

INFORMATION  
ANALYSIS  
DIRECTORATE



# Northern Ireland Waiting Time Statistics: Diagnostic Waiting Times Quarter Ending March 2017



Department of  
**Health**

An Roinn Sláinte

Mánnystrie O Poustie

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# Reader Information

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**Purpose:** This statistical release presents information on waiting times and reporting times for diagnostic services in Northern Ireland and reports on the performance of the Health and Social Care (HSC) Trusts against the 2016/17 Ministerial waiting time target and the 2016/17 Ministerial diagnostic reporting turnaround target:

*“By March 2017, 75% of patients should wait no longer than 9 weeks for a diagnostic test, with no patient waiting longer than 26 weeks”.*

*“From April 2016, all urgent diagnostic tests should be reported on within two days of the test being undertaken”.*

This statistical release details information on waiting times and reporting times for diagnostic services in HSC Trusts at 31<sup>st</sup> March 2017. Data are presented by HSC Trust, diagnostic category, diagnostic test, and time band. Further information on routine diagnostic reporting times are available in the accompanying CSV file.

**Statistical Quality:** The *‘Diagnostic Waiting Times Publication – Supporting Documentation’* booklet details the technical guidance, definitions, as well as notes on how to use the data contained within this statistical release. This booklet is available to view or download from the following link:

<https://www.health-ni.gov.uk/publications/northern-ireland-waiting-time-statistics-diagnostic-waiting-times-march-2017>

**Internet:** <https://www.health-ni.gov.uk/articles/diagnostic-waiting-times>

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**Target audience:** Department of Health (DoH), Chief Executives of the HSC Board and Trusts in Northern Ireland, health care professionals, academics, and Health & Social Care stakeholders, the media and general public.

**Price:** Free

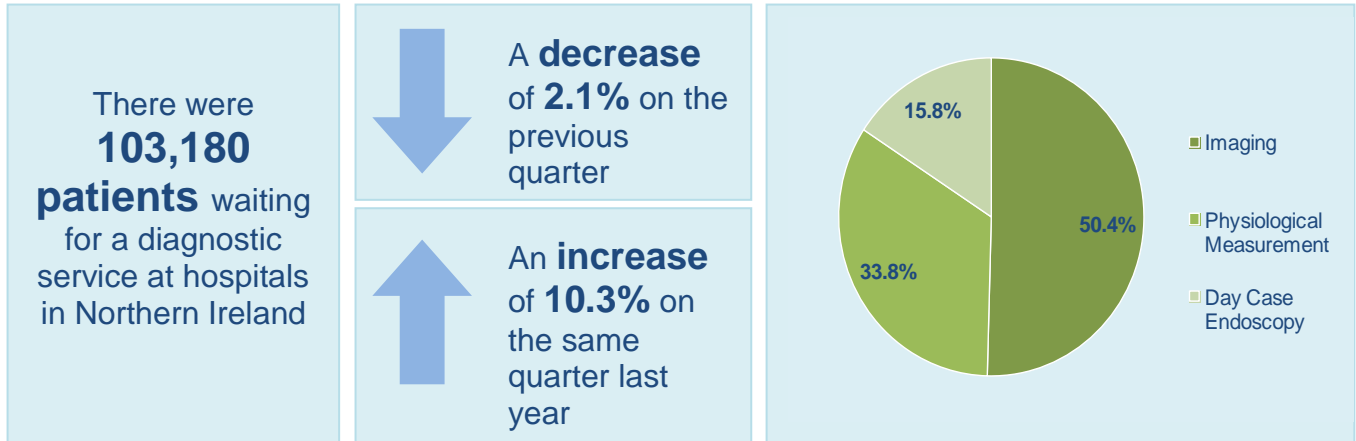
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By March 2017, 75% of patients should wait no longer than 9 weeks for a diagnostic test, with no patient waiting longer than 26 weeks.

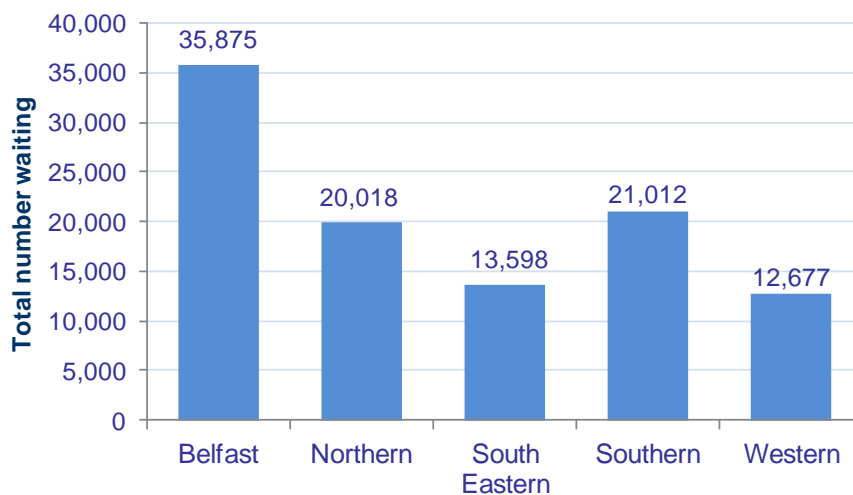
## Total number of patients waiting at 31<sup>st</sup> March 2017



