



# **NHS inpatient admission and outpatient referrals and attendances**

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**Quarter Ending December 2017**

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# 1 Commentary

## 1.1 Key Points

This commentary covers NHS activity (inpatient and outpatient) in England, during the quarter ending 31<sup>st</sup> December 2017.

Quarterly activity data is collected on both a provider and a commissioner basis. Both show the same message, but all the figures used in this document are on a commissioner basis as provider data can sometimes include non-English commissioner activity.

The figures for a quarter can be affected by the number of working days. Data are usually adjusted for this where appropriate, to allow comparison on a like-for-like basis. However, example October to December 2016 and October to December 2017 both contained 63 working days, so data has not been adjusted.

The key points of this release are:

### **Inpatient Admissions**

- From Q3 2016/17 to Q3 2017/18 the number of decisions to admit decreased by 1,557 to 1.58 million (a decrease of 0.1%).
- The number of elective admissions decreased by 6,389 to 1.45 million (a decrease of 0.4%).

### **Outpatient referrals and attendances**

- From Q3 2016/17 to Q3 2017/18 the number of GP referrals made increased by 54,334 (an increase of 1.6%) to 3.39 million. The number of other referrals made increased by 153,124 (7.5%) to 2.19 million.
- From Q3 2016/17 to Q3 2017/18 first attendances at consultant outpatient clinics increased by 22,804 to 4.94 million (an increase of 0.5%). Total attendances increased by 148,822 to 15.32 million (1.0%).
- Did not attend (DNA) rate for first outpatient appointments was 8.8% for Q3 2016/17 and 8.8% for Q3 2017/18.

Table 1 shows the latest quarter's figures compared with the previous quarter and the same quarter last year. Figure 1 and Figure 2 show inpatient and outpatient activity from 2008/09 onwards. Figure 3 shows 'did not attend' (DNA) rates for first and subsequent outpatient appointments.

**Table 1: Inpatient and outpatient activity compared with last quarter and the same period in 2016/17, commissioner based**

	Q3 16/17	Q3 17/18 vs Q3 16/17	Q2 17/18	Q3 17/18 vs Q2 17/18	Q3 17/18
Decisions to admit	1,585,149	-0.1%	1,571,344	2.4%	1,583,592
Elective admissions	1,451,846	-0.4%	1,446,232	1.5%	1,445,457
GP referrals made	3,336,684	1.6%	3,482,505	-1.1%	3,391,018
Other Referrals	2,039,165	7.5%	2,180,172	2.2%	2,192,289
First attendances	4,918,002	0.5%	4,877,155	2.9%	4,940,806
Subsequent attendances	10,253,411	1.2%	10,241,195	3.0%	10,379,429

\*Percentage changes are adjusted for working days

## 1.2 Time Series Charts

Figure 1 below shows that there has been an increase in inpatient activity over time, although this trend has slowed in recent quarters.

