

Article

NHS planned care waiting times across the UK

A summary of the cross-UK comparability of NHS planned care waiting time statistics.

Contact:
GSS Coherence team
gss.coherence@ons.gov.uk
+44 1633 456739

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Table of contents

1. [Main points](#)
2. [Why NHS planned care waiting times are measured](#)
3. [UK planned care waiting time data methods](#)
4. [Trends over time in NHS planned care](#)
5. [Other data sources on waiting lists: Opinions and Lifestyle Survey](#)
6. [UK NHS waiting time data](#)
7. [Glossary](#)
8. [Data sources and quality](#)
9. [Related links](#)
10. [Cite this article](#)

1 . Main points

- Each UK country has different healthcare policies, commissioning processes and patient data systems for planned care because of the devolved healthcare system; these affect the data coverage available on referral to treatment (RTT) or stage of treatment waiting lists, and the extent to which data can be compared across the four countries.
- Official RTT data for England and Wales, and stage of treatment data for Scotland and Northern Ireland, report on the number of treatment pathways and length of time waiting; one person can be on several pathways.
- England data capture consultant-led RTT pathways for those waiting to start treatment; Wales capture consultant-led and some non-consultant led RTT pathways for those waiting to start treatment (open pathways).
- Wales' official RTT data can be adjusted by removing non-consultant led pathways to be more broadly comparable with England's official RTT data.
- Scotland data covering the full RTT pathway measure those who have already completed their treatment (completed pathways); these cannot be compared with RTT data on those waiting to start treatment in England or Wales.
- In Scotland and Northern Ireland, data are collected for patients waiting at different stages of the RTT pathway (open pathways), such as waiting to attend a first outpatient appointment after referral, or to be admitted for treatment as an inpatient or day case; but adding together the number of ongoing pathways for these stages does not capture everyone on a RTT pathway.
- Despite the differences, there is value in considering trends across the UK in waiting lists for RTT and different stages of treatment, as they were affected by the coronavirus (COVID-19) pandemic, with increases in both the size of the lists and those waiting over 52 weeks; there are differences in the post-pandemic trends between the countries of the UK.
- Self-reported survey data from the Opinions and Lifestyle survey (18 October 2023 to 24 March 2024) can further support our understanding of the variation in waiting list sizes across Great Britain.

Collaboration

This article has been written by us, at the [Office for National Statistics \(ONS\)](#) in partnership with [NHS England](#), [Department of Health and Social Care](#), [Public Health Scotland](#), [Scottish Government](#), [Welsh Government](#), and the [Department of Health Northern Ireland](#). This article is part of cross-government efforts to improve the coherence of planned care waiting time data and improve understanding of the trends in these data over time.

This article brings together existing official statistics that have been published by health bodies on NHS waiting lists. As the data is produced separately and according to the different devolved healthcare policies, we aim to provide information to allow data users to compare data, where appropriate, and understand where comparisons cannot be made. We also explore the wider context influencing cross-country comparisons, including the impact of geographical and population differences.

We are partnering with health bodies to advance improvements in statistical coherence in health data, as outlined in our blog post on [Creating a coherent picture of health in the UK](#). This partnership has already produced four cross-UK explainers on health statistics. The previous articles were on [ambulance response time data](#), [accident and emergency wait times](#), the [healthcare workforce](#) and [NHS experience and satisfaction](#).

The Welsh Government has previously conducted investigations to understand NHS waiting time statistics across the UK, which they have set out in [Chief Statistician's updates in November 2021](#) and [September 2023](#). The Welsh Government's work supports an understanding of similarities and differences in these statistics and supports users in making meaningful comparisons. Devolved administrations and UK health bodies continue to work to review and improve their data collections.

2 . Why NHS planned care waiting times are measured

All UK countries collect data on waiting times for planned care to assess performance against standards, as set out in the [NHS constitution for England](#), [local delivery plan for Scotland](#), [NHS performance framework for Wales](#), and [ministerial targets for Northern Ireland](#). These data also give patients information on their expected waiting times for planned care.

There are several minimum targets and operational standards currently set for planned care waiting times, reflecting each country's policies and needs. The main targets and standards for each country are:

- in England, 92% of patients should not wait longer than 18 weeks from referral to treatment (RTT)
- in Scotland, 95% of patients should be seen at a new outpatient appointment within 12 weeks of referral, and 100% of patients should wait no longer than 12 weeks for treatment as an inpatient or day case
- in Wales, 95% of patients should start treatment following referral within a 26-week target
- in Northern Ireland, 50% of patients should wait no longer than 9 weeks for a first consultant-led outpatient appointment, 55% of patients should wait no longer than 13 weeks for an agreed inpatient and day case admission and no patient should wait longer than 52 weeks

Since the countries have different performance measures, we cannot draw direct comparisons between countries based on these measures. However, we can draw insight from trends over time in the size of NHS waiting lists across the UK, as set out in [Section 4: Trends over time in NHS planned care](#). Links to, and information on, the data published by each country can be found within the [Section 8: Data sources and quality](#).

Each country also set out targets to performance manage long waiting times. There are currently different standards and policies, including some introduced to address the impact of the coronavirus (COVID-19) pandemic on planned care waiting times.

