

## Greater Glasgow NHS Board

### Board Meeting

Tuesday, 15<sup>th</sup> November, 2005

Board Paper No. 2005/71

Director of Planning and Community Care

## WAITING TIMES

### Recommendation:

Members are asked to note progress.

#### A. BACKGROUND

At the January 2004 meeting, the Board noted that the national targets that we now need to address are:

- No inpatient/day case waits in excess of 26 weeks to be achieved by December 2005
- No outpatient waits in excess of 26 weeks to be achieved by December 2005
- Also, to continue to deliver and sustain all existing targets and guarantees e.g. cancer and CHD specific

#### B. CURRENT WAITING TIME FOR INPATIENTS AND DAY CASES

- The numbers of patients waiting over 26 weeks at October 31 is presented in table 1 for patients waiting without availability status codes (ASCs). Table 2 presents the numbers of patients with ASCs - e.g. where a patient has asked to defer admission.

Table 1 - Current numbers waiting >26 weeks - All NHS Board residents without ASCs

Division	Aug-05	Sep-05	Oct-05	Sep - Oct Variance	% Variance
North	199	138	145	+7	+5%
South	135	105	112	+7	+7%
Yorkhill	77	28	42	+14	+50%
<b>Total</b>	<b>411</b>	<b>271</b>	<b>299</b>	<b>+28</b>	<b>+10%</b>

Over 26 week waits increased by 28 or 10% between September and October, however we are still ahead of the plan - please refer to Section D - Performance against September 2005 planning milestone and Section E - December 2005 - Final Milestone for Maximum 26 Week Wait.

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Table 2 - Current numbers waiting >26 weeks - All NHS Board residents with ASCs

<b>Division</b>	<b>Aug-05</b>	<b>Sep-05</b>	<b>Oct-05</b>	<b>Sep - Oct Variance</b>	<b>% Variance</b>
North	3,764	3,703	3,739	+36	+1%
South	2,744	2,679	2,691	+12	+<1%
Yorkhill	746	562	557	+5	-1%
<b>Total</b>	<b>7,254</b>	<b>6,944</b>	<b>6,987</b>	<b>+43</b>	<b>+1%</b>

The number of patients waiting over 26 weeks with ASC codes increased marginally by 43 or 1% between September and October. However, this should also be viewed against a baseline actual position of 7,999 at March 2005 - the latest position is 1,012 or 13% better than this.

**Additional information to differentiate between ASC codes**

- Schedule 1 to this paper presents a definition of each ASC.
- Schedule 2 presents the waiting list position for patients with ASCs at October 31, 2005

**C. CURRENT WAITING TIME FOR NEW OUTPATIENTS**

Currently there are 3,501 outpatients waiting longer than the National target of a 26 week maximum wait - this reduced by 1,289 or 27% between September and October.

We reported to the Board in October 2004 that we are working on plans to eliminate all waits over 52 weeks as a first step to achieving our targets. In August 2004, the numbers waiting over 52 weeks was 6,756 - this has now reduced to 317 at the end of October 2005 - a reduction of 6,439 or 95%.

Also, please refer to table 4 and comments thereafter.

Table 3 - Current numbers waiting >26 weeks - All NHS Board residents - GP/GDP Referrals

<b>Division</b>	<b>Aug-05</b>	<b>Sep-05</b>	<b>Oct-05</b>	<b>Sep - Oct Variance</b>	<b>% Variance</b>
North	4,304	2,767	1,721	-1,046	-38%
South	1,915	1,782	1,600	-182	-10%
Yorkhill	199	241	180	-61	-25%
<b>Total</b>	<b>6,418</b>	<b>4,790</b>	<b>3,501</b>	<b>-1,289</b>	<b>-27%</b>

Note - The South and Yorkhill Divisions include all referrals sources, which are presented as a proxy for GP/GDP referrals - at present GP/GDP referrals cannot be shown separately.

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**D. PERFORMANCE AGAINST SEPTEMBER 2005 MILESTONE**

By 31 December 2005, NHS GG plan to have no patient waiting beyond 26 weeks for an outpatient appointment or for the subsequent inpatient/day case treatment that may be required.

To achieve this, we have submitted our milestones for waiting time performance improvement to the National Waiting Times Unit - for the quarters ending June and September 2005. The plans will ensure that we continue to phase the reduction in waiting times so that we both deliver the December 2005 target and are well placed to sustain it thereafter. The performance against the September 2005 milestones is set out in the tables below.

Table 4 - Outpatients Waiting >26 weeks - Performance against September 2005 Milestone

Division	Plan	Actual	Variance	% Variance
North	2,343	2,767	+424	+18%
South	1,335	1,782	+447	+33%
Yorkhill	0	241	+241	na
<b>Total</b>	<b>3,678</b>	<b>4,790</b>	<b>+1,112</b>	<b>30%</b>
Dental	1,392	872	-520	-37%
<b>Grand Total</b>	<b>5,070</b>	<b>5,662</b>	<b>+592</b>	<b>+12%</b>

- Outpatients waiting over 26 weeks - the actual position at the September milestone was 4,790 compared to the plan of 3,678 - we were therefore 1,112 or 30% adrift of the planned position. Please see final comment below.
- Outpatients - Dental Specialties waiting over 26 weeks - the actual position at the September milestone was 872 compared to the plan of 1,392 - we were therefore 520 or 37% better than the planned position.
- Although we measure performance separately for "acute" and dental outpatients, when we add both together - the joint outpatient performance was an actual of 5,662 against a plan of 5,070. We were 592 or 12% greater than this planned position.

