Reporting of Breast Cancer Waiting Time Information

Data Definitions and Guidance Document

Version 2.0
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1   BACKGROUND

The Patient Administration System (PAS) provides official monitoring of the Commissioning Plan Direction targets set by the Department of Health (DoH) in relation to waiting times for a first assessment with a breast specialist following an urgent referral for suspect cancer.

Data used to report on the breast cancer target are derived from the Patient Administration System, an administrative system used to manage, record and monitor hospital waiting lists within Health and Social Care (HSC) Trusts in Northern Ireland. This dataset contains patient level information and enables the Department to report on the number of patients that received a first assessment with a breast specialist following an urgent referral for suspect cancer each month, and the length of time they had waited for this assessment.

Hospital Information Branch introduced this methodology for the collection of breast cancer waiting time information in April 2017. Information was originally sourced from the Departmental SDR2 Return in aggregate format. This return was introduced in April 2008, the first time such data were collected in Northern Ireland in a regionally consistent manner. Information is comparable from April 2008 onwards.

2   DEFINITIONS

DATE OF REFERRAL - This is the date on which a referral is received by the Health and Social Care Trust from a General Practitioner.

DATE OF FIRST APPOINTMENT WITH A BREAST SPECIALIST - This is the date on which the patient attends a first appointment with a breast specialist in order to be assessed for suspected breast cancer. An appointment with a breast specialist is an appointment with a consultant, a member of his/her firm or locum, for such a member in respect of one referral.

COMPLETED WAITING TIME – this is measured from the date an initial breast cancer referral is first received by the Provider Trust (the date on which the referral is date stamped, irrespective of the format in which the referral is received) and ends on the date that the patient had attended their first outpatient appointment with a breast specialist. Waiting times are adjusted to take into account patient cancellations or missed appointments.

3   COLLECTION OF DATA

INCLUSIONS
All urgent referrals (excluding those that have subsequently been reclassified as routine by the breast specialist), and any routine referrals that have subsequently been reclassified as urgent by a breast specialist are covered by this target.

Figures include all patients living outside Northern Ireland and all privately funded patients waiting for treatment in NHS hospitals. In the event that a patient has been seen in the Independent Sector, the transferring Trust is responsible for reporting the completed wait of the patient in the applicable monthly return.

EXCLUSIONS
All routine referrals (excluding those that have been subsequently been reclassified as urgent) and any urgent GP referrals that have been subsequently reclassified as routine.

4   REPORTING OF DATA

The HSC Business Services Organisation has developed the Outpatient universe on the HSC Data Warehouse. This universe is populated with data extracted directly from the Patient Administration Syatem (PAS) relating to patients who received a first assessment with a breast specialist following an urgent referral for suspect cancer.

The completed waiting time is measured from the date an initial breast cancer referral is first received by the Provider Trust (the date on which the referral is date stamped, irrespective of the format in which the referral is received) and ends on the date that the patient had attended their first outpatient appointment with a breast specialist.

Patients who cancel an appointment have their waiting time reset to the date on which they informed the Trust of the cancellation. If a patient cancels their outpatient appointment the patient should be given a second opportunity to book an appointment, which should be within two weeks of the original waiting time re-set date. If the patient cancels this second appointment they then should be offered a third appointment within 14 days of the second cancellation date and if they DNA or cancel this third appointment they then should be discharged back to the care of their GP. The Trust should establish processes to ensure the patient and if necessary the patient's GP are aware of the potential reason for the urgency of the appointment.

The waiting time of patients who do not attend their first outpatient attendance with a specialist should be calculated from the date of the missed appointment. A clinician may decide that a patient should be offered a second appointment, which should be within two weeks of the original appointment date. The Trust should establish processes to ensure the patient and if necessary the patient's GP are aware of the potential reason for the urgency of the appointment. The waiting time for patients who have been discharged following a DNA and are subsequently re-referred back by their GP should be monitored. The waiting time for these patients is calculated from the latest date the suspected breast cancer referral is received by the hospital.

