

INFORMATION
ANALYSIS
DIRECTORATE



Northern Ireland Waiting Time Statistics: Cancer Waiting Times (January - March 2017)



READER INFORMATION

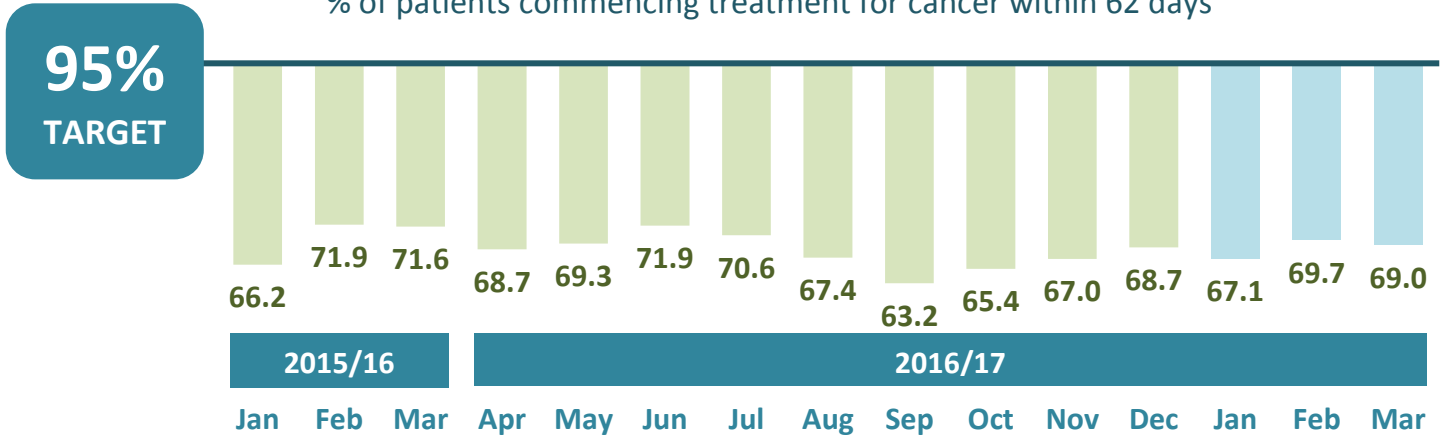
Purpose:	<p>This publication presents information on waiting times for cancer services at hospitals in Northern Ireland during January, February and March 2017 and reports on the performance of Health and Social Care (HSC) Trusts in Northern Ireland, against the 2016/17 Ministerial Target for cancer care services, which states that:</p> <p><i>“From April 2016, 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>All data are presented by Health and Social Care Trust and, where applicable, by tumour site.</p>
Statistical Quality	<p>The ‘Cancer Waiting Times Publication – Supporting Documentation’ booklet details the technical guidance, definitions, as well as notes on how to use the data contained within this statistical release. This booklet is available to view or download from the following link: https://www.health-ni.gov.uk/articles/cancer-waiting-times</p>
Internet address	<p>https://www.health-ni.gov.uk/topics/doh-statistics-and-research</p>
Authors	<p>Jennifer Lynn, Jennifer McCrea & Siobhán Morgan</p>
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Issued by	<p>Hospital Information Branch, Information & Analysis Directorate, Department of Health, Stormont Estate Belfast, BT4 3SQ</p>
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Copyright	<p>This publication is Crown copyright and may be reproduced free of charge in any format or medium. Any material used must be acknowledged, and the title of the publication specified.</p>
Amendment	<p>Please note that following end of year validations a number of figures have been revised for the financial year. The downloadable tables published alongside this release have been similarly updated with the amended figures.</p>

62 Day Ministerial Target

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

In March 2017, 339 patients commenced their first treatment for cancer following an urgent GP referral for suspect cancer, compared with 360 in February 2017, and 335 in March 2016 (Table 3).

