



Northern Ireland Waiting Time Statistics:

Cancer Waiting Times
(July – September 2015)





Reader Information

Purpose

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 2015/16 Ministerial Target for cancer care services, which state that:

"From April 2015, 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."

This statistics release gives details of the waiting times for patients accessing cancer services at hospitals in Northern Ireland during July, August and September 2015. All data are presented by Health and Social Care Trust and, where applicable, by tumour site.

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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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specified.

During September 2015

69.6%

Treated Within 62 Days Following Referral

96.4%

Treated Within 31 Days of Decision to Treat

87.4%

Seen Within 14 Days of Breast Cancer Referral

Key Points

- Performance against the 62 day cancer waiting time target in Northern Ireland continues to be much lower than the 95% standard. In September 2015, 69.6% of patients who commenced treatment following an urgent referral for suspect cancer were treated within 62 days, lower than July 2015 (72.3%) but higher than August 2015 (65.6%) (Table 6).
- Of the 109 patients treated in September 2015 who had waited longer than 62 days for treatment, 32 (29.4%) were diagnosed with urological cancer and 22 (20.2%) were diagnosed with lower gastrointestinal (GI) cancer (Figure 4).
- In September 2015, 96.4% of patients received their first treatment within 31 days of a decision to treat being taken, slightly lower than July 2015 (96.6%) but higher than August 2015 (96.0%) (Table 9).
- Of the 29 patients treated in September 2015 who had waited longer than 31 days, over two fifths (12, 41.4%) were diagnosed with urological cancer (Figure 9).
- In September 2015, 87.4% of patients who attended a first assessment with a breast cancer specialist following an urgent breast cancer referral were seen within 14 days, higher than July 2015 (85.4%) and August 2015 (81.0%) (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: https://www.dhsspsni.gov.uk/topics/dhssps-statistics-and-research

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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 2015/16 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:

https://www.dhsspsni.gov.uk/articles/cancer-waiting-times

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, 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. 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: https://www.dhsspsni.gov.uk/articles/cancer-waiting-times

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, HSC Board and HSC Trusts in providing timely access to hospital services in Northern Ireland.

Data contained in this publication relate 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 July, August and September 2015.

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 2015/16. Performance against each element is detailed below.

2.1: Performance against the 62 day component



The 2015/16 Ministerial target on waiting times for treatment following an urgent GP referral for suspect cancer requires that, from April 2015, at least 95% of patients should begin their first treatment within 62 days.

The Ministerial target on waiting times for patients receiving first treatment following an urgent GP referral for suspect cancer <u>has not been achieved</u> by Northern Ireland as a whole during July, August and September 2015 (Figure 1, Table 6).

Figure 1: HSC Trust Performance against the 62 day Ministerial target (Jul - Sep 2015)

	Target Achieved?						
HSC Trust	Jul 2015 Aug 2015 Sep 2015						
Belfast	No	No	No				
Northern	No	No	No				
South Eastern	No	No	No				
Southern	No	No	Yes				
Western	No	No	No				
Northern Ireland	No No No						

The Ministerial target was not met by any Trust during July or August 2015. The target was met by the Southern HSC Trust in September 2015 (Figure 1, Table 6).

2.2: Performance against the 31 day component



The 2015/16 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 <u>has not been achieved</u> by Northern Ireland as a whole during July, August and September 2015 (Figure 2, Table 9).

Figure 2: HSC Trust Performance against the 31 day Ministerial target (Jul - Sep 2015)

	Target Achieved?						
HSC Trust	Jul 2015 Aug 2015 Sep 2015						
Belfast	No	No	No				
Northern	No	Yes	Yes				
South Eastern	No	No	No				
Southern	Yes	Yes	Yes				
Western	Yes	Yes	Yes				
Northern Ireland	No No No						

Across HSC Trusts, the Southern and Western HSC Trusts achieved the Ministerial target in all three months of the quarter, while the Northern HSC Trust achieved the target in August and September 2015. The Belfast and South Eastern Trusts failed to meet the target in all three months of the quarter (Figure 2, Table 9).

2.3: Performance against the 14 day component



The 2015/16 Ministerial target on waiting times for a first assessment with a breast cancer specialist states that, from April 2015, 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 <u>has not been achieved</u> by Northern Ireland as a whole during July, August and September 2015 (Figure 3, Table 12).

Figure 3: HSC Trust Performance against the 14 day Ministerial target (Jul - Sep 2015)

	Target Achieved?					
HSC Trust	Jul 2015 Aug 2015 Sep 2015					
Belfast	No	No	No			
Northern	Yes	Yes	Yes			
South Eastern	No	No	No			
Southern	Yes	No	Yes			
Western	Yes	Yes	Yes			
Northern Ireland	No	No	No			

Across the HSC Trusts, the Northern and Western HSC Trusts met the target during each of the months of July, August and September 2015, while the Southern HSC Trust met the target in July and September 2015. The Belfast and South Eastern Trusts did not meet the target in any of the three months. (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 - September 2015

Number of patients treated¹

In September 2015, 358 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 358 patients treated during September 2015, just under a third (116, 32.4%) were treated in the Belfast Trust. A further 63.5 (17.7%) patients were treated in the South Eastern Trust, 62.0 (17.3%) in each of the Northern and Southern Trusts, and 54.5 (15.2%) in the Western Trust (Figure 5, Table 6).

