

Yorkshire Cancer Network Board Performance Report

September 2009

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1	INTRODUCTION	4
2	PREVENTION	7
2.1	SMOKING PREVALENCE	7
2.2	STOP SMOKING	9
3	SCREENING	10
3.1	BREAST	10
3.1.1	<i>Proportion of women aged 53-64 offered screening for breast cancer</i>	10
3.1.2	<i>Proportion of women aged 53-70 offered screening for breast cancer</i>	10
3.1.3	<i>Proportion of women aged 47-49 offered screening for breast cancer</i>	11
3.1.4	<i>Proportion of women aged 71-73 offered screening for breast cancer</i>	11
3.1.5	<i>The percentage of eligible women whose first offered appointment is within 36 months of their previous screen (round length)</i>	11
3.1.6	<i>Percentage of women receiving a normal breast screening result within 2 weeks of screening</i>	12
3.1.7	<i>Percentage of women assessed within 3 weeks of a recall for assessment</i>	12
3.2	CERVICAL	13
3.2.1	<i>80% eligible women screened</i>	13
3.2.2	<i>Women to get results within 2 weeks</i>	13
3.3	BOWEL	14
3.3.1	<i>60% uptake of FOB</i>	14
3.3.2	<i>Access time to Screening Centre</i>	15
4	TREATMENT	16
4.1	DIAGNOSTIC WAITS	16
4.1.1	<i>Colonoscopy</i>	16
4.1.2	<i>Flexi sigmoidoscopy</i>	16
4.1.3	<i>CT</i>	16
4.1.4	<i>MRI</i>	16
4.2	EFFECTIVE PATHWAY MANAGEMENT	17
4.2.1	<i>14 Days : Urgent GP referral to Date First Seen (January 2009 onwards)</i>	17
4.2.2	<i>31 days: Decision to Treat to First Treatment (from January 2009)</i>	17
4.2.3	<i>Percentage of first treatments that were 2 week referrals</i>	18
4.2.4	<i>31 days: Subsequent Treatments (Surgery)</i>	18
4.2.5	<i>31 days: Subsequent Treatments (Drug)</i>	19
4.2.6	<i>62 days: Urgent GP referral to First Treatment (from January 2009)</i>	19
4.2.7	<i>62 days: Patients detected through national screening programmes</i>	20
4.2.8	<i>62 days: Suspected cancer patients not referred urgently and upgraded by Consultants</i>	20
4.3	NATIONAL AUDITS	21
4.3.1	<i>National Lung Cancer Audit</i>	21
4.3.2	<i>National Head and Neck Cancer Audit</i>	21
4.3.3	<i>National Bowel Cancer Audit</i>	21
4.3.4	<i>National Oesophago-Gastric Cancer Audit</i>	22
4.3.5	<i>National Mastectomy and Reconstruction Audit</i>	22
4.4	CANCER REGISTRATION DATASET	23
4.5	IMPROVING OUTCOMES GUIDANCE	24
5	PEER REVIEW COMPLIANCE	25
6	ADVANCED COMMUNICATION SKILLS TRAINING	26
7	END OF LIFE CARE	27
7.1	PROPORTION OF ALL DEATHS THAT OCCUR AT HOME	27

8	OUTCOMES.....	28
8.1	STANDARD MORTALITY RATIO.....	28
8.1.1	<i>All cancers (excluding nmsc) mortality, under 75 years</i>	28
8.1.2	<i>Colorectal cancer mortality, under 75 years</i>	29
8.1.3	<i>Lung cancer mortality, under 75 years</i>	29
8.1.4	<i>Breast cancer mortality, under 75 years</i>	29
8.1.5	<i>Prostate cancer mortality, under 75 years</i>	30
8.2	SURVIVAL.....	31
8.2.1	<i>1 Year Survival Rates</i>	31
8.2.2	<i>5 Year Survival Rates</i>	32
9	RESEARCH	33
9.1	ANNUAL ACCRUAL RATES (SUBJECTS WHO COUNT TOWARDS PRIMARY TARGETS).....	33
9.2	ANNUAL ACCRUAL RATES (ALL SUBJECTS).....	33

1 Introduction

This performance report provides data for all YCN partner organisations against a wide range of NHS cancer standards and targets.

All three breast screening centres have maintained their 36 month round length performance in Q1 (2009/10) They are now all achieving above 95%. This is the same position for the percentage of women receiving a normal breast screening result within 2 weeks of screening. All three centres perform above 95%. Pennine and North Yorkshire assess over 90% of women recalled for assessment within 3 weeks with Leeds-Wakefield achieving 73%. This could potentially impact on the extended going further on cancer waits targets for all screening cases.

For cervical screening uptake the improvements seen for 2007/8 have been maintained for the Q4 (2008/9). Bradford & Airedale and Leeds did not quite achieve the 80% level. Wakefield District and Yorkshire and the Humber SHA improved from their previous quarter to achieve the 80% level. The data has been published (Q4 2008/9) relating to time from screening to notification of result by PCT. Performance has slipped for the majority of PCTs with just over 28% of the Network screened population receiving their results within 2 weeks. The majority of patients are still receiving their results within 4 weeks.

Q1 (2009/10) bowel screening data shows the same performance as Q4 with a 61.5% uptake for the North Yorkshire and York population and a 50.4% uptake for Bradford and Airedale population. This is lower than the NE Hub and England average. Bradford and Airedale Screening Centre have now achieved 100% of patients having an appointment in the nurse assessment clinic within 14 days of their abnormal FOB result for the last three quarters. Calderdale, Kirklees and Wakefield Screening Centre reported their first data for Q1 2009/10 and showed 100% performance.

The operational standards for all standards with the exception of Consultant Upgrades have been recently published and the performance of PCTs and Trusts are benchmarked against these new thresholds.

The second quarter data relating to the new cancer reform strategy going further on cancer waits standards have been published. The revised rules mean that patient reason adjustments are not allowed in the pathway now.

The threshold for achievement of the urgent GP referral to first seen target (14 days) has been set at $\geq 93\%$ and NHS Kirklees, Bradford Teaching Hospitals NHS Foundation Trust and Mid Yorkshire Hospitals NHS Trust did not achieve this level.

The threshold for achievement of the 31 day standard for first treatment has been set at $\geq 96\%$ and all PCTs and acute Trusts with the exception of NHS Wakefield District and Leeds Teaching Hospitals NHS Trust achieved this.

The threshold for achievement of the 62 day standard for first treatment has been set at $\geq 85\%$. This continues to be a challenge and NHS Kirklees and NHS Wakefield District as well as Bradford Teaching Hospitals NHS Foundation Trust, Leeds Teaching Hospitals NHS Trust and Mid Yorkshire Hospitals NHS Trust did not achieve the threshold.

Yorkshire Cancer Network

In Q1 (2009/10) there were 1228 accountable patients treated with 180 accountable patients breaches. 119/180 (66%) were in house breaches and 61/180 (34%) were inter-trust breaches.

Urological cancers again showed the highest number of breaches (61) with performance overall at 72.5%. Lung cancer was the next highest at 30.5 breaches and performance at 72.4%. Performance was worst for Sarcoma at 33% (8/12 patients breached). Head and Neck also showed low performance at 54.3% (21/46 patients breached)

Tumour	In House	Inter-Trust	Total Breaches
Breast	94.1 (143/152)		9
Lung	87.1 (54/62)	53.6 (26/48.5)	30.5
Haematological (Excluding Acute Leukaemia)	83.8 (31/37)	0.0 (0/1)	7
Upper Gastrointestinal		64.5 (10/15.5)	5.5
Lower Gastrointestinal	85.1 (74/87)	54.5 (3/5.5)	15.5
Skin	90.6 (87/96)	0.0 (0/2.5)	11.5
Gynaecological	89.7 (26/29)	69.6 (16/23)	10
Urological (Excluding Testicular)	75.0 (156/208)	35.7 (5/14)	61
Head & Neck	53.3 (16/30)	56.3 (9/16)	21
Sarcoma	44.4 (4/9)	0.0 (0/3)	8
Other		0.0 (0/1)	1

The thresholds for subsequent treatments have been set individually for each modality of treatment.

The 94% threshold for subsequent surgical treatment was not achieved for patients from NHS Leeds, NHS North Yorkshire and York and NHS Wakefield District. Additionally this was not achieved by Harrogate and District NHS Foundation Trust, Leeds Teaching Hospitals NHS Trust, Mid Yorkshire Hospitals NHS Trust and York Hospitals NHS Foundation Trust.

