



Northern Ireland Waiting Time Statistics:

Cancer Waiting Times (July - September 2017)



READER INFORMATION

Purpose:

This publication presents information on waiting times for cancer services at hospitals in Northern Ireland during July, August and September 2017 and reports on the performance of Health and Social Care (HSC) Trusts in Northern Ireland, against the draft 2017/18 Ministerial Target for cancer care services, which states that:

"From April 2017, 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."

All data are presented by Health and Social Care Trust and, where applicable, by tumour site.

Statistical Quality

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

Internet address https://www.health-ni.gov.uk/topics/doh-statistics-and-research

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Publication Date Wednesday 10th January 2018

Reporting Period 1st July 2017 – 30th September 2017

Issued by Hospital Information Branch,

Information & Analysis Directorate,

Department of Health, Stormont Estate Belfast, BT4 3SQ

Target audience

Department of Health (DoH), 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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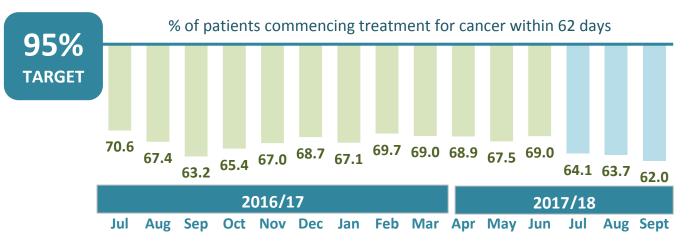
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62 Day Ministerial Target

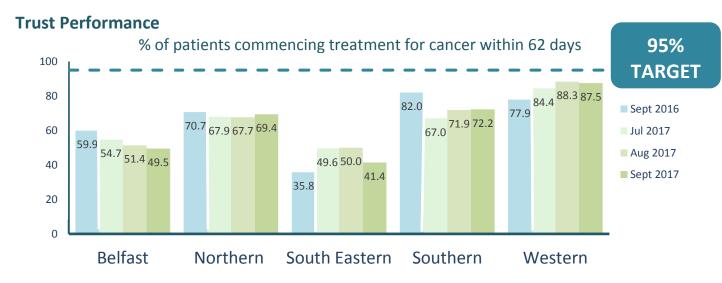
At least 95% of patients should begin their first treatment for cancer within 62 days following an urgent GP referral for suspect cancer.

In September 2017, 368 patients commenced their first treatment for cancer following an urgent GP referral for suspect cancer, compared with 331 in August 2017, and 370 in September 2016 (Table 3).



The Ministerial target was not met.

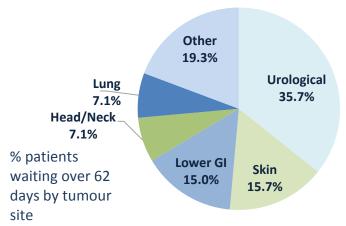
In September 2017, 62.0% of patients commenced their first treatment for cancer within 62 days of an urgent GP referral for suspect cancer, compared with 63.7% in August 2017 and 63.2% during September 2016 (Table 3).



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

Waits over 62 Days by Tumour Site

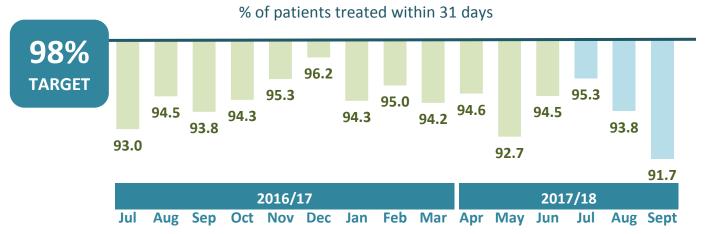
Of the 140 patients waiting longer than 62 days for treatment in September 2017, over one third (50, 35.7%) were diagnosed with urological cancer. (Table 2).



31 Day Ministerial Target

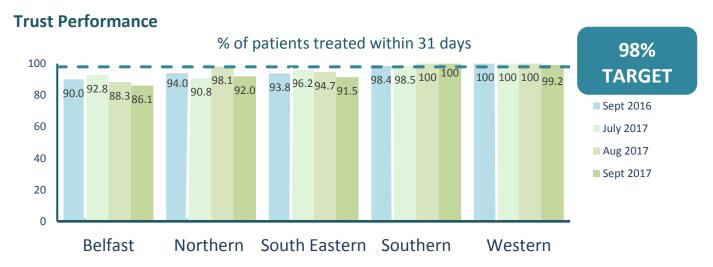
At least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat.

