



## **Cancer Waiting Times, July 2023 - 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 14/09/2023 according to the arrangements approved by the UK Statistics Authority.

### **Waiting Times for Cancer Services - July 2023**

The key results for outpatient services and first definitive treatments show that, in England, during the period July 2023:

#### **Two week Wait:**

- 77.5% of people were seen by a specialist within two weeks of an urgent referral for suspected cancer (80.5% in June 2023)
- 72.1% of people urgently referred for breast symptoms (where cancer was not initially suspected) were seen within two weeks of referral (74.7% in June 2023)

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

- 91.8% of people treated began first definitive treatment within 31 days of receiving their diagnosis, all cancers (91.3% in June 2023)
- 92.9% of people treated for breast cancer began first definitive treatment within 31 days of receiving their diagnosis (90.7% in June 2023)
- 93.7% of people treated for lung cancers began first definitive treatment within 31 days of receiving their diagnosis (92.4% in June 2023)
- 89.6% of people treated for lower gastrointestinal cancers began first definitive treatment within 31 days of receiving their diagnosis (88.9% in June 2023)
- 90.9% of people treated for urological cancers began first definitive treatment within 31 days of receiving their diagnosis (91.0% in June 2023)
- 89.2% of people treated for skin cancers began first definitive treatment within 31 days of receiving their diagnosis (89.5% in June 2023)

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

- 62.6% of people treated began first definitive treatment within 62 days of being urgently referred for suspected cancer, all cancers (59.2% in June 2023)
- 73.8% of people treated for breast cancers received first definitive treatment within 62 days of being urgently referred for suspected cancer (70.8% in June 2023)

- 48.2% of people treated for lung cancers received first definitive treatment within 62 days of being urgently referred for suspected cancer (47.1% in June 2023)
- 42.8% of people treated for lower gastrointestinal cancers received first definitive treatment within 62 days of being urgently referred for suspected cancer (41.8% in June 2023)
- 52.4% of people treated for urological cancers (excluding testicular cancer) received first definitive treatment within 62 days of being urgently referred for suspected cancer (48.6% in June 2023)
- 85.4% of people treated for skin cancers received first definitive treatment within 62 days of being urgently referred for suspected cancer (85.5% in June 2023)

### **62-day wait extensions**

- 73.2% of patients began first definitive treatment within 62 days of a consultant's decision to upgrade their priority, all cancers (72.9% in June 2023)
- 63.3% of people began first definitive treatment for cancer within 62 days of referral from an NHS cancer screening service, all cancers (62.2% in June 2023)

The key results for waiting times for second or subsequent treatment show that, in England, during the period July 2023:

### **31-day wait for subsequent treatment**

- 78.9% of people began treatment within 31 days where the subsequent treatment was surgery (79.0% in June 2023)
- 98.3% of people began treatment within 31 days where the subsequent treatment was an anti-cancer drug regimen (98.0% in June 2023)
- 88.1% of people began treatment within 31 days where the subsequent treatment was a course of radiotherapy (86.6% in June 2023)

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 July 2023:

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

- 74.1% 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 (73.5% in June 2023)

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

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

## Changes to Cancer Waiting Times standards and Official Statistics

Following a consultation on the cancer waiting times standards, NHS England have had approval from government to implement changes to the standards from 1 October 2023.

The response to the consultation is published here [NHS England » Cancer waiting times review – Models of care and measurement: consultation response](#)

The statistics on cancer waiting times will be updated to ensure that they follow the changed operating framework for cancer, and address responses to the consultation on disaggregation of the standards. These changes will begin from the publication of October 2023 data planned to be published in December 2023. The updates are as follows:

- Outputs to give prominence to the headline statistics for the new waiting times standards.
- Maintain the statistics published on the 28 day Faster Diagnosis Standard.
- Include breakdowns of the new 31 and 62 day standards by variables which allow derivation of the old 31 and 62 day standards. That is, for the 31 day standard include breakdowns by treatment stage (first or subsequent) and modality (Anti-cancer drug regimen, Radiotherapy, Surgery, Other), and for the 62 day standard by source of referral (Urgent suspected cancer, Breast Symptomatic, Screening and Consultant Upgrade).
- Remove the breakdown by admitted and non admitted care from treatment standards.
- For the 31 and 62 day standards, provide a more granular tumour type breakdown for a range of cancers by sub dividing the categories currently published. Historic data for the new categories will not be available. The new classification will be such that the old classification for the current 31 first and 62 day urgent suspected cancer will be able to be derived from aggregation of the new categories to create a consistent time series. That is, adopt the following new categories: Lung, Breast, Skin, Lower GI, Prostate, Other Urological, Lymphoma, Other haematological, OG, Hepatobiliary, Head and Neck, Gynaecological and 'All Other' cancers.
- Cease publication of 'rare' cancers Acute leukaemia, Children's, and Testicular for referral to treatment standards
- Continue to publish total numbers seen following an urgent suspected cancer referral and urgent referral where breast symptoms are exhibited but cancer is not initially suspected. Maintain the time waited bands as currently published for these measures, but cease publication of the % seen within 14 days which was the two week wait performance measure which is being removed from the operating framework.
- Publish further management information on the backlog.

