



NORTHERN IRELAND WAITING TIME STATISTICS: CANCER WAITING TIMES

January - March 2014

This statistics release gives details of the waiting times for patients accessing cancer services at hospitals in Northern Ireland during January, February and March 2014. It reports on the performance of Health and Social Care Trusts against the 2013/14 Ministerial target for treatment of cancer following an urgent GP referral for suspect cancer in Northern Ireland. All data are provided by Health and Social Care Trust and, where applicable, by Tumour Site.

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Theme:

Cancer Waiting Times in Northern Ireland

Issued by

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Background

The Ministerial target for 2013/14 requires that:

'95% of patients should begin their first treatment for cancer within 62 days following an urgent GP referral for suspect cancer'.

In addition, this statistical release also reports on the 2013/14 Ministerial indicators of performance for cancer waiting times, which refer to:

- (i) *the percentage of patients receiving first definitive treatment within 31 days of a cancer diagnosis; and,*
- (ii) *the percentage of patients seen within 14 days of an urgent referral for breast cancer.*

Key Points

- The waiting time position in Northern Ireland remains much lower than the 95% target. In March 2014, 79.1% of patients were treated within 62 days, with 79.1% treated within 62 days in February 2014, and 78.5% in January 2014 (Table 9).
- A total of 97.4% of patients in March 2014 were treated within 31 days of a decision to treat being taken. The percentage of patients treated within 31 days was 96.3% in February 2014 and 97.4% in January 2014 (Table 11).
- In March 2014, 52.8% of patients waiting for a first assessment with a breast cancer specialist following an urgent breast cancer referral were seen within 14 days. There were 74.2% of patients seen within 14 days in February 2014 and 76.1% seen within 14 days in January 2014 (Table 13).

Reader Information

Purpose	Details information on the waiting times for cancer services in Northern Ireland, and reports on the performance of Health and Social Care Trusts in Northern Ireland, measured against the 2013/14 Ministerial target for treatment for cancer following an urgent GP referral for suspect cancer.
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Statistical Quality	Information detailed in this release has been quality assured with HSC Trusts prior to release.
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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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

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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 2013/14 Ministerial target for treatment for cancer following an urgent GP referral for suspect cancer. 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 the methodologies that should be used in the collection, reporting and validation of each of these data returns. These documents can be accessed at the following link:

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 below.

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

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

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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Northern Ireland Cancer Waiting Times

Cancer services

Data contained in this publication relates to waiting times for patients accessing cancer services at hospitals in Northern Ireland during January, February and March 2014.

Number of patients treated following an urgent GP referral for suspect cancer¹

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 January, February and March 2014, by HSC Trust.

Table 1: Number of patients first treated for cancer following an urgent GP referral for cancer: January to March 2014

	No. of Patients first treated for Cancer following an urgent GP referral		
	Jan	Feb	Mar
Belfast	107.0	74.5	82.0
Northern	57.0	49.5	46.0
Southern	42.5	44.5	44.0
South Eastern	48.5	55.5	63.5
Western	47.0	34.0	41.5
Northern Ireland	302	258	277

In March 2014, 277 patients were treated for cancer following an urgent GP referral for suspect cancer, across Northern Ireland. This represented an increase from the 258 patients treated in February 2014, and a decrease from the 302 patients treated in January 2014.

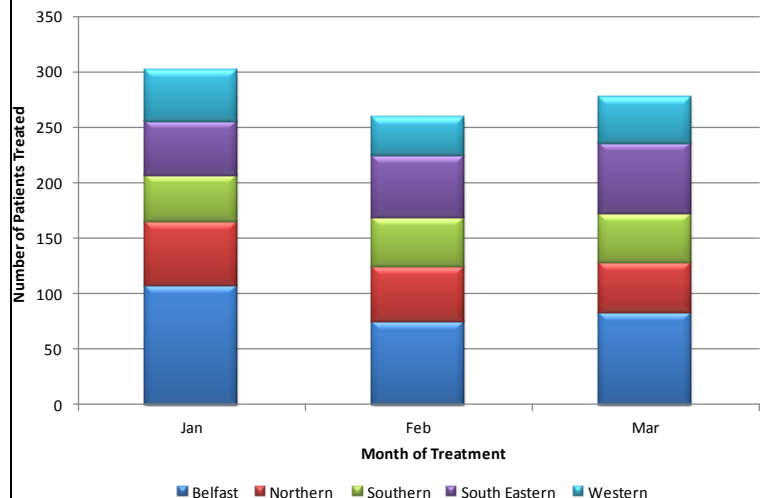
¹ See Tables 9 and 10 for full reporting on the 62 day target for treatment following an urgent GP referral for suspect cancer. See Explanatory Notes 1-7

Number of patients treated following an urgent GP referral for suspect cancer, by HSC Trust¹

In March 2014, of the 277 patients treated for cancer following an urgent GP referral, almost a third (82, 29.6%) were treated in Belfast HSC Trust.