The 98% threshold for subsequent chemotherapy treatment was not achieved by one Trust which was Harrogate and District NHS Foundation Trust.

The threshold for the 62 day standard for patients treated with cancer having originated in one of the national cancer screening programmes has been set at 90%. NHS Kirklees, Airedale NHS Trust and Bradford Teaching Hospitals NHS Foundation Trust did not achieve this performance level. However the numbers of patients being reported against this standard are still low and work is continuing to identify any shortfalls in reporting methodology.

The data continues to show low levels of treated cancers that have been upgraded by Consultants having been originally referred routinely not via the 2ww route.

Participation in the NCASP national audits is generally good and Trusts are submitting data by each individual audit yearly submission deadline. This is not always reflected in the timeliness of the national participation reports as each audit has slightly different reporting deadlines. Recent publications include the 4th annual report for the Head and Neck Cancer Audit.

The Cancer Reform Strategy mandated the collection of the national cancer registration dataset from all providers including foundation trusts. By the end of March 2011 all Providers must ensure the full Cancer Registration Dataset is provided in an electronic format to their local Cancer Registry. This will be a considerable challenge for most Trusts.

The first self-assessment deadline for the 2009/10 round of peer review was the 31st August 2009. This performance report contains details of all the areas in the Network that will be either self-assessing or receiving an actual visit. The next report (December 2009) will contain the first self-asessement and internal validation results.

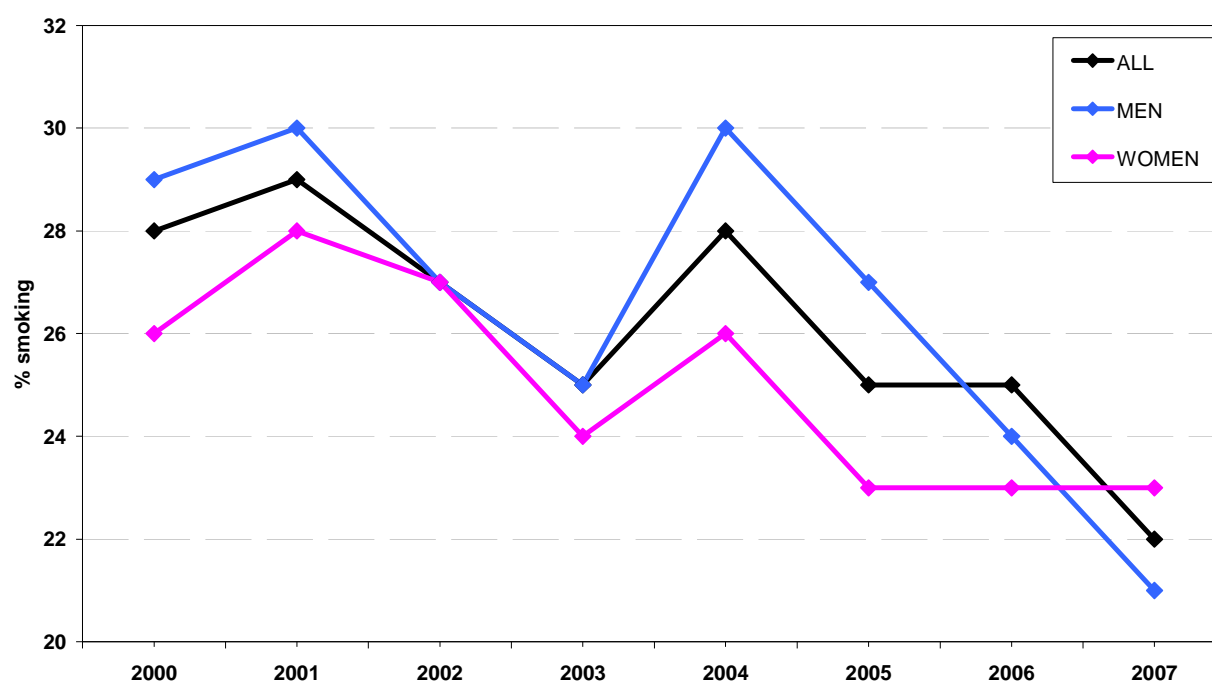
A new analysis for this performance report is the number of individuals by each Trust having completed the Advanced Communication Skills Training and also the number having registered and awaiting training.

2 Prevention

2.1 Smoking Prevalence

Measure	Number of people smoking
Target	reducing adult smoking rates to 21% or less by 2010, with a reduction in prevalence among routine and manual groups to 26% or less
Source	The NHS Information Centre for Health and Social Care
Time Period	1998-2006

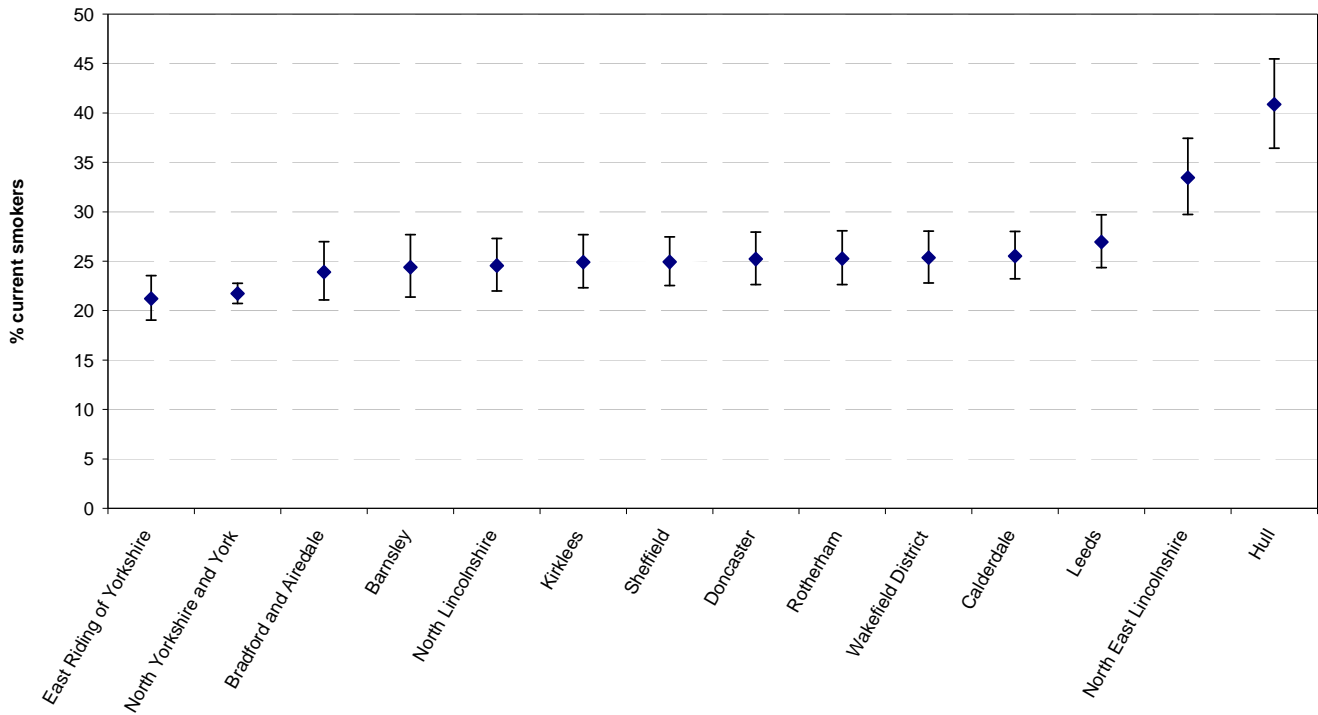
Prevalence of cigarette smoking among adults for Yorkshire and The Humber SHA



Model-based estimates of current smoking (adults) for PCTs in Yorkshire & The Humber, 2003-2005

PCT	Population	Estimate	Lower CI	Upper CI
Bradford and Airedale	493,307	23.9%	21.1%	27%
Calderdale	198,862	25.5%	23.2%	28%
Kirklees	389,061	24.9%	22.3%	27.7%
Leeds	756,433	27%	24.4%	29.7%
North Yorkshire and York	762,058	21.7%	20.7%	22.8%
Wakefield District	332,668	25.4%	22.8%	28.1%
SHA		25.5%	23.0%	28.0%
National		24.1%	23.4%	24.7%

Model-based estimates of current smoking (adults) for PCTs in Yorkshire & The Humber, 2003-2005



The NHS Information Centre for health and social care, 2008
 Source: Health Surveys for England 2003 to 2005
 Produced by National Centre for Social Research (NatCen), May 2008

