



Cancer: Waiting Times for Diagnosis and Treatment

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How long do patients wait for cancer diagnosis and treatment? The NHS monitors performance standards relating to cancer testing, treatment and care. In England, when a GP urgently refers a patient with suspected cancer that patient should have their first appointment with a specialist within two weeks. If the patient goes on to receive treatment for cancer, this should occur within two months of the original urgent GP referral. In addition, whenever a decision is taken to treat a patient for cancer, the treatment should occur within 31 days.

In 2014 there were 1.5m urgent GP referrals with suspected cancer. This was 53% higher than the equivalent period four years ago. Around one quarter of all cancer diagnoses occur after urgent GP referral via the 'two week' pathway. Waiting times performance for these patients remains within the standard for 93% to see a specialist within two weeks of referral.

In 2014, 272,000 patients began treatment for cancer, of which 129,000 had previously been urgently referred by their GP. The number beginning treatment has risen by 12% over four years. The percentage of those starting treatment who began their pathway with an urgent GP referral has risen over the past four years. In the last year, performance has fallen below the target for 85% of these patients to be treated within two months of GP referral.

This note provides detailed statistics on the above targets, along with a range of other cancer waiting times measures in England. Data is also presented for Scotland, Wales, and Northern Ireland. In addition, background information is given on how people are diagnosed with cancer, along with information on how diagnosis through emergency routes is related to lower survival rates.

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1 Introduction: Cancer Diagnosis and Treatment

1.1 Cancer Waiting Times Targets

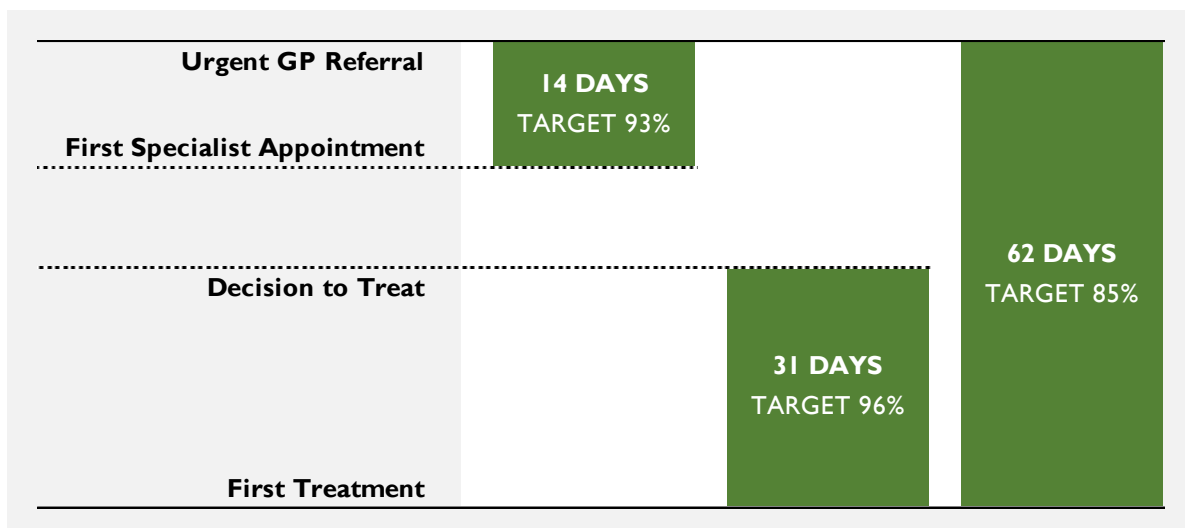
When a GP suspects that a patient might have cancer, they initiate an urgent referral to a specialist. This is known as the ‘two-week pathway’, since patients have a right to be seen by a specialist within two weeks. Examples of when a GP might urgently refer a patient are when symptoms require further investigation or tests have uncovered unusual results.¹ Most patients referred this way are not ultimately diagnosed with cancer, but seeing a specialist allows the suspicion of cancer to be confirmed or denied quickly. The NHS measures performance against the target that 93% of all patients referred via this pathway should see a specialist within two weeks.²

If a patient receives a positive diagnosis of cancer via the two-week pathway, a further waiting time standard is measured: the time between the original GP referral and the start of the first definitive treatment. The treatment should begin no more than 62 days after the initial GP referral. Performance on the 62-day wait is measured against an 85% target.³

In addition, all treatments – whether via the two-week wait or otherwise – are subject to a further target. Once a decision to treat has been made, the treatment should begin within 31 days. Performance on the 31-day wait is measured against a 96% target.

Figure 1 illustrates these targets. There are further waiting time standards which will be discussed in brief below, including the 31-day wait for all subsequent treatments and the 62-day wait for treatment after referral via National Screening Services.

Figure 1: Illustration of cancer waiting time targets



¹ NHS: Your right: urgent two-week referral <http://www.londoncancer.org/media/48492/2wk-referral-patient-leaflet.pdf>

² In addition to patients with suspected cancer, the two-week target is enforced for patients with any breast symptoms, even where cancer is not initially suspected.

³ Operational standards for cancer waiting times commitments, http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_103431.pdf

The cancer waiting times standards were reviewed in 2011⁴ and were retained. It was found that shorter waiting times can lead to improved outcomes such as earlier diagnosis, quicker treatment, and lower risk of complications. The ‘operational standards’ (i.e. targets) reflect the fact that waiting times standards are not expected to be met in all cases – there will be cases where patients are unfit to undergo treatment, or where patients choose to delay their own treatment.

The targets are measured against the ‘all cancers’ category in each case. As shown below, there is often substantial variation in waiting times between cancer sites – this results from varying complexity of tests and procedures required to diagnose and treat different cancers.

1.2 Background: How are Patients Diagnosed with Cancer?

As mentioned above, one of the key cancer waiting times measures is the ‘two week wait’: the waiting time from urgent GP referral with suspected cancer to the patient’s first appointment with a specialist. Detailed data on referrals via the two-week pathway will be presented below. But not all cancers are diagnosed through this route: in fact, in the period from 2006-2010, only a little over a quarter of cancers were diagnosed after urgent GP referral via the two week pathway. As context for the data in this briefing, this section explores how cancers are diagnosed, and shows how a patient’s route to diagnosis is not only closely related to the patient’s prospects for cancer survival, but also varies widely with age and deprivation.⁵

Chart 1 shows a breakdown of cancer diagnoses by route between 2006 and 2010. In addition to those diagnosed via the ‘two week wait’ pathway, a further 27% of cancers were diagnosed through a GP referral not via the two week wait. 13% were diagnosed after an inpatient or outpatient episode at hospital, and 5% were diagnosed via a screening service.

However, 23% of cancers were diagnosed only through ‘emergency presentation’ – either after admission through A&E or some other kind of emergency referral. These cancers are more likely to be diagnosed at a late stage and are less likely to lead to survival.

The percentage diagnosed through emergency routes varies between cancer sites. Leukaemia, brain cancer, pancreatic cancer, liver cancer and lung cancer are more likely to be diagnosed through emergency presentation, while skin cancer, breast cancer, prostate cancer and testicular cancer as less likely to be diagnosed through this route.

Chart 1: Cancer diagnoses by route, England, 2006-2010

Route to diagnosis	%
Other GP referral	27%
Two Week Wait	27%
Emergency presentation	23%
Other Outpatient	10%
Screen detected	5%
Unknown	4%
Inpatient Elective	3%
Death Certificate Only	0%

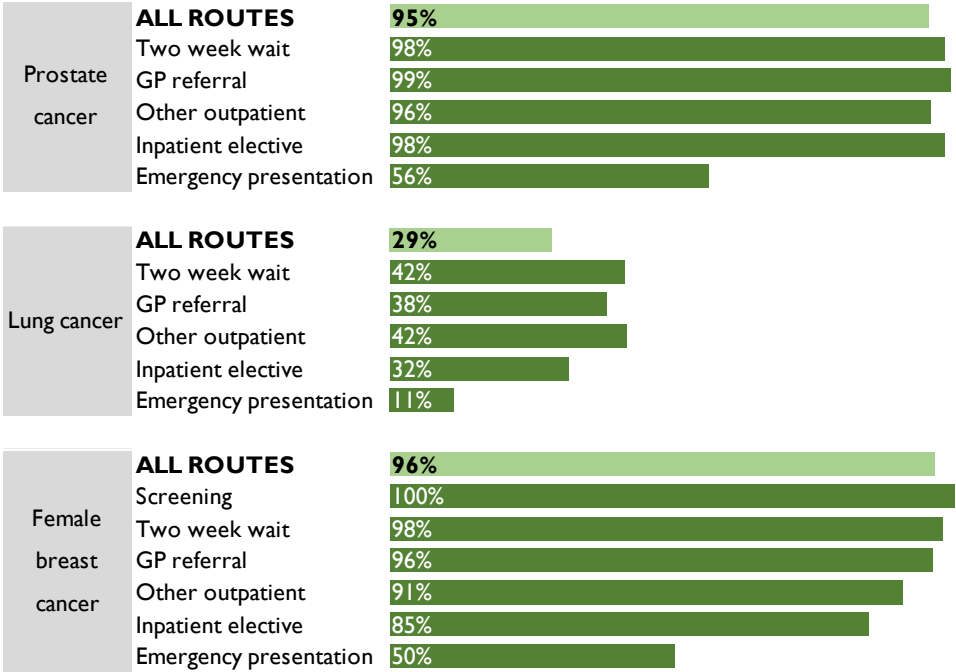
Source: [NCIN Routes to Diagnosis](#)

⁴ Improving Outcomes: A Strategy for Cancer https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213785/dh_123394.pdf
⁵ The source for this data is the National Cancer Intelligence Network’s *Routes to Diagnosis* publication: http://www.ncin.org.uk/publications/routes_to_diagnosis

Route to diagnosis and survival rates

Those diagnosed through emergency presentation are on average half as likely to survive for at least twelve months compared with those diagnosed via urgent GP referral.⁶ **Chart 2** (below) shows this effect for three common cancers.

Chart 2: 12-month survival rate by route of diagnosis (%),
Selected cancer sites, England, 2006-2010



Source: NCIN Routes to Diagnosis

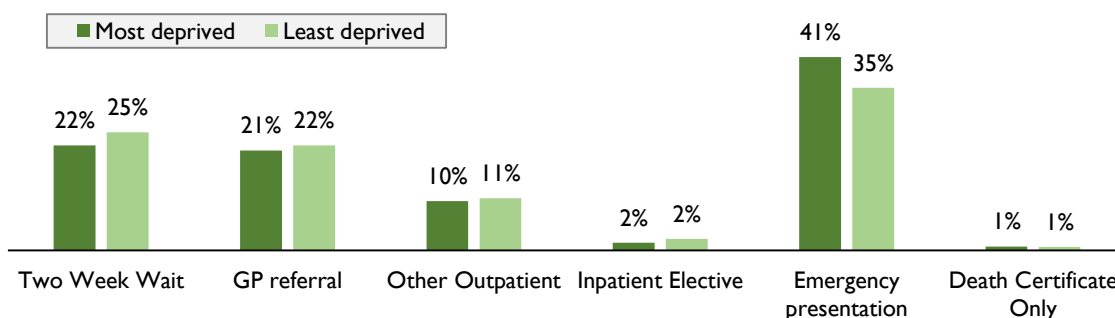
Patients diagnosed after emergency presentation had the lowest 12-month survival rate. This effect is visible not just in the above cancer sites, but in every cancer site, with survival rates after emergency presentation usually being substantially lower than those for other routes. The effect remains when considering 24-month and 36-month survival rates. For instance, 99% of patients diagnosed with breast cancer through a screening program survive for at least 36 months after their diagnosis, while only 35% of breast cancer patients diagnosed through emergency presentation survive this period.

