

Type: Change Request
Reference: 1589
Version No: 1.0
Subject: National Cancer Waiting Times Monitoring Data Set Version 2.0
Effective Date: 1 April 2018
Reason for Change: Change to Information Standards
Publication Date: 22 September 2017

Background:

The National Cancer Waiting Times Monitoring Data Set Version 1.0 was approved by the Standardisation Committee for Care Information (SCCI) as [SCCI0147: National Cancer Waiting Times Monitoring Data Set](#).

A number of changes have been identified since the last version, and the National Cancer Waiting Times Monitoring Data Set Version 2.0 includes:

- New items to reflect:
 - The Cancer Faster Diagnosis Standard and
 - Inter-provider transfers
- Amendments to National Code values and descriptions
- New and retirement of Data Items
- Changes to Organisation and Organisation Site Code Data Items to reflect changes to organisation reference data maintained and published by the Organisation Data Service, as defined by [SCCI0090: Health and Social Care Organisation Reference Data](#).

To support the Information Standard, this Change Request:

- Updates the NHS Data Model and Dictionary to make changes to the National Cancer Waiting Times Monitoring Data Set
- Provides a link to the Technology Reference Data Update Distribution Service (TRUD) for download of the National Cancer Waiting Times Monitoring Data Set XML Schema Version 2.0.

Please note that the National Cancer Waiting Times Monitoring Data Set XML Schema Version 2.0 only contains NHS Data Model and Dictionary Data Element names and XML Schema names. There is no validation of Format/Length or National Codes included in the XML Schema.

To view a demonstration on "How to Read an NHS Data Model and Dictionary Change Request", visit the NHS Data Model and Dictionary help pages at: http://www.datadictionary.nhs.uk/Flash_Files/changerequest.htm.

Note: if the web page does not open, please copy the link and paste into the web browser.

Summary of changes:

Diagrams

IMPROVING ACCESS TO PSYCHOLOGICAL THERAPIES DIAGRAM	Changed Diagram
SERVICE REQUEST DIAGRAM	Changed Diagram

Data Set

NATIONAL CANCER WAITING TIMES MONITORING DATA SET	Changed Description
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Supporting Information

ACTIVE MONITORING	Changed Description
CANCER CARE PLAN	Changed Description
CANCER CARE SPELL	Changed Description
CANCER CARE SPELL DELAY	Changed Description
CANCER FASTER DIAGNOSIS PATHWAY	New Supporting Information
CANCER FASTER DIAGNOSIS PATHWAY END DATE	New Supporting Information
CANCER PATHWAY	New Supporting Information
CANCER RECURRENCE	New Supporting Information
CANCER REFERRAL TO TREATMENT PERIOD	Changed Description
CANCER REFERRAL TO TREATMENT PERIOD START DATE renamed from CANCER REFERRAL TO TREATMENT PERIOD START DATE	Changed Name, Description
CANCER TREATMENT PERIOD	Changed Description
CANCER TREATMENT PERIOD START DATE renamed from CANCER TREATMENT PERIOD START DATE	Changed Name, Description
CLINICAL DATA SETS MESSAGE DOCUMENTATION	Changed Description
CLINICAL DATA SETS MESSAGE DOCUMENTATION MENU	Changed Description
CONSULTANT UPGRADE	New Supporting Information
CONSULTANT UPGRADE DATE	Changed Description
DECISION TO TREAT	New Supporting Information
FIRST DEFINITIVE TREATMENT	Changed Description
NATIONAL CANCER WAITING TIMES MONITORING DATA SET OVERVIEW	Changed Description

NATIONAL CANCER WAITING TIMES MONITORING DATA SET SCENARIOS	Changed Description
SCREENING SERVICE	New Supporting Information
TREATMENT START DATE (CANCER) renamed from TREATMENT START DATE FOR CANCER	Changed Name, Description
Class Definitions	
ACTIVITY GROUP	Changed Attributes
PATIENT DIAGNOSIS	Changed Attributes
PATIENT PATHWAY	Changed Attributes
REFERRAL DELAY	Changed Attributes, Description
Attribute Definitions	
ACTIVITY DATE TYPE	Changed Description
CANCER CARE SPELL DELAY REASON renamed from DELAY REASON TO TREATMENT FOR CANCER	Changed Name, Description
CANCER CARE SPELL DELAY REASON COMMENT renamed from DELAY REASON COMMENT	Changed Name, Description
CANCER FASTER DIAGNOSIS PATHWAY END REASON	New Attribute
CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON	New Attribute
CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS	Changed Description
CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER	New Attribute
CANCER TREATMENT EVENT TYPE	Changed Description
CANCER TREATMENT MODALITY	Changed Description
CARE PROFESSIONAL TYPE CODE	Changed Description
CLINICAL TRIAL INDICATOR	Changed Description
DECISION TO TREAT DATE	Changed Description
DELAY REASON INDICATOR (RETIRED) renamed from DELAY REASON INDICATOR	Changed Name, Description, status to Retired
DELAY REASON REFERRAL TO FIRST SEEN FOR CANCER OR BREAST SYMPTOMS (RETIRED) renamed from DELAY REASON REFERRAL TO FIRST SEEN FOR CANCER OR BREAST SYMPTOMS	Changed Name, Description, status to Retired
METHOD OF COMMUNICATION FOR END OF CANCER FASTER DIAGNOSIS PATHWAY	New Attribute
MULTIDISCIPLINARY TEAM CANCER CARE PLAN DISCUSSED INDICATOR	Changed Description
PRIMARY CANCER SITE FOR CANCER FASTER DIAGNOSIS PATHWAY	New Attribute
RADIOTHERAPY INTENT	Changed Description
REFERRAL REQUEST RECEIVED DATE	Changed Description
SERVICE TYPE	Changed Description
TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE	Changed Description
WAITING TIME ADJUSTMENT REASON	Changed Description
Data Elements	
CANCER CARE SETTING (TREATMENT)	Changed Description
CANCER CARE SPELL DELAY REASON (CONSULTANT UPGRADE) renamed from DELAY REASON (CONSULTANT UPGRADE)	Changed Name, Description
CANCER CARE SPELL DELAY REASON (DECISION TO TREATMENT) renamed from DELAY REASON (DECISION TO TREATMENT)	Changed Name, Description, linked Attribute
CANCER CARE SPELL DELAY REASON (FIRST SEEN) renamed from DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS)	Changed Name, Description, linked Attribute
CANCER CARE SPELL DELAY REASON (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)	New Data Element
CANCER CARE SPELL DELAY REASON (REFERRAL TO TREATMENT) renamed from DELAY REASON REFERRAL TO TREATMENT (CANCER)	Changed Name, Description
CANCER CARE SPELL DELAY REASON COMMENT (CONSULTANT UPGRADE) renamed from DELAY REASON COMMENT (CONSULTANT UPGRADE)	Changed Name, Description
CANCER CARE SPELL DELAY REASON COMMENT (DECISION TO TREATMENT) renamed from DELAY REASON COMMENT (DECISION TO TREATMENT)	Changed Name, Description
CANCER CARE SPELL DELAY REASON COMMENT (FIRST SEEN) renamed from DELAY REASON COMMENT (FIRST SEEN)	Changed Name, Description
CANCER CARE SPELL DELAY REASON COMMENT (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)	New Data Element
CANCER CARE SPELL DELAY REASON COMMENT (REFERRAL TO TREATMENT) renamed from DELAY REASON COMMENT (REFERRAL TO TREATMENT)	Changed Name, Description
CANCER FASTER DIAGNOSIS PATHWAY END DATE	New Data Element
CANCER FASTER DIAGNOSIS PATHWAY END REASON	New Data Element
CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON	New Data Element
CANCER REFERRAL TO TREATMENT PERIOD START DATE	Changed Description, linked Attribute
CANCER TRANSFER RECEIVING REASON (INTER-PROVIDER TRANSFER)	New Data Element
CANCER TRANSFER REFERRING REASON (INTER-PROVIDER TRANSFER)	New Data Element
CANCER TREATMENT PERIOD START DATE	Changed Description, linked Attribute
CARE PROFESSIONAL TYPE CODE (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)	New Data Element
CLINICAL TRIAL INDICATOR	Changed Description

DATE FIRST SEEN	Changed Description
DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS)	Changed Description
METASTATIC SITE	Changed Description
METHOD OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)	New Data Element
MULTIDISCIPLINARY TEAM CANCER CARE PLAN DISCUSSED INDICATOR renamed from MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR	Changed Name
MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER)	Changed Description
ORGANISATION SITE IDENTIFIER (OF CANCER FASTER DIAGNOSIS PATHWAY END DATE)	New Data Element
ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER DECISION TO TREAT)	Changed Description
ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER TREATMENT START DATE)	Changed Description
ORGANISATION SITE IDENTIFIER (OF PROVIDER CONSULTANT UPGRADE)	Changed Description
ORGANISATION SITE IDENTIFIER (OF PROVIDER FIRST SEEN)	Changed Description
PRIMARY CANCER SITE (CANCER FASTER DIAGNOSIS PATHWAY)	New Data Element
REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER)	Changed Description
SERVICE REQUESTED DATE (INTER-PROVIDER TRANSFER)	Changed Description
SITE CODE (OF PROVIDER CANCER DECISION TO TREAT) (RETIRED) renamed from SITE CODE (OF PROVIDER CANCER DECISION TO TREAT)	Changed Name, Description, linked Attribute, status to Retired
SITE CODE (OF PROVIDER CANCER TREATMENT START DATE) (RETIRED) renamed from SITE CODE (OF PROVIDER CANCER TREATMENT START DATE)	Changed Name, Description, linked Attribute, status to Retired
SITE CODE (OF PROVIDER CONSULTANT UPGRADE) (RETIRED) renamed from SITE CODE (OF PROVIDER CONSULTANT UPGRADE)	Changed Name, Description, linked Attribute, status to Retired
SITE CODE (OF PROVIDER FIRST SEEN) (RETIRED) renamed from SITE CODE (OF PROVIDER FIRST SEEN)	Changed Name, Description, linked Attribute, status to Retired
TREATMENT START DATE (CANCER)	Changed Description, linked Attribute
TREATMENT START DATE (RADIOTHERAPY TREATMENT EPISODE)	Changed Description, linked Attribute
WAITING TIME ADJUSTMENT (FIRST SEEN)	Changed Description
WAITING TIME ADJUSTMENT (TREATMENT)	Changed Description
WAITING TIME ADJUSTMENT REASON (FIRST SEEN)	Changed Description
<u>XML Schema Constraint</u>	
NATIONAL CANCER WAITING TIMES MONITORING DATA SET XML SCHEMA CONSTRAINTS (RETIRED) renamed from NATIONAL CANCER WAITING TIMES MONITORING DATA SET XML SCHEMA CONSTRAINTS	Changed Name, Description, status to Retired

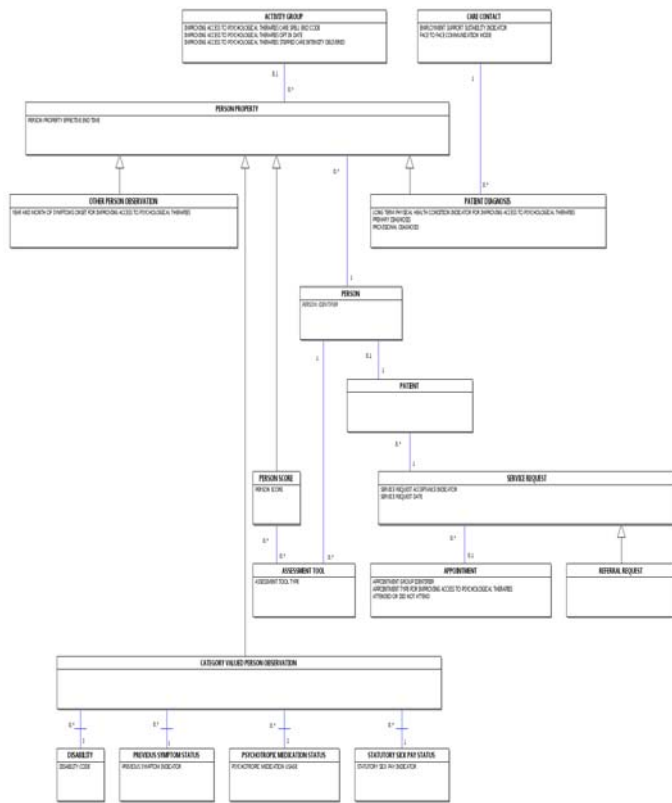
Date: 22 September 2017

Sponsor: Morfydd Williams, Programme Director – Cancer Transformation Programme, NHS England

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

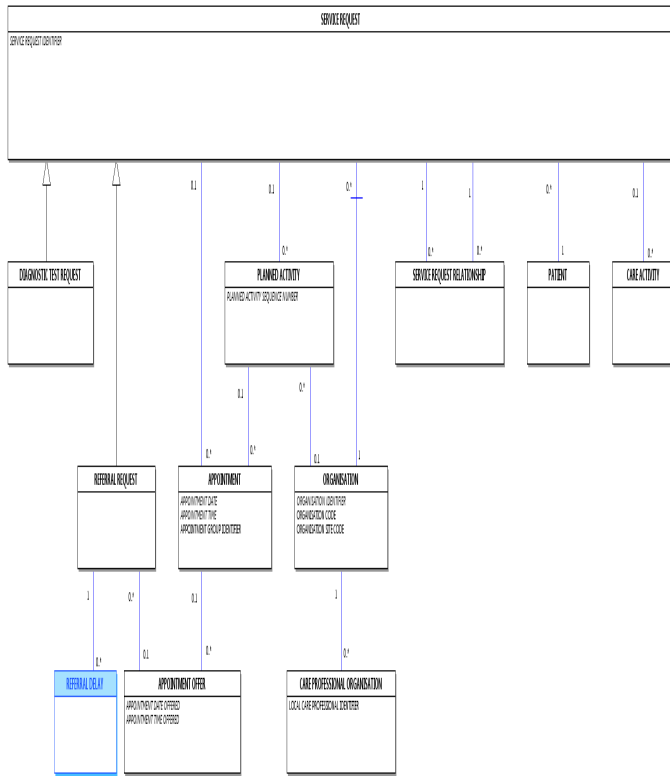
IMPROVING ACCESS TO PSYCHOLOGICAL THERAPIES DIAGRAM

Change to Diagram: Changed Diagram



SERVICE REQUEST DIAGRAM

Change to Diagram: Changed Diagram



NATIONAL CANCER WAITING TIMES MONITORING DATA SET

Change to Data Set: Changed Description

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

See [Patient Pathway Scenarios](#), for the seven scenarios which show: For a "Full Screen" view, click [National Cancer Waiting Times Monitoring Data Set](#).

In the "Full Screen" view, to return to the "Data Set" view, click the browser "back" button.

See [Patient Pathway Scenarios](#), for the scenarios which show:

- the data items required for a range of health care scenarios and
- information on how records will be validated to ensure these scenarios have been correctly reported.
- the data items required for a range of health care scenarios and
- information on how records will be validated to ensure these scenarios have been correctly reported.

The Mandatory or Required (M/R) column indicates the recommendation for the inclusion of data. The Mandatory or Required (M/R/O) column indicates the recommendation for the inclusion of data.

- M = Mandatory: this data element is mandatory and the technical process (e.g. submission of the data set, production of output etc.) cannot be completed without this data element being present
- R = Required: NHS business processes cannot be delivered without this data element. Required data elements may not be applicable to all PATIENT PATHWAYS, see [Patient Pathway Scenarios](#) for further details.
- R = Required: NHS business processes cannot be delivered without this data element. Required data elements may not be applicable to all PATIENT PATHWAYS, see [Patient Pathway Scenarios](#) for further details
- O = Optional: the inclusion of this data element is optional as required for local purposes.

For guidance on downloading the XML Schema, see [XML Schema TRUD Download](#).

For guidance on the XML Schema constraints, see the [National Cancer Waiting Times Monitoring Data Set XML Schema Constraints](#).

PATIENT AND PATHWAY IDENTIFICATION	
To carry Patient and Pathway details. One occurrence of this group is required.	
M/R	Data Set Data Elements
M/R/O	Data Set Data Elements

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

OUTPATIENT SERVICES

To carry Outpatient Services details.
One occurrence of this group is required if applicable to the scenario.

M/R	Data Set Data Elements
To carry Outpatient Services details.	
One occurrence of this group is permitted.	
M/R/O	Data Set Data Elements
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	SITE CODE (OF PROVIDER CONSULTANT UPGRADE)
R	ORGANISATION SITE IDENTIFIER (OF PROVIDER CONSULTANT UPGRADE)
R	DATE FIRST SEEN
R	SITE CODE (OF PROVIDER FIRST SEEN)
R	ORGANISATION SITE IDENTIFIER (OF PROVIDER FIRST SEEN)
R	WAITING TIME ADJUSTMENT (FIRST SEEN)
R	WAITING TIME ADJUSTMENT REASON (FIRST SEEN)
R	DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS)
R	DELAY REASON COMMENT (FIRST SEEN)
R	CANCER CARE SPELL DELAY REASON (FIRST SEEN)
O	CANCER CARE SPELL DELAY REASON COMMENT (FIRST SEEN)

MULTIDISCIPLINARY TEAM ACTIVITY

To carry Multidisciplinary Team Activity details.
One occurrence of this group is required.

M/R	Data Set Data Elements
R	MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR
To carry Multidisciplinary Team Activity details.	
One occurrence of this group is permitted.	
M/R/O	Data Set Data Elements
R	MULTIDISCIPLINARY TEAM CANCER CARE PLAN DISCUSSED INDICATOR
R	MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER)

PATIENT STATUS AND DIAGNOSIS

To carry Patient Status and Diagnosis details.
One occurrence of this group is required.

M/R	Data Set Data Elements
M/R/O	Data Set Data Elements
M	CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS
R	PRIMARY DIAGNOSIS (ICD)
R	METASTATIC SITE
R	TUMOUR LATERALITY
R	CANCER TREATMENT PERIOD START DATE
R	SITE CODE (OF PROVIDER CANCER DECISION TO TREAT)
R	REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER)
R	ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER DECISION TO TREAT)
R	SERVICE REQUESTED DATE (INTER-PROVIDER TRANSFER)
R	REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER)
R	ORGANISATION IDENTIFIER (REFERRING)
R	ORGANISATION IDENTIFIER (RECEIVING)
R	CANCER TRANSFER REFERRING REASON (INTER-PROVIDER TRANSFER)
R	CANCER TRANSFER RECEIVING REASON (INTER-PROVIDER TRANSFER)
R	CANCER FASTER DIAGNOSIS PATHWAY END REASON

R	PRIMARY CANCER SITE (CANCER FASTER DIAGNOSIS PATHWAY)
R	CANCER FASTER DIAGNOSIS PATHWAY END DATE
R	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 CODE (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)
O	METHOD OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)
R	ORGANISATION SITE IDENTIFIER (OF CANCER FASTER DIAGNOSIS PATHWAY END DATE)

TREATMENT EVENTS

To carry Treatment Event details.	
One occurrence of this group is required if applicable to the scenario.	
M/R	Data Set Data Elements
To carry Treatment Event details.	
One occurrence of this group is permitted.	
M/R/O	Data Set Data Elements
R	TREATMENT START DATE (CANCER)
R	SITE CODE (OF PROVIDER CANCER TREATMENT START DATE)
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	RADIOTHERAPY INTENT
R	RADIOTHERAPY PRIORITY
R	DELAY REASON (DECISION TO TREATMENT)
R	DELAY REASON COMMENT (DECISION TO 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	DELAY REASON REFERRAL TO TREATMENT (CANCER)
R	DELAY REASON COMMENT (REFERRAL TO TREATMENT)
R	DELAY REASON (CONSULTANT UPGRADE)
R	DELAY REASON COMMENT (CONSULTANT UPGRADE)
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)

ACTIVE MONITORING

Change to Supporting Information: Changed Description

[Active Monitoring](#) is an [ACTIVITY GROUP](#).

[Active Monitoring](#) will commence when a decision is made (and agreed with the [PATIENT](#)) that it is clinically appropriate to start a period of monitoring, possibly whilst the [PATIENT](#) receives symptomatic support, but without any specific or significant [CLINICAL INTERVENTION](#) at this stage. [Active Monitoring](#) may be initiated by either a [CARE PROFESSIONAL](#) or a [PATIENT](#). The start of [Active Monitoring](#) will end a [REFERRAL TO TREATMENT PERIOD](#).

During [Active Monitoring](#) the [PATIENT](#) will remain under the care of a [CONSULTANT](#) or [NHS Allied Health Professional Service \(Referral To Treatment Measurement\)](#) although the [GENERAL PRACTITIONER](#) will be updated with the progress of their [PATIENT](#).

If a decision to treat is made during [Active Monitoring](#), this will end the [Active Monitoring](#) and will start a new [REFERRAL TO TREATMENT PERIOD](#) - see [REFERRAL TO TREATMENT PERIOD START DATE](#). If a Decision To Treat is made during [Active Monitoring](#), this will end the [Active Monitoring](#) and will start a new [REFERRAL TO TREATMENT PERIOD](#); see [REFERRAL TO TREATMENT PERIOD START DATE](#).

CANCER CARE PLAN

Change to Supporting Information: Changed Description

A [Cancer Care Plan](#) is a [CARE PLAN](#).

A [CARE PLAN](#) developed within a [Cancer Care Spell](#). There should be at least one [Planned Cancer Treatment](#) recorded within a [Cancer Care Plan](#). A [Cancer Care Plan](#) is a [CARE PLAN](#) developed within a [Cancer Care Spell](#).

There should be at least one [Planned Cancer Treatment](#) recorded within a [Cancer Care Plan](#).

CANCER CARE SPELL

Change to Supporting Information: Changed Description

A [Cancer Care Spell](#) is an [ACTIVITY GROUP](#).

The period of time during which a [PATIENT](#) who has been diagnosed as suffering from a single site primary cancer or, in the case of particular skin cancers, one or more [Lesions](#) may receive care. A [Cancer Care Spell](#) is the period of time during which a [PATIENT](#) who has been diagnosed as suffering from a single site primary cancer or, in the case of particular skin cancers, one or more [Lesions](#) may receive care.

The [Cancer Care Spell](#) starts on the date of the [REFERRAL REQUEST](#) from any source to a specialist team. It ends when the [PATIENT](#) dies. The [Cancer Care Spell](#):

- starts on the [DATE](#) of the [REFERRAL REQUEST](#) from any source to a specialist team
- ends when the [PATIENT](#) dies.

A recurrence of the original primary cancer at a secondary site is part of the same [Cancer Care Spell](#).