2.2 Stop Smoking

Measure	Number of people successfully quitting at 4 week follow-up
Target	reducing adult smoking rates (from 26% in 2002) to 21% or less by 2010
Source	The NHS Information Centre for Health and Social Care (http://www.ic.nhs.uk/statistics-and-data-collections/health-and-lifestyles/nhs-stop-smoking-services)
Time Period	Latest from 2008/9

2007/8

PCT	Number Setting Quit Date	Number Success 4 Weeks	Number Success 4 Weeks (100000)	Success Rate %
Bradford & Airedale	8,521	4,335	1,136	51
Calderdale	3,103	1,620	1,022	52
Kirklees	6,108	3,092	980	51
Leeds	8,107	5,392	875	67
N Yorkshire & York	8,854	4,414	683	50
Wakefield District	4,578	2,514	967	55
Yorkshire & The Humber SHA	66,545	35,440	851.7	53
England	680,289	350,800	854	52

2008/9

PCT	Number Setting Quit Date	Number Success 4 Weeks	Number Success 4 Weeks (100000)	Success Rate %
Bradford & Airedale	7854	3620	939.3	46
Calderdale	3183	1569	980.0	49
Kirklees	5339	2571	807.2	48
Leeds	7257	4909	781.8	68
N Yorkshire & York	8581	4143	634.6	48
Wakefield District	6370	3007	1151.8	47
Yorkshire & The Humber SHA	69,511	36,514	869.0	53
England	671,259	337,054	813.4	50

3 Screening

3.1 Breast

3.1.1 Proportion of women aged 53-64 offered screening for breast cancer

Measure	The number of women aged 53-64 screened for breast cancer in the last three years/The number of women aged 53-64 eligible for screening. Coverage is defined as the proportion of women resident and eligible for screening who have had a screening mammogram at least once in the previous three years. Women who are ineligible (eg those who have had a bilateral mastectomy) are excluded.
Target	80%
Source	NHS Breast Screening Programme/Quality Assurance Reference Centre (QARC)
Time Period	At at 31 March 2008 2008/9 report to be published January 2010

PCT	2006/7			2007/8		
	Eligible Population	Number Screened	Coverage 3 years	Eligible Population	Number Screened	Coverage 3 years
Bradford & Airedale	30,921	23,481	75.9%	31,428	23,220	73.9%
Calderdale	14,873	11,059	74.4%	15,034	10,769	71.6%
Kirklees	27,772	21,795	78.5%	27,870	21,773	78.1%
Leeds	48,063	34,507	71.8%	48,199	35,888	74.5%
N Yorkshire & York	62,588	52,099	83.2%	63,191	52,646	83.3%
Wakefield District	25,500	17,218	67.5%	25,668	20,066	78.2%
England	3,690,074	2,805,717	76.0%	3,713,812	2,847,824	76.7%

3.1.2 Proportion of women aged 53-70 offered screening for breast cancer

Measure	The number of women aged 53-70 screened for breast cancer in the last three years/The number of women aged 53-70 eligible for screening
Target	80%
Source	NHS Breast Screening Programme/Quality Assurance Reference Centre (QARC)
Time Period	As at 31 March 2008 2008/9 report to be published January 2010

PCT	2006/7			2007/8		
	Eligible Population	Number Screened	Coverage 3 years	Eligible Population	Number Screened	Coverage 3 years
Bradford & Airedale	42,595	30,531	71.7%	42,874	31,174	72.7%
Calderdale	20,074	14,137	70.4%	20,279	14,252	70.3%
Kirklees	37,810	27,985	74.0%	38,068	29,301	77.0%
Leeds	66,457	47,034	70.8%	66,545	49,165	73.9%
N Yorkshire & York	86,571	69,351	80.1%	87,599	72,334	82.6%
Wakefield District	34,854	23,134	66.4%	35,249	27,116	76.9%
England	5,066,409	3,738,149	73.8%	5,115,011	3,883,130	75.9%

3.1.3 Proportion of women aged 47–49 offered screening for breast cancer

Measure	The number of women aged 47-49 screened for breast cancer in the last three years/The number of women aged 47-49 eligible for screening
Target	80%
Source	NHS Breast Screening Programme/Quality Assurance Reference Centre (QARC)
Time Period	To be determined. The NHS Breast Cancer Screening Programme will be extended to all women aged 47–73 by 2012

3.1.4 Proportion of women aged 71–73 offered screening for breast cancer

Measure	The number of women aged 71-73 screened for breast cancer in the last three years/The number of women aged 71-73 eligible for screening
Target	80%
Source	NHS Breast Screening Programme/Quality Assurance Reference Centre (QARC)
Time Period	To be determined. NHS Breast Cancer Screening Programme will be extended to all women aged 47–73 by 2012

3.1.5 The percentage of eligible women whose first offered appointment is within 36 months of their previous screen (round length)

Measure	To ensure that women are recalled for screening at appropriate intervals. Screening round length is the interval between the date of a woman's previous screening mammogram and the date of her next first offered appointment. The percentage of eligible women (aged 50-70) whose first offered appointment is within 36 months of their previous screen.
Target	>=90%
Source	NHS Breast Screening Programme/Quality Assurance Reference Centre (QARC)
Time Period	Q1 2009/10

Screening Unit	Q2 (2008/9)	Q3 (2008/9)*	Q4 (2008/9)*	Q1 (2009/10)
Pennine	93%	94%	97%	99%
North Yorkshire	97%	97%	96%	96%
Leeds Wakefield	98%	98%	98%	97%

3.1.6 Percentage of women receiving a normal breast screening result within 2 weeks of screening

Measure	NSHBSP Guidelines state that 90% of women should receive their normal result within two weeks of screening. Screen-Normal Result reports are used to generate this data from the NBSS system, which uses a cohort of women defined by their date of first offered appointment and reports the time between screening and the production of the normal result letter.
Target	>=90%
Source	Quality Assurance Reference Centre (QARC)
Time Period	Latest data from Q4 2008/9 (Jan-March 2009)

Screening Unit	Q1 (2008/9)	Q2 (2008/9)*	Q3 (2008/9)*	Q4 (2008/9)
Pennine	42%	37%	66%	95%
North Yorkshire	95%	97%	96%	97%
Leeds Wakefield	49%	83%	50%	98%

3.1.7 Percentage of women assessed within 3 weeks of a recall for assessment

Measure	NSHBSP Guidelines state that 90% of women recalled for assessment should be assessed within three weeks of their date of screening.
Target	>=90%
Source	Quality Assurance Reference Centre (QARC)
Time Period	Latest data from Q4 2008/9 (Jan-March 2009)

Screening Unit	Q1 (2008/9)	Q2 (2008/9)*	Q3 (2008/9)*	Q4 (2008/9)
Pennine	60%	68%	73%	93%
North Yorkshire	85%	27%	70%	98%
Leeds Wakefield	59%	73%	42%	73%

3.2 Cervical

3.2.1 80% eligible women screened

Measure	The effectiveness of the programme can also be judged by coverage. This is the percentage of women in the target age group (25 to 64) who have been screened in the last five years.
Target	≥80%
Source	NHS Cervical Screening Programme/Quality Assurance Reference Centre (QARC)
Time Period	As at 31 st March 2009

PCT	Q1 2008/9		Q2 2008/9		Q3 2008/9		Q4 2008/9	
	n	%	n	%	n	%	n	%
Bradford & Airedale	93,404	75.92	93,852	75.96	94,152	75.91	95,192	76.58
Calderdale	41,567	80.61	41,687	80.78	41,726	81.14	42,116	81.80
Kirklees	80,368	80.42	80,440	80.37	80,577	80.28	81,269	80.94
Leeds	145,790	76.31	146,267	76.22	146,747	76.26	148,626	77.16
N Yorkshire & York	159,079	82.77	158,855	82.56	158,763	82.34	159,246	82.67
Wakefield District	68,328	80.24	68,448	80.15	68,338	79.96	68,641	80.20
Yorkshire & The Humber SHA	1,026,758	79.76	1,028,094	79.69	1,028,918	79.62	1,036,524	80.16

3.2.2 Women to get results within 2 weeks

Measure	The cervical screening programme will ensure that all women receive the results of their screening tests within two weeks by 2010.
Target	100%
Source	NHS Cervical Screening Programme/Quality Assurance Reference Centre (QARC)
Time Period	Position at 31 st March 2009