A further 63.5 (22.9%) patients were treated in South Eastern HSC Trust, 46 (16.6%) patients were treated in Northern HSC Trust, 44 (15.9%) were treated in Southern HSC Trust, and 41.5 (15.0%) patients were treated in Western HSC Trust.

Figure 1: Number of patients receiving a first definitive treatment for cancer following an urgent GP referral for suspect cancer: January to March 2014



The Belfast, South Eastern, and Western HSC Trusts saw increases in the number of patients treated in March 2014 when compared to February 2014, with the greatest increase seen in the Western HSC Trust, which treated 41.5 patients in March 2014, compared to 34.0 in February 2014.

The Northern and Southern HSC Trusts saw decreases in the number of patients treated in March 2014 when compared to February 2014, with the greatest decrease seen in the Northern HSC Trust, which treated 46.0 patients in March 2014 compared to 49.5 patients in February 2014.

The Southern and South Eastern HSC Trusts saw increases in the number of patients treated in March 2014 when compared to January 2014, with

the greatest increase seen in the South Eastern HSC Trust, which treated 63.5 patients in March 2014 compared to 48.5 in January 2014.

The Belfast, Northern and Western HSC Trusts all saw decreases in the number of patients treated, with the greatest decrease seen in the Belfast HSC Trust, which treated 82.0 patients in March 2014 compared to 107.0 in January 2014.

Percentage of patients treated within 62 days following an urgent GP referral for suspect cancer, by HSC Trust¹

The 2013/14 Ministerial target relating to waiting times for treatment following an urgent GP referral for suspect cancer requires that, from April 2014, 95% of patients should begin their first treatment within 62 days.

Figure 2: HSC Trust Performance against the 62 day 2013/14 Ministerial target: January to March 2014

HSC Trust	Target Achieved?		
	Jan	Feb	Mar
Belfast	No	No	No
Northern	No	No	No
Southern	No	No	No
South Eastern	No	No	No
Western	No	No	No
Northern Ireland	No	No	No

The 2013/14 Ministerial target was not met for Northern Ireland as a whole during the months of January, February and March 2014 (Figure 2).

All of the 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 94.0% of patients within 62 days in March 2014.

¹ 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 1-7

Table 2: Percentage of patients receiving a first definitive treatment for cancer following an urgent GP referral for suspect cancer, by HSC Trust: January to March 2014

	Percentage (%) Treated within 62 days from Receipt of Referral		
	Jan	Feb	Mar
Belfast	72.9	77.2	79.3
Northern	81.6	84.8	76.1
Southern	88.2	84.3	73.9
South Eastern	67.0	67.6	74.8
Western	90.4	86.8	94.0
Northern Ireland	78.5	79.1	79.1

During March 2014, of the 277 patients that commenced treatment for cancer following an urgent referral for suspect cancer (including routine referrals subsequently reclassified as urgent by a cancer specialist), 219 (79.1%) were treated within 62 days. Of the 58 patients that were not treated within 62 days, there was the equivalent of 17.0 in the Belfast HSC Trust, 16.0 in the South Eastern HSC Trust, 11.5 in the Southern HSC Trust, 11.0 in the Northern HSC Trust, and 2.5 in the Western HSC Trust.

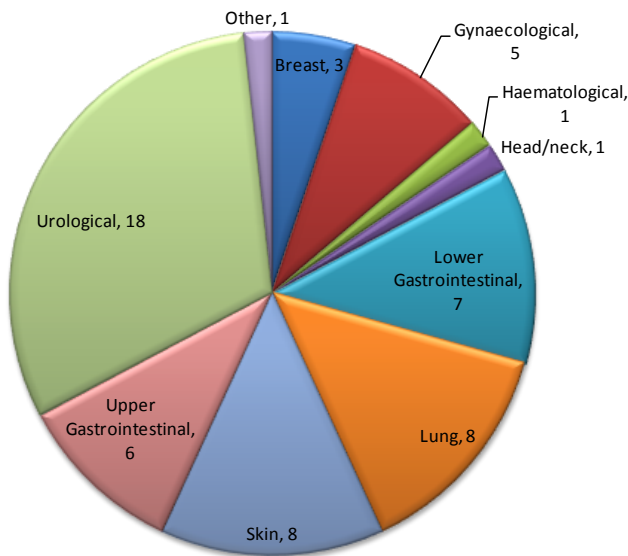
In February 2014, 204 (79.1%) of a total of 258 patients were treated within 62 days. Of the 54 patients that were not treated within 62 days, there was the equivalent of 18.0 in the South Eastern HSC Trust, 17.0 in the Belfast HSC Trust, 7.5 in the Northern HSC Trust, 7.0 in the Southern HSC Trust, and 4.5 in the Western HSC Trust.

In January 2014, 237 (78.5%) out of 302 patients were treated within 62 days. Of the 65 patients that were not treated within 62 days, there was the equivalent of 29.0 in the Belfast HSC Trust, 16.0 in the South Eastern HSC Trust, 10.5 in the Northern HSC Trust, 5.0 in the Southern HSC Trust, and 4.5 in the Western HSC Trust.