If a [PATIENT](#) has another primary cancer this will be a new [Cancer Care Spell](#).

The [Cancer Care Spell](#) may only involve diagnostic procedures leading to a diagnosis, for example in cases where the [PATIENT](#) refuses treatment, or it may include treatment and follow-up.

CANCER CARE SPELL DELAY

Change to Supporting Information: Changed Description

A [Cancer Care Spell Delay](#) is a [REFERRAL DELAY](#).

A [Cancer Care Spell Delay](#) is a delay in either an [Out Patient Appointment](#) or treatment for suspected cancer after a referral has been received. A [Cancer Care Spell Delay](#) is a delay experienced during a [Cancer Care Spell](#).

A [Cancer Care Spell Delay](#) should be recorded for each delay. The [Cancer Care Spell Delays](#) for cancer waiting time service standards, as specified in the [National Cancer Waiting Times Monitoring Data Set](#) requirements are the delay between:

- [Cancer Referral To Treatment Period Start Date](#) and [DATE FIRST SEEN](#), where [PRIORITY TYPE](#) is National Code '[Two Week Wait](#)'
- [Cancer Referral To Treatment Period Start Date](#) and [Treatment Start Date \(Cancer\)](#), where [PRIORITY TYPE](#) is National Code '[Two Week Wait](#)' and [CANCER TREATMENT EVENT TYPE](#) is National Code '[First Definitive Treatment for a new primary cancer](#)' or '[First treatment for metastatic disease following an unknown primary cancer](#)'
- [Cancer Referral To Treatment Period Start Date](#) and [Treatment Start Date \(Cancer\)](#), where [PRIORITY TYPE](#) is National Code '[Urgent](#)' and [SOURCE OF REFERRAL FOR OUT-PATIENTS](#) is National Code '[Referral from a National Screening Programme](#)' and [CANCER TREATMENT EVENT TYPE](#) is National Code '[First Definitive Treatment for a new primary cancer](#)'
- [Cancer Treatment Period Start Date](#) and [Treatment Start Date \(Cancer\)](#), where [CANCER TREATMENT EVENT TYPE](#) is National Code '[First Definitive Treatment for a new primary cancer](#)' or '[First treatment for metastatic disease following an unknown primary cancer](#)'
- [Consultant Upgrade Date](#) and [Treatment Start Date \(Cancer\)](#), where [CANCER TREATMENT EVENT TYPE](#) is National Code '[First Definitive Treatment for a new primary cancer](#)' or '[First treatment for metastatic disease following an unknown primary cancer](#)'
- [Cancer Treatment Period Start Date](#) and [Treatment Start Date \(Cancer\)](#), where [CANCER TREATMENT EVENT TYPE](#) is NOT National Code '[First Definitive Treatment for a new primary cancer](#)' OR '[First treatment for metastatic disease following an unknown primary cancer](#)'

CANCER FASTER DIAGNOSIS PATHWAY

Change to Supporting Information: New Supporting Information

A [Cancer Faster Diagnosis Pathway](#) is a [Cancer Pathway](#).

A [Cancer Faster Diagnosis Pathway](#) is the first part of a [Cancer Pathway](#).

A [Cancer Faster Diagnosis Pathway](#) describes:

- the period of time from an initial [REFERRAL REQUEST RECEIVED DATE](#) for suspected cancer to having cancer either diagnosed or ruled out or
- reaching a [Decision To Treat](#), whichever comes first.

During this time, the [PATIENT](#) may be recorded as having multiple [Out-Patient Appointments](#), [Imaging or Radiodiagnostic Events](#) and inter-provider transfers.

This supporting information is also known by these names:

Context	Alias
plural	Cancer Faster Diagnosis Pathways

CANCER FASTER DIAGNOSIS PATHWAY END DATE

Change to Supporting Information: New Supporting Information

A [Cancer Faster Diagnosis Pathway End Date](#) is an [ACTIVITY DATE TIME](#).

A [Cancer Faster Diagnosis Pathway End Date](#) is either the [DATE](#) when the [PATIENT](#):

- is informed of the [CANCER FASTER DIAGNOSIS PATHWAY END REASON](#), where the National Code is either '[Diagnosis of cancer](#)' or '[Ruling out of cancer](#)'
- is excluded from the [Cancer Faster Diagnosis Pathway](#), where the [CANCER FASTER DIAGNOSIS PATHWAY END REASON](#) National Code is '[Excluded from the Cancer Faster Diagnosis Pathway](#)'.

Note: where a [Decision To Treat](#) is made before the [CANCER FASTER DIAGNOSIS PATHWAY END REASON](#) is recorded, then the end of the [Cancer Faster Diagnosis Pathway](#) is the [DECISION TO TREAT DATE](#).

This supporting information is also known by these names:

Context	Alias
plural	Cancer Faster Diagnosis Pathway End Dates

CANCER PATHWAY

Change to Supporting Information: New Supporting Information

A [Cancer Pathway](#) is a [PATIENT PATHWAY](#).

A [Cancer Pathway](#) is the [PATIENT](#)'s journey from the initial suspicion of cancer through [Clinical Investigations](#), [PATIENT DIAGNOSIS](#) and treatment.

This could be by:

- Initial referral to a hospital specialist by the [PATIENT](#)'s [GENERAL PRACTITIONER](#)
- Assessment in an [Accident and Emergency Department](#)
- Assessment when the [PATIENT](#) is already in the hospital system with an acute illness or an earlier [PATIENT DIAGNOSIS](#)
- Identification through one of the [Screening Programmes](#).

For the following data sets, types of [Cancer Pathway](#) include:

- [Cancer Outcomes and Services Data Set](#):
 - [Primary Cancer Pathway](#)
 - [Non Primary Cancer Pathway](#).
- [National Cancer Waiting Times Monitoring Data Set](#):
 - [Cancer Faster Diagnosis Pathway](#).

This supporting information is also known by these names:

Context	Alias
plural	Cancer Pathways

CANCER RECURRENCE

Change to Supporting Information: New Supporting Information

A [Cancer Recurrence](#) is a [MALIGNANT ABNORMALITY](#).

[Cancer Recurrence](#) is when cancer returns after treatment.

For further information on [Cancer Recurrence](#), see the [National Cancer Institute website](#).

This supporting information is also known by these names:

Context	Alias
alsoknownas	Recurrent Cancer
plural	Cancer Recurrences
fullname	Recurrence of Cancer

CANCER REFERRAL TO TREATMENT PERIOD

Change to Supporting Information: Changed Description

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 children's 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 'Two Week Wait'
- The [PATIENT](#) was referred to secondary care with suspected cancer by a [GENERAL MEDICAL PRACTITIONER](#) or [GENERAL DENTAL PRACTITIONER](#), where the [PRIORITY TYPE](#) is National Code '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: A [Cancer Referral To Treatment Period](#) is the period of time between [Cancer Referral To Treatment Period Start Date](#) and either the:

- the [TREATMENT START DATE FOR CANCER](#), where a [PATIENT](#) diagnosed with a cancer condition (see [Cancer Waiting Times](#)) 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.
- [Treatment Start Date \(Cancer\)](#), where a [PATIENT](#) diagnosed with a cancer condition receives [First Definitive Treatment](#)
- [CANCER FASTER DIAGNOSIS PATHWAY END DATE](#) where a [PATIENT](#) referred with suspected cancer by a [GENERAL MEDICAL PRACTITIONER](#) or [GENERAL DENTAL PRACTITIONER](#) has cancer ruled out
- [DATE](#) the [PATIENT](#) declines [First Definitive Treatment](#), or
- [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](#). [WAITING TIME ADJUSTMENT \(FIRST SEEN\)](#) is used to align waiting times monitoring with the service standard for [18 Weeks](#).

CANCER REFERRAL TO TREATMENT PERIOD START DATE, renamed from CANCER REFERRAL TO TREATMENT PERIOD START DATE

Change to Supporting Information: Changed Name, Description

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](#) is an [ACTIVITY DATE TIME](#).

A [CANCER REFERRAL TO TREATMENT PERIOD START DATE](#) will be one of the following: A [Cancer Referral To Treatment Period Start Date](#) is the [Start Date](#) of a [Cancer Referral To Treatment Period](#).

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, as this is the [DATE](#) used to calculate the start of the two month (62 day) waiting time target for [PATIENTS](#) who have been upgraded to a cancer pathway.
- 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.
- 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](#) is National Code 'Two Week Wait' *
 - to secondary care where the [PATIENT](#) was subsequently upgraded onto a Cancer Pathway. The [CONSULTANT UPGRADE DATE](#) will also be recorded, as this is the [DATE](#) used to calculate the start of the two month (62 day) waiting time target for [PATIENTS](#) who have been upgraded to a Cancer Pathway
 - into secondary care when the [PATIENT](#) was referred urgently for 'breast symptoms', where the [PRIORITY TYPE](#) is National Code 'Two Week Wait' *

- to an Assessment Clinic following the identification of an abnormality by an NHS Cancer Screening Service, where the PRIORITY TYPE is National Code '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 is National Code 'Routine', and where the PATIENT was subsequently upgraded onto a Cancer 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_Notes:

- * The start of the Cancer Faster Diagnosis Pathway will be the Cancer Referral To Treatment Period Start Date for the items annotated.

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 Out-Patient Appointment slot (i.e. converted). See REFERRAL REQUEST RECEIVED DATE.

CANCER REFERRAL TO TREATMENT PERIOD START DATE, renamed from CANCER REFERRAL TO TREATMENT PERIOD START DATE

Change to Supporting Information: Changed Name, Description

- Changed Name from Data_Dictionary.Attributes.C.CANCER_REFERRAL_TO_TREATMENT_PERIOD_START_DATE to Data_Dictionary.NHS_Business_Definitions.C.Cancer_Referral_To_Treatment_Period_Start_Date
- Changed Description

CANCER TREATMENT PERIOD

Change to Supporting Information: Changed Description

A Cancer Treatment Period is an ACTIVITY GROUP.

A Cancer Treatment Period is initiated when a decision to treat for a cancer condition 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 FOR CANCER. (See Cancer Waiting Times). A Cancer Treatment Period is:

- initiated when a Decision To Treat for a cancer condition 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 (e.g. 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 FOR CANCER. The full list of International Classification of Diseases (ICD) diagnosis codes is available on the NHS Digital website at: Cancer Waiting Times.

CANCER CARE SETTING (TREATMENT) is used to derive whether a waiting time adjustment between CANCER TREATMENT PERIOD START DATE and TREATMENT START DATE FOR CANCER may be recorded in WAITING TIME ADJUSTMENT (TREATMENT). If the PATIENT receives several different types of treatment within the same Cancer Care Plan (e.g. 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 a waiting time adjustment between Cancer Treatment Period Start Date and Treatment Start Date (Cancer) may be recorded in WAITING TIME ADJUSTMENT (TREATMENT).

CANCER TREATMENT PERIOD START DATE, renamed from CANCER TREATMENT PERIOD START DATE

Change to Supporting Information: Changed Name, Description

The DATE when a Cancer Treatment Period is started. A Cancer Treatment Period Start Date is an ACTIVITY DATE TIME.

The CANCER TREATMENT PERIOD START DATE will be either: A Cancer Treatment Period Start Date is the Start Date of a Cancer Treatment Period.

A 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 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.
- 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_ renamed from CANCER TREATMENT PERIOD START DATE

Change to Supporting Information: Changed Name, Description

- Changed Name from Data_Dictionary.Attributes.C.CANCER_TREATMENT_PERIOD_START_DATE to Data_Dictionary.NHS_Business_Definitions.C.Cancer_Treatment_Period_Start_Date
- Changed Description

CLINICAL DATA SETS MESSAGE DOCUMENTATION

Change to Supporting Information: Changed Description

XML Schema Download:

- [XML Schema TRUD Download](#)

XML Schema Constraints:

- [Cancer Outcomes and Services Data Set XML Schema Constraints](#)
- [Diagnostic Imaging Data Set XML Schema Constraints](#)
- [HIV and AIDS Reporting Data Set XML Schema Constraints](#)
- [National Cancer Waiting Times Monitoring Data Set XML Schema Constraints](#)
- [NHS Health Checks Data Set XML Schema Constraints](#)
- [Systemic Anti-Cancer Therapy Data Set XML Schema Constraints](#)

CLINICAL DATA SETS MESSAGE DOCUMENTATION MENU

Change to Supporting Information: Changed Description

[Clinical Data Sets Menu](#)

XML Schema Download:

- [XML Schema TRUD Download](#)

XML Schema Constraints:

- [Cancer Outcomes and Services](#)
- [Diagnostic Imaging](#)
- [HIV and AIDS](#)
- [National Cancer Waiting Times Monitoring](#)
- [NHS Health Checks](#)
- [Systemic Anti-Cancer Therapy](#)

CONSULTANT UPGRADE

Change to Supporting Information: New Supporting Information

A [Consultant Upgrade](#) is an [ACTIVITY](#).

A [Consultant Upgrade](#) is when the [CONSULTANT](#) responsible for the care of the [PATIENT](#) (or an authorised member of the [CONSULTANT](#) team as defined by local policy) decides that the [PATIENT](#) should be upgraded onto an urgent [Cancer Pathway](#).

[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](#) National Code is 'referral from a National [Screening Programme](#)' and
- the [PRIORITY TYPE](#) is National Code 'Urgent'.

This supporting information is also known by these names:

Context	Alias
plural	Consultant Upgrades

CONSULTANT UPGRADE DATE

Change to Supporting Information: Changed Description

A [Consultant Upgrade Date](#) is an [ACTIVITY DATE TIME](#).

A ~~[Consultant Upgrade Date](#) 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 \[PATIENT PATHWAY\]\(#\)](#)~~. A [Consultant Upgrade Date](#) is the [DATE](#) of the [Consultant Upgrade](#).

The [Consultant Upgrade Date](#) should only be recorded when the [PRIORITY_TYPE](#) of the original [SERVICE REQUEST](#) was not National Code '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 'referral from a National Screening Programme'), and the [PRIORITY_TYPE](#) of the [SERVICE REQUEST](#) was National Code 'Urgent'. Therefore a [Consultant Upgrade Date](#) cannot be recorded in these circumstances. The [Consultant Upgrade Date](#) must be:

The [Consultant Upgrade Date](#) must:

- be on or before the [DECISION TO TREAT DATE](#) (if recorded)
- also be on or before the [Multidisciplinary Team Discussion Date \(Cancer\)](#) (if recorded).
- on or before the [DECISION TO TREAT DATE](#) (if recorded) and
- on or before the [Multidisciplinary Team Discussion Date \(Cancer\)](#) (if recorded).

DECISION TO TREAT

Change to Supporting Information: New Supporting Information

A [Decision To Treat](#) is related to a [PLANNED ACTIVITY](#).

A [Decision To Treat](#) is made when it is decided that the [PATIENT](#) requires a specific treatment.

This supporting information is also known by these names:

Context	Alias
plural	Decisions To Treat

FIRST DEFINITIVE TREATMENT

Change to Supporting Information: Changed Description

[First Definitive Treatment](#) is the first [CLINICAL INTERVENTION](#) intended to manage a [PATIENT](#)'s disease, condition or injury and avoid further [CLINICAL INTERVENTIONS](#). What constitutes [First Definitive Treatment](#) is a matter of clinical judgement in consultation with others, where appropriate, including the [PATIENT](#).

What constitutes [First Definitive Treatment](#) is a matter of clinical judgement in consultation with others, where appropriate, including the [PATIENT](#).

Further guidance on ending [REFERRAL TO TREATMENT PERIODS](#) and first treatments.

Undertaking a procedure is not necessarily in itself the end of a [REFERRAL TO TREATMENT PERIOD](#). For example, outpatient or day case diagnostic [CARE ACTIVITIES](#) prior to admission for treatment do not represent the end of the period and, in these cases, are part of the diagnostic process rather than the start of treatment. For example, outpatient or day case diagnostic [CARE ACTIVITIES](#) prior to admission for treatment do not represent the end of the [REFERRAL TO TREATMENT PERIOD](#) and, in these cases, are part of the diagnostic process rather than the start of treatment.

Commencement of medication as an outpatient can be the end of a [REFERRAL TO TREATMENT PERIOD](#), if it is intended as the [First Definitive Treatment](#). However, [CARE PROFESSIONALS](#) often begin to manage a [PATIENT](#)'s condition in advance of the first actual treatment taking place, for example by giving pain relief before a surgical procedure takes place. In these cases, the [REFERRAL TO TREATMENT PERIOD END DATE](#) is when the [First Definitive Treatment](#) (in this example, surgery) has started.

In [NHS Allied Health Professional Services \(Referral To Treatment Measurement\)](#), [CLINICAL INTERVENTIONS](#) are often the [First Definitive Treatment](#). However, it may be judged that other elements of [PATIENT](#) care constitute [First Definitive Treatment](#), for example the giving of advice. If there is any doubt, the key determining factors are: However, it may be judged that other elements of [PATIENT](#) care constitute [First Definitive Treatment](#), for example the giving of advice. If there is any doubt, the key determining factors are

- what does the Allied Health Professional responsible for the [PATIENT](#)'s care consider the start of treatment to be?
- when does the [PATIENT](#) perceive their treatment to have started?

Other [CARE ACTIVITIES](#) that may end a [REFERRAL TO TREATMENT PERIOD](#) as [First Definitive Treatment](#) include: Other [CARE ACTIVITIES](#) that may end a [REFERRAL TO TREATMENT PERIOD](#) as [First Definitive Treatment](#) include the:

- the fitting of a medical device where a [CONSULTANT](#) decides that treatment consists of fitting a medical device. This is the date of the actual fitting of the device rather than the point at which the [PATIENT](#) is measured for the device.
- the date of a therapeutic procedure where it is intended as diagnostic but the [CARE PROFESSIONAL](#) makes a decision to undertake a therapeutic procedure at the same time. In this example, it may count as a start of treatment and as such, the period will end.
- the date for less intensive treatment and medical management such as [Palliative Care](#) that may be attempted before moving on to invasive procedures and treatment or may be the only treatment. In such cases, the first treatment that is intended to manage a [PATIENT](#)'s disease, condition or injury will end that particular [REFERRAL TO TREATMENT PERIOD](#). Should the [PATIENT](#) at some later stage require more 'aggressive' treatment then the decision to treat would start a new [REFERRAL TO TREATMENT PERIOD](#).

fitting of a medical device where a **CONSULTANT** decides that treatment consists of fitting a medical device. This is the date of the actual fitting of the device rather than the point at which the **PATIENT** is measured for the device

DATE of a therapeutic procedure where it is intended as diagnostic but the **CARE PROFESSIONAL** makes a decision to undertake a therapeutic procedure at the same time. In this example, it may count as a start of treatment and as such, the period will end

DATE for less intensive treatment and medical management such as **Palliative Care** that may be attempted before moving on to invasive procedures and treatment or may be the only treatment. In such cases, the first treatment that is intended to manage a **PATIENT's** disease, condition or injury will end that particular **REFERRAL TO TREATMENT PERIOD**. Should the **PATIENT** at some later stage require more 'aggressive' treatment then the **Decision To Treat** would start a new **REFERRAL TO TREATMENT PERIOD**

DATE **Active Monitoring** commenced.

NATIONAL CANCER WAITING TIMES MONITORING DATA SET OVERVIEW

Change to Supporting Information: Changed Description

Introduction:

The **Cancer Reform Strategy (2007)** introduced new and changed commitments in terms of service standards for cancer **PATIENTS** that must be met. A **Review of Cancer Waiting Times Standards** was carried out by the **Department of Health** and published alongside **Improving Outcomes: A Strategy for Cancer (2011)**. The information in the **National Cancer Waiting Times Monitoring Data Set** is required to provide details on cancer **SERVICES** in England. This enables the performance monitoring of **Health Care Providers** and **Clinical Commissioning Groups** in order to maintain and increase standards across England.

Following this review it was confirmed in **Improving Outcomes: A Strategy for Cancer** that **Cancer Waiting Times** data relates to:

- the waiting time requirements outlined in the **'NHS Cancer Plan (2000)'** and the **'Cancer Reform Strategy (2007)'** and
- a performance standard that **PATIENTS** should wait no longer than 28 days from initial referral by a **GENERAL PRACTITIONER** to diagnosis or ruling out of cancer (the **28 Day Faster Diagnosis Standard**) introduced by the **Independent Cancer Taskforce**, **'Achieving World-Class Cancer Outcomes'**.

"overall, cancer waiting time standards should be retained. Shorter waiting times can help to ease patient anxiety and, at best, can lead to earlier diagnosis, quicker treatment, a lower risk of complications, an enhanced patient experience and improved cancer outcomes. The current cancer waiting times standards will therefore be retained." The **'Cancer Reform Strategy (2007)'** introduced new and changed commitments in terms of service standards for cancer **PATIENTS** that must be met. A **Review of Cancer Waiting Times Standards** was carried out by the **Department of Health** and published alongside **'Improving Outcomes: A Strategy for Cancer (2011)'**.

This updated version of the **National Cancer Waiting Times Monitoring Data Set** supports the continued management and monitoring of the following waiting times: The **National Cancer Waiting Times Monitoring Data Set** supports the continued management and monitoring of the following waiting times:

- A maximum two week wait from an urgent **GP** referral for suspected cancer to **DATE FIRST SEEN** by a specialist for all suspected cancers
- A maximum one month (31-day) wait from diagnosis (**CANCER TREATMENT PERIOD START DATE**) to **First Definitive Treatment** for all cancers
- A maximum two month (62-day) wait from urgent **GP** referral for suspected cancer to **First Definitive Treatment** for all cancers
- A maximum one month (31-day) wait from urgent **GP** referral for suspected cancer to **First Definitive Treatment** for children's cancers, testicular cancers and acute leukaemia
- A maximum 62-day wait from referral from a cancer **Screening Programme** to **First Definitive Treatment** for all cancers
- A maximum two week wait from an urgent **GENERAL PRACTITIONER** referral for suspected cancer to **DATE FIRST SEEN** by a specialist for all suspected cancers
- A maximum 28 day wait from an urgent **GENERAL PRACTITIONER** referral for suspected cancer to having cancer either diagnosed or ruled out (**CANCER FASTER DIAGNOSIS PATHWAY END DATE**), or **DECISION TO TREAT DATE**, whichever comes first, for all suspected cancers
- A maximum 28 day wait from referral for breast symptoms (where cancer is not initially suspected) to having cancer either diagnosed or ruled out (**CANCER FASTER DIAGNOSIS PATHWAY END DATE**), or **DECISION TO TREAT DATE**, whichever comes first, for all suspected cancers
- A maximum 28 day wait from a referral to an **Assessment CLINIC OR FACILITY** following the identification of an abnormality by an **NHS Cancer Screening Service** to having cancer either diagnosed or ruled out (**CANCER FASTER DIAGNOSIS PATHWAY END DATE**), or **DECISION TO TREAT DATE**, whichever comes first, for all suspected cancers
- A maximum one month (31-day) wait from diagnosis (**Cancer Treatment Period Start Date**) to **First Definitive Treatment** for all cancers
- A maximum two month (62-day) wait from urgent **GENERAL PRACTITIONER** referral for suspected cancer to **First Definitive Treatment** for all cancers
- A maximum one month (31-day) wait from urgent **GENERAL PRACTITIONER** referral for suspected cancer to **First Definitive Treatment** for children's cancers, testicular cancers and acute leukaemia
- A maximum 62-day wait from referral from an **NHS Cancer Screening Programme** to **First Definitive Treatment** for all cancers
- A maximum 62-day wait from a **CONSULTANTS** decision to upgrade the urgency of a **PATIENT** they suspect to have cancer to **First Definitive Treatment** for all cancers
- A maximum 31-day wait for all subsequent treatments for new cases of primary and recurrent cancer where an **Anti-Cancer Drug Regimen**, surgery or **Radiotherapy** is the chosen **CANCER TREATMENT MODALITY**
- A maximum 31-day wait for all subsequent treatments for new cases of primary and **Recurrent Cancer** where an **Anti-Cancer Drug Regimen**, surgery or **Radiotherapy** is the chosen **CANCER TREATMENT MODALITY**
- A maximum two week wait from referral for breast symptoms (where cancer is not initially suspected) to **DATE FIRST SEEN**.

