

## **Top tips for delivering the two week wait standard for breast symptoms (where cancer is not initially suspected) – VSA08**

Breast services across the country have made significant improvements to their pathways over the past 12 months and patients with breast symptoms can now benefit from faster access to clinical expertise.

Nationally, the NHS is achieving the 2WW symptomatic breast standard but some organisations are continuing to find it challenging to meet or sustain performance in this area.

The following tips are based on good practice taking place within Trusts, PCTs and cancer networks across the NHS; it is not exhaustive and not all of the advice is applicable to all services:

- 1. Encourage your GPs to play their part**
- 2. Make sure you are getting the referral data you need**
- 3. Ensure referrals are received in a timely manner**
- 4. Don't hold referrals up with unnecessary triaging**
- 5. Have an efficient booking system in place**
- 6. Ensure there is sufficient capacity early enough**
- 7. Review the clinic set up and structure**
- 8. Make sure all teams are aware of cancer waits rules**
- 9. Get the best out of Choose and Book**
- 10. Ask for additional support from NHS IMAS if you need it**

We expand on each of these tips in Annex A.

Where appropriate, more detailed guidance is available from the Intensive Support Team and National Cancer Action Team.

## Annex A

### 1. Are your GPs playing their part?

- Are your local GPs aware of the standard for symptomatic breast referrals?
- Are your GPs discussing the accelerated breast pathway with their patients and the need to be available for an appointment within 2 weeks prior to sending the referral?
- Are GPs ensuring that the correct and most up to date telephone contact details are being confirmed with the patient prior to making the referral?

### 2. Are you getting the information you need?

- Has your network or Trust agreed a referral proforma (which can be used for both suspected cancer and symptomatic breast referrals)?
- Does the proforma have a tick box that allows the Trust to identify which pathway (symptomatic breast or suspected cancer) the referral should be directed on?

***Consider adding the following questions to your 2WW breast proforma as a helpful reminder for the referrer and as an audit collection tool:***

1. *Has the patient been made aware of the nature of their referral?*
2. *Has the patient confirmed that they can be available to attend an appointment within the next two weeks?*
3. *Has the patient been supplied with supportive information about the rapid access breast referral process? (This is especially relevant where the Trust has one-stop breast services).*

### 3. Are referrals being received in a timely manner?

- Has your Trust agreed one single route for receipt of 2WW referrals (including symptomatic breast and suspected cancer referrals) into the organisation?
- Has this single route of referral been proactively communicated to GPs?
- Are your GPs clear that 2WW referrals (including symptomatic breast referrals) should not be sent to a referral management centre (RMC) for review and should instead be sent directly to the Trust?

#### **4. Are referrals being held up by unnecessary triaging processes?**

- Does your Trust have a protocol in place so that 2WW referrals can be booked immediately by the appointments team and not have to go to the clinical team for triage first?

#### **5. How efficient is your booking system?**

- Does your Trust have a dedicated booking team for 2WW symptomatic breast and 2WW suspected cancer referrals?
- Does your Trust's appointment booking team operate extended hours?
- Does this team ring every patient to negotiate their appointment prior to sending out a fixed appointment by letter?
- If your organisation is across multiple sites, are booking processes being applied consistently across sites?
- Do you have a process in place to feed back to GPs referral quality concerns?

#### **6. Do you have sufficient capacity early enough?**

- Does your Trust have sufficient capacity to ensure that appointments are being offered with a median waiting time of 7-8 days from receipt of referral?
- Has the Trust undertaken in depth demand and capacity review to ensure that there is sufficient substantive capacity within the system that can also be flexed to accommodate variation?

#### **7. Have you reviewed the clinic set up and structure?**

- Has the Trust introduced a one-stop clinic model where possible?
- Does your Trust have a spread of clinics/appointment slots for new patients over the week e.g. Mon, Wed, Fri rather than Mon & Tues?
- Has your Trust considered introducing evening clinics where appropriate/possible?

## 8. Are your teams aware of the cancer waits rules?

- Does your organisation have a cancer access policy that is in keeping with the latest Going Further on Cancer Waits guidance<sup>1</sup> and puts patients' needs first?
- Has your organisation delivered appropriate training and awareness sessions for key staff groups who have a role to play in ensuring patients are seen in a timely manner along the whole of their cancer pathway?

## 9. Is your organisation getting the best out of Choose and Book?

- Has your Trust implemented 2WW symptomatic breast services on Choose and Book?
- Does your Trust ensure that there are consistently sufficient appointment slots available so that patients do not experience slot issues on Choose and Book?

## 10. Would your organisation benefit from further support?

The National Cancer Action Team has published excellent guidance documents on implementing the 2WW symptomatic breast pathway and sustaining cancer waits within organisations. These documents can be accessed here:

- [www.improvement.nhs.uk/Publication/tabid/56/Default.aspx](http://www.improvement.nhs.uk/Publication/tabid/56/Default.aspx)
- [www.ncin.org.uk/data/gfocw.shtml](http://www.ncin.org.uk/data/gfocw.shtml)

If you feel your organisation would benefit from further support, the Intensive Support Team (part of NHS IMAS) would be pleased to work with your local health community. Please contact Ros Gray, Head of Intensive Support for an initial discussion at [roslyn.gray@southwest.nhs.uk](mailto:roslyn.gray@southwest.nhs.uk).

### References

1. Going Further on Cancer Waits (latest version 6.7)  
<http://nww.connectingforhealth.nhs.uk/nhais/cancerwaiting/documentation>

An electronic version of this guidance can be found on the NCIN website:

[www.ncin.org.uk/Breast2ww/](http://www.ncin.org.uk/Breast2ww/)