**Figure 1: Inpatient activity, England, Q1 2008/09 to Q3 2017/18, commissioner based**

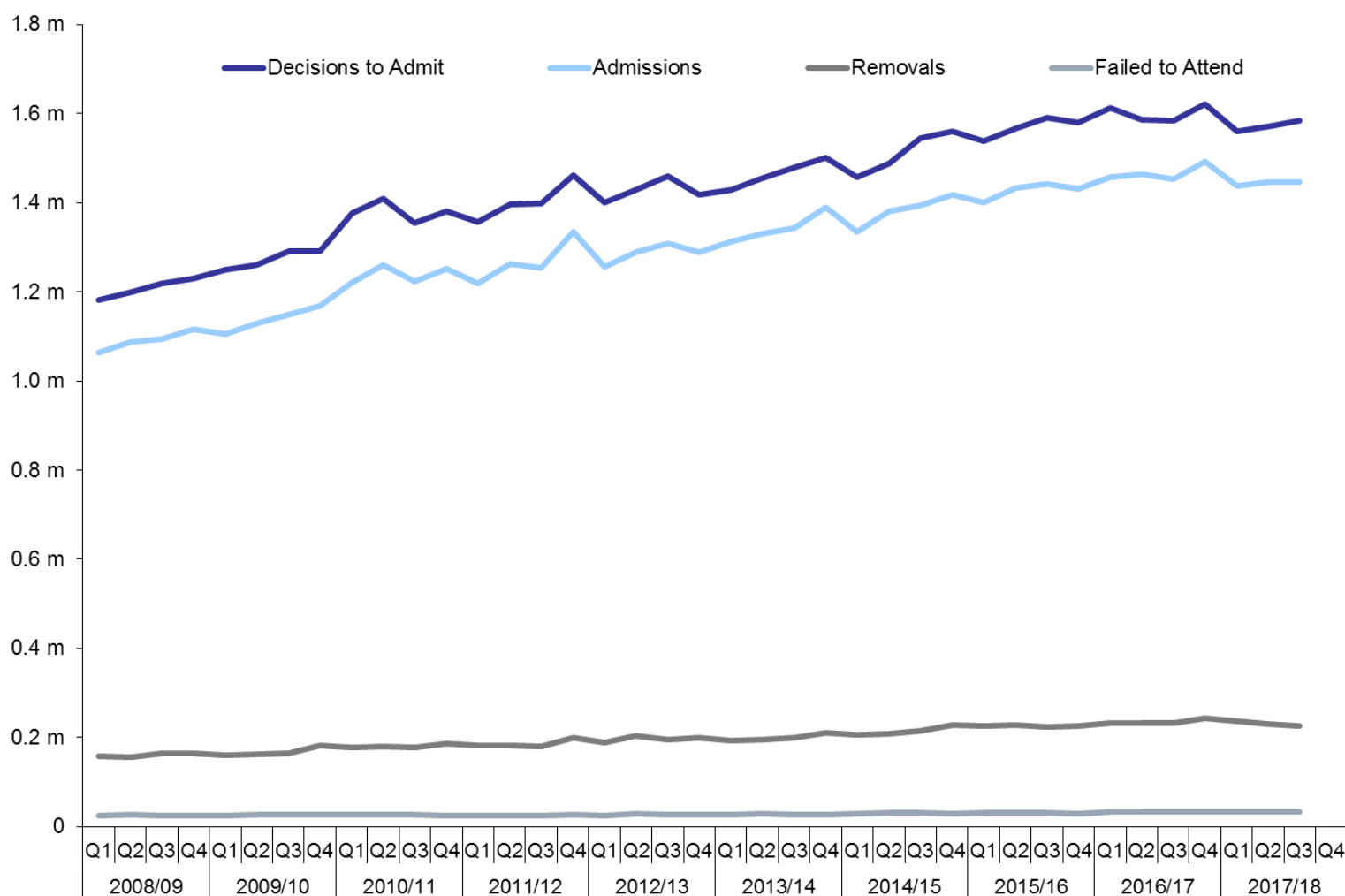


Figure 2 below shows that there has been an increase in outpatient activity over time, although this trend has slowed in recent quarters.