Patient Pathway Scenarios:

The **Patient Pathway Scenarios** for the **National Cancer Waiting Times Monitoring Data Set** are to be used to manage the collection of data for all **PATIENTS** suspected of having, or diagnosed with cancer.

Cancer for the purpose of this data collection exercise is defined using the **International Classification of Diseases (ICD)** codes. Data for **Patient Pathway Scenarios** two to seven must be collected and transmitted as specified for all **PATIENTS** with a **PRIMARY DIAGNOSIS** within the range C00 to C07 or

D05, or a secondary or metastatic disease linked to the original [PRIMARY DIAGNOSIS \(ICD\)](#) within this range (excluding categories relating to non-melanoma skin cancer).

A full list of the [International Classification of Diseases \(ICD\)](#) diagnosis codes the Cancer Waiting Times Database will accept is available at: [Cancer Waiting Times](#).

When reporting patient records to the Cancer Waiting Times Database:

- The Trust first seeing a [PATIENT](#) in a particular month or quarter is responsible for ensuring that the mandated and required 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.
- Data to be complete and validated 25 working days after the [REPORTING PERIOD END DATE](#), either month or quarter
- Specified dates are available at: [Cancer Waiting Times](#).

Transmission:

- Information can be entered either manually through the Cancer Waiting Times Record screen (as an individual record) or via the available batch upload function.
- The specification for the csv upload file is detailed in the 'National Cancer Waiting Times User Manual' available at: [Cancer Waiting Times](#).
- Further information relating to the data items required for the seven scenarios can be found at [Patient Pathway Scenarios](#).
- The ability to transmit the data to the Cancer Waiting Times Database in XML format will be introduced from 1 October 2016 with the current csv upload function being discontinued from 1 April 2017. Data for submission will be formatted into an XML file as per [Technology Reference Data Update Distribution \(TRUD\)](#) at: [NHS Data Model and Dictionary: DD XML Schemas](#).
- Data can be transmitted to the Cancer Waiting Times System through any of three routes:
 - Bulk upload via an XML file
 - Bulk upload via a CSV file
 - Single record entry through the Cancer Waiting Times Submission portal
- The specification for CSV upload file is detailed in the 'National Cancer Waiting Times User Manual' available on the NHS Digital website
- Data for XML submission will be formatted into an XML file as per [Technology Reference Data Update Distribution \(TRUD\)](#) at: [NHS Data Model and Dictionary: DD XML Schemas](#)
- Once data is transmitted to the Cancer Waiting Times system it will undergo further validation. Details of this validation is available on the NHS Digital website at: [Cancer Waiting Times](#).

Security and Confidentiality:

Security and confidentiality information to accompany the collection of this information is available at: [Cancer Waiting Times](#).

Further guidance:

- Further guidance is available at: [Cancer Waiting Times](#).
- Any additional queries regarding the [National Cancer Waiting Times Monitoring Data Set](#) should be addressed to CANCER-WAITS@dh.gsi.gov.uk.
- Further guidance relating to the [National Cancer Waiting Times Monitoring Data Set](#) is available on the NHS Digital website at: [Cancer Waiting Times](#).
- Queries regarding the [National Cancer Waiting Times Monitoring Data Set](#) should be addressed to CANCER-WAITS@dh.gsi.gov.uk.

NATIONAL CANCER WAITING TIMES MONITORING DATA SET SCENARIOS

Change to Supporting Information: Changed Description

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

Concept of Operation and Patient Pathway Scenarios:

The [National Cancer Waiting Times Monitoring Data Set](#) is a generic data set designed to support the monitoring of waiting times for a variety of different pathways of cancer care. For the purpose of this data collection cancer is defined using the [International Classification of Diseases \(ICD\)](#) codes. Data must be collected and transmitted as specified for all [PATIENTS](#) with a [PRIMARY DIAGNOSIS](#) within the range C00 to C97 or D05, or a secondary or metastatic disease linked to the original [PRIMARY DIAGNOSIS \(ICD\)](#) within this range (excluding categories relating to non-melanoma skin cancer). A full list of the [International Classification of Diseases \(ICD\)](#) diagnosis codes the Cancer Waiting Times Database will accept is available at: [Cancer Waiting Times](#). The full list of [International Classification of Diseases \(ICD\)](#) diagnosis codes is available on the NHS Digital website at: [Cancer Waiting Times](#).

Collection and submission of the [National Cancer Waiting Times Monitoring Data Set](#) is to be managed according to the maximum waiting time and information requirements of the pathway of care for each individual [PATIENT](#). These requirements for providers of cancer [SERVICES](#) to return data to the Cancer Waiting Times Database are defined using seven different scenarios. These requirements for providers of cancer [SERVICES](#) to return data to the Cancer Waiting Times Database are defined using different scenarios.

The seven columns in the table below show which data items are required for a range of health care scenarios:

- **Scenario 1:**
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 the Cancer [Screening Programme](#)
- **Scenario 2:**
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 the Cancer [Screening Programme](#)
- **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 the Cancer [Screening Programme](#)

- **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](#).
- **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](#).
- **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](#).
- **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](#) list.
- **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 an 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 an 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](#) receives [First Definitive Treatment](#) for cancer following a [REFERRAL REQUEST](#) with [PRIORITY TYPE](#) 'Two Week Wait', or where an urgent referral is from an NHS Cancer Screening Programme.
- **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 an 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 an 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 an 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 an 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 an 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 2c:**
The [Health Care Provider](#) where the [PATIENT](#) receives [First Definitive Treatment](#) for cancer following an inter-provider transfer, and where the [PATIENT](#) has 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](#).
- **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 an 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.

The columns in the table below show which data items are required for a range of health care scenarios:

Data Set Notation:

- **M = Mandatory:** the Standard Contract Schedule 5 requires NHS provider [Organisations](#) to submit this information on a monthly basis. [NHS England](#) require the data to be submitted 25 working days after the end of each month or quarter.

- **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. [NHS England](#) require the data to be submitted 25 working days after the end of each month or quarter.
- **O = Optional**
- **O* = Optional if applicable:** These optional fields should only be populated if they relate to the [PATIENT PATHWAY](#) identified in scenarios 1 to 7 and the conditions required for their use are met.
- **O* = Optional if applicable:** These optional fields should only be populated if they relate to the [PATIENT PATHWAY](#) identified in the scenarios and the conditions required for their use are met.
- **N/A = Not Applicable**

Note: Inter-Provider Transfers:

- # First transfer involving the [Health Care Provider](#)
- ## Second transfer involving the [Health Care Provider](#). There can be up to ten inter-provider transfers involving many [Organisations](#), but an individual [Organisation](#) can only be involved in two transfers of a [PATIENT](#).

Data-Item	Scenarios						
	Scenario 1	Scenario 2	Scenario 3	Scenario 4	Scenario 5	Scenario 6	Scenario 7
NHS NUMBER	M	M	M	M	M	M	M
NHS NUMBER STATUS INDICATOR CODE	M	M	M	M	M	M	M
PATIENT PATHWAY IDENTIFIER	M	M*	M*	M*	M*	M*	M*
ORGANISATION CODE (PATIENT PATHWAY IDENTIFIER ISSUER)	M	M*	M*	M*	M*	M*	M*
SOURCE OF REFERRAL FOR OUT-PATIENTS	M	N/A	N/A	M	N/A	O	N/A
PRIORITY TYPE CODE	M	N/A	N/A	M	N/A	O	N/A
DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS)	M*	N/A	N/A	N/A	N/A	O	N/A
CANCER REFERRAL TO TREATMENT PERIOD START DATE	M	M	N/A	O	N/A	O	N/A
TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE	M	N/A	N/A	N/A	N/A	O	N/A
CONSULTANT UPGRADE DATE	N/A	N/A	N/A	M	N/A	O	N/A
SITE CODE (OF PROVIDER CONSULTANT UPGRADE)	N/A	N/A	N/A	M	N/A	O	N/A
DATE FIRST SEEN	M	N/A	N/A	M	N/A	O	N/A
SITE CODE (OF PROVIDER FIRST SEEN)	M	N/A	N/A	M	N/A	N/A	N/A
WAITING TIME ADJUSTMENT (FIRST SEEN)	M*	N/A	N/A	O*	N/A	N/A	N/A
WAITING TIME ADJUSTMENT REASON (FIRST SEEN)	M*	N/A	N/A	O*	N/A	N/A	N/A
DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS)	M*	N/A	N/A	N/A	N/A	N/A	N/A
DELAY REASON COMMENT (FIRST SEEN)	M*	N/A	N/A	M*	N/A	N/A	N/A
MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR	M*	M*	M*	M*	M*	M*	M*
MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER)	M*	M*	M*	M*	M*	M*	M*
CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS	M	M	M	M	M	M	M

PRIMARY DIAGNOSIS (ICD)	N/A	M	M	M	M	M	M
METASTATIC SITE	N/A	M*	M*	M*	M*	M*	M*
TUMOUR LATERALITY	N/A	M	M	M	M	M	M
CANCER TREATMENT PERIOD START DATE	N/A	M	M	M	M	M	M
SITE CODE (OF PROVIDER-CANCER DECISION TO TREAT)	M*	M	M	M	M	M	M
REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER)	N/A	M*	M*	M*	M*	M*	M*
TREATMENT START DATE (CANCER)	N/A	M	M	M	M	M	M
SITE CODE (OF PROVIDER-CANCER TREATMENT START DATE)	N/A	M	M	M	M	M	M
CANCER TREATMENT EVENT TYPE	N/A	M	M	M	M	M	M
CANCER TREATMENT MODALITY	N/A	M	M	M	M	M	M
CLINICAL TRIAL INDICATOR	N/A	M	M	M	M	M	M
CANCER CARE SETTING (TREATMENT)	N/A	M	M	M	M	M	M
RADIOTHERAPY INTENT	N/A	M*	M*	M*	M*	M*	M*
RADIOTHERAPY PRIORITY	N/A	M*	M*	M*	M*	M*	M*
DELAY REASON (DECISION TO TREATMENT)	N/A	M*	M*	M*	M*	M*	M*
DELAY REASON COMMENT (DECISION TO TREATMENT)	N/A	M*	M*	M*	M*	M*	M*
WAITING TIME ADJUSTMENT (TREATMENT)	N/A	M*	M*	M*	M*	M*	M*
WAITING TIME ADJUSTMENT REASON (TREATMENT)	N/A	M*	M*	M*	M*	M*	M*
DELAY REASON REFERRAL TO TREATMENT (CANCER)	N/A	M*	N/A	M*	N/A	Q*	N/A
DELAY REASON COMMENT (REFERRAL TO TREATMENT)	N/A	M*	N/A	M*	N/A	Q*	N/A
DELAY REASON (CONSULTANT UPGRADE)	N/A	M*	N/A	M*	N/A	Q*	N/A
DELAY REASON COMMENT (CONSULTANT UPGRADE)	N/A	M*	N/A	M*	N/A	Q*	N/A

Data Item	Scenarios														
	Scenario 1a	Scenario 1b	Scenario 1c	Scenario 1d	Scenario 1e	Scenario 1f	Scenario 1g	Scenario 2a	Scenario 2b	Scenario 2c	Scenario 3	Scenario 4	Scenario 5	Scenario 6	Scenario 7
NHS NUMBER	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M
NHS NUMBER STATUS INDICATOR CODE	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M
PATIENT PATHWAY IDENTIFIER	M	M	M	M	M	M	M	M*	M*	M*	M*	M*	M*	M*	M*
ORGANISATION IDENTIFIER (PATIENT PATHWAY IDENTIFIER ISSUER)	M	M	M	M	M	M	M	M*	M*	M*	M*	M*	M*	M*	M*
SOURCE OF REFERRAL FOR OUT-PATIENTS	M	M	M	M	M	N/A	M	N/A	N/A	N/A	N/A	M	N/A	O	N/A

PRIORITY TYPE CODE	M	M	M	M	M	N/A	M	N/A	N/A	N/A	N/A	M	N/A	O	N/A
DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS)	M*	M*	M*	M*	M*	N/A	M*	N/A	N/A	N/A	N/A	N/A	N/A	O	N/A
CANCER REFERRAL TO TREATMENT PERIOD START DATE	M	M	M	M	M	N/A	M	M	N/A	N/A	N/A	O	N/A	O	N/A
TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE	M	M	M	M	M	N/A	M	N/A	N/A	N/A	N/A	N/A	N/A	O	N/A
CONSULTANT UPGRADE DATE	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M	N/A	O	N/A
ORGANISATION SITE IDENTIFIER (OF PROVIDER CONSULTANT UPGRADE)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M	N/A	O	N/A
DATE FIRST SEEN	M	M	M	M	M	N/A	M	N/A	N/A	N/A	N/A	M	N/A	O	N/A
ORGANISATION SITE IDENTIFIER (OF PROVIDER FIRST SEEN)	M	M	M	M	M	N/A	M	N/A	N/A	N/A	N/A	M	N/A	N/A	N/A
WAITING TIME ADJUSTMENT (FIRST SEEN)	M*	M*	M*	M*	M*	N/A	M*	N/A	N/A	N/A	N/A	O*	N/A	N/A	N/A
WAITING TIME ADJUSTMENT REASON (FIRST SEEN)	M*	M*	M*	M*	M*	N/A	M*	N/A	N/A	N/A	N/A	O*	N/A	N/A	N/A
CANCER CARE SPELL DELAY REASON (FIRST SEEN)	M*	M*	M*	M*	M*	N/A	M*	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CANCER CARE SPELL DELAY REASON COMMENT (FIRST SEEN)	O*	O*	O*	O*	O*	N/A	O*	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
MULTIDISCIPLINARY TEAM CANCER CARE PLAN DISCUSSED INDICATOR	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*
MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER)	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*	M*
CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M
PRIMARY DIAGNOSIS (ICD)	N/A	M*	M*	M*	N/A	N/A	N/A	M	M	M	M	M	M	M	M
TUMOUR LATERALITY	N/A	M*	M*	M*	N/A	N/A	N/A	M	M	M	M	M	M	M	M
CANCER TREATMENT PERIOD START DATE	N/A	N/A	M	M	N/A	N/A	N/A	M	M	M	M	M	M	M	M
ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER DECISION TO TREAT)	N/A	N/A	M	M	N/A	N/A	N/A	M	M	M	M	M	M	M	M
SERVICE REQUESTED DATE (INTER-PROVIDER TRANSFER) #	N/A	N/A	N/A	N/A	M	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER) #	N/A	N/A	N/A	N/A	N/A	M	N/A	N/A	M	M	N/A	N/A	N/A	N/A	N/A
ORGANISATION IDENTIFIER (REFERRING) #	N/A	N/A	N/A	N/A	M	M	N/A	N/A	M	M	N/A	N/A	N/A	N/A	N/A
ORGANISATION IDENTIFIER (RECEIVING) #	N/A	N/A	N/A	N/A	M	M	N/A	N/A	M	M	N/A	N/A	N/A	N/A	N/A
CANCER TRANSFER REFERRING REASON (INTER-PROVIDER TRANSFER) #	N/A	N/A	N/A	N/A	M	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

CANCER TRANSFER RECEIVING REASON (INTER-PROVIDER TRANSFER) #	N/A	N/A	N/A	N/A	N/A	M	N/A	N/A	M	M	N/A	N/A	N/A	N/A	N/A
SERVICE REQUESTED DATE (INTER-PROVIDER TRANSFER) ##	N/A	N/A	N/A	N/A	N/A	M	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER) ##	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
ORGANISATION IDENTIFIER (REFERRING) ##	N/A	N/A	N/A	N/A	N/A	M	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
ORGANISATION IDENTIFIER (RECEIVING) ##	N/A	N/A	N/A	N/A	N/A	M	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CANCER TRANSFER REFERRING REASON (INTER-PROVIDER TRANSFER) ##	N/A	N/A	N/A	N/A	N/A	M	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CANCER TRANSFER RECEIVING REASON (INTER-PROVIDER TRANSFER) ##	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CANCER FASTER DIAGNOSIS PATHWAY END REASON	N/A	M	N/A	M	N/A	N/A	M	M	M	N/A	M*	N/A	N/A	N/A	N/A
PRIMARY CANCER SITE (CANCER FASTER DIAGNOSIS PATHWAY)	N/A	M	N/A	M	N/A	N/A	N/A	M	M	N/A	N/A	N/A	N/A	N/A	N/A
CANCER FASTER DIAGNOSIS PATHWAY END DATE	N/A	M	N/A	M	N/A	N/A	M	M	M	N/A	M*	N/A	N/A	N/A	N/A
CANCER CARE SPELL DELAY REASON (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)	N/A	M*	N/A	M*	N/A	N/A	N/A	M*	M*	N/A	N/A	N/A	N/A	N/A	N/A
CANCER CARE SPELL DELAY REASON COMMENT (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)	N/A	O*	N/A	O*	N/A	N/A	N/A	O*	O*	N/A	N/A	N/A	N/A	N/A	N/A
CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON	N/A	N/A	N/A	N/A	N/A	N/A	M	N/A	N/A	N/A	M*	N/A	N/A	N/A	N/A
CARE PROFESSIONAL TYPE CODE (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)	N/A	O*	N/A	O*	N/A	N/A	N/A	O*	O*	N/A	N/A	N/A	N/A	N/A	N/A
METHOD OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)	N/A	O*	N/A	O*	N/A	N/A	N/A	O*	O*	N/A	N/A	N/A	N/A	N/A	N/A
ORGANISATION SITE IDENTIFIER (OF CANCER FASTER DIAGNOSIS PATHWAY END DATE)	N/A	M	N/A	M	N/A	N/A	M	M	M	N/A	M*	N/A	N/A	N/A	N/A
TREATMENT START DATE (CANCER)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M	M	M	M	M	M	M	M
ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER TREATMENT START DATE)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M	M	M	M	M	M	M	M

CANCER TREATMENT EVENT TYPE	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M	M	M	M	M	M	M	M
CANCER TREATMENT MODALITY	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M	M	M	M	M	M	M	M
CLINICAL TRIAL INDICATOR	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M	M	M	M	M	M	M	M
CANCER CARE SETTING (TREATMENT)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M	M	M	M	M	M	M	M
RADIOTHERAPY PRIORITY	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M*	M*	M*	M*	M*	M*	M*	M*
CANCER CARE SPELL DELAY REASON (DECISION TO TREATMENT)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M*	M*	M*	M*	M*	M*	M*	M*
CANCER CARE SPELL DELAY REASON COMMENT (DECISION TO TREATMENT)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	O*	O*	O*	O*	O*	O*	O*	O*
WAITING TIME ADJUSTMENT (TREATMENT)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M*	M*	M*	M*	M*	M*	M*	M*
WAITING TIME ADJUSTMENT REASON (TREATMENT)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M*	M*	M*	M*	M*	M*	M*	M*
CANCER CARE SPELL DELAY REASON (REFERRAL TO TREATMENT)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M*	M*	M*	N/A	M*	N/A	O*	N/A
CANCER CARE SPELL DELAY REASON COMMENT (REFERRAL TO TREATMENT)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	O*	O*	O*	N/A	O*	O*	O*	N/A
CANCER CARE SPELL DELAY REASON (CONSULTANT UPGRADE)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	M*	N/A	O*	N/A
CANCER CARE SPELL DELAY REASON COMMENT (CONSULTANT UPGRADE)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	O*	N/A	O*	N/A

Full details of the validation rules and processes are available at: [Cancer Waiting Times](#). Full details of the validation rules and processes are available on the NHS Digital website at: [Cancer Waiting Times](#).

SCREENING SERVICE

Change to Supporting Information: New Supporting Information

A Screening Service is a **SERVICE**.

A Screening Service is a **SERVICE** in which members of a defined population are offered a **Screening Test** to identify individuals who have risk factors or early stages of disease.

For further information on the **Screening Tests** carried out by a **Screening Service**, see the **Department of Health** part of the gov.uk website at: [NHS population screening explained](#).

This supporting information is also known by these names:

Context	Alias
plural	Screening Services

TREATMENT START DATE (CANCER) renamed from **TREATMENT START DATE FOR CANCER**

Change to Supporting Information: Changed Name, Description

The **Start Date** of the first, second or subsequent cancer treatment given to a **PATIENT** who is receiving care for a cancer condition. A **Treatment Start Date (Cancer)** is an **ACTIVITY DATE TIME**.

If the [CANCER TREATMENT MODALITY](#) given is National Code 'Surgery', the [TREATMENT START DATE FOR CANCER](#) is the same as [START DATE \(HOSPITAL PROVIDER SPELL\)](#) of the related admission. A [Treatment Start Date \(Cancer\)](#) is the [Start Date](#) of the first, second or subsequent cancer treatment given to a [PATIENT](#) who is receiving care for a cancer condition.

[TREATMENT START DATE FOR CANCER](#) is also the [END DATE](#) of a [Cancer Treatment Period](#). If the [CANCER TREATMENT MODALITY](#) is recorded as National Code 'Surgery', the [Treatment Start Date \(Cancer\)](#) is the same as [START DATE \(HOSPITAL PROVIDER SPELL\)](#) of the related admission.

