



Northern Ireland Waiting Time Statistics: Diagnostic Waiting Times Quarter Ending June 2017



Reader Information

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 draft <u>2017/18 Ministerial waiting time target</u> and the draft <u>2017/18 Ministerial waiting turnaround target</u> :
	"By March 2018, 75% of patients should wait no longer than 9 weeks for a diagnostic test, with no patient waiting longer than 26 weeks".
	"From April 2017, 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 30 th June 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 ' <i>Diagnostic Waiting Times Publication – Supporting Documentation</i> ' 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-june-2017
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By March 2018, 75% of patients should wait no longer than 9 weeks for a diagnostic test, with no patient waiting longer than 26 weeks.



At 30th June 2017, a total of 109,571 patients were waiting for a diagnostic test, 6.2% (6,391) more than at 31st March 2017 (103,180), and 12.4% (12,123) more than at 30th June 2016 (97,448) (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).

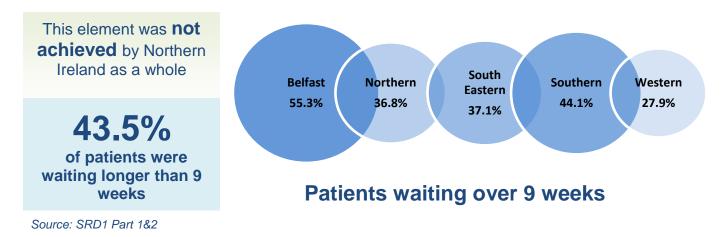
Just under a third (33.1%) were waiting for diagnostic tests in the Belfast HSC Trust, with a further 22.4% in the Northern HSC Trust, 20.5% in the Southern HSC Trust, 12.8% in the South Eastern HSC Trust and 11.1% in the Western HSC Trust (Table 2).



Over two-thirds (70.1%, 76,789) of the 109,571 patients were waiting for a diagnostic test within one of the following seven diagnostic services: Nonobstetric Ultrasound: Magnetic Resonance Imaging; Echocardiography; Computerised Tomography; Peripheral Neurophysiology; Gastroscopy; and Plain Film Xrays. (Table 3).

Source: SDR1 Part 1&2

Patients waiting more than 9 weeks at 30th June 2017

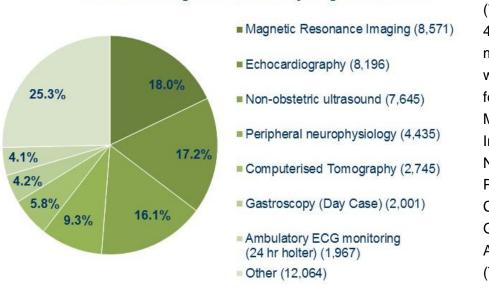


Achievement of the 9 week target requires that less than 25% of patients should be waiting over 9 weeks for a diagnostic test.

At 30th June 2017, 43.5% (47,624) of patients were waiting more than 9 weeks for a diagnostic test, compared with 36.5% (37,661) at 31st March 2017 and 34.5% (33,593) at 30th June 2016 (Table 1).

At 30th June 2017, the 9 week element of the target was not achieved by Northern Ireland as a whole; nor was it achieved by any individual 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 (55.3%, 20,065) of patients were waiting longer than 9 weeks in Belfast HSC Trust at 30th June 2017, 44.1% (9,910) in the Southern HSC Trust, 37.1% (5,188) in the South Eastern HSC Trust, 36.8% (9,053) in the Northern HSC Trust and 27.9% (3,408) in the Western HSC Trust (Table 2).



Patients waiting over 9 weeks by diagnostic service

Almost three quarters (74.7%, 35,560) of the 47.624 patients waiting more than 9 weeks were waiting for one of the following diagnostic tests: Magnetic Resonance Imaging; Echocardiography; Non-Obstetric Ultrasound: Peripheral Neurophysiology; Computerised Tomography; Gastroscopy and Ambulatory ECG Monitoring (Table 3).

