Inpatient, Day Case and Outpatient Stage of Treatment Waiting Times

Monthly and quarterly data to
31 December 2019

Publication date
25 February 2020
This is a National Statistics Publication

National Statistics status means that the official statistics meet the highest standards of trustworthiness, quality and public value. They are identified by the quality mark shown above.

The UK Statistics Authority has designated these statistics as National Statistics signifying compliance with the Code of Practice for Statistics.

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

The statistics last underwent a full assessment by the Office for Statistics Regulation (OSR) against the Code of Practice in May 2013. The OSR is the regulatory arm of the UK Statistics Authority.

The continued designation of these statistics as National Statistics was confirmed in May 2018 following a compliance check by the Office for Statistics Regulation. The compliance check report highlighted a number of strengths and made suggestions for improvements.

Find out more about the Code of Practice at:

Find out more about National Statistics at:
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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 12 weeks Treatment Time Guarantee (TTG) written into legislation for eligible patients who are due to receive planned inpatient or day case treatment from 1 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).

This publication is split into 2 main sections:

1. 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.

2. Inpatients and Day cases

This section focuses on patients added to waiting list from 1 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.

From May 2019, this publication now includes SMR01 (inpatient activity) and SMR00 (outpatient activity) unadjusted waiting times activity information. This is to show long term
activity trends at health board level. This will complement the existing adjusted waiting times information already included in the publication. Due to data completeness, both the SMR01 and SMR00 data is only shown up to June 2019. See current data completeness levels for more information.
Main Points

Due to technical issues with providing data from their Patient Management Systems (PMS), NHS Tayside have provided some locally sourced figures to inform this publication. ISD deem this information to be of sufficient quality to be included in this release. Once the technical issues are resolved by the Boards, ISD will refresh the figures in the next publication. See data quality for further detail.

New Outpatients at 31 December 2019

- 73.2% of patients waiting for an appointment had been waiting 12 weeks or less. This compares with 72.7% at 30 September 2019 and 69.9% at 31 December 2018.
- 76.7% of patients were seen within 12 weeks or less. This compares with 76.6% at 30 September 2019 and 75.6% at 31 December 2018.
- NHS Borders (96.1%), NHS Lanarkshire (93.9%) and NHS Dumfries and Galloway (93.3%) were the highest performing boards, with NHS Tayside (58.7%), NHS Lothian (60.9%) and NHS Grampian (70.0%) being the lowest.

Inpatients and Day cases quarter ending 31 December 2019

- 71.9% of patients were seen within the 12 week TTG. This compares with 71.3% during quarter ending 30 September 2019 and 73.0% during quarter ending 31 December 2018.
- NHS Western Isles (100.0%), NHS Shetland (95.3%) and NHS Borders (95.1%), with NHS Tayside (58.2%), NHS Highland (59.3%) and NHS Grampian (61.1%) being the lowest.
Results and Commentary

1. New Outpatients

This section covers the waits that patients experienced waiting for an appointment as a new outpatient. The statistics shown are largely derived from data collected through the National Waiting Times warehouse. However note that NHS Tayside have experienced technical problems with data submitted to the ISD Waiting Times warehouse. Locally derived figures have been supplied for this publication from April 2017 to December 2018, which are included in the data tables.

The following waiting times information is on patients covered by the National Waiting Time Standard set by the Scottish Government.

As outlined in the Scottish Government’s Local Delivery Plan for NHSScotland, Boards were expected to improve their 12 week New Outpatient waiting time performance to achieve a 95% standard with a long term aim of 100%. This applies to all consultant led New Outpatient appointments from all sources of referral. In addition to this commitment, NHS Boards were working towards ensuring that there are no waits over 16 weeks.

All summary tables and charts within this section are supplemented by NHS Board trend and comparative detail in the data tables.

1.1 Patients waiting at month end for a new outpatient appointment

Please see Appendix 1 for more information on the differences between patients waiting (ongoing waits) and patients seen (completed waits).

At 31 December 2019, 73.2% of patients waiting for an appointment had been waiting 12 weeks or less. This compares with 72.7% at 30 September 2019 and 69.9% at 31 December 2018.

