



Northern Ireland Waiting Time Statistics:

Cancer Waiting Times (April – June 2016)



Reader Information

Purpose

This publication presents information on waiting times for cancer services at hospitals in Northern Ireland during April, May and June 2016 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 state that:

"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."

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

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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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Latest Quarterly Performance

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.

	April 2016	May 2016	June 2016
Percentage treated within 62 days following urgent referral	68.4%	69.2%	71.8%
Acheives Ministerial Target?	NO	NO	NO

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.

	April 2016	May 2016	June 2016
Percentage treated within 31 days of decision to treat	91.9%	93.6%	93.0%
Acheives Ministerial Target?	NO	NO	NO

14 Day Ministerial Target

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

	April 2016	May 2016	June 2016
Percentage seen within 14 days of Breast Cancer referral	75.2%	64.5%	63.9%
Acheives Ministerial Target?	NO	NO	NO

62 Day Target

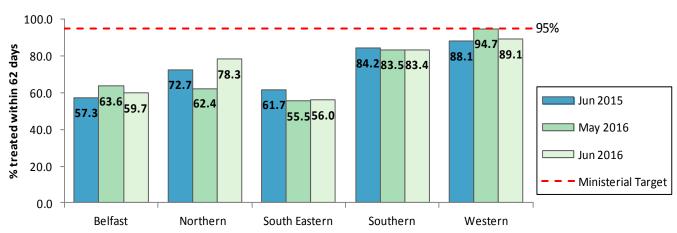
Patients first treated following an urgent GP referral for Suspected Cancer



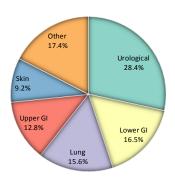
In June 2016, 386 patients commenced their first treatment for cancer following an urgent referral for suspect cancer, an increase of 39 since June 2015 (Table 3).

For the same period the percentage treated within 62 days increased from 69.5% (241 patients) in June 2015 to 71.8% (277 patients) in June 2016 (Table 3).

Trust Performance



All HSC Trusts failed to meet the Ministerial target during June 2016 (Table 1).



Waits over 62 Days by Tumour Site

Of the 109 patients waiting longer than 62 days for treatment in June 2016, 31 (28.4%) were diagnosed with urological cancer and 18 (16.5%) were diagnosed with lower gastrointestinal (GI) cancer (Table 2).

31 Day Target

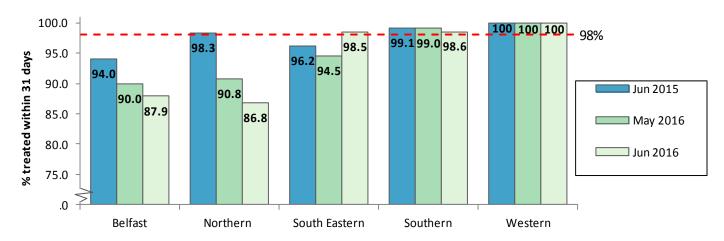
No. of Patients first treated following a decision to treat



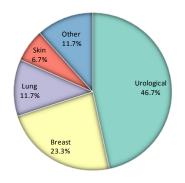
In June 2016, 854 patients commenced their first treatment for cancer following a decision to treat, an increase of 33 since June 2015 (Table 6).

For the same period the percentage of patients treated within 31 days decreased from 96.6% (793 patients) in June 2015 to 93.0% (794 patients) in June 2016 (Table 6).

Trust Performance



The South Eastern, Southern and Western HSC Trusts achieved the 98% Ministerial target during June 2016, with the Western Trust having all patients treated within 31 days following a decision to treat. The Belfast and Northern Trusts failed to achieve the target (Table 4).



Waits over 31 Days by Tumour Site

Of the 60 patients waiting longer than 31 days in June 2016, almost half (28, 46.7%) were diagnosed with urological cancer, and almost a quarter (14, 23.3%) were diagnosed with breast cancer (Table 5).

14 Day Target

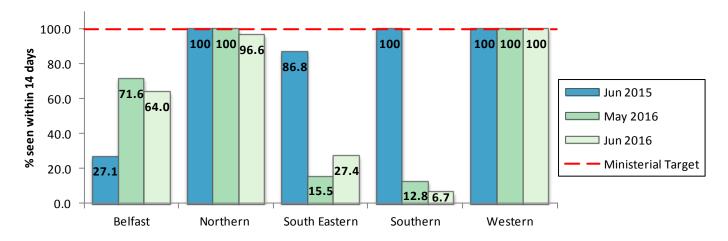
No. of Patients first seen by a breast cancer specialist following an urgent referral for suspect cancer



In June 2016, 1,433 patients were first seen by a breast cancer specialist following an urgent referral for suspect breast cancer, an increase of 97 since June 2015 (Table 8).