Source: SDR1 Part 1&2

At 31<sup>st</sup> March 2017, a total of 103,180 patients were waiting for a diagnostic test, 2.1% (2,180) less than at 31<sup>st</sup> December 2016 (105,360), and 10.3% (9,649) more than at 31<sup>st</sup> March 2016 (93,531) (Table 1).

A number of diagnostic services may not be provided at all of the five HSC Trusts in Northern Ireland. In this situation, patients from one HSC Trust area will be waiting to be seen at a service provided at another HSC Trust. Data users should be cautious in how they use these data (see explanatory note 10).



Just over a third (34.8%) were waiting for diagnostic tests in the Belfast HSC Trust, with a further 20.4% in the Southern HSC Trust, 19.4% in the Northern HSC Trust, 13.2% in the South Eastern HSC Trust and 12.3% in the Western HSC Trust (Table 2).

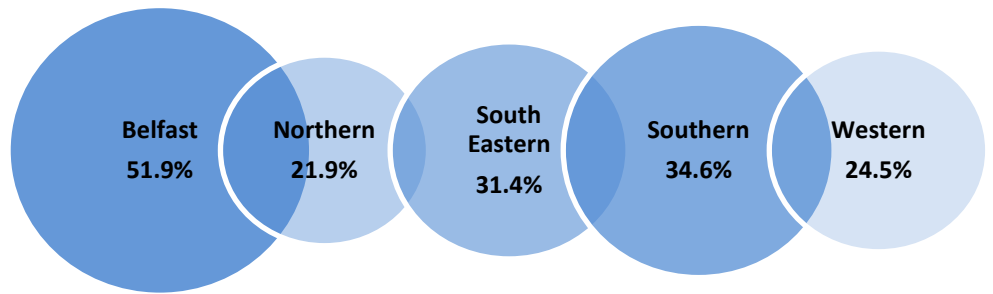
Source: SDR1 Part 1&2

Just over two-thirds (66.7%, 68,834) of the 103,180 patients were waiting for a diagnostic test within one of the following seven diagnostic services: Non-obstetric Ultrasound; Magnetic Resonance Imaging; Echocardiography; Computerised Tomography; Gastroscopy; Peripheral Neurophysiology and Ambulatory ECG monitoring. (Table 3).

## Patients waiting more than 9 weeks at 31<sup>st</sup> March 2017

This element was **not achieved** by Northern Ireland as a whole

**36.5%**  
of patients  
were waiting longer  
than 9 weeks



### Patients waiting over 9 weeks

Source: SRD1 Part 1&2

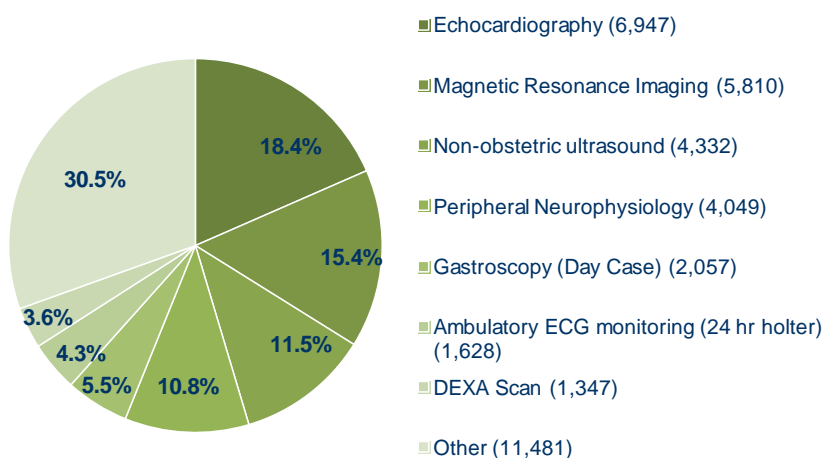
Achievement of the 9 week target requires that less than 25% of patients should be waiting over 9 weeks for a diagnostic test.