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

During September 2015, just over two thirds (69.6%, 249) of patients were treated within 62 days. This was 25.4 percentage points lower than the 95% required in order to achieve 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 (September 2015)

	% treated within 62 days
HSC Trust	(Sep 2015)
Belfast	55.2
Northern	62.1
South Eastern	61.4
Southern	95.2
Western	89.0
Northern Ireland	69.6

Only the Southern HSC Trust met the 62 day Ministerial target in September 2015 (Table 1, Figure 6).

Of the 109 patients that were not treated within 62 days during September 2015, there were the equivalent of 52.0 in the Belfast Trust, 24.5 in the South Eastern Trust, 23.5 in the Northern Trust, 6.0 in the Western Trust, and 3.0 in the Southern Trust (Table 6).

¹See Explanatory Notes 1 & 3-5

²See Explanatory Notes 1-5

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

Of those treated during September 2015, 109 patients had waited longer than 62 days for treatment following an urgent GP referral for suspect cancer. Of those 109 patients, 32 were diagnosed with urological cancer, 22 with lower gastrointestinal (GI) cancer, 18 with skin cancer, 10 with upper gastrointestinal (GI) cancer, 8 with head/neck cancer, 7 with gynaecological (Gynae) cancer, 7 with lung cancer, 3 with breast cancer, 1 with haematological cancer and 1 with cancer classified as 'Other' (Figure 4, Table 7).

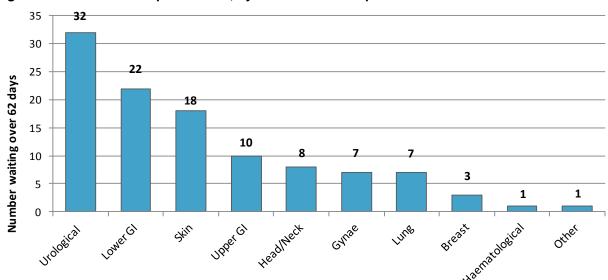


Figure 4: Number of patients treated who waited over 62 days for treatment following an urgent GP referral for suspect cancer, by tumour site in September 2015

Latest Quarter - July to September 2015

Number of patients treated¹

The number of patients commencing treatment for cancer following an urgent referral for suspect cancer in Northern Ireland has increased from 332 patients in July 2015 to 358 in September 2015. 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 & 15

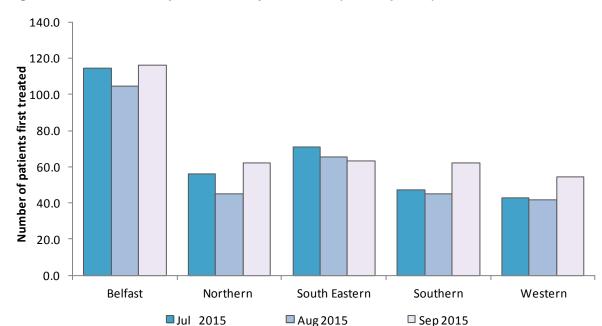


Figure 5: Number of patients receiving a first definitive treatment for cancer following an urgent GP referral for suspect cancer, by HSC Trust (Jul - Sep 2015)

Between July and September 2015, all but the South Eastern Trust reported increases in the number of patients treated. The largest increase was reported in the Southern Trust with 47.5 patients first treated in July and 62.0 first treated in September 2015. (Figure 5, Table 6).

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 decreased from 72.3% treated within 62 days in July 2015 (240 out of 332 patients) to 69.6% in September 2015 (249 out of 358 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

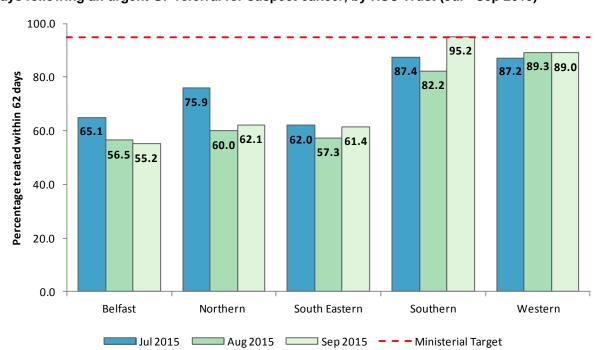


Figure 6: Percentage of patients who received a first definitive treatment for cancer within 62 days following an urgent GP referral for suspect cancer, by HSC Trust (Jul - Sep 2015)

Almost all HSC Trusts failed to meet the Ministerial target in July, August and September 2015 (Figure 6, Table 6). The Southern Trust achieved the target in September 2015 with 95.2% (59.0 out of 62.0) of patients first treated within 62 days.

During July to September 2015, the Southern and Western Trusts had consistently higher percentages of patients treated within 62 days than the remaining three Trusts (Figure 6, Table 6).

Between July and September 2015, the percentage of patients treated with 62 days remained similar in the South Eastern Trust, with 61.4% of patients (39.0 out of 63.5) first treated within 62 days in September 2015, compared to 62.0% (44.0 out of 71.0) in July 2015 (Figure 6, Table 6).

