

INFORMATION  
ANALYSIS  
DIRECTORATE



# Northern Ireland Waiting Time Statistics: Cancer Waiting Times (April – June 2014)

## Reader Information

Purpose	<p>This publication presents information on waiting times for cancer services in Northern Ireland and reports on the performance of Health and Social Care Trusts in Northern Ireland, against the 2014/15 Ministerial Targets for cancer care services, which state that:</p> <p><i>“From April 2014, all urgent breast cancer referrals should be seen within 14 days; at least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat; and at least 95% of patients urgently referred with a suspected cancer should begin their first definitive treatment within 62 days.”</i></p> <p>This statistics release gives details of the waiting times for patients accessing cancer services at hospitals in Northern Ireland during April, May and June 2014. All data are provided by Health and Social Care Trust and, where applicable, by Tumour Site.</p>
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Target audience	DHSSPS, Chief Executives of the Health and Social Care (HSC) Board and Trusts in Northern Ireland, health care professionals, academics, Health & Social Care stakeholders, media and general public.
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## Key Points

- Performance against the cancer waiting time target in Northern Ireland continues to be much lower than the 95% standard. In June 2014, 77.0% of patients who received an urgent referral for suspect cancer were treated within 62 days, higher than May 2014 (73.4%) but similar to April 2014 (77.0%) (Table 2).
- Of the 65 patients who waited longer than 62 days for treatment in June 2014, 25 (38.5%) were diagnosed with urological cancer (Figure 3).
- In June 2014, 97.4% of patients received their first treatment within 31 days of a decision to treat being taken, slightly higher than May 2014 (96.8%) and April 2014 (96.8%) (Table 5).
- Of the 19 patients who waited longer than 31 days in June 2014, 6 (31.5%) were diagnosed with urological cancer and 5 (26.3%) were diagnosed with upper gastrointestinal cancer (Figure 7).
- In June 2014, 59.8% of patients waiting for a first assessment with a breast cancer specialist following an urgent breast cancer referral were seen within 14 days, higher than May 2014 (56.2%) but less than April 2014 (63.0%) (Table 8).

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## About the Hospital Information Branch (HIB)

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

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

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

**Website:** [http://www.dhsspsni.gov.uk/index/stats\\_research/hospital-stats.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats.htm)

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## Technical Notes

This statistics release presents information on the waiting times for patients accessing cancer services at HSC Trusts in Northern Ireland, and reports on the performance of HSC Trusts against the 2014/15 Ministerial targets for treatment for cancer and urgent breast cancer referrals. All data are presented by HSC Trust and, where applicable, by tumour site.

### Data Collection

The information presented in this bulletin derives from the Cancer Patient Pathway System (CaPPS) and the Departmental Return SDR 2.

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

[http://www.dhsspsni.gov.uk/index/stats\\_research/hospital-stats/hib\\_guidance\\_manuals.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats/hib_guidance_manuals.htm)

### Rounding

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

### Data Quality

All information presented in this bulletin has been validated and quality assured by HSC Trusts prior to publication. For Departmental Returns, HSC Trusts are given a set period of time to submit the information to HIB. Data sourced from the Cancer Patient Pathway System are extracted two months after the end of each quarter to give HSC Trusts sufficient time to update their information. Following submission/extraction, HIB perform a series of validation checks to verify the number of patients waiting over the target and to highlight

any inaccuracies in the data. Queries arising from validation checks are presented to HSC Trusts for clarification and, if required, returns may be amended and/or re-submitted, and changes made to the Cancer Patient Pathway System.

### Main Uses of Data

Data contained in this release are published primarily to provide an indication of HSC performance. They allow the general public and the DHSSPS Health Committee to assess the performance of the DHSSPS, the HSC Board and HSC Trusts in providing timely access to cancer services in Northern Ireland. These data also provide policy makers with the necessary information to formulate and evaluate cancer services and are helpful in assessing the effectiveness of resource allocation in providing services that are fully responsive to patients needs. Additionally, cancer waiting times information is used to inform the media, special interest groups and academics, and by the DHSSPS to respond to parliamentary / assembly questions and ad hoc queries from the public. An additional aim of this publication is to make cancer 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 cancer waiting times in other administrations are not always measured in a comparable manner to those in Northern Ireland. Details of the cancer waiting times published elsewhere in the UK can be found as detailed on the next page.



## England

<http://www.england.nhs.uk/statistics/tag/cancer/>

## Scotland

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

## Wales

<http://wales.gov.uk/statistics-and-research/nhs-cancer-waiting-times/?lang=en>

## A National Statistics Publication

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

Designation can be broadly interpreted to mean that the statistics:

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

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

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

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

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

[http://www.dhsspsni.gov.uk/index/stats\\_research/hospital-stats/waiting\\_times\\_main/waiting\\_times-cancer.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats/waiting_times_main/waiting_times-cancer.htm)

## Contextual Information

Readers should be aware that contextual information about Northern Ireland and the health services provided is available to read while using statistics from this publication.

This includes information on the current and future population, structures within the Health and Social Care system, the vision for the future health services as well as targets and indicators. This information is available at the following link:

[http://www.dhsspsni.gov.uk/index/stats\\_research/hospital-stats/contextual\\_information\\_hospital\\_statistics.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats/contextual_information_hospital_statistics.htm)

## Contact Information

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

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## Introduction

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

Data contained in this publication relates to waiting times for patients accessing cancer services in HSC Trusts; and waiting times to be seen for a first assessment with a breast cancer specialist in HSC Trusts in Northern Ireland during April, May and June 2014.

### Cancer Waiting Times presented by HSC Trust

Cancer waiting times have been presented by HSC Trust. The Trust at which a patient receives treatment is not necessarily the Trust to which the patient was referred, or the nearest HSC Trust to the patient's residence, as, in the case of numerous cancer services, treatments are provided at specialist centres such as the regional cancer centre for Northern Ireland at the Belfast 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 treated per head of the population within each HSC Trust area.

It is advisable to look at the numbers behind any percentages in this bulletin, due to the small cohort.

### Waiting Times for First Definitive Treatment

A first definitive treatment can relate to surgery, drug therapy (chemotherapy, biological therapy or hormone therapy), radiotherapy, specialist palliative care (SPC) and active monitoring.

## Patients treated following an urgent GP referral for suspect cancer

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

Figure 1, Table 1 and Table 9 show the number of people receiving their first definitive treatment for cancer following an urgent GP referral for suspect cancer in the months of April, May and June 2014, by HSC Trust.

**Table 1: Number of patients first treated for cancer following an urgent GP referral for cancer (April - June 2014)**

HSC Trust	No. of Patients first treated for Cancer following an urgent GP referral		
	Apr	May	Jun
Belfast	110.0	113.5	83.5
Northern	55.5	59.5	58.0
Southern	41.0	45.5	52.5
South Eastern	50.5	54.5	54.5
Western	48.0	35.0	34.5
<b>Northern Ireland</b>	<b>305</b>	<b>308</b>	<b>283</b>

In June 2014, 283 patients were treated for cancer following an urgent GP referral for suspect cancer, across Northern Ireland, less than May 2014 (308) and April 2014 (305).