At 31<sup>st</sup> March 2017, 36.5% (37,661) of patients were waiting more than 9 weeks for a diagnostic test, compared with 43.7% (46,000) at 31<sup>st</sup> December 2016 and 31.1% (29,088) at 31<sup>st</sup> March 2016 (Table 1).

At 31<sup>st</sup> March 2017, the 9 week element of the target was not achieved by Northern Ireland as a whole but was achieved by both the Northern and Western HSC Trusts (Table 2). Data users should be aware that many diagnostic services are not provided at every HSC Trust (see explanatory note 10).

Over half (51.9%, 18,636) of patients were waiting longer than 9 weeks in Belfast HSC Trust at 31<sup>st</sup> March 2017, 34.6% (7,265) in the Southern HSC Trust, 31.4% (4,266) in the South Eastern HSC Trust, 24.5% (3,112) in the Western HSC Trust and 21.9% (4,382) in the Northern HSC Trust (Table 2).

### Patients waiting over 9 weeks by diagnostic service



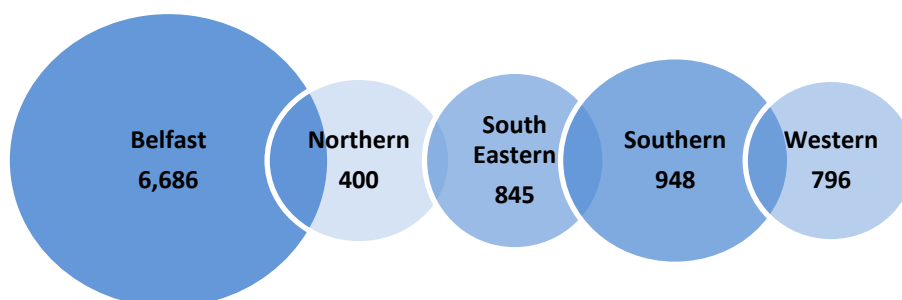
Over two-thirds (69.5%, 26,180) of the 37,661 patients waiting more than 9 weeks were waiting for one of the following diagnostic tests: Echocardiography; Magnetic Resonance Imaging; Non-Obstetric Ultrasound; Peripheral Neurophysiology; Gastroscopy, Ambulatory ECG Monitoring and Dexa Scans (Table 3).

Source: SDR1 Part1&2

## Patients waiting more than 26 weeks at 31<sup>st</sup> March 2017

This element was **not achieved** by Northern Ireland as a whole

**9,675**  
patients  
were waiting longer  
than 26 weeks

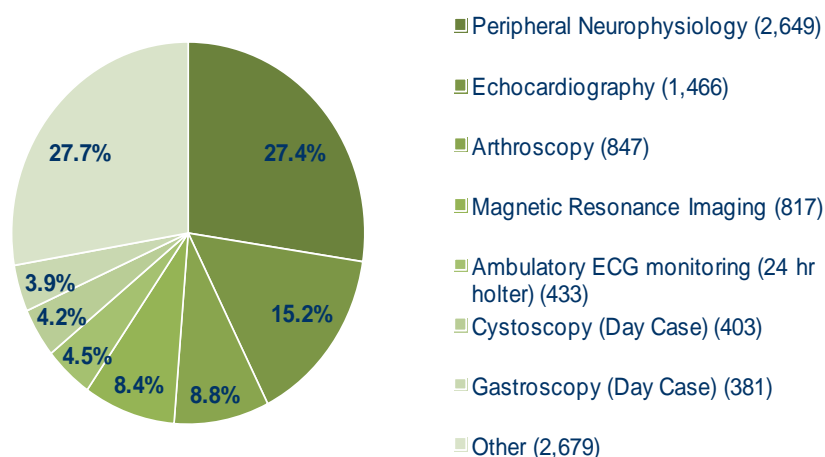


At 31<sup>st</sup> March 2017, 9.4% (9,675) of patients were waiting more than 26 weeks for a diagnostic test compared with 10.5% (11,012) at 31<sup>st</sup> December 2016 and 6.7% (6,307) at 31<sup>st</sup> March 2016 (Table 1).

At 31<sup>st</sup> March 2017, the 26 week element of the target was not achieved by Northern Ireland as a whole or by any individual HSC Trust (Table 2). Data users should be aware that many diagnostic services are not provided at every HSC Trust (see explanatory note 10).

Just under one in five (18.6%, 6,686) patients in the Belfast HSC Trust were waiting longer than 26 weeks at 31<sup>st</sup> March 2017, 6.3% (796) in the Western HSC Trust, 6.2% (845) in the South Eastern HSC Trust, 4.5% (948) in the Southern HSC Trust and 2.0% (400) in the Northern HSC Trust (Table 2).