Percentage of patients treated within 62 days following an urgent GP referral for suspect cancer, by tumour site²

Figure 3, Tables 3 and 10 together report the waiting times by tumour site during the months of January, February and March 2014.

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



During March 2014, 58 of the 277 patients waited longer than 62 days for treatment following an urgent GP referral for suspect cancer. Of the 58 patients, 18 were diagnosed with urological cancer, 8 with skin cancer, 8 with lung cancer, 7 with lower gastrointestinal cancer, 6 were diagnosed with upper gastrointestinal cancer, 5 with gynaecological cancer, 3 with breast cancer, 1 with head/neck cancer, 1 with haematological cancer, and 1 with a cancer classified as 'other'.

² 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 1-7 & 16

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: January to March 2014

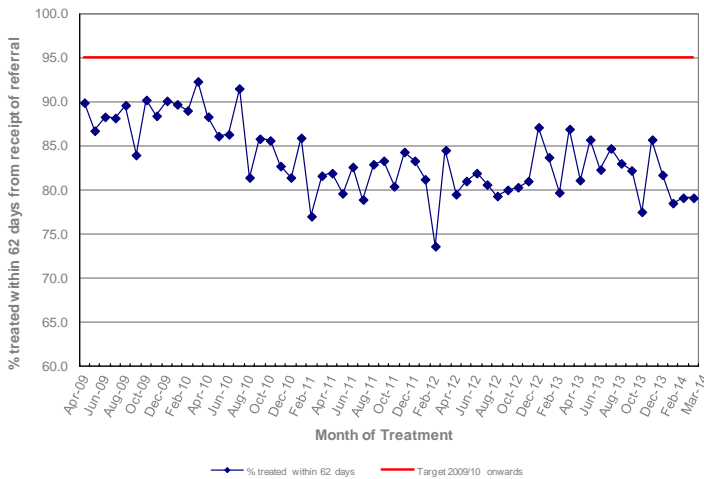
	Percentage (%) treated within 62 days from Receipt of Referral		
	Jan	Feb	Mar
Brain Central Tumour	0.0	-	-
Breast Cancer	98.1	100.0	94.6
Gynae Cancers	75.0	80.0	75.0
Haematological Cancers	75.0	84.6	87.5
Head/Neck Cancer	61.1	85.7	88.9
Lower Gastrointestinal Cancer	60.6	64.3	65.0
Lung Cancer	85.7	80.0	74.2
Sarcomas	66.7	0.0	0.0
Skin Cancers	86.0	80.9	82.6
Upper Gastrointestinal Cancer	60.0	61.1	60.0
Urological Cancer	81.7	71.9	73.5
Other	50.0	50.0	75.0
Northern Ireland	78.5	79.1	79.1

Waiting times for treatment following an urgent GP referral for suspect cancer – Monthly Trends¹

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

¹ 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 1-7

Figure 4: Percentage of patients treated within 62 days following an urgent GP referral for suspect cancer – April 2009 to March 2014



Reporting of a target for treatment following an urgent GP referral for suspect cancer began in April 2008 and, until August 2010, the percentage of patients seen within 62 days fluctuated between 83% and 93%, with no consistent trends emerging. However, from July 2010 the waiting time position deteriorated, with only 77.0% of patients seen within 62 days in February 2011. Performance against the target showed only minimal improvement during the rest of 2011, and declined once again in February 2012, reaching its all-time lowest point with only 73.6% of patients treated within 62 days.

Performance improved in March 2012, with 84.5% of patients treated within 62 days, before falling again to 79.5% in April 2012. The percentage treated within 62 days fluctuated slightly in subsequent months, with figures ranging between 79.3% and 81.9% between May and November 2012. The percentage treated within 62 days in December 2012 (87.1%) was the highest seen since July 2010, when 91.5% of patients were treated within 62 days.

Between December 2012 and July 2013, the percentage treated within 62 days continued to fluctuate. This was then followed by a decline in performance between July 2013 and October 2013. The percentage treated within 62 days in October 2013 (77.5%) was the lowest percentage treated since February 2012 (73.6%). There was an

improvement in performance in November 2013 (85.7%), followed by a decline, with the percentage of patients seen within 62 days being 78.5% in January 2014 and 79.1% in both February and March 2014.

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.

Number of patients treated following a decision to treat³

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 the months of January, February and March 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: January to March 2014

	No. of Patients first treated for cancer following decision to treat		
	Jan	Feb	Mar
Belfast	349	280	293
Northern	113	101	91
Southern	117	91	96
South Eastern	109	116	122
Western	88	85	89
Northern Ireland	776	673	691

In March 2014, 691 patients were treated for cancer in Northern Ireland, following a decision to treat for cancer. This represented an increase from the 673 patients treated in February 2014, and a decrease from the 776 patients treated in January 2014.

