

Statistical Press Notice
NHS referral to treatment (RTT) waiting times data
June 2015

NHS England released statistics today on referral to treatment (RTT) waiting times for consultant-led elective care. The statistics include patients waiting to start treatment at the end of June 2015 and patients who were treated during June 2015.

Main findings

- At the end of June 2015, 93.2 per cent of patients waiting to start treatment (incomplete pathways) were waiting up to 18 weeks.
- The number of RTT patients waiting to start treatment at the end of June 2015 was just under 3.2 million patients. Of those, 750 patients were waiting more than 52 weeks.
- For patients waiting to start treatment at the end of June 2015, the median waiting time was 6.0 weeks.
- During June 2015, 328,565 RTT patients started admitted treatment and 970,070 started non-admitted treatment (completed pathways).

Missing data

The following trusts did not submit any (admitted, non-admitted and incomplete) RTT pathway data:

- Barking, Havering and Redbridge University Hospitals NHS Trust
- Barts NHS Health Trust
- King's College Hospital NHS Foundation Trust
- The Princess Alexandra Hospital NHS Trust
- Walsall Healthcare NHS Trust

University Hospital of South Manchester NHS Foundation Trust did not submit data on incomplete RTT pathways.

Wye Valley NHS Trust did not submit any non-admitted or incomplete pathway data.

Lewisham and Greenwich NHS Trust did not submit any data for Lewisham Hospital.

Factoring in estimates based on the latest data submitted for each missing trust suggests the total number of RTT patients waiting to start treatment at the end of June 2015 may have been just over 3.4 million patients. See section 5 of 'Notes to editors' for details of the latest data submitted by missing trusts.

Further information

Detailed tables of incomplete and completed pathway waiting times by treatment function (specialty), commissioner and provider are available at:

<http://www.england.nhs.uk/statistics/rtt-waiting-times/>

Table 1 – RTT pathways by treatment function, June 2015, England

Treatment function	Incomplete pathways		Completed pathways	
	Total (all)	% within 18 weeks	Admitted Total (all)	Non-admitted Total (all)
General Surgery	283,761	90.5%	39,585	70,899
Urology	160,040	91.3%	20,667	36,121
Trauma & Orthopaedics	418,099	91.2%	62,322	97,126
ENT	228,365	93.2%	17,206	73,867
Ophthalmology	323,952	94.7%	46,851	92,363
Oral Surgery	136,196	92.6%	16,732	33,942
Neurosurgery	24,447	90.9%	2,559	4,948
Plastic Surgery	47,602	90.6%	12,311	11,390
Cardiothoracic Surgery	6,904	90.1%	2,095	1,156
General Medicine	45,363	96.3%	3,270	18,394
Gastroenterology	157,780	92.5%	16,231	34,369
Cardiology	148,859	93.9%	9,876	41,649
Dermatology	175,608	94.7%	8,382	69,502
Thoracic Medicine	67,613	94.3%	1,817	23,715
Neurology	91,674	93.9%	1,312	28,157
Rheumatology	62,409	96.4%	2,213	24,082
Geriatric Medicine	17,578	97.0%	156	11,018
Gynaecology	188,522	95.0%	22,518	69,405
Other	613,161	94.1%	42,462	227,967
England	3,197,933	93.2%	328,565	970,070

Table 2 – RTT waiting times time series, England

Incomplete pathways			
Month	Median wait (weeks)	95th percentile (weeks)	% within 18 weeks
August 2007	14.3	52+	57.2%
March 2008	9.8	52+	66.0%
March 2009	5.6	29.8	87.6%
March 2010	5.2	23.3	91.1%
March 2011	5.5	25.4	89.4%
March 2012	5.2	20.2	93.3%
March 2013	5.5	18.9	94.2%
March 2014	5.5	19.5	93.7%
Apr 2014	5.9	19.7	93.7%
May 2014	6.2	19.4	93.7%
June 2014	5.8	19.5	93.7%
July 2014	5.9	19.8	93.3%
August 2014	6.4	20.4	93.1%
Sept 2014	6.2	19.8	93.5%
October 2014	5.8	19.9	93.2%
Nov 2014	5.8	19.8	93.3%
Dec 2014	6.5	20.7	92.8%
Jan 2015	6.7	20.6	92.6%
Feb 2015	5.6	20.1	93.1%
March 2015	5.6	20.1	93.1%
April 2015	5.9	20.2	93.3%
May 2015	6.0	19.7	93.5%
June 2015	6.0	20.0	93.2%

Notes:

1. Median and 95th percentile times are calculated from aggregate data, rather than patient level data, and therefore are only estimates of the position on average waits.
2. Where the 95th percentile falls in the over 52 week time band, the estimates are less accurate. Hence, such figures are shown as 52+ weeks.
3. A more detailed time series table is available at: <http://www.england.nhs.uk/statistics/rtt-waiting-times/>

Notes to editors

1. Referral to Treatment (RTT) pathways

Patients referred for non-emergency consultant-led treatment are on RTT pathways. An RTT pathway is the length of time that a patient waited from referral to start of treatment, or, if they have not yet started treatment, the length of time that a patient has waited so far.

