

INFORMATION
ANALYSIS
DIRECTORATE



Northern Ireland Waiting Time Statistics: Cancer Waiting Times (October – December 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 (HSC) Trusts in Northern Ireland, against the 2014/15 Ministerial Target 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 October, November and December 2014. All data are presented by Health and Social Care Trust and, where applicable, by tumour site.</p>
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Statistical Quality	Information detailed in this release has been quality assured with HSC Trusts prior to release.
Target audience	Department of Health, Social Services and Public Safety (DHSSPS), Chief Executives of the 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 62 day cancer waiting time target in Northern Ireland continues to be much lower than the 95% standard. In December 2014, 74.7% of patients who received an urgent referral for suspect cancer were treated within 62 days, higher than October 2014 (70.1%) and November 2014 (74.1%) (Table 6).
- Of the 80 patients who waited longer than 62 days for treatment in December 2014, 29 (36.3%) were diagnosed with urological cancer and 19 (23.8%) were diagnosed with skin cancer (Figure 4).
- In December 2014, 95.4% of patients received their first treatment within 31 days of a decision to treat being taken, slightly lower than October 2014 (97.3%) and November 2014 (96.2%) (Table 9).
- Of the 37 patients who waited longer than 31 days in December 2014, over half (20, 54.1%) were diagnosed with urological cancer and over one quarter (10, 27.0%) were diagnosed with skin cancer (Figure 9).
- In December 2014, 96.3% of patients waiting for a first assessment with a breast cancer specialist following an urgent breast cancer referral were seen within 14 days, lower than October 2014 (100.0%) and November 2014 (97.1%) (Table 12).

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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, Cancer and Emergency Care). A detailed list of these publications is available from:

Website: <http://www.dhsspsni.gov.uk/index/statistics/publications-statistics.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/statistics/hospital/waitingtimes/cancer-waiting-times.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 CaPPS.

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.

Cancer 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/statistics/hospital/waitingtimes/cancer-waiting-times.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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Section 1: Introduction

The information detailed in this release is published primarily to provide an indication of HSC Trust performance. It allows the general public and the 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 October, November and December 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 in 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.

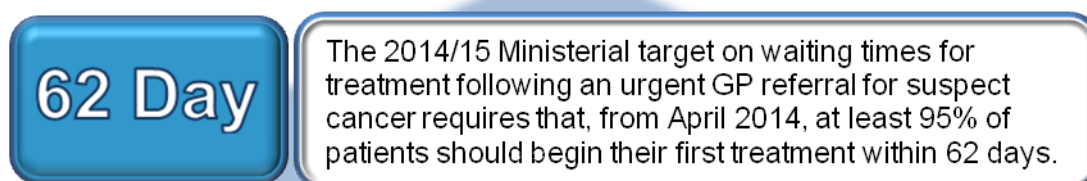
Note

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

Section 2: Performance against Ministerial target associated with cancer waiting times

In order to ensure an efficient and quality service is maintained across Northern Ireland, a Ministerial target with three components associated with cancer waiting times was agreed for 2014/15. Performance against each element is detailed below.

2.1: Performance against the 62 day component



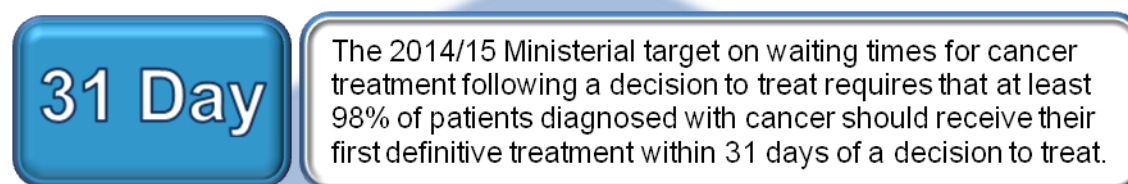
The Ministerial target on waiting times for patients receiving first treatment following an urgent GP referral for suspect cancer has not been achieved by Northern Ireland as a whole during October, November or December 2014 (Figure 1, Table 6).

Figure 1: HSC Trust Performance against the 62 day Ministerial target (Oct – Dec 2014)

HSC Trust	Target Achieved?		
	Oct 2014	Nov 2014	Dec 2014
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 Ministerial target was not achieved by any individual Trust during the months of October, November or December 2014 (Figure 1, Table 6).

2.2: Performance against the 31 day component



31 Day

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.

The Ministerial target on waiting times for patients receiving first definitive treatment for cancer following a decision to treat has not been achieved by Northern Ireland as a whole during October, November or December 2014 (Figure 2, Table 9).

Figure 2: HSC Trust Performance against the 31 day Ministerial target (Oct – Dec 2014)

HSC Trust	Target Achieved?		
	Oct 2014	Nov 2014	Dec 2014
Belfast	No	No	No
Northern	Yes	Yes	Yes
South Eastern	Yes	No	No
Southern	Yes	Yes	Yes
Western	Yes	Yes	Yes
Northern Ireland	No	No	No

Across HSC Trusts, the Northern, Southern and Western Trusts achieved the Ministerial target in all three months of the quarter, whilst the South Eastern Trust met the target in October 2014. The Belfast Trust failed to meet the target in all three months of the quarter (Figure 2, Table 9).

2.3: Performance against the 14 day component

14 Day

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.

The Ministerial target on waiting times for a first assessment with a breast cancer specialist following an urgent referral has been achieved by Northern Ireland as a whole during October, but has not been achieved during November or December 2014 (Figure 3, Table 12).

Figure 3: HSC Trust Performance against the 14 day Ministerial target (Oct - Dec 2014)

HSC Trust	Target Achieved?		
	Oct 2014	Nov 2014	Dec 2014
Belfast	Yes	No	No
Northern	Yes	Yes	Yes
South Eastern	Yes	Yes	Yes
Southern	Yes	No	Yes
Western	Yes	No	Yes
Northern Ireland	Yes	No	No

Across the HSC Trusts, the Northern and South Eastern Trusts achieved the Ministerial target during each of the months of October, November and December 2014, whilst the Southern and Western Trusts met the target in October and December 2014. The Belfast Trust only met the target in October 2014 (Figure 3, Table 12).

Section 3: Waiting Times for a 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

3.1: Waiting time following an urgent GP referral for suspect cancer

Latest Position - December 2014

Number of patients treated¹

In December 2014, 316 patients commenced treatment for cancer following an urgent referral for suspect cancer (this includes routine referrals subsequently reclassified as urgent by a cancer specialist) (Table 6).

Of these 316 patients treated during December 2014, almost a third (96.5, 30.5%) were treated in the Belfast Trust. A further 63.0 (19.9%) patients were treated in the South Eastern Trust, 60.0 (19.0%) in the Northern Trust, 55.0 (17.4%) in the Southern Trust, and 41.5 (13.1%) in the Western Trust (Figure 5, Table 6).

Performance against the 62 day target (by HSC Trust)²

During December 2014, almost three quarters (74.7%, 236) of patients were treated within 62 days. This was 20.3 percentage points lower than the 95% required for Northern Ireland as a whole to meet the 62 day Ministerial target (Table 1 & Table 6).

Table 1: Percentage of patients receiving a first definitive treatment for cancer within 62 days following an urgent GP referral for suspect cancer, by HSC Trust (December 2014)

HSC Trust	% treated within 62 days (Dec 2014)
Belfast	73.6
Northern	68.3
South Eastern	55.6
Southern	90.9
Western	94.0
Northern Ireland	74.7

All HSC Trusts failed to meet the 62 day Ministerial target in December 2014. (Figure 6, Table 1).

Of the 80 patients that were not treated within 62 days during December 2014, there were the equivalent of 28.0 in the South Eastern Trust, 25.5 in the Belfast Trust, 19.0 in the Northern Trust, 5.0 in the Southern Trust, and 2.5 in the Western Trust (Table 6).

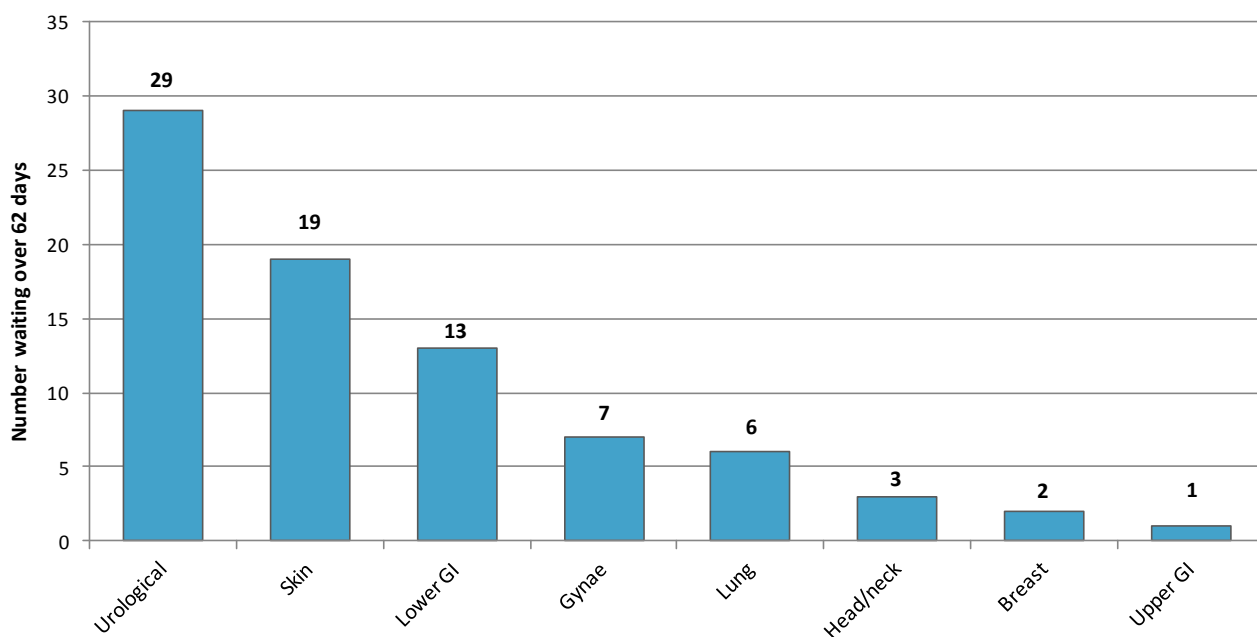
¹See Explanatory Notes 1 & 3-5

²See Explanatory Notes 1-5

Performance against the 62 day target (by tumour site)³

During December 2014, 80 patients waited longer than 62 days for treatment following an urgent GP referral for suspect cancer. Of the 80 patients, 29 were diagnosed with urological cancer, 19 with skin cancer, 13 with lower gastrointestinal (GI) cancer, 7 with gynaecological (Gynae) cancer, 6 with lung cancer, 3 with head/neck cancer, 2 with breast cancer and 1 with upper gastrointestinal (GI) cancer (Figure 4, Table 7).