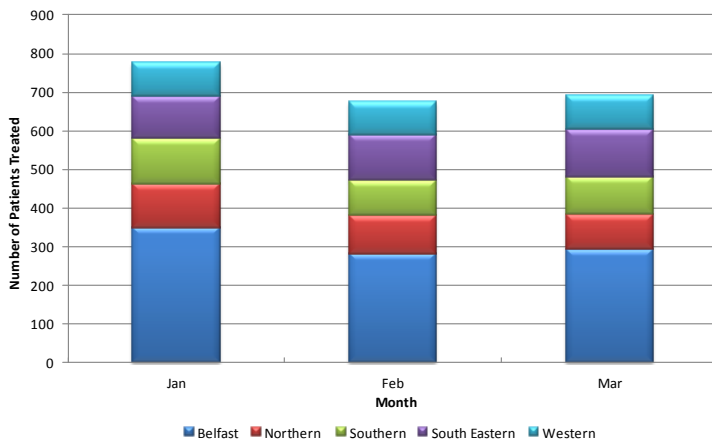
³ See Tables 11 and 12 for full reporting on the waiting times for treatment following a decision to treat. See Explanatory Notes 1 & 8-11.

Number of patients treated following a decision to treat, by HSC Trust³

Of the 691 patients who received treatment for cancer in March 2014, over two fifths (42.4%, 293) were treated in the Belfast HSC Trust.

A further 122 (17.7%) patients were treated in South Eastern HSC Trust, 96 (13.9%) patients were treated in Southern HSC Trust, 91 (13.2%) were treated in Northern HSC Trust, and 89 (12.9%) patients were treated in Western HSC Trust.

Figure 5: Number of patients receiving a first definitive treatment for cancer following a decision to treat, by HSC Trust: January to March 2014



All HSC Trusts except the Northern HSC Trust reported increases in the number of patients treated in March 2014 when compared to February 2014, with the greatest increase seen in the Southern HSC Trust, who treated 96 patients in March 2014, compared to 91 in February 2014.

The Northern HSC Trust reported a decrease in the number of patients treated, with 91 patients treated in March 2014 compared to 101 in February 2014.

All HSC Trusts except the South Eastern and Western HSC Trusts reported decreases in the number of patients treated in March 2014 compared to January 2014, with the greatest decrease seen in

the Northern HSC Trust, which treated 91 patients in March 2014, compared to 113 patients in January 2014.

The South Eastern HSC Trust treated 122 patients in March 2014 compared to 109 in January 2014.

2013/14 Indicator of performance for waiting times for treatment³

The 2013/14 Ministerial indicator of performance relating to waiting times for cancer treatment refers to the percentage of patients receiving a first definitive treatment within 31 days of a cancer diagnosis, and a decision to treat being taken.

Percentage of patients treated within 31 days following a decision to treat, by HSC Trust³

During March 2014, 691 patients commenced treatment for cancer following a decision to treat being taken, with 673 (97.4%) treated within 31 days. Of the 18 patients that waited longer than 31 days, 9 were in the Belfast HSC Trust, 5 were in the Southern HSC Trust, and 4 were in the South Eastern HSC Trust.

In February 2014, 648 (96.3%) of the 673 patients that commenced treatment, did so within 31 days. Of the 25 patients not treated within 31 days, 17 were in the Belfast HSC Trust, 7 were in the South Eastern HSC Trust, and 1 was in the Southern HSC Trust.

In January 2014, 756 (97.4%) of the 776 patients that commenced treatment, did so within 31 days. Of the 20 patients that waited longer than 31 days for treatment, 14 were in the Belfast HSC Trust, 3 were in the South Eastern HSC Trust, 2 were in the Southern HSC Trust, and 1 was in the Northern HSC Trust.

³ See Tables 11 and 12 for full reporting on the waiting times for treatment following a decision to treat. See Explanatory Notes 1 & 8-11.

Table 5: Percentage of patients receiving a first definitive treatment for cancer within 31 days following a decision to treat, by HSC Trust: January to March 2014

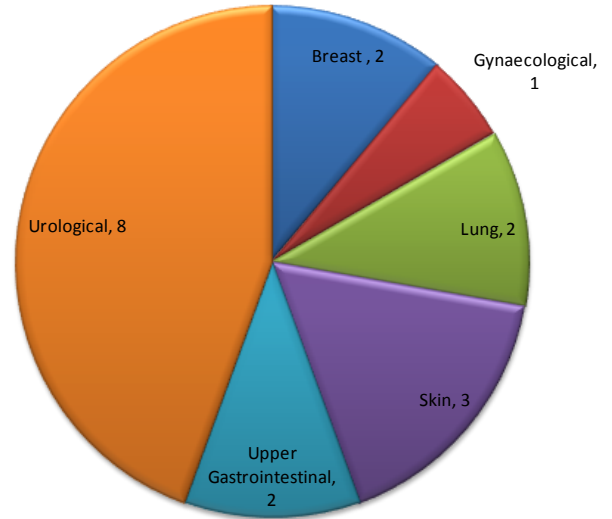
	Percentage (%) treated within 31 days of a decision to treat being		
	Jan	Feb	Mar
Belfast	96.0	93.9	96.9
Northern	99.1	100.0	100.0
Southern	98.3	98.9	94.8
South Eastern	97.2	94.0	96.7
Western	100.0	100.0	100.0
Northern Ireland	97.4	96.3	97.4

All Trusts treated at least 93.9% of patients within 31 days of a decision to treat being taken during the months of January, February and March 2014. The Western HSC Trust treated 100% of patients within 31 days in each of the three months, and the Northern HSC Trust treated 100% of patients within 31 days in February and March 2014.