NHS Borders (96.1%), NHS Lanarkshire (93.9%) and NHS Dumfries and Galloway (93.3%) were the highest performing boards, with NHS Tayside (58.7%), NHS Lothian (60.9%) and NHS Grampian (70.0%) being the lowest.
The number of patients who had been waiting over 12 weeks decreased from 86,918 at 30 September 2019 to 76,018 at 31 December 2019. Table 1 shows that over the last 12 months, the number of patients who had been waiting over 16 weeks at the end of each month decreased from 67,495 to 53,243. At the end of December 2019, 70.0% of all patients who were waiting beyond the national standard of 12 weeks has also been waiting more than 16 weeks.
Table 1 - Ongoing waits for patients on Waiting List: New Outpatient appointment

<table>
<thead>
<tr>
<th>Month ending</th>
<th>Total waiting</th>
<th>Number waiting over 12 weeks</th>
<th>Number waiting over 16 weeks</th>
<th>Performance (% waiting 12 weeks or less)</th>
</tr>
</thead>
<tbody>
<tr>
<td>31-Dec-19</td>
<td>283,385</td>
<td>76,018</td>
<td>53,243</td>
<td>73.2</td>
</tr>
<tr>
<td>30-Sep-19</td>
<td>318,663</td>
<td>86,918</td>
<td>60,596</td>
<td>72.7</td>
</tr>
<tr>
<td>30-Jun-19</td>
<td>322,298</td>
<td>85,524</td>
<td>58,838</td>
<td>73.5</td>
</tr>
<tr>
<td>31-Mar-19</td>
<td>310,169</td>
<td>78,295</td>
<td>61,517</td>
<td>74.8</td>
</tr>
<tr>
<td>31-Dec-18</td>
<td>313,383</td>
<td>94,302</td>
<td>67,495</td>
<td>69.9</td>
</tr>
<tr>
<td>31-Dec-17</td>
<td>313,121</td>
<td>91,939</td>
<td>63,492</td>
<td>70.6</td>
</tr>
</tbody>
</table>

Figure 2 shows that the total number of patients waiting has increased since 2012, along with the number waiting over 12 weeks. Both trends have levelled off over the past two years although there has been a decrease in the most recent quarter, this has largely been due to the 8 key diagnostic tests no longer being included under the 12 week standard from the 1st October 2019. There appear to be seasonal effects each year, with the number on list tending to remain stable between January and March, increase between April and September and decrease between October and December.

Figure 3 shows the trend for national performance against the 12 weeks standard. Performance decreased until September 2017 but has since fluctuated between 70.0% and 75.0%. The trend in performance is also affected by the same seasonal affects described above.
*Please note the vertical scale on the left hand side of the graph does not start at zero.

Figure 4 shows the trend for national performance against the 12 weeks standard by the top three specialties that see the highest volume of patients. Each of these three specialties has seen a decrease in performance over time but their performance has remained stable over the past few quarters. During quarter ending 31 December 2019 the percentage of patients waiting within 12 weeks were 74.5% in General Surgery, 72.1% in Ophthalmology and 68.7% in Trauma & Orthopaedic Surgery.
Figure 4: Performance against New Outpatient Standard (12 weeks) by specialties accounting for 80% of the waiting list; at 31 December 2019

1.2 Patients seen
The number of patients seen is a measure of completed waits, however the 12 week national standard applies to ongoing waits.

Please see Appendix 1 for more information on the differences between patients waiting (ongoing waits) and patients seen (completed waits).

Table 2 provides a quarterly breakdown for the number of patients seen. During quarter ending 31 December 2019, 76.7% of patients were seen within 12 weeks.

There has been a reduction in patients seen within 12 week performance over time. However, the number of who waited over 12 weeks to be seen has decreased slightly since the previous quarter, from 86,232 in the quarter ending 30 September 2019 to 85,908 in the quarter ending 31 December 2019.

Half of all patients covered by the national standard were seen within 43 days (median wait) and 9 out of 10 were seen within 140 days (90th percentile wait) during quarter ending 31
December 2019. Waits from NHS Tayside are not included in the median and 90\textsuperscript{th} percentile waits as the data submitted did not cover the waits experienced by individuals.

