

INFORMATION  
ANALYSIS  
DIRECTORATE



# Northern Ireland Waiting Time Statistics: Outpatient Waiting Times Quarter Ending March 2015



Department of  
**Health, Social Services  
and Public Safety**

[www.dhsspsni.gov.uk](http://www.dhsspsni.gov.uk)

## Reader Information

Purpose	This publication presents information on waiting times for a first outpatient assessment in Northern Ireland at 31 <sup>st</sup> March 2015. It details information on the number of patients waiting, and length of time waiting, for a first appointment at a consultant led outpatient service and Integrated Clinical Assessment and Treatment Services (ICATS) at Health and Social Care (HSC) Trusts in Northern Ireland. This information reports on performance against the 2014/15 Ministerial waiting time target which states that from April 2014 at least 80% of patients should wait no longer than nine weeks for a first outpatient appointment, and no patient waiting longer than 15 weeks. The number of completed outpatient attendances is also presented by HSC Trust.
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Statistical Quality	Information detailed in this release has been validated with HSC Trusts prior to release. Information on outpatient activity in the Independent Sector has been sourced from the HSC. This information is not National Statistics and has not been validated by the Department.
Target audience	DHSSPS, Chief Executives of HSC Board and Trusts in Northern Ireland, health care professionals, academics, general public, media and Health & Social Care stakeholders.
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## Key Points

- The number of patients waiting for a first outpatient appointment at the end of March 2015 stood at 191,779, 11.6% (19,913) more than at the end of December 2014 (171,866) and 50.9% (64,684) more than at the end of March 2014 (127,095) (Figure 1 and Table 1).
- Of all patients waiting at the end of March 2015, 56.3% (107,957) were waiting more than 9 weeks, compared with 55.5% waiting more than 9 weeks at the end of December 2014 and 31.3% at the end of March 2014 (Figure 5 and Table 3a & 3b).
- The number of patients waiting more than 15 weeks at the end of March 2015 was 82,486, 43.0% of the total number waiting. This is compared with 61,311 (35.7%) waiting more than 15 weeks at the end of December 2014, and 19,173 (15.1%) at the end of March 2014 (Table 4).
- When attendances at Health and Social Care (HSC) Trusts and Health Service commissioned Independent Sector activity are combined, it is estimated that approximately 117,989 outpatients attended a first outpatient appointment in Northern Ireland during the quarter ending March 2015 (Figure 11 and Table 5).
- There were 11,506 patients waiting for a first Integrated Clinical Assessment and Treatment Services (ICATS) Tier 2 appointment at the end of March 2015. This was 801 (7.5%) more than at the end of December 2014 and 2,973 (34.8%) more than at the end of March 2014 (Figure 12 & Table 8).
- A total of 33.1% (3,813) of patients were waiting longer than 9 weeks for a first ICATS Tier 2 appointment, with 2,347 of these patients waiting more than 15 weeks (Figures 13 & 14 and Table 10).

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## Hospital Information Branch (HIB)

Hospital Information Branch is responsible for the collection, quality assurance, analysis and publication of timely and accurate information derived from a wide range of statistical information returns supplied by the Health & Social Care (HSC) Trusts and the HSC Board. Statistical information is collected routinely from a variety of electronic patient level administrative systems and pre-defined EXCEL survey return templates.

The Branch aims to present information in a meaningful way and provide advice on its uses to customers in the HSC Committee, Professional Advisory Groups, policy branches within the DHSSPS, other Health organisations, academia, private sector organisations, charity/voluntary organisations as well as the general public. The statistical information collected is used to contribute to major exercises such as reporting on the performance of the HSC system, other comparative performance exercises, target setting and monitoring, development of service frameworks as well as policy formulation and evaluation. In addition, the information is used in response to a significantly high volume of Parliamentary / Assembly questions and ad-hoc queries each year.

Information is disseminated through a number of key statistical publications, including: Inpatient Activity, Outpatient Activity, Emergency Care, Mental Health & Learning Disability and Waiting Time Statistics (Inpatient, Outpatient, Diagnostics and Cancer). A detailed list of these publications is available from:

**Website:** <http://www.dhsspsni.gov.uk/index/statistics/publications-statistics.htm>

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## Technical Notes

This statistics release is part of a quarterly data series presenting information on waiting times for outpatient services at HSC Trusts in Northern Ireland.

### Data Collection

The information presented in this bulletin derives from a series of statistical returns (listed below) provided by HSC Trusts and the HSC Board.

Departmental returns CH3, Quarterly Outpatient Activity Return (QOAR), IS1 Part 1, and ICATS Waiting Time Dataset.

Data providers are supplied with technical guidance documents outlining the methodologies that should be used in the collection, reporting and validation of each of these data returns. These documents can be accessed at the following link:

<http://www.dhsspsni.gov.uk/index/statistics/hospital/waitingtimes/waitingtimes-outpatient.htm>

### Rounding

Percentages have been rounded to one decimal place and as a consequence some percentages may not sum to 100.

On occasion the percentage of patients waiting within overall totals, or percentage changes within quarters, are presented. In some instances these percentages are less than 0.1% or more than 99.9%. Users should be aware that, in such instances the percentage is rounded to zero or 100%.

### Data Quality

All information provided by HSC Trusts that is presented in this bulletin has been validated and quality assured by HSC Trusts prior to publication. HSC Trusts are given a set period of time to submit the information to HIB. Following submission, HIB perform a series of checks to verify that information is consistent both within and across returns. Trend analyses are used to monitor annual variations and emerging trends. Queries arising from validation checks are presented to HSC Trusts for clarification and if required returns may be amended and/or re-submitted.

Information on completed waits within the Independent Sector is provided by the HSC Board, split by commissioning HSC Trust (the HSC Trust responsible for the patient's waiting time). HSC Trusts are provided with guidance, detailing how they should record details of patients transferred to the Independent Sector for assessment, on their Patient Administrative System. Following assessment, the Independent Sector provider informs the transferring HSC Trust who records the patient's outpatient wait as being complete. These records are then validated against financial invoices received by the HSC Trust from the Independent Sector provider for each transferred patient. HSC Trusts then submit these data to the HSC Board who forward the information to Hospital Information Branch for inclusion in the publication. These data are not National Statistics and have not been validated by the Department; however, they have been published to provide users with a comprehensive view of completed outpatient waits during each quarter.

Prior to April 2014, ward attendances seen by a consultant in HSC hospitals were included in the consultant-led outpatient attendances. Therefore, figures prior to April 2014 are not directly comparable to those after. Further guidance is provided in Explanatory Note 9 in Appendix 1.



## **Main Uses of Data**

Data contained in this release are published primarily to provide an indication of HSC performance. They allow the general public and the DHSSPS Health Committee to assess the performance of the DHSSPS, the HSC Board and HSC Trusts in providing timely access to hospital services in Northern Ireland. These data also provide policy makers with the necessary information to formulate and evaluate health services and are helpful in assessing the effectiveness of resource allocation in providing services that are fully responsive to patients needs. Additionally, hospital waiting time information is used to inform the media, special interest groups and academics, and by the DHSSPS to respond to parliamentary / assembly questions and ad hoc queries from the public. An additional aim of this publication is to make waiting times information publicly available to those people using health services in Northern Ireland. Further advice on uses for these data is outlined in Appendix 2 of this publication.

## **Waiting Time Information Elsewhere in the United Kingdom**

While it is our intention to direct users to waiting time information elsewhere in the UK, users should be aware that hospital waiting times in other administrations are not always measured in a comparable manner to those in Northern Ireland. Details of the hospital waiting times published elsewhere in the UK can be found as detailed below

### **England**

<http://www.england.nhs.uk/statistics/rtt-waiting-times/>

### **Scotland**

<http://www.isdscotland.org/Health-Topics/Waiting-Times/>

### **Wales**

<http://wales.gov.uk/topics/statistics/theme/health/nhsperformance/waiting-times/?lang=en>

## **A National Statistics Publication**

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics.

Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- are produced according to sound methods; and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics, it is a statutory requirement that the Code of Practice shall continue to be observed.

Further information on the Code of Practice for National Statistics is available at:

<http://www.statisticsauthority.gov.uk/assessment/code-of-practice/>.

A list of those who received 24-hour pre-release access to this publication is available at:

<http://www.dhsspsni.gov.uk/index/statistics/hospital/waitingtimes/waitingtimes-outpatient.htm>

## Contact Information

As we want to engage with users of our statistics, we invite you to feedback your comments on this publication to:

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## Introduction

The information detailed in this release are published primarily to provide an indication of HSC Trust performance. They allow the general public and the DHSSPS Health Committee to assess the performance of the DHSSPS, the HSC Board and HSC Trusts in providing timely access to hospital services in Northern Ireland.

Data contained in this publication relates to the waiting times for a first outpatient assessment in consultant led and Integrated Clinical Assessment and Treatment Services (ICATS) within HSC Trusts in Northern Ireland at 31<sup>st</sup> March 2015; and Health Service commissioned activity at consultant led outpatient services, either in HSC Hospitals or the Independent Sector, during the quarter ending (QE) March 2015.

## Consultant led Outpatient Services

A consultant led outpatient appointment is an appointment to enable a patient to see a consultant, a member of their team or a locum for such a member, in respect of one referral.

