

Publication Report



Inpatient, Day case and Outpatient Stage of Treatment Waiting Times

Monthly and quarterly 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.

There have been several changes in waiting time targets and standards over the last 20 years. The most recent change to waiting times came with the [Patient Rights \(Scotland\) Act 2011](#) which 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. The Act states that eligible patients must start to receive that treatment within 12 weeks (84 days) of the treatment being agreed. This guarantee 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](#).

Inpatient, Day case and Outpatient waiting times are vital components 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).

Data published may be updated in future publications to reflect ongoing work by NHS Boards to improve data quality. Further information is discussed on the [data quality](#) page. Within this publication, there are 2 main sections:

1. Inpatients and Day cases

This section focuses on patients added to waiting list from 01 October 2012 covered by the TTG. Exceptions to TTG are set out in the [Regulations](#). Further details on the TTG can be found in the [background information](#).

2. 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 waiting times for return outpatients. Further details on 'New Ways' can be found in the [background information](#).

Changes to publication content and source data

Following the introduction of TTG legislation on 01 October 2012, the ISD waiting times warehouse and NHS Board systems required a period of development to ensure effective and equitable management and monitoring of waiting times. During this period NHS Boards have worked with their system suppliers and ISD to design, test and implement the required changes.

Prior to the completion of system developments Boards used their local systems to compile their own waiting times statistics for Inpatients and Day cases. Data was then submitted to ISD via aggregate returns and this was quality assured as far as possible and published in previous quarter.

This publication release for the most recent quarter ending 30 June 2014, presents for the first time since the introduction of TTG, Inpatient and Day case statistics that are sourced from patient level data submitted by NHS Boards. This progress allows published statistics to be compiled centrally using nationally consistent definitions and methods to allow better comparison across the country and enhanced quality assurance. Statistics published for the current quarter are therefore likely to be more comparable across Boards than those for previous quarters but may be less comparable with those previously published quarters.

While statistics for New Outpatient waits have continued to be sourced from the ISD Waiting Times Warehouse using patient level data, following approval from Scottish Government and NHS Boards, the opportunity has been taken to bring the calculation of wait in line with the calculation for Inpatients and Day cases to make them consistent with the guidance on TTG and ensure consistency across Stage of Treatment waits. This may result in an increase in average length of wait and therefore potentially, an increase in the number of waits beyond 12 weeks. For more information please refer to [New Outpatient standards](#) within the background information.

The focus of this publication has been to ensure that the new data extracts have been implemented and that patient level data is of the required standard for publication. Later this year, ISD will work with Boards to quality assure patient level data that is available for retrospective quarters and endeavour to revise previous published statistics to improve accuracy and complete historic trends wherever possible and appropriate. Any published revisions will be made in line with National Statistics protocols.

Publication content will gradually be expanded to provide more detailed statistics for Inpatient and Day case waiting times similar to that of Outpatients, in consultation with users.

Key points

Inpatients and Day cases

This publication release for quarter ending 30 June 2014, presents for the first time since the introduction of TTG, Inpatient and Day case statistics sourced directly from patient level data held by NHS Boards. This has allowed statistics to be compiled centrally using nationally consistent definitions and methods and will allow better comparison across the country and improved quality assurance.

These statistics are likely to be more comparable across NHS Boards than those for previous quarters, but may be less comparable with previously published quarters.

For quarter ending 30 June 2014:

- 97.2% of Inpatients and Day cases were seen within the 12 week TTG.
- Of the 2,291 patients who were not treated within 12 weeks, 58.7% were seen in NHS Lothian.
- 98.0% had been waiting for 12 weeks or less for Inpatient or Day case admission at 30 June 2014.
- 20.6% of patients waiting at 30 June 2014 were recorded as being unavailable for treatment.

New Outpatients

Figures for most recent quarter incorporate changes to the calculation of waiting times for New Outpatients. Although not enshrined in law, approval was given to use the same waiting times calculation for new outpatients as applies to Inpatients and Day cases under the TTG. This change will impact on the comparability of New Outpatient waiting times statistics over time.

For quarter ending 30 June 2014:

- 95.5% of new outpatients had been waiting 12 weeks or less for an appointment at 30 June 2014.
- 93.0% of new outpatients seen had waited less than 12 weeks.
- 5.0% of patients waiting at 30 June 2014 were recorded as being unavailable to attend a new outpatient appointment.

As there are quite a number of changes in this publication compared to previous quarters, please ensure that you read the supporting information and accompanying footnotes for each chart and table.

Results and Commentary

1. Inpatient and Day cases

This section focuses on patients added to Inpatient and Day case admission waiting lists from 01 October 2012. The Treatment Time Guarantee (TTG) states that from 01 October 2012, no patient [covered by the guarantee](#) should wait longer than 12 weeks (84 days) for planned Inpatient or Day case admission. From 01 April 2014, the treatment of injuries, deformities or disease of the spine by an injection or surgical intervention is included.

For the first time since the introduction of TTG, statistics for the most recent quarter are sourced from patient level data submitted by NHS Boards to the ISD waiting times warehouse. Prior to 01 April 2014, Inpatient and Day case statistics were sourced from aggregate returns. Statistics published for the current quarter are therefore likely to be more comparable across Boards than those for previous quarters but may be less comparable with those previously published quarters.

Patients seen

Table 1 shows the number of patients admitted for Inpatient or Day case treatment for recent quarters. During quarter ending 30 June 2014, 97.2% of patients seen waited within the TTG of 12 weeks. This has dropped slightly from 97.3% since quarter ending 31 March 2014. 9 out of 10 patients were seen within 76 days (90th percentile wait).

The majority of the 2,291 patients, who were not treated within 12 weeks during quarter ending 30 June 2014, were seen in NHS Lothian (58.7%). Other Boards reporting long waits include NHS Grampian (15.4%) and NHS Highland (13.3%).

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

Quarter ending	Total seen	Number who waited over 12 weeks	Performance (%)	Median Wait (days)	90 th Percentile Wait (days)
30-Jun-14	82 061	2 291	97.2	38	76
31-Mar-14	83 397	2 265	97.3	n/a	n/a
30-Jun-13	77 842	1 292	98.3	n/a	n/a

Notes:

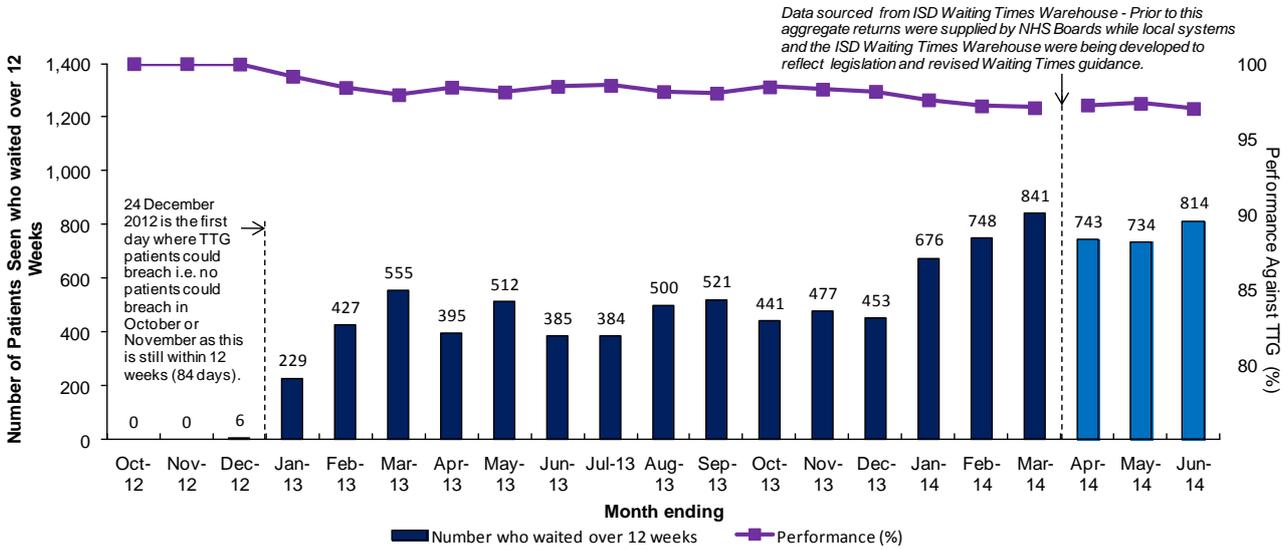
n/a: Not applicable

1. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for Patient Advised or Medical reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero if it reasonable and clinically appropriate to do so.
2. Figures prior to April 2014 are sourced from aggregate data supplied by NHS Boards while local systems and the ISD warehouse were being developed to reflect legislation and revised Waiting Time guidance. Statistics published for the current quarter are therefore likely to be more comparable across Boards than those for previous quarters but less comparable with those quarters.
3. Following the submission of patient level data, Median and 90th percentile statistics are available from quarter ending 30 June 2014.

