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| Sponsoring Organisation: | Implementation Date: | 1 January 2009 |
| Department of Health | Subject: | Data Standards: National Cancer Waiting Times Minimum Data Set |
| DATA SET CHANGE NOTICE | | |
| <p>This DSCN informs users of the approval of changes to an information requirement or information standard by the Information Standards Board for Health and Social Care (ISB HaSC).</p> <p>This was approved by ISB HaSC at its meeting on 27/08/2008.</p> <p>The burden of collection has been agreed by the Review of Central Returns Steering Committee (ROCR) - ROCR No: ROCR/OR/0018/FT6/002.</p> | | |
| Summary: | | |
| <p>The Cancer Reform Strategy (CRS) introduced new and changed commitments in terms of service standards for cancer patients that must be met. This DSCN informs the service and its system suppliers of the changes needed to the information standards within the National Cancer Waiting Times Minimum Data Set to monitor performance against these commitments. The central submission of this changed data set is mandated by the Department of Health from 1st January 2009. Although the central collection of data starts from 1 January, the enhanced service standards themselves come into force at different dates:</p> <ul style="list-style-type: none">• 62 day standard for screening referral – December 2008;• 62 day standard for consultant upgrade – December 2008;• 31 day standard for subsequent chemotherapy and surgery – December 2008;• two week wait for breast symptoms – December 2009;• 31 day standard for subsequent radiotherapy – December 2010;• 31 day standard for other subsequent treatments – December 2010. <p>The purpose in starting to collect from 1 January 2009 data on all of these standards is to enable us to monitor progress towards the achievement of those that come into force in 2009 and 2010, and to help the NHS overcome problems highlighted by these data.</p> <p>Trusts will need to submit data to the Cancer Waiting Times Database (hosted on Open Exeter at: https://nww.openexeter.nhs.uk/nhsia/index.jsp) for January 2009 by 06/03/2009. Quarterly submissions will be required to the same schedule (25 working days after the end of a month or quarter).</p> <p>Some of the changes to the data set will impact on other collections, including the National Cancer Dataset and the National Cancer Registry Dataset. The data set has also been changed to align with the 18 week clock rules where appropriate. A key change is to align clock start dates.</p> <p>Alignment with the new radiotherapy data set has also been made - see DSCN 22/2008, which will be published within 7 working days of this DSCN.</p> <p>This DSCN is in two parts:</p> <ol style="list-style-type: none">1. Part 1 provides detailed policy information needed to implement the change2. Part 2 provides the definitional, technical, and modelling detail that will be included in the NHS Data Model and Dictionary. | | |

Datasets / return affected:

National Cancer Datasets, National Cancer Registry

Related DSCNs:

DSCN 22/2002, DSCN 27/2004, DSCN 16/2007

Impact of Change:

Service: Major

System Suppliers:

Major change on a limited number of systems, often not directly connected to main trust IT infrastructure.

The Information Standards Board for Health and Social Care (ISB HaSC) is responsible for approving information standards. Submission documents and the ISB HaSC Board output relating to the approval of this standard can be found at:

<http://www.isb.nhs.uk/docs/national-cancer>

DATA SET CHANGE NOTICE

| | |
|--------------------------------|---|
| Reference No: | DSCN 20/2008 |
| Version No: | 1.0 |
| Subject: | National Cancer Dataset - Waiting Times Subset |
| Type of Change: | Mandatory data collection |
| Implementation Date: | 1 January 2009 |
| Business Justification: | The Government's Cancer Reform Strategy set out a number of areas for improving cancer services, one of which mandated a series of extensions to the existing waiting times standards that the NHS is expected to meet when providing services. This dataset enables local delivery of these improvements, and provides a central return that facilitates central monitoring. |

Introduction

This DSCN details the information standards needed to continue monitoring the existing cancer standards that were introduced by the NHS Cancer Plan (September 2000):

- The two week standard from urgent GP/GDP referral for suspected cancer to date first seen.
- The 2001 cancer waiting time target of one month from urgent GP referral for suspected cancer to treatment for children's, testicular cancers and acute leukaemia.
- The 2001 cancer waiting time target of one month from diagnosis to treatment for breast cancer.
- The 2002 cancer waiting time target of two month wait from urgent GP referral for suspected cancer to treatment for breast cancer.
- The 2005 cancer waiting time target of two month wait from urgent GP referral for suspected cancer to treatment for all cancers
- The 2005 cancer waiting time target one month wait from diagnosis to treatment for all cancers.

These will be amended slightly by the proposed new dataset, in order to reflect the enhanced service standards set out in the Cancer Reform Strategy, and to facilitate alignment with the monitoring standard for the 18 week standard. The specific dataset changes are:

- the two week standard from urgent GP/GDP referral for suspected cancer will be monitored from the receipt of the referral at the provider trust, rather than the referral decision date. This is to accommodate both Choose and Book (CaB) processes and 18-week alignment. The data item REFERRAL REQUEST RECEIVED DATE will be collected as an option for the new CANCER REFERRAL TO TREATMENT PERIOD START DATE, which has been introduced to align with 18-weeks;
- the different 62-day standards will also be monitored from CANCER REFERRAL TO TREATMENT PERIOD START DATE, rather than the cancer referral decision date, to reflect the change to the two week wait;
- the 2001 cancer waiting time target of one month from urgent GP referral for suspected cancer to treatment for children's, testicular cancers and acute leukaemia will also be monitored from CANCER REFERRAL TO TREATMENT PERIOD START DATE, rather than the cancer referral decision date, to reflect the change to the two week wait;

- the start date for the 2001 and 2005 31-day standards remains at DATE OF DECISION TO TREAT, but, because of the expansion to monitor the Cancer Reform Strategy (CRS) standards, this data item is just one of the options to populate the new field CANCER TREATMENT PERIOD START DATE.

The enhanced service standards set out in the CRS are:

- a maximum two month wait from referral from a cancer screening service to first treatment for all cancers (December 2008);
- a maximum two month wait from a consultant's decision to upgrade the urgency of a patient they suspect to have a cancer to first treatment for all cancers (December 2008);
- a maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer where an anti-cancer drug regimen or surgery is the chosen treatment modality (December 2008);
- a maximum two week wait from referral for general breast symptoms (where cancer is not initially suspected) to date first seen (December 2009);
- a maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer where radiotherapy is the chosen treatment modality (December 2010); and,
- a maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer for all other treatment modalities (December 2010).

These dataset changes therefore build on the dataset established to monitor the existing cancer waiting times standards that was set out in Dataset Change Notice (DSCN) 22/2002, and subsequent DSCNs, and they support the enhanced service standards. This information standard also seeks to reconcile cancer waiting times data collection with the 18 weeks dataset, and with the cancer registry and radiotherapy collections, so that the burden upon the NHS to collect these data is reduced.

This new information standard also aligns the monitoring of cancer waits with the service model of the Choose and Book initiative. This means that day zero for calculating cancer referral to treatment and two week periods is no longer the CANCER REFERRAL DECISION DATE, but the date of receipt of the referral request by the provider. This is expressed as the CANCER REFERRAL TO TREATMENT PERIOD START DATE within the amended dataset.

Background

The CRS was published by Ministers on 3 December 2007, and sets out the approved policy direction for improving outcomes for patients, and the widening of the cancer waiting times standards that the service must achieve. The Secretary of State's forward to the CRS gave ten pledges to patients, number seven of which was:

"You will be able to access information about the performance of your cancer services, enabling you to make informed choices which reflect your priorities"

Secretary of State for Health, Cancer Reform Strategy, December 2007

In addition to providing information to support this pledge by the Secretary of State, this change to the information standard also introduces local and national data systems to monitor progress against the trajectories submitted within the "Vital Signs" exercise. Aggregate data derived from the local and national repositories of information that are affected by this data standard will be made available to the Healthcare Commission for the purposes of their annual assessment, and made public by the Department of Health.

The expectation is that patients will benefit from improved outcomes by receiving all treatments within standard timescales, and clinicians will be able to determine optimum treatment packages.

As a result, the scope of the current cancer waiting times standards has been extended. The changes to the information standard proposed are to support NHS providers and commissioners in tracking cancer patients to ensure that care is delivered along the whole pathway, not just to first treatment.

The main customers for the dataset are NHS trusts commissioning and providing care for cancer patients, patients referred on suspicion of having cancer, and patients referred for investigation of breast symptoms where cancer is not suspected. PCTs, SHAs, Cancer Networks and the Department of Health will also receive reports on commissioner and provider performance against the extended standards, to inform development of local and national policy and service configuration. Cancer Registries will also be able to access the data, to validate registrations and database reports, and inform research.

Local health communities will need baseline information and accurate performance statistics on cancer waiting times in order to set interim goals to assist in implementation of the extended service standards introduced by the CRS. PCTs, Trusts, Cancer Networks and Strategic Health Authorities will want to monitor what progress is being made to deliver cancer waiting times so that necessary improvements can be made and assurances can be given that the expanded cancer waiting times standards will be implemented in a timely manner.

Changes to the dataset come into force from 1 January 2009. This means that data collection for all the standards starts from then – the standards themselves come into force at different times. This approach will help the NHS track progress towards the implementation of the more challenging standards down stream.

Details of changes to the dataset

This DSCN provides clarification on existing cancer waiting times data collections, sets out how these standards have been adapted to fit within the 18-Week pathway scope, and finally provides data definitions and coding structures for new collections. This DSCN updates previous DSCNs that support the collection of patient level data for the monitoring of cancer waiting times.

The expansion of the service standards within the CRS has meant that this dataset has been expanded to include those patients who were not initially referred with a suspicion of cancer, or who were not originally urgently referred onto a cancer pathway by a GP or GDP. To support this change of scope, many of the previous cancer specific fields have been replaced by the generic fields that are used to support the 18-week programme. One example of this is the substitution of PRIORITY TYPE for CANCER REFERRAL PRIORITY TYPE.

The use of the field PRIORITY TYPE with the dataset will relate directly to the monitoring of the service standards with the CRS. The use of this field within the local and national dataset introduced by this change paper will be as follows:

- PRIORITY TYPE 03 (two week wait) will apply (within the scope of this dataset) to any patient that is referred urgently by a GP or GDP for suspect cancer, and any patient that is referred for any source for the extended two week wait for breast symptoms. Both of these events will start a 62-day pathway.
- PRIORITY TYPE 02 (Urgent) will apply (within the scope of this dataset) to any patient who has a SOURCE OF REFERRAL FOR OUTPATIENTS code of 17, these patients are those referred from screening services to an assessment clinic with a suspicion of cancer. This event also starts a 62-day pathway.

This code will also be used to record the referral source of patients that relates to the CANCER REFERRAL TO TREATMENT PERIOD START DATE for those patients who were referred for a non-cancer condition, but are subsequently upgraded, and treated for cancer.

This can also be entered on an optional basis within the dataset for those patients who are only treated within the existing 31-day standard for first treatment to support local audit.

- PRIORITY TYPE 01 (Routine) will apply (within the scope of this dataset) to any patient, from any source of referral who is treated for cancer following a consultant upgrade. This will be mapped directly to the CANCER REFERRAL TO TREATMENT PERIOD START DATE for the care spell that contains the upgrade..

In addition to this it is the responsibility of providers collecting and supplying data under this data standard to identify the stage of treatment, and therefore specify which of the NHS Cancer Plan or CRS standards is to be applied for performance monitoring. The distinction between stages of treatment (first definitive, second or subsequent etc. is to be made locally using the data item CANCER TREATMENT EVENT TYPE.

The following tables show new, changed and removed data elements.

New data elements:

| Name | Definition |
|---|---|
| PATIENT PATHWAY IDENTIFIER | An identifier, which together with the ORGANISATION CODE of the issuer, uniquely identifies a PATIENT PATHWAY. |
| ORGANISATION CODE (PATIENT PATHWAY IDENTIFIER ISSUER) | <p>This is the ORGANISATION CODE of the ORGANISATION issuing the PATIENT PATHWAY IDENTIFIER.</p> <p>Where Choose and Book has been used, the ORGANISATION CODE for NHS Connecting For Health (X09) should be used.</p> |
| PRIORITY TYPE | This is the priority of a request for services; in the case of services to be provided by a CONSULTANT, it is as assessed by or on behalf of the CONSULTANT. |
| CANCER REFERRAL TO TREATMENT PERIOD START DATE | <p>The Start Date of a Cancer Referral To Treatment Period. This is a specific type of the attribute ACTIVITY DATE. A CANCER REFERRAL TO TREATMENT PERIOD START DATE will be one of the following:</p> <ul style="list-style-type: none"> ○ The REFERRAL REQUEST RECEIVED DATE of the SERVICE REQUEST to secondary care by a GENERAL MEDICAL PRACTITIONER or GENERAL DENTAL PRACTITIONER where the PRIORITY TYPE of the SERVICE REQUEST was National Code 3 - Two Week Wait ○ The ORIGINAL REFERRAL REQUEST RECEIVED DATE for the initial SERVICE REQUEST to secondary care where the PATIENT was subsequently upgraded onto a Cancer PATIENT PATHWAY. The CONSULTANT UPGRADE DATE will also be recorded. ○ The REFERRAL REQUEST RECEIVED DATE for the SERVICE REQUEST into secondary care when the PATIENT was referred urgently for 'breast symptoms' (the PRIORITY TYPE of the SERVICE REQUEST is recorded as |

| Name | Definition |
|---|--|
| | <p>National Code 3 - Two Week Wait)</p> <ul style="list-style-type: none"> ○ The REFERRAL REQUEST RECEIVED DATE for the SERVICE REQUEST to an Assessment Clinic following the identification of an abnormality by an NHS Cancer Screening Service (the PRIORITY TYPE of the SERVICE REQUEST is recorded as National Code 02 - Urgent) <p>Note that for a SERVICE REQUEST received from the Choose and Book system, the referral is received when the PATIENT's Unique Booking Reference Number (UBRN) is used to book the first outpatient appointment slot (i.e. converted). See REFERRAL REQUEST RECEIVED DATE.</p> |
| CONSULTANT UPGRADE DATE | <p>It is the DATE that the CONSULTANT responsible for the care of the PATIENT (or an authorised member of the CONSULTANT team as defined by local policy) decided that the PATIENT should be upgraded onto an urgent Cancer PATIENT PATHWAY.</p> <p>The Consultant Upgrade Date should only be recorded when the PRIORITY TYPE of the original SERVICE REQUEST was not National Code 3 - Two Week Wait.</p> <p>Consultant upgrades are not allowed for PATIENTS who were urgently referred with suspected cancer from an NHS Cancer Screening Service (where the SOURCE OF REFERRAL FOR OUT-PATIENTS was National Code 17 - referral from a National Screening Programme). Therefore a Consultant Upgrade Date cannot be recorded in these circumstances.</p> <p>The Consultant Upgrade Date must be on or before the DECISION TO TREAT DATE (if recorded).</p> <p>The Consultant Upgrade Date must also be on or before the MULTIDISCIPLINARY TEAM DISCUSSION DATE (if recorded).</p> |
| ORGANISATION CODE (PROVIDER CONSULTANT UPGRADE) | <p>This is the ORGANISATION CODE of the ORGANISATION acting as Health Care Provider where the PATIENT is upgraded to an urgent Cancer PATIENT PATHWAY by a CONSULTANT or an authorised member of the CONSULTANTS team (subject to local agreement).</p> |
| METASTATIC SITE | <p>This is the site of the metastatic disease. It is used to identify metastatic disease relating to the PRIMARY DIAGNOSIS (ICD).</p> |
| CANCER TREATMENT EVENT TYPE | <p>A classification of the stage of treatment reached during a Cancer PATIENT PATHWAY for primary, recurrent or metastatic cancer.</p> |
| CANCER TREATMENT PERIOD START DATE | <p>The DATE when a Cancer Treatment Period is initiated. The CANCER TREATMENT PERIOD START DATE will be either:</p> |

| Name | Definition |
|---------------------------------|--|
| | <ul style="list-style-type: none"> ○ the DECISION TO TREAT DATE - the DATE that a PATIENT agrees a treatment plan for either first or subsequent treatments within a Cancer Care Plan. An individual PATIENT may have multiple DECISION TO TREAT DATES; or ○ the EARLIEST CLINICALLY APPROPRIATE DATE - where there is no new DECISION TO TREAT DATE, but there has been a previously agreed and clinically appropriate period of delay. In this case the subsequent ACTIVITY may not be the final treatment, but could be the next APPOINTMENT which deals with the planning of subsequent treatments. |
| TREATMENT START DATE (CANCER) | <p>This is the Start Date of the first cancer treatment given to a PATIENT who is receiving care for a cancer condition, with a PRIMARY DIAGNOSIS (ICD) code within the range C00 to C97 or D05 as defined by the Department of Health</p> <p>If the CANCER TREATMENT MODALITY given is National Code 01 - Surgery, the TREATMENT START DATE (CANCER) is the same as START DATE (HOSPITAL PROVIDER SPELL) of the related admission.</p> <p>TREATMENT START DATE (CANCER) is also the END DATE of a Cancer Treatment Period.</p> <p>A Cancer Referral To Treatment Period will end on the same date as the TREATMENT START DATE (CANCER) where First Definitive Treatment is given, unless cancer was discounted when the PATIENT was first seen (in which case the Cancer Referral To Treatment Period is ended at DATE FIRST SEEN).</p> <p>If a PATIENT declines all treatment (CANCER TREATMENT MODALITY is recorded as National Code 98 -All treatment declined (English NHS)) then the TREATMENT START DATE (CANCER) should be recorded as the DATE upon which the PATIENT made this decision.</p> |
| CANCER TREATMENT MODALITY | A classification of the type of treatment or care which may be provided in relation to a Cancer Care Spell. |
| CANCER CARE SETTING (TREATMENT) | <p>This is the type of care setting where the cancer care relating to the TREATMENT START DATE (CANCER) took place.</p> <p>Where the care is delivered during a Hospital Provider Spell, distinction is made between care delivered as part of an ordinary admission (where the PATIENT CLASSIFICATION is National Code 1 - Ordinary Admission) and a day case admission (where PATIENT CLASSIFICATION is National Code 2 - Day case</p> |

| Name | Definition |
|--|--|
| | admission). |
| CLINICAL TRIAL INDICATOR | CLINICAL TRIAL INDICATOR is used to record whether an individual episode of care within a Cancer Care Spell is being delivered to a PATIENT as part of a CLINICAL TRIAL. |
| ORGANISATION CODE (PROVIDER TREATMENT START DATE (CANCER)) | This is the ORGANISATION CODE of the Health Care Provider at which a PATIENT with a PRIMARY DIAGNOSIS (ICD) within the list of cancer diagnoses defined by the Department of Health (see website), receives the first cancer treatment in their Cancer Treatment Period. This is the ORGANISATION where the TREATMENT START DATE (CANCER) is recorded. |
| RADIO THERAPY PRIORITY | This is the priority for this Radiotherapy Treatment Course as classified by the requesting clinician. |
| RADIO THERAPY INTENT | This is the intent of the delivered beam radiation for PATIENTS with a cancer PRIMARY DIAGNOSIS (ICD) within the range C00 to C97 or D05, as defined by the Department of Health (see website), where the CANCER TREATMENT MODALITY recorded is National Code 05 - Teletherapy (Beam radiation excluding Proton Therapy). |
| DELAY REASON (CONSULTANT UPGRADE) | This is the same as attribute DELAY REASON TO TREATMENT (CANCER). |
| DELAY REASON COMMENT (CONSULTANT UPGRADE) | DELAY REASON COMMENT (CONSULTANT UPGRADE) is the same as attribute DELAY REASON COMMENT. |

Changed data elements:

The changes to the data elements include renaming, extensions and changes to value sets and changes to definitions. The table below indicates which data elements have been changed and the type of change

| Current name | New name | Change to value | Change to definition |
|--|--|-----------------|----------------------|
| CANCER REFERRAL DECISION DATE | DECISION TO REFER DATE (CANCER AND BREAST SYMPTOMS) | Yes | Yes |
| URGENT CANCER REFERRAL TYPE | URGENT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE | Yes | Yes |
| DELAY REASON REFERRAL TO FIRST SEEN (CANCER) | DELAY REASON REFERRAL TO FIRST SEEN (CANCER AND BREAST SYMPTOMS) | No | Yes |
| WAITING TIME ADJUSTMENT (FIRST SEEN) | WAITING TIME ADJUSTMENT (FIRST SEEN) | Yes | Yes |
| WAITING TIME ADJUSTMENT REASON (FIRST SEEN) | WAITING TIME ADJUSTMENT REASON (FIRST SEEN) | Yes | Yes |
| MDT DISCUSSION INDICATOR | MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR | No | Yes |
| MULTIDISCIPLINARY TEAM | MULTIDISCIPLINARY TEAM | Yes | Yes |

| Current name | New name | Change to value | Change to definition |
|--|--|-----------------|----------------------|
| DISCUSSION DATE | DISCUSSION DATE (CANCER) | | |
| PRIMARY DIAGNOSIS (ICD) | PRIMARY DIAGNOSIS (ICD) | Yes | Yes |
| CANCER STATUS | CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS | Yes | Yes |
| ORGANISATION CODE (PROVIDER DECISION TO TREAT) | ORGANISATION CODE (PROVIDER DECISION TO TREAT(CANCER)) | No | Yes |
| WAITING TIME ADJUSTMENT (TREATMENT) | WAITING TIME ADJUSTMENT (TREATMENT) | No | Yes |
| WAITING TIME ADJUSTMENT REASON (TREATMENT) | WAITING TIME ADJUSTMENT REASON (TREATMENT) | Yes | Yes |

Removed data elements:

Some data elements have been removed from the National Cancer Waiting Times Minimum Data Set as there is no longer a national business need for their inclusion. However the data elements are retained in the NHS Data Model and Dictionary for continued use in other data sets, or for local purposes.

| Removed data element | Removed data element |
|--|---|
| CANCER REFERRAL PRIORITY TYPE | CANCER SPECIALIST REFERRAL DATE |
| REFERRAL REQUEST RECEIVED DATE | REFERRING ORGANISATION CODE |
| FIRST SEEN BY SPECIALIST DATE (CANCER) | ORGANISATION CODE (PROVIDER FIRST CANCER SPECIALIST) |
| CLINICAL INTERVENTION DATE (FIRST DIAGNOSTIC TEST) | ORGANISATION CODE (FIRST DIAGNOSTIC TEST) |
| DECISION TO TREAT DATE (SURGERY) | DECISION TO TREAT DATE (BRACHYTHERAPY TREATMENT COURSE) |
| DECISION TO TREAT DATE (ANTI-CANCER DRUG REGIMEN) | DECISION TO TREAT DATE (SPECIALIST PALLIATIVE TREATMENT COURSE) |
| DECISION TO TREAT DATE (TELEOTHERAPY TREATMENT COURSE) | DECISION TO TREAT DATE (ACTIVE MONITORING) |
| WAITING TIME ADJUSTMENT (DECISION TO TREAT) | WAITING TIME ADJUSTMENT REASON (DECISION TO TREAT) |
| PLANNED CANCER TREATMENT TYPE (FIRST DEFINITIVE) | START DATE (SURGERY HOSPITAL PROVIDER SPELL) |
| START DATE (ANTI-CANCER DRUG REGIMEN) | START DATE (TELEOTHERAPY TREATMENT COURSE) |
| START DATE (BRACHYTHERAPY TREATMENT COURSE) | START DATE (SPECIALIST PALLIATIVE TREATMENT COURSE) |
| START DATE (ACTIVE MONITORING) | ORGANISATION CODE (PROVIDER FIRST TREATMENT) |

In addition to the changes specified in these tables, all date formats have changed from CCYYMMDD to CCYY-MM-DD to remain in-line with current standards

See attached data dictionary change paper, CP1011.

Timescales for Implementation / Change

The timetable for changes to the data collection are set out below. The timetable for the enhanced service standards was set out in the introductory section above.

| FRAMEWORK | | Health and Social Care Personnel | Organisation ¹ | IT Suppliers ² |
|--|--|---|---|---|
| Effective Date³ "may use" | | 1 January 2009 | 1 January 2009 | 1 January 2009 |
| Implementation Date⁴ "must use" | Collection Start Date⁵ | 1 January 2009 | 1 January 2009 | 1 January 2009 |
| | First Submission Date⁶ | 6 March 2009 | 6 March 2009 | 6 March 2009 |
| | Reporting Period / Submission Cycle⁷ | Monthly and quarterly (25 working days after the end of a month or quarter) | Monthly and quarterly (25 working days after the end of a month or quarter) | Monthly and quarterly (25 working days after the end of a month or quarter) |
| Conformance Date⁸ "must be used effectively and assessed for use" | | 1 January 2009 | 1 January 2009 | 1 January 2009 |
| Superseded Date (of prior standard)⁹ "stop using prior standard" | | 1 January 2009 | 1 January 2009 | 1 January 2009 |

Effects on Other Information Standards

The changes to information standards impact on other data sets that use them, in particular the National Cancer Data Set, the Cancer Registry Data Set and those datasets used to support some of the National Clinical Audit Support Programme (NCASP) audits. Working in collaboration with the National Cancer Intelligence Network it has been determined that the operability of these datasets has not been impaired, though system suppliers will have to take note of this DSCN and make changes as appropriate.

These changes to enhance the dataset for the monitoring of the various service standards relating to cancer waiting times are also designed to deliver improved interoperability with the radiotherapy, cancer registry and 18 weeks datasets.

Sponsor Details

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Further Information and Support

Further information can be found either on the Department of Health website or with the guidance documents that support the use of the Cancer Waiting Times Database, which are available at: <http://nww.connectingforhealth.nhs.uk/nhais/cancerwaiting/>

E-mail queries should be addressed to cancer-waits@dh.gsi.gov.uk

Notes:

1. Relevant organisations are those organisations as defined in the standard who must take direct action to implement the standard
2. IT Suppliers are all suppliers to the organisations listed at ¹ who supply functionality pertinent to that standard
3. **Effective Date** is the date from which a new standard can be used but may not be mandatory. This might facilitate piloting, for example, or enable time for system functionality development. At this point, **you “may use” the standard.**
4. **Implementation Date** is the point from which the new standard becomes mandatory. Ideally, it inherently implies organisations use appropriate systems i.e. the date is the same for organisations and suppliers. However, there may be circumstances where interim workarounds are required i.e. the date is different for organisations and suppliers. At this date, **you “must use” the standard.** Where the standard demands data is submitted centrally, sub components of implementation date (and possibly ‘effective date’) are:
 5. **Collection Start Date** – this is the date collection of data must begin
 6. **First Submission Date** – this is the date of first submission of data centrally
 7. **Reporting Period / Submission Cycle** – If the standard calls for further collection and submission at defined intervals, this cell provides text of the reporting period (e.g. calendar month, financial year) and the submission cycle (e.g. submit data monthly on the 10th working day of the subsequent month).
8. **Conformance Date** is the date from which the service and IT system suppliers must use the standard as envisaged i.e. using appropriate IT solutions rather than interim workarounds and, if the standard requires it, an independent, authoritative body or legitimate internal audit would conduct a conformity assessment with the expectation of full conformance by all relevant parties. It is the **“must use standard effectively and assessed for use”** date
9. **Superseded Date** of the prior standard sets the date at which the prior standard is replaced by the new standard i.e. the prior standard must no longer be used. This date will apply only where there was a pre-existing standard made redundant by the new standard. It might be different from preceding dates in the framework if, for example, a new and old standard run in parallel for a period. It is the date from which you **“stop using the prior standard”**.

