these patient record updates are not appearing in the ISD warehouse.
- IPDC additions from 01 October 2012 completed waits have been revised for quarter ending December 2012 as Palliative Medicine and Community Dentistry figures were previously inappropriately included. Clinical category codes for TTG exclusion patients have also been updated. Figures now also include patients admitted within the private sector.

NHS Western Isles

NHS Western Isles report that their local system has no capacity to snapshot month end position for ongoing waits. Therefore numbers > 12 weeks at month end for ongoing waits may be unreliable due to subsequent adjustments for clock pauses and clock resets.

- IPDC additions from 01 October 2012 for completed and ongoing waits for quarter ending 31 December 2012 have been revised after developing TTG compliant reports within local systems

Golden Jubilee National Hospital

- IPDC additions from 01 October 2012 for completed and ongoing waits for quarter ending 31 December 2012 have been revised in-line with local data quality exercise.

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 11 – Volume of affected records by NHS Board

NHS Board	q/e Jun-12		q/e Sep-12		q/e Dec-12		q/e Mar-13	
	IP/DC	OP	IP/DC	OP	IP/DC	OP	IP/DC	OP
Golden Jubilee National Hospital (Heart & lung)	0	0	1	0	1	0	0	0
NHS Ayrshire & Arran	252	332	306	397	301	296	44	158
NHS Borders	11	69	7	71	7	39	1	0
NHS Fife	149	960	98	613	76	433	16	13
NHS Forth Valley	1	0	3	0	0	0	0	0
NHS Grampian	83	1 029	189	784	35	681	4	31
NHS Greater Glasgow & Clyde	472	1 402	256	771	88	153	10	2
NHS Highland	3	45	3	54	3	68	0	4
NHS Lanarkshire	29	14	6	18	6	33	3	7
NHS Lothian	5	1	3	1	5	3	4	18
NHS Tayside	1	1	1	5	0	3	0	0
NHS Western Isles	0	0	0	0	0	1	0	0

Notes:

1. IP/DC - Inpatients and Day cases, OP - New Outpatients
2. This table shows filtered records for the last year. Data for periods prior to q/e June 2012 are given in the table ['Number of records filtered, by NHS Board'](#).
3. The warehouse has not been used to extract information on referrals and additions to list from 01 October 2012.

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. Data from 01 October 2012 for Inpatient and Day case admissions is currently from aggregate returns from NHS Boards. Once NHS Boards local systems are modified to comply with TTG, data will be sourced from the warehouse again.
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 01 January 2008 to date. There have been no delays in reporting.
Continuity of data	Since 1992, there have been several significant changes in waiting times. Prior to 2008, data was derived using different rules that are not comparable with New Ways. Details of which can be found in Notice of change to National Statistics . 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. Then from 01 October 2012, the introduction of Treatment Time Guarantee resulted in further changes. A full history of waiting times is available in Waiting Times & Waiting List History .
Revisions statement	Detailed information on revision to data and revisions policy is available.
Revisions relevant to this publication	During September 2011, NHS Greater Glasgow & Clyde began a staged move to a new patient management system, beginning with the Inverclyde

	<p>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 (Table C1 and Table C2) at 30 September 2011. NHS Lothian report that this is due to some patients being inaccurately 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>
<p>Concepts and definitions</p>	<p>New Ways Definitional Rules and Guidance is available: New Ways Rules & Guidance</p> <p>TTG rules and guidance is available in the following documents: Patient Rights (Scotland) Act 2011 The Regulations and Directions under the Act - CEL 17 (2012) Treatment Time Guarantee Guidance – CEL 32 (2012) Updated version of the NHSScotland Waiting Time Guidance – CEL 33 (2012)</p>
<p>Relevance and key uses of the statistics</p>	<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 including from 01 October 2012, Treatment Time Guarantee.</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 NHS Boards; health intelligence work; parliamentary questions and HEAT targets.</p>
<p>Accuracy</p>	<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</p>

	<p>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).</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>
<p>Completeness</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).</p> <p>Provisional analysis of refresh data showed that approximately 98% of data submitted to the Warehouse is published.</p>
<p>Comparability</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).</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 are currently underway by the UK Comparative Waiting Times Group.</p> <p>Collaborative efforts are also underway to produce comparisons to European waiting times.</p>
<p>Accessibility</p>	<p>It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines.</p>
<p>Coherence and clarity</p>	<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.

	<p>3. All Scotland summary data are presented first, with the option to view spreadsheets down to Board level.</p> <p>4. Key data presented graphically.</p>
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	26 February 2013
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Date of first publication	27 May 2008
Help email	nss.isdWAITINGTIMES@nhs.net
Date form completed	28 May 2013

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)

A4 – ISD and Official Statistics

About ISD

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

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

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

Mission: Better Information, Better Decisions, Better Health

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

Official Statistics

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

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

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

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

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

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

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