The Belfast and Northern Trusts reported a lower percentage of patients treated within 62 days in September than July 2015. The Northern Trust reported the largest decrease with 62.1% of patients (38.5 out of 62.0) treated within 62 days in September 2015, compared to 75.9% (42.5 out of 56.0) in July 2015 (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 July, August and September 2015.

³ See Explanatory Notes 1-6 & 15

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 (Jul - Sep 2015)

	Percentage (%) treated within 62 days from receipt of an urgent GP referral							
Cancer Site	Jul 2015 Aug 2015 Sep 2015							
Brain/ Central Nervous System (CNS) Cancer	-	-	-					
Breast Cancer	97.0	100.0	94.9					
Gynaecological Cancers	70.0	58.8	70.8					
Haematological Cancers	75.0	62.5	88.9					
Head/Neck Cancer	53.3	46.2	55.6					
Lower Gastrointestinal (GI) Cancer	55.2	36.8	38.9					
Lung Cancer	75.0	58.1	75.9					
Sarcomas	-	100.0	-					
Skin Cancers	83.8	73.7	76.3					
Upper Gastrointestinal (GI) Cancer	26.7	43.8	52.4					
Urological Cancer	58.9	59.3	61.0					
Other	66.7	60.0	75.0					
Northern Ireland	72.3 65.6 69.6							

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

During July and August 2015, the 95% target was met for patients diagnosed with breast cancer; the target was almost met September 2015 with 94.9% of patients diagnosed with breast cancer treated within 62 days from receipt of an urgent GP referral (Table 2 & Table 7).

Less than 52.5% of patients diagnosed with upper gastrointestinal (GI) cancer commenced treatment within 62 days during each of the months of July, August and September 2015.

Historical performance against the 62 day target⁴

Performance during the last fifteen months - July 2014 to September 2015

When compared with the same month last year, the number of patients first treated following an urgent referral showed an increase from 330 patients first treated in September 2014 to 358 in September 2015 (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 (July 2014 to September 2015).

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⁴ See Explanatory Notes 1-5 & 7

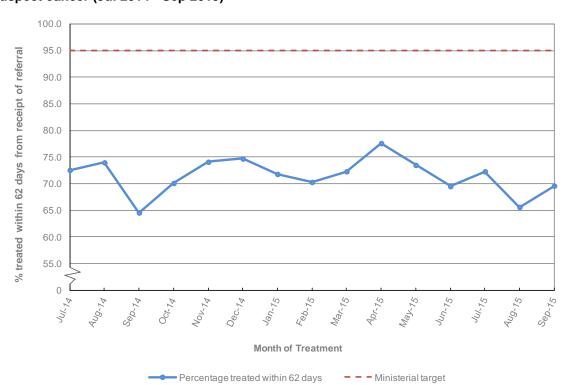


Figure 7: Percentage of patients treated within 62 days following an urgent GP referral for suspect cancer (Jul 2014 - Sep 2015)

When compared to the same month last year, the percentage of patients treated within 62 days has increased, from 64.5% in September 2014 (231 out of 330 patients) to 69.6% in September 2015 (249 out of 358 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 treated within 62 days in September 2014 (64.5%). Since October 2014 performance has improved, rising to 77.6% in April 2015. Performance has dropped since April 2015 to 69.5% in September 2015 (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 September 2015.

Figure 8: Percentage of patients treated within 62 days following an urgent GP referral for suspect cancer (March 2009 - September 2015)



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

3.2: Waiting times following a decision to treat

Latest Position – September 2015

Number of patients treated⁵

In September 2015, 805 patients commenced treatment for cancer in Northern Ireland, following a decision to treat being taken (Table 9).

Of the 805 patients who commenced treatment for cancer in September 2015, over two fifths (41.2%, 332) were treated in the Belfast Trust. A further 148 (18.4%) patients were treated in Southern Trust, 127 (15.8%) in the South Eastern Trust, 103 (12.8%) in the Western Trust, and 95 (11.8%) in the Northern Trust (Figure 10, Table 9).

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

During September 2015, 776 of the 805 (96.4%) patients commencing treatment received their first treatment within 31 days of a decision to treat for cancer. This was 1.6 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 (September 2015)

HSC Trust	% treated within 31 days (Sep 2015)
Belfast	94.3
Northern	98.9
South Eastern	93.7
Southern	100.0
Western	99.0
Northern Ireland	96.4

Across HSC Trusts, the Northern, Southern and Western Trusts all achieved the 98% target in September 2015, with every patient from the Southern Trust commencing treatment within 31 days following a decision to treat (Figure 11, Table 3).

Of the 29 patients in September 2015 that had waited longer than 31 days, 19 were in the Belfast Trust, 8 in the South Eastern Trust, 1 in the Northern Trust and 1 in the Western Trust (Table 9).

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

During September 2015, 29 patients had waited longer than 31 days for treatment following a decision to treat being taken. Of these 29, 12 were diagnosed with urological cancer, 5 with skin cancer, 3 with lung cancer, 3 with lower gastrointestinal (GI) cancer, 2 with upper

⁶ See Explanatory Notes 1-2 & 8-9

⁵ See Explanatory Notes 1 & 8-9

⁷ See Explanatory Notes 1-2, 8-10 & 15

gastrointestinal (GI) cancer, 2 with gynaecological (Gynae) cancer, 1 with breast cancer and 1 with head/neck cancer (Figure 9, Table 10).