A [Cancer Referral To Treatment Period](#) will end on the same date as the [TREATMENT START DATE FOR 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](#)). [Treatment Start Date \(Cancer\)](#) is also the [END DATE](#) of a [Cancer Referral To Treatment Period](#).

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

For the [National Cancer Waiting Times Monitoring Data Set](#), [TREATMENT START DATE FOR CANCER](#) is for a cancer condition with a [PRIMARY DIAGNOSIS \(ICD\)](#) code within the range C00 to C97 or D05 as defined by [NHS England](#) (see [Cancer Waiting Times](#)). If a [PATIENT](#) declines all treatment and the [CANCER TREATMENT MODALITY](#) is recorded as National Code 'All treatment declined', then the [Treatment Start Date \(Cancer\)](#) should be recorded as the [DATE](#) upon which the [PATIENT](#) made this decision.

For the [National Cancer Waiting Times Monitoring Data Set](#), [Treatment Start Date \(Cancer\)](#) is for a cancer condition with a [PRIMARY DIAGNOSIS \(ICD\)](#) code defined by [NHS England](#). The full list of diagnosis codes can be found on the [NHS Digital](#) website at: [Cancer Waiting Times](#).

TREATMENT START DATE (CANCER) renamed from TREATMENT START DATE FOR CANCER

Change to Supporting Information: Changed Name, Description

- Changed Name from Data_Dictionary.Attributes.T.Tran.TREATMENT_START_DATE_FOR_CANCER to Data_Dictionary.NHS_Business_Definitions.T.Treatment_Start_Date_(Cancer)
- Changed Description

ACTIVITY GROUP

Change to Class: Changed Attributes

Attributes of this Class are:

A and E INCIDENT LOCATION TYPE
A and E PATIENT GROUP
ACTIVITY GROUP TYPE
ADMISSION METHOD
ASSAULT METHOD
BABY FIRST FEED BREAST MILK STATUS
BREASTFEEDING STATUS
CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS
~~CANCER REFERRAL TO TREATMENT PERIOD START DATE~~
CANCER SCREENING STATUS
[CANCER TRANSFER REASON FOR INTER PROVIDER TRANSFER](#)
CANCER TREATMENT INTENT
~~CANCER TREATMENT PERIOD START DATE~~
CARE PROGRAMME APPROACH REVIEW ABUSE QUESTION ASKED INDICATOR
CARER RESIDENT INDICATION CODE FOR NATIONAL NEONATAL DATA SET
CHILDREN TEENAGERS AND YOUNG ADULTS AGE CATEGORY
COMMUNITY TREATMENT ORDER END REASON
COMPLEX SOCIAL FACTORS INDICATOR
DAUGHTER BORN AT THIS ENCOUNTER INDICATOR
DELIVERY PLACE CHANGE REASON
DISCHARGE DESTINATION
DISCHARGED TO HOSPITAL AT HOME SERVICE INDICATOR
DISCHARGE METHOD
EMERGENCY CARE ATTENDANCE CATEGORY
ESTIMATED DATE OF DELIVERY
ESTIMATED DATE OF DELIVERY METHOD
FEMALE GENITAL MUTILATION AGE CATEGORY
FIRST REGULAR DAY OR NIGHT ADMISSION
IMPROVING ACCESS TO PSYCHOLOGICAL THERAPIES CARE SPELL END CODE
IMPROVING ACCESS TO PSYCHOLOGICAL THERAPIES OPT IN DATE
IMPROVING ACCESS TO PSYCHOLOGICAL THERAPIES STEPPED CARE INTENSITY DELIVERED
IN LABOUR BEFORE CAESARIAN SECTION INDICATOR
INTENDED DELIVERY PLACE
INTRAVESICAL CHEMOTHERAPY RECEIVED INDICATOR

INTRAVESICAL IMMUNOTHERAPY RECEIVED INDICATOR
KEY WORKER SEEN INDICATOR
LENGTH OF STAY ADJUSTMENT
LENGTH OF STAY ADJUSTMENT REASON
MATERNAL CRITICAL INCIDENT TYPE
MECONIUM PRESENT IN LIQUOR INDICATOR
MENTAL HEALTH ABSOLUTE DISCHARGE RESPONSIBILITY
MENTAL HEALTH CONDITIONAL DISCHARGE END REASON
MENTAL HEALTH DELAYED DISCHARGE ATTRIBUTABLE TO INDICATION CODE
MENTAL HEALTH DELAYED DISCHARGE REASON
METHOD OF COMMUNICATION FOR END OF CANCER FASTER DIAGNOSIS PATHWAY
MONITORING INTENT
MOTHER ANTENATALLY BOOKED INDICATOR
NEONATAL CRITICAL INCIDENT TYPE
NEONATAL LEVEL OF CARE
NON SMOKING CONFIRMATION STATUS AT 4 WEEKS
ORGAN OR TISSUE UNSUITABLE ORGAN CODE RENAL TRANSPLANT
OUTCOME AT 4 WEEK FOLLOW-UP
PAEDIATRIC NEPHROLOGY REGISTRY STATUS CODE
PALLIATIVE CARE SPECIALIST SEEN INDICATOR
PALLIATIVE TREATMENT REASON CODE FOR UPPER GASTROINTESTINAL
PATIENT CLASSIFICATION
PATIENT RECEIVING ONE TO ONE NURSING CARE INDICATOR
PHARMACOTHERAPY STOP SMOKING AID RECEIVED
PREGNANCY OUTCOME CODE
PREGNANCY PREVIOUS CAESAREAN SECTIONS
PREGNANCY TOTAL LIVE BIRTHS
PREGNANCY TOTAL PREVIOUS LOSSES LESS THAN 24 WEEKS
PREGNANCY TOTAL PREVIOUS PREGNANCIES
PREGNANCY TOTAL STILL BIRTHS
PREVIOUS NEGATIVE HIV TEST INDICATOR
RADIOTHERAPY INTENT
RENAL DIALYSIS SCHEDULE TYPE
SMOKING QUIT DATE
SOURCE OF ADMISSION
TIME BETWEEN DELIVERY AND SPONTANEOUS RESPIRATION CODE
~~TREATMENT START DATE FOR CANCER~~

PATIENT DIAGNOSIS

Change to Class: Changed Attributes

Attributes of this Class are:

ACCIDENT AND EMERGENCY DIAGNOSIS
BABY COMPLICATION AT BIRTH DIAGNOSIS
BASIS OF DIAGNOSIS FOR CANCER
BREAST CANCER INVASIVE STATUS
CEREBRAL PALSY TYPE CODE FOR NATIONAL NEONATAL DATA SET
CYTOMEGALOVIRUS DISEASE CODE
DIABETES TYPE FOR RENAL CARE
DIAGNOSIS SCHEME IN USE
FEMALE GENITAL MUTILATION TYPE 4 CODE
FETAL ANOMALY DIAGNOSIS
HISTOLOGY CONFIRMED NECROTISING ENTEROCOLITIS FOLLOWING LAPAROTOMY INDICATOR
HISTORY OF FEMALE GENITAL MUTILATION INDICATOR
HYPOXIC ISCHEMIC ENCEPHALOTHAPY GRADE
LIFE THREATENING SYMPTOMS AT DIAGNOSIS INDICATOR
LONG TERM PHYSICAL HEALTH CONDITION INDICATOR FOR IMPROVING ACCESS TO PSYCHOLOGICAL THERAPIES
MATERNITY COMPLICATING MEDICAL DIAGNOSIS
MATERNITY FAMILY HISTORY DIAGNOSIS TYPE
MATERNITY MEDICAL DIAGNOSIS TYPE
NEONATAL ABSTINENCE SYNDROME OBSERVED INDICATOR
NEONATAL DIAGNOSIS
OBSTETRIC DIAGNOSIS
OTHER MYELODYSPLASIA SYMPTOMS AT DIAGNOSIS
PATIENT DIAGNOSIS CODING SIGNIFICANCE
PATIENT DIAGNOSIS INDICATION FOR PRIMARY ANKLE REPLACEMENT
PATIENT DIAGNOSIS INDICATION FOR PRIMARY ELBOW REPLACEMENT

PATIENT DIAGNOSIS INDICATION FOR PRIMARY HIP REPLACEMENT
PATIENT DIAGNOSIS INDICATION FOR PRIMARY KNEE REPLACEMENT
PATIENT DIAGNOSIS INDICATION FOR PRIMARY SHOULDER REPLACEMENT
PATIENT DIAGNOSIS INDICATOR
PATIENT DIAGNOSIS TYPE FOR NHS HEALTH CHECK
POST HAEMORRHAGIC HYDROCEPHALUS OBSERVED DURING CRANIAL ULTRASOUND SCAN INDICATOR
PRESENT ON ADMISSION INDICATOR
[PRIMARY CANCER SITE FOR CANCER FASTER DIAGNOSIS PATHWAY](#)
PRIMARY DIAGNOSIS
PROVISIONAL DIAGNOSIS
RENAL DONOR DIAGNOSIS TYPE
RENAL LIVING DONOR DIAGNOSIS TYPE
RENAL PAEDIATRIC DIAGNOSIS TYPE
RENAL RECIPIENT CARDIOVASCULAR COMPLICATION TYPE
RENAL RECIPIENT DIAGNOSIS TYPE
SEIZURE OCCURRED INDICATOR
SEPSIS SUSPECTED INDICATOR
SKIN CANCER LESION DIAGNOSIS
TRAUMATIC LESION OF GENITAL TRACT TYPE CODE
TUMOUR OR LESION LATERALITY

PATIENT PATHWAY

Change to Class: Changed Attributes

Attributes of this Class are:

K PATIENT PATHWAY IDENTIFIER
 [CANCER FASTER DIAGNOSIS PATHWAY END REASON](#)
 [CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON](#)
 WAITING TIME MEASUREMENT TYPE

REFERRAL DELAY

Change to Class: Changed Attributes, Description

A delay in either an [Out-Patient Appointment](#) or treatment after a [REFERRAL REQUEST](#) has been received. A [REFERRAL DELAY](#) should be recorded for each delay.

A [REFERRAL DELAY](#) should be recorded for each delay.

[REFERRAL DELAYS](#) include:

- [Cancer Care Spell Delay](#)

REFERRAL DELAY

Change to Class: Changed Attributes, Description

Attributes of this Class are:

~~DELAY REASON COMMENT~~
[CANCER CARE SPELL DELAY REASON](#)
~~DELAY REASON INDICATOR~~
[CANCER CARE SPELL DELAY REASON COMMENT](#)
~~DELAY REASON REFERRAL TO FIRST SEEN FOR CANCER OR BREAST SYMPTOMS~~
~~DELAY REASON TO TREATMENT FOR CANCER~~
WAITING TIME ADJUSTMENT REASON

ACTIVITY DATE TYPE

Change to Attribute: Changed Description

The type of date that defines the usage with regard to the [ACTIVITY](#).

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

National Codes:

001 Angiogram Date (Retired July 2012)
002 [Arrival Date At Accident and Emergency Department](#)

003 Breast Assessment Date (Retired 1 January 2013)
004 [Cancer Dental Assessment Date](#)
005 Colorectal or Stoma Nurse Seen Date (Retired 1 January 2013)
006 Coronary Angiography Date (Retired July 2012)
007 [Care Programme Approach Review Date](#)
008 Date Biopsy Taken (Retired 01 April 2014)
009 [Discharge Date](#)
010 [Discharge Ready Date](#)
011 [End Date](#)
012 Event Date (Retired July 2012)
013 Expected Delivery Date (Retired September 2012)
014 [First Antenatal Assessment Date](#)
015 Full Postnatal Examination Date (Retired September 2012)
016 Initial Patient Contact Date (Retired July 2012)
017 Investigation Transfer Date (Retired July 2012)
018 Intrauterine Device Application Date (Retired September 2012)
019 Intrauterine Device Fitted Date (Retired September 2012)
020 [Last Dosage Date](#)
021 Mental Health Care Assessment Date (Retired September 2012)
022 Miscarriage Date (Retired September 2012)
023 [Pathology Result Due Date](#)
024 [Patient Informed Biopsy Result Date](#)
025 Patient Informed Of Outcome Date (Retired September 2012)
026 [Smoking Quit Date](#)
027 Review Planned Date (Retired 01 April 2014)
028 Screening Result Date (Retired 01 April 2014)
029 [Screening Result Sent Date](#)
030 Specialist Palliative Care Date (Retired 01 April 2014)
031 [Start Date](#)
032 [Cancer Symptoms First Noted Date](#)
033 [Attendance Date](#)
034 [Clinical Intervention Date](#)
035 Immunisation Completion Date (Retired 01 September 2015)
036 [Clinical Status Assessment Date](#)
037 Dose Given Date (Retired September 2012)
038 Test Date (Retired September 2012)
039 [Contact Date](#)
040 [Appointment Date](#)
041 [Primary Procedure Date](#)
042 Second Operation Date (Retired 01 April 2014)
043 [Speech and Language Assessment Date](#)
044 Third Operation Date (Retired 01 April 2014)
045 [Date First Seen](#)
046 Statutory Assessment Date (Retired 01 January 2016)
047 [Screening Test Date](#)
048 Genitourinary Care Contact Date (Retired January 2014)
049 [Consultant Upgrade Date](#)
101 Referral Closure Date (Community Care) (Retired 01 September 2015)
102 Discharge Letter Issued Date (Community Care) (Retired 01 September 2015)
103 [Systemic Anti-Cancer Therapy Administration Date](#)
104 [Procedure Date](#)
105 [Immunisation Date](#)
106 [Antenatal Appointment Date](#)
107 [Antenatal Booking Appointment Date](#)
108 [Pregnancy First Contact Date](#)
109 [Screening Test Information Given Date](#)
110 [Assessment Date For Transplant Suitability](#)
111 [Accident and Emergency Initial Assessment Date](#)
112 [Accident and Emergency Date Seen For Treatment](#)
113 [Accident and Emergency Attendance Conclusion Date](#)
114 [Accident and Emergency Departure Date](#)
115 [Clinical Assessment Date](#)
116 [Imaging or Radiodiagnostic Event Date](#)
117 [Neonatal Critical Care Daily Care Date](#)
118 [Two Year Neonatal Outcomes Assessment Date](#)
119 [Date of Pregnancy Outcome \(Current Fetus\)](#)
120 [Neonatal Critical Incident Date](#)
121 [American Joint Committee on Cancer Stage Date](#)
122 [Ann Arbor Stage Date](#)
123 [Barcelona Clinic Liver Cancer Stage Date](#)
124 [Binet Stage Date](#)

125	Chang Staging System Stage Date
126	Clinical Stage Date (Pancreatic Cancer)
127	Final Figo Stage Date
128	Holistic Needs Assessment Completed Date
129	Intergroup Rhabdomyosarcoma Study Post Surgical Group Date
130	International Neuroblastoma Staging System Date (Retired 01 April 2017)
131	Myeloma International Staging System Stage Date
132	Modified Dukes Stage Date
133	Multidisciplinary Team Discussion Date (Cancer)
134	Multidisciplinary Team Meeting Date (Cancer)
135	Murphy St Jude Stage Date
136	Rai Stage Date (Retired 01 April 2017)
137	Retinoblastoma Assessment Date
138	TNM Stage Grouping Date (Final Pretreatment)
139	TNM Stage Grouping Date (Integrated)
140	Wilms Tumour Stage Date
141	Care Contact Cancellation Date
142	Care Contact Date
143	Child Protection Plan End Date
144	Child Protection Plan Start Date
145	Discharge Letter Issued Date (Mental Health and Community Care)
146	Health Visitor First Antenatal Visit Date
147	Infant Physical Examination Date
148	Onward Referral Date
149	Referral Closure Date
150	Referral Rejection Date
151	Replacement Appointment Booked Date
152	Replacement Appointment Date Offered
153	Service Discharge Date
154	Date of Restrictive Intervention
155	Indirect Activity Date
156	Mental Health Crisis Plan Creation Date (Retired 01 April 2017)
157	Mental Health Crisis Plan Last Updated Date (Retired 01 April 2017)
158	Care Plan Agreed Date
159	Care Plan Creation Date
160	Care Plan Implementation Date
161	Care Plan Last Updated Date
162	Five Forensic Pathways Assessment Date
163	International Neuroblastoma Risk Group Staging System Stage Date
164	Stage Grouping Date (Testicular Cancer)
165	Emergency Care Arrival Date
166	Emergency Care Initial Assessment Date
167	Emergency Care Date Seen For Treatment
168	Emergency Care Attendance Conclusion Date
169	Emergency Care Departure Date
170	Injury Date
171	Referred To Service Assessment Date
	Cancer Faster Diagnosis Pathway End Date
	Cancer Referral To Treatment Period Start Date
	Cancer Treatment Period Start Date
	Treatment Start Date (Cancer)

Note: This list is not in alphabetical order.

CANCER CARE SPELL DELAY REASON_ renamed from DELAY REASON TO TREATMENT FOR CANCER

Change to Attribute: Changed Name, Description

The reason why a [Cancer Care Spell Delay](#) was experienced with regard to a [Cancer Care Spell](#). The reason why a Cancer Care Spell Delay occurred.

The national codes to be used are the same for delays between: This could be the delay between the:

- [CANCER REFERRAL TO TREATMENT PERIOD START DATE](#) and [TREATMENT START DATE FOR CANCER](#)
- [DECISION TO TREAT DATE](#) and [TREATMENT START DATE FOR CANCER](#)
- [CONSULTANT UPGRADE DATE](#) and [TREATMENT START DATE FOR CANCER](#).
- [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 \(Cancer\)](#)
- [Cancer Referral To Treatment Period Start Date](#) and the [Date First Seen](#), where the [PRIORITY TYPE](#) is National Code 'Two Week Wait'
- [Cancer Faster Diagnosis Pathway End Date](#) and the [PATIENT](#) being advised of the [CANCER FASTER DIAGNOSIS PATHWAY END REASON](#).

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'.

CANCER REFERRAL TO TREATMENT PERIOD START DATE and TREATMENT START DATE FOR CANCER DECISION TO TREAT DATE and TREATMENT START DATE FOR CANCER CONSULTANT UPGRADE DATE and TREATMENT START DATE FOR 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 FOR CANCER, and CONSULTANT UPGRADE DATE and TREATMENT START DATE FOR CANCER; or 62 days between the CANCER REFERRAL TO TREATMENT PERIOD START DATE and TREATMENT START DATE FOR CANCER).

National Codes:

Delays relating to diagnostic and pre-treatment events	
01	Clinic cancellation
02	Out-patient capacity inadequate (i.e. no cancelled clinic, but not enough slots for this <u>PATIENT</u>)
03	Administrative delay
04	Elective cancellation (for non-medical reason) for treatment in an admitted care setting
05	Elective capacity inadequate (<u>PATIENT</u> unable to be scheduled for treatment within standard time) for treatment in an admitted care setting
06	Delay to diagnostic test or treatment planning (Retired 1 July 2012)
07	Complex diagnostic pathway (many, or complex, diagnostic tests required)
08	Delay due to referral between Trusts (Retired 1 July 2012)
10	Treatment delayed for medical reasons (<u>PATIENT</u> unfit for treatment episode, excluding planned recovery period following diagnostic test) in an admitted care setting
11	Diagnosis delayed for medical reasons (<u>PATIENT</u> unfit for diagnostic episode, excluding planned recovery period following diagnostic test)
13	Delay due to recovery after an invasive test (<u>PATIENT DIAGNOSIS</u> or treatment delayed due to planned recovery period following an invasive diagnostic test)
47	<u>PATIENT</u> choice delay relating to first outpatient <u>APPOINTMENT</u>
14	<u>PATIENT</u> Did Not Attend treatment <u>APPOINTMENT</u>
16	<u>PATIENT</u> Choice (<u>PATIENT</u> declined or cancelled an offered <u>Appointment Date</u> for treatment)
17	<u>PATIENT</u> choice delay relating to first Out-Patient Appointment
18	<u>Health Care Provider</u> initiated delay to diagnostic test or treatment planning
19	<u>PATIENT</u> initiated (choice) delay to diagnostic test or treatment planning, advance notice given
20	<u>PATIENT</u> Did Not Attend an <u>APPOINTMENT</u> for a diagnostic test or treatment planning event (no advance notice)
98	Other reason
Delays relating to treatment in an admitted care setting	
04	Elective cancellation (for non-medical reason)
05	Elective capacity inadequate (<u>PATIENT</u> unable to be scheduled for treatment within standard time)
06	Delay to diagnostic test or treatment planning (Retired 1 July 2012)
40	Treatment delayed for medical reasons (<u>PATIENT</u> unfit for treatment episode, excluding planned recovery period following diagnostic test)
21	<u>PATIENT</u> failed to present for elective treatment (choice)
22	<u>PATIENT</u> care not commissioned by the English NHS (waiting time standard does not apply)
98	Other reason
Delays relating to treatment in a non-admitted care setting	
04	Clinic cancellation
02	Out-patient capacity inadequate (i.e. no cancelled clinic, but not enough slots for this <u>PATIENT</u>)
40	Treatment delayed for medical reasons (<u>PATIENT</u> unfit for treatment episode, excluding planned recovery period following diagnostic test)
14	<u>PATIENT</u> Did Not Attend treatment <u>APPOINTMENT</u>
16	<u>PATIENT</u> Choice (<u>PATIENT</u> declined or cancelled an offered <u>APPOINTMENT DATE</u> for treatment)
22	<u>PATIENT</u> care not commissioned by the English NHS (waiting time standard does not apply)
98	Other reason
21	<u>PATIENT</u> failed to present for elective treatment (choice) in an admitted care setting
22	<u>PATIENT</u> care not commissioned by the NHS in England (waiting time standard does not apply) for treatment in an admitted care setting
23	Equipment breakdown
24	Inconclusive diagnostic result
25	<u>Health Care Provider</u> unable to make contact with <u>PATIENT</u> by telephone
26	<u>PATIENT</u> choice (<u>PATIENT</u> declined or cancelled an offered <u>Appointment Date</u> for follow up <u>APPOINTMENT</u>)
97	Other reason (not listed)
98	Other reason (Retired 1 April 2018)
99	Other reason (Retired 1 July 2012)

Notes:

- If National Code 98 '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.
- National Code 03 'Administrative delay' should not be used to record delays linked to a 'Did Not Attend' (DNA) event where a waiting time adjustment has been entered into the PATIENT record.

