

Has suspending targets changed waiting times?

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Have the suspension of central performance management of the 18 week referral to treatment target, and a relaxation of the four hour Accident and Emergency target, changed waiting times asks John Appleby, Chief Economist at the King's Fund in this week's *British Medical Journal*?

The English National Health Service was once notorious for its excessive waiting times. In December 1999, nearly 160,000 patients were still waiting over six months for their first outpatient appointment and over 50,000 were still waiting over a year for a bed in hospital.

But since 2000, tough targets imposed by the then Labour government have seen long waits virtually eliminated. The median waiting time – the time spent waiting by half of those on waiting lists - has also fallen, from around 18 weeks in 2007 to just one month now for inpatients admitted to hospital.

The outcome is perhaps one of the most significant achievements for the NHS in recent years, writes Appleby. But is it now winning the "war on waiting"?

Tracking waiting times since June last year gives a mixed picture, somewhat muddied by seasonal effects in changes in waiting times, he says. Although figures for December 2010 show that waits were down on the previous month, the proportion of patients still waiting over 18 weeks for hospital treatment increased by more than the seasonal effect would predict.



Meanwhile, median waits for diagnostic services are now back to the level seen in December 2007, although this largely reflects a seasonal trend.

Regardless of the effect reductions in waiting times have had on patients' health, Appleby points out that reductions in waiting are valued and are likely to have contributed to rising satisfaction with the NHS over the past decade.

All this makes the suspension of Labour's targets "an interesting experiment in the power of alternative policy levers to bear down on waiting times: notably, patient choice and the degree to which GP commissioning will reflect patients' values and their rights under the NHS Constitution," he writes.

"The coming months - and particularly the new financial year, when budgets get squeezed - will start to reveal some more consistent trends," he concludes.

Provided by British Medical Journal

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