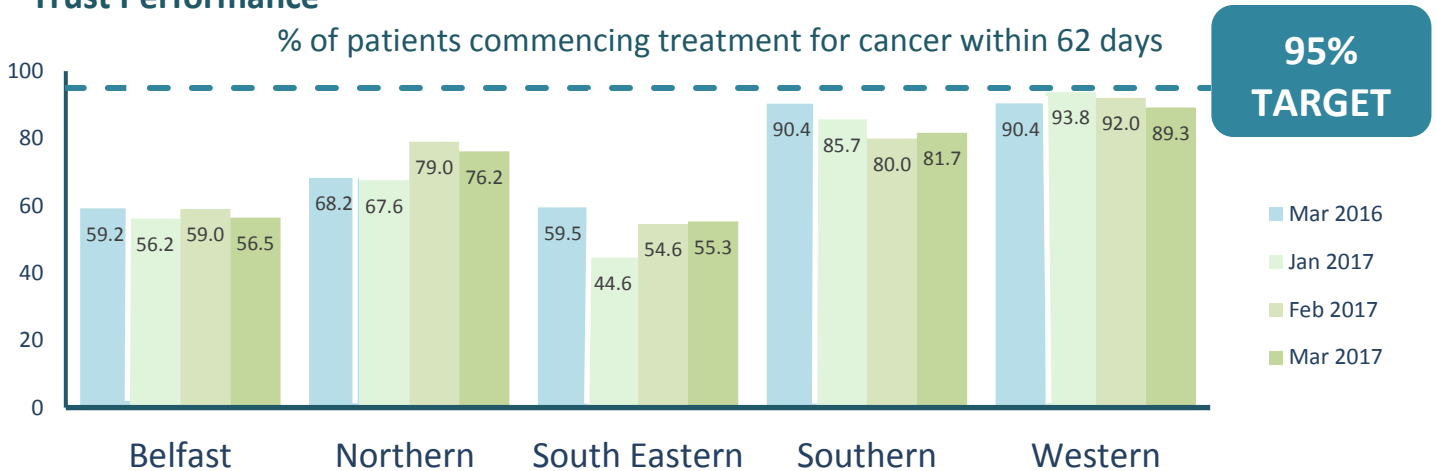
% of patients commencing treatment for cancer within 62 days



In March 2017, 69.0% of patients commenced their first treatment for cancer following an urgent GP referral for suspect cancer within 62 days, compared with 69.7% in February 2017 and 71.6% during March 2016 (Table 3).

Trust Performance

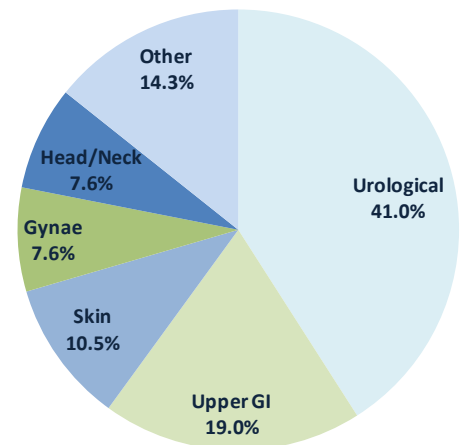
% of patients commencing treatment for cancer within 62 days



All HSC Trusts failed to meet the 62 day component of the Ministerial target during March 2017 (Table 1).

Waits over 62 Days by Tumour Site

Of the 105 patients waiting longer than 62 days for treatment in March 2017, over two fifths (43, 41.0%) were diagnosed with urological cancer. (Table 2).

