

## WELSH INFORMATION STANDARDS BOARD

<b>DSC Notice:</b>	DSCN 2020 / 28
<b>Date of Issue:</b>	9 <sup>th</sup> December 2020

<b>Ministerial / Official Letter:</b> TBC	<b>Subject:</b> Single Cancer Pathway – Core (AMD)
<b>Sponsor:</b> Olivia Shorrocks Head of Major Conditions, Delivery and Performance, Health and Social services Group, Welsh Government	
<b>Implementation Date:</b> 1 <sup>st</sup> January 2021 (January 2021 data to be published March 2021)	

### DATA STANDARDS CHANGE NOTICE

A Data Standards Change Notice (DSCN) is an information mandate for a new or revised information standard.

This DSCN was approved by the Welsh Information Standards Board (WISB) on 19<sup>th</sup> November 2020.

**WISB Reference:** ISRN 2019 / 009

#### Summary:

To introduce the Single Cancer Pathway - Core data set which provides the data necessary to perform key metrics around the Single Cancer Pathway.

#### Data sets / returns affected:

New patient level data set:

- Single Cancer Pathway - Core

Please address enquiries about this Data Standards Change Notice to the Data Standards Team in NHS Wales Informatics Service

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The Welsh Information Standards Board is responsible for appraising information standards. Submission documents and WISB Outcomes relating to the approval of this standard can be found at:

<http://howis.wales.nhs.uk/sites3/page.cfm?orgid=742&pid=24632>

## **DATA STANDARDS CHANGE NOTICE**

### Introduction

All patients suspected of having a new primary cancer will be put on the Single Cancer Pathway regardless of their entry point onto the pathway. This includes patients who have had a previous cancer and are now suspected of having a different primary (a new) cancer.

The progress of this standard has involved a long period of engagement and development work within the cancer community to support and implement the SCP across Wales. This standard outlines the requirements for reporting against the SCP through utilising the patient level data set and the agreed suite of supplementary measures. The new reporting approach will consequently replace the existing Urgent Suspected Cancer (USC) and non-Urgent Suspected Cancer (nUSC) standards.

All patients who receive their first definitive treatment within Wales should be included in these figures. Patients referred by secondary care for treatment outside of NHS Wales will be included in the SCP reporting however those that enter directly or are referred from primary care directly to services outside of Wales will not.

### Description of Change

To introduce the Single Cancer Pathway - Core data set which provides the data necessary to perform key metrics around the Single Cancer Pathway.

### Data Dictionary Version

Where applicable, this DSCN reflects changes introduced by DSCN and/or DDCN since the release of version 4.10 of the NHS Wales Data Dictionary.

The changes introduced by such DSCNs will be published in version 4.11 of the NHS Wales Data Dictionary.

### Actions Required

Actions for Local Health Boards NDR infrastructure (WelshPAS):

- Ensure that the NDR has access to each WelshPAS Health Board instance to enable data to be extracted and transferred to the NDR data stores.

Actions for Local Health Boards infrastructure (non-WelshPAS or Multiple PAS):

- Ensure that the local warehouse infrastructure is set up to enable data to be extracted via a SQL-to-SQL view from the Local Health Board data warehouse or delivered via CSV file format into the NDR data stores.
- Ensure that the local data warehouse infrastructure complies with the specifications outlined in the Single Cancer Pathway – Core data set technical implementation.

Actions for all Local Health Boards (regardless of system):

- Data must be validated and made available to NWIS in time for the pilot stage to commence at the end of November 2020 (covering October 2020 data) and then subsequently the first formal submission on the 26<sup>th</sup> February 2021 (for January 2021 data). Health boards will be expected to dual submit to WG and to NWIS for a minimum of 3 months, until there is confidence that the data is consistent.
- For each patient, all columns must be included in the output and named/typed as per the table in Appendix B.
- Where health boards are unable to provide data for optional data items within the data set, these are to be left blank. All mandatory data items must be provided.
- Data will be validated and made available monthly by the last working day of each month.

Actions for the NDR infrastructure:

- Develop and deliver the functionality necessary to enable the implementation of the new Single Cancer Pathway.
- Ensure that processes are in place to extract the data via methods outlined above into the data stores.

Actions for NWIS Data Standards

- Ensure that development within WelshPAS is in place for the Wales Cancer Tracking Module to accommodate the data items in this Standard.
- Ensure processes are in place to analyse and report on the data for Welsh Government.
- Implement data quality standards and validation methods.
- Ensure processes are in place for local sign off of the data for all Health Boards.

Welsh Government Delivery & Performance Division:

- Notify NHS Wales Informatics Service of any changes to Single Cancer Pathway measures.

## **Appendix A: Table reflecting areas that are impacted as a result of this DSCN**

The following table shows where there are changes to the scope and/or definitions of applicable data sets, data items, terms and other associated areas that are linked with the changes documented within this DSCN.

Each data definition type is listed in alphabetical order and is shown in the sequence in which it appears in this DSCN.

<b>Data Definition Type</b>	<b>Name</b>	<b>New/Retired/Changed</b>	<b>Page Number</b>
Patient Level Data Set	Single Cancer Pathway Core	New	5
Data Item	NHS Number	Changed	8
Data Item	NHS Number Status Indicator	Changed	10
Data Item	Local Patient Identifier	Changed	12
Data Item	Patient's Address	Changed	12
Data Item	Patient's Postcode	Changed	13
Data Item	Code of Registered GP Practice	Changed	14
Data Item	Birth Date	Changed	15
Data Item	Sex (at birth)	Changed	16
Data Item	Ethnic Group	Changed	17
Data Item	Organisation Code (Code of Provider)	Changed	19
Data Item	Patient's Name (Surname)	New	20
Data Item	Patient's Name (Forename)	New	21
Data Item	Death Date	New	21
Data Item	Priority of Referral	New	21
Data Item	Unique Pathway Identifier	New	21
Data Item	Pathway Start Date (Point of Suspicion of Cancer)	New	22
Data Item	Source of Suspicion	New	22
Data Item	Source of Cancer Referral	New	23
Data Item	Primary Cancer Site Description	New	24
Data Item	Primary Cancer Site Description (Sub Site)	New	25
Data Item	Date of Receipt of Cancer Referral	New	25
Data Item	Date of First Appointment Taken	New	25
Data Item	Date of First Diagnostic Test Undertaken	New	26
Data Item	Date of First Diagnostic Test Reported	New	26
Data Item	Date of Last Diagnostic Test Undertaken before Date of Decision to Treat (DDTT)	New	26
Data Item	Date of Last Diagnostic Test Reported before Date of Decision to Treat (DDTT) or Treatment Start	New	26
Data Item	Date Patient Informed of Diagnosis	New	27
Data Item	Multi Disciplinary (MDT) Meeting Date (First Meeting)	New	27
Data Item	Multi Disciplinary (MDT) Meeting Date (Last Meeting)	New	27
Data Item	Date of Primary Diagnosis – Clinically Agreed	New	28
Data Item	Outcome of Investigations	New	28
Data Item	Date of Decision to Treat CWT (DDTT)	New	28
Data Item	Date Referred to Tertiary Centre	New	29
Data Item	Tertiary Centre of Treatment	New	29
Data Item	Date of SCP Clock Stop	New	29
Data Item	Cancer Treatment Modality	New	30
Data Item	USC/NUSC Target Date (Adjusted)	New	30
Data Item	SCP Target Date ( <del>Unadjusted</del> )	New	31
Data Item	Reason for Pathway Close	New	31

