

INFORMATION
ANALYSIS
DIRECTORATE



Northern Ireland Waiting Time Statistics:

Diagnostic Waiting Times
Publication - Supporting
Documentation



Department of
Health

An Roinn Sláinte

Máinnstríe O Poustie

www.health-ni.gov.uk

Introduction

The information detailed in this release is published primarily to provide an indication of HSC Trust performance. It allows 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 release relates to the waiting times for diagnostic services and the diagnostic reporting turnaround times at HSC Trusts in Northern Ireland at the end of the quarter. The latest release and data are available to view or download from the link: <https://www.health-ni.gov.uk/articles/diagnostic-waiting-times>

Supporting information on definitions, how to use the data and technical guidance are detailed within this document.

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Section 1: 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 and Day Case, Outpatient, Diagnostics and Cancer). A detailed list of these publications is available from:

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

Section 2: Technical Notes

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

Data Collection

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

Statutory Data Return 1 (SDR1) and Diagnostic Reporting Turnaround Time Return (DRTT).

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

<https://www.health-ni.gov.uk/articles/diagnostic-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

Information provided by HSC Trusts on the SDR1 and DRTT returns have 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/HSCB. 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.

The information contained within this publication is currently under review. The Department is looking at how information on diagnostic waiting and reporting times is sourced and the validation procedures that are carried out. All quality issues identified as part of this review are being addressed on an ongoing basis.

The information contained within this publication is not currently National Statistics.

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 time information publicly available to those people using health services in Northern Ireland. Further advice on uses for these data is outlined in Section 4.

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/statistical-work-areas/diagnostics-waiting-times-and-activity/>

Scotland

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

Wales

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

Contact Information

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

Hospital Information Branch

Email: statistics@health-ni.gov.uk

Section 3: Definitions

Diagnostic Service

A diagnostic service refers to an examination, test or procedure used to identify a person's disease or condition and which allows a medical diagnosis to be made.

Diagnostic Category

Diagnosis services are grouped into 3 categories – Imaging tests, Physiological Measurement tests and Day Case Endoscopies.

Diagnostic Waiting Times

The diagnostic waiting time relates to all tests with a diagnostic element. 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.

Inclusions and Exclusions

- Included are tests that are part diagnostic and subsequently part therapeutic.
- 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.

Diagnostic Waiting Timebands

Each diagnostic waiting timeband 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 timeband and a patient waiting 6 weeks and 1 day would be included in the >6-13 (greater than 6 weeks but waiting no longer than 13 weeks) week timeband. Patients waiting 'more than 9 weeks' includes all patients in the >9-13, >13 - 21, >21 – 26, >26-36, >36-52, >52-65, >65-78 and >78 week timebands. Patients waiting 'more than 26 weeks' includes all patients in the >26-36, >36-52, >52-65, >65-78 and >78 week timebands.

Diagnostic Reporting Turnaround Time

The diagnostic reporting turnaround time is the length of time between the diagnostic test being undertaken and the results of that test being verified and dispatched to the referring clinician in Northern Ireland. Diagnostic reporting turnaround times are collected for both urgent and routine diagnostic tests.

Diagnostic reporting turnaround times relate only to a selected subset of Imaging and Physiological Measurement tests (*see list below*). Day case endoscopies are reported on the day of the test and as such are not included.

Imaging Tests

- Magnetic Resonance Imaging
- Computerised Tomography
- Non-obstetric Ultrasound
- Barium Studies
- DEXA Scan
- Radio-nuclide Imaging
- Plain Film X-ray

Physiological Measurement Tests

- Pure Tone Audiometry
- Echocardiography
- Perfusion Studies
- Peripheral Neurophysiology
- Sleep Studies
- Urodynamics Pressures and Flows

Section 4: Guidance on Using the Data

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 recent direction of performance), and the same quarter in the previous year (to assess any seasonal impact).

Description of data

Data on the number of health service patients who are waiting for a diagnostic service at a Health and Social Care (HSC) Trust in Northern Ireland and the reporting turnaround times for diagnostic services.

Data Provider

Data are sourced from various administrative/imaging systems at each HSC Trust.

Data Quality Assessment

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 diagnostic service** – 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. It 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. It does not include patients waiting for a planned procedure, regular day and night attendees', patients currently in hospital, maternity patients and patients who are currently suspended. Data relate to the numbers who have still to have their test performed at the end of each quarter and provide users with an indication of demand for HSC services.
- **Lengths of time patients are waiting for a diagnostic service** – this relates to the length of time patients have been waiting for a diagnostic service at the end of the relevant quarter. These are sometimes referred to as current waiters. Section 3 explains how these waiting times are measured. This information relates to how long patients have been waiting for a diagnostic service, not the length of time they waited before being seen, also known as completed waits.
- 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 diagnostic services and the overall capacity for providing these services within the HSC Trust.

- **Diagnostic waiting times by HSC Trust** – patients will be waiting for a diagnostic service at a specific HSC Trust. Patients are reported by the HSC Trusts responsible for who will carry out the diagnostic procedure/test. This is not necessarily the nearest HSC Trust to the patient's residence. Certain clinical services may not be provided at a patient's local HSC Trust, and some services are provided at a single regional centre for Northern Ireland. Many diagnostic services are not provided at each 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. 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.
- **Length of time reporting on urgent diagnostic tests** - this relates to the length of time between the completion of an urgent diagnostic test and the results of that test being verified or dispatched to the referring clinician during the relevant quarter. Section 3 explains how these are measured. Further information on routine diagnostic reporting times are available in the accompanying CSV file.