Figure 4: Number of patients treated who waited over 62 days for treatment following an urgent GP referral for suspect cancer, by tumour site in December 2014



Latest Quarter – October to December 2014

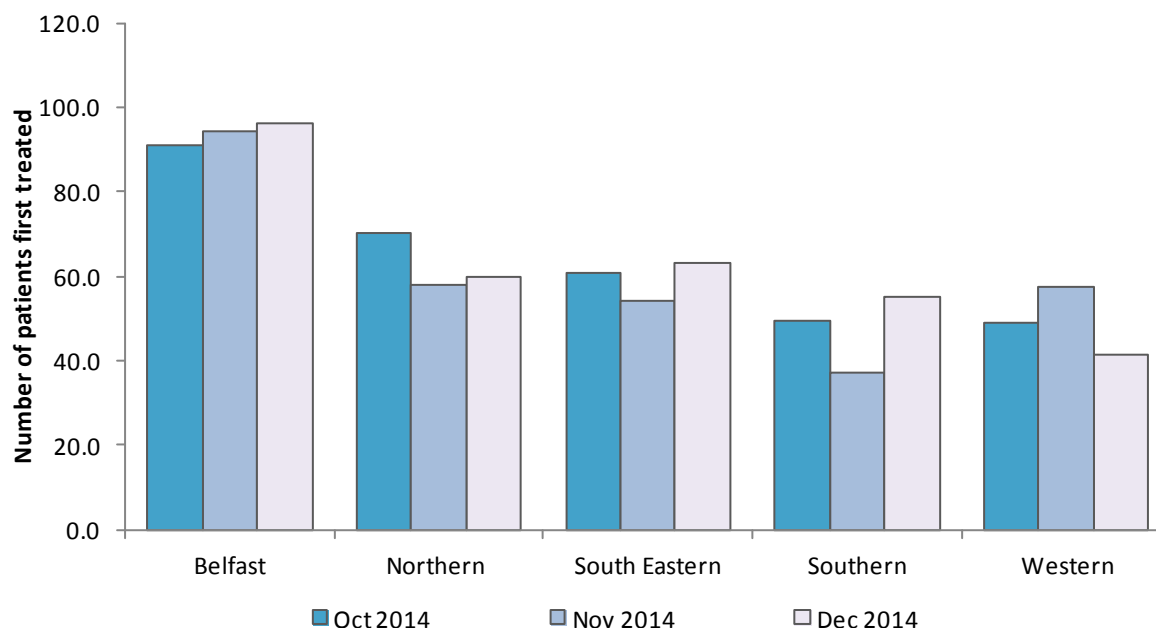
Number of patients treated¹

The number of patients commencing treatment for cancer following an urgent referral for suspect cancer in Northern Ireland has decreased slightly from 321 patients in October 2014 to 316 in December 2014. Figure 5 shows how the number of patients treated within each HSC Trust has varied over the last three months (Figure 5, Table 6).

¹ See Explanatory Notes 1 & 3-5

³ See Explanatory Notes 1-6 & 14

Figure 5: Number of patients receiving a first definitive treatment for cancer following an urgent GP referral for suspect cancer, by HSC Trust (Oct – Dec 2014)



Between October and December 2014, the Belfast, South Eastern and Southern Trusts reported increases in the number of patients treated. The Belfast and Southern Trusts reported the greatest increases. Belfast Trust reported 91.0 patients first treated in October and 96.5 first treated in December 2014; while Southern reported 49.5 patients first treated in October 2014 and 55.0 first treated in December 2014 (Figure 5, Table 6).

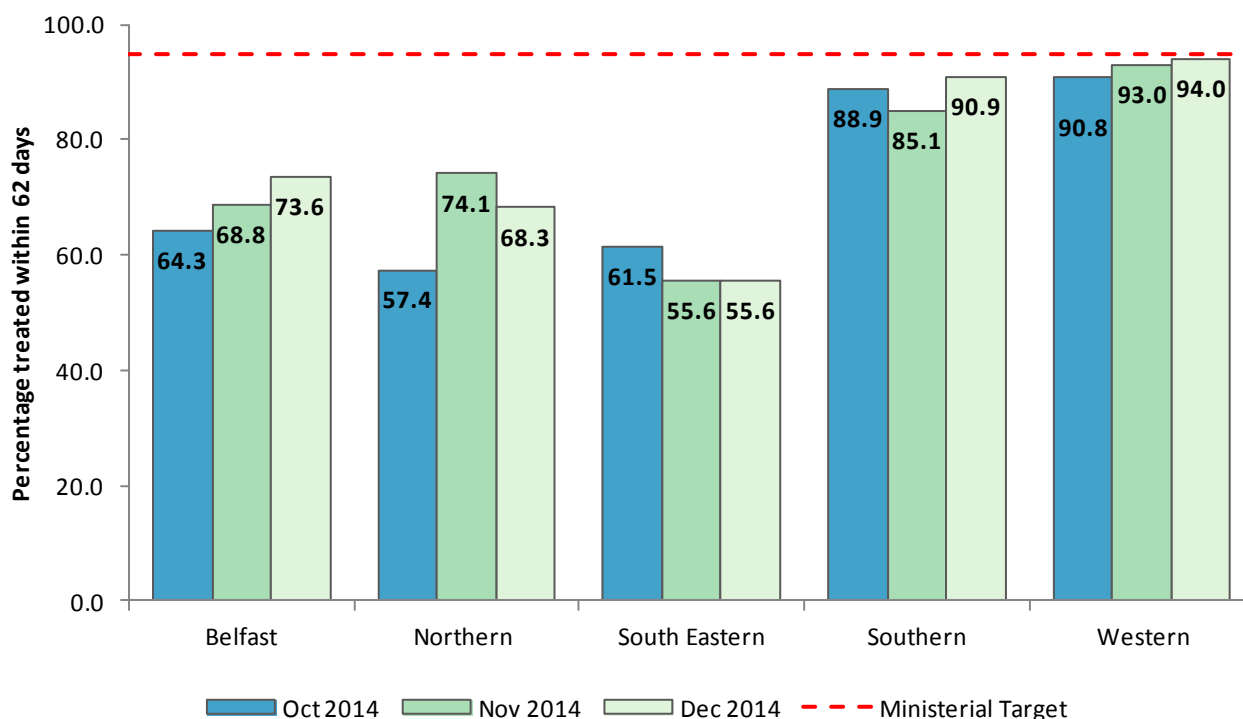
During this period, the Northern and Western Trusts reported a decrease in the number of patients treated. Northern Trust reported 70.5 patients first treated in October and 60.0 first treated in December 2014; while Western Trust reported 49.0 patients first treated in October 2014 and 41.5 first treated in December 2014.

Performance against the 62 day target (by HSC Trust)²

The percentage of patients first treated for cancer following an urgent GP referral for suspect cancer increased from 70.1% treated within 62 days in October 2014 (225 out of 321 patients) to 74.7% in December 2014 (236 out of 316 patients). Figure 6 shows the percentage of patients receiving their first treatment within 62 days over the last three months, by HSC Trust (Table 6).

²See Explanatory Notes 1-5

Figure 6: Percentage of patients receiving a first definitive treatment for cancer within 62 days following an urgent GP referral for suspect cancer, by HSC Trust (Oct - Dec 2014)



All HSC Trusts failed to meet the Ministerial target in each of the three months however Western Trust almost met the target in December 2014. (Figure 6, Table 6).

During October to December 2014, the Western Trust had consistently the highest percentage of patients treated within 62 days out of all the Trusts (Figure 6, Table 6).

Between October and December 2014, all Trusts except the South Eastern Trust reported an increase in the percentage of patients treated within 62 days, with a higher percentage reported in December than in October. Northern Trust had the largest percentage increase with 68.3% of patients (41.0 out of 60.0) first treated within 62 days in December 2014, compared to 57.4% (40.5 out of 70.5) in October 2014 (Figure 6, Table 6).

The South Eastern Trust reported a lower percentage of patients treated within 62 days in December than October 2014, with 55.6% of patients (35.0 out of 63.0) treated within 62 days in December 2014, compared to 61.5% (37.5 out of 61.0) in October 2014 (Figure 6, Table 6).

Performance against the 62 day target (by tumour site)³

Table 2 (and Table 7) reports the waiting times by tumour site, during the months of October, November and December 2014

³ See Explanatory Notes 1-6 & 14

Table 2: Percentage of patients receiving a first definitive treatment for cancer within 62 days following an urgent GP referral for suspect cancer, by tumour site (Oct - Dec 2014)

Cancer Site	Percentage (%) treated within 62 days from receipt of an urgent GP referral		
	Oct 2014	Nov 2014	Dec 2014
Brain/ Central Nervous System (CNS) Cancer	-	100.0	100.0
Breast Cancer	100.0	100.0	96.9
Gynaecological Cancers	80.0	52.6	56.3
Haematological Cancers	92.3	83.3	100.0
Head/Neck Cancer	66.7	64.3	72.7
Lower Gastrointestinal (GI) Cancer	64.3	62.5	65.8
Lung Cancer	65.8	80.0	75.0
Sarcomas	0.0	-	100.0
Skin Cancers	70.2	75.0	71.6
Upper Gastrointestinal (GI) Cancer	50.0	55.0	94.1
Urological Cancer	61.0	66.7	55.4
Other	66.7	75.0	100.0
Northern Ireland	70.1	74.1	74.7

During October and November 2014, all patients diagnosed with breast cancer were treated within 62 days from receipt of an urgent GP referral. The 95% target was also met in December 2014 with 96.9% of patients diagnosed with breast cancer commencing treatment within 62 days from receipt of an urgent GP referral.

In November and December 2014, all patients with brain/central nervous system (CNS) cancer were treated within 62 days. All patients with sarcomas, haematological or cancer classified as 'other' also commenced treatment within 62 days during December 2014 (Table 2 & Table 7).

Less than 67% of patients diagnosed with urological cancer were seen within 62 days during October to December 2014.

