

# National Cancer Waiting Times Monitoring Data Set Version 2.1

## Requirements Specification

Published 17 December 2020

**Information and technology**  
**for better health and care**

# Data Coordination Board

This information standard (DCB0147) has been approved for publication by the Department of Health and Social Care under [section 250 of the Health and Social Care Act 2012](#).

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Data Coordination Board (DCB), a sub-group of the Digital Delivery Board.

This information standard comprises the following documents:

- Requirements Specification
- Implementation Guidance
- Change Specification.

An Information Standards Notice (DCB0147 Amd 16/2019) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled versions of these documents can be found on the [NHS Digital website](#). Any copies held outside of that area, in whatever format (e.g. paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.

Date of first publication: 2 April 2020

## **Update: 17 December 2020**

At the time of publication of version 2.1 (2 April 2020) the implementation and conformance dates of this standard were noted by the DCB as being subject to change depending on the need for continuing frontline investment in COVID-19 activity.

The conformance date has been extended by a further month and full conformance is now expected with the submission of the December 2020 reporting activity between 6 January and 2 February 2021. The Requirements Specification, Change Specification, and Implementation Guidance have been updated to reflect this.



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# Contents

<b>1.</b>	<b>Glossary</b>	<b>4</b>
<b>2.</b>	<b>Overview</b>	<b>6</b>
2.1	Summary	6
2.2	Background	7
2.3	Benefits of Cancer Waiting Times standards	7
2.4	Controlled Documents	8
2.5	Guidance	8
<b>3.</b>	<b>Specification</b>	<b>9</b>
3.1	Information Specification	9
3.1.1	Overview of Data Item requirements	9
3.1.2	Patient Cohort/Scope	11
3.1.3	Application of the NCWTMDS	11
3.1.4	Submission Deadline	34
3.1.5	Data Items	34
3.1.6	Data Transmission	34
3.1.7	Summary of Requirements and Conformance Criteria	36
<b>4.</b>	<b>Concept of Operation</b>	<b>37</b>
4.1	Working Practices	37
4.1.1	Guidance Documentation	37
4.1.2	Information Governance	37
4.1.3	Cancer Waiting Times Database Hosting	38
4.1.4	Access to NCWTMDS Data within the CWT system	38
4.1.5	Pseudonymisation	39
4.1.6	Permissions and Governance	39
4.1.7	Clinical Governance	39
4.1.8	Data Quality	39
4.1.9	Validation	39
4.1.10	Audit	40

# 1. Glossary

These are the acronyms and common terms used within this specification document:

Term	Acronym	Definition
Department of Health and Social Care	DHSC	A ministerial department of Her Majesty's Government, supported by 15 arm's length bodies (ALBs) and a number of other agencies and public bodies. DHSC is responsible for supporting and advising ministers to shape and deliver policy that supports the government's objectives, holding ALBs to account and ensuring protection and improvement of global and domestic health.
Comma Separated Value	CSV	The comma-separated value (CSV) format is a file format used to store tabular data in which numbers and text are stored in plain-text form. This is a current format for the transmission of this data set to the CWT system.
Cancer Waiting Times System	CWT system	The method of transmitting, storing, aggregating and controlling access to this data set.
Cancer Outcomes and Services Data set	COSD	The COSD is a national data set for reporting cancer in the NHS in England. Further information is available at: <a href="http://www.ncin.org.uk/collecting_and_using_data/data_collection/cosd">http://www.ncin.org.uk/collecting_and_using_data/data_collection/cosd</a>
Information Governance	IG	Information governance is a framework or umbrella term. It informs the NHS and its partner organisations of the processes and procedures that it must have to ensure: <ul style="list-style-type: none"> <li>• patient confidentiality is respected;</li> <li>• patient records are held in secure conditions; and</li> <li>• information about patients is recorded clearly and accurately, so that it can be easily read and relied upon by providers of care.</li> </ul>
National Cancer Registration and Analysis Service	NCRAS	The National Cancer Registration and Analysis Service (NCRAS) is run by Public Health England (PHE). It is responsible for cancer registration in England to support cancer epidemiology, public health, service monitoring and research.
National Cancer Waiting Times Monitoring Data Set	NCWTMDS	The data set used to manage and monitor cancer waiting times, the subject of this document

Term	Acronym	Definition
Extensible Markup Language	XML	Extensible Markup Language (XML) is a set of rules for encoding documents in machine-readable form. This is a current format for the transmission of this data set to the CWT system.
Role Based Access Control	RBAC	Role-based access control (RBAC) is a method of access security that is based on a person's role within an organisation. It should only allow users to access information they need to do their jobs, while preventing them from accessing additional information that is not relevant to them.

## 2. Overview

### 2.1 Summary

The table below contains a summary of the information standard.

Standard	
Standard Number	DCB0147
Title	National Cancer Waiting Times Monitoring Data Set
Description	<p>The National Cancer Waiting Times Monitoring Data Set (NCWTMDS) is used by the NHS and Department of Health and Social Care to:</p> <ul style="list-style-type: none"> <li>• Monitor and manage timed pathways of care for cancer patients;</li> <li>• Performance manage services for cancer patients;</li> <li>• Report against the requirements of the NHS Operating Framework for cancer waiting times;</li> <li>• Support the right to access cancer services as stated in the NHS Constitution;</li> <li>• Produce official national statistics for cancer patients and those with suspected cancer</li> <li>• Produce local statistics for cancer patients; and</li> <li>• Support investment planning for cancer services.</li> </ul> <p>The data set is also used by:</p> <ul style="list-style-type: none"> <li>• Cancer Alliances and Clinical Commissioning Groups (CCGs) to monitor and manage timed pathways of care for cancer patients locally and regionally, and to inform commissioning decisions and priorities;</li> <li>• Public Health England in the National Cancer Registration and Analysis Service (NCRAS).</li> </ul> <p>The data set may also in the future be used by:</p> <ul style="list-style-type: none"> <li>• Other organisations, such as Arm's Length Bodies, universities, research organisations and Regulators, may also use the data set, providing any applications go through the governance assurance processes provided by NHS Digital including the Data Access Request Service (DARS) and the associated independent assurance group, the Independent Group Advising on the Release of Data (IGARD).</li> </ul>
Applies to	All Providers (Acute Trusts, Care Trusts and contracted independent sector providers) delivering cancer outpatient, cancer inpatient, cancer screening or cancer treatment services.
Release	
Release Number	Amd 16/2019
Title	Version 2.1
Description	<p>The data is collected directly from English NHS providers and contracted independent sector providers on a monthly basis. NCWTMDS v2.1 makes changes to how some waiting time adjustments (the mechanism to account for delays in waiting times calculations) work, retires some data items, and introduces new data</p>

	items. This release builds on the data items introduced in October 2017 for the 28 day Faster Diagnosis Standard and Inter Provider Transfers and ensures that the standards are applicable to current clinical practice.
Implementation Start Date	July 2020 patient activity reporting period (submission upload in CWT system between 3 August and 2 September 2020)
Implementation Completion Date	December 2020 patient activity reporting period (submission upload in CWT system between 6 January and 2 February 2021)