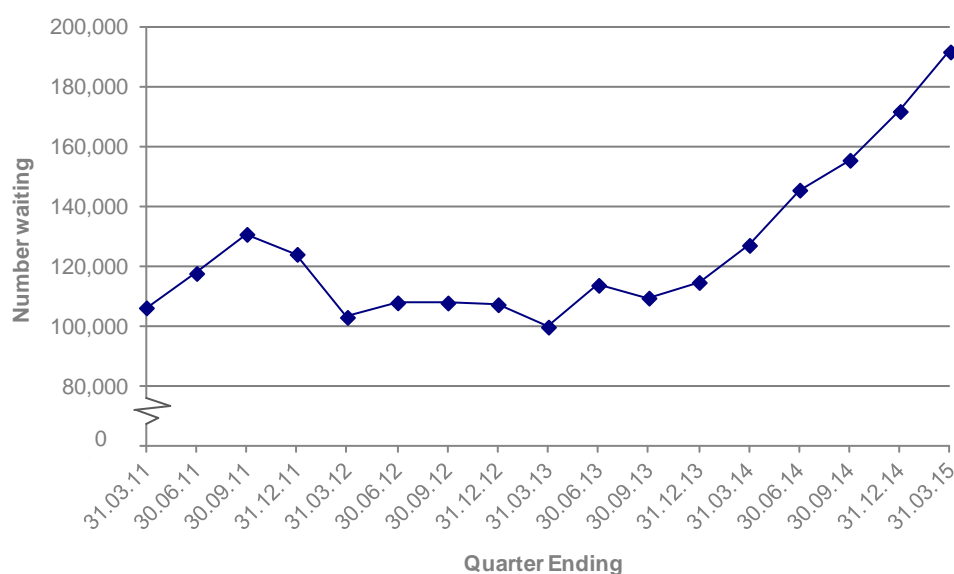
### Waiting Times for a First Outpatient Appointment

#### Total patients waiting<sup>1</sup>

The number of patients waiting for a first outpatient appointment at the end of March 2015 stood at 191,779, 19,913 (11.6%) more than at the end of December 2014 (171,866) and 64,684 (50.9%) more than at the end of March 2014 (127,095) (Figure 1 & Table 1).

During both 2010/11 and 2011/12, the pattern of a rise in waiting time figures in the first half of the financial year, and a decrease in the second half was observed. The number of patients waiting then remained relatively stable during 2012/13, however there has been a notable upward trend since the beginning of 2013/14.

**Figure 1: Total number of patients waiting: Quarterly trends 31<sup>st</sup> March 2011 – 31<sup>st</sup> March 2015**

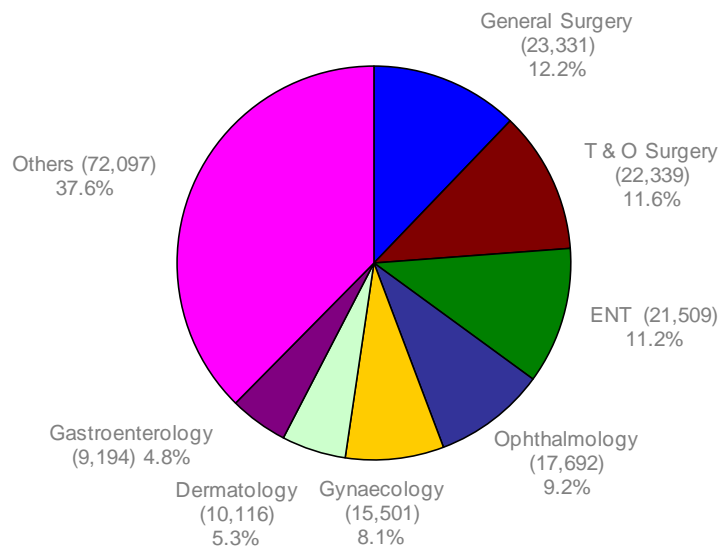


<sup>1</sup>Refer to Explanatory Notes 1-4

## Total patients waiting by Specialty<sup>1</sup>

Nearly two thirds of the 191,779 (62.4%, 119,682) patients waiting for a first outpatient appointment were within seven specialties: General Surgery; Trauma & Orthopaedic Surgery (T & O Surgery); Ear, Nose & Throat (ENT); Ophthalmology; Gynaecology; Dermatology, and Gastroenterology (Figure 2 & Table 2a).

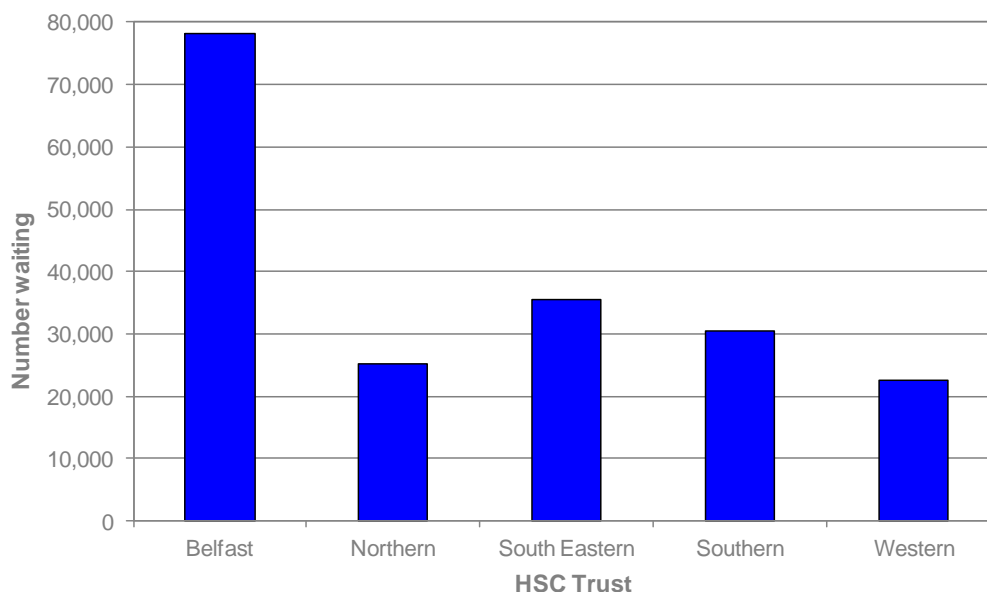
**Figure 2: Total number of patients waiting by specialty at 31<sup>st</sup> March 2015**



## Total patients waiting by HSC Trust<sup>2</sup>

Just over two fifths (40.8%, 78,180) of patients waiting for a first appointment were waiting in the Belfast HSC Trust. A further 18.5% (35,543) were waiting in the South Eastern HSC Trust, 15.9% (30,478) in the Southern HSC Trust, 13.1% (25,141) in the Northern HSC Trust and 11.7% (22,437) in the Western HSC Trust (Figure 3 & Table 3a).

**Figure 3: Total number of patients waiting by HSC Trust at 31<sup>st</sup> March 2015**



<sup>1</sup>Refer to Explanatory Notes 1-4

<sup>2</sup>Refer to Explanatory Notes 1-5

Data users should be aware that many outpatient services are not provided at each of the five HSC Trusts in Northern Ireland. In such circumstances patients from one HSC Trust area will be waiting to be seen at a service provided at another HSC Trust. It is therefore not possible to accurately calculate the number of patients waiting per head of the population in any specific HSC Trust area, as HSC Trusts that provide services for the whole of Northern Ireland will have a higher number of patients waiting per head of the population, than those that provide more localised services.

### Performance against the 2014/15 waiting time target<sup>3</sup>

*The Ministerial target, for outpatient waiting times, states that from April 2014, at least 80% of patients should wait no longer than nine weeks for a first outpatient appointment, and no patient waiting longer than 15 weeks.*

**Figure 4: HSC Trust performance against the 2014/15 waiting time target for a consultant led first appointment**

HSC Trust	Target Achieved	
	At least 80% of patients should wait no longer than 9 weeks	No patient waiting longer than 15 weeks
Belfast	No	No
Northern	No	No
South Eastern	No	No
Southern	No	No
Western	No	No
<b>Northern Ireland</b>	<b>No</b>	<b>No</b>

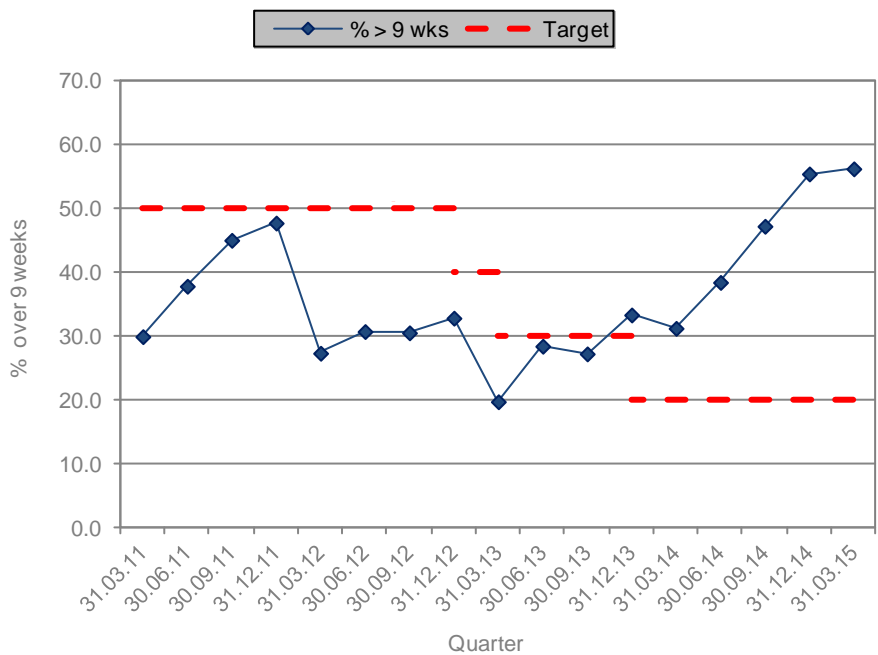
At the end of March 2015, Northern Ireland, as a whole, did not meet either element of the waiting time target, nor did any of the individual Trusts (Figures 4, 6 & 9; Tables 3a & 3b).