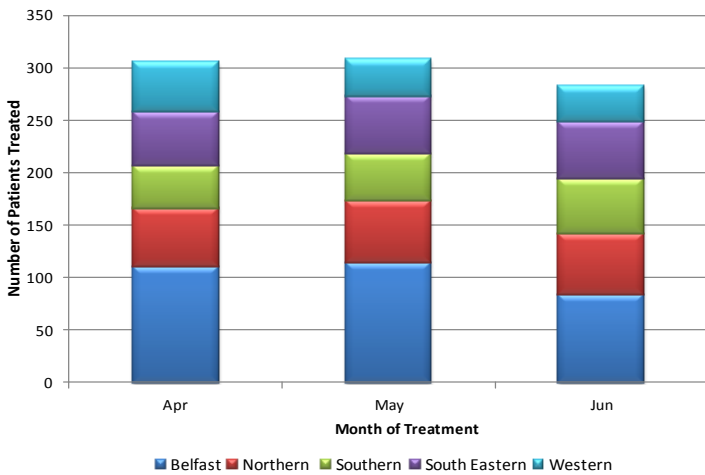
### Total patients treated by HSC Trust<sup>1</sup>

In June 2014, of the 283 patients treated for cancer following an urgent GP referral, almost a third (83.5, 29.5%) were treated in Belfast HSC Trust.

A further 58.0 (20.5%) patients were treated in Northern HSC Trust, 54.5 (19.3%) in the South Eastern HSC Trust, 52.5 (18.6%) in the Southern HSC Trust, and 34.5 (12.2%) in the Western HSC Trust.

<sup>1</sup> See Tables 9 and 10 for full reporting on the 62 day target for treatment following an urgent GP referral for suspect cancer. See Explanatory Notes 1 & 3-5

**Figure 1: Number of patients receiving a first definitive treatment for cancer following an urgent GP referral for suspect cancer (April - June 2014)**



Between April and June 2014, the Northern, Southern and South Eastern HSC Trusts reported increases in the number of patients treated, with the Southern HSC Trust reporting the greatest increase (41.0 to 52.5).

During this period, the Belfast and Western HSC Trusts reported decreases in the number of patients treated, with the largest decrease seen in the Belfast HSC Trust (110.0 in April 2014 to 83.5 in June 2014).

**Percentage of patients treated within 62 days, by HSC Trust<sup>2</sup>**

The 2014/15 Ministerial target on waiting times for treatment following an urgent GP referral for suspect cancer requires that, from April 2014, at least 95% of patients should begin their first treatment within 62 days.

<sup>2</sup> See Tables 9 and 10 for full reporting on the 62 day target for treatment following an urgent GP referral for suspect cancer. See Explanatory Notes 1-5

**Figure 2: HSC Trust Performance against the 62 day 2014/15 Ministerial target (April - June 2014)**

HSC Trust	Target Achieved?		
	Apr	May	Jun
Belfast	No	No	No
Northern	No	No	No
Southern	No	No	No
South Eastern	No	No	No
Western	No	No	No
<b>Northern Ireland</b>	<b>No</b>	<b>No</b>	<b>No</b>

The target was not met in Northern Ireland as a whole during April, May and June 2014 (Figure 2).

All HSC Trusts failed to meet the 62 day target in each of the three months. However, it is worth noting that the Western HSC Trust treated 94.2% of patients within 62 days in June 2014 (Table 2).

**Table 2: Percentage of patients receiving a first definitive treatment for cancer within 62 days following an urgent GP referral for suspect cancer, by HSC Trust (April - June 2014)**

HSC Trust	Percentage (%) Treated within 62 days from Receipt of Referral		
	Apr	May	Jun
Belfast	68.2	67.8	73.7
Northern	82.9	74.8	73.3
Southern	85.4	74.7	79.0
South Eastern	71.3	71.6	73.4
Western	89.6	90.0	94.2
<b>Northern Ireland</b>	<b>77.0</b>	<b>73.4</b>	<b>77.0</b>

During June 2014, over three quarters (77.0%, 218) of patients who commenced treatment for cancer following an urgent referral for suspect cancer (including routine referrals subsequently reclassified as urgent by a cancer specialist), were treated within 62 days. Of the 65 patients that were

not treated within 62 days, there was the equivalent of 22.0 in the Belfast HSC Trust, 15.5 in the Northern HSC Trust, 14.5 in the South Eastern HSC Trust, 11.0 in the Southern HSC Trust, and 2.0 in the Western HSC Trust.

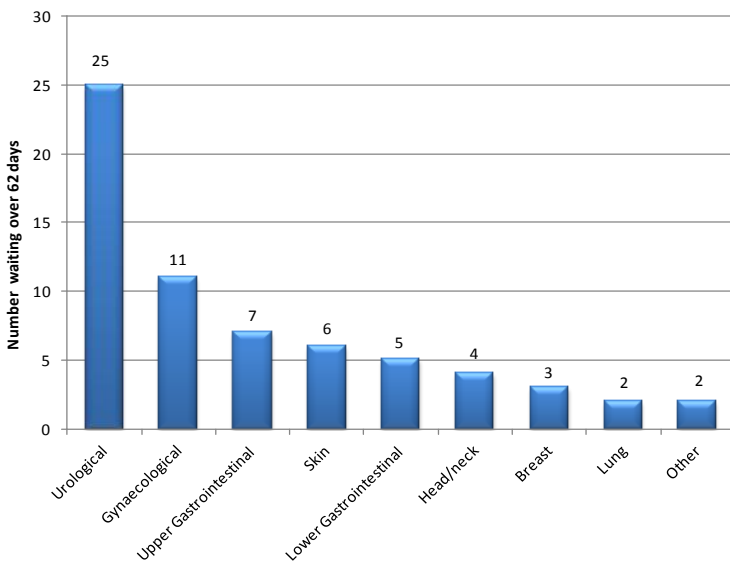
In May 2014, 226 (73.4%) of the 308 patients who commenced treatment were treated within 62 days. Of the 82 patients that were not treated within 62 days, there was the equivalent of 36.5 in the Belfast HSC Trust, 15.5 in the South Eastern HSC Trust, 15.0 in the Northern HSC Trust, 11.5 in the Southern HSC Trust, and 3.5 in the Western HSC Trust.

In April 2014, 235 (77.0%) out of 305 patients were treated within 62 days. Of the 70 patients that were not treated within 62 days, there was the equivalent of 35.0 in the Belfast HSC Trust, 14.5 in the South Eastern HSC Trust, 9.5 in the Northern HSC Trust, 6.0 in the Southern HSC Trust, and 5.0 in the Western HSC Trust.

**Percentage of patients treated within 62 days by tumour site<sup>3</sup>**

Figure 3, Table 3 and Table 10 report the waiting times by tumour site during the months of April, May and June 2014.

**Figure 3: Number of patients waiting over 62 days for treatment following an urgent GP referral for suspect cancer, by tumour site in June 2014**



During June 2014, 65 patients waited longer than 62 days for treatment following an urgent GP referral for suspect cancer. Of the 65 patients, 25 were diagnosed with urological cancer, 11 with gynaecological cancer, 7 with upper gastrointestinal cancer, 6 with skin cancer, 5 with lower gastrointestinal cancer, 4 with head/neck cancer, 3 with breast cancer, 2 with lung cancer, and 2 with a cancer classified as 'other'.

