Management of patients on NHS waiting lists

Self-assessment checklist for NHS boards





Prepared for the Auditor General for Scotland
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Auditor General for Scotland

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- further education colleges
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Self-assessment checklist for NHS boards

- 1. Audit Scotland published its national report, Management of patients on NHS waiting lists, on 21 February 2013. This checklist sets out some of the high-level practical issues around managing waiting lists raised in our main report. NHS boards should assess themselves against each statement and consider which statement most accurately reflects their current situation. This approach will enable boards to identify the actions they need to take forward.
- The last column in the checklist can be used to record sources of evidence and supplementary comments to support your assessment or to highlight areas of interest.

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Assessment of current position

	No – action needed	No – but action in hand	Yes – in place but needs improving	Yes – in place and working well	Not applicable	Comments
We are monitoring and reporting the use of waiting list codes to ensure they are being applied: • appropriately and consistently • in line with updated national guidance issued in 2012.						
We are recording information within patient records about the reasons for applying waiting list codes.						
Our electronic systems have an audit trail to enable scrutiny of waiting list systems (see Exhibit 4 on page 17 in the report).						
Good controls and safeguards are in place (as described in Exhibit 4 on page 17 in the report) to provide assurance that waiting lists are being managed properly.						

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We have shared any good practice on enhanced performance reporting for monitoring patients on waiting lists, or implemented this from other boards if appropriate.						
We are identifying and taking into account patients' individual circumstances, such as access to transport, mobility and additional support needs, before offering them treatment at a location outside the board area.						
We are monitoring the number of offers made to patients for treatment outside the board area, and how many of these are accepted, as part of wider monitoring of local capacity.						
We are ensuring that patients with additional support needs, such as a disability or requiring a translator, are identified and provided with the support they require.	i					

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	No – action needed	No – but action in hand	Yes – in place but needs improving	Yes – in place and working well	Not applicable	Comments
We are monitoring the use of social unavailability codes to ensure staff are applying the codes appropriately, including monitoring: • high numbers of changes to records						
retrospective changeschanges that affect waiting time performance.						
We are monitoring the use of patient choice codes introduced under the updated guidance to ensure this is kept to minimum.	t					
We have taken action to reduce unavailability in specialties where use of these codes is particularly high and may indicate capacity problems.						
We have adequate systems in place so there is no delay in hospitals receiving referrals or delays in the patient being added to the waiting list.						

	No – action needed	No – but action in hand	Yes – in place but needs improving	Yes – in place and working well	Not applicable	Comments
We communicate clearly with patients about their rights and responsibilities under waiting time guidance and legislation.						
We have effective whistleblowing policies and procedures in place for people to raise concerns safely. We have publicised these to staff and patients.						
We use information about the use of waiting list codes, alongside waiting time performance data, to:						
 identify where staff may be applying codes inconsistently or inappropriately 						
 help plan and manage the capacity needed to meet waiting time targets. 						

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	No – action needed	No – but action in hand	Yes – in place but needs improving	Yes – in place and working well	Not applicable	Comments
We provide our non-executive directors with the full range of information to scrutinise how						
waiting list codes are being applied						
 capacity is being planned and managed to meet waiting time targets. 						

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