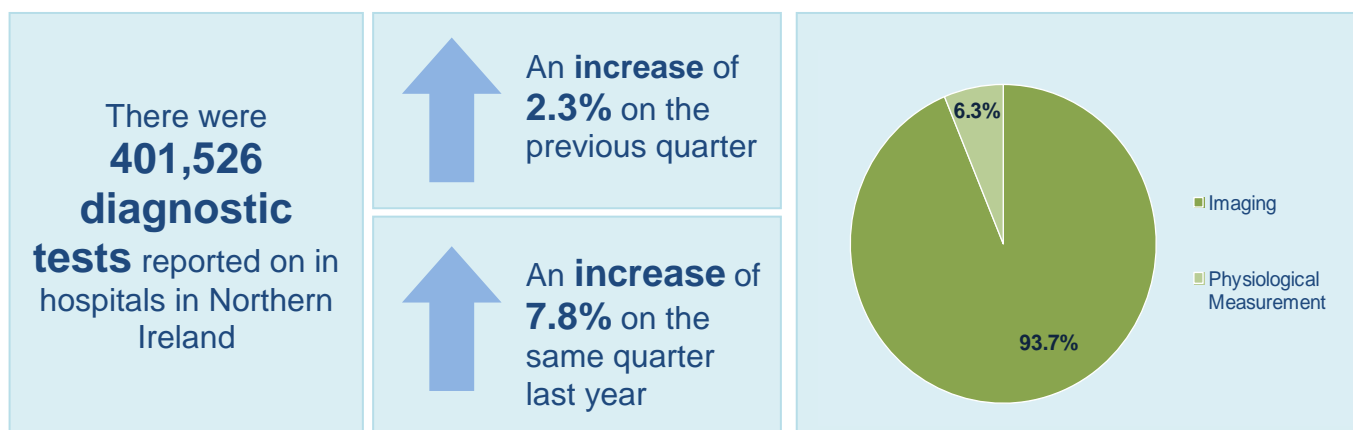
### Patients waiting over 26 weeks by diagnostic service



Almost three quarters (72.3%, 6,996) of the 9,675 patients waiting more than 26 weeks were waiting for one of the following diagnostic tests: Peripheral Neurophysiology; Echocardiography; Arthroscopy; Magnetic Resonance Imaging; Ambulatory ECG monitoring; Cystoscopy and Gastroscopy (Table 3).

Source: SDR1 Part1&2

## Total number of diagnostic tests reported on during quarter ending March 2017

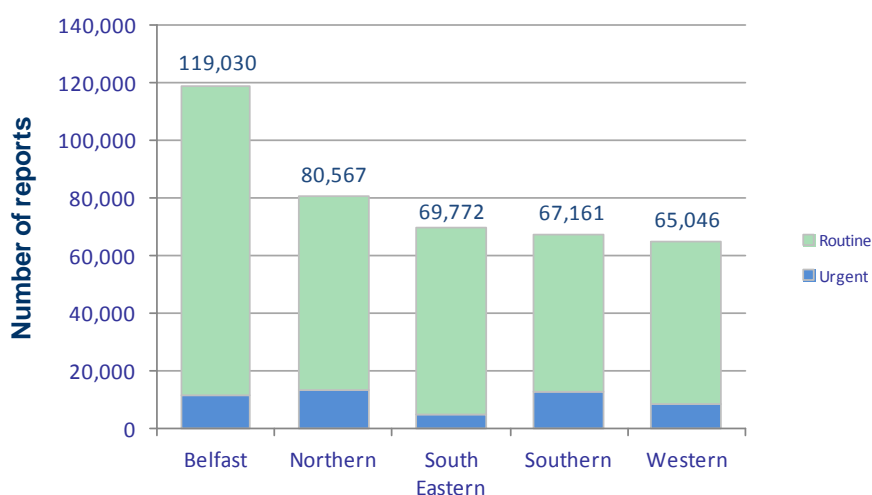


Source: DRTT Return

A total of 401,526 diagnostic tests<sup>1</sup> were reported on and dispatched to the referring clinician at hospitals in Northern Ireland during the quarter ending March 2017, 2.3% (8,898) more than the quarter ending December 2016 (392,628), and 7.8% (29,124) more than the quarter ending March 2016 (372,402) (Table 4).

Of the 401,526 reported diagnostic tests, 93.7% (376,221) were reporting on an Imaging test and 6.3% (25,305) were reporting on a Physiological Measurement test<sup>2</sup> (Table 4).

Just over one tenth (12.5%, 50,293) of the diagnostic tests reported on during quarter ending March 2017 were urgent diagnostic tests, with the remaining 87.5% (351,233) being routine diagnostic tests<sup>3</sup> (Table 4).