[Chart 1](#) demonstrates monthly performance with the TTG for Inpatients and Day cases since its introduction on 01 October 2012. The majority of patients who have experienced a wait over 12 weeks were seen in NHS Lothian and NHS Grampian. While there has been

an increase in long waits over the last 6 months, NHS Scotland’s performance has remained relatively consistent since the inception of TTG.

Chart 1 - Performance against TTG; Number of Patients Seen who waited over 12 weeks; NHS Scotland



Notes:

- 24 December 2012 is the first day where TTG patients could breach i.e. no patients could breach in October or November as this is still within 12 weeks (84 days).
- As this is a new measure, the cohort of patients covered by the TTG grew over the first 6 months of its inception. The inverse of this was occurring with the previous New Ways cohort of patients. As a result, a true reflection for performance management purposes of the TTG is not realised until March 2013.
- Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for Patient Advised or Medical reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero if it reasonable and clinically appropriate to do so.
- Figures prior to April 2014 are sourced from aggregate data supplied by NHS Boards while local systems and the ISD warehouse were being developed to reflect legislation and revised Waiting Time guidance. Statistics published for the current quarter are therefore likely to be more comparable across Boards than those for previous quarters but less comparable with those quarters.

NHS Scotland data for month ending 31 October 2012 onwards and comparable information by NHS Board of treatment is provided in [Table 1](#).

Prior to 01 October 2012, the specialties of Mental Health, Obstetrics and Homeopathy were excluded from the Inpatient, Day case and New Outpatient waiting time standards. Homeopathy and Mental Health 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.

Patients waiting at month end

While the 12 week guarantee applies to patients seen, the number of patients waiting for treatment at a point in time is a key measure in assessing performance. [Table 2](#) shows the number of patients waiting at month end. At 30 June 2014, 98.0% of patients were waiting (53,755 out of a total of 54,825) within 12 weeks for treatment. This compares to 98.5% (50,107 out of a total of 50,865) at 31 March 2014.

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

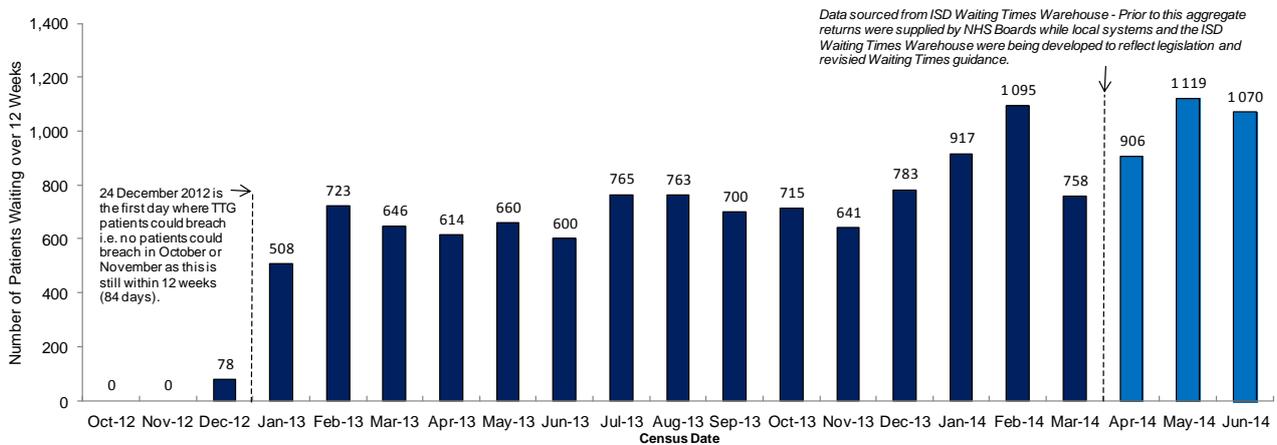
Month ending	Total waiting	Number waiting over 12 weeks
30-Jun-14	54 825	1 070
31-Mar-14	50 865	758
30-Jun-13	47 588	600

Notes:

1. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for Patient Advised or Medical reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero if it reasonable and clinically appropriate to do so.
2. Figures prior to April 2014 are sourced from aggregate data supplied by NHS Boards while local systems and the ISD warehouse were being developed to reflect legislation and revised Waiting Time guidance. Statistics published for the current quarter are therefore likely to be more comparable across Boards than those for previous quarters but less comparable with those quarters.

Chart 2 demonstrates the number of patients waiting beyond 12 weeks at month end since the introduction of TTG. Similar to completed waits, more patients are waiting over 12 weeks in the most recent 6 months.

Chart 2 – Number of Ongoing Waits over 12 weeks; Inpatient or Day case Admission; NHS Scotland



Notes:

1. 24 December 2012 is the first day where TTG patients could breach i.e. no patients could breach in October or November as this is still within 12 weeks (84 days).
2. As this is a new target, the cohort of patients covered by the TTG grew over the first 6 months of its inception. The inverse of this was occurring with the [previous New Ways cohort of patients](#). As a result, a true reflection for performance management purposes of the TTG is not realised until March 2013.
3. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for Patient Advised or Medical reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero if it reasonable and clinically appropriate to do so.
4. Figures prior to April 2014 are sourced from aggregate data supplied by NHS Boards while local systems and the ISD warehouse were being developed to reflect legislation and revised Waiting Time guidance. Statistics published for the current quarter are therefore likely to be more comparable across Boards than those for previous quarters but less comparable with those quarters.

NHS Scotland data for census date 31 October 2012 onwards and comparable information by NHS Board of treatment is provided in [Table 2](#).

See [Appendix A1](#) for further information on why both ongoing waits and completed waits are published.

Waiting list activity

Due to constraints of historical data, information for the following indicators, with the exception of unavailability, is only available for quarter ending 30 June 2014. ISD hope to have these statistics stretching back to October 2012; subject to ISD and Boards working together to quality assure historical data that was provided via aggregate return. Patients not covered by the guarantee are reported [here](#).

Patient unavailability at month end

Waiting times are adjusted to deduct periods where the patient is recorded as being unavailable for Patient Advised or Medical reasons. For instance:

- 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 the patient is recorded as being unavailable for patient advised reasons and their waiting time clock is paused. This was previously recorded as Social unavailability.
- From 01 April 2014, patients who request a specific consultant or a specific location will have a period of Patient Requested unavailability applied. Prior to this, these were recorded as Patient Advised unavailability.
- If a patient is medically unable to undergo a procedure i.e. they have another medical condition such as raised blood pressure that makes treatment inadvisable then the patient is recorded as being unavailable for medical reasons and their waiting time clock is paused.

At 30 June 2014, 54,825 patients were on the waiting list for an inpatient or day case admission, of which 20.6% were recorded as unavailable. This compares to 19.2% who were unavailable at 30 June 2013. Table 3 shows a summary of number of patients unavailable.