Variation by age and deprivation: lung cancer

Lung cancer is the second-most common cancer in both men and women. It is also a cancer site where a relatively high amount of cases – 38% – are diagnosed after emergency presentation. This percentage varies between different social groups. **Chart 3** shows that patients in the highest deprivation quintile were more likely to be diagnosed after emergency presentation between 2006 and 2010, and less likely to be diagnosed via the two-week wait.

⁶ NAO, Department of Health, NHS England and Public Health England 'Progress in improving cancer services and outcomes in England. <http://www.nao.org.uk/wp-content/uploads/2015/01/Progress-improving-cancer-services-and-outcomes-in-England.pdf>

Chart 3 Patient route to diagnosis of lung cancer by deprivation (%), England, 2006-2010

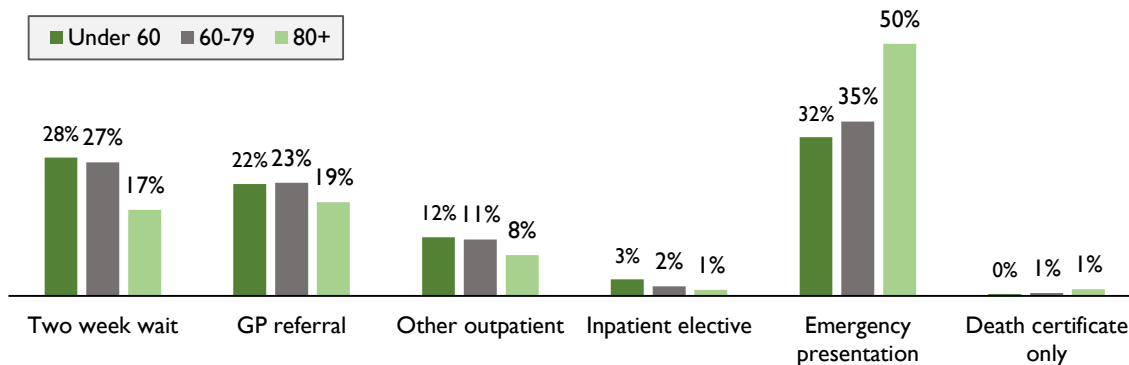


Source: [NCIN Routes to Diagnosis](#)

There is very little variation between the percentages of male and female patients who follow each route to diagnosis. Of all routes to diagnosis, the emergency presentation route showed the most gender variation, with the rate of emergency presentation diagnosis being 1.5% higher among women than among men.

Chart 4 shows variation in route to lung cancer diagnosis by age. Diagnoses via emergency presentation are substantially higher among the elderly, with half of cases among those 80+ being diagnosed through this route.

Chart 4 Patient route to diagnosis of lung cancer by age (%), England, 2006-2010



Source: [NCIN Routes to Diagnosis](#)

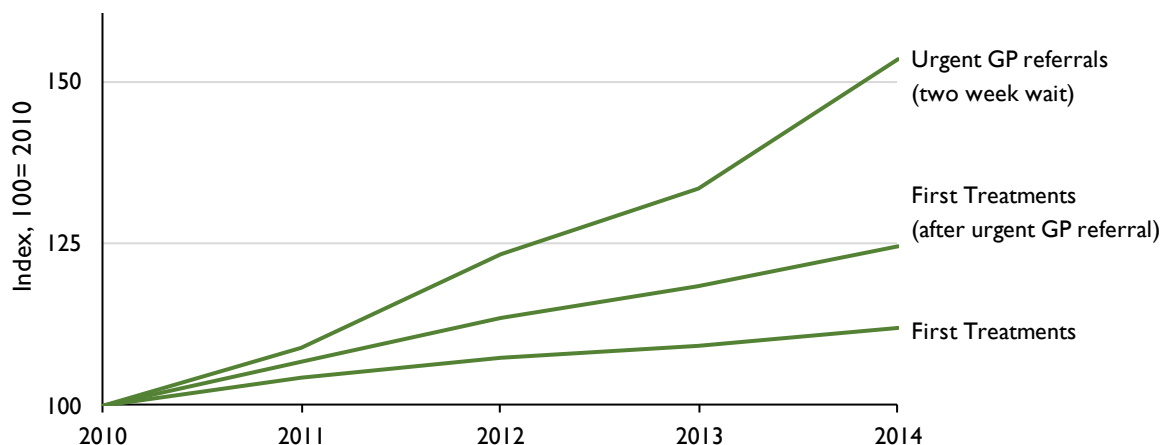
Given the lower survival rates of those diagnosed through emergency presentation, reducing the proportion of cancers diagnosed via this route is taken to be an important goal. Data from the Cancer Commissioning Toolkit, presented by the NAO, shows some success on this goal: between 2009 and 2012 the percentage of emergency presentation diagnoses steadily declined from 23.7% to 20.6%.⁷

⁷ NAO, Department of Health, NHS England and Public Health England 'Progress in improving cancer services and outcomes in England. <http://www.nao.org.uk/wp-content/uploads/2015/01/Progress-improving-cancer-services-and-outcomes-in-England.pdf>

2 Cancer Waiting Times: Summary of Key Indicators

The number of cancer referrals and treatments has increased in recent years, as **Chart 5** shows.

Chart 5: Trends in cancer referrals and treatments, England, 2010-2014



Source: [NHS England Cancer Waiting Times](#)⁸

The number of patients urgently referred by GPs through the two-week pathway was 53% higher in 2014 than in 2010. The number of first treatments was 12% higher, and the number of first treatments which followed a GP referral was 25% higher. This means that a greater proportion of cancer treatments now occur following an urgent GP referral rather than other routes – in the quarter ending December 2014 this proportion was at 48%, up from 42% in the same period in 2009. Additionally, a smaller proportion of referrals on the two-week pathway now result in cancer treatment.

Table A (below) shows England-wide trends on the three central cancer waiting times targets described in section 1.1. A green square represents a quarter where the relevant target was met, and an orange square shows a breach of the target. A lighter-shaded green square shows a value meeting the target but close to the boundary, while a darker green square shows a value some way above the target.

On an England-wide basis, all three targets were met each quarter until 2014. Performance on all targets has been lower in 2014 than in previous years, although the comparatively small decline in 31-day wait performance is not visible here since values are rounded to the nearest 1%.

Table A: Cancer waiting times performance against targets, England, 2009-2014

Target	2009				2010				2011				2012				2013				2014				
	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	
Two week wait	93%	95%	94%	94%	96%	95%	95%	96%	96%	95%	96%	96%	96%	95%	95%	96%	96%	95%	95%	96%	95%	94%	94%	95%	
31 day wait	96%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	99%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	
62 day wait	85%	86%	86%	86%	87%	87%	88%	87%	87%	86%	87%	87%	88%	87%	87%	87%	88%	86%	87%	87%	86%	84%	84%	83%	84%

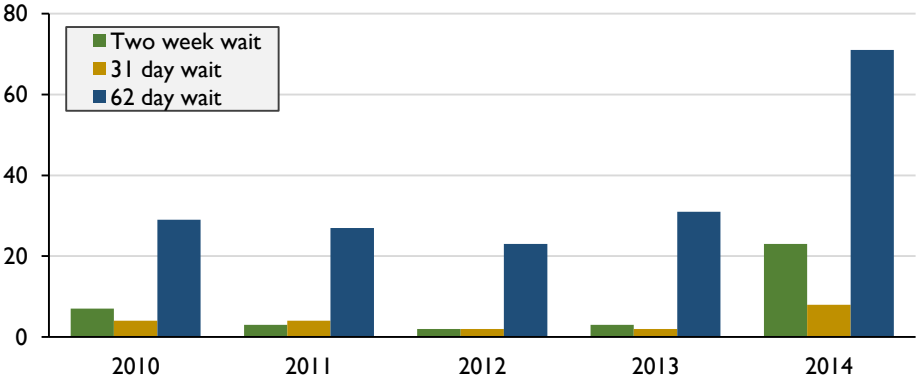
Key Meeting Target Breaching Target

Source: [NHS England Cancer Waiting Times](#)

⁸ <http://www.england.nhs.uk/statistics/statistical-work-areas/cancer-waiting-times/>

Chart 6 shows the number of providers breaching each target over five twelve-month periods (ending in September each year). There were typically 20-30 providers breaching the 62-day wait target between 2010 and 2013, but this rose to 70 in the twelve months ending September 2014. The number of providers breaching the two-week wait and 31-day wait targets has also risen substantially in the past twelve months.

Chart 6: Number of providers breaching cancer waiting times targets, England
Twelve month periods ending September



Source: NHS England Cancer Waiting Times

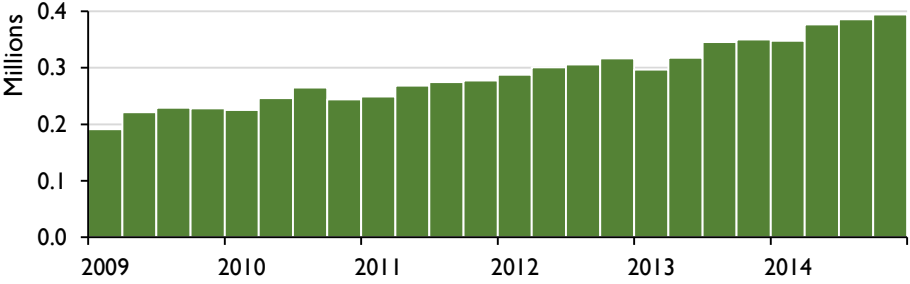
More detailed data on each of these indicators is given below.

3 Waiting Times for First Specialist Appointment after Urgent GP Referral

In 2014, there were 1.5 million GP referrals with suspected cancer via the ‘two-week wait’ urgent referral pathway seen by English providers. As noted above, this is 53% higher than the figure four years earlier. This ‘welcome rise’ has been praised by NHS England as progress on the goal to get patients to ‘step forward early’ when they suspect an abnormality.⁹ There have recently been reports suggesting that urgent GP referrals will continue to rise as NICE has lowered the minimum threshold of symptoms for which GPs should refer a patient.¹⁰

Chart 7 illustrates this trend on a quarterly basis.