## **Appendix B: Highlighted changes to be made to the NHS Wales Data Dictionary**

The information below describes changes to the content of the NHS Wales Data Dictionary since its last publication (version 4.1, 15<sup>th</sup> August 2019) or from later iterations of that content where these have not yet been published on the Data Dictionary site, but have been released as approved DSCNs. These changes are as follows:

- **Blue** – new text
  - **Grey** – existing text
  - **Strikethrough** – text deletions
- 

### a) New Data Set to be added to 'Patient Level Data Set'

#### **Scope**

All cancer patients should be tracked from point of suspicion to treatment within 62 days regardless of their entry point onto the pathway. The Single Cancer Pathway will not include adjustments – the real wait will be reported (currently pathways can be adjusted when a patient takes a holiday, is unable to attend their appointment or needs stabilising treatment. These will not be included in the reporting so the waits reported will reflect the real wait that the patient experienced).

Health boards are required to enter all patients suspected of having a new primary cancer onto the SCP. This includes patients who have had a previous cancer and are now suspected of having a different primary (a new) cancer. This also includes all Squamous Cell Skin Cancer (SCC). For SCP, the clock start point for all patients is the point of suspicion. The main entry points onto the pathway are defined in the "single suspected cancer pathway definitions" document.

Health boards are required to report on all patients referred into services they provide following a suspicion of cancer for SCP, as per previous reporting requirements for nUSC/USC defined in Welsh Health Circular 2004 (067)1 and subsequent guidance. Health boards are required to report on closed pathways only, with open pathways being excluded from SCP reports. Cross-border patients (i.e. referred into services outside of Wales) are excluded from SCP reports until such time when this information is available from NHS Digital. Health boards/Trusts are required to record social and medical adjustments and indicate whether the adjustment is exceptional or non-exceptional, however these will not be included in SCP reporting. All patients who receive their first definitive treatment within Wales should be included in these figures. Patients referred by secondary care for treatment outside of NHS Wales will be included in the SCP reporting however those that enter directly or are referred from primary care directly to services outside of Wales will not.

#### **Return Submission Details**

Data is to be extracted from the source WelshPAS system instance for each Local Health Board. There will be a requirement that traditional DSCN data feed methods will have to continue for some Health Boards where non-WelshPAS systems or multiple PAS systems are in place and these will either be provided through a CSV file format or a SQL-to-SQL transfer. In both instances, the data will be transported into the NDR controlled data stores for dissemination.

#### **Data Set Structure**

<b>Rating</b> 1 = Mandatory 2 = Optional 3 = Mandatory where 'Reason for Pathway Close' is 'Treated'	<b>Data Items Relating to Patient Sensitive Data</b>	<b>Column Header</b>	<b>Format</b>
1	Patient's Name (Surname)	Surname	35 character alpha-numeric
1	Patient's Name (Forename)	Forename	35 character alpha-numeric
1	NHS Number	NHSNumber	10 digit numeric
1	NHS Number Status Indicator	NHSNumberStatusIndicator	2 digit numeric
1	Local Patient Identifier	LocalPatientIdentifier	10 character alpha- numeric
1	Patient's Address	Address	175 character alpha- numeric
1	Patient's Postcode	Postcode	8 character alpha- numeric
2 1	Code of Registered GP Practice	GPPracticeCode	6 character alpha- numeric
1	Birth Date	BirthDate	8 digit numeric (ccyymmdd)
2	Death Date	DeathDate	8 digit numeric (ccyymmdd)
1	Sex (at birth)	Sex	1 digit numeric
2 1	Ethnic Group	EthnicGroup	2 character alpha- numeric
	<b>Data Items Relating to Local Health Board Data</b>		
1	Organisation Code (Code of Provider)	ProviderOrgCode	5 character alpha- numeric
	<b>Data Items Relating to Pathway Type</b>		
1	Priority of Referral	ReferralPriority	1 digit numeric
1	Unique Pathway Identifier	UniquePathwayIdentifier	24 character alpha- numeric
1	Pathway Start Date (Point of Suspicion of Cancer)	PathwayStartDate	8 digit numeric (ccyymmdd)
1	Source of Suspicion	SuspicionSource	2 character alpha- numeric
2 1	Source of Cancer Referral	ReferralSource	2 character alpha- numeric
	<b>Data Items Relating to Tumour Identification</b>		

1	Primary Cancer Site Description	PrimaryCancerSiteDescription	2 character alpha-numeric
2	Primary Cancer Site Description (Sub Site)	PrimaryCancerSubSiteDescription	100 character alpha-numeric
	<b>Data Items Relating to Component Waits</b>		
1	Date of Receipt of Cancer Referral	CancerReferralReceiptDate	8 digit numeric (ccyymmdd)
2	Date of First Appointment Taken	FirstAppointmentTakenDate	8 digit numeric (ccyymmdd)
± 2	Date of First Diagnostic Test Undertaken	FirstDiagnosticTestUndertakenDate	8 digit numeric (ccyymmdd)
± 2	Date of First Diagnostic Test Reported	FirstDiagnosticTestReportedDate	8 digit numeric (ccyymmdd)
± 2	Date of Last Diagnostic Test Undertaken before Date of Decision to Treat (DDTT)	LastDiagnosticTestBeforeDDTTDate	8 digit numeric (ccyymmdd)
± 2	Date of Last Diagnostic Test Reported before Date of Decision to Treat (DDTT) or Treatment Start	LastDiagnosticTestBeforeDDTTorTreatmentStartDate	8 digit numeric (ccyymmdd)
± 3	Date Patient Informed of Diagnosis	PatientInformedofDiagnosisDate	8 digit numeric (ccyymmdd)
2	Multi Disciplinary Team (MDT) Meeting Date (First Meeting)	MDTFirstMeetingDate	8 digit numeric (ccyymmdd)
2	Multi Disciplinary Team (MDT) Meeting Date (Last Meeting)	MDTLastMeetingDate	8 digit numeric (ccyymmdd)
2 3	Date of Primary Diagnosis – Clinically Agreed	PrimaryCancerDiagnosisDate	8 digit numeric (ccyymmdd)
1	Outcome of Investigations	InvestigationsOutcome	1 digit numeric
2 3	Date of Decision to Treat CWT (DDTT)	DDTTDecisionDate	8 digit numeric (ccyymmdd)
2	Date Referred to Tertiary Centre	TertiaryCentreReferralDate	8 digit numeric (ccyymmdd)
2	Tertiary Centre of Treatment	TreatmentTertiaryCentre	5 character alpha-numeric
	<b>Data Items Relating to End Point</b>		
1	Date of SCP Clock Stop	SCPClockStopDate	8 digit numeric (ccyymmdd)
2 3	Cancer Treatment Modality	CancerTreatmentModality	2 character alpha-numeric