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

<table>
<thead>
<tr>
<th>Quarter ending</th>
<th>Total seen</th>
<th>Number who waited over 12 weeks</th>
<th>Number who waited over 16 weeks</th>
<th>Median Wait (days)</th>
<th>90\textsuperscript{th} Percentile Wait (days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>31-Dec-19</td>
<td>365,146</td>
<td>85,098</td>
<td>56,907</td>
<td>43*</td>
<td>140*</td>
</tr>
<tr>
<td>30-Sep-19</td>
<td>368,062</td>
<td>86,232</td>
<td>56,827</td>
<td>43*</td>
<td>140*</td>
</tr>
<tr>
<td>30-Jun-19</td>
<td>361,793</td>
<td>77,275</td>
<td>51,241</td>
<td>41*</td>
<td>142*</td>
</tr>
<tr>
<td>31-Mar-19</td>
<td>372,847</td>
<td>93,746</td>
<td>66,986</td>
<td>42*</td>
<td>156*</td>
</tr>
<tr>
<td>31-Dec-18</td>
<td>357,323</td>
<td>87,133</td>
<td>62,928</td>
<td>42*</td>
<td>156*</td>
</tr>
<tr>
<td>31-Dec-17</td>
<td>353,241</td>
<td>94,060</td>
<td>68,274</td>
<td>45*</td>
<td>159*</td>
</tr>
</tbody>
</table>

* NHS Tayside have been excluded from the median and 90\textsuperscript{th} percentile waits to allow comparisons between all quarters in Table 3. Consequently, these figures should be interpreted with caution.

Figure 5 shows that the number of patients seen who waited over 12 and 16 weeks has increased over time. Peaks in waiting times, for both sets of patients waiting over 12 and 16 weeks, more recently occurred in quarters ending December 2017 and March 2019.

Figure 5: Number of New Outpatients who waited over 12 weeks for their appointment
1.3 Patient unavailability at month end
Waiting times are adjusted to deduct periods where the patient is recorded as being unavailable either at the patient’s request (Patient Advised, Patient Requested), due to medical reasons (Medical) or due to Patient Focused Booking (PFB) reasons. Further detail on the use of unavailability is explained in Appendix 1. 2.3% (6,482) of the patients waiting for a New Outpatient appointment on 31 December 2019 were unavailable for treatment in NHS Scotland. This compares with 2.2% at 31 September 2019.

Following the introduction of unavailability codes in October 2012, a detailed split of unavailability by NHS Board is available in the data tables.

1.4 Additions and removals from list
During the quarter ending 31 December 2019, there were 421,098 patients added to the waiting list and 453,490 were removed. As removals exceeded additions, the net effect is a 32,392 decrease in waiting list size.

The majority of patients (80.5%) were removed from the list because they attended an appointment.

1.5 Non-attendance rates
In the most recent quarter, 4.8% of appointments were cancelled by the service. The patient Could Not Attend (CNA) rate was 7.4%. This is when a patient notifies the service in advance that they will be unable to attend the appointment.

1.6 Distribution of Wait
The distribution of wait provides an overview on how quickly the majority of patients are seen. 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. The unadjusted wait is the full waiting time experienced by the patient, from the date treatment is agreed to the date the patient is seen. Performance is measured against the adjusted wait.

Figure 6 illustrates length of wait in time bands of 3 weeks for quarter ending 31 December 2019. Over one in four patients (26.0%) waited less than three weeks and 71.9% of patients had an adjusted wait within 12 weeks across NHSScotland. The comparable figure for the unadjusted measure was 66.6% across NHSScotland.

To demonstrate the impact of the way waits are calculated (i.e. adjusting for patient availability), the distribution is shown for both unadjusted and adjusted waits in the data tables.
1.7 Reducing New Outpatient Waiting Times

In October 2018, Scottish Government announced the Waiting Times Improvement Plan which focuses on reducing the length of time people are waiting for key areas of healthcare.

It is important to look at long term trends when it comes to recognising sustained improvement in waiting times. This is due to normal variation for example seasonality and month on month variation. An example of this is the month of February, as it is more likely to have fewer working days than other months of the year.

Clinically urgent patients will always take priority for treatment within NHS Boards. After this, many Boards, when seeking to reduce waiting times for patients will initially focus on patients who have been waiting the longest; this is known as the ‘tail’. When boards focus on the ‘tail’ this will show as a worsening in performance for completed waits as the proportion of patients seen over 12 weeks will be greater than previous quarters. Conversely, the performance for ongoing waits will improve as the above patients have been taken off the waiting list, therefore there will be less patients waiting over 12 weeks.

Figure 7 illustrates this relationship between the performance for completed and ongoing waits. The ongoing waits have been ‘shifted forward’ three months and we can see that the trend for completed waits then falls into a similar trend as the ongoing waits after this time.
period. This suggests it takes three months to start seeing a change in completed waits performance reflected in ongoing waits performance.

