

Changes to Cancer Waiting Times and what that means for primary care and 2WW referrals.

From 1st October, cancer waiting time standards are being modernised and simplified, moving to three measures:

- 28-day Faster Diagnosis Standard – diagnosis or ruling out of cancer within 28 days of referral (target 75%)
- 31-day Treatment Standard – a first treatment within a month of decision to treat for all cancer patients (target 96%)
- 62-day Treatment Standard – a first treatment within two months of referral or consultant upgrade (target 85%)

Faster Diagnosis is in place already and remains unchanged. Changes taking place are:

- Removal of 2-week-wait standard
- Combining existing 31-day first and subsequent treatment standards into one
- Expanding 62-day standard to include patients from screening and consultant upgrade as well as those referred by a GP.

There will be no change to how GPs refer patients onto a suspected cancer pathway. All changes will be made in the reporting of the standard. The changes will allow more focus on outcomes not processes and encourage modern cancer diagnostic practices like one-stop-shops, remote image review, and straight-to-test.

The Faster Diagnosis Standard target will increase gradually to 80% by 2026.

More information is available here: [NHS England » Cancer](#)

What does this mean for your patients?

1. There is no change to the criteria for suspected cancer referral but the 2ww term will be removed and replaced by 'fast track' suspected cancer referral.
2. Most people will be seen or have their first test within 2 weeks. Many will be seen within 7 days or even sooner meaning it is important to note to patients that they may be seen very quickly.
3. Most referrals are already triaged within hours of being sent on eRS.
4. It is still very important that all the information specified on the referral form is included with the referral.
5. The advice to patients to expect contact within 2 weeks should stay the same. This should be part of your safety-netting advice to your patients.
6. Continue to safety-net suspected cancer referrals to make sure the referral and first contact has been completed.
7. The patient information leaflet has been updated in time for the changes on 1st October. Please give your patient a link to or the hard copy of the appropriate leaflet for the trust you are referring to. The hyperlink to the page for the PIL including easy read version is on every referral form.
8. The first date of contact with the patient and secondary care will still be recorded by secondary care. This performance data will still be available to the Northern Cancer Alliance and cancer locality groups. This information will still be used to support quality improvement in pathways.

If you require any further information, please contact: england.nca@nhs.net