

INFORMATION
ANALYSIS
DIRECTORATE



Northern Ireland Waiting Time Statistics: Outpatient Waiting Times Quarter Ending March 2016



Department of
Health

Reader Information

Purpose	This publication presents information on waiting times for a first outpatient assessment in Northern Ireland at 31 st March 2016. 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 2015/16 Ministerial waiting time target which states that from April 2015 at least 60% of patients should wait no longer than nine weeks for a first outpatient appointment, and no patient waiting longer than 18 weeks. The number of completed outpatient attendances is also presented by HSC Trust.
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Target audience	DoH, 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

- At 31st March 2016, 214,953 people were waiting for a first consultant-led outpatient appointment, 8.7%, (20,412) less than at 31st December 2015 and 12.1% (23,176) more than at the end of March 2015 (Figure 1 and Table 1).
- At the end of March 2016, 63.3% (136,032) of patients were waiting more than 9 weeks for a first outpatient appointment, compared with 70.0% waiting at the end of December 2015 and 56.3% at the end of March 2015 (Figure 5 and Table 3a & 3b).
- At 31st March 2016, almost half (46.6%, 100,234) of patients were waiting longer than 18 weeks, 18.4% (22,537) less than at 31st December 2015, but 43.7% (30,504) more than at 31st March 2015 (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 146,049 outpatients attended a first outpatient appointment in Northern Ireland during the quarter ending March 2016 (Figure 11 and Table 5).
- There were 10,370 patients waiting for a first Integrated Clinical Assessment and Treatment Services (ICATS) Tier 2 appointment at the end of March 2016, 1.1% (114) more than at the end of December 2015 and 9.9%(1,136) less than at the end of March 2015 (Figure 12 & Table 8).
- A total of 29.2% (3,025) of patients were waiting longer than 9 weeks for a first ICATS Tier 2 appointment, with 11.1% (1,232) of these waiting more than 18 weeks (Figures 13 & 14 and Table 10).

Contents

About Hospital Information Branch.....	5
List of Figures.....	6
List of Tables.....	7
Technical Notes.....	8
Introduction.....	11
Consultant led Outpatient Services.....	11
Waiting Times for a First Outpatient Appointment.....	11
Completed Outpatient Waits.....	17
Completed waits in Health Service Hospitals.....	17
Completed waits in the Independent Sector.....	17
Completed waits commissioned by the Health Service.....	18
Integrated Clinical Assessment and Treatment Services (ICATS).....	19
Waiting Times for a First ICATS Tier 2 Appointment.....	19
Tables.....	21
Appendix 1: Explanatory Notes.....	27
Appendix 2: Data in the Publication.....	29

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 DoH, 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: <https://www.health-ni.gov.uk/topics/dhssps-statistics-and-research>

List of Figures

Figure 1:	Total number of patients waiting: Quarterly trends 31 st March 2012 – 31 st March 2016.....	11
Figure 2:	Total number of patients waiting by specialty at 31 st March 2016.....	12
Figure 3:	Total number of patients waiting by HSC Trust at 31 st March 2016.....	12
Figure 4:	HSC Trust performance against the 2015/16 waiting times target for a consultant led first appointment.....	13
Figure 5:	Proportion of patients waiting over 9 weeks: Quarterly trends 31 st March 2012 – 31 st March 2016	14
Figure 6:	Proportion of patients waiting over 9 weeks by HSC Trust at 31 st March 2016	14
Figure 7:	Number of patients waiting longer than 18 weeks: Quarterly trends 31 st March 2012 – 31 st March 2016.....	15
Figure 8:	Patients waiting longer than 18 weeks by specialty at 31 st March 2016.....	15
Figure 9:	Proportion of patients waiting longer than 18 weeks by HSC Trust at 31 st March 2016.....	16
Figure 10:	Total number of completed waits in Health Service Hospitals: Quarterly trends QE March 2011 – QE March 2016.....	17
Figure 11:	Completed outpatient waits including Independent Sector activity: Quarterly trends QE March 2015 – QE March 2016.....	18
Figure 12:	Total number of patients waiting for a first ICATS Tier 2 appointment: Quarterly trends 31 st March 2012 – 31 st March 2016.....	19
Figure 13:	Proportion of patients waiting over 9 weeks for a first ICATS Tier 2 appointment by HSC Trust at 31 st March 2016.....	20
Figure 14:	Proportion of patients waiting longer than 18 weeks for a first ICATS Tier 2 appointment by HSC Trust at 31 st March 2016.....	20

List of Tables

Table 1:	Quarterly outpatient waiting lists – 31 st March 2016.....	21
Table 2a:	Number of patients waiting for a first outpatient appointment by weeks waiting and specialty – 31 st March 2016.....	21
Table 2b:	Percentage of patients waiting for a first outpatient appointment by weeks waiting and specialty – 31 st March 2016.....	22
Table 3a:	Number of patients waiting for a first outpatient appointment by HSC Trust and weeks waiting – 31 st March 2016.....	23
Table 3b:	Percentage of patients waiting for a first outpatient appointment by HSC Trust and weeks waiting – 31 st March 2016.....	23
Table 4 :	Patients waiting longer than 18 weeks for a first outpatient appointment – 31 st March 2016	23
Table 5:	Completed outpatient waits: QE June 2011 – QE March 2016.....	24
Table 6:	Completed outpatient waits by HSC Trust including Independent Sector activity – QE March 2016.....	25
Table 7:	Completed outpatient waits by HSC Trust including Independent Sector activity: QE March 2015 – QE March 2016	25
Table 8:	Quarterly ICATS waiting lists – 31 st March 2016.....	26
Table 9:	Number of patients waiting for a first ICATS Tier 2 appointment by weeks waiting and specialty – 31 st March 2016.....	26
Table 10:	Number of patients waiting for a first ICATS Tier 2 appointment by HSC Trust and weeks waiting – 31 st March 2016.....	26

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:

<https://www.health-ni.gov.uk/articles/outpatient-waiting-times>

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 10 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 DoH Health Committee to assess the performance of the DoH, 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 DoH 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

“National Statistics status means that official statistics meet the highest standards of trustworthiness, quality and public value.

All official statistics should comply with all aspects of the Code of Practice for Official Statistics. They are awarded National Statistics status following an assessment by the Authority’s regulatory arm. The Authority considers whether the statistics meet the highest standards of Code compliance, including the value they add to public decisions and debate.