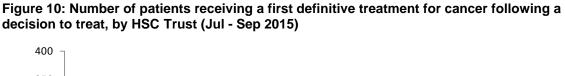
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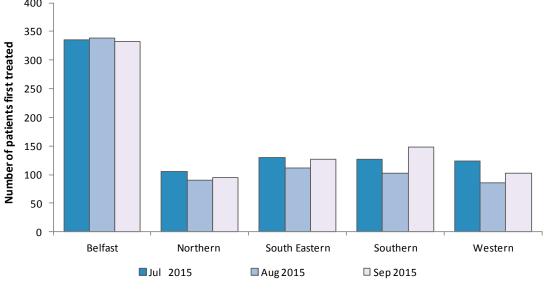
Figure 9: Number of patients who waited over 31 days for treatment following a decision to treat, by tumour site in September 2015

Latest Quarter - July to September 2015

Number of patients treated⁵

The number of patients commencing treatment following a decision to treat being taken has decreased from 820 in July 2015 to 805 in September 2015. Figure 10 shows how the number of patients treated within each HSC Trust has varied over the last three months (Table 9).





⁵ See Explanatory Notes 1 & 8-9.

Between July and September 2015, all but the Southern Trust reported decreases in the number of patients treated, with the Western Trust reporting the largest decrease (124 to 103 patients) (Figure 10, Table 9).

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

For Northern Ireland as a whole, there has been little change in the percentage of patients treated within 31 days following a decision to treat, with 96.6% in July 2015 (792 of 820 patients) and 96.4% in September 2015 (776 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).

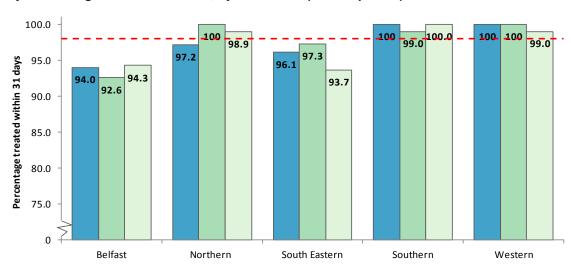


Figure 11: Percentage of patients receiving a first definitive treatment for cancer within 31 days following a decision to treat, by HSC Trust (Jul - Sep 2015)

Across HSC Trusts, the Southern and Western Trusts met the 98% Ministerial target in all three months of the quarter, while the Northern Trust met the target in August and September 2015 (Figure 11, Table 9). The Belfast and South Eastern Trusts did not meet the target in any of the three months within the quarter.

Sep 2015

The Belfast and Northern Trusts both reported small increases in the percentage of patients treated within 31 days between July and September 2015.

Jul 2015

Aug 2015

⁶ See Explanatory Notes 1-2 & 8-9.

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 July, August and September 2015.

Table 4: Percentage of patients receiving a first definitive treatment for cancer within 31 days following a decision to treat, by tumour site (Jul - Sep 2015)

	Percentage (%) treated within 31 days of a decision to treat being taken					
Cancer Site	Jul 2015 Aug 2015 Sep 2015					
Brain/ Central Nervous System						
(CNS) Cancer	100.0	100.0	100.0			
Breast Cancer	97.4	99.0	99.2			
Gynaecological Cancers	95.6	97.9	95.8			
Haematological Cancers	100.0	100.0	100.0			
Head/Neck Cancer	100.0	100.0	97.4			
Lower Gastrointestinal (GI) Cancer	100.0	97.8	96.7			
Lung Cancer	97.8	95.6	96.2			
Sarcomas	100.0	100.0	100.0			
Skin Cancers	95.7	95.1	96.6			
Upper Gastrointestinal (GI) Cancer	93.4	100.0	96.6			
Urological Cancer	92.6	88.0	91.7			
Other	100.0	92.9	100.0			
Northern Ireland	96.6 96.0 96.4					

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

Although the Ministerial target of 98% was not achieved at a regional level during July to September 2015, all patients diagnosed with brain/central nervous system (CNS) cancer, haematological cancer and sarcomas received treatment within 31 days following a decision to treat.

During July to September 2015, 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 – July 2014 to September 2015

When compared to the same month last year, there has been an increase in the number of patients commencing treatment, with 773 patients first treated in September 2014 and 805 patients first treated September 2015 (Table 11).

Figure 12 shows the percentage of patients treated for cancer within 31 days following a decision to treat over the last 15 months (July 2014 to September 2015).

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⁶ See Explanatory Notes 1-2 & 8-10

⁷ See Explanatory Notes 1-2, 8-10 & 15

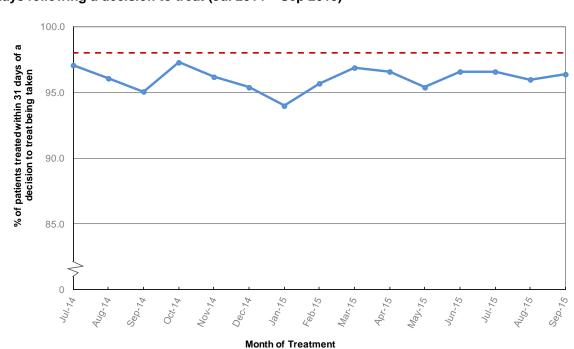


Figure 12: Percentage of patients who received a first definitive treatment for cancer within 31 days following a decision to treat (Jul 2014 – Sep 2015)

Comparing September 2014 to September 2015, the percentage of patients treated within 31 days following a decision to treat was higher in September 2015, with 776 of the 805 patients (96.4%) treated within 31 days, compared with 735 of the 773 patients (95.1%) treated within 31 days in September 2014 (Figure 12, Table 11).