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

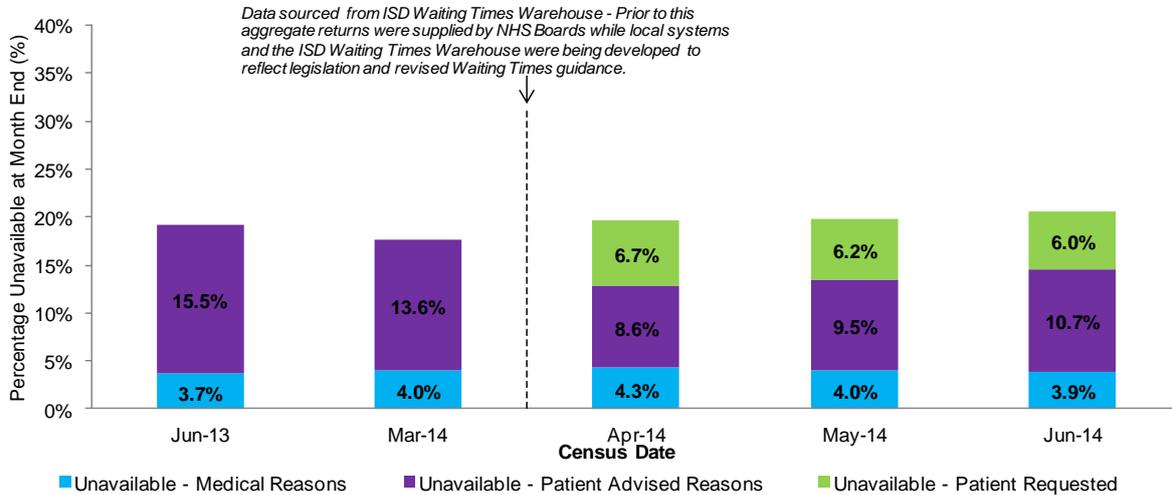
Month ending	Total waiting	Total Available	Total Unavailable	Medical	Patient Advised	Patient Requested
30-Jun-14	54 825	43 533	11 292	2 160	5849	3283
31-Mar-14	50 865	41 915	8 950	2 038	6 912	n/a
30-Jun-13	47 588	38 457	9 131	1 744	7 387	n/a

Notes:

1. n/a - Patients who request a specific consultant or a specific location will have a period of Patient Requested unavailability applied – this is to reflect the legislation which came into effect on 01 April 2014. Prior to this, these requested were recorded as Patient Advised unavailability.
2. Figures for the most recent quarter are solely sourced from patient level data submitted by NHS Boards to the ISD waiting times warehouse. Prior to this, data was sourced from aggregate returns.

[Chart 3](#) focuses on the percentage of unavailable patients split by reason in NHS Scotland. At 30 June 2014, the highest rates of unavailability in mainland Scotland are reported by NHS Grampian and NHS Greater Glasgow & Clyde, both at 27.5%.

Chart 3: Unavailability of patients on Waiting List, Inpatient or Day case admission, NHS Scotland



Notes:

1. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for Patient Advised or Medical reasons).
2. Patients who request a specific consultant or a specific location will have a period of Patient Requested unavailability applied – this is to reflect the legislation which came into effect on 01 April 2014. Prior to this, these requested were recorded as Patient Advised unavailability.
3. Figures prior to April 2014 are sourced from aggregate data supplied by NHS Boards while local systems and the ISD warehouse were being developed to reflect legislation and revised Waiting Time guidance. Statistics published for the current quarter are therefore likely to be more comparable across Boards than those for previous quarters but less comparable with those quarters.

NHS Scotland data for census date 31 October 2012 onwards and comparable information by NHS Board of treatment, comprising of a detailed split of unavailability, is provided in [Table 3](#).

Chart 3 showing a stacked bar chart depicting unavailability of patients on the waiting list for Inpatient or Day case admission. Data for month end June 2013 to June 2014.

Additions and Removals from list

During the quarter ending 30 June 2014, there were 98,009 additions to the list and 96,901 removals resulting in a net increase in waiting list size. Naturally, the vast majority of patients removed from the list were admitted for treatment. [Table 4](#) provides a breakdown of patients removed for alternative reasons.

Table 4: Reason for removal from Waiting List, Inpatient or Day case Admission, NHS Scotland

Quarter ending	Total Removals	Number Attended	Number of Removals where:			
			Referred back to GP	Transferred	Treatment no longer required	Other
30-Jun-14	96 901	82 061	3 593	514	5 741	4 992

Notes:

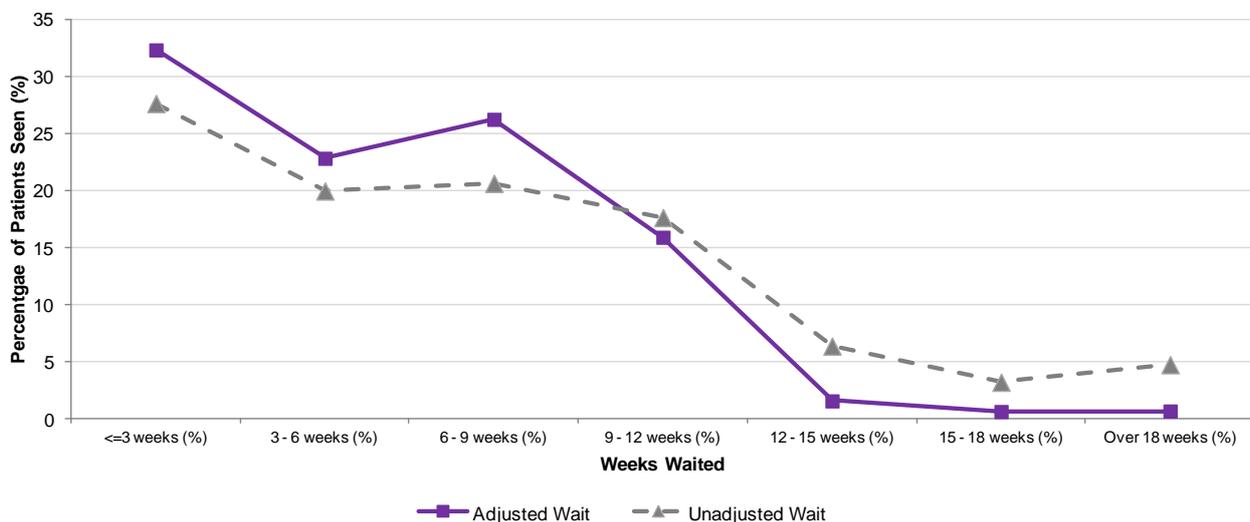
1. Due to Inpatient and Day case data being sourced from aggregate returns up to quarter ending March 2014, comparable figures over time for Removal Reasons are not currently available.
2. Other reasons for removal from list comprises of 'Died' and 'inappropriate addition to list'.

Distribution of Wait

The unadjusted wait is the full waiting time experienced by the patient i.e. from the date the decision is made to treat to the date the patient is admitted for treatment. The adjusted wait excludes any periods of unavailability, where the waiting time clock is paused, and takes into account any clock resets where reasonable and clinically appropriate to do so.

During the quarter ending 30 June 2014, 97.2% and 85.7% of patients had an adjusted and unadjusted wait within 12 weeks respectively.

Chart 4: Distribution of Wait, Quarter ending 30 June 2014, Inpatient or Day case admission, NHS Scotland



Notes:

1. Figures for the most recent quarter are solely sourced from patient level data submitted by NHS Boards to the ISD waiting times warehouse. Prior to this, data was sourced from aggregate returns therefore comparisons to previous quarter ends in not available.

Comparable information by NHS Board of treatment, for the above two indicators during the most recent quarter is provided in [Waiting List Activity](#).

2. 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. The following waiting times information is on patients covered by the [National Waiting Time Standard](#) set by the Scottish Government.

Figures for most recent quarter incorporate changes to the calculation of waiting times for new outpatients. Although not enshrined in law, Scottish Government and NHS Boards approved the move to using the same waiting times calculation for New Outpatients as applies to Inpatient and Day cases under TTG to ensure consistency across Stage of Treatment waits. This may result in an increase in average length of wait and therefore potentially, an increase in the number of waits beyond 12 weeks. This therefore impacts on the comparability of outpatients waiting times statistics over time.