## 2.2 Background

The NCWTMDS collects and monitors data related to the measures set for cancer care in the 'Handbook to the NHS Constitution'. The data is collected directly from NHS providers in England by NHS Digital on a monthly basis. NHS Digital and NHS England are joint data controllers for the collection of data. NHS Digital is the sole data controller for any processing and dissemination of data. NHS Digital therefore controls the data flows to provider, commissioning, regional, cancer alliance and national users through the national CWT System. NHS Digital has full access to the data collected in order to carry out data quality assurance for all data submitted, prior to dissemination. NHS Digital has agreed that NHS England and NHS Improvement will receive access to monthly pseudonymised data which they can use to produce official statistics publications and internal management reports. Other users of the system can also obtain record level downloads and/or aggregate reports depending on their role and permissions within the CWT system linked to Role Based Access Controls. NHS Digital is also considering further exploring the utility of the data by making it available to other potential consumers of this important data through the NHS Digital Data Access Request Service (DARS). For further information about accessing CWT data, prospective users should email NHS Digital's National Service Desk at: [ssd.nationalservicedesk@nhs.net](mailto:ssd.nationalservicedesk@nhs.net).

In March 2019, NHS England published the [Interim Report for the Clinically-led Review of NHS Access Standards](#). This document puts forward proposals to reduce the number of cancer standards from nine (10 with the introduction of the Faster Diagnosis Standard) down to three, to ensure focus on diagnosis and treatment. The report also states an ambition to reflect modern clinical practice and increasing personalisation of treatment.

## 2.3 Benefits of Cancer Waiting Times standards

Shorter cancer waiting times can help to ease patient anxiety and worry, and may ultimately result in earlier diagnosis, quicker treatment, a lower risk of complications, as well as enhanced patient experience and improved cancer outcomes.

Overall, cancer waiting times standards have helped to drive service improvement and have been beneficial to patients.<sup>1</sup>

### Benefits of the change in NCWTMDS v2.1:

- Amending adjustments to allow recording of patients declining an appointment in outpatient settings, for fertility preservation and for clinically urgent treatment of another condition;
- Updating the data set so it is applicable to modern diagnostic processes; and

<sup>1</sup> Department of Health 'Review of Cancer Waiting Times Standards Improving Outcomes: A Strategy for Cancer' published alongside *Improving Outcomes: A Strategy for Cancer* (2011)

- Providing improved analysis of diagnostic and treatment pathways.

## 2.4 Controlled Documents

Document Reference	Document Name
NCWTMDS 2.1 Requirements Specification	National Cancer Waiting Times Monitoring Data Set Requirements Specification (this document)
NCWTMDS 2.1 Change Specification	National Cancer Waiting Times Monitoring Data Set Change Specification
NCWTMDS 2.1 Implementation guidance	National Cancer Waiting Times Monitoring Data Set Implementation Guidance
CR1716	NHS Data Model and Dictionary Change Request: Changes to the National Cancer Waiting Times Monitoring Data Set
DCB0147 Amd 16/2019	Information Standards Notice

## 2.5 Guidance

The main communications for the on-going implementation and business as usual running of the cancer waiting times data set are through the NHS Digital Cancer Waiting Times webpages: <https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/cancerwaitingtimescwt>. These documents support the DCB information standard and are subject to regular updates external to the DCB process. NHS Digital will be responsible for updating and publishing these documents. Kieran Baker (current as at March 2020) from the secondary care analytical team will be the Delivery Lead with Dominic Gair (current as at March 2020) as support.

The data items are described in the data set change specification that is published alongside the Information Standards Notice. Information regarding the two methods for submitting bulk uploads, an extensible markup language (XML) schema which is published alongside the information standards notice, and the format of a comma-separated values (CSV) file which is provided in this document, are provided in the information standard. Further detailed information will be published in the National Cancer Waiting Times Monitoring Data Set – A Guide. Again, NHS Digital will be responsible for publishing this document

Document Reference	Name
NCWTMDS v.2.1 – A Guide v11	National Cancer Waiting Times Monitoring Data Set – A Guide

## 3. Specification

### 3.1 Information Specification

#### 3.1.1 Overview of Data Item requirements

The following groups of Mandatory (M), Required (R) and Optional (O) data elements are returned to the CWT system<sup>2</sup> if applicable to the patient pathway scenario:

#### **Patient and Pathway Identification**

This grouping within the NCWTMDS provides patient and pathway details. In the NCWTMDS XML message schema only one occurrence of this group is required per record.

M	NHS NUMBER
M	NHS NUMBER STATUS INDICATOR CODE
R	PATIENT PATHWAY IDENTIFIER
R	ORGANISATION IDENTIFIER (PATIENT PATHWAY IDENTIFIER ISSUER)

#### **Outpatient Services**

This grouping within the NCWTMDS covers outpatient service details. In the NCWTMDS XML message schema only one occurrence of this group is required per record, if applicable to the scenario being used (see 3.1.3).

R	SOURCE OF REFERRAL FOR OUT-PATIENTS
R	PRIORITY TYPE CODE
R	DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS)
R	CANCER REFERRAL TO TREATMENT PERIOD START DATE
R	TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE
R	CONSULTANT UPGRADE DATE
R	ORGANISATION SITE IDENTIFIER (OF PROVIDER CONSULTANT UPGRADE)
R	DATE FIRST SEEN
R	ORGANISATION SITE IDENTIFIER (OF PROVIDER FIRST SEEN)
R	WAITING TIME ADJUSTMENT (FIRST SEEN)
R	WAITING TIME ADJUSTMENT REASON (FIRST SEEN)
O	CANCER CARE SPELL DELAY REASON (FIRST SEEN)
O	CANCER CARE SPELL DELAY REASON COMMENT (FIRST SEEN)
R	CANCER DIAGNOSTIC REFERRAL ROUTE
R	RAPID DIAGNOSTIC CENTRE PATHWAY COMPLIANCE INDICATOR

#### **Patient Status and Diagnosis**

This grouping within the NCWTMDS provides details on the status and diagnosis of a patient, including information on referrals, transfers and faster diagnosis standard-relevant items. In the NCWTMDS XML message schema only one occurrence of this group is required, per record. Note – not all data items in this group are expected to be submitted by the same provider of care, please refer to the scenarios described in section 3.1.3 to understand which groups of data items should be submitted particularly when submitting information about inter provider transfers.