Historical performance against the 62 day target⁴

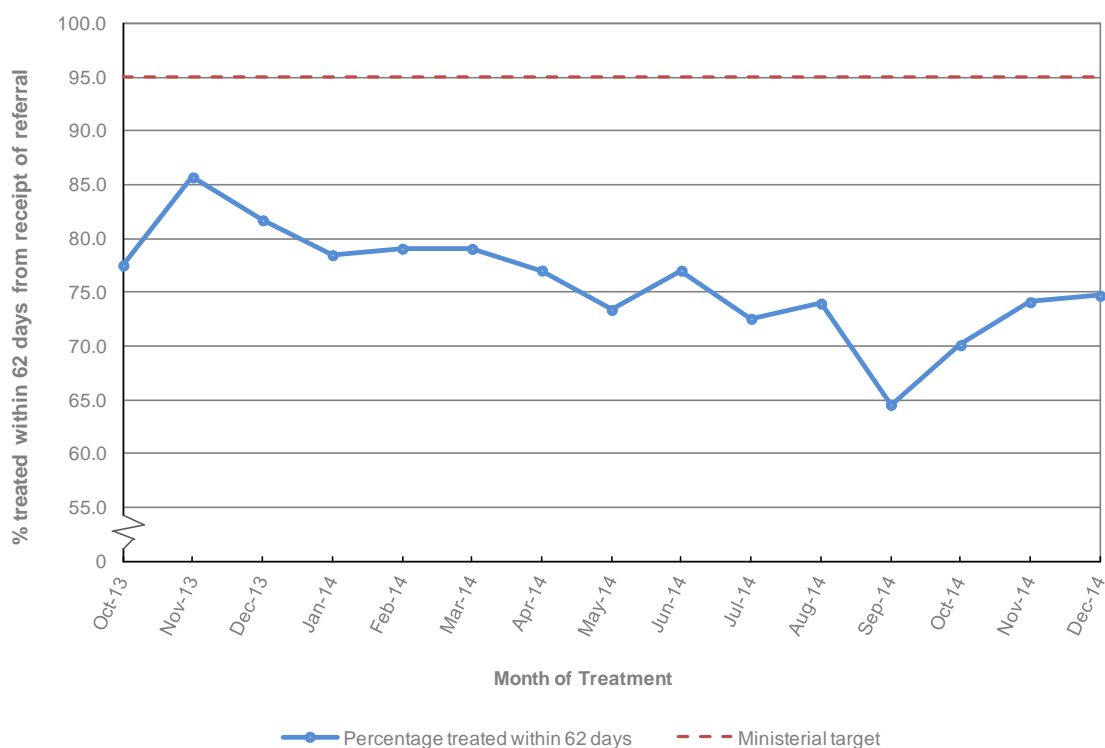
Performance during the last fifteen months - October 2013 to December 2014

When compared with the same month last year, the number of patients first treated following an urgent referral showed an increase from 279 patients first treated in December 2013 to 316 in December 2014 (Table 8).

Figure 7 shows the percentage of patients treated within 62 days following an urgent GP referral for suspect cancer over the last 15 months (October 2013 to December 2014).

⁴ See Explanatory Notes 1-5 & 7

Figure 7: Percentage of patients treated within 62 days following an urgent GP referral for suspect cancer (Oct 2013 - Dec 2014)



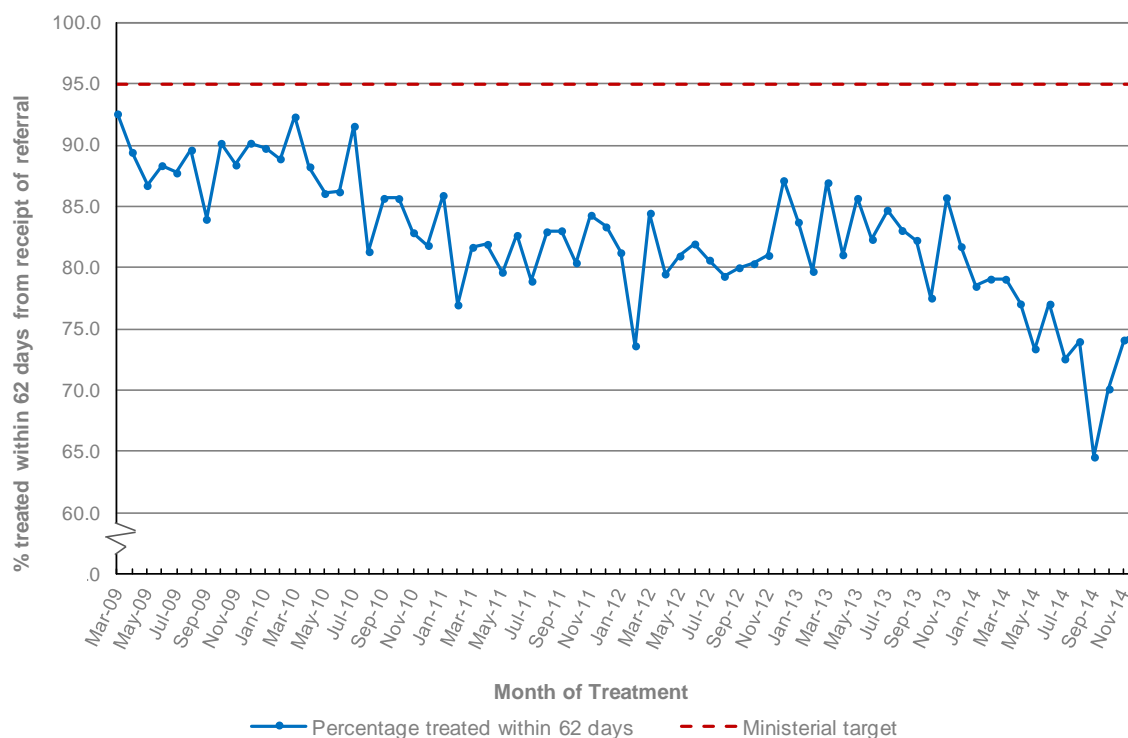
When compared to the same month last year, the percentage of patients treated within 62 days has fallen, from 81.7% in December 2013 (228 out of 279 patients) to 74.7% in December 2014 (236 out of 316 patients) (Figure 7, Table 8).

Between November 2013 and September 2014, performance against the 62 day Ministerial target showed an overall downward trend, with the lowest percentage of patients seen within 62 days in September 2014 (64.5%). Since October 2014 performance has shown an improvement, rising to 74.7% in December 2014. (Figure 7, Table 8).

Performance since March 2009

Figure 8 shows the percentage of patients treated within 62 days following an urgent GP referral for suspect cancer from March 2009 to December 2014.

Figure 8: Percentage of patients treated within 62 days following an urgent GP referral for suspect cancer (March 2009 - December 2014)



Reporting of the 95% target for treatment following an urgent GP referral for suspect cancer began in March 2009 replacing the previous 75% target that had been monitored from April 2008. Until July 2010; the percentage of patients seen within 62 days fluctuated between 84% and 93%, with no consistent trends emerging (Figure 8, Table 8).

Between August 2010 and October 2013, overall performance was lower, with the percentage seen ranging between 73.6% and 87.1%. However, performance further deteriorated from November 2013, with the percentage of patients treated dropping to 64.5% in September 2014 the lowest seen since reporting of the 95% target began in March 2009. Performance since September 2014 has improved rising to 74.7% in December 2014 (Figure 8).

Northern Ireland as a whole has never met the performance target since it was increased in March 2009 from 75% to 95% of patients being seen within 62 days following an urgent GP referral for suspect cancer (Figure 8).

3.2: Waiting times following a decision to treat

Latest Position - December 2014

Number of patients treated⁵

In December 2014, 805 patients commenced treatment for cancer in Northern Ireland, following a decision to treat being taken (Table 9).

Of the 805 patients who received treatment for cancer in December 2014, over two fifths (42.9%, 345) were treated in the Belfast Trust. A further 123 (15.3%) patients were treated in Western Trust, 120 (14.9%) in the South Eastern Trust, 111 (13.8%) in the Southern Trust, and 106 (13.2%) in the Northern Trust (Figure 10, Table 9).

Performance against the 31 day target (by HSC Trust)⁶

During December 2014, 768 of the 805 (95.4%) patients commencing treatment, received their first treatment within 31 days of a decision to treat for cancer. This was 2.6 percentage points lower than the 98% required in order to achieve the 31 day Ministerial target (Table 3 & Table 9).

Table 3: Percentage of patients receiving a first definitive treatment for cancer within 31 days of a decision to treat, by HSC Trust (December 2014)

HSC Trust	% treated within 31 days (Dec 2014)
Belfast	91.3
Northern	99.1
South Eastern	95.0
Southern	100.0
Western	100.0
Northern Ireland	95.4

Across HSC Trusts, the Western, Southern and Northern Trusts achieved the 98% target in December 2014, with every patient from Southern and Western Trusts and 99.1% of patients in the Northern Trust treated within 31 days following a decision to treat (Figure 11, Table 3).

Of the 37 patients that waited longer than 31 days during December 2014, 30 were in the Belfast Trust, 6 in the South Eastern Trust, and 1 in the Northern Trust (Table 9).

Performance against the 31 day target (by tumour site)⁷

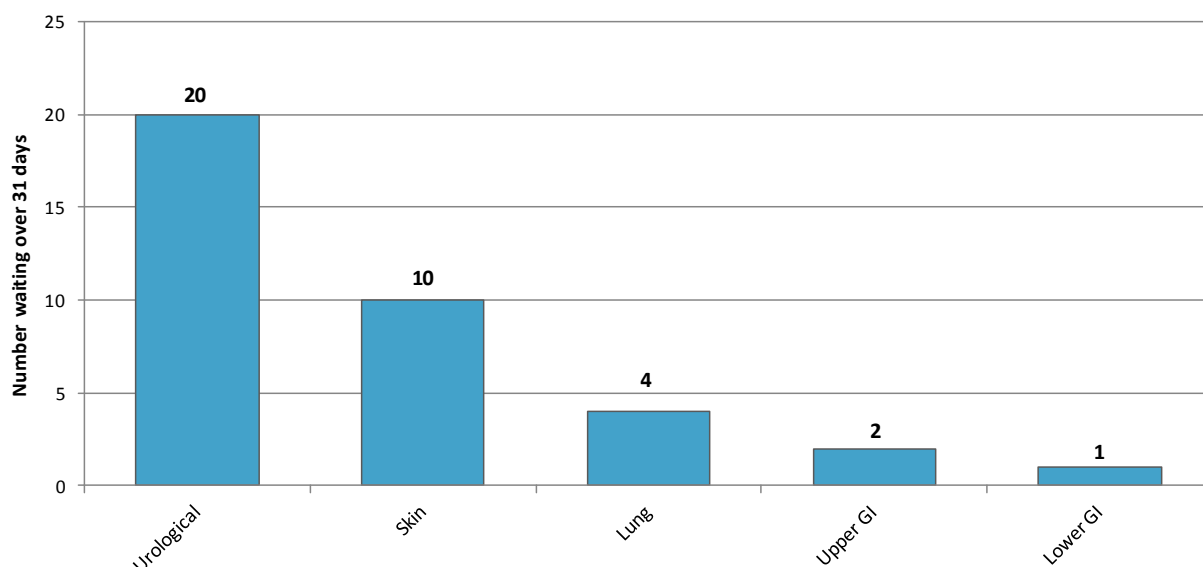
During December 2014, 37 patients waited longer than 31 days for treatment following a decision to treat being taken. Of these 37, 20 were diagnosed with urological cancer, 10 with skin cancer, 4 with lung cancer, 2 with upper gastrointestinal (GI) cancer, 1 with lower gastrointestinal (GI) cancer (Figure 9, Table 10).