Data on long waiting times are collected and published by all UK countries. Information on interpreting trends in waiting times over 52 weeks across the UK are included in [Section 4: Trends over time in NHS planned care](#).

3 . UK planned care waiting time data methods

The referral to treatment (RTT) patient experience is broadly similar across each country of the UK. In most cases, an RTT pathway starts with a referral from a general practitioner (GP) but may come from other sources such as a specialist nurse or consultant. After a referral, there are several stages of an RTT pathway that may follow, including:

- a first outpatient appointment
- a diagnostic test
- follow-up outpatient appointments

At each of these stages, there may be a decision made not to treat, or the patient may start receiving treatment in an outpatient setting, resulting in the RTT pathway ending for the patient, or there may be a decision to admit the patient for treatment as a hospital inpatient or day case. Once a patient has started treatment and the RTT pathway has ended, they may receive further follow-up diagnostic, outpatient, and inpatient treatment that would be outside of the RTT pathway.

In all UK countries, data on the full RTT pathway or its different stages are extracted from administrative data systems held by the relevant health bodies. These systems are primarily designed for operational reasons, meaning in some cases there are limits in the extent to which they can be used for statistical or analytical purposes.

Because of the differing data systems and policy needs, the data reported on the RTT pathway differs across each UK country. This section sets out the data used to report against the different planned care waiting list and waiting times standards across the UK.

Referral to treatment data

The data used to report against RTT targets differ:

- for England and Wales, data are reported to track patients currently waiting from referral to treatment (open RTT pathway)
- for Scotland, data are reported for patients' RTT waiting times once the treatment journey has finished (completed RTT pathway)

For Northern Ireland, there are no overall RTT statistics, data are instead reported for the different stages of the treatment pathway.

Open RTT data can be used to actively monitor and manage waiting list size, and the length of current wait time of those waiting for treatment can be seen in the data. For completed RTT pathways, those currently waiting are not visible in the data until they begin treatment. This means completed RTT data can be used to monitor how many people have been seen and how long they waited for. These measures capture waiting times differently and it is not appropriate to compare open pathway data with completed pathway data.

The pathways included in the RTT data differ between countries:

- in England, waiting time targets relate specifically to consultant-led pathways
- in Scotland, the 18-week RTT standard includes some non-consultant led pathways, although measurement of the waiting times for stages of treatment within the RTT pathways focus on consultant-led pathways
- in Wales, waiting time targets relate to consultant-led pathways and certain non-consultant led treatment

This means the headline statistics for England, Scotland and Wales are not directly comparable. However, analysis with non-consultant led pathways removed from Wales' data is provided in [Section 4: Trends over time in NHS planned care](#), enabling broad comparisons with England.

Stage of treatment waiting time data

In Scotland and Northern Ireland, stage of treatment data play an important role in monitoring and managing waiting time standards. For both countries, these data are available for patients currently waiting for an appointment or treatment (open pathways).

Data on the stages of treatment for Scotland and Northern Ireland include:

- outpatient waits, which measure the number and length of time patients have been waiting for their first consultant-led outpatient appointment following a referral
- diagnostic waits, which measure the number and length of time patients have been waiting for diagnostic testing services (such as an endoscopy or imaging test) following a referral
- inpatient and day case waits, which measure the number and length of time patients have been waiting from an agreement to be admitted up to the time they are admitted as an inpatient or day case for hospital treatment

Data on outpatient wait list and inpatient and day case wait list for Scotland and Northern Ireland are set out in [Section 4: Trends over time in NHS planned care](#). There are differences in policies relating to the waiting time "clock" and patient unavailability, meaning these are not directly comparable. More information on the different approaches is set out in [Section 7: Glossary](#). Diagnostic waits are not within the scope of this article; links to and information on these data can be found in [Section 8: Data sources and quality](#).

It is not appropriate to add these three stages of the RTT pathway together to compare with any RTT list size statistic. There are three main reasons for this:

- there will be some patients on an RTT pathway that are not on any of the three lists, for example, patients who are waiting for further outpatient appointments and a decision has not yet been made to admit for treatment
- there will be some duplication of patients between the three lists that relate to a single RTT pathway, this particularly concerns those waiting for a diagnostic test who may also appear on the outpatient waiting list or inpatient and day case waiting list
- there may be some duplication of patients waiting for multiple diagnostic tests that relate to a single RTT pathway

Stage of treatment data are also available in England and Wales, as explored in the [Welsh Government's National Statistician's update from September 2023](#). Wales' data for first outpatient appointments are judged to be comparable with Northern Ireland's data.

Additional considerations for cross-UK comparisons of planned care waiting time data

Across both RTT and stage of treatment data, there are differences in the policies and guidance affecting both the waiting time "clock" and the coverage of the data (whether pathways are included or not). These include policies on:

- reporting on consultant-led and non-consultant led pathways
- whether the clock is stopped or adjusted for appointments that are not attended
- removing patients from the waiting list
- post-treatment follow up consultations
- transfers to or from the private sector

The descriptions and approaches for each country are set out in [Section 7: Glossary](#).

