Dear Colleagues,

Changes to cancer waiting times standards from 1 October 2023

We are writing to update you on changes to cancer waiting times standards that have been agreed between NHS England and the Department of Health and Social Care (DHSC), and which will come into effect from 1 October 2023.

In 2018, the Prime Minister asked Professor Sir Steve Powis, NHS England’s Medical Director, to lead the first review of cancer waiting times Standards in almost 10 years. This review aimed to make sure that they were appropriately aligned with modern clinical practice, and took into account the recommendation of the 2015 Independent Cancer Taskforce (chaired by Sir Harpal Kumar, then Chief Executive of Cancer Research UK) to remove the two-week wait standard in favour of the Faster Diagnosis Standard.

This review concluded in early 2020, but implementation has been delayed due to the need to focus on restoration of services following the initial phase of the pandemic, and specifically the need to lower the 62-day backlog.

With the 62-day backlog having fallen from its peak of over 34,000 patients to just around 21,000 today, and a shared confidence that it will fall further still by the end of the year, NHS England and DHSC agree that now is the right time to implement these changes and focus on the measures that matter most for cancer patients and clinical outcomes.
There are currently 10 different waiting times standards applied to NHS cancer diagnosis and treatment. This set of standards has grown over time, increasingly becoming unwieldy for trusts to manage and confusing for patients.

The two-week wait standard in particular has not significantly changed in over 20 years since its introduction; it is increasingly at odds with what is best for patients with the advent of straight to test pathways, the modern reality and convenience of remote consultations, and the impending technological revolution offered by artificial intelligence.

The changes we are announcing today include the removal of the two-week wait standard in favour of a focus on the Faster Diagnosis Standard, and the rationalisation of those standards into three core measures for the NHS:

- The 28-day Faster Diagnosis Standard (75%)
- One headline 62-day referral to treatment standard (85%)
- One headline 31-day decision to treat to treatment standard (96%)

All three of these performance standards are key measures of performance, and we remain committed to all three.

Most of the performance standards are pledges in the handbook to the NHS constitution, which DHSC has confirmed will be updated and published prior to the 1 October implementation date.

The two-week wait standard is also included in the NHS Commissioning Board and Clinical Commissioning Groups (Responsibilities and Standing Rules) Regulations 2012, which the Government has agreed it will formally amend in due course. Amendments will also be made to the NHS Standard Contract at the earliest opportunity to reflect the changes.

These changes to the way cancer waiting times are measured and performance managed will come into effect from 1 October 2023. In support of this, NHS England is today releasing a new version of the cancer waiting times guidance, setting out clearly how providers should give effect to the changes.

The cancer waiting times dataset will not change because of these changes, including the recording of the point at which a patient is first seen, and providers should continue to submit all data items as they have done previously.
Providers will therefore be able to track time to ‘first seen’ (the current two-week wait) in both local and national datasets for the purposes of managing different phases of the pathway. We will continue to publish the current data breakdowns for the standards.

**Performance expectations**

Importantly, these changes also provide the NHS with the opportunity to pivot back to focusing on the core constitutional standards, and to ensure we are collectively focused on supporting services to improve cancer waiting times performance against these. Alongside this update to cancer waiting times standards, we are therefore also confirming that:

1. The Faster Diagnosis Standard, currently set at 75%, will be rising to be set at 80% in 2025/26.

   NHS England set out its intent to set a higher threshold for this standard over time when it was first introduced, and with the target being met for the first time since its inception in February 2023, together with £2.3bn of investment in extra diagnostic capacity over the current spending review period, it is the right time to set a clear timeframe for these changes.

   Trusts should ensure diagnostic capacity investment is suitably prioritised for cancer pathways in anticipation of these changes, and an interim target for 2024/25 will be confirmed in next year’s planning guidance.

   In most trusts performance against all tumour types will need to improve to meet these standards, and we would expect performance against breast and skin specifically to need to be above 90%.

2. Where services have reduced their backlogs to manageable levels, focus should now be shifted back onto improving performance against the headline 62-day standard.

   Nationally we are expecting to achieve 70% by March 2024, although we understand the impact ongoing industrial action could have on this, and NHS England will confirm further levels of improvement towards pre-pandemic levels in the 2024/25 Planning Guidance.

   Individual provider trajectories for 2024/25 will be agreed as part of this process, and systems and providers with outlying performance levels within 2023/24 will be supported and overseen via the existing NHS England tiering system.
We would also like to take this opportunity to thank you for the continued work you are all undertaking to support the recovery of cancer services since the height of the pandemic.

Reversing the upward trend in the backlog, achieving the Faster Diagnosis Standard target for the first time, and the ongoing increases we are seeing in the early diagnosis rate are all significant achievements, and reflect the hard work of staff across both cancer services and primary care. We recognise that ongoing industrial action provides challenges to maintaining this positive progress, but look forward to continuing to work with you over this next phase of cancer services recovery.

Yours sincerely,

Sir James Mackey  
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NHS England

Will Quince MP  
Minister of State for Health and Secondary Care  
Department of Health and Social Care

Professor Sir Stephen Powis  
National Medical Director  
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Professor Peter Johnson  
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Dame Cally Palmer  
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