⁵ See Explanatory Notes 1 & 8-9

⁶ See Explanatory Notes 1-2 & 8-9

⁷ See Explanatory Notes 1-2, 8-10 & 14

Figure 9: Number of patients waiting over 31 days for treatment following a decision to treat, by tumour site in December 2014

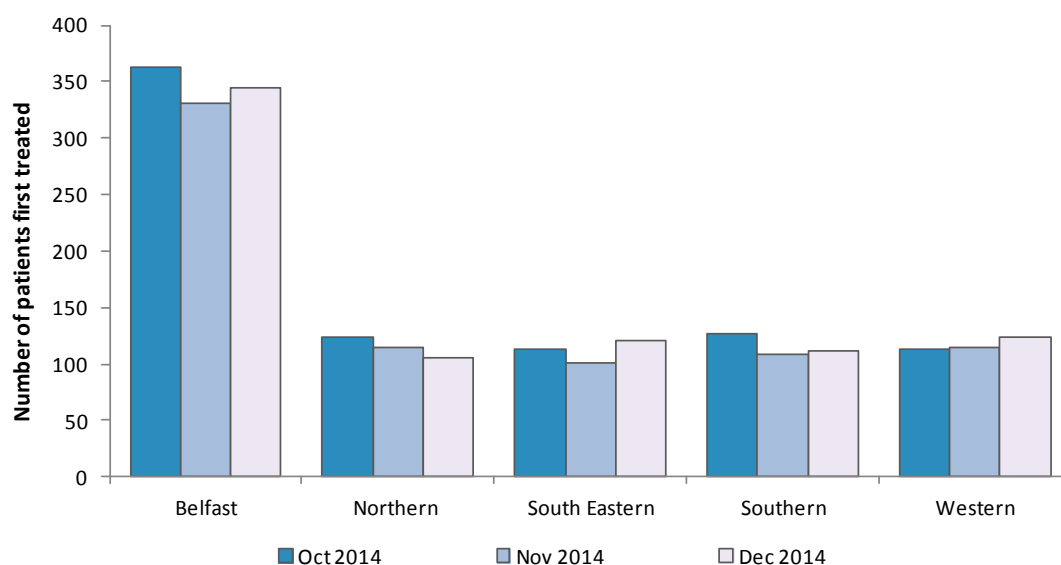


Latest Quarter - October to December 2014

Number of patients treated⁵

The number of patients commencing treatment following a decision to treat being taken has decreased from 838 in October 2014 to 805 in December 2014. Figure 10 shows how the number of patients treated within each HSC Trust has varied over the last three months (Table 9).

Figure 10: Number of patients receiving a first definitive treatment for cancer following a decision to treat, by HSC Trust (Oct - Dec 2014)



⁵ See Explanatory Notes 1 & 8-9.

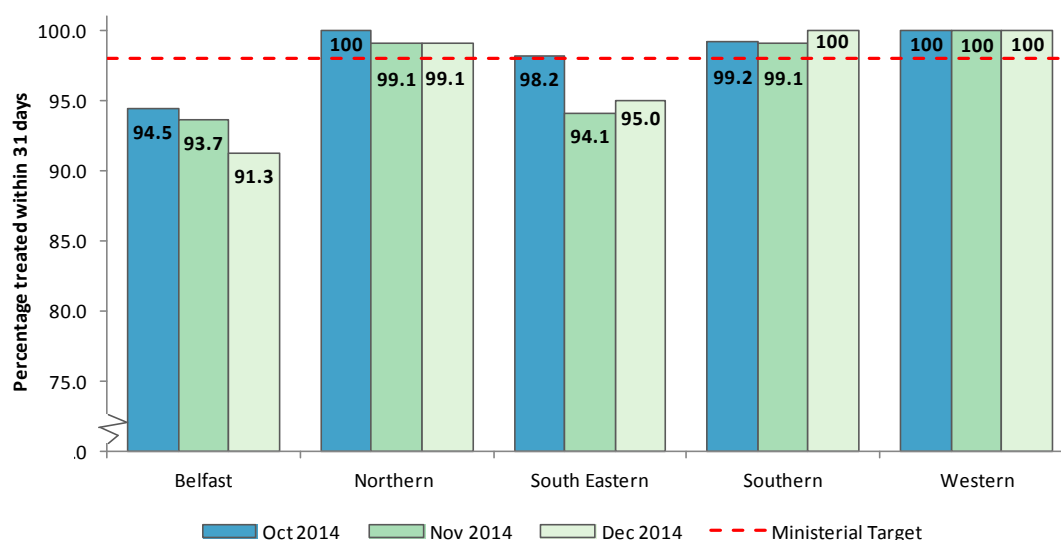
Between October and December 2014, South Eastern and Western Trusts reported increases in the number of patients treated with the Western Trust reporting the largest increase (113 to 123 patients) (Figure 10, Table 9).

During this period, the Belfast, Northern and Southern Trusts reported decreases in the number of patients treated with the largest decrease in the Northern HSC Trust, from 124 in October 2014 to 106 patients in December 2014 (Figure 10, Table 9).

Performance against the 31 day target (by HSC Trust)⁶

For Northern Ireland as a whole, there has been a decrease in the percentage of patients treated within 31 days following a decision to treat, from 97.3% in October 2014 (815 of 838 patients) to 95.4% in December 2014 (768 of 805 patients). Figure 11 shows the percentage of patients receiving their first treatment within 31 days over the last three months by HSC Trust (Table 9).

Figure 11: Percentage of patients receiving a first definitive treatment for cancer within 31 days following a decision to treat, by HSC Trust (Oct – Dec 2014)



Across HSC Trusts, the Northern, Southern and Western Trusts met the 98% Ministerial target in all three months of the quarter, whilst the South Eastern Trust met the target in October 2014 (Figure 11, Table 9). Belfast Trust did not meet the target in any of the three months within the quarter.

Belfast, South Eastern and Northern Trusts all reported a decrease in the percentage of patients treated within 31 days between October and December 2014. Belfast Trust and South Eastern Trust had the largest percentage decrease (3.2%). Between October and December 2014, the percentage of patients treated within 31 days fell from 94.5% to 91.3% in Belfast Trust and 98.2% to 95.0% in South Eastern Trust.

⁶ See Explanatory Notes 1-2 & 8-9.

Western Trust reported no change between October and December 2014, treating 100% of patients within 31 days in both months (Figure 11, Table 9).

Performance against the 31 day target (by tumour site)⁷

Table 4 (and Table 10) reports on the waiting times by tumour site, for the months of October, November and December 2014.

Table 4: Percentage of patients receiving a first definitive treatment for cancer within 31 days following a decision to treat, by tumour site (Oct - Dec 2014)

Cancer Site	Percentage (%) treated within 31 days of a decision to treat being taken		
	Oct 2014	Nov 2014	Dec 2014
Brain/ Central Nervous System (CNS) Cancer	100.0	100.0	100.0
Breast Cancer	100.0	100.0	100.0
Gynaecological Cancers	97.6	95.5	100.0
Haematological Cancers	100.0	100.0	100.0
Head/Neck Cancer	91.7	96.7	100.0
Lower Gastrointestinal (GI) Cancer	100.0	98.9	99.1
Lung Cancer	99.1	97.9	95.4
Sarcomas	100.0	100.0	100.0
Skin Cancers	95.7	94.3	92.1
Upper Gastrointestinal (GI) Cancer	97.2	95.0	96.5
Urological Cancer	92.1	90.5	86.2
Other	100.0	94.7	100.0
Northern Ireland	97.3	96.2	95.4

Although the Ministerial target of 98% was not achieved at a regional level during October to December 2014, all patients diagnosed with brain/central nervous system (CNS) cancer, breast cancer, haematological cancer and sarcomas received treatment within 31 days following a decision to treat.

During October to December 2014, several other tumour sites met the 98% target during particular months (Table 4 & Table 10).

Historical performance against the 31 day target⁶

Position during the last fifteen months – October 2013 to December 2014

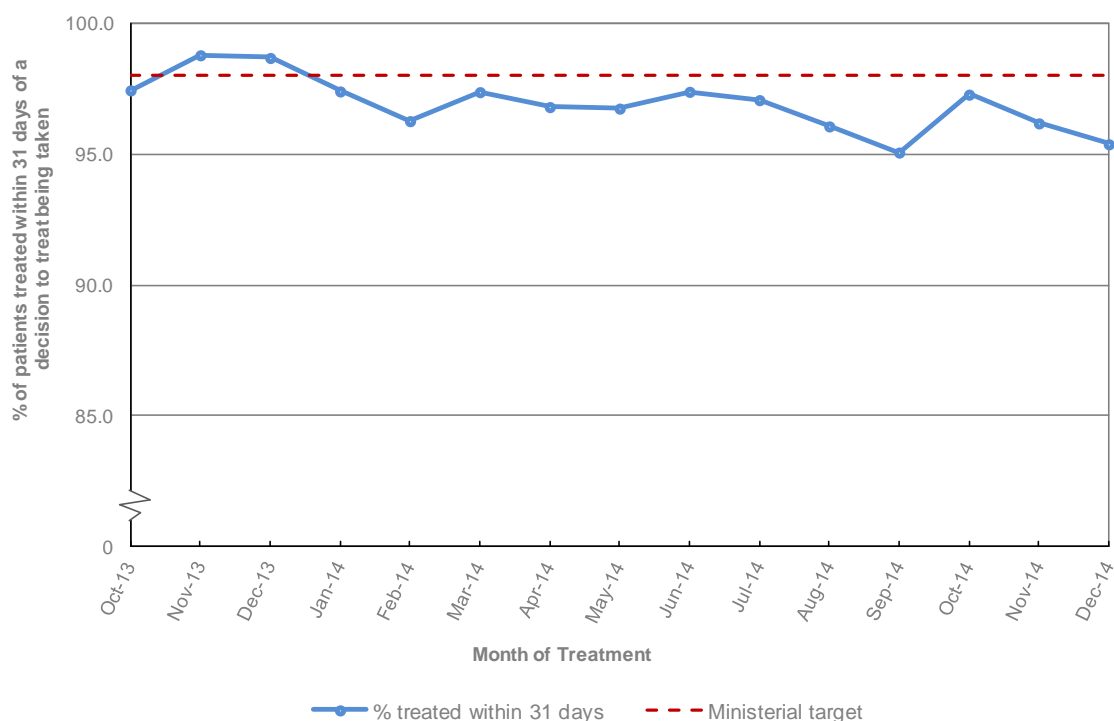
When compared to the same month last year, there has been an increase in the number of patients commencing treatment, with 694 patients first treated in December 2013 and 805 patients first treated December 2014 (Table 11).