**Table 3: Percentage of patients receiving a first definitive treatment for cancer within 62 days following an urgent GP referral for suspect cancer, by tumour site (April - June 2014)**

Cancer Site	Percentage (%) treated within 62 days from Receipt of Referral		
	Apr	May	Jun
Brain Central Tumour	-	-	-
Breast Cancer	98.3	96.4	94.8
Gynae Cancers	76.9	76.9	52.2
Haematological Cancers	70.0	90.9	100.0
Head/Neck Cancer	100.0	43.8	55.6
Lower Gastrointestinal Cancer	66.7	76.3	77.3
Lung Cancer	77.8	64.7	94.4
Sarcomas	100.0	100.0	-
Skin Cancers	87.8	90.7	87.8
Upper Gastrointestinal Cancer	70.8	34.6	65.0
Urological Cancer	56.1	61.5	56.1
Other	75.0	50.0	50.0
<b>Northern Ireland</b>	<b>77.0</b>	<b>73.4</b>	<b>77.0</b>

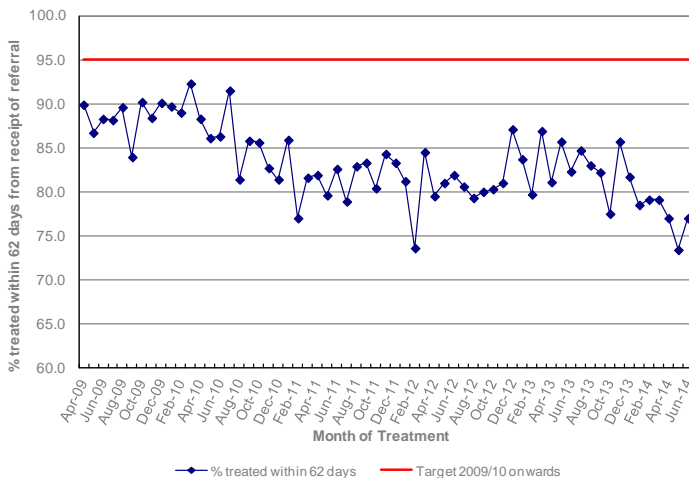
During June 2014, all patients diagnosed with haematological cancer commenced treatment within 62 days. It is worth noting that nearly 95% of patients diagnosed with breast or lung cancer (94.8% and 94.4% respectively) also commenced treatment within 62 days.

<sup>3</sup> See Tables 9 and 10 for full reporting on the 62 day target for treatment following an urgent GP referral for suspect cancer. See Explanatory Notes 1-6 & 14

## Percentage of patients treated within 62 days – Monthly Trends<sup>4</sup>

Figure 4 shows the percentage of patients treated within 62 days following an urgent GP referral for suspect cancer from April 2009 to June 2014.

**Figure 4: Percentage of patients treated within 62 days following an urgent GP referral for suspect cancer (April 2009 - June 2014)**



Reporting of a target for treatment following an urgent GP referral for suspect cancer began in April 2008 and, until July 2010, the percentage of patients seen within 62 days fluctuated between 83% and 93%, with no consistent trends emerging.

However, from July 2010, overall performance has shown a downward trend through the rest of 2010/11, all of 2012/13, 2013/14 and into 2014/15. The percentage of patients treated within 62 days was 77.0% in both April and June 2014, and 73.4% in May 2014, the lowest seen since reporting of a target began in April 2008.

Northern Ireland as a whole has never met the performance target since it was increased in April 2009 from 75% to 95% of patients being seen within 62 days following an urgent GP referral for suspect cancer.

<sup>4</sup> See Tables 9 and 10 for full reporting on the 62 day target for treatment following an urgent GP referral for suspect cancer. See Explanatory Notes 1-5 & 7

## Patients treated following a decision to treat

### Total patients treated<sup>5</sup>

Figure 5, Tables 4 and 11 show the number of people who received their first definitive treatment for cancer following a decision to treat, in April, May and June 2014, irrespective of the source or status of their referral, by HSC Trust.

**Table 4: Number of patients first treated for cancer following a decision to treat (April - June 2014)**

HSC Trust	No. of Patients first treated for cancer following decision to treat		
	Apr	May	Jun
Belfast	346	318	312
Northern	96	99	108
Southern	88	89	127
South Eastern	100	106	106
Western	94	99	80
<b>Northern Ireland</b>	<b>724</b>	<b>711</b>	<b>733</b>

In June 2014, 733 patients were treated for cancer in Northern Ireland, following a decision to treat for cancer, an increase from May 2014 (711) and April 2014 (724).

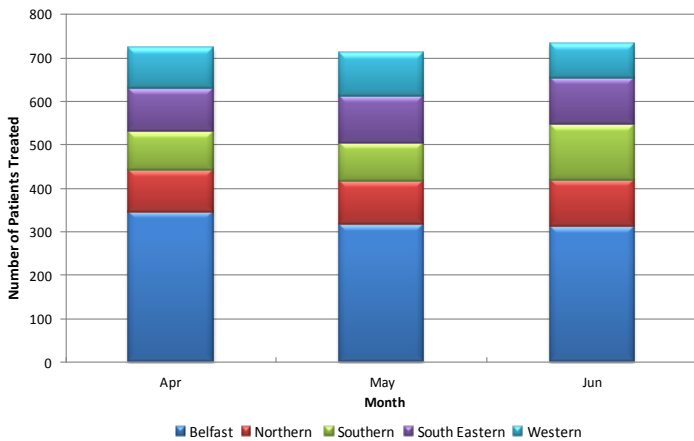
### Total patients treated, by HSC Trust<sup>5</sup>

Of the 733 patients who received treatment for cancer in June 2014, over two fifths (42.6%, 312) were treated in the Belfast HSC Trust.

A further 127 (17.3%) patients were treated in Southern HSC Trust, 108 (14.7%) in the Northern HSC Trust, 106 (14.5%) in the South Eastern HSC Trust, and 80 (10.9%) in the Western HSC Trust.

<sup>5</sup> See Tables 11 and 12 for full reporting on the 31 day target for treatment following a decision to treat. See Explanatory Notes 1 & 8-9.

**Figure 5: Number of patients receiving a first definitive treatment for cancer following a decision to treat, by HSC Trust (April - June 2014)**



Between April and June 2014, the Northern, Southern and South Eastern HSC Trusts reported increases in the number of patients treated with the Southern HSC Trust reporting the largest increase (88 to 127 patients).

During this period, the Belfast and Western HSC Trusts reported decreases in the number of patients treated with the largest decrease in the Belfast HSC Trust, from 346 in April 2014 to 312 patients in June 2014.

### Percentage of patients treated within 31 days, by HSC Trust<sup>6</sup>

The 2014/15 Ministerial target on waiting times for cancer treatment following a decision to treat requires that at least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat.

<sup>6</sup> See Tables 11 and 12 for full reporting on the 31 day target for treatment following a decision to treat. See Explanatory Notes 1-2 & 8-9.

**Figure 6: HSC Trust Performance against the 31 day 2014/15 Ministerial target (April - June 2014)**

HSC Trust	Target Achieved?		
	Apr	May	Jun
Belfast	No	No	No
Northern	Yes	Yes	Yes
Southern	No	No	Yes
South Eastern	Yes	No	No
Western	Yes	Yes	Yes
<b>Northern Ireland</b>	<b>No</b>	<b>No</b>	<b>No</b>

The target was not met for Northern Ireland as a whole during April, May and June 2014 (Figure 6).

Across HSC Trusts, the Northern and Western HSC Trusts met the target in all three months of the quarter, whilst the Southern HSC Trust met the target in June 2014 and the South Eastern HSC Trust met the target in April 2014 (Table 5).

During June 2014, 733 patients commenced treatment for cancer following a decision to treat being taken, with 714 (97.4%) treated within 31 days. Of the 19 patients that waited longer than 31 days, 14 were in the Belfast HSC Trust, 3 in the South Eastern HSC Trust, and 2 in the Southern HSC Trust.

In May 2014, 688 (96.8%) of the 711 patients that commenced treatment, did so within 31 days. Of the 23 patients not treated within 31 days, 15 were in the Belfast HSC Trust, 4 in the South Eastern HSC Trust, 2 in the Southern HSC Trust, 1 in the Northern HSC Trust, and 1 in the Western HSC Trust.