Following the validation procedures, outlined in Section 5, data are marked as final and are published in the Northern Ireland Waiting List Statistics: Cancer Waiting Times publication.

The Dataset contains a range of variables enabling inpatient waiting times to be published on the basis of:

HSC Trust – the Trust responsible for the management of the patients waiting time;

Patients who waited 14 days or less for assessment – the number of patients assessed who were seen within 14 days of their referral;

Patients who waited more than 14 days for assessment – the number of patients assessed who waited more than 14 days for assessment following their referral; and

Total number of patients assessed – the total number of patients assessed by a breast cancer specialist following an urgent referral for suspect cancer.

5   DATA VALIDATION

HIB perform a two stage validation of the 14 day breast cancer waiting time data extracted each quarter.

STAGE 1

Following extraction of the 14 day breast cancer completed waits for the relevant quarter from the Outpatient universe on the HSC Data Warehouse, HIB circulate an excel workbook to each HSC Trust outlining:

- Number of patients waiting under and over 14 days for each of the three months, and the % waiting under the target.

- A patient level list of 14 day breast cancer patients

HSC Trusts validate these data and confirm correct figures.

STAGE 2

Amendments are made by the HSC Trusts on PAS, as required, in response to the Stage 1 Validation. HIB repeat the extraction and ensure the final number of patients waiting under and over 14 days for each of the three months, and the % waiting under the target match what HSC Trusts have confirmed.

6 DATA USE

Data provided are currently National Statistics.

These data are published on a quarterly basis in the Northern Ireland Waiting List Statistics: Cancer Waiting Times bulletin. The most recent publication, together with previous editions, can be found at the following link:

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

Breast cancer waiting time data are also used in:

- Ministerial answers to both Written and Oral Assembly questions;

- Departmental responses to correspondence received from the NI Assembly Health Committee, Public Accounts Committee, Northern Ireland Audit Office and other stakeholder bodies such as the Patient Client Council;

- Ministerial briefing material;

- Health compendium publications, and

- Responses to data requests from the HSC, politicians, journalists, voluntary / charitable organisations and members of the general public.

8   CONTACT DETAILS

This document will be reviewed and updated periodically.

If you have any issues relating to the contents of the document or the collection of cancer waiting time information in general please contact:

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APPENDIX 1: FREQUENTLY ASKED QUESTIONS

Q - All breast referrals deemed urgent according to regionally agreed guidelines for suspected breast cancer should be seen within 14 days of the receipt of the referral. Is this 14 calendar days or 14 working days?

14 days refers to 14 calendar days. This 14 day period includes weekends and bank/public holidays.

APPENDIX 2: LIST OF VARIABLES COLLECTED FROM PAS

Variable Name	Variable Description
Trust Long Name	Full Title of Trust
'HCN'	Patient's Health and Care Number
Casenote	Patients Casenote Number
Current Date	This is the Referral Date or for waiting list re-sets, it will be the Date the Patient Cancelled their Appointment or DNA Date
Appointment Date	Appointment date
Referral Date Only	Date on which referral request received by provider
Priority Type	Code of priority type
Consultant Code	Code of Consultant responsible for this Outpatient Referral.
Referral Source Description	Description for Referral Source
Referral Source	Referral Source
Attendances	Number of Patients who Attended
Referral Reason	Reason for Referral Code
Referral Reason Description	Reason for Referral Description
Patient Choice	Outpatient Partial Booking – Yes, No or Other
Attendance Code	Outcome of an Appointment. A - Attended, C - Cancelled on Day of Clinic, D - Did Not Attend, H - Cancelled by Hospital, P - Cancelled by Patient, W - Walk In
Specialty of Clinic Description	Description of specialty of clinic which this appointment was for.
Specialty of Clinic	Specialty code for the clinic this appointment is for.
Referral Source (R)	Korner Referral Source Code
Referral Source Description (R)	Korner Referral Source Description
Fiscal Month	Fiscal month of appointment date
Fiscal Year	Fiscal year of appointment date
Appointment Month	Appointment Month
Appointment Year	Appointment Year