<sup>2</sup> NHS Digital maintained CWT system (the replacement for the Open Exeter System)

M	CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS
R	PRIMARY DIAGNOSIS (ICD)
R	TUMOUR LATERALITY
R	CANCER TREATMENT PERIOD START DATE
R	ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER DECISION TO TREAT)
R	REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER)
R	PROSTATE CANCER CLINICAL RISK CATEGORY
R	CANCER FASTER DIAGNOSIS PATHWAY END REASON
R	PRIMARY CANCER SITE (CANCER FASTER DIAGNOSIS PATHWAY)
R	CANCER FASTER DIAGNOSIS PATHWAY END DATE
O	CANCER CARE SPELL DELAY REASON (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)
O	CANCER CARE SPELL DELAY REASON COMMENT (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)
R	CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON
O	CARE PROFESSIONAL TYPE (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)
O	METHOD OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)
R	ORGANISATION SITE IDENTIFIER (OF CANCER FASTER DIAGNOSIS END)
R	SERVICE REQUESTED DATE (INTER-PROVIDER TRANSFER)
R	ORGANISATION IDENTIFIER (REFERRING)
R	ORGANISATION IDENTIFIER (RECEIVING)
O	CANCER TRANSFER REFERRING REASON (INTER-PROVIDER TRANSFER)
O	CANCER TRANSFER RECEIVING REASON (INTER-PROVIDER TRANSFER)

### **Treatment Events**

This grouping within the NCWTMDS provides details on any treatment delivered. In the NCWTMDS XML message schema only one occurrence of this group is required per record, if applicable to the scenario being used (see 3.1.3).

R	TREATMENT START DATE (CANCER)
R	ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER TREATMENT START DATE)
R	CANCER TREATMENT EVENT TYPE
R	CANCER TREATMENT MODALITY
R	CLINICAL TRIAL INDICATOR
R	CANCER CARE SETTING (TREATMENT)
R	CANCER CARE SPELL DELAY REASON (DECISION TO TREATMENT)
O	CANCER CARE SPELL DELAY REASON COMMENT (DECISION TO TREATMENT)
R	WAITING TIME ADJUSTMENT (TREATMENT)
R	WAITING TIME ADJUSTMENT REASON (TREATMENT)
R	CANCER CARE SPELL DELAY REASON (REFERRAL TO TREATMENT)
O	CANCER CARE SPELL DELAY REASON COMMENT (REFERRAL TO TREATMENT)
R	CANCER CARE SPELL DELAY REASON (CONSULTANT UPGRADE)
O	CANCER CARE SPELL DELAY REASON COMMENT (CONSULTANT UPGRADE)

### 3.1.2 Patient Cohort/Scope

The scenarios listed below are used to manage the collection of data for all patients with cancer. Cancer for this data collection exercise is defined using the International Classification of Diseases 10<sup>th</sup> Revision (ICD-10). The NCWTMDS is one of a number of data sets capturing information regarding cancer treatment and diagnosis held by NHS Digital utilised by NCRAS and other key stakeholders. Work is underway to align the processing and dissemination of the Cancer Waiting Times data set to other related NHS Digital data sets, such as Hospital Episode Statistics (HES) to ensure it is in line with current Information Governance best practice as data is migrated to NHS Digital's new Data Services Platform (DSP).

Data are collected and transmitted as specified for all patients with a PRIMARY DIAGNOSIS within the range C00 to C97 or D05, or a secondary diagnosis linked to the original primary within this range. A full list of the ICD-10 diagnosis clinical coding the Cancer Waiting Times system will accept is available on the [Cancer Waiting Times website at https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/cancerwaitingtimescwt](https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/cancerwaitingtimescwt).

When entering data for patients with a diagnosis coded within ICD-10 C44.0 to C44.9 it is important that patients diagnosed with Basal Cell Carcinoma are excluded from the data set as they are not covered by the cancer waiting times standards. Cancer types that are not to be entered onto the system are defined by the morphology code of the particular neoplasm type as ICD-10 section C44 is classified by affected body area, e.g. C44.1 Skin of Eyelid.

The table below specifies cancer types/sites to be excluded from the data set:

Specified Neoplasm	ICD-10 Classification	Morphology Code
Basal Cell Carcinoma	C44	M8090/3
Multicentric Basal Cell Carcinoma	C44	M8091/3
Basal Cell Carcinoma, Morphoea	C44	M8092/3
Basal Cell Carcinoma, Fibroepithelial	C44	M8093/3
Basosquamos Carcinoma	C44	M8094/3
Metatypical Carcinoma	C44	M8095/3
Pilomatrix Carcinoma	C44	M8110/3

If there is any problem removing a single neoplasm type from your data set based upon the above information please consult the Basal Cell Neoplasm's section of ICD-10, which can be found under morphology codes M809-M811. No information for any patient diagnosed with a neoplasm that is contained within this section should be entered onto the system.

### 3.1.3 Application of the NCWTMDS

The NCWTMDS applies to the different national requirements for cancer waiting times in slightly different forms depending on the business requirements for managing, monitoring and commissioning services that meet the specified maximum waiting time. The application

of the NCWTMDS is defined by a range of healthcare scenarios which cover all or part of the patient pathway within the waiting times standards. The columns in Table 1: Scenario 1a to 1g and Table 2: Scenario 2a to 7 show which data items are required for this range of healthcare scenarios:

**Scenario 1a:**

The Health Care Provider where the patient is first seen following a referral request with priority type 'Two Week Wait', or where an urgent referral is from a NHS cancer screening programme, and where the patient has not had a decision to treat, has not had the diagnosis outcome communicated, and the patient has not been excluded from the cancer faster diagnosis pathway. No inter provider transfers are in progress.

**Scenario 1b:**

The Health Care Provider where the patient is first seen following a referral request with priority type 'Two Week Wait', or where an urgent referral is from a NHS cancer screening programme, and where the patient has not had a decision to treat, has had the diagnosis outcome communicated, and the patient has not been excluded from the cancer faster diagnosis pathway. No inter provider transfers are in progress.

**Scenario 1c:**

The Health Care Provider where the patient is first seen following a direct access diagnostic test result that suggested an urgent suspected cancer referral with priority type 'Two Week Wait' was required, and where a locally agreed escalation process to secondary care has been followed (as defined in [National Cancer Waiting Times Monitoring Data Set – A Guide](#)), where the patient has not had the decision to treat, and has not had the diagnosis outcome communicated, and the patient has not been excluded from the cancer faster diagnosis pathway. No inter provider transfers are in progress.

**Scenario 1d:**

The Health Care Provider where the patient is first seen following a referral request with priority type 'Two Week Wait', or where an urgent referral is from a NHS cancer screening programme, and where the patient has had the decision to treat, has had the diagnosis outcome communicated, and the patient has not been excluded from the cancer faster diagnosis pathway. No inter provider transfers are in progress.

**Scenario 1e:**

The Health Care Provider where the patient is first seen following a referral request with priority type 'Two Week Wait', or where an urgent referral is from a NHS cancer screening programme, and where the patient has not had a decision to treat, has not had the diagnosis outcome communicated, and the patient has not been excluded from the cancer faster diagnosis pathway. The Health Care Provider sends the patient to another Health Care Provider, that is, makes an inter provider transfer.

**Scenario 1f:**

The Health Care Provider receiving an inter provider transfer of a patient, where the patient is first seen at a different Health Care Provider, and where the patient has not had a decision to treat, has not had the diagnosis outcome communicated, and the patient has not been excluded from the cancer faster diagnosis pathway. The Health Care Provider then subsequently sends the patient to another Health Care Provider, that is, makes a further inter provider transfer.