- National Codes 04, 05 and 21 can only be used where the treatment was delivered in an admitted care setting i.e. where the [CANCER CARE SETTING \(TREATMENT\)](#) is National Code 01 or 02.
- National Codes 14 and 16 can only be used where the treatment was delivered in a non-admitted care setting i.e. where the [CANCER CARE SETTING \(TREATMENT\)](#) is National Code 03 or 04.
- National Code 17 should only be used where [DELAY REASON REFERRAL TO FIRST SEEN \(CANCER OR BREAST SYMPTOMS\)](#) is also present in the [PATIENT](#) record.
- National Code 20 should not be used for any Did Not Attend (DNA) event relating to [DATE FIRST SEEN](#). Events of this type should not constitute a delay as they can be accounted for by entering a value for [WAITING TIME ADJUSTMENT \(FIRST SEEN\)](#) in the [PATIENT](#) record.
- National Codes 07, 11, 13, 17, 18, 19 and 20 should only be used for Referral to Treatment type pathways, therefore these should not be used to record a value for [DELAY REASON COMMENT \(DECISION TO TREATMENT\)](#).
- National Code 22 '[PATIENT](#) care not commissioned by the English NHS (waiting time standard does not apply)' should only be used in instances where the non-English administration has commissioned a cancer service with similar 'target times' and data item attributes. This is to allow different commissioning arrangements to be supported by a single local administrative and clinical system.
- If a delay to the pathway is due to an administrative delay in the transfer of a [PATIENT](#) from one [Health Care Provider](#) to another (an Inter-Provider Transfer or IPT) this should be recorded as National Code 03 '[Administrative delay](#)' with appropriate supporting detail given in either [DELAY REASON COMMENT \(REFERRAL TO TREATMENT\)](#) or [DELAY REASON COMMENT \(CONSULTANT UPGRADE\)](#).

CANCER CARE SPELL DELAY REASON_ renamed from DELAY REASON TO TREATMENT FOR CANCER

Change to Attribute: Changed Name, Description

- Changed Name from Data_Dictionary.Attributes.D.Dec.DELAY_REASON_TO_TREATMENT_FOR_CANCER to Data_Dictionary.Attributes.C.CANCER_CARE_SPELL_DELAY_REASON
- Changed Description

CANCER CARE SPELL DELAY REASON COMMENT_ renamed from DELAY REASON COMMENT

Change to Attribute: Changed Name, Description

A comment on the reason why a [Cancer Care Spell Delay](#) was experienced with regard to a [Cancer Care Spell](#). A comment why a [CANCER CARE SPELL DELAY REASON](#) was experienced.

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. This can be recorded for:

- each breach of existing service standards (introduced by the 'NHS Cancer Plan (2000)')
- the extended service standards (as specified within the 'Cancer Reform Strategy (2007)') and
- the 28 Day Faster Diagnosis Standard (introduced by the independent Cancer Taskforce 'Achieving World-Class Cancer Outcomes')

The standards for which a [DELAY REASON COMMENT](#) must be given are: after any patient pauses have been taken into account.

- 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, 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 all cancers
- 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](#).

* Breast, bowel, cervical and testicular cancer and acute leukaemia are defined by ICD-10 coding – see [Cancer Waiting Times](#). The standards for which a [CANCER CARE SPELL DELAY REASON COMMENT](#) can 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 28 day wait for an urgent [GENERAL PRACTITIONER](#) referral or referral for suspected cancer from an NHS Cancer [Screening Programme](#) for suspected cancer, where the [CANCER FASTER DIAGNOSIS PATHWAY END REASON](#) is National Code '[Diagnosis of cancer](#)' or '[Ruling out of cancer](#)'
- maximum 28 day wait for an urgent [GENERAL PRACTITIONER](#) referral, referral for breast symptoms (where cancer is not initially suspected) or referral for suspected cancer from an NHS Cancer [Screening Programme](#) for suspected cancer, where the [CANCER FASTER DIAGNOSIS PATHWAY END REASON](#) is National Code '[Diagnosis of cancer](#)' or '[Ruling out of cancer](#)'
- 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 all cancers

- 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 National Code 'Chemoradiotherapy', 'Teletherapy (Beam Radiation excluding Proton Therapy)', '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 National Code 'Anti-Cancer Drug Regimen (Cytotoxic Chemotherapy)', 'Anti-Cancer Drug Regimen (Hormone Therapy)', 'Anti-Cancer Drug Regimen (Immunotherapy)' or 'Anti-Cancer Drug Regimen (other)'
- 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 'Surgery', 'Anti-Cancer Drug Regimen', 'Chemoradiotherapy', 'Teletherapy (Beam Radiation excluding Proton Therapy)', 'Brachytherapy' or 'Proton Therapy'
- 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.

** 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: Notes:

* Breast, bowel, cervical and testicular cancer and acute leukaemia are defined by International Classification of Diseases (ICD) diagnosis codes. The full list of diagnosis codes can be found on the NHS Digital website at: Cancer Waiting Times.

** For the performance management and the requirement to record a CANCER CARE SPELL 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
Twenty Eight Days	28
One Month	31
Two Months	62

CANCER CARE SPELL DELAY REASON COMMENT, renamed from DELAY REASON COMMENT

Change to Attribute: Changed Name, Description

- Changed Name from Data_Dictionary.Attributes.D.Dec.DELAY_REASON_COMMENT to Data_Dictionary.Attributes.C.CANCER_CARE_SPELL_DELAY_REASON_COMMENT
- Changed Description

CANCER FASTER DIAGNOSIS PATHWAY END REASON

Change to Attribute: New Attribute

The reason for the end of the Cancer Faster Diagnosis Pathway.

National Codes:

01	Diagnosis of cancer
02	Ruling out of cancer
03	Excluded from the Cancer Faster Diagnosis Pathway

This attribute is also known by these names:

Context	Alias
plural	CANCER FASTER DIAGNOSIS PATHWAY END REASONS

CANCER FASTER DIAGNOSIS PATHWAY END REASON

Change to Attribute: New Attribute

CANCER FASTER DIAGNOSIS PATHWAY END REASON

Data Elements:

CANCER FASTER DIAGNOSIS PATHWAY END REASON
--

CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON

Change to Attribute: New Attribute

The reason for excluding the PATIENT from the Cancer Faster Diagnosis Pathway, where the CANCER FASTER DIAGNOSIS PATHWAY END REASON is National Code 'Excluded from the Cancer Faster Diagnosis Pathway'.

National Codes:

- 01 PATIENT died before diagnosis communicated
- 02 PATIENT declined all diagnostic investigations
- 03 PATIENT declined all APPOINTMENTS
- 04 PATIENT opted for private diagnostics (PATIENT may come back for NHS funded treatment)
- 05 Repeated Did Not Attend (DNA)/PATIENT-triggered multiple cancellations
- 06 PATIENT ineligible for NHS funded treatment
- 07 PATIENT opted not to continue with Cancer Faster Diagnosis Pathway

This attribute is also known by these names:

Context	Alias
plural	CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASONS

CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON

Change to Attribute: New Attribute

CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON

Data Elements:

CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON
--

CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS

Change to Attribute: Changed Description

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. The status of a REFERRAL REQUEST for a PATIENT referred with a suspected cancer, or referred with breast symptoms with cancer not originally suspected.

- For the National Cancer Waiting Times Monitoring Data Set,
 - CANCER OR SYMPTOMATIC BREAST REFERRAL PATIENT STATUS is the status of a REFERRAL REQUEST for a PATIENT:
 - referred with a suspected cancer by a GENERAL MEDICAL PRACTITIONER, GENERAL DENTAL PRACTITIONER, OPTOMETRIST or NHS Screening Service
 - referred from any CARE PROFESSIONAL with breast symptoms where cancer was not originally suspected or upgraded onto the 62 day period.
 - Where a diagnosis of cancer is subsequently made, data on First Definitive Treatment and subsequent treatments should be recorded for PATIENTS receiving NHS funded treatment in England.
 - NHS funded treatment in England refers to Health Care Provider Organisations within England who are treating PATIENTS with cancer who may have been referred from outside England (where the PATIENTS have NHS NUMBERS which exist on the Personal Demographics Service and which can be used within the National Cancer Waiting Times Monitoring Data Set for transmission purposes).
 - Where PATIENTS with a diagnosis of cancer do NOT receive NHS funded treatment in England, or where the diagnosed condition is not within the NHS England list of cancer conditions, further data need not be collected. The full list of conditions can be found on the NHS Digital website at: Cancer Waiting Times.

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 Organisation 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 at: Cancer Waiting Times.

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 NHS England list of cancer conditions (see Cancer Waiting Times), further data need not be collected.

The National Codes have been listed in logical sequence rather than numeric order.

National Codes:

- 14 Suspected primary cancer
- 09 Under investigation following symptomatic referral, cancer not suspected (breast referrals only) *
- 03 No new cancer diagnosis identified by the Health Care Provider
- 10 Diagnosis of new cancer confirmed – first treatment not yet planned
- 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
- 24 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~~
- 10 Diagnosis of new cancer confirmed - NHS funded first treatment not yet planned
- 11 Diagnosis of new cancer confirmed - NHS funded first treatment planned
- 07 Diagnosis of new cancer confirmed - no NHS funded treatment planned
- 08 First NHS funded treatment commenced
- 12 Diagnosis of new cancer confirmed - subsequent NHS funded treatment not yet planned
- 13 Diagnosis of new cancer confirmed - subsequent NHS funded treatment planned
- 21 Subsequent NHS funded treatment commenced
- 15 Suspected Recurrent Cancer
- 16 Diagnosis of Recurrent Cancer confirmed - first NHS funded treatment not yet planned
- 17 Diagnosis of Recurrent Cancer confirmed - NHS funded first treatment planned
- 18 Diagnosis of Recurrent Cancer confirmed - no NHS funded treatment planned
- 19 Diagnosis of Recurrent Cancer confirmed - subsequent NHS funded treatment not yet planned
- 20 Diagnosis of Recurrent Cancer confirmed - subsequent NHS funded treatment planned

* 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.~~' National Code '~~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 '~~Exhibited (non-cancer) breast symptoms - cancer not initially suspected.~~'

CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER

Change to Attribute: New Attribute

The reason that a PATIENT was transferred to another Health Care Provider as part of the inter-provider transfer during a Cancer Care Spell.

National Codes:

- 01 Diagnosis
- 02 Staging
- 03 Second Opinion
- 04 Primary Treatment
- 05 Subsequent Treatment

This attribute is also known by these names:

Context	Alias
plural	CANCER TRANSFER REASONS FOR INTER-PROVIDER TRANSFER

CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER

Change to Attribute: New Attribute

CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER

Data Elements:

<u>CANCER TRANSFER RECEIVING REASON (INTER-PROVIDER TRANSFER)</u>
<u>CANCER TRANSFER REFERRING REASON (INTER-PROVIDER TRANSFER)</u>

CANCER TREATMENT EVENT TYPE

Change to Attribute: Changed Description

The stage of treatment reached during a Cancer PATIENT PATHWAY for primary, recurrent or metastatic cancer. The treatment event reached during a Cancer Pathway.

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~~

- 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 cancer
- 08 Second or subsequent treatment for metastatic disease following an unknown primary cancer
- 09 Treatment for relapse of primary cancer (second or subsequent)
- 10 Treatment for progression of primary cancer (second or subsequent)

CANCER TREATMENT MODALITY

Change to Attribute: Changed Description

The type of treatment or care which was delivered in a [Cancer Treatment Period](#). The type of treatment or care which was delivered during 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 [Radiofrequency Ablation \(RFA\)](#)
- 11 [High Intensity Focused 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 Ultraviolet A Therapy \(PUVA\)](#))
- 17 [Hyperbaric Oxygen Therapy](#)
- 18 Other Treatment (Retired 1 July 2012)
- 19 [Radioisotope Therapy](#) (including Radioiodine)
- 20 [Laser Treatment](#) (including Argon Beam therapy)
- 21 [Biological Therapies](#) (excluding [Immunotherapy](#))
- 22 [Radiosurgery](#)
- 97 ~~Other treatment~~
- 97 [Other treatment \(not listed\)](#)
- 98 All treatment declined

Notes:

- National Code 07 '[Specialist Palliative Care](#)', should only be used where care is being delivered under the management of a [CONSULTANT](#) in Palliative Medicine.
- National Code 08 '[Non-Specialist Palliative Care \(excluding Active Monitoring\)](#)' is only to be used where the treatment consists of [Palliative Care](#) not under the management of a [CONSULTANT](#) in Palliative Medicine.
- National Code 09 '[Non-Specialist Palliative Care \(excluding Active Monitoring\)](#)' should only be used to record an [ACTIVITY](#) where there is no intention to offer a future course of treatment other than those contained within National Codes 07, 08 or 09 at the time the [CARE PLAN](#) is agreed between clinician and [PATIENT](#). This type of care is sometimes referred to as 'best supportive care' within NHS services.
- National Code '[Specialist Palliative Care](#)', should only be used where care is being delivered under the management of a [CONSULTANT](#) in Palliative Medicine.
- National Code '[Non-Specialist Palliative Care \(excluding Active Monitoring\)](#)' is only to be used where the treatment consists of [Palliative Care](#) not under the management of a [CONSULTANT](#) in Palliative Medicine.
- National Code '[Non-Specialist Palliative Care \(excluding Active Monitoring\)](#)' should only be used to record an [ACTIVITY](#) where there is no intention to offer a future course of treatment other than those contained within National Codes 07, 08 or 09 at the time the [CARE PLAN](#) is agreed between clinician and [PATIENT](#). This type of care is sometimes referred to as 'best supportive care' within NHS services.

CARE PROFESSIONAL TYPE CODE

Change to Attribute: Changed Description

The type of [CARE PROFESSIONAL](#).

National Codes:

- 010 [Arts Therapist](#) (Art, Music and Drama Therapists)
- 020 [Biomedical Scientist](#)
- 030 [Chiropodist / Podiatrist](#)

040	Chiropractor
050	Clinical Scientist
060	CONSULTANT
070	Clinical Dental Technician
080	Dental Hygienist
090	Dental Nurse
100	Dental Technician
110	Dental Therapist
120	Orthodontic Therapist
130	Dietitian
140	Dispensing Optician
150	GENERAL DENTAL PRACTITIONER
160	GENERAL MEDICAL PRACTITIONER
170	MIDWIFE
180	NURSE
190	Occupational Therapist
200	Operating Department Practitioner
210	OPHTHALMIC MEDICAL PRACTITIONER
220	OPTOMETRIST
230	Orthoptist
240	Orthotist
250	Osteopath
260	Paramedic
270	Pharmacist
280	Physiotherapist
290	Practitioner Psychologist
300	Prosthetist
310	Radiographer
320	Specialist Community Public Health Nurse: Family Health Nurse
330	Specialist Community Public Health Nurse: Health Visitor
340	Specialist Community Public Health Nurse: Occupational Health Nurse
350	Specialist Community Public Health Nurse: School Nurse
360	Speech and Language Therapist
370	Hearing Aid Dispenser
380	Pharmacy Technician
390	Social Worker in England
XXX	Other
XXX	Other (not listed)

CLINICAL TRIAL INDICATOR

Change to Attribute: Changed Description

[CLINICAL TRIAL INDICATOR](#) is used to record whether an individual episode of care is being delivered to a [PATIENT](#) as part of a [CLINICAL TRIAL](#). An indication of whether an individual episode of care 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](#)

DECISION TO TREAT DATE

Change to Attribute: Changed Description

The date on which it was decided that the [PATIENT](#) required a specific treatment. The [DATE](#) on which a [Decision To Treat](#) is made.

For cancer data sets, this is the date that the consultation between the [PATIENT](#) and the clinician took place and a [Planned Cancer Treatment](#) was agreed. For the cancer data sets, the [DECISION TO TREAT DATE](#) is the [DATE](#) that the consultation between the [PATIENT](#) and the clinician took place and a [Planned Cancer Treatment](#) was agreed.

DELAY REASON INDICATOR (RETIRED), renamed from DELAY REASON INDICATOR

Change to Attribute: Changed Name, Description, status to Retired

A classification of the delay periods for cancer waiting time service standards, as specified in the [National Cancer Waiting Times Monitoring Data Set](#) requirements. This item has been retired from the NHS Data Model and Dictionary.

Classification:The last live version of this item is available in the ?????? release of the NHS Data Model and Dictionary.

- 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 [CANCER REFERRAL TO TREATMENT PERIOD START DATE](#) and [TREATMENT START DATE FOR CANCER](#), where [PRIORITY TYPE](#) is National Code 3 'Two Week Wait' and [CANCER TREATMENT EVENT TYPE](#) is National Code 01 'First Definitive Treatment for a new primary cancer' or 07 'First treatment for metastatic disease following an unknown primary'
- c. delay between [CANCER REFERRAL TO TREATMENT PERIOD START DATE](#) and [TREATMENT START DATE FOR CANCER](#), where [PRIORITY TYPE](#) is National Code 2 'Urgent' and [SOURCE OF REFERRAL FOR OUT PATIENTS](#) is National Code 17 'Referral from a National Screening Programme' and [CANCER TREATMENT EVENT TYPE](#) is National Code 01 'First Definitive Treatment for a new primary cancer'
- d. delay between [CANCER TREATMENT PERIOD START DATE](#) and [TREATMENT START DATE FOR CANCER](#), where [CANCER TREATMENT EVENT TYPE](#) is National Code 01 'First Definitive 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 FOR CANCER](#), where [CANCER TREATMENT EVENT TYPE](#) is National Code 01 'First Definitive 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 FOR CANCER](#), where [CANCER TREATMENT EVENT TYPE](#) is NOT National Code 01 'First Definitive Treatment for a new primary cancer' OR 07 'First treatment for metastatic disease following an unknown primary'

Access to this version can be obtained by emailing information.standards@nhs.net with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

DELAY REASON INDICATOR (RETIRED)_ renamed from DELAY REASON INDICATOR

Change to Attribute: Changed Name, Description, status to Retired

- Changed Name from Data_Dictionary.Attributes.D.Dec.DELAY_REASON_INDICATOR to Retired.Data_Dictionary.Attributes.D.DELAY_REASON_INDICATOR
- Changed Description
- Retired DELAY REASON INDICATOR

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

Change to Attribute: Changed Name, Description, status to Retired

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 item has been retired from the NHS Data Model and Dictionary.

This is the reason why the [Health Care Provider](#) was unable to provide an [APPOINTMENT DATE](#) within the service standard of two weeks. The last live version of this item is available in the ?????? release of the NHS Data Model and Dictionary.

National Codes: Access to this version can be obtained by emailing information.standards@nhs.net with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

- 01 Clinic cancellation
- 02 Out-patient capacity inadequate (i.e. no cancelled clinic, but not enough slots for this [PATIENT](#))
- 03 Administrative delay
- 04 Referral not received within 24 hours (Retired 1 July 2012)
- 05 [PATIENT](#) unavailable (the [PATIENT](#) has declined the opportunity to be seen within two weeks prior to any [APPOINTMENT](#) being offered)
- 06 [PATIENT](#) declines (the [PATIENT](#) declines all [APPOINTMENT](#) dates offered within two weeks)
- 07 [PATIENT](#) cancellation (the [PATIENT](#) cancels their booked [APPOINTMENT](#))
- 08 [PATIENT](#) care not commissioned by the English NHS (waiting time standard does not apply)
- 98 Other reason
- 99 Other reason (Retired 1 July 2012)

Notes:

- National Code 03 'Administrative delay' should not be used to record delays linked to a 'Did Not Attend' (DNA) event where a waiting time adjustment has been entered into the [PATIENT](#) record.
- If National Code 98 'Other reason' is used, further detail must be recorded for the precise cause of the delay, within [DELAY REASON COMMENT \(FIRST SEEN\)](#).
- National Code 08 '[PATIENT](#) care not commissioned by the English NHS (waiting time standard does not apply)' should only be used in instances where the non-English administration has commissioned a two week wait service, i.e. the [PRIORITY TYPE](#) of the [SERVICE REQUEST](#) was National Code 03 'Two Week Wait', but the [PATIENT](#) was not seen within two weeks. This is to allow for different commissioning arrangements to be supported by local administrative and clinical systems.

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

Change to Attribute: Changed Name, Description, status to Retired

- Changed Name from Data_Dictionary.Attributes.D.Delay.Reason.Referral.To.First.Seen.For.Cancer.Or.Breast.Symptoms to Retired.Data_Dictionary.Attributes.D.Delay.Reason.Referral.To.First.Seen.For.Cancer.Or.Breast.Symptoms
- Changed Description
- Retired DELAY REASON REFERRAL TO FIRST SEEN FOR CANCER OR BREAST SYMPTOMS

METHOD OF COMMUNICATION FOR END OF CANCER FASTER DIAGNOSIS PATHWAY

Change to Attribute: New Attribute

The method of communication used to inform the PATIENT of the CANCER FASTER DIAGNOSIS PATHWAY END REASON.

National Codes:

- 01 Face to face communication
- 02 Telephone call
- 03 Email
- 04 Letter
- 98 Other (not listed)

This attribute is also known by these names:

Context	Alias
plural	METHODS OF COMMUNICATION FOR END OF CANCER FASTER DIAGNOSIS PATHWAY

METHOD OF COMMUNICATION FOR END OF CANCER FASTER DIAGNOSIS PATHWAY

Change to Attribute: New Attribute

METHOD OF COMMUNICATION FOR END OF CANCER FASTER DIAGNOSIS PATHWAY

Data Elements:

METHOD OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)
--

MULTIDISCIPLINARY TEAM CANCER CARE PLAN DISCUSSED INDICATOR

Change to Attribute: Changed Description

An indication of whether the PATIENT's CARE PLAN was discussed at a Multidisciplinary Team Meeting. An indication of whether the PATIENT's Cancer Care Plan was discussed at a Multidisciplinary Team Meeting.

National Codes:

- A The PATIENT was discussed at a Multidisciplinary Team Meeting
- B The PATIENT was not discussed at a Multidisciplinary Team Meeting
- A The PATIENT's Cancer Care Plan was discussed at a Multidisciplinary Team Meeting
- B The PATIENT's Cancer Care Plan was not discussed at a Multidisciplinary Team Meeting

Notes: For the National Cancer Waiting Times Monitoring Data Set, MULTIDISCIPLINARY TEAM CANCER CARE PLAN DISCUSSED INDICATOR will usually relate to a MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER) that is before the commencement of treatment. However it is recognised that this is not possible in all clinical circumstances.

- When used in the National Cancer Waiting Times Monitoring Data Set:
 - this records whether a Cancer Care Plan for the PATIENT was discussed at a Multidisciplinary Team Meeting;
 - the MULTIDISCIPLINARY TEAM CANCER CARE PLAN DISCUSSED INDICATOR will usually relate to a MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER) that is before the commencement of treatment, however it is recognised that this is not possible in all clinical circumstances.