Chart 7: Urgent GP referrals with suspected cancer via the Two Week Wait route
England, 2009-2014, Quarterly Data



Source: NHS England Cancer Waiting Times

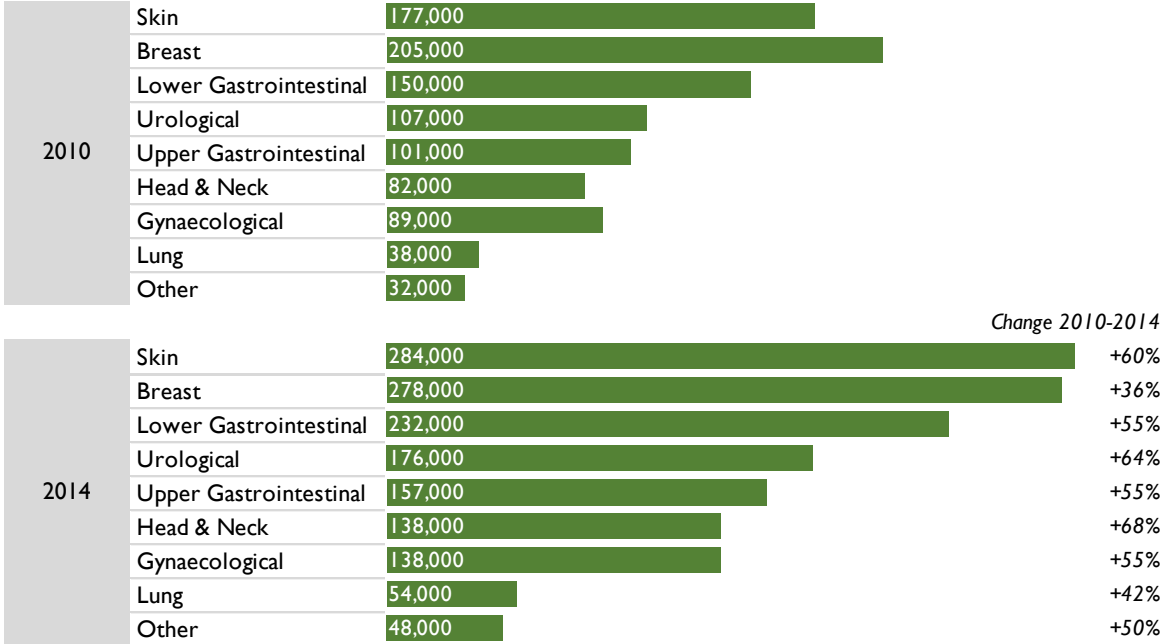
⁹ <http://www.england.nhs.uk/2014/08/29/cancer-waiting-time-pressures/>

¹⁰ <http://www.pulsetoday.co.uk/clinical/cancer/gp-urgent-cancer-referrals-to-soar-as-nice-lowers-threshold-for-symptoms/20008520.article#.VlbNrdKsXT0>

Between 2006 and 2010, 27% of all cancer diagnoses came via a two-week wait pathway¹¹, and there were 281,000 cancer diagnoses in England in 2012.¹² If the proportion diagnosed via the two-week pathway has remained constant, this implies almost 76,000 patients were diagnosed via the two-week wait in 2012. This is around 6% of all urgent GP referrals made in 2012. However, given the large increase in GP referrals since 2010, it is likely that the proportion of all cancers diagnosed via a two-week wait pathway has also risen – especially given that (as we saw above) the percentage of cancers diagnosed through emergency presentation fell between 2009 and 2012. As such, the number of cancers diagnosed via the two-week wait in 2012 may be higher than 76,000.

Chart 8 shows the number of urgent GP referrals by suspected cancer site. This allows us to see how the rise in referrals has differed between cancer sites. Head and neck cancers have seen a 68% rise in referrals, while referrals for suspected urological cancer have risen by 64%. In 2014, there were an average of around 2,000 more referrals with suspected skin cancer each week than 2010, around 1,400 more breast referrals per week, and around 1,600 more lower gastrointestinal referrals per week.

Chart 8: Urgent GP referrals by suspected cancer site
2010 and 2014, England. Rounded to nearest thousand



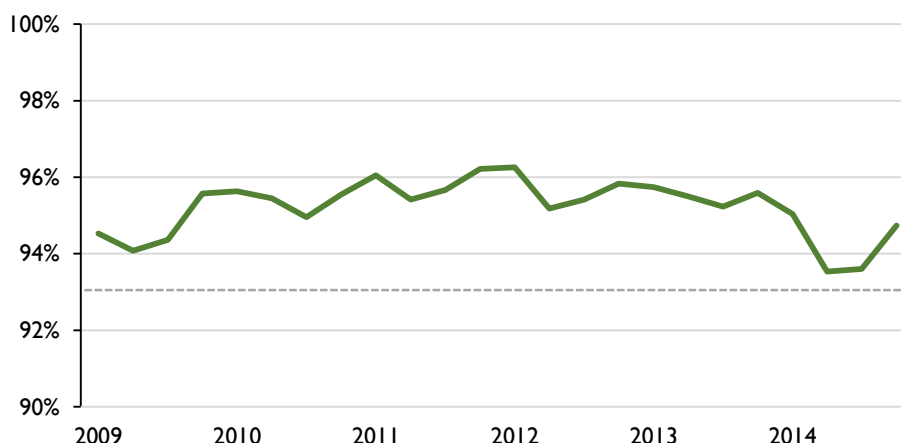
Source: NHS England Cancer Waiting Times

The measured target for the two-week pathway is that 93% of patients should have their first specialist appointment within two weeks of an urgent GP referral. This target has been met nationwide in each quarter. Performance declined slightly in 2014 but has now recovered to 94.7%. **Chart 9** (overleaf) illustrates these trends.

¹¹ NCIN Routes to Diagnosis, http://www.ncin.org.uk/publications/routes_to_diagnosis
¹² <http://www.ons.gov.uk/ons/rel/vsob1/cancer-statistics-registrations--england--series-mb1--no--43--2012/stb-cancer-registrations-2012.html>

Chart 9: Two week wait for first specialist appointment: performance in England

Target: 93% of patients seen within 14 days of urgent GP referral, quarterly data



Source: NHS England Cancer Waiting Times

The number of patients waiting for over four weeks (i.e. twice the target time) also rose in mid-2014. This proportion had remained constant at around 0.34% (i.e. 1 in every 294 patients) for several years, but grew to 0.58% (i.e. 1 in every 172 patients). In the last quarter of 2014 it fell back to 0.4%. One in 48 patients (2.1%) waited for more than three weeks for their first specialist appointment in mid-2014, up from one in 71 patients (1.4%) in mid-2013.

Two-week wait performance by cancer site

There is some variation between waiting times for different suspected cancer sites, as **Table B** (below) shows. In the three most recent quarters, five different cancer sites – breast, children’s, skin, sarcoma and upper gastrointestinal – have recorded values below the 93% target.

Table B Two week wait performance by suspected cancer site

Five most recent quarters, 2013 and 2014, England

	Oct-Dec 13	Jan-Mar 14	Apr-Jun 14	Jul-Sep 14	Oct-Dec 14
ALL CANCERS	95.6%	95.0%	93.5%	93.6%	94.7%
Brain/Central Nervous System	96.9%	95.6%	96.7%	95.8%	96.6%
Breast	96.8%	95.9%	92.3%	95.0%	96.6%
Children's ^a	96.1%	96.9%	92.9%	92.9%	95.7%
Gynaecological	96.1%	95.2%	94.4%	95.1%	95.4%
Haematological	97.3%	97.3%	96.4%	95.6%	96.4%
Head & Neck	95.9%	95.8%	95.2%	95.3%	95.9%
Lower Gastrointestinal	95.3%	94.7%	93.6%	93.1%	93.9%
Lung	97.3%	96.7%	96.2%	96.4%	96.3%
Other	97.1%	95.3%	94.5%	95.2%	94.5%
Sarcoma	96.6%	95.5%	94.1%	94.6%	92.9%
Skin	95.2%	95.2%	93.0%	91.5%	93.4%
Testicular	98.2%	97.2%	97.2%	97.6%	97.1%
Upper Gastrointestinal	94.0%	93.3%	92.2%	91.8%	92.6%
Urological (excl. testicular)	94.8%	93.9%	94.0%	94.3%	94.8%

Above target Below target

Source: NHS England Cancer Waiting Times

Two-week wait performance by area

There is also variation in performance in different areas of England. **Table C** shows performance for regional areas which now correspond to the 25 NHS area teams. Area teams did not exist as an NHS geography before April 2013, so data from before this date is aggregated on a notional basis by assigning Primary Care Trusts to their respective area.

As seen above, there was a slight decline in performance in mid-2014. There were only three regional breaches of the 93% target in 2011/12, 2012/13 and 2013/14 combined. In the three quarters of 2014/15, however, eleven different area teams breached the target in at least one quarter.

Note that figures in **Table C** are rounded to the nearest 1%. As such, a figure of 93% can represent a value below the target, since it may (as in the case of Essex in Q2 2014/15) be rounded up from a value below 93%. In such cases squares are shaded orange.

