Publication Report

Diagnostic Waiting Times

Monthly Data to 30 June 2014

Publication date – 26 August 2014
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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 NHS Scotland’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.

Diagnostic Waiting Times are an important component in the delivery of the 18 Weeks Referral to Treatment standard (a maximum whole journey waiting time of 18 weeks from general practitioner to treatment).

On 31 March 2009, the Scottish Government introduced the waiting time standard that patients waiting for one of the eight key diagnostic tests and investigations would be waiting less than six weeks. This supersedes nine weeks, which was initially introduced on 31 December 2007.

Waiting Times information on the following eight key diagnostic tests and investigations has been collected nationally since 2006:

Endoscopy

- Upper Endoscopy
- Lower Endoscopy (excluding Colonoscopy)
- Colonoscopy
- Cystoscopy

Radiology

- CT Scan
- MRI Scan
- Barium Studies
- Non-obstetric ultrasound

NHS Boards submit to ISD the number of NHS patients who are waiting for any of the eight diagnostic tests and investigations at the end of the month. The number of patients reported as waiting includes those who have an appointment date or those who have been seen but whose verified report has not yet been received by or made available to the requester.
Key points
On 31 March 2009, the Scottish Government introduced the waiting time standard that patients waiting for one of the eight key diagnostic tests and investigations would be waiting no longer than six weeks.

As at 30 June 2014:

- 56,591 patients in NHS Scotland were waiting for one of the eight key diagnostic tests and investigations. This is approximately 20% higher than 30 June 2013.

- 91.9% of patients waiting for a key diagnostic test had been waiting less than six weeks. When comparing to the position at 31 March 2014 and 30 June 2013, this has decreased from 95.4% and 97.0% respectively. The drop in performance is mainly due to the increase in patients waiting over six weeks for an Upper Endoscopy, Lower Endoscopy and Colonoscopy.

- The majority of the 4,608 patients waiting over six weeks in NHS Scotland were waiting to be seen in NHS Fife (39.2%) and NHS Grampian (28.9%).
Results and Commentary

From 31 March 2009, the Scottish Government set a national waiting time standard that patients should be waiting no more than six weeks for any of the eight key diagnostic tests and investigations. NHS Boards are currently working to local targets that patients will wait no more than four weeks.

Eight Key Diagnostic Tests and Investigations

Table 1 shows the number of patients waiting for one of the eight key diagnostic tests and investigations. At 30 June 2014, 91.9% had been waiting less than the waiting time standard of six weeks in NHS Scotland. The proportion of patients waiting less than six weeks has dropped by 3.5% and 5.1% when comparing to the previous quarter end and previous year end respectively.

Of the 4,608 patients waiting over six weeks at 30 June 2014, the vast majority of patients were waiting to be seen in NHS Fife (1,806) and NHS Grampian (1,332). These boards have advised ISD that a combination of staff resource issues, an increase in demand and the consequent strain on capacity is leading to an increase in the average length of wait.

Table 1: Patients waiting for all Key Diagnostic Tests, NHS Scotland

<table>
<thead>
<tr>
<th>Diagnostic Test &amp; Investigations</th>
<th>Number of Patients Waiting as at 30 Jun 14:</th>
<th>Performance (%) Against 6 Week Waiting Time Standard:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total waiting</td>
<td>&gt; 6 Weeks</td>
</tr>
<tr>
<td>8 Key Diagnostic Tests</td>
<td>56 591</td>
<td>4 608</td>
</tr>
<tr>
<td>Upper Endoscopy</td>
<td>5 357</td>
<td>976</td>
</tr>
<tr>
<td>Lower Endoscopy</td>
<td>1 931</td>
<td>466</td>
</tr>
<tr>
<td>Colonoscopy</td>
<td>5 982</td>
<td>1 048</td>
</tr>
<tr>
<td>Cystoscopy</td>
<td>2 092</td>
<td>215</td>
</tr>
<tr>
<td>All Endoscopy</td>
<td>15 362</td>
<td>2 705</td>
</tr>
<tr>
<td>Computer Tomography (CT Scan)</td>
<td>8 274</td>
<td>137</td>
</tr>
<tr>
<td>Magnetic Resonance Imaging (MRI Scan)</td>
<td>10 695</td>
<td>203</td>
</tr>
<tr>
<td>Barium Studies</td>
<td>252</td>
<td>1</td>
</tr>
<tr>
<td>Non-Obstetric Ultrasound</td>
<td>22 008</td>
<td>1 562</td>
</tr>
<tr>
<td>All Radiology</td>
<td>41 229</td>
<td>1 903</td>
</tr>
</tbody>
</table>

Chart 1 shows the number of patients waiting over six weeks, split into those waiting for key Endoscopy or key Radiology diagnostic tests and investigations between 30 June 2012 and 30 June 2014. It also shows NHS Scotland’s performance against the six week waiting time standard.

