



Northern Ireland Waiting Time Statistics:

Cancer Waiting Times
(January – March 2018)



READER INFORMATION

Purpose:

This publication presents information on waiting times for cancer services at hospitals in Northern Ireland during January, February and March 2018 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. In order to preserve the privacy of individual patients, we do not report on individual counts below five. This does not affect the statistical inferences that can be drawn from the data.

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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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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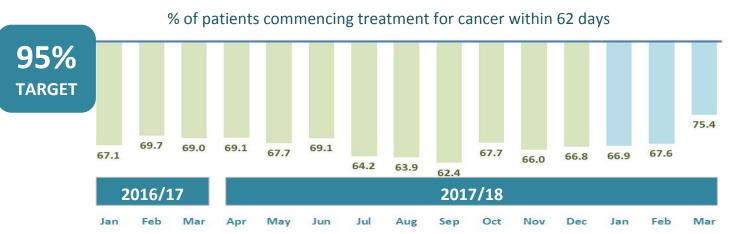
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62 Day Ministerial Target

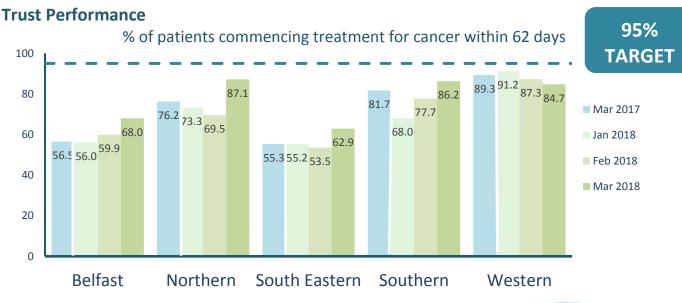
At least 95% of patients should begin their first treatment for cancer within 62 days following an urgent GP referral for suspect cancer.

In March 2018, 345 patients commenced their first treatment for cancer following an urgent GP referral for suspect cancer, compared with 296 in February 2018, and 339 in March 2017 (Table 3).



The Ministerial target was not met.

In March 2018, 75.4% of patients commenced their first treatment for cancer within 62 days of an urgent GP referral for suspect cancer, compared with 67.6% in February 2018 and 69.0% during March 2017 (Table 3).



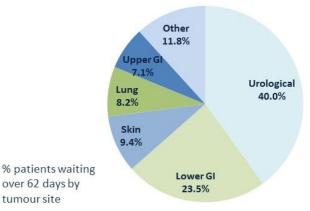
over 62 days by

tumour site

All HSC Trusts failed to meet the 62 day component of the Ministerial target during March 2018 (Table 1).

Waits over 62 Days by Tumour Site

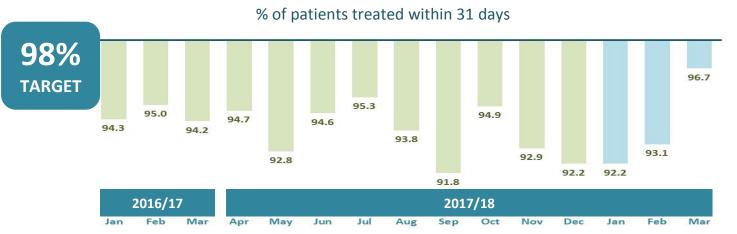
Of the 85 patients waiting longer than 62 days for treatment in March 2018, two fifths (34, 40.0%) were diagnosed with urological cancer. (Table 2).



31 Day Ministerial Target

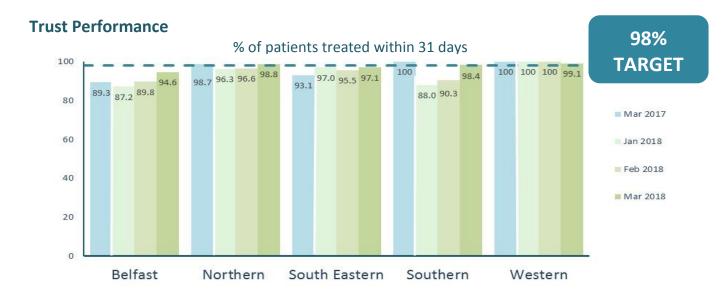
At least 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat.

In March 2018, 846 patients commenced their first treatment for cancer following a decision to treat, compared with 711 in February 2018 and 793 in March 2017. (Table 6).



The Ministerial target was not met.

In March 2018, 96.7% of patients were treated within 31 days compared with 93.1% in February 2018 and 94.2% during March 2017 (Table 6).