### Proportion of patients waiting over 9 weeks<sup>3</sup>

Achievement of the 9 week target requires that less than 20% of patients should be waiting over 9 weeks for a first outpatient appointment. At the end of March 2015, 56.3% (107,957) of patients waited more than 9 weeks for a first outpatient appointment, compared with 55.5% (95,437) at the end of December 2014 and 31.3% (39,768) at the end of March 2014 (Figure 5 & Table 3b).

<sup>3</sup>Refer to Explanatory Notes 1-7. (Specifically Explanatory 5 for information on the centralisation of Oral Surgery services and how these waiting times are reported.)

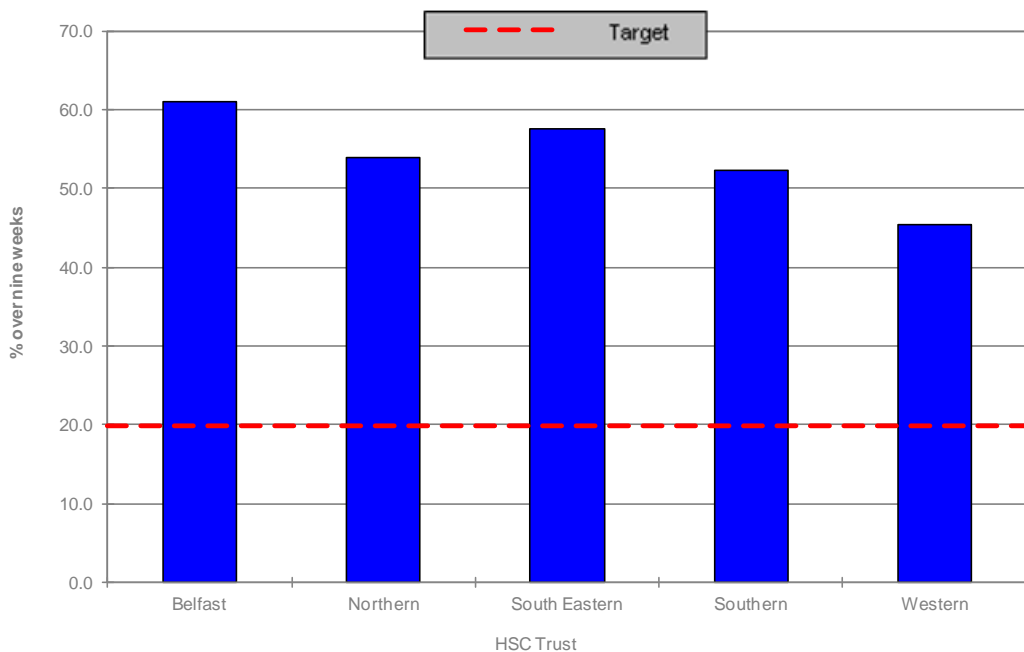
**Figure 5: Proportion of patients waiting over 9 weeks: Quarterly trends 31<sup>st</sup> March 2011 – 31<sup>st</sup> March 2015**



**Proportion of patients waiting over 9 weeks by HSC Trust<sup>3</sup>**

The proportion of patients waiting longer than 9 weeks was 61.1% in the Belfast HSC Trust, 57.6% in the South Eastern HSC Trust, 54.1% in the Northern HSC Trust, 52.3% in the Southern HSC Trust and 45.5% in the Western HSC Trust (Figure 6 & Table 3b).

**Figure 6: Proportion of patients waiting over 9 weeks by HSC Trust at 31<sup>st</sup> March 2015**

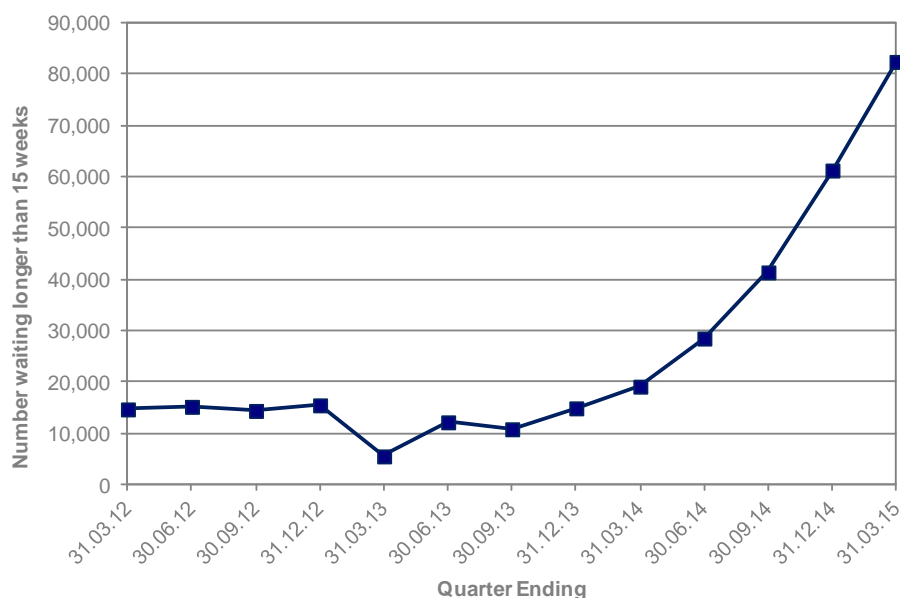


<sup>3</sup> Refer to Explanatory Notes 1-7. (Specifically Explanatory 5 for information on the centralisation of Oral Surgery services and how these waiting times are reported.)

### Patients waiting longer than the 2014/15 maximum waiting time target<sup>3</sup>

At the end of March 2015, there were 82,486 patients waiting longer than 15 weeks, compared to 61,311 waiting longer than 15 weeks at the end of December 2014, and 19,173 waiting longer than 15 weeks at the end of March 2014 (Figure 7 & Table 4).

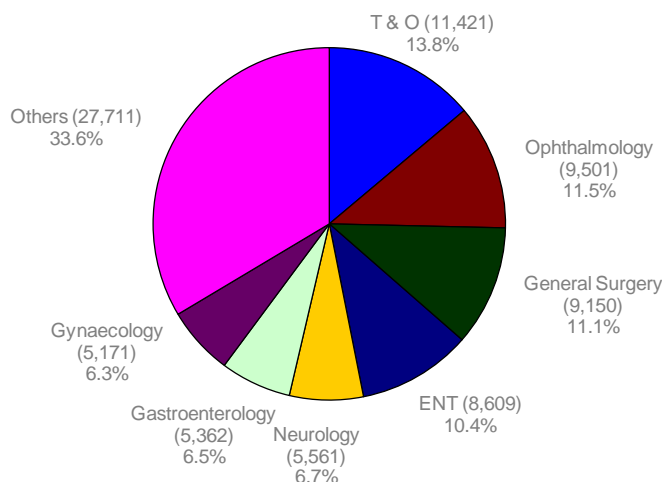
**Figure 7: Number of patients waiting longer than 15 weeks: Quarterly trends 31<sup>st</sup> March 2012 – 31<sup>st</sup> March 2015**



### Patients waiting longer than the 2014/15 maximum waiting time target by Specialty<sup>3</sup>

Almost two thirds (66.4%, 54,775) of the 82,486 patients waiting more than 15 weeks were within seven specialties: T & O Surgery, Ophthalmology, General Surgery, ENT, Neurology, Gastroenterology and Gynaecology (Figure 8 & Table 2a).

**Figure 8: Patients waiting longer than 15 weeks by specialty at 31<sup>st</sup> March 2015**

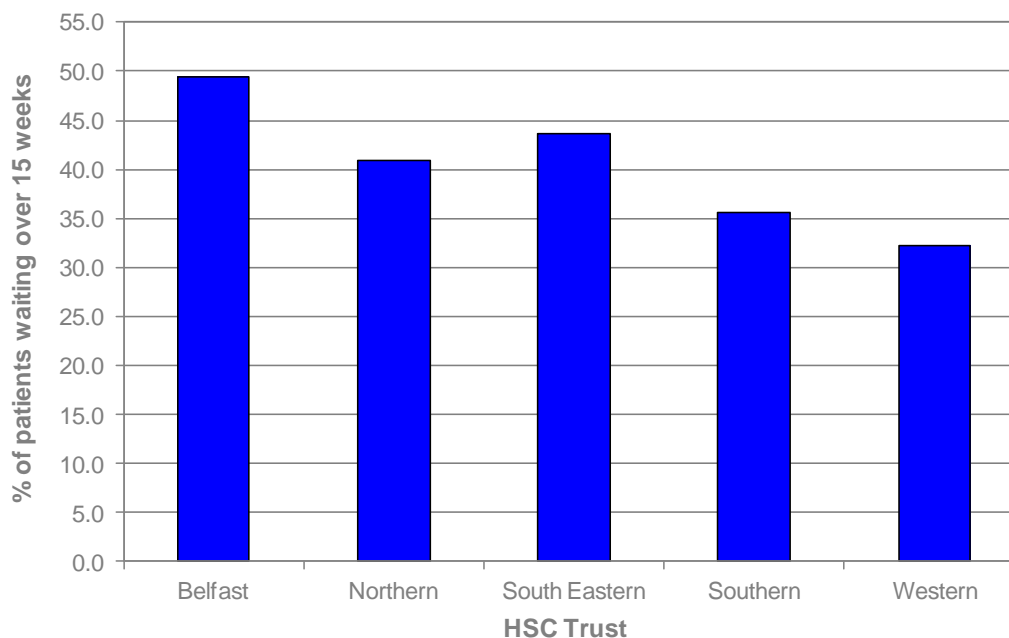


<sup>3</sup>Refer to Explanatory Notes 1-7. (Specifically Explanatory 5 for information on the centralisation of Oral Surgery services and how these waiting times are reported.)

