Diagnostic Waiting Times
Quarter Ending: 30 June 2020
Publication date: 25 August 2020
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 July 2010. The OSR is the regulatory arm of the UK Statistics Authority.

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. Public Health Scotland (PHS) continues to be committed to improving the information on waiting times along with our key stakeholders, the NHS Boards and Scottish Government.

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

On 31 March 2009, the Scottish Government introduced the waiting time standard that patients waiting for one of the eight key diagnostic tests and investigations would be waiting no longer than six weeks (42 days). This supersedes nine weeks, which was initially introduced on 31 December 2007.

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

<table>
<thead>
<tr>
<th>Endoscopy</th>
<th>Radiology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upper Endoscopy</td>
<td>CT Scan</td>
</tr>
<tr>
<td>Lower Endoscopy (excluding Colonoscopy)</td>
<td>MRI Scan</td>
</tr>
<tr>
<td>Colonoscopy</td>
<td>Barium Studies</td>
</tr>
<tr>
<td>Cystoscopy</td>
<td>Non-obstetric ultrasound</td>
</tr>
</tbody>
</table>

NHS Boards submit to PHS the number of NHS patients who are waiting for any of the eight diagnostic tests and investigations at the end of the month. The standard end point that the wait is measured to, i.e. when the clock stops, is when the verified results are available for reporting. However, due to IT system constraints, in some cases for both Endoscopy and Radiology tests, the clock stops on the day the test is carried out.

This publication is split into three main sections: 8 Key diagnostic tests, Radiology tests and Endoscopy tests. Further detail can be found at the beginning of each section.

Further background and data quality information can be found on the website.
Main Points

The Scottish Government waiting time standard states that patients waiting for one of the eight key diagnostic tests and investigations should be waiting no longer than six weeks. The period of waits covers the time between the date the request for the test or procedure is received within the department and the date when the verified report has been received by or made available to the requester. It is not yet possible to measure this entire patient journey across Scotland. As a consequence, the statistics presented here relate to number of patients waiting at the end of a month and the length time they had been waiting so far.

Please note that NHS Greater Glasgow & Clyde’s radiology figures for March 2020 have been revised from the previous publication, see the metadata for more details.

Note that the statistics presented for this period are affected by the COVID-19 (Coronavirus) outbreak. On the 17 March, NHSScotland was placed under emergency measures and Boards were asked to suspend all non-urgent elective treatment. Later on the 23 March the nation entered a period of ‘lockdown’. These measures affected normal referral and treatment patterns. In particular, there is likely to have been less referrals to services as well as less patients seen from the latter weeks of March onwards. From 29 June, boards started to gradually resume some screening services including endoscopies and other diagnostic tests. Where possible we have highlighted where these factors may be influencing the statistics shown.

At 30 June 2020:

- There were 98,332 patients waiting for the eight key diagnostic tests. This is 11.4% higher (10,031 patients) than 29 February 2020 when NHSScotland was placed under emergency measures and non-urgent treatment was paused.
  - There were 29,925 patients waiting for an endoscopy test, an increase of 7,493 (33.4%) from 29 February 2020.
  - There were 68,407 patients waiting for a radiology test, an increase of 2,538 (3.9%) from 29 February 2020.
- Due to a reduction in referrals and reduced levels of testing from March onwards, the distribution in the length of time patients had been waiting had changed significantly:
  - Only 35.4% of patients had been waiting six weeks or less (42 days) compared to 84.7% at the end of February. This percentage was greater for those waiting for the Radiology tests (40.9%) but less for those waiting for the endoscopy tests (22.8%).
  - Half of patients had been waiting over 13 weeks (50.5%), compared to just 5.1% at 29 February. More specifically, 44.7% (30,551) of those waiting for a
radiology test and 63.9% (19,127) of those endoscopy test had been waiting over 13 weeks.
Results and Commentary

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

1. All Key Diagnostic Tests

This section provides an overview of statistics on all of the eight key diagnostic tests as at the end of June 2020.