In April 2014, 701 (96.8%) of the 724 patients that commenced treatment, did so within 31 days. Of the 23 patients that waited longer than 31 days for treatment, 16 were in the Belfast HSC Trust, 4 in the Southern HSC Trust, 2 in the South Eastern HSC Trust, and 1 in the Northern HSC Trust.

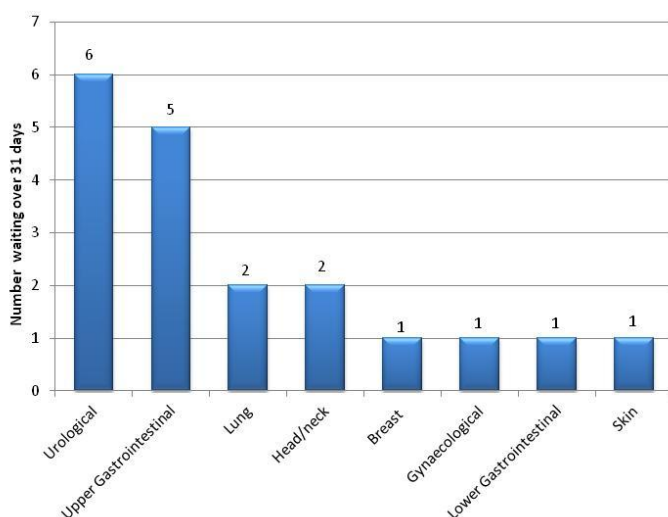
**Table 5: Percentage of patients receiving a first definitive treatment for cancer within 31 days following a decision to treat, by HSC Trust (April - June 2014)**

HSC Trust	Percentage (%) treated within 31 days of a decision to treat being		
	Apr	May	Jun
Belfast	95.4	95.3	95.5
Northern	99.0	99.0	100.0
Southern	95.5	97.8	98.4
South Eastern	98.0	96.2	97.2
Western	100.0	99.0	100.0
<b>Northern Ireland</b>	<b>96.8</b>	<b>96.8</b>	<b>97.4</b>

**Percentage of patients treated within 31 days, by tumour site<sup>7</sup>**

Figure 7, Tables 6 and 12 report on the waiting times for treatment following a decision to treat being taken, by tumour site, for the months of April, May and June 2014.

**Figure 7: Number of patients waiting over 31 days for treatment following a decision to treat, by tumour site in June 2014**



<sup>7</sup> See Tables 11 and 12 for full reporting on the 31 day target for treatment following a decision to treat. See Explanatory Notes 1-2, 8-10 & 14

During June 2014, 19 patients waited longer than 31 days for treatment following a decision to treat being taken. Of these 19, 6 were diagnosed with urological cancer, 5 with upper gastrointestinal cancer, 2 with lung cancer, 2 with head/neck cancer, 1 with breast cancer, 1 with gynaecological cancer, 1 with lower gastrointestinal cancer, and 1 with skin cancer.

**Table 6: Percentage of patients receiving a first definitive treatment for cancer within 31 days following a decision to treat, by tumour site (April - June 2014)**

Cancer Site	Percentage (%) treated within 31 days of a decision to treat being taken		
	Apr	May	Jun
Brain Central Tumour	100.0	100.0	100.0
Breast Cancer	96.4	98.9	99.0
Gynae Cancers	100.0	89.2	97.7
Haematological Cancers	100.0	100.0	100.0
Head/Neck Cancer	100.0	88.2	84.6
Lower Gastrointestinal Cancer	100.0	97.6	99.0
Lung Cancer	98.8	99.0	98.0
Sarcomas	100.0	100.0	100.0
Skin Cancers	99.0	94.4	99.1
Upper Gastrointestinal Cancer	93.8	100.0	92.4
Urological Cancer	90.0	95.4	94.5
Other	100.0	100.0	100.0
<b>Northern Ireland</b>	<b>96.8</b>	<b>96.8</b>	<b>97.4</b>

**Percentage of patients treated within 31 days – Monthly trends<sup>6</sup>**

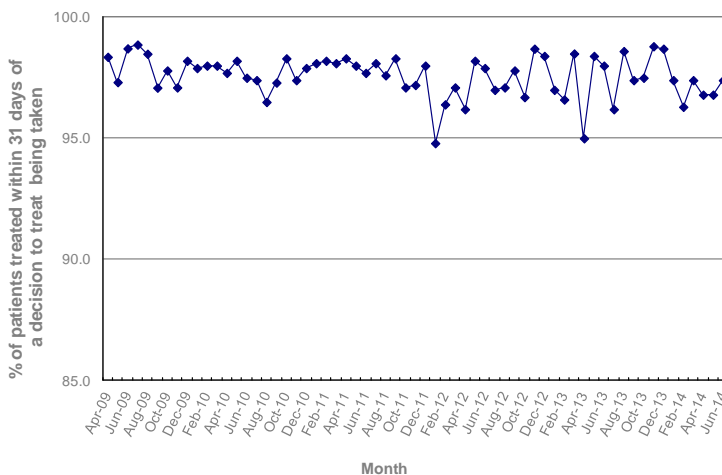
Figure 8 shows the percentage of patients treated within 31 days of a decision to treat being taken, from April 2009 to June 2014.

<sup>6</sup> See Tables 11 and 12 for full reporting on the 31 day target for treatment following a decision to treat. See Explanatory Notes 1-2 & 8-9.

The percentage of patients treated within 31 days, following a decision to treat, has fluctuated slightly over the years, but never fallen below 90%.

There was a slight deterioration of performance in January 2012, with the waiting time position at the lowest point it had ever been (94.8 %) except for April 2008, the first month that the waiting time position was reported. However, performance subsequently improved and remained relatively stable throughout all of 2012/13, 2013/14 and into 2014/15. The percentage of patients treated within 31 days was 96.8% in April and May 2014 and 97.4% in June 2014.

**Figure 8: Percentage of patients treated within 31 days following a decision to treat (April 2009 - June 2014)**



## Waiting time to be seen following an Urgent Breast Cancer Referral

This relates to the waiting time for a first outpatient appointment and assessment by a consultant who is a breast cancer specialist, at a HSC Trust in Northern Ireland. It should be noted that information relates solely to patients who were referred as urgent with suspect breast cancer.

## Patients seen for a First Assessment with a Breast Cancer Specialist

### Total patients seen<sup>8</sup>

Figure 9, Tables 7 and 13 report on the total number of people seen by a breast cancer specialist following an urgent referral for suspect breast cancer in April, May and June 2014, by HSC Trust.

**Table 7: Number of patients seen for a first assessment with a breast cancer specialist following an urgent referral for suspect breast cancer (April - June 2014)**

HSC Trust	No. of patients first seen by a breast cancer specialist following an urgent referral		
	Apr	May	Jun
Belfast	251	205	222
Northern	190	270	263
Southern	192	156	181
South Eastern	143	203	182
Western	239	193	166
<b>Northern Ireland</b>	<b>1,015</b>	<b>1,027</b>	<b>1,014</b>

In June 2014, 1,014 patients were first seen by a breast cancer specialist following an urgent referral for suspect breast cancer, a slight decrease from May 2014 (1,027) but similar to April 2014 (1,015).

### Total patients seen, by HSC Trust<sup>8</sup>

In June 2014, a quarter (25.9%, 263) of patients first seen by a breast cancer specialist following an urgent referral were seen by the Northern HSC Trust.