### Patients waiting longer than the 2014/15 maximum waiting time target by HSC Trust<sup>3</sup>

The proportion of patients waiting longer than 15 weeks was 49.4% (38,649) in the Belfast HSC Trust, 43.6% (15,510) in the South Eastern HSC Trust, 40.8% (10,268) in the Northern HSC Trust, 35.6% (10,847) in the Southern HSC Trust and 32.1% (7,212) in the Western HSC Trust (Figure 9 & Table 3b).

**Figure 9: Proportion of patients waiting longer than 15 weeks by HSC Trust at 31<sup>st</sup> March 2015**



### Completed Outpatient Waits

The total number of completed waits each quarter is derived as the total number of attendances at a first outpatient appointment.

Attendances at consultant led services in Northern Ireland commissioned by the Health Service can take place in either HSC Hospitals or at an Independent Sector provider.

### Completed waits in Health Service Hospitals<sup>4</sup>

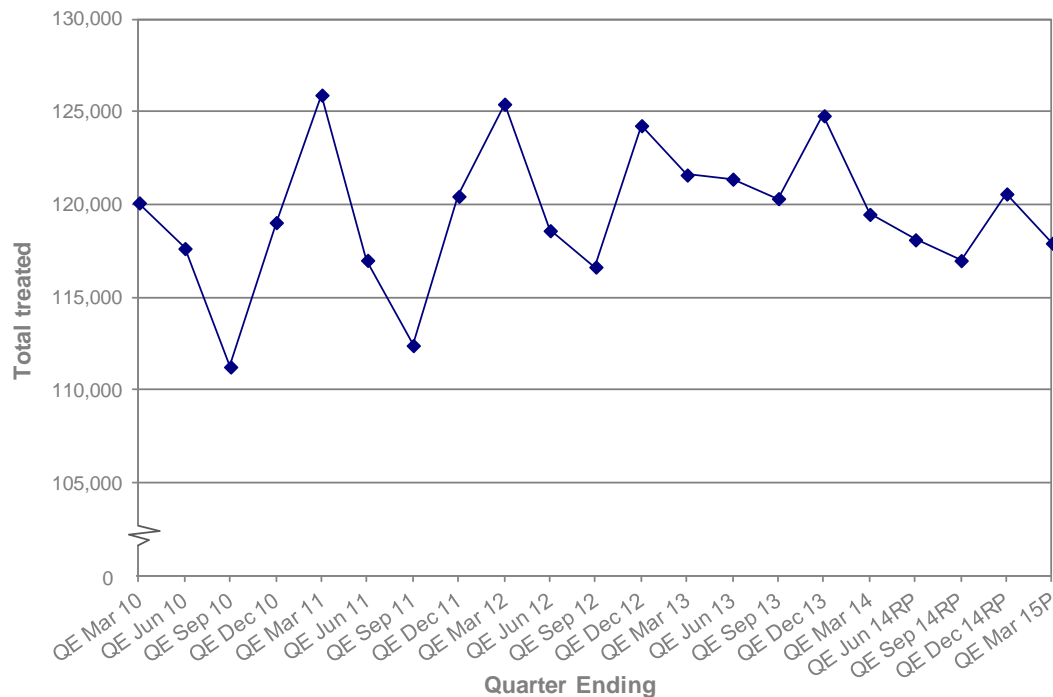
A total of 117,910 patients attended a first outpatient appointment in a Health Service hospital during the quarter ending March 2015. This is compared with 120,570 attendances in the quarter ending December 2014 (down 2.2%) and 119,468 during the quarter ending March 2014 (down 1.3%) (Table 5).

<sup>3</sup>Refer to Explanatory Notes 1-7. (Specifically Explanatory Note 5 for information on the centralisation of Oral Surgery services and how these waiting times are reported.)

<sup>4</sup>Refer to Explanatory Notes 8 – 9. (Specifically Explanatory Note 9 for information on changes to the recording of outpatient activity.)



**Figure 10: Total number of completed waits in Health Service Hospitals: Quarterly trends  
QE March 2010 – QE March 2015<sup>P</sup>**



<sup>P</sup>Data are currently provisional

<sup>R</sup>Data have been revised

### Completed waits in the Independent Sector<sup>5</sup>

The number of patients attending a first outpatient appointment within the Independent Sector has been provided by the Health and Social Care Board, split by commissioning HSC Trust. These data are not National Statistics; however, they have been published to provide users with a comprehensive view of completed outpatient waits during each quarter.

During the quarter ending March 2015, 79 Health Service patients attended a first outpatient appointment within the Independent Sector. This is a decrease on both the quarter ending December 2014 (419) and the same quarter in the previous year (11,703) (Table 5).

The reduction in the number of patients attending a first outpatient appointment in the Independent Sector is due to the Health and Social Care Board's decision from July 2014 to halt the transfer of additional patients to the Independent Sector, and from October 2014 to place a hold on the treatment of patients already transferred and assessed as requiring non-urgent treatment, except for those awaiting diagnostics tests and patients awaiting treatment in cardiac surgery and scoliosis (complex spinal surgery). This decision was made as a result of the DHSSPS financial position in 2014/15.

### Completed waits commissioned by the Health Service<sup>6</sup>

The total number of attendances commissioned by the Health Service includes those patients who attended a consultant led appointment in either a Health Service hospital, or within the Independent Sector, commissioned by the Health Service.

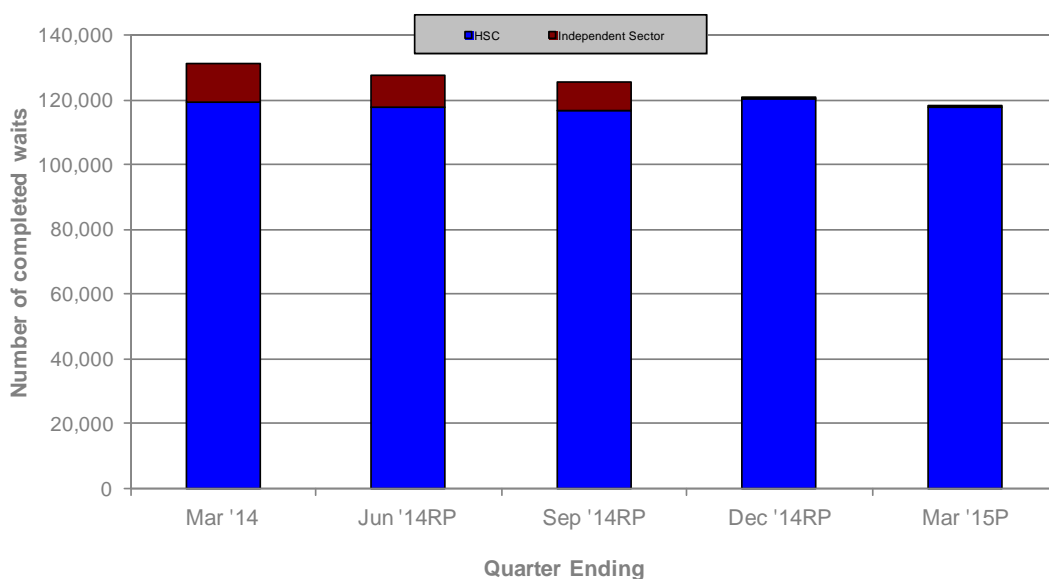
<sup>5</sup>Refer to Explanatory Note 10

<sup>6</sup>Refer to Explanatory Notes 8 – 10 (Specifically Explanatory Note 9 for information on changes to the recording of outpatient activity.)

When the number of attendances commissioned by the Health Service, within the Independent Sector, during the quarter ending March 2015 (79) is combined with that for outpatients attending a first outpatient appointment in Health Service hospitals during the same period (117,910), it is estimated that approximately 117,989 outpatients attended a first appointment in Northern Ireland for an assessment commissioned by the Health Service (Tables 5 & 6). This was a decrease of 2.5% (3,000) on the number seen during the quarter ending December 2014 (120,989) and 10.0% less (13,182) than during the quarter ending March 2014 (131,171) (Figure 11 & Table 5).

The overall decrease in the number of completed waits between the quarters ending December 2014 and March 2015 was mainly due to a decrease within in-house activity, whilst the decrease in the number of completed waits between the quarters ending March 2014 and March 2015 was due to a large decrease of activity within the independent sector and also a small decrease within in-house activity (Table 5).

**Figure 11: Completed outpatient waits including Independent Sector activity: Quarterly trends QE March 2014 – QE March 2015<sup>P</sup>**



<sup>P</sup>Data are currently provisional

<sup>R</sup>Data have been revised

Over a third, 37.7% (44,495) of all completed waits for the quarter ending March 2015 occurred in the Belfast HSC Trust. A further 16.9% (19,897) of completed waits were in the Southern HSC Trust, 16.9% (19,890) in the South Eastern HSC Trust, 16.1% (19,001) in the Western HSC Trust and 12.5% (14,706) in the Northern HSC Trust (Table 6).