PCT	Q2 2008/9		Q3 2008/9		Q4 2008/9		Q1 2009/10	
	n	%	n	%	n	%	n	%
Bradford & Airedale	310	3.6	3,473	45.1	2,238	20.5		
Calderdale	552	13.6	762	21.7	1,798	33.6		
Kirklees	2,078	14.6	1,583	23.8	3,692	37.7		
Leeds	1,375	18.1	6,302	50.5	3,719	19.7		
N Yorkshire & York	9,449	81.1	8,598	83.2	4,328	28.2		
Wakefield District	1,208	22.1	1,209	26.0	3,416	48.3		
Yorkshire & The Humber SHA	31,445	35.1	38,763	48.9	44,858	38.4		

3.3 Bowel

3.3.1 60% uptake of FOB

Measure	Uptake is defined as, "response to an invitation", therefore only people who have been sent the standard "S1" invitation letter are included in the denominator of the calculation; opt-ins and self-referrals (over 70s) are not included.
Target	To be determined
Source	NHS Bowel Cancer Screening Programme
Time Period	Position at 30 th June 2009

Q2 2008/9

PCT	Screening Centre	Invites Sent	Returned Kit	Uptake
North Yorkshire & York	Tees/Bradford & Airedale	20,698	12,643	61.08%
Bradford & Airedale	Bradford & Airedale	24,607	12,382	50.32%
	North East Hub	280,929	150,826	53.69%
	England	1,548,889	802,754	51.83%

Q3 2008/9

PCT	Screening Centre	Invites Sent	Returned Kit	Uptake
North Yorkshire & York	Tees/Bradford & Airedale	24,395	14,908	61.11%
Bradford & Airedale	Bradford & Airedale	31,214	15,770	50.52%
	North East Hub	373,435	201,609	53.99%
	England	2,074,533	1,079,438	52.03%

Q4 2008/9

PCT	Screening Centre	Invites Sent	Returned Kit	Uptake
North Yorkshire & York	Tees/Bradford & Airedale	28,845	17,649	61.19%
Bradford & Airedale	Bradford & Airedale	38,145	19,241	50.44%
	North East Hub	491,832	266,471	54.18%
	England	3,283,777	1,718,755	52.34%

Q1 2009/10

PCT	Screening Centre	Invites Sent	Returned Kit	Uptake
North Yorkshrie & York	Tees Bradford & Airedale Hull Harrogate, Leeds & York	35,175	21,618	61.5%
Bradford & Airedale	Bradford & Airedale	44,880	22,635	50.4%
	North East Hub	583,065	319,356	54.8%
	England	3,370,769	1,769,915	52.5%

3.3.2 Access time to Screening Centre

Measure	Patients with abnormal FOBt results must be booked into clinics with a screening nurse, at local screening centres, using the BCSS IT system.
Target	The appointments offered must be within 14 days of the date of a definitive positive test result.
Source	NHS Bowel Cancer Screening Programme
Time Period	Latest data from Q1 2009/10

Screening Centre	Q2 (2008/9)	Q3 (2008/9)	Q4 (2008/9)	Q1 (2009/10)
Bradford & Airedale	98.1%	100%	100%	100%
Calderdale, Kirklees and Wakefield	-	-	-	100%
Hull & East Yorkshire	100%	100%	100%	100%
South Yorkshire & Bassetlaw	100%	100%	99.6%	100%
Tees	100%	100%	99.0%	100%

4 Treatment

4.1 Diagnostic waits

As part of the process to monitor the 18 weeks target the DH initiated a process for collecting monthly diagnostic investigation waiting times. This data is extracted from the national DH published data on a monthly basis.

4.1.1 Colonoscopy

In June 2009 there were 55 patients (all in York) waiting longer than 6 weeks for a colonoscopy within the Network.

4.1.2 Flexi sigmoidoscopy

In June 2009 there were 26 patients (all in York) waiting longer than 6 weeks for a flexi-sigmoidoscopy within the Network.

4.1.3 CT

In June 2009 there was 1 patient (in Leeds) waiting longer than 6 weeks for a CT scan within the Network.

4.1.4 MRI

In June 2009 there was no one waiting longer than 6 weeks for a MRI scan.

4.2 Effective Pathway Management

4.2.1 14 Days : Urgent GP referral to Date First Seen (January 2009 onwards)

Measure	Everyone with suspected cancer will be able to see a specialist within two weeks of their GP deciding they need to be seen urgently and requesting an appointment by 2000.
Operational Standard	>=93%
Source	National Cancer Waiting Times Database (Open Exeter)
Time Period	latest from Q1 2009/10
Note	Data collected using DSCN 2008/20 rules and definitions.

PCT	Bradford & Airedale	Calderdale	Kirklees	Leeds	N Yorkshire & York	Wakefield District	YCN	England
Q4(2008/9)	93.1%	95.3%	94.6%	95.2%	96.1%	95.6%	94.9%	94.6%
Q1(2009/10)	93.2%	94.7%	91.8%	95.9%	94.9%	93.2%	94.3%	94.1%

Acute Trust	Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York	YCN	England
Q4(2008/9)	97.2%	91.8%	95.4%	96.7%	95.2%	94.8%	94.8%	94.8%	94.5%
Q1(2009/10)	95.9%	92.0%	93.5%	96.6%	96.1%	92.5%	93.6%	94.1%	94.1%

4.2.2 31 days: Decision to Treat to First Treatment (from January 2009)

Measure	Maximum 1 month wait from diagnosis to treatment for all cancers by 2008
Operational Standard	>=96%
Source	National Cancer Waiting Times Database (Open Exeter)
Time Period	latest from Q1 2009/10
Note	Data collected using DSCN 2008/20 rules and definitions.

PCT	Bradford & Airedale	Calderdale	Kirklees	Leeds	N Yorkshire & York	Wakefield District	YCN	England
Q4 (2008/9)	97.8% (482/493)	98.4% (181/184)	97.3% (356/366)	97% (777/801)	98.7% (930/942)	96.4% (377/391)	97.7% (3103/3177)	98.2%
Q1 (2009/10)	97.3% (463/476)	99% (202/204)	96.7% (382/395)	96.4% (828/859)	98.1% (1010/1030)	94.5% (361/382)	97% (3246/3346)	98.1%

Acute Trust	Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York	YCN	England
Q4 (2008/9)	97.3% (182/187)	97.8% (361/369)	100% (278/278)	100% (137/137)	96.3% (1082/1123)	97% (451/465)	98.7% (375/380)	97.5% (2866/2939)	98.2%
Q1 (2009/10)	98.6% (136/138)	97.9% (371/379)	100% (306/306)	100% (192/192)	94.3% (1142/1211)	96.6% (430/445)	98.4% (369/375)	96.7% (2946/3046)	98.1%

4.2.3 Percentage of first treatments that were 2 week referrals

Measure	Percentage of all first treatments for new primary cancers that originated as a 2ww referral
Target	None
Source	National Cancer Waiting Times Database (Open Exeter)
Time Period	Q4 2008/9 to Q1 2009/10

PCT	Bradford & Airedale	Calderdale	Kirklees	Leeds	N Yorkshire & York	Wakefield District	YCN	England
Q4 (2008/9)	36.3%	47.8%	45.6%	41.4%	41.2%	39.9%	41.2%	
Q1 (2009/10)	42.4%	45.1%	34.7%	40.6%	42.6%	42.4%	41.3%	

Acute Trust	Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York	YCN	England
Q4 (2008/9)	39.6%	34.1%	50.0%	53.3%	39.6%	42.4%	33.9%	40.3%	
Q1 (2009/10)	46.4%	39.3%	41.8%	57.8%	39.3%	40.9%	36.0%	40.9%	

4.2.4 31 days: Subsequent Treatments (Surgery)

Measure	VSA11: 31-Day Standard for Subsequent Cancer Treatments (Surgery) Maximum 1 month wait from ready to treat to treatment for all second and subsequent surgical treatments by December 2008.
Operational Standard	>=94%
Source	National Cancer Waiting Times Database (Open Exeter)
Time Period	latest from Q1 2009/10
Note	Data collected using DSCN 2008/20 rules and definitions.