Patients waiting at month end

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. Table 5 shows number of patients waiting over 12 weeks. At 30 June 2014, 95.5% of patients covered by the waiting time standard had been waiting 12 weeks or less. This compares to 97.3% at 31 March 2014 where waiting times were subject to old calculation. The increase in waits over 12 weeks is partly due to the implementation of new calculation.

Table 5 - Ongoing waits for patients on Waiting List: New Outpatient appointment, NHS Scotland

Month ending	Total waiting	Number waiting over 12 weeks	Performance (%)
30-Jun-14	265 609	11 837	95.5
31-Mar-14	252 009	6 754	97.3
30-Jun-13	235 893	6 922	97.1

Notes:

1. This excludes patients referred to homeopathy, mental health and obstetrics specialties.
2. Figures for most recent quarter incorporate changes to the calculation of waiting times for new outpatients. Although not enshrined in law, approval was given to use the same waiting times calculation for new outpatients as applies to inpatient and day cases under the TTG. This change will impact on the comparability of outpatients waiting times statistics over time.
3. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for Patient Advised, Medical or Patient Focussed Booking (PFB) reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero.
4. In conjunction with the introduction of TTG, Cataract and Cardiac patients are included in the key tables from October 2012. Previously, these patients were reported within the Whole Journey section of the publication against local targets within the national waiting time standard of 18 weeks from referral to treatment.

[Chart 5](#) demonstrates the trend in number of outpatients waiting beyond the national standard waiting at month-end census dates.

Chart 5: Performance against New Outpatient standard; Number waiting over 12 weeks, NHS Scotland



Notes:

1. This excludes patients referred to homeopathy, mental health and obstetrics specialties.
2. Figures for most recent quarter incorporate changes to the calculation of waiting times for new outpatients. Although not enshrined in law, approval was given to use the same waiting times calculation for new outpatients as applies to inpatient and day cases under the TTG. This change will impact on the comparability of outpatients waiting times statistics over time.
3. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for Patient Advised, Medical or Patient Focussed Booking (PFB) reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero.
4. In conjunction with the introduction of TTG, Cataract and Cardiac patients are included in the key tables from October 2012. Previously, these patients were reported within the Whole Journey section of the publication against local targets within the national waiting time standard of 18 weeks from referral to treatment.

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

Patients seen

While the 12 week national standard applies to patients waiting, the number of patients seen shows the complete picture of waiting time experienced. During quarter ending 30 June 2014, 93.0% of patients covered by the waiting time standard (338,679 out of a total of 364,020) had waited 12 weeks or less. This has increased from 92.5% at 31 March 2014.

[Table 6](#) provides a quarterly breakdown for the number of patients seen. Half of all patients covered by the national standard were seen within 42 days (median wait) and 9 out of 10 were seen within 83 days (90th percentile wait) during quarter ending 30 June 2014.

Table 6 - Completed waits for patients seen: New Outpatient appointment, NHS Scotland

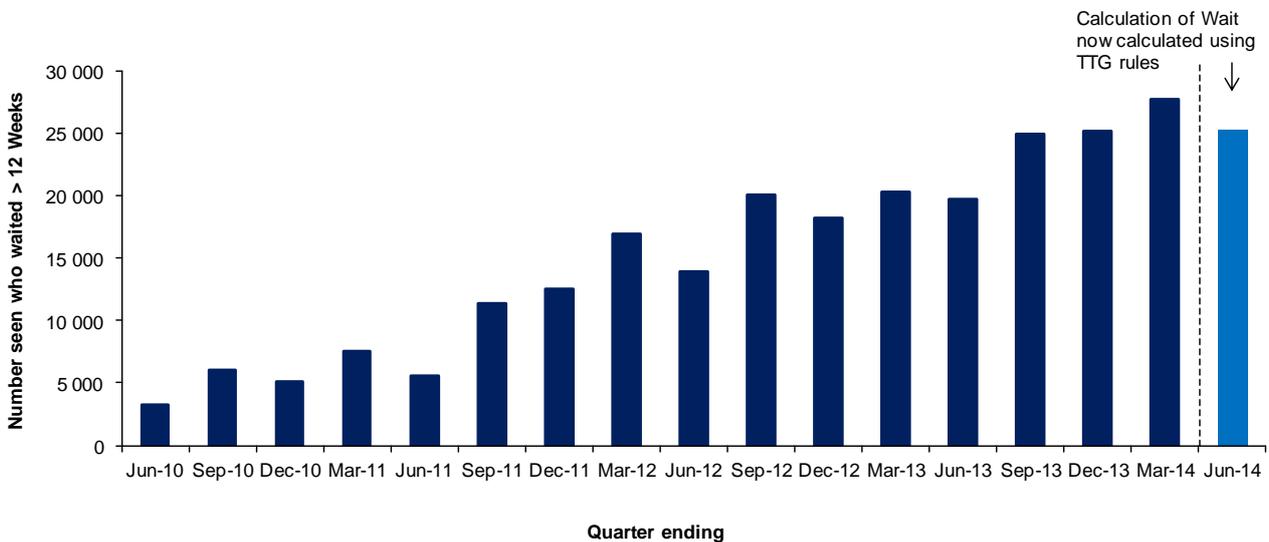
Quarter ending	Total seen	Number who waited over 12 weeks	Median Wait (days)	90 th Percentile Wait (days)
30-Jun-14	364 020	25 341	42	83
31-Mar-14	367 259	27 700	41	83
30-Jun-13	348 333	19 715	39	82

Notes:

1. This analysis excludes patients referred to homeopathy, mental health and obstetrics specialties.
2. Figures for most recent quarter incorporate changes to the calculation of waiting times for new outpatients. Although not enshrined in law, approval was given to use the same waiting times calculation for new outpatients as applies to inpatient and day cases under the TTG. This change will impact on the comparability of outpatients waiting times statistics over time.
3. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for Patient Advised, Medical and Patient Focussed Booking (PFB) reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero.
4. In conjunction with the introduction of TTG, Cataract and Cardiac patients are included in the key tables from October 2012. Previously, these patients were reported within the Whole Journey section of the publication against local targets within the national waiting time standard of 18 weeks from referral to treatment.

Chart 6 illustrates the number of patients seen who waited over 12 weeks for a New Outpatient appointment.

Chart 6: Number of New Outpatients who waited over 12 weeks, NHS Scotland



Notes:

1. This analysis excludes patients referred to homeopathy, mental health and obstetrics specialties.
2. Figures for most recent quarter incorporate changes to the calculation of waiting times for new outpatients. Although not enshrined in law, approval was given to use the same waiting times calculation for new outpatients as applies to inpatient and day cases under the TTG. This change will impact on the comparability of outpatients waiting times statistics over time.
3. Waiting times are adjusted to deduct periods where the patient is unavailable (e.g. for Patient Advised, Medical and Patient Focussed Booking (PFB) reasons). Patients who cancel or don't attend an appointment have their waiting times clock reset to zero.
4. In conjunction with the introduction of TTG, Cataract and Cardiac patients are included in the key tables from October 2012. Previously, these patients were reported within the Whole Journey section of the publication against local targets within the national waiting time standard of 18 weeks from referral to treatment.

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

Waiting list activity

This is a revised cohort from that previously published. Data relating to activity is now specific to outpatients waiting for or seen at a consultant or dentist led clinic who are covered by the national standard. Patients not covered by the standard are reported [here](#).

Patient unavailability at month end

Waiting times are adjusted to deduct periods where the patient is recorded as being unavailable for Patient Advised, Medical or Patient Focused Booking (PFB) reasons. For instance:

- 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 the patient is recorded as being unavailable for patient advised reasons and their waiting time clock is paused. This was previously recorded as Social unavailability;
- From 01 April 2014, patients who request a specific consultant or a specific location will have a period of Patient Requested unavailability applied. Prior to this, these were 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 the patient is recorded as being unavailable for medical reasons and their waiting time clock is paused.
- Patient Focused Booking (PFB) is where the patient is invited to contact the hospital to make an appointment or to confirm an offered appointment date. The patient should be allowed a minimum of 7 days to respond. If no contact has been made after 7 days, the patient's waiting time clock may be paused for a maximum of 7 days. After a second offer, if no contact has been made after 7 days, the patient's waiting time clock may be paused a second time for a maximum of 7 days.