PRIMARY CANCER SITE FOR CANCER FASTER DIAGNOSIS PATHWAY

Change to Attribute: New Attribute

The primary cancer site communicated to the PATIENT on the CANCER FASTER DIAGNOSIS PATHWAY END DATE where the CANCER FASTER DIAGNOSIS PATHWAY END REASON is National Code 'Diagnosis of cancer'.

National Codes:

- 01 Breast
- 02 Children's
- 03 Lung
- 04 Haematological (Excluding Acute Leukaemia)

- 05 Acute leukaemia
- 06 Upper Gastrointestinal
- 07 Lower Gastrointestinal
- 08 Skin
- 09 Gynaecological
- 10 Brain/Central Nervous System
- 11 Urological (Excluding Testicular and Prostate)
- 12 Testicular
- 13 Head and Neck
- 14 Sarcoma
- 15 Metastatic disease of unknown primary
- 16 Prostate
- 17 Thyroid
- 18 Hepatobiliary
- 19 Pancreatic
- 20 Neuroendocrine tumour (NET)
- 98 Other (not listed)

This attribute is also known by these names:

Context	Alias
plural	PRIMARY CANCER SITES FOR CANCER FASTER DIGNOSIS PATHWAY

PRIMARY CANCER SITE FOR CANCER FASTER DIAGNOSIS PATHWAY

Change to Attribute: New Attribute

PRIMARY CANCER SITE FOR CANCER FASTER DIAGNOSIS PATHWAY

Data Elements:

PRIMARY CANCER SITE (CANCER FASTER DIAGNOSIS PATHWAY)

RADIOTHERAPY INTENT

Change to Attribute: Changed Description

The intent of the delivered beam radiation for [PATIENTS](#) with a cancer [PRIMARY DIAGNOSIS \(ICD\)](#), as defined by [NHS England](#) (see [Cancer Waiting Times](#)), where the [CANCER TREATMENT MODALITY](#) recorded is National Code '[Teletherapy \(Beam Radiation excluding Proton Therapy\)](#)'. The intent of the delivered beam radiation for [PATIENTS](#) with a cancer [PRIMARY DIAGNOSIS \(ICD\)](#), as defined by [NHS England](#) where the [CANCER TREATMENT MODALITY](#) recorded is National Code:

- '[Chemoradiotherapy](#)'
- '[Teletherapy \(Beam Radiation excluding Proton Therapy\)](#)'
- '[Brachytherapy](#)' or
- '[Proton Therapy](#)'.

National Codes:

- 01 Palliative
- 02 Anti-cancer
- 03 Other

REFERRAL REQUEST RECEIVED DATE

Change to Attribute: Changed Description

The date the [REFERRAL REQUEST](#) was received by the [Health Care Provider](#).

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 [Out-Patient 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 Patient Administration System (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.

SERVICE TYPE

Change to Attribute: Changed Description

The type of [SERVICE](#).

National Codes:

01	Ambulance Service
02	Cancer Service
03	Community Health Service
04	Consultant Led Service
05	Direct Access Service
06	Enhanced Sexual Health Service (Retired November 2014)
07	HIV Service
08	Hospital At Home Service
09	Improving Access to Psychological Therapies Service
10	Interface Service
11	Non-Consultant Led Service
12	Professional Staff Group Service (Retired 01 January 2016)
13	Sexual and Reproductive Health Service
14	Stop Smoking Service
15	Contraceptive Service (Retired 01 April 2014)
16	Radiotherapy Service
17	Sexual Health Service
18	Mental Health Service
19	Regional Clinical Genetics Service
	Screening Service

TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE

Change to Attribute: Changed Description

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. The site where cancer is suspected:

- by the [GENERAL MEDICAL PRACTITIONER](#), [GENERAL DENTAL PRACTITIONER](#) or [OPTOMETRIST](#) referring the [PATIENT](#) where the [PRIORITY TYPE](#) is National Code "Two Week Wait".
- which is used to identify [PATIENTS](#) being referred on the basis of exhibited (non-cancer) breast symptoms from any [CARE PROFESSIONAL](#).

National Codes:

01	Suspected breast cancer
02	Suspected children's cancer (see note 1)
02	Suspected children's cancer *
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)
15	Other suspected cancer (not listed)
16	Exhibited (non-cancer) breast symptoms - cancer not initially suspected **

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](#). Notes:

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.

* For monitoring of the cancer Two Week Wait and 28 Day Faster Diagnosis standards, a child is defined as under the age of 16 years at the [Cancer Referral To Treatment Period Start Date](#)

** National Code *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.

WAITING TIME ADJUSTMENT REASON

Change to Attribute: Changed Description

The prime reason for an adjustment to waiting time in the [National Cancer Waiting Times Monitoring Data Set](#). The prime reason for an adjustment to waiting time for 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.

National Codes:

Out-patient services	
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'
3	Did Not Attend Out-Patient Appointment : Where the ATTENDED OR DID NOT ATTEND is National Code 'Did Not Attend - no advance warning given' or National Code ' PATIENT arrived late and could not be seen'
9	No adjustment to waiting time
In-patient services	
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)
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.)
9	No adjustment to waiting time

Notes:

- Where there has been no adjustment to waiting time, National code 9 'No adjustment to waiting time' should be used.
- National code 3 is only to be used, where applicable, within [WAITING TIME ADJUSTMENT REASON \(FIRST SEEN\)](#).
- National code 8 cannot be used within [WAITING TIME ADJUSTMENT REASON \(FIRST SEEN\)](#) as a patient pause can only be applied in relation to an [OFFER OF ADMISSION](#) for treatment.
- Where there has been no adjustment to waiting time, National Code 'No adjustment to waiting time' should be used.
- National Code 'Did Not Attend [Out-Patient Appointment](#)' is only to be used, where applicable, within [WAITING TIME ADJUSTMENT REASON \(FIRST SEEN\)](#).
- National Code 'Patient pause' cannot be used within [WAITING TIME ADJUSTMENT REASON \(FIRST SEEN\)](#) as a patient pause can only be applied in relation to an [OFFER OF ADMISSION](#) for treatment.

CANCER CARE SETTING (TREATMENT)

Change to Data Element: Changed Description

Format/Length:	an2
National Codes:	
Default Codes:	99—Unknown
Default Codes:	99 - Unknown (Not Recorded)

Notes:

[CANCER CARE SETTING \(TREATMENT\)](#) is the type of care setting where the cancer care relating to the [TREATMENT START DATE FOR CANCER](#) took place. [CANCER CARE SETTING \(TREATMENT\)](#) 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 'Ordinary Admission') and a day case admission (where [PATIENT CLASSIFICATION](#) is National Code 'Day case admission').

For the [Cancer Outcomes and Services Data Set](#), default code '99 - Unknown' indicates "Not Recorded".

Permitted National Codes:

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

CANCER CARE SPELL DELAY REASON (CONSULTANT UPGRADE), renamed from DELAY REASON (CONSULTANT UPGRADE)

Change to Data Element: Changed Name, Description

Format/Length:	an2
National Codes:	See DELAY REASON TO TREATMENT FOR CANCER
National Codes:	See CANCER CARE SPELL DELAY REASON
Default Codes:	

Notes:

[DELAY REASON \(CONSULTANT UPGRADE\)](#) is the same as attribute [DELAY REASON TO TREATMENT FOR CANCER](#). [CANCER CARE SPELL DELAY REASON \(CONSULTANT UPGRADE\)](#) is the same as attribute [CANCER CARE SPELL DELAY REASON](#).

A [DELAY REASON \(CONSULTANT UPGRADE\)](#) must be present in the [National Cancer Waiting Times Monitoring Data Set](#) where a [Cancer Care Spell Delay](#) with a [DELAY REASON TO TREATMENT FOR CANCER](#) exists. [CANCER CARE SPELL DELAY REASON \(CONSULTANT UPGRADE\)](#) is the reason why a [Cancer Care Spell Delay](#) occurred when a [Consultant Upgrade](#) took place.

CANCER CARE SPELL DELAY REASON (CONSULTANT UPGRADE), renamed from DELAY REASON (CONSULTANT UPGRADE)

Change to Data Element: Changed Name, Description

- Changed Name from Data_Dictionary.Data_Field_Notes.D.Del.DELAY_REASON_(CONSULTANT_UPGRADE) to Data_Dictionary.Data_Field_Notes.C.CANCER_CARE_SPELL_DELAY_REASON_(CONSULTANT_UPGRADE)
- Changed Description

CANCER CARE SPELL DELAY REASON (DECISION TO TREATMENT), renamed from DELAY REASON (DECISION TO TREATMENT)

Change to Data Element: Changed Name, Description, linked Attribute

Format/Length:	an2
National Codes:	See DELAY REASON TO TREATMENT FOR CANCER
National Codes:	See CANCER CARE SPELL DELAY REASON
Default Codes:	

Notes:

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

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 FOR CANCER](#) exists. [CANCER CARE SPELL DELAY REASON \(DECISION TO TREATMENT\)](#) is the reason why a [Cancer Care Spell Delay](#) occurred between the [DECISION TO TREAT DATE](#) and [TREATMENT START DATE FOR CANCER](#).

This data can also be recorded locally for prospective [PATIENTS](#) where a full histological diagnosis confirming cancer is not yet available.

CANCER CARE SPELL DELAY REASON (DECISION TO TREATMENT), renamed from DELAY REASON (DECISION TO TREATMENT)

Change to Data Element: Changed Name, Description, linked Attribute

DELAY REASON (DECISION TO TREATMENT) CANCER CARE SPELL DELAY REASON (DECISION TO TREATMENT) Attribute: DELAY REASON TO TREATMENT FOR CANCER CANCER CARE SPELL DELAY REASON

CANCER CARE SPELL DELAY REASON (DECISION TO TREATMENT)_renamed from DELAY REASON (DECISION TO TREATMENT)

Change to Data Element: Changed Name, Description, linked Attribute

- Changed Name from Data_Dictionary.Data_Field_Notes.D.Del.DELAY_REASON_(DECISION_TO_TREATMENT) to Data_Dictionary.Data_Field_Notes.C.CANCER_CARE_SPELL_DELAY_REASON_(DECISION_TO_TREATMENT)
- Changed Description
- null

CANCER CARE SPELL DELAY REASON (FIRST SEEN)_renamed from DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS)

Change to Data Element: Changed Name, Description, linked Attribute

Format/Length:	an2
National Codes:	See DELAY REASON REFERRAL TO FIRST SEEN FOR CANCER OR BREAST SYMPTOMS
National Codes:	
Default Codes:	

Notes:

[DELAY REASON REFERRAL TO FIRST SEEN \(CANCER OR BREAST SYMPTOMS\)](#) is the same as attribute [DELAY REASON REFERRAL TO FIRST SEEN FOR CANCER OR BREAST SYMPTOMS](#). **CANCER CARE SPELL DELAY REASON (FIRST SEEN)** is the same as attribute **CANCER CARE SPELL DELAY REASON**. **CANCER CARE SPELL DELAY REASON** is the reason why a **Cancer Care Spell Delay** occurred between the **Cancer Referral To Treatment Period Start Date** and the **Date First Seen**, when the **PRIORITY TYPE** is National Code **'Two Week Wait'**.

Permitted National Codes:

- 01 Clinic cancellation
- 02 Out-patient capacity inadequate (i.e. no cancelled clinic, but not enough slots for this **PATIENT**)
- 03 Administrative delay
- 17 **PATIENT** choice delay relating to first **Out-Patient Appointment**
- 22 **PATIENT** care not commissioned by the NHS in England (waiting time standard does not apply) for treatment in an admitted care setting
- 97 Other reason (not listed)

CANCER CARE SPELL DELAY REASON (FIRST SEEN)_renamed from DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS)

Change to Data Element: Changed Name, Description, linked Attribute

DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS)	CANCER CARE SPELL DELAY REASON (FIRST SEEN)_renamed from DELAY REASON REFERRAL TO FIRST SEEN (CANCER OR BREAST SYMPTOMS)
CANCER CARE SPELL DELAY REASON (FIRST SEEN)	
Attribute: DELAY REASON REFERRAL TO FIRST SEEN FOR CANCER OR BREAST SYMPTOMS	
CANCER CARE SPELL DELAY REASON	Change to Data Element: Changed

Name, Description, linked Attribute

- Changed Name from Data_Dictionary.Data_Field_Notes.D.Del.DELAY_REASON_REFERRAL_TO_FIRST_SEEN_(CANCER_OR_BREAST_SYMPTOMS) to Data_Dictionary.Data_Field_Notes.C.CANCER_CARE_SPELL_DELAY_REASON_(FIRST_SEEN)
- Changed Description
- null

CANCER CARE SPELL DELAY REASON (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)

Change to Data Element: New Data Element

Format/Length:	an2
National Codes:	
Default Codes:	

Notes:

CANCER CARE SPELL DELAY REASON (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY) is the same as attribute **CANCER CARE SPELL DELAY REASON**.

CANCER CARE SPELL DELAY REASON (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY) is the reason why a **Cancer Care Spell Delay** occurred, where the **Health Care Provider** was unable to communicate the outcome of the **Cancer Faster Diagnosis Pathway** to the **PATIENT** within the service standard of 28 days.

Permitted National Codes:

- 01 Clinic cancellation
- 02 Out-patient capacity inadequate (i.e. no cancelled clinic, but not enough slots for this **PATIENT**)
- 03 Administrative delay
- 04 Elective cancellation (for non-medical reason) for treatment in an admitted care setting
- 05 Elective capacity inadequate (**PATIENT** unable to be scheduled for treatment within standard time) for treatment in an admitted care setting
- 07 Complex diagnostic pathway (many, or complex, diagnostic tests required)

- 11 Diagnosis delayed for medical reasons ([PATIENT](#) unfit for diagnostic episode, excluding planned recovery period following diagnostic test)
- 13 Delay due to recovery after an invasive test ([PATIENT DIAGNOSIS](#) or treatment delayed due to planned recovery period following an invasive diagnostic test)
- 14 [PATIENT](#) Did Not Attend treatment [APPOINTMENT](#)
- 17 [PATIENT](#) choice delay relating to first [Out-Patient Appointment](#)
- 18 [Health Care Provider](#) initiated delay to diagnostic test or treatment planning
- 19 [PATIENT](#) initiated (choice) delay to diagnostic test or treatment planning, advance notice given
- 20 [PATIENT](#) Did Not Attend an [APPOINTMENT](#) for a diagnostic test or treatment planning event (no advance notice)
- 22 [PATIENT](#) care not commissioned by the NHS in England (waiting time standard does not apply) for treatment in an admitted care setting
- 23 Equipment breakdown
- 24 Inconclusive diagnostic result
- 25 [Health Care Provider](#) unable to make contact with [PATIENT](#) by telephone
- 26 [PATIENT](#) choice ([PATIENT](#) declined or cancelled an offered [Appointment Date](#) for follow up [APPOINTMENT](#))
- 97 Other reason (not listed)

This data element is also known by these names:

Context	Alias
plural	CANCER CARE SPELL DELAY REASONS (OUTCOME COMMUNICATION FASTER DIAGNOSIS PATHWAY)

CANCER CARE SPELL DELAY REASON (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)

Change to Data Element: New Data Element

CANCER CARE SPELL DELAY REASON (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)

Attribute:

CANCER CARE SPELL DELAY REASON
--

CANCER CARE SPELL DELAY REASON (REFERRAL TO TREATMENT), renamed from DELAY REASON REFERRAL TO TREATMENT (CANCER)

Change to Data Element: Changed Name, Description

Format/Length:	an2
National Codes:	See DELAY REASON TO TREATMENT FOR CANCER
National Codes:	See CANCER CARE SPELL DELAY REASON
Default Codes:	

Notes:

[DELAY REASON REFERRAL TO TREATMENT \(CANCER\)](#) is the same as attribute [DELAY REASON TO TREATMENT FOR CANCER](#). [CANCER CARE SPELL DELAY REASON \(REFERRAL TO TREATMENT\)](#) is the same as attribute [CANCER CARE SPELL DELAY REASON](#).

[DELAY REASON REFERRAL TO TREATMENT \(CANCER\)](#) is an optional data element and should only be present in the [National Cancer Waiting Times Monitoring Data Set](#) if a [Cancer Care Spell Delay](#) with a [DELAY REASON TO TREATMENT FOR CANCER](#) has been recorded where the [DELAY REASON INDICATOR](#) is classification 'delay between urgent GP referral and date of First Definitive Treatment'. [CANCER CARE SPELL DELAY REASON \(REFERRAL TO TREATMENT\)](#) is the reason why a [Cancer Care Spell Delay](#) occurred between the [Cancer Referral To Treatment Period Start Date](#) and [Treatment Start Date \(Cancer\)](#), less any adjustments recorded by [WAITING TIME ADJUSTMENT \(FIRST SEEN\)](#) and [WAITING TIME ADJUSTMENT \(TREATMENT\)](#).

CANCER CARE SPELL DELAY REASON (REFERRAL TO TREATMENT), renamed from DELAY REASON REFERRAL TO TREATMENT (CANCER)

Change to Data Element: Changed Name, Description

- Changed Name from Data_Dictionary.Data_Field_Notes.D.Del.DELAY_REASON_REFERRAL_TO_TREATMENT_(CANCER) to Data_Dictionary.Data_Field_Notes.C.CANCER_CARE_SPELL_DELAY_REASON_(REFERRAL_TO_TREATMENT)
- Changed Description

CANCER CARE SPELL DELAY REASON COMMENT (CONSULTANT UPGRADE), renamed from DELAY REASON COMMENT (CONSULTANT UPGRADE)

Change to Data Element: Changed Name, Description

Format/Length:	max an255
National Codes:	
Default Codes:	

Notes:

[DELAY REASON COMMENT \(CONSULTANT UPGRADE\)](#) is the same as attribute [DELAY REASON COMMENT](#). [CANCER CARE SPELL DELAY REASON COMMENT \(CONSULTANT UPGRADE\)](#) is the same as attribute [CANCER CARE SPELL DELAY REASON COMMENT](#).

DELAY REASON COMMENT (CONSULTANT UPGRADE) 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 FOR CANCER. CANCER CARE SPELL DELAY REASON COMMENT (CONSULTANT UPGRADE) is the free text comment that describes why a Cancer Care Spell Delay occurred:

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

- when a Consultant Upgrade took place and
-

where the CANCER CARE SPELL DELAY REASON is National Code 'Other reason (not listed)' or any additional supporting information is required.

CANCER CARE SPELL DELAY REASON COMMENT (CONSULTANT UPGRADE), renamed from **DELAY REASON COMMENT (CONSULTANT UPGRADE)**

Change to Data Element: Changed Name, Description

- Changed Name from Data_Dictionary.Data_Field_Notes.D.De1.DELAY_REASON_COMMENT_(CONSULTANT_UPGRADE) to Data_Dictionary.Data_Field_Notes.C.CANCER_CARE_SPELL_DELAY_REASON_COMMENT_(CONSULTANT_UPGRADE)
- Changed Description

CANCER CARE SPELL DELAY REASON COMMENT (DECISION TO TREATMENT), renamed from **DELAY REASON COMMENT (DECISION TO TREATMENT)**

Change to Data Element: Changed Name, Description

Format/Length:	max an255
National Codes:	
Default Codes:	

Notes:

DELAY REASON COMMENT (DECISION TO TREATMENT) is the same as attribute DELAY REASON COMMENT. CANCER CARE SPELL DELAY REASON COMMENT (DECISION TO TREATMENT) is the same as attribute CANCER CARE SPELL DELAY REASON COMMENT.

DELAY REASON COMMENT (DECISION TO TREATMENT) 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 FOR CANCER could not be met. CANCER CARE SPELL DELAY REASON COMMENT (DECISION TO TREATMENT) is the free text comment that describes why a Cancer Care Spell Delay occurred:

If DELAY REASON (DECISION TO TREATMENT) is recorded as National Code 'Other reason' then DELAY REASON COMMENT (DECISION TO TREATMENT) must explain the full reason for the delay.

- between the DECISION TO TREAT DATE and TREATMENT START DATE FOR CANCER and
-

where the CANCER CARE SPELL DELAY REASON is National Code 'Other reason (not listed)' or any additional supporting information is required.

CANCER CARE SPELL DELAY REASON COMMENT (DECISION TO TREATMENT), renamed from **DELAY REASON COMMENT (DECISION TO TREATMENT)**

Change to Data Element: Changed Name, Description

- Changed Name from Data_Dictionary.Data_Field_Notes.D.De1.DELAY_REASON_COMMENT_(DECISION_TO_TREATMENT) to Data_Dictionary.Data_Field_Notes.C.CANCER_CARE_SPELL_DELAY_REASON_COMMENT_(DECISION_TO_TREATMENT)
- Changed Description

CANCER CARE SPELL DELAY REASON COMMENT (FIRST SEEN), renamed from **DELAY REASON COMMENT (FIRST SEEN)**

Change to Data Element: Changed Name, Description

Format/Length:	max an255
National Codes:	
Default Codes:	

Notes:

DELAY REASON COMMENT (FIRST SEEN) is the same as attribute DELAY REASON COMMENT. CANCER CARE SPELL DELAY REASON COMMENT (FIRST SEEN) is the same as attribute CANCER CARE SPELL DELAY REASON COMMENT.

DELAY REASON COMMENT (FIRST SEEN) 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). CANCER CARE SPELL DELAY REASON COMMENT (FIRST SEEN) is the free text comment field to describe why a Cancer Care Spell Delay occurred:

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.

If [DELAY REASON REFERRAL TO FIRST SEEN FOR CANCER OR BREAST SYMPTOMS](#) is recorded as National Code 'Other reason' then [DELAY REASON COMMENT \(FIRST SEEN\)](#) must explain the full reason for the delay.

•
between the [Cancer Referral To Treatment Period Start Date](#) and the [Date First Seen](#) and

•
where the:

- [PRIORITY TYPE](#) is National Code 'Two Week Wait' and
- [CANCER CARE SPELL DELAY REASON](#) is National Code 'Other reason (not listed)' or any additional supporting information is required .

CANCER CARE SPELL DELAY REASON COMMENT (FIRST SEEN)_ renamed from DELAY REASON COMMENT (FIRST SEEN)

Change to Data Element: Changed Name, Description

- Changed Name from Data_Dictionary.Data_Field_Notes.D.Del.DELAY_REASON_COMMENT_(FIRST_SEEN) to Data_Dictionary.Data_Field_Notes.C.CANCER_CARE_SPELL_DELAY_REASON_COMMENT_(FIRST_SEEN)
- Changed Description

CANCER CARE SPELL DELAY REASON COMMENT (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)

Change to Data Element: New Data Element

Format/Length:	max an255
National Codes:	
Default Codes:	

Notes:

[CANCER CARE SPELL DELAY REASON COMMENT \(OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY\)](#) is the same as attribute [CANCER CARE SPELL DELAY REASON COMMENT](#).