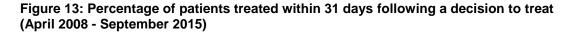
- Ministerial target

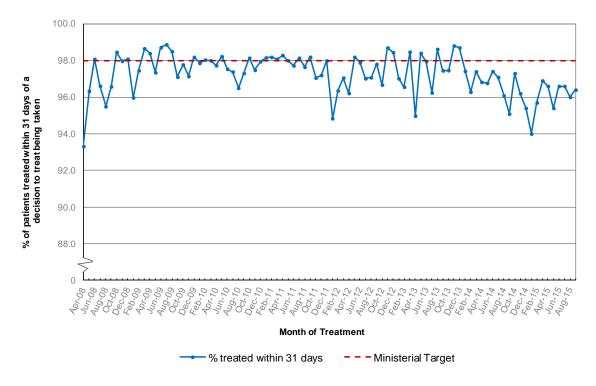
% treated within 31 days

Although there has been a degree of fluctuation, the percentage of patients treated within 31 days has remained at 94% or greater throughout the last 15 months. However, the Ministerial target of 98% has not been attained during any of the last 15 months. The highest percentage of patients treated within 31 days during the last 15 months was 97.3% recorded in October 2014, and the lowest percentage was recorded during January 2015 (94.0%). (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 September 2015.





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 2015, with the waiting time position at the lowest point it had ever been (94.0%) except for April 2008 (Figure 13, Table 11).

The Ministerial target of 98% was not met in any month during 2014/15 and has not been met to date during 2015/16.

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

Latest Position - September 2015

Number of patients seen⁸

In September 2015, 1,254 patients were first seen by a breast cancer specialist following an urgent referral for suspect breast cancer (Table 12).

Of these patients, 300 (23.9%) were seen in the Belfast Trust. A further 276 (22.0%) patients were seen in the Western Trust, 253 (20.2%) in the Northern Trust, 248 (19.8%) in the Southern Trust, and 177 (14.1%) patients in the South Eastern Trust (Figure 14, Table 12).

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

During September 2015, 1,096 (87.4%) of the 1,254 patients seen by a breast cancer specialist following 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 within 14 days for a first assessment with a breast cancer specialist following an urgent referral for suspect breast cancer, by HSC Trust (Sep 2015)

HSC Trust	% seen within 14 days (Sep 2015)
Belfast	80.0
Northern	100.0
South Eastern	44.6
Southern	100.0
Western	100.0
Northern Ireland	87.4

The Northern, Southern and Western Trusts met the Ministerial target for September 2015, having all patients with an urgent referral for suspect breast cancer seen within 14 days (Figure 15, Table 5).

There were 158 patients who waited longer than 14 days to be seen following an urgent referral for suspect breast cancer during September 2015. Of these, 98 were in the South Eastern Trust and 60 in the Belfast Trust (Table 12).

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⁸ See Explanatory Notes 1 & 11-13

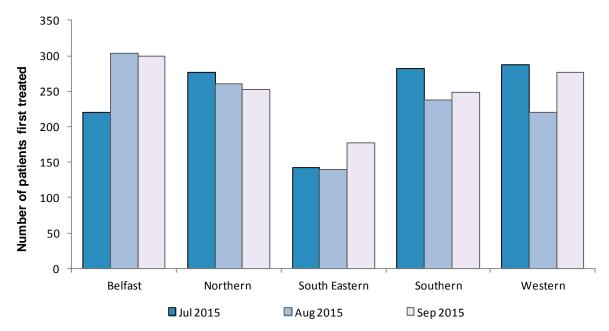
⁹ See Explanatory Notes 1-2 & 11-13

Latest Quarter - July to September 2015

Number of patients seen8

Between July and September 2015, there was a small increase in the number of patients first seen following an urgent referral for suspect breast cancer, with 1,254 patients seen in September 2015 compared to 1,208 patients seen in July 2015. 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 (Jul - Sep 2015)



During this period, the Belfast and South Eastern Trusts reported an increase in the number of patients seen, with the Belfast Trust reporting the largest increase, from 220 patients first seen in July 2015 to 300 first seen in September 2015 (Figure 14, Table 12).

The Northern, Southern and Western Trusts reported decreases in the number of patients seen, with the Southern Trust reporting the largest decrease, from 282 patients first seen in July 2015 to 248 first seen in September 2015 (Figure 14, Table 12).