2	USC/NUSC Target Date (Adjusted)	USCNUSTargetAdjustedDate	8 digit numeric (ccyymmdd)
1	SCP Target Date (Unadjusted)	SCPTargetUnadjustedDate	8 digit numeric (ccyymmdd)
1	Reason for Pathway Close	ReasonPathwayClosed	1 digit numeric

## b) Changes to Existing Data Items

### NHS Number

Change History	
<u>DSCN 2016 / 02</u>	Maternity Indicators Data Set
<u>DSCN 2015 / 03</u>	Radiotherapy Data Set
<u>DDCN 2014 / 05</u>	Cancelled Admitted Procedures (Postponed Admitted Procedures) Data Set
<u>DSCN 2014 / 02</u>	Substance Misuse Data Set
<u>DSCN 2013 / 03</u>	Cancelled Admitted Procedures Data Set
<u>DSCN 2012 / 11</u>	Elective Admission List Data Set (EAL Ds)
<u>DDCN 2012 / 06</u>	To remove all references to 'Health Solutions Wales', 'Business Services Centre' and 'Information Products Unit' and replace with 'NHS Wales Informatics Service'
<u>DSCN (2009) 02 (W)</u>	Emergency Department Data Set
<u>DSCN 10/03 (W)</u>	NHS Numbers for Babies

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 <sup>st</sup> April 1999	
EAL ds	1 <sup>st</sup> April 1999	21 <sup>st</sup> November 2012
OP ds	1 <sup>st</sup> April 1999	
CC ds	1 <sup>st</sup> April 2007	
OPR ds	1 <sup>st</sup> July 2008	
EDDS	1 <sup>st</sup> April 2009	
PAP ds	1 <sup>st</sup> April 2013	
SM ds	1 <sup>st</sup> April 2014	
RTDS	1 <sup>st</sup> April 2014	
MI ds	1 <sup>st</sup> April 2016	
SCPC ds	1 <sup>st</sup> January 2021	
<del>SCPA ds</del>	<del>1<sup>st</sup> January 2021</del>	

It is mandatory to record the NHS Number.

- (in the MI ds) for each woman and baby
- (in every other data set) for each patient registered with a GP practice in England and Wales.

It is mandatory to record the NHS Number for each patient registered with a GP practice in England and Wales. The NHS number is allocated to an individual, to enable unique identification for NHS health care purposes.

The MIDs captures data relating to the woman at initial assessment and to mother and baby for all births. Each Health Board makes data available in relation to the events which they managed, and initial assessment and birth data will be linked nationally regardless of whether both events took place in the same or at different health boards. The NHS number is needed on each record to enable this data to be linked.

This NHS Number format was mandated for use effective 1<sup>st</sup> November 1997. Prior to this, the NHS Number was an alphanumeric code which ranges in size from 10 – 17 characters.

If known, the patient's Health and Care Number should be used to populate this field for patients resident in Northern Ireland.

If known, the patient's Community Health Index (CHI) Number should be used to populate this field for patients resident in Scotland.

Format: 10 digit numeric

See [Health and Care Number](#)

See [Community Health Index \(CHI\) Number](#)

Check Digit Algorithm

*(This algorithm applies to the Welsh and English NHS Number and the Northern Ireland Health & Care Number. The check digit algorithm for the Scottish CHI Number is available on request from the NHS Wales Informatics Service.)*

Step 1 Multiply each of the first nine digits by a weighting factor as follows:

Digit Position (starting from the left)	Factor
1	10
2	9
3	8
4	7
5	6
6	5
7	4
8	3
9	2

Step 2 Add the results of each multiplication together

Step 3 Divide the total by 11 and establish the remainder

Step 4 Subtract the remainder from 11 to give the check digit

Step 5 Check the remainder matches the check digit. If it does not, the number is invalid.

If the result of Step 4 is 11 then a check digit of 0 is used

If the result of Step 4 is 10 then the number is invalid and not used

### NHS Number Status Indicator

Change History	
<u>DSCN 2016 / 02</u>	Maternity Indicators Data Set
<u>DSCN 2012 / 11</u>	Elective Admission List Data Set (EAL Ds)
<u>DSCN (2009) 02 (W)</u>	Emergency Department Data Set
<u>DSCN (2008) 07 (W)</u>	The Introduction of Valid Period Date Ranges for Data Items within the APC Data Set

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 <sup>st</sup> April 1999	
EAL ds	1 <sup>st</sup> April 1999	21 <sup>st</sup> November 2012
OP ds	1 <sup>st</sup> April 1999	
OPR ds	1 <sup>st</sup> July 2008	
EDDS	1 <sup>st</sup> April 2009	
MI ds	1 <sup>st</sup> April 2016	
SCPC ds	1 <sup>st</sup> January 2021	

The status indicator provides information about the potential accuracy and reliability of the NHS number and hence the use to which the number can be put. The indicator can also be used to indicate the general standard of patient data quality within Trusts. This data item became mandatory in Wales in April 1999.