**Scenario 1g:**

The Health Care Provider where the patient is first seen following a referral request with priority type 'Two Week Wait', or where an urgent referral is from a NHS cancer screening programme, and where the patient has not had a decision to treat, has not had the diagnosis outcome communicated, and the patient has been excluded from the cancer faster diagnosis pathway. No inter provider transfers are in progress.

**Scenario 2a:**

The Health Care Provider where the patient receives First Definitive Treatment for cancer following a referral request with priority type 'Two Week Wait', or where an urgent referral is from a NHS cancer screening programme, and where the patient has had the decision to treat, has had the diagnosis outcome communicated, and the patient has not been excluded from the cancer faster diagnosis pathway. No inter provider transfers are in progress.

**Scenario 2b:**

The Health Care Provider where the patient receives First Definitive Treatment for cancer following a inter provider transfer, and where the patient has had the decision to treat, and has had the diagnosis outcome communicated, and the patient has not been excluded from the cancer faster diagnosis pathway.

**Scenario 3:**

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 where an urgent referral is from a NHS cancer screening programme. No inter provider transfers are in progress.

**Scenario 4:**

The Health Care Provider where the patient receives First Definitive Treatment for cancer following a consultant upgrade onto a 62 day patient pathway. No inter provider transfers are in progress.

**Scenario 5:**

The Health Care Provider where the patient receives second or subsequent treatment for cancer following a consultant upgrade onto a 62 day patient pathway. No inter provider transfers are in progress.

**Scenario 6:**

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. No inter provider transfers are in progress.

**Scenario 7:**

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. No inter provider transfers are in progress.

Whether a specific data item is required in the specific scenario is illustrated by the following codes within Table 1: Scenario 1a to 1g and Table 2: Scenario 2a to 7:

M = Mandatory

The Reporting Requirements in Schedule 6A of [the Particulars](#) requires NHS provider ORGANISATIONS to submit this information on a monthly basis. NHS England and NHS Improvement requires the data to be submitted as advertised on the NHS Digital website

M\* = Mandatory if applicable

The Reporting Requirements in Schedule 6A of [the Particulars](#) requires NHS provider ORGANISATIONS to submit this information on a monthly basis, where collection of the item is applicable to them. NHS England and NHS Improvement requires the data to be submitted as advertised on the NHS Digital website

O = Optional

The data item is optional

O\* = Optional if applicable

These optional fields are only populated if they relate to the PATIENT PATHWAY identified in scenarios 1 to 7 and the conditions required for their use are met

N/A = Not Applicable

The data item does not apply in this instance

Table 1: Scenarios 1a to 1g

		Scenario 1a	Scenario 1b	Scenario 1c	Scenario 1d	Scenario 1e	Scenario 1f	Scenario 1g
<b>CWTID</b>	<b>Patient Information</b>							
CWT001	NHS NUMBER	M	M	M	M	M	M	M
CWT002	NHS NUMBER STATUS INDICATOR CODE	M	M	M	M	M	M	M
CWT003	PATIENT PATHWAY IDENTIFIER	M	M	M	M	M	M	M
	<b>Provider Information</b>							
CWT004	ORGANISATION IDENTIFIER (PATIENT PATHWAY IDENTIFIER ISSUER)	M	M	M	M	M	M	M
CWT011	ORGANISATION SITE IDENTIFIER (OF PROVIDER CONSULTANT UPGRADE)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT013	ORGANISATION SITE IDENTIFIER (OF PROVIDER FIRST SEEN)	M	M	M	M	M	n/a	M

		Scenario 1a	Scenario 1b	Scenario 1c	Scenario 1d	Scenario 1e	Scenario 1f	Scenario 1g
CWT024	ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER DECISION TO TREAT)	n/a	n/a	n/a	M	n/a	n/a	n/a
CWT027	ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER TREATMENT START DATE)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	<b>Dates</b>							
CWT008	CANCER REFERRAL TO TREATMENT PERIOD START DATE	M	M	M	M	M	n/a	M
CWT010	CONSULTANT UPGRADE DATE	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT012	DATE FIRST SEEN	M	M	M	M	M	n/a	M
CWT023	CANCER TREATMENT PERIOD START DATE	n/a	n/a	n/a	M	n/a	n/a	n/a
CWT026	TREATMENT START DATE (CANCER)	n/a	n/a	n/a	n/a	n/a	n/a	n/a

		Scenario 1a	Scenario 1b	Scenario 1c	Scenario 1d	Scenario 1e	Scenario 1f	Scenario 1g
	<b>Cancer Information</b>							
CWT009	TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE	M	M	M	M	M	n/a	M
CWT021	PRIMARY DIAGNOSIS (ICD)	n/a	M*	n/a	M*	n/a	n/a	n/a
CWT022	TUMOUR LATERALITY	n/a	M*	n/a	M*	n/a	n/a	n/a
CWT041	CANCER DIAGNOSTIC REFERRAL ROUTE	O*	O*	M	O*	O*	n/a	O*
CWT043	RAPID DIAGNOSTIC CENTRE PATHWAY COMPLIANCE INDICATOR	O*	O*	O*	O*	O*	n/a	O*
	<b>Treatment Information</b>							
CWT029	CANCER TREATMENT MODALITY	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT031	CANCER CARE SETTING (TREATMENT)	n/a	n/a	n/a	n/a	n/a	n/a	n/a

		Scenario 1a	Scenario 1b	Scenario 1c	Scenario 1d	Scenario 1e	Scenario 1f	Scenario 1g
CWT030	CLINICAL TRIAL INDICATOR	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT005	SOURCE OF REFERRAL FOR OUT-PATIENTS	M	M	M	M	M	n/a	M
CWT006	PRIORITY TYPE CODE	M	M	M	M	M	n/a	M
CWT020	CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS	M	M	M	M	M	M	M
CWT028	CANCER TREATMENT EVENT TYPE	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT007	DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS)	M*	M*	M*	M*	M*	n/a	M*
CWT042	PROSTATE CANCER CLINICAL RISK CATEGORY	M*	M*	M*	M*	M*	n/a	M*
	<b>Adjustment Information</b>							
CWT014	WAITING TIME ADJUSTMENT (FIRST SEEN)	M*	M*	M*	M*	M*	n/a	M*

		Scenario 1a	Scenario 1b	Scenario 1c	Scenario 1d	Scenario 1e	Scenario 1f	Scenario 1g
CWT015	WAITING TIME ADJUSTMENT REASON (FIRST SEEN)	M*	M*	M*	M*	M*	n/a	M*
CWT035	WAITING TIME ADJUSTMENT (TREATMENT)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT036	WAITING TIME ADJUSTMENT REASON (TREATMENT)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	<b>Breach Information</b>							
CWT016	CANCER CARE SPELL DELAY REASON (FIRST SEEN)	M*	M*	M*	M*	M*	n/a	M*
CWT017	CANCER CARE SPELL DELAY REASON COMMENT (FIRST SEEN)	O*	O*	O*	O*	O*	n/a	O*
CWT033	CANCER CARE SPELL DELAY REASON (DECISION TO TREATMENT)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT034	CANCER CARE SPELL DELAY	n/a	n/a	n/a	n/a	n/a	n/a	n/a