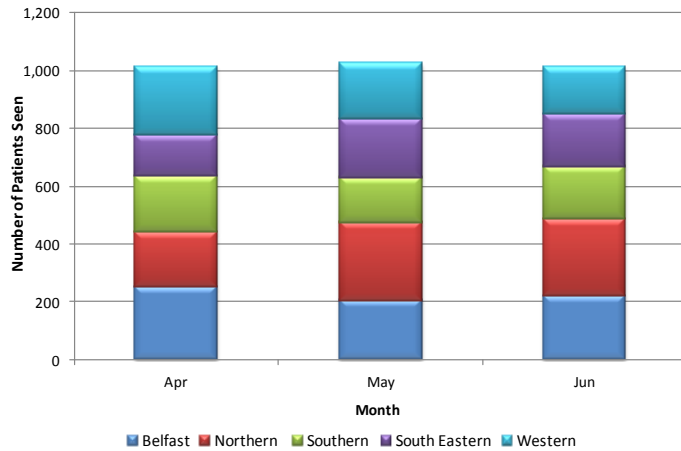
A further 222 (21.9%) patients were seen in Belfast HSC Trust, 182 (17.9%) in the South Eastern HSC Trust, 181 (17.9%) in the Southern

<sup>8</sup> See Table 13 for full reporting on the 14 day target for a first assessment with a breast cancer specialist. See Explanatory Notes 1 & 11-13.



HSC Trust, and 166 (16.4%) patients in the Western HSC Trust.

**Figure 9: Number of patients seen for a first assessment with a breast cancer specialist following an urgent referral for suspect breast cancer, by HSC Trust (April - June 2014)**



Between April and June 2014, the number of patients seen in the Belfast, Southern and Western HSC Trusts, decreased, with the Western HSC Trust reporting the largest decrease from 239 to 166.

During this period, the Northern and South Eastern HSC Trusts reported an increase in the number of patients seen, with the Northern HSC Trust reporting the largest increase, from 190 in April 2014 to 263 in June 2014.

### Percentage of patients seen within 14 days, by HSC Trust<sup>9</sup>

The 2014/15 Ministerial target on waiting times for a first assessment with a breast cancer specialist states that, from April 2014, all urgent breast cancer referrals should be seen within 14 days.

<sup>9</sup> See Table 13 for full reporting on the waiting times for a first assessment with a breast cancer specialist. See Explanatory Notes 1-2 & 11-13.

**Figure 10: HSC Trust Performance against the 14 day 2014/15 Ministerial target (April - June 2014)**

HSC Trust	Target Achieved?		
	Apr	May	Jun
Belfast	No	No	No
Northern	No	No	No
Southern	No	No	No
South Eastern	No	No	No
Western	Yes	Yes	Yes
<b>Northern Ireland</b>	<b>No</b>	<b>No</b>	<b>No</b>

The target was not met for Northern Ireland as a whole during April, May and June 2014 (Figure 10).

The Western HSC Trust met the target in all three months of the quarter, whilst all other HSC Trusts failed to meet the target in each of the three months (Table 8).

**Table 8: Percentage of patients seen within 14 days by a breast cancer specialist following an urgent referral for suspect breast cancer in HSC Trusts in Northern Ireland (April - June 2014)**

HSC Trust	Percentage (%) seen within 14 days		
	Apr	May	Jun
Belfast	96.0	83.9	98.6
Northern	16.8	11.1	27.0
Southern	57.3	98.7	61.9
South Eastern	11.9	13.8	20.9
Western	100.0	100.0	100.0
<b>Northern Ireland</b>	<b>63.0</b>	<b>56.2</b>	<b>59.8</b>

During June 2014, 606 (59.8%) of the 1,014 patients given an urgent referral for suspect breast cancer were seen within 14 days. Of the 408 patients not seen within 14 days following an urgent referral for suspect breast cancer, 192 patients were in the Northern HSC Trust, 144 in the South Eastern HSC Trust, 69 in the Southern HSC Trust, and 3 in the Belfast HSC Trust.

In May 2014, 577 (56.2%) of the 1,027 patients given an urgent referral for suspect breast cancer

were seen within 14 days. Of the 450 patients not seen within 14 days following an urgent referral for suspect breast cancer, 240 patients were in the Northern HSC Trust, 175 in the South Eastern HSC Trust, 33 in the Belfast HSC Trust, and 2 in the Southern HSC Trust.

In April 2014, 639 (63.0%) of the 1,015 patients given an urgent referral for suspect breast cancer were seen within 14 days. Of the 376 patients not seen within 14 days following an urgent referral for suspect breast cancer, 158 patients were in the Northern HSC Trust, 126 in the South Eastern HSC Trust, 82 in the Southern HSC Trust, and 10 in the Belfast HSC Trust.

**Percentage of patients seen within 14 days – Monthly trends<sup>9</sup>**

Figure 11 shows the percentage of patients seen within 14 days from April 2009 to June 2014.

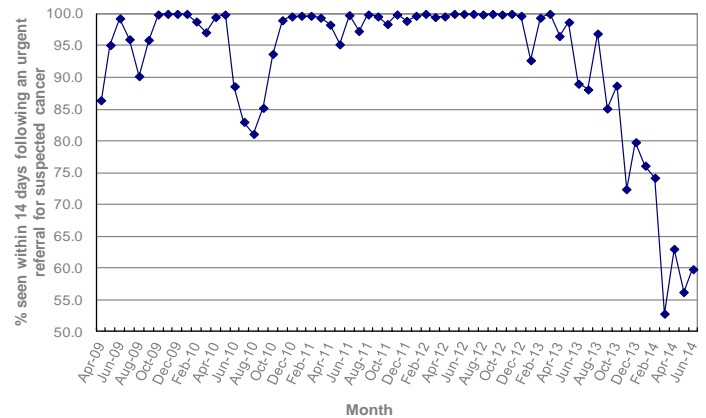
Between April 2009 and December 2009, there was considerable variation in the percentage of patients seen within 14 days. The waiting time position then largely stabilised, with 100% of patients being seen by a breast cancer specialist within 14 days in the months of October 2009 to January 2010. However, between June 2010 and August 2010, there was a decline in performance. From September 2010, performance improved and remained consistently high until January 2013.

Since May 2013, there has been a noticeable downward trend, with the percentage seen within 14 days in March 2014 (52.8%) being the lowest recorded since collection of the waiting times for a first appointment with a breast cancer specialist began in April 2008. The percentage of patients seen within 14 days was 63.0% in April 2014, 56.2% in May 2014 and 59.8% in June 2014.

The poor performance in June 2014 can be mainly attributed to the performance of the South Eastern, Northern and Southern HSC Trusts,

while May 2014's poor performance was largely due to poor performance in the Northern and South Eastern HSC Trusts. The South Eastern, Northern and Southern HSC Trusts mainly contributed to the poor performance in April 2014.

**Figure 11: Percentage of patients seen by a breast cancer specialist within 14 days following an urgent referral for suspect breast cancer (April 2009 - June 2014)**



<sup>9</sup> See Table 13 for full reporting on the waiting times for a first assessment with a breast cancer specialist. See Explanatory Notes 1-2 & 11-13.