Format: 2 digit numeric

Value	Meaning	Interpretation	Valid From	Valid To
nn	Number present and traced using Welsh NHS AR	Welsh LHB's should look for high levels of NHS numbers which have an associated status indicator value of 'nn'.	1 <sup>st</sup> April 1999	
01	Number present & traced	Providers should be striving to submit numbers that have been traced against an authoritative source (currently the Initial Tracing Service) and so are as reliable and accurate as possible. Therefore Local Health Boards should look for high levels of NHS numbers which have an associated status indicator value of "01".	1 <sup>st</sup> April 1999	
02	Number present but not traced	This value reveals that although a number is present, it has not been traced against an authoritative source i.e. it has most likely been manually input but not sent to	1 <sup>st</sup> April 1999	

		the Initial Tracing Service for checking. An exception to this could be that the NHS number has entered the provider system electronically from a reliable and safe source other than the authoritative tracing service. Users of NHS numbers with a status indicator value of "02" should be cautious.		
03	Trace required	The provider should submit patient details for NHS number tracing before DS's are submitted. Therefore the proportion of missing numbers is indicated by the "03" value should be very small.	1 <sup>st</sup> April 1999	
04	Trace attempted – no match or multiple match found	A significant proportion of "04s" could indicate data quality problems at the provider. However, the LHB should take account of whether the provider has a high level of difficulty to trace patient's e.g. ethnic names, mobile population.	1 <sup>st</sup> April 1999	
05	Trace needs to be resolved (NHS number or patient detail conflict)	High levels of "05s" imply that the NHS numbers sent by the provider for check tracking are incorrect for the patient. This indicates poor quality of data which could either be due to a poor original source e.g. wrong number given on a GP referral letter, or poor data input by the provider.	1 <sup>st</sup> April 1999	
06	Trace in progress	This value indicates that the NHS number has been submitted for tracing but a response is awaited. Local Health Boards should expect to see a small proportion of these as the time of DS submission may be before the response from the tracing service is received.	1 <sup>st</sup> April 1999	
07	Number not present and trace not required	Two circumstances are explained by this indicator:	1 <sup>st</sup> April 1999	
	1.	NHS number is not required e.g. overseas visitor. This should be easy to identify from other DS data items		
	2.	There is insufficient patient data to enable a successful trace to be made. Local Health Boards need to be more cautious about this reason although they should take into account the type of population the provider serves e.g. itinerants and mental health patients who may not be willing or able to provide sufficient information.		
		Note: Local Health Boards should expect to see a small proportion of cases where there is no NHS number at all.		
08	Trace postponed (baby under six weeks old)	This indicator should only be used for babies under six weeks old and Local Health Boards should check the date of birth details on the DS.	1 <sup>st</sup> April 1999	

## Local Patient Identifier

Change History	
<a href="#">DSCN 2015 / 01</a>	Radiotherapy Data Set
<a href="#">DDCN 2014 / 05</a>	Cancelled Admitted Procedures (Postponed Admitted Procedures) Data Set

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 <sup>st</sup> April 1999	
EAL ds	1 <sup>st</sup> April 1999	21 <sup>st</sup> November 2012
OP ds	1 <sup>st</sup> April 1999	
OPR ds	1 <sup>st</sup> July 2008	
EDDS	1 <sup>st</sup> April 2009	
PAP ds	1 <sup>st</sup> April 2013	
RTDS	1 <sup>st</sup> April 2014	
SCPC ds	1 <sup>st</sup> January 2021	SCPC ds
<del>SCPA ds</del>	<del>1<sup>st</sup> January 2021</del>	

This is the case record number. It is a unique identifier for a patient within a health care provider.

Format: 10 character alpha-numeric

See [CASE RECORD NUMBER](#)

Where care for NHS patients is sub-commissioned in the independent sector or overseas, the NHS commissioner local patient identifier should be used. If no NHS local patient identifier has been assigned the independent sector or overseas provider identifier should be used.

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## Patient's Address

Change History	
<a href="#">DSCN 2016 / 02</a>	Maternity Indicators Data Set
<a href="#">DSCN 2015 / 03</a>	Radiotherapy Data Set
<a href="#">DSCN 2012 / 11</a>	Elective Admission List Data Set (EAL Ds)
<a href="#">DSCN (2009) 02 (W)</a>	Emergency Department Data Set
<a href="#">DSCN (2008) 05 (W)</a>	Outpatient Referral Data Set
<a href="#">DSCN (2007) 06 (W)</a>	Amendments to Data Items; 'Patients Usual Address', 'Postcode of Usual Address' and 'Birth Date'.

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 <sup>st</sup> April 1999	
EAL ds	1 <sup>st</sup> April 1999	21 <sup>st</sup> November 2012
OP ds	1 <sup>st</sup> April 1999	
CC ds	1 <sup>st</sup> April 2007	

OPR ds	1 <sup>st</sup> July 2008	
EDDS	1 <sup>st</sup> April 2009	
RTDS	1 <sup>st</sup> April 2014	
MI ds	1 <sup>st</sup> April 2016	
SCPC ds	1 <sup>st</sup> January 2021	

This is the usual address

- (in the SCPC ds) for the patient at the Pathway Start Date (Point of Suspicion of Cancer)
- (in every other data set listed above) nominated by the patient at the time of admission or attendance. If patients usually reside elsewhere are staying in hotels, hostels or other residential establishments for a short term, say a week, they should be recorded as staying at their usual place of residence. However if long term, such as at boarding school, the school address must be recorded. University students may nominate either their home address or the address of their university accommodation. Where patients are not capable of supplying this information, because of age or mental illness, for example, then the person responsible for the patient, such as a parent or guardian, should nominate the usual address. Patients not able to provide an address should be asked for their most recent address. If this cannot be established then you should record the address as `No fixed abode' or `Address unknown'. These patients are regarded as resident in the local geographical district for contracting purposes. For birth episodes this should refer to the mother's usual place of residence.

Format: 175 character alpha-numeric. This is based on 5 lines of 35 characters. This relates to the physical layout of the address, not the logical layout and does not require intelligent intervention when splitting the text string into lines.

Prior to April 1999 the PEDW Format: 100 character alpha-numeric. This is based on 4 lines of 25 characters. This relates to the physical layout of the address, not the logical layout.

## Patient's Postcode

Change History	
<a href="#">DSCN 2016 / 02</a>	Maternity Indicators Data Set
<a href="#">DSCN 2015 / 03</a>	Radiotherapy Data Set
<a href="#">DSCN 2012 / 11</a>	Elective Admission List Data Set (EAL Ds)
<a href="#">DSCN 2009/09</a>	NHS Reforms: NHS Wales Data Definition Update
<a href="#">DSCN (2009) 02 (W)</a>	Emergency Department Data Set
<a href="#">DSCN (2007) 06 (W)</a>	Amendments to Data Items; 'Patients Usual Address', 'Postcode of Usual Address' and 'Birth Date'.