In September 2017, 856 patients commenced their first treatment for cancer following a decision to treat, compared with 811 in August 2017 and 823 during September 2016. (Table 6).



The Ministerial target was not met.

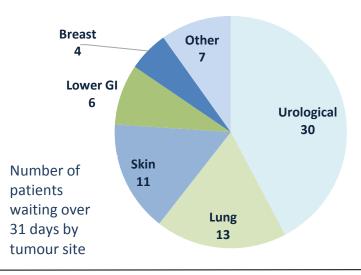
In September 2017, 91.7% of patients were treated within 31 days compared with 93.8% in August 2017 and 93.8% during September 2016 (Table 6).



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

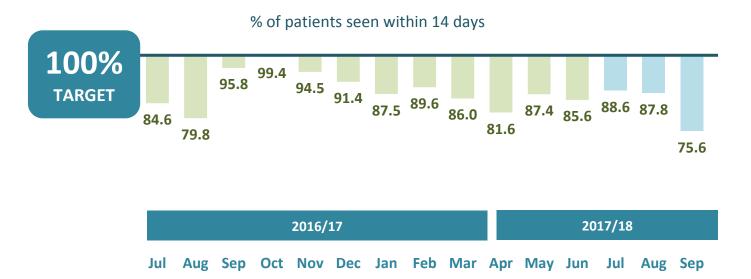
Waits over 31 Days by Tumour Site

Of the 71 patients waiting longer than 31 days in September 2017, two fifths (30, 42.3%) were diagnosed with urological cancer (Table 5).



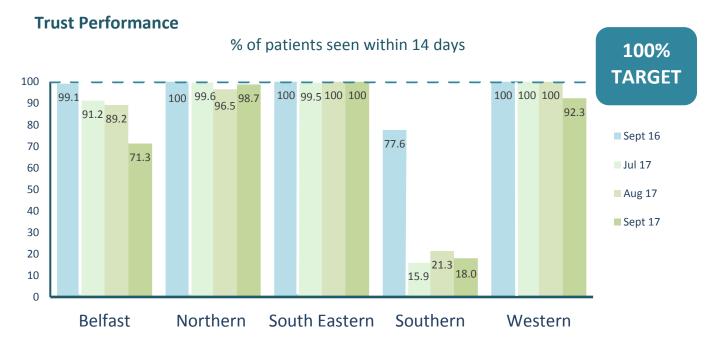
14 Day Ministerial Target All urgent breast cancer referrals should be seen within 14 days.

In September 2017, 1,256 patients were first seen by a breast cancer specialist following an urgent referral for suspect breast cancer, compared with 1,155 in August 2017 and 1,381 during September 2016 (Table 8).



The Ministerial target was not met.

In September 2017, 75.6% of patients were first seen within 14 days, compared with 87.8% in August 2017 and 95.8% during September 2016 (Table 8).



Across HSC Trusts, the South Eastern and Western Trusts met the 14 Day Ministerial target during two out of three months in the quarter, with all patients seen within 14 days. Belfast Northern and Southern Trusts failed to meet the target during all three months of the quarter. (Table 7).

14 Day Ministerial Target Additional context

Due to temporary capacity issues within Southern Trust there is currently a need for the Southern Trust to transfer breast surgery patients (including suspect cancers) to other Trusts in order for them to be seen / treated in a timely manner. In some cases it is possible that patients will have breached the ministerial target prior to this transfer taking place.

During July, August and September 2017 Belfast, Northern and Western Trusts saw a total of 88 patients with an urgent breast cancer referral that had been transferred to them from Southern Trust. Belfast Trust saw 26 patients, Northern Trust 43 patients and Western Trust 19 patients. South Eastern Trust did not see any patients with an urgent breast cancer referral from the Southern Trust during this time frame.

Whilst the Ministerial target is monitored against all patients seen following an urgent breast cancer referral , the tables below show, as an indicator of impact on Trusts only, the performance of each Trust with Southern Trust patients excluded.