**Table 9: Waiting times from an urgent GP referral for suspect cancer to treatment, for all cancers in HSC Trusts in Northern Ireland (April - June 2014)<sup>2</sup>**

HSC Trust	No. of patients first treated for Cancer following an urgent GP referral for Suspected Cancer								
	Treated within 62 days from receipt of Referral			Total			Percentage (%)		
	Apr	May	Jun	Apr	May	Jun	Apr	May	Jun
Belfast	75.0	77.0	61.5	110.0	113.5	83.5	68.2	67.8	73.7
Northern	46.0	44.5	42.5	55.5	59.5	58.0	82.9	74.8	73.3
Southern	35.0	34.0	41.5	41.0	45.5	52.5	85.4	74.7	79.0
South Eastern	36.0	39.0	40.0	50.5	54.5	54.5	71.3	71.6	73.4
Western	43.0	31.5	32.5	48.0	35.0	34.5	89.6	90.0	94.2
<b>Northern Ireland</b>	<b>235</b>	<b>226</b>	<b>218</b>	<b>305</b>	<b>308</b>	<b>283</b>	<b>77.0</b>	<b>73.4</b>	<b>77.0</b>

Source: Cancer Patient Pathway System (CaPPS)

<sup>2</sup>Refer to Explanatory Notes – points 1-5 & 7.

**Table 10: Waiting times from an urgent GP referral for suspect cancer to treatment, by tumour site (April - June 2014)<sup>3</sup>**

Cancer Site	No. of patients first treated for Cancer following an urgent GP referral for Suspected Cancer								
	Treated within 62 days from receipt of Referral			Total			Percentage (%)		
	Apr	May	Jun	Apr	May	Jun	Apr	May	Jun
Brain Central Tumour	0	0	0	0	0	0	-	-	-
Breast Cancer	59	54	55	60	56	58	98.3	96.4	94.8
Gynae Cancers	10	10	12	13	13	23	76.9	76.9	52.2
Haematological Cancers	7	10	5	10	11	5	70.0	90.9	100.0
Head/Neck Cancer	8	7	5	8	16	9	100.0	43.8	55.6
Lower Gastrointestinal Cancer	28	29	17	42	38	22	66.7	76.3	77.3
Lung Cancer	21	22	34	27	34	36	77.8	64.7	94.4
Sarcomas	2	2	0	2	2	0	100.0	100.0	-
Skin Cancers	43	39	43	49	43	49	87.8	90.7	87.8
Upper Gastrointestinal Cancer	17	9	13	24	26	20	70.8	34.6	65.0
Urological Cancer	37	40	32	66	65	57	56.1	61.5	56.1
Other	3	4	2	4	4	4	75.0	100.0	50.0
<b>Northern Ireland</b>	<b>235</b>	<b>226</b>	<b>218</b>	<b>305</b>	<b>308</b>	<b>283</b>	<b>77.0</b>	<b>73.4</b>	<b>77.0</b>

Source: Cancer Patient Pathway System (CaPPS)

<sup>3</sup>Refer to Explanatory Notes – points 1-6 & 14.

**Table 11: Waiting times from decision to treat to treatment for all cancers in HSC Trusts in Northern Ireland (April - June 2014)<sup>6</sup>**

HSC Trust	No. of patients first treated for Cancer								
	Treated within 31 days of a decision to treat being taken			Total			Percentage (%)		
	Apr	May	Jun	Apr	May	Jun	Apr	May	Jun
Belfast	330	303	298	346	318	312	95.4	95.3	95.5
Northern	95	98	108	96	99	108	99.0	99.0	100.0
Southern	84	87	125	88	89	127	95.5	97.8	98.4
South Eastern	98	102	103	100	106	106	98.0	96.2	97.2
Western	94	98	80	94	99	80	100.0	99.0	100.0
<b>Northern Ireland</b>	<b>701</b>	<b>688</b>	<b>714</b>	<b>724</b>	<b>711</b>	<b>733</b>	<b>96.8</b>	<b>96.8</b>	<b>97.4</b>

Source: Cancer Patient Pathway System (CaPPS)

<sup>6</sup>Refer to Explanatory Notes – points 1-2 & 8-9.

**Table 12: Waiting times from decision to treat to treatment, by tumour site (April - June 2014)<sup>7</sup>**

Cancer Site	No. of patients first treated for Cancer								
	Treated within 31 days of a decision to treat being taken			Total			Percentage (%)		
	Apr	May	Jun	Apr	May	Jun	Apr	May	Jun
Brain Central Tumour	13	5	14	13	5	14	100.0	100.0	100.0
Breast Cancer	107	94	104	111	95	105	96.4	98.9	99.0
Gynae Cancers	33	33	43	33	37	44	100.0	89.2	97.7
Haematological Cancers	51	53	51	51	53	51	100.0	100.0	100.0
Head/Neck Cancer	22	30	11	22	34	13	100.0	88.2	84.6
Lower Gastrointestinal Cancer	101	83	101	101	85	102	100.0	97.6	99.0
Lung Cancer	83	100	96	84	101	98	98.8	99.0	98.0
Sarcomas	3	2	1	3	2	1	100.0	100.0	100.0
Skin Cancers	95	84	108	96	89	109	99.0	94.4	99.1
Upper Gastrointestinal Cancer	61	65	61	65	65	66	93.8	100.0	92.4
Urological Cancer	117	124	103	130	130	109	90.0	95.4	94.5
Other	15	15	21	15	15	21	100.0	100.0	100.0
<b>Northern Ireland</b>	<b>701</b>	<b>688</b>	<b>714</b>	<b>724</b>	<b>711</b>	<b>733</b>	<b>96.8</b>	<b>96.8</b>	<b>97.4</b>

Source: Cancer Patient Pathway System (CaPPS)

<sup>7</sup>Refer to Explanatory Notes – points 1-2, 8-10 & 14.

**Table 13: Waiting times from referral to a first assessment with a breast cancer specialist in HSC Trusts in Northern Ireland (April - June 2014)<sup>9</sup>**

	No. of patients first seen by a breast cancer specialist following an urgent referral for suspect cancer								
	No. that waited 14 days or less			Total			Percentage (%)		
	Apr	May	Jun	Apr	May	Jun	Apr	May	Jun
Belfast	241	172	219	251	205	222	96.0	83.9	98.6
Northern	32	30	71	190	270	263	16.8	11.1	27.0
Southern	110	154	112	192	156	181	57.3	98.7	61.9
South Eastern	17	28	38	143	203	182	11.9	13.8	20.9
Western	239	193	166	239	193	166	100.0	100.0	100.0
<b>Northern Ireland</b>	<b>639</b>	<b>577</b>	<b>606</b>	<b>1,015</b>	<b>1,027</b>	<b>1,014</b>	<b>63.0</b>	<b>56.2</b>	<b>59.8</b>

Source: Departmental Return SDR 2.

<sup>9</sup>Refer to Explanatory Notes – points 1-2 & 11-13.