It is the Department’s responsibility to maintain compliance with the standards expected of National Statistics. If we become concerned about whether these statistics are still meeting the appropriate standards, we will discuss any concerns with the Authority promptly. National Statistics status can be removed at any point when the highest standards are not maintained, and reinstated when standards are restored.”

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:

<https://www.health-ni.gov.uk/articles/outpatient-waiting-times>

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 DoH Health Committee to assess the performance of the DoH, 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 31st March 2016; and Health Service commissioned activity at consultant led outpatient services, either in HSC Hospitals or the Independent Sector, during the quarter ending (QE) March 2016.

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.

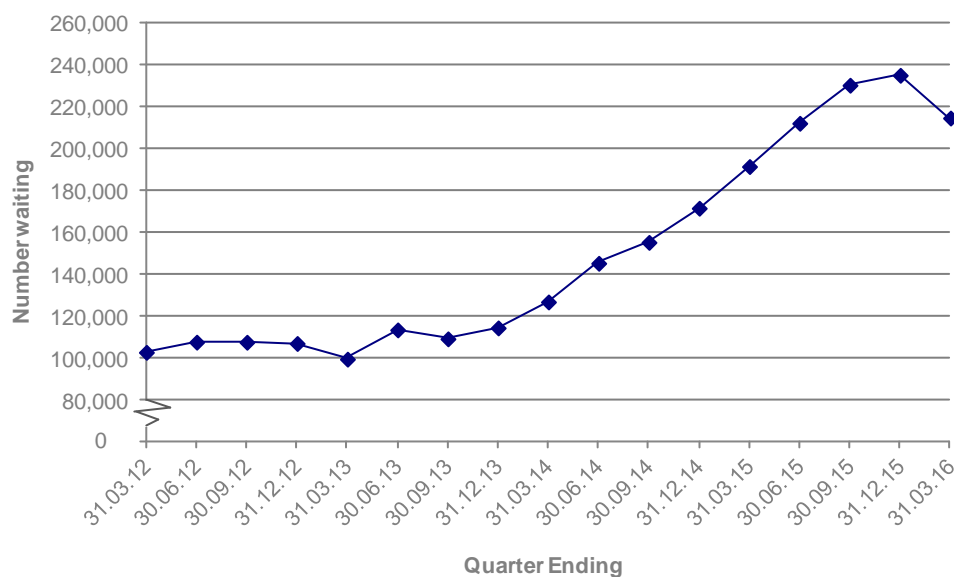
Waiting Times for a First Outpatient Appointment

Total patients waiting¹

At 31st March 2016 a total of 214,953 people were waiting for a first consultant-led outpatient appointment, 8.7%, (20,412) less than at 31st December 2015 (235,365) and 12.1% (23,176) more than at the end of March 2015 (191,777) (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, but there has been a notable upward trend since the beginning of 2013/14.

Figure 1: Total number of patients waiting: Quarterly trends 31st March 2012 – 31st March 2016

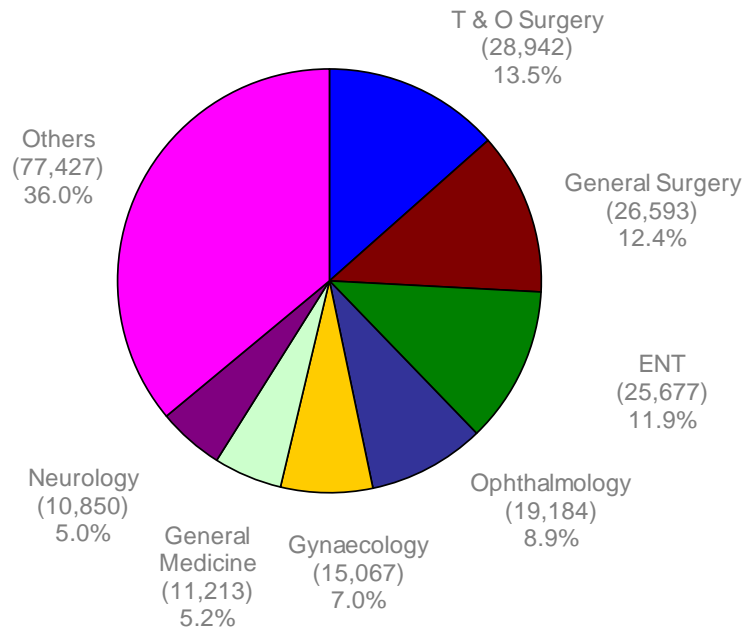


¹Refer to Explanatory Notes 1 - 4

Total patients waiting by Specialty¹

Almost two thirds (64.0%, 137,526) of the 214,953 patients waiting for a first outpatient appointment were within seven specialties: Trauma & Orthopaedic Surgery (T & O Surgery); General Surgery; Ear, Nose & Throat (ENT); Ophthalmology; Gynaecology; General Medicine and Neurology (Figure 2 & Table 2a).

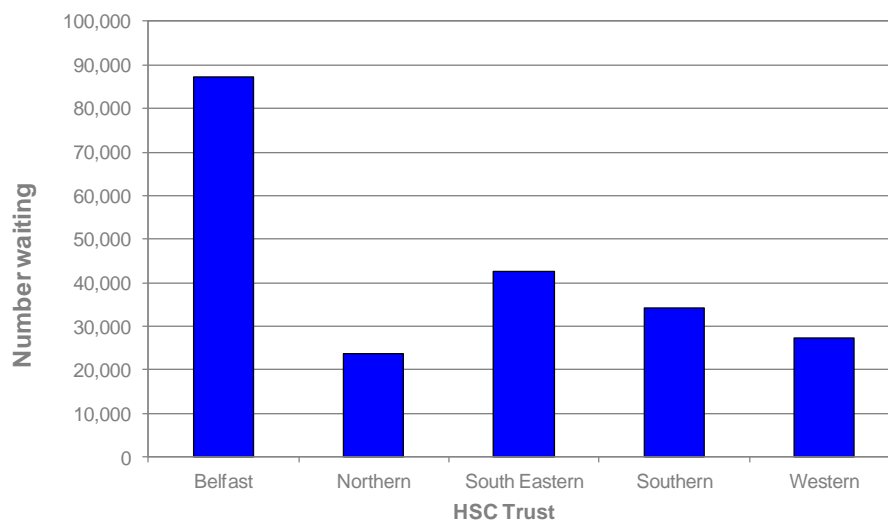
Figure 2: Total number of patients waiting by specialty at 31st March 2016



Total patients waiting by HSC Trust²

Approximately two fifths (40.6%, 87,284) of those waiting for a first appointment were in the Belfast HSC Trust, 19.9% (42,672) in the South Eastern HSC Trust, 15.9% (34,185) in the Southern HSC Trust, 12.6% (27,147) in the Western HSC Trust and 11.0% (23,665) in the Northern HSC Trust (Figure 3 & Table 3a).