Over one quarter (29.6%) of diagnostic tests were reported and dispatched in the Belfast HSC Trust<sup>1</sup>, with a further 20.1% in the Northern HSC Trust, 17.4% in the South Eastern HSC Trust, 16.7% in the Southern HSC Trust and 16.2% in the Western HSC Trust.

Source: DRTT Return

<sup>1</sup> Due to mapping issues following the installation of a new information system within the Royal Victoria hospital in Belfast HSC Trust, it is not currently possible to report on the total number of urgent Computerised Tomography diagnostic reporting turnaround times.

<sup>2</sup> Diagnostic reporting turnaround times relate only to a selected subset of Imaging and Physiological Measurement tests. Day case endoscopies are reported on the day of the test and as such are not included.

<sup>3</sup> Reporting times of routine diagnostic tests are available in the accompanying CSV file.

From April 2016, all urgent diagnostic tests should be reported on within 2 days of the test being undertaken.

## Urgent diagnostic tests reported on within 2 days during quarter ending March 2017

This element was **not achieved** by Northern Ireland as a whole

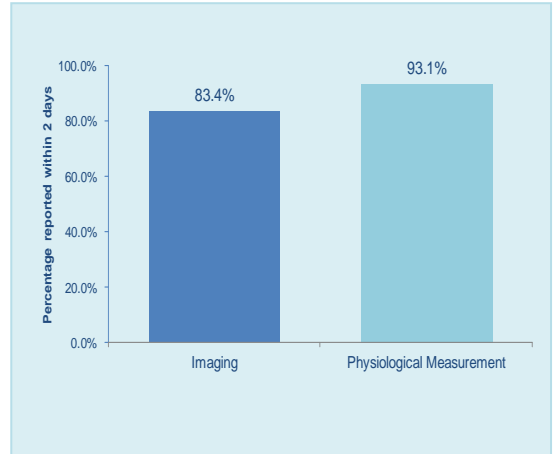


A decrease of **1.6 percentage points** on the previous quarter

**84.4%** of urgent diagnostic tests reported on within 2 days



A decrease of **3.5 percentage points** on the same quarter last year

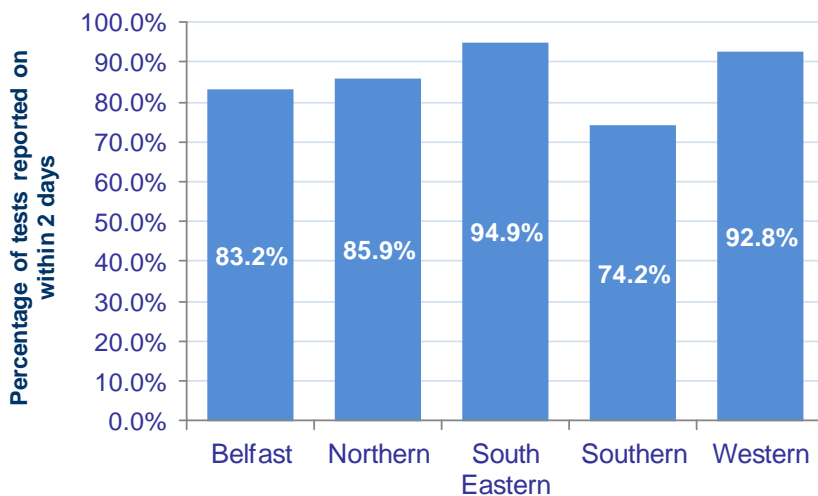


Source: DRTT Return

Achievement of the diagnostic reporting turnaround time target requires that all urgent diagnostic tests should be reported and dispatched within 2 days.

Of the 50,293 urgent diagnostic tests reported on during quarter ending March 2017, 84.4% (42,429) were reported on within 2 days, compared with 86.0% (41,788) during the quarter ending December 2016 and 87.9% (40,435) during the quarter ending March 2016 (Table 5).

Of the 50,293 urgent diagnostic tests reported on during the quarter ending March 2017, 45,397 were imaging reports and 4,896 were physiological measurement reports. A total of 83.4% urgent imaging tests were reported on within 2 days compared with 93.1% of urgent physiological measurement tests (Table 6).



Source: DRTT Return

During quarter ending March 2017, the 2 day target was not achieved by any HSC Trust, although the South Eastern Trust reported on 94.9% of urgent diagnostic tests (Table 7).