NHS Connecting for Health

NHS Data Model and Dictionary Service

Reference: Change Request 1011
Version No: 1.0
Subject: Cancer Waiting Times
Effective Date: 1 Jan 2009
Reason for Change: Change to Data Standards
Publication Date: 15 Sep 2008

Background:

The Cancer Reform Strategy was published by Ministers on 3 December 2007, and sets out the approved policy direction for improving outcomes for patients, and the widening of the cancer waiting times standards that the service must achieve. As a result, the scope of the current cancer waiting times standards has been extended. The changes to the information standard are to support NHS providers and commissioners in tracking cancer patients to ensure that care is delivered along the whole pathway, not just to first treatment.

This Data Set Change Notice details the information standards needed to continue monitoring the existing cancer standards that were introduced by the NHS Cancer Plan (September 2000):

- The two week standard from urgent General Medical Practitioner/General Dental Practitioner referral for suspected cancer to date first seen
- The 2001 cancer waiting time target of one month from urgent General Practitioner referral for suspected cancer to treatment for children's, testicular cancers and acute leukaemia
- The 2001 cancer waiting time target of one month from diagnosis to treatment for breast cancer
- The 2002 cancer waiting time target of two month wait from urgent General Medical Practitioner referral for suspected cancer to treatment for breast cancer
- The 2005 cancer waiting time target of two month wait from urgent General Medical Practitioner referral for suspected cancer to treatment for all cancers
- The 2005 cancer waiting time target of one month wait from diagnosis to treatment for all cancers

These will be amended slightly by the proposed new dataset, in order to reflect the enhanced standards set out in the Cancer Reform Strategy, and to facilitate alignment with the monitoring standard for the 18 week standard. The specific dataset changes are:

- the two week standard from urgent General Medical Practitioner/General Dental Practitioner referral for suspected cancer will be monitored from the receipt of the referral at the provider trust, rather than the referral decision date. This is to accommodate both Choose and Book (CaB) processes and 18-week alignment. The data item REFERRAL REQUEST RECEIVED DATE will be collected as an option for the new CANCER REFERRAL TO TREATMENT PERIOD START DATE, which has been introduced to align with 18-weeks
- the different 62-day standards will also be monitored from CANCER REFERRAL TO TREATMENT PERIOD START DATE, rather than the cancer referral decision date, to reflect the change to the two week wait
- the 2001 cancer waiting time target of one month from urgent General Practitioner referral for suspected cancer to treatment for children's, testicular cancers and acute leukaemia will also be monitored from CANCER REFERRAL TO TREATMENT PERIOD START DATE, rather than the cancer referral decision date, to reflect the change to the two week wait
- the start date for the 2001 and 2005 31-day standards remains at DATE OF DECISION TO TREAT, but, because of the expansion to monitor the Cancer Reform Strategy (CRS) standards, this data item is just one of the options to populate the new field CANCER TREATMENT PERIOD START DATE.

The enhanced service standards set out in the Cancer Reform Strategy are:

- a maximum two month wait from referral from a cancer screening service to first treatment for all cancers (by December 2008)
- a maximum two month wait from a consultant's decision to upgrade the urgency of a patient they suspect to have a cancer to first treatment for all cancers (by December 2008)
- a maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer where an anti-cancer drug regimen or surgery is the chosen treatment modality (from December 2008)
- a maximum two week wait from referral for general breast symptoms (where cancer is not initially suspected) to date first seen (by December 2009)
- a maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer where radiotherapy is the chosen treatment modality (by December 2010)
- a maximum one month wait for all subsequent treatments for new cases of primary and recurrent

cancer for all other treatment modalities (by December 2010).

These dataset changes therefore build on the dataset established to monitor the existing cancer waiting times standards that was set out in Dataset Change Notice (DSCN) 22/2002, and subsequent Data Set Change Notices, and they support the enhanced service standards. These changes to enhance the dataset for the monitoring of the various service standards relating to cancer waiting times are also designed to deliver improved interoperability with the radiotherapy, cancer registry and 18 weeks datasets, so that the burden of data collection on provider organisations is reduced.

This new information standard also aligns the monitoring of cancer waits with the service model of the Choose and Book initiative. This means that day zero for calculating cancer referral to treatment and two week periods is no longer the CANCER REFERRAL DECISION DATE, but the date of receipt of the referral request by the provider. This is expressed as the CANCER REFERRAL TO TREATMENT PERIOD START DATE within the amended dataset.

Although the central collection of data starts from 1 January 2009, the enhanced service standards themselves come into force at different dates:

- 62 day standard for screening referral : December 2008
- 62 day standard for consultant upgrade : December 2008
- 31 day standard for subsequent chemotherapy and surgery : December 2008
- two week wait for breast symptoms : December 2009
- 31 day standard for subsequent radiotherapy : December 2010
- 31 day standard for other subsequent treatments : December 2010

The purpose in starting to collect data on all of these standards from 1 January 2009 is to enable progress towards the achievement of those that come into force in 2009 and 2010 to be monitored, and to help the NHS overcome problems highlighted by these data.

The changes to information standards impact on other data sets that use them, in particular the National Cancer Data Set, the Cancer Registry Data Set and those datasets used to support some of the National Clinical Audit Support Programme (NCASP) audits. Working in collaboration with the National Cancer Intelligence Network it has been determined that the operability of these datasets has not been impaired, though system suppliers will have to take note of this Data Set Change Notice and make changes as appropriate.

The expansion of the service standards within the Cancer Reform Strategy has meant that this dataset has been expanded to include those patients who were not initially referred with a suspicion of cancer, or who were not originally urgently referred onto a cancer pathway by a General Medical Practitioner or General Dental Practitioner. To support this change of scope, many of the previous cancer specific fields have been replaced by the generic fields that are used to support the 18-week programme. One example of this is the substitution of PRIORITY TYPE for CANCER REFERRAL PRIORITY TYPE.

The use of the field PRIORITY TYPE with the dataset will relate directly to the monitoring of the service standards within the Cancer Reform Strategy. The use of this field within the local and national dataset introduced by this Data Set Change Notice will be as follows:

PRIORITY TYPE 3 (Two Week Wait) will apply (within the scope of this dataset) to any patient that is referred urgently by a General Medical Practitioner or General Dental Practitioner for suspected cancer, and any patient that is referred from any source for the extended two week wait for breast symptoms. Both of these events will start a 62-day pathway.

PRIORITY TYPE 2 (Urgent) will apply (within the scope of this dataset) to any patient who has a SOURCE OF REFERRAL FOR OUTPATIENTS code of 17, these patients are those referred from screening services to an assessment clinic with a suspicion of cancer. This event also starts a 62-day pathway.

This code will also be used to derive the referral source of patients that relates to the CANCER REFERRAL TO TREATMENT PERIOD START DATE for those patients who were referred for a non-cancer condition, but are subsequently upgraded, and treated for cancer.

PRIORITY TYPE 1 (Routine) will apply (within the scope of this dataset) to any patient, from any source of referral who is treated for cancer following a consultant upgrade. This will be mapped directly to the CANCER REFERRAL TO TREATMENT PERIOD START DATE for the care spell that contains the upgrade.

In addition to this it is the responsibility of providers collecting and supplying data under this data standard to identify the stage of treatment, and therefore specify which of the NHS Cancer Plan or Cancer Reform Strategy service standards is to be applied for performance monitoring. The distinction between stages of treatment (first definitive, second or subsequent etc) is to be made locally using the data item CANCER TREATMENT EVENT TYPE.

Trusts will need to submit data to the Cancer Waiting Times Database (hosted on Open Exeter at: <https://nww.openexeter.nhs.uk/nhsia/index.jsp>) for January 2009 by 06/03/2009. Quarterly submissions will

be required to the same schedule (25 working days after the end of a month or quarter).

Further guidance on the collection and submission of the National Cancer Waiting Times Monitoring Data Set can be found at:

<http://nww.connectingforhealth.nhs.uk/nhais/cancerwaiting/>.

Please note: Some of the classes, attributes and data elements referenced in this Data Set Change Notice are to be introduced as part of the Radiotherapy Data Set. The Data Set Change Notice for the Radiotherapy Data Set will be published within 7 working days of the date of this Cancer Waiting Times Data Set Change Notice.

Summary of changes:

Class Definitions

| | |
|---|---------------------------------|
| ACTIVITY GROUP | Changed Description, Attributes |
| ACTIVITY GROUP | Changed Description, Attributes |
| CARE ACTIVITY | Changed Description |
| CELL PATHOLOGICAL ABNORMALITY | Changed Attributes |
| CLINICAL INTERVENTION | Changed Attributes |
| PATIENT CLINICAL TRIAL STATUS | Changed Attributes |
| REFERRAL TO TREATMENT PERIOD | Changed Description |
| TISSUE CARE ACTIVITY | Changed Attributes |

Attribute Definitions

| | |
|---|------------------------------------|
| ACTIVITY DATE TIME TYPE | Changed Description |
| CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS renamed from CANCER STATUS | Changed Description, Name, Aliases |
| CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS renamed from CANCER STATUS | Changed Description, Name, Aliases |
| CANCER REFERRAL TO TREATMENT PERIOD START DATE | New Attribute |
| CANCER REFERRAL TO TREATMENT PERIOD START DATE | New Attribute |
| CANCER TREATMENT EVENT TYPE | New Attribute |
| CANCER TREATMENT EVENT TYPE | New Attribute |
| CANCER TREATMENT MODALITY | New Attribute |
| CANCER TREATMENT MODALITY | New Attribute |
| CANCER TREATMENT PERIOD START DATE | New Attribute |
| CANCER TREATMENT PERIOD START DATE | New Attribute |
| CLINICAL TRIAL INDICATOR | New Attribute |
| CLINICAL TRIAL INDICATOR | New Attribute |
| DELAY REASON COMMENT | Changed Description |
| DELAY REASON INDICATOR | Changed Description |
| DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS) renamed from DELAY REASON REFERRAL TO FIRST SEEN (CANCER) | Changed Description, Name |
| DELAY REASON TO TREATMENT (CANCER) | Changed Description |
| METASTATIC SITE | New Attribute |
| METASTATIC SITE | New Attribute |
| MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER) renamed from MULTIDISCIPLINARY TEAM DISCUSSION DATE | Changed Description, Name |
| PRIORITY TYPE | Changed Description |
| RADIOTHERAPY INTENT | New Attribute |
| RADIOTHERAPY INTENT | New Attribute |
| SOURCE OF REFERRAL FOR OUT-PATIENTS | Changed Description |
| TREATMENT START DATE (CANCER) | New Attribute |
| TREATMENT START DATE (CANCER) | New Attribute |
| TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE renamed from URGENT CANCER REFERRAL TYPE | Changed Description, Name, Aliases |
| TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE renamed from URGENT CANCER REFERRAL TYPE | Changed Description, Name, Aliases |
| WAITING TIME ADJUSTMENT REASON | Changed Description |

Data Elements

| | |
|---|------------------------------------|
| CANCER CARE SETTING (TREATMENT) | New Data Element |
| CANCER CARE SETTING (TREATMENT) | New Data Element |
| CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS renamed from CANCER STATUS | Changed Description, Name, Aliases |
| CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS renamed from CANCER STATUS | Changed Description, Name, Aliases |
| CANCER REFERRAL DECISION DATE | Changed Description |
| CANCER REFERRAL PRIORITY TYPE | Changed Description |
| CANCER REFERRAL TO TREATMENT PERIOD START DATE | New Data Element |
| CANCER REFERRAL TO TREATMENT PERIOD START DATE | New Data Element |

| | |
|---|------------------------------------|
| CANCER SPECIALIST REFERRAL DATE | Changed Description |
| CANCER TREATMENT EVENT TYPE | New Data Element |
| CANCER TREATMENT EVENT TYPE | New Data Element |
| CANCER TREATMENT MODALITY | New Data Element |
| CANCER TREATMENT MODALITY | New Data Element |
| CANCER TREATMENT PERIOD START DATE | New Data Element |
| CANCER TREATMENT PERIOD START DATE | New Data Element |
| CLINICAL INTERVENTION DATE (FIRST DIAGNOSTIC TEST) | Changed Description |
| CLINICAL TRIAL INDICATOR | New Data Element |
| CLINICAL TRIAL INDICATOR | New Data Element |
| CONSULTANT UPGRADE DATE | New Data Element |
| CONSULTANT UPGRADE DATE | New Data Element |
| DATE FIRST SEEN | Changed Description, Aliases |
| DATE FIRST SEEN | Changed Description, Aliases |
| DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS) | New Data Element |
| DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS) | New Data Element |
| DECISION TO TREAT DATE (ANTI-CANCER DRUG REGIMEN) | Changed Description |
| DECISION TO TREAT DATE (BRACHYTHERAPY TREATMENT COURSE) | Changed Description |
| DECISION TO TREAT DATE (SPECIALIST PALLIATIVE TREATMENT COURSE) | Changed Description |
| DECISION TO TREAT DATE (SURGERY) | Changed Description |
| DECISION TO TREAT DATE (TELETHERAPY TREATMENT COURSE) | Changed Description |
| DELAY REASON (CONSULTANT UPGRADE) | New Data Element |
| DELAY REASON (CONSULTANT UPGRADE) | New Data Element |
| DELAY REASON (DECISION TO TREATMENT) renamed from DELAY REASON DECISION TO TREATMENT (CANCER) | Changed Description, Name, Aliases |
| DELAY REASON (DECISION TO TREATMENT) renamed from DELAY REASON DECISION TO TREATMENT (CANCER) | Changed Description, Name, Aliases |
| DELAY REASON COMMENT (CONSULTANT UPGRADE) | New Data Element |
| DELAY REASON COMMENT (CONSULTANT UPGRADE) | New Data Element |
| DELAY REASON COMMENT (DECISION TO TREATMENT) | Changed Description |
| DELAY REASON COMMENT (FIRST SEEN) | Changed Description |
| DELAY REASON COMMENT (REFERRAL TO TREATMENT) | Changed Description |
| DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS) renamed from DELAY REASON REFERRAL TO FIRST SEEN (CANCER) | Changed Description, Name, Aliases |
| DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS) renamed from DELAY REASON REFERRAL TO FIRST SEEN (CANCER) | Changed Description, Name, Aliases |
| FIRST SEEN BY SPECIALIST DATE (CANCER) | Changed Description |
| METASTATIC SITE | New Data Element |
| METASTATIC SITE | New Data Element |
| MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER) renamed from MULTIDISCIPLINARY TEAM DISCUSSION DATE | Changed Description, Name |
| MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR renamed from MDT DISCUSSION INDICATOR | Changed Description, Name, Aliases |
| MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR renamed from MDT DISCUSSION INDICATOR | Changed Description, Name, Aliases |
| ORGANISATION CODE (PROVIDER CONSULTANT UPGRADE) | New Data Element |
| ORGANISATION CODE (PROVIDER CONSULTANT UPGRADE) | New Data Element |
| ORGANISATION CODE (PROVIDER DECISION TO TREAT (CANCER)) renamed from ORGANISATION CODE (PROVIDER DECISION TO TREAT) | Changed Description, Name, Aliases |
| ORGANISATION CODE (PROVIDER DECISION TO TREAT (CANCER)) renamed from ORGANISATION CODE (PROVIDER DECISION TO TREAT) | Changed Description, Name, Aliases |
| ORGANISATION CODE (PROVIDER FIRST CANCER SPECIALIST) | Changed Description |
| ORGANISATION CODE (PROVIDER FIRST DIAGNOSTIC TEST) | Changed Description |
| ORGANISATION CODE (PROVIDER TREATMENT START DATE (CANCER)) renamed from ORGANISATION CODE (PROVIDER FIRST TREATMENT) | Changed Description, Name, Aliases |
| ORGANISATION CODE (PROVIDER TREATMENT START DATE (CANCER)) renamed from ORGANISATION CODE (PROVIDER FIRST TREATMENT) | Changed Description, Name, Aliases |
| PLANNED CANCER TREATMENT TYPE (FIRST DEFINITIVE) | Changed Description |
| PRIMARY DIAGNOSIS (ICD) | Changed Description |
| RADIOTHERAPY INTENT | New Data Element |
| RADIOTHERAPY INTENT | New Data Element |
| REFERRAL REQUEST RECEIVED DATE | Changed Description |
| REFERRING ORGANISATION CODE | Changed Description |
| START DATE (ACTIVE MONITORING) | Changed Description |
| START DATE (ANTI-CANCER DRUG REGIMEN) | Changed Description |
| START DATE (BRACHYTHERAPY TREATMENT COURSE) | Changed Description |
| START DATE (SPECIALIST PALLIATIVE TREATMENT COURSE) | Changed Description |
| START DATE (SURGERY HOSPITAL PROVIDER SPELL) | Changed Description |
| START DATE (TELETHERAPY TREATMENT COURSE) | Changed Description |
| TELETHERAPY BEAM ENERGY | Changed Description |

| | |
|---|------------------------------------|
| TELETHERAPY FIELDS CLASSIFICATION | Changed Description |
| TREATMENT START DATE (CANCER) | New Data Element |
| TREATMENT START DATE (CANCER) | New Data Element |
| TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE renamed from URGENT CANCER REFERRAL TYPE | Changed Description, Name, Aliases |
| TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE renamed from URGENT CANCER REFERRAL TYPE | Changed Description, Name, Aliases |
| WAITING TIME ADJUSTMENT (DECISION TO TREAT) | Changed Description |
| WAITING TIME ADJUSTMENT (FIRST SEEN) | Changed Description |
| WAITING TIME ADJUSTMENT (TREATMENT) | Changed Description |
| WAITING TIME ADJUSTMENT REASON (DECISION TO TREAT) | Changed Description |
| WAITING TIME ADJUSTMENT REASON (FIRST SEEN) | Changed Description |
| WAITING TIME ADJUSTMENT REASON (TREATMENT) | Changed Description |

Data Set

| | |
|---|---------------------|
| NATIONAL CANCER DATA SET | Changed Description |
| NATIONAL CANCER WAITING TIMES MONITORING DATA SET | Changed Description |

Supporting Information

| | |
|---|------------------------------------|
| CANCER REFERRAL TO TREATMENT PERIOD | New Supporting Information |
| CANCER TREATMENT PERIOD | New Supporting Information |
| CONSULTANT UPGRADE DATE | New Supporting Information |
| MULTIDISCIPLINARY TEAM MEETING | New Supporting Information |
| NATIONAL CANCER WAITING TIMES MONITORING DATA SET OVERVIEW | Changed Description |
| REASONABLE OFFER | Changed Description |
| REFERRAL TO TREATMENT PERIOD INCLUDED IN 18 WEEKS TARGET renamed from REFERRAL TO TREATMENT PERIOD INCLUDED IN TARGET | Changed Description, Name, Aliases |
| REFERRAL TO TREATMENT PERIOD INCLUDED IN 18 WEEKS TARGET renamed from REFERRAL TO TREATMENT PERIOD INCLUDED IN TARGET | Changed Description, Name, Aliases |

Date: 15 Sep 2008

Sponsor: Mike Richards, Department of Health

Note: New text is shown with a blue background. Deleted text is crossed out. Within the Diagrams deleted classes and relationships are red, changed items are blue and new items are green.

NATIONAL CANCER DATA SET

Change to Data Set: Changed Description

[National Cancer Data Set Overview](#)

Site Specific Cancers

[Brain and Central Nervous System](#)

[Breast Cancer](#)

[Colorectal Cancer](#)

[Lung Cancer](#)

[Head and Neck Cancer](#)

[Sarcoma](#)

[Skin Cancer](#)

[Urological Cancer](#)

[Upper GI Cancer](#)

[Gynaecological Cancer](#)

| Data Set Data Element |
|--|
| Demographics |
| NHS NUMBER |
| LOCAL PATIENT IDENTIFIER |
| ORGANISATION CODE (CODE OF PROVIDER) |
| CARE SPELL IDENTIFIER |
| PERSON FAMILY NAME |
| PERSON GIVEN NAME |
| PATIENT USUAL ADDRESS (AT DIAGNOSIS) |
| POSTCODE OF USUAL ADDRESS (AT DIAGNOSIS) |

| |
|---|
| SEX |
| BIRTH DATE |
| GENERAL MEDICAL PRACTITIONER (SPECIFIED) |
| GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION) |
| ORGANISATION CODE (RESPONSIBLE PCT) |
| PERSON FAMILY NAME (AT BIRTH) |
| ETHNIC CATEGORY |
| Referrals |
| SOURCE OF REFERRAL FOR CANCER |
| REFERRING ORGANISATION CODE |
| REFERRER CODE |
| CANCER REFERRAL PRIORITY TYPE |
| CANCER REFERRAL DECISION DATE |
| REFERRAL REQUEST RECEIVED DATE |
| CONSULTANT CODE |
| MAIN SPECIALTY CODE |
| DATE FIRST SEEN |
| DELAY REASON REFERRAL TO FIRST SEEN (CANCER) |
| DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS) |
| DELAY REASON COMMENT (FIRST SEEN) |
| URGENT CANCER REFERRAL TYPE |
| TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE |
| CANCER STATUS |
| CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS |
| WAITING TIME ADJUSTMENT (FIRST SEEN) |
| WAITING TIME ADJUSTMENT REASON (FIRST SEEN) |
| SOURCE OF REFERRAL FOR OUT-PATIENTS |
| Imaging |
| SITE CODE (OF IMAGING) |
| CLINICAL INTERVENTION DATE (CANCER IMAGING) |
| CANCER IMAGING MODALITY |
| ANATOMICAL EXAMINATION SITE |
| INVASIVE LESION SIZE (RADIOLOGICAL DETERMINATION) |
| Diagnosis |
| DIAGNOSIS DATE (CANCER) |
| PRIMARY DIAGNOSIS (ICD) |
| TUMOUR LATERALITY |
| BASIS OF DIAGNOSIS (CANCER) |
| HISTOLOGY (SNOMED) |
| GRADE OF DIFFERENTIATION (AT DIAGNOSIS) |
| Cancer Care Plan |
| MDT DISCUSSION INDICATOR |
| MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR |
| MULTIDISCIPLINARY TEAM DISCUSSION DATE |
| MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER) |
| CARE PLAN AGREED DATE |
| RECURRENCE INDICATOR |
| CANCER CARE PLAN INTENT |
| PLANNED CANCER TREATMENT TYPE |
| TREATMENT TYPE SEQUENCE |
| NO CANCER TREATMENT REASON |
| PERFORMANCE STATUS (ADULT) |
| Staging |
| T CATEGORY (FINAL PRETREATMENT) |
| STAGING CERTAINTY FACTOR (T CATEGORY) |

| |
|---|
| N CATEGORY (FINAL PRETREATMENT) |
| STAGING CERTAINTY FACTOR (N CATEGORY) |
| M CATEGORY (FINAL PRETREATMENT) |
| STAGING CERTAINTY FACTOR (M CATEGORY) |
| TNM CATEGORY (FINAL PRETREATMENT) |
| STAGING CERTAINTY FACTOR (TNM CATEGORY) |
| SITE SPECIFIC STAGING CLASSIFICATION |
| TNM CATEGORY (INTEGRATED) |
| T CATEGORY (INTEGRATED STAGE) |
| N CATEGORY (INTEGRATED STAGE) |
| M CATEGORY (INTEGRATED STAGE) |
| Surgery and Other Procedures |
| SITE CODE (OF SURGERY) |
| CONSULTANT CODE |
| MAIN SPECIALTY CODE |
| CANCER TREATMENT INTENT |
| DECISION TO TREAT DATE (SURGERY) |
| START DATE (SURGERY HOSPITAL PROVIDER SPELL) |
| PROCEDURE DATE |
| PRIMARY PROCEDURE (OPCS) |
| PROCEDURE (OPCS) |
| DISCHARGE DATE (HOSPITAL PROVIDER SPELL) |
| DISCHARGE DESTINATION (HOSPITAL PROVIDER SPELL) |
| Pathology Details |
| PATHOLOGY INVESTIGATION TYPE |
| SAMPLE RECEIPT DATE |
| INVESTIGATION RESULT DATE |
| CONSULTANT CODE (PATHOLOGIST) |
| ORGANISATION CODE (OF REPORTING PATHOLOGY) |
| PRIMARY DIAGNOSIS (ICD) |
| TUMOUR LATERALITY |
| INVASIVE LESION SIZE |
| SYNCHRONOUS TUMOUR INDICATOR |
| HISTOLOGY (SNOMED) |
| GRADE OF DIFFERENTIATION |
| CANCER VASCULAR OR LYMPHATIC INVASION |
| EXCISION MARGIN |
| NODES EXAMINED NUMBER |
| NODES POSITIVE NUMBER |
| T CATEGORY (PATHOLOGICAL) |
| N CATEGORY (PATHOLOGICAL) |
| M CATEGORY (PATHOLOGICAL) |
| TNM CATEGORY (PATHOLOGICAL) |
| SERVICE REPORT IDENTIFIER |
| SERVICE REPORT STATUS |
| SPECIMEN NATURE |
| ORGANISATION CODE (REQUESTED BY) |
| CARE PROFESSIONAL CODE (REQUESTED BY) |
| T CATEGORY EXTENDED (PATHOLOGICAL) |
| M CATEGORY EXTENDED (PATHOLOGICAL) |
| Chemotherapy and other drugs |
| SITE CODE (OF CANCER DRUG TREATMENT) |
| CONSULTANT CODE |
| MAIN SPECIALTY CODE |
| DECISION TO TREAT DATE (ANTI-CANCER DRUG REGIMEN) |