**Figure 7: Percentage of New Outpatients seen and waiting within 12 weeks (with ongoing waits ‘shifted forward’ three months), NHS Scotland**

*Please note the vertical scale on the left hand side of the graph does not start at zero.*
2. Inpatient and Day cases

This section focuses on patients added to Inpatient and Day case admission waiting lists from 1 October 2012. The Treatment Time Guarantee (TTG) states that from 1 October 2012, no patient covered by the guarantee should wait longer than 12 weeks (84 days) for planned Inpatient or Day case treatment.

NHS Tayside experienced technical problems with the submission of data to the ISD Waiting Times database. This information will be updated when the data are available. Locally derived figures have been supplied for this publication, which are included in the data tables. NHS Tayside have provided locally derived figures from April 2017 to June 2018.

All summary tables and charts within this section are supplemented by NHS Board trends and additional comparative detail in the data tables.

2.1 Patients seen

Please see Appendix 1 for more information on the differences between patients waiting (ongoing waits) and patients seen (completed waits).

Table 3 shows the number of patients admitted for Inpatient or Day case treatment. During quarter ending 31 December 2019, 50,221 (71.9%) of patients treated waited within the TTG of 12 weeks, with a remaining 19,638 patients who waiting over 12 weeks to be admitted. NHS Western Isles (100.0%), NHS Shetland (95.3%) and NHS Borders (95.1%), with NHS Tayside (58.2%), NHS Highland (59.3%) and NHS Grampian (61.1%) being the lowest.
Half of all patients covered by the national standard were treated within 54 days (median wait) and 9 out of 10 were seen within 169 days (90th percentile wait) during the most recent quarter. Waits from NHS Tayside are not included in the median and 90th percentile waits as the data submitted did not cover the waits experienced by individuals.

Table 3 – Completed waits for patients seen: Inpatient or Day case admission

<table>
<thead>
<tr>
<th>Quarter ending</th>
<th>Total seen</th>
<th>Number who waited over 12 weeks</th>
<th>Performance (%)</th>
<th>Median Wait (days)</th>
<th>90th Percentile Wait (days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>31-Dec-19</td>
<td>69,859</td>
<td>19,638</td>
<td>71.9</td>
<td>54*</td>
<td>169*</td>
</tr>
<tr>
<td>30-Sep-19</td>
<td>69,884</td>
<td>20,037</td>
<td>71.3</td>
<td>55*</td>
<td>167*</td>
</tr>
<tr>
<td>30-Jun-19</td>
<td>71,564</td>
<td>19,624</td>
<td>72.6</td>
<td>54*</td>
<td>160*</td>
</tr>
<tr>
<td>31-Mar-19</td>
<td>74,340</td>
<td>23,318</td>
<td>68.6</td>
<td>58*</td>
<td>172*</td>
</tr>
<tr>
<td>31-Dec-18</td>
<td>69,399</td>
<td>18,736</td>
<td>73.0</td>
<td>52*</td>
<td>161*</td>
</tr>
<tr>
<td>31-Dec-17</td>
<td>69,819</td>
<td>13,950</td>
<td>80.0</td>
<td>46*</td>
<td>132*</td>
</tr>
</tbody>
</table>

* NHS Tayside have been excluded from the median and 90th percentile waits to allow comparisons between all quarters in Table 3. Consequently, these figures should be interpreted with caution.
Figure 9 shows that the number of inpatients and day cases treated under TTG has decreased since 2014, although this has remained stable over the last two years. Meanwhile the number who waited over 12 weeks has been increasing overall.

**Figure 9: Number of inpatients and day cases treated and number who waited over 12 weeks, NHSScotland.**

![Graph showing number of inpatients and day cases treated and number who waited over 12 weeks]

Figure 10 shows a trend for performance in respect of the TTG. Since the quarter ending March 2013, performance has gone from 98.2% to a low of 68.6% in quarter ending March 2019. There has been a slight improvement in recent quarters with performance for quarter ending December 2019 at 71.9%.

**Figure 10: Performance against Treatment Time Guarantee, NHSScotland**

![Graph showing performance against Treatment Time Guarantee]

*Please note the vertical scale on the left hand side of the graph does not start at zero.*
Figure 11 shows the trend for national performance against the treatment time guarantee by the top three specialties that see the highest volume of patients. Each of these three specialties has seen a decrease in performance over time. Performance has increased in recent quarters for General Surgery and Trauma & Orthopaedic surgery while Ophthalmology has fluctuated. During quarter ending 31 December 2019 the percentage of patients seen within 12 weeks were 77.5% in General Surgery, 67.1% in Ophthalmology and 48.5% in Trauma & Orthopaedic Surgery.