**Figure 2: Referrals and attendances for outpatient admissions, England, Q1 2008/09 to Q3 2017/18, commissioner based**

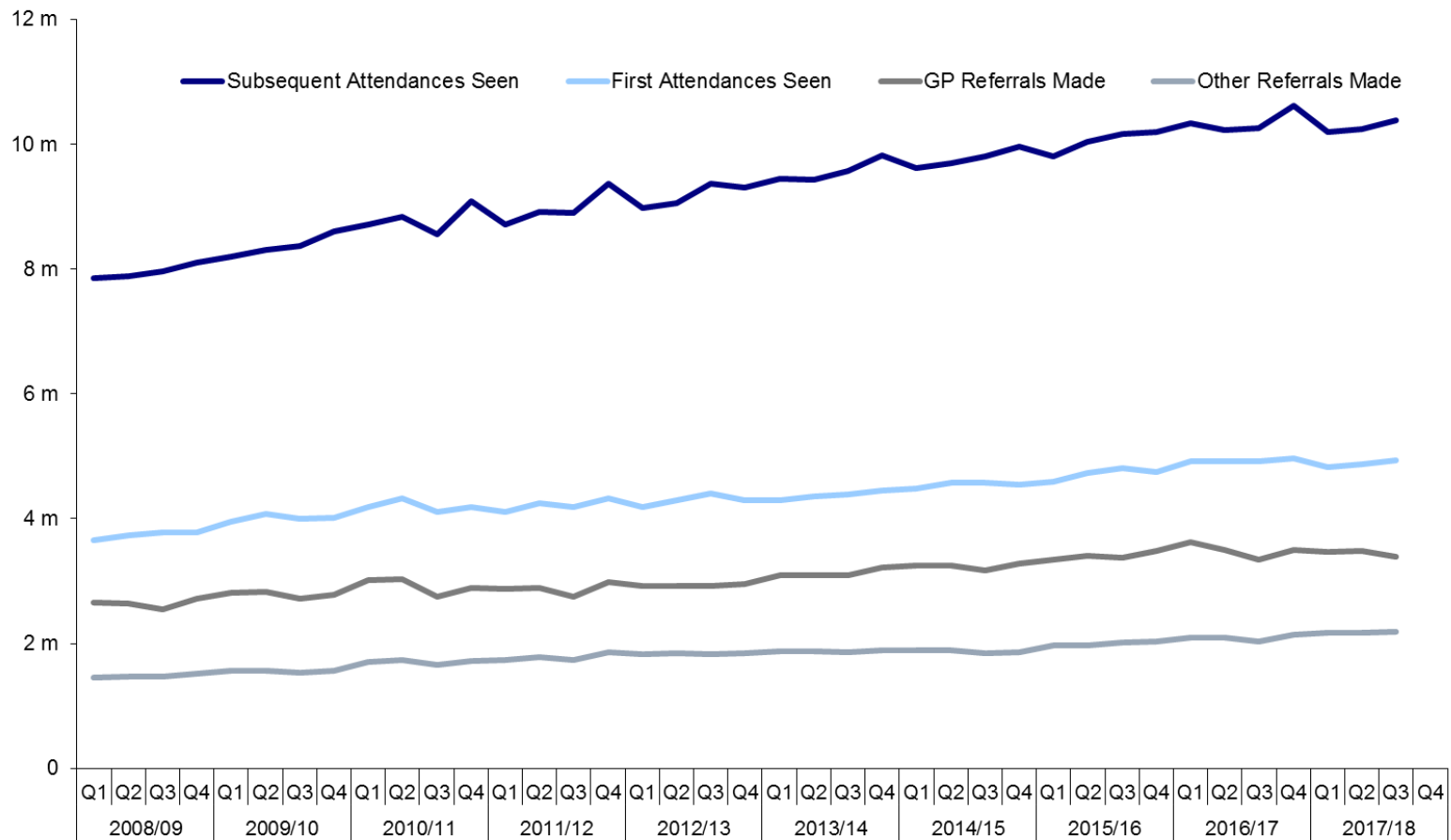
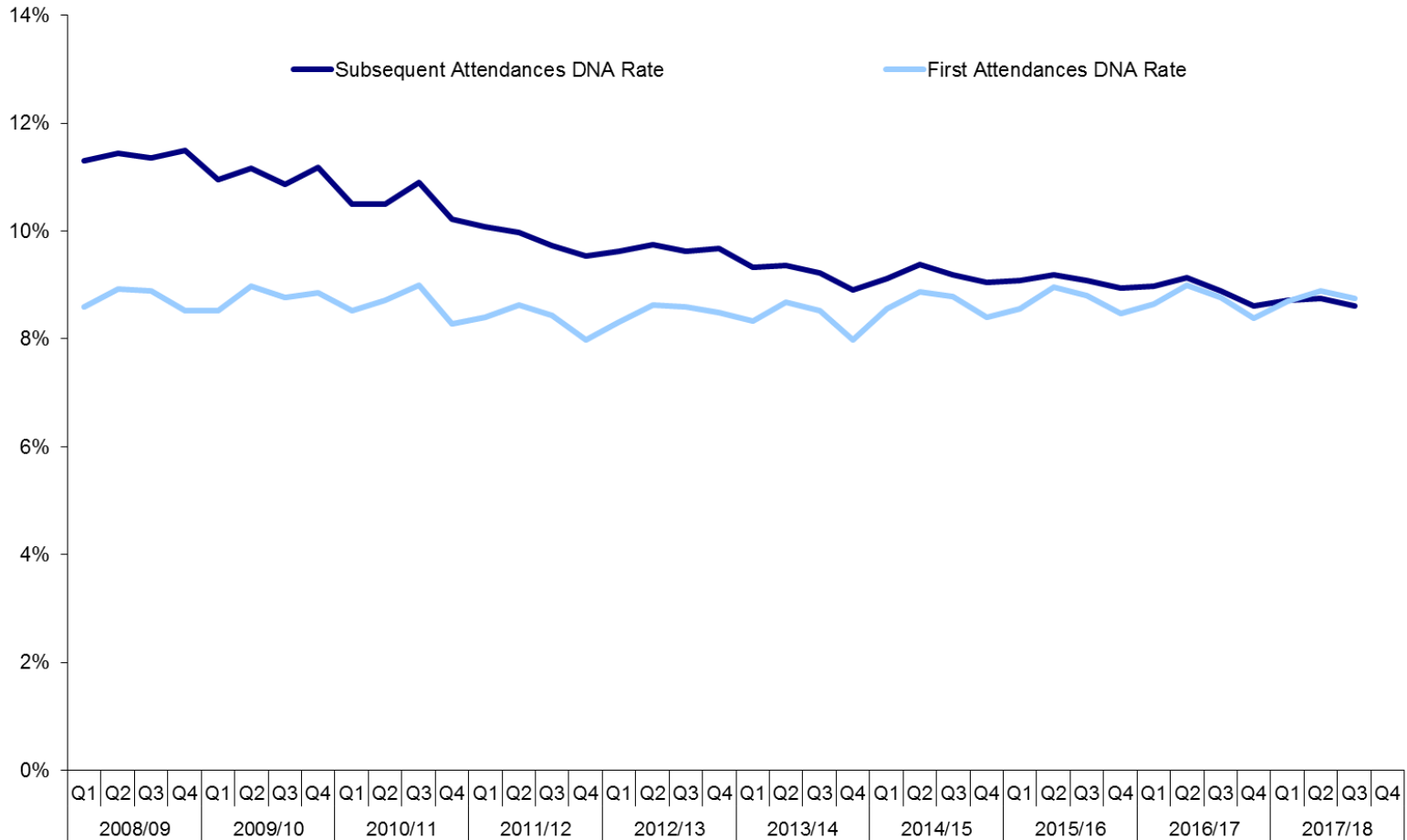