| |
|---|
| DRUG THERAPY TYPE |
| DRUG TREATMENT INTENT |
| DRUG REGIMEN ACRONYM |
| START DATE (ANTI-CANCER DRUG REGIMEN) |
| RECORDED HEIGHT (CANCER DRUG TREATMENT) |
| RECORDED WEIGHT (CANCER DRUG TREATMENT) |
| PERSON BODY SURFACE AREA (PRETREATMENT) |
| CREATININE CLEARANCE |
| START DATE (ANTI-CANCER DRUG FRACTION) |
| ANTI-CANCER DRUG CYCLE IDENTIFIER |
| DAY NUMBER (ANTI-CANCER DRUG CYCLE) |
| DURATION OF ANTI-CANCER DRUG CYCLE |
| DRUG PROGRAMME RESPONSE |
| PLANNED TREATMENT CHANGE REASON |
| HEALTHCARE RESOURCE GROUP CODE |
| Radiotherapy (Teletherapy) |
| SITE CODE (OF TELETHERAPY) |
| CONSULTANT CODE |
| DECISION TO TREAT DATE (TELETHERAPY TREATMENT COURSE) |
| CANCER TREATMENT INTENT |
| START DATE (TELETHERAPY TREATMENT COURSE) |
| END DATE (TELETHERAPY TREATMENT COURSE) |
| RADIOTHERAPY PRESCRIBED DOSE |
| TELETHERAPY PRESCRIBED FRACTIONS |
| RADIOTHERAPY PRESCRIBED DURATION |
| RADIOTHERAPY ACTUAL DOSE |
| TELETHERAPY ACTUAL FRACTIONS |
| DURATION OF TELETHERAPY TREATMENT COURSE |
| TELETHERAPY BEAM TYPE |
| TELETHERAPY BEAM ENERGY |
| TELETHERAPY FIELDS CLASSIFICATION |
| TELETHERAPY COMPLEXITY GROUP |
| RADIOTHERAPY ANAESTHETIC |
| TELETHERAPY MULTIPLE PLANNING |
| HEALTHCARE RESOURCE GROUP CODE |
| TREATMENT COURSE STATUS |
| Radiotherapy (Brachytherapy) |
| SITE CODE (OF BRACHYTHERAPY) |
| CONSULTANT CODE |
| DECISION TO TREAT DATE (BRACHYTHERAPY TREATMENT COURSE) |
| CANCER TREATMENT INTENT |
| BRACHYTHERAPY TYPE |
| START DATE (BRACHYTHERAPY TREATMENT COURSE) |
| END DATE (BRACHYTHERAPY TREATMENT COURSE) |
| |
| |
| RADIOTHERAPY PRESCRIBED DOSE |
| BRACHYTHERAPY PRESCRIBED FRACTIONS |
| RADIOTHERAPY PRESCRIBED DURATION |
| RADIOTHERAPY ACTUAL DOSE |
| BRACHYTHERAPY DOSE RATE |
| DURATION OF BRACHYTHERAPY TREATMENT COURSE |
| BRACHYTHERAPY ISOTOPE TYPE |
| RADIOTHERAPY ANAESTHETIC |
| UNSEALED SOURCE PATIENT TYPE |

| |
|---|
| BRACHYTHERAPY DELIVERY TYPE |
| HEALTHCARE RESOURCE GROUP CODE |
| TREATMENT COURSE STATUS |
| Palliative Care |
| DECISION TO TREAT DATE (SPECIALIST PALLIATIVE TREATMENT COURSE) |
| START DATE (SPECIALIST PALLIATIVE TREATMENT COURSE) |
| Clinical Trials |
| PATIENT TRIAL STATUS (CANCER) |
| CANCER CLINICAL TRIAL TREATMENT TYPE |
| Clinical Status Assessment |
| CLINICAL STATUS ASSESSMENT DATE (CANCER) |
| PRIMARY TUMOUR STATUS |
| NODAL STATUS |
| METASTATIC STATUS |
| MARKER RESPONSE STATUS |
| PERFORMANCE STATUS (ADULT) |
| TREATMENT TYPE (CANCER MORBIDITY) |
| MORBIDITY CODE (CANCER SURGERY) |
| PATIENT FOLLOW-UP STATUS (CANCER) |
| MORBIDITY CODE (CHEMOTHERAPY) |
| MORBIDITY CODE (RADIOTHERAPY) |
| MORBIDITY CODE (COMBINATION) |
| Death Details |
| PERSON DEATH DATE |
| DEATH LOCATION TYPE |
| DEATH CAUSE IDENTIFICATION METHOD |
| DEATH CAUSE CANCER |
| DEATH CAUSE CODE (IMMEDIATE) |
| DEATH CAUSE CODE (CONDITION) |
| DEATH CAUSE CODE (UNDERLYING) |
| DEATH CAUSE CODE (SIGNIFICANT) |
| DEATH CODE DISCREPANCY ORIGINATOR |

Data Set Data Element

| |
|--|
| Waiting Times Details |
| WAITING TIME ADJUSTMENT (DECISION TO TREAT) |
| WAITING TIME ADJUSTMENT (TREATMENT) |
| WAITING TIME ADJUSTMENT REASON (DECISION TO TREAT) |
| WAITING TIME ADJUSTMENT REASON (TREATMENT) |
| DELAY REASON REFERRAL TO TREATMENT (CANCER) |
| DELAY REASON DECISION TO TREATMENT (CANCER) |
| DELAY REASON (DECISION TO TREATMENT) |
| DELAY REASON COMMENT (REFERRAL TO TREATMENT) |
| DELAY REASON COMMENT (DECISION TO TREATMENT) |
| DECISION TO TREAT DATE (ACTIVE MONITORING) |
| START DATE (ACTIVE MONITORING) |

Site-Specific Data Elements

[Brain and Central Nervous System](#) Brain and Central Nervous System

| |
|---|
| Brain and Central Nervous System |
| Data Set Data Element |
| - |

[Breast Cancer](#) Breast Cancer

| |
|----------------------|
| Breast Cancer |
|----------------------|

Data Set Data Element

| |
|---|
| DIAGNOSTIC ROUTE |
| BREAST CANCER NURSE SEEN |
| RESPONSIBLE CARE PROFESSIONAL CODE (OPCS) |
| MENSTRUAL STATUS |
| LMP DATE |
| CLINICAL EXAMINATION FINDINGS (BREAST CANCER) |
| ENDOCRINE THERAPY TYPE |
| MARKER LYMPH NODE RESULT |

[Colorectal Cancer](#) Colorectal Cancer

| Colorectal Cancer | |
|---|--|
| Data Set Data Element | |
| DIAGNOSTIC ROUTE | |
| COLORECTAL NURSE OR STOMA THERAPIST SEEN | |
| RESPONSIBLE CARE PROFESSIONAL CODE (OPCS) | |
| GRADE OF RESPONSIBLE HCP | |
| PATIENT PROCEDURE RESULT (COLONOSCOPY) | |
| COLONOSCOPY INCOMPLETE REASON | |
| COLORECTAL NURSE OR STOMA THERAPIST SEEN | |
| SURGICAL URGENCY | |
| THEATRE CASE START TIME | |
| MARKER LYMPH NODE RESULT | |

[Head and Neck Cancer](#) Head and Neck Cancer

| Head and Neck Cancer | |
|--|--|
| Data Set Data Element | |
| PATIENT HISTORY (CANCER DIAGNOSIS) | |
| YEAR CANCER DIAGNOSED | |
| PREVIOUS TREATMENT ELSEWHERE | |
| TOBACCO USAGE TYPE | |
| SMOKING STATUS | |
| TOBACCO CHEWING HISTORY | |
| YEAR STOPPED SMOKING | |
| ESTIMATED PACK YEARS | |
| ALCOHOL STATUS | |
| QUALITY OF LIFE (AT DIAGNOSIS) | |
| SYMPTOMS FIRST NOTED DATE | |
| FAMILY OR SURNAME OF RELATION WITH CANCER | |
| RELATIONSHIP TO PERSON | |
| PRIMARY DIAGNOSIS OF RELATION (ICD) | |
| NUTRITIONAL SUPPORT PROVIDED (CANCER) | |
| NUTRITIONAL SUPPORT PROVIDED TYPE (CANCER) | |
| NUTRITIONAL PROCEDURE (OPCS) | |
| NUTRITIONAL PROCEDURE COMPLICATION (ICD) | |
| CONTACT DATE (DIETICIAN INITIAL) | |
| CANCER DENTAL ASSESSMENT DATE | |
| IMAGE REQUEST DATE | |
| SPEECH AND SWALLOWING ASSESSMENT DATE | |

[Lung Cancer](#) Lung Cancer

| Lung Cancer | |
|--------------------------------|--|
| Data Set Data Element | |
| SMOKING STATUS | |

| |
|--------------------------------------|
| YEAR STOPPED SMOKING |
| ESTIMATED PACK YEARS |
| COPD PRESENT |
| FEV1 ABSOLUTE AMOUNT |
| FEV1 PERCENTAGE |

~~Sarcoma~~ Sarcoma

| Sarcoma | |
|---|--|
| Data Set Data Element | |
| BONE SARCOMA LOCATION | |
| CLOSEST MARGIN | |
| NECROSIS | |
| SARCOMA CONDITION FIRST SEEN | |
| SARCOMA LARGEST DIAMETER | |
| SARCOMA PART SITE | |
| SARCOMA PREDISPOSING CONDITION (FAMILY) | |
| SARCOMA PREDISPOSING CONDITION (OTHER PHYSICAL) | |
| SARCOMA RELATION TO DEEP FASCIA | |
| SARCOMA SURGICAL MARGIN | |
| SARCOMA SURGICAL PROCEDURE TYPE | |
| SARCOMA TUMOUR SITE | |
| SOFT TISSUE SARCOMA LOCATION | |

~~Skin Cancer~~ Skin Cancer

| Skin Cancer | |
|--|--|
| Data Set Data Element | |
| BASAL CELL CLINICAL MORPHOLOGY | |
| CLINICAL EXCISION MARGIN | |
| DERMATOLOGIST BODY SITE (SKIN CANCER CARE SPELL) | |
| DERMATOLOGIST BODY SITE (SKIN CANCER LESION) | |
| DISTRIBUTION OF LESIONS PRESENT | |
| GENETICALLY DETERMINED SKIN CANCER TYPE | |
| NEW LESIONS TREATED NUMBER (CHEMOTHERAPY) | |
| NEW LESIONS TREATED NUMBER (RADIOTHERAPY) | |
| NEW LESIONS TREATED NUMBER (SURGERY) | |
| PATHOLOGY SPECIMEN TYPE | |
| PATIENT ON IMMUNOSUPPRESSIVE THERAPY | |
| PERINEURAL INVASION | |
| PREVIOUS SKIN CANCER | |
| RECURRENT LESIONS TREATED NUMBER (CHEMOTHERAPY) | |
| RECURRENT LESIONS TREATED NUMBER (RADIOTHERAPY) | |
| RECURRENT LESIONS TREATED NUMBER (SURGERY) | |
| SKIN CANCER LARGEST CLINICAL DIAMETER (SKIN CANCER CARE SPELL) | |
| SKIN CANCER LARGEST CLINICAL DIAMETER (SKIN CANCER LESION) | |
| SKIN CANCER NEW RECURRENT INDICATOR | |
| SKIN CANCER SUBSEQUENT DIAGNOSIS DATE | |
| SKIN LYMPHOMA CLINICAL MORPHOLOGY | |
| SKIN TCELL CLINICAL VARIANT | |
| SKIN TCELL SURFACE AREA | |
| SKIN TUMOUR STATUS | |

~~Urological Cancer~~ Urological Cancer

| Urological Cancer | |
|-----------------------|--|
| Data Set Data Element | |

[SERUM TUMOUR MARKER PSA](#)

[S CATEGORY FINAL PRETREATMENT](#)

[DRUG ROUTE OF ADMINISTRATION](#)

[Upper GI Cancer](#)

Upper GI Cancer

Data Set Data Element

[POSSUM SCORE \(AT DIAGNOSIS\)](#)

[POSSUM SCORE \(AFTER SURGERY\)](#)

[RELATIONSHIP TO PERSON](#)

[PRIMARY DIAGNOSIS OF RELATION \(ICD\)](#)

[SMOKING STATUS](#)

[YEAR STOPPED SMOKING](#)

[ESTIMATED PACK YEARS](#)

[ALCOHOL STATUS](#)

[CO-MORBIDITY \(ICD\)](#)

[CLINICAL SIGN OR SYMPTOM \(ICD\)](#)

[Gynaecological Cancer](#)

Gynaecological Cancer

Data Set Data Element

[GYNAECOLOGICAL ONCOLOGY ACCREDITATION](#)

NATIONAL CANCER WAITING TIMES MONITORING DATA SET

Change to Data Set: Changed Description

[National Cancer Waiting Times Monitoring Data Set Overview](#)

The [National Cancer Waiting Times Monitoring Data Set](#) contains the data required for monitoring the cancer waiting time targets. The National Cancer Waiting Times Monitoring Data Set contains the data required for monitoring the cancer waiting time standards introduced by DSCN 22/2002, and has been updated to include those introduced by the Cancer Reform Strategy (2007).

The data items are presented in the same order as the CSV (Comma Separated Values) file which can be exported from Trust based systems and uploaded to the Cancer Waiting Times system. The data items are presented in the same order as the Comma Separated Values (.csv) file which can be exported from Provider-based systems and uploaded to the Cancer Waiting Times system. This system is hosted nationally on NHSnet.

The three columns show whether the Data element is Mandatory or Optional for. The seven columns show whether the data item is Mandatory or Optional for:

- ~~urgent~~ [GENERAL PRACTITIONER referral for suspected cancer](#)
- ~~The Health Care Provider where the PATIENT is first seen following a REFERRAL REQUEST with PRIORITY TYPE 'Two Week Wait', or an urgent referral from an NHS Cancer Screening Programme~~
- ~~first definitive treatment for cancer following a referral other than an urgent~~ [GENERAL PRACTITIONER referral for cancer](#), and
- ~~The Health Care Provider where the PATIENT receives First Definitive Treatment for cancer following a REFERRAL REQUEST with PRIORITY TYPE 'Two Week Wait', or an urgent referral from an NHS Cancer Screening Programme~~
- ~~first definitive treatment for cancer following an urgent~~ [GENERAL PRACTITIONER referral for suspected cancer](#)
- ~~The Health Care Provider where the PATIENT receives second or subsequent treatment for cancer following a REFERRAL REQUEST with PRIORITY TYPE 'Two Week Wait', or an urgent referral from an NHS Cancer Screening Programme~~
- ~~The Health Care Provider where the PATIENT receives First Definitive Treatment for cancer following a consultant upgrade onto a 62 day PATIENT PATHWAY~~
- ~~The Health Care Provider where the PATIENT receives second or subsequent treatment for cancer following a consultant upgrade onto a 62 day PATIENT PATHWAY~~
- ~~The Health Care Provider where the PATIENT receives First Definitive Treatment for cancer following a REFERRAL REQUEST from another SOURCE OF REFERRAL FOR OUT-PATIENTS or a different PRIORITY TYPE~~
- ~~The Health Care Provider where the PATIENT receives second or subsequent treatment for cancer following a REFERRAL REQUEST from another SOURCE OF REFERRAL FOR OUT-PATIENTS or a different PRIORITY TYPE~~

- ~~M~~ - MANDATORY

- M = Mandatory - the Standard Contract Schedule 5 requires NHS provider organisations to submit this information on a monthly basis. The Department of Health require the data to be submitted 25 working days after the end of each month or quarter.

- ~~M*~~ - MANDATORY WHEN APPLICABLE

- M* = Mandatory if applicable - the Standard Contract Schedule 5 requires NHS provider organisations to submit this information on a

monthly basis, where collection of the item was applicable to them. The Department of Health require the data to be submitted 25 working days after the end of each month or quarter.

- ~~○~~ = OPTIONAL
- ○ = Optional
- ~~○*~~ = OPTIONAL WHEN APPLICABLE
- ○* = Optional if applicable
- N/A = Not Applicable

| Data Item | Trust where first seen if urgent GP referral for suspected cancer | Trust where patient receives first definitive treatment for cancer following a referral other than an urgent GP referral for cancer | Trust where patient receives first definitive treatment for cancer following an urgent GP referral for suspected cancer | | | | |
|---|--|--|--|---|---|---|---|
| Data Item | Trust where patient first seen following referral with PRIORITY TYPE 3 'Two Week Wait', or referral is from Cancer Screening Service | Trust where patient receives first definitive treatment for cancer following referral with PRIORITY TYPE 3 'Two Week Wait', or referral is from Cancer Screening Service | Trust where patient receives second or subsequent treatment for cancer following referral with PRIORITY TYPE 3 'Two Week Wait', or referral is from Cancer Screening Service | Trust where patient receives first definitive treatment for cancer following consultant upgrade onto a 62 day patient pathway | Trust where patient receives second or subsequent treatment for cancer following a consultant upgrade onto a 62 day patient pathway | Trust where patient receives first definitive treatment for cancer following referral from another SOURCE OF REFERRAL FOR OUT-PATIENTS or a different PRIORITY TYPE | Trust where patient receives second or subsequent treatment for cancer following referral from another SOURCE OF REFERRAL FOR OUT-PATIENTS or a different PRIORITY TYPE |
| NHS NUMBER | M | M | M | M | M | M | M |
| NHS NUMBER | M | M | M | | | | |
| PATIENT PATHWAY IDENTIFIER | M | M* | M* | M* | M* | M* | M* |
| SOURCE OF REFERRAL FOR OUT-PATIENTS | M | ○ | ○ | | | | |
| ORGANISATION CODE (PATIENT PATHWAY IDENTIFIER ISSUER) | M | M* | M* | M* | M* | M* | M* |
| CANCER REFERRAL DECISION DATE | M | N/A | M | | | | |
| DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS) | M* | N/A | N/A | N/A | N/A | O | N/A |
| REFERRAL REQUEST RECEIVED DATE | M | ○ | N/A | | | | |
| SOURCE OF REFERRAL FOR OUT-PATIENTS | M | N/A | N/A | M | N/A | O | N/A |
| CANCER REFERRAL PRIORITY TYPE | M | ○ | M | | | | |
| PRIORITY TYPE | M | N/A | N/A | M | N/A | O | N/A |
| URGENT CANCER REFERRAL TYPE | M | N/A | N/A | | | | |
| CANCER REFERRAL TO TREATMENT PERIOD START DATE | M | M | M | O | N/A | O | N/A |
| DATE FIRST SEEN | M | ○ | N/A | | | | |

| | | | | | | | |
|---|-----|-----|-----|-----|-----|-----|-----|
| TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE | M | N/A | M | N/A | N/A | O | N/A |
| ORGANISATION CODE (PROVIDER FIRST SEEN) | M | e | e | | | | |
| CONSULTANT UPGRADE DATE | N/A | N/A | N/A | M | N/A | O | N/A |
| WAITING TIME ADJUSTMENT (FIRST SEEN) | M* | e* | N/A | | | | |
| ORGANISATION CODE (PROVIDER CONSULTANT UPGRADE) | N/A | N/A | N/A | M | N/A | O | N/A |
| WAITING TIME ADJUSTMENT REASON (FIRST SEEN) | M* | e* | N/A | | | | |
| DATE FIRST SEEN | M | N/A | N/A | M | N/A | O | N/A |
| DELAY REASON COMMENT (FIRST SEEN) | M* | e* | N/A | | | | |
| ORGANISATION CODE (PROVIDER FIRST SEEN) | M | N/A | N/A | N/A | N/A | N/A | N/A |
| DELAY REASON REFERRAL TO FIRST SEEN (CANCER) | e* | e* | N/A | | | | |
| WAITING TIME ADJUSTMENT (FIRST SEEN) | M* | N/A | N/A | N/A | N/A | N/A | N/A |
| CANCER SPECIALIST REFERRAL DATE | e | e | e | | | | |
| WAITING TIME ADJUSTMENT REASON (FIRST SEEN) | M* | N/A | N/A | N/A | N/A | N/A | N/A |
| REFERRING ORGANISATION CODE | e | e | e | | | | |
| DELAY REASON COMMENT (FIRST SEEN) | M* | N/A | N/A | M* | N/A | N/A | N/A |
| FIRST SEEN BY SPECIALIST DATE (CANCER) | e | e | e | | | | |
| DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS) | M* | N/A | N/A | N/A | N/A | N/A | N/A |
| ORGANISATION CODE (PROVIDER FIRST CANCER SPECIALIST) | e | e | e | | | | |
| MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR | M* | M* | M* | M* | M* | M* | M* |
| CLINICAL INTERVENTION DATE (FIRST DIAGNOSTIC TEST) | e | e | e | | | | |
| MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER) | M* | M* | M* | M* | M* | M* | M* |
| ORGANISATION CODE (PROVIDER FIRST DIAGNOSTIC TEST) | e | e | e | | | | |
| CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS | M | M | M | M | M | M | M |
| MDT DISCUSSION INDICATOR | e | e | e | | | | |
| PRIMARY DIAGNOSIS (ICD) | N/A | M | M | M | M | M | M |
| MULTIDISCIPLINARY TEAM DISCUSSION DATE | e | e | e | | | | |
| TUMOUR LATERALITY | N/A | M | M | M | M | M | M |
| CANCER STATUS | M | e | M | | | | |
| CANCER TREATMENT EVENT TYPE | N/A | M | M | M | M | M | M |
| PRIMARY DIAGNOSIS (ICD) | e | M | M | | | | |
| METASTATIC SITE | N/A | M* | M* | M* | M* | M* | M* |
| TUMOUR LATERALITY | e | e | e | | | | |

| | | | | | | | |
|---|-----|----|-----|----|-----|----|-----|
| ORGANISATION CODE (PROVIDER DECISION TO TREAT (CANCER)) | M* | M | M | M | M | M | M |
| DECISION TO TREAT DATE (SURGERY) | ⊖ | M± | M± | | | | |
| CANCER TREATMENT PERIOD START DATE | N/A | M | M | M | M | M | M |
| DECISION TO TREAT DATE (ANTI-CANCER DRUG REGIMEN) | ⊖ | M± | M± | | | | |
| TREATMENT START DATE (CANCER) | N/A | M | M | M | M | M | M |
| DECISION TO TREAT DATE (TELE THERAPY TREATMENT COURSE) | ⊖ | M± | M± | | | | |
| CANCER TREATMENT MODALITY | N/A | M | M | M | M | M | M |
| DECISION TO TREAT DATE (BRACHYTHERAPY TREATMENT COURSE) | ⊖ | M± | M± | | | | |
| CANCER CARE SETTING (TREATMENT) | N/A | M | M | M | M | M | M |
| DECISION TO TREAT DATE (SPECIALIST PALLIATIVE TREATMENT COURSE) | ⊖ | M± | M± | | | | |
| CLINICAL TRIAL INDICATOR | N/A | M | M | M | M | M | M |
| DECISION TO TREAT DATE (ACTIVE MONITORING) | ⊖ | M± | M± | | | | |
| ORGANISATION CODE (PROVIDER TREATMENT START DATE (CANCER)) | N/A | M | M | M | M | M | M |
| ORGANISATION CODE (PROVIDER DECISION TO TREAT) | ⊖ | ⊖ | ⊖ | | | | |
| RADIO THERAPY PRIORITY | N/A | M* | M* | M* | M* | M* | M* |
| WAITING TIME ADJUSTMENT (DECISION TO TREAT) | N/A | ⊖± | M± | | | | |
| RADIO THERAPY INTENT | N/A | M* | M* | M* | M* | M* | M* |
| WAITING TIME ADJUSTMENT REASON (DECISION TO TREAT) | N/A | ⊖± | M± | | | | |
| DELAY REASON COMMENT (DECISION TO TREATMENT) | N/A | M* | M* | M* | M* | M* | M* |
| PLANNED CANCER TREATMENT TYPE (FIRST DEFINITIVE) | N/A | ⊖ | ⊖ | | | | |
| DELAY REASON (DECISION TO TREATMENT) | N/A | M* | M* | M* | M* | M* | M* |
| START DATE (SURGERY HOSPITAL PROVIDER SPELL) | N/A | M± | M± | | | | |
| WAITING TIME ADJUSTMENT (TREATMENT) | N/A | M* | M* | M* | M* | M* | M* |
| START DATE (ANTI-CANCER DRUG REGIMEN) | N/A | M± | M± | | | | |
| WAITING TIME ADJUSTMENT REASON (TREATMENT) | N/A | M* | M* | M* | M* | M* | M* |
| START DATE (TELE THERAPY TREATMENT COURSE) | N/A | M± | M± | | | | |
| DELAY REASON COMMENT (REFERRAL TO TREATMENT) | N/A | M* | N/A | M* | N/A | O* | N/A |
| START DATE (BRACHYTHERAPY TREATMENT COURSE) | N/A | M± | M± | | | | |
| DELAY REASON REFERRAL TO TREATMENT (CANCER) | N/A | M* | N/A | M* | N/A | O* | N/A |
| START DATE (SPECIALIST | N/A | M± | M± | | | | |

| | | | | | | | |
|--|-----|----|-----|----|-----|----|-----|
| PALLIATIVE TREATMENT COURSE | | | | | | | |
| DELAY REASON COMMENT (CONSULTANT UPGRADE) | N/A | M* | N/A | M* | N/A | O* | N/A |
| START DATE (ACTIVE MONITORING) | N/A | M± | M± | | | | |
| ORGANISATION CODE (PROVIDER FIRST TREATMENT) | N/A | M | M | | | | |
| WAITING TIME ADJUSTMENT (TREATMENT) | N/A | M± | M± | | | | |
| WAITING TIME ADJUSTMENT REASON (TREATMENT) | N/A | M± | M± | | | | |
| DELAY REASON COMMENT (DECISION TO TREATMENT) | N/A | M± | M± | | | | |
| DELAY REASON COMMENT (REFERRAL TO TREATMENT) | N/A | 0± | M± | | | | |
| DELAY REASON DECISION TO TREATMENT (CANCER) | N/A | 0± | 0± | | | | |
| DELAY REASON REFERRAL TO TREATMENT (CANCER) | N/A | 0± | 0± | | | | |
| DELAY REASON (CONSULTANT UPGRADE) | N/A | M* | N/A | M* | N/A | O* | N/A |

CANCER REFERRAL TO TREATMENT PERIOD

Change to Supporting Information: New Supporting Information

A **Cancer Referral To Treatment Period** is a **REFERRAL TO TREATMENT PERIOD**. The service standard for referral to treatment for cancer is that the **PATIENT** must receive **First Definitive Treatment** within 62 days (or 31 days for Acute Leukaemia, testicular, and childrens cancers), rather than within 18 weeks.