1.1 Patients Waiting

Table 1 shows the position at the end of each month in respect of the number of patients waiting for the eight key diagnostic tests and investigations. At the end of June 2020, there were 98,332 patients waiting, 11.4% (up 10,031) higher than the end of February 2020, which was just under two weeks before NHSScotland was placed under emergency measures in response to the Covid-19 outbreak. During this same time period, the number of patients waiting for endoscopy tests increased by 33.4% (up 7,493) while the number waiting for radiology tests increased 3.9% (up 2,538).

The impact of the introduction of emergency measures can also be observed on the percentage of patients that had been waiting no more than six weeks (42 days). This reduced from 75.1% at the end of March to 27.9% by the end of May. At the end of June, 35.4% of patients had been waiting no more than six weeks suggesting some increase to both the number of referrals and patients seen as the phased remobilisation of services began. This percentage was higher for those waiting for radiology tests (40.9%) but lower for those waiting for endoscopies (22.8%).

Further details on the planned resumption of services across NHSScotland can be found here.
Table 1: Patients waiting for a diagnostic test at the end of each Month

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>8 key diagnostic tests</td>
<td>Total Waiting Over 6 weeks</td>
<td>88,012</td>
<td>88,301</td>
<td>84,556</td>
<td>91,208</td>
<td>92,595</td>
<td>98,332</td>
</tr>
<tr>
<td></td>
<td>% within 6 weeks</td>
<td>16,212</td>
<td>13,500</td>
<td>21,050</td>
<td>65,311</td>
<td>66,726</td>
<td>63,550</td>
</tr>
<tr>
<td></td>
<td></td>
<td>81.6%</td>
<td>84.7%</td>
<td>75.1%</td>
<td>28.4%</td>
<td>27.9%</td>
<td>35.4%</td>
</tr>
<tr>
<td>All Endoscopy</td>
<td>Total Waiting Over 6 weeks</td>
<td>22,686</td>
<td>22,432</td>
<td>23,328</td>
<td>25,670</td>
<td>27,623</td>
<td>29,925</td>
</tr>
<tr>
<td></td>
<td>% within 6 weeks</td>
<td>7,875</td>
<td>7,009</td>
<td>9,340</td>
<td>19,648</td>
<td>22,757</td>
<td>23,088</td>
</tr>
<tr>
<td></td>
<td></td>
<td>65.3%</td>
<td>68.8%</td>
<td>60.0%</td>
<td>23.5%</td>
<td>17.6%</td>
<td>22.8%</td>
</tr>
<tr>
<td>All Radiology</td>
<td>Total Waiting Over 6 weeks</td>
<td>65,326</td>
<td>65,869</td>
<td>61,228</td>
<td>65,538</td>
<td>64,972</td>
<td>68,407</td>
</tr>
<tr>
<td></td>
<td>% within 6 weeks</td>
<td>8,337</td>
<td>6,491</td>
<td>11,710</td>
<td>45,663</td>
<td>43,969</td>
<td>40,462</td>
</tr>
<tr>
<td></td>
<td></td>
<td>87.2%</td>
<td>90.1%</td>
<td>80.9%</td>
<td>30.3%</td>
<td>32.3%</td>
<td>40.9%</td>
</tr>
</tbody>
</table>

For each NHS Board, Figure 1 shows the percentage of patients who had been waiting no more than six weeks at the end of June for either an endoscopy or radiology test. The percentages shown vary considerably. The percentage waiting no more than 6 weeks for an endoscopy ranged from 16.0% for NHS Tayside to 73.7% for NHS Orkney whilst the percentage waiting no more than 6 weeks for a radiology test was lowest for NHS Grampian (34.4%) but highest for NHS Western Isles (93.1%).
Figure 1: Percentage of patients waiting six weeks or less for a diagnostic test by NHS Board and test type; at 30 June 2020

Endoscopy

- Ayrshire & Arran: 19.1% (548)
- Borders: 56.7% (85)
- Dumfries & Galloway: 51.6% (235)
- Fife: 25.7% (175)
- Forth Valley: 40.8% (228)
- Grampian: 24.1% (513)
- Greater Glasgow & Clyde: 27.9% (2091)
- Highland: 18.2% (326)
- Lanarkshire: 21.1% (1085)
- Lothian: 18.3% (1049)
- Orkney: 73.7% (14)
- Shetland: 62.8% (27)
- Tayside: 16.0% (444)
- Western Isles: 20.7% (18)