Figure 3 shows that the 'Did Not Attend' rate (proportion of appointments that a patient failed to attend), has fallen in most quarters, despite an increase in both first and subsequent outpatient attendances since Q1 2008/09 (as shown in Figure 2).

**Figure 3: Outpatient appointment DNA rates, England, Q1 2008/09 to Q3 2017/18, commissioner based**



Full tables by Commissioner, Provider and Region, and national time series are available here:

<http://www.england.nhs.uk/statistics/hospital-activity/quarterly-hospital-activity/qar-data/>

## 2 Statistical Notes

### 2.1 Quarterly Activity Return (QAR) Data Collection

This publication no longer has National Statistics status. User need is likely to be met by other official statistics outputs in the future and NHS England's resources will be focussed on these outputs rather than investing further in meeting the Requirements from Assessment Report 228.

Quarterly Activity data is collected from providers of NHS commissioned care. This report presents a summary of NHS activity in England.

The figures are collected to allow monitoring of activity. Activity data is used widely within the NHS England and the Department of Health to support, among others, key areas of system. It is also used by ONS and Treasury in their forecasting of national GDP, which, as a significant proportion of this, means it can have far-reaching cross-government implications.

#### 2.1.1 Data availability

Data has been published since Q1 2010/11 in the current format as a Prov-Comm (Provider-Commissioner) collection. Prior to this, there were separate returns for providers and commissioners.

The data is published quarterly to a pre-announced timetable. Publication occurs on the last Friday of the month, around 2 months after the end of the reference quarter.

#### 2.1.2 Data Collection

NHS England compiles quarterly data from a return (QAR) collected from all NHS providers via Unify2, the online tool for the collection and sharing of NHS performance data.

The quarter's figures are presented in Excel Spreadsheet (XLS) and Comma Separate Values (CSV) file formats.

#### 2.1.3 Data Quality

This collection is a census so we aim to have a complete return, with data from all Providers and Commissioners. Any exceptions to this are noted. To minimise the risk of definitions being interpreted incorrectly during the data gathering process, guidance is issued to help aid providers and commissioners. The QAR guidance can be found here:

<http://www.england.nhs.uk/statistics/statistical-work-areas/hospital-activity/quarterly-hospital-activity/>

Validation checks are applied to the data. Queries arising from the validation checks are raised with data providers. Trusts and are then able to resubmit data or provide NHS England with further explanation of the figures. We are happy to answer any queries from users in regards to difficulties in interpreting the data.



## 2.1.4 U.K Data Comparison

Care should be taken when comparing English activity data with the rest of the UK. Although we intend for the data to be similar, there are likely to be discrepancies in data definitions and collection methodology. Activity data from Wales, Scotland and Northern Ireland is available separately.