## Appendix 1: Tables

**Table 1: Number of patients waiting for a diagnostic service by diagnostic category – 31<sup>st</sup> March 2017<sup>1</sup>**

Diagnostic Category		Current Quarter (31 <sup>st</sup> March 2017)	Previous Quarter (31 <sup>st</sup> December 2016)	Same Quarter Last Year (31 <sup>st</sup> March 2016)
<b>Imaging</b>	Total Patients Waiting	52,024	53,863	45,971
	Number waiting over 9 weeks	12,912	18,410	7,859
	<i>Percentage waiting over 9 weeks</i>	24.8%	34.2%	17.1%
	Number waiting over 26 weeks	1,643	2,545	588
<b>Physiological Measurement</b>	Total Patients Waiting	34,886	34,475	28,175
	Number waiting over 9 weeks	17,270	18,963	11,779
	<i>Percentage waiting over 9 weeks</i>	49.5%	55.0%	41.8%
	Number waiting over 26 weeks	5,423	5,128	2,372
<b>Endoscopy</b>	Total Patients Waiting	16,270	17,022	19,385
	Number waiting over 9 weeks	7,479	8,627	9,450
	<i>Percentage waiting over 9 weeks</i>	46.0%	50.7%	48.7%
	Number waiting over 26 weeks	2,609	3,339	3,347
<b>Total</b>	Total Patients Waiting	103,180	105,360	93,531
	Number waiting over 9 weeks	37,661	46,000	29,088
	<i>Percentage waiting over 9 weeks</i>	36.5%	43.7%	31.1%
	Number waiting over 26 weeks	9,675	11,012	6,307

Source: SDR1 Part 1 & 2 Returns

<sup>1</sup>Refer to Explanatory Notes 1–16 & 23-26

**Table 2: Number of patients waiting for a diagnostic service, by HSC Trust – 31<sup>st</sup> March 2017<sup>1</sup>**

HSC Trust	Patients Waiting for Diagnostic Service by Weeks Waiting						Total Waiting
	0 - 6	>6 - 9	>9 - 13	>13 - 21	>21-26	>26	
Belfast	12,993	4,246	4,122	4,914	2,914	6,686	35,875
Northern	12,833	2,803	1,835	1,833	314	400	20,018
South Eastern	7,493	1,839	1,478	1,439	504	845	13,598
Southern	10,420	3,327	2,544	2,664	1,109	948	21,012
Western	7,911	1,654	892	1,111	313	796	12,677
<b>Total</b>	<b>51,650</b>	<b>13,869</b>	<b>10,871</b>	<b>11,961</b>	<b>5,154</b>	<b>9,675</b>	<b>103,180</b>

Source: SDR1 Part 1 & 2 Returns

<sup>1</sup>Refer to Explanatory Notes 1–16 & 23-26

**Table 3: Number of patients waiting for a diagnostic service by type of service and weeks waiting – 31<sup>st</sup> March 2017<sup>1</sup>**

Diagnostic Test	Patients Waiting for Diagnostic Service by Weeks Waiting						Total Waiting
	0 - 6	>6 - 9	>9 - 13	>13 - 21	>21-26	>26	
Non-obstetric ultrasound	13,148	3,664	2,608	1,494	138	92	21,144
Magnetic Resonance Imaging	6,329	2,361	1,964	2,165	864	817	14,500
Cardiology - echocardiography	3,912	1,464	1,432	2,615	1,434	1,466	12,323
Computerised Tomography	4,771	754	273	309	107	377	6,591
Gastroscopy (Day Case)	2,422	671	718	750	218	381	5,160
Neurophysiology - peripheral neurophysiology	586	305	292	671	437	2,649	4,940
Ambulatory ECG monitoring (24 hr holter)	1,957	591	512	484	199	433	4,176
DEXA Scan	1,885	569	254	465	337	291	3,801
Plain Film Xrays	3,632	89	10	0	0	0	3,731
Audiology - pure tone audiometry	1,693	561	477	462	143	135	3,471
Colonoscopy (Day Case)	1,752	517	441	445	135	178	3,468
Cystoscopy (Day Case)	1,125	217	185	158	81	403	2,169
Flexi sigmoidoscopy (Day Case)	764	268	254	222	71	103	1,682
Respiratory physiology - sleep studies	690	181	154	253	199	198	1,675
Arthroscopy	92	74	115	209	145	847	1,482
Cardiology - perfusion studies	331	136	181	208	273	215	1,344
Exercise tolerance testing	827	118	50	62	29	8	1,094
Fluroscopy	770	163	87	45	12	6	1,083
Hysteroscopy	373	100	105	141	63	195	977
Other	4,591	1,066	759	803	269	881	8,369
<b>All diagnostic tests</b>	<b>51,650</b>	<b>13,869</b>	<b>10,871</b>	<b>11,961</b>	<b>5,154</b>	<b>9,675</b>	<b>103,180</b>