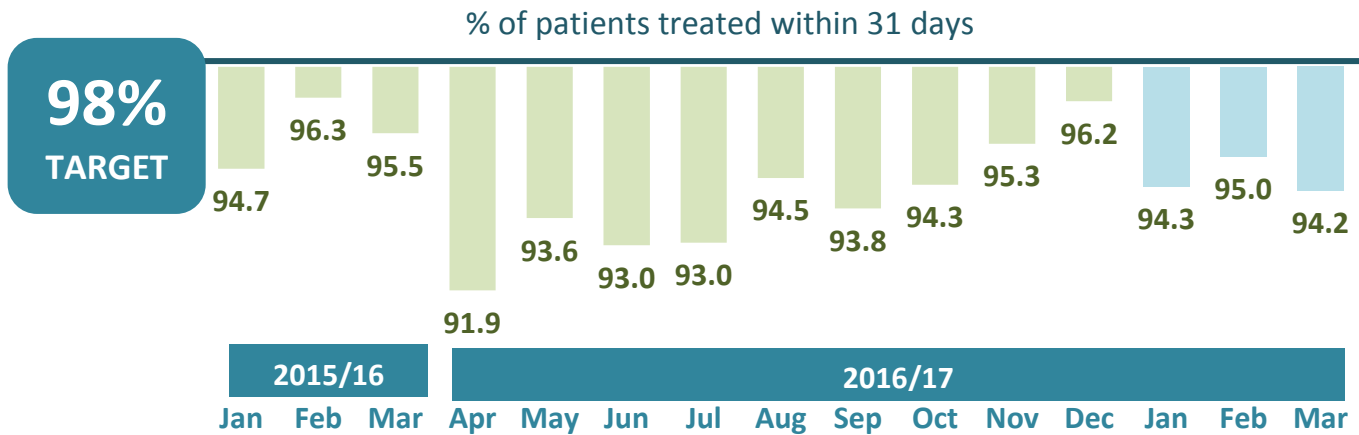


% patients waiting over 62 days by tumour site

31 Day Ministerial Target

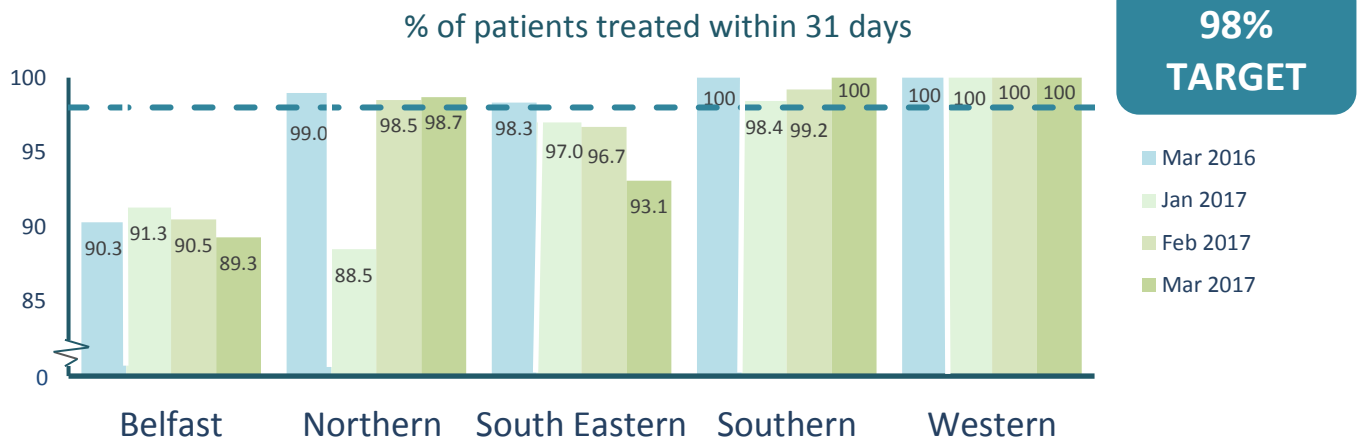
At least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat.

In March 2017, 793 patients commenced their first treatment for cancer following a decision to treat, compared with 796 in February 2017 and 781 during March 2016. (Table 6).



In March 2017, 94.2% of patients were treated within 31 days compared with 95.0% in February 2017 and 95.5% during March 2016 (Table 6).

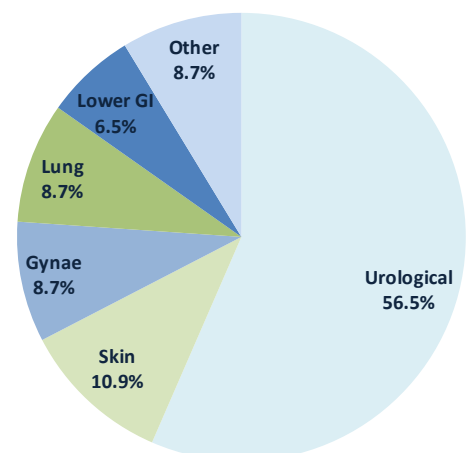
Trust Performance



During March 2017, the Southern, Western and Northern HSC Trusts achieved the 98% Ministerial target, with the Southern and Western Trust having all patients treated within 31 days following a decision to treat. The Belfast and South Eastern Trusts failed to achieve the target (Table 4).