Figure 3: Total number of patients waiting by HSC Trust at 31st March 2016



¹Refer to Explanatory Notes 1 - 4

²Refer to Explanatory Notes 1 - 5

Readers should note 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 2015/16 waiting time target³

The Ministerial target, for outpatient waiting times, states that from April 2015, at least 60% of patients should wait no longer than nine weeks for a first outpatient appointment, and no patient waiting longer than 18 weeks.

Figure 4: Performance against the outpatient waiting time target for a first consultant led appointment by HSC Trust

HSC Trust	Target Achieved	
	At least 60% of patients should wait no longer than 9 weeks	No patient waiting longer than 18 weeks
Belfast	No	No
Northern	No	No
South Eastern	No	No
Southern	No	No
Western	No	No
Northern Ireland	No	No

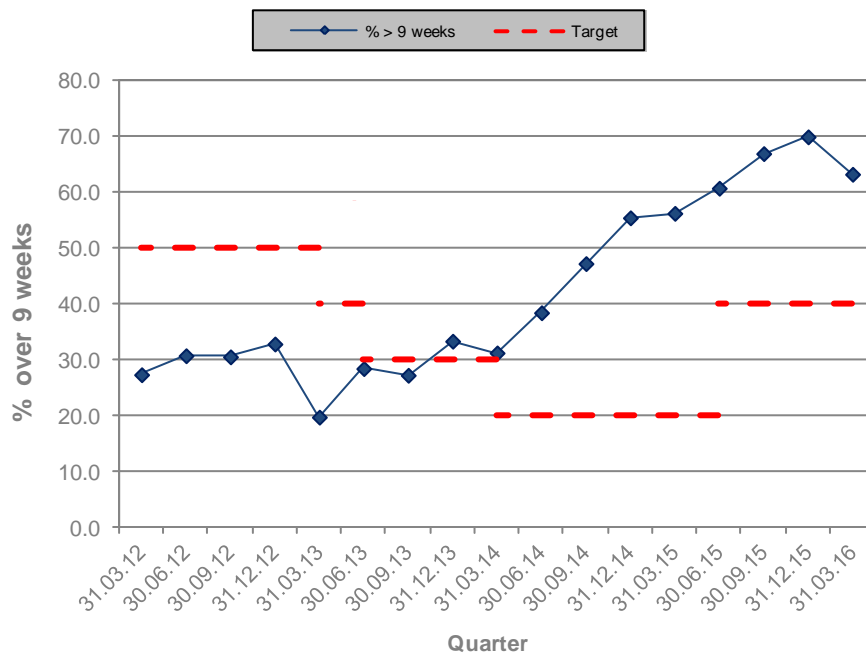
At the end of March 2016, no HSC Trust met either component of the waiting time target, nor did Northern Ireland as a whole (Figures 4, 6 & 9; Tables 3a & 3b).

Proportion of patients waiting over 9 weeks³

Achievement of the 9 week target requires less than 40% of patients to be waiting over 9 weeks for a first outpatient appointment. At the end of March 2016, 63.3% (136,032) of patients were waiting more than 9 weeks for a first outpatient appointment, compared with 70.0% (164,638) at the end of December 2015 and 56.3% (107,955) at the end of March 2015 (Figure 5 & Table 3b).

³ 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.)

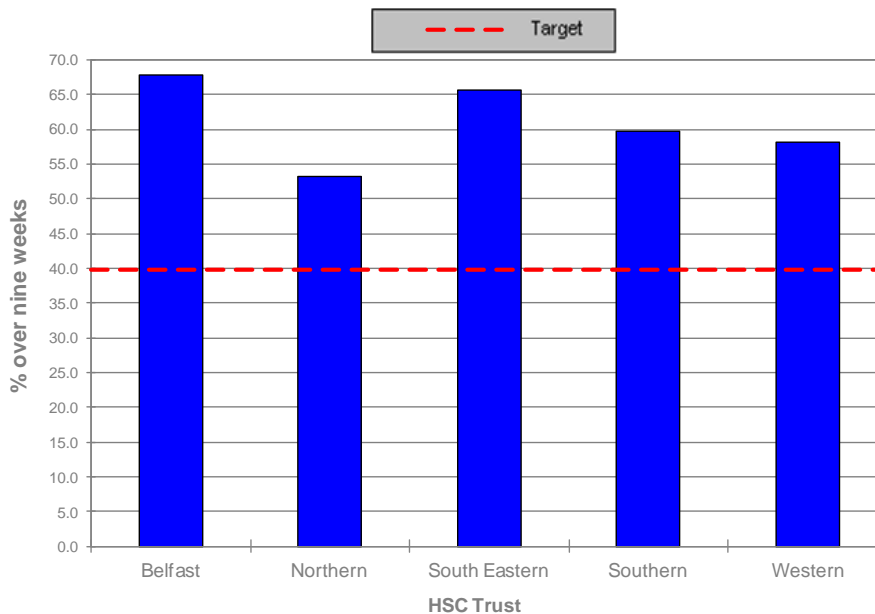
Figure 5: Proportion of patients waiting over 9 weeks: Quarterly trends 31st March 2012 – 31st March 2016



Proportion of patients waiting over 9 weeks by HSC Trust³

At 31st March 2016, over two thirds (67.9%) of patients were waiting longer than 9 weeks in the Belfast HSC Trust, 65.7% in the South Eastern HSC Trust, 59.7% in the Southern HSC Trust, 58.1% in the Western HSC Trust and 53.3% in the Northern HSC Trust (Figure 6 & Table 3b).