For the same period the percentage of patients first seen decreased from 81.4% (1,088 patients) in June 2015 to 63.9% (916 patients) in June 2016 (Table 8).

Trust Performance



Across HSC Trusts, only the Western Trust met the 14 Day Ministerial target during June 2016, with all patients seen within 14 days (Table 7).

Additional Tables

Table 1: Number of patients who commenced first treatment following an urgent GP referral for suspect cancer, in Northern Ireland (April – June 2016)²

	Commenced Treatment				Commenced within 62 days of Referral			% within 62 days		
HSC Trust	Apr 2016	•		Apr 2016	May 2016		•	_		
Belfast	81.0	121.0	118.0	45.5	77.0	70.5	56.2%	63.6%	59.7%	
Northern	65.5	62.5	69.0	45.5	39.0	54.0	69.5%	62.4%	78.3%	
South Eastern	64.0	55.0	62.5	29.0	30.5	35.0	45.3%	55.5%	56.0%	
Southern	63.5	45.5	72.5	58.0	38.0	60.5	91.3%	83.5%	83.4%	
Western	55.0	47.0	64.0	47.0	44.5	57.0	85.5%	94.7%	89.1%	
Northern Ireland	329	331	386	225	229	277	68.4%	69.2%	71.8%	

Source: Cancer Patient Pathway System (CaPPS) ²Refer 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 (April – June 2016)³

	Тс	Total treated Treated within 62 days from receipt of Referral			% treated within 62 days				
	Apr	May	Jun	Apr	May	Jun	Apr	May	Jun
Cancer Type	2016	2016	2016	2016	2016	2016	2016	2016	2016
Brain/ CNS	0	2	0	0	2	0	-	100.0%	-
Breast	69	58	78	66	54	75	95.7%	93.1%	96.2%
Gynae	16	26	19	11	18	14	68.8%	69.2%	73.7%
Haematological	5	9	17	5	6	14	100.0%	66.7%	82.4%
Head/Neck	8	10	17	5	7	10	62.5%	70.0%	58.8%
Lower GI	26	38	42	11	20	24	42.3%	52.6%	57.1%
Lung	22	29	29	14	20	12	63.6%	69.0%	41.4%
Sarcomas	2	3	0	1	2	0	50.0%	66.7%	-
Skin	76	55	73	55	35	63	72.4%	63.6%	86.3%
Upper GI	21	23	29	9	13	15	42.9%	56.5%	51.7%
Urological	80	66	75	45	43	44	56.3%	65.2%	58.7%
Other	4	12	7	3	9	6	75.0%	75.0%	85.7%
Northern Ireland	329	331	386	225	229	277	68.4%	69.2%	71.8%

Source: Cancer Patient Pathway System (CaPPS)

³Refer 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 2015 - June 2016)⁴

Month	Commenced Treatment	Commenceded within 62 days of referral	% treated within 62 days
April 2015	304	236	77.6%
May 2015	302	222	73.5%
June 2015	347	241	69.5%
July 2015	332	240	72.3%
August 2015	302	198	65.6%
September 2015	358	249	69.6%
October 2015	305	196	64.3%
November 2015	385	286	74.3%
December 2015	370	267	72.2%
January 2016	314	208	66.2%
February 2016	334	240	71.9%
March 2016	335	240	71.6%
April 2016	329	225	68.4%
May 2016	331	229	69.2%
June 2016	386	277	71.8%

Source: Cancer Patient Pathway System (CaPPS)

Table 4: Number of patients who commenced first treatment, for all cancers in HSC Trusts in Northern Ireland (April – June 2016)⁶

	Total treated			Total treated Treated within 31 days of a decision to treat				% treated within 31 days			
	Apr	May	Jun	Apr	May	Jun	Apr	May	Jun		
HSC Trust	2016	2016	2016	2016	2016	2016	2016	2016	2016		
Belfast	302	329	340	269	296	299	89.1%	90.0%	87.9%		
Northern	114	87	114	96	79	99	84.2%	90.8%	86.8%		
South Eastern	131	128	132	118	121	130	90.1%	94.5%	98.5%		
Southern	127	105	138	127	104	136	100.0%	99.0%	98.6%		
Western	121	115	130	121	115	130	100.0%	100.0%	100.0%		
Northern Ireland	795	764	854	731	715	794	91.9%	93.6%	93.0%		

Source: Cancer Patient Pathway System (CaPPS) ⁶Refer to Explanatory Notes – Points 1-2 & 8-9.