[Table 7](#) shows, at 30 June 2014, 265,609 patients were on waiting lists for a new outpatient appointment. Of which, 5.0% were recorded as unavailable for an appointment.

Table 7 - Availability of patients on Waiting List – New Outpatient appointment, NHS Scotland

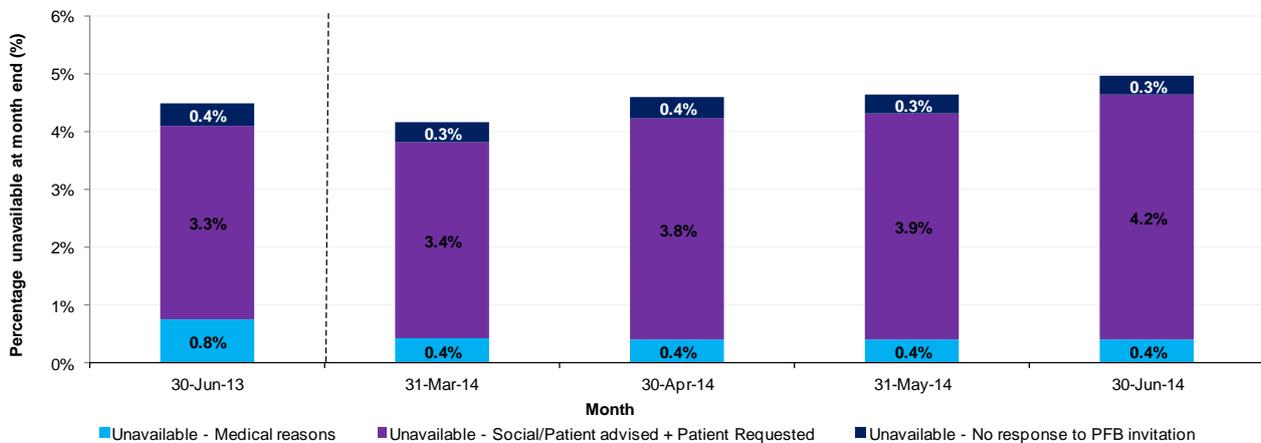
Month ending	Total waiting	Total Available	Total Unavailable	Medical	Patient Advised + Patient Requested	PFB
30-Jun-14	265 609	252 443	13 166	1 077	11 243	846
31-Mar-14	252 009	241 550	10 459	1 064	8 544	851
30-Jun-13	235 893	225 315	10 578	1 784	7 883	911

Notes:

1. This analysis excludes patients referred to homeopathy, 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. Patients who request a specific consultant or a specific location will have a period of Patient Requested unavailability applied – this is to reflect the legislation which came into effect on 01 April 2014. Prior to this, these requested were recorded as Patient Advised unavailability.

Chart 7 focuses on the percentage of unavailable patients split by reason. When comparing to 30 June 2013, there has been a decrease in the proportion of patients unavailable for medical reasons and an increase for patient advised/requested reasons.

Chart 7: Unavailability of patients on Waiting List - New Outpatient appointment, NHS Scotland



Notes:

1. This analysis excludes patients referred to homeopathy, 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. Patients who request a specific consultant or a specific location will have a period of Patient Requested unavailability applied – this is to reflect the legislation which came into effect on 01 April 2014. Prior to this, these requested were recorded as Patient Advised unavailability.

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

Additions and removals from list

During the quarter ending 30 June 2014, there were 459,925 additions to the list and this reflects an increase in the level of demand on the service (the equivalent number of additions to the waiting list was 449 079 during quarter ending 31 March 2014).

Meanwhile, 436,537 patients were removed from the waiting list during the quarter ending 30 June 2014. This has increased slightly from 435,798 patients who were removed during the quarter ending 31 March 2014. A breakdown of removal reasons is shown in Table 8.

Table 8: Reason for removal from Waiting List, New Outpatient appointment, NHS Scotland

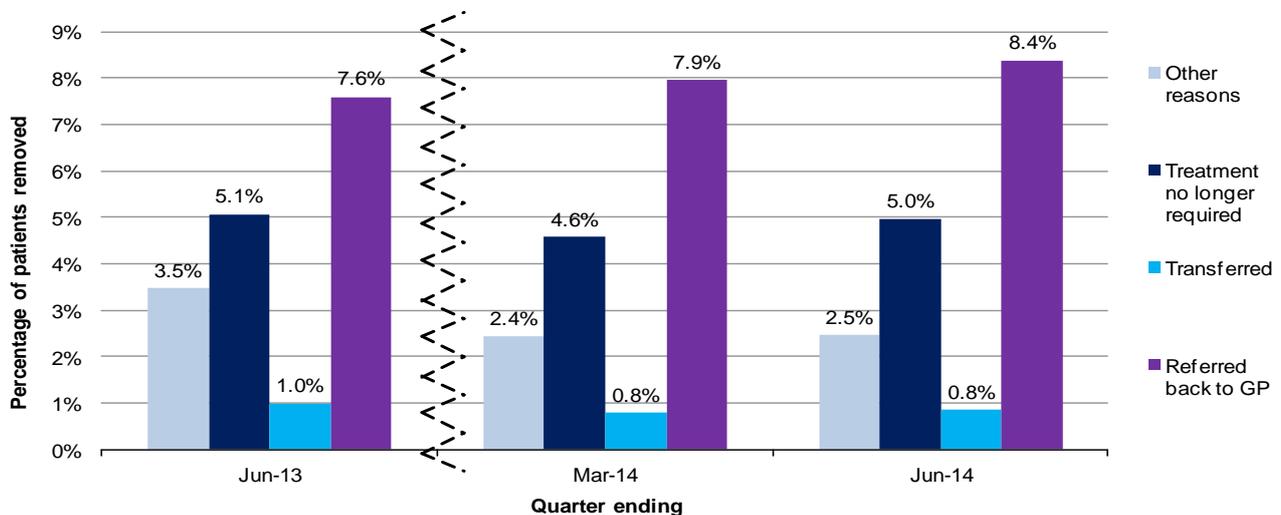
Quarter ending	Total removals	Number attended	Number of Removals where:			
			Referred back to GP	Transferred	Treatment no longer required	Other
30-Jun-14	436 537	364 020	36 534	3 668	21 612	10 703
31-Mar-14	435 798	367 259	34 633	3 404	19 888	10 614
30-Jun-13	420 237	348 333	31 888	4 175	21 263	14 578

Notes:

1. This analysis excludes patients referred to homeopathy, mental health and obstetrics specialties.
2. Other reasons for removal from list comprises of 'Died' and 'inappropriate addition to list'.

The majority of patients are removed from the list because they attended a new outpatient appointment. Chart 8 focuses on those patients who were removed for reasons other than attended, illustrating a slight increase in the proportion of patients referred back to GP.