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

For Northern Ireland as a whole, there was a increase in the percentage of patients first seen within 14 days following an urgent referral for suspect breast cancer, from 85.4% in July 2015 (1,032 of the 1,208 patients seen) to 87.4% in September 2015 (1,096 of the 1,254 patients seen). 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

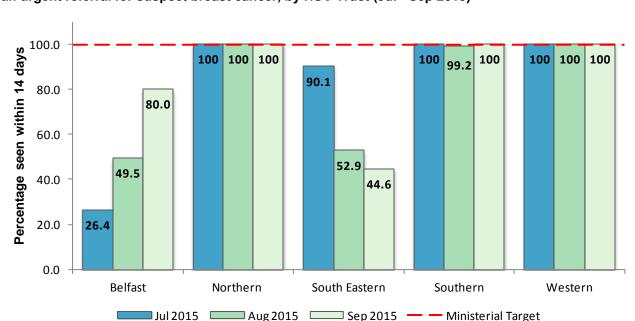


Figure 15: Percentage of patients seen by a breast cancer specialist within 14 days following an urgent referral for suspect breast cancer, by HSC Trust (Jul - Sep 2015)

Northern Ireland as a whole did not meet the 100% Ministerial target in the months of July, August and September 2015. The Northern and Western Trusts met the target during each of the three months of the quarter, whilst the Southern Trust met the target in July and September 2015. The Belfast and South Eastern Trusts did not meet the target in any of the three months. (Figure 15, Table 12).

Between July and September 2015, the Belfast and South Eastern Trusts reported a consistently lower percentage of patients seen within 14 days than the other three Trusts. (Figure 15, Table 12)¹⁰.

Historical performance against the 14 day target9

Performance during the last fifteen months - July 2014 to September 2015

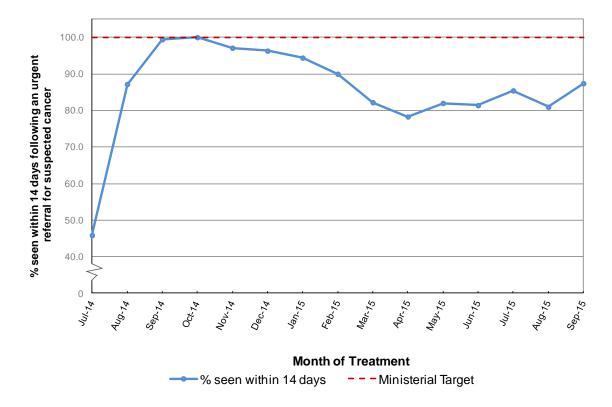
Between September 2014 and September 2015, there was an increase in the number of patients first seen following an urgent referral, from 1,040 patients in September 2014 to 1,254 in September 2015 (Table 13).

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 July 2014 to September 2015.

⁹ See Explanatory Notes 1-2 & 11-13.

 $^{^{10}}$ See Explanatory Note 14.

Figure 16: Percentage of patients who were seen by a breast cancer specialist within 14 days following an urgent referral for suspect breast cancer (Jul 2014 - Sep 2015)



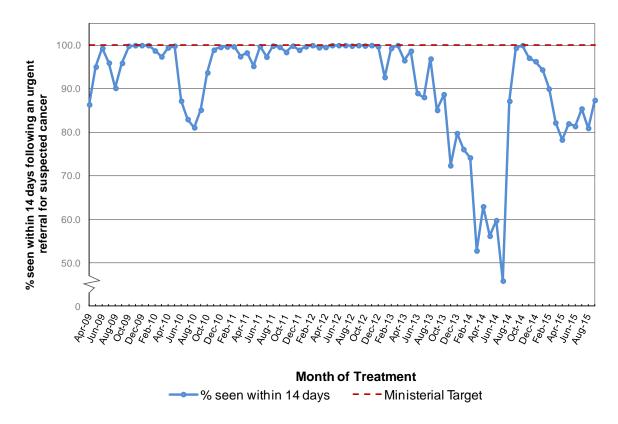
When compared to last year, the percentage of patients first seen within 14 days following an urgent referral for suspect breast cancer was lower in September 2015, with 1,096 of the 1,254 patients (87.4%) seen within 14 days, compared to 1,034 of the 1,040 patients (99.4%) seen within 14 days in September 2014 (Figure 16, Table 13).

The percentage of patients seen within 14 days rose steeply between July and August 2014. From October 2014 the percentage of patients seen has declined but has not dropped below 78.3%. 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 September 2015.

Figure 17: Percentage of patients who were seen by a breast cancer specialist within 14 days following an urgent referral for suspect breast cancer (April 2009 – September 2015)



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 this information began in April 2009. Performance had considerably improved reaching 100.0% seen within 14 days in October 2014 before dropping to 87.4% seen within 14 days in September 2015 (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 (July - September 2015)²

		N	-	ents first nt GP refe				g	
	Total treated			Total treated Treated within 62 days from receipt of Referral		Percentage (%) treated within 62 days			
	Jul	Aug	Sep	Jul	Aug	Sep	Jul	Aug	Sep
HSC Trust	2015	2015	2015	2015	2015	2015	2015	2015	2015
Belfast	114.5	104.5	116.0	74.5	59.0	64.0	65.1	56.5	55.2
Northern	56.0	45.0	62.0	42.5	27.0	38.5	75.9	60.0	62.1
South Eastern	71.0	65.5	63.5	44.0	37.5	39.0	62.0	57.3	61.4
Southern	47.5	45.0	62.0	41.5	37.0	59.0	87.4	82.2	95.2
Western	43.0	42.0	54.5	37.5	37.5	48.5	87.2	89.3	89.0
Northern Ireland								69.6	