**Figure 11: Performance against Treatment Time Guarantee by specialties accounting for the top 80% of patients seen; Quarter Ending December 2019**

2.2 Patients waiting at month end

Please see Appendix 1 for more information on the differences between patients waiting (ongoing waits) and patients seen (completed waits).

While the 12 week TTG applies to patients seen, the number of patients waiting for treatment at a point in time is a key measure in assessing performance. Table 4 shows the number of patients waiting at the month end has increased by 4.3% from September 2019 while the number of patients waiting over 12 weeks has increased by 7.2%. On 31 December 2019, 67.0% of patients waiting for treatment (54,411 out of a total of 81,167) had been waiting for less than 12 weeks. This compares with 67.9% on 30 September 2019.
Table 4 - Ongoing waits for patients on Waiting List: Inpatient or Day case admission, NHSScotland

<table>
<thead>
<tr>
<th>Month ending</th>
<th>Total waiting</th>
<th>Number waiting within 12 weeks</th>
<th>Number waiting over 12 weeks</th>
<th>Waiting within 12 weeks (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>31-Dec-19</td>
<td>81,167</td>
<td>54,411</td>
<td>26,756</td>
<td>67.0</td>
</tr>
<tr>
<td>30-Sep-19</td>
<td>77,864</td>
<td>52,896</td>
<td>24,968</td>
<td>67.9</td>
</tr>
<tr>
<td>30-Jun-19</td>
<td>75,891</td>
<td>51,789</td>
<td>24,102</td>
<td>68.2</td>
</tr>
<tr>
<td>31-Mar-19</td>
<td>75,832</td>
<td>53,630</td>
<td>22,202</td>
<td>70.7</td>
</tr>
<tr>
<td>31-Dec-18</td>
<td>77,429</td>
<td>52,544</td>
<td>24,885</td>
<td>67.9</td>
</tr>
<tr>
<td>31-Dec-17</td>
<td>69,675</td>
<td>51,858</td>
<td>17,817</td>
<td>74.4</td>
</tr>
</tbody>
</table>

Figure 12 shows the number of patients who had been waiting more than 12 weeks since the inception of TTG, with the total waiting list to give context. It shows an increase in patients waiting over 12 weeks over time, with a greater rate of increase from March 2016 onwards.

2.3 Patient unavailability at month end

Waiting times are adjusted to deduct periods where the patient is recorded as being unavailable either at the patients request (Patient Advised, Patient Requested) or due to medical reasons (Medical). Further detail on the use of unavailability is explained in Appendix 1.

Across NHSScotland, 5,870 patients waiting for an Inpatient or Day case admission on 31 December 2019 were unavailable. This is 7.2% of the total waiting list, a decrease from 7.6% 31 December 2018.
On 31 December 2019, the highest rate of unavailability in Scotland was reported by NHS Shetland (17.7%). NHS Borders (17.0%), NHS Orkney (13.6%), and NHS Dumfries & Galloway (12.4%) also displayed relatively high rates of unavailability.

Following the introduction of unavailability codes in October 2012, a detailed split of unavailability by NHS Board is available in the data tables.

2.4 Additions and Removals from list.

During the quarter ending 31 December 2019, there were 87,768 additions to the Inpatient or Day case waiting list and 85,014 removals across NHS Scotland. As removals did not exceed additions, the net effect is a 2,754 increase in waiting list size.

The majority of patients (82.2%) were removed from the list because they were admitted.

2.5 Non-Attendance Rates

During the most recent quarter, the Could Not Attend (CNA) rate was 6.7%. This is when a patient notifies the service in advance that they will be unable to attend the appointment. The Did Not Attend (DNA) rate was 1.2%.

For information on Cancellation by Service percentages, please see the monthly publication of Cancelled Planned Operations. Please note that these rates are calculated using a different cohort of patients and will include patients not covered by TTG.

2.6 Distribution of Wait

The distribution of wait provides an overview on how quickly the majority of patients are seen. 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. The unadjusted wait is the full waiting time experienced by the patient, from the date treatment is agreed to the date the patient is seen. Performance is measured against the adjusted wait.

Figure 13 illustrates length of wait in time bands of 3 weeks for quarter ending 31 December 2019. Over one in four patients (26.0%) waited less than three weeks and 71.9% of patients had an adjusted wait within 12 weeks across NHSScotland. The comparable figure for the unadjusted measure was 66.6% across NHSScotland.