## Appendix 1: Explanatory Notes

1. The sources for the data contained in this release are the Departmental Return SDR2 and the Cancer Patient Pathway System (CaPPS).
2. The 2014/15 Ministerial Targets for cancer waiting times, as detailed in the Health and Social Care (Commissioning Plan) Direction (Northern Ireland) 2014, state that, (i) from April 2014, at least 95% of patients should begin their first treatment for cancer within 62 days following an urgent GP referral for suspect cancer; (ii) at least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat; and (iii) all urgent breast cancer referrals should be seen within 14 days.
3. Data contained in Tables 1, 2, 3, 9, and 10 relate to all patients who received a first definitive treatment for cancer (having been given an ICD 10 diagnosis) during the months of April, May and June 2014, following an urgent referral for suspect cancer from a General Practitioner, and routine GP referrals that have subsequently been reclassified as urgent by a cancer specialist. Data relate to urgent GP referrals for all cancer with the exception of basal cell carcinoma. Figures also include all patients living outside Northern Ireland and all privately funded patients waiting for treatment in Health and Social Care hospitals. Referrals from sources other than a GP, routine referrals from a GP and patients who have not been given an ICD 10 diagnosis are excluded.
4. The completed waiting time in Tables 1, 2, 3, 9, and 10 is measured from the date an initial urgent referral for suspect cancer from a GP is received by the Provider Health and Social Care Trust and ends on the date the patient received their first definitive treatment for cancer. Adjustments are made to the completed waiting time in the event of a patient cancelling or self deferring treatment or as a result of suspension for either medical or social reasons.
5. The measurement of a patient's waiting time in Tables 1, 2, 3, 9, and 10, from an initial urgent GP referral to first definitive treatment, includes cases in which a patient was initially referred to a particular Health and Social Trust for consultant assessment but was then subsequently transferred to another Health and Social Care Trust for treatment. In such cases, the responsibility for reporting that patient is shared, with 0.5 allocated to the Trust where the patient was first seen for assessment and 0.5 to the Trust of first treatment. For example, if a patient is initially referred for assessment in the South Eastern HSC Trust and is then transferred to the Belfast HSC Trust where they receive treatment 50 days after their initial GP referral, both the South Eastern and Belfast HSC Trusts will both report 0.5 of a patient waiting less than 62 days. Similarly, if such a patient waited over 62 days for treatment, both the Trust where the patient was first seen and the Trust where the patient was first treated would report 0.5 of a patient waiting more than 62 days.
6. Tables 3 and 10 reflect the number of patients that were treated in 62 days or less for each tumour site. Tumour sites are an aggregation of applicable ICD 10 codes.
7. Between April 2008 and February 2009, the target relating to waiting time for treatment following an urgent GP referral for suspect cancer required that 'at least 75% of patients urgently referred with a suspect cancer should begin their first definitive treatment within 62 days of urgent GP referral'. From March 2009 onwards this target increased to 95% of patients.
8. Data contained in Tables 4, 5, 6, 11 and 12 relate to patients who received a first definitive treatment for cancer (having been given an 'International Classification of Diseases 10' diagnosis) during the months of April, May and June 2014, irrespective of their source of referral. Data include treatment for all cancers, with the exception of basal cell carcinoma. Figures also include all patients living outside Northern Ireland and all privately funded patients waiting for treatment in Health and Social Care hospitals. Patients that have not been given an ICD 10 diagnosis are excluded.

9. The completed waiting time in Tables 4, 5, 6, 11 and 12 is measured from the date a decision was taken to treat a patient for cancer and ends on the date the patient received their first definitive treatment for cancer. Adjustments are made to the completed waiting time in the event of a patient cancelling or self-deferring treatment or as a result of suspension for either medical or social reasons.
10. Tables 6 and 12 reflect the number of patients that were treated in 31 days or less for each tumour site. Tumour sites are an aggregation of applicable ICD 10 codes.
11. Data contained in Tables 7, 8 and 13 relates to all urgent referrals (excluding those that have been reclassified as routine by the breast specialist) for suspect breast cancer, and routine referrals that have subsequently been reclassified as urgent by a breast specialist, and that were first seen during the months of April, May and June 2014. Figures also include all patients living outside Northern Ireland and all privately funded patients waiting for treatment in Health and Social Care hospitals.
12. The completed waiting time in Tables 7, 8 and 13 is measured from the date an initial breast cancer referral is first received by the Provider HSC Trust, and ends on the date that the patient attended their first outpatient appointment with a breast cancer specialist. Adjustments are made to the completed waiting time in the event of a patient cancelling or failing to attend a first outpatient appointment.
13. Figures provided in Tables 7, 8 and 13 reflect all urgent referrals for breast cancer both from GP's and other practitioners.
14. Information on the grouping of ICD 10 codes by tumour site is available from Hospital Information Branch on request.
15. HIB surveyed data user 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 £2,378.
16. Monthly data relating to cancer waiting times have also been presented in spreadsheet format (Microsoft Excel), split by HSC Trust, and where applicable tumour site, in order to aid secondary analysis. These data are available at [http://www.dhsspsni.gov.uk/index/waiting\\_times\\_main.htm](http://www.dhsspsni.gov.uk/index/waiting_times_main.htm)
17. Information on waiting times for the months of July, August and September 2014 will be published on Wednesday 7<sup>th</sup> January 2014.
18. Data contained within this publication are National Statistics.

## Appendix 2: Data in the publication

### General guidance on using the data

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

### Number of patients who commenced treatment for cancer following an urgent GP referral for suspect cancer

#### Description of data

Data on the number of health service patients who commenced treatment for cancer at a Health and Social Care (HSC) Trust in Northern Ireland, following an urgent GP referral for suspect cancer being made.

#### Data provider

Data on patients treated within HSC Trusts are sourced directly from the regional Cancer Patient Pathway System (CaPPS) via the HSC Data Warehouse.

#### Data quality assessment

Very good – data are derived from a single administrative system, the Cancer Patient Pathway System (CaPPS), at each HSC Trust. While data are extracted centrally by HIB, using a regionally consistent and agreed methodology, data providers have been given in-depth guidance outlining how these data are extracted and providing instructions for the validation and final clearance of data. Validation checks are employed as an integral part of the production process, with duplicate records, incomplete records and negative waiting times all being queried with the provider. Records for patients waiting more than 62 days for treatment, following an urgent GP referral for suspect cancer, are also validated with data providers to ensure accuracy. Any inaccuracies are corrected on CaPPS prior to final extraction. Data are returned to each provider for final clearance prior to publication.

#### Guidance on using data

- Number of patients treated for cancer following a GP referral for suspect cancer – these data relate to the total number of patients who commenced treatment for cancer having been urgently referred by a GP with suspect cancer, or who received a routine referral from a GP that was then subsequently reclassified as urgent by a cancer specialist. Treatment relates to surgery, drug therapy (chemotherapy, biological therapy or hormone therapy), radiotherapy, specialist palliative care (SPC) and active monitoring. These data should not be used as an indication of the number of patients who commenced treatment for cancer in Northern Ireland each month as they do not include all patients treated, but only those who had initially been urgently referred by a GP to a HSC Trust with suspect cancer. ((It does not include patients who were referred for a more routine condition but who following investigation were found to have cancer (these are known as incidental diagnoses)). The data do not relate to either the number of patients urgently referred by a GP with suspect cancer, who are currently on treatment, or the number of patients diagnosed with cancer during each month. The data do provide a good indication of both quantifiable demand for cancer services from the primary care sector (General Practitioners) and the performance and management of cancer patients within the secondary care sector (i.e. HSC hospitals), as they measure the waiting time for treatment for patients who enter secondary care services with suspect cancer.
- Number of patients who commenced treatment within 62 days of an urgent suspect cancer referral from a GP - this information relates to the number of patients who commenced treatment within 62 days of an urgent referral from a GP for suspect cancer being received by a HSC Trust (or who received a routine referral from a GP that was then subsequently reclassified as urgent by a cancer specialist). Explanatory note three explains how these waiting times are measured. This information relates to how long patients had waited to commence treatment following receipt of an urgent referral from a GP for suspect cancer



(their completed wait), not the length of time they are currently waiting to commence treatment. Data on the length of time these specific patients are currently waiting to commence treatment are not collected.