Source: SDR1 Part 1 & 2 Returns

<sup>1</sup>Refer to Explanatory Notes 1–16 & 23-26

**Table 4: Number of diagnostic tests reported and dispatched by priority of report – QE March 2017<sup>2</sup>**

Priority of Report	Diagnostic Category	QE March	QE	QE March
		2017	December 2016	2016
<b>Urgent</b>	Imaging	45,397	43,816	42,040
	Physiological Measurement	4,896	4,777	3,986
<b>Routine</b>	Imaging	330,824	325,848	306,562
	Physiological Measurement	20,409	18,187	19,814
<b>Total</b>	Imaging	376,221	369,664	348,602
	Physiological Measurement	25,305	22,964	23,800

Source: DRTT Return

<sup>2</sup>Refer to Explanatory Notes 1-2, 4-5 & 17–26

**Table 5: Number of urgent diagnostic tests reported and dispatched – QE March 2017<sup>2</sup>**

Urgent Diagnostic Tests	QE March 2017	QE December 2016	QE March 2016
Total reported	50,293	48,593	46,026
Number reported within 2 days	42,429	41,788	40,435
<i>% reported on within 2 days</i>	<i>84.4%</i>	<i>86.0%</i>	<i>87.9%</i>

Source: DRTT Return

<sup>2</sup>Refer to Explanatory Notes 1-2, 4-5 & 17–26

**Table 6: Number of urgent diagnostic tests reported and dispatched by diagnostic category and time in days– QE March 2017<sup>2</sup>**

Diagnostic Category	Length of time reporting in days				Total Reported
	0 - 2 days	>2 - 14 days	>14 - 28 days	>28 days	
Imaging	37,873	6,940	508	76	45,397
Physiological Measurement	4,556	322	13	5	4,896
<b>Total</b>	<b>42,429</b>	<b>7,262</b>	<b>521</b>	<b>81</b>	<b>50,293</b>

Source: DRTT Return

<sup>2</sup>Refer to Explanatory Notes 1-2, 4-5 & 17–26

**Table 7: Number of urgent diagnostic tests reported and dispatched by HSC Trust and time in days – QE March 2017<sup>2</sup>**

HSC Trust	Length of time reporting in days				Total Reported
	0 - 2 days	>2 - 14 days	>14 - 28 days	>28 days	
Belfast	9,759	1,811	138	28	11,736
Northern	11,223	1,782	46	9	13,060
South Eastern	4,516	238	4	0	4,758
Southern	9,241	2,845	320	42	12,448
Western	7,690	586	13	2	8,291
<b>Total</b>	<b>42,429</b>	<b>7,262</b>	<b>521</b>	<b>81</b>	<b>50,293</b>

Source: DRTT Return

<sup>2</sup>Refer to Explanatory Notes 1-2, 4-5 & 17–26

## Appendix 2: Explanatory Notes

1. The sources for the data contained in this release are the quarterly Departmental Returns SDR1 (Parts 1 & 2) and the DRTT Return. The source for the diagnostic waiting time data for 16 selected diagnostic services is the Departmental Return SDR1 Part 1 (See explanatory note 2). The waiting time information for all other diagnostic services is provided by the HSCB on the SDR1 Part 2 return. The diagnostic reporting turnaround time information is provided by the HSCB on the DRTT return.
2. The '*Diagnostic Waiting Times Publication – Supporting Documentation*' booklet details the technical guidance, definitions, as well as notes on how to use the data contained within this statistical release. This booklet is available to view or download from the following link: <https://www.health-ni.gov.uk/publications/northern-ireland-waiting-time-statistics-diagnostic-waiting-times-march-2017>
3. The 16 selected diagnostic services are: Magnetic Resonance Imaging; Computerised Tomography; Non-Obstetric Ultrasound; Barium Studies; DEXA Scan; Radio-Nuclide Imaging; Pure Tone Audiometry; Echocardiography; Perfusion Studies; Peripheral Neurophysiology; Sleep Studies; Urodynamics Pressures and Flows; Colonoscopy; Flexi Sigmoidoscopy; Cystoscopy and Gastroscopy.
4. All of the data contained in the tables can be supplied by individual diagnostic service or HSC Trust if this level of detail is required. In addition, quarterly data relating to diagnostic waiting times and diagnostic reporting turnaround times has also been published in spreadsheet format (CSV), split by HSC Trust and diagnostic service, in order to aid secondary analysis. These data are available at: <https://www.health-ni.gov.uk/articles/diagnostic-waiting-times>
5. The diagnostic waiting times and diagnostic reporting turnaround times returns (SDR1 Parts 1 and 2, DRTT) include patients living outside Northern Ireland and privately funded patients waiting for diagnostic services in Health Service hospitals in Northern Ireland.
6. HSC Trusts use the Northern Ireland Picture Archive and Communications System (NIPACS) as the mechanism for managing imaging services. The HSC Board has carried out a validation exercise with Trusts to address any data quality issues. The quality of imaging waiting times and reporting times has improved in recent years.