Belfast Trust urgent breast cancer referrals seen, excluding patients referred from Southern Trust

	Number of Patients First seen within 14 days or less	Number of Patients First seen over 14 days	% seen within 14 days
July 2017	248	24	91.2%
August 2017	219	23	90.5%
September 2017	196	79	71.3%

Source: Patient Administration System via HSC Data Warehouse

Northern Trust urgent breast cancer referrals seen, excluding patients referred from Southern Trust

	Number of Patients First seen within 14 days or less	Number of Patients First seen over 14 days	% seen within 14 days
July 2017	243	1	99.6%
August 2017	327	0	100%
September 2017	288	2	99.3%

Source: Patient Administration System via HSC Data Warehouse

Western Trust urgent breast cancer referrals seen, excluding patients referred from Southern Trust

	Number of Patients First seen within 14 days or less	Number of Patients First seen over 14 days	% seen within 14 days
July 2017	180	0	100%
August 2017	218	0	100%
September 2017	215	0	100%

Source: Patient Administration System via HSC Data Warehouse

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 September 2017, 1,719 new referrals for suspect breast cancer were received, this compares with 1,726 in August 2017 and 1,597 in July 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 September 2017, 1,270 (73.9%) were classified as urgent.

Approximately seven out of ten referrals received across Northern Ireland each month during the first two quarters of 2017/18 were urgent referrals.

Number of New Referrals Received For Suspect Breast Cancer



Additional Tables

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

	Total treated		Treated within 62 days from receipt of referral			% treated within 62 days			
	July	Aug	Sept	July	Aug	Sept	July	Aug	Sept
HSC Trust	2017	2017	2017	2017	2017	2017	2017	2017	2017
Belfast	86.0	108.0	108.0	47.0	55.5	53.5	54.7%	51.4%	49.5%
Northern	40.5	63.5	54.0	27.5	43.0	37.5	67.9%	67.7%	69.4%
South Eastern	65.5	55.0	76.0	32.5	27.5	31.5	49.6%	50.0%	41.4%
Southern	57.5	44.5	54.0	38.5	32.0	39.0	67.0%	71.9%	72.2%
Western	70.5	60.0	76.0	59.5	53.0	66.5	84.4%	88.3%	87.5%
Northern Ireland	320	331	368	205	211	228	64.1%	63.7%	62.0%

Source: Cancer Patient Pathway System (CaPPS)

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

	То	tal treate	ed	Treated within 62 days from receipt of referral			% treated within 62 days		
	July	Aug	Sept	July	Aug	Sept	July	Aug	Sept
Cancer Type	2017	2017	2017	2017	2017	2017	2017	2017	2017
Brain/ CNS	0	0	1	0	0	1	-	-	100.0%
Breast	49	52	58	45	51	55	91.8%	98.1%	94.8%
Gynae	21	23	18	12	8	9	57.1%	34.8%	50.0%
Haematological	13	12	15	11	11	11	84.6%	91.7%	73.3%
Head/Neck	17	15	16	8	7	6	47.1%	46.7%	37.5%
Lower GI	36	36	39	20	18	18	55.6%	50.0%	46.2%
Lung	28	34	22	17	20	12	60.7%	58.8%	54.5%
Sarcomas	2	0	1	0	0	1	0.0%		100.0%
Skin	59	51	76	50	43	54	84.7%	84.3%	71.1%
Upper GI	21	24	26	10	12	17	47.6%	50.0%	65.4%
Urological	67	78	87	29	38	37	43.3%	48.7%	42.5%
Other	7	6	9	3	3	7	42.9%	50.0%	77.8%
Northern Ireland	320	331	368	205	211	228	64.1%	63.7%	62.0%

Source: Cancer Patient Pathway System (CaPPS)

¹Refer to Explanatory Notes – Points 1-5.

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 (April 2016 – September 2017)³

Month	Total Treated	Treated within 62 days from receipt of referral	% treated within 62 days
April 2016	327	224	68.5%
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%
April 2017	325	224	68.9%
May 2017	394	266	67.5%
June 2017	387	267	69.0%
July 2017	320	205	64.1%
August 2017	331	211	63.7%
September 2017	368	228	62.0%

Source: Cancer Patient Pathway System (CaPPS) ³Refer to Explanatory Notes – Points 1-5 & 7

Table 4: Number of patients who commenced first treatment, for all cancers in HSC Trusts in Northern Ireland (July - September 2017)4

	To	otal treate	ed		within 31 cision to	· · · · · · · · · · · · · · · · · · ·	% treate	ed within	31 days
	July	Aug	Sept	July	Aug	Sept	July	Aug	Sept
HSC Trust	2017	2017	2017	2017	2017	2017	2017	2017	2017
Belfast	291	358	366	270	316	315	92.8%	88.3%	86.1%
Northern	87	103	87	79	101	80	90.8%	98.1%	92.0%
South Eastern	104	113	142	100	107	130	96.2%	94.7%	91.5%
Southern	131	116	128	129	116	128	98.5%	100.0%	100.0%
Western	130	121	133	130	121	132	100.0%	100.0%	99.2%
Northern Ireland	743	811	856	708	761	785	95.3%	93.8%	91.7%