Chart 8: Reason for removal from Waiting List (excluding Attended), New Outpatient appointment, NHS Scotland



Notes:

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

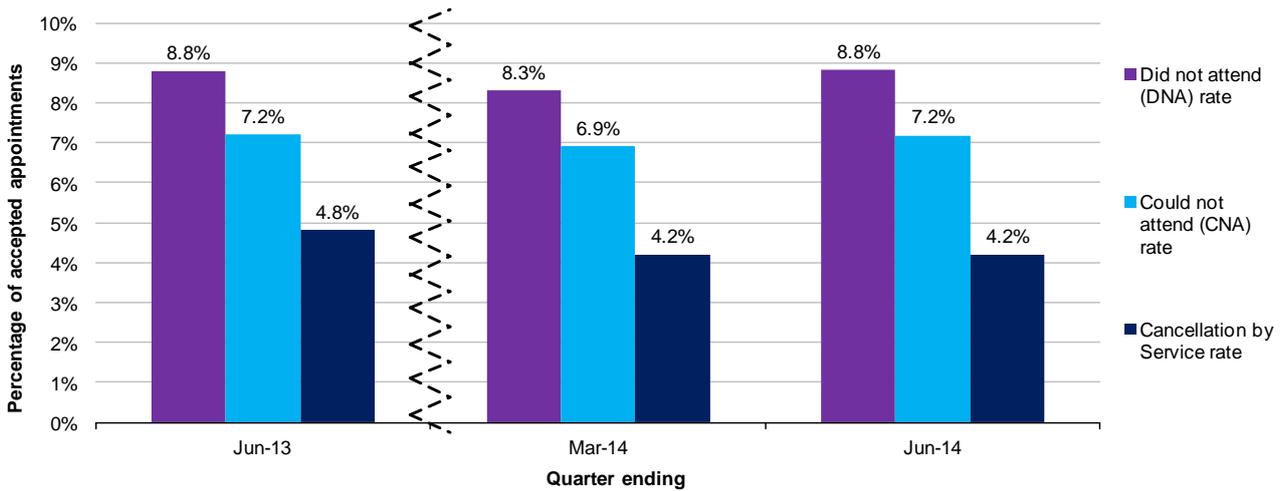
[Table D1a](#) shows the number of additions to the waiting list (i.e. new referrals), removals and a breakdown of the reason for removal. This is shown for NHS Scotland from quarter ending 31 March 2010 onwards and comparable information by NHS Board of treatment.

Non-attendance rates

During quarter ending 30 June 2014, 463,375 offers for a new outpatient appointment were accepted.

Chart 9 presents information about non-attendance rates for patients accepting a new appointment at a consultant/dentist-led outpatient clinic for comparable quarters up to March 2014, reflecting stability across all rates.

Chart 9: Non attendance rates, New Outpatient appointment, NHS Scotland



Notes:

1. This analysis excludes patients referred to homeopathy, mental health and obstetrics specialties.
2. Waiting Times is the only national dataset where Cancellation by Service is recorded and submitted nationally for New Outpatients.

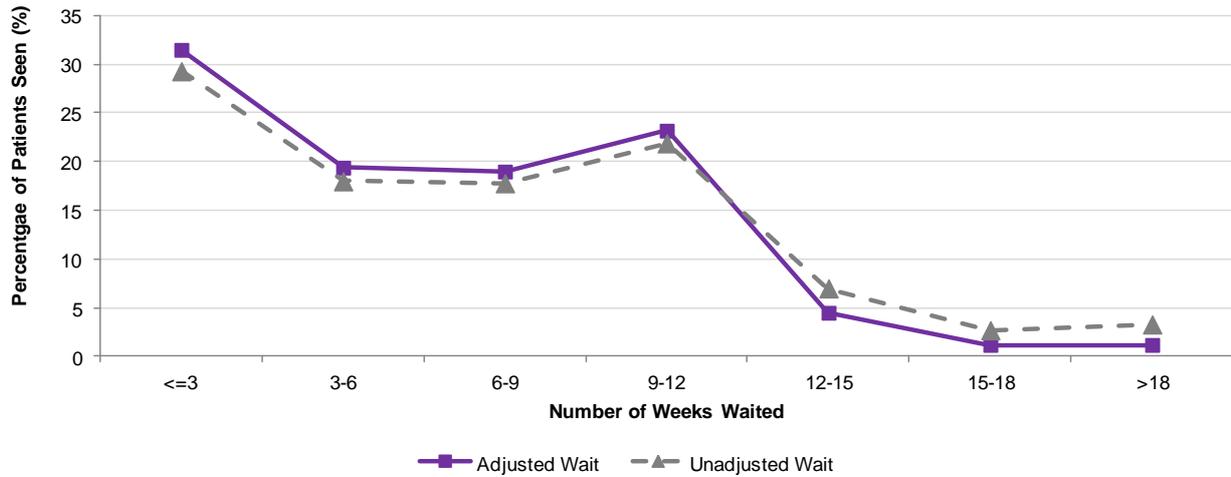
NHS Scotland data for quarter ending 31 March 2010 onwards and comparable information by NHS Board of treatment is given in [Table D1b](#).

Distribution of Wait

The unadjusted wait is the full waiting time experienced by the patient i.e. from the date the decision is made to treat to the date the patient is admitted for treatment. The adjusted wait excludes any periods of unavailability, where the waiting time clock is paused, and takes into account any clock resets where reasonable and clinically appropriate to do so.

During the quarter ending 30 June 2014, 93.1% and 87.0% of patients had an adjusted and unadjusted wait within 12 weeks respectively. This is detailed in [Chart 10](#).

Chart 10: Distribution of Wait, Quarter ending 30 June 2014, New Outpatient appointment, NHS Scotland



Notes:

1. Figures for most recent quarter incorporate changes to the calculation of waiting times in line with TTG regulations and national waiting time guidance. Although not enshrined in law, approval was given to use the same waiting times calculation for new outpatients. This change will impact on the comparability of outpatients waiting times statistics over time.
2. This analysis excludes patients referred to homeopathy, mental health and obstetrics specialties.

Distributions of patient wait at NHS Board level are illustrated in [Table J1](#).

Patients not covered by TTG or other Waiting Time Standards

ISD collect information on waiting times for various aspects of healthcare provided by NHS Scotland. Data is collected for acute specialties (those specialties primarily concerned in the surgical, medical and dental sectors) and waiting time statistics report on patients covered by the Scottish Government’s TTG and national waiting time standard. The volume of data submitted for patients not covered by the guarantee and standard varies from Board to Board and is therefore not comparable.

Inpatients and Day cases

The majority of patients waiting for an Inpatient or Day case admission are covered by TTG. However, patients who have had a diagnostic test before a decision was made to treat are not subject to the TTG. The other exemptions, set out in the [Regulations](#) 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 which will be included from 01 October 2014.

At 30 June 2014, 71,134 patients were waiting for planned inpatient or day case admission, of which 54,825 were covered by TTG. NHS Board comparable information available [here](#).

Please note the vast majority of the patients who are not covered under TTG, are waiting for admission for a Diagnostic Test. These patients require a diagnostic test before a decision can be made to treat. In a small number of cases it may be clinically appropriate to

undertake the diagnostic procedure and treatment at the same time. At the point the decision is made to treat, these patients are then covered by the TTG. More information on Diagnostic Waiting times is available [here](#).

New Outpatients

The vast majority of patients waiting for a New Outpatient appointment in NHS Scotland are subject to the national New Outpatient waiting time standard. However, non-Scottish residents and patients referred to homeopathy, mental health and obstetrics specialties are not. Please see [Psychological Therapies](#) and [Child & Adolescent Mental Health Services](#) for information on waiting times for mental health.

At 30 June 2014, 266,640 patients were waiting for a consultant or dentist lead clinic, of which 265,609 were covered by the national waiting time standard. ISD do not centrally hold patient level waiting time data for mental health and obstetrics.

Data for previous quarters and individual NHS Boards are available [here](#).

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 No.	Name	Time period	File & size
Table 1, 2 & 3	Patients added to Inpatient or Day case admission waiting lists from 01 October 2012	Month ending 31-Oct-12 – 30-Jun-14	Excel [429kb]
IPDC Waiting List Activity	Patients added to Inpatient or Day case admission waiting lists from 01 October 2012	Quarter ending 30-Jun-14	Excel [224kb]
A1a	Waiting Times for a New Outpatient appointment: NHS Scotland, Completed waits for patients seen	Quarter ending 31-Dec-09 – 30-Jun-14 for all referral sources	Excel [120kb]
A1b	Waiting Times for a New Outpatient appointment: NHS Scotland, Ongoing waits for patients on waiting list	Month ending 31-Dec-09 – 30-Jun-14 for all referral sources	Excel [97kb]
C1	Availability of patients on the Waiting List for a New Outpatient appointment: NHS Scotland	Month ending 31-Mar-10 – 30-Jun-14 for all referral sources	Excel [153kb]
D1a	Reason for removal for a New Outpatient appointment: NHS Scotland	Quarter ending 31-Mar-10 – 30-Jun-14 for all referral sources	Excel [171kb]
D1b	Non attendance rates for a New Outpatient appointment: NHS Scotland	Quarter ending 31-Mar-10 – 30-Jun-14 for all referral sources	Excel [109kb]
G1	All patients on waiting list for a New Outpatient appointment: NHS Scotland	Month ending 31-Mar-10 – 30-Jun-14 for all referral sources	Excel [41kb]
J1	Episode length for a New Outpatient appointment: NHS Scotland	Quarter ending 31-Mar-10 – 30-Jun-14 for all referral sources	Excel [324kb]

Contact

Jacqueline Ferguson

Information Analyst

jacqueline.ferguson4@nhs.net

0141 282 2111

Stuart Kerr

Senior Information Analyst

stuartkerr2@nhs.net

0131 275 6363

Michael Burslem

Principal Information Analyst

michael.burslem@nhs.net

0131 275 6532

General Enquiries

nss.isdwaitingtimes@nhs.net

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

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Appendix

A1 – Background Information

Waiting Times - History and Performance Indicators

Inpatient and Day case Target & Standards

On 01 October 2012, the Treatment Time Guarantee came into affect. This replaced the 9 week standard that was in place from 31 March 2011 to 31 March 2012. ISD are reviewing and developing the presentation of the statistics for inpatient and day case treatment to take into account the change in legislation.

