



The four health systems of the United Kingdom: how do they compare?

Appendix 1: Indicator definitions and sources

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About this research programme

The report to which this is an appendix is the fourth in a series dating back to 1999. It looks at how the publicly financed health care systems in the four countries of the UK have fared before and after devolution.

The research looks at how the four national health systems compare and how they have performed in terms of quality and productivity before and after devolution. We have also examined performance in North East England, which is acknowledged to be the region that is most comparable to Wales, Scotland and Northern Ireland in terms of socioeconomic and other indicators.

The full report, summary report, data appendices and digital outputs, together with a short report on the history of devolution (to be published later in 2014), are available to download free of charge at www.nuffieldtrust.org.uk/compare-uk-health and www.health.org.uk/compareUKhealth

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This Appendix gives details on the sources, coverage and definitions of the data used in Chapters 4 and 5 of the report *The four health systems of the United Kingdom:* how do they compare? Coverage and definitions of data on staff groups are presented in Table 2 on page 13.

Table 1: Indicator definitions and sources

Indicator	Definition	Source	Comments
Life expectancy (at birth) The average number of years that a person born in a specific year is expected to live	Office for National Statistics (ONS): Life expectancy at birth and at age 65 by local areas in England and Wales, 2009–11: www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcm%3A77-314574 National Records for Scotland (NRS): Extract from Interim Life Table by sex and age, Scotland, 2009–11 (2. August 2012):	Data for Scotland are provisional for 2009–11.	
		2009-11 (2 August 2012): www.gro-scotland.gov.uk/files2/stats/life-expectancy-at-scotland-level/table2-le-2009-2011.xls	
		ONS: Interim Life Tables, Northern Ireland, 1980–82 to 2010–12: www.nisra.gov.uk/demography/default.asp130.htm	
Government expenditure on health	Government expenditure on health, per head	HM Treasury country and regional analysis: 2013 (for data 2008/09-2012/13): www.gov.uk/government/publications/country-and-regional-analysis-2013 Pre-2008 HM Treasury Public Expenditure Statistical Analyses (PESA): www.gov.uk/government/organisations/hm-treasury/series/public-expenditure-statistical-analyses-pesa#publications Public spending pre-2004: the national archives: www.ukpublicspending.co.uk/year_spending_2004NEdn_03dc1n_10#ukgs302	There are potential problems in comparing data for more than five years from archived databases, because these are not adjusted for changes in definition and classification. However, the Holtham Commission of 2009 found that these changes were not sufficiently material to prevent longitudinal comparisons. The most recent update (Dec 2013) for country and regional analysis contains figures for North East England that are substantially different from earlier versions.
General practitioners (GPs) (whole- time equivalent, WTE)	GPs (WTE) per 1,000 population	Health & Social Care Information Centre (HSCIC): England and North East: NHS staff 2001–11, overview: www.hscic.gov.uk/searchcatalogue?productid=4889&topics=1%2fWorkforce%2fStaff +numbers&sort=Relevance&size=10&page=3#top HSCIC: NHS staff – 1996–2006, overview: www.hscic.gov.uk/searchcatalogue?productid=2092&q=title%3a%22NHS+Staff+%22&	GP WTE for Scotland is an estimate based on 2009 and 2013 workforce surveys. GP WTEs for Northern Ireland have not been reported since 2003. See Table 2 on staffing for more details (page 13).
		sort=Relevance&size=10&page=2#top Welsh Government: Wales: Annual report, general medical practitioners 2002–12: http://wales.gov.uk/topics/statistics/headlines/health2013/general-medical-practitioners-2002-2012/?lang=en	(6-30-10).