It can be seen that from June 2012 until January 2013, there was a gradual increase in the number of patients waiting longer than six weeks for a Key Endoscopy tests. This increase was due to capacity issues in NHS Lothian which were addressed. The total number waiting more than six weeks subsequently dropped and then remained fairly stable between February 2013 and February 2014.
Chart 1 illustrates a drop in performance over recent months as the number of patients waiting beyond six weeks increases for both Radiology and Endoscopy tests. The latter of which has seen a significant increase in the number of long waits. This is primarily due to patients waiting longer to be seen in NHS Fife and NHS Grampian due to the aforementioned capacity and demand imbalance.

**Chart 1: Number of Patients Waiting > 6 Weeks, NHS Scotland**

Note:
ISD receives aggregate diagnostics data from each NHS Board and so patient-level information is not systematically validated by ISD, however ISD does carry out quality assurance checks on the data submitted. The derivation of the figures and data accuracy is the responsibility of the Board.
Glossary

Diagnostic test: test or procedure that is used to identify a person's condition, disease or injury to enable a medical diagnosis to be made.

Key Diagnostic test: There are eight key diagnostic tests, for which the current National Waiting Times Standard is a maximum wait of six weeks. These eight tests/investigations are:

- Upper Endoscopy,
- Lower Endoscopy (excluding Colonoscopy),
- Colonoscopy,
- Cystoscopy,
- Computer Tomography (CT),
- Magnetic Resonance Imaging (MRI),
- Barium Studies,
- Non-obstetric Ultrasound.

Patient's completed wait: the period of time between the date the request for the test or procedure is received within the department and the date when the verified report has been received by or made available to the requester.

Patients waiting: number of available patients waiting at the census date, including those who have an appointment date or who have been seen but whose verified report has not yet been received by or made available to the requester. The number of patients waiting at the census date in each time band corresponds to the time that has elapsed from the receipt of the referral.
## List of Tables

<table>
<thead>
<tr>
<th>Table No.</th>
<th>Name</th>
<th>Time period</th>
<th>File &amp; size</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Waiting times for diagnostic tests : monthly census dates</td>
<td>30 June 2012 to 30 June 2014</td>
<td>Excel [209KB]</td>
</tr>
</tbody>
</table>
Contact

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Further Information
Further information can be found on the ISD website

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Appendix

A1 – Background Information

Diagnostic Waiting Times are an important component in the delivery of the 18 Week Referral To Treatment standard (18 Weeks RTT) with waiting times information on the eight key diagnostic tests and investigations having been collected nationally since 2006.

The Scottish Government introduced a nine week maximum waiting time for these eight key diagnostic tests and investigations from 31 December 2007. This wait was reduced to six weeks from 31 March 2009.

NHS Boards also supply data that allows measurement of the number of patients waiting over four weeks. The number of patients waiting over four weeks is included from 31 March 2010. From January 2010, the Scotland total includes Golden Jubilee National Hospital.

NHS Boards submit to ISD the number of NHS patients who are waiting for any of the eight diagnostic tests and investigations at the end of the month, including those who have an appointment date or who have been seen but whose verified report has not yet been received by or made available to the requester. This includes all referral routes (i.e. whether the patient was referred by a GP, by a hospital-based clinician or other route) and also all settings (i.e. outpatient clinic, inpatient ward, x-ray department, primary care one-stop centres etc.).

The diagnostics waiting times national delivery team has worked with NHS Boards and ISD over recent years to support the compilation of the diagnostic waiting time data. Common definitions have been established and reporting systems improved so the coverage and quality of these data has improved month-on-month from April 2006.

ISD receives aggregate diagnostics data from each NHS Board and so patient-level information is not systematically validated by ISD, however, ISD does carry out quality assurance checks on the data submitted. The derivation of the figures and data accuracy is carried out by individual NHS Boards in collaboration with ISD.
A2 – Data Quality

ISD receives aggregate data on Diagnostic Waiting Times from each NHS Board where the data for the previous quarter is confirmed by the submitting Board. Although aggregated data cannot be systematically validated by ISD, ISD does carry out quality assurance checks on the data submitted. Reported data are compared to previous figures and to expected trends. Derivation of the figures and data accuracy is a matter for individual NHS Boards.

Specific NHS Board Data Quality Issues:

**NHS Highland**

Normal process for running the data is to run the report in the middle of the following month as at the previous month end. This enables the service to tidy up any outstanding waiting list queries to reflect the most accurate position. Due to the implementation of NHS Highland’s new Patient Management System, they are now unable to follow the normal process. This means that the data submitted for Month Ends 31 March 2014 onwards are at the Month end position and no tidying up exercise has been applied to the data.

**NHS Grampian**

In July 2013, NHS Grampian made improvements to their local reporting processes for Diagnostic Waiting Times. Consequent to this, there has been a rise in the number of patients waiting for a Diagnostic Test and investigation. ISD have received assurance from NHS Grampian that historical data is correct and that there are no data quality issues however caution should be taken when comparing data prior to July 2013 due to the change in reporting practices.