Figure 6: Proportion of patients waiting over 9 weeks by HSC Trust at 31st March 2016

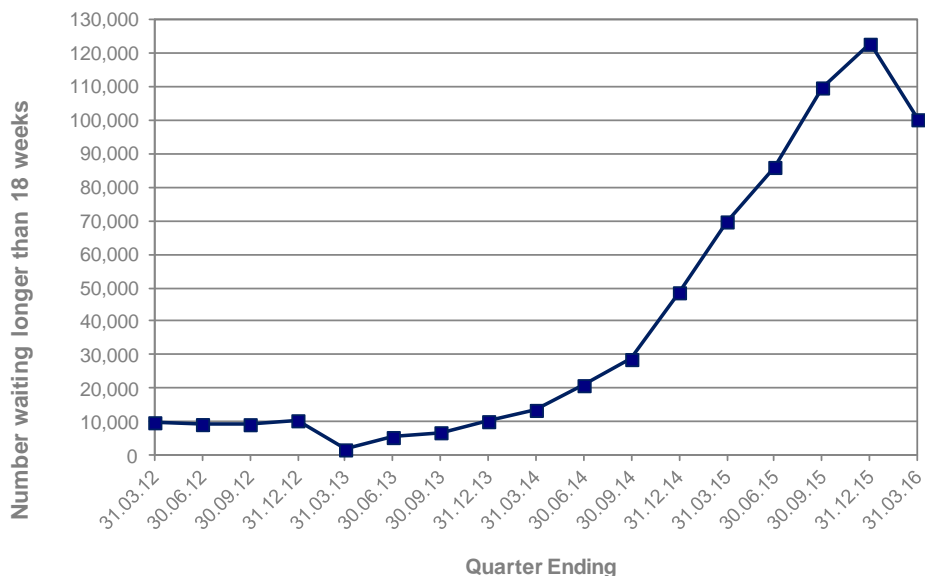


³ Refer to Explanatory Notes 1 - 7. (Specifically Explanatory 5 for information on the centralisation of Oral Surgery services and how these waiting times are reported.)

Patients waiting longer than 18 weeks³

At 31st March 2016, almost half (46.6%, 100,234) of patients were waiting longer than 18 weeks, compared to 52.2% (122,771) at the 31st December 2015, and 36.4% (69,730) at the 31st March 2015 (Figure 7 & Table 4).

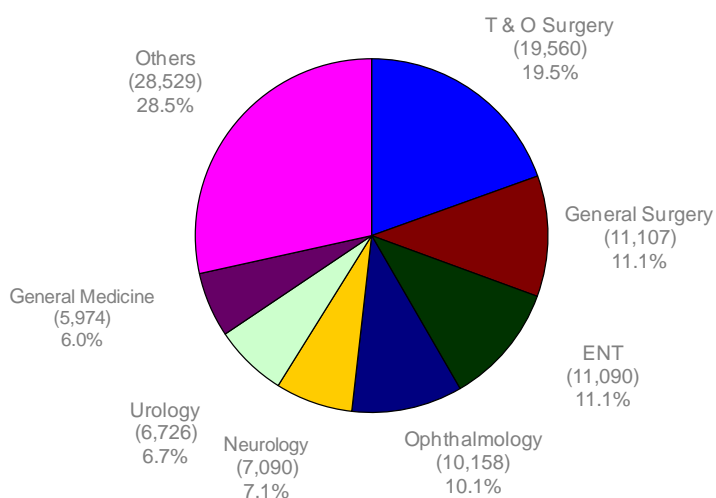
Figure 7: Number of patients waiting longer than 18 weeks: Quarterly trends 31st March 2012 – 31st March 2016



Patients waiting longer than 18 weeks by Specialty³

Almost three quarters (71.5%, 71,705) of the 100,234 patients waiting more than 18 weeks at 31st March 2016 were within seven specialties: T & O Surgery, General Surgery, ENT, Ophthalmology, Neurology, Urology and General Medicine (Figure 8 & Table 2a).

Figure 8: Patients waiting longer than 18 weeks by specialty at 31st March 2016

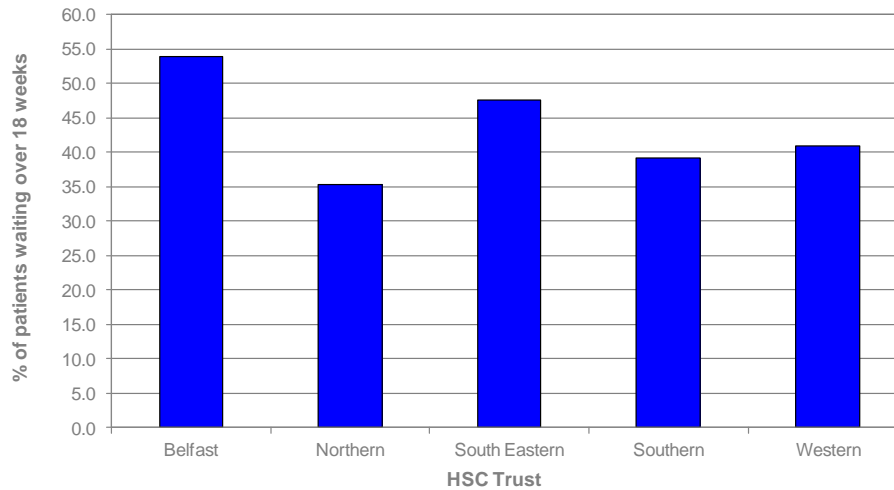


³ Refer to Explanatory Notes 1 - 7. (Specifically Explanatory 5 for information on the centralisation of Oral Surgery services and how these waiting times are reported.)

Patients waiting longer than 18 weeks by HSC Trust³

At 31st March 2016, over half (53.9%, 47,065) of patients were waiting longer than 18 weeks in the Belfast HSC Trust, 47.6% (20,330) in the South Eastern HSC Trust, 40.9% (11,106) in the Western HSC Trust, 39.1% (13,363) in the Southern HSC Trust and 35.4% (8,370) in the Northern HSC Trust (Figure 9 & Table 3b).