		Scenario 1a	Scenario 1b	Scenario 1c	Scenario 1d	Scenario 1e	Scenario 1f	Scenario 1g
	REASON COMMENT (DECISION TO TREATMENT)							
CWT037	CANCER CARE SPELL DELAY REASON (REFERRAL TO TREATMENT)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT038	CANCER CARE SPELL DELAY REASON COMMENT (REFERRAL TO TREATMENT)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT039	CANCER CARE SPELL DELAY REASON (CONSULTANT UPGRADE)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT040	CANCER CARE SPELL DELAY REASON COMMENT (CONSULTANT UPGRADE)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	<b>Faster Diagnosis Information</b>							

		Scenario 1a	Scenario 1b	Scenario 1c	Scenario 1d	Scenario 1e	Scenario 1f	Scenario 1g
CWT101	CANCER FASTER DIAGNOSIS PATHWAY END REASON	n/a	M	n/a	M	n/a	n/a	M
CWT102	PRIMARY CANCER SITE (CANCER FASTER DIAGNOSIS PATHWAY)	n/a	M	n/a	M	n/a	n/a	n/a
CWT103	CANCER FASTER DIAGNOSIS PATHWAY END DATE	n/a	M	n/a	M	n/a	n/a	M
CWT104	CANCER CARE SPELL DELAY REASON (OUTCOME COMMUNICATION FASTER DIAGNOSIS PATHWAY)	n/a	M*	n/a	M*	n/a	n/a	n/a
CWT105	CANCER CARE SPELL DELAY REASON COMMENT (OUTCOME COMMUNICATION FASTER	n/a	O*	n/a	O*	n/a	n/a	n/a

		Scenario 1a	Scenario 1b	Scenario 1c	Scenario 1d	Scenario 1e	Scenario 1f	Scenario 1g
	DIAGNOSIS PATHWAY)							
CWT106	CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON	n/a	n/a	n/a	n/a	n/a	n/a	M
CWT107	CARE PROFESSIONAL TYPE (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)	n/a	O*	n/a	O*	n/a	n/a	n/a
CWT108	METHOD OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)	n/a	O*	n/a	O*	n/a	n/a	n/a
CWT109	ORGANISATION SITE IDENTIFIER (OF CANCER FASTER DIAGNOSIS END)	n/a	M	n/a	M	n/a	n/a	M
	<b>Inter Provider Transfer Information</b>							

		Scenario 1a	Scenario 1b	Scenario 1c	Scenario 1d	Scenario 1e	Scenario 1f	Scenario 1g
	<b>First transfer involving the Health Care Provider</b>							
CWT201	SERVICE REQUESTED DATE (INTER-PROVIDER TRANSFER)	n/a	n/a	n/a	n/a	M	n/a	n/a
CWT025	REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER)	n/a	n/a	n/a	n/a	n/a	M	n/a
CWT203	ORGANISATION IDENTIFIER (REFERRING)	n/a	n/a	n/a	n/a	M	M	n/a
CWT204	ORGANISATION IDENTIFIER (RECEIVING)	n/a	n/a	n/a	n/a	M	M	n/a
	<b>Second transfer involving the Health Care Provider</b>							
CWT201	SERVICE REQUESTED DATE (INTER-	n/a	n/a	n/a	n/a	n/a	M	n/a

		Scenario 1a	Scenario 1b	Scenario 1c	Scenario 1d	Scenario 1e	Scenario 1f	Scenario 1g
	PROVIDER TRANSFER)							
CWT025	REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT203	ORGANISATION IDENTIFIER (REFERRING)	n/a	n/a	n/a	n/a	n/a	M	n/a
CWT204	ORGANISATION IDENTIFIER (RECEIVING)	n/a	n/a	n/a	n/a	n/a	M	n/a
CWT205	CANCER TRANSFER REFERRING REASON (INTER-PROVIDER TRANSFER)	n/a	n/a	n/a	n/a	n/a	O*	n/a
CWT206	CANCER TRANSFER RECEIVING REASON (INTER-PROVIDER TRANSFER)	n/a	n/a	n/a	n/a	n/a	n/a	n/a

Table 2: Scenarios 2a to 7

		Scenario 2a	Scenario 2b	Scenario 3	Scenario 4	Scenario 5	Scenario 6	Scenario 7
<b>CWTID</b>	<b>Patient Information</b>							
CWT001	NHS NUMBER	M	M	M	M	M	M	M
CWT002	NHS NUMBER STATUS INDICATOR CODE	M	M	M	M	M	M	M
CWT003	PATIENT PATHWAY IDENTIFIER	M*	M*	M*	M*	M*	M*	M*
	<b>Provider Information</b>							
CWT004	ORGANISATION IDENTIFIER (PATIENT PATHWAY IDENTIFIER ISSUER)	M*	M*	M*	M*	M*	M*	M*
CWT011	ORGANISATION SITE IDENTIFIER (OF PROVIDER CONSULTANT UPGRADE)	n/a	n/a	n/a	M	n/a	O	n/a
CWT013	ORGANISATION SITE IDENTIFIER (OF PROVIDER FIRST SEEN)	n/a	n/a	n/a	M	n/a	n/a	n/a
CWT024	ORGANISATION SITE IDENTIFIER	M	M	M	M	M	M	M

		Scenario 2a	Scenario 2b	Scenario 3	Scenario 4	Scenario 5	Scenario 6	Scenario 7
	(OF PROVIDER CANCER DECISION TO TREAT)							
CWT027	ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER TREATMENT START DATE)	M	M	M	M	M	M	M
	<b>Dates</b>							
CWT008	CANCER REFERRAL TO TREATMENT PERIOD START DATE	M	n/a	n/a	O	n/a	O	n/a
CWT010	CONSULTANT UPGRADE DATE	n/a	n/a	n/a	M	n/a	O	n/a
CWT012	DATE FIRST SEEN	n/a	n/a	n/a	M	n/a	O	n/a
CWT023	CANCER TREATMENT PERIOD START DATE	M	M	M	M	M	M	M
CWT026	TREATMENT START DATE (CANCER)	M	M	M	M	M	M	M
	<b>Cancer Information</b>							

		Scenario 2a	Scenario 2b	Scenario 3	Scenario 4	Scenario 5	Scenario 6	Scenario 7
CWT009	TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE	n/a	n/a	n/a	n/a	n/a	O	n/a
CWT021	PRIMARY DIAGNOSIS (ICD)	M	M	M	M	M	M	M
CWT022	TUMOUR LATERALITY	M	M	M	M	M	M	M
CWT041	CANCER DIAGNOSTIC REFERRAL ROUTE	O*	n/a	n/a	n/a	n/a	O*	n/a
CWT043	RAPID DIAGNOSTIC CENTRE PATHWAY COMPLIANCE INDICATOR	O*	n/a	n/a	n/a	n/a	O*	n/a
	<b>Treatment Information</b>							
CWT029	CANCER TREATMENT MODALITY	M	M	M	M	M	M	M
CWT031	CANCER CARE SETTING (TREATMENT)	M	M	M	M	M	M	M
CWT030	CLINICAL TRIAL INDICATOR	M	M	M	M	M	M	M