To demonstrate the impact of the way waits are calculated (i.e. adjusting for patient availability), the distribution is shown for both unadjusted and adjusted waits in the data tables.
2.7 Patients not covered by TTG

The majority of patients waiting for an Inpatient or Day case admission are covered by TTG. However, patients who have had a diagnostic test in an Inpatient or Day case setting 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; and
- organ, tissue or cell transplantation whether from living or deceased donor.

Spinal treatment by injection or surgical intervention was excluded from TTG until 1 April 2014, and designated national specialist services for surgical intervention of spinal scoliosis was excluded until 1 October 2014. They have been included in the TTG reporting from these dates.

ISD collect information on waiting times for various aspects of healthcare provided by NHSScotland. Submission of data relating to patients not covered by the guarantee is not mandatory and as such the volume of data submitted can vary significantly from Board to Board. The figures below are therefore not comparable across Scotland and as such should be interpreted accordingly.

At 31 December 2019, 115,629 patients were waiting for planned Inpatient or Day case admission, of which 81,167 were covered by the TTG.

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 in the Diagnostic publication report.

2.8 Reducing Inpatient and Day Case Waiting Times

In October 2018, Scottish Government announced the Waiting Times Improvement Plan which focuses on reducing the length of time people are waiting for key areas of healthcare.

It is important to look at long term trends when it comes to recognising sustained improvement in waiting times. This is due to normal variation for example seasonality and month on month variation. An example of this is the month of February, as it is more likely to have fewer working days than other months of the year.

Clinically urgent patients will always take priority for treatment within NHS Boards. Many Boards, when seeking to reduce waiting times for patients, will initially focus on patients who have been waiting the longest; this is known as the ‘tail’. When boards focus on the ‘tail’ this will show as a worsening in performance for completed waits as the proportion of patients seen over 12 weeks will be greater than previous quarters. Conversely, the performance for ongoing waits will improve as the above patients have been taken off the waiting list, therefore there will be less patients waiting over 12 weeks.

Figure 14 illustrates this relationship between the performance for completed and ongoing waits. The ongoing waits have been ‘shifted forward’ three months and we can see that the trend for completed waits then falls into a similar trend as the ongoing waits after this time period. This suggests it takes three months to start seeing a change in completed waits performance reflected in ongoing waits performance.
Figure 14: Percentage of Inpatients and Daycases seen and waiting within 12 weeks (with ongoing waits ‘shifted forward’ three months), NHS Scotland

*Please note the vertical scale on the left hand side of the graph does not start at zero.*
Glossary

Patients waiting (Ongoing waits): refers to patients who are on the waiting list at a point in time (waiting list census) e.g. 28 February 2019 and they have not yet had their appointment/been admitted or received treatment.

Patients seen (Completed waits): refer to patients who have attended their appointment/been admitted/received treatment and are subsequently taken off the waiting list.

TTG (Treatment Time Guarantee): refers to the 12 weeks Treatment Time Guarantee (TTG) written into legislation for eligible patients who are due to receive planned inpatient or day case treatment from 1 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.

Adjusted wait: deducts periods where the patient is unavailable (e.g. for medical or patient advised reasons). Patients who reject a reasonable offer package, cancel or don’t attend an appointment have their waiting times clock reset to zero.

Unadjusted wait: is the total length of time between the patient being added to the waiting list and the patient being removed from the waiting list. It includes time when the patient is unavailable for patient advised or medical reasons and also any time before the patient's waiting times clock is reset (due to appointment cancellation, non-attendance or rejection of reasonable offer package).

Could Not Attend (CNA): a patient who cancels an appointment in advance is recorded as a Could Not Attend (CNA). The CNA rate is the number of CNAs presented as a proportion of all appointments which could have been cancelled during the reporting period. That is, any offer for an appointment date before the end of the reporting period which had not been cancelled before the start of the reporting period.

Did Not Attend (DNA): a patient who does not attend an accepted appointment and gives the hospital no prior notice is recorded as a Did Not Attend (DNA). The DNA rate is the number of DNAs presented as proportion of all appointments which patients could have attended during the reporting period. That is, any appointment which had not been cancelled before the day of the appointment.

