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## Press release

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### Increased funding and new ways of working need to show results for patients

Much is being done to improve the NHS in Scotland – some important NHS targets are likely to be met, including the majority of waiting times targets and targets to reduce deaths from cancer, heart disease and strokes. But the Scottish Executive must do more to demonstrate that increased funding and new ways of working are actually benefiting patients, according to a report published today by the Auditor General, Robert Black.

For the first time, Audit Scotland has produced a report on the overall performance of the NHS in Scotland, drawing on a wide range of published information.

The NHS in Scotland is changing the way it delivers services: medical advances are changing the treatments that patients receive and more people can be treated in community settings rather than in hospital. But according to Audit Scotland, in some areas, the Health Department finds it difficult to demonstrate what effects these changes are having, whether services are actually improving or how much is being spent on them.

“The NHS in Scotland spends about £7 billion each year and this is due to rise to £8.7 billion by 2006,” said Mr Black. “The public needs to know how well this money is used. Our report makes a start but the Health Department must close the information gap. It is important that it can demonstrate that the extra money is delivering better care for patients.”

The report points out that much of the increase in funding will be taken up by cost pressures such as the UK-wide pay modernisation initiatives for consultants, GPs and other NHS staff, and the rising cost of drugs. The Health Department has indicated that it expects NHS boards to deliver improved services for patients through the implementation of these pay agreements, but it has not fully specified the outcomes it expects to see.

“The Health Department wants pay modernisation to deliver high quality services to patients,” said the Auditor General. “But it must identify and measure what improvements it expects to see as a result of this investment”

The Audit Scotland report brings together information on Scotland’s health and the resources of the NHS in Scotland. It analyses performance against targets, outcomes for the national clinical priorities and the available information on capacity and activity.

#### *Other key points from the reports include:*

- Scotland continues to suffer from some of the poorest health rates in Europe. While improvements are being made, Scotland still has high death rates in areas such as cancer, heart disease and strokes, when compared to other comparable EU countries. (Part 2)
- Within the United Kingdom, Scotland has more doctors and nurses and spends more per head on the NHS. (Part 3)
- Total numbers of emergency, planned and day case admissions have been falling over the past few years; for 2003/04, small increases in day case and emergency inpatients have been offset by a reduction in planned admissions. (Part 4)

- Waiting times targets for most inpatients and day cases are being met, but more still needs to be done to meet waiting time targets for coronary heart disease (CHD) and cancer. (Part 5)
- Targets for reducing death rates from the biggest killers (CHD, strokes and cancer) are likely to be met. (Part 6)
- Mental health problems are among the commonest causes of ill health in Scotland. Around 30% of GP consultations each year are for mental health problems. Mental health is a national clinical priority but the development of targets in this area requires attention. (Part 6)
- The number of people whose discharge from hospital is delayed is reducing but more work needs to be done by the NHS and councils to prevent avoidable emergency admissions of older people. People aged 80 and over account for most of the emergency bed admission days. The majority of delayed discharges from hospitals occur after emergency admissions. (Part 7)
- Councils are targeting home care services on those in greatest need. This has resulted in a decrease of about a third in the number of people receiving home care but an increase in the number of hours they get. Two in five users now get more than 19 hours of home care each week. With rising numbers of older people, there is likely to be a growing demand for lower level preventative services that enhance quality of life. (Part 7)

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## **Notes to editors**

1. The Auditor General is responsible for securing the audit of the Scottish Executive and most other public bodies in Scotland, except local authorities. He investigates whether spending bodies achieve the best possible value for money and adhere to the highest standards of financial management. The Auditor General is independent and is not subject to the control of the Scottish Executive or the Scottish Parliament.
2. Audit Scotland is a statutory body set up in April 2000, under the Public Finance and Accountability (Scotland) Act, 2000. It provides services to the Accounts Commission and the Auditor General for Scotland.