Hospital waiting lists and pressures on the NHS

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*BMJ* 2005;330;1352-
doi:10.1136/bmj.330.7504.1352

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Dr Foster’s case notes
Hospital waiting lists and pressures on the NHS

We analysed waiting lists for NHS English hospital trusts published by the Department of Health for the period from 1 April 1998 to 31 March 2005 (www.performance.doh.gov.uk/waitingtimes/). We divided the specialties into those with more than 1% inpatient mortality (28 specialties) and those with less than 1% (36 specialties) in the year to 31 March 2004. The high mortality group had an average death rate of 3.3%, and accounted for 97% of hospital deaths and 73% of hospital episodes. The low mortality group had an average death rate of 0.2%. Overall, since 1999 the numbers waiting for admission over six months have reduced (mainly from 2002), but—for patients in specialties with high hospital mortalities—waiting lists for people waiting under six months increased by 8% (fig 1).

We also analysed hospital episode statistics for England from 1 April 1996 to 31 December 2004 to determine the average waiting time from the date of decision to admit to actual admission. The average waiting times were about the same at the end of this period as at the beginning but increased by as much as 28% in the intervening years (fig 2). A similar picture emerged for individual procedures. The total available NHS hospital beds in England decreased from 198 958 in 1996-7 to 184 207 in 2003-4—a reduction of 7.4%, and bed occupancy increased.

The basic figures
1. Over this period, those waiting less than six months for the 28 specialties with inpatient death rates over 1% rose from 383 513 to 415 318 (8% increase); for the 36 specialties with death rates under 1% the numbers fell from 409 720 to 364 988 (11% reduction).
2. For cardiology, the number of patients waiting less than six months increased by 84%; for ophthalmology it decreased by 36%.
3. Average waiting time, from hospital episode statistics, of those entering hospital for all admissions was highest (102.8 days) in the third quarter of 1998.

This month’s Dr Foster’s case notes were compiled by Brian Jarman at the Dr Foster Unit at Imperial College and Steve Middleton from Dr Foster Ltd. Dr Foster is an independent research and publishing organisation created to examine measures of clinical performance.

Unabridged version with methodology and additional data is on bmj.com