		Scenario 2a	Scenario 2b	Scenario 3	Scenario 4	Scenario 5	Scenario 6	Scenario 7
CWT005	SOURCE OF REFERRAL FOR OUT-PATIENTS	n/a	n/a	n/a	M	n/a	O	n/a
CWT006	PRIORITY TYPE CODE	n/a	n/a	n/a	M	n/a	O	n/a
CWT020	CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS	M	M	M	M	M	M	M
CWT028	CANCER TREATMENT EVENT TYPE	M	M	M	M	M	M	M
CWT007	DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS)	n/a	n/a	n/a	n/a	n/a	O	n/a
CWT042	PROSTATE CANCER CLINICAL RISK CATEGORY	M*	M*	M*	M*	M*	M*	M*
	<b>Adjustment Information</b>							
CWT014	WAITING TIME ADJUSTMENT (FIRST SEEN)	n/a	n/a	n/a	O*	n/a	n/a	n/a
CWT015	WAITING TIME ADJUSTMENT	n/a	n/a	n/a	O*	n/a	n/a	n/a

		Scenario 2a	Scenario 2b	Scenario 3	Scenario 4	Scenario 5	Scenario 6	Scenario 7
	REASON (FIRST SEEN)							
CWT035	WAITING TIME ADJUSTMENT (TREATMENT)	M*	M*	M*	M*	M*	M*	M*
CWT036	WAITING TIME ADJUSTMENT REASON (TREATMENT)	M*	M*	M*	M*	M*	M*	M*
	<b>Breach Information</b>							
CWT016	CANCER CARE SPELL DELAY REASON (FIRST SEEN)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT017	CANCER CARE SPELL DELAY REASON COMMENT (FIRST SEEN)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT033	CANCER CARE SPELL DELAY REASON (DECISION TO TREATMENT)	M*	M*	M*	M*	M*	M*	M*
CWT034	CANCER CARE SPELL DELAY REASON COMMENT (DECISION TO TREATMENT)	O*	O*	O*	O*	O*	O*	O*

		Scenario 2a	Scenario 2b	Scenario 3	Scenario 4	Scenario 5	Scenario 6	Scenario 7
CWT037	CANCER CARE SPELL DELAY REASON (REFERRAL TO TREATMENT)	M*	M*	n/a	M*	n/a	O*	n/a
CWT038	CANCER CARE SPELL DELAY REASON COMMENT (REFERRAL TO TREATMENT)	O*	O*	n/a	O*	O*	O*	n/a
CWT039	CANCER CARE SPELL DELAY REASON (CONSULTANT UPGRADE)	n/a	n/a	n/a	M*	n/a	O*	n/a
CWT040	CANCER CARE SPELL DELAY REASON COMMENT (CONSULTANT UPGRADE)	n/a	n/a	n/a	O*	n/a	O*	n/a
	<b>Faster Diagnosis Information</b>							
CWT101	CANCER FASTER DIAGNOSIS PATHWAY END REASON	M	M	M*	n/a	n/a	n/a	n/a
CWT102	PRIMARY CANCER SITE (CANCER	M	M	n/a	n/a	n/a	n/a	n/a

		Scenario 2a	Scenario 2b	Scenario 3	Scenario 4	Scenario 5	Scenario 6	Scenario 7
	FASTER DIAGNOSIS PATHWAY)							
CWT103	CANCER FASTER DIAGNOSIS PATHWAY END DATE	M	M	M*	n/a	n/a	n/a	n/a
CWT104	CANCER CARE SPELL DELAY REASON (OUTCOME COMMUNICATION FASTER DIAGNOSIS PATHWAY)	M*	M*	n/a	n/a	n/a	n/a	n/a
CWT105	CANCER CARE SPELL DELAY REASON COMMENT (OUTCOME COMMUNICATION FASTER DIAGNOSIS PATHWAY)	O*	O*	n/a	n/a	n/a	n/a	n/a
CWT106	CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON	n/a	n/a	M*	n/a	n/a	n/a	n/a
CWT107	CARE PROFESSIONAL	O*	O*	n/a	n/a	n/a	n/a	n/a

		Scenario 2a	Scenario 2b	Scenario 3	Scenario 4	Scenario 5	Scenario 6	Scenario 7
	TYPE (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)							
CWT108	METHOD OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)	O*	O*	n/a	n/a	n/a	n/a	n/a
CWT109	ORGANISATION SITE IDENTIFIER (OF CANCER FASTER DIAGNOSIS END)	M	M	M*	n/a	n/a	n/a	n/a
	<b>Inter Provider Transfer Information</b>							
	<b>First transfer involving the Health Care Provider</b>							
CWT201	SERVICE REQUESTED DATE (INTER-PROVIDER TRANSFER)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT025	REFERRAL REQUEST RECEIVED DATE	n/a	M	n/a	n/a	n/a	n/a	n/a

		Scenario 2a	Scenario 2b	Scenario 3	Scenario 4	Scenario 5	Scenario 6	Scenario 7
	(INTER-PROVIDER TRANSFER)							
CWT203	ORGANISATION IDENTIFIER (REFERRING)	n/a	M	n/a	n/a	n/a	n/a	n/a
CWT204	ORGANISATION IDENTIFIER (RECEIVING)	n/a	M	n/a	n/a	n/a	n/a	n/a
	<b>Second transfer involving the Health Care Provider</b>							
CWT201	SERVICE REQUESTED DATE (INTER-PROVIDER TRANSFER)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT025	REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT203	ORGANISATION IDENTIFIER (REFERRING)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT204	ORGANISATION IDENTIFIER (RECEIVING)	n/a	n/a	n/a	n/a	n/a	n/a	n/a

		<b>Scenario 2a</b>	<b>Scenario 2b</b>	<b>Scenario 3</b>	<b>Scenario 4</b>	<b>Scenario 5</b>	<b>Scenario 6</b>	<b>Scenario 7</b>
CWT205	CANCER TRANSFER REFERRING REASON (INTER- PROVIDER TRANSFER)	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CWT206	CANCER TRANSFER RECEIVING REASON (INTER- PROVIDER TRANSFER)	n/a	n/a	n/a	n/a	n/a	n/a	n/a

### 3.1.4 Submission Deadline

Patient records are submitted to the Cancer Waiting Times Database (CWT system). The CWT system is an open system, with no specification of when an NHS provider might enter these data onto that system. However, NHS providers and contracted independent providers returning these data must ensure that all records are present, complete and validated by advertised deadlines. Forthcoming deadline dates are set by NHS England and made available for CWT system users on the NHS Digital website at: <https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/cancerwaitingtimescwt>

Users are advised to enter these data to the CWT system in advance of the deadline date to allow for the investigation of validation failures and to provide adequate time to fully validate the data and resubmit.