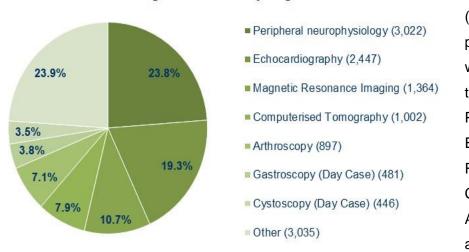


Source: SDR1 Part1&2

At 30th June 2017, 11.6% (12,694) of patients were waiting more than 26 weeks for a diagnostic test compared with 9.4% (9,675) at 31st March 2017 and 7.1% (6,934) at 30th June 2016 (Table 1).

At 30th June 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).

One in five (21.8%, 7,904) patients in the Belfast HSC Trust were waiting longer than 26 weeks at 30th June 2017, 8.6% (1,197) in the South Eastern HSC Trust, 8.5% (1,912) in the Southern HSC Trust, 7.8% (952) in the Western HSC Trust and 3.0% (729) in the Northern HSC Trust (Table 2).

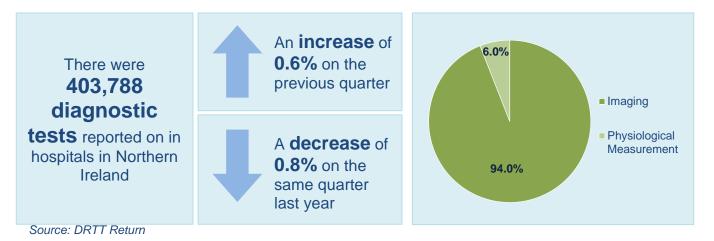


Patients waiting over 26 weeks by diagnostic service

Just over three quarters (76.1%, 9,659) of the 12,694 patients waiting more than 26 weeks were waiting for one of the following diagnostic tests: Peripheral Neurophysiology; Echocardiology; Magnetic Resonance Imaging; Computerised Tomography; Arthroscopy; Gastroscopy and Cystoscopy (Table 3).

Source: SDR1 Part1&2

Total number of diagnostic tests reported on during quarter ending June 2017



A total of 403,788 diagnostic tests¹ were reported on and dispatched to the referring clinician at hospitals in Northern Ireland during the quarter ending June 2017, 0.6% (2,262) more than the quarter ending March 2017 (401,526), and 0.8% (3,238) less than the quarter ending June 2016 (407,026) (Table 4).

Of the 403,788 reported diagnostic tests, 94.0% (379,673) were reporting on an Imaging test and 6.0% (24,115) were reporting on a Physiological Measurement test² (Table 4).

One out of eight (12.5%, 50,546) of the diagnostic tests reported on during quarter ending June 2017 were urgent diagnostic tests, with the remaining 87.5% (353,242) being routine diagnostic tests³ (Table 4).



Over one quarter (29.1%) of diagnostic tests were reported and dispatched in the Belfast HSC Trust¹, with a further 18.6% in the Northern HSC Trust, 17.7% in the Southern HSC Trust, 17.6% in the South Eastern HSC Trust and 17.0% in the Western HSC Trust.

¹ 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.

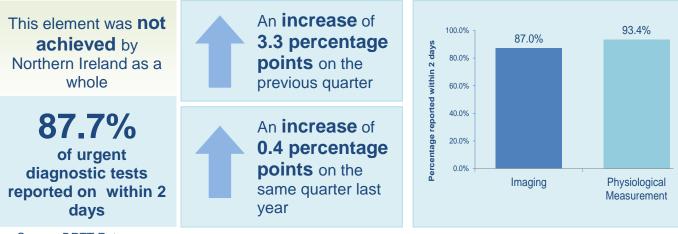
² Diagnostic reporting turnaround times relate only to a selected subset of Imaging and Physiological

Measurement tests. Day case endoscopies are reported on the day of the test and as such are not included.