The following activities end the RTT pathway:

- first treatment – the start of the first treatment that is intended to manage a patient's disease, condition or injury in a RTT pathway
- start of active monitoring initiated by the patient
- start of active monitoring initiated by the care professional
- decision not to treat – decision not to treat made or no further contact required
- patient declined offered treatment
- patient died before treatment.

Admitted pathways are the waiting times for patients whose treatment started during the reporting period and involved admission to hospital. These are sometimes referred to as inpatient waiting times. They include the complete time waited from referral until start of inpatient treatment.

Non-admitted pathways are the waiting times for patients whose wait ended during the reporting period for reasons other than an inpatient or day case admission to hospital for treatment. These are sometimes referred to as outpatient waiting times. They include the time waited for patients whose RTT waiting time clock either stopped for treatment or other reasons, such as a patient declining treatment.

Incomplete pathways are the waiting times for patients waiting to start treatment at the end of the reporting period. These patients will be at various stages of their pathway, for example, waiting for diagnostics, an appointment with a consultant, or for admission for a procedure. These are sometimes referred to as waiting list waiting times and the volume of incomplete RTT pathways as the size of the RTT waiting list.

The Department of Health published the RTT Rules Suite on 28 November 2007. This document was updated in April 2014 and can be found at:

<https://www.gov.uk/government/publications/right-to-start-consultant-led-treatment-within-18-weeks>

Other guidance documents relating to RTT waiting times can be found at:

<http://www.england.nhs.uk/statistics/rtt-waiting-times/rtt-guidance/>

2. RTT waiting time rights and pledges

The NHS Constitution states that patients have the right to start non-emergency consultant-led treatment within 18 weeks of referral, unless they choose to wait longer or it is clinically appropriate that they wait longer, or for the NHS to take all reasonable steps to offer them a range of alternative providers if this is not possible.

3. RTT waiting times standards

NHS England published operational standards that set an expected level of RTT performance. These were set out in Everyone Counts: Planning for Patients 2014/15 to 2018/19. They were:

- 90% of admitted patients and 95% of non-admitted patients to start treatment within a maximum of 18 weeks from referral
- 92% of patients on incomplete pathways to have been waiting no more than 18 weeks from referral.

These standards left an operational tolerance to allow for patients for whom starting treatment within 18 weeks would be inconvenient or clinically inappropriate. These circumstances can be categorised as:

- patient choice – patients who choose to delay treatments for personal or social reasons
- co-operation – patients who do not attend appointments along their pathways
- clinical exceptions – patients for whom it is not clinically appropriate to start treatment within 18 weeks.

In addition, NHS England introduced a zero tolerance of any referral to treatment waits of more than 52 weeks in 2013/14, with contractual penalties for each such wait.

In June 2015, Simon Stevens accepted Sir Bruce Keogh's recommendations for improvements to these waiting time standards. The admitted and non-admitted operational standards will be abolished, and the incomplete pathway standard will become the sole measure of patients' constitutional right to start treatment within 18 weeks. The presentation of this statistical press notice has been amended to reflect this change.

The format of the admitted, admitted adjusted and non-admitted provider and commissioner data files published alongside this statistical press notice has also been amended to reflect the change in the operational standards. These files no longer include a column showing the percentage of pathways within 18 weeks. However, a full breakdown of waiting times by weekly time band is still available in the files.

Subject to Parliamentary approval, the necessary steps to remove the admitted and non-admitted standards from the Standing Rules Regulations will be completed by 1 October 2015.

4. RTT waiting times data collection

RTT data is collected from providers of consultant-led services for NHS patients in England and is reviewed and signed-off by English commissioners.

The data measures RTT waiting times in weeks, split by treatment function. The treatment functions are based on consultant specialties. The data return includes all

patients whose RTT clock stopped at any point in the reporting period or whose RTT clock is still running at the end of the reporting period.