NHS England will initially adopt an official statistics badge for all the updated statistical outputs, pending assessment by the Office for Statistics Regulation.

Feedback can be sent through to [england.cancerwaitsdata@nhs.net](mailto:england.cancerwaitsdata@nhs.net)

### **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**

The Walton Centre NHS Foundation Trust (RET) did not make a submission of CWT Data for any of the standards.

Medway NHS Foundation Trust (RPA) made a partial submission of CWT Data for Two Week Wait Breast Symptomatic (where cancer not initially suspected) from GP Urgent Referral to First Consultant Appointment.

University Hospitals Birmingham NHS Foundation Trust (RRK) did not make a submission of CWT Data for Four Week (28 days) Wait From Urgent Referral to Patient Told they have Cancer, or Cancer is Definitively Excluded.

Northumbria Healthcare NHS Foundation Trust (RTF) did not make a submission of CWT Data for: One Month Wait from a Decision to Treat to a First Treatment for Cancer, 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), Two Month Wait from a GP Urgent Referral to a First Treatment for Cancer, Two Month Wait from a National Screening Service to a First Treatment for Cancer, Two Month Wait Following a Consultant Upgrade to a First Treatment for Cancer, Four Week (28 days) Wait From Urgent Referral to Patient Told they have Cancer, or Cancer is Definitively Excluded.

The cancer waiting times system excludes records from the 62 day standards which do not contain a first seen provider. For the Two Month Wait from a GP Urgent Referral to a First Treatment for Cancer, Walsall Healthcare NHS Trust (RBK), Guy's And St Thomas' NHS Foundation Trust (RJ1), Lewisham And Greenwich NHS Trust (RJ2), The Royal Wolverhampton NHS Trust (RL4), Norfolk And Norwich University Hospitals NHS Foundation Trust (RM1) have submitted some records without this information.

The estimated shortfall of these missing and partial submissions on national activity volumes is given in the table below. The estimated impact on national performance is very small (on average it was 0.02 percentage points).

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

<b>Standard</b>	<b>Estimated shortfall in activity</b>
<b>Two Week Wait From GP Urgent Referral to First Consultant Appointment</b>	0.01%
<b>Two Week Wait Breast Symptomatic (where cancer not initially suspected) From GP Urgent Referral to First Consultant Appointment</b>	0.35%
<b>One Month Wait from a Decision to Treat to a First Treatment for Cancer</b>	0.60%
<b>One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Anti-Cancer Drug Regimen)</b>	0.30%
<b>One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Radiotherapy)</b>	0.00%
<b>One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Surgery)</b>	0.27%
<b>Two Month Wait from GP Urgent Referral to a First Treatment for Cancer</b>	1.48%
<b>Two Month Wait from a National Screening Service to a First Treatment for Cancer</b>	0.41%
<b>Two Month Wait Following a Consultant Upgrade to a First Treatment for Cancer</b>	0.13%
<b>Four Week (28 days) Wait From Urgent Referral to Patient Told they have Cancer, or Cancer is Definitely Excluded</b>	2.06%

## **Annex B: Updates to CWT Guidance (v.11.1)**

The guidance for cancer waiting times has been updated to [version 11.1](#). This replaces CWT Guidance (v.11.0) as well as incorporating & replacing interim guidance which had been put in place (Clarification of cancer waiting times guidance during COVID-19 pandemic, Dermatology Faster Diagnosis Standard clarification guidance and Advice and Guidance recommendations for cancer pathways)

This updated guidance:

1. Expands the definition of the first seen date to include both in person and virtual consultations, as well as specialist review of images in specific cases.
2. Incorporates guidance on the use of Advice and Guidance for suspected cancer referrals.
3. Provides additional guidance on the application of CWT guidance to Lower GI pathways utilising FIT.
4. Provides guidance on recording the First Seen Date for sarcoma referrals made following direct access ultrasound
5. Brings the Non-specific symptoms pathway into the scope of the 2ww, Faster Diagnosis and 62-day referral to treatment standards.
6. Brings the Breast Symptomatic route into scope of the 62-day referral to treatment standard.
7. Expands guidance around ending the Faster Diagnosis Standard pathway.
8. Provides clarifications and examples for recording the Faster Diagnosis Standard for skin cancer.
9. Includes details on how treatment which is self-administered and prescribed by the GP is recorded.
10. Expands the scope of the treatments standards to include all invasive brain/CNS tumours (i.e. not just those which are WHO grade 3 and 4)
11. Incorporates application of 'Clinically urgent treatment of another condition adjustment' to patients with COVID-19.