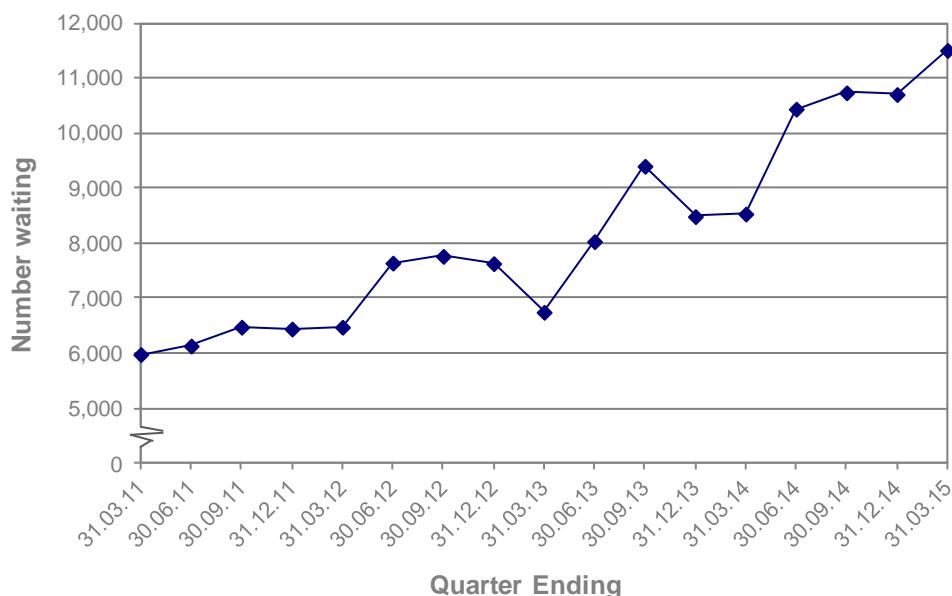
## Integrated Clinical Assessment and Treatment Service (ICATS)

From 1<sup>st</sup> April 2010, a number of Integrated Clinical Assessment and Treatment Services (ICATS) were officially introduced within the Health Service. ICATS are provided by integrated multi-disciplinary teams of health service professionals, and provide assessment, treatment, and advisory services. These are provided in a variety of primary, community and secondary care settings. As these services are not consultant led, those patients waiting for an ICATS appointment are not included in the outpatient waiting figures reported in the first part of this publication.

## Waiting Times for a First ICATS Tier 2 Appointment<sup>7</sup>

There were 11,506 patients waiting for a first ICATS Tier 2 appointment at the end of March 2015. This was 801 (7.5%) more than at the end of December 2014 (10,705) and 2,973 (34.8%) more than at the end of the same quarter last year (8,533) (Figure 12 & Table 8).

**Figure 12: Total number of patients waiting for a first ICATS Tier 2 appointment: Quarterly trends 31<sup>st</sup> March 2011 – 31<sup>st</sup> March 2015**



## Total patients waiting for a first ICATS Tier 2 appointment by HSC Trust<sup>7</sup>

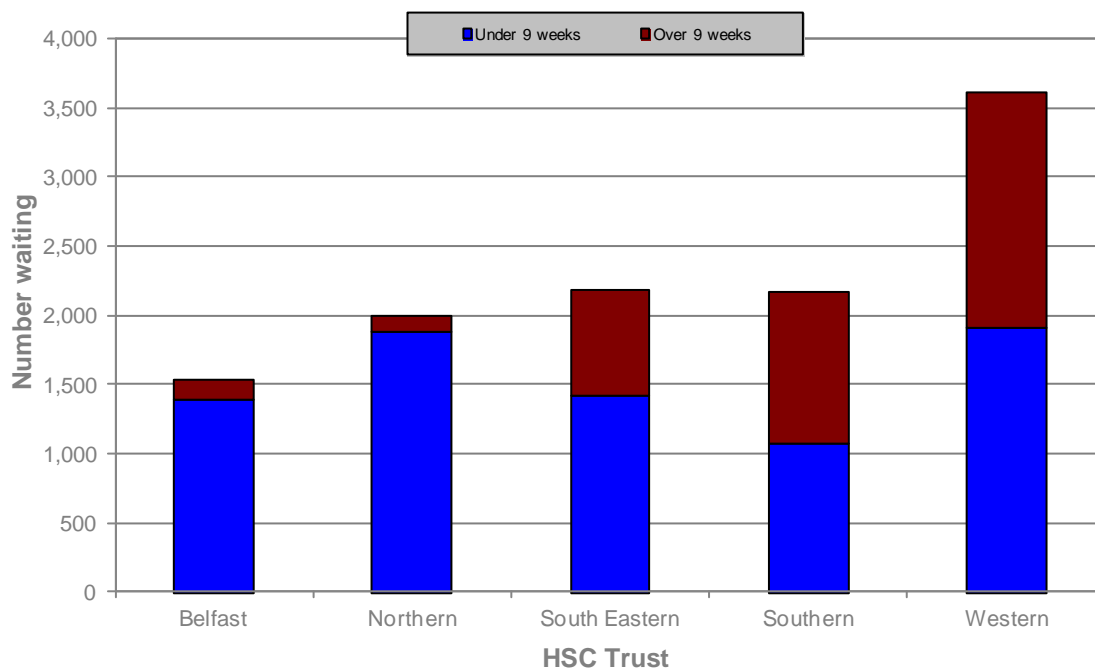
Of those waiting for a first ICATS Tier 2 appointment, 31.4% (3,618) were waiting in the Western HSC Trust. A further 19.0% (2,191) were waiting in the South Eastern HSC Trust, 18.8% (2,168) in the Southern HSC Trust, 17.3% (1,996) in the Northern HSC Trust and 13.3% (1,533) in the Belfast HSC Trust (Figure 13 & Table 10).

## Proportion of patients waiting over 9 weeks for a first ICATS Tier 2 appointment<sup>7</sup>

At the end of March 2015, 33.1% (3,813) of patients were waiting longer than 9 weeks for a first ICATS Tier 2 appointment, compared with 37.2% (3,987) waiting at the end of December 2014 and 15.4% (1,318) at the end of March 2014 (Table 10).

<sup>7</sup>Refer to Explanatory Notes 11 - 13

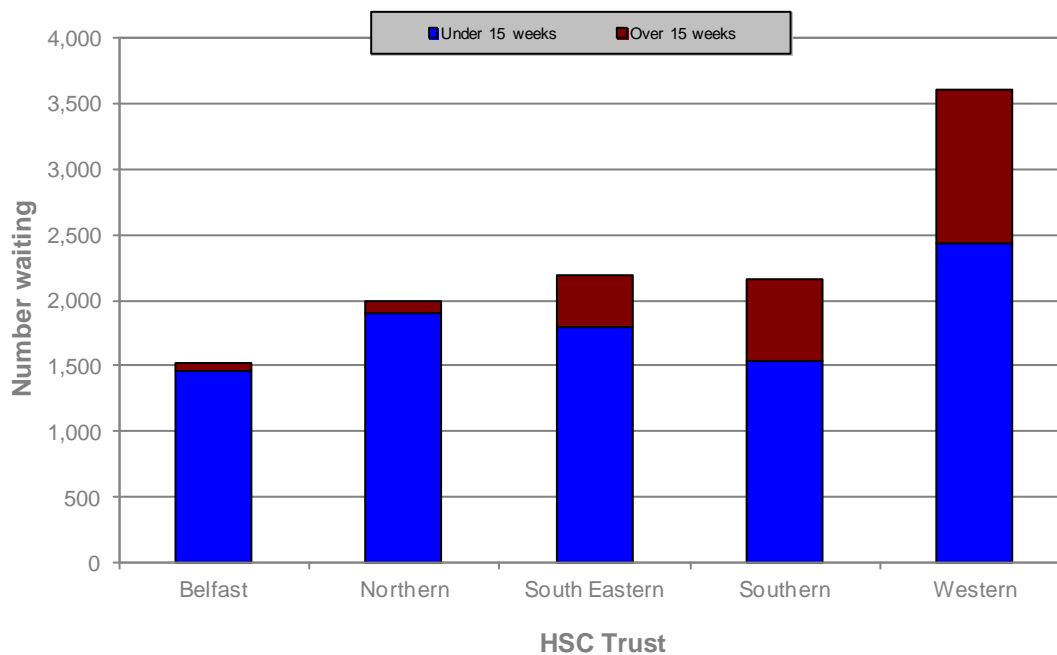
**Figure 13: Proportion of patients waiting over than 9 weeks for a first ICATS Tier 2 appointment by HSC Trust at 31<sup>st</sup> March 2015**



**Patients waiting longer than 15 weeks for a first ICATS Tier 2 Appointment<sup>7</sup>**

At the end of March 2015, there were 2,347 patients waiting longer than 15 weeks for a first ICATS Tier 2 appointment, compared to 1,554 at the end of December 2014, and 433 at the end of March 2014 (Table 10).