### 3.1.5 Data Items

Detailed information on all data items that form part of the NCWTMDS v2.1 is available in the Change Specification (appendix 1) data set file. Available at: <https://digital.nhs.uk/data-and-information/information-standards/information-standards-and-data-collections-including-extractions/publications-and-notifications/standards-and-collections/dcb0147-national-cancer-waiting-times-monitoring-data-set>

### 3.1.6 Data Transmission

Data is transmitted to the CWT system in either XML or CSV format. XML is the preferred format for transmission of data to CWT, but it is recognised that not all healthcare providers are able to achieve this and some are currently uploading data via CSV files.

XML uploads should conform to the CWT XML schema v2.1. This schema has data type and field length validation removed as these types of validation will be handled within the CWT system through a validation service. Therefore, the purpose of the schema is to allow the structure of the data being uploaded to be verified and the records broken down into individual records for further validation (refer to section 3.3 for an overview of validations to be carried out).

The XML schema is available to system suppliers and healthcare providers via this link: <https://digital.nhs.uk/data-and-information/information-standards/information-standards-and-data-collections-including-extractions/publications-and-notifications/standards-and-collections/dcb0147-national-cancer-waiting-times-monitoring-data-set>

CSV uploads must contain all data items and have the columns in the correct order as shown below. The data must be also be in the correct format which is detailed in the Change Specification (appendix 1) data set file. The data formats required conform to NHS Data Model and Dictionary standards. Care must be taken if the CSV files are opened in Microsoft Excel or similar software prior to upload, to ensure that the field formats are still correct.

CSV files **MUST NOT** contain a header row.

Data item names highlighted in bold text indicate where the data item name has changed or the data to be collected includes additional options, as part of this release. Information about these changes is provided in more detail in the Change Specification (appendix 1) data set file which can be found here: <https://digital.nhs.uk/isce/publication/dcb0147>

<b>CSV Column Order</b>	
Column #	Data Item Name
1	NHS NUMBER
2	PATIENT PATHWAY IDENTIFIER
3	ORGANISATION IDENTIFIER (PATIENT PATHWAY IDENTIFIER ISSUER)
4	SOURCE OF REFERRAL FOR OUT-PATIENTS
5	PRIORITY TYPE CODE
6	DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS)
7	CANCER REFERRAL TO TREATMENT PERIOD START DATE
<b>8</b>	<b>TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE</b>
9	CONSULTANT UPGRADE DATE
10	ORGANISATION SITE IDENTIFIER (OF PROVIDER CONSULTANT UPGRADE)
11	DATE FIRST SEEN
12	ORGANISATION SITE IDENTIFIER (PROVIDER FIRST SEEN)
<b>13</b>	<b>WAITING TIME ADJUSTMENT (FIRST SEEN)</b>
<b>14</b>	<b>WAITING TIME ADJUSTMENT REASON (FIRST SEEN)</b>
15	CANCER CARE SPELL DELAY REASON COMMENT (FIRST SEEN)
16	CANCER CARE SPELL DELAY REASON (FIRST SEEN)
<b>17</b>	<b>CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS</b>
18	PRIMARY DIAGNOSIS (ICD)
19	TUMOUR LATERALITY
<b>20</b>	<b>CANCER TREATMENT EVENT TYPE</b>
21	ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER DECISION TO TREAT)
22	CANCER TREATMENT PERIOD START DATE
23	TREATMENT START DATE (CANCER)
<b>24</b>	<b>CANCER TREATMENT MODALITY</b>
25	CLINICAL TRIAL INDICATOR
26	CANCER CARE SETTING (TREATMENT)
27	ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER TREATMENT START DATE)
28	CANCER CARE SPELL DELAY REASON COMMENT (DECISION TO TREATMENT)
<b>29</b>	<b>CANCER CARE SPELL DELAY REASON (DECISION TO TREATMENT)</b>
<b>30</b>	<b>WAITING TIME ADJUSTMENT (TREATMENT)</b>
<b>31</b>	<b>WAITING TIME ADJUSTMENT REASON (TREATMENT)</b>
32	CANCER CARE SPELL DELAY REASON COMMENT (REFERRAL TO TREATMENT)
33	CANCER CARE SPELL DELAY REASON (REFERRAL TO TREATMENT)
34	CANCER CARE SPELL DELAY REASON COMMENT (CONSULTANT UPGRADE)
35	CANCER CARE SPELL DELAY REASON (CONSULTANT UPGRADE)
36	REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER)
37	NHS NUMBER STATUS INDICATOR CODE
38	SERVICE REQUESTED DATE (INTER-PROVIDER TRANSFER)
39	ORGANISATION IDENTIFIER (REFERRING)
40	ORGANISATION IDENTIFIER (RECEIVING)
41	CANCER TRANSFER REFERRING REASON (INTER-PROVIDER TRANSFER)
42	CANCER TRANSFER RECEIVING REASON (INTER-PROVIDER TRANSFER)
<b>43</b>	<b>CANCER FASTER DIAGNOSIS PATHWAY END REASON</b>
44	PRIMARY CANCER SITE (CANCER FASTER DIAGNOSIS PATHWAY)

45	CANCER FASTER DIAGNOSIS PATHWAY END DATE
46	CANCER CARE SPELL DELAY REASON (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)
47	CANCER CARE SPELL DELAY REASON COMMENT (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)
<b>48</b>	<b>CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON</b>
49	CARE PROFESSIONAL TYPE (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)
50	METHOD OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)
51	ORGANISATION SITE IDENTIFIER (OF CANCER FASTER DIAGNOSIS END)
<b>52</b>	<b>CANCER DIAGNOSTIC REFERRAL ROUTE</b>
<b>53</b>	<b>PROSTATE CANCER CLINICAL RISK CATEGORY</b>
<b>54</b>	<b>RAPID DIAGNOSTIC CENTRE PATHWAY COMPLIANCE INDICATOR</b>

\*\* note that in the previous versions of this specification, column 53 and 54 were swapped in order – please refer to the Update note from 14 December 2020 on page 2 for more information

### 3.1.7 Summary of Requirements and Conformance Criteria

This section describes the tests that can be measured to indicate that the information standard is being used correctly by a provider organisation (conformance criteria).

#### Conformance Criteria for NHS Digital

The CWT system **MUST** support collection of all data items included in the National Cancer Waiting Times 2.1 data set from July 2020 patient activity reporting period (submission upload in CWT system between 3 August and 2 September 2020).

#### Conformance Criteria for Healthcare Organisations

Healthcare Organisations **SHOULD** test file upload and new / amended data items on the CWT User Acceptance Testing portal during Public Beta phase and prior to 1 October 2020

Healthcare Organisations **MUST** collect the required data items relating to NCWTMDS v2.1 data set within local systems from December 2020 patient activity reporting period (submission upload in CWT system between 6 January and 2 February 2021).