PCT	Bradford & Airedale	Calderdale	Kirklees	Leeds	N Yorkshire & York	Wakefield District	YCN	England
Q4 (2008/9)	93.4% (85/91)	91.3% (21/23)	87.7% (57/65)	85.1% (114/134)	86.5% (141/163)	95.1% (77/81)	88.9% (495/557)	94.8%
Q1 (2009/10)	94.1% (112/119)	100% (52/52)	98.5% (64/65)	80% (152/190)	84.4% (146/173)	92.6% (63/68)	88.3% (589/667)	95.1%

Acute Trust	Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York	YCN	England
Q4 (2008/9)	96.7% (29/30)	94.8% (73/77)	100% (11/11)	90.3% (28/31)	79.8% (206/258)	97.5% (78/80)	90.5% (19/21)	87.4% (444/508)	94.8%
Q1 (2009/10)	100% (25/25)	96.3% (104/108)	100% (43/43)	90.7% (49/54)	79.3% (261/329)	79.3% (261/329)	79.3% (261/329)	87.8% (578/658)	95.1%

4.2.5 31 days: Subsequent Treatments (Drug)

Measure	VSA11: 31-Day Standard for Subsequent Cancer Treatments (Drugs) Maximum 1 month wait from ready to treat to treatment for all second and subsequent drug treatments by December 2008.
Operational Standard	>=98%
Source	National Cancer Waiting Times Database (Open Exeter)
Time Period	latest from Q1 2009/10
Note	Data collected using DSCN 2008/20 rules and definitions.

PCT	Bradford & Airedale	Calderdale	Kirklees	Leeds	N Yorkshire & York	Wakefield District	YCN	England
Q4 (2008/9)	99.1% (112/113)	100% (35/35)	100% (95/95)	98.9% (364/368)	99.7% (294/295)	100% (129/129)	99.4% (1029/1035)	99.2%
Q1 (2009/10)	100% (122/122)	100% (38/38)	100% (131/131)	98.8% (476/482)	99.3% (290/292)	98.6% (143/145)	99.2% (1200/1210)	99.4%

Acute Trust	Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York	YCN	England
Q4 (2008/9)	100% (7/7)	100% (67/67)	100% (26/26)	100% (58/58)	99.2% (628/633)	100% (94/94)	100% (73/73)	99.5% (953/958)	99.2%
Q1 (2009/10)	100% (35/35)	100% (55/55)	100% (58/58)	95.7% (44/46)	99% (767/775)	100% (113/113)	100% (60/60)	99.1% (1132/1142)	99.4%

4.2.6 62 days: Urgent GP referral to First Treatment (from January 2009)

Measure	Maximum 2 month wait from urgent GP referral to treatment for all cancers by 2008
Operational Standard	>=85%
Source	National Cancer Waiting Times Database (Open Exeter)
Time Period	latest from Q1 2009/10
Note	Data collected using DSCN 2008/20 rules and definitions.

PCT	Bradford & Airedale	Calderdale	Kirklees	Leeds	N Yorkshire & York	Wakefield District	YCN	England
Q4 (2008/9)	86% (154/179)	95.4% (83/87)	83.2% (139/167)	80.4% (263/327)	88% (331/376)	75.5% (117/155)	84.2% (1087/1291)	86.5%
Q1 (2009/10)	85.2% (167/196)	90.1% (82/91)	82.1% (110/134)	87.2% (300/344)	91% (395/434)	73.3% (118/161)	86.2% (1172/1360)	85.9%

Acute Trust	Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York	YCN	England
Q4 (2008/9)	88.8% (75/84.5)	86.7% (108/124.5)	94.6% (147.5/156)	83.6% (69/82.5)	78.2% (291/372)	76.3% (171/224)	91.6% (120.5/131.5)	83.6% (982/1175)	86.5%
Q1 (2009/10)	94.9% (65/68.5)	84.1% (124.5/148)	94.3% (131.5/139.5)	87.1% (104.5/120)	83.7% (330/394.5)	75.4% (161/213.5)	91.3% (131.5/144)	85.3% (1048/1228)	85.8%

4.2.7 62 days: Patients detected through national screening programmes

Measure	VSA13: Extended 62-Day Cancer Treatment Targets All patients with suspected cancer detected through national screening programmes will in future enter the 62 day pathway.
Operational Standard	>=90%
Source	National Cancer Waiting Times Database (Open Exeter)
Time Period	latest from Q1 2009/10
Note	Data collected using DSCN 2008/22 rules and definitions.

PCT	Bradford & Airedale	Calderdale	Kirklees	Leeds	N Yorkshire & York	Wakefield District	YCN	England
Q4 (2008/9)	90.6% (29/32)	100% (5/5)	86.4% (19/22)	98% (50/51)	91.7% (11/12)	100% (13/13)	94.1% (127/135)	95.5%
Q1 (2009/10)	92.9% (26/28)	100% (5/5)	85% (51/60)	98.2% (55/56)	98% (50/51)	100% (14/14)	93.9% (201/214)	94.4%

Acute Trust	Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York	YCN	England
Q4 (2008/9)	100% (13.5/13.5)	85.7% (27/31.5)	90% (13.5/15)	100% (1/1)	98.1% (51/52)	100% (14/14)	100% (1/1)	94.5% (121/128)	95.5%
Q1 (2009/10)	84.6% (5.5/6.5)	89.3% (54.5/61)	92.1% (17.5/19)	no patients	94.6% (52.5/55.5)	94.1% (16/17)	100% (38/38)	93.4% (184/197)	94.5%

4.2.8 62 days: Suspected cancer patients not referred urgently and upgraded by Consultants

Measure	VSA13: Extended 62-Day Cancer Treatment Targets Hospital specialists will now have the right to ensure that patients who were not referred urgently by their GP, but who have symptoms or signs indicating a high suspicion of cancer, are managed on the 62 day pathway
Operational Standard	To be determined (patient numbers currently very low)
Source	National Cancer Waiting Times Database (Open Exeter)
Time Period	latest from Q1 2009/10
Note	Data collected using DSCN 2008/22 rules and definitions.

PCT	Bradford & Airedale	Calderdale	Kirklees	Leeds	N Yorkshire & York	Wakefield District	YCN	England
Q4 (2008/9)	100% (13/13)	-	100% (3/3)	83.3% (5/6)	100% (5/5)	100% (2/2)	96.6% (28/29)	97.7%
Q1 (2009/10)	100% (18/18)	100% (11/11)	100% (3/3)	100% (13/13)	100% (20/20)	87.5% (7/8)	98.6% (72/73)	94.7%

Acute Trust	Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York	YCN	England
Q4 (2008/9)	-	100% (11/11)	100% (0.5/0.5)	-	71.4% (5/7)	100% (2/2)	100% (1/1)	90.7% (19.5/21.5)	97.7%
Q1 (2009/10)	100% (2/2)	100% (13.5/13.5)	100% (15/15)	100% (0.5/0.5)	96.9% (15.5/16)	90% (4.5/5)	100% (5/5)	98.2% (56/57)	94.7%

4.3 National Audits

Auditing services allows providers to identify areas for improvement, which can lead to better outcomes. Three high profile audits likely to be included in the Acute Trust Healthcare Commission Annual Healthcheck 2008/9 are LUCADA (lung cancer), DAHNO (head and neck cancer) and bowel cancer.

4.3.1 National Lung Cancer Audit

Measure	Participation in cancer data collection
Target	Participation in cancer data collection
Source	The NHS Information Centre for Health and Social Care (http://www.ic.nhs.uk/our-services/improving-patient-care/national-clinical-audit-support-programme-ncasp/cancer/lung)
Time Period	As at June 2009
Next Deadline	June 2010

Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York

4.3.2 National Head and Neck Cancer Audit

Measure	Participation in cancer data collection
Target	Participation in cancer data collection
Source	The NHS Information Centre for Health and Social Care (http://www.ic.nhs.uk/our-services/improving-patient-care/national-clinical-audit-support-programme-ncasp/cancer/head-and-neck)
Time Period	As at June 2009
Next Deadline	20 th November 2009

Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York

4.3.3 National Bowel Cancer Audit

Measure	Participation in cancer data collection
Target	Participation in cancer data collection
Source	The NHS Information Centre for Health and Social Care (http://www.ic.nhs.uk/our-services/improving-patient-care/national-clinical-audit-support-programme-ncasp/cancer/bowel)
Time Period	As at June 2009
Next Deadline	2 nd December 2009

Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York

4.3.4 National Oesophago-Gastric Cancer Audit

Measure	Participation in cancer data collection
Target	Participation in cancer data collection
Source	The NHS Information Centre for Health and Social Care (http://www.ic.nhs.uk/our-services/improving-patient-care/national-clinical-audit-support-programme-ncasp/cancer/oesophago-gastric)
Time Period	As at June 2009
Next Deadline	20 th February 2010

Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York

4.3.5 National Mastectomy and Reconstruction Audit

Measure	Participation in cancer data collection
Target	Participation in cancer data collection
Source	The NHS Information Centre for Health and Social Care (http://www.ic.nhs.uk/our-services/improving-patient-care/national-clinical-audit-support-programme-ncasp/cancer/mastectomy-and-breast-reconstruction)
Time Period	As at June 2009
Next Deadline	Closed 14 th May 2009

Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York

4.4 Cancer Registration Dataset

Measure	The collection of the national cancer registration dataset has received Ministerial approval and ROCR have given a licence to collect the dataset for two years until the 4th February 2010 (renewal thereafter, licence number: ROCR/OR/0220/FT6). This mandates the collection of data from all providers including foundation trusts.
Target	By the end of March 2011 all Providers must ensure the full Cancer Registration Dataset is provided in an electronic format to their local Cancer Registry, this may be via the submission of multiple data extracts which will make up the full dataset e.g. Cancer Waiting Times, Radiotherapy Dataset, etc
Source	Yorkshire Cancer Network/NYCRIS
Time Period	Full implementation by 2011

Over the past year NYCRIS has met with each Trust to develop individual action plans for full electronic submission of the cancer registry dataset by the end of 2010/11. The action plans will require Trust Chief Executive (or authorised deputy) sign-off and final versions signed by the NYCRIS Director will be circulated shortly.