Healthcare policies and policy documentation can be complex and evolve over time. In line with the [Code of Practice for Statistics](#), producers of NHS planned care waiting time statistics continue to monitor data, as well as relevant healthcare policy and definitions, to ensure quality and transparency for data users. If our understanding of the policies and how they are implemented changes, it is possible that our assessment of comparability could also change.

There are wider differences between countries that should be considered when interpreting variation in NHS planned care waiting lists and waiting times across the UK, including:

- the rural-urban split of areas within countries can lead to differences in ease of access to hospital appointments and the services offered
- differences within populations across the four countries (for instance, levels of deprivation, disability, long-term illness, age profile) can influence patient's healthcare-seeking behaviours and demand for health services
- differences in the scope of policies and targets (such as inclusion or exclusion of non-consultant led pathways) may lead to differences between UK health bodies in how they target their resources
- wider healthcare policies, such as the provision of specialist advice to avoid unnecessary referrals, general practitioners' (GPs') direct access to diagnostics and differences in the treatments available on the NHS

4 . Trends over time in NHS planned care

Data within this section are presented as the rates of patient pathways per 100 of the population. These rates have been included to enable comparison of trends between countries in proportion to the population size of each country. It is important to be aware that patient pathways do not relate to individual patients. Some patients have multiple open pathways at a time and will be counted more than once in the data.

Trends across the UK

This section presents open referral to treatment time (RTT) data for Wales that have been adjusted to enable comparisons with official RTT data for England. Open RTT pathway data are not available for Scotland and Northern Ireland, as discussed in [Section 3: UK planned care waiting time data methods](#). Stages of treatment data for Scotland and Northern Ireland are set out later in this section.

While the coverage of the statistics for England and Wales differ to Scotland and Northern Ireland, there has been an upward trend across the UK in the number of patients waiting for planned care since 2011. Across the UK, waiting lists have been affected by the coronavirus (COVID-19) pandemic, with increases in the list size and waits over 52 weeks having increased following the period of UK lockdown restrictions. Across the UK, there are differences in the scale and trajectory of the post-pandemic recovery.

Comparing England official statistics and Wales adjusted data on referral to treatment

The official published [referral to treatment waiting time statistics for Wales](#) are broader than RTT data in England. This is because Wales includes non-consultant led pathways, which are excluded from England's outputs. The non-consultant led pathways are direct access diagnostic services and Allied Health Professional therapies, which represented 11% of the total open RTT pathways in March 2024. When these pathways are removed, the data for Wales are understood to be broadly comparable with England. These adjusted data are presented in this section with comparisons made with official RTT data for England. This analysis builds on work previously published by Welsh Government in their [November 2022 blog](#).

There may be some additional differences between the data for England and Wales. However, on the basis that both nations aim to capture all consultant-led pathways from the point of referral, any remaining differences in terms of coverage between the two countries are likely to be minimal to the best of our current understanding. There are some differences in how the waiting time "clock" is measured, as set out in [Section 3: UK planned care waiting time data methods](#), so caution should be taken when interpreting differences in the length of time waiting.

England and Wales referral to treatment times

In Figure 1, the official statistics for England and adjusted data for Wales show that between September 2011 and before the start of UK lockdown restrictions in February 2020, the number of open RTT pathways (per 100 population) increased from 4.9 to 7.9 in England, and from 11.1 to 13.2 in Wales. In March 2024, RTT pathways (per 100 population) increased to 13.0 in England, and 21.6 in Wales.

Before the onset of the pandemic, the number of patients waiting over a year (52 weeks) for treatment was consistently low. In February 2020, prior to the start of lockdown restrictions, the number of pathways (per 100 population) where a patient is waiting more than 52 weeks for treatment was 0.0 in England, increasing to a peak of 0.8 in March 2021. In February 2020 in Wales, there were 0.2 pathways (per 100 population) where a patient was waiting more than 52 weeks for treatment, increasing to a peak of 5.7 in August 2022. In March 2024 there were 0.5 pathways (per 100 population) where a patient was waiting more than 52 weeks for treatment in England, and 4.5 in Wales.

Figure 1: The number of referral to treatment pathways where a patient was waiting to start treatment has increased over time in England and Wales

Number of open referral to treatment pathways and waits over 52 weeks in England and Wales, September 2011 to March 2024

Notes:

1. This chart presents monthly data for open pathways in which patients are currently waiting for treatment following a referral.
2. Data has been adjusted for Wales to include consultant-led treatment pathways only, so that they are broadly comparable with England's official statistics.
3. The published [Referral to treatment waiting time statistics for Wales](#) include consultant-led and non-consultant led treatment pathways and are not directly comparable with England data.
4. For England, from February 2024 data onwards, community service pathways should no longer be reported in RTT datasets (see [Section 8: Data sources and quality](#) for more information).
5. Monthly population estimates and population projections (see [Section 8: Data sources and quality](#) for more information) have been used to the number of open referral to treatment pathways per 100 population of each respective month.

Stage of treatment data in Scotland and Northern Ireland

The data presented for Scotland and Northern Ireland represents specific stages of the treatment pathway, including waiting for a first outpatient appointment and waiting to be admitted for treatment as an inpatient or day case. Adding these stages of the treatment pathway does not give a comparable measure with RTT presented for England and Wales.