Waits over 31 Days by Tumour Site

Of the 46 patients waiting longer than 31 days in March 2017, over half (26, 56.5%) were diagnosed with urological cancer (Table 5).

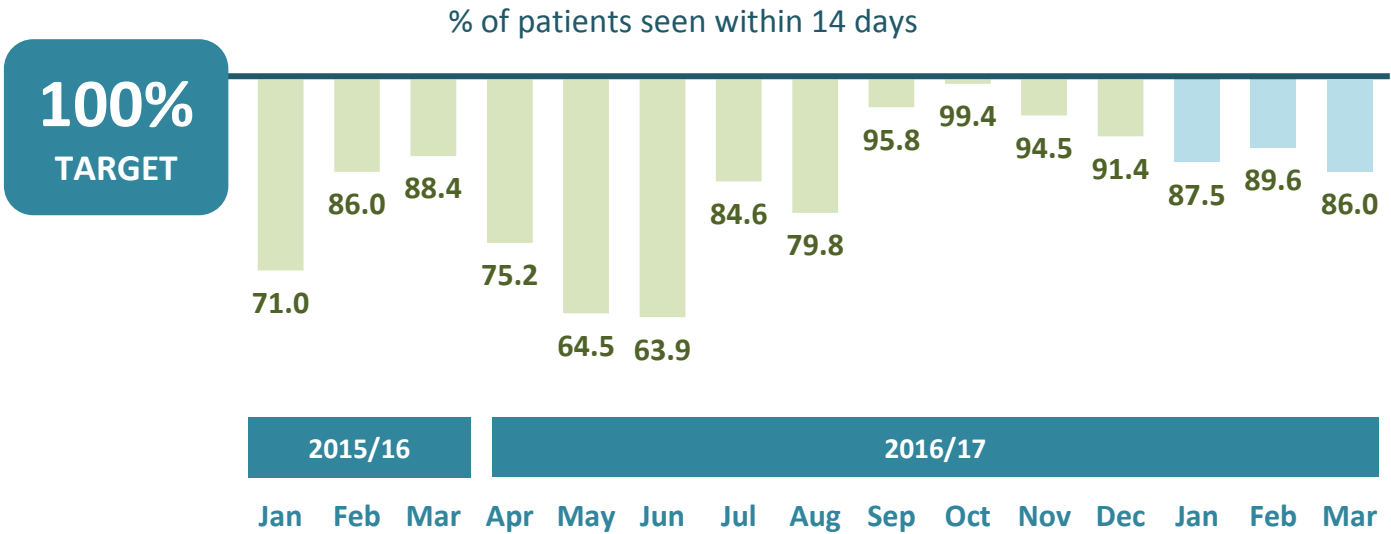


% patients waiting over 31 days by tumour site

14 Day Ministerial Target

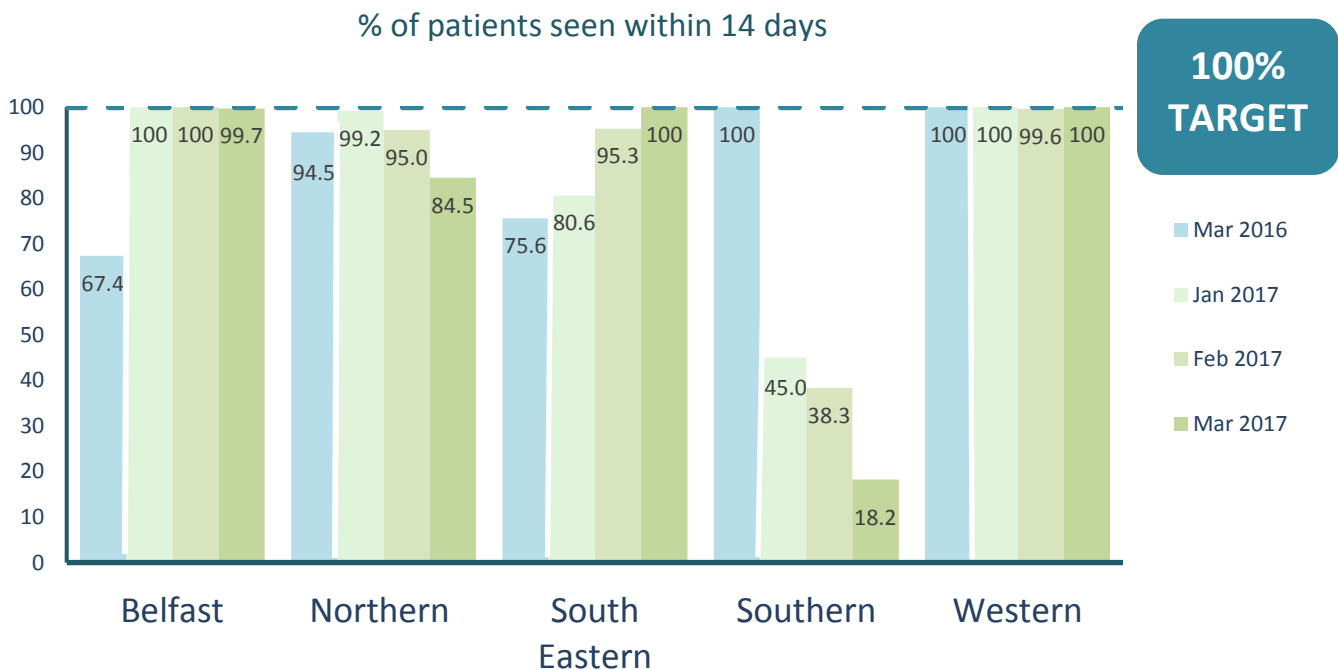
All urgent breast cancer referrals should be seen within 14 days.