Table C: Two-week wait performance by area
All cancers, Commissioner-based

Area	2011/12				2012/13				2013/14				2014/15		
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3
Arden, Herefordshire And Worcestershire	96%	95%	95%	96%	95%	95%	95%	96%	96%	95%	95%	94%	94%	95%	95%
Bath, Gloucestershire, Swindon And Wiltshire	93%	94%	95%	95%	92%	94%	95%	94%	95%	94%	96%	94%	93%	94%	94%
Birmingham And The Black Country	96%	95%	96%	96%	95%	95%	95%	95%	95%	95%	96%	95%	90%	90%	93%
Bristol, North Somerset, Somerset & S Gloucs	95%	95%	96%	95%	95%	95%	95%	95%	95%	95%	95%	96%	95%	93%	92%
Cheshire, Warrington And Wirral	96%	96%	97%	97%	95%	96%	96%	97%	97%	97%	97%	96%	96%	96%	96%
Cumbria, Northumberland, Tyne And Wear	96%	96%	96%	96%	95%	95%	95%	96%	95%	95%	96%	96%	95%	94%	94%
Derbyshire And Nottinghamshire	95%	95%	96%	96%	94%	95%	96%	94%	94%	95%	94%	94%	92%	93%	94%
Devon, Cornwall And Isles Of Scilly	96%	96%	96%	96%	96%	97%	96%	96%	95%	95%	96%	95%	93%	93%	93%
Durham, Darlington And Tees	93%	94%	95%	96%	95%	95%	97%	96%	96%	96%	96%	95%	94%	95%	96%
East Anglia	96%	96%	96%	96%	95%	96%	97%	97%	97%	97%	97%	97%	96%	96%	97%
Essex	95%	94%	95%	95%	95%	95%	95%	95%	96%	97%	95%	94%	94%	93%	95%
Greater Manchester	96%	90%	97%	98%	97%	97%	98%	97%	97%	97%	97%	97%	96%	96%	96%
Hertfordshire And The South Midlands	96%	97%	97%	97%	96%	96%	96%	97%	96%	95%	97%	95%	92%	92%	96%
Kent And Medway	95%	96%	97%	97%	96%	95%	96%	96%	95%	94%	95%	95%	94%	93%	94%
Lancashire	95%	95%	96%	95%	94%	95%	95%	96%	95%	95%	96%	96%	95%	95%	96%
Leicestershire And Lincolnshire	95%	95%	95%	95%	94%	95%	95%	95%	95%	94%	95%	94%	90%	91%	92%
London	96%	96%	96%	96%	95%	96%	96%	96%	96%	95%	95%	93%	91%	94%	95%
Merseyside	95%	95%	96%	96%	94%	95%	96%	97%	95%	95%	96%	96%	95%	94%	95%
North Yorkshire And Humber	96%	95%	96%	96%	95%	95%	95%	96%	96%	95%	96%	95%	93%	92%	93%
Shropshire And Staffordshire	95%	96%	96%	97%	96%	96%	97%	96%	95%	96%	96%	96%	95%	95%	96%
South Yorkshire And Bassetlaw	96%	96%	96%	96%	95%	95%	96%	95%	94%	95%	95%	94%	94%	94%	95%
Surrey And Sussex	94%	95%	96%	96%	95%	95%	96%	96%	96%	95%	95%	94%	94%	94%	94%
Thames Valley	95%	98%	98%	97%	95%	95%	97%	95%	95%	95%	96%	96%	93%	93%	94%
Wessex	95%	96%	97%	97%	96%	96%	96%	96%	95%	95%	95%	96%	95%	93%	94%
West Yorkshire	97%	97%	97%	98%	97%	97%	96%	95%	96%	96%	96%	96%	95%	94%	97%
ENGLAND	95%	95%	96%	96%	95%	95%	96%	96%	96%	95%	96%	95%	94%	94%	95%

	Above 95%	} Above target
	93% - 95%	
	Below 93%	} Below target

Source: NHS England Cancer Waiting Times

Statistics are also available for individual NHS providers. 26 providers did not meet the 93% standard in 2014. Nine NHS trusts had performance below 90% in this period: Heart of England, Northern Devon, York Teaching Hospital, Royal Bournemouth & Christchurch, Barking Havering & Rebdridge, United Lincolnshire Hospitals, Lewisham & Greenwich, Taunton & Somerset, and Barts Health.

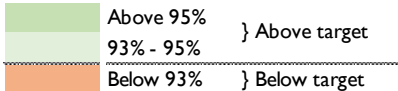
Table D (below) shows area-level data for individual cancer sites. Each column of data represents a year, as noted in the column headings.

The table further illustrates variations in waiting times between different suspected cancer sites and between different areas of England. For instance, in 2012, where targets for all cancers were being met both at national level and at area level, nine of 25 area teams recorded values below the target for upper gastrointestinal cancers (e.g. oesophageal, liver, and stomach). Conversely, four area teams have less than 93% of patients meeting the two-week standard for breast cancer in the most recent year, demonstrating better two-week wait performance than other cancer sites.

Note that the cancer waiting times targets apply officially only to the “all cancers” measure and not to any individual cancer. However, visualising the data in this way helps us to see how different cancer sites contribute to wider performance on the 93% measure.

Table D Two-week wait performance by area and suspected cancer site
Provider-based data

Area	SKIN			BREAST			UPPER GI.			LOWER GI.			UROLOGICAL		
	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014
Arden, Herefordshire And Worcestershire	94%	92%	94%	97%	96%	93%	95%	96%	91%	94%	95%	94%	95%	95%	95%
Bath, Gloucestershire, Swindon And Wiltshire	93%	95%	94%	98%	96%	91%	89%	93%	93%	92%	94%	95%	93%	93%	93%
Birmingham And The Black Country	94%	95%	84%	98%	97%	91%	93%	94%	92%	94%	94%	90%	95%	94%	94%
Bristol, North Somerset, Somerset & S Gloucs	94%	95%	93%	97%	96%	94%	95%	96%	94%	93%	91%	94%	95%	97%	96%
Cheshire, Warrington And Wirral	96%	96%	96%	98%	98%	97%	94%	94%	93%	95%	97%	96%	95%	95%	94%
Cumbria, Northumberland, Tyne And Wear	97%	97%	95%	98%	98%	97%	93%	92%	93%	93%	93%	93%	95%	96%	94%
Derbyshire And Nottinghamshire	96%	96%	94%	97%	97%	95%	92%	90%	87%	93%	91%	90%	95%	92%	86%
Devon, Cornwall And Isles Of Scilly	96%	95%	93%	98%	95%	91%	92%	91%	91%	95%	96%	95%	95%	96%	94%
Durham, Darlington And Tees	94%	94%	94%	98%	98%	96%	94%	95%	91%	92%	93%	91%	97%	97%	97%
East Anglia	95%	96%	94%	98%	98%	98%	93%	96%	95%	96%	97%	97%	95%	97%	97%
Essex	96%	97%	95%	96%	97%	96%	91%	92%	91%	92%	94%	90%	95%	94%	93%
Greater Manchester	98%	97%	97%	99%	99%	97%	93%	94%	93%	97%	95%	96%	98%	99%	97%
Hertfordshire And The South Midlands	96%	95%	94%	98%	98%	86%	95%	94%	93%	97%	96%	95%	96%	96%	94%
Kent And Medway	96%	95%	95%	97%	95%	95%	95%	94%	93%	96%	95%	92%	96%	95%	95%
Lancashire	92%	94%	93%	97%	97%	96%	95%	95%	94%	95%	96%	95%	96%	95%	96%
Leicestershire And Lincolnshire	96%	94%	91%	96%	93%	86%	90%	92%	89%	92%	90%	93%	96%	95%	95%
London	95%	94%	90%	96%	96%	92%	94%	94%	92%	95%	95%	93%	95%	95%	91%
Merseyside	93%	94%	93%	98%	97%	96%	95%	95%	93%	94%	95%	96%	96%	96%	95%
North Yorkshire And Humber	95%	95%	91%	98%	97%	91%	94%	95%	95%	94%	96%	96%	96%	97%	96%
Shropshire And Staffordshire	96%	93%	97%	98%	97%	96%	95%	95%	94%	97%	98%	96%	97%	96%	96%
South Yorkshire And Bassetlaw	93%	94%	93%	97%	97%	96%	94%	93%	93%	95%	94%	95%	94%	93%	93%
Surrey And Sussex	96%	96%	94%	97%	98%	97%	91%	92%	89%	94%	94%	92%	95%	95%	93%
Thames Valley	98%	97%	94%	97%	95%	95%	94%	95%	90%	92%	93%	87%	97%	97%	95%
Wessex	96%	94%	94%	98%	98%	96%	94%	93%	93%	96%	97%	96%	94%	89%	93%
West Yorkshire	96%	95%	91%	98%	96%	97%	96%	95%	94%	96%	95%	95%	96%	96%	97%
ENGLAND	95%	95%	93%	97%	97%	95%	94%	94%	92%	94%	95%	94%	95%	95%	94%

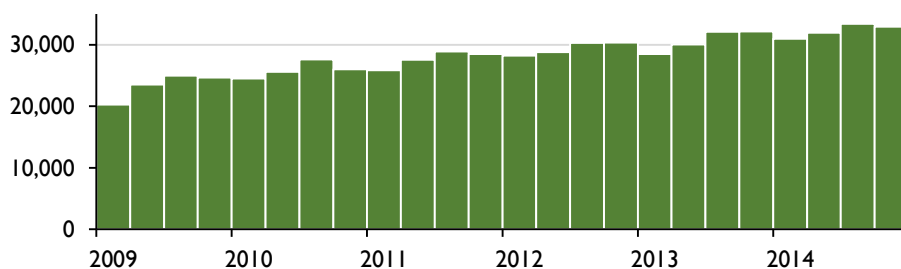


Source: NHS England Cancer Waiting Times

4 Waiting Times for Treatment after Urgent GP Referral

If an urgent GP referral results in a diagnosis of cancer and subsequent treatment, then the time between the GP referral and the patient’s first treatment for cancer will be measured. The standard is that the patient’s first treatment should occur within 62 days of the original urgent GP referral, and this is subject to an 85% target. **Chart 10** shows trends in the number of patients treated following urgent GP referral.

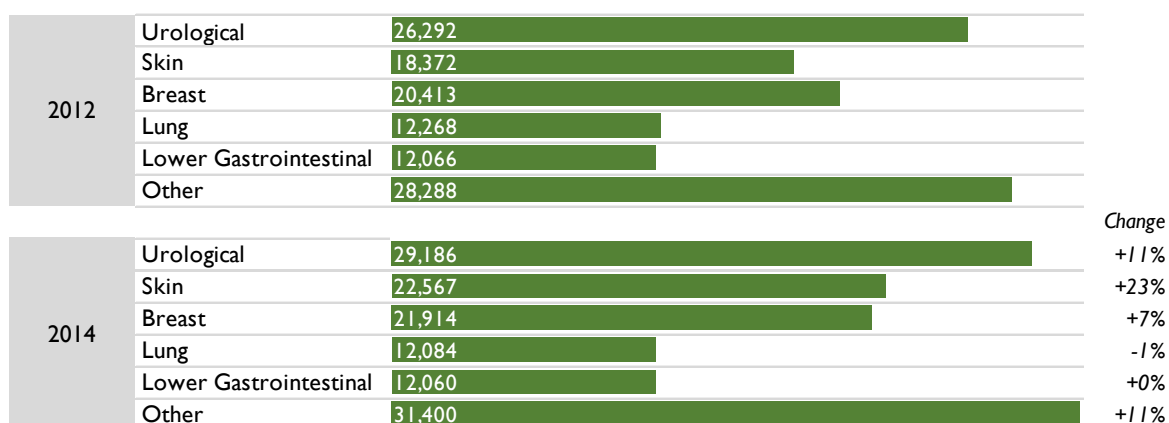
Chart 10 Treatments for cancer following urgent GP referral
England, 2009-2014, Quarterly Data



Source: NHS England Cancer Waiting Times

129,211 patients were treated for cancer following an urgent GP referral in 2014. This represents a 25% rise over four years. **Chart 11** (below) shows this data by individual cancer site, comparing the year to September 2012 with the year to September 2014.¹³ Skin cancer treatments have risen by 23% over these two years, while the number of urological cancer treatments has risen by 11%. Treatments for lung cancer after GP referral have fallen slightly.