There are two electronic feeds required. One from the clinical cancer system and the second from the histopathology system.

Clinical data

Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York

Histopathology data

Airedale	Bradford	Calderdale-Huddersfield	Harrogate	Leeds	Mid Yorkshire	York



A plan is in place but data has not yet been submitted



No plan developed to provide the necessary data electronically

4.5 Improving Outcomes Guidance

Measure	
Target	The IOGs are part of the Public Service Agreement (PSA) Target area Cancer Mortality (PSA03b) and the Department of Health Recovery and Support Unit (RSU) monitor progress with Strategic Health Authorities (SHA) twice a year (June and December). This is also a Healthcare Commission assessment area for PCTs and LDPs are used to assess compliance.
Source	
Time Period	

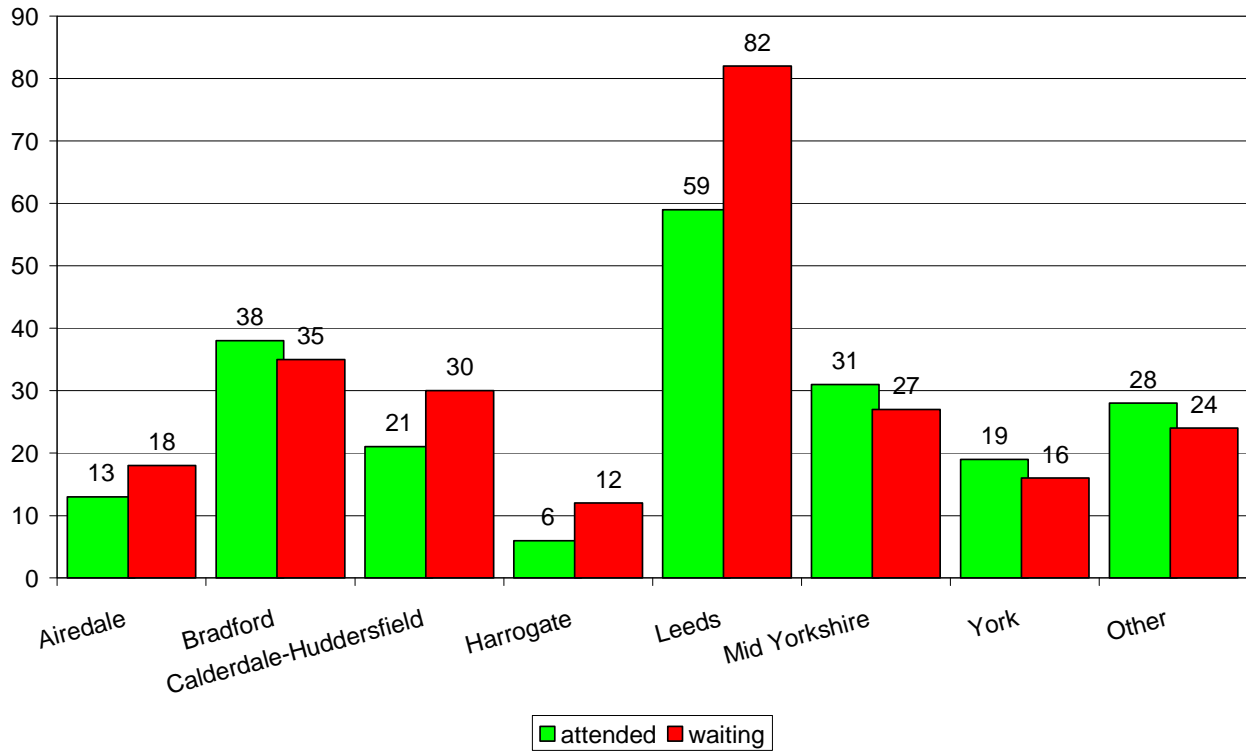
IOG	Published	Action Plan Signed Off by CAT	Implementation Status (CAT)	Implementation Deadline
Gynaecological	July 1999			December 2007
Upper GI	Jan 2001			December 2007
Urological	Sept 2002			December 2007
Haematological	Dec 2003			December 2007
Supportive & Palliative Care	March 2004		To be confirmed	December 2009
Head & Neck	Nov 2004		December 2008	December 2008
Children & Young Peoples	Aug 2005	To be confirmed	To be confirmed	December 2010
Skin	Feb 2006		To be confirmed	December 2010
Sarcoma	March 2006	To be confirmed	To be confirmed	December 2010
Brain & CNS	June 2006	To be confirmed	To be confirmed	December 2011

5 Peer Review Compliance

Measure	Assessment against the published quality measures for peer review
Target	To be determined
Source	CQUINS
Time Period	2009/10 assessment round

6 Advanced Communication Skills Training

This graph shows both the total number of ACST trained individuals by Trust and the total number on the waiting list for training.



7 End of Life Care

7.1 Proportion of all deaths that occur at home

Measure	Proportion of all deaths that occur at home
Target	To be determined
Source	NYCRIS
Time Period	2003 – 2006

PCT	Year	Home (%)	Hospital (%)	Hospice (%)	Other (%)
Bradford & Airedale	2003	20.2	45.8	22.8	11.2
	2004	22.1	44.9	23.7	9.2
	2005	26.6	41.1	22.8	9.6
	2006	24.3	39.0	23.7	13.0

Calderdale	2003	22.0	46.8	21.1	10.0
	2004	21.5	44.4	23.4	10.7
	2005	20.5	49.7	19.5	10.3
	2006	20.8	48.8	19.9	10.5

Kirklees	2003	24.0	48.0	15.6	12.5
	2004	27.2	44.0	17.6	11.2
	2005	26.4	46.9	17.5	9.2
	2006	26.9	45.4	17.5	10.2

Leeds	2003	19.8	45.6	25.1	9.4
	2004	20.2	45.4	23.8	10.5
	2005	21.5	43.1	25.5	9.9
	2006	23.2	41.2	25.5	10.2

N Yorkshire & York	2003	24.0	44.8	21.0	10.2
	2004	24.7	46.6	19.8	8.9
	2005	26.2	43.6	19.2	11.0
	2006	23.8	46.5	20.3	9.5

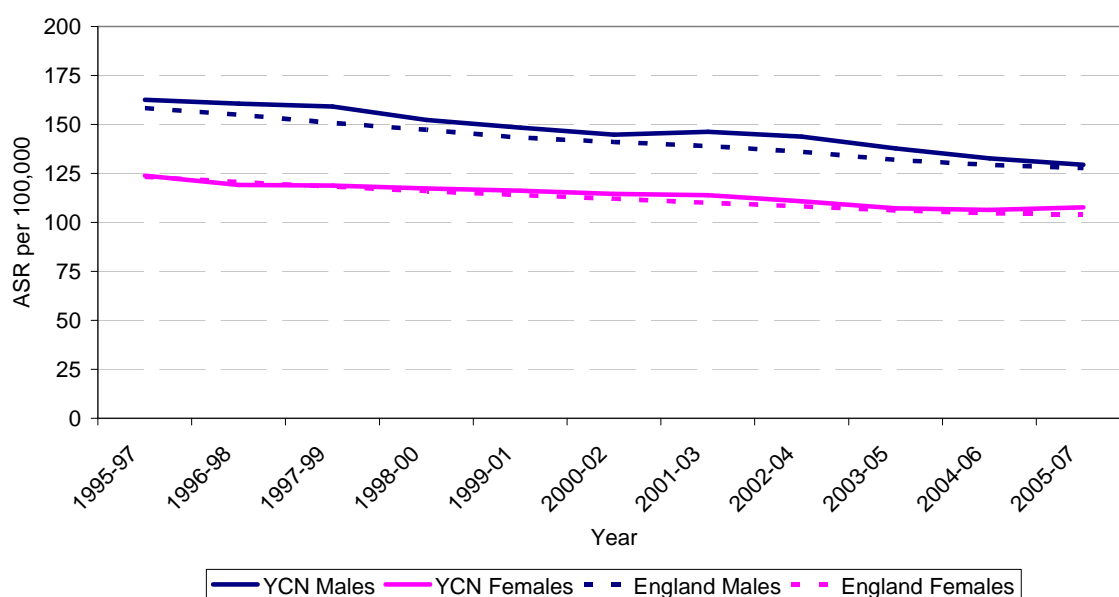
Wakefield District	2003	22.9	45.3	22.3	9.5
	2004	19.3	44.2	27.1	9.3
	2005	23.8	40.4	24.7	11.1
	2006	23.0	40.8	26.2	10.0