Radiology

- Ayrshire & Arran: 34.1% (2214)
- Borders: 67.2% (524)
- Dumfries & Galloway: 71.3% (981)
- Fife: 39.2% (1718)
- Forth Valley: 93.2% (1212)
- Grampian: 34.4% (3193)
- Greater Glasgow & Clyde: 34.5% (6581)
- Highland: 46.3% (1493)
- Lanarkshire: 43.4% (2582)
- Lothian: 51.5% (4393)
- Orkney: 63.8% (44)
- Shetland: 39.1% (107)
- Tayside: 36.5% (2711)
- Western Isles: 93.1% (27)
1.2 Trend

Figure 2 shows the number of patients waiting for the 8 key diagnostic tests between June 2018 and June 2020. There was little variation in the long term trend prior to the COVID-19 outbreak. A similar trend can be observed for the number of patients who had been waiting more than six weeks at the end of each month. However, the effect of the suspension of non-urgent activity can also be observed - between the end of March and the end of May the number of patients who had been waiting over six weeks increased from 21,050 to 66,726. By the end of June this has reduced slightly to 63,550.

**Figure 2: Number of patients waiting for a diagnostic test; monthly trend**
1.3 Distribution of Waits

For both endoscopy and radiology tests, Figure 3 explores the variation in the time that patients had been waiting, comparing those waiting at the end of February, just before the Covid-19 ‘lockdown’ period began, with those waiting at the end of June. Note that the current data collection design is limited in respect of capturing finer detail on those experiencing long waits with the waits that are 13 weeks or over being the highest time band available. PHS will be working with Boards in preparation for the next publication in order to explore the feasibility of capturing more detail on the longer waits now being experienced by patients.

As anticipated, Figure 3 shows a significant shift in the distribution of waits between February and June for those waiting for both endoscopy and radiology tests. This is due to there being a significant drop in both the number of patients referred for tests and the number of tests performed, with many of those referred experiencing longer waits as a consequence of reduced testing capacity. For instance, at the end of February, 45.1% (29,702) had been waiting less than 2 weeks for a radiology test. By the end of June, this had dropped to 22.0% (15,053). Using the same time frames, the number who had been waiting less than two weeks for an endoscopy fell from 34.2% (7,682) to 10.4% (3,118).

In contrast there was a large increase in the number and percentage of patients who had been waiting over 13 weeks by the end of June. Specifically, 44.7% (30,551) of those waiting for a radiology test and 63.9% (19,127) of those waiting for an endoscopy test had been waiting over 13 weeks. However, Figure 4 shows there was a large degree of variation across boards in this statistic, ranging from 3.0% (NHS Forth Valley) to 53.3% (NHS Ayrshire & Arran) for a radiology test and 21.1% (NHS Orkney) to 76.9% (NHS Tayside) for an endoscopy.
Figure 3: Distribution of waits for an endoscopy and radiology test

1. Note that when referring to the number of weeks patients had been waiting throughout this report, each time band consists of 7 days. For instance, a wait of 1-2 weeks equates to 8-14 days, whilst a wait of 2-3 weeks is 15-21 days.
Figure 4: Number and percentage of patients waiting over 13 weeks for an endoscopy or radiology test; NHS Board comparison

**Endoscopy**
- Ayrshire & Arran: 67.9% (1944)
- Borders: 29.3% (44)
- Dumfries & Galloway: 33.0% (150)
- Fife: 58.7% (400)
- Forth Valley: 41.1% (230)
- Grampian: 60.4% (1287)
- Greater Glasgow & Clyde: 57.6% (4316)
- Highland: 72.8% (1302)
- Lanarkshire: 58.6% (3062)
- Lothian: 72.9% (4187)
- Orkney: 21.1% (4)
- Shetland: 27.9% (12)
- Tayside: 76.9% (2132)
- Western Isles: 65.5% (87)

