User experiences of using the monthly diagnostic waiting times and activity statistics

1. Introduction
The monthly Diagnostic Waiting Times and Activity Statistics are published as an Official Statistic.

It is important that our statistics meet the needs of the people who use them, and in particular that we gather and act upon feedback.

This document explains our current understanding of what people use these statistics for. It sets out the feedback we have received from users and explains how we are addressing these points.

2. Overall purpose of the statistics
These statistics were designed to provide a summary of NHS waiting times for diagnostic tests and to give an indication of whether the number of tests carried out in the NHS each year is increasing. They allow the user to know:

- How the NHS is performing nationally and locally against the national standard that less than 1% of patients will wait 6 weeks or over for a diagnostic test.
- Whether access to NHS diagnostic services is getting better, worse, or staying the same.

We know from user feedback that these statistics are used for a range of purposes, such as:

**Informing the general public’s choices about service providers**
Individual patient decisions about which hospital to attend for a diagnostic test may be based upon these statistics. The statistics allow individuals to compare their local NHS Trust to the national average to help them make informed decisions. They enable the public to make informed decisions about whether access to NHS services is getting better or worse.

**Informing the general public’s choices about the performance of government and public bodies**
These statistics enable the citizen to monitor the government’s and NHS England’s progress against meeting the standards set out in the NHS mandate. They enable the public to assess whether NHS England is upholding the rights and commitments set down in the NHS constitution in relation to access to NHS services.

High quality care for all, now and for future generations
**Decision making about policies, programmes and projects: Policy monitoring**
These statistics were used by the Department of Health when monitoring the extension of the national bowel screening programme. In particular, they were used to raise awareness of variation in performance and take up rates of endoscopy tests following extension of the national bowel screening programme. These statistics are also used by the NHS Intensive support team to identify which providers need support in managing their waiting lists in order to achieve the national standard on diagnostics waiting times. At a local level, NHS organisations make use of these statistics to benchmark their own performance and identify the areas that they need to work on in order to meet the national standard.

**Informing private sector commercial choices: Targeting local markets**
Independent private providers of diagnostic tests can use our data to assess whether there is sufficient demand for them to open up a new service in addition to NHS hospitals. One of the key factors they are likely to take into account is the size of the waiting lists at existing NHS Trusts.

**Facilitating academic research**
Academics make use of our data and often require more detailed breakdowns of the data. These are used for a range of purposes including comparison of our statistics to other countries and assessing whether there are a sufficient number of MRI scanners in the UK.

### 3. Feedback from Users - Summary
This section provides a general summary of user feedback, and our response to specific points. Annex A provides details of queries or comments received directly from external users. Annex A also shows feedback that users gave to the UK Statistics Authority when these statistics were assessed in 2013.

**General Views**
Overall, users have commented that the statistics meet their needs and allow them to compare waiting times between different NHS organisations. This is the primary purpose of the statistics and therefore, the statistics meet this need. Feedback from external users tends to relate to requests for more detailed data or clarification.

**Level of Detail**
A common theme is a desire to provide more detailed information that is broken down by age, sex, diagnoses etc… Due to the way in which these statistics are collected, it is not possible to break down the aggregate totals that are provided by NHS trusts. We explain to users that the purpose of these statistics is to provide high level performance data and for more detailed information an individual level dataset, such as HES, would be required.

**How statistics are produced**
Some users have stated that they are unclear about the collection and collection process. Therefore, this information is now included in a new data quality and methodology statement so users can understand the process for producing the
Some external users often query us asking for the date of the next publication. Upon reviewing the website, we can understand how users may not find the link to the publication timetable. Therefore, we will amend the website so that users can navigate easily to the publication timetable.

How to give us your feedback

We welcome feedback from people who use these statistics. You can give us your views at this email address:
Unify2@dh.gsi.gov.uk
Annex A – details of individual user comments

The table below shows some examples of queries received directly from external users:

1. **Unify2** is NHS England’s standard online tool for the collection and sharing of NHS performance data.

<table>
<thead>
<tr>
<th>Who</th>
<th>Request / query</th>
<th>Response</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS Commissioning Support Unit</td>
<td>User wanted to access data via Unify2 and wanted to know when data would become available</td>
<td>Explained that data would be available in Unify2 same time as data published on website</td>
<td></td>
</tr>
<tr>
<td>Public</td>
<td>Enquiring about the next publication</td>
<td>Provide publication dates and link to publication plan</td>
<td></td>
</tr>
<tr>
<td>Academic</td>
<td>Enquiring if data available at lower level, split by age, sex, reason for scan</td>
<td>Explained that data was not collected at this level and advised them to contact Health and Social Care Information Centre</td>
<td></td>
</tr>
<tr>
<td>Academic</td>
<td>Enquiring if there was a list of MRI suites in the UK</td>
<td>Explained that we did not hold this information</td>
<td></td>
</tr>
<tr>
<td>NHS Trust</td>
<td>Querying how statistics are compiled</td>
<td>Explained process for collecting data and sent them guidance</td>
<td></td>
</tr>
</tbody>
</table>
Annex B – Feedback received by the UK Statistics Authority during their assessment of these statistics in August 2013

The UK Statistics Authority gathered feedback from 5 users during their assessment of these statistics in August 2013. Out of these 5 users, 2 stated that the statistics met their needs. Reasons for not meeting the needs of the other 3 users included not enough detailed data being available, no visualisation of trends and a lack of comparability with other parts of the UK.

In response to these comments, we will start to include trends in their monthly publications. As stated earlier in section 3, these data are collected to produce high level performance information and for more detailed information an individual level dataset, such as HES, would be required. In regards to comparability, users need to be aware that health is a devolved issue within the UK and each government is responsible for defining its own rules on waiting times.

Out of the 5 users, 3 stated that they have had good engagement with the producer team. This highlights that NHS England can do more to communicate with users, for which we have published a feedback form on the website. This is to help identify more external users of our statistics and to understand how they use the statistics.
The table below details the responses that were received by the UK Statistics Authority:

<table>
<thead>
<tr>
<th>Who</th>
<th>Feedback</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS England</td>
<td>The user uses the statistics to monitor the NHS Constitution and would like to obtain the data using secure electronic file transfer.</td>
<td>Due to the setup of the Unify2 system, we are unable to send data in this way.</td>
</tr>
<tr>
<td>Audiology lead in DH</td>
<td>The user uses the statistics to monitor Audiology waiting times and would like to see a visualisation of trends and for the data to be broken down further by adults and children.</td>
<td>We will start to include trends in our new publication and more detailed data can be obtained by contacting the Health and Social Care Information Centre.</td>
</tr>
<tr>
<td>Performance Lead in DH</td>
<td>The user uses the statistics to monitor NHS performance and finds it occasionally difficult to navigate the published spread sheets.</td>
<td>We will amend our outputs to resolve this issue.</td>
</tr>
<tr>
<td>BBC Scotland</td>
<td>The user would like to be able to compare diagnostic waiting times statistics between all parts of the UK.</td>
<td>Due to health been a devolved issue, each government can set its own waiting times definitions.</td>
</tr>
<tr>
<td>NHS Trust</td>
<td>User would like to see more detailed information on waiting times by specialty.</td>
<td>For more detailed information the user should contact the Health and Social Care Information Centre. The HES publication is derived from a patient level data set and more detailed information may be available.</td>
</tr>
</tbody>
</table>