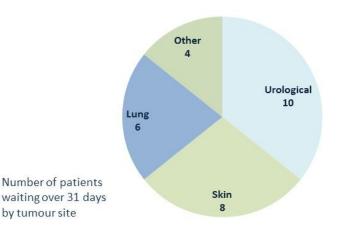


by tumour site

During March 2018, Northern, Southern and Western HSC Trusts achieved the 98% Ministerial target (Table 4).

Waits over 31 Days by Tumour Site

Of the 28 patients waiting longer than 31 days in March 2018, over one third (10, 35.7%) were diagnosed with urological cancer (Table 5).



14 Day Ministerial Target

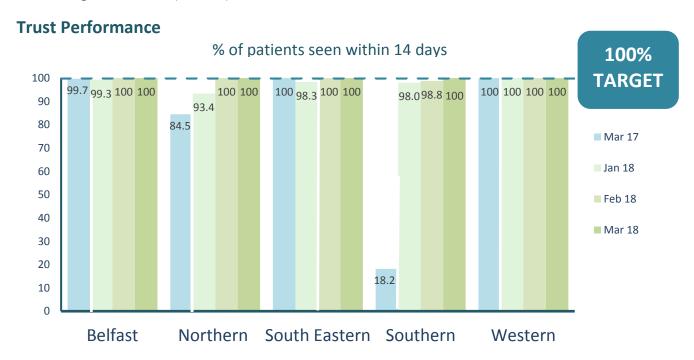
All urgent breast cancer referrals should be seen within 14 days.

In March 2018, 1,276 patients were first seen by a breast cancer specialist following an urgent referral for suspect breast cancer, compared with 1,232 in February 2018 and 1,491 during March 2017 (Table 8).



The Ministerial target was met in March 2018.

In March 2018, all patients were first seen within 14 days, compared with 99.8% in February 2018 and 86.0% during March 2017 (Table 8).



All HSC Trusts met the 14 Day Ministerial target during March 2018. All HSC Trusts except Southern Trust met the target in February 2018. (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 January, February and March 2018 Belfast and South Eastern Trusts saw a total of 8 patients with an urgent breast cancer referral that had been transferred to them from Southern Trust. Northern and Western Trusts 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 Belfast and South Eastern Trusts still managed to see all patients within 14 days during February and March 2018 even when the Southern patients were excluded.

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 2018, 1,977 new referrals for suspect breast cancer were received, this compares with 1,849 in February 2018 and 1,908 in January 2018. 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 2018, 1,403 (71.0%) were classified as urgent.

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

Number of New Referrals Received For Suspect Breast Cancer



Additional Tables

Table 1: Percentage of patients who commenced first treatment within 62 days following an urgent GP referral for suspect cancer, in Northern Ireland (January – March 2018)¹

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	% treated within 62 days		
	Jan Feb Mar		
HSC Trust	2018	2018	2018
Belfast	56.0%	59.9%	68.0%
Northern	73.3%	69.5%	87.1%
South Eastern	55.2%	53.5%	62.9%
Southern	68.0%	77.7%	86.2%
Western	91.2%	87.3%	84.7%
Northern Ireland	66.9% 67.6% 75.4%		

Source: Cancer Patient Pathway System (CaPPS)

Table 2: Percentage of patients who commenced first treatment within 62 days following an urgent GP referral for suspect cancer, by tumour site (January – March 2018)²

	% treated within 62 days		
	Jan	Feb	Mar
Cancer Type	2018	2018	2018
Brain/ CNS	-	0.0%	100.0%
Breast	88.2%	84.4%	100.0%
Gynae	57.9%	68.0%	85.7%
Haematological	50.0%	66.7%	83.3%
Head/Neck	42.9%	50.0%	66.7%
Lower GI	57.9%	42.9%	37.5%
Lung	60.0%	69.6%	66.7%
Sarcomas	100.0%	-	1
Skin	75.7%	83.6%	88.9%
Upper GI	50.0%	50.0%	60.0%
Urological	58.2%	55.7%	55.8%
Other	87.5%	50.0%	100.0%
Northern Ireland	66.9%	67.6%	75.4%

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 - March 2018)³

Month	Total Treated	Treated within 62	% treated within 62
WONTH	Total Treated	days from receipt of referral	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	327	226	69.1%
May 2017	393	266	67.7%
June 2017	391	270	69.1%
July 2017	324	208	64.2%
August 2017	332	212	63.9%
September 2017	372	232	62.4%
October 2017	344	233	67.7%
November 2017	426	281	66.0%
December 2017	352	235	66.8%
January 2018	366	245	66.9%
February 2018	296	200	67.6%
March 2018	345	260	75.4%