There are two main central returns:

- Unadjusted: this return covers admitted patients, non-admitted patients and patients on incomplete pathways.
- Adjusted: this return covers admitted patients on an adjusted basis. Adjustments are allowed to admitted pathways for clock pauses. An RTT clock may be paused only where a decision to admit for treatment has been made, and the patient has declined at least two reasonable appointment offers for admission. The RTT clock is paused for the duration of the time between the earliest reasonable date offered and the date from which the patient makes themselves available for admission for treatment.

5. RTT data availability

Data for admitted patients (patients whose RTT clock stopped with an inpatient/ day case admission) has been published each month since January 2007 on an unadjusted basis, and since March 2008 on an adjusted basis.

Data for non-admitted patients (patients whose RTT clock stopped during the month for reasons other than an inpatient/day case admission) and incomplete RTT times for patients whose RTT clock is still running has been published each month since August 2007.

RTT waiting times figures are published to a pre-announced timetable, roughly 6 weeks after the end of the reference month. From August 2015, NHS England will publish the following statistics monthly on the same day, typically the second Thursday of each calendar month: RTT, Cancer, Diagnostics, A&E, Ambulance, NHS 111 and Delayed Transfers of Care. The first such consolidated publication is released today.

Seven trusts did not submit data on incomplete RTT pathways for June 2015. Additionally, Lewisham and Greenwich NHS Trust (RJ2) did not submit any data for Lewisham Hospital. Factoring in estimates based on the latest data submitted for each of these missing trusts suggests the total number of RTT patients waiting to start treatment at the end of June 2015 may have been just over 3.4 million patients. The latest figures submitted by missing trusts are shown in the table below.

Trust	Latest available incomplete RTT pathway data (rounded to nearest hundred)	Month incomplete pathway data last submitted
Barking, Havering and Redbridge University Hospitals NHS Trust	20,700	Nov-13
Barts NHS Health Trust	75,600	Aug-14
King's College Hospital NHS Foundation Trust	55,600	Mar-15
Lewisham and Greenwich NHS Trust*	25,000	May-15
The Princess Alexandra Hospital NHS Trust	10,200	June-14
University Hospital of South Manchester NHS Foundation Trust	18,800	Feb-15
Walsall Healthcare NHS Trust	13,800	Feb-14
Wye Valley NHS Trust	7,500	Mar-15

Note:

* To calculate the estimate of the total number of RTT patients waiting to start treatment at the end of June 2015, the partial incomplete pathway figure submitted Lewisham and Greenwich NHS Trust for June 2015 has been subtracted and the latest full incomplete pathway figure (for May 2015) added in.

To estimate the impact of missing data on completed (admitted and non-admitted) pathways, the total number of pathways per working day in each provider in the month prior to the gap in reporting can be applied to all missing months multiplied by the relevant number of working days in each month. Using this approach, the number of completed RTT pathways in the 12 months to June 2015 increased by 5.1% on the preceding 12 month period.

6. Average (median) waiting times

The median is the preferred measure of the average waiting time as it is less susceptible to extreme values than the mean. The median waiting times is the middle value when all patients are ordered by length of wait. This is the midpoint of the RTT waiting times distribution. For completed pathways, 50 per cent of patients started treatment within the median waiting time, and for incomplete pathways 50 per cent of patients were waiting within the median waiting time.

It should be noted that median times are calculated from aggregate data, rather than patient-level data, and therefore are only estimates of the position on average waits.

7. Interpretation of RTT waiting times

Care should be taken when making month-on-month comparisons of these figures as measures of waiting time performance are subject to seasonality. For example, adverse weather during winter may change the balance between elective and emergency care. Similarly, the number of patients starting treatment will be influenced by the number of working days in the calendar month.

8. National Statistics

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics. Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs
- are well explained and readily accessible
- are produced according to sound methods, and
- are managed impartially and objectively in the public interest.

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

9. Feedback welcomed

We welcome feedback on the content and presentation of RTT statistics within this statistical press notice and those published on the NHS England website. If you have any comments on this, or any other issues regarding RTT statistics, please email RTTdata@dh.gsi.gov.uk

In response to the changes to the waiting times operational standards announced in June 2015, NHS England will no longer collect admitted adjusted RTT data from October 2015. NHS England is seeking comments from data producers and users on proposals to collect some new RTT data items from October 2015. Details of the proposed new data items, and how to submit your views, are available here: https://www.engage.england.nhs.uk/consultation/aligning-publication-performance-data/consult_view.

10. Additional Information

For press enquiries, please e-mail the NHS England media team at nhsengland.media@nhs.net or call 0113 825 0958 or 0113 825 0959.

The Government Statistical Service (GSS) statistician responsible for producing these data is:

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