Percentage of patients treated within 31 days following a decision to treat, by tumour site⁴

Figure 6, Tables 6 and 12 together report on the waiting times for treatment following a decision to treat being taken, by tumour site, for the months of January, February and March 2014.

Figure 6: Number of patients waiting over 31 days for treatment following a decision to treat, by tumour site in March 2014



During March 2014, 18 patients waited longer than 31 days for treatment following a decision to treat being taken. Of these 18, 8 were diagnosed with urological cancer, 3 with skin cancer, 2 with lung cancer, 2 with breast cancer, 2 with upper gastrointestinal cancer, and 1 with gynaecological cancer.

³ See Tables 11 and 12 for full reporting on the waiting times for treatment following a decision to treat. See Explanatory Notes 1 & 8-11.

⁴ See Explanatory Notes 1, 8-11 & 16

Table 6: Percentage of patients receiving a first definitive treatment for cancer within 31 days following a decision to treat, by tumour site: January to March 2014

Cancer Site	Percentage (%) treated within 31 days of a decision to treat being taken		
	Jan	Feb	Mar
Brain Central Tumour	100.0	100.0	100.0
Breast Cancer	98.1	100.0	98.2
Gynae Cancers	93.8	97.0	97.9
Haematological Cancers	100.0	100.0	100.0
Head/Neck Cancer	100.0	100.0	100.0
Lower Gastrointestinal Cancer	98.2	98.8	100.0
Lung Cancer	97.8	93.8	97.8
Sarcomas	100.0	100.0	100.0
Skin Cancers	96.9	90.5	96.6
Upper Gastrointestinal Cancer	98.6	96.8	96.4
Urological Cancer	94.1	94.1	93.8
Other	100.0	100.0	100.0
Northern Ireland	97.4	96.3	97.4

Patients waiting for treatment following a decision to treat – Monthly trends³

Figure 7 shows the monthly trends of the percentage of patients treated within 31 days of a decision to treat being taken, from April 2009 to March 2014.

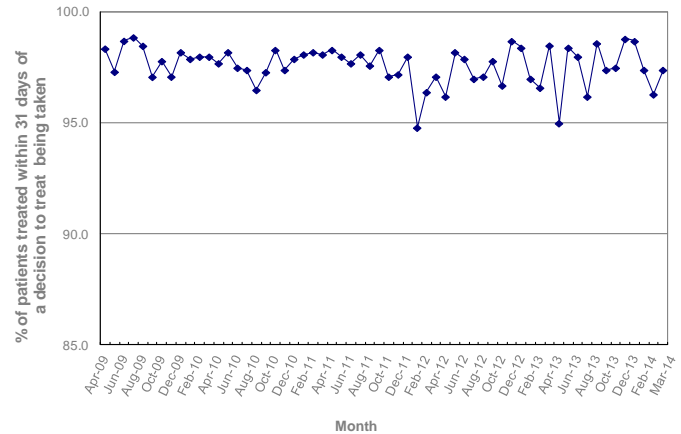
The percentage of patients treated within 31 days, following a decision to treat, has fluctuated slightly over the years, but never fallen below 90%.

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 and into 2013/14. The percentage of patients treated within 31 days

³ See Tables 11 and 12 for full reporting on the waiting times for treatment following a decision to treat. See Explanatory Notes 1 & 8-11.

was 97.4% in January 2014, 96.3% in February 2014 and 97.4% in March 2014.

Figure 7: Percentage of patients treated within 31 days of a decision to treat – April 2009 to March 2014



Number of patients seen for a first assessment with a breast cancer specialist⁵

Figure 8, Tables 7 and 13 together report on the total number of people seen by a breast cancer specialist following an urgent referral for suspect breast cancer in the months of January, February and March 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: January to March 2014

	No. of patients first seen by a breast cancer specialist following an urgent referral		
	Jan	Feb	Mar
Belfast	253	238	235
Northern	251	202	170
Southern	214	169	181
South Eastern	135	144	120
Western	218	196	154
Northern Ireland	1071	949	860

⁵ See Table 13 for full reporting on the waiting times for a first assessment with a breast cancer specialist. See Explanatory Notes 1 & 12-15.