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 <sup>st</sup> April 1999	
EAL ds	1 <sup>st</sup> April 1999	21 <sup>st</sup> November 2012
OP ds	1 <sup>st</sup> April 1999	
CC ds	1 <sup>st</sup> April 2007	
OPR ds	1 <sup>st</sup> July 2008	

EDDS	1 <sup>st</sup> April 2009	
RTDS	1 <sup>st</sup> April 2014	
MI ds	1 <sup>st</sup> April 2016	
SCPC ds	1 <sup>st</sup> January 2021	

This is the usual address

- (in the SCPC ds) for the patient at the Pathway Start Date (Point of Suspicion of Cancer)
- (in every other data set listed above) nominated by the patient at the time of admission or attendance.

Format: 8 character alpha-numeric. This allows a space to be inserted to differentiate between the inward and outward segments of the code, enabling full use to be made of the Royal Mail postcode functionality.

Organisation Data Service rules apply.

If a patient has no fixed abode, this should be recorded with the appropriate code (ZZ99 3VZ).

For overseas visitors, the postcode field must show the relevant country pseudo postcode commencing ZZ99, plus spaces followed by a numeric, then an alpha character, then a Z. For example, ZZ99 6CZ is the pseudo-postcode for India. Pseudo-postcodes can be found in the NHS Postcode Directory.

See [Postcode](#)

(PEDW (Prior to April 1999), Psychiatric Census)

The postcode applied to the usual address nominated by the patient at the time of admission or attendance, using rules supplied above and those in the NHS Postcode User Directory.

Format: 8 character alpha-numeric. The 5<sup>th</sup> position is always blank (Δ) and possibly the 3<sup>rd</sup> and 4<sup>th</sup> characters may be blank also.

See [Postcode](#)

## Code of Registered GP Practice

Change History	
<a href="#">DSCN 2015 / 03</a>	Radiotherapy Data Set
<a href="#">DSCN 2012 / 11</a>	Elective Admission List Data Set (EAL Ds)
<a href="#">DSCN 2012 / 05</a>	GP Practice Code
<a href="#">DSCN (2007) 11 (W)</a>	To rename 'Code of GP Practice (Registered GMP)'

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds	1 <sup>st</sup> September 2012	
EAL ds	1 <sup>st</sup> April 1999	21 <sup>st</sup> November 2012

General		
OP ds	1 <sup>st</sup> April 1999	
CC ds	1 <sup>st</sup> April 2007	
RTDS	1 <sup>st</sup> April 2014	
SCPC ds	1 <sup>st</sup> January 2021	

This is the code of the patient's registered General Practitioner (GP) Practice. This allows the practice to be notified about treatment received by the patient. The registered GP Practice may or may not be the same as the referring GP Practice.

Format: 6 character alpha-numeric

See [Organisation Code](#)

## Birth Date

Change History	
<a href="#">DSCN 2016 / 02</a>	Maternity Indicators Data Set
<a href="#">DSCN 2015/ 03</a>	Radiotherapy Data Set
<a href="#">DDCN 2014 / 05</a>	Cancelled Admitted Procedures (Postponed Admitted Procedures) Data Set
<a href="#">DSCN 2014 / 02</a>	Substance Misuse Data Set
<a href="#">DSCN 2013 / 03</a>	Cancelled Admitted Procedures Data Set
<a href="#">DSCN 2013 / 01</a>	Retirement of 'Medical & Dental Staff Census' (SBH50-59A) and 'Non-Medical Staffing' data collections
<a href="#">DSCN 2012 / 11</a>	Elective Admission List Data Set (EAL Ds)
<a href="#">DSCN (2009) 02 (W)</a>	Emergency Department Data Set
<a href="#">DSCN (2008) 07 (W)</a>	The Introduction of Valid Period Date Ranges for Data Items within the APC Data Set
<a href="#">DSCN (2007) 06 (W)</a>	Amendments to Data Items 'Patient's Usual Address', 'Postcode of Usual Address' and 'Birth Date'.
<a href="#">DSCN (2006) 04 (W)</a>	Revised definitions for Phase 2 of the Outpatient Data Quality Project

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 <sup>st</sup> April 1999	
EAL ds	1 <sup>st</sup> April 1999	21 <sup>st</sup> November 2012
OP ds	1 <sup>st</sup> April 1999	
CC ds	1 <sup>st</sup> April 2007	
OPR ds	1 <sup>st</sup> July 2008	
EDDS	1 <sup>st</sup> April 2009	
SBH50-59a	-	2 <sup>nd</sup> January 2013
Non - Medical Staffing	-	2 <sup>nd</sup> January 2013
PAP ds	1 <sup>st</sup> April 2013	
SM ds	1 <sup>st</sup> April 2014	
RTDS	1 <sup>st</sup> April 2014	

MI ds	1 <sup>st</sup> April 2016	
SCPC ds	1 <sup>st</sup> January 2021	

Date of birth of patient / client.

Format: 8 digit numeric, CCYYMMDD

For Radiotherapy Data Set;

Format: CCYY-MM-DD

If the Date of Birth is unknown; use the date '11/11/1811' (that is 18111111)

Where [Birth Date Status](#) is associated with this data item, it ~~and~~ should be used to indicate whether Birth Date is supplied or is not applicable.

### Sex (at birth)

Change History	
<a href="#">DSCN 2015 / 03</a>	Radiotherapy Data Set
<a href="#">DSCN 2012 / 11</a>	Elective Admission List Data Set (EAL Ds)
<a href="#">DSCN (2008) 07 (W)</a>	The Introduction of Valid Period Date Ranges for Data Items within the APC Data Set

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 <sup>st</sup> April 2009	
OP ds	1 <sup>st</sup> April 1999	
OPR ds	1 <sup>st</sup> July 2008	
EDDS	1 <sup>st</sup> April 2009	
RTDS	1 <sup>st</sup> April 2014	
SCPC ds	1 <sup>st</sup> January 2021	

This is the sex of person, employee or patient.

Format: 1 digit numeric

Value	Meaning	Valid From	Valid To
0	Not known	1 <sup>st</sup> July 1997	20 <sup>th</sup> January 2002
1	Male	Pre 28 <sup>th</sup> December 1995	
2	Female	Pre 28 <sup>th</sup> December 1995	
3	Indeterminate or anticipated sex change	Pre 28 <sup>th</sup> December 1995	30 <sup>th</sup> June 1997
9	Not Specified	1 <sup>st</sup> July 1997	

## Ethnic Group

Change History	
<a href="#">DSCN 2017/06 v1.1</a>	Ethnic Group
<a href="#">DSCN 2017 / 06</a>	Ethnic Group
<a href="#">DSCN 2016 / 02</a>	Maternity Indicators Data Set
<a href="#">DSCN 2014 / 02</a>	Substance Misuse Data Set
<a href="#">DSCN 2013 / 01</a>	Retirement of 'Medical & Dental Staff Census' (SBH50-59A) and 'Non-Medical Staffing' data collections
<a href="#">DSCN (2009) 02 (W)</a>	Emergency Department Data Set
<a href="#">DSCN (2008) 07 (W)</a>	The Introduction of Valid Period Date Ranges for Data Items within the APC Data Set
<a href="#">DSCN 12/01 (W)</a>	Subject: Changes to Ethnic data codes