8 Outcomes

8.1 Standard Mortality Ratio

Measure	Age Standardised Mortality Rate
Target	Reduction in death rates from cancer by 20% by 2010 in people under 76 (from the 1995-97 baseline)
Source	Northern & Yorkshire Cancer Registry and Information Service (NYCRIS)
Time Period	2005

YCN, all cancers excluding nmsc mortality, under 75 years
Male/Female and England comparison



8.1.1 All cancers (excluding nmsc) mortality, under 75 years

	1995-1997		2005-2007				2010	relative change (%)
	mean deaths per yr	ASR	mean deaths per yr	ASR	LCI	UCI	target ASR	
NHS Bradford and Airedale	672	148.6	543	120.0	114.2	126.0	118.9	-19.2
NHS Calderdale	269	137.0	245	118.5	110.1	127.5	109.6	-13.5
NHS Kirklees	541	143.4	490	123.2	116.9	129.7	114.7	-14.1
NHS Leeds	1,068	149.1	866	122.1	117.4	126.9	119.3	-18.2
NHS North Yorkshire and York	1,028	126.4	986	107.6	103.7	111.6	101.1	-14.9
NHS Wakefield District	482	146.6	452	129.7	122.9	136.9	117.3	-11.5
Yorkshire Cancer Network	3,679	143.2	3,166	118.5	116.1	120.9	114.5	-17.2
England	70,424	140.7	61,610	115.9	115.3	116.4	112.6	-17.7

8.1.2 Colorectal cancer mortality, under 75 years

	1995-1997		2005-2007				2010	relative change (%)
	mean deaths per yr	ASR	mean deaths per yr	ASR	LCI	UCI	target ASR	
NHS Bradford and Airedale	63	14.1	52	11.5	9.8	13.5	11.3	-18.3
NHS Calderdale	22	11.4	16	7.8	5.8	10.5	9.1	-31.2
NHS Kirklees	50	13.4	46	11.4	9.6	13.6	10.7	-14.7
NHS Leeds	95	13.2	69	9.7	8.4	11.2	10.6	-26.7
NHS North Yorkshire and York	119	14.6	97	10.5	9.3	11.9	11.6	-27.7
NHS Wakefield District	52	15.5	41	11.6	9.6	14.0	12.4	-25.2
Yorkshire Cancer Network	360	14.0	282	10.5	9.8	11.3	11.2	-25.0
England	7,036	14.0	5,640	10.5	10.4	10.7	11.2	-24.5

8.1.3 Lung cancer mortality, under 75 years

	1995-1997		2005-2007				2010	relative change (%)
	mean deaths per yr	ASR	mean deaths per yr	ASR	LCI	UCI	target ASR	
NHS Bradford and Airedale	180	39.7	152	33.4	30.4	36.7	31.8	-15.8
NHS Calderdale	75	38.1	64	31.2	26.9	36.0	30.5	-18.2
NHS Kirklees	158	42.0	120	29.9	26.8	33.1	33.6	-29.0
NHS Leeds	316	43.7	247	34.5	32.1	37.2	34.9	-20.9
NHS North Yorkshire and York	236	28.7	211	22.6	20.9	24.5	22.9	-21.1
NHS Wakefield District	140	42.3	129	36.5	32.9	40.4	33.8	-13.8
Yorkshire Cancer Network	1,021	39.5	831	30.9	29.7	32.1	31.6	-21.9
England	17,366	34.3	14,270	26.7	26.4	26.9	27.4	-22.3

8.1.4 Breast cancer mortality, under 75 years

	1995-1997		2005-2007				2010	relative change (%)
	mean deaths per yr	ASR	mean deaths per yr	ASR	LCI	UCI	target ASR	
NHS Bradford and Airedale	58	26.4	33	14.3	11.6	17.5	21.1	-45.9
NHS Calderdale	24	23.9	17	16.3	12.1	21.6	19.1	-32.0
NHS Kirklees	42	21.7	45	22.2	18.6	26.4	17.4	2.4
NHS Leeds	86	24.7	80	22.6	19.8	25.8	19.7	-8.3
NHS North Yorkshire and York	106	26.4	98	21.7	19.2	24.4	21.2	-18.1
NHS Wakefield District	42	26.1	36	20.5	16.7	24.9	20.9	-21.7
Yorkshire Cancer Network	319	25.0	269	20.0	18.6	21.4	20.0	-20.2
England	6,893	27.9	5,627	21.2	20.9	21.5	22.3	-24.0

8.1.5 Prostate cancer mortality, under 75 years

	1995-1997		2005-2007				2010	relative change (%)
	mean deaths per yr	ASR	mean deaths per yr	ASR	LCI	UCI	target ASR	
NHS Bradford and Airedale	17	7.5	16	7.1	5.3	9.5	6.0	-5.3
NHS Calderdale	9	10.0	9	9.3	6.1	13.6	8.0	-7.6
NHS Kirklees	20	10.6	18	9.2	6.9	12.0	8.5	-13.9
NHS Leeds	36	9.6	34	9.4	7.7	11.5	7.7	-2.0
NHS North Yorkshire and York	43	10.1	44	9.3	7.8	11.1	8.1	-8.2
NHS Wakefield District	17	9.9	16	9.0	6.6	12.1	7.9	-9.0
Yorkshire Cancer Network	125	9.5	116	8.6	7.8	9.6	7.6	-9.4
England	2,796	10.9	2,394	8.9	8.7	9.1	8.7	-18.4

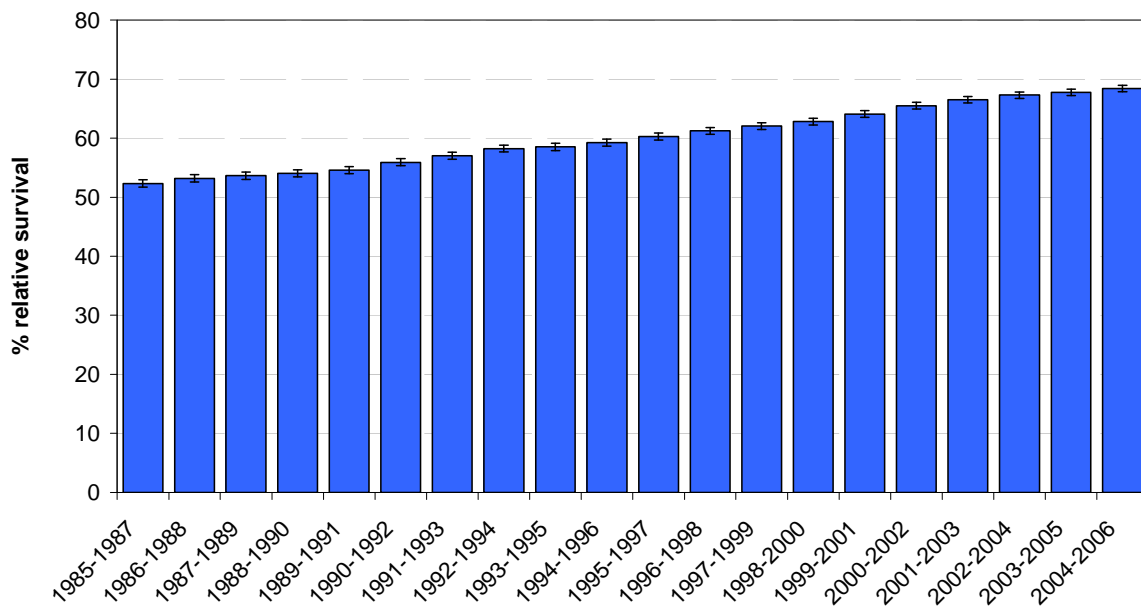
Target achieved	
Target not achieved but not significantly different	
Target not achieved and significantly different	

