Outpatient Follow-up Delay Reporting Data Collection

Guidance Notes

General Points

(1) This submission proforma is valid from April 2018 to March 2019.

(2) Local Health Boards to provide one completed template per census date (last day of each month).

(3) Data is required to be reported by Treatment Function (the specialty under which the patient is treated). This will allow Local Health Boards the flexibility to report against those where there is a wait for follow-ups and leave blank those where there are not.

(4) Local Health Boards 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.

(5) The submission timetable requirements for 2018/19 are monthly as follows:

Census Date	Submission Date
30/04/2018	16/05/2018
31/05/2018	14/06/2018
30/06/2018	14/07/2018
31/07/2018	12/08/2018
31/08/2018	14/09/2018
30/09/2018	14/10/2018
31/10/2018	14/11/2018
30/11/2018	14/12/2018
31/12/2018	16/01/2019
31/01/2019	14/02/2019
28/02/2019	14/03/2019
31/03/2019	18/04/2019

(6) All submissions should be e-mailed to the Welsh Government, Delivery & Performance Division inbox at: HSS.Performance@gov.wales

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

(8) 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 a '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 'Target Date').
- Patients who have started the booking process and have been sent an invitation letter asking tem to ring and book a follow-up appointment, referred to as 'invited patients' are INCLUDED in the scope of the return.

(9) Target Date is defined, as within A Guide to Good Practice (2005), as the date that a follow-up appointment SHOULD take place.

Definitions	
Count 1a (column D) - the total number of patients waiting for follow-up where there is <u>NO</u>	This is the total number of patients who:
documented target date	(a) are waiting for a follow-up appointment but there is NO documented date f should take place (Target Date)
	(b) do not have a documented date for when the follow-up appointment shoul not they require or are waiting for a follow-up
Count 1b (column E) - the total number of patients where there is <u>NO</u> documented target date for follow-up as the outcome of their last appointment was 'See on Symptom'	This is the number of patients where there is NO documented target date as th was 'See on Symptom'. These patients are also referred to as 'expert patients'. 'booked patients' but would never have a Target Date.
Count 2a (column F) - number of patients waiting for follow-up where there <u>IS</u> a documented target date (NOT BOOKED)	This is the number of patients who are waiting for a follow-up where there IS a appointment should take place. This ONLY relates to those patients with a targ actual 'booked' date to come back for their follow-up.
Count 2b (column G) - the total number of patients waiting for follow-up where there <u>IS</u> a documented target date	This is the number of patients who are waiting for a follow-up where there IS a appointment should take place AND who have been given an actual date for th to as 'booked patients'.
Count 3a (column H - L) - the number of patients waiting for follow-up who are delayed past their target date - NOT BOOKED	This is the number of patients who are waiting for a follow-up over their target delayed. The delay is calculated as a percentage. The calculation of the delay documented Target Date for 'non-booked' patients (Count 2a).
	For each patient pathway, the method for calculating the percentage delay bey follows:
	If: Census Date = A Target Review Date = B Original Outpatient Attendance Date = C
	Then:
	$\left(\left(\left(\frac{A-C}{B-C}\right)\times 100\right)-100\right)\%$
	For example: If: Outpatient Attendance = 1st November 2015
	Target Date = 1st December 2015 Census Date = 15th December 2015
	Then: $\left(\left(\left(\frac{45 \ days}{30 \ days} \right) \times 100 \right) - 100 \right) \% = 50\% \ delay$



only relates to those patients WITH a

yond the target date can be described as

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

Count 3b (column M - Q) - the number of patients waiting for follow-up who are delayed past their target date - BOOKED	This is the number of patients who are waiting for a follow-up over their target r delayed. The delay is calculated as a percentage. The calculation of the delay of documented Target Date for 'booked' patients (Count 2b). For each patient pathway, the method for calculating the percentage delay beyon follows:
	If: Census Date = A Target Review Date = B Original Outpatient Attendance Date = C
	Then: $\left(\left(\left(\frac{A-C}{B-C} \right) \times 100 \right) - 100 \right) \%$
	Note: No deductions should be made to the percentage reported based on any o
Count 3c (column R) - the number of patients waiting for follow-up who are delayed past their target date but previously CNA or DNA their last appointment	This is a count of the number of patients who are waiting for a follow-up who ar previously CNA or DNA their last appointment. These patients can either be boo reporting.

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other existing guidance.

re delayed past their target date but oked or un-booked at the time of