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 (July - September 2015)³

	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		
Cancer Site	Jul 2015	Aug 2015	Sep 2015	Jul 2015	Aug 2015	Sep 2015	Jul 2015	Aug 2015	Sep 2015
Brain/ CNS Cancer	0	0	0	0	0	0	-	-	-
Breast Cancer	66	57	59	64	57	56	97.0	100.0	94.9
Gynae Cancers	20	17	24	14	10	17	70.0	58.8	70.8
Haematological									
Cancers	12	8	9	9	5	8	75.0	62.5	88.9
Head/Neck Cancer	15	13	18	8	6	10	53.3	46.2	55.6
Lower GI Cancer	29	38	36	16	14	14	55.2	36.8	38.9
Lung Cancer	28	31	29	21	18	22	75.0	58.1	75.9
Sarcomas	0	1	0	0	1	0	-	100.0	
Skin Cancers	68	57	76	57	42	58	83.8	73.7	76.3
Upper Gl Cancer	15	16	21	4	7	11	26.7	43.8	52.4
Urological Cancer	73	59	82	43	35	50	58.9	59.3	61.0
Other	6	5	4	4	3	3	66.7	60.0	75.0
Northern Ireland	332	302	358	240	198	249	72.3	65.6	69.6

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 - September 2015)⁴

	No. of patients first treated for Cancer following							
	an urgent GP referral for Suspected Cancer							
		Treated within 62	Percentage (%)					
	Total treated	days from receipt of						
Month		referral	days					
March 2009	215		92.6					
April 2009	189	169	89.4					
May 2009	158		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		81.3					
September 2010	272	233	85.7					
October 2010	209		85.6					
November 2010	245		82.9					
December 2010	220	180	81.8					
January 2011	234	201	85.9					
February 2011	204	157	77.0					
March 2011	240		81.7					
April 2011	199		81.9					
May 2011	216		79.6					
June 2011	288		82.6					
July 2011	218		78.9					
August 2011	252		82.9					
September 2011	265		83.0					
October 2011	250		80.4					
November 2011	280		84.3					
December 2011	252		83.3					
January 2012	261	212	81.2					
February 2012	254		73.6					
March 2012	283		84.5					

Table 8 continued:

	-	s first treated for Can	_					
	an urgent GP referral for Suspected Cancer Treated within 62 Percentage (%)							
	Total treated		Percentage (%)					
Manth	i otal treated	days from receipt of	treated within 62					
Month	004	referral	days					
April 2012	234		79.5					
May 2012	294		81.0					
June 2012	227		81.9					
July 2012	258		80.6					
August 2012	256		79.3					
September 2012	255		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		82.3					
July 2013	294		84.7					
August 2013	283		83.0					
September 2013	304		82.2					
October 2013	347		77.5					
November 2013	266		85.7					
December 2013	279		81.7					
January 2014	302		78.5					
February 2014	258		79.1					
March 2014	277		79.1					
April 2014	305		77.0					
May 2014	308		77.0					
June 2014	283		77.0					
July 2014	317		72.6					
August 2014	292		74.0					
September 2014	330		64.5					
October 2014	321	•	70.1					
November 2014	301		74.1					
December 2014	316		74.7					
January 2015	316		71.8					
February 2015	303		70.3					
March 2015	267		72.3					
April 2015	304		77.6					
May 2015	302		73.5					
June 2015	347		69.5					
July 2015	332		72.3					
August 2015	302		65.6					
September 2015	358 Pathway System (CaPPS)		69.6					

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

(July - September 2015)⁶

	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			
	Jul	Aug	Sep	Jul	Aug	Sep	Jul	Aug	Sep	
HSC Trust	2015	2015	2015	2015	2015	2015	2015	2015	2015	
Belfast	335	338	332	315	313	313	94.0	92.6	94.3	
Northern	106	90	95	103	90	94	97.2	100.0	98.9	
South Eastern	129	111	127	124	108	119	96.1	97.3	93.7	
Southern	126	102	148	126	101	148	100.0	99.0	100.0	
Western	124	86	103	124	86	102	100.0	100.0	99.0	
Northern Ireland	820	727	805	792	698	776	96.6	96.0	96.4	

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 (July – September 2015)⁷

able 10. Number of patients first treated for cancer, by tumour site (July – September 2013)									
	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		
	Jul	Aug	Sep	Jul	Aug	Sep	Jul	Aug	Sep
Cancer Site	2015	2015	2015	2015	2015	2015	2015	2015	2015
Brain/ CNS Cancer	8	10	12	8	10	12	100.0	100.0	100.0
Breast Cancer	152	99	120	148	98	119	97.4	99.0	99.2
Gynae Cancers	45	48	48	43	47	46	95.6	97.9	95.8
Haematological									
Cancers	60	63	51	60	63	51	100.0	100.0	100.0
Head/Neck Cancer	33	32	38	33	32	37	100.0	100.0	97.4
Lower GI Cancer	85	90	90	85	88	87	100.0	97.8	96.7
Lung Cancer	91	91	78	89	87	75	97.8	95.6	96.2
Sarcomas	1	3	2	1	3	2	100.0	100.0	100.0
Skin Cancers	117	102	145	112	97	140	95.7	95.1	96.6
Upper GI Cancer	61	50	58	57	50	56	93.4	100.0	96.6
Urological Cancer	149	125	145	138	110	133	92.6	88.0	91.7
Other	18	14	18	18	13	18	100.0	92.9	100.0
Northern Ireland	820	727	805	792	698	776	96.6	96.0	96.4