Chart 11: Cancer treatments following urgent GP referral, by suspected cancer site
Two-year change, England

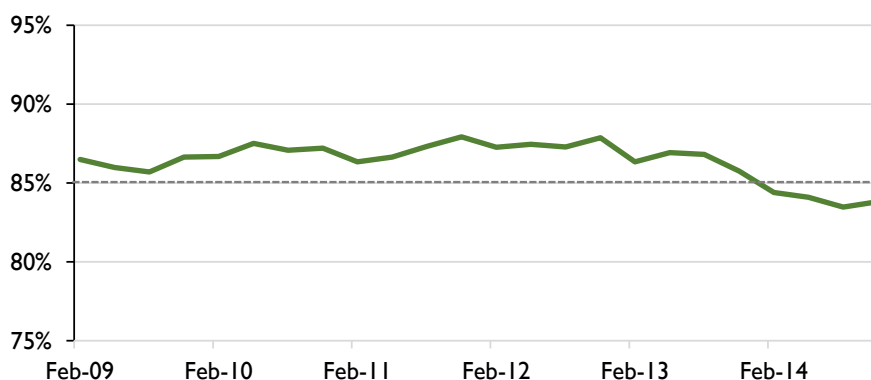


Source: NHS England Cancer Waiting Times

Performance on the 62-day wait target has fallen in the last year, with the 85% target having been missed for each quarter in 2014. **Chart 12** shows this trend.

Chart 12: 62-day wait for first treatment: performance in England

Target: 85% of patients treated within 62 days of urgent GP referral



¹³ Site-specific data is not available before this period.

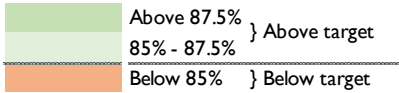
In 2014, 6.6% of patients waited for three months (91 days) or more between referral and treatment – an increase from 4.8% in 2012.

62-day wait performance by area

As with the two-week wait, there is substantial performance variation between different areas of England, as **Table E** shows. Unlike the two-week wait, however, there are some areas of England which have often failed to meet the 62-day target of 85% even before 2014/15. In Arden, Herefordshire and Worcestershire, the 85% target was missed for 11 of the last 15 quarters, and in Leicestershire and Lincolnshire it was missed for ten. On the other hand, the target was met every quarter in Wessex, and in 13 of 14 quarters in Bath, Gloucs, Swindon & Wiltshire and Kent & Medway. Note again that since NHS area teams did not exist before April 2013, data from before this date is aggregated on a notional basis by assigning Primary Care Trusts to their respective area.

Table E: 62-day wait performance by area
All cancers, Commissioner-based

Area	2011/12				2012/13				2013/14				2014/15		
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3
Arden, Herefordshire And Worcestershire	85%	85%	86%	83%	87%	86%	85%	86%	84%	84%	85%	81%	83%	82%	83%
Bath, Gloucestershire, Swindon And Wiltshire	87%	89%	90%	89%	89%	87%	90%	87%	86%	87%	86%	85%	88%	88%	84%
Birmingham And The Black Country	87%	86%	88%	87%	87%	87%	88%	88%	90%	87%	85%	82%	83%	85%	85%
Bristol, North Somerset, Somerset & S Gloucs	89%	90%	90%	89%	89%	89%	87%	84%	87%	88%	86%	81%	82%	79%	83%
Cheshire, Warrington And Wirral	86%	85%	87%	87%	87%	87%	87%	86%	87%	87%	86%	86%	84%	85%	86%
Cumbria, Northumberland, Tyne And Wear	88%	88%	87%	88%	88%	87%	88%	87%	86%	85%	85%	85%	86%	86%	88%
Derbyshire And Nottinghamshire	87%	86%	88%	87%	85%	88%	87%	84%	88%	87%	86%	84%	83%	85%	85%
Devon, Cornwall And Isles Of Scilly	86%	87%	86%	86%	86%	86%	85%	83%	85%	86%	88%	86%	85%	84%	84%
Durham, Darlington And Tees	86%	87%	88%	87%	88%	85%	89%	86%	87%	85%	86%	82%	83%	84%	85%
East Anglia	87%	88%	87%	86%	87%	84%	87%	88%	88%	88%	88%	85%	84%	85%	83%
Essex	84%	85%	85%	82%	83%	85%	86%	87%	87%	85%	83%	80%	78%	76%	78%
Greater Manchester	84%	82%	85%	86%	89%	90%	90%	89%	90%	88%	85%	87%	86%	86%	85%
Hertfordshire And The South Midlands	88%	88%	88%	88%	86%	88%	88%	86%	86%	87%	87%	83%	83%	80%	82%
Kent And Medway	89%	89%	88%	88%	88%	89%	88%	87%	88%	88%	86%	86%	85%	83%	83%
Lancashire	86%	88%	88%	87%	86%	88%	86%	85%	86%	85%	85%	83%	85%	83%	84%
Leicestershire And Lincolnshire	81%	82%	85%	83%	84%	86%	85%	80%	81%	85%	85%	86%	82%	80%	79%
London	87%	87%	87%	87%	86%	85%	87%	84%	86%	84%	83%	83%	82%	80%	82%
Merseyside	86%	88%	91%	86%	87%	85%	90%	87%	86%	88%	87%	86%	86%	87%	86%
North Yorkshire And Humber	88%	90%	89%	88%	86%	86%	90%	89%	88%	89%	87%	85%	84%	85%	83%
Shropshire And Staffordshire	83%	87%	85%	88%	87%	88%	88%	83%	85%	86%	83%	82%	82%	84%	85%
South Yorkshire And Bassetlaw	92%	94%	96%	92%	92%	91%	91%	90%	90%	91%	89%	89%	88%	88%	87%
Surrey And Sussex	86%	88%	88%	86%	87%	87%	87%	86%	85%	85%	86%	87%	84%	82%	83%
Thames Valley	83%	88%	89%	88%	89%	87%	88%	86%	85%	88%	84%	83%	81%	80%	84%
Wessex	89%	89%	90%	91%	90%	89%	90%	90%	89%	87%	86%	87%	86%	87%	85%
West Yorkshire	86%	84%	86%	86%	91%	90%	89%	89%	89%	90%	86%	82%	86%	84%	84%
ENGLAND	86%	87%	88%	87%	87%	87%	88%	86%	87%	87%	86%	84%	84%	83%	84%



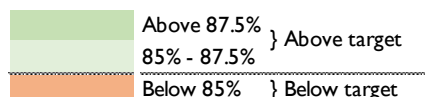
Source: NHS England Cancer Waiting Times

62-day wait performance by cancer site

The above tables and charts mask significant variation between waiting times for individual cancer sites, as **Table F** (below) shows. All areas meet the 62-day target for breast cancer and skin cancer, but very few do for any other recorded cancer. Nationally, performance has declined across all cancer sites over the last year – but it has declined more for those cancer sites which were already not meeting the 85% standard.

Table F: 62-day wait performance by cancer site and area
Provider-based data

Area	Breast			Skin			Lung			Lower GI			Urological			Other		
	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014
Arden, Herefordshire And Worcestershire	98%	98%	96%	97%	95%	93%	81%	80%	76%	79%	80%	74%	79%	76%	75%	82%	83%	80%
Bath, Gloucestershire, Swindon And Wiltshire	99%	99%	97%	98%	97%	97%	86%	76%	77%	79%	82%	81%	84%	82%	82%	86%	83%	82%
Birmingham And The Black Country	98%	98%	95%	98%	99%	97%	83%	80%	79%	80%	85%	79%	78%	77%	77%	85%	83%	75%
Bristol, North Somerset, Somerset & S Gloucs	97%	97%	94%	97%	97%	93%	80%	77%	69%	81%	73%	74%	83%	81%	71%	87%	82%	78%
Cheshire, Warrington And Wirral	99%	98%	98%	98%	98%	98%	81%	80%	75%	82%	82%	78%	81%	80%	80%	80%	77%	76%
Cumbria, Northumberland, Tyne And Wear	98%	98%	98%	96%	96%	98%	81%	76%	78%	84%	83%	81%	85%	86%	79%	85%	79%	81%
Derbyshire And Nottinghamshire	97%	99%	97%	99%	97%	97%	82%	78%	74%	74%	73%	71%	88%	85%	82%	83%	82%	80%
Devon, Cornwall And Isles Of Scilly	98%	97%	96%	97%	97%	97%	76%	77%	80%	71%	75%	72%	79%	77%	76%	83%	81%	77%
Durham, Darlington And Tees	99%	98%	98%	98%	98%	98%	84%	77%	74%	82%	86%	86%	85%	84%	80%	80%	80%	79%
East Anglia	98%	97%	97%	98%	96%	94%	81%	82%	81%	72%	83%	75%	82%	87%	84%	82%	80%	74%
Essex	99%	95%	95%	97%	96%	88%	80%	82%	71%	75%	83%	66%	75%	78%	69%	84%	83%	77%
Greater Manchester	99%	99%	98%	97%	97%	97%	82%	81%	82%	82%	79%	78%	90%	90%	86%	84%	81%	76%
Hertfordshire And The South Midlands	98%	98%	96%	97%	99%	96%	85%	87%	78%	81%	77%	69%	84%	83%	76%	83%	80%	81%
Kent And Medway	97%	95%	95%	99%	98%	96%	85%	81%	80%	75%	77%	60%	91%	90%	86%	77%	77%	79%
Lancashire	98%	99%	97%	96%	95%	97%	80%	81%	76%	77%	68%	76%	83%	81%	77%	85%	80%	80%
Leicestershire And Lincolnshire	98%	97%	94%	99%	96%	94%	87%	81%	74%	64%	65%	61%	82%	82%	86%	75%	74%	72%
London	96%	96%	93%	95%	95%	93%	80%	75%	74%	79%	76%	71%	81%	78%	73%	83%	82%	78%
Merseyside	99%	99%	97%	99%	97%	95%	82%	82%	72%	83%	85%	85%	85%	87%	86%	84%	82%	83%
North Yorkshire And Humber	96%	97%	95%	99%	97%	95%	82%	80%	76%	87%	86%	81%	83%	88%	82%	87%	84%	82%
Shropshire And Staffordshire	98%	98%	98%	99%	95%	96%	82%	76%	78%	76%	78%	74%	88%	83%	82%	82%	82%	76%
South Yorkshire And Bassetlaw	99%	99%	98%	99%	97%	96%	89%	89%	85%	84%	78%	76%	89%	86%	83%	89%	88%	85%
Surrey And Sussex	97%	96%	97%	98%	98%	97%	78%	76%	75%	80%	77%	72%	84%	80%	75%	81%	82%	78%
Thames Valley	97%	96%	92%	99%	98%	99%	84%	76%	71%	74%	70%	65%	87%	84%	76%	80%	74%	75%
Wessex	98%	97%	96%	98%	97%	96%	85%	81%	78%	76%	76%	76%	87%	82%	78%	88%	86%	83%
West Yorkshire	99%	98%	97%	95%	93%	95%	79%	80%	70%	90%	92%	84%	89%	87%	82%	85%	82%	77%
ENGLAND	98%	97%	96%	98%	97%	96%	82%	79%	76%	79%	79%	75%	84%	83%	79%	83%	81%	78%



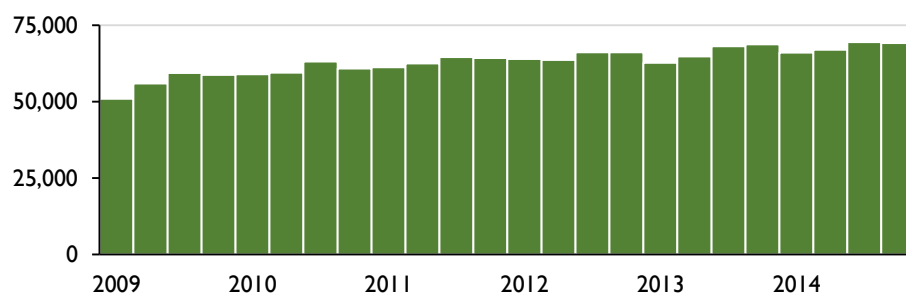
Source: NHS England Cancer Waiting Times

5 Waiting Times for Treatment after Decision to Treat

The 62-day wait for treatment (discussed in section 4) measures only patients whose pathway began with an urgent GP referral. The 31-day wait for treatment after decision to treat, discussed in this section, also includes patients whose cancer was diagnosed via other routes.