A **PATIENT** will have a **Cancer Referral To Treatment Period** in the following circumstances:

- The **PATIENT** was referred to secondary care with suspected cancer by a **GENERAL MEDICAL PRACTITIONER** or **GENERAL DENTAL PRACTITIONER**, where the **PRIORITY TYPE** of the **SERVICE REQUEST** was National Code 3 - *Two Week Wait*

- The **PATIENT** was referred to secondary care and cancer was not initially suspected, but was subsequently diagnosed, and the **PATIENT** was referred on to an appropriate specialist

A **Cancer Referral To Treatment Period** is the period of time between **CANCER REFERRAL TO TREATMENT PERIOD START DATE** and either:

- the **TREATMENT START DATE (CANCER)**, where a **PATIENT** diagnosed with a cancer condition (see Department of Health guidance at **Cancer Waiting Times Documentation and Links**) receives **First Definitive Treatment**, or

- the **DATE FIRST SEEN** where a **PATIENT**, although referred with suspected cancer by a **GENERAL MEDICAL PRACTITIONER** or **GENERAL DENTAL PRACTITIONER**, is subsequently diagnosed with a non-cancer condition (even if the non-cancer diagnosis is confirmed after the **DATE FIRST SEEN**), or

- the **DATE** the **PATIENT** declines **First Definitive Treatment**, or

- the **DATE** that **Active Monitoring** (as a **First Definitive Treatment**) starts.

A **Cancer Referral To Treatment Period** does NOT complete automatically if the **PATIENT** does not attend the first **APPOINTMENT** during the **Cancer Referral To Treatment Period**. **WAITING TIME ADJUSTMENT (FIRST SEEN)** is used to align waiting times monitoring with the service standard for 18 weeks.

Information recorded for a **Cancer Referral To Treatment Period** includes:

CANCER REFERRAL TO TREATMENT PERIOD START DATE

CANCER TREATMENT PERIOD

Change to Supporting Information: New Supporting Information

A **Cancer Treatment Period** is an **ACTIVITY GROUP**.

A **Cancer Treatment Period** is initiated when a decision to treat for a cancer condition (see [Department of Health guidance at Cancer Waiting Times Documentation and Links](#)) is made, and ends when the **PATIENT** receives the **Planned Cancer Treatment** specified in the **Cancer Care Plan** covering the **PATIENTS** condition. This is the same as **TREATMENT START DATE (CANCER)**.

If the **PATIENT** receives several different types of treatment within the same **Cancer Care Plan** (eg surgery, followed by chemotherapy, followed by radiotherapy), then each stage has its own **Cancer Treatment Period** of 31 days between **DECISION TO TREAT DATE** (or **EARLIEST CLINICALLY APPROPRIATE DATE**), and **TREATMENT START DATE (CANCER)**.

CANCER CARE SETTING (TREATMENT) is used to derive whether waiting time adjustment between **CANCER TREATMENT PERIOD START DATE** and **TREATMENT START DATE (CANCER)** may be recorded in **WAITING TIME ADJUSTMENT (TREATMENT)**.

Information recorded for a **Cancer Treatment Period** includes:

CANCER TREATMENT PERIOD START DATE

TREATMENT START DATE (CANCER)

CANCER TREATMENT EVENT TYPE

RADIO THERAPY INTENT

RADIO THERAPY PRIORITY

CONSULTANT UPGRADE DATE

Change to Supporting Information: New Supporting Information

Consultant Upgrade Date is an **ACTIVITY DATE TIME TYPE**.

It is the **DATE** that the **CONSULTANT** responsible for the care of the **PATIENT** (or an authorised member of the **CONSULTANT** team as defined by local policy) decided that the **PATIENT** should be upgraded onto an urgent **Cancer PATIENT PATHWAY**.

The **Consultant Upgrade Date** should only be recorded when the **PRIORITY TYPE** of the original **SERVICE REQUEST** was not **National Code 3 - Two Week Wait**.

Consultant upgrades are not allowed for **PATIENTS** who were urgently referred with suspected cancer from an **NHS Cancer Screening Programme** (where the **SOURCE OF REFERRAL FOR OUT-PATIENTS** was **National Code 17 - referral from a National Screening Programme**, and the **PRIORITY TYPE** of the **SERVICE REQUEST** was **National Code 2 -Urgent**). Therefore a **Consultant Upgrade Date** cannot be recorded in these circumstances.

The **Consultant Upgrade Date** must be on or before the **DECISION TO TREAT DATE** (if recorded).

The **Consultant Upgrade Date** must also be on or before the **MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER)** (if recorded).

MULTIDISCIPLINARY TEAM MEETING

Change to Supporting Information: New Supporting Information

A **Multidisciplinary Team Meeting** is a **CARE ACTIVITY**.

The following definition is used for the **National Cancer Waiting Times Monitoring Data Set**:

A **Multidisciplinary Team Meeting** is a meeting of the group of professionals from one or more clinical disciplines who together make decisions regarding recommended treatment of individual **PATIENTS**. **Multidisciplinary Teams** may specialise in certain conditions, such as **Cancer**. **Clinical decisions** are made based on reviews of clinical documentation such as case notes, test results, diagnostic imaging etc. The **PATIENT** may or may not be present.

NATIONAL CANCER WAITING TIMES MONITORING DATA SET OVERVIEW

Change to Supporting Information: Changed Description

Introduction

~~DSCN 22/2002 introduced a central electronic collection of patient level information to monitor waiting times in line with targets in the National Cancer Plan.~~ The **Cancer Reform Strategy (CRS)** introduced new and changed commitments in terms of service standards for cancer **PATIENTS** that must be met. The enhanced service standards are phased into operation over a period of time, as specified below:

- A maximum two month wait from referral from a cancer Screening Programme to first treatment for all cancers (from December 2008)
- A maximum two month wait from a CONSULTANTS decision to upgrade the urgency of a PATIENT they suspect to have cancer to first treatment for all cancers (from December 2008)
- A maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer where an anti-cancer drug regimen or surgery is the chosen CANCER TREATMENT MODALITY (from December 2008)
- A maximum two week wait from referral for general breast symptoms (where cancer is not initially suspected) to DATE FIRST SEEN (from December 2009)
- A maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer where radiotherapy is the chosen CANCER TREATMENT MODALITY (from December 2010)
- A maximum one month wait for all subsequent treatments for new cases of primary and recurrent cancer for all other CANCER TREATMENT MODALITIES (from December 2010)

DSCN 20/2008 expands upon and supersedes DSCN 22/2002, which introduced a central electronic collection of PATIENT level information to monitor waiting times in line with standards in the NHS Cancer Plan (2000). DSCN 20/2008 expands the scope of the data collection to support the new standards introduced by the Cancer Reform Strategy (2007), whilst maintaining the monitoring of the previous standards.

Reporting

QMCW The Cancer Waiting Times Database

The existing Quarterly Monitoring of Cancer Waits will be phased out when data outlined in the DSCN is submitted via a central database and the data is of an acceptable quality. Until notification otherwise, the Quarterly Monitoring of Cancer Waits must be submitted to the Department of Health. The existing Cancer Waiting Times Database (developed and maintained by NHS Connecting for Health) has been upgraded to support the collection of data outlined in DSCN 20/2008, and provides enhanced detailed reporting and data quality tools for the expanded data set.

Patient level information

Information is to be submitted onto a national database that has been developed and maintained by NHS Connecting for Health. The Trust first seeing a PATIENT in a particular month or quarter is responsible for ensuring that the mandated data fields, up to date first seen, are complete on the database by the national deadline. The Trust first treating a patient in a particular month or quarter is responsible for ensuring that the mandated data fields on that PATIENT are complete on the database by the national deadline. The Trust first seeing a PATIENT in a particular month or quarter is responsible for ensuring that the mandated data fields, up to Date First Seen, are complete on the database by the national deadline. The Trust first treating or giving subsequent treatment to a PATIENT in a particular month or quarter is responsible for ensuring that the mandated data fields on that PATIENT are complete on the database by the national deadline.

How the data set is transmitted

Information can be entered either manually through the Cancer Waiting Times Record screen or via the upload screen. The specification for the upload file is detailed in the 'National Cancer Waiting Times User Manual' available at [Cancer Waiting Times - Useful Documentation and Links](#). Information can be entered either manually through the Cancer Waiting Times Record screen or via the upload function. The specification for the upload file is detailed in the 'National Cancer Waiting Times User Manual' available at [Cancer Waiting Times - Useful Documentation and Links](#).

Security and Confidentiality

Security and confidentiality information to accompany the collection of this information is available at [Cancer Waiting Times - Useful Documentation and Link \(Security Section\)](#). Security and confidentiality information to accompany the collection of this information is available at [Cancer Waiting Times - Useful Documentation and Links](#).

~~Further guidance~~ Further guidance has been produced by the [Department of Health](#) and is available at [Cancer Waiting Times - Useful Documentation and Link \(Department of Health Section\)](#). **Further guidance**

Further guidance has been produced by the [Department of Health](#) and is available at [Cancer Waiting Times - Useful Documentation and Links](#)

REASONABLE OFFER

Change to Supporting Information: Changed Description

A [Reasonable Offer](#) is an [APPOINTMENT OFFER](#) or [OFFER OF ADMISSION](#) where the [REASONABLE OFFER INDICATOR](#) is National Code 1 - [Reasonable Offer](#).

An offer is reasonable where

- ~~the offer is for a time and date three or more weeks from the time that the offer was made.~~
- ~~or~~
- the offer is for a time and date three or more weeks from the time that the offer was made
- ~~or~~
- The [PATIENT](#) accepts the offer.

- **or**
- The **PATIENT** accepts the offer
- **or**
- the offer is for the first [Genitourinary Consultant Clinic Attendance](#) in a [Genitourinary Episode](#)
- the offer is for the first [Genitourinary Consultant Clinic Attendance](#) in a [Genitourinary Episode](#)
- **or**
- the offer is for any **APPOINTMENT** for treatment in a [Cancer Treatment Period](#)

REFERRAL TO TREATMENT PERIOD INCLUDED IN 18 WEEKS TARGET_ renamed from REFERRAL TO TREATMENT PERIOD INCLUDED IN TARGET

Change to Supporting Information: Changed Description, Name, Aliases

It is any [REFERRAL TO TREATMENT PERIOD](#) included in the reporting for the 18 weeks target.

It includes all [Cancer Referral To Treatment Periods](#).

It is all [Measured Referral to Treatment Periods](#) where the [SERVICE REQUEST](#) is to a [Consultant Led Service](#) or an [Interface Service](#) except:

- any [REFERRAL TO TREATMENT PERIODS](#) where the [PATIENT](#) did not attend their first [APPOINTMENT](#) during a [REFERRAL TO TREATMENT PERIOD](#) ([REFERRAL TO TREATMENT PERIOD STATUS](#) is National Code 33 did not attend - the [PATIENT](#) did not attend the first [CARE ACTIVITY](#) after the referral).
- any [REFERRAL TO TREATMENT PERIODS](#) where the [PATIENT](#) did not attend their first [APPOINTMENT](#) during a [REFERRAL TO TREATMENT PERIOD](#) ([REFERRAL TO TREATMENT PERIOD STATUS](#) is National Code - 33 Did not attend - the [PATIENT](#) did not attend the first [CARE ACTIVITY](#) after the referral)
- any [REFERRAL TO TREATMENT PERIODS](#) which are not commissioned by or on behalf of the English NHS

Two alternative approaches to calculating the duration of a [Measured Referral to Treatment Period](#) are defined in data elements [REFERRAL TO TREATMENT PERIOD DURATION \(UNADJUSTED\)](#) and [REFERRAL TO TREATMENT PERIOD DURATION \(ADJUSTED\)](#).

REFERRAL TO TREATMENT PERIOD INCLUDED IN 18 WEEKS TARGET_ renamed from REFERRAL TO TREATMENT PERIOD INCLUDED IN TARGET

Change to Supporting Information: Changed Description, Name, Aliases

- Changed Description
- Changed name from `Data_Dictionary.NHS_Business_Definitions.R.Referral_To_Treatment_Period_Included_In_Target` to `Data_Dictionary.NHS_Business_Definitions.R.Referral_To_Treatment_Period_Included_In_18_Weeks_Target`
- Alias Changes

| Name | Old Value | New Value |
|----------|--|---|
| plural | Referral To Treatment Periods Included In Target | Referral To Treatment Periods Included In 18 Weeks Target |
| formerly | | Referral To Treatment Period Included In Target |

ACTIVITY DATE TIME TYPE

Change to Attribute: Changed Description

The classification of a date or time that that defines the usage with regard to the [ACTIVITY](#).

An [ACTIVITY](#) may have many dates and times associated with it but may only have one date or time of a particular type.

National Codes:

Dates

- 01 [Angiogram Date](#)
- 02 [Arrival Date](#)
- 03 [Breast Assessment Date](#)
- 04 [Cancer Dental Assessment Date](#)
- 05 [Colorectal Or Stoma Nurse Seen Date](#)
- 06 [Coronary Angiography Date](#)
- 07 [CPA Review Date](#)
- 08 [Date Biopsy Taken](#)
- 09 [Discharge Date](#)
- 10 [Discharge Ready Date](#)

| | |
|----|---|
| 11 | End Date |
| 12 | Event Date |
| 13 | Expected Delivery Date |
| 14 | First Antenatal Assessment Date |
| 15 | Full Postnatal Examination Date |
| 16 | Initial Patient Contact Date |
| 17 | Investigation Transfer Date |
| 18 | IUD Application Date |
| 19 | IUD Fitted Date |
| 20 | Last Dosage Date |
| 21 | Mental Health Care Assessment Date |
| 22 | Miscarriage Date |
| 23 | Pathology Result Due Date |
| 24 | Patient Informed Biopsy Result Date |
| 25 | Patient Informed Of Outcome Date |
| 26 | Quit Date |
| 27 | Review Planned Date |
| 28 | Screening Result Date |
| 29 | Screening Result Sent Date |
| 30 | Specialist Palliative Care Date |
| 31 | Start Date |
| 32 | Symptoms First Noted Date |
| 33 | Attendance Date |
| 34 | Clinical Intervention Date |
| 35 | Immunisation Completion Date |
| 36 | Clinical Status Assessment Date |
| 37 | Dose Given Date |
| 38 | Test Date |
| 39 | Contact Date |
| 40 | Appointment Date |
| 41 | Primary Procedure Date |
| 42 | Second Operation Date |
| 43 | Speech and Swallowing Assessment Date |
| 44 | Third Operation Date |
| 45 | Date First Seen |
| 46 | Statutory Assessment Date |
| 47 | Screening Test Date |
| 48 | Genitourinary Care Contact Date |
| 66 | CONSULTANT UPGRADE DATE |

Note: This list is not in alphabetical order.

Times

| | |
|----|--|
| 50 | A and E ATTENDANCE CONCLUSION TIME |
| 51 | A and E DEPARTURE TIME |
| 52 | A and E INITIAL ASSESSMENT TIME |
| 53 | A and E TIME SEEN FOR TREATMENT |
| 54 | Arrival At Hospital Time |
| 55 | Arrival Time |
| 56 | End Time |
| 57 | Event Time |
| 58 | Initial Patient Contact Time |
| 59 | Last Dosage Time |
| 60 | Pathology Result Due Time |
| 61 | Start Time |
| 62 | Theatre Case Time In To Theatre Suite |
| 63 | Theatre Case Time Out Of Theatre |
| 64 | Theatre Case Time Out Of Theatre Suite |
| 65 | Time Seen |
| b1 | Discharge Ready Time |

Note: This list is not in alphabetical order.

CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS_ renamed from CANCER STATUS

Change to Attribute: Changed Description, Name, Aliases

~~This is to identify urgent [REFERRAL REQUESTS](#) from [GENERAL PRACTITIONERS](#) for suspected cancer who are subsequently diagnosed with~~

~~cancer.~~ **CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS** is recorded to enable tracking of the status of **REFERRAL REQUESTS** for **PATIENTS** referred with a suspected cancer, or referred with breast symptoms with cancer not originally suspected.

Where a diagnosis of cancer is subsequently made, data on **First Definitive Treatment** and subsequent treatments should be recorded for **PATIENTS** receiving treatment within the NHS in England. English NHS in this context refers to **Health Care Provider** Organisations within England who are treating **PATIENTS** with cancer (where the **PATIENTS** have **NHS NUMBERS** which exist on the Patient Demographic Service database, and which can be used within the **National Cancer Waiting Times Monitoring Data Set** for transmission purposes) who may have been referred from outside England. Further details can be found in **Department of Health** guidance at **Cancer Waiting Times Documentation and Links**.

Where **PATIENTS** with a diagnosis of cancer do NOT receive treatment within the NHS in England, or where the diagnosed condition is not within the **Department of Health** list of cancer conditions (see **Department of Health** guidance at **Cancer Waiting Times Documentation and Links**), further data need not be collected.

The classification has been listed in logical sequence rather than numeric order.

National Codes:

- 4 ~~suspected cancer~~
- 14 Suspected primary cancer
- 9 ~~no new cancer diagnosis identified by the Trust~~
- 09 Under investigation following symptomatic referral, cancer not suspected (breast referrals only) (see note 1)
- 5 ~~diagnosis of new cancer confirmed - treatment not yet planned~~
- 03 No new cancer diagnosis identified by the Healthcare Provider
- 7 ~~diagnosis of new cancer confirmed - no NHS treatment planned~~
- 10 Diagnosis of new cancer confirmed - first treatment not yet planned
- 8 ~~first treatment commenced (NHS only)~~
- 11 Diagnosis of new cancer confirmed - English NHS first treatment planned
- 07 Diagnosis of cancer confirmed - no English NHS treatment planned
- 08 First treatment commenced (English NHS only)
- 12 Diagnosis of new cancer confirmed - subsequent treatment not yet planned
- 13 Diagnosis of new cancer confirmed - subsequent English NHS treatment planned
- 21 Subsequent treatment commenced (English NHS only)
- 15 Suspected recurrent cancer
- 16 Diagnosis of recurrent cancer confirmed - first treatment not yet planned
- 17 Diagnosis of recurrent cancer confirmed - English NHS first treatment planned
- 18 Diagnosis of recurrent cancer confirmed - no English NHS treatment planned
- 19 Diagnosis of recurrent cancer confirmed - subsequent treatment not yet planned
- 20 Diagnosis of recurrent cancer confirmed - subsequent English NHS treatment planned

~~References:~~

~~The NHS National Cancer Waiting Times, Department of Health, DSCN 22/2002. Note 1: National Code 09 - Under investigation following symptomatic referral, cancer not suspected (breast referrals only) should only be used when the TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE is National Code 16 - Exhibited (non-cancer) breast symptoms - cancer not initially suspected.~~

CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS_ renamed from CANCER STATUS

Change to Attribute: Changed Description, Name, Aliases

- Changed Description
- Changed name from Data_Dictionary.Attributes.C.CANCER_STATUS to Data_Dictionary.Attributes.C.CANCER_OR_SYMPTOMATIC_BREAST_REFERRAL_PATIENT_STATUS
- Alias Changes

| Name | Old Value | New Value |
|----------|-----------------|--|
| plural | CANCER STATUSES | CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUSES |
| formerly | | CANCER STATUS |

CANCER REFERRAL TO TREATMENT PERIOD START DATE

Change to Attribute: New Attribute

The **Start Date** of a **Cancer Referral To Treatment Period**. This is a specific type of the attribute **ACTIVITY DATE**. A **CANCER REFERRAL TO**

TREATMENT PERIOD START DATE will be one of the following:

- The REFERRAL REQUEST RECEIVED DATE of the SERVICE REQUEST to secondary care by a GENERAL MEDICAL PRACTITIONER or GENERAL DENTAL PRACTITIONER where the PRIORITY TYPE of the SERVICE REQUEST was National Code 3 - *Two Week Wait*
- The ORIGINAL REFERRAL REQUEST RECEIVED DATE for the initial SERVICE REQUEST to secondary care where the PATIENT was subsequently upgraded onto a Cancer PATIENT PATHWAY. The CONSULTANT UPGRADE DATE will also be recorded.
- The REFERRAL REQUEST RECEIVED DATE for the SERVICE REQUEST into secondary care when the PATIENT was referred urgently for 'breast symptoms' (the PRIORITY TYPE of the SERVICE REQUEST is recorded as National Code 3 - *Two Week Wait*)
- The REFERRAL REQUEST RECEIVED DATE for the SERVICE REQUEST to an Assessment Clinic following the identification of an abnormality by an NHS Cancer Screening Service (the PRIORITY TYPE of the SERVICE REQUEST is recorded as National Code 2 - *Urgent*)
- The ORIGINAL REFERRAL REQUEST RECEIVED DATE for the initial SERVICE REQUEST to secondary care by an NHS Cancer Screening Service, where the PRIORITY TYPE of the SERVICE REQUEST is recorded as National Code 1 - *Routine*, and where the PATIENT was subsequently upgraded onto a Cancer PATIENT PATHWAY. The CONSULTANT UPGRADE DATE will also be recorded.

Note that for a SERVICE REQUEST received from the Choose and Book system, the referral is received when the PATIENT's Unique Booking Reference Number (UBRN) is used to book the first outpatient appointment slot (i.e. converted). See REFERRAL REQUEST RECEIVED DATE.

CANCER REFERRAL TO TREATMENT PERIOD START DATE

Change to Attribute: New Attribute

CANCER REFERRAL TO TREATMENT PERIOD START DATE

Data Elements:

CANCER REFERRAL TO TREATMENT PERIOD START DATE

CANCER TREATMENT EVENT TYPE

Change to Attribute: New Attribute

A classification of the stage of treatment reached during a Cancer PATIENT PATHWAY for primary, recurrent or metastatic cancer.

National Codes:

| | |
|----|--|
| 01 | First Definitive Treatment for a new primary cancer |
| 02 | Second or subsequent treatment for a new primary cancer |
| 03 | Treatment for a local recurrence of a primary cancer |
| 04 | Treatment for a regional recurrence of cancer |
| 05 | Treatment for a distant recurrence of cancer (metastatic disease) |
| 06 | Treatment for multiple recurrence of cancer (local and/or regional and/or distant) |
| 07 | First treatment for metastatic disease following an unknown primary |
| 08 | Second or subsequent treatment for metastatic disease following an unknown primary |
| 09 | Treatment for relapse of primary cancer (second or subsequent) |
| 10 | Treatment for progression of primary cancer (second or subsequent) |

CANCER TREATMENT EVENT TYPE

Change to Attribute: New Attribute

CANCER TREATMENT EVENT TYPE

Data Elements:

CANCER TREATMENT EVENT TYPE

CANCER TREATMENT MODALITY

Change to Attribute: New Attribute

A classification of the type of treatment or care which was delivered in a Cancer Treatment Period.

National Codes:

| | |
|----|---|
| 01 | Surgery |
| 02 | Anti-cancer drug regimen (Cytotoxic Chemotherapy) |

- 03 Anti-cancer drug regimen (Hormone Therapy)
- 04 Chemoradiotherapy
- 05 Teletherapy (Beam Radiation excluding Proton Therapy)
- 06 Brachytherapy
- 07 Specialist Palliative Care
- 08 Active Monitoring (excluding non-specialist Palliative Care)
- 09 Non-specialist Palliative Care (excluding Active Monitoring)
- 10 Radio Frequency Ablation (RFA)
- 11 High Intensity Focussed Ultrasound (HIFU)
- 12 Cryotherapy
- 13 Proton Therapy
- 14 Anti-cancer drug regimen (other)
- 15 Anti-cancer drug regimen (Immunotherapy)
- 16 Light Therapy (including Photodynamic Therapy and Psoralen and Ultra Violet A (PUVA) Therapy)
- 17 Hyperbaric Oxygen Therapy
- 18 Other Treatment
- 98 All treatment declined

CANCER TREATMENT MODALITY

Change to Attribute: New Attribute

CANCER TREATMENT MODALITY

Data Elements:

CANCER TREATMENT MODALITY

CANCER TREATMENT PERIOD START DATE

Change to Attribute: New Attribute

The DATE when a Cancer Treatment Period is started.

The CANCER TREATMENT PERIOD START DATE will be either:

- the DECISION TO TREAT DATE - the DATE that a PATIENT agrees a treatment plan for either first or subsequent treatments within a Cancer Care Plan. An individual PATIENT may have multiple DECISION TO TREAT DATES; or
- the EARLIEST CLINICALLY APPROPRIATE DATE - where there is no new DECISION TO TREAT DATE, but there has been a previously agreed and clinically appropriate period of delay. In this case the subsequent ACTIVITY may not be the final treatment, but could be the next APPOINTMENT which deals with the planning of subsequent treatments.

CANCER TREATMENT PERIOD START DATE

Change to Attribute: New Attribute

CANCER TREATMENT PERIOD START DATE

Data Elements:

CANCER TREATMENT PERIOD START DATE

CLINICAL TRIAL INDICATOR

Change to Attribute: New Attribute

CLINICAL TRIAL INDICATOR is used to record whether an individual episode of care within a Cancer Care Spell is being delivered to a PATIENT as part of a CLINICAL TRIAL.

National codes:

- 01 PATIENT is taking part in a CLINICAL TRIAL
- 02 PATIENT is not taking part in a CLINICAL TRIAL

CLINICAL TRIAL INDICATOR

Change to Attribute: New Attribute

CLINICAL TRIAL INDICATOR

Data Elements:

| |
|--------------------------|
| CLINICAL TRIAL INDICATOR |
|--------------------------|

DELAY REASON COMMENT

Change to Attribute: Changed Description

A comment on the reason why a [Cancer Care Spell Delay](#) was experienced with regard to a [Cancer Care Spell](#). ~~This must be recorded for each breach of existing standards after any adjustments have been made.~~ This must be recorded for each breach of existing service standards (introduced by the NHS Cancer Plan (2000)) and the extended service standards (as specified within the Cancer Reform Strategy (2007)) after any patient pauses have been taken into account.