Table 1: Indicator definitions and sources (continued)

Indicator	Definition	Source	Comments
General practitioners (GPs) (wholetime equivalent, WTE) continued		Information Services Division (ISD) Scotland: National Primary Care Workforce Survey 2009: www.isdscotland.org/Health-Topics/General-Practice/GPs-and-Other-Practice-Workforce/national-primary-care-workforce-survey-2009.asp Primary Care Workforce Survey 2013: www.isdscotland.org/Health-Topics/General-Practice/GPs-and-Other-Practice-Workforce/primary-care-workforce-survey-2013.asp	
GPs (headcount)	GPs (headcount) per 1,000 population	GP headcount numbers from: HSCIC: England NHS staff, 2001–2011: www.hscic.gov.uk/catalogue/PUB05234/nhs-staf-2001-2011-over-tab.xls HSCIC: North East NHS staff, 2001–2011: www.hscic.gov.uk/catalogue/PUB05234/nhs-staf-2001-2011-over-sha-tab.xls HSCIC: NHS staff - 1996–2006, England: www.hscic.gov.uk/catalogue/PUB00912/nhs-staf-over-1996-2006-tab1.xls HSCIC: NHS staff - 1996–2006, North East: www.hscic.gov.uk/catalogue/PUB00912/nhs-staf-over-1966-2006-tab2.xls Welsh Government: Health Statistics Wales, 2013: http://wales.gov.uk/statistics-and-research/health-statistics-wales/?lang=en Welsh Government: for 1996–2008: Health Trends in Wales, 2011: http://wales.gov.uk/topics/statistics/publications/healthtrends11/?lang=en Scotland: NHS Scotland Workforce (2013), for 2002–2011: https://isdscotland.scot.nhs.uk/Health-Topics/Workforce/Publications/2013-05-28/ 2013-05-28-Workforce-Report.pdf ISD Scotland: Overall summary by time, NHS board and NHS region (WTE), 1996–2006: www.isdscotland.org/Health-Topics/Workforce/Historic-Data/ Northern Ireland: HSC - GPs General Medical Statistics: www.hscbusiness.hscni.net/services/1804.htm Population numbers: Office for National Statistics (ONS): Population estimates for England and Wales, mid-2012: www.ons.gov.uk/ons/rel/pop-estimate/population-estimates-for-england-and-wales/mid-2012/ index.html	In England (and North East England) a new headcount methodology was introduced from 2010, which means that these data are not fully comparable with data for previous years. See Table 2 on staffing for more details (page 13).

Table 1: Indicator definitions and sources (continued)

Indicator	Definition	Source	Comments
GPs (headcount)		General Register Office for Scotland: Mid-year population estimates: www.gro-scotland.gov.uk/statistics/theme/population/estimates/mid-year/index.html	
continued		Northern Ireland Statistics and Research Agency (NISRA): Mid-year population estimates: www.nisra.gov.uk/demography/default.asp17.htm	
Hospital doctors (WTE)	Medical and dental professionals (WTE), per 1,000 population	HSCIC: England NHS staff, 2001–11: www.hscic.gov.uk/catalogue/PUB05234/nhs-staf-2001-2011-over-tab.xls HSCIC: North East NHS staff, 2001–11: www.hscic.gov.uk/catalogue/PUB05234/nhs-staf-2001-2011-over-sha-tab.xls HSCIC: NHS staff – 1996–2006, England: www.hscic.gov.uk/catalogue/PUB00912/nhs-staf-over-1996-2006-tab1.xls HSCIC: NHS staff – 1996–2006, North East: www.hscic.gov.uk/catalogue/PUB00912/nhs-staf-over-1966-2006-tab2.xls Welsh Government: Health Statistics Wales, 2013: http://wales.gov.uk/statistics-and-research/health-statistics-wales/?lang=en Welsh Government: for 1996–2008: Health Trends in Wales 2011: http://wales.gov.uk/topics/statistics/publications/healthtrends11/?lang=en Scotland: NHS Scotland Workforce (2013), for 2002–11: https://isdscotland.scot.nhs.uk/Health-Topics/Workforce/Publications/2013-05-28/2013-05-28-Workforce-Report.pdf ISD Scotland: Overall summary by time, NHS board and NHS region (WTE) 1996–2006: www.isdscotland.org/Health-Topics/Workforce/Historic-Data/ Northern Ireland: 2003-2011: Northern Ireland Health and Social Care Workforce Census 2012: www.dhsspsni.gov.uk/workforce_census_march_2012web.pdf Northern Ireland: Health and Personal Social Services Workforce Census, September 2002, for 1996–2002: www.dhsspsni.gov.uk/wf_census_02_tablea.pdf Population numbers for England and Wales from ONS population estimates, NRS mid-year population estimates	For all four countries, this staff group includes hospital and community medical and dental staff who hold permanent, paid (whole-time, part-time, sessional), fixed-term or temporary and/or honorary appointments in NHS hospitals and community health services. See Table 2 on staffing for more details (page 13).