### Wales

Activity data is available in the Programme for Government Annual report:

<https://statswales.wales.gov.uk/Catalogue/Health-and-Social-Care/NHS-Hospital-Activity>

### Scotland

<http://www.isdscotland.org/Health-Topics/Hospital-Care/Inpatient-and-Day-Case-Activity/>

<http://www.isdscotland.org/Health-Topics/Hospital-Care/Outpatient-Activity/>

### Northern Ireland

<https://www.health-ni.gov.uk/topics/dhssps-statistics-and-research/hospital-activity-statistics>

## 2.2 Data Revisions

Revisions to published figures are reviewed on a six-monthly basis and in accordance with the NHS England Analytical Service National team. The revisions policy can be found here:

<http://www.england.nhs.uk/statistics/wp-content/uploads/sites/2/2012/04/Unify2-revisions-policy.pdf>

The most recent set of revisions covering Q1 2016/17 and Q3 2016/17 to Q2 2017/18 were published alongside Q3 2017/18. The impact of these revisions is minimal at a national level.

## 2.3 Provider and Commissioner based data

Commissioner based returns reflect data on a responsible population basis, which is defined as:

- All those patients resident within the Clinical Commissioning Group (CCG), boundary; plus
- All patients registered with GPs who are members of the CCG but are resident in another CCG; minus
- All patients resident in the CCG but registered with a GP who is a member of another CCG

Commissioner based returns also include data for specialised commissioning. These are collected separately from the CCGs as there are different arrangements for commissioning specialised services.

Provider based returns cover patients who were treated in hospitals in England.

## 2.4 Interpretation of Quarterly Activity data

Care should be taken when making quarter on quarter comparisons of these figures. Measures of activity performance are subject to seasonality. For example, the presences of bank holidays or the number of weekends in a calendar month both affect the number of working days. Similarly, adverse weather may result in emergency pressure and impacts upon the health service's ability to preserve elective capacity.

## 2.5 Glossary

### **Provider**

An organisation that provides NHS treatment or care, for example, an NHS Acute Trust, Mental Health Trust, Community Provider, or an Independent Sector Organisation.

### **Commissioner**

An organisation that commissions treatments from providers, for patients it has responsibility. For example Clinical Commissioning Groups (CCGs).

### **Decisions to admit**

This count refers to patients for whom a clinical decision to admit to a hospital bed has been made during the quarter. It excludes decisions to admit for planned admissions.

### **Elective admissions**

Number of patients admitted electively during the quarter. Admissions are split into two types, elective and non-elective. Non-elective admissions are emergency admissions and elective admissions include all other types.

### **Failed to Attend**

Number of patients for whom admission was arranged but failed to attend, and did not tell the hospital in advance that they would not be coming.

### **Removals**

Number of patients removed from the elective admission list during the quarter for reasons other than admission.

### **GP referrals made**

The number of written referrals from General Practitioners, whether doctors or dentists, for first consultant outpatient appointment.

### **Other referrals made**

The total number of other referral requests (written or verbal) for a first consultant outpatient episode in the period. Other referral requests exclude GP written referrals, self-referrals, referrals initiated by the consultant responsible for the outpatient episode, and referrals initiated by attendance at drop-in clinic without prior appointment.

### **First attendances seen**

This is the number of outpatient attendances for initial appointments where the patient was seen by a consultant (or a doctor acting for the consultant).

### **Subsequent attendances seen**

This is the number of outpatient attendances for follow-up appointments, in general and acute specialties, where the patient was seen by a consultant (or a doctor acting for the consultant).

### **Did Not Attend (DNA) -**

Count of patients that did not attend their appointment.

## **2.6 Feedback welcomed**

We welcome feedback on the content and presentation of these statistics within this Statistical Press Notice and those published on the NHS England website. If anyone has any comments on this, or any other issues regarding the data and statistics, then please email: [Unify2@dh.gsi.gov.uk](mailto:Unify2@dh.gsi.gov.uk)

## **2.7 Consultation**

The future of the Monthly and Quarterly Activity returns are under consultation. Find out more at:

<https://www.engage.england.nhs.uk/survey/monthly-and-quarterly-statistics-return/>

## **2.8 Additional Information**

Full details of activity data for individual organisations are available at:

<http://www.england.nhs.uk/statistics/hospital-activity/quarterly-hospital-activity/qar-data/>

Monthly hospital Activity data relating to elective and non-elective inpatient admissions (FFCEs) and outpatient referrals and attendances for first consultant outpatient appointments are also available at:

<https://www.england.nhs.uk/statistics/statistical-work-areas/hospital-activity/monthly-hospital-activity/>

## **2.9 Press enquiries**

Press enquiries:

For press enquiries please email the NHS England media team at [nhsengland.media@nhs.net](mailto:nhsengland.media@nhs.net) or call 0113 825 0958 or 0113 825 0959.

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