**Radiology**
- Ayrshire & Arran: 53.3% (3487)
- Borders: 20.3% (158)
- Dumfries & Galloway: 16.6% (228)
- Fife: 40.4% (1767)
- Forth Valley: 3.0% (39)
- Grampian: 49.0% (4547)
- Greater Glasgow & Clyde: 51.6% (9845)
- Highland: 40.7% (1340)
- Lanarkshire: 46.2% (2748)
- Lothian: 31.2% (2660)
- Orkney: 4.3% (3)
- Shetland: 40.1% (119)
- Tayside: 49.1% (3648)
- Western Isles: 3.4% (1)
2. **Endoscopy Tests**

An endoscopy is a procedure used in medicine to look inside the body. The endoscopy procedure uses an endoscope to examine the interior of a hollow organ or cavity of the body. Unlike many other medical imaging techniques, endoscopes are inserted directly into the organ. An endoscopy can be used to:

- Investigate unusual symptoms
- Help perform certain types of surgery

Endoscopic services for all but emergency and essential procedures were paused due to COVID-19 (Coronavirus) on March 17th and this therefore has had an impact on the statistics presented in this section. Health boards have recently resumed endoscopy for patients with a suspicion of cancer and for cancer screening colonoscopies, where clinically safe to do so. Further details on how NHSScotland will re-mobilise endoscopy services can be found [here](#).

### 2.1 Patients waiting

Table 2 shows the position at the end of each month in respect of the number of patients waiting for an endoscopy test. The number of patients waiting for all endoscopy tests has risen steadily since the end of February with an additional 7,493 (up 33.4%) patients by the end of June. Of these additional patients 40% were waiting for an upper endoscopy, 11% for a lower endoscopy, 37% for a colonoscopy and 12% for a cystoscopy.

The number of patients waiting over six weeks more than trebled between the end of February and the end of June. The percentage of patients who had been waiting six weeks or less was at its lowest at the end of May (17.6%) but had increased to 22.8% by the end of June, perhaps due to a gradual increase in the number of new referrals. This percentage was highest for patients waiting for cystoscopies (33.5%).
Table 2: Number of patients waiting for an endoscopy test

<table>
<thead>
<tr>
<th>Diagnostic Test &amp; Investigations</th>
<th>Indicator</th>
<th>Jun-19</th>
<th>Feb-20</th>
<th>Mar-20</th>
<th>Apr-20</th>
<th>May-20</th>
<th>Jun-20</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>All Endoscopy</strong></td>
<td>Total Waiting</td>
<td>22,686</td>
<td>22,432</td>
<td>23,328</td>
<td>25,670</td>
<td>27,623</td>
<td>29,925</td>
</tr>
<tr>
<td></td>
<td>Over 6 weeks</td>
<td>7,875</td>
<td>7,009</td>
<td>9,340</td>
<td>19,648</td>
<td>22,757</td>
<td>23,088</td>
</tr>
<tr>
<td></td>
<td>% 6 weeks or less</td>
<td>65.3%</td>
<td>68.8%</td>
<td>60.0%</td>
<td>23.5%</td>
<td>17.6%</td>
<td>22.8%</td>
</tr>
<tr>
<td><strong>Upper Endoscopy</strong></td>
<td>Total Waiting</td>
<td>8,085</td>
<td>8,997</td>
<td>9,285</td>
<td>10,198</td>
<td>10,968</td>
<td>11,943</td>
</tr>
<tr>
<td></td>
<td>Over 6 weeks</td>
<td>2,804</td>
<td>3,260</td>
<td>4,253</td>
<td>8,269</td>
<td>9,384</td>
<td>9,531</td>
</tr>
<tr>
<td></td>
<td>% 6 weeks or less</td>
<td>65.3%</td>
<td>63.8%</td>
<td>54.2%</td>
<td>18.9%</td>
<td>14.4%</td>
<td>20.2%</td>
</tr>
<tr>
<td><strong>Lower Endoscopy</strong></td>
<td>Total Waiting</td>
<td>2,335</td>
<td>2,248</td>
<td>2,406</td>
<td>2,651</td>
<td>2,946</td>
<td>3,269</td>
</tr>
<tr>
<td></td>
<td>Over 6 weeks</td>
<td>859</td>
<td>671</td>
<td>982</td>
<td>2,044</td>
<td>2,425</td>
<td>2,536</td>
</tr>
<tr>
<td></td>
<td>% 6 weeks or less</td>
<td>63.2%</td>
<td>70.2%</td>
<td>59.2%</td>
<td>22.9%</td>
<td>17.7%</td>
<td>22.4%</td>
</tr>
<tr>
<td><strong>Colonoscopy</strong></td>
<td>Total Waiting</td>
<td>9,254</td>
<td>8,383</td>
<td>8,766</td>
<td>9,790</td>
<td>10,326</td>
<td>11,110</td>
</tr>
<tr>
<td></td>
<td>Over 6 weeks</td>
<td>3,134</td>
<td>2,194</td>
<td>2,866</td>
<td>7,085</td>
<td>8,505</td>
<td>8,626</td>
</tr>
<tr>
<td></td>
<td>% 6 weeks or less</td>
<td>66.1%</td>
<td>73.8%</td>
<td>67.3%</td>
<td>27.6%</td>
<td>17.6%</td>
<td>22.4%</td>
</tr>
<tr>
<td><strong>Cystoscopy</strong></td>
<td>Total Waiting</td>
<td>3,012</td>
<td>2,804</td>
<td>2,871</td>
<td>3,031</td>
<td>3,383</td>
<td>3,603</td>
</tr>
<tr>
<td></td>
<td>Over 6 weeks</td>
<td>1,078</td>
<td>884</td>
<td>1,239</td>
<td>2,250</td>
<td>2,443</td>
<td>2,395</td>
</tr>
<tr>
<td></td>
<td>% 6 weeks or less</td>
<td>64.2%</td>
<td>68.5%</td>
<td>56.8%</td>
<td>25.8%</td>
<td>27.8%</td>
<td>33.5%</td>
</tr>
</tbody>
</table>
2.2 Trend