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 <sup>st</sup> April 1999	
NCCHD		
CC ds	1 <sup>st</sup> April 2007	
OPR ds	1 <sup>st</sup> September 2008	
EDDS	1 <sup>st</sup> April 2009	
SM ds	1 <sup>st</sup> April 2014	
Non - Medical Staffing	-	2 <sup>nd</sup> January 2013
MI ds	1 <sup>st</sup> April 2016	
SCPC ds	1 <sup>st</sup> January 2021	

This is the ethnic group of the patient, as selected by the patient. The patient is the arbiter of the information. Classifications are based on the 14+1 new ethnic group data categories used in the 2001 Census and the information recorded about ethnic group must be obtained by asking the patient / client.

Format: 2 character alpha-numeric - AB, where the first character (A) is a value taken from the list in the table below, and the second character (B) is a locally defined value to be used in conjunction with the nationally defined values. If no further local breakdown is required, the second character (B) should be filled with a 'Z'. Note that for the Substance Misuse and Maternity Indicators data set, only the first character (A) is submitted.

Value	Meaning	Valid From	Valid To
	<b>WHITE</b>		
A	Any White Background, including Welsh, English, Scottish, Northern Irish, Irish, British	1 <sup>st</sup> April 2002 Amended 1 <sup>st</sup> April 2017	
B	Gypsy or Irish Traveller	1 <sup>st</sup> April 2017*	
	<b>MIXED / MULTIPLE ETHNIC GROUP</b>		
D	White and Black Caribbean	1 <sup>st</sup> April 2002	
E	White and Black African	1 <sup>st</sup> April 2002	

F	White and Asian	1 <sup>st</sup> April 2002	
G	Any other mixed background / multiple ethnic background	1 <sup>st</sup> April 2002	
		Amended 1 <sup>st</sup> April 2017	
	<b>ASIAN OR ASIAN BRITISH</b>		
H	Indian	1 <sup>st</sup> April 2002	
J	Pakistani	1 <sup>st</sup> April 2002	
K	Bangladeshi	1 <sup>st</sup> April 2002	
R	Chinese	1 <sup>st</sup> April 2002	
L	Any other Asian background	1 <sup>st</sup> April 2002	
	<b>BLACK OR BLACK BRITISH</b>		
M	Caribbean	1 <sup>st</sup> April 2002	
N	African	1 <sup>st</sup> April 2002	
P	Any other Black background	1 <sup>st</sup> April 2002	
	<b>OTHER ETHNIC GROUPS</b>		
T	Arab	1 <sup>st</sup> April 2017*	
S	Any other ethnic group	1 <sup>st</sup> April 2002	
	<b>NOT STATED</b>		
Z	Not stated	1 <sup>st</sup> April 2002	

\*Note that this code was included as a valid value in the Maternity Indicators data set from April 2016

The codes below are for historical information only and were retired on the 1<sup>st</sup> April 2002.

Format: 2 character alpha-numeric

Value	Meaning	Valid From	Valid To
0	White	1 <sup>st</sup> July 1997	31 <sup>st</sup> March 2002
1	Black – Caribbean	1 <sup>st</sup> July 1997	31 <sup>st</sup> March 2002
2	Black – African	1 <sup>st</sup> July 1997	31 <sup>st</sup> March 2002
3	Black – Other	1 <sup>st</sup> July 1997	31 <sup>st</sup> March 2002
4	Indian	1 <sup>st</sup> July 1997	31 <sup>st</sup> March 2002
5	Pakistani	1 <sup>st</sup> July 1997	31 <sup>st</sup> March 2002
6	Bangladeshi	1 <sup>st</sup> July 1997	31 <sup>st</sup> March 2002
7	Chinese	1 <sup>st</sup> July 1997	31 <sup>st</sup> March 2002
8	Any other ethnic group	1 <sup>st</sup> July 1997	31 <sup>st</sup> March 2002
9	Not given	1 <sup>st</sup> July 1997	31 <sup>st</sup> March 2002

## Organisation Code (Code of Provider)

Change History	
<a href="#">DSCN 2016 / 02</a>	Maternity Indicator Data Set
<a href="#">DSCN 2015 / 03</a>	Radiotherapy Data Set
<a href="#">DDCN 2014 / 05</a>	Cancelled Admitted Procedures (Postponed Admitted Procedures) Data Set
<a href="#">DSCN 2013 / 03</a>	Cancelled Admitted Procedures Data Set
<a href="#">DSCN 2012 / 11</a>	Elective Admission List Data Set (EAL Ds)
<a href="#">DSCN 2011/07</a>	The introduction of the 'Referral to Treatment Times (Combined)' return
<a href="#">DDCN 2011/02</a>	Angiogram Waiting Time & Referral to Treatment Patient Tracking Report.
<a href="#">DSCN 2010/12</a>	Referral to Treatment Patient Tracking Report.
<a href="#">DSCN 2010 / 06</a>	Outpatient Activity Minimum Data Set (OP MDS) Data Validity Standards
<a href="#">DSCN 2009/09</a>	NHS Reforms: NHS Wales Data Definition Update
<a href="#">DSCN (2009) 02 (W)</a>	Emergency Department Data Set
<a href="#">DSCN (2008) 08 (W)</a>	Referral to Treatment Patient Tracking Report
<a href="#">DSCN (2008) 05 (W)</a>	Outpatient Referral Data Set
<a href="#">DSCN (2006) 03 (W)</a>	Recording and Reporting of the 2 <sup>nd</sup> Offer Scheme

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
APC ds99	1 <sup>st</sup> April 1999	
EAL ds	1 <sup>st</sup> April 1999	21 <sup>st</sup> November 2012
OP ds	1 <sup>st</sup> April 1999	
CC ds	1 <sup>st</sup> April 2007	
OPR ds	1 <sup>st</sup> July 2008	
DATS		
RTT	1 <sup>st</sup> April 2007	31 <sup>st</sup> August 2011
RTT-PTR	1 <sup>st</sup> September 2008	30 <sup>th</sup> September 2009
PP01W		
EDDS	1 <sup>st</sup> April 2009	
RTT (Combined)	1 <sup>st</sup> September 2011	
PAP ds	1 <sup>st</sup> April 2013	
RTDS	1 <sup>st</sup> April 2014	
MI ds	1 <sup>st</sup> April 2016	
SCPC ds	1 <sup>st</sup> January 2021	
SCPA ds	1 <sup>st</sup> January 2021	

This is the organisation code of the health care provider. The provider code identifies the health care provider who is responsible for managing the treatment of the patient.

