

**Cancer Waiting Times, April 2021 - Provider Based - Provisional** The latest monthly Official Statistics on waiting times for suspected and diagnosed cancer patients accessing NHS services, produced by NHS England and NHS Improvement, were released on 10/06/2021 according to the arrangements approved by the UK Statistics Authority.

The 28-Day Faster Diagnosis Standard are published from April 2021 data in June 2021. Systems will be expected to meet the new Faster Diagnosis Standard (for all routes urgent suspected cancer, urgent breast symptomatic, and urgent screening referrals in aggregate) from Q3 2021/22, to be introduced initially at a level of 75%.

# Waiting Times for Cancer Services - April 2021

The key results for outpatient services and first definitive treatments show that, in England, during the period April 2021:

### Two week Wait:

- 85.4% of people were seen by a specialist within two weeks of an urgent referral for suspected cancer (91.2% in March 2021)
- 62.1% of people urgently referred for breast symptoms (where cancer was not initially suspected) were seen within two weeks of referral (76.9% in March 2021)

## One month (31-day) wait from diagnosis to first definitive treatment:

- 94.2% of people treated began first definitive treatment within 31 days of receiving their diagnosis, all cancers (94.7% in March 2021)
- 94.2% of people treated for breast cancer began first definitive treatment within 31 days of receiving their diagnosis (94.8% in March 2021)
- 96.0% of people treated for lung cancers began first definitive treatment within 31 days of receiving their diagnosis (96.2% in March 2021)
- 91.1% of people treated for lower gastrointestinal cancers began first definitive treatment within 31 days of receiving their diagnosis (89.8% in March 2021)
- 92.4% of people treated for urological cancers began first definitive treatment within 31 days of receiving their diagnosis (93.4% in March 2021)
- 95.1% of people treated for skin cancers began first definitive treatment within 31 days of receiving their diagnosis (95.9% in March 2021)

## Two month (62-day) wait from urgent referral to first definitive treatment:

 75.4% of people treated began first definitive treatment within 62 days of being urgently referred for suspected cancer, all cancers (73.9% in March 2021)

- 84.1% of people treated for breast cancers received first definitive treatment within 62 days of being urgently referred for suspected cancer (83.0% in March 2021)
- 70.9% of people treated for lung cancers received first definitive treatment within 62 days of being urgently referred for suspected cancer (68.0% in March 2021)
- 53.6% of people treated for lower gastrointestinal cancers received first definitive treatment within 62 days of being urgently referred for suspected cancer (48.2% in March 2021)
- 70.6% of people treated for urological cancers (excluding testicular cancer) received first definitive treatment within 62 days of being urgently referred for suspected cancer (69.3% in March 2021)
- 94.4% of people treated for skin cancers received first definitive treatment within 62 days of being urgently referred for suspected cancer (93.7% in March 2021)

## 62-day wait extensions

- 83.2% of patients began first definitive treatment within 62 days of a consultant's decision to upgrade their priority, all cancers (82.3% in March 2021)
- 74.3% of people began first definitive treatment for cancer within 62 days of referral from an NHS cancer screening service, all cancers (75.1% in March 2021)

The key results for waiting times for second or subsequent treatment show that, in England, during the period April 2021:

#### 31-day wait for subsequent treatment

- 84.6% of people began treatment within 31 days where the subsequent treatment was surgery (86.4% in March 2021)
- 99.0% of people began treatment within 31 days where the subsequent treatment was an anti-cancer drug regimen (99.0% in March 2021)
- 96.2% of people began treatment within 31 days where the subsequent treatment was a course of radiotherapy (97.9% in March 2021)

The key results for waiting times for urgent referral to a patient being told they have cancer, or that cancer is definitively excluded show that, in England, during the period of April 2021:

## 28-day Faster Diagnosis (All Routes):

• 72.9% of people were told by a specialist if they had cancer, or if cancer was definitively excluded within four weeks (28-days) of an urgent referral

More analyses are published as part of this statistical release on the NHS website.

https://www.england.nhs.uk/statistics/statistical-work-areas/cancer-waitingtimes/

# Contact address and email

You can obtain further details about the statistics published in this section or comment on the section by contacting the following address:

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### Annex A: Missing and partial returns

Liverpool University Hospitals NHS Foundation Trust (REM) has made a partial submission for One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Anti-Cancer Drug Regimen) standard.

University College London Hospitals NHS Foundation Trust (RRV) has made: a non-submission for One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Anti-Cancer Drug Regimen), One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Surgery) and for One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Radiotherapy); and a partial submission for the other waiting times standards.

The estimated shortfall of this partial submission on national activity volumes is given in the table that follows. The estimated impact on national performance is very small (for all measures it was 0.2 percentage points or less).

We are working with the providers concerned to resolve the issues and we will be publishing revisions later in the year.

Standard	Estimated shortfall in activity
Two Week Wait From GP Urgent Referral to First Consultant Appointment	0.10%
Two Week Wait Breast Symptomatic (where cancer not initially suspected) From GP Urgent Referral to First Consultant Appointment	0.11%
One Month Wait from a Decision to Treat to a First Treatment for Cancer	0.00%
One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Anti-Cancer Drug Regimen)	2.05%
One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Radiotherapy)	0.74%
One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Surgery)	0.27%
Two Month Wait from GP Urgent Referral to a First Treatment for Cancer	0.55%
Two Month Wait from a National Screening Service to a First Treatment for Cancer	0.22%
Two Month Wait Following a Consultant Upgrade to a First Treatment for Cancer	0.37%

## **Faster Diagnosis Standard**

Estimates have been made of the completeness of the Faster Diagnosis Standard data. The estimated shortfall in FDS clock stops from urgent suspected and breast symptomatic referrals is 12% of all FDS clock stops. This is estimated to reduce national performance by 0.3 percentage points. Work is ongoing to assess the completeness for FDS clock stops for screening referrals. The following providers have made partial submissions of FDS clock stops for urgent suspected and breast symptomatic referrals.

Bradford Teaching Hospitals NHS Foundation Trust (RAE) University Hospitals of North Midlands NHS Trust (RJE) Whittington Health NHS Trust (RKE) Dartford and Gravesham NHS Trust (RN7) The Dudley Group NHS Foundation Trust (RNA) Medway NHS Foundation Trust (RPA) Wrightington, Wigan and Leigh NHS Foundation Trust (RRF) University Hospitals Birmingham NHS Foundation Trust (RRK) Northumbria Healthcare NHS Foundation Trust (RTF) South Tees Hospitals NHS Foundation Trust (RTR) University Hospitals of Morecambe Bay NHS Foundation Trust (RTX) Pennine Acute Hospitals NHS Trust (RW6) Maidstone and Tunbridge Wells NHS Trust (RWF) Sandwell and West Birmingham Hospitals NHS Trust (RXK) Blackpool Teaching Hospitals NHS Foundation Trust (RXL) Lancashire Teaching Hospitals NHS Foundation Trust (RXN) Buckinghamshire Healthcare NHS Trust (RXQ) The Shrewsbury and Telford Hospital NHS Trust (RXW)

Work is in progress with providers to improve levels of completeness.