

WELSH INFORMATION STANDARDS BOARD

DSC Notice:	DSCN 2015 / 04
Date of Issue:	1 st April 2015

Welsh Health Circular / Official Letter: WHC 2015 / 05	Subject: Outpatient Follow-Up Delay Reporting
Sponsor: Andrew Carruthers Head of Portfolio Programme Management Department of Health and Social Services Welsh Government	
Implementation Date: 1 st April 2015	

DATA SET CHANGE NOTICE

A Data Set Change Notice (DSCN) is an information mandate for a new or revised information standard.

This DSCN was approved by the Welsh Information Standards Board (WISB) at its meeting on 19th March 2015

WISB Reference: ISRN 2014 / 023

Summary:

To increase the scope of the Outpatient Follow-up Delay Reporting to include patients who have been given a date for their follow-up appointment, also referred to as 'booked' patients.

Data sets / returns affected:

Outpatient Follow-up Delay Reporting

Please address enquiries about this Data Set Change Notice to the Data Standards Team in NHS Wales Informatics Service

E-mail: data.standards@wales.nhs.uk / Tel: 029 2050 2539

The Welsh Information Standards Board is responsible for appraising information standards. Submission documents and WISB Outcomes relating to the approval of this standard can be found at:

<http://howis.wales.nhs.uk/sites3/page.cfm?orgid=742&pid=24632>

DATA SET CHANGE NOTICE

Introduction

Outpatient Follow-up Delay Reporting was first introduced in January 2015 via DSCN 2015 / 02 to monitor outpatient follow-up appointments which are delayed past their target date (i.e. the date in which a follow-up appointment should take place).

Patients who have been given a date for their follow-up appointment, also referred to as 'booked' patients were excluded from the return up to the 31st March 2015 as set out in DSCN 2015 / 02.

The purpose of this DSCN is to increase the scope of the data collection with effect from the 1st April 2015 to include data for those patients who have been given a date for their follow-up appointment, also referred to as 'booked' patients.

Description of Change

To increase the scope of the return to include reporting of 'booked' patients.

Data Dictionary Version

Where applicable, this DSCN reflects changes introduced by DSCN and/or DDCN since the release of version 4.7 of the NHS Wales Data Dictionary.

The changes introduced by such DSCNs will be published in version 4.8 of the NHS Wales Data Dictionary.

Actions Required

Local Health Boards / Trusts:

- Health Boards are required to report as per the information requirements outlined in this DSCN with effect from April 2015, as reported in May 2015.
- Health Boards are required to report a monthly snapshot as at the last day of the month to Welsh Government.
- Data is required to be reported by Treatment Specialty

Welsh Government:

- Delivery and Performance Division, Department for Health and Social Services are required to collect the data and monitor progress against Health Board improvement trajectory.

Appendix A: Table reflecting areas that are impacted as a result of this DSCN

The following table shows all applicable data sets, data items, terms and other associated areas that are linked with the changes documented within this DSCN.

Each data definition type is listed in alphabetical order and is shown in the sequence in which it appears in this DSCN.

Data Definition Type	Name	New/Retired/Changed	Page Number
Live Data Sets and Aggregate Data Collections / Aggregate Proformas	Outpatient Follow-Up Delay Reporting	Changed	5

Appendix B: Highlighted changes to be made to the NHS Wales Data Dictionary

Changes to the NHS Wales Data Dictionary are detailed below, with new text being highlighted in **blue** and deletions are shown with a ~~strikethrough~~. The text shaded in **grey** shows existing text copied from the NHS Wales Data Dictionary.

Outpatient Follow-up Delay Reporting

Reporting Arrangements

Organisations are required to report on the 10th working day of the month a monthly snapshot as at the last day of the previous month to the Welsh Government Delivery and Performance Division:

DHSS.Performance@wales.gsi.gov.uk

The data is reported by [Treatment Function](#) (the specialty under which the patient is treated). This allows Health Boards the flexibility to report against those where there is a wait for follow-ups and leave blank those where there are not.

Any further queries regarding the data collection should be directed to the Delivery & Performance Division, Welsh Government, on 029 2082 3871, or e-mail:

HSSDG.Performance@wales.gsi.gov.uk

Scope

The information required relates to patients who are waiting for a follow-up appointment with the consultant or a member of his or her firm within the same specialty.