### Notes:

1. Healthcare providers may also act as commissioners when sub-contracting patient care services to other providers of health care.
2. Although the healthcare provider identified in this data item is responsible for managing the patient's treatment, it may not necessarily be where the treatment is actually conducted. For example, where the treatment has been sub-contracted to another healthcare provider.

3. For OPR ds, the Organisation Code (Code of Provider) is that of the organisation receiving the referral. If the provider is a Local Health Board/Trust, use the 3 character Local Health Board/Trust code with 2 zeros placed in the 4th and 5th character position.
4. For Referral to Treatment Times (Combined), use the 3 character Local Health Board/Trust code.

**Format:**

For Patient Level Data Sets (*APC, OP, CC, OPR, PAP, RTDS*):-

5 character alpha-numeric Local Health Board/Trust Code with 2 zeros placed in the 4<sup>th</sup> and 5<sup>th</sup> character position.

For Aggregate Data Collections (*DATS, RTT (Combined) and PP01W*):-

3 character alpha numeric Local Health Board/Trust Code

Value	Meaning
XAABB	The organisation code for the provider

**Default codes:**

Value	Meaning	Valid From	Valid To
89997	Non-UK provider where no organisation code has been issued	1 <sup>st</sup> April 2004	
89999	Non-NHS UK provider where no organisation code has been requested and issued	1 <sup>st</sup> April 2002	

See [ORGANISATION CODE](#)

c) New data items

**Patient's Name (Surname)**

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

The patients surname used to describe family, clan or marital association.

Format: 35 character alpha-numeric

### Patient's Name (Forename)

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

The persons forename(s) or given name(s).

Format: 35 character alpha-numeric

---

### Death Date

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

The date of the patient's death.

Format: 8 digit numeric, CCYYMMDD

---

### Priority of Referral

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

This is the priority of a request for services and is to be recorded for a new patient. In the case of services to be provided by a Consultant, it is as assessed by or on behalf of the Consultant.

Format: 1 digit numeric

Value	Meaning
1	USC
2	nUSC

---

### Unique Pathway Identifier

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	
SCPA ds	1 <sup>st</sup> January 2021	

This is the pathway identifier within the health board which together with the organisation code uniquely identifies a patient pathway.

An identifier which together with the organisation code uniquely identifies a patient pathway.

This is the unique pathway identifier within the health board. The Unique Pathway Identifier and the certified NHS Number are used to link information from the Single Cancer Pathway – Adjustments Data Set to the Single Cancer Pathway – Core Data Set. If there is not a certified NHS Number, a combination of Unique Pathway Identifier and Local Patient Identifier will be used to link these Data Sets.

Format: 24 character alpha-numeric

### Pathway Start Date (Point of Suspicion of Cancer)

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

The date when a clinician suspects that patient may have cancer and is the start point for the measurement of the 62-day Single Cancer Pathway. In some scenarios, the Date of Receipt of Cancer Referral and the Point of Suspicion of Cancer could be the same day. See Definitions document for pathway start date definitions <http://www.walescanet.wales.nhs.uk/scp-key-documents>.

Format: 8 digit numeric, CCYYMMDD

### Source of Suspicion

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

This is a classification used to identify the source of referral according to the point of suspicion. See Definitions document for pathway start date definitions <http://www.walescanet.wales.nhs.uk/scp-key-documents>.

Format: 2 character alpha-numeric

Value	Meaning
01	Referral from GP

02	Out Patient Upgrade
03	Referral Following Diagnostic – Endoscopy
04	Referral Following Diagnostic – Imaging
05	Referral Following Diagnostic – Other
06	Eye Care Services
07	Dentist
08	A&E/Medical Assessment/Emergency Admission
09	Screening Referral – Breast Test Wales
10	Screening Referral – Bowel Screening Wales
11	Screening Referral – Cervical Screening Service
12	Other Screening Service (NOT breast, bowel, or cervical)
13	Ward
14	Consultant Internal
15	Consultant External
16	Other Healthcare Professional

### Source of Cancer Referral

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

This is a classification used to identify the source of referral where the recording guidelines (See Definitions document for pathway start date definitions <http://www.walescanet.wales.nhs.uk/scp-key-documents>) advise that the point of suspicion for recording is different to that of the first clinical suspicion of cancer e.g. Receiving clinician suspects cancer in a referral (on vetting) not originally referred as 'suspected cancer' - the date and source proposed by the guidelines would be for the original referral from primary care. Subsequently the Source of Suspicion and Source of Referral (Cancer Wait Times) can differ.

Format: 2 character alpha-numeric

Value <sup>1</sup>	Meaning
<b>Initiated by the Consultant or Independent Nurse responsible for the Out-Patient Episode</b>	
01	Following an emergency admission
02	Following a domiciliary visit
10	Following an Accident and Emergency attendance (including Minor Injuries Units and Walk-In Centres)
11	Other – initiated by the Consultant responsible for the Consultant Out-Patient Episode
<b>Not initiated by the Consultant or Independent Nurse responsible for the Out-Patient Episode</b>	

03	Referral from a General Medical Practitioner
04	Referral from A&E Department (including Minor Injuries Unit and Walk-In Centres)
05	Referral from a Consultant or Independent Nurse, other than in an A&E department
06	Self-referral
07	Referral from Prosthetist
12	Referral from a General Practitioner with a Special Interest (GPwSI) or Dentist with a Special Interest (DwSI)
13	Referral from a Specialist Nurse (Secondary Care)
14	Referral from an Allied Health Professional (AHP)
15	Referral from Optometrist
16	Referral from an Orthoptist
17	Referral from a National Screening Programme
92	General Dental Practitioner
93	Community Dental Service
97	Other – not initiated by the Consultant responsible for the Consultant Out-Patient Episode

<sup>1</sup> A number of values included in the Core Data Standards (see <http://www.nwisinformationstandards.wales.nhs.uk/sitesplus/documents/299/20191210-DSCN%202019%2009-National%20Cancer%20Data%20Standards%20for%20Wales%20-%20Core-v1-0.pdf>) will not be utilised in the SCP data set for this data item as they relate to Source of Suspicion and are therefore listed for the Source of Suspicion data item.

## Primary Cancer Site Description

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

The site of the primary cancer for which the patient is receiving care.