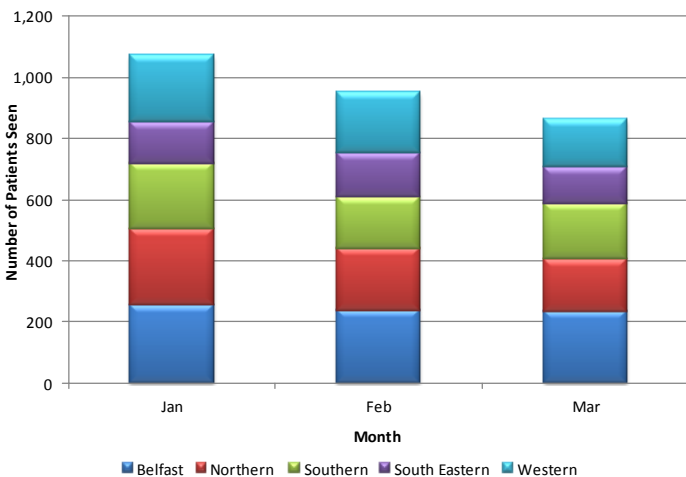
In March 2014, a total of 860 patients were first seen by a breast cancer specialist following an urgent referral for suspect breast cancer. This represented a decrease of 89 patients compared to February 2014 (949) and a decrease of 211 compared with January 2014 (1071).

Number of patients seen for a first assessment with a breast cancer specialist, by HSC Trust⁵

In March 2014, of the 860 patients first seen by a breast cancer specialist following an urgent referral, the greatest number (27.3%, 235) was seen by the Belfast HSC Trust.

A further 181 (21.0%) patients were treated in Southern HSC Trust, 170 (19.8%) patients were treated in Northern HSC Trust, 154 (17.9%) were treated in Western HSC Trust, and 120 (14.0%) patients were treated in South Eastern HSC Trust.

Figure 8: Number of patients seen for a first assessment with a breast cancer specialist following an urgent referral for suspect breast cancer, by HSC Trust: January to March 2014



All HSC Trusts, except for the Southern HSC Trust, saw a decrease in the number of patients seen in March 2014 when compared to February 2014. The greatest decrease was seen in the Western HSC Trust, which saw 154 patients in March 2014 compared to 196 in February 2014.

The Southern HSC Trust saw an increase in the number of patients seen, with 181 patients seen in March 2014 compared to 169 in February 2014.

All HSC Trusts, reported a decrease in the number of patients seen in March 2014 when compared to January 2014, with the greatest decrease seen in the Northern HSC Trust, which saw 170 patients in March 2014 compared to 251 in January 2014.

2013/14 Indicator of performance for waiting times for a first assessment with a breast cancer specialist⁵

The 2013/14 Ministerial indicator of performance relating to waiting times for a first assessment with a breast cancer specialist refers to the percentage of patients seen within 14 days of an urgent referral for breast cancer.

Percentage of patients seen within 14 days for a first assessment with a breast cancer specialist, by HSC Trust⁵

During March 2014, 52.8% (454 out of 860) of patients given an urgent referral for suspect breast cancer were seen within 14 days. There were 153 patients in the Southern HSC Trust, 131 patients in the Northern HSC Trust, 100 patients in the South Eastern HSC Trust, and 22 patients in the Belfast HSC Trust who were not seen within 14 days.

During February 2014, 74.2% (704 out of 949) of patients given an urgent referral for suspect breast cancer were seen within 14 days. There were 130 patients in the Southern HSC Trust, 91 patients in the South Eastern HSC Trust, and 24 patients in the Northern HSC Trust who were not seen within 14 days.

During January 2014, 76.1% (815 out of 1,071) of patients given an urgent referral for suspect breast cancer were seen within 14 days. There were 99 patients in the Southern HSC Trust, 77 patients in the Northern HSC Trust, 34 patients in

⁵ See Table 13 for full reporting on the waiting times for a first assessment with a breast cancer specialist. See Explanatory Notes 1 & 12-15.

the South Eastern HSC Trust, 33 patients in the Western HSC Trust, and 13 patients in the Belfast HSC Trust who were not seen within 14 days.

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: January to March 2014

	Percentage (%) seen within 14 days		
	Jan	Feb	Mar
Belfast	94.9	100.0	90.6
Northern	69.3	88.1	22.9
Southern	53.7	23.1	15.5
South Eastern	74.8	36.8	16.7
Western	84.9	100.0	100.0
Northern Ireland	76.1	74.2	52.8

Waiting times for a first assessment with a breast cancer specialist – Monthly trends⁵

Figure 9 shows the monthly trends of the percentage of patients seen within 14 days from April 2009 to March 2014.

Between April 2009 and December 2009, there was considerable variation in the percentage of patients seen within 14 days, with an improvement in performance in the first three months, followed by a deterioration in the waiting time position, and then another subsequent improvement.

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, largely due to the deterioration in the Western HSC Trust’s performance. From September 2010, the percentage of patients seen within 14 days improved markedly and remained consistently high until January 2013.