Figure 7 shows the number of patients waiting for each of the four key endoscopy tests between June 2018 and June 2020. This shows that the increase in the number waiting for some categories began before the Covid-19 outbreak in Scotland. In particular, the number of patients waiting for upper endoscopies has been increasing since September 2019 and from October 2019 for those waiting for cystoscopies.

Figure 7: Number of patients waiting for each endoscopy test

![Graph showing the number of patients waiting for each endoscopy test between June 2018 and June 2020. The graph indicates that the increase in waiting began before the Covid-19 outbreak in Scotland.](image)

2.3 Distribution of Waits

Figure 8 explores in greater detail the length of time patients had been waiting for each of the key endoscopy tests at the end of June 2020, compared to the end of February 2020. This again shows a significant shift in how the waits being experienced by patients were distributed, as a consequence of the reduction in referrals and tests performed over this period.

It can be observed that each test follows a similar trend in that a large percentage were waiting over 13 weeks at the end of June, compared to the end of February.

Comparing the four test, the lowest proportion of waits over 13 weeks was reported for cystoscopy (51.5%) while upper endoscopy (68.2%) had the highest. Conversely, cystoscopy (33.5%) had the highest proportion waiting six weeks or less, while upper endoscopy (20.2%) reported the lowest. The biggest shift in the percentage waiting over 13 weeks was reported for lower endoscopy where it rose from 12.1% (273) in February to 64.8% (2,118) by the end of June (up 52.6 percentage points).
Note that when referring to the number of weeks patients had been waiting throughout this report, each time band consists of 7 days. For instance, a wait of 1-2 weeks equates to 8-14 days, whilst a wait of 2-3 weeks is 15-21 days.
3. Radiology tests

Radiology is a medical specialty that uses imaging to diagnose and treat diseases seen within the body. Radiologists use a variety of imaging techniques such as X-ray, ultrasound, computed tomography (CT), and magnetic resonance imaging (MRI) to diagnose and/or treat diseases.

Radiology services for all but emergency and essential procedures were paused due to COVID-19 (Coronavirus) on March 17th and have therefore had an impact on the statistics presented in this section. Health boards are prioritising radiology patients with emergency or urgent clinical needs including patients referred with an urgent suspicion of cancer.

3.1 Patients waiting

Table 3 shows the position at the end of each month in respect of the number of patients waiting for a radiology test. This shows the number waiting decreased by the end of March (down 4,641 from the end of February) but rose steadily thereafter to 68,407 by the end of June 2020. This represented a 2,538 (+3.9%) increase on the number waiting at the February. The initial drop seen in the number waiting at the end of March may be partly due to the impact of additional measures that were required to prioritise, manage and administer patients who were already referred for tests prior to services being reduced.