In March 2017, 1,491 patients were first seen by a breast cancer specialist following an urgent referral for suspect breast cancer, compared with 1,226 in February 2017 and 1,310 during March 2016 (Table 8).



In March 2017, 86.0% of patients were first seen within 14 days, compared with 89.6% in February 2017 and 88.4% during March 2016 (Table 8).

Trust Performance



Across HSC Trusts, the South Eastern and Western Trusts met the 14 Day Ministerial target during March 2017, with all patients seen within 14 days. The Belfast, Northern and Southern Trusts failed to meet the target. (Table 7).

Breast cancer referrals

Information in this section relates to the number of referrals received by HSC Trusts for suspect breast cancer. This information is sourced from the Patient Administration System via the HSC Data Warehouse.

Readers should note that these data are not National Statistics but have been validated and quality assured by HSC Trusts prior to publication. Currently the Department is in the process of refining validation processes for these data, which should therefore be treated with caution. However, they have been published to help provide users with some contextual information in relation to the Ministerial Target relating to breast cancer waiting times.

New Suspect Breast Cancer Referrals

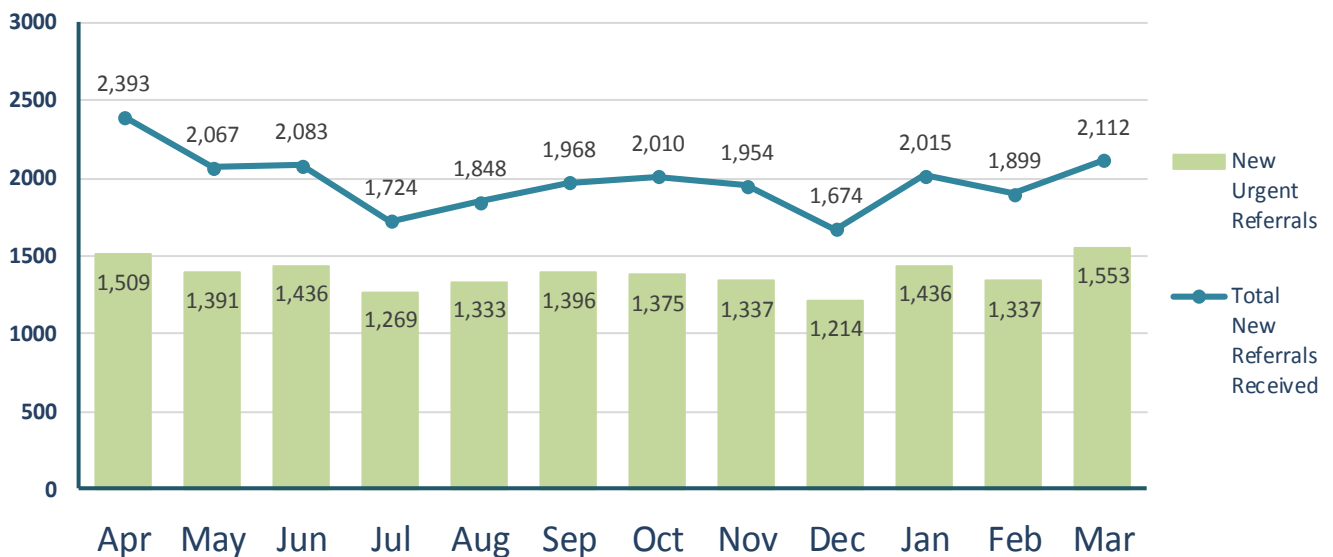
In March 2017, 2,112 new referrals for suspect breast cancer were received, this compares with 1,899 in February 2017 and 2,015 in January 2017. Referrals for suspect cancer can be for advice, assessment or both.