**Figure 14: Proportion of patients waiting longer than 15 weeks for a first ICATS Tier 2 appointment by HSC Trust at 31<sup>st</sup> March 2015**



<sup>7</sup>Refer to Explanatory Notes 11 - 13

## Consultant led Outpatient Services

**Table 1: Quarterly outpatient waiting lists – 31<sup>st</sup> March 2015<sup>1</sup>**

	Quarter Ending March 2015	Change compared with end of previous quarter	Change compared with end same quarter - previous year
<b>Total Waiting</b>	191,779	+19,913	+64,684

Source: Departmental Return CH3

<sup>1</sup>Refer to Explanatory Notes 1 – 4

**Table 2a: Number of patients waiting for a first outpatient appointment by weeks waiting and specialty – 31<sup>st</sup> March 2015<sup>3</sup>**

Specialty	Patients Waiting for an Appointment by Weeks Waiting					Total Waiting
	0-6	>6-9	>9-12	>12-15	>15	
General Surgery	8,309	2,619	2,131	1,122	9,150	23,331
T & O Surgery	5,856	2,046	1,797	1,219	11,421	22,339
ENT	6,853	2,652	2,202	1,193	8,609	21,509
Ophthalmology	4,829	1,570	1,125	667	9,501	17,692
Gynaecology	5,626	2,125	1,671	908	5,171	15,501
Dermatology	4,077	990	675	437	3,937	10,116
Gastroenterology	2,011	762	647	412	5,362	9,194
Neurology	1,789	724	635	432	5,561	9,141
Urology	1,980	673	450	324	4,699	8,126
General Medicine	2,742	921	644	354	3,363	8,024
Cardiology	3,202	1,057	787	426	1,930	7,402
Rheumatology	1,778	679	580	365	3,526	6,928
Paediatrics	3,369	1,027	393	198	1,502	6,489
Oral Surgery	1,531	514	398	239	2,937	5,619
Thoracic Medicine	1,467	459	402	247	1,725	4,300
Pain Management	1,185	490	351	211	1,008	3,245
Plastic Surgery	663	280	219	121	587	1,870
Restorative Dentistry	647	233	231	125	630	1,866
Geriatric Medicine	675	172	104	54	221	1,226
Endocrinology	537	189	117	60	254	1,157
Other	3,625	889	560	238	1,392	6,704
<b>All Specialties</b>	<b>62,751</b>	<b>21,071</b>	<b>16,119</b>	<b>9,352</b>	<b>82,486</b>	<b>191,779</b>

Source: Departmental Return CH3

<sup>3</sup>Refer to Explanatory Notes 1 – 7

(Specifically Explanatory Note 5 for information on the centralisation of Oral Surgery services and how these waiting times are reported.)

**Table 2b: Percentage of patients waiting for a first outpatient appointment by weeks waiting and specialty – 31<sup>st</sup> March 2015<sup>3</sup>**

Specialty	% Patients Waiting for an Appointment by Weeks Waiting				
	0-6	>6-9	>9-12	>12-15	>15
General Surgery	35.6%	11.2%	9.1%	4.8%	39.2%
T & O Surgery	26.2%	9.2%	8.0%	5.5%	51.1%
ENT	31.9%	12.3%	10.2%	5.5%	40.0%
Ophthalmology	27.3%	8.9%	6.4%	3.8%	53.7%
Gynaecology	36.3%	13.7%	10.8%	5.9%	33.4%
Dermatology	40.3%	9.8%	6.7%	4.3%	38.9%
Gastroenterology	21.9%	8.3%	7.0%	4.5%	58.3%
Neurology	19.6%	7.9%	6.9%	4.7%	60.8%
Urology	24.4%	8.3%	5.5%	4.0%	57.8%
General Medicine	34.2%	11.5%	8.0%	4.4%	41.9%
Cardiology	43.3%	14.3%	10.6%	5.8%	26.1%
Rheumatology	25.7%	9.8%	8.4%	5.3%	50.9%
Paediatrics	51.9%	15.8%	6.1%	3.1%	23.1%
Oral Surgery	27.2%	9.1%	7.1%	4.3%	52.3%
Thoracic Medicine	34.1%	10.7%	9.3%	5.7%	40.1%
Pain Management	36.5%	15.1%	10.8%	6.5%	31.1%
Plastic Surgery	35.5%	15.0%	11.7%	6.5%	31.4%
Restorative Dentistry	34.7%	12.5%	12.4%	6.7%	33.8%
Geriatric Medicine	55.1%	14.0%	8.5%	4.4%	18.0%
Endocrinology	46.4%	16.3%	10.1%	5.2%	22.0%
Other	54.1%	13.3%	8.4%	3.6%	20.8%
<b>All Specialties</b>	<b>32.7%</b>	<b>11.0%</b>	<b>8.4%</b>	<b>4.9%</b>	<b>43.0%</b>

Source: Departmental Return CH3

<sup>3</sup>Refer to Explanatory Notes 1 - 7

(Specifically Explanatory Note 5 for information on the centralisation of Oral Surgery services and how these waiting times are reported.)

**Table 3a: Number of patients waiting for a first outpatient appointment by HSC Trust and weeks waiting – 31<sup>st</sup> March 2015<sup>3</sup>**

Provider Trust	Patients Waiting for an Appointment by Weeks Waiting					Total Waiting
	0-6	>6-9	>9-12	>12-15	>15	
Belfast	22,806	7,626	5,727	3,372	38,649	78,180
Northern	8,661	2,891	2,088	1,233	10,268	25,141
South Eastern	11,039	4,047	3,091	1,856	15,510	35,543
Southern	10,756	3,772	3,174	1,929	10,847	30,478
Western	9,489	2,735	2,039	962	7,212	22,437
<b>Total</b>	<b>62,751</b>	<b>21,071</b>	<b>16,119</b>	<b>9,352</b>	<b>82,486</b>	<b>191,779</b>

Source: Departmental Return CH3

<sup>3</sup>Refer to Explanatory Notes 1 - 7

(Specifically Explanatory Note 5 for information on the centralisation of Oral Surgery services and how these waiting times are reported.)

**Table 3b: Percentage of patients waiting for a first outpatient appointment by HSC Trust and weeks waiting – 31<sup>st</sup> March 2015<sup>3</sup>**

Provider Trust	Patients Waiting for an Appointment by Weeks Waiting				
	0-6	>6-9	>9-12	>12-15	>15
Belfast	29.2%	9.8%	7.3%	4.3%	49.4%
Northern	34.4%	11.5%	8.3%	4.9%	40.8%
South Eastern	31.1%	11.4%	8.7%	5.2%	43.6%
Southern	35.3%	12.4%	10.4%	6.3%	35.6%
Western	42.3%	12.2%	9.1%	4.3%	32.1%
<b>Total</b>	<b>32.7%</b>	<b>11.0%</b>	<b>8.4%</b>	<b>4.9%</b>	<b>43.0%</b>

Source: Departmental Return CH3

<sup>3</sup>Refer to Explanatory Notes 1 – 7 (Specifically Explanatory Note 5 for information on the centralisation of Oral Surgery services and how these waiting times are reported.)

**Table 4: Patients waiting longer than 15 weeks for a first outpatient appointment – 31<sup>st</sup> March 2015<sup>3</sup>**

	Quarter Ending March 2015	Change compared with end of previous quarter	Change compared with end same quarter - previous year
<b>Total waiting over 15 weeks</b>	82,486	+21,175	+63,313

Source: Departmental Return CH3

<sup>3</sup>Refer to Explanatory Notes 1 – 7 (Specifically Explanatory Note 5 for information on the centralisation of Oral Surgery services and how these waiting times are reported.)

## Completed Outpatient Waits

**Table 5: Completed outpatient waits: QE June 2011 – QE March 2015<sup>6</sup>**

Quarter	Total Number of Completed Outpatient Waits Within Health Service Hospitals	Total Number of Completed Outpatient Waits in Independent Sector*	Total Number of Completed Outpatient Waits Commissioned by Health Service
A - J 2011	116,990	3,291	120,281
J - S 2011	112,394	617	113,011
O - D 2011	120,440	3,838	124,278
J - M 2012	125,411	20,984	146,395
<b>A - M 2011/12</b>	<b>475,235</b>	<b>28,730</b>	<b>503,965</b>
A - J 2012	118,588	9,976	128,564
J - S 2012	116,629	12,463	129,092
O - D 2012	124,251	9,094	133,345
J - M 2013	121,591	19,204	140,795
<b>A - M 2012/13</b>	<b>481,059</b>	<b>50,737</b>	<b>531,796</b>
A - J 2013	121,369	8,575	129,944
J - S 2013	120,317	17,912	138,229
O - D 2013	124,785	8,928	133,713
J - M 2014	119,468	11,703	131,171
<b>A - M 2013/14</b>	<b>485,939</b>	<b>47,118</b>	<b>533,057</b>
A - J 2014 <sup>RP</sup>	118,097	9,471	127,568
J - S 2014 <sup>RP</sup>	116,977	8,977	125,954
O - D 2014 <sup>P</sup>	120,570	419	120,989
J - M 2015 <sup>P</sup>	117,910	79	117,989
<b>A - M 2014/15<sup>P</sup></b>	<b>473,554</b>	<b>18,946</b>	<b>492,500</b>

Source: Departmental Return QOAR and IS1 Part 1.

<sup>R</sup> Data have been revised

<sup>P</sup> Data are currently provisional

\* Not National Statistics

<sup>6</sup> Refer to Explanatory Notes 8 – 10 (Specifically Explanatory Note 9 for information on changes to the recording of outpatient activity.)

**Table 6: Completed outpatient waits by HSC Trust including Independent Sector activity – QE March 2015<sup>6</sup>**

Provider Trust	Number of Completed Outpatient Waits within Health Service Hospitals <sup>P</sup>	Number of Completed Outpatient Waits in Independent Sector <sup>P*</sup>	Total Number of Completed Outpatient Waits Commissioned by Health Service <sup>P</sup>
Belfast	44,450	45	44,495
Northern	14,706	0	14,706
South Eastern	19,887	3	19,890
Southern	19,867	30	19,897
Western	19,000	1	19,001
<b>Total Treated</b>	<b>117,910</b>	<b>79</b>	<b>117,989</b>

Source: Departmental Returns QOAR and IS1 Part 1

<sup>P</sup> Data are currently provisional

\* Not National Statistics

<sup>6</sup> Refer to Explanatory Notes 8 – 10 (Specifically Explanatory Note 9 for information on changes to the recording of outpatient activity.)