The number of patients waiting over six weeks also began to increase at the end of March with (up 5,219 from February), this number almost quadrupled by the end of April to over 45,663 patients. However, by the end of June this number had reduced to 40,462 patients.
### Table 3: Patients waiting for Radiology Tests

<table>
<thead>
<tr>
<th>Diagnostic Test &amp; Investigations</th>
<th>Indicator</th>
<th>Jun-19</th>
<th>Feb-20</th>
<th>Mar-20</th>
<th>Apr-20</th>
<th>May-20</th>
<th>Jun-20</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>All Radiology</strong></td>
<td>Total Waiting</td>
<td>65,326</td>
<td>65,869</td>
<td>61,228</td>
<td>65,538</td>
<td>64,972</td>
<td>68,407</td>
</tr>
<tr>
<td></td>
<td>Over 6 weeks</td>
<td>8,337</td>
<td>6,491</td>
<td>11,710</td>
<td>45,663</td>
<td>43,969</td>
<td>40,462</td>
</tr>
<tr>
<td></td>
<td>% 6 weeks or less</td>
<td>87.2%</td>
<td>90.1%</td>
<td>80.9%</td>
<td>30.3%</td>
<td>32.3%</td>
<td>40.9%</td>
</tr>
<tr>
<td><strong>CT</strong></td>
<td>Total Waiting</td>
<td>15,217</td>
<td>15,938</td>
<td>13,818</td>
<td>14,414</td>
<td>14,971</td>
<td>16,381</td>
</tr>
<tr>
<td></td>
<td>Over 6 weeks</td>
<td>1,666</td>
<td>1,027</td>
<td>1,942</td>
<td>8,543</td>
<td>8,705</td>
<td>8,766</td>
</tr>
<tr>
<td></td>
<td>% 6 weeks or less</td>
<td>89.1%</td>
<td>93.6%</td>
<td>85.9%</td>
<td>40.7%</td>
<td>41.9%</td>
<td>46.5%</td>
</tr>
<tr>
<td><strong>MRI</strong></td>
<td>Total Waiting</td>
<td>19,678</td>
<td>18,674</td>
<td>16,704</td>
<td>18,322</td>
<td>17,782</td>
<td>18,845</td>
</tr>
<tr>
<td></td>
<td>Over 6 weeks</td>
<td>3,759</td>
<td>3,284</td>
<td>4,459</td>
<td>12,887</td>
<td>12,603</td>
<td>11,766</td>
</tr>
<tr>
<td></td>
<td>% 6 weeks or less</td>
<td>80.9%</td>
<td>82.4%</td>
<td>73.3%</td>
<td>29.7%</td>
<td>29.1%</td>
<td>37.6%</td>
</tr>
<tr>
<td><strong>Barium Studies</strong></td>
<td>Total Waiting</td>
<td>145</td>
<td>255</td>
<td>225</td>
<td>282</td>
<td>373</td>
<td>405</td>
</tr>
<tr>
<td></td>
<td>Over 6 weeks</td>
<td>14</td>
<td>24</td>
<td>41</td>
<td>173</td>
<td>212</td>
<td>229</td>
</tr>
<tr>
<td></td>
<td>% 6 weeks or less</td>
<td>90.3%</td>
<td>90.6%</td>
<td>81.8%</td>
<td>38.7%</td>
<td>43.2%</td>
<td>43.5%</td>
</tr>
<tr>
<td><strong>Non-Obstetric Ultrasound</strong></td>
<td>Total Waiting</td>
<td>30,286</td>
<td>31,002</td>
<td>30,481</td>
<td>32,520</td>
<td>31,846</td>
<td>32,776</td>
</tr>
<tr>
<td></td>
<td>Over 6 weeks</td>
<td>2,898</td>
<td>2,156</td>
<td>5,268</td>
<td>24,060</td>
<td>22,449</td>
<td>19,701</td>
</tr>
<tr>
<td></td>
<td>% 6 weeks or less</td>
<td>90.4%</td>
<td>93.0%</td>
<td>82.7%</td>
<td>26.0%</td>
<td>29.5%</td>
<td>39.9%</td>
</tr>
</tbody>
</table>
3.2 Trend

Figure 9 shows the number of patients waiting for each of the four key radiology tests between June 2018 and June 2020. There was variation in the long term trend for each radiology test prior to the COVID-19 outbreak. The number waiting for an ultrasound remained fairly stable from March 2019 to April 2019. The number waiting for a CT and MRI had been relatively consistent with minor fluctuations observed up until the end of 2019, when the number waiting started to decrease for a MRI test. All tests show an increasing trend from March 2020 onwards.