³ Reporting times of routine diagnostic tests are available in the accompanying CSV file.

From April 2017, 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 June 2017



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 50,546 urgent diagnostic tests reported on during quarter ending June 2017, 87.7% (44,325) were reported on within 2 days, compared with 84.4% (42,429) during the quarter ending March 2017 and 87.3% (42,673) during the quarter ending June 2016 (Table 5).

Of the 50,546 urgent diagnostic tests reported on during the quarter ending June 2017, 45,270 were imaging reports and 5,276 were physiological measurement reports. A total of 87.0% of urgent imaging tests were reported on within 2 days compared with 93.4% of urgent physiological measurement tests (Table 6).



During quarter ending June 2017, the 2 day target was not achieved by any HSC Trust, although the South Eastern Trust reported on 94.8% of urgent diagnostic tests (Table 7).

Source: DRTT Return

Appendix 1: Tables

		Current	Previous	Same Quarter	
Diagnostic Cat	tegory	Quarter	Quarter	Last Year	
Diagnostio ou	g		(31 st March	(30 th June	
		2017)	2017)	2016)	
	Total Patients Waiting	59,967	52,024	46,893	
Imaging	Number waiting over 9 weeks	21,062	12,912	9,103	
Imaging	Percentage waiting over 9 weeks	35.1%	24.8%	19.4%	
	Number waiting over 26 weeks	3,133	1,643	602	
	Total Patients Waiting	33,661	34,886	30,594	
Physiological	Number waiting over 9 weeks	18,640	17,270	13,627	
Measurement	Percentage waiting over 9 weeks	55.4%	49.5%	44.5%	
	Number waiting over 26 weeks	6,543	5,423	2,451	
	Total Patients Waiting	15,943	16,270	19,961	
Endoscopy	Number waiting over 9 weeks	7,922	7,479	10,863	
Endoscopy	Percentage waiting over 9 weeks	49.7%	46.0%	54.4%	
	Number waiting over 26 weeks	3,018	2,609	3,881	
	Total Patients Waiting	109,571	103,180	97,448	
Tatal	Number waiting over 9 weeks	47,624	37,661	33,593	
Total	Percentage waiting over 9 weeks	43.5%	36.5%	34.5%	
	Number waiting over 26 weeks	12,694	9,675	6,934	

Table 1: Number of patients waiting for a diagnostic service by diagnostic category – 30th June 2017¹

Source: SDR1 Part 1 & 2 Returns

¹Refer to Explanatory Notes 1–16 & 23-26

Table 2: Number of patients waiting for a diagnostic service, by HSC Trust – 30th June 2017¹

HSC Trust	Patients Waiting for Diagnostic Service by Weeks Waiting					Total	
	0 - 6	>6 - 9	>9 - 13	>13 - 21	>21-26	>26	Waiting
Belfast	12,348	3,887	3,697	5,777	2,687	7,904	36,300
Northern	12,324	3,203	3,078	4,064	1,182	729	24,580
South Eastern	7,262	1,542	1,463	1,966	562	1,197	13,992
Southern	9,821	2,755	2,509	4,145	1,344	1,912	22,486
Western	7,418	1,387	887	1,093	476	952	12,213
Total	49,173	12,774	11,634	17,045	6,251	12,694	109,571

Source: SDR1 Part 1 & 2 Returns

¹Refer to Explanatory Notes 1–16 & 23-26

Table 3: Number of patients waiting for a diagnostic service by type of service and weeks waiting – 30th June 2017¹