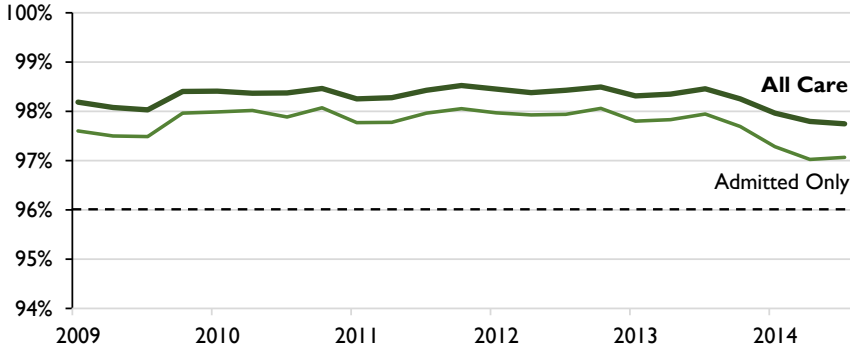
The number of recorded treatments has risen by 12% over the past four years, as **Chart 13** shows. This is smaller than the increase in treatments after urgent GP referral, meaning that the percentage of patients treated whose pathway began with an urgent GP referral has risen.

Chart 13: Recorded cancer treatments (31-day pathways),
England, Quarterly data



The target on this measure is that 96% of patients should be treated within 31 days of a decision to treat. This has been met in every quarter recorded. Performance has, however, recently fallen slightly, as **Chart 14** shows.

Chart 14: 31 day wait for treatment: performance in England
Target: 96% of patients treated within 31 days of decision to treat



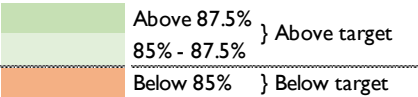
Source: NHS England Cancer Waiting Times

Table G shows that, while 31-day wait performance remains well above the target on a national level, there is variation at the local level. Two area teams fell below the 96% target in the most recent quarter. (Note that Leicestershire & Lincolnshire’s performance in Q2 is rounded up to 96% from a value below the target, so is shaded orange.)

Table G: 31 day wait for treatment: performance by area, all cancers

Area	2011/12				2012/13				2013/14				2014/15		
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3
Arden, Herefordshire And Worcestershire	99%	99%	99%	99%	99%	99%	98%	99%	97%	99%	98%	98%	97%	97%	98%
Bath, Gloucestershire, Swindon And Wiltshire	99%	99%	98%	99%	99%	99%	98%	99%	99%	99%	98%	98%	97%	98%	98%
Birmingham And The Black Country	98%	98%	99%	98%	98%	98%	98%	98%	98%	99%	98%	98%	98%	98%	98%
Bristol, North Somerset, Somerset & S Gloucs	98%	98%	98%	99%	99%	97%	98%	97%	98%	98%	97%	97%	96%	95%	96%
Cheshire, Warrington And Wirral	99%	99%	99%	99%	99%	99%	99%	99%	98%	98%	99%	99%	99%	98%	99%
Cumbria, Northumberland, Tyne And Wear	99%	99%	99%	98%	99%	98%	99%	99%	98%	99%	99%	98%	99%	99%	99%
Derbyshire And Nottinghamshire	98%	98%	98%	98%	97%	99%	98%	98%	98%	98%	97%	98%	97%	98%	98%
Devon, Cornwall And Isles Of Scilly	98%	98%	98%	98%	98%	97%	98%	97%	98%	98%	98%	98%	98%	97%	97%
Durham, Darlington And Tees	99%	99%	99%	99%	99%	99%	100%	99%	99%	99%	99%	98%	98%	98%	99%
East Anglia	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	99%	98%	98%	98%
Essex	99%	98%	99%	99%	98%	99%	98%	99%	98%	98%	98%	97%	97%	97%	96%
Greater Manchester	99%	98%	98%	99%	99%	99%	99%	99%	98%	99%	98%	99%	99%	98%	99%
Hertfordshire And The South Midlands	99%	99%	99%	99%	98%	99%	99%	99%	98%	99%	98%	98%	97%	97%	97%
Kent And Medway	98%	99%	98%	98%	98%	99%	99%	98%	98%	99%	98%	98%	98%	98%	98%
Lancashire	98%	98%	98%	99%	99%	98%	98%	98%	98%	98%	98%	98%	98%	99%	98%
Leicestershire And Lincolnshire	96%	98%	98%	97%	97%	98%	98%	97%	97%	97%	98%	98%	96%	96%	95%
London	99%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%
Merseyside	98%	98%	99%	99%	98%	98%	98%	98%	98%	99%	99%	98%	99%	98%	99%
North Yorkshire And Humber	99%	98%	99%	99%	98%	99%	99%	98%	98%	98%	98%	97%	98%	97%	98%
Shropshire And Staffordshire	98%	97%	98%	98%	98%	99%	99%	98%	98%	98%	98%	98%	97%	97%	97%
South Yorkshire And Bassetlaw	98%	99%	99%	99%	99%	99%	99%	99%	99%	99%	98%	98%	98%	99%	98%
Surrey And Sussex	98%	99%	98%	98%	98%	98%	98%	98%	98%	98%	99%	98%	98%	98%	98%
Thames Valley	97%	98%	98%	98%	98%	98%	98%	98%	97%	99%	98%	97%	96%	98%	98%
Wessex	98%	98%	98%	98%	98%	98%	99%	98%	98%	98%	98%	97%	98%	98%	97%
West Yorkshire	98%	98%	98%	98%	99%	99%	99%	98%	98%	98%	99%	98%	98%	97%	98%
ENGLAND	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%

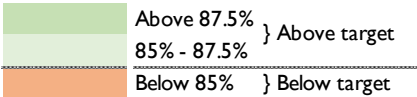
If we consider only admitted care, five area teams have breached the 96% level at least once in 2014/15: Essex, Derbyshire & Nottinghamshire, and Thames Valley in addition to those shown above.



As with the 62-day wait, however, this national picture masks some variation between waiting times for individual cancer sites. **Table H** demonstrates this. Treatments for urological cancer are the most likely to breach the 31-day wait, with several areas recording performance below 96% in each of the last three years.

Table H: 31 day wait for treatment: Performance by cancer site and English area

Area	Breast			Skin			Lung			Lower GI			Urological		
	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014
Arden, Herefordshire And Worcestershire	99%	99%	97%	99%	99%	98%	100%	99%	100%	99%	99%	98%	98%	96%	95%
Bath, Gloucestershire, Swindon And Wiltshire	99%	99%	100%	99%	99%	98%	100%	100%	100%	99%	100%	99%	98%	98%	97%
Birmingham And The Black Country	100%	100%	99%	99%	100%	99%	98%	99%	99%	99%	99%	99%	95%	95%	93%
Bristol, North Somerset, Somerset & S Gloucs	99%	99%	98%	98%	99%	95%	99%	97%	95%	99%	98%	99%	93%	93%	91%
Cheshire, Warrington And Wirral	99%	99%	99%	99%	100%	98%	98%	98%	99%	99%	98%	98%	99%	98%	97%
Cumbria, Northumberland, Tyne And Wear	99%	100%	100%	97%	98%	99%	99%	99%	100%	99%	99%	99%	97%	98%	96%
Derbyshire And Nottinghamshire	99%	99%	98%	99%	98%	97%	99%	98%	98%	96%	96%	96%	95%	96%	96%
Devon, Cornwall And Isles Of Scilly	99%	99%	99%	97%	98%	98%	99%	99%	98%	97%	98%	98%	97%	97%	93%
Durham, Darlington And Tees	100%	100%	99%	100%	100%	100%	100%	100%	100%	100%	100%	100%	98%	96%	94%
East Anglia	100%	99%	100%	98%	98%	97%	99%	100%	99%	99%	99%	99%	97%	99%	98%
Essex	100%	100%	99%	99%	99%	96%	100%	100%	99%	98%	99%	98%	97%	95%	93%
Greater Manchester	99%	99%	100%	98%	99%	98%	98%	98%	99%	99%	99%	99%	99%	99%	98%
Hertfordshire And The South Midlands	99%	99%	98%	98%	98%	96%	99%	99%	99%	98%	98%	98%	99%	98%	96%
Kent And Medway	99%	98%	98%	99%	99%	99%	100%	100%	100%	98%	99%	97%	98%	99%	97%
Lancashire	100%	99%	100%	99%	97%	98%	100%	100%	100%	98%	96%	98%	97%	95%	96%
Leicestershire And Lincolnshire	99%	99%	95%	99%	98%	98%	99%	100%	96%	94%	95%	95%	94%	95%	93%
London	99%	99%	99%	98%	98%	97%	99%	99%	99%	99%	98%	97%	96%	96%	96%
Merseyside	99%	100%	100%	99%	98%	98%	99%	99%	100%	99%	100%	99%	98%	98%	97%
North Yorkshire And Humber	99%	99%	99%	99%	99%	97%	99%	99%	98%	99%	99%	98%	97%	97%	97%
Shropshire And Staffordshire	99%	99%	99%	99%	97%	96%	99%	97%	98%	97%	99%	97%	98%	96%	97%
South Yorkshire And Bassetlaw	100%	100%	99%	99%	99%	98%	98%	99%	98%	99%	98%	99%	98%	98%	97%
Surrey And Sussex	100%	99%	99%	97%	97%	97%	100%	99%	99%	99%	99%	99%	96%	97%	97%
Thames Valley	99%	98%	97%	99%	99%	99%	98%	98%	95%	98%	97%	97%	97%	98%	96%
Wessex	100%	99%	99%	99%	97%	99%	100%	99%	100%	98%	99%	99%	96%	95%	92%
West Yorkshire	100%	99%	100%	98%	97%	97%	98%	97%	96%	99%	100%	99%	98%	98%	97%
ENGLAND	99%	99%	99%	98%	98%	98%	99%	99%	99%	98%	99%	98%	97%	97%	96%



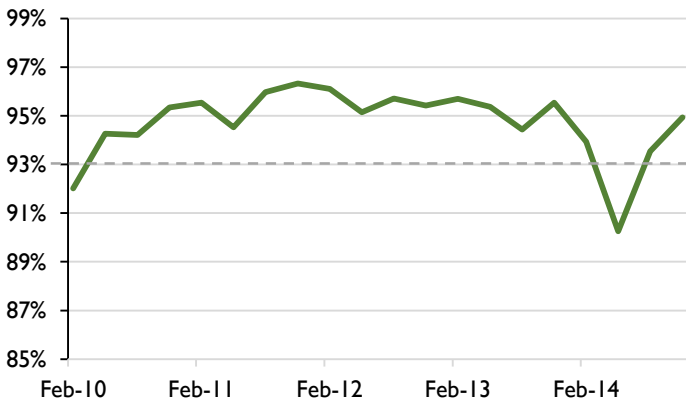
6 Other Waiting Time Targets

There are a number of other waiting times targets for cancer care which are not discussed above. Trends on these targets are summarised below.