[CANCER CARE SPELL DELAY REASON COMMENT \(OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY\)](#) is the free text comment that describes why a Cancer Care Spell Delay occurred where the:

- [Health Care Provider](#) was unable to communicate the outcome of the [Cancer Faster Diagnosis Pathway](#) to the [PATIENT](#) within the service standard of 28 days and
- [CANCER CARE SPELL DELAY REASON](#) is National Code 'Other reason (not listed)' or any additional supporting information is required.

This data element is also known by these names:

Context	Alias
plural	CANCER CARE SPELL DELAY REASON COMMENTS (OUTCOME COMMUNICATION FASTER DIAGNOSIS PATHWAY)

CANCER CARE SPELL DELAY REASON COMMENT (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)

Change to Data Element: New Data Element

CANCER CARE SPELL DELAY REASON COMMENT (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)

Attribute:

CANCER CARE SPELL DELAY REASON COMMENT
--

CANCER CARE SPELL DELAY REASON COMMENT (REFERRAL TO TREATMENT)_ renamed from DELAY REASON COMMENT (REFERRAL TO TREATMENT)

Change to Data Element: Changed Name, Description

Format/Length:	max an255
National Codes:	
Default Codes:	

Notes:

[DELAY REASON COMMENT \(REFERRAL TO TREATMENT\)](#) is the same as attribute [DELAY REASON COMMENT](#). [CANCER CARE SPELL DELAY REASON COMMENT \(REFERRAL TO TREATMENT\)](#) is the same as attribute [CANCER CARE SPELL DELAY REASON COMMENT](#).

[DELAY REASON COMMENT \(REFERRAL TO TREATMENT\)](#) 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). [CANCER CARE SPELL DELAY REASON COMMENT \(REFERRAL TO TREATMENT\)](#) is the free text comment field to describe why a Cancer Care Spell Delay occurred:

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 FOR CANCER](#), less any adjustments recorded by [WAITING TIME ADJUSTMENT \(FIRST SEEN\)](#) and [WAITING TIME ADJUSTMENT \(TREATMENT\)](#), could not be met.

- between the [Cancer Referral To Treatment Period Start Date](#) and [Treatment Start Date \(Cancer\)](#) and
- less any adjustments recorded by [WAITING TIME ADJUSTMENT \(FIRST SEEN\)](#) and [WAITING TIME ADJUSTMENT \(TREATMENT\)](#) and
- where the [CANCER CARE SPELL DELAY REASON](#) is National Code '*Other reason (not listed)*' or any additional supporting information is required .

CANCER CARE SPELL DELAY REASON COMMENT (REFERRAL TO TREATMENT), renamed from **DELAY REASON COMMENT (REFERRAL TO TREATMENT)**

Change to Data Element: Changed Name, Description

- Changed Name from Data_Dictionary.Data_Field_Notes.D.Del.DELAY_REASON_COMMENT_(REFERRAL_TO_TREATMENT) to Data_Dictionary.Data_Field_Notes.C.CANCER_CARE_SPELL_DELAY_REASON_COMMENT_(REFERRAL_TO_TREATMENT)
- Changed Description

CANCER FASTER DIAGNOSIS PATHWAY END DATE

Change to Data Element: New Data Element

Format/Length:	See DATE
National Codes:	
Default Codes:	

Notes:
[CANCER FASTER DIAGNOSIS PATHWAY END DATE](#) is the same as [ACTIVITY DATE](#), where the [ACTIVITY DATE TYPE](#) is National Code '*Cancer Faster Diagnosis Pathway End Date*'.

This data element is also known by these names:

Context	Alias
plural	CANCER FASTER DIAGNOSIS PATHWAY END DATES

CANCER FASTER DIAGNOSIS PATHWAY END DATE

Change to Data Element: New Data Element

CANCER FASTER DIAGNOSIS PATHWAY END DATE

Attribute:

ACTIVITY DATE

CANCER FASTER DIAGNOSIS PATHWAY END REASON

Change to Data Element: New Data Element

Format/Length:	an1
National Codes:	See CANCER FASTER DIAGNOSIS PATHWAY END REASON
Default Codes:	

Notes:
[CANCER FASTER DIAGNOSIS PATHWAY END REASON](#) is the same as attribute [CANCER FASTER DIAGNOSIS PATHWAY END REASON](#).

This data element is also known by these names:

Context	Alias
plural	CANCER FASTER DIAGNOSIS PATHWAY END REASONS

CANCER FASTER DIAGNOSIS PATHWAY END REASON

Change to Data Element: New Data Element

CANCER FASTER DIAGNOSIS PATHWAY END REASON

Attribute:

CANCER FASTER DIAGNOSIS PATHWAY END REASON
--

CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON

Change to Data Element: New Data Element

Format/Length:	an2
National Codes:	See CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON
Default Codes:	

Notes:
[CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON](#) is the same as attribute [CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON](#).

This data element is also known by these names:

Context	Alias
plural	CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASONS

CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON

Change to Data Element: New Data Element

CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON

Attribute:	CANCER FASTER DIAGNOSIS PATHWAY EXCLUSION REASON
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CANCER REFERRAL TO TREATMENT PERIOD START DATE

Change to Data Element: Changed Description, linked Attribute

Format/Length:	See DATE
National Codes:	
Default Codes:	

Notes:
[CANCER REFERRAL TO TREATMENT PERIOD START DATE](#) is the same as attribute [CANCER REFERRAL TO TREATMENT PERIOD START DATE](#). [CANCER REFERRAL TO TREATMENT PERIOD START DATE](#) is the same as attribute [ACTIVITY DATE](#), where the [ACTIVITY DATE TYPE](#) is National Code '[Cancer Referral To Treatment Period Start Date](#)'.

CANCER REFERRAL TO TREATMENT PERIOD START DATE

Change to Data Element: Changed Description, linked Attribute

CANCER REFERRAL TO TREATMENT PERIOD START DATE

Attribute:	CANCER REFERRAL TO TREATMENT PERIOD START DATE
	ACTIVITY DATE

CANCER TRANSFER RECEIVING REASON (INTER-PROVIDER TRANSFER)

Change to Data Element: New Data Element

Format/Length:	an2
National Codes:	See CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER
Default Codes:	99 - Not Known (Not Recorded)

Notes:
[CANCER TRANSFER RECEIVING REASON \(INTER-PROVIDER TRANSFER\)](#) is the same as attribute [CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER](#).

[CANCER TRANSFER RECEIVING REASON \(INTER-PROVIDER TRANSFER\)](#) is the [CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER](#) for the [Organisation](#) that is receiving the [PATIENT](#) from another [Health Care Provider](#) as part of the inter-provider transfer during a [Cancer Care Spell](#).

This data element is also known by these names:

Context	Alias
plural	CANCER TRANSFER RECEIVING REASONS (INTER-PROVIDER TRANSFER)

CANCER TRANSFER RECEIVING REASON (INTER-PROVIDER TRANSFER)

Change to Data Element: New Data Element

CANCER TRANSFER RECEIVING REASON (INTER-PROVIDER TRANSFER)

Attribute:	
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CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER

CANCER TRANSFER REFERRING REASON (INTER-PROVIDER TRANSFER)

Change to Data Element: New Data Element

Format/Length:	an2
National Codes:	See CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER
Default Codes:	99 - Not Known (Not Recorded)

Notes:

[CANCER TRANSFER REFERRING REASON \(INTER-PROVIDER TRANSFER\)](#) is the same as attribute [CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER](#).

[CANCER TRANSFER REFERRING REASON \(INTER-PROVIDER TRANSFER\)](#) is the [CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER](#) for the [Organisation](#) that is referring the [PATIENT](#) to another [Health Care Provider](#) as part of the inter-provider transfer during a [Cancer Care Spell](#).

This data element is also known by these names:

Context	Alias
plural	CANCER TRANSFER REFERRING REASONS (INTER-PROVIDER TRANSFER)

CANCER TRANSFER REFERRING REASON (INTER-PROVIDER TRANSFER)

Change to Data Element: New Data Element

CANCER TRANSFER REFERRING REASON (INTER-PROVIDER TRANSFER)

Attribute:

[CANCER TRANSFER REASON FOR INTER-PROVIDER TRANSFER](#)

CANCER TREATMENT PERIOD START DATE

Change to Data Element: Changed Description, linked Attribute

Format/Length:	See DATE
National Codes:	
Default Codes:	

Notes:

[CANCER TREATMENT PERIOD START DATE](#) is the same as attribute ~~[CANCER TREATMENT PERIOD START DATE](#)~~. [CANCER TREATMENT PERIOD START DATE](#) is the same as attribute [ACTIVITY DATE](#), where the [ACTIVITY DATE TYPE](#) is National Code '[Cancer Treatment Period Start Date](#)'.

CANCER TREATMENT PERIOD START DATE

Change to Data Element: Changed Description, linked Attribute

CANCER TREATMENT PERIOD START DATE

Attribute:

[CANCER TREATMENT PERIOD START DATE](#)

[ACTIVITY DATE](#)

CARE PROFESSIONAL TYPE CODE (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)

Change to Data Element: New Data Element

Format/Length:	an3
National Codes:	
Default Codes:	

Notes:

[CARE PROFESSIONAL TYPE CODE \(OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY\)](#) is the same as attribute [CARE PROFESSIONAL TYPE CODE](#).

[CARE PROFESSIONAL TYPE CODE \(OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY\)](#) is the [CARE PROFESSIONAL TYPE CODE](#) of the [CARE PROFESSIONAL](#) communicating the cancer diagnosis outcome to the [PATIENT](#), where the [CANCER FASTER DIAGNOSIS PATHWAY END REASON](#) in National Code '[Diagnosis of cancer](#)' or '[Ruling out of cancer](#)'.

[Permitted National Codes:](#)

060	CONSULTANT
150	GENERAL DENTAL PRACTITIONER
160	GENERAL MEDICAL PRACTITIONER
180	NURSE
210	OPHTHALMIC MEDICAL PRACTITIONER
220	OPTOMETRIST
310	Radiographer
XXX	Other (not listed)

This data element is also known by these names:

Context	Alias
plural	CARE PROFESSIONAL TYPE CODES (CANCER FASTER DIAGNOSIS PATHWAY OUTCOME COMMUNICATION)

CARE PROFESSIONAL TYPE CODE (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)

Change to Data Element: New Data Element

CARE PROFESSIONAL TYPE CODE (OUTCOME COMMUNICATION CANCER FASTER DIAGNOSIS PATHWAY)

Attribute:

CARE PROFESSIONAL TYPE CODE

CLINICAL TRIAL INDICATOR

Change to Data Element: Changed Description

Format/Length:	an2
National Codes:	See CLINICAL TRIAL INDICATOR
Default Codes:	99 - Unknown *

Notes:

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

For the [Systemic Anti-Cancer Therapy Data Set](#), this identifies if a [PATIENT](#)'s [Chemotherapy](#) treatment is within a [CLINICAL TRIAL](#). For the [Systemic Anti-Cancer Therapy Data Set](#), [CLINICAL TRIAL INDICATOR](#) identifies if a [PATIENT](#)'s [Chemotherapy](#) treatment is within a [CLINICAL TRIAL](#).

Note: * For the [Cancer Outcomes and Services Data Set](#), default code '99 - Unknown' indicates "Not Recorded". Note: * For the [National Cancer Waiting Times Monitoring Data Set](#), default code '99 - Unknown' indicates "Not Recorded".

DATE FIRST SEEN

Change to Data Element: Changed Description

Format/Length:	See DATE
National Codes:	
Default Codes:	

Notes:

[DATE FIRST SEEN](#) is the same as attribute [ACTIVITY DATE](#) where the [ACTIVITY DATE TYPE](#) is National Code '[Date First Seen](#)'.

For the [National Cancer Waiting Times Monitoring Data Set](#) and [Cancer Outcomes and Services Data Set](#), [DATE FIRST SEEN](#):[DATE FIRST SEEN](#) for the:

- is mandatory for [PATIENTS](#) referred urgently by their [GENERAL PRACTITIONER](#) for suspected cancer but can also be applied to other [PATIENTS](#)
- may not be the same as [DATE FIRST SEEN \(CANCER SPECIALIST\)](#) which records the first time the [PATIENT](#) sees an appropriate specialist in cancer care.
- [National Cancer Waiting Times Monitoring Data Set](#) is:
 - the [DATE](#) when the [PATIENT](#) is seen for the first time by a [CONSULTANT](#) (or member of their team) or in a clinic following receipt of the [REFERRAL REQUEST](#).
- [HIV and AIDS Reporting Data Set](#) is:
 - the [DATE](#) the [PATIENT](#) was first seen for Human Immunodeficiency Virus (HIV) care at a [HIV Clinic Attendance](#) at the current [Health Care Provider](#).

For the [HIV and AIDS Reporting Data Set](#), [DATE FIRST SEEN](#) is the [DATE](#) the [PATIENT](#) was first seen for Human Immunodeficiency Virus (HIV) care at a [HIV Clinic Attendance](#) at the current [Health Care Provider](#).

DECISION TO REFER DATE (CANCER OR BREAST SYMPTOMS)

Change to Data Element: Changed Description

Format/Length:	See DATE
National Codes:	
Default Codes:	

Notes:

[DECISION TO REFER DATE \(CANCER OR BREAST SYMPTOMS\)](#) is the same as attribute [DECISION TO REFER DATE](#).

[DECISION TO REFER DATE \(CANCER OR BREAST SYMPTOMS\)](#) 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. [DECISION TO REFER DATE \(CANCER OR BREAST SYMPTOMS\)](#) is the [DATE](#) on which:

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](#)—
- a [GENERAL MEDICAL PRACTITIONER](#), [GENERAL DENTAL PRACTITIONER](#) or [OPTOMETRIST](#) decides to refer a [PATIENT](#) urgently to secondary care with suspected cancer
- any [CARE PROFESSIONAL](#) decides to make a referral to secondary care for breast symptoms where cancer is not suspected
- a [Screening Service](#) decides to urgently refer a [PATIENT](#) with suspected cancer
- a [Consultant Upgrade](#) takes place.

[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.

METASTATIC SITE

Change to Data Element: Changed Description

Format/Length:	an2
National Codes:	See METASTATIC SITE
Default Codes:	

Notes:

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

For the ~~the~~ [Cancer Outcomes and Services Data Set](#), [METASTATIC SITE](#) is the [METASTATIC SITE](#) at the time of [PATIENT DIAGNOSIS](#).

- [National Cancer Waiting Times Monitoring Data Set](#), this is the [METASTATIC SITE](#) at the point of treatment
- [Cancer Outcomes and Services Data Set](#), this is the [METASTATIC SITE](#) at the time of [PATIENT DIAGNOSIS](#).

METHOD OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)

Change to Data Element: New Data Element

Format/Length:	an2
National Codes:	See METHOD OF COMMUNICATION FOR END OF CANCER FASTER DIAGNOSIS PATHWAY
Default Codes:	

Notes:

[METHOD OF COMMUNICATION \(END OF CANCER FASTER DIAGNOSIS PATHWAY\)](#) is the same as attribute [METHOD OF COMMUNICATION FOR END OF CANCER FASTER DIAGNOSIS PATHWAY](#).

This data element is also known by these names:

Context	Alias
plural	METHODS OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)

METHOD OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)

Change to Data Element: New Data Element

METHOD OF COMMUNICATION (END OF CANCER FASTER DIAGNOSIS PATHWAY)

Attribute:

METHOD OF COMMUNICATION FOR END OF CANCER FASTER DIAGNOSIS PATHWAY
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MULTIDISCIPLINARY TEAM CANCER CARE PLAN DISCUSSED INDICATOR, renamed from MULTIDISCIPLINARY TEAM DISCUSSION INDICATOR

Change to Data Element: Changed Name

- Changed Name from Data_Dictionary.Data_Field_Notes.M.Mo.MULTIDISCIPLINARY_TEAM_DISCUSSION_INDICATOR to Data_Dictionary.Data_Field_Notes.M.Mo.MULTIDISCIPLINARY_TEAM_CANCER_CARE_PLAN_DISCUSSED_INDICATOR

MULTIDISCIPLINARY TEAM DISCUSSION DATE (CANCER)

Change to Data Element: Changed Description

Format/Length:	See DATE
National Codes:	
Default Codes:	

Notes:

[MULTIDISCIPLINARY TEAM DISCUSSION DATE \(CANCER\)](#) is the same as attribute [ACTIVITY DATE](#) where the [ACTIVITY DATE TYPE](#) is National Code '[Multidisciplinary Team Discussion Date \(Cancer\)](#)'.

Note: If the treatment planning decision was not made at a [Multidisciplinary Team Meeting](#) this item should not be recorded.

ORGANISATION SITE IDENTIFIER (OF CANCER FASTER DIAGNOSIS PATHWAY END DATE)

Change to Data Element: New Data Element

Format/Length:	min an5 max an9
National Codes:	
ODS Default Codes:	89999 - Non-NHS UK Provider where no ORGANISATION IDENTIFIER has been issued 89997 - Non-UK Provider where no ORGANISATION IDENTIFIER has been issued

Notes:

[ORGANISATION SITE IDENTIFIER \(OF CANCER FASTER DIAGNOSIS PATHWAY END DATE\)](#) is the same as attribute [ORGANISATION IDENTIFIER](#).

[ORGANISATION SITE IDENTIFIER \(OF CANCER FASTER DIAGNOSIS PATHWAY END DATE\)](#) is the [ORGANISATION IDENTIFIER](#) of the [Organisation Site](#) acting as [Health Care Provider](#) where the [CANCER FASTER DIAGNOSIS PATHWAY END DATE](#) is recorded.

This data element is also known by these names:

Context	Alias
plural	ORGANISATION SITE IDENTIFIERS (OF CANCER FASTER DIAGNOSIS PATHWAY END DATE)

ORGANISATION SITE IDENTIFIER (OF CANCER FASTER DIAGNOSIS PATHWAY END DATE)

Change to Data Element: New Data Element

ORGANISATION SITE IDENTIFIER (OF CANCER FASTER DIAGNOSIS PATHWAY END DATE)

Attribute:

ORGANISATION IDENTIFIER

ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER DECISION TO TREAT)

Change to Data Element: Changed Description

Format/Length:	min an5 max an9
National Codes:	
ODS Default Codes:	89999 - Non-NHS UK Provider where no ORGANISATION IDENTIFIER has been issued 89997 - Non-UK Provider where no ORGANISATION IDENTIFIER has been issued

Notes:

[ORGANISATION SITE IDENTIFIER \(OF PROVIDER CANCER DECISION TO TREAT\)](#) is the same as attribute [ORGANISATION IDENTIFIER](#).

[ORGANISATION SITE IDENTIFIER \(OF PROVIDER CANCER DECISION TO TREAT\)](#) is the [ORGANISATION IDENTIFIER](#) of the [Organisation Site](#) 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](#).

~~[SITE CODE \(OF PROVIDER CANCER DECISION TO TREAT\)](#) will be replaced with [ORGANISATION SITE IDENTIFIER \(OF PROVIDER CANCER DECISION TO TREAT\)](#), when it has been approved for use in national information standards.~~

ORGANISATION SITE IDENTIFIER (OF PROVIDER CANCER TREATMENT START DATE)

Change to Data Element: Changed Description

Format/Length:	min an5 max an9
National Codes:	
ODS Default Codes:	89999 - Non-NHS UK Provider where no ORGANISATION IDENTIFIER has been issued 89997 - Non-UK Provider where no ORGANISATION IDENTIFIER has been issued

Notes:

[ORGANISATION SITE IDENTIFIER \(OF PROVIDER CANCER TREATMENT START DATE\)](#) is the same as attribute [ORGANISATION IDENTIFIER](#).

~~[ORGANISATION SITE IDENTIFIER \(OF PROVIDER CANCER TREATMENT START DATE\)](#) is the [ORGANISATION IDENTIFIER](#) of the [Organisation Site](#) where the [TREATMENT START DATE FOR CANCER](#) is recorded. [ORGANISATION SITE IDENTIFIER \(OF PROVIDER CANCER TREATMENT START DATE\)](#) is the [ORGANISATION IDENTIFIER](#) of the [Organisation Site](#) where the [TREATMENT START DATE \(CANCER\)](#) is recorded.~~

~~[SITE CODE \(OF PROVIDER CANCER TREATMENT START DATE\)](#) will be replaced with [ORGANISATION SITE IDENTIFIER \(OF PROVIDER CANCER DECISION TO TREAT\)](#), when it has been approved for use in national information standards.~~

ORGANISATION SITE IDENTIFIER (OF PROVIDER CONSULTANT UPGRADE)

Change to Data Element: Changed Description

Format/Length:	min an5 max an9
National Codes:	
ODS Default Codes:	89999 - Non-NHS UK Provider where no ORGANISATION IDENTIFIER has been issued 89997 - Non-UK Provider where no ORGANISATION IDENTIFIER has been issued

Notes:

[ORGANISATION SITE IDENTIFIER \(OF PROVIDER CONSULTANT UPGRADE\)](#) is the same as attribute [ORGANISATION IDENTIFIER](#).

[ORGANISATION SITE IDENTIFIER \(OF PROVIDER CONSULTANT UPGRADE\)](#) is the [ORGANISATION IDENTIFIER](#) of the [Organisation Site](#) 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).

~~[SITE CODE \(OF PROVIDER CONSULTANT UPGRADE\)](#) will be replaced with [ORGANISATION SITE IDENTIFIER \(OF PROVIDER CONSULTANT UPGRADE\)](#), when it has been approved for use in national information standards.~~

ORGANISATION SITE IDENTIFIER (OF PROVIDER FIRST SEEN)

Change to Data Element: Changed Description

Format/Length:	min an5 max an9
National Codes:	
ODS Default Codes:	89999 - Non-NHS UK Provider where no ORGANISATION IDENTIFIER has been issued 89997 - Non-UK Provider where no ORGANISATION IDENTIFIER has been issued

Notes:

[ORGANISATION SITE IDENTIFIER \(OF PROVIDER FIRST SEEN\)](#) is the same as attribute [ORGANISATION IDENTIFIER](#).

[ORGANISATION SITE IDENTIFIER \(OF PROVIDER FIRST SEEN\)](#) is the [ORGANISATION IDENTIFIER](#) of the [Organisation Site](#) of the [Health Care Provider](#) at the first contact with the [PATIENT](#).