There are some differences in data collection between Scotland and Northern Ireland, as discussed in [Section 3: UK planned care waiting time data methods](#), meaning stage of treatment data are not directly comparable. The policy definitions are set out in [Section 7: Glossary](#). Further extensive investigation would be required to explore exclusion criteria and waiting list policies to fully consider the impact they may have on the size of NHS planned care waiting lists.

First outpatient appointment waiting list in Scotland and Northern Ireland

While not directly comparable, differences in the size of the Northern Ireland waiting list compared with Scotland's cannot be fully explained by the different policy approaches.

Between December 2012 and September 2023, the number of pathways (per 100 population) where a patient was waiting for a first outpatient appointment has increased from 3.9 to 9.8 in Scotland (Figure 2), and from 5.9 to 22.3 in Northern Ireland (Figure 3). The latest official statistics for Scotland in Figure 2 show that in March 2024, there were 9.7 pathways (per 100 population) where a patient was waiting for a first outpatient appointment.

First outpatient appointment waiting times in Scotland

Figure 2 shows that before the onset of the pandemic, the number of people waiting over a year for a first outpatient appointment was consistently low. The number of pathways (per 100 population) where a patient was waiting more than 52 weeks was between 0.0 and 0.1 from December 2012 and December 2019, and has increased to 0.9 in March 2024.

Figure 2: The number of pathways where a patient is waiting for a first outpatient appointment has increased over time in Scotland

Number of open waits for a first outpatient appointment and waits over 52 weeks in Scotland per 100 population, December 2012 to March 2024

Notes:

1. This chart presents data for open pathways in which patients are currently waiting for a first outpatient appointment at end of each quarter.
2. Changes were implemented between October 2019 and March 2020, to remove referrals for key diagnostics tests from the data.
3. Granular data for NHS Tayside was unavailable to provide breakdown of waits under or over 52 weeks between June 2017 and December 2018.
4. Population estimates and population projections for the last month of the quarter (see [Section 8: Data sources and quality](#) for more information) have been used for the number of open first outpatient appointment pathways per 100 population of each respective quarter.
5. Rebased population estimates following results of Scottish Census 2022 are due to be published by the [National Records of Scotland](#); this means the rates shown in this publication may be subject to change in the future.

First outpatient appointment waiting times in Northern Ireland

Figure 3 shows that before the onset of the pandemic, the number of people waiting over a year for a first outpatient appointment had increased from 0.5 pathways (per 100 population) in June 2015 to 5.9 in December 2019, and has increased to 11.0 in September 2023.

Figure 3: The number of pathways where a patient was waiting for a first outpatient appointment has increased over time in Northern Ireland

Number of open waits for a first outpatient appointment and waits over 52 weeks in Northern Ireland per 100 population, September 2011 to September 2023

Notes:

1. This chart presents data for open pathways in which patients are currently waiting for a first consultant-led outpatient appointment at end of each quarter.
2. Data for December 2023 and March 2024 are not included in this time-series because of the launch of a new electronic patient record system in Northern Ireland.
3. Waiting times over 52 weeks were not reported until June 2015. Before this, patients who were waiting longer than 52 weeks were reported as waits over 26 weeks.
4. Population estimates and population projections for the last month of the quarter (see [Section 8: Data sources and quality](#) for more information) have been used for the number of open first outpatient appointment pathways per 100 population of each respective quarter.

Inpatient or day case waiting list in Scotland and Northern Ireland

As mentioned previously in this section, the differences in policies explored to date cannot fully explain the current differences in Scotland and Northern Ireland waiting lists sizes.

Between December 2012 and September 2023, the number of pathways (per 100 population) where a patient was waiting to be admitted for treatment as an inpatient or day case has increased in Scotland from 0.9 to 2.8 (Figure 4). Figure 5 shows that in Northern Ireland, the inpatient or day case pathways (per 100 population) increased from 2.8 in December 2012 to a peak of 6.7 in June 2022, declining to 6.0 in September 2023.

Inpatient or day case waiting times in Scotland

Figure 4 shows that before the onset of the pandemic, the number of people waiting over a year for treatment as an inpatient or day case was consistently low. The number of pathways (per 100 population) where a patient was waiting more than 52 weeks was 0.0 between December 2012 and December 2019, and has increased to 0.7 in March 2024.

Figure 4: The number of pathways where a patient was waiting to be admitted as an inpatient or day case for treatment has increased over time in Scotland

Number of open waits for an inpatient or day case admission and waits over 52 weeks in Scotland per 100 population, December 2012 to March 2024

Notes:

1. This chart presents data for open waits in which patients are currently waiting to be admitted for treatment as an inpatient or day case at end of each quarter.
2. Granular data for NHS Tayside was unavailable to provide breakdown of waits under or over 52 weeks between June 2017 and June 2018.
3. Population estimates and population projections for the last month of the quarter (see [Section 8: Data sources and quality](#) for more information) have been used for the number of open inpatient or day case pathways per 100 population of each respective quarter.
4. Rebased population estimates following results of Scottish Census 2022 are due to be published by the [National Records of Scotland](#); this means the rates shown in this publication may be subject to change in the future.