Two week wait, breast symptoms

93% of patients referred with breast symptoms where cancer is not initially suspected should receive a first consultant appointment within two weeks. As **Chart 15** shows, this target has been met in all but two quarters since it has been measured. One of these breaches was in Apr-Jun 2014.

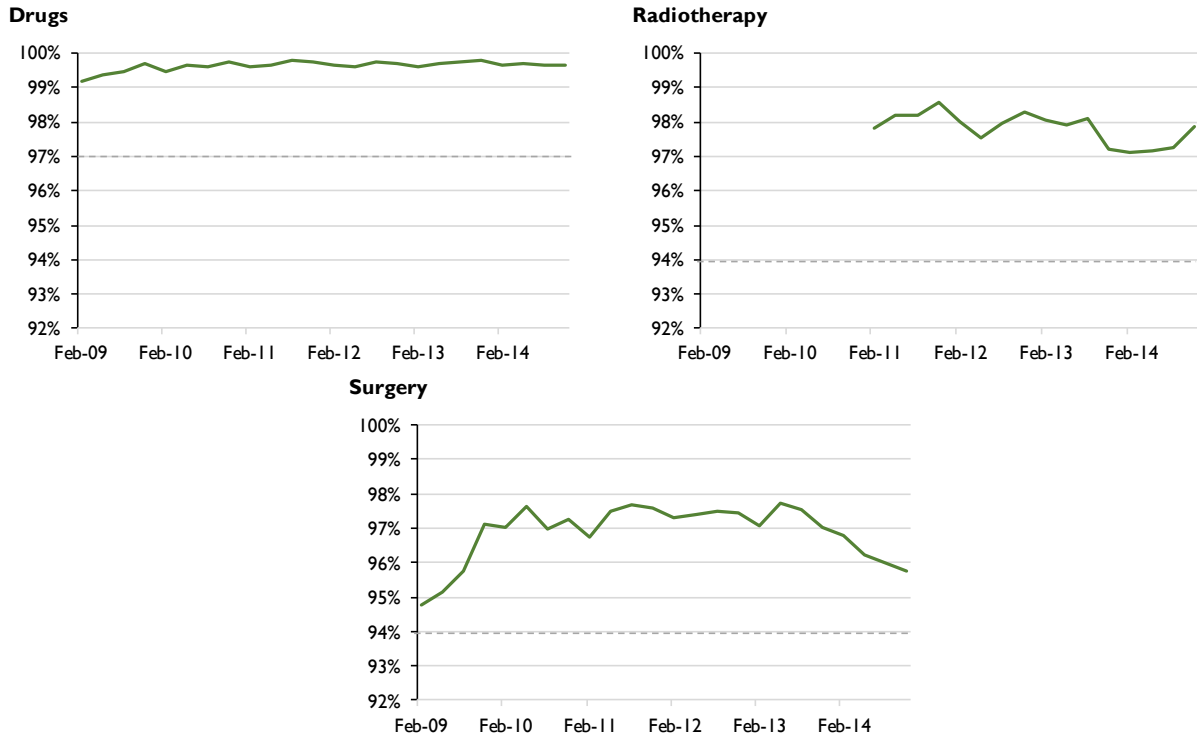
Chart 15: Two week wait breast symptoms
% seen within 14 days, dotted line represents target



31 day wait for subsequent treatment

Each subsequent cancer treatment should be delivered within 31 days of a decision to treat. This is measured separately for drugs (target 97%) radiotherapy (target 94%), and surgery (target 94%). All three targets have been met in each quarter since they were measured. **Chart 16** shows trends on the three measures.

Chart 16: 31 day waits for subsequent treatment
% treated within 31 days. Dotted line represents target

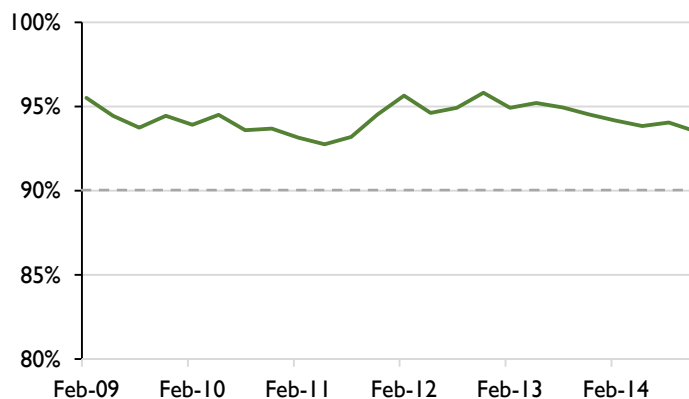


Source: [NHS England Cancer Waiting Times](#)

62 day wait from screening to treatment

90% of patients diagnosed with cancer via a screening service should start their treatment within 62 days of the screening referral. This target has been met each quarter since it has been measured. **Chart 17** shows trends on this measure.

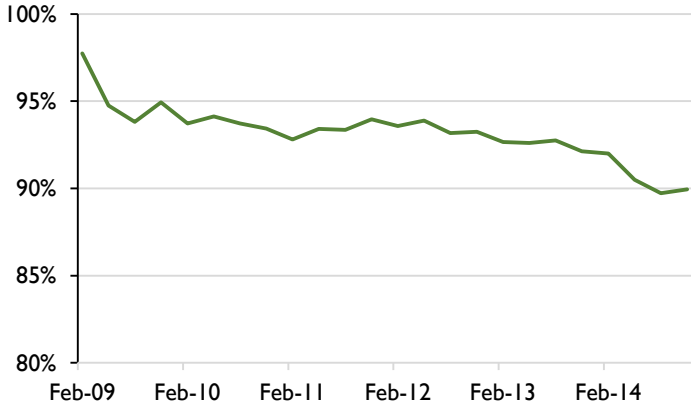
Chart 17: 62 day screening standard:
% patients starting treatment within 62 days of screening referral, dotted line represents target



62 day consultant upgrade

Data is also collected on the percentage of patients starting treatment within 62 days of a ‘consultant upgrade’ – i.e. from a consultant’s decision to upgrade the urgency of a patient (e.g. following a non-urgent referral). This measure is not subject to a target. **Chart 18** shows trends on this measure.

Chart 18: 62-day wait after consultant upgrade
% treated within 62 days of consultant upgrade



7 Scotland

As in England, the NHS in Scotland observes a 31-day wait for treatment from the decision to treat. It also observes a 62 day wait for treatment from receipt of urgent referral. In Scotland the 31 day and 62 day targets are both subject to a 5% tolerance level; meaning that 95% of all patients must be treated within the allotted timeframe. The NHS Board to which a patient is initially referred is responsible for meeting 95% compliance within the 62 day target and the NHS Board where a patient receives their first treatment is responsible for meeting 95% compliance within the 31 day target.¹⁴

In the twelve months ending September 2014, 12,373 patients were treated for cancer after urgent referral. This is 0.9% higher than the twelve month period ending September 2012. Overall, 22,953 patients were treated for cancer in the year to September 2014, up 3.1% on two years ago. This means that Scotland is unusual among UK countries since the proportion of treatments coming urgent referral is falling, not rising.

Charts 19 and 20 show performance trends Scotland’s waiting times measures, showing the slight decline on both measures in recent quarters.

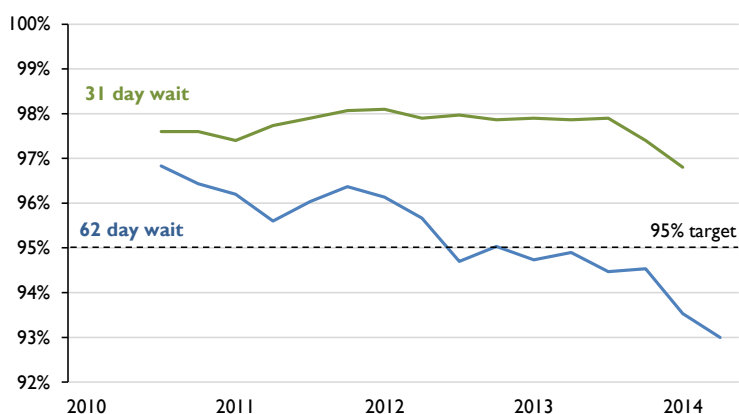
¹⁴ ISD Scotland, Cancer Waiting Times background <http://www.isdscotland.org/Health-Topics/Waiting-Times/Cancer/Background/>

Chart 19: 31-day wait and 62-day wait performance, Scotland, 2012-2014

	Target	2012				2013				2014		
		Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep
31 day wait from decision to treat	95%	98%	98%	98%	98%	98%	98%	98%	98%	96%	96%	97%
62 day wait from urgent referral	95%	95%	95%	94%	96%	94%	95%	95%	95%	92%	93%	94%

■ Within target
■ Outside target

Chart 20: Performance on 31-day and 62-day cancer targets, Scotland
Three-period moving average



Source: [ISD Scotland Cancer Waiting Times](http://www.isdscotland.org/Health-Topics/Waiting-Times/Publications/index.asp)¹⁵

Note that while England’s main 62-day target measures from GP referral to treatment, Scotland’s target measured from the *receipt* of any referral to the time of treatment. As such, performance between the two measures is not directly comparable.


In 2013/14 The South East Scotland Cancer Network (SCAN) saw the highest percentage of individuals in 62 days, falling less than 0.1% short of the 95% target. The best-performing health board was Dumfries and Galloway. All cancer networks and local health boards met 31-day target in 2013/14. **Chart 21** details these trends.