Healthcare Organisations **MUST** submit against the new Information Standard, incorporating all data item name changes, any format and field length changes for existing data items from December 2020 patient activity reporting period (submission upload in CWT system between 6 January and 2 February 2021)

## 4. Concept of Operation

This section describes how the NCWTMDS is used by a provider of cancer services.

### 4.1 Working Practices

#### 4.1.1 Guidance Documentation

Complete guidance on how this information standard should be applied locally in managing patients against the cancer waiting times standards is available to the NHS in published guidance, available at: <https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/cancerwaitingtimescwt>.

Document Name	Description
National Cancer Waiting Times Monitoring Data Set Guidance version 10 (to be superseded by version 11, due to be published in Q1, 2020/21)	This is the main behavioural guidance document to support the use of the data set locally. The content of this document is based around specific patient scenarios, and how the policies on waiting times for cancer patients within the NHS relate to these scenarios, determining how the activity should be recorded using this data set.
National Cancer Waiting Times Replacement System User Manual	This document is managed by NHS Digital and deals with the technical upload. This is updated as part of the work completed by NHS Digital during beta testing in 2019/20.

#### 4.1.2 Information Governance

Trusts are mandated to submit this data to NHS Digital under section 259 of the [Health and Social Care Act 2012](#).

NHS Digital has been Directed by NHS England to carry out this work, NHS Digital and NHS England are joint Data Controllers regarding the purpose of the processing. NHS Digital is the only Controller that processes personal data under the direction and is the sole Controller for any dissemination

##### 4.1.2.1 Roles and Responsibilities

NHS England and NHS Improvement – Commission this work in line with the Direction and act as Joint Data Controller regarding the purpose of processing. Through agreement with NHS Digital it continues to produce and publish Official Statistical outputs for this data.

NHS Digital – Joint Data Controller for the purpose of processing and sole Data Controller for the processing and dissemination of data. Responsible for the collection, delivery, service management and technical infrastructure elements. NHS Digital will support this workstream by having a named Delivery Lead (Kieran Baker, current as at March 2020) and Portfolio Item Manager (Dave Roberts, current as at March 2020).

##### 4.1.2.2 Curation and Collection of data

NHS Digital will manage governance processes and maintain the systems that capture the required data directly from NHS providers in England as outlined within the specification and

associated Information Standard on a monthly basis. NHS Digital will act as the sole Controller for any dissemination, manage the data flows through to provider, commissioning, regional, cancer alliance and national users, through the national CWT System.

#### **4.1.2.3 Dissemination of data**

NHS Digital has agreed with NHS England and NHS Improvement that it continues to publish Official Statistics and other reports to support implementation and monitoring of service provision.

NHS Digital, via the portals, will continue to provide standard reports to an agreed design with NHS England and NHS Improvement to specific named user groups, such as Cancer Alliances.

The host business function within NHS Digital will have access to and ability to analyse and assure the data. To support the end to end process and undertake activities that will support improvement to the utility and quality of the data.

Work will continue with NHS England and NHS Improvement and other bodies to explore how NHS Digital may further enhance the utility of this data through linkage with other data sets and pursue making that data available through the NHS Digital Data Access Request Service (DARS).

### **4.1.3 Cancer Waiting Times Database Hosting**

Data intended for the NCWTMDS v2.1 is transmitted, validated, stored and analysed within the CWT database. The system is accessed through a series of secure web-enabled interfaces that allow users to upload data in XML or CSV formats or via direct entry screens depending on their Role Based Access. The data submitted to the system is stored in secure data centres making full use of existing security policies in place in those data centres.

### **4.1.4 Access to NCWTMDS Data within the CWT system**

All access to NCWTMDS v2.1 data held within the CWT system is strictly managed by a role based permissions model. All users will be authenticated through use of individual user accounts and passwords to gain access to the system. Access is via Single Sign-On (user name and password only). Role based access controls (RBAC) is managed by the Data Collections Service in NHS Digital. Those organisations outside NHS Digital which are either responsible for submitting data or accessing reports from NCWTMDS v2.1 will require a completed Data Sharing Agreement. Each user will be associated with a role when they are set up on the system. These user roles will have a set of pre-defined permissions that will determine which functionality is available to users based on their role for CWT (e.g. submitter, viewer, national user, administrator, technical support, etc).

The different RBAC levels can be summarised in the following document, available on the NHS Digital website at:

<https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/cancerwaitingtimescwt>

These access controls are kept under review, when any additional functionality is added to the system the permissions model will be reviewed and updated to include role based permissions for the new functionality.

### 4.1.5 Pseudonymisation

Within the RBAC structure described above, only those users approved for the use of this data set have the access rights enabling them to view patient identifiers (NHS NUMBER). All other users see either aggregate data or a pseudonymised identifier.

These pseudonymised identifiers are available in specific reports, access to which is managed via the RBAC as outlined above and through NHS Digital's Data Access Request Service (DARS).

### 4.1.6 Permissions and Governance

The NCWTMDS v2.1 is transmitted to and stored on the CWT system and is intended for use as a secondary data source, supporting the local management of patient pathways of care. These data are collected under licence from the Direction under section 254 of the [Health and Social Care Act 2012](#), accompanied by the section 259 Data Provision Notice issued by NHS Digital.

This revised data set has made free text fields to analyse reasons for delays optional, providing more scope to use code structures within data items. In the CWT system, submitters will be notified when a free text field is expected but not completed, but records will not be rejected and completion of the free text field will not be enforced. It is anticipated that over time local use of the NCWTMDS will adapt to this more accurate coding structure, reducing the free-text use and detail within the data fields such as DELAY REASON COMMENT, thus lowering the chance of disclosure through free text description. Work will be completed to gather additional information around the current usefulness of, and access to free text fields, to ensure use of these fields are handled in line with NHS Digital Information Governance policies.

### 4.1.7 Clinical Governance

The NCWTMDS is not directly used for patient care and is only used for management purposes and/or secondary uses, such as cancer registration and the production of national and official statistics.

### 4.1.8 Data Quality

A number of data quality checks including local and automated single and cross field checks will be undertaken pre and post submission. A number of inbuilt validations will occur prior to the submission portal which may result in record level rejections at point of submission of which the provider is notified. Subsequent DQ checks are then undertaken to help improve the accuracy and utility of the submitted data. Such activities may occur on data being interrogated outside the system itself if appropriate. Details of these pre and post submissions data quality and validation rules are described in a separate document.

### 4.1.9 Validation

It is acknowledged that data validation needs to take place. CWT validation includes local and automated single and cross field checks.

#### **4.1.10 Audit**

To support local assurance of the centrally held data set the CWT system provides an interactive audit function. This allows users to identify changes to a record, either through a file submission that causes an update or a merge with an existing record; or an onscreen edit. Users can use this feature to view the history of a record in the system and see what changes have been made to a record over time. This is accessed within the secure CWT system environment by users in NHS providers as per their RBAC permissions. The audit functionality for inter provider transfer data items (CWT201 to CWT206) does not currently have an audit function.