Table 1: Indicator definitions and sources (continued)

Indicator	Definition	Source	Comments
Nurses (WTE)	Qualified nursing, midwifery and health	HSCIC: England NHS staff, 2001–11: www.hscic.gov.uk/catalogue/PUB05234/nhs-staf-2001-2011-over-tab.xls	In Scotland, there was a drop in the numbers reported for 2007 due to the introduction of
	visiting staff (WTE) per 1,000 population	HSCIC: North East NHS staff, 2001–11: www.hscic.gov.uk/catalogue/PUB05234/nhs-staf-2001-2011-over-sha-tab.xls	Agenda for Change. See Table 2 on staffing for more details
		HSCIC: NHS staff - 1996-2006, England: www.hscic.gov.uk/catalogue/PUB00912/nhs-staf-over-1996-2006-tab1.xls	(page 13).
		HSCIC: NHS staff – 1996–2006, North East: www.hscic.gov.uk/catalogue/PUB00912/nhs-staf-over-1966-2006-tab2.xls	
		Welsh Government: Health Statistics Wales, 2013: http://wales.gov.uk/statistics-and-research/health-statistics-wales/?lang=en	
		Welsh Government: for 1996–2008: Health Trends in Wales 2011: http://wales.gov.uk/topics/statistics/publications/healthtrends11/?lang=en	
		Scotland: NHS Scotland Workforce (2013), for 2002–11: https://isdscotland.scot.nhs.uk/Health-Topics/Workforce/Publications/2013-05-28/2013-05-28-Workforce-Report.pdf	
		ISD Scotland: Overall summary by time, NHS board and NHS region (WTE) 1996–2006: www.isdscotland.org/Health-Topics/Workforce/Historic-Data/	
		Northern Ireland: 2003–11 – Health and Social Care Workforce Census 2012: www.dhsspsni.gov.uk/workforce_census_march_2012web.pdf	
		Northern Ireland: Health and Personal Social Services Workforce Census, September 2002, 1996–2002: www.dhsspsni.gov.uk/wf census 02 tablea.pdf	
		Population numbers for England and Wales from ONS population estimates, GRO for Scotland mid-year population estimates, NISRA home population.	

Table 1: Indicator definitions and sources (continued)

Indicator	Definition	Source	Comments
Infrastructure staff (WTE)		HSCIC: England NHS staff, 2001–11: www.hscic.gov.uk/catalogue/PUB05234/nhs-staf-2001-2011-over-tab.xls	See Table 2 on staffing for more details (page 13).
		HSCIC: North East NHS staff, 2001–11: www.hscic.gov.uk/catalogue/PUB05234/nhs-staf-2001-2011-over-sha-tab.xls	
		HSCIC: NHS staff – 1996–2006, England: www.hscic.gov.uk/catalogue/PUB00912/nhs-staf-over-1996-2006-tab1.xls	
		HSCIC: NHS staff – 1996–2006, North East: www.hscic.gov.uk/catalogue/PUB00912/nhs-staf-over-1966-2006-tab2.xls	
		Welsh Government: Health Statistics Wales, 2013: http://wales.gov.uk/statistics-and-research/health-statistics-wales/?lang=en	
		Welsh Government: for 1996–2008: Health Trends in Wales 2011: http://wales.gov.uk/topics/statistics/publications/healthtrends11/?lang=en	
		Scotland: NHS Scotland Workforce (2013), for 2002–11: https://isdscotland.scot.nhs.uk/Health-Topics/Workforce/Publications/2013-05-28/2013-05-28-Workforce-Report.pdf	
		ISD Scotland: Overall summary by time, NHS board and NHS region (WTE) 1996–2006: www.isdscotland.org/Health-Topics/Workforce/Historic-Data/	
		Northern Ireland: 2003–11: Health and Social Care Workforce Census 2012: www.dhsspsni.gov.uk/workforce_census_march_2012web.pdf	
		Northern Ireland: 1996–2002: Health and Personal Social Services Workforce Census, September 2002: www.dhsspsni.gov.uk/wf_census_02_tablea.pdf	
		Population numbers for England and Wales from ONS population estimates, GRO for Scotland mid-year population estimates, NISRA home population.	