We now have rigorous plans in place to ensure delivery of the December outpatient target. This is evidenced by the performance improvement to the end of October, where the actual of 4,790 at September has now reduced to 3,501 at the end of October.

Table 5 - Inpatients/day cases Waiting >26 weeks - Performance against Sept. 2005 Milestone

Division	Plan	Actual	Variance	% Variance
North	170	138	-32	-19%
South	160	105	-55	-34%
Yorkhill	28	28	0	0%
<b>Total</b>	<b>358</b>	<b>271</b>	<b>-87</b>	<b>-24%</b>

- Inpatients and day cases waiting over 26 weeks - the actual position at the September milestone was 271 compared to the plan of 358 - we were therefore **87 or 24% better than the planned** position.
- Inpatients and day cases waiting **over 18 weeks** - the actual position at September was 1,945 - by comparing this to our December of milestone of 2,200 - we have delivered the

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December milestone one quarter earlier than planned (assuming that we maintain this level of performance).

- Inpatients and day cases **with ASCs** - we do not have any specific milestones, although our performance in reducing ASCs is continuing - we have reduced from 10,753 inpatients/day cases waiting in June to 10,272 at the end of September - a reduction of 481 - for all ASC waits, **not just over 26 weeks**.

### **E. DECEMBER 2005 - FINAL MILESTONE FOR MAXIMUM 26 WEEK WAIT**

#### **Review of Plans**

Robust plans are now in place following the drop in outpatient performance at the September planning milestone and the marginal increase in inpatient/day case waits between September and October.

#### **Weekly Monitoring**

The following is an extract from a letter by the Health Minister to all Board Chairs - 12 October 2005. "It is imperative that Boards deliver this key Ministerial commitment by the end of December. The NWTU will be asking for "To Come In" dates to be monitored on a weekly basis, which will then make clear any capacity issues. I will personally monitor this. I stressed the need for Boards to ensure there are sufficient contingency arrangements in place for Christmas and New Year to avoid a position of patients not being treated before the deadline".

### **F. 2005/06 - REVIEW OF FIRST 6 MONTHS PLAN Vs ACTUAL PERFORMANCE COSTS, ACTIVITY & WAITING TIME IMPROVEMENT**

A review of the first 6 months performance is in preparation and will be reported to the next Board meeting.

### **G. ADDITIONAL FUNDING BY NWTU**

#### **Diagnostic Tests**

The NWTU wrote to all Boards on 12 September to announce funding to assist with delivery of the national diagnostic waiting time standards to be delivered by December 2007 (maximum wait of 9 weeks for 8 specific tests). In 2005/06 this amounts to £5m capital along with £4m revenue, for NHS Scotland. Also, as a minimum, £4m revenue will also be available in 2006/07.

The NHSGG bid is in the final stages of preparation and will be submitted to the NWTU in the next week.

#### **Cardiac Waiting Time Standards**

As with the diagnostic standards, the NWTU wrote to the Chairs of Regional Planning Groups on 14 September to announce funding to assist with delivery of the national cardiac waiting time standards. In 2005/06 this amounts to £3m capital along with £2m revenue, for NHS Scotland - with a further £2m capital and £2m revenue in 2006/07.

The West of Scotland bids were discussed at the West of Scotland Cardiac Consortium meeting on 31<sup>st</sup> October. Also, as a follow up, NHSGG and NHS Lanarkshire (as chair of the consortium) will meet with the NWTU on 14 November to discuss the bids further.

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### **Cataract Delivery Programme - CCI & NWTU**

The new standard is that no patient shall wait longer than 18 weeks for cataract surgery from referral to completion of treatment by December 2007. In response the CCI and NWTU have developed a delivery programme to assist NHS Boards. Funding of £750k per annum, for each of the next 3 years, will be made available to NHS Scotland to deliver this. To secure funds each Board will be required to produce a local project plan to deliver this.

NHSGG will produce a local project plan with a clear focus on delivering this new waiting time standard. This is in the very early stages of development.

### **H. UPDATE ON PLANS FOR ABOLISHING ASCs**

We reported to the Board in September that we would provide updates to future Board meetings on our progress in adhering to the 30 March guidance issued by the Scottish Executive Health Department (SEHD) for abolishing ASCs. The latest position is:

- Performance management of ASC waiting list - milestones for planned quarterly performance improvement through to December 2007 are currently being prepared - for submission to the NWTU.
- The ASC waiting list is currently being reviewed - patients who have been waiting the longest will be addressed as a priority.
- As requested - we have provided the SEHD with a copy of the NHSGG Waiting Times Policy, which is currently under review.
- IT Implications of "New Ways of Measuring and Defining Waiting" are being addressed in conjunction with ISD Scotland.