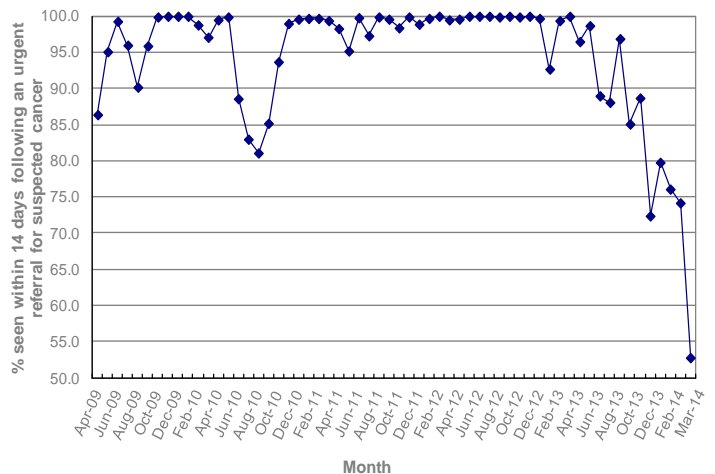
Since January 2013, the percentage seen within 14 days has fluctuated, with a downward trend noticeable from June 2013.

Performance in the final quarter of 2013/14 has continued in a downward trend, being 76.1% in January 2014, 74.2% in February 2014 and 52.8% in March 2014.

The percentage seen within 14 days in March 2014 (52.8%) represents the lowest figure recorded since collection of the waiting times for a first appointment with a breast cancer specialist began in April 2008.

The poor performance in March 2014 can be mainly attributed to the performance of the Southern, South Eastern and Northern HSC Trusts, while February 2014’s poor performance was largely due to poor performance in the Southern and South Eastern HSC Trusts. The Southern, Northern and South Eastern HSC Trusts mainly contributed to the poor performance in January 2014.

Figure 9: Percentage of patients seen by a breast cancer specialist within 14 days following an urgent referral for suspect breast cancer – April 2009 to March 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 be not be used to calculate the total number of patients treated per head of the population within each HSC Trust area.

Table 9: 62 day waiting time target from an urgent GP referral for suspect cancer to treatment, for all cancers in Health and Social Care Trusts in Northern Ireland: January to March 2014⁶

	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 (%)		
	Jan	Feb	Mar	Jan	Feb	Mar	Jan	Feb	Mar
Belfast	78.0	57.5	65.0	107.0	74.5	82.0	72.9	77.2	79.3
Northern	46.5	42.0	35.0	57.0	49.5	46.0	81.6	84.8	76.1
Southern	37.5	37.5	32.5	42.5	44.5	44.0	88.2	84.3	73.9
South Eastern	32.5	37.5	47.5	48.5	55.5	63.5	67.0	67.6	74.8
Western	42.5	29.5	39.0	47.0	34.0	41.5	90.4	86.8	94.0
Northern Ireland	237	204	219	302	258	277	78.5	79.1	79.1

Source: Cancer Patient Pathway System (CaPPS)

⁶Refer to Explanatory Notes – points 1-7.

Table 10: 62 day waiting time target from an urgent GP referral for suspect cancer to treatment, by tumour site: January to March 2014⁷

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 (%)		
	Jan	Feb	Mar	Jan	Feb	Mar	Jan	Feb	Mar
Brain Central Tumour	0	0	0	1	0	0	0.0	-	-
Breast Cancer	52	48	53	53	48	56	98.1	100.0	94.6
Gynae Cancers	18	8	15	24	10	20	75.0	80.0	75.0
Haematological Cancers	6	11	7	8	13	8	75.0	84.6	87.5
Head/Neck Cancer	11	6	8	18	7	9	61.1	85.7	88.9
Lower Gastrointestinal Cancer	20	18	13	33	28	20	60.6	64.3	65.0
Lung Cancer	24	16	23	28	20	31	85.7	80.0	74.2
Sarcomas	2	0	0	3	0	0	66.7	-	-
Skin Cancers	37	38	38	43	47	46	86.0	80.9	82.6
Upper Gastrointestinal Cancer	15	11	9	25	18	15	60.0	61.1	60.0
Urological Cancer	49	46	50	60	64	68	81.7	71.9	73.5
Other	3	2	3	6	3	4	50.0	66.7	75.0
Northern Ireland	237	204	219	302	258	277	78.5	79.1	79.1

Source: Cancer Patient Pathway System (CaPPS)

⁷Refer to Explanatory Notes – points 1-7 & 16.

Table 11: Waiting times from decision to treat to treatment for all cancers in Health and Social Care Trusts in Northern Ireland: January to March 2014⁸

	No. of patients first treated for Cancer								
	Treated within 31 days of a decision to treat being taken			Total			Percentage (%)		
	Jan	Feb	Mar	Jan	Feb	Mar	Jan	Feb	Mar
Belfast	335	263	284	349	280	293	96.0	93.9	96.9
Northern	112	101	91	113	101	91	99.1	100.0	100.0
Southern	115	90	91	117	91	96	98.3	98.9	94.8
South Eastern	106	109	118	109	116	122	97.2	94.0	96.7
Western	88	85	89	88	85	89	100.0	100.0	100.0
Northern Ireland	756	648	673	776	673	691	97.4	96.3	97.4

Source: Cancer Patient Pathway System (CaPPS)

⁸Refer to Explanatory Notes – points 1 & 8-11.