Detail on the timing of implementation is covered in the guidance document. The changes in 5 and 6 apply to activity from July 2023 in the official statistics publication.

The update to 5 directly affects the categories used in the official statistics, introducing "Suspected cancer - non-specific symptoms" to 2ww and FDS outputs.

Intelligence on the expected effect of the changes are given in Table A. Table B quantifies the effect of changes 5 and 6 in July 2023 nationally.

Table A

Waiting Times Standard	Related Updates	Expected Effect
Two Week Wait	1, 2, 3, 4, 5	Update 5 is expected to increase volumes of Two Week Wait referrals.
Two Week Wait Breast Symptomatic	1, 2	
31 Day First Treatment	9, 10, 11	10 is expected to increase the volume of treatments by a small amount. 11 is expected to reduce the reported waiting time. However, this would only apply to people who needed treatment for COVID prior to treating their cancer which is expected to be a small number. 9 is expected to increase reported waiting times for a small cohort of patients.
31 Day Subsequent Treatment Anti Cancer Drug Regimen	9, 10, 11	10 is expected to increase the volume of treatments by a small amount. 11 is expected to reduce the reported waiting time. However, this would only apply to people who needed treatment for COVID prior to treating their cancer which is expected to be a small number. 9 is expected to increase reported waiting times for a small cohort of patients.
31 Day Subsequent Treatment Surgery	10, 11	10 is expected to increase the volume of treatments. 11 is expected to reduce the reported waiting time by a small amount. However, this would only apply to people who needed treatment for COVID prior to treating their cancer which is expected to be a small number.
31 Day Subsequent Treatment for Radiotherapy	10, 11	10 is expected to increase the volume of treatments by a small amount. 11 is expected to reduce the reported waiting time. However, this would only apply to people who needed treatment for COVID prior to treating their cancer which is expected to be a small number.
62 Day Urgent	5, 6, 9, 10, 11	5, 6 and 10 are expected to increase



Referral		the volume of treatments by a small amount. 11 is expected to reduce the reported waiting time. However, this would only apply to people who needed treatment for COVID prior to treating their cancer which is expected to be a small number. 9 is expected to increase reported waiting times for a small cohort of patients.
62 Day Screening	9, 10, 11	10 is expected to increase the volume of treatments by a small amount. 11 is expected to reduce the reported waiting time. However, this would only apply to people who needed treatment for COVID prior to treating their cancer which is expected to be a small number. 9 is expected to increase reported waiting times for a small cohort of patients.
62 Day Consultant Upgrade (no Standard currently in place)	9, 10, 11	10 is expected to increase the volume of treatments. 11 is expected to reduce the reported waiting time. However, this would only apply to people who needed treatment for COVID prior to treating their cancer which is expected to be a small number. 9 is expected to increase reported waiting times for a small cohort of patients.
Faster Diagnosis Standard	1, 2, 3, 4, 5, 7, 8	Update 1 is expected to increase volumes of Two Week Wait referrals, and subsequently FDS clock stops.

Table B

<b>Standard</b>	<b>% difference in the number seen/treated</b>  (Updated method – Previous method)/Previous method	<b>% point difference in performance</b>  Updated method – Previous method
Two Week Wait from Urgent Referral to First Consultant Appointment	1.46%	0.10
Two Week Wait Breast Symptomatic (where cancer not initially suspected) From Urgent Referral to First Consultant Appointment	0%	0
One Month Wait from a Decision to Treat to a First Treatment for Cancer	0%	0
One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Anti-Cancer Drug Regimen)	0%	0
One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Radiotherapy)	0%	0
One Month Wait from a Decision to Treat to a Subsequent Treatment for Cancer (Surgery)	0%	0
Two Month Wait from Urgent Referral to a First Treatment for Cancer	1.29%	0.09
Two Month Wait from a National Screening Service to a First Treatment for Cancer	0%	0
Two Month Wait Following a Consultant Upgrade to a First Treatment for Cancer	0%	0
Faster Diagnosis Standard	1.18%	-0.04