~~The standards which will be in place at the end of 2002 are:~~ The standards for which a DELAY REASON COMMENT must be given are:

- ~~maximum two week wait for an urgent GENERAL PRACTITIONER referral for suspected cancer to date first seen for all suspected cancers~~
- maximum two week wait** for an urgent GENERAL PRACTITIONER referral for suspected cancer to Date First Seen for all suspected cancers
- ~~maximum one month wait from urgent GENERAL PRACTITIONER referral for suspected cancer to first definitive treatment for testicular cancer (ICD code C62), acute leukaemia (ICD codes C91.0, C92.0, C92.4, C92.5, C93.0, C94.2, C95.0) and children's cancer (under 16 years of age at date of first definitive treatment)~~
- maximum one month** wait from urgent GENERAL PRACTITIONER referral for suspected cancer to First Definitive Treatment for testicular cancer, acute leukaemia and children's cancer (under 16 years of age at date of First Definitive Treatment)*
- ~~maximum two month wait from urgent GENERAL PRACTITIONER referral for suspected cancer to first definitive treatment for breast cancer (ICD codes C50 and D05)~~
- maximum two month wait** from urgent GENERAL PRACTITIONER referral for suspected cancer to First Definitive Treatment for all cancers
- ~~maximum one month wait from decision to treat to first definitive treatment for breast cancer (ICD codes C50 and D05)~~
- maximum one month wait** from CANCER TREATMENT PERIOD START DATE (DECISION TO TREAT DATE) to First Definitive Treatment for all cancers
- maximum 31-day wait from CANCER TREATMENT PERIOD START DATE (DECISION TO TREAT DATE or EARLIEST CLINICALLY APPROPRIATE DATE) to the start of second or subsequent treatment for all cancers, where the CANCER TREATMENT MODALITY is radiotherapy (teletherapy, brachytherapy or proton therapy)
- maximum 31-day wait from CANCER TREATMENT PERIOD START DATE (DECISION TO TREAT DATE or EARLIEST CLINICALLY APPROPRIATE DATE) to start of second or subsequent treatment for all cancers where the CANCER TREATMENT MODALITY is surgery
- maximum 31-day wait from CANCER TREATMENT PERIOD START DATE (DECISION TO TREAT DATE or EARLIEST CLINICALLY APPROPRIATE DATE) to start of second or subsequent treatment for all cancers where the CANCER TREATMENT MODALITY is an anti-cancer drug regimen (cytotoxic chemotherapy, hormone therapy, immunotherapy or other drug regimen)
- maximum 31-day wait from CANCER TREATMENT PERIOD START DATE (DECISION TO TREAT DATE or EARLIEST CLINICALLY APPROPRIATE DATE) to start of second or subsequent treatment for all cancers where the CANCER TREATMENT MODALITY is other than anti-cancer drug regimen, surgery or radiotherapy.
- maximum 62-day wait from referral for suspected cancer from an NHS Cancer Screening Programme to First Definitive Treatment for breast, bowel and cervical cancers*
- maximum 62-day wait from a decision to upgrade the priority of a PATIENT by a CONSULTANT (or authorised member of a CONSULTANT team) to First Definitive Treatment
- maximum two week wait** for an urgent referral for breast symptoms (where cancer is not initially suspected) to DATE FIRST SEEN.

~~References:~~

~~The NHS National Cancer Waiting Times, Department of Health, DSCN 22/2002.*~~ Breast, bowel, cervical and testicular cancer, along with acute leukaemia are defined by ICD-10 coding - see Department of Health guidance at Cancer Waiting Times Documentation and Links.

** For the performance management and the requirement to record a DELAY REASON COMMENT for the above service standards, the following standardised time periods have been identified:

| Time Period | Number of Calendar Days |
|-------------|-------------------------|
| Two Weeks | 14 |
| One Month | 31 |

DELAY REASON INDICATOR

Change to Attribute: Changed Description

A classification of the delay periods for cancer waiting targets, as specified in the NHS National Cancer Waiting Times. A classification of the delay periods for cancer waiting time service standards, as specified in the National Cancer Waiting Times Monitoring Data Set requirements.

Classification:

- ~~a.~~ delay between urgent GP referral and date first seen
- a. delay between CANCER REFERRAL TO TREATMENT PERIOD START DATE and DATE FIRST SEEN, where PRIORITY TYPE is National Code 3 'Two Week Wait'
- ~~b.~~ delay between urgent GP referral and date of first definitive treatment
- b. delay between CANCER REFERRAL TO TREATMENT PERIOD START DATE and TREATMENT START DATE (CANCER), where PRIORITY TYPE is National Code 3 'Two Week Wait' and CANCER TREATMENT EVENT TYPE is National Code 01 'First treatment for a new primary cancer' or 07 'First treatment for metastatic disease following an unknown primary'
- ~~c.~~ delay between decision to treat and first treatment
- c. delay between CANCER REFERRAL TO TREATMENT PERIOD START DATE and TREATMENT START DATE (CANCER), where PRIORITY TYPE is National Code 2 'Urgent' and SOURCE OF REFERRAL FOR OUT-PATIENTS is National Code 17 'Referral from an NHs Screening Programme' and CANCER TREATMENT EVENT TYPE is National Code 01 'First treatment for a new primary cancer'
- d. delay between CANCER TREATMENT PERIOD START DATE and TREATMENT START DATE (CANCER), where CANCER TREATMENT EVENT TYPE is National Code 01 'First treatment for a new primary cancer' or 07 'First treatment for metastatic disease following an unknown primary'
- e. delay between CONSULTANT UPGRADE DATE and TREATMENT START DATE (CANCER), where CANCER TREATMENT EVENT TYPE is National Code 01 'First treatment for a new primary cancer' or 07 'First treatment for metastatic disease following an unknown primary'
- f. delay between CANCER TREATMENT PERIOD START DATE and TREATMENT START DATE (CANCER), where CANCER TREATMENT EVENT TYPE is NOT National Code 01 'First treatment for a new primary cancer' OR 07 'First treatment for metastatic disease following an unknown primary'

DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS) renamed from DELAY REASON REFERRAL TO FIRST SEEN (CANCER)

Change to Attribute: Changed Description, Name

A classification of the reason why a Cancer Care Spell Delay was experienced with regard to a Cancer Care Spell if the delay occurred between referral and when the PATIENT was first seen and where the referral was an urgent REFERRAL REQUEST for suspected cancer. A classification of the reason why a delay occurred between the CANCER REFERRAL TO TREATMENT PERIOD START DATE and the DATE FIRST SEEN, when the PRIORITY TYPE of the SERVICE REQUEST was National Code 3 - Two Week Wait.

This is the reason why the Provider was unable to offer a date within the target time. This is the reason why the Health Care Provider was unable to provide an APPOINTMENT DATE within the service standard of two weeks.

National Codes:

- 01 Clinic cancellation
- ~~02~~ Out-patient capacity inadequate (i.e. no cancelled clinic, but not enough slots for this PATIENT)
- 02 Out-patient capacity inadequate (i.e. no cancelled clinic, but not enough slots for this PATIENT)
- 03 Administrative delay (e.g. failed to be rebooked after Did Not Attend, lost referral)
- 04 Referral not received within 24 hours
- ~~99~~ Other
- 99 Other reason

References:

The NHS National Cancer Waiting Times, Department of Health, DSCN 22/2002. Note: If National Code 99 - Other reason is used, further detail must be recorded for the precise cause of the delay, within DELAY REASON COMMENT (FIRST SEEN).

DELAY REASON TO TREATMENT (CANCER)

Change to Attribute: Changed Description

A classification of the reason why a Cancer Care Spell Delay was experienced with regard to a Cancer Care Spell. The National Codes to be used are the same for both the delay between referral and treatment for cancer and the delay between the decision to treat and treatment for cancer. The national codes to be used are the same for delays between:

~~This is the reason why the Provider was unable to offer a date within the target time. **CANCER REFERRAL TO TREATMENT PERIOD START DATE** and **TREATMENT START DATE (CANCER)**~~

~~DECISION TO TREAT DATE and **TREATMENT START DATE (CANCER)**~~

~~CONSULTANT UPGRADE DATE and **TREATMENT START DATE (CANCER)**.~~

~~This is the reason why the Health Care Provider was unable to offer a DATE within the service standard (31 days between **DECISION TO TREAT DATE** and **TREATMENT START DATE (CANCER)**, and **CONSULTANT UPGRADE DATE** and **TREATMENT START DATE (CANCER)**; or 62 days between the **CANCER REFERRAL TO TREATMENT PERIOD START DATE** and **TREATMENT START DATE (CANCER)**).~~

National Codes:

- ~~+~~ **Clinic cancellation**
- 01 Clinic cancellation
- ~~±~~ **Out-patient capacity inadequate (i.e. no cancelled clinic, but not enough slots for this PATIENT)**
- 02 Out-patient capacity inadequate (i.e. no cancelled clinic, but not enough slots for this PATIENT)
- ~~⇒~~ **Administrative delay (e.g. failed to be rebooked after Did Not Attend, lost referral)**
- 03 Administrative delay (e.g. failed to be rebooked after Did Not Attend, lost referral)
- ~~+~~ **Elective cancellation (for non-medical reason)**
- 04 Elective cancellation (for non-medical reason)
- ~~±~~ **Elective capacity inadequate (patient unable to be scheduled for treatment within target time)**
- 05 Elective capacity inadequate (patient unable to be scheduled for treatment within standard time)
- ~~⚡~~ **Delay in diagnostic test(s) (delay caused by wait for diagnostic test(s))**
- 06 Delay to diagnostic test or treatment planning
- ~~7~~ **Complex diagnostic pathway (many, or complex, diagnostic tests required)**
- 07 Complex diagnostic pathway (many, or complex, diagnostic tests required)
- ~~⊕~~ **Delay due to referral between Trusts**
- 08 Delay due to referral between Trusts
- 99 Other reason

~~References:~~

~~The NHS National Cancer Waiting Times, Department of Health, DSCN 22/2002~~ If National Code 99 - *Other reason* is used, the reason must be explained within **DELAY REASON COMMENT (CONSULTANT UPGRADE)**, **DELAY REASON COMMENT (REFERRAL TO TREATMENT)** or **DELAY REASON COMMENT (DECISION TO TREATMENT)** as appropriate.

METASTATIC SITE

Change to Attribute: New Attribute

This is the site of the metastatic disease. It is used to identify metastatic disease relating to the **PRIMARY DIAGNOSIS (ICD)**.

National Codes:

- 01 Bone
- 02 Brain
- 03 Liver
- 04 Lung
- 05 Other metastatic site
- 06 Multiple metastatic sites
- 07 Unknown metastatic site

METASTATIC SITE

Change to Attribute: New Attribute

METASTATIC SITE

Data Elements:

METASTATIC SITE

MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER)_ renamed from **MULTIDISCIPLINARY TEAM DISCUSSION DATE**

Change to Attribute: Changed Description, Name

The date on which a **PATIENT's Cancer Care Plan** was discussed by a multidisciplinary team specialising in cancer. The **Cancer Care Plan** may be drawn up at the meeting or the meeting may discuss a plan drawn up prior to the meeting. A multidisciplinary team meeting is a regularly held meeting of the group of professionals who together make decisions regarding recommended treatment of individual **PATIENTS**, which can therefore be regarded as multidisciplinary. This is the date that a **Multidisciplinary Team Meeting** was held.

References:

The NHS Cancer Plan, **Department of Health**, published September 2000. For the National Cancer Waiting Times Monitoring Data Set, this is the DATE of the **Multidisciplinary Team Meeting** where a **Cancer Care Plan** (which was subsequently agreed with the **PATIENT**) was discussed.

PRIORITY TYPE

Change to Attribute: Changed Description

This is the priority of a request for services; in the case of services to be provided by a **CONSULTANT**, it is as assessed by or on behalf of the **CONSULTANT**.

Priority Type 'Urgent' should be used where the request for services is defined as clinically urgent, but it does not fall under the criteria for Two Week Wait GP referrals for suspected cancer. Priority Type 'Urgent' should be used where the request for services is defined as clinically urgent, but it does not fall under the criteria for 'Two Week Wait' (see below).

Priority Type 'Two Week Wait' should only be used where the request for services meets the criteria for an urgent **GENERAL PRACTITIONER** referral for suspected cancer. These are defined in **Department of Health** Guidance 'Cancer Waiting Targets - A Guide (version 4)'. Priority Type 'Two Week Wait' should be used where either:

the request for services meets the criteria for an urgent **GENERAL PRACTITIONER** referral for suspected cancer. These referrals should be made in accordance with the National Institute for Health and Clinical Excellence (NICE) clinical guidelines on referral for suspected cancer. See **NICE guidance**

or

the **PATIENT** has been referred urgently for breast symptoms, but the referral does not meet the criteria for urgent **GENERAL PRACTITIONER** referrals for suspected cancer

National Codes:

- 1 Routine
- 2 Urgent
- 3 Two Week Wait

RADIOTHERAPY INTENT

Change to Attribute: New Attribute

This is the intent of the delivered beam radiation for **PATIENTS** with a cancer **PRIMARY DIAGNOSIS (ICD)** within the range C00 to C97 or D05, as defined by the **Department of Health** (see **Department of Health** guidance at **Cancer Waiting Times Documentation and Links**), where the **CANCER TREATMENT MODALITY** recorded is National Code 05 - *Teletherapy (Beam radiation excluding Proton Therapy)*.

National Codes:

- 01 Palliative
- 02 Anti-cancer
- 03 Other

RADIOTHERAPY INTENT

Change to Attribute: New Attribute

RADIOTHERAPY INTENT

Data Elements:

| |
|---------------------|
| RADIOTHERAPY INTENT |
|---------------------|

SOURCE OF REFERRAL FOR OUT-PATIENTS

Change to Attribute: Changed Description

A **CLASSIFICATION** which is used to identify the source of referral of each **Consultant Out-Patient Episode**. A classification which is used to identify the source of referral of each **Consultant Out-Patient Episode**.

National Codes:

~~The codes 01, 02, 10, 11 and 05 below in italics are not to be used in reporting National Cancer Waiting Times.~~

Initiated by the **CONSULTANT** responsible for the **Consultant Out-Patient Episode**

- ~~01~~ *following an emergency admission*
- 01 following an emergency admission
- ~~02~~ *following a Domiciliary Consultation*
- 02 following a Domiciliary Consultation
- ~~10~~ *following an Accident And Emergency Attendance (including Minor Injuries Units and Walk In Centres)*
- 10 following an Accident And Emergency Attendance (including Minor Injuries Units and Walk In Centres)
- ~~11~~ *other - initiated by the CONSULTANT responsible for the Consultant Out-Patient Episode*
- 11 other - initiated by the **CONSULTANT** responsible for the **Consultant Out-Patient Episode**

Not initiated by the **CONSULTANT** responsible for the **Consultant Out-Patient Episode**

- 03 referral from a **GENERAL MEDICAL PRACTITIONER**
- 92 referral from a **GENERAL DENTAL PRACTITIONER**
- 12 referral from a **GENERAL PRACTITIONER** with Special Interest
- 04 referral from an **Accident And Emergency Department** (including Minor Injuries Units and Walk In Centres)
- ~~05~~ *referral from a CONSULTANT, other than in an Accident And Emergency Department*
- 05 referral from a **CONSULTANT**, other than in an **Accident And Emergency Department**
- 06 self-referral
- 07 referral from a Prosthetist
- 13 referral from a Specialist Nurse (Secondary Care)
- 14 referral from an Allied Health Professional
- 15 referral from an Optometrist
- 16 referral from an Orthoptist
- 17 referral from a National **Screening Programme**
- 93 referral from a Community Dental Service
- 97 other - not initiated by the **CONSULTANT** responsible for the **Consultant Out-Patient Episode**

Note: The classification has been listed in logical sequence rather than numeric order.

Where a **PATIENT** is referred by a **GENERAL PRACTITIONER** acting in the capacity of **GENERAL PRACTITIONER** with Special Interest, code 12 should be used. Where a **PATIENT** is referred by that **GENERAL PRACTITIONER** acting in their capacity as an ordinary **GENERAL MEDICAL PRACTITIONER**, or as an ordinary **GENERAL DENTAL PRACTITIONER**, code 03 or code 92 should be used as appropriate. Where a **PATIENT** is referred by a **GENERAL PRACTITIONER** acting in the capacity of **GENERAL PRACTITIONER** with Special Interest, National Code 12 - *referral from a GENERAL PRACTITIONER with Special Interest* should be used. Where a **PATIENT** is referred by that **GENERAL PRACTITIONER** acting in their capacity as an ordinary **GENERAL MEDICAL PRACTITIONER**, or as an ordinary **GENERAL DENTAL PRACTITIONER**, National Code 03 - *referral from a GENERAL MEDICAL PRACTITIONER* or National Code 92 - *referral from a GENERAL DENTAL PRACTITIONER* should be used as appropriate.

~~Two Week Wait Referrals made by Specialist Nurses in Primary Care, under the authority of the GENERAL MEDICAL PRACTITIONER leading their team, should continue to be classified as referrals from the GENERAL PRACTITIONER (code 03). Referrals from Specialist Nurses in Secondary Care should be classified as code 13.~~ Two Week Wait Referrals made by Specialist Nurses in Primary Care, under the authority of the **GENERAL MEDICAL PRACTITIONER** leading their team, should continue to be classified as referrals from the **GENERAL PRACTITIONER** (National Code 03 - *referral from a GENERAL MEDICAL PRACTITIONER*). Referrals from Specialist Nurses in Secondary Care should be classified as National Code 13 - *referral from a Specialist Nurse (Secondary Care)*.

~~References:~~

The NHS National Cancer Waiting times, [Department of Health](#), DSGN 22/2002

TREATMENT START DATE (CANCER)

Change to Attribute: New Attribute

This is the **Start Date** of the first, second or subsequent cancer treatment given to a **PATIENT** who is receiving care for a cancer condition, with a **PRIMARY DIAGNOSIS (ICD)** code within the range C00 to C97 or D05 as defined by the [Department of Health](#) (see [Department of Health guidance at Cancer Waiting Times Documentation and Links](#)).

If the **CANCER TREATMENT MODALITY** given is National Code 01 - *Surgery*, the **TREATMENT START DATE (CANCER)** is the same as **START DATE (HOSPITAL PROVIDER SPELL)** of the related admission.

TREATMENT START DATE (CANCER) is also the **END DATE** of a **Cancer Treatment Period**.

A Cancer Referral To Treatment Period will end on the same date as the TREATMENT START DATE (CANCER) where First Definitive Treatment is given, unless cancer was discounted when the PATIENT was first seen (in which case the Cancer Referral To Treatment Period is ended at DATE FIRST SEEN).

If a PATIENT declines all treatment (CANCER TREATMENT MODALITY is recorded as National Code 98 - All treatment declined) then the TREATMENT START DATE (CANCER) should be recorded as the DATE upon which the PATIENT made this decision.

TREATMENT START DATE (CANCER)

Change to Attribute: New Attribute

TREATMENT START DATE (CANCER)

Data Elements:

| |
|-------------------------------|
| TREATMENT START DATE (CANCER) |
|-------------------------------|

TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE_ renamed from URGENT CANCER REFERRAL TYPE

Change to Attribute: Changed Description, Name, Aliases

The type of suspected cancer for which an urgent referral is made. The site where cancer is suspected by the GENERAL MEDICAL PRACTITIONER or GENERAL DENTAL PRACTITIONER on referral, or, for PATIENTS who are upgraded to an urgent breast cancer PATIENT PATHWAY, identifies that the PATIENT was initially referred on the basis of exhibited (non-cancer) breast symptoms.

National Codes:

- 01 Suspected breast cancer
- ~~02 Suspected children's cancer*~~
- 02 Suspected children's cancer (see note 1)
- 03 Suspected lung cancer
- 04 Suspected haematological malignancies excluding acute leukaemia
- 05 Suspected acute leukaemia
- 06 Suspected upper gastrointestinal cancers
- 07 Suspected lower gastrointestinal cancers
- 08 Suspected skin cancers
- 09 Suspected gynaecological cancers
- 10 Suspected brain or central nervous system tumours
- 11 Suspected urological cancers (excluding testicular)
- 12 Suspected testicular cancer
- 13 Suspected head and neck cancers
- 14 Suspected sarcomas
- 15 Other suspected cancer
- 16 Exhibited (non-cancer) breast symptoms - cancer not initially suspected (see note 2)

~~*Children's cancer is defined as a cancer suspected in a patient who is under 16 years at the CANCER REFERRAL DECISION DATE.~~ Note 1: For monitoring of the cancer Two Week Wait standard, a child is defined as under the age of 16 years at the CANCER REFERRAL TO TREATMENT PERIOD START DATE.

Note 2: National Code 16 - Exhibited (non-cancer) breast symptoms - cancer not initially suspected is only to be used where a PATIENT has been referred on the basis of exhibited breast symptoms, but those symptoms do not place the PATIENT within the scope of the referral guidelines that specify that an urgent referral for suspected cancer from a GENERAL MEDICAL PRACTITIONER or GENERAL DENTAL PRACTITIONER must be made.

TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE_ renamed from URGENT CANCER REFERRAL TYPE

Change to Attribute: Changed Description, Name, Aliases

- Changed Description
- Changed name from Data_Dictionary.Attributes.U.URGENT_CANCER_REFERRAL_TYPE to Data_Dictionary.Attributes.T.Tran.TWO_WEEK_WAIT_CANCER_OR_SYMPTOMATIC_BREAST_REFERRAL_TYPE
- Alias Changes

| Name | Old Value | New Value |
|------|-----------|-----------|
| | | |

| | | |
|----------|------------------------------|--|
| plural | URGENT CANCER REFERRAL TYPES | URGENT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPES |
| formerly | | URGENT CANCER REFERRAL TYPE |

WAITING TIME ADJUSTMENT REASON

Change to Attribute: Changed Description

~~The prime reason for an adjustment to waiting time.~~ The prime reason for an adjustment to waiting time in the National Cancer Waiting Times Monitoring Data Set. Where there is more than one adjustment applicable, this should be the reason for the longest adjustment. This item can be derived and the following values are to be used:

National Codes:

Out-patient services

- 4 ~~No adjustment to waiting time~~
- 2 ~~PATIENT cancellation.~~ Out-Patient Appointment where the ATTENDED OR DID NOT ATTEND is National Code 2 '*Appointment cancelled by the patient*'
- 3 ~~Did Not Attend.~~ Out-Patient Appointment where the ATTENDED OR DID NOT ATTEND is National Code 3 '*Did Not Attend - no advance warning given*' or 7 '*Patient arrived late and could not be seen*'
- 4 ~~PATIENT choice.~~ when a PATIENT refuses an appointment within two weeks before an offer of an appointment is made, if the REFERRAL REQUEST has a TWO-WEEK WAIT EXCLUSION INDICATOR classification of b '*Excluded - PATIENT refused an appointment within 2 weeks before being offered an appointment*' an adjustment must be made so that the wait is calculated from the DATE FIRST SEEN and not CANCER REFERRAL DECISION DATE i.e. in this case the calculated wait will always be 0 days and the adjustment will be the number of days between CANCER REFERRAL DECISION DATE and DATE FIRST SEEN.
- 3 ~~Did Not Attend.~~ Out-Patient Appointment where the ATTENDED OR DID NOT ATTEND is National Code 3 - '*Did Not Attend - no advance warning given*' or National Code 7 - '*Patient arrived late and could not be seen*'

In-patient services

- 4 ~~No adjustment to waiting time~~
- 8 Patient pause - the PATIENT is paused on the ELECTIVE ADMISSION LIST because they have made themselves unavailable for treatment for a specified period (because of family reasons, holidays etc)
- 5 ~~Self deferral.~~ OFFER OF ADMISSION with an ADMISSION OFFER OUTCOME of National Code 2 '*Admission cancelled by, or on behalf of, the patient*' or 4 '*Patient failed to arrive*'
- 6 ~~Suspension - medical reasons.~~ a patient with an Elective Admission Suspension Detail where the ELECTIVE ADMISSION SUSPENSION INITIATOR classification is a '*Initiated by CONSULTANT for medical reasons including waiting match for tissue/organ transplants*'
- 7 ~~Suspension - patient reasons.~~ a patient with an Elective Admission Suspension Detail where the ELECTIVE ADMISSION SUSPENSION INITIATOR classification is b '*initiated by PATIENT*' because they are unavailable for treatment for a specified period because of family commitments, holidays or other reasons

Where there has been no adjustment to waiting time, default code 9 - *no adjustment to waiting time* should be used.

CANCER CARE SETTING (TREATMENT)

Change to Data Element: New Data Element

| | |
|-----------------|--------------|
| Format/length: | an2 |
| HES item: | |
| National Codes: | |
| Default Codes: | 99 - unknown |

Notes:

This is the type of care setting where the cancer care relating to the TREATMENT START DATE (CANCER) took place.

Where the care is delivered during a Hospital Provider Spell, distinction is made between care delivered as part of an ordinary admission (where the PATIENT CLASSIFICATION is National Code 1 - *Ordinary Admission*) and a day case admission (where PATIENT CLASSIFICATION is National Code 2 - *Day case admission*).

National codes:

- 01 Cancer treatment delivered as part of a Hospital Provider Spell (where PATIENT CLASSIFICATION is National code 1 - *Ordinary admission*)
- 02 Cancer treatment delivered as part of a Hospital Provider Spell (where PATIENT CLASSIFICATION is National Code 2 - *Day case admission*)
- 03 Cancer treatment delivered in an Out-patient setting
- 04 Cancer treatment delivered in another care setting

CANCER CARE SETTING (TREATMENT)

Change to Data Element: New Data Element

CANCER CARE SETTING (TREATMENT)

Attribute:

There are no data links on this item.

CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS_ renamed from CANCER STATUS

Change to Data Element: Changed Description, Name, Aliases

| | |
|-----------------|---|
| Format/length: | n+ |
| Format/length: | an2 |
| HES item: | |
| National Codes: | Click on the attribute tab to display the attribute that contains the National Codes. |
| Default Codes: | |

Notes:

This is the same as attribute [CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS](#).

CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS_ renamed from CANCER STATUS

Change to Data Element: Changed Description, Name, Aliases

- Changed Description
- Changed name from `Data_Dictionary.Data_Field_Notes.C.CANCER_STATUS` to `Data_Dictionary.Data_Field_Notes.C.CANCER_OR_SYMPTOMATIC_BREAST_REFERRAL_PATIENT_STATUS`
- Alias Changes

| Name | Old Value | New Value |
|----------|-----------------|--|
| plural | CANCER STATUSES | CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUSES |
| formerly | | CANCER STATUS |

CANCER REFERRAL DECISION DATE

Change to Data Element: Changed Description

| | |
|-----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

CANCER REFERRAL PRIORITY TYPE

Change to Data Element: Changed Description

| | |
|-----------------|---|
| Format/length: | n2 |
| HES item: | |
| National Codes: | Click on the attribute tab to display the attribute that contains the National Codes. |
| Default Codes: | |

Notes:

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

CANCER REFERRAL TO TREATMENT PERIOD START DATE

Change to Data Element: New Data Element

| | |
|-----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

This is the same as attribute [CANCER REFERRAL TO TREATMENT PERIOD START DATE](#).