New Urgent Suspect Breast Cancer Referrals

Of those new referrals for suspect breast cancer in March 2017, 1,553 (73.5%) were classified as urgent.

Approximately seven out of ten referrals received across Northern Ireland each month during 2016/17 were urgent referrals.

Number of New Referrals Received For Suspect Cancer



2016/17

Additional Tables

Table 1: Number of patients who commenced first treatment following an urgent GP referral for suspect cancer, in Northern Ireland (January – March 2017)¹

	Total treated			Treated within 62 days from receipt of referral			% treated within 62 days		
	Jan 2017	Feb 2017	Mar 2017	Jan 2017	Feb 2017	Mar 2017	Jan 2017	Feb 2017	Mar 2017
HSC Trust									
Belfast	108.5	128.0	100.0	61.0	75.5	56.5	56.2%	59.0%	56.5%
Northern	54.0	40.5	42.0	36.5	32.0	32.0	67.6%	79.0%	76.2%
South Eastern	83.0	70.5	76.0	37.0	38.5	42.0	44.6%	54.6%	55.3%
Southern	59.5	52.5	60.0	51.0	42.0	49.0	85.7%	80.0%	81.7%
Western	72.0	68.5	61.0	67.5	63.0	54.5	93.8%	92.0%	89.3%
Northern Ireland	377	360	339	253	251	234	67.1%	69.7%	69.0%

Source: Cancer Patient Pathway System (CaPPS)

¹Refer to Explanatory Notes – Points 1-5.

Table 2: Number of patients who commenced first treatment following an urgent GP referral for suspect cancer, by tumour site (January – March 2017)²

Cancer Type	Total treated			Treated within 62 days from receipt of referral			% treated within 62 days		
	Jan 2017	Feb 2017	Mar 2017	Jan 2017	Feb 2017	Mar 2017	Jan 2017	Feb 2017	Mar 2017
Brain/ CNS	1	0	2	1	0	2	100.0%	-	100.0%
Breast	73	58	57	70	58	55	95.9%	100.0%	96.5%
Gynae	21	17	17	11	10	9	52.4%	58.8%	52.9%
Haematological	15	16	10	13	13	9	86.7%	81.3%	90.0%
Head/Neck	24	14	18	11	7	10	45.8%	50.0%	55.6%
Lower GI	36	41	23	13	20	16	36.1%	48.8%	69.6%
Lung	20	34	17	9	20	12	45.0%	58.8%	70.6%
Sarcomas	1	0	0	1	0	0	100.0%	-	-
Skin	68	63	75	54	56	64	79.4%	88.9%	85.3%
Upper GI	20	21	27	12	12	7	60.0%	57.1%	25.9%
Urological	90	90	89	52	50	46	57.8%	55.6%	51.7%
Other	8	6	4	6	5	4	75.0%	83.3%	100.0%
Northern Ireland	377	360	339	253	251	234	67.1%	69.7%	69.0%

Source: Cancer Patient Pathway System (CaPPS)

²Refer to Explanatory Notes – Points 1-6.