⁶ See Explanatory Notes 1-2 & 8-10

⁷ See Explanatory Notes 1-2, 8-10 & 14

Figure 12 shows the percentage of patients treated for cancer within 31 days following a decision to treat over the last 15 months (October 2013 to December 2014).

Figure 12: Percentage of patients receiving a first definitive treatment for cancer within 31 days following a decision to treat (Oct 2013 – Dec 2014)



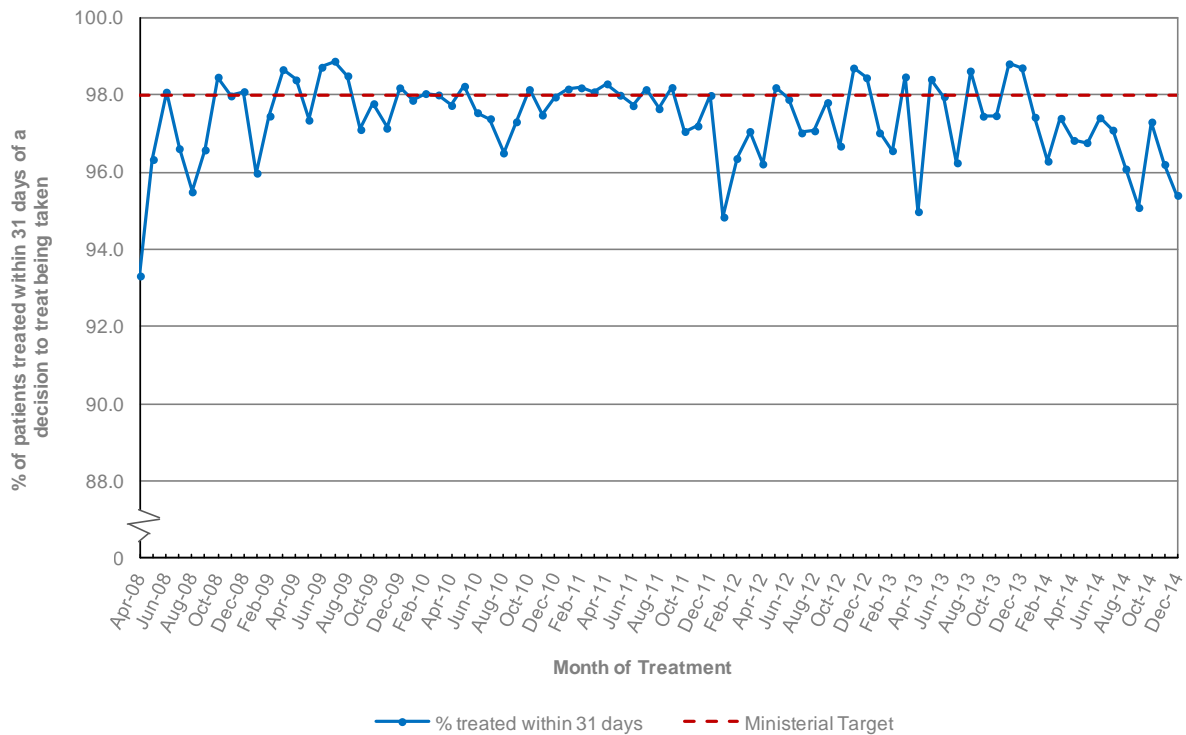
Comparing December 2013 to December 2014, the percentage of patients treated within 31 days following a decision to treat was lower in December 2014, with 768 of the 805 patients (95.4%) treated within 31 days, compared with 685 of the 694 patients (98.7%) treated within 31 days in December 2013 (Figure 12, Table 11).

Although there has been a degree of fluctuation, the percentage of patients treated within 31 days has remained above 95% throughout the last 15 months. However, the Ministerial target of 98% has not been attained during any of the last 12 months. The highest percentage of patients treated within 31 days during the last 15 months was recorded in November 2013 (98.8%), and the lowest percentage was recorded during September 2014 (95.1%). (Figure 12, Table 11).

Performance since April 2008

Figure 13 shows the percentage of patients treated within 31 days following a decision to treat being taken, from April 2008 to December 2014.

Figure 13: Percentage of patients treated within 31 days following a decision to treat (April 2008 - December 2014)



The percentage of patients treated within 31 days, following a decision to treat, has fluctuated slightly over the years, but never fallen below 93%.

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. Performance has subsequently fluctuated throughout all of 2012/13 through to 2014/15 (Figure 13, Table 11).

The Ministerial target has not been met in any of the first nine months of 2014/15.

Section 4: Patients first seen following an urgent referral for suspect breast cancer

Latest Position - December 2014

Number of patients seen⁸

In December 2014, 1,142 patients were first seen by a breast cancer specialist following an urgent referral for suspect breast cancer (Table 12).

Of these patients, 249 (21.8%) were seen by the Southern Trust. A further 246 (21.5%) patients were seen in the Belfast Trust, 237 (20.8%) in the Northern Trust, 233 (20.4%) in the Western Trust, and 177 (15.5%) patients in the South Eastern Trust (Figure 14, Table 12).

Performance against the 14 day target (by HSC Trust)⁹

During December 2014, 1,100 (96.3%) of the 1,142 patients given an urgent referral for suspect breast cancer were seen for a first assessment within 14 days (Table 5 & Table 12).

Table 5: Percentage of patients seen for a first assessment with a breast cancer specialist following an urgent referral for suspect breast cancer, by HSC Trust (December 2014)

HSC Trust	% seen within 14 days (Dec 2014)
Belfast	82.9
Northern	100.0
South Eastern	100.0
Southern	100.0
Western	100.0
Northern Ireland	96.3

All Trusts, except for the Belfast Trust met the Ministerial target for December 2014, having all patients with an urgent referral for suspect breast cancer seen within 14 days (Figure 15, Table 5).

There were 42 patients not seen within 14 days following an urgent referral for suspect breast cancer in the Belfast Trust (Table 12).

⁸ See Explanatory Notes 1 & 11-13

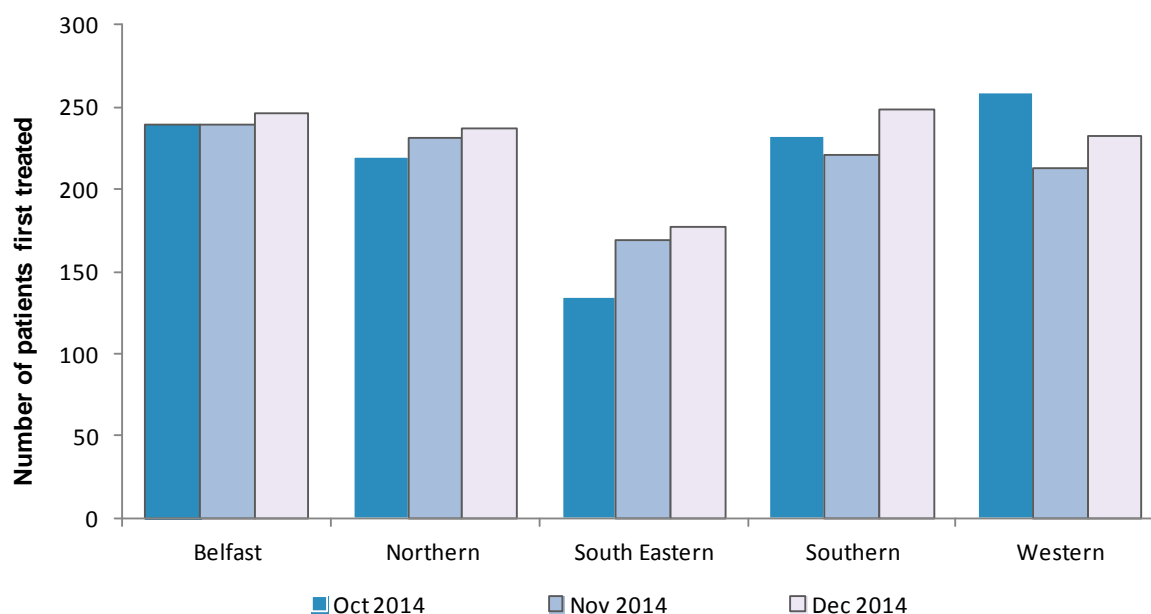
⁹ See Explanatory Notes 1-2 & 11-13

Latest Quarter - October to December 2014

Number of patients seen⁸

Between October and December 2014, there was a small increase in the number of patients first seen following an urgent referral for suspect breast cancer, with 1,142 patients seen in December 2014 compared to 1,085 patients seen in October 2014. Figure 14 shows the number of patients first seen following an urgent referral for suspect breast cancer over the last three months by HSC Trust (Table 12).

Figure 14: Number of patients seen for a first assessment with a breast cancer specialist following an urgent referral for suspect breast cancer, by HSC Trust (Oct - Dec 2014)



Between October and December 2014, the number of patients seen in the Western Trust decreased, from 259 patients first seen in October 2014 to 233 first seen in December 2014 (Figure 14, Table 12).

During this period, the Belfast, Northern, South Eastern and Southern Trusts all reported an increase in the number of patients seen, with the South Eastern Trust reporting the largest increase, from 134 patients first seen in October 2014 to 177 first seen in December 2014 (Figure 14, Table 12).