Table 1: Indicator definitions and sources (continued)

Indicator	Definition	Source	Comments
Outpatient activity	All attendances, per 1,000 population	England and North East: HSCIC, Hospital Episode Statistics for England, outpatient statistics, 2003/04 to 2011/12: www.hscic.gov.uk/article/2021/Website-Search?q=title:%22hospital+outpatient+activity%22& area=both&size=10&sort=Most+recent Wales: Health Trends in Wales, 2011 (1998/99 to 2009/10): http://wales.gov.uk/topics/statistics/publications/healthtrends11/?lang=en Scotland: High Level Summary of Statistics Trends, health and community care, 2002/03-2011/12: www.scotland.gov.uk/Topics/Statistics/Browse/Health/TrendData Northern Ireland: Northern Ireland Hospital Statistics, Outpatient activity statistics: KH09 (Part 1) for 1998/99 to 2007/08, Quarterly Outpatient Activity Query (QUAR) 2008/09 to 2011/12: www.dhsspsni.gov.uk/northern_ireland_hospital_statistics_outpatient_activity201112 downloadable_tables.xls Population numbers for England and Wales from ONS population estimates, GRO for Scotland mid-year population estimates, NISRA home population.	In England, data on each outpatient attendance of a series are included in the year that the attendance occurred. People attending more than one department are counted in each department. Activity in England and North East England includes that in NHS hospitals and NHS-commissioned activity in the independent sector. Prior to and including 2005/06, the data are experimental and less reliable. From 2006/07 and 2007/08 the data include activity in all NHS trusts.¹ In Scotland, practice is the same as in England, except that Scottish data do not include outpatient appointments that are funded by the NHS, but are carried out in the private sector. In Northern Ireland, the methodology for the collection of outpatient activity changed in 2008/09: from the reporting of the number of appointments held and cancelled. Alongside this change, the classification of types of appointments changed: from referral and consultantinitiated attendances to that of new and review attendances.

^{1.} The codes for these are: 5KG, NN401, NT229, NT237, NT333, NT457, NVC29, NVC35, RE9, RLN, RR7-X, RTD, RTF, RTR, RVW, RX3, RX4, RXP and TAC.

Table 1: Indicator definitions and sources (continued)