Figure 9: Proportion of patients waiting longer than 18 weeks by HSC Trust at 31st March 2016



³ 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

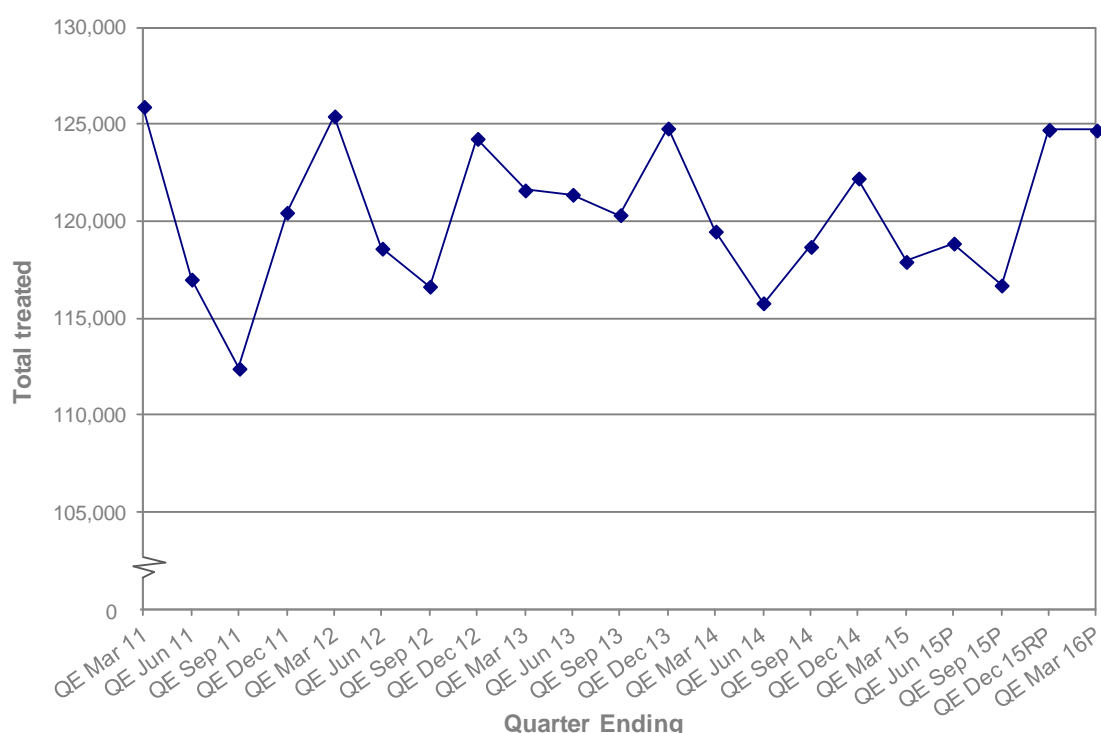
The total number of completed waits each quarter is derived as the total number of attendances at a first outpatient appointment.

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 Hospitals⁴

A total of 124,683 patients attended a first outpatient appointment in a Health Service hospital during the quarter ending March 2016, 32 less than the quarter ending December 2015 (124,715) and 5.7% (6,779) less than the quarter ending March 2015 (117,904) (Table 5).

Figure 10: Total number of completed waits in Health Service Hospitals: Quarterly trends QE March 2011 – QE March 2016^P



^PData are currently provisional

^RData have been revised

Completed waits in the Independent Sector⁵

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 2016, 21,366 Health Service patients attended a first outpatient appointment within the Independent Sector. This is a significant increase on both the quarter ending December 2015 (519), and on the same quarter in the previous year (80) (Table 5).

⁴ Refer to Explanatory Notes 1, 3 & 8 -9. (Specifically Explanatory Note 9 for information on changes to the recording of outpatient activity.)

⁵ Refer to Explanatory Notes 1, 3 & 10

The Health and Social Care Board took the 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. The use of the Independent sector recommenced in April 2015 to treat those patients whose referral had been paused. Additional IS capacity in the areas of Cardiac Surgery, Complex Spinal Surgery and Diagnosis also continued, but there was no activity commissioned outside these areas due to financial budget constraints until the final quarter of 2015/16 when additional funds became available in year through the November monitoring round.

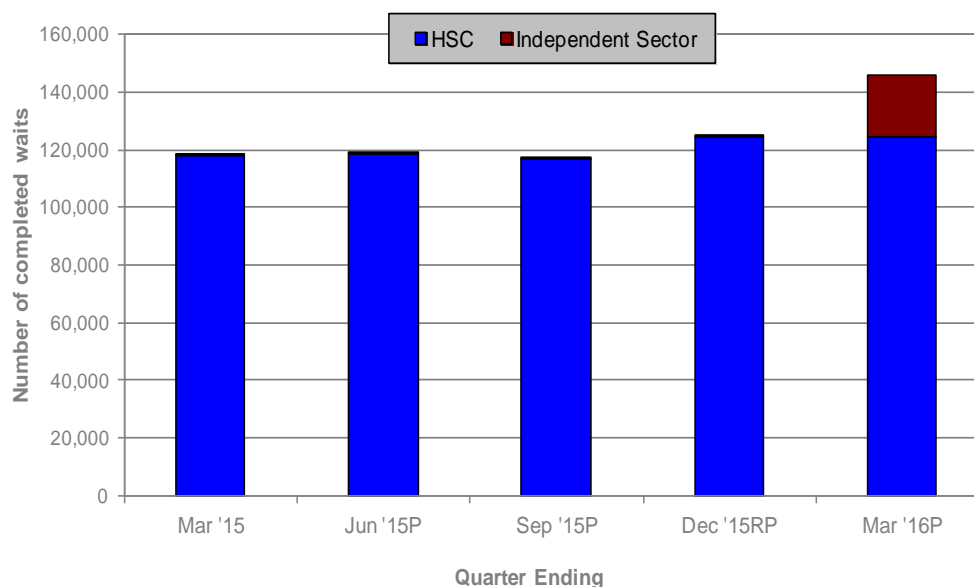
Completed waits commissioned by the Health Service⁶

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.

When the number of attendances commissioned by the Health Service, within the Independent Sector, during the quarter ending March 2016 (21,366) is combined with that for outpatients attending a first outpatient appointment in Health Service hospitals during the same period (124,683), it is estimated that approximately 146,049 outpatients attended a first appointment in Northern Ireland for an assessment commissioned by the Health Service (Tables 5 & 6). This was an increase of 16.6% (20,815) on the number seen during the quarter ending December 2015 (125,234), and 23.8% more (28,065) than during the quarter ending March 2015 (117,984) (Figure 11 & Table 5).

The overall increase of 20,815 in the number of completed waits between the quarters ending December 2015 and March 2016 was due to an increase within independent sector activity. The increase in the number of completed waits between the quarters ending March 2015 and March 2016 was also due to an increase within independent sector activity (Table 5).

Figure 11: Completed outpatient waits including Independent Sector activity: Quarterly trends QE March 2015 – QE March 2016^P



^PData are currently provisional

^RData have been revised

⁶ Refer to Explanatory Notes 1, 3, 8 -10 (Specifically Explanatory Note 9 for information on changes to the recording of outpatient activity.)