CANCER REFERRAL TO TREATMENT PERIOD START DATE

Change to Data Element: New Data Element

CANCER REFERRAL TO TREATMENT PERIOD START DATE

Attribute:

| |
|--|
| CANCER REFERRAL TO TREATMENT PERIOD START DATE |
|--|

CANCER SPECIALIST REFERRAL DATE

Change to Data Element: Changed Description

| | |
|-----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

[CANCER SPECIALIST REFERRAL DATE](#) may be the same date as [CANCER REFERRAL DECISION DATE](#) if the initial referral was direct to an appropriate specialist for the cancer.

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

CANCER TREATMENT EVENT TYPE

Change to Data Element: New Data Element

| | |
|-----------------|---|
| Format/length: | an2 |
| HES item: | |
| National Codes: | Click on the attribute tab to display the attribute that contains the National Codes. |
| Default Codes: | |

Notes:

This is the same as attribute [CANCER TREATMENT EVENT TYPE](#).

CANCER TREATMENT EVENT TYPE

Change to Data Element: New Data Element

CANCER TREATMENT EVENT TYPE

Attribute:

| |
|--|
| |
|--|

CANCER TREATMENT EVENT TYPE

CANCER TREATMENT MODALITY

Change to Data Element: New Data Element

| | |
|-----------------|---|
| Format/length: | n2 |
| HES item: | |
| National Codes: | Click on the attribute tab to display the attribute that contains the National Codes. |
| Default Codes: | |

Notes:

This is the same as attribute [CANCER TREATMENT MODALITY](#).

CANCER TREATMENT MODALITY

Change to Data Element: New Data Element

CANCER TREATMENT MODALITY

Attribute:

CANCER TREATMENT MODALITY

CANCER TREATMENT PERIOD START DATE

Change to Data Element: New Data Element

| | |
|-----------------|---|
| Format/length: | see DATE |
| HES item: | |
| National Codes: | Click on the attribute tab to display the attribute that contains the National Codes. |
| Default Codes: | |

Notes:

This is the same as attribute [CANCER TREATMENT PERIOD START DATE](#).

CANCER TREATMENT PERIOD START DATE

Change to Data Element: New Data Element

CANCER TREATMENT PERIOD START DATE

Attribute:

CANCER TREATMENT PERIOD START DATE

CLINICAL INTERVENTION DATE (FIRST DIAGNOSTIC TEST)

Change to Data Element: Changed Description

| | |
|-----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

This is the [Clinical Intervention Date](#) of the [CLINICAL INTERVENTION](#) with [FIRST CANCER DIAGNOSTIC TEST](#) of classification a. 'first diagnostic test' resulting from the [REFERRAL REQUEST](#).

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Clinical Intervention Date](#) is an [ACTIVITY DATE TIME](#) where the [ACTIVITY DATE TIME TYPE](#) is National Code 34 '*Clinical Intervention Date*'

CLINICAL TRIAL INDICATOR

Change to Data Element: New Data Element

| | |
|-----------------|--------------|
| Format/length: | an2 |
| HES item: | |
| National Codes: | |
| Default Codes: | 99 - unknown |

Notes:

This is the same as attribute [CLINICAL TRIAL INDICATOR](#).

CLINICAL TRIAL INDICATOR

Change to Data Element: New Data Element

CLINICAL TRIAL INDICATOR

Attribute:

| |
|--|
| CLINICAL TRIAL INDICATOR |
|--|

CONSULTANT UPGRADE DATE

Change to Data Element: New Data Element

| | |
|-----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

See [Consultant Upgrade Date](#).

CONSULTANT UPGRADE DATE

Change to Data Element: New Data Element

CONSULTANT UPGRADE DATE

Attribute:

| |
|-------------------------------|
| ACTIVITY DATE |
|-------------------------------|

DATE FIRST SEEN

Change to Data Element: Changed Description, Aliases

| | |
|-----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

This is the date that the [PATIENT](#) is first seen in the Trust that receives the first referral. ~~This data element is mandatory for patients referred urgently by their GP for suspected cancer but can also be applied to other patients.~~ This data element is mandatory for [PATIENTS](#) referred urgently by their [GENERAL PRACTITIONER](#) for suspected cancer but can also be applied to other [PATIENTS](#). The date will be one of the following, whichever is the earliest [SERVICE](#) relating to the [REFERRAL REQUEST](#):

- ~~first out-patient appointment; this is the [Attendance Date](#) of the first [Out Patient Attendance Consultant](#)~~

- first Out-Patient Appointment; this is the Attendance Date of the first Out-Patient Attendance Consultant
- first diagnostic procedure if this precedes the first out patient appointment; this is the first Clinical Intervention Date of the Imaging Or Radiodiagnostic Event or CLINICAL INTERVENTION
- first diagnostic procedure if this precedes the first Out-Patient Appointment; this is the first Clinical Intervention Date of the Imaging Or Radiodiagnostic Event or CLINICAL INTERVENTION
- first seen as an emergency; this is the Start Date of the Hospital Provider Spell or the Arrival Date of the Accident And Emergency Attendance
- first seen following recall by screening unit; this is the Screening Test Date of the Screening Test.
- The date the PATIENT was first seen following referral (or recall) from (or by) a Screening Unit

Date First Seen may not be the same as FIRST SEEN BY SPECIALIST DATE (CANCER) which records the first time the PATIENT sees an appropriate specialist in cancer care.

Attendance Date is an ACTIVITY DATE where ACTIVITY DATE TIME TYPE is National Code 33 'Attendance Date'. Attendance Date is an ACTIVITY DATE where ACTIVITY DATE TIME TYPE is National Code 33 - Attendance Date.

Out-Patient Attendance Consultant is a CARE CONTACT where CARE CONTACT TYPE is National Code 27 'Out-Patient Attendance Consultant'. Out-Patient Attendance Consultant is a CARE CONTACT where CARE CONTACT TYPE is National Code 27 - Out-Patient Attendance Consultant.

Imaging Or Radiodiagnostic Event is a CLINICAL INTERVENTION where CLINICAL INTERVENTION TYPE is National Code 16 'Imaging or Radiodiagnostic Event'. Imaging Or Radiodiagnostic Event is a CLINICAL INTERVENTION where CLINICAL INTERVENTION TYPE is National Code 16 - Imaging or Radiodiagnostic Event.

Hospital Provider Spell is an ACTIVITY GROUP where ACTIVITY GROUP TYPE is National Code 21 'Hospital Provider Spell'. Hospital Provider Spell is an ACTIVITY GROUP where ACTIVITY GROUP TYPE is National Code 21 - Hospital Provider Spell.

Start Date is an ACTIVITY DATE where ACTIVITY DATE TIME TYPE is National Code 31 'Start Date'. Start Date is an ACTIVITY DATE where ACTIVITY DATE TIME TYPE is National Code 31 - Start Date.

Screening Test is a CLINICAL INTERVENTION where CLINICAL INTERVENTION TYPE is National Code 20 'Screening Test'. Date First Seen is an ACTIVITY DATE where ACTIVITY DATE TIME TYPE is National Code 45 - Date First Seen.

Date First Seen is an ACTIVITY DATE where ACTIVITY DATE TIME TYPE is National Code 45 'Date First Seen'.

Screening Test Date is an ACTIVITY DATE where ACTIVITY DATE TIME TYPE is National Code 47 'Screening Test Date'.

DATE FIRST SEEN

Change to Data Element: Changed Description, Aliases

- Changed Description
- Alias Changes

| Name | Old Value | New Value |
|--------|-----------------|------------------|
| plural | DATE FIRST SEEN | DATES FIRST SEEN |

DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS)

Change to Data Element: New Data Element

| | |
|-----------------|----------|
| Format/length: | see DATE |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

This is the DATE on which a decision was made to refer the PATIENT to Secondary Care with either suspected cancer, or as an urgent symptomatic breast referral. This DATE may be one of the following:

- The DATE on the letter, proforma or email from the GENERAL MEDICAL PRACTITIONER or GENERAL DENTAL PRACTITIONER

- The START DATE (HOSPITAL PROVIDER SPELL) where the PATIENT was admitted as an emergency

- The APPOINTMENT DATE of the first Out-Patient Appointment, if the referral was a self-referral

- The DATE on the recall letter for PATIENTS recalled following a routine Screening Programme APPOINTMENT.

DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS) is optional within the National Cancer Waiting Times Monitoring Data Set as it may not

be available to the Health Care Provider if the initial SERVICE_REQUEST to secondary care was made via the Choose and Book system.

DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS)

Change to Data Element: New Data Element

DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS)

Attribute:

DECISION TO REFER DATE

DECISION TO TREAT DATE (ANTI-CANCER DRUG REGIMEN)

Change to Data Element: Changed Description

Format/length: see [DATE](#)
HES item:
National Codes:
Default Codes:

Notes:

[DECISION TO TREAT DATE \(ANTI-CANCER DRUG REGIMEN\)](#) is the same as the attribute [DECISION TO TREAT DATE](#).

~~This data item is only mandatory when applicable in the National Cancer Waiting Times Dataset which is when the planned first definitive treatment is chemotherapy or hormone therapy.~~ This data item is only mandatory when applicable in the [National Cancer Data Set](#) which is when the planned first definitive treatment is chemotherapy or hormone therapy.

It is the [DECISION TO TREAT DATE](#) of the [Planned Cancer Treatment](#) with a [PLANNED CANCER TREATMENT TYPE](#) National Code 03 'Chemotherapy' or 04 'Hormone therapy' and where the [FIRST DEFINITIVE TREATMENT PLANNED](#) is classification a. 'first definitive treatment planned'.

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 'Cancer Treatment'.

DECISION TO TREAT DATE (BRACHYTHERAPY TREATMENT COURSE)

Change to Data Element: Changed Description

Format/length: see [DATE](#)
HES item:
National Codes:
Default Codes:

Notes:

[DECISION TO TREAT DATE \(BRACHYTHERAPY TREATMENT COURSE\)](#) is the same as the attribute [DECISION TO TREAT DATE](#).

~~This data item is only mandatory when applicable in the National Cancer Waiting Times Dataset which is when the planned first definitive treatment is brachytherapy.~~ This data item is only mandatory when applicable in the [National Cancer Data Set](#) which is when the planned first definitive treatment is brachytherapy.

It is the [DECISION TO TREAT DATE](#) of the [Planned Cancer Treatment](#) with a [PLANNED CANCER TREATMENT TYPE](#) National Code 06 'Brachytherapy' and where the [FIRST DEFINITIVE TREATMENT PLANNED](#) is classification a. 'first definitive treatment planned'.

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 'Cancer Treatment'.

DECISION TO TREAT DATE (SPECIALIST PALLIATIVE TREATMENT COURSE)

Change to Data Element: Changed Description

Format/length: see [DATE](#)
HES item:
National Codes:
Default Codes:

Notes:

[DECISION TO TREAT DATE \(SPECIALIST PALLIATIVE TREATMENT COURSE\)](#) is the same as the attribute [DECISION TO TREAT DATE](#).

~~This data element is only mandatory when applicable in the National Cancer Waiting Times Dataset which is when the planned first definitive treatment is specialist palliative care.~~ This data item is only mandatory when applicable in the [National Cancer Data Set](#) which is when the planned first definitive treatment is specialist palliative care.

It is the [DECISION TO TREAT DATE](#) of the [Planned Cancer Treatment](#) with a [PLANNED CANCER TREATMENT TYPE](#) National Code 05 'Specialist Palliative Care' and where the [FIRST DEFINITIVE TREATMENT PLANNED](#) is classification a. 'first definitive treatment planned'.

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 'Cancer Treatment'.

DECISION TO TREAT DATE (SURGERY)

Change to Data Element: Changed Description

Format/length: see [DATE](#)
HES item:
National Codes:
Default Codes:

Notes:

[DECISION TO TREAT DATE \(SURGERY\)](#) is the same as the attribute [DECISION TO TREAT DATE](#).

~~This data item is only mandatory when applicable in the National Cancer Waiting Times Dataset which is when the planned first definitive treatment is surgery.~~ This data item is only mandatory when applicable in the [National Cancer Data Set](#) which is when the planned first definitive treatment is surgery.

It is the [DECISION TO TREAT DATE](#) of the [Planned Cancer Treatment](#) with a [PLANNED CANCER TREATMENT TYPE](#) National Code 01 'Surgery' and where the [FIRST DEFINITIVE TREATMENT PLANNED](#) is classification a. 'first definitive treatment planned'.

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 'Cancer Treatment'.

DECISION TO TREAT DATE (TELE THERAPY TREATMENT COURSE)

Change to Data Element: Changed Description

Format/length: see [DATE](#)
HES item:
National codes
Default codes

Notes:

[DECISION TO TREAT DATE \(TELE THERAPY TREATMENT COURSE\)](#) is the same as the attribute [DECISION TO TREAT DATE](#).

~~This data item is only mandatory when applicable in the National Cancer Waiting Times Dataset which is when the planned first definitive treatment is teletherapy.~~ This data item is only mandatory when applicable in the [National Cancer Data Set](#) which is when the planned first definitive treatment is teletherapy.

It is the [DECISION TO TREAT DATE](#) of the [Planned Cancer Treatment](#) with a [PLANNED CANCER TREATMENT TYPE](#) National Code 02 'Teletherapy' and where the [FIRST DEFINITIVE TREATMENT PLANNED](#) is classification a. 'first definitive treatment planned'.

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 'Cancer Treatment'.

DELAY REASON (CONSULTANT UPGRADE)

Change to Data Element: New Data Element

| | |
|----------------|---|
| Format/length: | an2 |
| HES item: | |
| National codes | Click on the attribute tab to display the attribute that contains the National Codes. |
| Default codes | |

Notes:

This is the same as attribute [DELAY REASON TO TREATMENT \(CANCER\)](#).

A [DELAY REASON \(DECISION TO TREATMENT\)](#) must be present in the [National Cancer Waiting Times Monitoring Data Set](#) where a [Cancer Care Spell Delay](#) with a [DELAY REASON TO TREATMENT \(CANCER\)](#) exists.

DELAY REASON (CONSULTANT UPGRADE)

Change to Data Element: New Data Element

DELAY REASON (CONSULTANT UPGRADE)

Attribute:

| |
|--|
| DELAY REASON TO TREATMENT (CANCER) |
|--|

DELAY REASON (DECISION TO TREATMENT)_ renamed from DELAY REASON DECISION TO TREATMENT (CANCER)

Change to Data Element: Changed Description, Name, Aliases

| | |
|----------------|---|
| Format/length: | n1 |
| HES item: | |
| National codes | Click on the attribute tab to show the attribute that contains the National Codes |
| Default codes | |

Notes:

[DELAY REASON DECISION TO TREATMENT \(CANCER\)](#) is the same as the attribute [DELAY REASON TO TREATMENT \(CANCER\)](#). This is the same as the attribute [DELAY REASON TO TREATMENT \(CANCER\)](#).

It is an optional data element and should only be present if a [Cancer Care Spell Delay](#) with a [DELAY REASON TO TREATMENT \(CANCER\)](#) has been recorded where the [DELAY REASON INDICATOR](#) is classification c. *delay between decision to treat and first treatment*. A [DELAY REASON \(DECISION TO TREATMENT\)](#) must be present in the [National Cancer Waiting Times Monitoring Data Set](#) where a [Cancer Care Spell Delay](#) with a [DELAY REASON TO TREATMENT \(CANCER\)](#) exists.

[Cancer Care Spell Delay](#) is a [REFERRAL DELAY](#) where [REFERRAL DELAY TYPE](#) is National Code 01 *Cancer Care Spell Delay*. This data can also be recorded locally for prospective [PATIENTS](#) where a full histological diagnosis confirming cancer is not yet available.

DELAY REASON (DECISION TO TREATMENT)_ renamed from DELAY REASON DECISION TO TREATMENT (CANCER)

Change to Data Element: Changed Description, Name, Aliases

- Changed Description
- Changed name from Data_Dictionary.Data_Field_Notes.D.Del.DELAY_REASON_DECISION_TO_TREATMENT_(CANCER) to Data_Dictionary.Data_Field_Notes.D.Del.DELAY_REASON_(DECISION_TO_TREATMENT)
- Alias Changes

| Name | Old Value | New Value |
|----------|--|---|
| plural | DELAY REASONS DECISION TO TREATMENT (CANCER) | DELAY REASONS (DECISION TO TREATMENT) |
| formerly | | DELAY REASON DECISION TO TREATMENT (CANCER) |

DELAY REASON COMMENT (CONSULTANT UPGRADE)

Change to Data Element: New Data Element

| | |
|----------------|-------|
| Format/length: | an255 |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

DELAY REASON COMMENT (CONSULTANT UPGRADE) is the same as attribute DELAY REASON COMMENT.

This data item is mandatory when applicable in the National Cancer Waiting Times Monitoring Data Set. It is applicable and must be recorded if the existing 62 day standard (for referral to treatment) has been breached (after any days adjustments allowed in WAITING TIME ADJUSTMENT (TREATMENT) have been removed). It is the free text comment that describes why there was a delay experienced between the Consultant Upgrade Date and the TREATMENT START DATE (CANCER).

If DELAY REASON (CONSULTANT UPGRADE) is recorded as National Code 99 'Other reason' then DELAY REASON COMMENT (CONSULTANT UPGRADE) must explain the full reason for the delay.

DELAY REASON COMMENT (CONSULTANT UPGRADE)

Change to Data Element: New Data Element

DELAY REASON COMMENT (CONSULTANT UPGRADE)

Attribute:

| |
|----------------------|
| DELAY REASON COMMENT |
|----------------------|

DELAY REASON COMMENT (DECISION TO TREATMENT)

Change to Data Element: Changed Description

| | |
|----------------|-------|
| Format/length: | an255 |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

~~DELAY REASON COMMENT (DECISION TO TREATMENT) is the same as the attribute DELAY REASON COMMENT. This is the same as the attribute DELAY REASON COMMENT.~~

~~This data item is mandatory when applicable in the National Cancer Waiting Times Monitoring Dataset. It is applicable and must be recorded if the existing standards were breached (after any adjustments have been made).~~ This data item is mandatory when applicable in the National Cancer Waiting Times Monitoring Data Set. It is applicable and must be recorded if the existing 31-day standard (for referral to treatment) has been breached (after any days adjustments allowed in WAITING TIME ADJUSTMENT (TREATMENT) have been removed). It is the free text comment that describes why the maximum 31 day wait from CANCER TREATMENT PERIOD START DATE to TREATMENT START DATE (CANCER) could not be met.

It is the free text comment that describes why the maximum one month wait could not be met after less ~~WAITING TIME ADJUSTMENT (TREATMENT)~~ from the ~~DECISION TO TREAT DATE~~ of the ~~Planned Cancer Treatment~~ with ~~FIRST DEFINITIVE TREATMENT PLANNED~~ classification of a 'yes' to the ~~date of the first definitive treatment less WAITING TIME ADJUSTMENT TREATMENT~~. If DELAY REASON (DECISION TO TREATMENT) is recorded as National Code 99 'Other reason' then DELAY REASON COMMENT (DECISION TO TREATMENT) must explain the full reason for the delay.

The ~~date of the first definitive treatment~~ is the appropriate recorded start date of treatment for the ~~Planned Cancer Treatment~~ with ~~FIRST DEFINITIVE TREATMENT PROVIDED~~ classification of a 'yes'. See START DATE (TELETHERAPY TREATMENT COURSE) as an example of an appropriate recorded start date for a ~~Planned Cancer Treatment~~ where the ~~PLANNED CANCER TREATMENT TYPE~~ is National Code 02 'Teletherapy'. There is a decision to treat date and a start date recorded for each ~~Planned Cancer Treatment~~ whether or not it is the first definitive treatment provided.

~~Planned Cancer Treatment~~ is a ~~PLANNED ACTIVITY~~ where ~~PLANNED ACTIVITY TYPE~~ is National Code 02 'Cancer Treatment'.

DELAY REASON COMMENT (FIRST SEEN)

Change to Data Element: Changed Description

| | |
|----------------|-------|
| Format/length: | an255 |
| HES item: | |
| National codes | |

Default codes

Notes-Notes:

~~DELAY REASON COMMENT (FIRST SEEN) is the same as the attribute DELAY REASON COMMENT. This is the same as the attribute DELAY REASON COMMENT.~~

~~This data item is mandatory when applicable in the National Cancer Waiting Times Monitoring Dataset. This data item is mandatory when applicable in the National Cancer Waiting Times Monitoring Data Set. It is applicable and must be recorded if the existing standards were breached (after any adjustments have been made).~~

~~It is the free text comment that describes why the maximum two week wait from CANCER REFERRAL DECISION DATE to Date First Seen less WAITING TIME ADJUSTMENT (FIRST SEEN) could not be met. It is the free text comment that describes why the maximum two week wait from CANCER REFERRAL TO TREATMENT PERIOD START DATE to DATE FIRST SEEN (less WAITING TIME ADJUSTMENT (FIRST SEEN)) could not be met.~~

~~See Date First Seen for guidance on determining the appropriate first seen date. See DATE FIRST SEEN for guidance on determining the appropriate first seen date.~~

~~Date First Seen is an ACTIVITY DATE where the ACTIVITY DATE TIME TYPE is National Code 45 'Date First Seen'. If DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS) is recorded as National Code 99 'Other reason' then DELAY REASON COMMENT (FIRST SEEN) must explain the full reason for the delay.~~

DELAY REASON COMMENT (REFERRAL TO TREATMENT)

Change to Data Element: Changed Description

| | |
|----------------|-------|
| Format/length: | an255 |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

~~DELAY REASON COMMENT (REFERRAL TO TREATMENT) is the same as the attribute DELAY REASON COMMENT.~~

~~This data item is mandatory when applicable in the National Cancer Waiting Times Monitoring Dataset. This data item is mandatory when applicable in the National Cancer Waiting Times Monitoring Data Set. It is applicable and must be recorded if the existing standards were breached (after any adjustments have been made).~~

~~It is the free text comment that describes why the specified maximum wait from CANCER REFERRAL DECISION DATE to the date of the first definitive treatment less WAITING TIME ADJUSTMENT (FIRST SEEN) and WAITING TIME ADJUSTMENT (DECISION TO TREAT) and WAITING TIME ADJUSTMENT (TREATMENT) could not be met. It is the free text comment that describes why the specified maximum 62 day wait from CANCER REFERRAL TO TREATMENT PERIOD START DATE to the TREATMENT START DATE (CANCER), less any adjustments recorded by WAITING TIME ADJUSTMENT (FIRST SEEN) and WAITING TIME ADJUSTMENT (DECISION TO TREAT) and WAITING TIME ADJUSTMENT (TREATMENT), could not be met.~~

~~The date of the first definitive treatment is the appropriate recorded start date of treatment for the Planned Cancer Treatment with FIRST DEFINITIVE TREATMENT PROVIDED classification of a 'yes'. See START DATE (TELE THERAPY TREATMENT COURSE) as an example of an appropriate recorded start date for a Planned Cancer Treatment where the PLANNED CANCER TREATMENT TYPE is National Code 02 'Teletherapy'. There is a decision to treat date and a start date recorded for each PLANNED CANCER TREATMENT TYPE.~~

~~Planned Cancer Treatment is a PLANNED ACTIVITY where PLANNED ACTIVITY TYPE is National Code 02 'Cancer Treatment'.~~

DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS)_ renamed from DELAY REASON REFERRAL TO FIRST SEEN (CANCER)

Change to Data Element: Changed Description, Name, Aliases

| | |
|----------------|---|
| Format/length: | n2 |
| HES item: | |
| National codes | Click on the attribute tab to display the attribute that contains the National Codes. |
| Default codes | |

Notes:

~~It is an optional data element and should only be present if a Cancer Care Spell Delay with a DELAY REASON REFERRAL TO FIRST SEEN (CANCER) has been recorded.~~

~~Cancer Care Spell Delay is a REFERRAL DELAY where REFERRAL DELAY TYPE is National Code 01 'Cancer Care Spell Delay'. This is the same as~~

attribute [DELAY REASON REFERRAL TO FIRST SEEN \(CANCER OR BREAST SYMPTOMS\)](#).

If National Code 99 - *Other reason* is recorded, further detail must be given for the precise cause of the delay, within [DELAY REASON COMMENT \(FIRST SEEN\)](#).

DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS)_ renamed from DELAY REASON REFERRAL TO FIRST SEEN (CANCER)

Change to Data Element: Changed Description, Name, Aliases

- Changed Description
- Changed name from `Data_Dictionary.Data_Field_Notes.D.Del.DELAY_REASON_REFERRAL_TO_FIRST_SEEN_(CANCER)` to `Data_Dictionary.Data_Field_Notes.D.Del.DELAY_REASON_REFERRAL_TO_FIRST_SEEN_(CANCER_OR_BREAST_SYMPTOMS)`
- Alias Changes

| Name | Old Value | New Value |
|----------|--|---|
| plural | DELAY REASON REFERRAL TO FIRST SEEN (CANCER) | DELAY REASONS REFERRAL TO FIRST SEEN (CANCER AND BREAST SYMPTOMS) |
| formerly | | DELAY REASON REFERRAL TO FIRST SEEN (CANCER) |

FIRST SEEN BY SPECIALIST DATE (CANCER)

Change to Data Element: Changed Description

| | |
|----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

This is the date that the [PATIENT](#) is first seen by the appropriate specialist for cancer care within a [Cancer Care Spell](#). This is the [PERSON](#) or [PERSONS](#) who are most able to progress the diagnosis of the primary tumour. The date will be one of the following, whichever is the earlier [ACTIVITY](#) related to the [Cancer Care Spell](#) where the [PATIENT](#) saw an appropriate specialist for cancer care:

- first [Out-Patient Appointment](#) with appropriate cancer specialist; this is the first attendance of the [Out-Patient Attendance Consultant](#)
- first diagnostic procedure if this precedes the first [Out-Patient Appointment](#); this is the first [ACTIVITY DATE](#) of the [Imaging Or Radiodiagnostic Event](#) or the [CLINICAL INTERVENTION](#).
- first seen as an emergency; this is the [ACTIVITY DATE](#) (start date) of the [Hospital Provider Spell](#) or the [ACTIVITY DATE](#) (arrival date) of the [Accident And Emergency Attendance](#).
- first seen following recall by screening unit; this is the [ACTIVITY DATE](#) of the [Screening Test](#).

