It is essential that slot management is proactive rather than reactive. Conventional practice might suggest that providers should make the average number of 2WW slots available to match demand. However, this means that when consultant leave is needed or when there are peaks in demand, providers have to overbook clinics. This is a reactive approach and will result in unmet demand building up.

A proactive way of working would instead suggest that providers should create capacity to at least 85% of the variation in demand, rather than use averages to make this calculation. (N.B. variation in capacity is usually much greater than the variation in demand, but capacity variation is under the control of the provider.) It is vital that providers understand and work with run time charts when managing their 2WW capacity. The steps below show how to determine the number of slot required, using the 85% of the variation in demand calculation.

1. Plot the number of referrals received per week on a run time chart (shown below). A minimum period of one year will need to be charted.
2. Identify any outliers which relate to ‘special causes’ (indicated by values at red dotted lines) and ignore this in your calculations (i.e. in our example below there are two values that should be ignored which are 3 at wk 22 and 32 at wk 49).
3. Calculate 85% of variation. Take your highest demand and subtract your lowest demand from it i.e. 25-9=16. Then multiply this figure by 0.85=13.6 and add it to the lower limit which is 9. This means that 23 slots are required every week.
4. Monitor, review and modify capacity as required.
5. Plan ahead (6+ weeks) for lost clinics to ensure capacity is maintained.

Run time chart of 2WW Breast Referrals received over a 52 week period