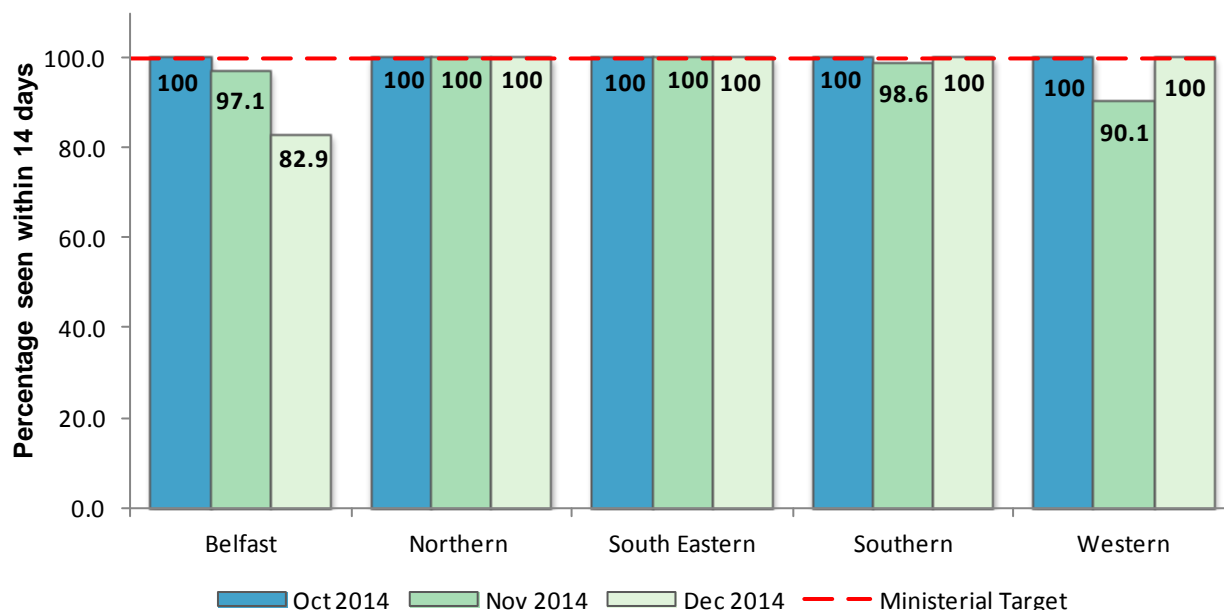
Performance against the 14 day target (by HSC Trust)⁹

For Northern Ireland as a whole, there was a small decrease in the percentage of patients first seen within 14 days following an urgent referral for suspect breast cancer, from 100.0% in October 2014 (1,085) to 96.3% in December 2014 (1,100 of the 1,142 patients). Figure 15 shows the percentage of patients first seen within 14 days over the last three months by HSC Trust (Table 12).

⁸ See Explanatory Notes 1 & 11-13

⁹ See Explanatory Notes 1-2 & 11-13

Figure 15: Percentage of patients seen by a breast cancer specialist within 14 days following an urgent referral for suspect breast cancer, by HSC Trust (October – December 2014)



Northern Ireland as a whole met the 100% Ministerial target in October but failed to meet it in either the month of November or December 2014. The Northern and South Eastern Trusts met the target during each of the months of October, November and December 2014, whilst the Southern and Western Trusts met the target in October and December 2014. The Belfast Trust met the target in October 2014 (Figure 15, Table 12).

Between October and December 2014, Belfast Trust showed a decrease in the percentage of patients seen within 14 days. All 239 patients were first seen within 14 days in October 2014, compared to 204 out of 246 (82.9%) patients in December 2014 (Figure 15, Table 12).

The Northern and South Eastern Trusts reported no change between October and December 2014, with all patients being seen within 14 days of an urgent referral being made (Figure 15, Table 12). The Southern and Western Trusts saw 100% of patients with an urgent referral for suspect breast cancer in October and December 2014, this dropped to 98.6% and 90.1% respectively in November 2014.

Historical performance against the 14 day target⁹

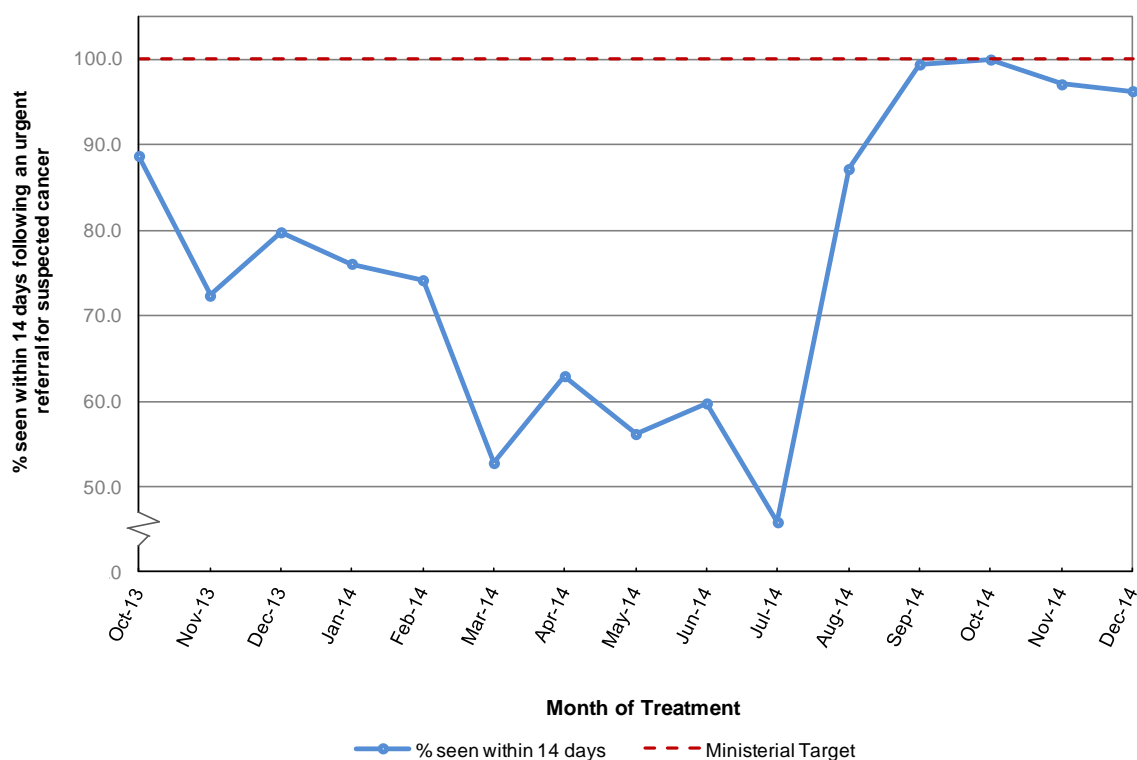
Performance during the last fifteen months - October 2013 to December 2014

Between December 2013 and December 2014, there was an increase in the number of patients first seen following an urgent referral increasing from 836 patients in December 2013 to 1,142 in December 2014 (Table 13).

Figure 16 shows the percentage of patients seen by a breast cancer specialist within 14 days following an urgent referral for suspect breast cancer from October 2013 to December 2014.

⁹ See Explanatory Notes 1-2 & 11-13.

Figure 16: Percentage of patients seen by a breast cancer specialist within 14 days following an urgent referral for suspect breast cancer (October 2013 - December 2014)



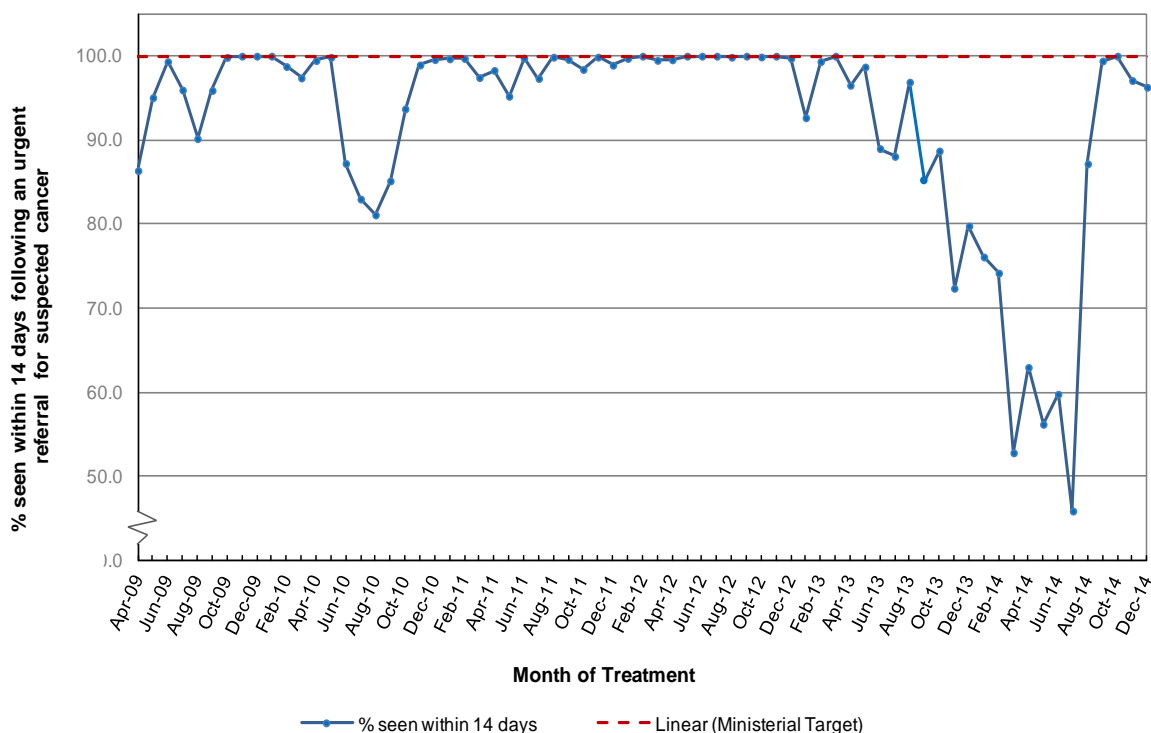
When compared to last year, the percentage of patients first seen within 14 days following an urgent referral for suspect breast cancer was higher in December 2014, with 1,100 of the 1,142 patients (96.3%) seen within 14 days, compared to 667 of the 836 patients (79.8%) seen within 14 days in December 2013 (Figure 16, Table 13).

From October 2013, a general downward trend was observed up until July 2014. The percentage seen within 14 days then rose steeply between July and August 2014 and has remained high. The highest percentage of patients first seen within 14 days during the last 15 months was recorded in October 2014 (100.0%). The lowest percentage recorded (45.9%) was during July 2014. (Figure 16, Table 13).

Performance since April 2009

Figure 17 shows the percentage of patients seen within 14 days from April 2009 to December 2014.