Source: Cancer Patient Pathway System (CaPPS) ⁴Refer 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 (July - September 2017)⁵

	To	otal treate	ed	Treated within 31 days of a decision to treat		% treated within 31 days			
	July	Aug	Sept	July	Aug	Sept	July	Aug	Sept
Cancer Type	2017	2017	2017	2017	2017	2017	2017	2017	2017
Brain/ CNS	14	12	14	14	12	14	100.0%	100.0%	100.0%
Breast	116	117	111	107	115	107	92.2%	98.3%	96.4%
Gynae	40	50	29	35	42	28	87.5%	84.0%	96.6%
Haematological	57	58	67	57	58	65	100.0%	100.0%	97.0%
Head/Neck	30	34	45	30	33	45	100.0%	97.1%	100.0%
Lower GI	88	85	90	88	85	84	100.0%	100.0%	93.3%
Lung	83	107	113	82	97	100	98.8%	90.7%	88.5%
Sarcomas	3	2	2	3	2	2	100.0%	100.0%	100.0%
Skin	108	105	136	104	99	125	96.3%	94.3%	91.9%
Upper GI	60	70	79	58	68	75	96.7%	97.1%	94.9%
Urological	125	152	143	112	131	113	89.6%	86.2%	79.0%
Other	19	19	27	18	19	27	94.7%	100.0%	100.0%
Northern Ireland	743	811	856	708	761	785	95.3%	93.8%	91.7%

Source: Cancer Patient Pathway System (CaPPS) ⁵Refer to Explanatory Notes – Points 1-2 & 8-10.

Table 6: Number of patients who commenced first treatment, for all cancers, in Northern Ireland

(April 2016 – September 2017)⁴

Month	Total treated	Treated within 31 days of a decison to treat	% treated within 31 days
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%
April 2017	706	668	94.6%
May 2017	849	787	92.7%
June 2017	874	826	94.5%
July 2017	743	708	95.3%
August 2017	811	761	93.8%
September 2017	856	785	91.7%

Source: Cancer Patient Pathway System (CaPPS)

⁴Refer 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 (July - September 2017)⁶

	1	otal seer	1	Seen v	vithin 14 less	days or	% seeı	n within 1	4 days
	July	Aug	Sept	July	Aug	Sept	July	Aug	Sept
HSC Trust	2017	2017	2017	2017	2017	2017	2017	2017	2017
Belfast	272	268	275	248	239	196	91.2%	89.2%	71.3%
Northern	258	347	299	257	335	295	99.6%	96.5%	98.7%
South Eastern	198	195	198	197	195	198	99.5%	100.0%	100.0%
Southern	107	127	250	17	27	45	15.9%	21.3%	18.0%
Western	180	218	234	180	218	216	100.0%	100.0%	92.3%
Northern Ireland	1,015	1,155	1,256	899	1,014	950	88.6%	87.8%	75.6%

Source: Patient Administration System via HSC Data Warehouse

Table 8: Number of patients seen by a breast cancer specialist following an urgent referral for

suspect cancer in Northern Ireland (April 2016 - September 2017)⁶

Month	Total seen	Seen within 14 days or less	% seen within 14 days
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%
April 2017	1,171	955	81.6%
May 2017	1,239	1,083	87.4%
June 2017	1,329	1,138	85.6%
July 2017	1,015	899	88.6%
August 2017	1,155	1,014	87.8%
September 2017	1,256		75.6%

Source: Patient Administration System via HSC Data Warehouse

⁶Refer to Explanatory Notes – points 1-2 & 11-13

⁶Refer to Explanatory Notes – points 1-2 & 11-13

Table 9: Number of patients referred for suspect breast cancer in Northern Ireland (April 2016 – September 2017)⁷

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
April 2017	1,683	1,224
May 2017	1,952	1,402
June 2017	1,940	1,398
July 2017	1,597	1,148
August 2017	1,726	1,278
September 2017	1,719	1,270

Source: Patient Administration System via HSC Data Warehouse ⁷Refer to Explanatory Notes – points 1 & 14

Appendix 1: Explanatory Notes

- 1. The sources for the data contained in this release are the Outpatient Universe, Cancer Patient Pathway System (CaPPS) and Patient Administration System (PAS).
- 2. The draft 2017/18 Ministerial Target for cancer waiting times, as detailed in the Health and Social Care (Commissioning Plan) Direction (Northern Ireland) 2017, states that from April 2017, (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 July, August and September 2017 will be published on Wednesday 10th January 2018.
- 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:

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