⁴Refer to Explanatory Notes – Points 1-5 & 7

Table 5: Number of patients who commenced first treatment, by tumour site (April – June 2016)⁷

	Total treated			Treated within 31 days of a decision to treat			% treated within 31 days			
	Apr	May	Jun	Apr	May	Jun	Apr	May	Jun	
Cancer Type	2016	2016	2016	2016	2016	2016	2016	2016	2016	
Brain/ CNS	14	9	7	14	9	7	100.0%	100.0%	100.0%	
Breast	138	111	153	122	105	139	88.4%	94.6%	90.8%	
Gynae	36	50	39	31	45	37	86.1%	90.0%	94.9%	
Haematological	43	47	57	43	47	57	100.0%	100.0%	100.0%	
Head/Neck	25	28	36	23	27	36	92.0%	96.4%	100.0%	
Lower GI	81	92	97	79	89	95	97.5%	96.7%	97.9%	
Lung	93	83	105	88	76	98	94.6%	91.6%	93.3%	
Sarcomas	2	7	3	2	7	3	100.0%	100.0%	100.0%	
Skin	132	113	132	121	103	128	91.7%	91.2%	97.0%	
Upper GI	59	61	72	57	60	69	96.6%	98.4%	95.8%	
Urological	159	141	139	139	125	111	87.4%	88.7%	79.9%	
Other	13	22	14	12	22	14	92.3%	100.0%	100.0%	
Northern Ireland	795	764	854	731	715	794	91.9%	93.6%	93.0%	

Source: Cancer Patient Pathway System (CaPPS) ⁷Refer to Explanatory Notes – Points 1-2 & 8-10.

Table 6: Number of patients who commenced first treatment, for all cancers, in Northern Ireland (April 2015 – June $2016)^6$

Month	Total treated	Treated within 31 days of a decison to treat	% treated within 31 days
April 2015	733	708	96.6%
May 2015	697	665	95.4%
June 2015	821	793	96.6%
July 2015	820	792	96.6%
August 2015	727	698	96.0%
September 2015	805	776	96.4%
October 2015	807	782	96.9%
November 2015	852	810	95.1%
December 2015	820	795	97.0%
January 2016	772	731	94.7%
February 2016	804	774	96.3%
March 2016	781	746	95.5%
April 2016	795	731	91.9%
May 2016	764	715	93.6%
June 2016	854	794	93.0%

Source: Cancer Patient Pathway System (CaPPS) ⁶Refer 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 (April - June 2016)9

	Total seen			Waited	Waited 14 days or less			% seen within 14 days			
HSC Trust	Apr 2016	May 2016		Apr 2016	May 2016		Apr 2016	May 2016	Jun 2016		
Belfast	310	229	300	201	164	192	64.8%	71.6%	64.0%		
Northern	309	322	349	285	322	337	92.2%	100.0%	96.6%		
South Eastern	171	238	259	53	37	71	31.0%	15.5%	27.4%		
Southern	217	211	224	149	27	15	68.7%	12.8%	6.7%		
Western	280	268	301	280	268	301	100.0%	100.0%	100.0%		
Northern Ireland	1,287	1,268	1,433	968	818	916	75.2%	64.5%	63.9%		

Table 8: Number of patients seen by a breast cancer specialist following an urgent referral for suspect cancer in Northern Ireland (April 2015 – June 2016)^{9,10}

Month	Total seen	Waited 14 days or less	% seen within 14 days
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%
October 2015	1,324	1,115	84.2%
November 2015	1,548	785	50.7%
December 2015	1,503	744	49.5%
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%

Source: Departmental Return SDR 2.

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

Source: Departmental Return SDR 2 9Refer to Explanatory Notes – points 1-2 & 11-13

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 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. 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
- 15. 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.
- 16. 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
- 17. Information on waiting times for the months of July, August and September 2016 will be published on Thursday 5th January 2016.
- 18. Data contained within this publication are National Statistics.

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

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