Previously, the national waiting time standard stated that, from 31 March 2011, no patient waiting for treatment as an inpatient or day case would wait longer than 9 weeks. Prior to this, 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).

New Outpatient 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](#).

While statistics for New Outpatient waits have continued to be sourced from the ISD Waiting Times Warehouse using patient level data, following approval from Scottish Government and NHS Boards, the opportunity has been taken to bring the calculation of wait in line with the calculation for Inpatients and Day cases to make them consistent with the guidance on TTG and ensure consistency across Stage of Treatment waits. This may result in an increase in average length of wait and therefore potentially, an increase in the number of waits beyond 12 weeks.

Changes to the calculation include the clock not being reset where:

- It is not reasonable and clinically appropriate to do so i.e. a patient whose circumstances are considered clinically urgent.
- A patient rejects 2 or more reasonable offers (known as a reasonable offer package), having already waited 84 days.
- A patient fails to attend an appointment they have agreed to attend, having already waited 84 days.

Outpatient statistics for quarters prior to April 2014 are subject to the old calculation therefore this change will impact on the comparability of outpatients waiting times statistics over time.

Other Waiting Times Targets & Standards

Inpatient, Day case and Outpatient Stage of Treatment Waiting Times is part of a variety of targets and standards set by the Scottish Government around waiting times. Details on each of the targets/standards that ISD publish are available within the [Supporting Documentation](#) web pages.

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 as it is historic but it may indicate issues to managers for future planning. 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](#).

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).

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](#).

These statistics published cover all patients added to inpatient and day case admission (IPDC) waiting lists from 01 October 2012. NHS Boards have made changes to their local 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](#).

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 use the same method of calculation of wait for new outpatients as applies to inpatient and day cases under the TTG. 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.

A2 – Data Quality

Background

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 introduced 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. Validation rules are reviewed on an ongoing basis. In December 2013, the validation was relaxed where appropriate to increase the number of records suitable for publication.

Following the introduction of the TTG, ISD and NHS Boards have been in the process of enhancing IT systems and data extraction processes. This is to ensure effective and equitable management and monitoring of waiting times. In order to be able to accommodate the guidance, local systems, extracts and the national warehouse were developed. As an interim measure, data for Inpatient and Day cases added to the waiting list from 01 October 2012 to 31 March 2014 were submitted to ISD via an aggregate return which is presented with an element of caution. Patient level information was not systematically validated by ISD, however, ISD did 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.

This publication release for the most recent quarter ending 30 June 2014, presents for the first time since the introduction of TTG, Inpatient and Day case statistics that are sourced from patient level data submitted by NHS Boards. This progress allows published statistics to be compiled centrally using nationally consistent definitions and methods to allow better comparison across the country and enhanced quality assurance. Statistics published for the current quarter are therefore likely to be more comparable across Boards than those for previous quarters but less comparable with those quarters.

Currently the TTG has some exceptions set out in the legislation. In conjunction with development of local systems and extracts. NHS Boards are working on collecting and monitoring the waiting times of the exempt specialities with a view to submitting to ISD for future publications. Mental health is included under the TTG legislation, most NHS Boards have separate Mental Health Patient Management Systems that do not currently have the facility to extract the data for national waiting times 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.

General Data Quality issues

Data Refresh

The focus of this publication has been to ensure that the new data extracts have been implemented and that patient level data is of the required standard for publication.

Later this year, ISD will work with Boards to quality assure patient level data that is available for retrospective quarters and endeavour to revise previous published statistics to improve accuracy and complete historic trends wherever possible and appropriate. Any published revisions will be made in line with National Statistics protocols.

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.

Non Attendance Rates

NHS Boards are seeking clarification on the recording of 'Cancellation by Service' for Inpatients and Day cases. Due to variation in recording across Scotland, this statistic is not suitable for publication at present.

NHS Board – specific data quality issues

ISD and NHS Boards work closely to ensure that published Waiting Times information accurately reflects locally held data. Over the past 6 months, all NHS Boards with the exception of NHS Fife have moved to a new TTG compliant extract. This change, compounded by a limited period of time to test new extracts with redeveloped ISD warehouse, has led to new data quality issues that are subject to further investigation.

For some Boards, this has led to an increase in the number of [filtered](#) records. ISD are working with Boards and System Suppliers to address outstanding technical issues.

The following list provides an overview of historical and current data quality issues:

NHS Ayrshire & Arran

A small number of records have old unavailability codes applied. For the purposes of publication, ISD have been advised of the current codes assigned locally and figures have been updated accordingly. These records will be updated within the ISD warehouse in due course.

NHS Ayrshire & Arran are seeking national clarification on the waiting time measurement of one stop clinics within a day case setting.

NHS Dumfries & Galloway

The number of ongoing waits for Cataract outpatient assessment at a consultant led clinic may be inflated as all patients are added to a consultant waiting list before being triaged and placed specifically on a consultant or a nurse-led waiting list.

NHS Fife

NHS Fife are yet to move to a TTG compliant extract and therefore unable to submit new unavailability codes. Published unavailability figures are sourced from an aggregate return.

Due to extract issues, not all records are submitted to the ISD warehouse which is highlighted by the drop in Inpatient and Day case admission numbers for the most recent quarter. System development is in the process of rectifying these issues.

NHS Forth Valley

The number of patients Transferred out of Board has risen in NHS Forth Valley due to a recording change implemented in October 2013. The new method of recording is in line with ISD guidance which aims to prevent double counting of hospital activity and ensures that SMR is submitted by the board of treatment. Previously NHS Forth Valley patients, who chose to accept an offer of treatment at Golden Jubilee National Hospital, were booked into a virtual clinic in NHS Forth Valley. Once seen they were removed locally. However, with the changes to the Golden Jubilee IT management Information reporting systems, NHS Forth Valley now record these patient differently and they are recorded as 'Seen at Golden Jubilee', which results in recording the patient as transferred out of Health Board.

Due to local patient management system issues NHS Forth Valley have been unable to provide current unavailability codes for a small number of patients. NHS Forth Valley are working with local system suppliers to correct this issue.

NHS Grampian

For the most recent quarter, NHS Grampian report that some Inpatient and Day case figures are inflated due to the inclusion of certain diagnostic tests.

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 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 the early submission of new unavailability codes to the ISD warehouse, approximately 3,800 closed outpatient records are excluded from analysis via a Flag 2 validation error (VE47) covering quarters ending 31 December 2012 and 31 March 2013. Following the implementation of new unavailability codes to ISD warehouse, no records will be excluded for this reason in future.

NHS Greater Glasgow & Clyde

Following a temporary ISD warehouse issue in the run-up to May 2014 publication, NHS Greater Glasgow & Clyde reported small differences in the number of New Outpatients waiting and seen for quarter ending March 2014.