Inpatient or day case waiting times in Northern Ireland

Figure 5 shows that before the onset of the pandemic, the number of people waiting over a year increased from 0.4 pathways (per 100 population) in June 2016 to 1.4 in December 2019. Numbers increased since the onset of the pandemic, peaking at 3.7 in June 2022 and declined to 3.1 in September 2023.

Figure 5: The number of pathways where a patient was waiting to be admitted as an inpatient or day case for treatment has increased over time in Northern Ireland

Number of open waits for an inpatient or day case admission and waits over 52 weeks in Northern Ireland per 100 population, September 2011 to September 2023

Notes:

1. This chart presents data for open pathways whereby patients are currently waiting for an inpatient or day case admission following a decision to admit at end of each quarter.
2. Data for December 2023 are not included in this time-series due to the launch of a new electronic patient record system in Northern Ireland.
3. Waiting times over 52 weeks were not reported until June 2016, prior to this, patients who were waiting longer than 52 weeks were reported as waits over 26 weeks.
4. Population estimates and population projections for the last month of the quarter (see [Section 8: Data sources and quality](#) for more information) have been used for the number of open inpatient or day case pathways per 100 population of each respective quarter.

5 . Other data sources on waiting lists: Opinions and Lifestyle Survey

This section explores how Great Britain survey data may provide further insight on the size and characteristics of NHS waiting lists.

Please note that the estimates presented within this section cover a different definition of NHS waiting lists to the official planned care statistics covered within this article and are based on self-reported data. This means the survey estimates differ from official NHS planned care waiting time statistics. Please also note that survey coverage does not include Northern Ireland. The official administrative data on NHS planned care waiting lists are set out in [Section 4: Trends over time in NHS planned care](#).

Our Opinions and Lifestyle Survey (OPN) collects data from individuals (aged 16 years or older) in Great Britain and has periodically collected data related to people's experiences of NHS waiting times since November 2022. Here, we examine pooled data collected on NHS waiting times between 18 October 2023 to 24 March 2024.

Two questions were included in this period relating to NHS waiting lists:

- are you currently waiting for a hospital appointment, test, or to start receiving medical treatment through the NHS? (Response categories "yes" or "no")
- how long have you been waiting for a hospital appointment, test, or to start receiving medical treatment through the NHS? (Response categories of "less than one month", "1 to 3 months", "4 to 6 months", "7 to 11 months", "12 to 18 months" or "more than 18 months", "not sure" or "prefer not to say")

Note that the NHS planned care waiting time statistics outlined in [Section 4: Trends over time in NHS planned care](#) are the official measures of current NHS waiting times for planned care covering each UK country.

Significantly more people in Wales (29%) reported they were waiting for a hospital appointment, test, or treatment from the NHS, than in England (25%) or Scotland (22%). The difference between the estimates for England and Scotland are not statistically significant.

Where comparisons between OPN survey based estimates are made, associated confidence intervals have been used to assess the statistical significance of any differences between estimates. Confidence intervals and sample sizes for all OPN estimates are provided in the dataset alongside this release. For more information on confidence intervals and statistical significance, see our [Uncertainty and how we measure it for our surveys explainer](#).

Examining estimates from OPN of those waiting for a hospital appointment, test, or to start receiving medical treatment through the NHS among different groups for the population can support our understanding of variations in waiting list sizes across the UK.

Adults with disabilities were almost three times more likely to report they were on a waiting list for a hospital appointment, test, or to start receiving medical treatment through the NHS in Great Britain (45% of adults with disabilities compared with 16% of non-disabled adults). Adults aged 65 years and older were also more likely to report this (34%) than those in younger age groups (18% among those aged 16 to 29 years, 21% among those aged 30 to 49 years and 26% among those aged 50 to 64 years).

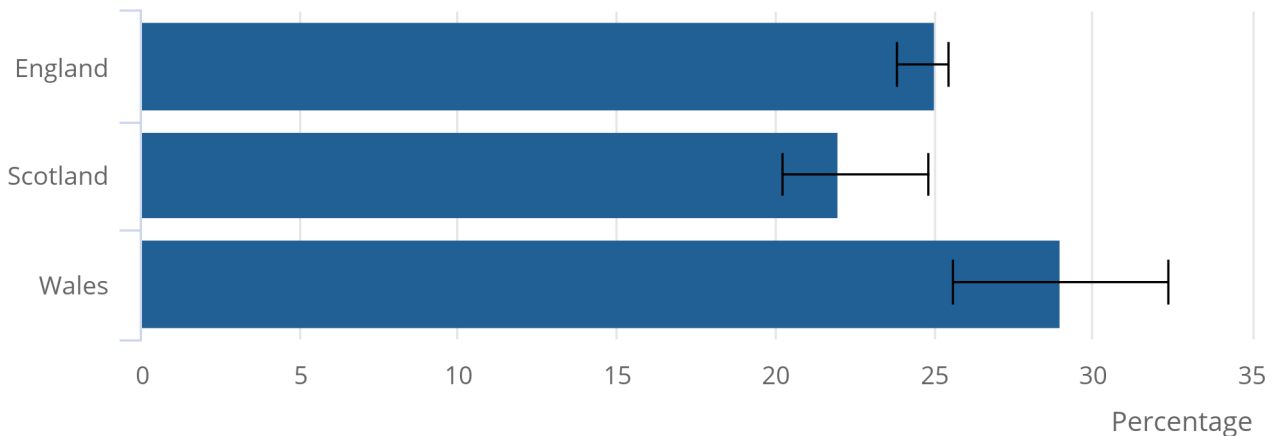
[The Department for Work and Pensions](#) reported there are a higher proportion of adults with disabilities in Wales (30%) and Scotland (27%) compared with in England (23%). Our latest [Estimate of the population for the UK dataset](#) also shows that Wales has a higher proportion of people aged 65 years or older (22%) compared with Scotland (20%) or England (19%).