Cancelled by service: an appointment cancelled by the hospital is recorded as a Cancellation by service. The cancellation by service rate is the number of cancellations by the service presented as a proportion of all appointments which the Service could have cancelled during the reporting period. That is, any accepted offer for an appointment date before the end of the reporting period which had not been cancelled before the start of the reporting period.
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Further Information

Further Information can be found on the ISD website. For more information on Stage of Treatment see the Stage of Treatment section of our website. For related topics, please see the Waiting Times pages.

The next release of this publication will be May 2020.

Rate this publication

Please provide feedback on this publication to help us improve our services.
Appendices

Appendix 1 – Background Information

Waiting Times - History and Performance Indicators

Inpatient and Day case Target & Standards

From the 1 October 2012, the Patient Rights (Scotland) Act 2011 establishes a 12 week maximum waiting times for the treatment of all eligible patients who are due to receive planned treatment delivered on an inpatient or day case basis (known as Treatment Time Guarantee).

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).

Prior to 1 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.

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.

NHS Boards were expected to improve the 12 week outpatient waiting times performance during 2015/16 to achieve a 95% standard with a stretch aim to 100%, which applies to all sources of referral for first New Outpatient appointment. In addition, ISD monitor waits over 16 weeks which are considered by the Scottish Government to be ‘longstops’.

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.
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.

From 1st October 2019, the 8 key diagnostic tests are no longer included under the New Outpatient waiting times figures. Waiting times for the 8 key diagnostic tests will continue to be published under the Diagnostics publication.

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 25 years and are shown in Table A1. There are two statistics of interest in this regard for assessing NHS hospitals' performance:

- **Patients waiting (Ongoing waits)** – refers to patients who are on the waiting list at a point in time (waiting list census) e.g. 28 February 2019 and they have not yet had their appointment/been admitted or received treatment.
- **Patients seen** – refer to patients who have attended their appointment/been admitted/received treatment and are subsequently taken off the waiting list.
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.

Patient unavailability

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

- 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 1 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;

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. PFB is applicable to New Outpatients and Diagnostics only.

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 12 weeks Treatment Time Guarantee (TTG) written into legislation for eligible patients who are due to receive planned inpatient or day case treatment from 1 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 1 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.

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 1 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

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Referral to Treatment</th>
<th>Diagnostic</th>
<th>Stage of Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991</td>
<td>18 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Apr 1997</td>
<td>12 months IPDC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31 Dec 2003</td>
<td>9 months IPDC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31 Dec 2005</td>
<td>6 months IPDC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31 Dec 2007</td>
<td>9 weeks</td>
<td>18 weeks OP/IPDC</td>
<td></td>
</tr>
</tbody>
</table>

**January 2008 – New Ways**

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Referral to Treatment</th>
<th>Diagnostic</th>
<th>Stage of Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>31 Mar 2009</td>
<td>6 weeks</td>
<td>15 weeks OP/IP</td>
<td></td>
</tr>
<tr>
<td>31 Mar 2010</td>
<td>4 weeks</td>
<td>12 weeks OP/IP</td>
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**April 2010 – New Ways Refresh**

<table>
<thead>
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<th>Effective Date</th>
<th>Referral to Treatment</th>
<th>Diagnostic</th>
<th>Stage of Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>31 Dec 2011</td>
<td>18 weeks</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**August 2012 – Waiting Time Guidance updated to incorporate Treatment Time Guarantee**

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Referral to Treatment</th>
<th>Diagnostic</th>
<th>Stage of Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Oct 2012</td>
<td></td>
<td></td>
<td>12 weeks IPDC 3</td>
</tr>
</tbody>
</table>

Notes:
1. This is a local target; the national target remains 6 weeks.
2. This is a guarantee written into legislation.
3. There is an agreement between NHS Boards and Scottish Government to manage Outpatients under the same guidance.
Appendix 2 – Data Quality

NHS Tayside implemented a new PAS (TrakCare) on 23rd June 2017. Due to technical issues, there is a delay in providing ISD with data. Most figures included in this publication covering from June 2017 to December 2018 have been provided directly from NHS Tayside PAS rather than the Waiting Times data mart.

NHS Lothian have identified issues with outpatient data submitted to ISD from Edinburgh Dental Institute. A combination of system and user issues has resulted in an understatement of the number of patients waiting and incorrect reporting of lengths of wait. Given these concerns records received from the Institute have been excluded from this publication. Further issues with the Edinburgh Dental Institute’s move to Trak in November 2019 have resulted in all of NHS Lothian’s dental specialties being excluded from the publication figures from quarter ending December 2019. NHS Lothian are working with ISD to re-establish the inclusion of Dental Institute data in future publications.