**NHS Tayside**

Patients who have been offered a date out with NHS Tayside’s local 4 week target but within the 6 week national target and whose appointment is subsequently moved, for example the patient is on holiday, NHS Tayside’s PAS system will not allow unavailability to be applied as it works to a 4 week target.

**NHS Western Isles**

NHS Western Isles are unable to provide true waiting list size, for Radiology diagnostic tests, as direct access to their RIS is not available. As a proxy, NHS Western Isles compile figures for Diagnostics from SCI Store on 15th of the month post census date. This has been the process since October 2011.
# A3 – Publication Metadata (including revisions details)

<table>
<thead>
<tr>
<th>Metadata Indicator</th>
<th>Description</th>
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<tr>
<td>Publication title</td>
<td>Diagnostic Waiting Times</td>
</tr>
<tr>
<td>Description</td>
<td>Monthly summary of patients waiting times for eight key diagnostic tests and investigations.</td>
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<tr>
<td>Theme</td>
<td>Health and Social Care</td>
</tr>
<tr>
<td>Topic</td>
<td>Access and Waiting Times</td>
</tr>
<tr>
<td>Format</td>
<td>Excel workbooks</td>
</tr>
<tr>
<td>Data source(s)</td>
<td>Aggregate counts accredited and derived from individual NHS Scotland Boards are submitted monthly to ISD using a defined Excel template. Associated with individual NHS Scotland Boards Local Delivery Plans integrated to the 18Weeks RTT national standards.</td>
</tr>
<tr>
<td>Date that data are acquired</td>
<td>Deadline for data submission is the 22nd of each month, though files can be resubmitted up to one week before publication where the quality assurance process identifies differences with local figures.</td>
</tr>
<tr>
<td>Release date</td>
<td>The last Tuesday of the month for each publication.</td>
</tr>
<tr>
<td>Frequency</td>
<td>Quarterly</td>
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<tr>
<td>Timeframe of data and timeliness</td>
<td>Data from December 2007 to date. There have been no delays in reporting.</td>
</tr>
<tr>
<td>Continuity of data</td>
<td>From January 2010 Golden Jubilee National Hospital data is included in the Scotland total.</td>
</tr>
<tr>
<td>Revisions statement</td>
<td>Historic data is not normally revised unless revision of data is required due to NHS Board resubmission of revised local data following publication.</td>
</tr>
<tr>
<td>Revisions relevant to this publication</td>
<td>None</td>
</tr>
<tr>
<td>Concepts and definitions</td>
<td>A Data Submission Guidance document is available in printed and electronic form. These have been provided to all NHS Boards’ key DMMI contacts. This information is now published and available to view at <a href="http://www.isdscotland.org/Health-Topics/Waiting-Times/Diagnostics/">http://www.isdscotland.org/Health-Topics/Waiting-Times/Diagnostics/</a></td>
</tr>
<tr>
<td>Relevance and key uses of the statistics</td>
<td>Waiting times are important to patients and are a measure of how the NHS is responding to demands for services. Measuring and regular reporting of waiting times highlights where there are delays in the system and enables monitoring of the effectiveness of NHS performance throughout the country. The NHS in Scotland has been set a number of targets for maximum waiting times. Other uses of the data include information requests for a variety of customers, e.g. research charities; public companies; freedom of Information requests; information support to Boards; health intelligence</td>
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<tr>
<td><strong>Accuracy</strong></td>
<td>ISD only receives aggregate data from each NHS Board where the data for the previous quarter is confirmed by the submitting Board. Although aggregated data can not be systematically validated by ISD, ISD does carry out quality assurance checks on the data submitted. Reported data are compared to previous figures and to expected trends. Derivation of the figures and data accuracy is a matter for individual NHS Boards.</td>
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<tr>
<td><strong>Completeness</strong></td>
<td>100% of submitted data is used for analysis and publication.</td>
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<td><strong>Comparability</strong></td>
<td>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.</td>
</tr>
<tr>
<td><strong>Accessibility</strong></td>
<td>It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines.</td>
</tr>
<tr>
<td><strong>Coherence and clarity</strong></td>
<td>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. Geographical hierarchies and national figures are presented using drop down menus. Further features to aid clarity: 1. Tables use drop down menus to display data by a single Board. 2. Tables are printer friendly.</td>
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<tr>
<td><strong>Value type and unit of measurement</strong></td>
<td>Count of number of patients waiting over four, six and nine weeks for Scotland and NHS Scotland Health Boards</td>
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<td><strong>Disclosure</strong></td>
<td>The ISD protocol on Statistical Disclosure Protocol is followed.</td>
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<tr>
<td><strong>Official Statistics designation</strong></td>
<td>National Statistics.</td>
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<tr>
<td><strong>Last published</strong></td>
<td>27 May 2014</td>
</tr>
<tr>
<td><strong>Next published</strong></td>
<td>25 November 2014</td>
</tr>
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<td><strong>Date of first publication</strong></td>
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A4 – 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)
A5 – 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 (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD’s statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the ISD website.

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.