Figure 6: Significantly more people reported they were waiting for an NHS waiting appointment, test or treatment in Wales than in England or Scotland

Percentage of adults reporting they are waiting for a hospital appointment, test of treatment from the NHS, 18 October 2023 to 24 March 2024

Figure 6: Significantly more people reported they were waiting for an NHS waiting appointment, test or treatment in Wales than in England or Scotland

Percentage of adults reporting they are waiting for a hospital appointment, test of treatment from the NHS, 18 October 2023 to 24 March 2024



Source: Opinions and Lifestyle Survey from the Office for National Statistics

Notes:

1. Question: "Are you currently waiting for a hospital appointment, test, or to start receiving medical treatment through the NHS?".
2. Base: All adults.
3. Each estimate has a lower and upper 95% confidence interval. These measure the statistical precision of an estimate and shows the range of uncertainty around the calculated estimate.

Further breakdowns (including ethnicity, parental or employment status) and accompanying confidence intervals for the estimates are available in the [accompanying dataset](#).

Estimates by country for the period 18 October 2023 to 1 January 2024 are also available in our [Impact of winter pressures on different population groups in Great Britain: GP practice access dataset](#). Estimates based on each individual fortnightly OPN collection are available at a Great Britain level only in our [Public opinions and social trends, Great Britain: GP practice access dataset](#).

The content of the OPN changes over time to reflect emerging priorities, and as a result questions about respondents' experience with NHS waiting lists may not feature in future waves.

There may be several reasons for the differences seen between the OPN and other sources, including that the OPN survey may capture respondents who report themselves as waiting for an appointment, test, or treatment that is not in scope of official RTT measures. Some examples of this might include dental services, some diagnostics and therapies or those in receipt of ongoing planned care after their first treatment. More details on how the OPN estimates are produced are provided in [Section 8: Data sources and quality](#).

6 . UK NHS waiting time data

England

[Referral to treatment waiting times statistics](#)

Dataset | Published monthly

These statistics published by NHS England cover consultant-led referral to treatment waiting times, which monitor the length of time from referral through to elective treatment.

Scotland

[NHS waiting times – stage of treatment](#)

Dataset | Published quarterly

This release by Public Health Scotland (PHS) relates to the length of time patients wait to be seen as a new outpatient or admitted for treatment as an inpatient or day case.

Wales

[Referral to treatment waiting time statistics](#)

Dataset | Published monthly

These statistics published by Welsh Government cover consultant-led and certain non-consultant led referral to treatment waiting times, covering the period of time from referral by a general practitioner (GP) or other medical practitioner to hospital for treatment in the NHS in Wales.

Northern Ireland

[Hospital waiting times statistics](#)

Datasets | Published quarterly

These statistics published by Department of Health Northern Ireland include waiting times for a first outpatient appointment, a diagnostic service and admission for inpatient or day case treatment.

7 . Glossary

Adjusted wait

A length of open or completed wait that takes account of any applicable clock pauses and resets. Adjustments may result from:

- patients who cannot or do not attend an appointment (see: cannot attend and did not attend)
- other patient unavailability or who reject a reasonable offer for an appointment or treatment (see: patient unavailability and completed pathway)

In Scotland, no further clock pauses and resets are applied once a patient has waited beyond an adjusted wait of 12 weeks. While not yet implemented in the data, under new guidance introduced in November 2023, this rule will no longer apply.

Cannot attend and did not attend

"Cannot attend" (CNA) refers to patients who cancel, rearrange or postpone their appointments.

For England's referral to treatment (RTT) data, there is no effect on the clock if a patient cannot attend their appointment.

For Scotland's RTT and stage of treatment data, if a patient cancels an appointment in advance it is recorded as a CNA. The patient's clock may be reset on the date of the CNA if clinically appropriate. However, no further clock pauses and resets are applied once a patient has waited beyond an adjusted wait of 12 weeks.

For Wales' RTT data, the clock is adjusted for the period between the point of notification of the CNA and the agreed subsequent appointment of admission date.

For Northern Ireland's stage of treatment data, the clock is adjusted to commence on the date they informed the Health and Social Care Trust they could not attend. If this is the day of the appointment, then it is recorded as "Did not attend (DNA)".

DNA refers to patients who do not attend their appointment and have not notified the hospital to cancel, rearrange or postpone.