Detail on specific data quality issues experienced by Boards can be found on the dedicated webpage. Details of records which have been ‘filtered’ by Boards can also be found at this location.
# Appendix 3 – Publication Metadata

<table>
<thead>
<tr>
<th>Metadata Indicator</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>Publication title</strong></td>
<td>Inpatient, Day case and Outpatient Stage of Treatment Waiting Times</td>
</tr>
<tr>
<td><strong>Description</strong></td>
<td>Monthly and quarterly summary of waiting times and waiting lists in the acute sector of NHS Scotland.</td>
</tr>
<tr>
<td><strong>Theme</strong></td>
<td>Health and Social Care</td>
</tr>
<tr>
<td><strong>Topic</strong></td>
<td>Access and Waiting Times</td>
</tr>
<tr>
<td><strong>Format</strong></td>
<td>Excel workbooks and PDF</td>
</tr>
<tr>
<td><strong>Data source(s)</strong></td>
<td>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. Homeopathy, mental health and obstetrics specialties are not included. Data from 1 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 1 April 2014 is sourced from the warehouse again.</td>
</tr>
<tr>
<td><strong>Date that data are acquired</strong></td>
<td>Deadline for data submission is the 28th each month prior to the publication.</td>
</tr>
<tr>
<td><strong>Release date</strong></td>
<td>The last Tuesday of the month for each publication.</td>
</tr>
<tr>
<td><strong>Frequency</strong></td>
<td>Quarterly.</td>
</tr>
<tr>
<td><strong>Timeframe of data and timeliness</strong></td>
<td>Data from 1 January 2008 to date. There have been no delays in reporting.</td>
</tr>
<tr>
<td><strong>Continuity of data</strong></td>
<td>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. 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 1 October 2012, the introduction of Treatment Time Guarantee resulted in further changes. A full history of waiting times is available in Waiting Times &amp; Waiting List History.</td>
</tr>
<tr>
<td><strong>Revisions statement</strong></td>
<td>Process and background regarding the revision of data from October</td>
</tr>
</tbody>
</table>
2012 is detailed here.

Revisions relevant to this publication

All figures from October 2012 have been revised. Addressing a period of transition between October 2012 and March 2014, this ensures all figures are sourced from the ISD warehouse and the calculation of wait (applicable from 1 October 2012) is applied consistently to Inpatients, Day cases and New Outpatients.

Concepts and definitions

New Ways Definitional Rules and Guidance is available:

New Ways Rules & Guidance

TTG rules and guidance is available in the following documents:

Patient Rights (Scotland) Act 2011

The Regulations and Directions under the Act - CEL 17 (2012)

The Regulations (Amended) under the Act - Amendment Regulations (2014)


Updated version of the NHSScotland Waiting Time Guidance – CEL 33 (2012)

Relevance and key uses of the statistics

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 1 October 2012, Treatment Time Guarantee.

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 NHS Performs.

Accuracy

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.

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.

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).

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'.

| Completeness | 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).

Provisional analysis of refresh data showed that approximately 98% of data submitted to the Warehouse is published. |

| Comparability | 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).

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.

Collaborative efforts are also underway to produce comparisons to European waiting times. |

| Accessibility | It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines. |

| Coherence and clarity | 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.

Further features to aid clarity:

1. Attendances and performance data by Patient Type are available in separate tables to enable users to select a single measure for analysis.

2. All tables are printer friendly.

3. All Scotland summary data are presented first, with the option to view spreadsheets down to Board level.

4. Key data presented graphically. |

| Value type and unit of measurement | Number of patients seen, number of patients waiting and percentage distribution of wait; by NHS Board and nationally and by patient type (i.e. inpatients/day cases, new outpatients and return outpatients). |

| Disclosure | The ISD protocol on Statistical Disclosure Protocol is followed. |


<p>| UK Statistics Authority | Completed assessment by UK Statistics Authority. Report published |</p>
<table>
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<tr>
<th>Information Services Division</th>
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| Assessment | July 2010. |
| Last published | 26 November 2019 |
| Next published | May 2020 |
| Date of first publication | 27 May 2008 |
| Help email | nss.isdWAITINGTIMES@nhs.net |
| Date form completed | 07 February 2019 |
Appendix 4 – Early access details

Pre-Release Access
Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD is 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.

Standard Pre-Release Access:
Scottish Government Health Department
NHS Board Chief Executives
NHS Board Communication leads
Appendix 5 – 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](#).