Table 3: Number of patients who commenced first treatment following an urgent GP referral for suspect cancer, in Northern Ireland (January 2016 – March 2017)^{3,4}

Month	Total Treated	Treated within 62 days from receipt of referral	% treated within 62 days
January 2016	314	208	66.2%
February 2016	334	240	71.9%
March 2016	335	240	71.6%
April 2016	326	224	68.7%
May 2016	336	233	69.3%
June 2016	385	277	71.9%
July 2016	313	221	70.6%
August 2016	371	250	67.4%
September 2016	370	234	63.2%
October 2016	350	229	65.4%
November 2016	382	256	67.0%
December 2016	339	233	68.7%
January 2017	377	253	67.1%
February 2017	360	251	69.7%
March 2017	339	234	69.0%

Source: Cancer Patient Pathway System (CaPPS)

³Refer to Explanatory Notes – Points 1-5 & 7

⁴ Figures for the 2016/17 financial year have been revised following end of year validations.

Table 4: Number of patients who commenced first treatment, for all cancers in HSC Trusts in Northern Ireland (January – March 2017)⁵

HSC Trust	Total treated			Treated within 31 days of a decision to treat			% treated within 31 days		
	Jan 2017	Feb 2017	Mar 2017	Jan 2017	Feb 2017	Mar 2017	Jan 2017	Feb 2017	Mar 2017
Belfast	355	358	327	324	324	292	91.3%	90.5%	89.3%
Northern	96	68	79	85	67	78	88.5%	98.5%	98.7%
South Eastern	135	121	145	131	117	135	97.0%	96.7%	93.1%
Southern	127	120	119	125	119	119	98.4%	99.2%	100.0%
Western	128	129	123	128	129	123	100.0%	100.0%	100.0%
Northern Ireland	841	796	793	793	756	747	94.3%	95.0%	94.2%

Source: Cancer Patient Pathway System (CaPPS)

⁵Refer to Explanatory Notes – Points 1-2 & 8-9.

Table 5: Number of patients who commenced first treatment, for all cancers, in Northern Ireland by tumour site (January – March 2017)⁶

Cancer Type	Total treated			Treated within 31 days of a decision to treat			% treated within 31 days		
	Jan 2017	Feb 2017	Mar 2017	Jan 2017	Feb 2017	Mar 2017	Jan 2017	Feb 2017	Mar 2017
Brain/ CNS	12	11	7	11	11	7	91.7%	100.0%	100.0%
Breast	129	127	116	120	123	115	93.0%	96.9%	99.1%
Gynae	42	42	41	38	39	37	90.5%	92.9%	90.2%
Haematological	64	65	54	63	65	54	98.4%	100.0%	100.0%
Head/Neck	40	26	37	38	26	36	95.0%	100.0%	97.3%
Lower GI	94	85	91	90	84	88	95.7%	98.8%	96.7%
Lung	91	99	87	87	94	83	95.6%	94.9%	95.4%
Sarcomas	4	5	1	4	5	1	100.0%	100.0%	100.0%
Skin	128	109	122	125	107	117	97.7%	98.2%	95.9%
Upper GI	59	64	69	56	63	68	94.9%	98.4%	98.6%
Urological	157	146	153	140	122	127	89.2%	83.6%	83.0%
Other	21	17	15	21	17	14	100.0%	100.0%	93.3%
Northern Ireland	841	796	793	793	756	747	94.3%	95.0%	94.2%

Source: Cancer Patient Pathway System (CaPPS)

⁶Refer to Explanatory Notes – Points 1-2 & 8-10.

Table 6: Number of patients who commenced first treatment, for all cancers, in Northern Ireland (January 2016 – March 2017)^{4,5}

Month	Total treated	Treated within 31 days of a decision to treat	% treated within 31 days
January 2016	772	731	94.7%
February 2016	804	774	96.3%
March 2016	781	746	95.5%
April 2016	797	734	92.1%
May 2016	774	725	93.7%
June 2016	857	799	93.2%
July 2016	732	681	93.0%
August 2016	835	789	94.5%
September 2016	823	772	93.8%
October 2016	795	750	94.3%
November 2016	866	825	95.3%
December 2016	795	765	96.2%
January 2017	841	793	94.3%
February 2017	796	756	95.0%
March 2017	793	747	94.2%

Source: Cancer Patient Pathway System (CaPPS)

⁴ Figures for the 2016/17 financial year have been revised following end of year validations.