Figure 17: Percentage of patients seen by a breast cancer specialist within 14 days following an urgent referral for suspect breast cancer (April 2009 – December 2014)



Following an initial period of fluctuation between April 2009 and November 2009, the waiting time position largely stabilised with at least 93% of patients seen within 14 days until January 2013, except for a decline between June 2010 and August 2010 (Figure 17, Table 13).

Between May 2013 and July 2014 there was a noticeable downward trend, with the percentage seen within 14 days in July 2014 (45.9%) being the lowest recorded since collection of the waiting times for a first appointment with a breast cancer specialist from all referral sources began in April 2009. However, performance has considerably improved reaching 100.0% seen within 14 days in October before dropping slightly to 96.3% seen within 14 days in December 2014 (Figure 17, Table 13).

Additional Tables

Table 6: Number of patients first treated for cancer following an urgent GP referral for suspect cancer, for all cancers in HSC Trusts in Northern Ireland (October – December 2014)²

HSC Trust	No. of patients first treated for Cancer following an urgent GP referral for Suspected Cancer								
	Total treated			Treated within 62 days from receipt of Referral			Percentage (%) treated within 62 days		
	Oct 2014	Nov 2014	Dec 2014	Oct 2014	Nov 2014	Dec 2014	Oct 2014	Nov 2014	Dec 2014
Belfast	91.0	94.5	96.5	58.5	65.0	71.0	64.3	68.8	73.6
Northern	70.5	58.0	60.0	40.5	43.0	41.0	57.4	74.1	68.3
South Eastern	61.0	54.0	63.0	37.5	30.0	35.0	61.5	55.6	55.6
Southern	49.5	37.0	55.0	44.0	31.5	50.0	88.9	85.1	90.9
Western	49.0	57.5	41.5	44.5	53.5	39.0	90.8	93.0	94.0
Northern Ireland	321	301	316	225	223	236	70.1	74.1	74.7

Source: Cancer Patient Pathway System (CaPPS)

²Refer to Explanatory Notes – Points 1-5.

Table 7: Number of patients first treated for cancer following an urgent GP referral for suspect cancer, by tumour site (October - December 2014)³

Cancer Site	No. of patients first treated for Cancer following an urgent GP referral for Suspected Cancer								
	Total treated			Treated within 62 days from receipt of Referral			Percentage (%) treated within 62 days		
	Oct 2014	Nov 2014	Dec 2014	Oct 2014	Nov 2014	Dec 2014	Oct 2014	Nov 2014	Dec 2014
Brain/ CNS Cancer	0	1	1	0	1	1	-	100.0	100.0
Breast Cancer	44	53	64	44	53	62	100.0	100.0	96.9
Gynae Cancers	15	19	16	12	10	9	80.0	52.6	56.3
Haematological Cancers	13	12	9	12	10	9	92.3	83.3	100.0
Head/Neck Cancer	15	14	11	10	9	8	66.7	64.3	72.7
Lower GI Cancer	42	24	38	27	15	25	64.3	62.5	65.8
Lung Cancer	38	25	24	25	20	18	65.8	80.0	75.0
Sarcomas	1	0	1	0	0	1	0.0	-	100.0
Skin Cancers	47	56	67	33	42	48	70.2	75.0	71.6
Upper GI Cancer	26	20	17	13	11	16	50.0	55.0	94.1
Urological Cancer	77	69	65	47	46	36	61.0	66.7	55.4
Other	3	8	3	2	6	3	66.7	75.0	100.0
Northern Ireland	321	301	316	225	223	236	70.1	74.1	74.7

Source: Cancer Patient Pathway System (CaPPS)

³Refer to Explanatory Notes – Points 1-6 & 14.

Table 8: Number of patients first treated for cancer following an urgent GP referral for suspect cancer, for all cancers, in Northern Ireland (March 2009 - December 2014)⁴

Month	No. of patients first treated for Cancer following an urgent GP referral for Suspected Cancer		
	Total treated	Treated within 62 days from receipt of referral	Percentage (%) treated within 62 days
March 2009	215	199	92.6
April 2009	189	169	89.4
May 2009	158	137	86.7
June 2009	240	212	88.3
July 2009	212	186	87.7
August 2009	202	181	89.6
September 2009	243	204	84.0
October 2009	193	174	90.2
November 2009	198	175	88.4
December 2009	183	165	90.2
January 2010	156	140	89.7
February 2010	180	160	88.9
March 2010	221	204	92.3
April 2010	204	180	88.2
May 2010	208	179	86.1
June 2010	239	206	86.2
July 2010	213	195	91.5
August 2010	198	161	81.3
September 2010	272	233	85.7
October 2010	209	179	85.6
November 2010	245	203	82.9
December 2010	220	180	81.8
January 2011	234	201	85.9
February 2011	204	157	77.0
March 2011	240	196	81.7
April 2011	199	163	81.9
May 2011	216	172	79.6
June 2011	288	238	82.6
July 2011	218	172	78.9
August 2011	252	209	82.9
September 2011	265	220	83.0
October 2011	250	201	80.4
November 2011	280	236	84.3
December 2011	252	210	83.3
January 2012	261	212	81.2
February 2012	254	187	73.6
March 2012	283	239	84.5

Table 8 continued:

Month	No. of patients first treated for Cancer following an urgent GP referral for Suspected Cancer		
	Total treated	Treated within 62 days from receipt of referral	Percentage (%) treated within 62 days
April 2012	234	186	79.5
May 2012	294	238	81.0
June 2012	227	186	81.9
July 2012	258	208	80.6
August 2012	256	203	79.3
September 2012	255	204	80.0
October 2012	305	245	80.3
November 2012	279	226	81.0
December 2012	225	196	87.1
January 2013	301	252	83.7
February 2013	266	212	79.7
March 2013	268	233	86.9
April 2013	227	184	81.1
May 2013	265	227	85.7
June 2013	277	228	82.3
July 2013	294	249	84.7
August 2013	283	235	83.0
September 2013	304	250	82.2
October 2013	347	269	77.5
November 2013	266	228	85.7
December 2013	279	228	81.7
January 2014	302	237	78.5
February 2014	258	204	79.1
March 2014	277	219	79.1
April 2014	305	235	77.0
May 2014	308	226	73.4
June 2014	283	218	77.0
July 2014	317	230	72.6
August 2014	292	216	74.0
September 2014	330	213	64.5
October 2014	321	225	70.1
November 2014	301	223	74.1
December 2014	316	236	74.7

Source: Cancer Patient Pathway System (CaPPS)

⁴Refer to Explanatory Notes – Points 1-5 & 7

Table 9: Number of patients first treated for cancer, for all cancers in HSC Trusts in Northern Ireland (October - December 2014)⁶

HSC Trust	No. of patients first treated for Cancer (All referrals)								
	Total treated			Treated within 31 days of a decision to treat being taken			Percentage (%) treated within 31 days		
	Oct 2014	Nov 2014	Dec 2014	Oct 2014	Nov 2014	Dec 2014	Oct 2014	Nov 2014	Dec 2014
Belfast	362	331	345	342	310	315	94.5	93.7	91.3
Northern	124	115	106	124	114	105	100.0	99.1	99.1
South Eastern	113	101	120	111	95	114	98.2	94.1	95.0
Southern	126	109	111	125	108	111	99.2	99.1	100.0
Western	113	115	123	113	115	123	100.0	100.0	100.0
Northern Ireland	838	771	805	815	742	768	97.3	96.2	95.4

Source: Cancer Patient Pathway System (CaPPS)

⁶Refer to Explanatory Notes – Points 1-2 & 8-9.

Table 10: Number of patients first treated for cancer, by tumour site (October - December 2014)⁷

Cancer Site	No. of patients first treated for Cancer (All referrals)								
	Total treated			Treated within 31 days of a decision to treat being taken			Percentage (%) treated within 31 days		
	Oct 2014	Nov 2014	Dec 2014	Oct 2014	Nov 2014	Dec 2014	Oct 2014	Nov 2014	Dec 2014
Brain/ CNS Cancer	13	10	14	13	10	14	100.0	100.0	100.0
Breast Cancer	115	117	127	115	117	127	100.0	100.0	100.0
Gynae Cancers	42	44	46	41	42	46	97.6	95.5	100.0
Haematological Cancers	65	63	45	65	63	45	100.0	100.0	100.0
Head/Neck Cancer	36	30	25	33	29	25	91.7	96.7	100.0
Lower GI Cancer	110	91	112	110	90	111	100.0	98.9	99.1
Lung Cancer	106	94	87	105	92	83	99.1	97.9	95.4
Sarcomas	5	1	2	5	1	2	100.0	100.0	100.0
Skin Cancers	117	105	126	112	99	116	95.7	94.3	92.1
Upper GI Cancer	71	60	57	69	57	55	97.2	95.0	96.5
Urological Cancer	139	137	145	128	124	125	92.1	90.5	86.2
Other	19	19	19	19	18	19	100.0	94.7	100.0
Northern Ireland	838	771	805	815	742	768	97.3	96.2	95.4

Source: Cancer Patient Pathway System (CaPPS)

⁷Refer to Explanatory Notes – Points 1-2, 8-10 & 14.