The data collection includes counts which relate to the following:

- Patients who are waiting for a follow-up appointment where there IS NOT a documented date that the follow-up appointment SHOULD take place (referred to as 'Target Date')
- Patients where there IS NOT a documented date that the follow-up appointment SHOULD take place and it is unclear whether or not they require or are waiting for a follow-up appointment
- Patients who are waiting for a follow-up appointment where there IS a documented date that the follow-up appointment SHOULD take place (referred to as 'Target Date')
- Patients who have started the booking process and have been sent an invitation letter asking them to ring and book a follow-up appointment, referred to as 'invited patients' are INCLUDED in the scope of the return.

SCOPE EXCLUDES:

~~Patients who have been given a date for their follow-up appointment, also referred to as 'booked' patients, are excluded from this return up to 31st March 2015. This is regardless of whether the date they have been booked in for their follow-up exceeds the target date.~~

Information Requirements

By [Treatment Function](#)

1. Total Number of Patients Waiting for Follow-up where there is **NO** Documented Target Date

This is the total number of patients who;

- a) *are waiting for a follow-up appointment but there is NO documented date for when that follow-up appointment should take place (Target Date)*
- b) *do not have a documented date for when the follow-up appointment should take place and it is unclear whether or not they require or are waiting for a follow-up*

2. Total Number of Patients Waiting for Follow-up where there **IS** a Documented Target Date

2a. Number of Patients Waiting for Follow-up where there **IS** a documented Target Date (Not Booked)

This is the number of patients who are waiting for a follow-up where there IS a documented date that the follow-up appointment should take place. This ONLY relates to those patients with a target date that HAVE NOT been given an actual 'booked' date to come back for their follow up.

2b. Number of Patients Waiting for Follow-up where there **IS** a documented Target Date (Booked)

This is the number of patients who are waiting for a follow-up where there IS a documented date that the follow-up should take place AND who have been given an actual date for their follow-up appointment, also referred to as 'booked' patients.

The Number of Patients Waiting for a Follow-up who are Delayed past their Target Date

This is the number of patients who are waiting for a follow-up over their target date split by how long they are delayed - the delay is calculated as a percentage. The calculation of the delay only relates to those patients WITH a documented target date and is reported separately for 'Booked' and 'Non Booked' patients (2a and 2b).

Consolidated Waiting Times Guidance (RTT) regarding adjustments apply to this data collection. Therefore if an adjustment has been made the calculation of the delay is based on the adjusted date and not the original.

For each patient pathway, the method for calculating the % delay beyond the target date can be described as follows:

If: Census Date = A
Target Date = B
Original Outpatient Attendance Date = C

Then:

$$\left(\left(\frac{A - C}{B - C} \times 100 \right) - 100 \right) \%$$

For example:

Outpatient Attendance 1st November 2014

Target Date: 1st December 2014

Census Date: 15th December 2014

$$\left(\left(\frac{45 \text{ days}}{30 \text{ days}} \times 100 \right) - 100 \right) \% = 50\% \text{ delay}$$

Note: No deductions should be made to the percentage reported based on any other existing guidance.

Supporting Definitions

Target Date

The target date as defined in [A Guide to Good Practice](#) (2005), is the date that a follow-up appointment SHOULD take place.

Follow-up attendance

A follow-up attendance is initiated by the consultant or independent nurse in charge of the clinic under the following conditions:

a)	Following an emergency inpatient hospital spell under the care of the consultant or independent nurse in charge of the clinic.
b)	Following a non-emergency inpatient hospital spell (elective or maternity) under the care of the consultant or independent nurse in charge of the clinic.
c)	Following an A/E attendance to an A/E clinic for the continuation of treatment.
d)	An earlier attendance at a clinic run by the same consultant or independent nurse in any Local Health Board/Trust, community or GP surgery.
e)	Following return of the patient within the timescale agreed by the consultant or independent nurse in charge of the clinic for the same condition or effects resulting from same

	condition.
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Appendix C: Data Collection Tool

Please open excel document below to access the data collection tool:



OP Follow-up Delay
Blank Form - Apr 15 to