⁵Refer to Explanatory Notes – Points 1-2 & 8-9

Table 7: Number of patients seen by a breast cancer specialist following an urgent referral for suspect cancer in HSC Trusts in Northern Ireland (January – March 2017)⁷

HSC Trust	Total seen			Seen within 14 days or less			% seen within 14 days		
	Jan 2017	Feb 2017	Mar 2017	Jan 2017	Feb 2017	Mar 2017	Jan 2017	Feb 2017	Mar 2017
Belfast	260	278	365	260	278	364	100.0%	100.0%	99.7%
Northern	257	300	323	255	285	273	99.2%	95.0%	84.5%
South Eastern	216	235	241	174	224	241	80.6%	95.3%	100.0%
Southern	171	162	192	77	62	35	45.0%	38.3%	18.2%
Western	198	251	370	198	250	370	100.0%	99.6%	100.0%
Northern Ireland	1,102	1,226	1,491	964	1,099	1,283	87.5%	89.6%	86.0%

Source: Departmental Return SDR 2.

⁷Refer to Explanatory Notes – points 1-2 & 11-13

Table 8: Number of patients seen by a breast cancer specialist following an urgent referral for suspect cancer in Northern Ireland (January 2016 – March 2017)⁷

Month	Total seen	Seen within 14 days or less	% seen within 14 days
January 2016	1,269	901	71.0%
February 2016	1,243	1,069	86.0%
March 2016	1,310	1,158	88.4%
April 2016	1,287	968	75.2%
May 2016	1,268	818	64.5%
June 2016	1,433	916	63.9%
July 2016	1,094	925	84.6%
August 2016	1,346	1,074	79.8%
September 2016	1,381	1,323	95.8%
October 2016	1,290	1,282	99.4%
November 2016	1,301	1,230	94.5%
December 2016	1,211	1,107	91.4%
January 2017	1,102	964	87.5%
February 2017	1,226	1,099	89.6%
March 2017	1,491	1,283	86.0%

Source: Departmental Return SDR 2

⁷Refer to Explanatory Notes – points 1-2 & 11-13

Table 9: Number of patients referred for suspect breast cancer in Northern Ireland (April 2016 – March 2017)⁸

Month	Total New Referrals Received	New Urgent Referrals
April 2016	2,393	1,509
May 2016	2,067	1,391
June 2016	2,083	1,436
July 2016	1,724	1,269
August 2016	1,848	1,333
September 2016	1,968	1,396
October 2016	2,010	1,375
November 2016	1,954	1,337
December 2016	1,674	1,214
January 2017	2,015	1,436
February 2017	1,899	1,337
March 2017	2,112	1,553

Source: Patient Administration System via HSC Data Warehouse

⁸Refer to Explanatory Notes – points 1 & 14

Appendix 1: Explanatory Notes

1. The sources for the data contained in this release are the Departmental Return SDR2, Cancer Patient Pathway System (CaPPS) and Patient Administration System (PAS).
2. The 2016/17 Ministerial Target for cancer waiting times, as detailed in the Health and Social Care (Commissioning Plan) Direction (Northern Ireland) 2016, states that from April 2016, (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, and 3 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, and 3 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, and 3 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. Table 2 reflects the number of patients that were treated in 62 days or less for each tumour site. Tumour sites are an aggregation of applicable ICD 10 codes.
7. Between April 2008 and February 2009, the target relating to waiting time for treatment following an urgent GP referral for suspect cancer required that 'at least 75% of patients urgently referred with a suspect cancer should begin their first definitive treatment within 62 days of urgent GP referral'. From March 2009 onwards this target increased to 95% of patients.
8. Data contained in Tables 4, 5, and 6 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 4, 5, and 6 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. Table 5 reflects the number of patients that were treated in 31 days or less for each tumour site. Tumour sites are an aggregation of applicable ICD 10 codes.
11. Data contained in Tables 7 and 8 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 7 and 8 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 7 and 8 reflect all urgent referrals for breast cancer both from GP's and other practitioners.
14. Figures provided in the Breast Cancer Referrals section reflect all new referrals received for suspect breast cancer irrespective of their source of referral.
15. Information on the grouping of ICD 10 codes by tumour site is available at the following link: <https://www.health-ni.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.health-ni.gov.uk/articles/cancer-waiting-times>
18. Information on waiting times for the months of April, May and June 2017 will be published on Thursday 28th September 2017.
19. Data contained within this publication are National Statistics except for breast cancer referrals which are currently statistics in development.

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

Jennifer Lynn

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

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