Table 11: Number of patients first treated for cancer, for all cancers, in Northern Ireland (April 2008 - December 2014)⁶

Month	No. of patients first treated for Cancer (All referrals)		
	Total treated	Treated within 31 days of a decision to treat being taken	Percentage (%) treated within 31 days
April 2008	658	614	93.3
May 2008	572	551	96.3
June 2008	623	611	98.1
July 2008	531	513	96.6
August 2008	510	487	95.5
September 2008	555	536	96.6
October 2008	520	512	98.5
November 2008	543	532	98.0
December 2008	575	564	98.1
January 2009	621	596	96.0
February 2009	589	574	97.5
March 2009	670	661	98.7
April 2009	621	611	98.4
May 2009	603	587	97.3
June 2009	702	693	98.7
July 2009	622	615	98.9
August 2009	598	589	98.5
September 2009	725	704	97.1
October 2009	674	659	97.8
November 2009	664	645	97.1
December 2009	606	595	98.2
January 2010	561	549	97.9
February 2010	611	599	98.0
March 2010	700	686	98.0
April 2010	616	602	97.7
May 2010	620	609	98.2
June 2010	732	714	97.5
July 2010	650	633	97.4
August 2010	628	606	96.5
September 2010	705	686	97.3
October 2010	645	633	98.1
November 2010	714	696	97.5
December 2010	633	620	97.9
January 2011	650	638	98.2
February 2011	606	595	98.2
March 2011	730	716	98.1

Table 11 continued:

Month	No. of patients first treated for Cancer (All referrals)		
	Total treated	Treated within 31 days of a decision to treat being taken	Percentage (%) treated within 31 days
April 2011	584	574	98.3
May 2011	648	635	98.0
June 2011	790	772	97.7
July 2011	645	633	98.1
August 2011	679	663	97.6
September 2011	664	652	98.2
October 2011	713	692	97.1
November 2011	749	728	97.2
December 2011	646	633	98.0
January 2012	736	698	94.8
February 2012	713	687	96.4
March 2012	713	692	97.1
April 2012	660	635	96.2
May 2012	829	814	98.2
June 2012	662	648	97.9
July 2012	704	683	97.0
August 2012	717	696	97.1
September 2012	683	668	97.8
October 2012	872	843	96.7
November 2012	768	758	98.7
December 2012	643	633	98.4
January 2013	805	781	97.0
February 2013	697	673	96.6
March 2013	718	707	98.5
April 2013	677	643	95.0
May 2013	752	740	98.4
June 2013	734	719	98.0
July 2013	745	717	96.2
August 2013	725	715	98.6
September 2013	745	726	97.4
October 2013	828	807	97.5
November 2013	754	745	98.8
December 2013	694	685	98.7
January 2014	776	756	97.4
February 2014	673	648	96.3
March 2014	691	673	97.4
April 2014	724	701	96.8
May 2014	711	688	96.8
June 2014	733	714	97.4
July 2014	756	734	97.1
August 2014	715	687	96.1
September 2014	773	735	95.1
October 2014	839	815	97.3
November 2014	771	742	96.2
December 2014	805	768	95.4

Source: Cancer Patient Pathway System (CaPPS)

⁶Refer to Explanatory Notes – Points 1-2 & 8-9

Table 12: Number of patients seen by a breast cancer specialist following an urgent referral for suspect cancer in HSC Trusts in Northern Ireland (October - December 2014)⁹

HSC Trust	No. of patients first seen by a breast cancer specialist following an urgent referral for suspect cancer								
	Total seen			No. that waited 14 days or less			Percentage (%) seen within 14 days		
	Oct 2014	Nov 2014	Dec 2014	Oct 2014	Nov 2014	Dec 2014	Oct 2014	Nov 2014	Dec 2014
Belfast	239	239	246	239	232	204	100.0	97.1	82.9
Northern	220	231	237	220	231	237	100.0	100.0	100.0
South Eastern	134	169	177	134	169	177	100.0	100.0	100.0
Southern	233	221	249	233	218	249	100.0	98.6	100.0
Western	259	213	233	259	192	233	100.0	90.1	100.0
Northern Ireland	1,085	1,073	1,142	1,085	1,042	1,100	100.0	97.1	96.3

Source: Departmental Return SDR 2.

⁹Refer to Explanatory Notes – points 1-2 & 11-13.

Table 13: Number of patients seen by a breast cancer specialist following an urgent referral for suspect cancer in Northern Ireland (April 2009 - December 2014)⁹

Month	No. of patients first seen by a breast cancer specialist following an urgent referral for suspect cancer		
	Total seen	No. that waited 14 days or less	Percentage (%) seen within 14 days
April 2009	800	691	86.4
May 2009	689	655	95.1
June 2009	764	759	99.3
July 2009	695	667	96.0
August 2009	672	606	90.2
September 2009	784	752	95.9
October 2009	691	690	99.9
November 2009	722	722	100.0
December 2009	685	685	100.0
January 2010	620	620	100.0
February 2010	727	718	98.8
March 2010	848	826	97.4
April 2010	765	761	99.5
May 2010	738	737	99.9
June 2010	955	833	87.2
July 2010	735	610	83.0
August 2010	852	691	81.1
September 2010	842	717	85.2
October 2010	829	777	93.7
November 2010	860	851	99.0
December 2010	731	728	99.6
January 2011	627	625	99.7
February 2011	716	714	99.7
March 2011	901	878	97.4

Table 13 continued:

Month	No. of patients first seen by a breast cancer specialist following an urgent referral for suspect cancer		
	Total seen	No. that waited 14 days or less	Percentage (%) seen within 14 days
April 2011	708	696	98.3
May 2011	838	798	95.2
June 2011	860	858	99.8
July 2011	640	623	97.3
August 2011	837	836	99.9
September 2011	783	780	99.6
October 2011	759	747	98.4
November 2011	878	877	99.9
December 2011	744	736	98.9
January 2012	744	742	99.7
February 2012	852	852	100.0
March 2012	805	801	99.5
April 2012	691	688	99.6
May 2012	784	784	100.0
June 2012	743	743	100.0
July 2012	710	710	100.0
August 2012	806	805	99.9
September 2012	709	709	100.0
October 2012	1,042	1,041	99.9
November 2012	900	900	100.0
December 2012	759	757	99.7
January 2013	805	746	92.7
February 2013	775	770	99.4
March 2013	831	831	100.0
April 2013	778	751	96.5
May 2013	930	918	98.7
June 2013	854	760	89.0
July 2013	981	864	88.1
August 2013	873	846	96.9
September 2013	933	794	85.1
October 2013	1,028	912	88.7
November 2013	1,046	757	72.4
December 2013	836	667	79.8
January 2014	1,071	815	76.1
February 2014	949	704	74.2
March 2014	860	454	52.8
April 2014	1,015	639	63.0
May 2014	1,027	577	56.2
June 2014	1,014	606	59.8
July 2014	1,112	510	45.9
August 2014	1,116	973	87.2
September 2014	1,040	1,034	99.4
October 2014	1,085	1,085	100.0
November 2014	1,073	1,042	97.1
December 2014	1,142	1,100	96.3

Source: Departmental Return SDR 2

⁹Refer 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 from April 2014, (i) 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, 6, 7 and 8 relate to patients who received a first definitive treatment for cancer (having been given an 'International Classification of Diseases 10' (ICD 10) diagnosis) during the months of October, November and December 2014, following an urgent referral for suspect cancer from a General Practitioner or a routine GP referral that has subsequently been reclassified as urgent by a cancer specialist. Data for all cancers are included 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 in Northern Ireland. Referrals from sources other than a GP, routine referrals and patients who have not been given an ICD 10 diagnosis are excluded.
4. The completed waiting time in Tables 1, 2, 6, 7 and 8 is measured from the date an initial urgent GP referral for suspect cancer is received by the Provider Health and Social Care Trust and ends on the date the patient receives 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, 6, 7 and 8, include 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 that patient is shared, with 0.5 allocated to the Trust where the patient was first assessed 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 70 days after their initial GP referral, both the South Eastern and Belfast HSC Trusts will report 0.5 of a patient treated who waited over 62 days.
6. 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.
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 3, 4, 9, 10 and 11 relate to all patients who received a first definitive treatment for cancer (having been given an ICD 10 diagnosis) during the months of October, November and December 2014, irrespective of their source or type 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 in Northern Ireland. Patients that have not been given an ICD 10 diagnosis are excluded.
9. The completed waiting time in Tables 3, 4, 9, 10 and 11 is measured from the date a decision is taken to treat a patient for cancer and ends on the date the patient receives their first definitive

treatment for cancer. The decision to treat is the date on which the patient and the clinician agree the planned treatment. 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 10 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 5, 12 and 13 relate 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 that were first seen during the months of October, November and December 2014. Figures also include patients living outside Northern Ireland and all privately funded patients waiting for treatment in Health and Social Care hospitals in Northern Ireland.
12. The completed waiting time in Tables 5, 12 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 attends their first outpatient appointment with a breast cancer specialist. Adjustments are made to the completed waiting time in the event of a patient cancelling, self-deferring or failing to attend a first outpatient appointment.
13. Figures provided in Tables 5, 12 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 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 with 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
17. Information on waiting times for the months of January, February and March 2015 will be published on Thursday 25th June 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 month 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 patients within a Health Service hospital 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. This includes all patients living outside Northern Ireland and all privately funded patients waiting for treatment in Health and Social Care hospitals in Northern Ireland. Referrals from sources other than a GP, routine referrals and patients who have not been given an ICD 10 diagnosis are excluded.

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 an urgent 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 urgently referred by a GP to a HSC Trust with suspect cancer. The figures do 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). Please note the data do not relate to either the number of urgent GP referrals with suspect cancer who are currently on treatment, or the number of patients diagnosed with cancer during each month. The data do however 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 following an urgent GP referral.

- 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 four 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 Ministerial target requiring the HSC Board and HSC Trusts to ensure that, at least 95% of patients commence cancer treatment within 62 days of receipt of an urgent referral from a GP for suspect cancer.
- Patients who commenced treatment and time waited 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 to 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 five 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 Ministerial target. Again, they should not be used to assess the number of patients diagnosed with cancer, or who are currently being treated for cancer within each HSC Trust area.
- Patients who commenced treatment and time waited by tumour site – patients who commenced treatment for cancer will have previously been diagnosed with cancer and given an ICD 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 patients within a Health Service hospital 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. This includes all patients living outside Northern Ireland and all privately funded patients waiting for treatment in Health and Social Care hospitals in Northern Ireland. Patients that have not been given an ICD 10 diagnosis are excluded.

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, 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 who commenced treatment for cancer following a decision to treat – these data relate to the total number of patients who commenced treatment for cancer following a cancer specialist (as part of a 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– 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 patients are currently waiting to commence treatment. Data on the length of time 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 who waited no longer than 31 days to commence their treatment.
- Patients who commenced treatment and time waited 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.
- Patients who commenced treatment and time waited by tumour site – patients who commenced treatment for cancer will have previously been diagnosed with cancer and given an ICD 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 patients within a Health Service hospital 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. This includes patients living outside Northern Ireland and privately funded patients waiting for treatment in Health and Social Care hospitals.

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 relate solely to patients who were referred as urgent with suspect breast cancer. All sources of referral are included, urgent referrals from both General Practitioners and other medical professionals. The figures do not relate to the number of patients who have been diagnosed with breast cancer, nor should they be used to estimate the number who commenced treatment for breast cancer – some of the patients included within these data 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 or were offered an assessment within 14 calendar days of the referral being received by the HSC Trust. Explanatory note twelve explains how these waiting times are measured. This information relates to how long these patients waited for their first assessment (their completed wait), not the length of time patients are currently waiting for their first assessment. Data on the length of time patients are currently waiting for their first outpatient appointment with a breast cancer specialist are not collected, although they will be included within the overall outpatient waiting time data collected and published by the Department.
- 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. It also includes patients who were offered an appointment within 14 days but self-deferred.
- Number of patients seen and time waited 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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Internet address: <http://www.dhsspsni.gov.uk/index/statistics/publications-statistics.htm>