8.2 Survival

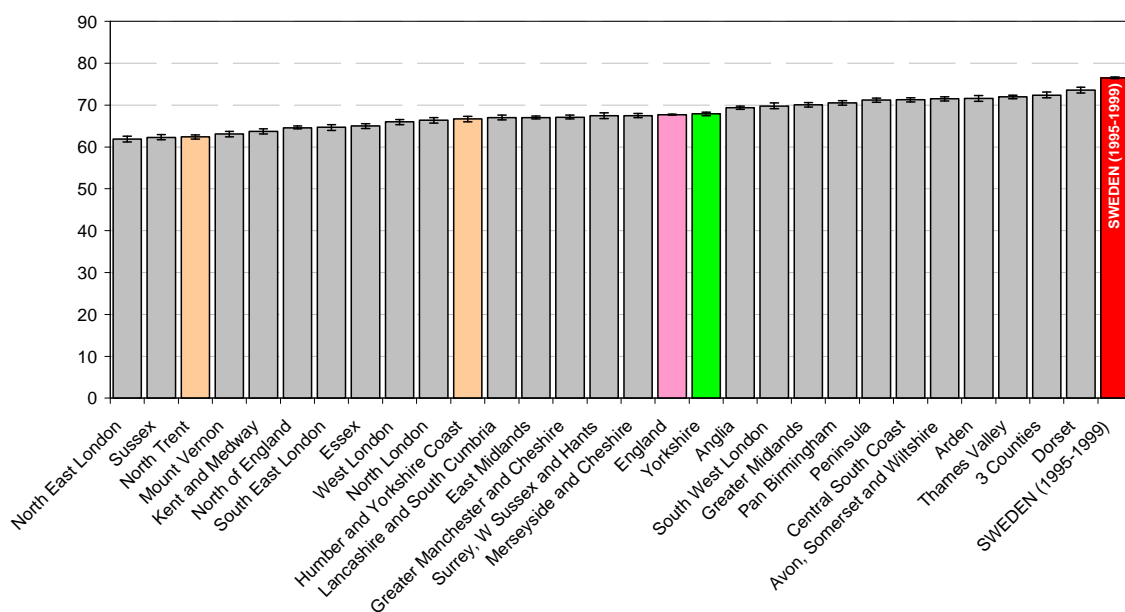
8.2.1 1 Year Survival Rates

Measure	Year on Year improvement in % survival rates by tumour site
Source	NYCRIS
Time Period	1985-2006

1 year survival for all cancers (excludes non-melanoma skin)



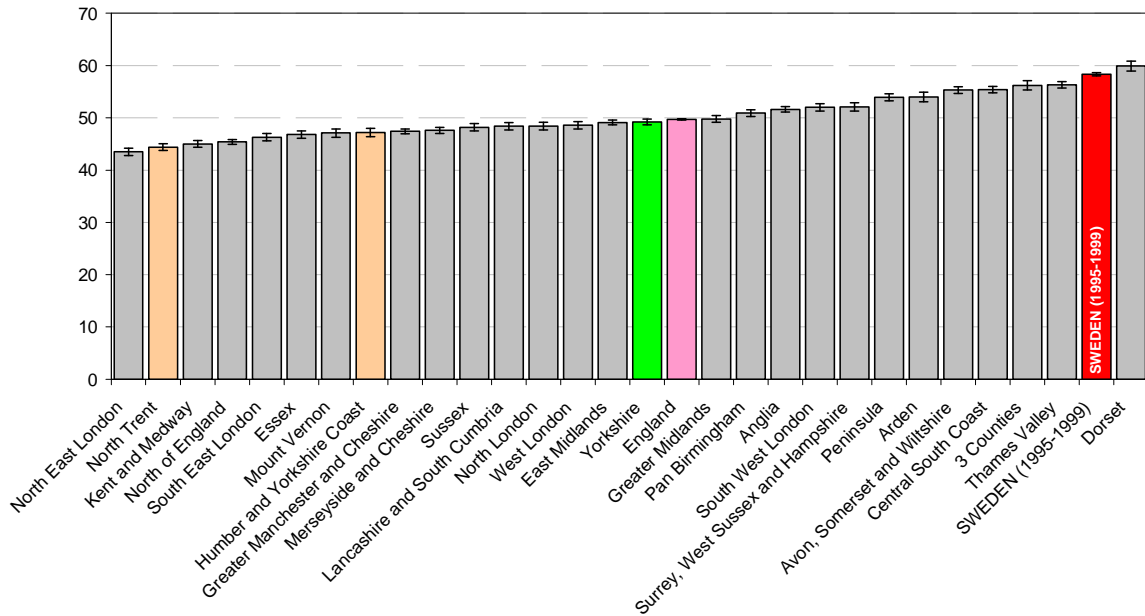
1yr survival (2002-2006) : C00-C97 exc C44



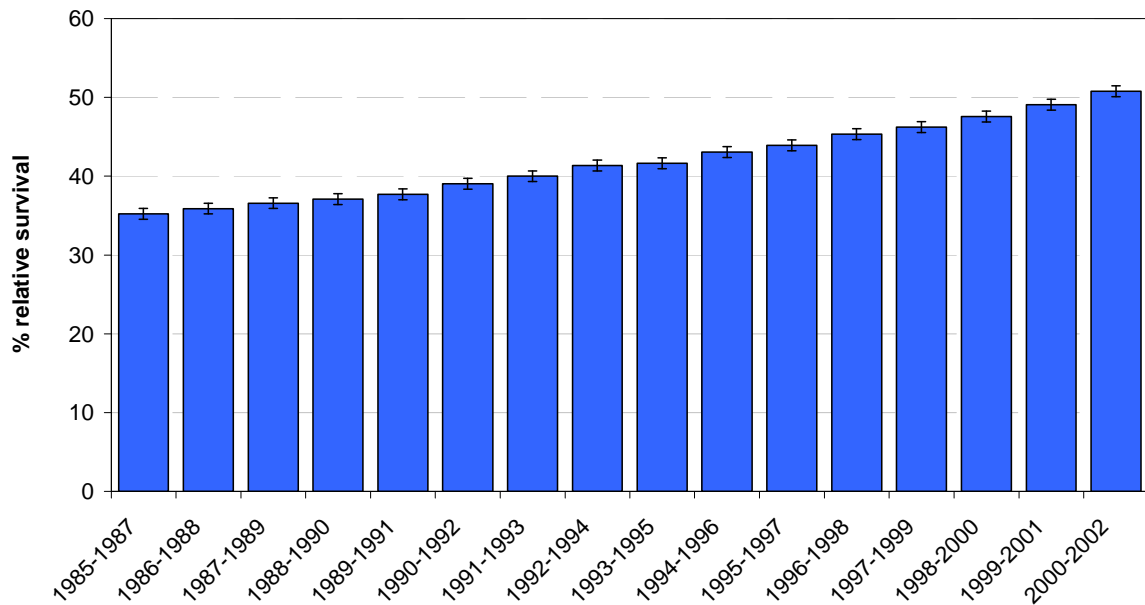
8.2.2 5 Year Survival Rates

Measure	Year on Year improvement in % survival rates by tumour site
Source	NYCRIS
Time Period	1985-2005

5 yr survival (1998-2002) : All cancers (excl. NMSC)



5 year survival - all cances (excludes non-melanoma skin)



9 Research

9.1 Annual Accrual Rates (subjects who count towards primary targets)

Measure	Accrual for studies which are: 'Funded by UKCRC partner; UKCRN adopted, commercial study; UKCRN adopted, non-commercial study' Accrual Types: 'Subjects who count towards Primary targets'
Target	
Source	YCRN
Time Period	Annual

	2007/8	2008/9
Airedale	172	
Bradford	97	
Calderdale-Huddersfield	65	
Harrogate	10	
Leeds	548	
Mid Yorkshire	104	
York	27	

9.2 Annual Accrual Rates (all subjects)

Measure	Accrual for studies which are: 'Funded by UKCRC partner; UKCRN adopted, commercial study; UKCRN adopted, non-commercial study' Accrual Types: 'Subjects who count towards Primary targets and Subjects who DO NOT count towards targets'
Target	
Source	YCRN
Time Period	Annual

	2007/8	2008/9
Airedale	204	
Bradford	219	
Calderdale-Huddersfield	89	
Harrogate	27	
Leeds	645	
Mid Yorkshire	118	
York	36	