Over one third, (37.1%, 54,247) of all completed waits for the quarter ending March 2016 occurred in the Belfast HSC Trust, 19.0% (27,722) were in the South Eastern HSC Trust, 14.7% (21,496) in the Northern HSC Trust, 14.7% (21,492) in the Southern HSC Trust and 14.4% (21,092) in the Western HSC Trust (Table 6).

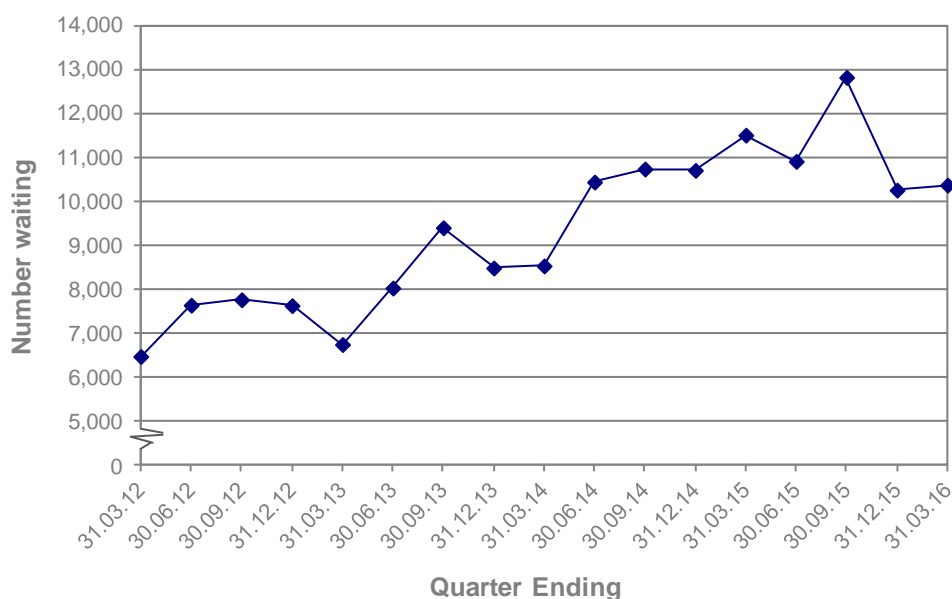
Integrated Clinical Assessment and Treatment Service (ICATS)

From 1st 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 Appointment⁷

There were 10,370 patients waiting for a first ICATS Tier 2 appointment at the end of March 2016, 1.1% (114) more than at the end of December 2015 (10,256) and 9.9%(1,136) less than at the end of March 2015 (11,506) (Figure 12 & Table 8).

Figure 12: Total number of patients waiting for a first ICATS Tier 2 appointment: Quarterly trends 31st March 2012 – 31st March 2016



Total patients waiting for a first ICATS Tier 2 appointment by HSC Trust⁷

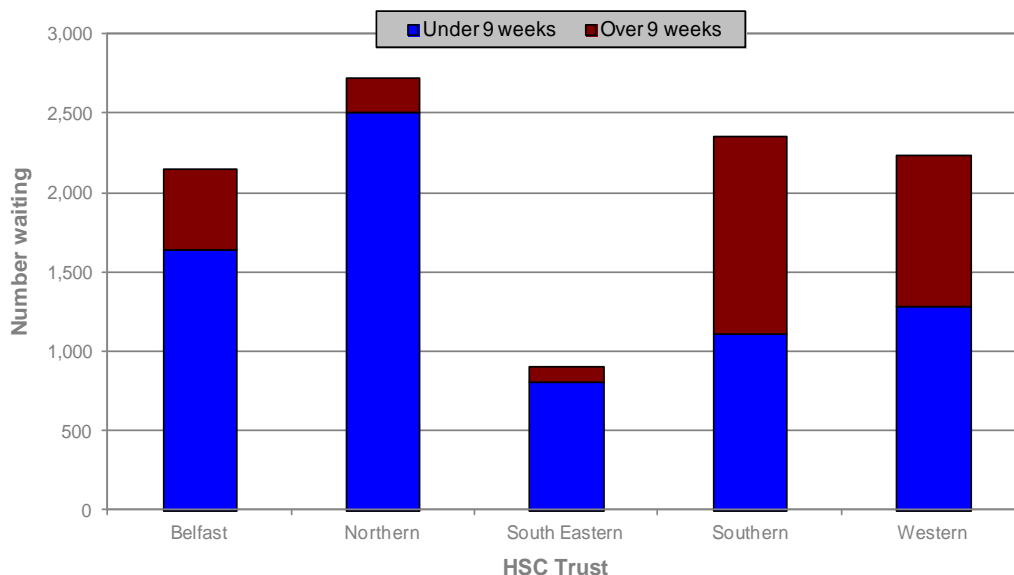
Just over a quarter (26.3%, 2,725) of those waiting for a first ICATS Tier 2 appointment were in the Northern HSC Trust, 22.7% (2,355) in the Southern HSC Trust, 21.6% (2,239) in the Western HSC Trust, 20.7% (2,151) in the Belfast HSC Trust and 8.7% (900) in the South Eastern HSC Trust (Figure 13 & Table 10).

⁷ Refer to Explanatory Notes 1, 3 & 11-13

Proportion of patients waiting over 9 weeks for a first ICATS Tier 2 appointment⁷

At the end of March 2016, 29.2% (3,025) of patients were waiting longer than 9 weeks for a first ICATS Tier 2 appointment, compared with 38.9% (3,992) waiting at the end of December 2015 and 33.1% (3,813) at the end of March 2015 (Table 10).