Source: Cancer Patient Pathway System (CaPPS) ³Refer to Explanatory Notes – Points 1-5, 7 & 18

Table 4: Percentage of patients who commenced first treatment within 31 days, for all cancers in HSC Trusts in Northern Ireland (January - March 2018)4

	% treated within 31 days		
	Jan Feb Mar		
HSC Trust	2018	2018	2018
Belfast	87.2%	89.8%	94.6%
Northern	96.3%	96.6%	98.8%
South Eastern	97.0%	95.5%	97.1%
Southern	88.0%	90.3%	98.4%
Western	100.0%	100.0%	99.1%
Northern Ireland	92.2%	93.1%	96.7%

Source: Cancer Patient Pathway System (CaPPS) ⁴Refer to Explanatory Notes – Points 1-2 & 8-9.

Table 5: Percentage of patients who commenced first treatment within 31 days, for all cancers, in Northern Ireland by tumour site (January - March 2018)⁵

	% treated within 31 days		
	Jan	Feb	Mar
Cancer Type	2018	2018	2018
Brain/ CNS	100.0%	100.0%	100.0%
Breast	87.6%	87.5%	98.6%
Gynae	97.8%	97.6%	100.0%
Haematological	100.0%	100.0%	100.0%
Head/Neck	100.0%	97.0%	100.0%
Lower GI	98.3%	97.3%	97.7%
Lung	85.4%	96.2%	94.2%
Sarcomas	100.0%	100.0%	-
Skin	95.4%	95.2%	93.5%
Upper GI	98.3%	93.8%	100.0%
Urological	83.8%	84.2%	92.9%
Other	100.0%	100.0%	100.0%
Northern Ireland	92.2%	93.1%	96.7%

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 -March 2018)4

		Treated within 31	% treated within 31
Month	Total treated	days of a decison to	days
		treat	aayo
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	716	678	94.7%
May 2017	858	796	92.8%
June 2017	885	837	94.6%
July 2017	749	714	95.3%
August 2017	818	767	93.8%
September 2017	861	790	91.8%
October 2017	845	802	94.9%
November 2017	961	893	92.9%
December 2017	807	744	92.2%
January 2018	909	838	92.2%
February 2018	711	662	93.1%
March 2018	846	818	96.7%

Source: Cancer Patient Pathway System (CaPPS)

⁴Refer to Explanatory Notes – Points 1-2, 8-9 & 18

Table 7: Percentage of patients seen within 14 days by a breast cancer specialist following an urgent referral for suspect cancer in HSC Trusts in Northern Ireland (January – March 2018)⁶

	% seen within 14 days		
	Jan Feb Mar		
HSC Trust	2018	2018	2018
Belfast	99.3%	100.0%	100.0%
Northern	93.4%	100.0%	100.0%
South Eastern	98.3%	100.0%	100.0%
Southern	98.0%	98.8%	100.0%
Western	100.0%	100.0%	100.0%
Northern Ireland	97.6%	99.8%	100.0%

Source: Patient Administration System via HSC Data Warehouse

⁶Refer 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 (April 2016 – March 2018)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	1,169	955	81.7%
May 2017	1,233	1,079	87.5%
June 2017	1,339	1,143	85.4%
July 2017	1,015	899	88.6%
August 2017	1,155	1,014	87.8%
September 2017	1,256	950	75.6%
October 2017	1,334	1,087	81.5%
November 2017	1,370	1,117	81.5%
December 2017	1,265	1,022	80.8%
January 2018	1,293	1,262	97.6%
February 2018	1,235	1,232	99.8%
March 2018	1,276	1,276	100.0%

Source: Patient Administration System via HSC Data Warehouse

⁶Refer to Explanatory Notes – points 1-2, 11-13 & 18

Table 9: Number of patients referred for suspect breast cancer in Northern Ireland (April 2016 – March 2018)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	1,705	1,202
May 2017	1,963	1,370
June 2017	1,947	1,359
July 2017	1,614	1,130
August 2017	1,754	1,268
September 2017	1,731	1,266
October 2017	2,032	1,511
November 2017	1,961	1,392
December 2017	1,422	1,010
January 2018	1,908	1,341
February 2018	1,849	1,303
March 2018	1,977	1,403

Source: Patient Administration System via HSC Data Warehouse ⁷Refer to Explanatory Notes – points 1, 14 & 18

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. Figures between April 2017 and December 2017 have also been revised for all sections following end of year validations.
- 19. Information on waiting times for the months of April, May and June 2018 will be published on Thursday 20th September 2018.
- 20. 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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Belfast, BT4 3SQ

☑ Email: <u>statistics@health-ni.gov.uk</u>

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