7. A **diagnostic service** provides an examination, test, or procedure used to identify a person's disease or condition and which allows a medical diagnosis to be made. There are three categories of diagnostic test: Imaging test; Physiological Measurement test; and Day Case Endoscopy.
8. The **diagnostic waiting time** relates to all tests with a diagnostic element. Included are tests that are part diagnostic and subsequently part therapeutic. A therapeutic procedure is defined as a procedure which involves actual treatment of a person's disease, condition or injury. Purely therapeutic procedures are excluded from the diagnostic waiting times target. Patients currently admitted to a hospital bed and waiting for an emergency procedure, patients waiting for a planned procedure and patients waiting for procedures as part of screening programmes are also excluded from the waiting times target.
9. The waiting time for a diagnostic service commences on the date on which the referral for the service is received by the Health Care provider and stops on the date on which the test is performed. 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 the DNA.
10. A number of diagnostic services may not be provided at all of the five HSC Trusts in Northern Ireland. In this situation, patients from one HSC Trust area will be waiting to be seen at a service provided at another 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 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.
11. A number of the diagnostic services reported on the SDR 1 (Part 1 & 2) returns are managed as an admission: either an inpatient admission or a day case. As such, they will be included in both the inpatient and day case waiting time and diagnostic waiting time figures. Due to the risk of multiple counting, these two sets of data should not be combined to give an estimate of the total number of patients waiting for admission or a diagnostic service.

12. Waiting time statistics for day case endoscopies also include patients waiting for these services that are managed as inpatient admissions.
13. The 2016/17 Ministerial diagnostic waiting time target, as detailed in the Health and Social Care (Commissioning Plan) Direction (Northern Ireland) 2016, states that, by March 2017, 75% of patients should wait no longer than 9 weeks for a diagnostic test, with no patient waiting longer than 26 weeks.
14. For Tables 2 and 3, each diagnostic waiting time band relates to the number of completed weeks a patient has been waiting for a diagnostic service. For example, a patient waiting exactly 6 weeks would be included in the 0-6 week time band 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) week time band.
15. Patients waiting 'longer than 9 weeks' for a diagnostic service includes all patients in the >9 - 13, >13 - 21, >21 - 26 and >26 week time bands. All patients waiting 'over 26 weeks' included everyone in the >26 week time band.
16. Amended SDR 1 returns were received for the QE December 2016 for South Eastern Trust. The changes have been reflected in this bulletin.
17. The diagnostic reporting turnaround time is the time interval between the completion of the diagnostic test and the results of that test being verified or dispatched to the referring clinician in Northern Ireland, whichever is applicable.
18. Diagnostic reporting times apply to a selected subset of imaging and physiological measurement diagnostic services. These services are: Magnetic Resonance Imaging; Computerised Tomography; Non-Obstetric Ultrasound; Barium Studies; DEXA Scan; Radio-Nuclide Imaging; Pure Tone Audiometry; Echocardiography; Perfusion Studies; Peripheral Neurophysiology; Sleep Studies; and Urodynamics Pressures and Flows and Plain Film X-rays.
19. Data for Plain Film X-rays is only available from April 2015 onwards, as such DRTT figures should not be compared prior to this date.
20. Due to mapping issues following the installation of a new information system within the Royal Victoria hospital in Belfast HSC Trust, it is not currently possible to report on the total number of urgent Computerised Tomography diagnostic reporting turnaround times.

21. The 2016/17 Ministerial diagnostic reporting turnaround target, as detailed in the Health and Social Care (Commissioning Plan) Direction (Northern Ireland) 2016, states that, from April 2016, all urgent diagnostic tests should be reported on within two days of the test being undertaken.
22. Further information on routine diagnostic reporting times are available in the accompanying CSV file at: <https://www.health-ni.gov.uk/articles/diagnostic-waiting-times>
23. The information on diagnostic and reporting times contained within this publication is currently under review. The Department is looking at how this information is sourced and the validation procedures that are carried out with a view to improving the quality. All quality issues identified as part of this review are being addressed on an ongoing basis.
24. The Department of Health's policy is to publish revised figures with subsequent statistical releases unless it is decided that the magnitude of the change merits earlier notification.
25. The information contained within this publication is not National Statistics.
26. Figures relating to diagnostic waiting times and diagnostic reporting turnaround times for the quarter ending 30<sup>th</sup> June 2017 will be released on Thursday 31<sup>st</sup> August 2017.

**Further information on Diagnostic 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 DoH Internet site at:**

Internet address: <https://www.health-ni.gov.uk/publications/type/statisticalreports>