NHS Highland

NHS Highland moved to a new Patient Management System (PMS) in March 2014. Due to some migration issues, all figures for quarter ending March 2014 and Outpatient figures for months ending 30 April 2014 and 31 May 2014 are unverified. The PMS implementation Programme is continuing to progress. There are several ongoing configuration and data quality issues which were anticipated given the scale of the implementation.

NHS Highland report that the historical waiting time extract sent to the warehouse does not accurately reflect the local position for the number of patients on list. The quality of the data will continue to improve following the recent implementation of the new PMS. At present a small proportion of patients are included in key outpatient figures for activity not covered by the national waiting time standard.

NHS Lanarkshire

In December 2013, NHS Lanarkshire reviewed the use of medical unavailability for Inpatient and Day case patients from 01 October 2012 and identified an issue in the process. Actions have since been taken to address this which resulted in a subsequent decrease in Medical unavailability and an increase in Patient advised unavailability from January 2014 onwards.

NHS Lanarkshire has reported that there is a local issue with the reporting of patient Urgency Categories. This is being investigated by system supplier.

NHS Lothian

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 time performance and tables showing patient unavailability.

Prior to April 2014, Inpatient and Day case figures for NHS Lothian included patients who were seen at private hospitals such as Murrayfield Hospital. Following the transition in source from aggregate returns to the ISD warehouse, this activity is predominantly recorded under 'Other Locations'.

NHS Orkney

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

NHS Shetland

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

For the most recent quarter, NHS Shetland report concerns around system configuration of Waiting Time Standard codes. This has led to an inflation of Inpatient and Day case figures due to the inclusion of diagnostics. This will be resolved when NHS Shetland move to new PMS in March 2015.

NHS Shetland reported an issue with the orthodontic service, resulting in an increase in number of new outpatients who waited over 12 weeks for quarter ending 30 June 2013. These patients had been recorded locally in the dental management system but had not been recorded in the hospital patient administration system. As a result, NHS Shetland had not identified that this cohort of patients had not been treated within 12 weeks. The orthodontic service is now covered by the hospital system to ensure compliance with waiting time standard.

NHS Tayside

Prior to April 2014, Inpatient and Day case figures for NHS Tayside did not include patients who were seen at Stracathro Hospital. Following the transition in source from aggregate returns to the ISD warehouse, NHS Tayside activity has increased due to ISD reports capturing all Provider codes within a Health Board.

A small number of records have old unavailability codes applied. For the purposes of publication, ISD have been advised of the current codes assigned locally and figures have been updated accordingly. These records will be updated within the ISD warehouse in due course.

Due to a local system issue, figures for NHS Tayside have historically 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. NHS Tayside is working with ISD to ensure that any data discrepancies within the data warehouse are investigated and resolved.

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.

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.

[Table 9](#) shows the volume of affected records by NHS Board. The number of filtered records relate to the quarter in which the patient is added to the waiting list. Over the past 6 months, all NHS Boards with the exception of NHS Fife have moved to a new TTG compliant extract. This change, compounded by a limited period of time to test new extracts with redeveloped ISD warehouse, has led to an increase in the number of filtered records. ISD are working with Boards and System Suppliers to address outstanding technical issues. The main reasons for the increase in filtered records are:

- Following warehouse development ISD no longer accepts records for Planned Repeat activity. Existing records can only be removed via filter. These records have no impact on publication figures.
- Following switch to new extracts a small proportion of records across a number of Boards have not been closed after patient has been removed from waiting list. This leads to inaccurate long waits.

Table 9 – Volume of affected records by NHS Board

NHS Board	Date added to Waiting List (Quarter End)							
	IPDC				New OP			
	Sep-13	Dec-13	Mar-14	Jun-14	Sep-13	Dec-13	Mar-14	Jun-14
NHS Scotland	1 245	1 248	1 475	118	1 786	1 668	3 699	123
NHS Ayrshire & Arran	105	45	20	9	597	178	42	6
NHS Borders	5	10	11	1	15	15	9	0
NHS Fife	29	50	59	28	582	627	743	34
NHS Forth Valley	4	3	10	0	0	0	0	0
NHS Grampian	266	215	196	5	287	393	228	1
NHS Greater Glasgow & Clyde	711	698	463	34	25	18	21	2
NHS Highland	5	36	556	35	98	214	2 321	54
NHS Lanarkshire	47	47	20	3	0	0	3	0
NHS Lothian	45	129	118	3	176	221	330	26
NHS Orkney	0	4	0	0	0	0	0	0
NHS Tayside	28	11	22	0	6	2	2	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 2013 are given in the table ['Number of records filtered, by NHS Board'](#).
3. The warehouse has not been used to extract information on IP/DC referrals and additions to list from 01 October 2012.

The records in question, excluded from all publication tables, 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.

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.

A3 – 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 NHS Scotland.
Theme	Health and Social Care
Topic	Access and Waiting Times
Format	Excel workbooks and PDF
Data source(s)	<p>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.</p> <p>Homeopathy, mental health and obstetrics specialties are not included. Data from 01 October 2012 to 31 March 2014, for Inpatient and Day case admissions was sourced via aggregate returns from NHS Boards. NHS Boards local systems have since been modified to comply with TTG, and data from 01 April 2014 is sourced from the warehouse again.</p>
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	<p>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.</p>
Revisions statement	Detailed information on revision to data and revisions policy is available.

Revisions relevant to this publication	Tables C1 and D1
Concepts and definitions	<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:</p> <p>Patient Rights (Scotland) Act 2011</p> <p>The Regulations and Directions under the Act - CEL 17 (2012)</p> <p>Treatment Time Guarantee Guidance – CEL 32 (2012)</p> <p>Updated version of the NHSScotland Waiting Time Guidance – CEL 33 (2012)</p>
Relevance and key uses of the statistics	<p>Waiting times are important to patients and are a measure of how the NHS is responding to demands for services. Measuring and regular reporting of waiting times highlights where there are delays in the system and enables monitoring of the effectiveness of NHS performance throughout the country. The NHS in Scotland has been set a number of targets for maximum waiting times 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>
Accuracy	<p>Detailed information on validation is available. The data is subject to a sign-off procedure each quarter before publication where the data for the previous quarter is confirmed by the submitting Board.</p> <p>ISD carry out detailed fitness for publication evaluation every quarter including comparisons to previous figures and expected trends. ISD also check outputs from two different analytical tools.</p> <p>ISD carried out a project in 2009 to quantify and understand the differences between New Ways and other ISD data sources (SMR00, SMR01 and ISD(S)1).</p> <p>ISD carried out an audit of New Ways data quality in 2008 and the details can be found here under the heading 'Data Quality Assessment Project'.</p>
Completeness	<p>ISD carried out a project in 2009 to quantify and understand the differences between New Ways and other ISD data sources (SMR00, SMR01 and ISD(S)1).</p> <p>Provisional analysis of refresh data showed that approximately 98% of data submitted to the Warehouse is published.</p>

Comparability	<p>ISD carried out a project in 2009 to quantify and understand the differences between New Ways and other ISD data sources (SMR00, SMR01 and ISD(S)1).</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>
Accessibility	<p>It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines.</p>
Coherence and clarity	<p>Key statistics for the latest quarter are linked to on the main Waiting Times page of the publication. Statistics are presented within Excel spreadsheets. NHS Board and national figures are presented.</p> <p>Further features to aid clarity:</p> <ol style="list-style-type: none"> 1. Attendances and performance data by Patient Type are available in separate tables to enable users to select a single measure for analysis. 2. All tables are printer friendly. 3. All Scotland summary data are presented first, with the option to view spreadsheets down to Board level. 4. Key data presented graphically.
Value type and unit of measurement	<p>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).</p>
Disclosure	<p>The ISD protocol on Statistical Disclosure Protocol is followed.</p>
Official Statistics designation	<p>National Statistics.</p>
UK Statistics Authority Assessment	<p>Completed assessment by UK Statistics Authority. Report published July 2010.</p>
Last published	<p>27 May 2014</p>
Next published	<p>25 November 2014</p>
Date of first publication	<p>27 May 2008</p>
Help email	<p>nss.isdWAITINGTIMES@nhs.net</p>
Date form completed	<p>26 August 2014</p>

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.