Psychological Therapies Waiting Times in Scotland

Background Information

Quarter Ending 31 March 2020

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Background Information

This document contains details of policies, standards and investments that are relevant to the psychological Therapies Waiting Times, as well as details of the data collection processes used to obtain the data.

Data collection

When the psychological therapies data collection was first set up, the IT systems across NHS Boards were not set up to collect the data at patient level. Therefore, it was agreed to collect aggregate level data. NHS Boards submit aggregate level data to PHS in an Excel template. The template has evolved over time. The current template is set up to collect information on patients who waited during the month and information on patients waiting at the end of each month. This information (number of people) is collected in weekly time bands to allow calculation of the median and 90th percentile. A separate Excel sheet is set up for adjusted and unadjusted waits.

Why are waiting times important?

The Scottish Government is committed to delivering faster access to psychological therapies for those with mental illness or disorder. Patients and clinicians have identified access to therapies as a key service improvement to better meet their needs and expectations. Psychological therapies have an important role in helping people with mental health problems, who should have access to effective treatment, both physical and psychological. It is generally accepted that these therapies can have demonstrable benefit in reducing distress, symptoms, risk of harm to self or others, health related quality of life and return to work. The Scottish Government recognises that delivering faster access is a significant and complex challenge, and sees the standard as an opportunity to drive local service redesign informed by evidence.
Mental Health Policy and Standards

The Mental Health Strategy is set within the context of the NHS Scotland Quality Strategy [http://www.scotland.gov.uk/Publications/2010/05/10102307/0](http://www.scotland.gov.uk/Publications/2010/05/10102307/0) which sets out three quality ambitions that care must be person-centred, safe and effective.

Developments in mental health care have been driven by a series of reports and policy recommendations:

In April 2011, a **HEAT Target** for psychological therapies was introduced. This target (now a Local Delivery Plan (LDP) standard) is that no person will wait longer than 18 weeks from referral to treatment for psychological therapies, set from December 2014. Following the conclusion of previously planned work on a tolerance level for psychological therapies waiting times and engagement with NHS Boards and other stakeholders, the Scottish Government has determined that the psychological therapies standard should be delivered for at least 90% of patients.

In August 2012, the **Mental Health Strategy for Scotland: 2012-2015** was produced which set the policy direction for the next four years and included a commitment to achieving and maintaining waiting times standards. In March 2017, this was updated and reissued as the **Mental Health Strategy 2017-2027**.

In November 2012, the Scottish Government issued the **Summary Report on the Application of NHSScotland Waiting Times Guidance**.

**Child & Adolescent Mental Health (CAMH) Services Waiting Times**

Waiting times for [CAMH Services](http://www.isdscotland.org/Health-Topics/Mental-Health/MHAIST/) are also published this quarter.

**Workforce Information**

The [Psychology Workforce Planning Project](http://www.isdscotland.org/Health-Topics/Mental-Health/MHAIST/) was initiated in 2001 and was a collaboration between NHS Education for Scotland (NES) and ISD (now part of PHS). As of 1st October 2019, NHS Education for Scotland (NES) has taken responsibility for some national workforce data, statistical & intelligence functions. A joint letter [346Kb](#) from the Chief Executives of NSS and NES, dated 23rd August 2019, details the rationale for the changes and arrangements for the transfer of these functions.

- In 2016, Scottish Government asked Healthcare Improvement Scotland to lead a programme of work to improve access to psychological therapies. As a partner in this programme of work, ISD (now part of PHS) provide data, analytical and intelligence support working closely with NHS Boards.

**Notes**

1. **HEAT**: Health improvement for the people of Scotland, Efficiency and government improvements, Access to services, Treatment to appropriate individuals
2. The LDP Standards now replace the system of **HEAT Targets** and Standards with the vast majority of LDP Standards being former HEAT Targets. LDP Standards are priorities that are set and agreed between the Scottish Government and NHS Boards to provide assurance on NHSScotland performance.