3.3 Distribution of Waits

Figure 10 explores in greater detail the length of time patients had been waiting for each of the key radiology tests at the end of June 2020, compared to the end of February 2020. This again shows a significant shift in how the waits being experienced by patients were distributed, as a consequence of the reduction in referrals and tests performed over this period. This pattern is observed across each radiology test, although there is some variation. The biggest increase in the percentage waiting over 13 weeks was observed for Non-obstetric ultrasound, which increased from 0.2% in February to 45.7% at the end of June. Although all radiology tests reported a decrease in the percentage waiting within 2 weeks, Computer Tomography had the highest percentage waiting within this time frame at the end of June (28%), although this is still almost half of what was reported at the end of February.
Figure 10: Change in the distribution of time patients had been waiting for each radiology test

1. Note that the when referring to the number of week’s patients had been waiting throughout this report, each time band consists of 7 days. For instance, a wait of 1-2 weeks equates to 8-14 days, whilst a wait of 2-3 weeks is 15-21 days.
## Glossary

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

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

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

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

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

**Endoscopy**  
The endoscopy procedure uses an endoscope to examine the interior of a hollow organ or cavity of the body. Unlike many other medical imaging techniques, endoscopes are inserted directly into the organ. An endoscopy can be used to:

- Investigate unusual symptoms
- Help perform certain types of surgery

**Upper Endoscopy**  
Procedure to look at the upper part of the gastrointestinal (GI) tract. An area made up of:
**Esophagus**, which is the muscular tube that connects the throat to the stomach  
**Stomach**  
**Duodenum**, which is the top of the small intestine

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Description</th>
</tr>
</thead>
</table>
| **Lower Endoscopy** | Procedure to look at the lower gastrointestinal (GI) tract. This includes:  
- Rectum  
- Sigmoid colon |
| **Colonoscopy** | Procedure to check inside your bowels. The test can help find what's causing a patient’s bowel symptoms. |
| **Cystoscopy** | Procedure to look inside the bladder using a thin camera called a cystoscopy. A cystoscope is inserted into the urethra and passed into the bladder. |
| **Radiology** | Radiology is a medical specialty that uses imaging to diagnose and treat diseases seen within the body.  
Radiologists use a variety of imaging techniques such as X-ray, ultrasound, computed tomography (CT), and magnetic resonance imaging (MRI) to diagnose and/or treat diseases. |
| **Computerised tomography (CT)** | A scan that uses X-rays and a computer to create detailed images of the inside of the body. |
| **Magnetic Resonance Imaging (MRI Scan)** | A scan that uses strong magnetic fields and radio waves to produce detailed images of the inside of the body. Patients lie inside a tube during the scan. |
| **Barium** | A barium enema is a test that helps to highlight the large bowel so it can be clearly seen on an X-ray. |
| **Non-Obstetric Ultrasound** | Non-invasive scans to diagnose a range of conditions not relating to the care and treatment of women in childbirth and during the period before and after delivery. |
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Further Information

Further information and data for this publication are available from the publication page on our website.

The next release of this publication will be 24 November 2020.

Open data

Data from this publication is available to download from the Scottish Health and Social Care Open Data Portal.

NHS Performs

A selection of information from this publication is included in NHS Performs. NHS Performs is a website that brings together a range of information on how hospitals and NHS Boards within NHSScotland are performing.