Indicator	Definition	Source	Comments
Inpatient activity	Inpatient admissions (spells) per 1,000 Admissions are ordinary inpatient	England and North East: HSCIC, Hospital Episode Statistics for England, inpatient statistics, 1998/99 to 2010/11: www.hscic.gov.uk/searchcatalogue?q=title%3A%22Hospital+Episode+Statistics%2C+ Admitted+patient+care+-+England%22&area=&size=10&sort=Relevance	Data for England, North East England, Scotland and Wales include all activity in the NHS hospitals and NHS-commissioned activity in private hospitals.
	admissions (elective and non-elective), excluding day-cases,	Wales: NHS Wales Information Service, Patient Episode Database for Wales, Annual PEDW Data Tables, 1999/00 to 2011/12: www.infoandstats.wales.nhs.uk/page.cfm?orgid=869&pid=41010	In Northern Ireland, data include NHS hospitals, including independent activity in NHS hospitals.
	regular attenders and births, unless specified otherwise	Scotland: Scottish Government, High level summary of statistics, health and community care, 2002/03 to 2011/12: www.scotland.gov.uk/Topics/Statistics/Browse/Health/TrendData	Data for all countries are for all specialties. In Scotland, inpatient data also include day- cases for non-acute specialties.
		Northern Ireland: Northern Ireland Hospital Statistics: Inpatient and day case activity, Hospital Inpatient System (HIS) reports 2005/06 to 2011/12: www.dhsspsni.gov.uk/index/stats_research/hospital-stats/inpatients/hospital-stats-previous.htm	In Northern Ireland, the source of hospital inpatient information changed in 2009/10, and trend data were recalculated for the 5
		Northern Ireland Hospital Statistics, KH03a aggregate return 1998/99 to 2003/04: www.dhsspsni.gov.uk/key-facts-98-04.pdf	years starting from 2005/06. The drop in the rates between 2004/05 and 2005/06 reflect changes to the definition of day-cases.
		Population numbers for England and Wales from ONS population estimates, GRO for Scotland mid-year population estimates, NISRA home population	
Day-cases	Day-cases per 1,000 A patient admitted electively during the course of a day with the intention of receiving care who does not require the use of a hospital bed overnight and who returns home as scheduled. If this original intention is not fulfilled and the patient stays overnight, such a patient should be counted as an ordinary admission	England and North East: HSCIC, Hospital Episode Statistics for England, inpatient statistics, 1998/99 to 2010/11: www.hscic.gov.uk/searchcatalogue?q=title%3A%22Hospital+Episode+Statistics%2C+ Admitted+patient+care+-+England%22&area=&size=10&sort=Relevance	Data for England and North East England include English NHS hospitals and English NHS commissioned activity in the independent sector.
		Wales: NHS Wales Information Service, Patient Episode Database for Wales, Annual PEDW Data Tables, 1999/00 to 2011/12:	For North East England, data are from providers in that region.
		www.infoandstats.wales.nhs.uk/page.cfm?orgid=869&pid=41010 Scotland: Scottish Government, High level summary of statistics, health and community care, 2002/03 to 2011/12:	Data for Scotland include the acute specialties, and exclude the obstetric, psychiatric and long-stay sectors.
		www.scotland.gov.uk/Topics/Statistics/Browse/Health/TrendData Northern Ireland: Northern Ireland Hospital Statistics: Inpatient and day case activity 2005/06 to 2011/12: www.dhsspsni.gov.uk/inpatient_activity_2011-12.xlsx	Data for Wales prior to April 2007 were subject to a set of cleansing rules, which resulted in under-reporting of day-cases. This stopped after that, so the definition of day-cases was that as reported by providers.

Table 1: Indicator definitions and sources (continued)