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 - September 2015)⁶

September 2015)	No. of nationts	first treated for Cance	or (All roformals)
	Total treated	Treated within 31 days of a decison to	Percentage (%) treated within 31
Month		treat being taken	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		98.1
November 2010	714	696	97.5
December 2010	633		97.9
January 2011	650		98.2
February 2011	606		98.2
March 2011	730		98.1

Table 11 continued:

	No. of patients first treated for Cancer (All referrals)				
		Percentage (%)			
	Total treated	days of a decison to	treated within 31		
Month		treat being taken	days		
April 2011	584		98.3		
May 2011	648		98.0		
June 2011	790		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		96.7		
November 2012	768		98.7		
December 2012	643		98.4		
January 2013	805		97.0		
February 2013	697		96.6		
March 2013	718		98.5		
April 2013	677	643	95.0		
May 2013	752	740	98.4		
June 2013	734		98.0		
July 2013	745		96.2		
August 2013	725		98.6		
September 2013	745		97.4		
October 2013	828		97.5		
November 2013	754		98.8		
December 2013	694		98.7		
January 2014	776		97.4		
February 2014	673		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		96.1		
September 2014	773		95.1		
October 2014	839		97.3		
November 2014	771		96.2		
December 2014	805		95.4		
January 2015	735		94.0		
February 2015	692		95.7		
March 2015	739	716	96.9		

Table 11 continued:

	No. of patients first treated for Cancer (All referral				
Month	Total treated	Treated within 31 days of a decison to treat being taken	Percentage (%) treated within 31 days		
April 2015	733		96.6		
May 2015	697	665	95.4		
June 2015	821	793			
July 2015	820	792	96.6		
August 2015	727	698	96.0		
September 2015	805	776	96.4		

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 (July - September 2015)^{9,10}

	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		Percentage				
			less		(%) seen within 14 days				
	Jul	Aug	Sep	Jul	Aug	Sep	Jul	Aug	Sep
HSC Trust	2015	2015	2015	2015	2015	2015	2015	2015	2015
Belfast	220	303	300	58	150	240	26.4	49.5	80.0
Northern	277	260	253	277	260	253	100.0	100.0	100.0
South Eastern	142	140	177	128	74	79	90.1	52.9	44.6
Southern	282	238	248	282	236	248	100.0	99.2	100.0
Western	287	220	276	287	220	276	100.0	100.0	100.0
Northern Ireland	1,208	1,161	1,254	1,032	940	1,096	85.4	81.0	87.4

Source: Departmental Return SDR 2.

Refer 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 - September 2015)9,10

	No. of patients first seen by a breast cancer specialist following an urgent referral for suspect cancer			
Month	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	

¹⁰Refer to Explanatory Note – point 14

Table 13 continued:

	No. of patients first seen by a breast cancer specialist following an urgent referral for suspect cancer					
Month	Total seen	No. that waited 14 days or less	Percentage (%) seen within 14 days			
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			
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			
•	784	784	100.0			
May 2012 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 72.4			
November 2013 December 2013	1,046 836	757 667	72.4 79.8			
January 2014	1,071	815	79.8 76.1			
February 2014	949	704	74.2			
March 2014	860	454	52.8			

Table 13 continued:

	No. of patients first seen by a breast cancer specialist following an urgent referral for suspect cancer			
Month	Total seen	No. that waited 14 days or less	Percentage (%) seen within 14 days	
	4.045	000		
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	
January 2015	1,045	986	94.4	
February 2015	954	859	90.0	
March 2015	1,136	934	82.2	
April 2015	1,219	954	78.3	
May 2015	1,161	952	82.0	
June 2015	1,336	1,088	81.4	
July 2015	1,208	1,032	85.4	
August 2015	1,161	940	81.0	
September 2015	1,254	1,096	87.4	

Source: Departmental Return SDR 2

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

10Refer to Explanatory Note – point 14

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 2015/16 Ministerial Target for cancer waiting times, as detailed in the Health and Social Care (Commissioning Plan) Direction (Northern Ireland) 2014, states that from April 2015, (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 each of the three months covered in the publication, 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 treated 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 each of the three months covered in the publication, 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 treated 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 each of the three months covered in the publication. Figures also include patients living outside Northern Ireland and all privately funded patients seen 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. The decline in performance in Belfast Trust was due to a number of factors, one of which was the incorrect recording of patient choice. It is not possible to quantify how much of this decline in performance was down to patient choice. Following this discovery patient choice is now being assigned correctly.
- 15. Information on the grouping of ICD 10 codes by tumour site is available at the following link: https://www.dhsspsni.gov.uk/articles/cancer-waiting-times
- 16. 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.
- 17. 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 the following link:

 https://www.dhsspsni.gov.uk/articles/cancer-waiting-times
- 18. Information on waiting times for the months of October, November and December 2015 will be published on Thursday 31st March 2016.
- 19. 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 also includes all patients living outside Northern Ireland and all privately funded patients treated 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 Trusts 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 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, the information is useful in gauging individual HSC Trust performance against the Ministerial target. Again, the data 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 treated 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 also includes patients living outside Northern Ireland and privately funded patients seen 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 assessment 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:

Amanda Lennon

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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: https://www.dhsspsni.gov.uk/publications