For England's referral to treatment (RTT) data, the clock will be nullified if patients DNA their first appointment following a referral. Patient DNAs at any other point of the pathway will not stop the clock unless the patient is discharged back to their GP.

For Scotland's RTT and stage of treatment data, the clock can be reset if it is deemed clinically appropriate or reasonable to reset the clock.

For Wales' RTT data, the clock will be reset but can be stopped for patients who DNA multiple times.

For Northern Ireland's stage of treatment data, the clock will be adjusted to commence on the date of the DNA.

Consultant- and non-consultant led

A treatment pathway where a consultant takes overall responsibility for a patient's treatment is consultant-led. The consultant may not necessarily be present at each appointment but still retains overall responsibility for the patient's care.

A treatment pathway where a consultant does not take overall responsibility for the treatment of a patient is non-consultant led.

Follow-up consultations

Patients waiting for pre-treatment follow-up consultations (for example, an outpatient appointment) are part of the RTT pathway and are reported in data for England and Wales.

Patients waiting for post-treatment follow-up consultations are not included in England and Wales RTT statistics. However, in England, if a patient on a planned list is clinically ready for their care to commence and reach the date for their planned appointment, the patient should either receive that appointment or be added onto the active RTT waiting list (that is, a new RTT clock should start).

Inpatient and outpatient waits

Inpatient and day case waiting times begin from the agreement or decision to admit up until the patient is admitted as an inpatient or day case.

Outpatient waits refers to patients waiting for a "new" or "first" outpatient appointment. This is often the first stage of the treatment pathway following a referral.

Open and closed pathways

Open pathways can also be referred to as "ongoing" or "incomplete" waits. These refer to pathways where a patient has been referred and, depending on the coverage of the measure, is waiting for an outpatient appointment, for a diagnostic test or for treatment to begin.

Completed (or "closed") patient pathways are where, depending on the coverage of the measure, a patient has attended a first outpatient appointment, or has been removed from the waiting list because treatment has started, has been declined, is no longer required (for example, there is a clinical decision not to treat), or the patient has died.

Patient pathways

Patient pathway refers to a patient's space on a waiting list. Some patients may be on more than one waiting list or waiting for more than one admission on the same waiting list due to having multiple referrals. These patients are counted more than once in the data and means the number of patient pathways does not equate to the number of individual patients waiting

Patient unavailability

Waiting times are adjusted to deduct periods where the patient is recorded as unavailable. This can be where patients cannot attend appointments, patients who do not attend appointments or rejects an appointment offer. Other scenarios vary by country. For example, in Scotland, patients who request a specific consultant or location are recorded as "patient requested unavailability".

For stage of treatment data presented, patients whose treatments are suspended for medical or social reasons, are removed from the waiting list in Northern Ireland. In Scotland, while their clock may stop, they will remain on the waiting list.

Transfers to and from the private sector

In England data, patients treated in the private sector under NHS commissioning arrangements are included. For private patients who transfer to NHS care, the waiting time clock starts from the point at which clinical responsibility transfers to the NHS.

In Scotland data, NHS patients treated in the private sector are included under the responsibility of the referring NHS board. Private patients referred for NHS care are included.

In Wales data, NHS patients treated in the private sector are included and private patients transferring to NHS care are included.

For Northern Ireland, patients who are transferred by a Health and Social Care Trust for treatment by an Independent Sector provider are included in inpatient and day case wait statistics.

8 . Data sources and quality

This article brings together the data on NHS planned care waiting times that are published by each UK country.

England

Data from September 2011 to March 2024 on the number of open patient pathways and patient pathways waiting more than 52 weeks for treatment in England at the end of each month were obtained from the [Referral to Treatment \(RTT\) Waiting Times dataset](#), which is published monthly by NHS England. These data are official statistics and show the total number of patient pathways waiting for consultant-led treatment and the length of time waiting. Users should note from February 2024 onwards, community service pathways should no longer be reported in RTT datasets. See the [latest RTT statistical press notice](#) for more information.

This dataset also includes data on:

- the number of unique patients waiting for treatment
- time waited for patients who were admitted for treatment during the month
- time waited for patients whose treatment pathway ended without hospital admission
- waiting times for patients with a decision to admit for treatment

NHS England also publish [monthly diagnostic waiting times and activity separately](#).

Scotland

Data from December 2012 to March 2024 on the number of open patient pathways waiting for a new outpatient appointment or to be admitted for treatment as an inpatient or day case and those of which have been waiting more than 52 weeks at the end of each quarter in Scotland were obtained from the [NHS waiting times stage of treatment release](#), which is published quarterly by Public Health Scotland. These data are official statistics and show the open patient pathways waiting to be admitted for treatment as an inpatient or day case admission and the length of time waiting.

Public Health Scotland also publish [quarterly diagnostic waiting times separately](#).

Wales

Data from February 2021 to March 2024 on the number of open patient pathways waiting for treatment and patient pathways waiting more than 52 weeks for treatment at the end of each month in Wales were obtained from the [patient pathways waiting to start treatment dataset](#), which is published monthly by Welsh Government. Data for months between September 2011 and January 2021 were obtained from the [previous edition of this dataset](#). These data are official statistics and show the total number of patient pathways waiting for consultant-led and certain non-consultant led treatment and the length of time waiting.