**Table 7: Completed outpatient waits by HSC Trust including Independent Sector activity: QE March 2014 – QE March 2015<sup>6</sup>**

Provider Trust	Total Number of Completed Outpatient Waits Commissioned by Health Service				
	QE March 2014	QE June 2014 <sup>RP</sup>	QE September 2014 <sup>RP</sup>	QE December 2014 <sup>RP</sup>	QE March 2015 <sup>P</sup>
Belfast	50,051	49,980	45,370	44,606	44,495
Northern	16,630	16,007	17,290	15,261	14,706
South Eastern	22,841	22,256	22,097	20,077	19,890
Southern	20,637	19,685	20,849	20,753	19,897
Western	21,012	19,640	20,348	20,292	19,001
<b>Total</b>	<b>131,171</b>	<b>127,568</b>	<b>125,954</b>	<b>120,989</b>	<b>117,989</b>

Source: Departmental Returns QOAR and IS1 Part 1

<sup>R</sup> Data have been revised

<sup>P</sup> Data are currently provisional

<sup>6</sup> Refer to Explanatory Notes 8 – 10 (Specifically Explanatory Note 9 for information on changes to the recording of outpatient activity.)

## Integrated Clinical Assessment and Treatment Services

**Table 8: Quarterly ICATS waiting lists – 31<sup>st</sup> March 2015<sup>7</sup>**

	Quarter Ending March 2015	Change compared with end of previous quarter	Change compared with end same quarter - previous year
<b>Total Waiting</b>	11,506	+801	+2,973

Source: ICATS Waiting Times Dataset

<sup>7</sup> Refer to Explanatory Notes 11 – 13

**Table 9: Number of patients waiting for a first ICATS Tier 2 appointment by weeks waiting and specialty – 31<sup>st</sup> March 2015<sup>7</sup>**

Specialty	Patients Waiting for an Appointment by Weeks Waiting					Total Waiting
	0-6	>6-9	>9-12	>12-15	>15	
Urology	19	6	3	0	97	125
Trauma & Orthopaedics	3,708	1,081	723	415	1,387	7,314
Ear, Nose & Throat	590	229	142	57	708	1,726
Ophthalmology	883	242	82	13	68	1,288
Cardiology	77	6	0	1	0	84
Dermatology	706	146	27	3	87	969
<b>All Specialties</b>	<b>5,983</b>	<b>1,710</b>	<b>977</b>	<b>489</b>	<b>2,347</b>	<b>11,506</b>

Source: ICATS Waiting Times Dataset

<sup>7</sup> Refer to Explanatory Notes 11 – 13

**Table 10: Number of patients waiting for a first ICATS Tier 2 appointment by HSC Trust and weeks waiting – 31<sup>st</sup> March 2015<sup>7</sup>**

Provider Trust	Patients Waiting for an Appointment by Weeks Waiting					Total Waiting
	0-6	>6-9	>9-12	>12-15	>15	
Belfast	1,120	272	68	12	61	1,533
Northern	1,643	246	14	2	91	1,996
South Eastern	1,051	370	239	138	393	2,191
Southern	729	352	288	175	624	2,168
Western	1,440	470	368	162	1,178	3,618
<b>Total</b>	<b>5,983</b>	<b>1,710</b>	<b>977</b>	<b>489</b>	<b>2,347</b>	<b>11,506</b>

Source: ICATS Waiting Times Dataset

<sup>7</sup>Refer to Explanatory Notes 11 – 13

## Appendix 1: Explanatory Notes

1. The sources for the data contained in this release are the Departmental Returns CH3, IS1 Part 1, Quarterly Outpatient Activity Return (QOAR), and the ICATS Waiting Time Dataset. These returns collect information from Health and Social Care Trusts and the Health and Social Care Board on a quarterly basis.
2. All of the data contained in the tables are available on a quarterly basis and can be supplied by individual specialty or Provider HSC Trust if this level of detail is required. In addition, quarterly data relating to outpatient and ICATS waiting times have been published in spreadsheet format (Microsoft Excel), split by HSC Trust, Specialty and Programme of Care, in order to aid secondary analysis. These data are available at <http://www.dhsspsni.gov.uk/index/statistics/hospital/waitingtimes/waitingtimes-outpatient.htm>
3. Trust based information returns (CH3, QOAR, Departmental Return IS1 and ICATS Waiting Time Dataset) include patients living outside of Northern Ireland and privately funded patients waiting for treatment in Health Service hospitals in Northern Ireland.
4. Outpatient waiters are defined as patients still waiting for their first outpatient appointment at the end of the quarter, including those who have cancelled or missed a previous appointment. An outpatient appointment is to enable a patient to see a consultant, a member of their team or locum for such a member, in respect of one referral. Waiting time for a first outpatient appointment begins on the date the HSC Trust receives a referral for a first outpatient appointment and ends on the date a patient attends a first outpatient appointment. Patients who cannot attend (CNA) have their waiting time adjusted to commence on the date they informed the HSC Trust they could not attend, while patients who do not attend (DNA) have their waiting time adjusted to commence on the date of their DNA.
5. From 1<sup>st</sup> April 2014, Oral Surgery services undertaken by consultants contracted to the South Eastern HSC Trust were centralized, meaning that records for patients waiting for this service in both the Northern and Southern HSC Trusts are now held and managed in the South Eastern HSC Trust. A breakdown of the waiting times for these patients broken down by HSC Trust has been provided in the spreadsheet located at <http://www.dhsspsni.gov.uk/index/statistics/hospital/waitingtimes/waitingtimes-outpatient.htm>
6. For Tables 2 - 4, and Figures 4 - 8 each outpatient waiting timeband relates to the number of completed weeks a patient has been waiting for outpatient assessment. For example, a patient waiting exactly 6 weeks would be included in the 0-6 week timeband and a patient waiting 6 weeks and 1 day would be included in the >6-9 (greater than 6 weeks but waiting no longer than 9 weeks) timeband.
7. The Ministerial target, for outpatient waiting times, as set out in the Health and Social Care (Commissioning Plan) Direction states that from April 2014, at least 80% of patients should wait no longer than nine weeks for a first outpatient appointment, and no patient waiting longer than 15 weeks.
8. The total number of completed outpatient waits each quarter, within HSC hospitals, is derived as the total number of attendances at a first outpatient appointment from the Departmental Quarterly Outpatient Activity Return (QOAR).
9. A new version of the QOAR was introduced at the beginning of 2014/15, with the main change being that ward attendances seen by a consultant are now reported separately and are not included in the main outpatient activity as in previous years. However, it should be noted that prior to 2014/15 the Southern HSC Trust had never historically included ward attenders in their returns. Furthermore, due to recording practices within the South Eastern HSC Trust they are unable to report ward attenders separately, but have

estimated that there were no first attendances that were ward attenders this quarter. Data users should be aware of these points when comparing data across HSC Trusts and years.

10. The number of patients that received an outpatient assessment, commissioned by the Health Service, in the Independent Sector is provided in Tables 5 to 7. These figures are provided by the HSC Board. They are published for each transferring Health and Social Care Trust (Trust responsible for the patient's waiting time). They are not National Statistics and they have not been validated by the Department, however, they have been included to provide users with a comprehensive view of completed outpatient waits during each quarter.
11. From 1<sup>st</sup> April 2010, a number of Integrated Clinical Assessment and Treatment Services (ICATS) were officially introduced within the HSC. ICATS is the term used for a range of outpatient services, which are provided by integrated multi-disciplinary teams of health service professionals, including GPs with a special interest, specialist nurses and allied health professionals. They are provided in a variety of primary, community and secondary care settings and they include assessment, treatment, diagnostic and advisory services. Following ICATS Triage, patients who have not been given either discharge, advice only or referral incomplete outcomes will proceed for either a (i) first outpatient appointment, (ii) a diagnostic test or (iii) an ICATS appointment. A first appointment at ICATS is known as a Tier 2 appointment. Waiting times for a first ICATS Tier 2 appointment are measured in a similar fashion to those for a first outpatient appointment (see note 4).
12. ICATS introduced from 1<sup>st</sup> April 2010 included services in the Urology, ENT, Ophthalmology, Cardiology and Dermatology specialties. ICATS in the Trauma and Orthopaedic specialty were introduced on 1<sup>st</sup> October 2007.
13. A first ICATS Tier 2 appointment is considered as a non consultant outpatient appointment and hence these waiters are not reported along with consultant led outpatient waiters. Following a first ICATS Tier 2 appointment there are a number of outcomes, including a review ICATS Tier 2 appointment or a referral for a first consultant-led outpatient appointment. If the latter is the case then the outpatient waiting time starts from the date on which this referral is received by the outpatient service, i.e. it is treated as a new referral.
14. HIB surveyed data providers during 2011/12 to ascertain the cost of producing, validating and submitting the information required for this publication. This relates to the time taken to generate, validate and submit data, over and above what is already required by their organisation for internal performance management purposes. The cost to data providers of compliance within HIB's requirements for this publication, based on HSC salary costs, was £3,110.
15. Department of Health, Social Services and Public Safety policy is to publish revised figures with subsequent statistical releases unless it is decided that the magnitude of the change merits earlier notification.
16. Figures relating to the quarter ending 30<sup>th</sup> June 2015 will be released on Thursday 27<sup>th</sup> August 2015.

## Appendix 2: Data in the publication

### General guidance on using the data

The data contained in the publication are presented on a quarterly basis. While seasonal impact should be minimal, it is advisable that data for the current quarter be compared with both the previous quarter (to gauge the most current direction of performance), and the same quarter in the previous year (to assess any seasonal impact).

### Number of patients waiting for a first outpatient appointment

#### Description of data

Data on the number of health service patients who are waiting for a first outpatient appointment with a consultant led service at a Health and Social Care (HSC) Trust in Northern Ireland.

#### Data provider

Data are sourced directly from HSC Trusts, via the Departmental Data Return CH3.

#### Data quality assessment

Data are derived from a range of administrative systems. Data providers have been given in-depth guidance providing instructions for recording, collection and submission of data. In addition, variance checks are employed as an integral part of the production process, with large discrepancies between the current quarter and both the previous quarter, and the corresponding quarter in the previous year, being queried with the data provider.