Indicator	Definition	Source	Comments
Day-cases continued		Northern Ireland Hospital Statistics 1998/99 to 2003/04: www.dhsspsni.gov.uk/key-facts-98-04.pdf Population numbers for England and Wales from ONS population estimates, GRO for Scotland mid-year population estimates, NISRA home population	In Northern Ireland, the source of data on day- case activity information changed in 2009–10 to the HIS, and trend data were calculated for the five years starting from 2005–06. The definition of day-cases changed in April 2005, and data on day-cases from Northern Ireland are not comparable to other countries because they include regular attenders.
Crude productivity, doctors	Inpatient admissions per hospital doctor	See source for indicator on hospital doctors (WTE) and inpatient activity.	Ratio of inpatient admissions to hospital doctors; see comments for doctors per 1,000 and inpatient admissions per 1,000.
Crude productivity, nurses	Inpatient admissions per nurse	See source for indicator on nurses (WTE) and inpatient activity.	Ratio of inpatient admissions to nurses; see comments for nurses per 1,000 and inpatient admissions per 1,000.
Selected procedures	Selected procedures per 10,000 population (finished consultant episodes, FCE)	HSCIC, Hospital Episode Statistics for England, inpatient statistics, 1999/00 to 2011/12: www.hscic.gov.uk/searchcatalogue?q=title%3A%22Hospital+Episode+Statistics%2C+Admitted+patient+care+-+England%22&area=&size=10&sort=Relevance NHS Wales Informatics Sevice, PEDW Statistics – 1999/00 to 2011/12: www.infoandstats.wales.nhs.uk/page.cfm?orgid=869&pid=41010 ISD Scotland, Inpatient and day case activity: www.isdscotland.org/Health-Topics/Hospital-Care/Inpatient-and-Day-Case-Activity/ Northern Ireland: Department of Health, Social Services and Public Safety, Operations: www.dhsspsni.gov.uk/index/stats_research/hospital-stats/episode_based_activity/ operations.htm	In Scotland, inpatient cataract procedures must have a diagnosis of any of the following ICD10 codes to be counted: H25, H26, H28.0 to H28.2. Knee replacement: 'total knee replacement' includes unicompartmental knee replacement (O18).
Waiting time, referral to treatment	Referral to treatment, % of patients treated within 18 weeks	ISD: Scotland: 18 weeks referral to treatment: www.isdscotland.org/Health-Topics/Waiting-Times/Publications/2013-05-28/2013-05-28-WT-18WksRTT-Summary.pdf?216311217 Wales: NHS Wales Diagnostic and Therapy Services Waiting Times, Patients waiting to start treatment by month and grouped weeks: September 2011–March 2013 (Hlth0079): https://statswales.wales.gov.uk/Catalogue/Health-and-Social-Care/NHS-Hospital-Waiting-Times/Referral-to-Treatment/PatientsWaitingToStartTreatment-by-Month-GroupedWeeks	In England, the waiting time standards are for 90% of admitted patients and 95% of non-admitted patients to start treatment within a maximum of 18 weeks from referral. Admitted pathways are the waiting times for patients whose treatment started during the month and involved admission to hospital (inpatient waiting times).

Table 1: Indicator definitions and sources (continued)

Indicator	Definition	Source	Comments
Waiting time, referral to treatment continued		Northern Ireland: Waiting time statistics: outpatient waiting times statistics, quarter ending March 2013: www.dhsspsni.gov.uk/ni_outpatient_waiting_list_bulletin_march_2013.pdf Northern Ireland: Waiting time statistics: inpatient waiting times statistics, quarter ending March 2013: www.dhsspsni.gov.uk/ni_inpatient_waiting_list_bulletin_march_2013.pdf England: Consultant-led referral to treatment waiting times data 2013-14: www.england.nhs.uk/statistics/statistical-work-areas/rtt-waiting-times/rtt-data-2013-14/	The standard excludes periods where a patient had declined reasonable offers of admission and chose to wait longer. The standard for non-admitted patients applies to patients whose treatment started during the month and did not involve admission to hospital (that is, they were outpatients only). In Scotland, the data are based on the number of patient journeys where the start of treatment was within 18 weeks (126 days or fewer) of the initial referral periods of patient unavailability, and excludes those where it has not been possible for the NHS board treating the patient to link all stages of the patient's journey from the initial referral to the start of treatment. The 18-week target excludes periods of patient unavailability, and also patient journeys where it has not been possible for the NHS board treating the patient to link all stages of the patient's journey from initial referral to the start of treatment. Data for Wales and Northern Ireland are not in comparable format due to different measures and targets being used for their health systems.
Waiting time, selected procedures	Waiting times in days for selected procedures (50th and 90th percentile)	NHS Scotland Directorate for Health Workforce and Performance for England, Scotland and Wales (2005–06 to 2012–13) Office for National Statistics, United Kingdom health statistics, 2010, edition 4 for Northern Ireland (2005–06 to 2009–10): www.ons.gov.uk/ons/rel/ukhs/united-kingdom-health-statistics/2010/edition-42010.pdf	Data are for NHS activity in NHS hospitals only. The 50th and 90th percentiles relate to time in days within which 50% of patients were admitted. Data are based on country of treatment (and not country of residence), and include only patients who have been treated electively and were classified as either waiting list or booked. Numbers include all procedures taking place and include cases where there are not valid date values to calculate waiting times for 2007/08 onwards.