This date may be the same as [DATE FIRST SEEN](#) if the initial consultation was with an appropriate cancer specialist in the Trust that receives the first referral.

References:

~~The NHS National Cancer Waiting Times, Department of Health, DSCN 22/2002.~~ From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

METASTATIC SITE

Change to Data Element: New Data Element

| | |
|-----------------|---|
| Format/length: | an2 |
| HES item: | |
| National Codes: | Click on the attribute tab to display the attribute that contains the National Codes. |
| Default Codes: | |

Notes:

This is the same as attribute [METASTATIC SITE](#).

METASTATIC SITE

Change to Data Element: New Data Element

METASTATIC SITE

Attribute:

METASTATIC SITE

MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER)_ renamed from MULTIDISCIPLINARY TEAM DISCUSSION DATE

Change to Data Element: Changed Description, Name

Format/length: see [DATE](#)
HES item:
National codes
Default codes

Notes:

For the National Cancer Waiting Times Monitoring Data Set, this is the [DATE](#) of the [Multidisciplinary Team Meeting](#) where a [Cancer Care Plan](#) (which was subsequently agreed with the [PATIENT](#)) was discussed.

MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR_ renamed from MDT DISCUSSION INDICATOR

Change to Data Element: Changed Description, Name, Aliases

Format/length: a1
HES item:
National codes
Default codes

Notes:

This is an indicator of whether the [Cancer Care Plan](#) was discussed at a multidisciplinary team meeting. This is indicated by the existence or absence of a recorded [MULTIDISCIPLINARY TEAM DISCUSSION DATE](#). **Notes:**

Recorded as: When used in the [National Cancer Waiting Times Monitoring Data Set](#), this records whether the [Cancer Care Plan](#) (that was subsequently agreed with the [PATIENT](#)) was discussed at a [Multidisciplinary Team Meeting](#).

The [MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR](#) should be recorded as follows:

Y ~~Yes~~ a [MULTIDISCIPLINARY TEAM DISCUSSION DATE](#) recorded

N ~~No~~ a [MULTIDISCIPLINARY TEAM DISCUSSION DATE](#) not recorded

Y is recorded if the [Cancer Care Plan](#) was drawn up at a [Multidisciplinary Team Meeting](#)

N is recorded if the [Cancer Care Plan](#) was NOT discussed at a [Multidisciplinary Team Meeting](#)

MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR_ renamed from MDT DISCUSSION INDICATOR

Change to Data Element: Changed Description, Name, Aliases

- Changed Description
- Changed name from `Data_Dictionary.Data_Field_Notes.M.MDT_DISCUSSION_INDICATOR` to `Data_Dictionary.Data_Field_Notes.M.MHMD.MULTIDISCIPLINARY_TEAM_DISCUSSION_INDICATOR`
- Alias Changes

| Name | Old Value | New Value |
|----------|---------------------------|--|
| plural | MDT DISCUSSION INDICATORS | MULTIDISCIPLINARY TEAM DISCUSSION INDICATORS |
| formerly | | MDT DISCUSSION INDICATOR |

ORGANISATION CODE (PROVIDER CONSULTANT UPGRADE)

Change to Data Element: New Data Element

| | |
|-----------------|---------------------------------------|
| Format/length: | see ORGANISATION CODE |
| National Codes: | |
| Default Codes: | |

Notes:

This is the [ORGANISATION CODE](#) of the [ORGANISATION](#) acting as [Health Care Provider](#) when a decision is made to upgrade the [PATIENT](#) to an urgent Cancer [PATIENT PATHWAY](#).

The decision to upgrade must be made by a [CONSULTANT](#) or an authorised member of the [CONSULTANTS](#) team (subject to local agreement). See [Consultant Upgrade Date](#) for further guidance.

ORGANISATION CODE (PROVIDER CONSULTANT UPGRADE)

Change to Data Element: New Data Element

ORGANISATION CODE (PROVIDER CONSULTANT UPGRADE)

Attribute:

| |
|-----------------------------------|
| ORGANISATION CODE |
|-----------------------------------|

ORGANISATION CODE (PROVIDER DECISION TO TREAT (CANCER))_ renamed from ORGANISATION CODE (PROVIDER DECISION TO TREAT)

Change to Data Element: Changed Description, Name, Aliases

| | |
|----------------|---------------------------------------|
| Format/length: | see ORGANISATION CODE |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

~~[ORGANISATION CODE \(PROVIDER DECISION TO TREAT\)](#)~~ is the same as the attribute ~~[ORGANISATION CODE](#)~~. [ORGANISATION CODE \(PROVIDER DECISION TO TREAT \(CANCER\)\)](#) is the same as the attribute [ORGANISATION CODE](#).

This is the [ORGANISATION CODE](#) of the [ORGANISATION](#) acting as [Health Care Provider](#) where the decision to treat the [PATIENT](#) was made which initiated a [Cancer Care Plan](#) with one or more [Planned Cancer Treatments](#). The [Planned Cancer Treatment](#) may be planned and provided by a different [Health Care Provider](#). The code may be derived automatically by NHS IT systems.

~~[Cancer Care Plan](#)~~ is a [CARE PLAN](#) where [CARE PLAN TYPE](#) is National Code 01 - *Cancer Care Plan*. [Cancer Care Plan](#) is a [CARE PLAN](#) where [CARE PLAN TYPE](#) is National Code 01 - *Cancer Care Plan*.

~~[Planned Cancer Treatment](#)~~ is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 - *Cancer Treatment*. [Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 - *Cancer Treatment*.

ORGANISATION CODE (PROVIDER DECISION TO TREAT (CANCER))_ renamed from ORGANISATION CODE (PROVIDER DECISION TO TREAT)

Change to Data Element: Changed Description, Name, Aliases

- Changed Description
- Changed name from `Data_Dictionary.Data_Field_Notes.O.Org.ORGANISATION_CODE_(PROVIDER_DECISION_TO_TREAT)` to `Data_Dictionary.Data_Field_Notes.O.Org.ORGANISATION_CODE_(PROVIDER_DECISION_TO_TREAT_(CANCER))`
- Alias Changes

| Name | Old Value | New Value |
|----------|---|--|
| plural | ORGANISATION CODES (PROVIDER DECISION TO TREAT) | ORGANISATION CODES (PROVIDER DECISION TO TREAT (CANCER)) |
| formerly | | ORGANISATION CODE (PROVIDER DECISION TO TREAT) |

ORGANISATION CODE (PROVIDER FIRST CANCER SPECIALIST)

Change to Data Element: Changed Description

| | |
|----------------|---------------------------------------|
| Format/length: | see ORGANISATION CODE |
|----------------|---------------------------------------|

HES item:
National codes
Default codes

Notes:

This is the [ORGANISATION CODE](#) of the [ORGANISATION](#) acting as a [Health Care Provider](#) where the [PATIENT](#) is first seen by an appropriate cancer specialist on the [FIRST SEEN BY SPECIALIST DATE \(CANCER\)](#). The code may be derived automatically by NHS IT systems.

From 01 January 2009, this data element is no longer used in the National Cancer Waiting Times Monitoring Data Set. It may still be used in other data sets or collected locally if required.

ORGANISATION CODE (PROVIDER FIRST DIAGNOSTIC TEST)

Change to Data Element: Changed Description

Format/length: see [ORGANISATION CODE](#)
HES item:
National codes
Default codes

Notes: This is the [ORGANISATION CODE](#) of the [ORGANISATION](#) acting as a [Health Care Provider](#) where the [CLINICAL INTERVENTION](#) with [FIRST CANCER DIAGNOSTIC TEST](#) classification of a 'first diagnostic test' takes place. The code may be derived automatically by NHS IT systems.

From 01 January 2009, this data element is no longer used in the National Cancer Waiting Times Monitoring Data Set. It may still be used in other data sets or collected locally if required.

ORGANISATION CODE (PROVIDER TREATMENT START DATE (CANCER))_ renamed from ORGANISATION CODE (PROVIDER FIRST TREATMENT)

Change to Data Element: Changed Description, Name, Aliases

Format/length: see [ORGANISATION CODE](#)
HES item:
National codes
Default codes

Notes:

~~ORGANISATION CODE (PROVIDER FIRST TREATMENT) is the same as the attribute ORGANISATION CODE.~~ [ORGANISATION CODE \(PROVIDER TREATMENT START DATE \(CANCER\)\)](#) is the same as the attribute [ORGANISATION CODE](#).

This is the [ORGANISATION CODE](#) of the [ORGANISATION](#) acting as a [Health Care Provider](#) where the [PATIENT](#) receives the first [Planned Cancer Treatment](#) with [FIRST DEFINITIVE TREATMENT PROVIDED](#) classification of a 'yes'. This is the [ORGANISATION CODE](#) of the [Health Care Provider](#) at which a [PATIENT](#) with a [PRIMARY DIAGNOSIS \(ICD\)](#) within the list of cancer diagnoses defined by the [Department of Health](#) (see [Department of Health](#) guidance at [Cancer Waiting Times Documentation and Links](#)), receives the first cancer treatment in their [Cancer Treatment Period](#). This is the [ORGANISATION](#) where the [TREATMENT START DATE \(CANCER\)](#) is recorded.

~~The code may be derived automatically by NHS IT systems.~~

~~[Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 'Cancer Treatment'.~~

ORGANISATION CODE (PROVIDER TREATMENT START DATE (CANCER))_ renamed from ORGANISATION CODE (PROVIDER FIRST TREATMENT)

Change to Data Element: Changed Description, Name, Aliases

- Changed Description
- Changed name from Data_Dictionary.Data_Field_Notes.O.Org.ORGANISATION_CODE_(PROVIDER_FIRST_TREATMENT) to Data_Dictionary.Data_Field_Notes.O.Org.ORGANISATION_CODE_(PROVIDER_TREATMENT_START_DATE_(CANCER))
- Alias Changes

| Name | Old Value | New Value |
|----------|---|--|
| plural | ORGANISATION CODES (PROVIDER FIRST TREATMENT) | ORGANISATION CODES (PROVIDER TREATMENT START DATE (CAN |
| formerly | | ORGANISATION CODE (PROVIDER FIRST TREATMENT) |

PLANNED CANCER TREATMENT TYPE (FIRST DEFINITIVE)

Change to Data Element: Changed Description

| | |
|----------------|------------|
| Format/length: | n2 |
| HES item: | |
| National codes | |
| Default codes | 99 Unknown |

Notes:

[PLANNED CANCER TREATMENT TYPE \(FIRST DEFINITIVE\)](#) is the same as attribute [PLANNED CANCER TREATMENT TYPE](#).

This is the [PLANNED CANCER TREATMENT TYPE](#) of the [Planned Cancer Treatment](#) with [FIRST DEFINITIVE TREATMENT PLANNED](#) classification of a 'yes'.

~~For the purposes of the National Cancer Waiting Times Monitoring Dataset National Code 07 'Biological' should be recorded as 03 'Chemotherapy'. Use of Default Code 99 'Unknown' should be carefully monitored as it is highly unlikely that a treatment plan would be drawn up where the modality of treatment is unknown.~~

~~Use of Default Code 99 'Unknown' should be carefully monitored as it is highly unlikely that a treatment plan would be drawn up where the modality of treatment is unknown. From 01 January 2009, this data element is no longer used in the National Cancer Waiting Times Monitoring Data Set. It may still be used in other data sets or collected locally if required.~~

[Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 'Cancer Treatment'.

PRIMARY DIAGNOSIS (ICD)

Change to Data Element: Changed Description

| | |
|-----------------|-----|
| Format/length: | an6 |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

See [DIAGNOSTIC CODING](#) for details on coding and [PRIMARY DIAGNOSES](#) for the standardised definition of primary diagnosis.

~~The National Cancer Waiting Times Monitoring Dataset (22/2002) requires coding to the third digit except for acute leukaemia that requires to be recorded to the 4th digit and stipulates a maximum length of an4.~~

RADIOTHERAPY INTENT

Change to Data Element: New Data Element

| | |
|-----------------|---|
| Format/length: | an2 |
| HES item: | |
| National Codes: | Click on the attribute tab to display the attribute that contains the National Codes. |
| Default Codes: | 99 - unknown |

Notes:

This is the same as attribute [RADIOTHERAPY INTENT](#).

RADIOTHERAPY INTENT

Change to Data Element: New Data Element

RADIOTHERAPY INTENT

Attribute:

| |
|-------------------------------------|
| RADIOTHERAPY INTENT |
|-------------------------------------|

REFERRAL REQUEST RECEIVED DATE

Change to Data Element: Changed Description

| | |
|-----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

This is the same as attribute [REFERRAL_REQUEST_RECEIVED_DATE](#).

The waiting time for a first [Out-Patient Appointment](#) should be calculated from the date when the [REFERRAL_REQUEST](#) is received.

For electronic [REFERRAL_REQUESTS](#) the [REFERRAL_REQUEST_RECEIVED_DATE](#) is the date the [REFERRAL_REQUEST](#) is received electronically by the [Health Care Provider](#). For Choose and Book, the referral is received when the [PATIENT](#)'s Unique Booking Reference Number (UBRN) is used to book the first outpatient appointment slot (i.e. converted).

Where an electronic [REFERRAL_REQUEST](#) made through Choose and Book is rejected by the chosen provider, the [ORIGINAL_REFERRAL_REQUEST_RECEIVED_DATE](#) should be used when the [PATIENT](#) is subsequently re-referred to another service, so that patients are not unfairly disadvantaged when their waiting time calculations are made.

In the circumstance that a [PATIENT](#) calls the national Choose and Book Appointments Line and an [APPOINTMENT_SLOT](#) is not available with the chosen [Health Care Provider](#), the national Choose and Book Appointments Line will electronically forward the [REFERRAL_REQUEST](#) details to the chosen [Health Care Provider](#) so the [Health Care Provider](#) can liaise directly with the [PATIENT](#) to arrange their [Out-Patient Appointment](#). The [REFERRAL_REQUEST_RECEIVED_DATE](#) will be the date that the [Health Care Provider](#) receives electronic notification from the national Choose and Book Appointments Line that the [PATIENT](#) has experienced slot unavailability. (Note that this is NOT the date that the [Health Care Provider](#) opens or actions the electronic notification).

For written [REFERRAL_REQUESTS](#) letters must be opened and date stamped on the day of receipt. It is this date that must be entered on any PAS or similar system, not the date on which the information is fed into the system if this is later than the date of receipt.

If the [REFERRAL_REQUEST](#) takes the form of a phone call followed by a letter, record the date when the letter arrives. If there is no following letter, the date of the verbal request should be recorded.

For the purposes of the [National Cancer Waiting Times Monitoring Data Set](#), [REFERRAL_REQUEST_RECEIVED_DATE](#) is used to derive the [CANCER_REFERRAL_TO_TREATMENT_PERIOD_START_DATE](#), and is no longer in the data set itself.

REFERRING ORGANISATION CODE

Change to Data Element: Changed Description

| | |
|-----------------|---|
| Format/length: | see ORGANISATION_CODE |
| HES item: | |
| National Codes: | |
| Default Codes: | X99998 - Referring Organisation Code not applicable X99999 - Referring Organisation Code not known |

Notes:

This is the [ORGANISATION_CODE](#) of the [ORGANISATION](#) from which the referral is made, such as [GP Practice](#) or [NHS Trust](#). This information is essential for managing service agreements which are based on patterns of referral.

~~The [National Cancer Waiting Times Monitoring Data Set \(22/2002\)](#) does not require [GP Practices](#) and stipulates a maximum length of a5 to record the appropriate [NHS Trust](#). From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.~~

START DATE (ACTIVE MONITORING)

Change to Data Element: Changed Description

| | |
|----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

[START DATE \(ACTIVE MONITORING\)](#) should be recorded if the [PLANNED_CANCER_TREATMENT_TYPE](#) is National Code 09 - [Active Monitoring](#).

[START DATE \(ACTIVE MONITORING\)](#) is the [CARE_PLAN_AGREED_DATE](#) of the [Cancer Care Plan](#) where the [Planned Cancer Treatment](#) is for [PLANNED](#)

[CANCER_TREATMENT_TYPE](#) National Code 09 'Active monitoring' and [FIRST_DEFINITIVE_TREATMENT_PROVIDED](#) is classification a. 'first definitive treatment provided'.

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Cancer Care Plan](#) is a [CARE_PLAN](#) where [CARE_PLAN_TYPE](#) is National Code 01 'Cancer Care Plan'.

[Planned Cancer Treatment](#) is a [PLANNED_ACTIVITY](#) where [PLANNED_ACTIVITY_TYPE](#) is National Code 02 'Cancer Treatment'.

START DATE (ANTI-CANCER DRUG REGIMEN)

Change to Data Element: Changed Description

| | |
|----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

[START DATE \(ANTI-CANCER DRUG REGIMEN\)](#) is the same as the attribute [ACTIVITY_DATE](#) where the [ACTIVITY_DATE_TIME_TYPE](#) is National Code 31 'Start Date' of the [Anti-Cancer Drug Regimen](#).

This should be recorded if the first definitive treatment is chemotherapy and/or other anti-cancer drug treatments.

[START DATE \(ANTI-CANCER DRUG REGIMEN\)](#) is the [ACTIVITY_DATE](#) of the [Anti-Cancer Drug Programme](#) where the [Planned Cancer Treatment](#) is for [PLANNED_CANCER_TREATMENT_TYPE](#) National Code 03 'Chemotherapy' or 04 'Hormone therapy' and [FIRST_DEFINITIVE_TREATMENT_PROVIDED](#) is classification a. 'first definitive treatment provided'.

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Anti-Cancer Drug Regimen](#) is a [CLINICAL_INTERVENTION](#) where [CLINICAL_INTERVENTION_TYPE](#) is National Code 05 'Anti-Cancer Drug Regimen'.

[Anti-Cancer Drug Programme](#) is a [CLINICAL_INTERVENTION](#) where [CLINICAL_INTERVENTION_TYPE](#) is National Code 04 'Anti-Cancer Drug Programme'.

[Planned Cancer Treatment](#) is a [PLANNED_ACTIVITY](#) where [PLANNED_ACTIVITY_TYPE](#) is National Code 02 'Cancer Treatment'.

START DATE (BRACHYTHERAPY TREATMENT COURSE)

Change to Data Element: Changed Description

| | |
|----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

[Start Date \(Brachytherapy Treatment Course\)](#) is the same as the attribute [ACTIVITY_DATE](#) where the [ACTIVITY_DATE_TIME_TYPE](#) is National Code 31 'Start Date' of the [Brachytherapy Treatment Course](#). This should be recorded if the first definitive treatment is brachytherapy.

[START DATE \(BRACHYTHERAPY TREATMENT COURSE\)](#) is the [START_DATE](#) of the [Brachytherapy Treatment Course](#) which is a [Brachytherapy Treatment Course](#) where the [Planned Cancer Treatment](#) is for [PLANNED_CANCER_TREATMENT_TYPE](#) National Code 06 'Brachytherapy' and [FIRST_DEFINITIVE_TREATMENT_PROVIDED](#) is classification a. 'first definitive treatment provided'.

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Start Date](#) is an [ACTIVITY_DATE](#) where [ACTIVITY_DATE_TIME_TYPE](#) is National Code 31 'Start Date'.

[Brachytherapy Treatment Course](#) is a [CLINICAL_INTERVENTION](#) where [CLINICAL_INTERVENTION_TYPE](#) is National Code 06 'Brachytherapy Treatment Course'.

[Planned Cancer Treatment](#) is a [PLANNED_ACTIVITY](#) where [PLANNED_ACTIVITY_TYPE](#) is National Code 02 'Cancer Treatment'.

START DATE (SPECIALIST PALLIATIVE TREATMENT COURSE)

Change to Data Element: Changed Description

| | |
|----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

[Start Date](#) (Specialist Palliative Treatment Course) is the same as the attribute [ACTIVITY DATE](#) where the [ACTIVITY DATE TIME TYPE](#) is National Code 31 'Start Date'. This should be recorded if the first definitive treatment is specialist palliative care.

[START DATE \(SPECIALIST PALLIATIVE TREATMENT COURSE\)](#) is the [ACTIVITY DATE](#) on which the first treatment or support from specialist palliative care was given to a [PATIENT](#) with diagnosed cancer within the [Cancer Care Spell](#) and where the [Planned Cancer Treatment](#) is for [Planned Cancer Treatment](#) National Code 05 'Specialist palliative care' and [FIRST DEFINITIVE TREATMENT PROVIDED](#) is classification a. 'first definitive treatment provided'.

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Start Date](#) is an [ACTIVITY DATE](#) where [ACTIVITY DATE TIME TYPE](#) is National Code 31 'Start Date'.

[Cancer Care Spell](#) is an [ACTIVITY GROUP](#) where [ACTIVITY GROUP TYPE](#) is National Code 05 'Cancer Care Spell'.

[Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 'Cancer Treatment'.

START DATE (SURGERY HOSPITAL PROVIDER SPELL)

Change to Data Element: Changed Description

| | |
|----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

[Start Date](#) (Surgery Hospital Provider Spell) is the same as the attribute [ACTIVITY DATE](#) where the [ACTIVITY DATE TIME TYPE](#) is National Code 31 'Start Date'. This should be recorded if the first definitive treatment is surgery.

[START DATE \(SURGERY HOSPITAL PROVIDER SPELL\)](#) is the [Start Date](#) of the [Hospital Provider Spell](#) the [PATIENT](#) was admitted to for the anti-cancer surgery to be performed and where the [Planned Cancer Treatment](#) is for [PLANNED CANCER TREATMENT TYPE](#) National Code 01 'Surgery' and [FIRST DEFINITIVE TREATMENT PROVIDED](#) is classification a. 'first definitive treatment provided'.

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Start Date](#) is an [ACTIVITY DATE](#) where [ACTIVITY DATE TIME TYPE](#) is National Code 31 'Start Date'.

[Hospital Provider Spell](#) is an [ACTIVITY GROUP](#) where [ACTIVITY GROUP TYPE](#) is National Code 21 'Hospital Provider Spell'.

[Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 'Cancer Treatment'.

START DATE (TELETHERAPY TREATMENT COURSE)

Change to Data Element: Changed Description

| | |
|----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

[Start Date](#) (Teletherapy Treatment Course) is the same as the attribute [ACTIVITY DATE](#) where the [ACTIVITY DATE TIME TYPE](#) is National Code 31 'Start Date'. This should be recorded if the first definitive treatment is teletherapy.

[START DATE \(TELETHERAPY TREATMENT COURSE\)](#) is the [Start Date](#) of the [Radiotherapy Treatment Course](#) which is a [Teletherapy Treatment Course](#) where the [Planned Cancer Treatment](#) is for [PLANNED CANCER TREATMENT TYPE](#) National Code 02 'Teletherapy' and [FIRST DEFINITIVE TREATMENT PROVIDED](#) is classification a. 'first definitive treatment provided'.

From 01 January 2009, this data element is no longer used in the National Cancer Waiting Times Monitoring Data Set. It may still be used in other data sets or collected locally if required.

[Start Date](#) is an [ACTIVITY DATE](#) where [ACTIVITY DATE TIME TYPE](#) is National Code 31 'Start Date'.

[Radiotherapy Treatment Course](#) is a [CLINICAL INTERVENTION](#) where [CLINICAL INTERVENTION TYPE](#) is National Code 27 'Radiotherapy Treatment Course'.

[Teletherapy Treatment Course](#) is a [CLINICAL INTERVENTION](#) where [CLINICAL INTERVENTION TYPE](#) is National Code 29 'Teletherapy Treatment Course'.

[Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 'Cancer Treatment'.

TELETHERAPY BEAM ENERGY

Change to Data Element: Changed Description

| | |
|-----------------|----|
| Format/length: | n6 |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

[TELETHERAPY BEAM ENERGY](#) is the same as attribute [TELETHERAPY PHOTON ENERGY](#) for high energy photon beams or [TELETHERAPY ELECTRON ENERGY](#) for high energy electron beams.

TELETHERAPY FIELDS CLASSIFICATION

Change to Data Element: Changed Description

| | |
|-----------------|-----|
| Format/length: | an1 |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

The prescribed number of fields of a [Teletherapy Treatment Course](#).

TREATMENT START DATE (CANCER)

Change to Data Element: New Data Element

| | |
|-----------------|--------------------------|
| Format/length: | see DATE |
| HES item: | |
| National Codes: | |
| Default Codes: | |

Notes:

This is the same as attribute [TREATMENT START DATE \(CANCER\)](#).

TREATMENT START DATE (CANCER)

Change to Data Element: New Data Element

TREATMENT START DATE (CANCER)

Attribute:

| |
|---|
| TREATMENT START DATE (CANCER) |
|---|

TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE_ renamed from URGENT CANCER REFERRAL TYPE

Change to Data Element: Changed Description, Name, Aliases

| | |
|----------------|---|
| Format/length: | n2 |
| Format/length: | an2 |
| HES item: | |
| National codes | Click on the attribute tab to display the attribute that contains the National Codes. |
| Default codes | |

Notes:

This is the same as attribute [TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE](#).

TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE_ renamed from URGENT CANCER REFERRAL TYPE

Change to Data Element: Changed Description, Name, Aliases

- Changed Description
- Changed name from `Data_Dictionary.Data_Field_Notes.U.URGENT_CANцер_REFERRAL_TYPE` to `Data_Dictionary.Data_Field_Notes.T.TWO_WEEK_WAIT_CANцер_OR_SYMPTOMATIC_BREAST_REFERRAL_TYPE`
- Alias Changes

| Name | Old Value | New Value |
|----------|------------------------------|---|
| plural | URGENT CANCER REFERRAL TYPES | TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPES |
| formerly | | URGENT CANCER REFERRAL TYPE |

WAITING TIME ADJUSTMENT (DECISION TO TREAT)

Change to Data Element: Changed Description

| | |
|----------------|----|
| Format/length: | n2 |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

This is mandatory, whenever an adjustment is appropriate, for all malignancies that came through the urgent GP suspected cancer route, irrespective of whether a target is in place. This records the number of days that should be removed from the derived waiting time between the [DATE FIRST SEEN](#) and [DECISION TO TREAT DATE](#) of the [Planned Cancer Treatment](#) where the [FIRST DEFINITIVE TREATMENT PLANNED](#) is classification a. 'yes'. The adjustment will be due to one or more of the following:

- when a patient defers an in-patient admission; add the number of days from [DATE FIRST SEEN](#) or previous deferred [OFFERED FOR ADMISSION DATE](#)
- when a patient cancels an out-patient appointment; add the number of days from the [DATE FIRST SEEN](#) or previous cancelled (by the patient) or missed [Out-Patient Appointment \(Did Not Attend\)](#) to the cancelled [Out-Patient Appointment](#)
- when a patient suspension from the elective admission list is made because they are medically unfit for treatment or when they are unavailable for treatment for a specified period because of family commitments, holidays or other reasons; add the number of days of the [ELECTIVE ADMISSION SUSPENSION DETAIL](#)
- when a patient fails to attend an in-patient admission; add the number of days from [DATE FIRST SEEN](#) or previous deferred [OFFER OF ADMISSION](#) to the deferred [OFFERED FOR ADMISSION DATE](#)
- when a patient does not attend an out-patient appointment or arrives late and could not be seen; add the number of days from the [DATE FIRST SEEN](#) or previous cancelled (by patient) or missed [Out-Patient Appointment](#) to the missed [Out-Patient Appointment](#)

From 01 January 2009, this data element is no longer used in the [National Cancer Waiting Times Monitoring Data Set](#). It may still be used in other data sets or collected locally if required.