For the [National Cancer Waiting Times Monitoring Data Set](#) this may be the:

- [Out-Patient Attendance Consultant](#)
- [Imaging or Radiodiagnostic Event](#)
- [CLINICAL INTERVENTION](#)
- [Hospital Provider Spell](#)
- [Accident and Emergency Attendance](#) or
- [Screening Test](#)

whichever is the earlier [SERVICE](#) related to the initial [REFERRAL REQUEST](#).

~~[ORGANISATION SITE IDENTIFIER \(OF PROVIDER FIRST SEEN\)](#) is may be the same [Health Care Provider](#) as for [SITE CODE \(OF PROVIDER FIRST CANCER SPECIALIST\)](#) if the [PATIENT](#) was first seen by the appropriate specialist for cancer. [ORGANISATION SITE IDENTIFIER \(OF PROVIDER FIRST SEEN\)](#) may be the same [Health Care Provider](#) as for [SITE CODE \(OF PROVIDER FIRST CANCER SPECIALIST\)](#) if the [PATIENT](#) was first seen by the appropriate specialist for cancer.~~

SITE CODE (OF PROVIDER FIRST SEEN) will be replaced with ORGANISATION SITE IDENTIFIER (OF PROVIDER FIRST SEEN), when it has been approved for use in national information standards.

PRIMARY CANCER SITE (CANCER FASTER DIAGNOSIS PATHWAY)

Change to Data Element: New Data Element

Format/Length:	an2
National Codes:	See PRIMARY CANCER SITE FOR CANCER FASTER DIAGNOSIS PATHWAY
Default Codes:	

Notes:

[PRIMARY CANCER SITE \(CANCER FASTER DIAGNOSIS PATHWAY\)](#) is the same as attribute [PRIMARY CANCER SITE FOR CANCER FASTER DIAGNOSIS PATHWAY](#).

This data element is also known by these names:

Context	Alias
plural	PRIMARY CANCER SITES (CANCER FASTER DIAGNOSIS PATHWAY)

PRIMARY CANCER SITE (CANCER FASTER DIAGNOSIS PATHWAY)

Change to Data Element: New Data Element

PRIMARY CANCER SITE (CANCER FASTER DIAGNOSIS PATHWAY)

Attribute:

PRIMARY CANCER SITE FOR CANCER FASTER DIAGNOSIS PATHWAY

REFERRAL REQUEST RECEIVED DATE (INTER-PROVIDER TRANSFER)

Change to Data Element: Changed Description

Format/Length:	See DATE
National Codes:	
Default Codes:	

Notes:

[REFERRAL REQUEST RECEIVED DATE \(INTER-PROVIDER TRANSFER\)](#) is the [REFERRAL REQUEST RECEIVED DATE](#) for an inter-provider transfer of a [PATIENT](#) from one [Health Care Provider](#) to another.

[REFERRAL REQUEST RECEIVED DATE \(INTER-PROVIDER TRANSFER\)](#) is the date the [Organisation](#) where the [PATIENT](#) is being transferred to, received the [SERVICE REQUEST](#) from the referring [Organisation](#). [REFERRAL REQUEST RECEIVED DATE \(INTER-PROVIDER TRANSFER\)](#) is the [DATE](#) the [Organisation](#) where the [PATIENT](#) is being transferred to, received the [SERVICE REQUEST](#) from the referring [Organisation](#).

SERVICE REQUESTED DATE (INTER-PROVIDER TRANSFER)

Change to Data Element: Changed Description

Format/Length:	see DATE
Format/Length:	See DATE
National Codes:	
Default Codes:	

Notes:

This is the [SERVICE REQUEST DATE](#) for an inter-provider transfer of a [PATIENT](#) from one [Health Care Provider](#) to another. That is the date the referring [Health Care Provider](#) raised a [SERVICE REQUEST](#). [SERVICE REQUESTED DATE \(INTER-PROVIDER TRANSFER\)](#) is the same as attribute [SERVICE REQUEST DATE](#). [SERVICE REQUESTED DATE \(INTER-PROVIDER TRANSFER\)](#) is the [SERVICE REQUEST DATE](#) for an inter-provider transfer of a [PATIENT](#) from one [Health Care Provider](#) to another.

[SERVICE REQUESTED DATE \(INTER-PROVIDER TRANSFER\)](#) is the [DATE](#) the referring [Health Care Provider](#) raised a [SERVICE REQUEST](#).

SITE CODE (OF PROVIDER CANCER DECISION TO TREAT) (RETIRED), renamed from [SITE CODE \(OF PROVIDER CANCER DECISION TO TREAT\)](#)

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

Format/Length:	min an5 max an9
National Codes:	
ODS Default Codes:	89999 — Non NHS UK Provider where no ORGANISATION SITE CODE has been issued

89997 - Non UK Provider where no [ORGANISATION SITE CODE](#) has been issued

Notes:

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

[SITE CODE \(OF PROVIDER CANCER DECISION TO TREAT\)](#) is the [ORGANISATION SITE 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](#). This item has been retired from the NHS Data Model and Dictionary.

The [Planned Cancer Treatment](#) may be planned and provided by a different [Health Care Provider](#). The last live version of this item is available in the [??????](#) release of the NHS Data Model and Dictionary.

[SITE CODE \(OF PROVIDER CANCER DECISION TO TREAT\)](#) will be replaced with [ORGANISATION SITE IDENTIFIER \(OF PROVIDER CANCER DECISION TO TREAT\)](#), when it has been approved for use in national information standards. Access to this version can be obtained by emailing information.standards@nhs.net with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

SITE CODE (OF PROVIDER CANCER DECISION TO TREAT) (RETIRED), renamed from SITE CODE (OF PROVIDER CANCER DECISION TO TREAT)

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

SITE CODE (OF PROVIDER CANCER DECISION TO TREAT)

Attribute:

[ORGANISATION SITE CODE](#)

SITE CODE (OF PROVIDER CANCER DECISION TO TREAT) (RETIRED), renamed from SITE CODE (OF PROVIDER CANCER DECISION TO TREAT)

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

- Changed Name from Data_Dictionary.Data_Field_Notes.S.Site.SITE_CODE_(OF_PROVIDER_CANCR DECISION_TO_TREAT) to Retired.Data_Dictionary.Data_Field_Notes.S.SITE_CODE_(OF_PROVIDER_CANCR DECISION_TO_TREAT)
- Changed Description
- null
- Retired SITE CODE (OF PROVIDER CANCER DECISION TO TREAT)

SITE CODE (OF PROVIDER CANCER TREATMENT START DATE) (RETIRED), renamed from SITE CODE (OF PROVIDER CANCER TREATMENT START DATE)

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

Format/Length:	min an5 max an9
National Codes:	
ODS Default Codes:	89999 - Non NHS UK Provider where no ORGANISATION SITE CODE has been issued 89997 - Non UK Provider where no ORGANISATION SITE CODE has been issued

Notes:

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

[SITE CODE \(OF PROVIDER CANCER TREATMENT START DATE\)](#) is the [ORGANISATION SITE CODE](#) of the [Organisation](#) where the [TREATMENT START DATE FOR CANCER](#) is recorded. This item has been retired from the NHS Data Model and Dictionary.

[SITE CODE \(OF PROVIDER CANCER TREATMENT START DATE\)](#) will be replaced with [ORGANISATION SITE IDENTIFIER \(OF PROVIDER CANCER TREATMENT START DATE\)](#), when it has been approved for use in national information standards. The last live version of this item is available in the [??????](#) release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing information.standards@nhs.net with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

SITE CODE (OF PROVIDER CANCER TREATMENT START DATE) (RETIRED), renamed from SITE CODE (OF PROVIDER CANCER TREATMENT START DATE)

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

SITE CODE (OF PROVIDER CANCER TREATMENT START DATE)

Attribute:

[ORGANISATION SITE CODE](#)

SITE CODE (OF PROVIDER CANCER TREATMENT START DATE) (RETIRED), renamed from SITE CODE (OF PROVIDER CANCER TREATMENT START DATE)

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

- Changed Name from Data_Dictionary.Data_Field_Notes.S.Site.SITE_CODE_(OF_PROVIDER_CANCR TREATMENT_START_DATE) to Retired.Data_Dictionary.Data_Field_Notes.S.SITE_CODE_(OF_PROVIDER_CANCR TREATMENT_START_DATE)
- Changed Description

- null
- Retired SITE CODE (OF PROVIDER CANCER TREATMENT START DATE)

SITE CODE (OF PROVIDER CONSULTANT UPGRADE) (RETIRED), renamed from **SITE CODE (OF PROVIDER CONSULTANT UPGRADE)**

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

Format/Length:	min an5 max an9
National Codes:	
ODS Default Codes:	80999 - Non NHS UK Provider where no ORGANISATION SITE CODE has been issued
	80997 - Non UK Provider where no ORGANISATION SITE CODE has been issued

Notes:

[SITE CODE \(OF PROVIDER CONSULTANT UPGRADE\)](#) is the same as attribute [ORGANISATION SITE CODE](#).

[SITE CODE \(OF PROVIDER CONSULTANT UPGRADE\)](#) is the [ORGANISATION SITE CODE](#) of the [Organisation](#) acting as [Health Care Provider](#) when a decision is made to upgrade the [PATIENT](#) to an urgent Cancer [PATIENT PATHWAY](#). This item has been retired from the NHS Data Model and Dictionary.

The decision to upgrade must be made by a [CONSULTANT](#) or an authorised member of the [CONSULTANTS](#) team (subject to local agreement). The last live version of this item is available in the ?????? release of the NHS Data Model and Dictionary.

[SITE CODE \(OF PROVIDER CONSULTANT UPGRADE\)](#) will be replaced with [ORGANISATION SITE IDENTIFIER \(OF PROVIDER CONSULTANT UPGRADE\)](#), when it has been approved for use in national information standards. Access to this version can be obtained by emailing information.standards@nhs.net with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

SITE CODE (OF PROVIDER CONSULTANT UPGRADE) (RETIRED), renamed from **SITE CODE (OF PROVIDER CONSULTANT UPGRADE)**

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

SITE CODE (OF PROVIDER CONSULTANT UPGRADE)

Attribute:

[ORGANISATION SITE CODE](#)

SITE CODE (OF PROVIDER CONSULTANT UPGRADE) (RETIRED), renamed from **SITE CODE (OF PROVIDER CONSULTANT UPGRADE)**

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

- Changed Name from Data Dictionary.Data_Field_Notes.S.Site.SITE_CODE_(OF_PROVIDER_CONSULTANT_UPGRADE) to Retired.Data Dictionary.Data_Field_Notes.S.SITE_CODE_(OF_PROVIDER_CONSULTANT_UPGRADE)
- Changed Description
- null
- Retired SITE CODE (OF PROVIDER CONSULTANT UPGRADE)

SITE CODE (OF PROVIDER FIRST SEEN) (RETIRED), renamed from **SITE CODE (OF PROVIDER FIRST SEEN)**

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

Format/Length:	min an5 max an9
National Codes:	
ODS Default Codes:	80999 - Non NHS UK Provider where no ORGANISATION SITE CODE has been issued
	80997 - Non UK Provider where no ORGANISATION SITE CODE has been issued

Notes:

[SITE CODE \(OF PROVIDER FIRST SEEN\)](#) is the same as attribute [ORGANISATION SITE CODE](#).

[SITE CODE \(OF PROVIDER FIRST SEEN\)](#) is the [ORGANISATION SITE CODE](#) of the [Health Care Provider](#) at the first contact with the [PATIENT](#). This item has been retired from the NHS Data Model and Dictionary.

For the [National Cancer Waiting Times Monitoring Data Set](#) this may be the: The last live version of this item is available in the ?????? release of the NHS Data Model and Dictionary.

- [Out Patient Attendance Consultant](#)
- [Imaging or Radiodiagnostic Event](#)
- [CLINICAL INTERVENTION](#)
- [Hospital Provider Spell](#)
- [Accident and Emergency Attendance](#) or
- [Screening Test](#)

whichever is the earlier [SERVICE](#) related to the initial [REFERRAL REQUEST](#).

[SITE CODE \(OF PROVIDER FIRST SEEN\)](#) is may be the same [Health Care Provider](#) as for [SITE CODE \(OF PROVIDER FIRST CANCER SPECIALIST\)](#) if the [PATIENT](#) was first seen by the appropriate specialist for cancer.

[SITE CODE \(OF PROVIDER FIRST SEEN\)](#) will be replaced with [ORGANISATION SITE IDENTIFIER \(OF PROVIDER FIRST SEEN\)](#), when it has been approved for use in national information standards. Access to this version can be obtained by emailing information.standards@nhs.net with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

SITE CODE (OF PROVIDER FIRST SEEN) (RETIRED), renamed from SITE CODE (OF PROVIDER FIRST SEEN)

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

SITE CODE (OF PROVIDER FIRST SEEN)

Attribute:

[ORGANISATION SITE CODE](#)

SITE CODE (OF PROVIDER FIRST SEEN) (RETIRED), renamed from SITE CODE (OF PROVIDER FIRST SEEN)

Change to Data Element: Changed Name, Description, linked Attribute, status to Retired

- Changed Name from Data_Dictionary.Data_Field_Notes.S.Site.SITE_CODE_(OF_PROVIDER_FIRST_SEEN) to Retired.Data_Dictionary.Data_Field_Notes.S.SITE_CODE_(OF_PROVIDER_FIRST_SEEN)
- Changed Description
- null
- Retired SITE CODE (OF PROVIDER FIRST SEEN)

TREATMENT START DATE (CANCER)

Change to Data Element: Changed Description, linked Attribute

Format/Length: See [DATE](#)
National Codes:
Default Codes:

Notes:

[TREATMENT START DATE \(CANCER\)](#) is the same as attribute [TREATMENT START DATE FOR CANCER](#). [TREATMENT START DATE \(CANCER\)](#) is the same as attribute [ACTIVITY DATE](#), where the [ACTIVITY DATE TYPE](#) is National Code '[Treatment Start Date \(Cancer\)](#)'.

TREATMENT START DATE (CANCER)

Change to Data Element: Changed Description, linked Attribute

TREATMENT START DATE (CANCER)

Attribute:

[TREATMENT START DATE FOR CANCER](#)

[ACTIVITY DATE](#)

TREATMENT START DATE (RADIO THERAPY TREATMENT EPISODE)

Change to Data Element: Changed Description, linked Attribute

Format/Length: See [DATE](#)
National Codes:
Default Codes:

Notes:

[TREATMENT START DATE \(RADIO THERAPY TREATMENT EPISODE\)](#) is the same as attribute [TREATMENT START DATE FOR CANCER](#) where the treatment is being undertaken as part of a [Cancer Treatment Period](#), where the [CANCER TREATMENT MODALITY](#) is National Code '[Teletherapy](#)' or '[Brachytherapy](#)'. [TREATMENT START DATE \(RADIO THERAPY TREATMENT EPISODE\)](#) is the same as attribute [ACTIVITY DATE](#), where the [ACTIVITY DATE TYPE](#) is National Code '[Treatment Start Date \(Cancer\)](#)'.

[TREATMENT START DATE \(RADIO THERAPY TREATMENT EPISODE\)](#) is the [Treatment Start Date \(Cancer\)](#) where the treatment is being undertaken as part of a [Cancer Treatment Period](#), where the [CANCER TREATMENT MODALITY](#) is National Code '[Teletherapy](#)' or '[Brachytherapy](#)'.

[TREATMENT START DATE \(RADIO THERAPY TREATMENT EPISODE\)](#) is the [DATE](#) that treatment for a [PATIENT](#)'s condition using a [RADIO THERAPY TREATMENT MODALITY](#) started.

For the [Radiotherapy Data Set](#), [TREATMENT START DATE \(RADIO THERAPY TREATMENT EPISODE\)](#) is the date the first [Fraction](#) of [Radiotherapy](#) was given to the [PATIENT](#) in the [Radiotherapy Episode](#). For the [Radiotherapy Data Set](#), [TREATMENT START DATE \(RADIO THERAPY TREATMENT EPISODE\)](#) is the [DATE](#) the first [Fraction](#) of [Radiotherapy](#) was given to the [PATIENT](#) in the [Radiotherapy Episode](#).

TREATMENT START DATE (RADIO THERAPY TREATMENT EPISODE)

Change to Data Element: Changed Description, linked Attribute

TREATMENT START DATE (RADIOTHERAPY TREATMENT EPISODE)

Attribute:

[TREATMENT START DATE FOR CANCER](#)

[ACTIVITY DATE](#)

WAITING TIME ADJUSTMENT (FIRST SEEN)

Change to Data Element: Changed Description

Format/Length: max n3
National Codes:
Default Codes:

Notes:

[WAITING TIME ADJUSTMENT \(FIRST SEEN\)](#) 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](#). [WAITING TIME ADJUSTMENT \(FIRST SEEN\)](#) records the number of days that should be removed from the calculated waiting time for the two week wait period, the 28 day period and potentially the 62 day period (if cancer is confirmed), i.e. between receipt of the referral or decision of [Consultant Upgrade](#) (recorded as [CANCER REFERRAL TO TREATMENT PERIOD START DATE](#) or [CONSULTANT UPGRADE DATE](#)) and the [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 at: [Cancer Waiting Times](#).~~ Guidance on calculating the number of days which may be deducted from the waiting time is available on the [NHS Digital](#) website at: [Cancer Waiting Times](#).

WAITING TIME ADJUSTMENT (TREATMENT)

Change to Data Element: Changed Description

Format/Length: max n3
National Codes:
Default Codes:

Notes:

[WAITING TIME ADJUSTMENT \(TREATMENT\)](#) records the number of days that should be removed from the derived waiting time between [CANCER TREATMENT PERIOD START DATE](#) and [TREATMENT START DATE FOR CANCER](#). [WAITING TIME ADJUSTMENT \(TREATMENT\)](#) 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 recording of this data item is mandatory for all [Tumours](#), regardless of whether a national service standard is in place.

Adjustments are allowed in the following circumstances:

- 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

[WAITING TIME ADJUSTMENT \(TREATMENT\)](#) should only be recorded where [CANCER CARE SETTING \(TREATMENT\)](#) is:

- National Code 'Cancer treatment delivered as part of a [Hospital Provider Spell](#) (where [PATIENT CLASSIFICATION](#) is National Code 'Ordinary admission') or
- National Code 'Cancer treatment delivered as part of a [Hospital Provider Spell](#) (where [PATIENT CLASSIFICATION](#) is National Code 'Day case admission').
- National Code 'Cancer treatment delivered as part of a [Hospital Provider Spell](#) (where [PATIENT CLASSIFICATION](#) is National Code 'Ordinary admission') or
- National Code 'Cancer treatment delivered as part of a [Hospital Provider Spell](#) (where [PATIENT CLASSIFICATION](#) is National Code 'Day case admission').

~~Guidance on calculating the number of days which may be removed from the waiting time is available at: [Cancer Waiting Times](#).~~ Guidance on calculating the number of days which may be removed from the waiting time is available on the [NHS Digital](#) website at: [Cancer Waiting Times](#).

WAITING TIME ADJUSTMENT REASON (FIRST SEEN)

Change to Data Element: Changed Description

Format/Length: an1
National Codes: See [WAITING TIME ADJUSTMENT REASON](#)
Default Codes:

Notes:

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

[WAITING TIME ADJUSTMENT REASON \(FIRST SEEN\)](#) is the reason for an adjustment to a waiting time prior to the [DATE FIRST SEEN](#).

If there is more than one adjustment applicable, [WAITING TIME ADJUSTMENT REASON \(FIRST SEEN\)](#) should be the reason for the longest calculated adjustment days.

[WAITING TIME ADJUSTMENT REASON \(FIRST SEEN\)](#) 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.

NATIONAL CANCER WAITING TIMES MONITORING DATA SET XML SCHEMA CONSTRAINTS (RETIRED), renamed from NATIONAL CANCER WAITING TIMES MONITORING DATA SET XML SCHEMA CONSTRAINTS

Change to XML Schema Constraint: Changed Name, Description, status to Retired

XML Schema constraints applied to the [National Cancer Waiting Times Monitoring Data Set](#). This item has been retired from the NHS Data Model and Dictionary.

The "Allowed Values" column indicates the NHS Data Model and Dictionary National Codes and Default Codes present in the XML Schema. The last live version of this item is available in the ?????? release of the NHS Data Model and Dictionary.

- None – The National Codes and Default Codes are included in the XML Schema
- Removed – The National Codes and Default Codes are not included in the XML Schema.

Data Element	XML Schema Format/Length	Allowed Values	Range	Pattern-Match	Reason / Comment / XML Choice
DELAY REASON (DECISION TO TREATMENT)	None	01,02,03,04,05,10,14,16,21,22,08 Access to this version can be obtained by emailing information.standards@nhs.net with "NHS Data Model and Dictionary - Archive Request" in the email subject line.	None	None	National Codes 07, 11, 13, 17, 18, 19 and 20 not applicable – removed
ORGANISATION CODE (PATIENT PATHWAY IDENTIFIER ISSUER)	min an3 max an12	None	None	None	Field size extended to future proof for ODS ORGANISATION CODE changes
SITE CODE (OF PROVIDER CANCER DECISION TO TREAT)	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION SITE CODE changes
SITE CODE (OF PROVIDER CANCER TREATMENT START DATE)	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION SITE CODE changes
SITE CODE (OF PROVIDER CONSULTANT UPGRADE)	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION SITE CODE changes
SITE CODE (OF PROVIDER FIRST SEEN)	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION SITE CODE changes
WAITING TIME ADJUSTMENT REASON (FIRST SEEN)	None	3,9	None	None	National Code 8 not applicable – removed
WAITING TIME ADJUSTMENT REASON (TREATMENT)	None	8,9	None	None	National Code 3 not applicable – removed

NATIONAL CANCER WAITING TIMES MONITORING DATA SET XML SCHEMA CONSTRAINTS (RETIRED), renamed from NATIONAL CANCER WAITING TIMES MONITORING DATA SET XML SCHEMA CONSTRAINTS

Change to XML Schema Constraint: Changed Name, Description, status to Retired

- Changed Name from Data_Dictionary.Messages.Message_Documentation.XML_Schema_Constraints.National_Cancer_Waiting_Times_Monitoring_Data_Set_XML_Sc to Retired.Data_Dictionary.Messages.Message_Documentation.National_Cancer_Waiting_Times_Monitoring_Data_Set_XML_Schema_Constraints
- Changed Description
- Retired National Cancer Waiting Times Monitoring Data Set XML Schema Constraints

For enquiries about this Change Request, please email information.standards@nhs.net



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