Table 1: Indicator definitions and sources (continued)

Indicator	Definition	Source	Comments
Waiting time, selected procedures continued			Time waited is calculated as the difference between admission date and the date that the decision to admit was made. This is not adjusted for self-referrals or periods of medical or social suspension. The data include waits for all selected patients, including those whose reported wait was zero days.
			Data for England are based on finished in- year admissions, and include only those cases where the patient has been admitted and a finished consultant episode recorded within each financial year.
			Data for Scotland, Wales and Northern Ireland include all cases admitted during the financial year, irrespective of the year in which they were discharged. (Office for National Statistics, 2010)
Ambulance response times	Emergency responses within 8 minutes (category A, life-threatening), %	England and North East: HSCIC, Ambulance services – England, 2012–13: www.hscic.gov.uk/searchcatalogue?productid=11839&q=ambulance&sort=Relevance &size=10&page=1#top Scotland: Scottish Ambulance Service, Annual reports 2002/03 to 2011/12: www.scottishambulance.com/TheService/annualreport.aspx Welsh Government: Health Statistics, Wales 2013: http://wales.gov.uk/topics/statistics/headlines/health2012/1209272/?lang=en Northern Ireland: NI Ambulance Service Health and Social Care Trust: Annual reports 2003/04 to 2011/12: www.niamb.co.uk/docs/corporate_info.html	The timing of the start of the response time changed in England and North East England from April 2008 to the point where the call was received at the control room switchboard. Before that, response times were measured from the point where a series of details were recorded by the control room, such as exact location and nature of the incident. This means that data before 2008–09 are not comparable to previous years. In 2005–06 there was a problem of misreporting by several trusts, but data have not been adjusted for that. In Wales the clock starts from the time that the call-taker has determined the nature of the emergency. This adds the response time of about 80 seconds to the incident, in comparison with England.

Table 1: Indicator definitions and sources (continued)

Indicator	Definition	Source	Comments
Ambulance response times continued			In Northern Ireland the clock starts when the caller's telephone number, location of the incident and the nature of the complaint have been ascertained. In all countries the clock stops when the emergency response vehicle arrives at the scene of the incident.
Patient choices		Peckham S, Mays N, Hughes D, Sanderson M, Allen P, Prior L, Entwistle V, Thompson A and Davies H 'Devolution and patient choice: policy rhetoric versus experience in practice (2012)', <i>Social Policy and Administration</i> , 46(2), 199–218.	
Patient satisfaction	Satisfaction with various aspects of the NHS – percentage reporting 'very satisfied' or 'quite satisfied', 2011	Park A, Clery E, Curtice J, Phillips M and Utting D eds (2012), <i>British Social Attitudes: The 29th report</i> , London: NatCen Social Research, available online at: www.bsa-29.natcen.ac.uk	There are no data for Northern Ireland.
Renal audit, incident survival	Survival in UK renal replacement therapy patients: one year after 90-day incident survival (%) by region for incident cohort years 2002–10, adjusted to age 60	UK Renal Registry 15th Annual Report (2012): Chapter 5: Survival and causes of death of UK adult patients on renal replacement therapy in 2011: national and centre-specific analyses: www.renalreg.com/Report-Area/Report%202012/Chapter_5.pdf	
Stroke audit, performance	Stroke audit, key indicators 2006 and 2010	Royal College of Physicians, Intercollegiate Stroke Working Party (2012), National Sentinel Stroke Clinical Audit 2010, Round 7. Public report for England, Wales and Northern Ireland: www.rcplondon.ac.uk/sites/default/files/national-sentinel-stroke-audit-2010-public-report-and-appendices_0.pdf	There are no data for Scotland.
Childhood immunisation	Completed immunisations (all antigens) by 12 months, 24 months and 5 years	HSCIC: NHS immunisation statistics, England, 2011–12: https://catalogue.ic.nhs.uk/publications/public-health/immunisation/nhs-immu-stateng-2011-2012/nhs-immu-stat-eng-2011-12-rep.pdf	

Table 1: Indicator definitions and sources (continued)