### **I. PROGRESS WITH PLANS - 2007 TARGETS**

#### **Maximum 18 week wait**

First pass plans for delivery are currently being reviewed and updated - specifically with reference to point J - below.

#### **Delivering the A&E 4 hour maximum wait**

We have received recent guidance on 26 October – addressed to NHS Board Chief Executives. A summary extract is provided in the next paragraph.

"You will recall our discussions at the Chief Executives' Meeting in September about delivery of the accident and emergency *Fair to All Personal to Each* target. This is being driven by a high level National Emergency Access Delivery Team, chaired by Tim Davison, sponsored by the Director of the National Waiting Times Unit and reporting into the Scottish Executive Health Department Board. This goes hand in hand with the supportive work of the Unscheduled Care Collaborative and is fully integrated. The purpose of this letter is to advise on the next steps and bring you up to date on the latest thinking re the delivery of this target.

Management Information and IT issues - availability of robust, clinically derived and comparable management information is of critical importance. All Boards must implement the nationally procured EDIS system, unless there are exceptional circumstances. Any Board proposing to use a different system must have strong reasons for doing so. If this is the case, a formal external 'inspection' will be needed to ensure absolute data compliance from a national

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perspective. This will be arranged by the Computing and IT strategy Division at the Scottish Executive.”

NHSGG will take forward the appropriate action as set out in this correspondence.

**J. EARLY DELIVERY OF PART OF 2007 TARGETS BY DECEMBER 2006**

The NWTU have asked all NHS Boards to produce plans for early delivery of part of the 2007 targets. The revised plan is required to deliver a maximum wait of 18 weeks **for inpatients/day cases without ASCs, by December 2006** - one year earlier than currently planned for.

Part of the current plans for:

- Delivery of a maximum 18 week wait for outpatients
- Abolition of ASCs
- Shorter maximum waiting times for specific conditions

Will remain set with an achievement date of December 2007.

The NWTU have also asked for our plans setting out milestones for number of inpatients waiting over 18 weeks between now and December 2006 to be submitted to them by 16 November 2005.

We will respond by the due date.

**AVAILABILITY STATUS CODES (ASCs) DEFINITIONS**

2	Where the patient has asked to delay admission for personal reasons or has refused a reasonable offer of admission.	Considered mainly PATIENT driven
3	In individual cases where, after discussion with the patient, the treatment has been judged of low clinical priority.	Considered mainly SERVICE driven
4	With highly specialised treatments identified at the time of placing the patient on the waiting list.	Considered mainly SERVICE driven
8	Where the patient did not attend nor give any prior warning.	Considered mainly PATIENT driven
9	In circumstances of exceptional strain on the NHS such as a major disaster, major epidemic or outbreak of infection, or service disruption caused by industrial action.	Considered mainly SERVICE driven
A	Patients under medical constraints (condition other than that requiring treatment) which affected their ability to accept and admission date, if offered.	Considered mainly PATIENT driven

**PATIENTS WAITING WITH AVAILABILITY STATUS CODES  
ALL DIVISIONS, NORTH, SOUTH AND YORKHILL - OCTOBER 31, 2005**

(To be read in conjunction with ASC definitions - see Schedule 1)

**Table 1 - All Divisions**

ALL WAITS	ASC Code						Total
	2	3	4	8	9	A	
Patients Waiting	4,710	289	1,054	1,687	0	2,475	10,215
% Distribution by ASC	46%	3%	10%	17%	0%	24%	100%
% Distribution by mainly PATIENT or SERVICE driven	Mainly PATIENT driven ASCs			Mainly SERVICE driven ASCs			
	87%			13%			

**Table 2 - North Glasgow Division (NGD)**

ALL WAITS	ASC Code						Total
	2	3	4	8	9	A	
Patients Waiting	2,477	0	347	925	0	1,620	5,369
% Distribution by ASC	46%	0%	6%	17%	0%	30%	100%
% Distribution by mainly PATIENT or SERVICE driven	Mainly PATIENT driven ASCs			Mainly SERVICE driven ASCs			
	94%			6%			

**Table 3 - South Glasgow Division (SGD)**

ALL WAITS	ASC Code						Total
	2	3	4	8	9	A	
Patients Waiting	2,069	0	539	637	0	764	4,009
% Distribution by ASC	52%	0%	13%	16%	0%	19%	100%
% Distribution by mainly PATIENT or SERVICE driven	Mainly PATIENT driven ASCs			Mainly SERVICE driven ASCs			
	87%			13%			

**Table 4 - Yorkhill**

ALL WAITS	ASC Code						Total
	2	3	4	8	9	A	
Patients Waiting	164	289	168	125	0	91	837
% Distribution by ASC	20%	35%	20%	15%	0%	11%	100%
% Distribution by mainly PATIENT or SERVICE driven	Mainly PATIENT driven ASCs			Mainly SERVICE driven ASCs			
	45%			55%			