Format: 2 character alpha-numeric

Value	Meaning
01	Head and Neck
02	Upper GI
03	Lower GI
04	Lung
05	Sarcoma
06	Skin (exc BCC)
07	Brain/CNS

08	Breast
09	Gynaecological
10	Urological
11	Haematological (exc Acute Leukaemia)
12	Acute Leukaemia
13	Children's
98	Other

---

### Primary Cancer Site Description (Sub Site)

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

The more granular and free-text 'sub site' of the primary cancer for which the patient is receiving care.

Format: 100 character alpha-numeric

---

### Date of Receipt of Cancer Referral

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

The date that the referral request is received by the provider. This is a key measurement point for the 62-day pathway. For guidance on the provider and accountability for monitoring and reporting, see <https://gov.wales/sites/default/files/publications/2019-09/consolidated-rules-for-managing-cancer-waiting-times.pdf>

Format: 8 digit numeric, CCYYMMDD

---

### Date of First Appointment Taken

This data item is / was included in the following data sets / collections between the dates shown:

sou	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

The first appointment taken would be the first outpatient appointment or direct to one stop shop appointment **after the Pathway Start Date (Point of Suspicion)**. This may be

the same date as the first diagnostic test if it was carried out on the same day as part of the one stop shop.

Format: 8 digit numeric, CCYMMDD

---

### **Date of First Diagnostic Test Undertaken**

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Date of first diagnostic test undertaken after the Pathway Start Date (Point of Suspicion).

Format: 8 digit numeric, CCYMMDD

---

### **Date of First Diagnostic Test Reported**

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Date of first diagnostic test reported.

Format: 8 digit numeric, CCYMMDD

---

### **Date of Last Diagnostic Test Undertaken before Date of Decision to Treat (DDTT)**

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Date of last diagnostic test undertaken before date of decision to treat.

Format: 8 digit numeric, CCYMMDD

---

### **Date of Last Diagnostic Test Reported before Date of Decision to Treat (DDTT) or Treatment Start**

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Date last diagnostic test reported before date of decision to treat or treatment start date.

Format: 8 digit numeric, CCYYMMDD

---

### **Date Patient Informed of Diagnosis**

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Date patient informed of malignancy or downgrade.

Format: 8 digit numeric, CCYYMMDD

---

### **Multi Disciplinary Team (MDT) Meeting Date (First Meeting)**

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Date of the first Multi Disciplinary Team (MDT) meeting where the patient was discussed.

Format: 8 digit numeric, CCYYMMDD

---

### **Multi Disciplinary Team (MDT) Meeting Date (Last Meeting)**

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Date of the last Multi Disciplinary Team (MDT) meeting where the patient was discussed prior to definitive treatment.

Format: 8 digit numeric, CCYYMMDD

---

## Date of Primary Diagnosis – Clinically Agreed

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Date when the primary cancer diagnosis decision was made by the clinician or clinical team. This conforms with the international requirements specified by the European Network of Cancer Registries (ENCR). The date of the first event of the six listed to occur chronologically should be chosen as the incidence date (see <https://www.encr.eu/sites/default/files/pdf/incideng.pdf>).

Format: 8 digit numeric, CCYYMMDD

---

## Outcome of Investigations

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

The outcome for the investigation as agreed with the radiologist or clinical team.

Format: 1 digit numeric

Value	Meaning
1	Malignant
2	Suspected
3	Non-Malignant
4	Recurrent

---

## Date of Decision to Treat CWT (DDTT)

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Date when the decision to treat the patient was made (as per CWT rules).

Note: This is mandatory where 'Outcomes of Investigations' = 1.

Format: 8 digit numeric, CCYYMMDD

---

### Date Referred to Tertiary Centre

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Date the patient was referred to a tertiary centre.

Format: 8 digit numeric, CCYMMDD

---

### Tertiary Centre of Treatment

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

The organisation code for the tertiary cancer centre providing treatment. Codes for Welsh organisations are available via the Welsh Reference Data Service (WRDS): <http://wrds.wales.nhs.uk/> (NHS Wales Users Only)

Format: 5 character alpha-numeric

---

### Date of SCP Clock Stop

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Date at which one of the following conditions applied:

- Date of Downgrade
- Start of Definitive Treatment
- Date of Death

As any of these conditions stop the clock for Single Cancer Pathway (SCP), only one date should be recorded.

Format: 8 digit numeric, CCYMMDD

---

## Cancer Treatment Modality

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

The cancer treatment delivered to the patient.

Format: 2 character alpha-numeric

Value	Meaning
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 Therapy))
17	Hyperbaric Oxygen Therapy
19	Radioisotope Therapy (including Radioiodine)
20	Laser Treatment (including Argon Beam Therapy)
21	Biological Therapies (excluding Immunotherapy)
22	Radiosurgery
97	Other Treatment (not listed)
98	All Treatment Declined

---

## USC/NUSC Target Date (Adjusted)

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
-----------------------	------------	----------

SCPC ds	1 <sup>st</sup> January 2021	
---------	------------------------------	--

Target date of USC/NUSC pathway. **This data item can be left blank if required.**

This is an adjusted target date. For a definition of adjustments and guidelines in their use, refer to the Consolidated Rules for Managing Cancer Waiting Times 2019 (see <https://gov.wales/sites/default/files/publications/2019-09/consolidated-rules-for-managing-cancer-waiting-times.pdf>)

Format: 8 digit numeric, CCYYMMDD

### SCP Target Date (Unadjusted)

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Target date of SCP pathway. This is an unadjusted target date **which will be incorporated with pathway resets.**

Format: 8 digit numeric, CCYYMMDD

### Reason for Pathway Close

This data item is / was included in the following data sets / collections between the dates shown:

Data Set / Collection	Valid From	Valid To
SCPC ds	1 <sup>st</sup> January 2021	

Indicator as to why the pathway was closed.

Format: 1 digit numeric

Value	Meaning
1	Downgraded
2	Treated
3	Deceased
4	Other

Examples of 'Other' could include instances such as:

- Metastasis
- Recording error
- Patient opted to be managed privately
- Patient treated outside of Wales
- Patient refused investigations/treatment
- Uncertain episode
- **Recurrent**

## **Addendum**

As a result of the publication of the Single Cancer Pathway standard, the new reporting approach consequently replaces the Urgent Suspected Cancer (USC) and non-Urgent Suspected Cancer (nUSC) standards. The term *Single* was originally used for this standard to identify this pathway against the other pathways. As this will now be the only pathway going forward, the name of this standard has been amended to *Suspected Cancer Pathway*. The amended terminology is aligned with the latest release of the [Welsh Health Circular](#) (WHC) and [Cancer Wait Times](#) (CWT) guidance, in which this standard will be referred to as *Suspected Cancer Pathway* as of February 2021.