- Percentage of patients who commenced treatment within 62 days – this is the percentage of the total number of patients who commenced treatment in any given month, following receipt of an urgent referral from a GP for suspect cancer (or who received a routine referral from a GP that was then subsequently reclassified as urgent by a cancer specialist), who waited no longer than 62 days to commence their treatment. This information enables users to assess the performance of HSC Trusts against the 2012/13 Ministerial target requiring the HSC Board and HSC Trusts to ensure that from April 2012, at least 95% of patients commence cancer treatment within 62 days of receipt of an urgent referral from a GP for suspect cancer.
- Waiting time for treatment by HSC Trust – patients will receive their treatment within a specific HSC Trust. While this will be the HSC Trust at which the decision to treat is taken, it is not necessarily the HSC Trust to which the patient was referred, or the nearest HSC Trust to the patient's residence, for in the case of numerous cancer services, treatments are provided at specialist centres such as the regional cancer centre for Northern Ireland at the Belfast HSC Trust. In circumstances where a patient has been referred to one HSC Trust, and transferred for treatment at another (known as inter HSC Trust transfers), reporting of the patient will be split between the two HSC Trusts. Consequently these data do not necessarily relate to the total number of patients treated at each HSC Trust. A full explanation of the methodology used to report these waiting times by HSC Trust is outlined in explanatory note four of this publication. While users should therefore be cautious in how they use these data, they are useful in gauging individual HSC Trust performance against the 2014/15 Ministerial target. Again, they should not be used to assess the number of patients, initially urgently referred by a GP with suspect cancer, who were either diagnosed with cancer, or are currently being treated for cancer within each HSC Trust area.
- Waiting time for treatment by tumour site – patients being treated for cancer will have previously been diagnosed with cancer and given an 'International Classification of Disease 10' diagnosis. The ICD 10 code will relate to the specific type of cancer the patient has been diagnosed with. ICD 10 codes have been aggregated upon clinical advice, creating a list of tumour sites, essentially the part of the body at which the cancer has occurred. These data relate to the length of time patients with each type of cancer waited for treatment following receipt of an urgent GP referral for suspect cancer. Again, they should not be used to estimate the number of patients diagnosed with each of these cancers, but do provide an indication of waiting time performance within the secondary care sector for different types of cancer.

## **Number of patients who commenced treatment for cancer following a decision to treat for cancer being taken**

### **Description of data**

Data on the number of health service patients who commenced treatment for cancer at a Health and Social Care (HSC) Trust in Northern Ireland, following a decision to treat for cancer being taken.

### **Data provider**

Data on patients treated within HSC Trusts are sourced directly from the regional Cancer Patient Pathway System (CaPPS) via the HSC Data Warehouse.

### **Data quality assessment**

Very good – data are derived from a single administrative system, the Cancer Patient Pathway System (CaPPS), at each HSC Trust. While data are extracted centrally by HIB, using a regionally consistent and agreed methodology, data providers have been given in-depth guidance outlining how these data are extracted and provided with instructions for the validation and final clearance of data. Validation checks are employed as

an integral part of the production process, with duplicate records, incomplete records and negative waiting times all being queried with the provider. Records for patients waiting more than 31 days for treatment, following decision to treat being taken, are also validated with data providers to ensure accuracy. Any inaccuracies are corrected on CaPPS prior to final extraction. Data are returned to each provider for final clearance prior to publication.

### **Guidance on using data**

- Number of patients treated for cancer following a decision to treat for cancer being taken – these data relate to the total number of patients who commenced treatment for cancer following a cancer specialist (as part of Multi Disciplinary Team) taking a decision to treat the patient for cancer. These data can be used as an indication of the number of patients who commenced treatment for cancer in Northern Ireland each month. Treatment relates to surgery, drug therapy (chemotherapy, biological therapy or hormone therapy), radiotherapy, specialist palliative care (SPC) and active monitoring. As they include all patients treated, they relate not only to patients referred to a HSC Trust with suspect cancer, but also patients who were referred for a more routine condition but who following investigation were found to have cancer (these are known as incidental diagnoses). The data do not relate to either the number of patients currently on treatment, or the number of patients diagnosed with cancer during each month.
- Number of patients who commenced treatment within 31 days of a decision to treat for cancer being taken – this information relates to the number of patients who commenced treatment within 31 days of the decision to treat for cancer being taken. Explanatory note nine explains how these waiting times are measured. This information relates to how long patients had waited to commence treatment following a decision to treat being taken (their completed wait), not the length of time they are currently waiting to commence treatment. Data on the length of time these specific patients are currently waiting to commence treatment are not collected.
- Percentage of patients who commenced treatment within 31 days – this is the percentage of the total number of patients who commenced treatment in any given month, following a decision to treat being taken, who waited no longer than 31 days to commence their treatment.
- Waiting time for treatment by HSC Trust – patients will receive their treatment within a specific HSC Trust. While this will be the HSC Trust at which the decision to treat is taken, it is not necessarily the HSC Trust to which the patient was referred, or the nearest HSC Trust to the patient's residence, for in the case of numerous cancer services, treatments are provided at specialist centres such as the regional cancer centre for Northern Ireland at the Belfast 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 treated per head of the population within each HSC Trust area, neither do they relate to the number of patients diagnosed with cancer within each HSC Trust area.
- Waiting time for treatment by tumour site – patients being treated for cancer will have previously been diagnosed with cancer and given an 'International Classification of Disease 10' diagnosis. The ICD 10 code will relate to the specific type of cancer the patient has been diagnosed with. ICD 10 codes have been aggregated upon clinical advice, creating a list of tumour sites, essentially the part of the body at which the cancer has occurred. These data relate to the length of time patients with each type of cancer waited for treatment following a decision to treat. Again, they should not be used to estimate the number of patients diagnosed with each of these cancers, but do provide an indication of waiting time performance for different types of cancer.

## **Number of patients who attended a first assessment with a breast cancer specialist, following an urgent referral for suspect breast cancer**

### **Description of data**

Data on the number of health service patients who were seen for a first assessment with a breast cancer specialist following an urgent referral for suspect breast cancer, 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 SDR2.

### **Data quality assessment**

Very good – data are derived from a single administrative system, the Patient Administration System (PAS), at each HSC Trust. Data providers have been given in-depth guidance providing instructions for recording, collection and submission of data. Data are returned to each provider for final clearance prior to publication.

### **Guidance on using data**

- Number of patients seen by a breast cancer specialist following an urgent referral for suspect cancer – this relates to the number of patients who attended a first outpatient appointment, for assessment by a consultant who is a breast cancer specialist, at a HSC Trust in Northern Ireland. Data relates solely to patients who were referred as urgent with suspect breast cancer. All sources of referral are included, referrals from both General Practitioners and other medical professionals. The data do not relate to the number of patients who have been diagnosed with breast cancer, nor should it be used to estimate the number who commenced treatment for breast cancer – some of the patients included within these figures may not be subsequently diagnosed with breast cancer.
- Number of patients who waited 14 days or less for an assessment with a breast cancer specialist – this relates to the number of those urgently referred with suspect breast cancer who attended their assessment within 14 calendar days of the referral being received by the HSC Trust. Explanatory note thirteen explains how these waiting times are measured. This information relates to how long patients had waited for their first assessment (their completed wait), not the length of time they are currently waiting for their first assessment. Data on the length of time these specific patients are currently waiting before attending their first outpatient appointment with a breast cancer specialist are not collected, although their current waiting time will be included within the overall outpatient waiting time data collected and published by the Department for all specialties.
- Percentage of patients seen within 14 days – this is the percentage of the total number of patients assessed in any given month, who waited no longer than 14 days for their assessment.
- Waiting times for a first assessment with a breast cancer specialist by HSC Trust – patients will be referred to a specific HSC Trust for assessment. Patients are reported by the HSC Trust responsible for the service to which the patient has been referred. This is not necessarily the nearest HSC Trust to the patient's residence, but will most likely be the HSC Trust within which the referrer i.e. the patient's GP is located.

**Further information** on cancer waiting times in Northern Ireland, is available from:

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