Indicator	Definition	Source	Comments
Influenza vaccination	Seasonal influenza vaccination uptake (%) by target group	Public Health England (2013) Surveillance of influenza and other respiratory viruses, including novel respiratory viruses, in the United Kingdom: winter 2012/13: www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1317139321787 Public Health England (2014) Vaccine uptake guidance and the latest coverage data (for North East England): https://www.gov.uk/government/collections/vaccine-uptake	Estimated data for Scotland. Different methods are used in each country to produce these rates.
Screening for breast cancer	Breast screening (uptake, age 50-70), first invitations	NHS Cancer Screening Programmes (2012) NHS Breast Screening Programme: Annual review 2012: www.cancerscreening.nhs.uk/breastscreen/publications/nhsbsp-annualreview2012.pdf HSCIC (2013) Breast Screening Programme, England 2011/12, KC62 for North East England: www.hscic.gov.uk/catalogue/PUB10339/bres-scre-prog-eng-2011-12-rep.pdf	
MRSA mortality	Age-standardised mortality rates for deaths with MRSA (methicillin-resistant staphylococcus aureusis) mentioned on the death certificate (per1 million population)	Office for National Statistics (England and Wales): www.ons.gov.uk/ons/rel/subnational-health2/deaths-involving-mrsa/2008-to-2012/ rft-table-2.xls NISRA Healthcare-associated infections: www.nisra.gov.uk/demography/default.asp29.htm	Rates per million (1,000,000) population standardised to the European Standard Population. Rates for 2002–10 are based on revised population estimates following the 2011 census.
Amenable mortality	Mortality (standardised death rate) from causes amenable to health care	Office for National Statistics for England, the North East and Wales, GRO Scotland and NISRA.	The list of amenable causes is as in Nolte E and McKee M (2004) <i>Does Healthcare Save Lives? Avoidable mortality revisited.</i> Nuffield Trust.

	England	Scotland	Wales	Northern Ireland
GPs:				
Personal Medical Services (PMS)	V	V	V	n/a
General Medical Services (GMS)	V	V	V	V
GP retainers	V	V	V	V
GP registrars	V	V	X	X
Locums and sessional GPs	X^1	X	X	X
Hospital doctors:				
Consultants	V	V	V	V
Registrars and others in training	V	V	V	V
Bank staff ²	?	?	?	?
Locums	X	X	X	V ³
Staff on career breaks	V	X	X	X
Board members	V ⁴	V ⁵	V	X
Nurses:				
Hospital nurses	V	V	V	V
Health visitors	V	V	V	V
Nursing students	X	X	X	X
Practice nurses	X	X ⁵	X	X ⁵
Bank staff	X _e	X	Χ	X
Social service nurses	X	X	X	V

England	Scotland	Wales	Northern Ireland
V	V	V	V
V	V	V	X ⁷
V	V	V	V
Χ	X	X	X
Χ	Χ	Χ	V
	V V V X	V V V V V V X X X X	V V V V V V V V V X X X X X X

V = included staff group; X = excluded staff group; ? = not known; n/a = not applicable.

- 6. In England, bank staff were included for 1996-98 only.
- 7. Excludes hotel staff in Northern Ireland.

^{1.} In England, GPs constantly covering a number of sessions (covering a long-term vacancy) are included.

^{2.} The nature of work by bank staff means that these are difficult to measure.

^{3.} In Northern Ireland, directly employed locums (that is, internal rather than agency locums) are included.

^{4.} Executive board members are included; non-executive board members are excluded.

^{5.} Includes trust-financed nurses (Northern Ireland) and nurses employed by the NHS board (Scotland) working in general practices.

Nuffield Trust

The Nuffield Trust is an authoritative and independent source of evidence-based research and policy analysis for improving health care in the UK. Our vision is to help provide the objective research and analysis that boosts the quality of health policy and practice, and ultimately improves the health and health care of people in the UK.

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The Health Foundation is an independent charity working to improve the quality of healthcare in the UK. We are here to support people working in healthcare practice and policy to make lasting improvements to health services. We carry out research and in-depth policy analysis, fund improvement programmes in the NHS, support and develop leaders and share evidence to encourage wider change.

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