NHS Orkney, NHS Shetland and NHS Western Isles health boards are not included in analysis by health board. This is because very few individuals receive cancer treatments in these health boards. For example, in the quarter ending June 2014 there was only one referral eligible for measurement via the 62-day wait target. Orkney, Shetland and the Western Isles are however included in the aggregate analyses for the North of Scotland Cancer Network region and for Scotland as a whole.

¹⁵ <http://www.isdscotland.org/Health-Topics/Waiting-Times/Publications/index.asp>

Chart 21: 31 and 62 day wait for treatment:
performance in Scotland by Cancer Network and Health Board, 2013/14

62 day wait		2013/14	31 day wait		2013/14
SCOTLAND		93.8%	SCOTLAND		97.4%
North Scotland Cancer Network		91.4%	North Scotland Cancer Network		96.2%
	NHS Grampian	89.1%		NHS Grampian	95.9%
	NHS Highland	93.0%		NHS Highland	95.0%
	NHS Tayside	92.7%		NHS Tayside	96.9%
South East Scotland Cancer Network		95.0%	South East Scotland Cancer Network		98.9%
	NHS Borders	95.5%		NHS Borders	99.8%
	NHS Dumfries & Galloway	97.1%		NHS Dumfries & Galloway	99.3%
	NHS Fife	93.3%		NHS Fife	97.6%
	NHS Lothian	95.2%		NHS Lothian	99.1%
West of Scotland Cancer Network		94.4%	West of Scotland Cancer Network		97.2%
	NHS Ayrshire & Arran	95.5%		NHS Ayrshire & Arran	98.9%
	NHS Forth Valley	93.3%		NHS Forth Valley	97.2%
	NHS Greater Glasgow & Clyde	93.6%		NHS Greater Glasgow & Clyde	96.7%
	NHS Lanarkshire	96.2%		NHS Lanarkshire	97.8%



Within target
Outside target

8 Wales

The cancer waiting times targets in Wales differ slightly from those in other UK countries. The NHS Wales targets are as follows:

- 95% of patients newly diagnosed with cancer via the Urgent route should start definitive treatment within 62 days
- 98% of patients newly diagnosed with cancer not via the Urgent route should start definitive treatment within 31 days.

Patients diagnosed via the urgent route are those diagnosed via primary care, i.e. via a GP. Those diagnosed not via the urgent route are all other patients, e.g. those diagnosed through emergency presentation.

6,475 patients started treatment having been diagnosed the urgent route in the twelve months ending September 2014. This is 32% more than the equivalent period four years previously. 9,758 patients diagnosed not via the urgent route started treatment in the twelve months ending September 2014. This is 1% lower than the equivalent period four years ago. This amounts to an overall 10% increase in patients starting treatment, with a greater proportion now diagnosed through the urgent route.

While the non-urgent route target was met consistently until 2013, the urgent route target has not been met since 2008. **Charts 22 and 23** show performance on these measures.

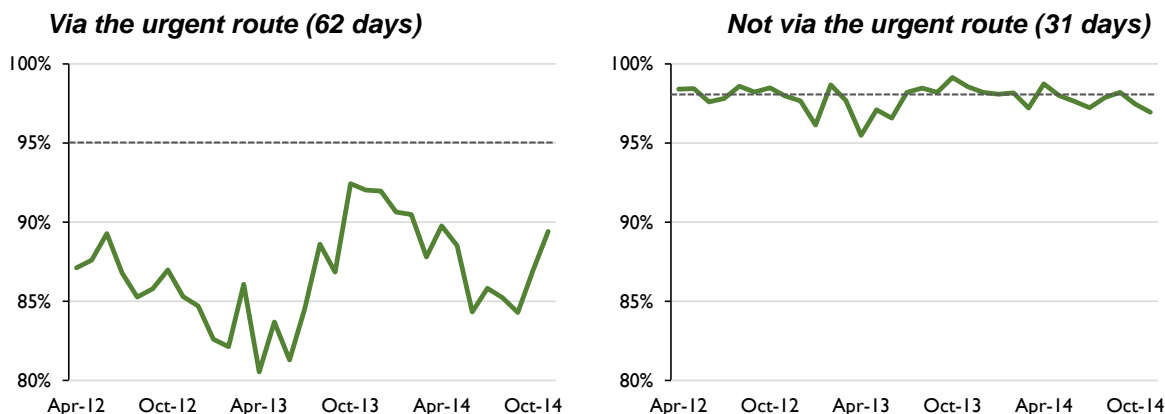
Chart 22: Cancer waiting times performance in Wales, 2011-2014

	Target	2011				2012				2013				2014			
		Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec
Not via the urgent route (31 days)	98%	98.7%	97.7%	99.0%	99.0%	98.8%	98.2%	98.2%	98.1%	97.4%	96.4%	98.3%	98.7%	97.8%	98.1%	97.8%	97.3%
Via the urgent route (62 days)	95%	90.8%	87.0%	89.4%	90.3%	89.8%	87.9%	85.9%	85.7%	83.6%	81.8%	86.6%	92.1%	89.7%	87.4%	85.1%	88.0%



Chart 23 Cancer waiting times performance in Wales, 2012-2014

Dotted line indicates target



Source: StatsWales, Cancer Waiting Times¹⁶

Chart 24 shows trend performance for individual Welsh Local Health Boards in the last two twelve-month periods ending in September.

Chart 24: Cancer waiting times performance by Welsh Local Health Board

Urgent (62 day) route	12 months to		Non-urgent (31 day) route	12 months to	
	Sep-13	Sep-14		Sep-13	Sep-14
Wales	84.5%	88.5%	Wales	97.5%	98.1%
Betsi Cadwaladr University	86.1%	90.1%	Betsi Cadwaladr University	98.6%	98.9%
Hywel Dda	81.8%	89.4%	Hywel Dda	96.3%	96.5%
Abertawe Bro Morgannwg University	77.8%	84.8%	Abertawe Bro Morgannwg University	95.1%	97.8%
Cwm Taf	81.5%	88.3%	Cwm Taf	98.4%	98.5%
Aneurin Bevan	91.2%	90.3%	Aneurin Bevan	98.7%	98.1%
Cardiff & Vale University	87.8%	88.6%	Cardiff & Vale University	98.2%	98.6%



In the last two data years Aneurin Bevan Local Health Board (covering Newport, Caerphilly, Blaenau Gwent, Torfaen and Monmouthshire) performed best of all areas. Nevertheless, its performance was still below the 95% target. Abertawe Bro Morgannwg (covering Swansea, Neath, Port Talbot and Bridgend) registered the lowest performance.

¹⁶ <https://statswales.wales.gov.uk/Catalogue/Health-and-Social-Care/NHS-Hospital-Waiting-Times/Cancer-Waiting-Times>

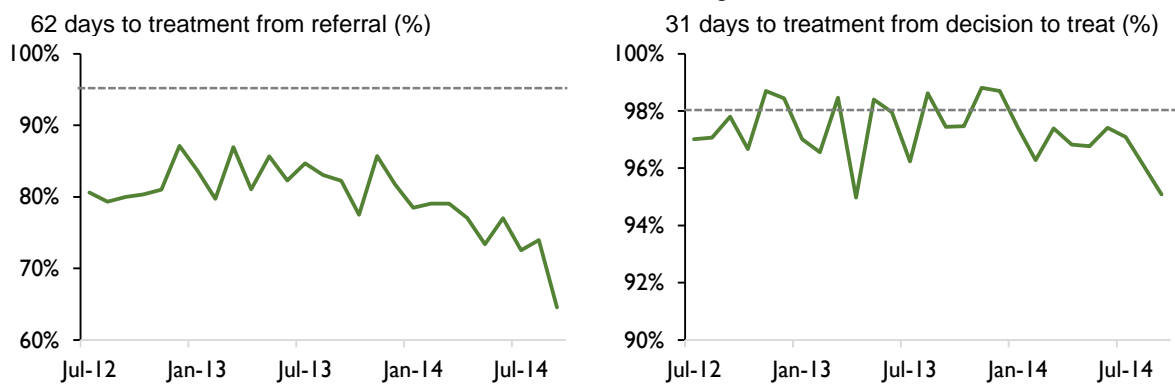
9 Northern Ireland

In the twelve months ending September 2014, 8,828 people were recorded as being treated for cancer in Northern Ireland. This was 13% higher than the equivalent period four years ago. 3,345 were treated after urgent GP referral – a 45% increase over four years. As in England, the proportion of patients treated who came via urgent GP referral has increased.

As in Scotland and England, Northern Ireland's cancer targets concern waiting time from referral to treatment and from decision to treat to treatment, on the same 62-day and 31-day performance standards. Northern Ireland's key targets are that 98% of patients diagnosed with cancer should receive their first definitive treatment within 31 days of a decision to treat, and that 95% of patients should begin their first treatment within 62 days.¹⁷ **Chart 25** shows trends on these measures.

Chart 25: Northern Ireland Cancer Waiting Times, 2012-2014

Dotted line indicates target



Source: DHSSPSNI Cancer Waiting Times Statistics

Since 2009 NHS Northern Ireland has not met its 62 day wait target in any individual month. Performance on the 31-day measure fell in mid-2014. **Chart 26** shows performance for individual Health and Social Care Trusts.

Chart 26: Northern Ireland Cancer Waiting Times

Performance by Health and Social Care Trust

	12 months to			12 months to	
	Jun-13	Jun-14		Jun-13	Jun-14
Northern Ireland	82.3%	79.8%	Northern Ireland	97.4%	97.5%
Belfast	86.1%	76.1%	Belfast	95.9%	95.9%
Northern	81.8%	79.9%	Northern	98.7%	99.5%
South Eastern	77.8%	73.9%	South Eastern	98.5%	97.3%
Southern	81.5%	85.1%	Southern	97.7%	98.2%
Western	91.2%	90.4%	Western	99.6%	99.8%

Source: DHSSPSNI Cancer Waiting Times Statistics¹⁸

Both Northern and Western Health and Social Care Trusts met the 31-day target in the two most recent twelve month periods. No Trust met the 62-day target in either period, though there was substantial variation between the margin by which Trusts missed the target. In the South Eastern Trust, over one quarter of patients waited more than 62 days for treatment after urgent referral.

¹⁷ Northern Ireland Waiting Time Statistics: Cancer Waiting Times (April-June 2014)

¹⁸ <http://www.dhsspsni.gov.uk/index/statistics/hospital/waitingtimes/cancer-waiting-times.htm>

10 Further Reading: Cancer Statistics

The National Cancer Intelligence Network provides an overview of sources of cancer statistics in their document [‘What cancer statistics are available and where can I find them?’](#)

Statistics on cancer incidence, mortality and survival can be found in the Library’s briefing [‘Cancer Statistics: In Detail’](#). A short bulletin of statistics is provided in [‘Cancer Statistics: In Brief’](#).