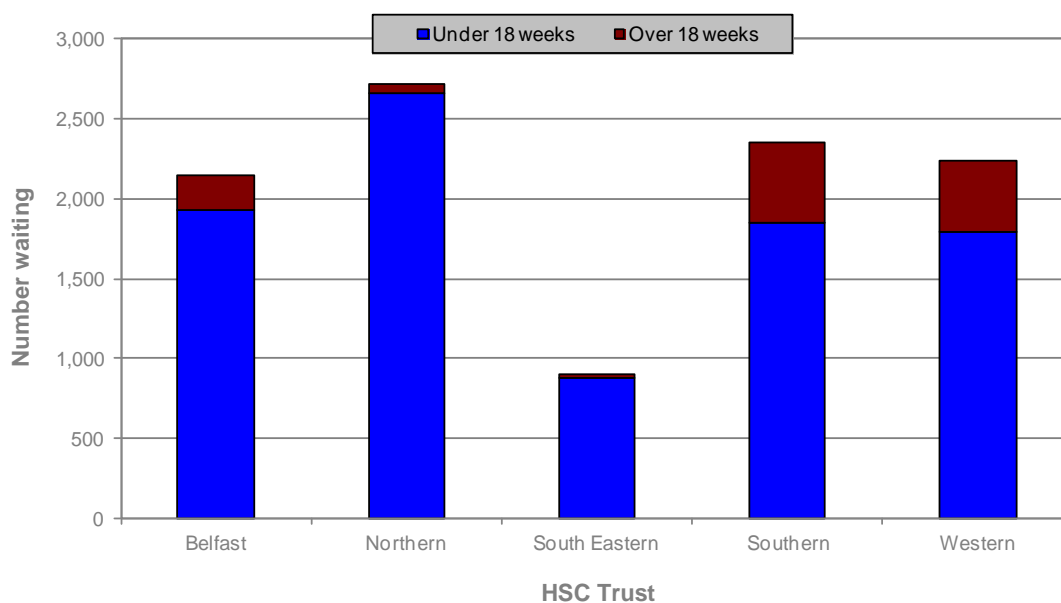
Figure 13: Proportion of patients waiting over than 9 weeks for a first ICATS Tier 2 appointment by HSC Trust at 31st March 2016



Patients waiting longer than 18 weeks for a first ICATS Tier 2 Appointment⁷

At the end of March 2016, there was 11.1%, (1,232) of patients waiting longer than 18 weeks for a first ICATS Tier 2 appointment, compared to 15.3% (1,572) at the end of December 2015, and 13.8% (1,593) at the end of March 2015 (Table 10).

Figure 14: Proportion of patients waiting longer than 18 weeks for a first ICATS Tier 2 appointment by HSC Trust at 31st March 2016



⁷ Refer to Explanatory Notes 1, 3 & 11-13

Consultant led Outpatient Services

Table 1: Quarterly outpatient waiting lists – 31st March 2016¹

	Quarter Ending March 2016	Change compared with end of previous quarter	Change compared with end same quarter - previous year
Total Waiting	214,953	-20,412	+23,176

Source: Departmental Return CH3

¹Refer to Explanatory Notes 1 – 4

Table 2a: Number of patients waiting for a first outpatient appointment by weeks waiting and specialty – 31st March 2016³

Specialty	Patients Waiting for an Appointment by Weeks Waiting						Total Waiting
	0-6	>6-9	>9-12	>12-15	>15-18	>18	
T & O Surgery	4,751	1,570	1,327	629	1,105	19,560	28,942
General Surgery	7,682	2,563	2,090	1,354	1,797	11,107	26,593
ENT	6,479	2,699	2,283	1,284	1,842	11,090	25,677
Ophthalmology	4,477	1,638	1,181	688	1,042	10,158	19,184
Gynaecology	5,030	1,921	1,392	778	1,062	4,884	15,067
General Medicine	2,692	926	719	385	517	5,974	11,213
Neurology	1,646	717	598	331	468	7,090	10,850
Urology	1,860	733	542	324	366	6,726	10,551
Dermatology	4,178	1,068	644	307	377	1,776	8,350
Paediatrics	3,191	1,192	693	290	341	2,397	8,104
Cardiology	3,083	939	736	397	441	2,185	7,781
Rheumatology	1,613	602	483	258	370	4,388	7,714
Gastroenterology	1,711	598	497	289	411	3,388	6,894
Oral Surgery	1,441	605	396	216	321	2,715	5,694
Thoracic Medicine	1,477	590	430	293	288	2,046	5,124
Pain Management	1,228	550	455	254	377	1,541	4,405
Plastic Surgery	716	293	242	115	148	765	2,279
Restorative Dentistry	401	129	149	51	95	877	1,702
Endocrinology	504	203	103	71	76	618	1,575
Geriatric Medicine	916	161	93	60	53	262	1,545
Other	3,195	953	480	204	190	687	5,709
All Specialties	58,271	20,650	15,533	8,578	11,687	100,234	214,953

Source: Departmental Return CH3

³Refer 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 – 31st March 2016³

Specialty	% Patients Waiting for an Appointment by Weeks Waiting					
	0-6	>6-9	>9-12	>12-15	>15-18	>18
T & O Surgery	16.4%	5.4%	4.6%	2.2%	3.8%	67.6%
General Surgery	28.9%	9.6%	7.9%	5.1%	6.8%	41.8%
ENT	25.2%	10.5%	8.9%	5.0%	7.2%	43.2%
Ophthalmology	23.3%	8.5%	6.2%	3.6%	5.4%	53.0%
Gynaecology	33.4%	12.7%	9.2%	5.2%	7.0%	32.4%
General Medicine	24.0%	8.3%	6.4%	3.4%	4.6%	53.3%
Neurology	15.2%	6.6%	5.5%	3.1%	4.3%	65.3%
Urology	17.6%	6.9%	5.1%	3.1%	3.5%	63.7%
Dermatology	50.0%	12.8%	7.7%	3.7%	4.5%	21.3%
Paediatrics	39.4%	14.7%	8.6%	3.6%	4.2%	29.6%
Cardiology	39.6%	12.1%	9.5%	5.1%	5.7%	28.1%
Rheumatology	20.9%	7.8%	6.3%	3.3%	4.8%	56.9%
Gastroenterology	24.8%	8.7%	7.2%	4.2%	6.0%	49.1%
Oral Surgery	25.3%	10.6%	7.0%	3.8%	5.6%	47.7%
Thoracic Medicine	28.8%	11.5%	8.4%	5.7%	5.6%	39.9%
Pain Management	27.9%	12.5%	10.3%	5.8%	8.6%	35.0%
Plastic Surgery	31.4%	12.9%	10.6%	5.0%	6.5%	33.6%
Restorative Dentistry	23.6%	7.6%	8.8%	3.0%	5.6%	51.5%
Endocrinology	32.0%	12.9%	6.5%	4.5%	4.8%	39.2%
Geriatric Medicine	59.3%	10.4%	6.0%	3.9%	3.4%	17.0%
Other	56.0%	16.7%	8.4%	3.6%	3.3%	12.0%
All Specialties	27.1%	9.6%	7.2%	4.0%	5.4%	46.6%