[Out-Patient Appointment](#) is an [APPOINTMENT](#).

WAITING TIME ADJUSTMENT (FIRST SEEN)

Change to Data Element: Changed Description

| | |
|----------------|----|
| Format/length: | n3 |
| HES item: | |

National codes
Default codes

Notes:

This records the number of days that should be removed from the derived waiting time between the [CANCER REFERRAL DECISION DATE](#) and [DATE FIRST SEEN](#). The adjustment will be due to one or more of the following. This records the number of days that should be removed from the derived waiting time between the [CANCER REFERRAL TO TREATMENT PERIOD START DATE](#) and [DATE FIRST SEEN](#).

Adjustments are only permissible when a [PATIENT](#) does not attend an [Out-Patient Appointment](#) or arrives late and could not be seen. Guidance on calculating the number of days which may be deducted from the waiting time is available in Department of Health guidance at [Cancer Waiting Times Documentation and Links](#).

- a. when a patient cancels an out-patient appointment, add the number of days from the [CANCER REFERRAL DECISION DATE](#) or previous cancelled (by the patient) or missed [Out-Patient Appointment \(Did Not Attend\)](#) to the cancelled [Out-Patient Appointment](#)
- b. when a patient does not attend an out-patient appointment or arrives late and could not be seen, add the number of days from the [CANCER REFERRAL DECISION DATE](#) or previous cancelled (by patient) or missed [Out-Patient Appointment](#) to the missed [Out-Patient Appointment](#)
- c. When a patient refuses an appointment within two weeks before an offer of an appointment is made. If the [REFERRAL REQUEST](#) has a [TWO WEEK WAIT EXCLUSION INDICATOR](#) classification of b. 'Excluded - [PATIENT](#) refused an appointment within 2 weeks before being offered an appointment' an adjustment must be made so that the wait is calculated from the [DATE FIRST SEEN](#) and not [CANCER REFERRAL DECISION DATE](#) i.e. in this case the calculated wait will always be 0 days and the adjustment will be the number of days between [CANCER REFERRAL DECISION DATE](#) and [DATE FIRST SEEN](#).

[Out-Patient Appointment](#) is an [APPOINTMENT](#).

WAITING TIME ADJUSTMENT (TREATMENT)

Change to Data Element: Changed Description

Format/length: n3
HES item:
National codes
Default codes

Notes:

This records the number of days that should be removed from the derived waiting time between the [DECISION TO TREAT DATE](#) and start date of the [FIRST DEFINITIVE TREATMENT PROVIDED](#).

The date of the first definitive treatment is the appropriate recorded start date of treatment for the [Planned Cancer Treatment](#) with [FIRST DEFINITIVE TREATMENT PROVIDED](#) classification of a. 'yes'. See [START DATE \(TELE THERAPY TREATMENT COURSE\)](#) as an example of an appropriate recorded start date for a [Planned Cancer Treatment](#) where the [PLANNED CANCER TREATMENT TYPE](#) is National Code 02 'Teletherapy'. There is a [DECISION TO TREAT DATE](#) and a start date recorded for each [Planned Cancer Treatment](#) whether or not it is the [FIRST DEFINITIVE TREATMENT PROVIDED](#). This records the number of days that should be removed from the derived waiting time between [CANCER TREATMENT PERIOD START DATE](#) and [TREATMENT START DATE \(CANCER\)](#).

The adjustment will be due to one or more of the following. The recording of this data item is mandatory for all tumours, regardless of whether a national service standard is in place.

- a. when a patient defers an in-patient admission, add the number of days from [DECISION TO TREAT DATE](#) or previous deferred [OFFER OF ADMISSION](#) to the deferred [OFFERED FOR ADMISSION DATE](#)
- b. when a patient cancels an out-patient appointment, add the number of days from the [DECISION TO TREAT DATE](#) or previous cancelled (by the patient) or missed [Out-Patient Appointment \(Did Not Attend\)](#) to the cancelled [Out-Patient Appointment](#)
- c. when a patient suspension from the elective admission list is made because they are medically unfit for treatment or when they are unavailable for treatment for a specified period because of family commitments, holidays or other reasons, add the number of days of the [ELECTIVE ADMISSION SUSPENSION DETAIL](#)
- d. when a patient fails to attend an in-patient admission, add the number of days from [DECISION TO TREAT DATE](#) or previous deferred [OFFER OF ADMISSION](#) to the deferred [OFFERED FOR ADMISSION DATE](#)
- e. when a patient does not attend an out-patient appointment or arrives late and could not be seen, add the number of days from the [DECISION TO TREAT DATE](#) or previous cancelled (by patient) or missed [Out-Patient Appointment](#) to the missed [Out-Patient Appointment](#)

For example: Adjustments are allowed in the following circumstances:

- the [PATIENT](#) is given an initial appointment for treatment which is 10 days after the [DECISION TO TREAT DATE](#),
- the [PATIENT](#) then has to cancel the [Out-Patient Appointment](#),
- a second appointment is given for 3 days after that which the [PATIENT](#) does not attend, a third appointment is given for 5 days after that which the [PATIENT](#) does attend,

The [ADJUSTMENT TO WAITING TIME \(DECISION TO TREAT AND FIRST TREATMENT\)](#) is 13 days and the waiting time is 5 days. When a patient pause is initiated because the [PATIENT](#) is unavailable for treatment for a specified period because of family commitments, holidays, or other (non-clinical) reasons

[Planned Cancer Treatment](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 02 'Cancer Treatment'. [WAITING TIME ADJUSTMENT \(TREATMENT\)](#) should only be recorded where [CANCER CARE SETTING \(TREATMENT\)](#) is National Code 01 - *Cancer treatment delivered as part of a Hospital Provider Spell (where PATIENT CLASSIFICATION is National Code - 1 Ordinary admission)* or National Code 02 - *Cancer treatment delivered as part of a Hospital Provider Spell (where PATIENT CLASSIFICATION is National Code 2 - Day case admission)*.

[Out-Patient Appointment](#) is an [APPOINTMENT](#). Guidance on calculating the number of days which may be removed from the waiting time is available in

WAITING TIME ADJUSTMENT REASON (DECISION TO TREAT)

Change to Data Element: Changed Description

| | |
|----------------|----|
| Format/length: | n1 |
| HES item: | |
| National codes | |
| Default codes | |

Notes:

[WAITING TIME ADJUSTMENT REASON \(DECISION TO TREAT\)](#) is the same as the attribute [WAITING TIME ADJUSTMENT REASON](#).

This is mandatory, whenever an adjustment is appropriate as calculated and recorded by [WAITING TIME ADJUSTMENT REASON \(DECISION TO TREAT\)](#). It is the prime reason for the adjustment and where there is more than one adjustment applicable, this should be the reason for the longest calculated adjustment days.

From 01 January 2009, this data element is no longer used in the National Cancer Waiting Times Monitoring Data Set. It may still be used in other data sets or collected locally if required.

WAITING TIME ADJUSTMENT REASON (FIRST SEEN)

Change to Data Element: Changed Description

| | |
|----------------|-----------------------------------|
| Format/length: | n+ |
| Format/length: | an1 |
| HES item: | |
| National codes | |
| Default codes | |
| Default codes | 9 - no adjustment to waiting time |

Notes:

[WAITING TIME ADJUSTMENT REASON \(FIRST SEEN\)](#) is the same as the attribute [WAITING TIME ADJUSTMENT REASON](#).

This is mandatory, whenever an adjustment is appropriate as calculated and recorded by [WAITING TIME ADJUSTMENT \(FIRST SEEN\)](#). It is the prime reason for the adjustment and where there is more than one adjustment applicable, this should be the reason for the longest calculated adjustment days. ~~If however, the PATIENT chooses not to have an appointment within two weeks as recorded by TWO WEEK WAIT EXCLUSION INDICATOR, then WAITING TIME ADJUSTMENT REASON National Code 4 'Patient choice - when a patient refuses an appointment within two weeks before an offer of an appointment is made' should always take precedence over any other code.~~

WAITING TIME ADJUSTMENT REASON (TREATMENT)

Change to Data Element: Changed Description

| | |
|----------------|-----------------------------------|
| Format/length: | n+ |
| Format/length: | an1 |
| HES item: | |
| National codes | |
| Default codes | |
| Default codes | 9 - no adjustment to waiting time |

Notes:

[WAITING TIME ADJUSTMENT REASON \(TREATMENT\)](#) is the same as the attribute [WAITING TIME ADJUSTMENT REASON](#).

This is mandatory, whenever an adjustment is appropriate as calculated and recorded by [WAITING TIME ADJUSTMENT \(TREATMENT\)](#). It is the prime reason for the adjustment and where there is more than one adjustment applicable, this should be the reason for the longest calculated adjustment days.

[WAITING TIME ADJUSTMENT REASON \(TREATMENT\)](#) should only be recorded where [CANCER CARE SETTING \(TREATMENT\)](#) is National Code 01 - Cancer treatment delivered as part of an Hospital Provider Spell (where [PATIENT CLASSIFICATION](#) is National Code 1 - Ordinary admission) or National Code 02 - Cancer treatment delivered as part of a Hospital Provider Spell (where [PATIENT CLASSIFICATION](#) is National Code 2 - Day case admission).

ACTIVITY GROUP

Change to Class: Changed Description, Attributes

A subtype of [ACTIVITY](#).

Subtypes of [ACTIVITY GROUP](#) are:

[CRITICAL CARE PERIOD](#)

[PATIENT PATHWAY](#)

[REFERRAL TO TREATMENT PERIOD](#)

A continuous period of care or assessment for a [PATIENT](#) by one or more [CARE PROFESSIONAL](#). [ACTIVITY GROUPS](#) mainly consist of episodes, spells, stays or care periods.

An [ACTIVITY GROUP](#) may include one or more [CARE ACTIVITIES](#).

[ACTIVITY GROUPS](#) include:

- [Accident And Emergency Episode](#)
- [Acute Myocardial Infarction Care Spell](#)
- [Breast Cancer Care Spell](#)
- [Cancer Care Spell](#)
- [Cancer Treatment Period](#)
- [Care Home Stay \(Consultant Care\)](#)
- [Care Home Stay \(Midwife Care\)](#)
- [Care Home Stay \(Nursing Care\)](#)
- [Care Home Stay \(Residential\)](#)
- [Care Programme Approach Episode](#)
- [Care Spell](#)
- [Colorectal Cancer Care Spell](#)
- [Community Episode](#)
- [Consultant Episode \(Acute Home-Based\)](#)
- [Consultant Episode \(Hospital Provider\)](#)
- [Consultant Out-Patient Episode](#)
- [Dental Episode](#)
- [Drug Misuse Episode](#)
- [Genitourinary Episode](#)
- [Head And Neck Cancer Care Spell](#)
- [Home Dialysis Episode](#)
- [Hospital Provider Spell](#)
- [Hospital Stay](#)
- [Lung Cancer Care Spell](#)
- [Mental Health Care Spell](#)
- [MHC Without Patient Consent](#)
- [Midwife Episode](#)
- [Neonatal Level Of Care Period](#)
- [Nursing Episode](#)
- [Palliative Care Episode](#)
- [Person Smoking Cessation Episode](#)
- [Pregnancy Episode](#)
- [Professional Staff Group Episode](#)
- [Regular Attender Episode](#)
- [Sarcoma Care Spell](#)
- [Skin Cancer Care Spell](#)
- [Supervised Discharge Episode](#)
- [Supervised Community Treatment](#)
- [Supervised Community Treatment Recall](#)
- [Supervision Register Episode](#)
- [Upper GI Cancer Care Spell](#)
- [Urological Cancer Care Spell](#)
- [Ward Stay](#)

ACTIVITY GROUP

Change to Class: Changed Description, Attributes

Attributes of this Class are:

A and E INCIDENT LOCATION TYPE

A and E PATIENT GROUP

ACTIVITY GROUP TYPE
ADMISSION METHOD
AMI ADMISSION DIAGNOSIS
AMI ADMISSION WARD TYPE
AMI ADMITTING CONSULTANT TYPE
AMI CAUSE OF DEATH IN HOSPITAL
AMI DISCHARGE DIAGNOSIS
AMI HEART RATE
BONE SARCOMA LOCATION
BROAD PATIENT GROUP
CANCER REFERRAL TO TREATMENT PERIOD START DATE
CANCER STATUS
CANCER TREATMENT INTENT
CANCER TREATMENT PERIOD START DATE
COPD PRESENT
CORONARY ANGIOGRAPHY PERFORMED
CPA LEVEL
DELIVERY FACILITIES ONLY USED
DELIVERY PLACE CHANGE REASON
DIAGNOSTIC ROUTE
DISCHARGE DESTINATION
DISCHARGE METHOD
DISTRIBUTION OF LESIONS PRESENT
ECG DETERMINING TREATMENT
FIRST REGULAR DAY OR NIGHT ADMISSION
FULL POSTNATAL EXAMINATION DATE
GENERAL DENTAL SERVICE INDICATOR
GENETICALLY DETERMINED SKIN CANCER TYPE
GENITOURINARY EPISODE TYPE
INFECTION PROBABLE SOURCE
INITIAL CONTACT TYPE
INTENDED DELIVERY PLACE
INVESTIGATION OR INTERVENTION REFERRAL DATE
MATERNAL RUBELLA STATUS
MENSTRUAL STATUS
MENTAL HEALTH CARE SPELL END CODE
MIDWIFE EPISODE END REASON
NEONATAL LEVEL OF CARE
NON SMOKING CONFIRMED AT 4 WEEKS
NON SMOKING CONFIRMED AT 52 WEEKS
NURSING EPISODE END REASON
NUTRITIONAL SUPPORT PROVIDED TYPE
OUTCOME AT 4 WEEK FOLLOW-UP
OUTCOME AT 52 WEEK FOLLOW-UP
PATIENT CLASSIFICATION
PHARMACEUTICAL SMOKING CESSATION AID
POSSUM SCORE (AFTER SURGERY)
POSSUM SCORE (AT DIAGNOSIS)
PREGNANCY LEAD PROFESSIONAL TYPE
PREGNANCY PREVIOUS CAESAREAN SECTIONS
PREGNANCY PREVIOUS INDUCED ABORTIONS
PREGNANCY TOTAL LIVE BIRTHS
PREGNANCY TOTAL NEONATAL DEATHS
PREGNANCY TOTAL NON-INDUCED ABORTIONS
PREGNANCY TOTAL PREVIOUS PREGNANCIES
PREGNANCY TOTAL STILL BIRTHS
PREVIOUS MATERNAL BLOOD TRANSFUSION
PREVIOUS TREATMENT ELSEWHERE
QUALITY OF LIFE
RADIOTHERAPY INTENT
REHABILITATION REFERRAL
RTA FURTHER ADMISSION PLANNED
SARCOMA CONDITION FIRST SEEN
SARCOMA LARGEST DIAMETER
SARCOMA PART SITE
S CATEGORY FINAL PRETREATMENT
SERUM TUMOUR MARKER PSA

SKIN TCELL CLINICAL VARIANT
SKIN TCELL SURFACE AREA
SOFT TISSUE SARCOMA LOCATION
SOURCE OF ADMISSION
SUPERVISED COMMUNITY TREATMENT END REASON
SUPERVISED COMMUNITY TREATMENT END REASON1
SUPERVISION REGISTER RISK
TELEPHONE CONTACT INDICATOR
TREATMENT START DATE CANCER
WARD STAY TERMINATION REASON

CARE ACTIVITY

Change to Class: Changed Description

A subtype of [ACTIVITY](#)

Subtypes of [CARE ACTIVITY](#) are:

[CARE CONTACT](#)
[CLINICAL INTERVENTION](#)

The provision of an individual instance of care to a [PATIENT](#) given by one or more [CARE PROFESSIONALS](#).

[CARE ACTIVITIES](#) include:

- [Multidisciplinary Team Meeting](#)
-

CELL PATHOLOGICAL ABNORMALITY

Change to Class: Changed Attributes

~~This class has no attributes.~~ [Attributes of this Class are:](#)

[METASTATIC SITE](#)

CLINICAL INTERVENTION

Change to Class: Changed Attributes

Attributes of this Class are:

ACCIDENT AND EMERGENCY INVESTIGATION
ACCIDENT AND EMERGENCY TREATMENT
ANATOMICAL EXAMINATION SITE
BODY IRRADIATION
BRACHYTHERAPY ACTUAL FRACTIONS
BRACHYTHERAPY DELIVERY TYPE
BRACHYTHERAPY DOSE RATE
BRACHYTHERAPY ISOTOPE TYPE
BRACHYTHERAPY PRESCRIBED FRACTIONS
BRACHYTHERAPY TYPE
BREAST ASSESSMENT / TEST OUTCOME
CANCER IMAGING MODALITY
[CANCER TREATMENT MODALITY](#)
CLINICAL EXAMINATION FINDINGS
CLINICAL INTERVENTION TYPE
COLONOSCOPY INCOMPLETE REASON
CORONARY INTERVENTION PERFORMED
CYTOLOGY SCREENING ACTION TYPE
DENTAL TREATMENT CLASSIFICATION
DISCHARGE THERAPY TYPE
DRUG ADMINISTRATION DURATION
DRUG ADMINISTRATION STATUS
DRUG DAYS SUPPLY
DRUG DOSAGE AND ADMIN SPECIFICATION

DRUG IDENTIFICATION
DRUG INFORMATION COMMENT
DRUG INFORMATION TYPE
DRUG PROGRAMME RESPONSE
DRUG QUANTITY SUPPLIED
DRUG REGIMEN ACRONYM
DRUG ROUTE OF ADMINISTRATION
DRUG THERAPY TYPE
DRUG TREATMENT COST
DRUG TREATMENT INTENT
ENDOCRINE THERAPY TYPE
FIRST DEFINITIVE TREATMENT PROVIDED
FIRST DIAGNOSTIC TEST
FRACTION NUMBER
GESTATION LENGTH (LABOUR ONSET)
HIP REPLACEMENT BONEGRAFT
HIP SURGERY INCISION TYPE
HIP SURGERY PATIENT POSITION
HIP SURGERY TROCHANTER INDICATOR
IMAGE GUIDED SURGERY INDICATOR
IMAGING EVENT NUMBER
IMAGING INTERVENTION INDICATOR
IMAGING MODALITY
IMMUNITY TEST RESULT
JOINT REPLACEMENT PRIMARY OR REVISION
JOINT REPLACEMENT REVISION NUMBER
KNEE REPLACEMENT CEMENT INDICATOR
KNEE SURGERY FAT PAD REMOVED
KNEE SURGERY SKIN INCISION METHOD
KNEE SURGERY SURGICAL APPROACH
KNEE SURGERY TOURNIQUET USED
LABOUR FIRST STAGE LENGTH
LABOUR OR DELIVERY ONSET METHOD
LABOUR PROFESSIONAL PRIOR INVOLVEMENT
LABOUR SECOND STAGE LENGTH
MINIMALLY INVASIVE SURGERY INDICATOR
MINOR SURGERY TYPE
NATURE OF RISK AREA CODE
NEW LESIONS TREATED NUMBER
NUMBER OF TELETHERAPY FIELDS
OPERATIVE PATIENT PROCEDURE INDICATOR
OPPORTUNISTIC SCREENING TYPE
PATHOLOGY INVESTIGATION PRIORITY
PATHOLOGY RESULT REPORTED DATE
PATHOLOGY SPECIMEN TYPE
PATIENT PHYSICAL STATUS
PATIENT PROCEDURE IMPLANT INDICATION
PATIENT PROCEDURE RESULT
PLANNED TREATMENT CHANGE REASON
POST MORTEM TYPE
PRIMARY OR SUBSEQUENT COURSE
PRIMARY SCREENING
RADIOTHERAPY ACTUAL DOSE
RADIOTHERAPY ANAESTHETIC
RADIOTHERAPY PRESCRIBED DOSE
RADIOTHERAPY PRESCRIBED DURATION
RADIOTHERAPY TREATMENT COURSE STATUS
RATE OF GMP PAYMENT
RECURRENT LESIONS TREATED NUMBER
RESULT SENT DIRECT
ROUTINE OR EMERGENCY
SARCOMA SURGICAL MARGIN
SARCOMA SURGICAL PROCEDURE TYPE
SCHEDULED SESSION DURING OR OUTSIDE
SURGICAL DEFAULT TECHNIQUE INDICATOR
SURGICAL URGENCY
TELETHERAPY ACTUAL FRACTIONS

TELETHERAPY BEAM TYPE
TELETHERAPY COMPLEXITY GROUP
TELETHERAPY ELECTRON ENERGY
TELETHERAPY FIELDS
TELETHERAPY MULTIPLE PLANNING
TELETHERAPY PHOTON ENERGY
TELETHERAPY PRESCRIBED FRACTIONS
THROMBO PROPHYLAXIS REGIME TYPE
TREATMENT EXPOSURE TYPE
TREATMENT MODALITY
TYPE OF ANAESTHETIC
UNSEALED SOURCE ISOTOPE TYPE
UNSEALED SOURCE PATIENT TYPE
VACCINATION REASON INDICATOR

PATIENT CLINICAL TRIAL STATUS

Change to Class: Changed Attributes

Attributes of this Class are:

K CLINICAL TRIAL STATUS
 CLINICAL TRIAL INDICATOR

REFERRAL TO TREATMENT PERIOD

Change to Class: Changed Description

A subtype of [ACTIVITY GROUP](#).

This is the part of a [PATIENT PATHWAY](#) covered by [Measured Referral to Treatment Period](#).

~~A sub-set of [REFERRAL TO TREATMENT PERIODS](#) are used to measure the 10 weeks [Referral To Treatment Period Included In Target](#). A sub-set of [REFERRAL TO TREATMENT PERIODS](#) are used to measure the 18 weeks [Referral To Treatment Period Included In 18 Weeks Target](#).~~

It is the period from referral to the start of [First Definitive Treatment](#) and measured by [REFERRAL TO TREATMENT PERIOD DURATION \(ADJUSTED\)](#).

If the [PATIENT](#) is referred from one [Health Care Provider](#) to another during the [REFERRAL TO TREATMENT PERIOD](#), the [REFERRAL TO TREATMENT PERIOD](#) continues with the original [REFERRAL TO TREATMENT PERIOD START DATE](#) and the related [PATIENT PATHWAY IDENTIFIER](#) being part of the onward referral information. The [REFERRAL TO TREATMENT PERIOD](#) continues until there is a [REFERRAL TO TREATMENT PERIOD END DATE](#).

For [PATIENTS](#) who have not attended an [APPOINTMENT](#) or admission:

- ~~Did not attend the first [APPOINTMENT](#) during the [REFERRAL TO TREATMENT PERIOD](#). This will complete the [REFERRAL TO TREATMENT PERIOD](#) ([REFERRAL TO TREATMENT PERIOD STATUS](#) code 33 for the scheduled [ACTIVITY](#) which the [PATIENT](#) did not attend) and a new [REFERRAL TO TREATMENT PERIOD](#) will commence at the point when the [PATIENT](#) rebooks if this occurs ([REFERRAL TO TREATMENT PERIOD STATUS](#) code 10 on the [ACTIVITY](#)).~~
- Did not attend the first [APPOINTMENT](#) during the [REFERRAL TO TREATMENT PERIOD](#), where the [PRIORITY TYPE](#) of the [SERVICE REQUEST](#) was National Code 1 - *Routine* or National Code 2 - *Urgent*. This will complete the [REFERRAL TO TREATMENT PERIOD](#) ([REFERRAL TO TREATMENT PERIOD STATUS](#) code 33 for the scheduled [ACTIVITY](#) which the [PATIENT](#) did not attend) and a new [REFERRAL TO TREATMENT PERIOD](#) will commence at the point when the [PATIENT](#) rebooks if this occurs ([REFERRAL TO TREATMENT PERIOD STATUS](#) code 10 on the [ACTIVITY](#)).
- Did not attend the first [APPOINTMENT](#) during the [REFERRAL TO TREATMENT PERIOD](#), where the [PRIORITY TYPE](#) of the [SERVICE REQUEST](#) was National Code 3 - *Two Week Wait*. The [REFERRAL TO TREATMENT PERIOD](#) will continue unless a clinical decision is made to discharge the [PATIENT](#) to primary care.
- Did not attend a follow-up or out-patient/diagnostic appointment. The [REFERRAL TO TREATMENT PERIOD](#) will continue unless a clinical decision is made to discharge the [PATIENT](#) to primary care. The potential effect of this will be factored into the tolerances set. See also [Discharge After Patient Did Not Attend](#).
- Did not attend an admission. The [REFERRAL TO TREATMENT PERIOD](#) will continue unless a clinical decision is made to discharge the [PATIENT](#) to primary care. The effect of [PATIENTS](#) who did not attend for admission is described in [REFERRAL TO TREATMENT PERIOD DURATION \(ADJUSTED\)](#). See also [Discharge After Patient Did Not Attend](#).

Types of [REFERRAL TO TREATMENT PERIOD](#) include:

[Measured Referral to Treatment Period](#)

[Cancer Referral To Treatment Period](#)

[Referral To Treatment Period Included In 18 Weeks Target](#)

TISSUE CARE ACTIVITY

Change to Class: Changed Attributes

~~This class has no attributes.~~ Attributes of this Class are:

CANCER TREATMENT EVENT TYPE