Rate this publication

Let us know what you think about this publication via the link at the bottom of this publication page on the PHS website.
## Appendices

### Appendix 1 – Publication Metadata

<table>
<thead>
<tr>
<th>Metadata Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Publication title</strong></td>
<td>Diagnostic Waiting Times</td>
</tr>
<tr>
<td><strong>Description</strong></td>
<td>Monthly summary of patients waiting times for eight key diagnostic tests and investigations.</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</td>
</tr>
<tr>
<td><strong>Data source(s)</strong></td>
<td>Aggregate counts accredited and derived from individual NHSScotland Boards are submitted monthly to PHS using a defined Excel template. Associated with individual NHSScotland Boards Local Delivery Plans integrated to the 18Weeks RTT national standards.</td>
</tr>
<tr>
<td><strong>Date that data are acquired</strong></td>
<td>Deadline for data submission is the 22nd of each month, though files can be resubmitted up to one week before publication where the quality assurance process identifies differences with local figures.</td>
</tr>
<tr>
<td><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 December 2007 to date. There have been no delays in reporting.</td>
</tr>
<tr>
<td><strong>Continuity of data</strong></td>
<td>From January 2010 Golden Jubilee National Hospital data is included in the Scotland total.</td>
</tr>
<tr>
<td><strong>Revisions statement</strong></td>
<td>Historic data is not normally revised unless revision of data is required due to NHS Board resubmission of revised local data following publication.</td>
</tr>
<tr>
<td><strong>Revisions relevant to this publication</strong></td>
<td>NHS Greater Glasgow &amp; Clyde have resubmitted their radiology figures for March 2020. This was due to approximately 5000 patients being unreported as they were placed on a separate waiting list to allow NHS Greater Glasgow &amp; Clyde to prioritize their waiting list for urgent patients. This has since been rectified for subsequent month’s data and all patients on the waiting list are now being counted. The resubmission will affect the radiology and 8 key test figures for both NHS Greater Glasgow &amp; Clyde and NHSScotland.</td>
</tr>
<tr>
<td><strong>Concepts and definitions</strong></td>
<td>A Data Submission Guidance document is available in printed and electronic form. These have been provided to all NHS Boards’ key DMMI contacts. This information is now published and available to view at <a href="http://www.isdscotland.org/Health-Topics/Waiting-Times/Diagnostics/">http://www.isdscotland.org/Health-Topics/Waiting-Times/Diagnostics/</a></td>
</tr>
</tbody>
</table>
| **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.

Other uses of the data include information requests for a variety of customers, e.g. research charities; public companies; freedom of Information requests; information support to Boards; health intelligence work; parliamentary questions and local delivery plan (LDP) targets. |
| **Accuracy** | PHS only receives aggregate data from each NHS Board where the data for the previous quarter is confirmed by the submitting Board. Although aggregated data cannot be systematically validated by PHS, we does carry out quality assurance checks on the data submitted. Reported data are compared to previous figures and to expected trends. Derivation of the figures and data accuracy is a matter for individual NHS Boards. |
| **Completeness** | 100% of submitted data is used for analysis and publication. |
| **Comparability** | 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. |
| **Accessibility** | It is the policy of Public Health 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. Geographical hierarchies and national figures are presented using drop down menus.

Further features to aid clarity:
1. Tables use drop down menus to display data by a single Board.
2. Tables are printer friendly. |
| **Value type and unit of measurement** | Count of number of patients waiting over four and six weeks for Scotland and NHSScotland Health Boards. |
| **Disclosure** | The PHS protocol on Statistical Disclosure Protocol is followed. |
| **Official Statistics designation** | National Statistics. |
| **Last published** | 26 May 2020 |
| **Next published** | 24 November 2020 |
| **Date of first publication** | May 2009 |
| **Help email** | phs.isdwaitingtimes@nhs.net |
| Date form completed | 29 July 2020 |
Appendix 2 – Early Access details

Pre-Release Access
Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", PHS 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 3 – PHS and Official Statistics

About Public Health Scotland (PHS)

PHS is a knowledge-based and intelligence driven organisation with a critical reliance on data and information to enable it to be an independent voice for the public’s health, leading collaboratively and effectively across the Scottish public health system, accountable at local and national levels, and providing leadership and focus for achieving better health and wellbeing outcomes for the population. Our statistics comply with the Code of Practice for Statistics in terms of trustworthiness, high quality and public value. This also means that we keep data secure at all stages, through collection, processing, analysis and output production, and adhere to the ‘five safes’.