Source: Departmental Return CH3

³Refer 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 – 31st March 2016³

Provider Trust	Patients Waiting for an Appointment by Weeks Waiting						Total Waiting
	0-6	>6-9	>9-12	>12-15	>15-18	>18	
Belfast	20,819	7,231	5,438	2,808	3,923	47,065	87,284
Northern	8,192	2,864	1,921	960	1,358	8,370	23,665
South Eastern	10,651	3,999	3,267	1,879	2,546	20,330	42,672
Southern	10,034	3,743	2,851	1,820	2,374	13,363	34,185
Western	8,575	2,813	2,056	1,111	1,486	11,106	27,147
Total	58,271	20,650	15,533	8,578	11,687	100,234	214,953

Source: Departmental Return CH3

³Refer 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 – 31st March 2016³

Provider Trust	Patients Waiting for an Appointment by Weeks Waiting					
	0-6	>6-9	>9-12	>12-15	>15-18	>18
Belfast	23.9%	8.3%	6.2%	3.2%	4.5%	53.9%
Northern	34.6%	12.1%	8.1%	4.1%	5.7%	35.4%
South Eastern	25.0%	9.4%	7.7%	4.4%	6.0%	47.6%
Southern	29.4%	10.9%	8.3%	5.3%	6.9%	39.1%
Western	31.6%	10.4%	7.6%	4.1%	5.5%	40.9%
Total	27.1%	9.6%	7.2%	4.0%	5.4%	46.6%

Source: Departmental Return CH3

³Refer 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 18 weeks for a first outpatient appointment – 31st March 2016³

	Quarter Ending March 2016	Change compared with end of previous quarter	Change compared with end same quarter - previous year
Total waiting over 18 weeks	100,234	+6,552	+59,593

Source: Departmental Return CH3

³Refer 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 2016⁶

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
A - M 2011/12	475,235	28,730	503,965
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
A - M 2012/13	481,059	50,737	531,796
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
A - M 2013/14	485,939	47,118	533,057
A - J 2014	115,770	9,696	125,466
J - S 2014	118,679	9,106	127,785
O - D 2014	122,208	366	122,574
J - M 2015	117,904	80	117,984
A - M 2014/15	474,561	19,248	493,809
A - J 2015 ^P	118,851	251	119,102
J - S 2015 ^P	116,687	248	116,935
O - D 2015 ^{RP}	124,715	519	125,234
J - M 2016 ^P	124,683	21,366	146,049
A - M 2015/16^P	484,936	22,384	507,320

Source: Departmental Return QOAR and IS1 Part 1.

^RData have been revised ^PData are currently provisional * Not National Statistics

⁶Refer to Explanatory Notes 1,3 & 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 2016⁶

Provider Trust	Number of Completed Outpatient Waits within Health Service Hospitals ^P	Number of Completed Outpatient Waits in Independent Sector ^{P*}	Total Number of Completed Outpatient Waits Commissioned by Health Service ^P
Belfast	45,916	8,331	54,247
Northern	16,173	5,323	21,496
South Eastern	21,459	6,263	27,722
Southern	21,168	324	21,492
Western	19,967	1,125	21,092
Total Treated	124,683	21,366	146,049

Source: Departmental Returns QOAR and IS1 Part 1

^P Data are currently provisional * Not National Statistics

⁶Refer to Explanatory Notes 1,3 & 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 2015 – QE March 2016⁶

Provider Trust	Total Number of Completed Outpatient Waits Commissioned by Health Service				
	QE March 2015	QE June 2015 ^P	QE September 2015 ^P	QE December 2015 ^{RP}	QE March 2016 ^P
Belfast	44,496	44,186	43,589	45,155	54,247
Northern	14,706	15,161	14,996	16,449	21,496
South Eastern	19,890	19,149	18,062	20,084	27,722
Southern	19,891	20,697	20,752	22,577	21,492
Western	19,001	19,909	19,536	20,698	21,092
Total	117,984	119,102	116,935	124,963	146,049

Source: Departmental Returns QOAR and IS1 Part 1

^R Data have been revised

^P Data are currently provisional

⁶Refer to Explanatory Notes 1,3 & 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 – 31st March 2016⁷

	Quarter Ending March 2016	Change compared with end of previous quarter	Change compared with end same quarter - previous year
Total Waiting	10,370	+114	-1,136

Source: ICATS Waiting Times Dataset

⁷Refer to Explanatory Notes 1, 3 & 11 – 13

Table 9: Number of patients waiting for a first ICATS Tier 2 appointment by weeks waiting and specialty – 31st March 2016⁷

Specialty	Patients Waiting for an Appointment by Weeks Waiting						Total Waiting
	0-6	>6-9	>9-12	>12-15	>15-18	>18	
Urology	32	10	0	0	0	5	47
Trauma & Orthopaedics	3,455	1,273	651	353	324	887	6,943
Ear, Nose & Throat	428	189	87	25	14	37	780
Ophthalmology	867	253	135	37	63	246	1,601
Cardiology	62	22	19	12	18	23	156
Dermatology	632	122	35	7	13	34	843
All Specialties	5,476	1,869	927	434	432	1,232	10,370

Source: ICATS Waiting Times Dataset

⁷Refer to Explanatory Notes 1, 3 & 11 – 13

Table 10: Number of patients waiting for a first ICATS Tier 2 appointment by HSC Trust and weeks waiting – 31st March 2016⁷

Provider Trust	Patients Waiting for an Appointment by Weeks Waiting						Total Waiting
	0-6	>6-9	>9-12	>12-15	>15-18	>18	
Belfast	1,025	612	236	42	21	215	2,151
Northern	2,015	495	101	34	20	60	2,725
South Eastern	719	87	51	12	12	19	900
Southern	767	337	276	230	245	500	2,355
Western	950	338	263	116	134	438	2,239
Total	5,476	1,869	927	434	432	1,232	10,370

Source: ICATS Waiting Times Dataset

⁷Refer to Explanatory Notes 1, 3 & 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 <https://www.dhsspsni.gov.uk/publications/northern-ireland-waiting-time-statistics-outpatient-diagnostic-and-inpatient-waiting>
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 1st 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 <https://www.dhsspsni.gov.uk/articles/outpatient-waiting-times>
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 2015, at least 60% of patients should wait no longer than nine weeks for a first outpatient appointment, and no patient waiting longer than 18 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. 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 1st 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 1st April 2010 included services in the Urology, ENT, Ophthalmology, Cardiology and Dermatology specialties. ICATS in the Trauma and Orthopaedic specialty were introduced on 1st 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, 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 30th June 2016 will be released on Thursday 25th August 2016.

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 12 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.

Data quality assessment

Data are derived largely from a single administrative system. 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 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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