Diagnostic Test	Patients Waiting for Diagnostic Service by Weeks Waiting					Total	
	0 - 6	>6 - 9	>9 - 13	>13 - 21	>21-26	>26	Waiting
Non-obstetric ultrasound	12,358	3,470	3,061	3,522	796	266	23,473
Magnetic Resonance Imaging	6,689	2,421	2,158	3,841	1,208	1,364	17,681
Cardiology - echocardiography	3,387	1,303	1,494	2,963	1,292	2,447	12,886
Computerised Tomography	5,099	712	702	762	279	1,002	8,556
Neurophysiology - peripheral neurophysiology	614	256	292	658	463	3,022	5,305
Gastroscopy (Day Case)	2,054	657	574	745	201	481	4,712
Plain Film Xrays	4,023	133	17	3	0	0	4,176
Ambulatory ECG monitoring (24 hr holter)	1,717	451	471	664	494	338	4,135
DEXA Scan	1,563	484	428	592	283	409	3,759
Colonoscopy (Day Case)	1,674	437	430	631	144	264	3,580
Audiology - pure tone audiometry	1,642	473	429	556	180	58	3,338
Cystoscopy (Day Case)	909	211	163	210	102	446	2,041
Flexi sigmoidoscopy (Day Case)	727	268	225	380	98	175	1,873
Arthroscopy	76	86	108	195	116	897	1,478
Cardiology - perfusion studies	320	133	151	251	256	277	1,388
Fluroscopy	711	134	87	64	19	12	1,027
Patient Activated Ambulatory Function	357	76	115	190	49	188	975
Hysteroscopy	374	114	73	118	48	195	922
Radio-Nuclide Imaging	720	76	9	26	7	75	913
Other	4,159	879	647	674	216	778	7,353
All diagnostic tests	49,173	12,774	11,634	17,045	6,251	12,694	109,571

Source: SDR1 Part 1 & 2 Returns

¹Refer to Explanatory Notes 1–16 & 23-26

Table 4: Number of diagnostic tests reported and dispatched by priority of report – QE June 2017²

Priority of	Diagnostic Category	QE June	QE March	QE June
Report		2017	2017	2016
Urgent	Imaging	45,270	45,397	44,448
	Physiological Measurement	5,276	4,896	4,410
Routine	lmaging Physiological Measurement	334,403 18,839	-	
Total	lmaging	379,673	376,221	383,490
	Physiological Measurement	24,115	25,305	23,536

Source: DRTT Return

²Refer to Explanatory Notes 1-2, 4-5 & 17–26

Urgent Diagnostic Tests	QE June 2017		
Total reported	50,546	50,293	48,858
Number reported within 2 days	44,325	42,429	42,673
% reported on within 2 days	87.7%	84.4%	87.3%

Source: DRTT Return

²Refer 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 June 2017²

Diagnostic Category	Le	Total			
Diagnostio Oategory	0 - 2 days	>2 - 14 days	>14 - 28 days	>28 days	Reported
Imaging	39,398	5,550	271	51	45,270
Physiological Measurement	4,927	341	7	1	5,276
Total	44,325	5,891	278	52	50,546

Source: DRTT Return

²Refer 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 June 2017²

HSC Trust	Le	Total			
noo musi	0 - 2 days	>2 - 14 days	>14 - 28 days	>28 days	Reported
Belfast	9,933	1,888	136	22	11,979
Northern	11,688	703	15	2	12,408
South Eastern	4,837	258	7	0	5,102
Southern	9,839	2,417	103	26	12,385
Western	8,028	625	17	2	8,672
Total	44,325	5,891	278	52	50,546

Source: DRTT Return

²Refer to Explanatory Notes 1-2, 4-5 & 17–26

Appendix 2: Explanatory Notes

- 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 date 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: <u>https://www.health-ni.gov.uk/articles/diagnostic-waiting-times</u>
- 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 draft 2017/18 Ministerial diagnostic waiting time target, states that, by March 2018, 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 draft 2017/18 Ministerial diagnostic reporting turnaround target, states that, from April 2017, 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: <u>https://www.health-ni.gov.uk/articles/diagnostic-waiting-times</u>
- 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 30th September 2017 will be released on Thursday 30th November 2017.

Further information on Diagnostic Waiting Times in Northern Ireland is available from:

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