This dataset was adjusted to provide broadly comparable data with England (see [Section 4: Trends over time in NHS planned care](#)) by removing non-consultant led pathways (Diagnostic Services and Allied Health Professional Services) from the data. In March 2024 data, these pathways represented 11% of the total open patient pathways.

Users undertaking analysis to remove non-consultant led pathways from Welsh Government data in the future should be aware of any changes in methodology that may affect the comparability of these data with England.

Welsh Government also publish monthly waiting time data for different stages of the treatment pathway, including people waiting for:

- a first outpatient appointment
- a diagnostic or Allied Health Professional test, intervention, or result
- a follow up outpatient or appointment
- admitted diagnostic or therapeutic intervention (treatment)

Northern Ireland

Data from September 2011 to September 2023 on the number of open patient pathways waiting for a first outpatient appointment or to be admitted for treatment as an inpatient or day case and those of which have been waiting more than 52 weeks at the end of each quarter in Northern Ireland were obtained from the [Outpatient waiting times](#) and [Inpatient waiting times](#) datasets, which are published quarterly by Department of Health Northern Ireland. Data extracts can be filtered and downloaded from [their data portal](#). These data are official statistics and show the open patient pathways waiting for a first outpatient appointment or to be admitted for treatment as an inpatient or day case and length of time waiting.

Department of Health Northern Ireland also publish [Diagnostic waiting times statistics](#).

Rates of patient pathways per 100 population

In [Section 4: Trends over time in NHS planned care](#), rates of patient pathways per 100 population were calculated by dividing the number of patient pathways in each country at the end of the month or quarter, by the respective population estimate, and then multiplying by 100.

Monthly population estimates have been calculated through interpolation. We calculate an annual population centred on the midpoint of the month using two years' worth of population estimates (or where these are not available, population projections).

For the first half of the year (January to June), populations for the current year and the previous year are used; for the second half of the year (July to December), populations for the current year and the following year are used. This is then multiplied by the number of days within the month as a proportion of the total number of days within that year.

This method is also used to produce population estimates for mortality rates produced by us and described in more detail in our [Coronavirus and mortality in England and Wales methodology](#).

In England, Wales and Northern Ireland, mid-year 2022-based estimates were used up to the end of 2022 from our [Estimates of the population for England and Wales datasets](#) (estimates for Northern Ireland are included under the UK edition of this) and 2021-based projections were used from our national population projections datasets for 2023 onwards.

In Scotland, [Mid-year 2022 estimates](#) used up to end of 2022 and 2020-based projections used for 2023 onwards, from our [Interim national population projections datasets](#). Users should note that the 2022 mid-year estimate is the first Scottish population estimate to be informed by the Scottish Census 2022. Rebased population estimates are due to be published by [National Records of Scotland](#). This means that the rates shown in this publication may be subject to some minor change in the future. More information is available in the [report that reconciles Census 2022 estimates](#), with rolled-forward estimates from the 2011 Census.

Opinion and Lifestyle Survey

The Opinion and Lifestyle Survey (OPN) is a fortnightly survey that collects data from individuals (aged 16 years or older) in Great Britain.

It has periodically collected data related to [people's experiences of NHS waiting times](#) since November 2022.

Data from the OPN on the number of people reporting waiting for a hospital appointment, for a test, or to start receiving medical treatment through the NHS is reported in [Section 5: Other data sources on waiting lists: Opinions and Lifestyle Survey](#). Estimates (including their associated confidence intervals) are available by a variety of breakdowns including country, age, and disability status are included within the accompanying [dataset](#). For more information on confidence intervals, see our [Uncertainty and how we measure it for our surveys article](#).

Survey weights are applied to make estimates representative of the population (based on our population estimates).

Estimates for some groups of the population may be subject to greater uncertainty because of smaller sample sizes for these groups (for example, younger adults).

Further information on the survey design and quality can be found in our [OPN Quality and Methodology Information \(QMI\)](#).

There are differences between the official RTT statistics and OPN survey data that users should consider when interpreting any differences between these data sources:

- OPN data are collected from a self-completed online questionnaire; these rely on individuals' interpretation of the question, while RTT data are collected through administrative systems in accordance with RTT rules and policies
- OPN survey data estimates are based on the number of individual people reporting waiting (some will be waiting for several treatments), while RTT statistics report a separate pathway for each treatment a patient is waiting for
- OPN survey questions capture respondents who perceive themselves as waiting for an appointment, test or treatment that may not be captured by the official RTT measure (see [Section 3: UK planned care waiting time data methods](#)), for example, those in receipt of ongoing planned care after first treatment
- OPN survey data participants are aged 16 years and over; this differs from the official RTT statistics that use administrative data from NHS systems for people of all ages

9 . Related links

[Government Statistical Service: Coherence of statistics](#)

Webpage | Last updated 2023

This page sets out information and signposts to resources on the coherence of statistics across the Government Statistical Service.

[Government Statistical Service: Health and care statistics](#)

Webpage | Last updated May 2023

This page sets out information and signposts to resources for users on health and care statistics in the UK.

10 . Cite this article

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