#### Guidance on using data

- Number of patients waiting for a first outpatient appointment – this is the number of patients referred to a HSC Trust for a first outpatient appointment with a consultant led service. It does not include patients waiting for a review outpatient appointment (having already been seen by the consultant) or patients waiting for a first appointment at a service provided by other health care professionals, such as nurses. Data relate to the numbers who have still to attend their appointment at the end of each quarter, and provide users with an indication of demand for HSC outpatient services. This information should not be used to estimate the numbers who have attended a first outpatient appointment (completed outpatient waits).
- Lengths of time patients are waiting for a first outpatient appointment – this relates to the lengths of time patients have been waiting for their appointment at the end of the relevant quarter. These are sometimes referred to as current waits. Explanatory notes 4 and 6, in Appendix 1, explain how these waiting times are measured. This information relates to how long patients are waiting for a first outpatient appointment, not the length of time they waited before attending, also known as completed waits. Data on the total length of time patients waited before attending their first outpatient appointment are not collected.
- An assessment of both the total number waiting and the length of time patients are waiting, when compared with equivalent data for previous quarters, allow users to gauge the disparity between demand for outpatient services and the overall capacity for providing these services, both within the HSC and Independent Sector providers.
- Outpatient waiting times by HSC Trust – patients will be referred to a specific HSC Trust for outpatient assessment. Patients are reported by the HSC Trusts responsible for the service to which the patient has been referred. This is not necessarily the nearest HSC Trust to the patient's residence, as certain clinical services may not be provided at a patient's local HSC Trust, and in the case of some specialised services, such as Plastic Surgery, services will largely be provided at a single regional centre for Northern Ireland. In some cases a consultant from one HSC Trust may provide a 'visiting' service at another HSC Trust, and so the patient may not be reported at the HSC Trust at which they attend. Users should therefore be cautious in how they use these data. For example, they should not be used to calculate the total number of patients waiting per head of

the population residing within each HSC Trust area. Neither should the actual number of patients waiting longer than the recommended waiting time be used as indicator of poor performance within an individual HSC Trust. Users who require an indication of the latter are advised to refer to the commentary section of the publication which provides an indication of the percentage of total waiters that have been waiting over the maximum recommended waiting times, within each HSC Trust.

- Outpatient waiting times by specialty - patients will be referred for a first outpatient appointment for a specific medical condition. Following receipt of the referral by the HSC Trust, the referral will be triaged and allocated to the most suitable consultant. Each consultant employed by the HSC Trust will have an allocated specialty of employment, and it will be this specialty against which the patient's waiting time will be reported. These data provide a useful insight into the differences in both the demand for certain types of medical procedures, and also the existing capacity available to meet these demands.

## **Number of patients attending a first outpatient appointment (completed outpatient waits)**

### **Description of data**

Data on the number of health service patients who have attended a first outpatient appointment with a consultant led service at a Health and Social Care (HSC) Trust in Northern Ireland. These data are also known as completed outpatient waits.

### **Data provider**

Data on patients treated within HSC Trusts are sourced directly from HSC Trusts, via the Departmental Quarterly Outpatient Activity Return. Data on HSC patients treated by an Independent Sector provider are provided on the Departmental Return IS1 Part 1 by the HSC Board, which is responsible for the regional commissioning of independent sector provision.

### **Data quality assessment**

Data are derived from a range of administrative systems. For data on completed outpatient waits within the HSC Trusts, data providers have been given in-depth guidance providing instructions for recording, collection and submission of data. In addition, variance checks are employed as an integral part of the production process, with large discrepancies between the current quarter and both the previous quarter, and the corresponding quarter in the previous year, being queried with the data provider. It should be noted a change was made to the recording of consultant led activity at the beginning of 2014/15, with ward attendances seen by a consultant now reported separately from the main consultant led activity. Consequently, outpatient activity prior to 2014/15 is not directly comparable to that after 2014/15. For data on completed outpatient waits within the independent sector, HSC Trusts are provided with in-depth guidance detailing how they should record details of patient transferred to the Independent Sector for assessment on their Patient Administration System. Following assessment, the Independent Sector provider informs the transferring HSC Trust, who records the patient's outpatient wait as being complete. These records are then validated against financial invoices received by the HSC Trust from the Independent Sector provider for each transferred patient. HSC Trusts then submit these data to the HSC Board. These are not categorised as National Statistics.

### **Guidance on using data**

- Number of HSC patients attending a first outpatient appointment at a HSC hospital – These data relate to the number of patients who attended a first outpatient appointment within the HSC during each quarter. Health Service patients will attend a first outpatient appointment at a HSC hospital, at either a routinely provided consultant led outpatient service, or at an additionally provided consultant led outpatient service provided by the HSC Trust, in addition to the routine services. These latter services (sometimes referred to as 'Waiting List Initiatives') are often provided in response to a specific need, such as increases in both the number of patients waiting and lengths of time waiting.

Data on the number of HSC patients attending a first outpatient appointment at a HSC hospital provide users with a good indication of the capacity available within the HSC to assess outpatients.

- Number of HSC patients attending a first outpatient appointment with an Independent Sector provider – These data relate to the number of Health Service patients who received their first outpatient assessment at an outpatient service provided by the Independent Sector. Independent Sector provision is introduced when the demand for certain types of outpatient service is greater than the capacity within HSC hospitals. When this situation results in increases in both the number of patients waiting and the length of time waiting, patients may be assessed and treated by an Independent Sector provider. The cost of assessing these patients is met by the transferring HSC Trust, who retains responsibility for the patients waiting time. Data on the number of HSC patients attending a first outpatient appointment with an Independent Sector provider, provide users with a good indication of demand for outpatient services within the HSC, exceeding available capacity.
- Total number of HSC patients attending a first outpatient appointment – this relates to the total number of HSC patients attending a first outpatient appointment irrespective of the location or provider of the treatment. This provides users with an indication of the number of patients who would previously have been on the waiting list but had been treated during the latest quarter. Data on the total number of first outpatient attendances allow users to assess the impact that the number of first attendances during the quarter have had upon the total number of patients waiting for a first outpatient appointment at the end of the quarter.

## **Number of patients waiting for a first ICATS Tier 2 appointment**

### **Description of data**

Data on the number of health service patients who are waiting for a first Tier 2 appointment at an Integrated Clinical Assessment and Treatment Service (ICATS) at a Health and Social Care (HSC) Trust in Northern Ireland. See Explanatory Note 11 in Appendix 1 for a definition of ICATS.

### **Data provider**

Data are largely sourced directly from the Patient Administration System, via a facility known as the HSC Data Warehouse, by each HSC Trust. The Southern HSCT manually supplements these data for one service.

### **Data quality assessment**

Data are derived largely from a single administrative system, with minor manual supplementation of data for the Urology ICATS service at the Southern HSCT. Data providers have been given in-depth guidance providing instructions for recording, collection and submission of data. In addition, variance checks are employed as an integral part of the production process, with large discrepancies between the current quarter and both the previous quarter, and the corresponding quarter in the previous year, being queried with the data provider.

### **Guidance on using data**

- Number of patients waiting for a first ICATS Tier 2 appointment – this is the number of a patients referred to a HSC Trust for a first ICATS appointment (known as a Tier 2 appointment). It does not include patients waiting for a review ICATS Tier 2 appointment (having already attended a first ICATS Tier 2 appointment) or patients waiting for a first appointment at a consultant led or another health care professional led service. Data relate to the numbers who have still to attend their appointment at the end of each quarter, and provides users with an indication of demand for ICATS Tier 2 services. It should not be used to estimate the numbers who have attended a first ICATS Tier 2 appointment (completed ICATS Tier 2 waits).
- Lengths of time patients are waiting for a first ICATS Tier 2 appointment – this relates to the lengths of time patients have been waiting for their appointment at the end of the relevant quarter. Explanatory note 6 in Appendix 1 explains how these waiting times are measured. This



information relates to how long patients are waiting for a first ICATS Tier 2 appointment, not the length of time they waited before attending, also known as completed waits. Data on the total length of time patients waited before attending their first ICATS Tier 2 appointment are not collected.

- An assessment of both the total number waiting and the length of time patients are waiting, when compared with equivalent data for previous quarters, allow users to gauge the disparity between demand for ICATS Tier 2 services and the overall capacity for providing these services within the HSC.
- ICATS Tier 2 waiting times by HSC Trust – patients will be referred to a specific HSC Trust for assessment. Patients are reported by the HSC Trusts responsible for the service to which the patient has been referred. This is not necessarily the nearest HSC Trust to the patient's residence, as certain ICATS services may not be provided at a patient's local HSC Trust. Users should therefore be cautious in how they use these data. For example, they should not be used to calculate the total number of patients waiting per head of the population residing within each Trust area. Neither should the actual number of patients waiting longer than the recommended waiting time be used as indicator of poor performance within an individual HSC Trust. Users who require an indication of the latter are advised to refer to the commentary section of the publication which provides an indication of the percentage of total waiters that have been waiting over the maximum recommended waiting times, within each HSC Trust.
- ICATS Tier 2 waiting times by specialty - patients will be referred for a first ICATS Tier 2 appointment for a specific medical condition. Following receipt of the referral by the HSC Trust, the referral will be triaged and allocated to the most suitable ICATS service. Each ICATS service will be commissioned to provide services in a specific specialty and this will determine the specialty against which the patient's waiting time will be reported. These data provide a useful insight into the differences in both the demand for certain types of medical procedures, and also the existing capacity available to meet these demands within ICATS.





**Further information on Outpatient Waiting Times in Northern Ireland, is available from:**

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**This Statistical bulletin and others published by Hospital Information Branch are available to download from the DHSSPS Internet site at:**

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