Table 12: Waiting times from decision to treat to treatment, by tumour site: January to March 2014⁹

Cancer Site	No. of patients first treated for Cancer								
	Treated within 31 days of a decision to treat being taken			Total			Percentage (%)		
	Jan	Feb	Mar	Jan	Feb	Mar	Jan	Feb	Mar
Brain Central Tumour	14	12	15	14	12	15	100.0	100.0	100.0
Breast Cancer	106	96	109	108	96	111	98.1	100.0	98.2
Gynae Cancers	45	32	46	48	33	47	93.8	97.0	97.9
Haematological Cancers	60	50	42	60	50	42	100.0	100.0	100.0
Head/Neck Cancer	34	27	25	34	27	25	100.0	100.0	100.0
Lower Gastrointestinal Cancer	109	84	74	111	85	74	98.2	98.8	100.0
Lung Cancer	89	61	87	91	65	89	97.8	93.8	97.8
Sarcomas	3	3	2	3	3	2	100.0	100.0	100.0
Skin Cancers	94	95	86	97	105	89	96.9	90.5	96.6
Upper Gastrointestinal Cancer	71	61	54	72	63	56	98.6	96.8	96.4
Urological Cancer	112	112	122	119	119	130	94.1	94.1	93.8
Other	19	15	11	19	15	11	100.0	100.0	100.0
Northern Ireland	756	648	673	776	673	691	97.4	96.3	97.4

Source: Cancer Patient Pathway System (CaPPS)

⁹Refer to Explanatory Notes – points 1, 8-11 & 16.

Table 13: Waiting times from referral to a first assessment with a breast cancer specialist in Health and Social Care Trusts in Northern Ireland: January to March 2014¹⁰

	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 (%)		
	Jan	Feb	Mar	Jan	Feb	Mar	Jan	Feb	Mar
Belfast	240	238	213	253	238	235	94.9	100.0	90.6
Northern	174	178	39	251	202	170	69.3	88.1	22.9
Southern	115	39	28	214	169	181	53.7	23.1	15.5
South Eastern	101	53	20	135	144	120	74.8	36.8	16.7
Western	185	196	154	218	196	154	84.9	100.0	100.0
Northern Ireland	815	704	454	1,071	949	860	76.1	74.2	52.8

Source: Departmental Return SDR 2.

¹⁰Refer to Explanatory Notes – points 1 & 12-15.

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. Data contained in Tables 1, 2, 6, and 7 relate to all patients who received a first definitive treatment for cancer (having been given an ICD 10 diagnosis) during the months of January, February and March 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.
3. The completed waiting time in Tables 1, 2, 6, and 7 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.
4. The measurement of a patient's waiting time in Tables 1, 2, 6, and 7, 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.
5. The 2013/14 Ministerial target for cancer waiting times, as detailed in the Health and Social Care (Commissioning Plan) Direction (Northern Ireland) 2013, states that, from April 2013, 95% of patients should begin their first treatment for cancer within 62 days following an urgent GP referral for suspect cancer.
6. 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. These different targets are reflected in the trend graph for the 62 day target (Figure 4).
7. Tables 2 and 7 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.
8. Data contained in Tables 3, 4, 8 and 9 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 January, February and March 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 3, 4, 8 and 9 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 4 and 9 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. The 2013/14 indicator of performance relating to waiting times for cancer treatment, as detailed in the Health and Social Care (Commissioning Plan) Direction (Northern Ireland) 2013, measures the percentage of patients receiving first definitive treatment of a cancer diagnosis within 31 days, and a decision to treat being taken.
12. Data contained in Tables 5 and 10 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 January, February and March 2014. Figures also include all patients living outside Northern Ireland and all privately funded patients waiting for treatment in Health and Social Care hospitals.
13. The completed waiting time in Tables 5 and 10 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.
14. Figures provided in Tables 5 and 10 reflect all urgent referrals for breast cancer both from GP's and other practitioners.
15. The 2013/14 indicator of performance for waiting times for a first assessment with a breast cancer specialist, as detailed in the Health and Social Care (Commissioning Plan) Direction (Northern Ireland) 2013, measures the percentage of patients seen within 14 days of an urgent referral for breast cancer.
16. Information on the grouping of ICD 10 codes by tumour site is available from Hospital Information Branch on request.
17. 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.
18. 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
19. Information on waiting times for the months of April, May and June 2014 will be published on 25th September 2014.
20. 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 2012/13 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:

Dr. Laura Baird

Hospital Information Branch

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This Statistical bulletin and others published by Hospital Information Branch are available to download from the DHSSPS Internet site at:

Internet address: http://www.dhsspsni.gov.uk/index/stats_research/stats-activity_stats-2.htm