

We are compassionate
We are inclusive
We are respectful



University Hospitals Sussex
NHS Foundation Trust

Cancer Annual Review

HOSC Meeting
June 2026

Excellent Care Everywhere

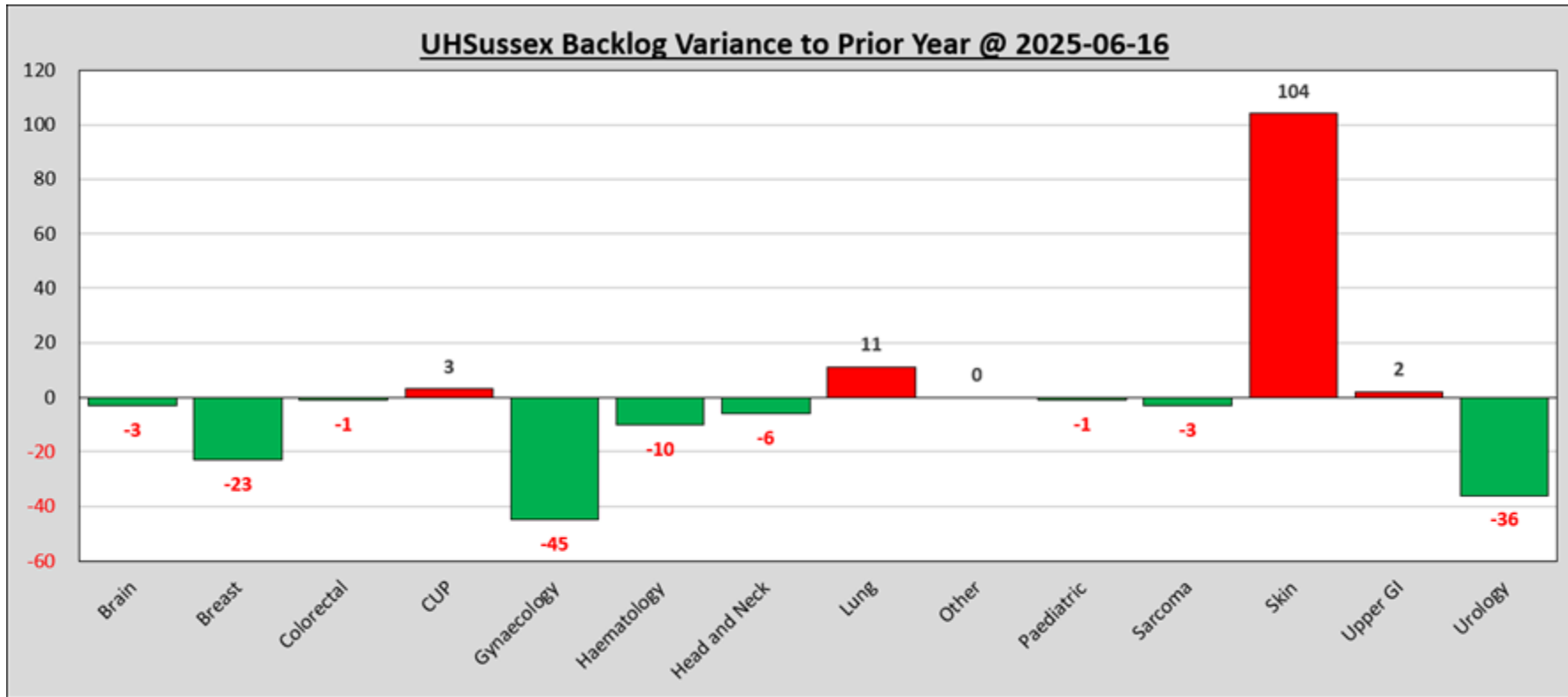
Cancer Constitutional Standards

Progress being made but not at the pace required for our patients:

- **Faster Diagnosis (28 days to diagnosis)**
 - 2023/24 12-month average = 65.3%
 - 2024/25 12-month average = 70.5% (+5.2 pp)
 - 2025/26 12-month average = 76.0% (+5.5 pp)
- **62 Days to Treatment**
 - 2023/24 12-month average = 55.1%
 - 2024/25 12-month average = 60.1% (+5.0 pp)
 - 2025/26 12-month average = 63.8% (+3.7 pp)
 - Reaching a Trust high of 72.4% in March 2026
- **31 Days DTT to Treatment**
 - Around 80% of patients treated within 31-days of a Decision-To-Treat
 - National standard is 96%, with national improvement target of 94% by March 2027
 - Biggest challenges with surgery first treatment and radiotherapy (RT) subsequent treatments

Cancer PTL Backlog

Definition: The number of patients on the Cancer Patient Tracking List (PTL) who are over 62 days into their pathway is used by NHS England as a gauge for good patient pathway management.



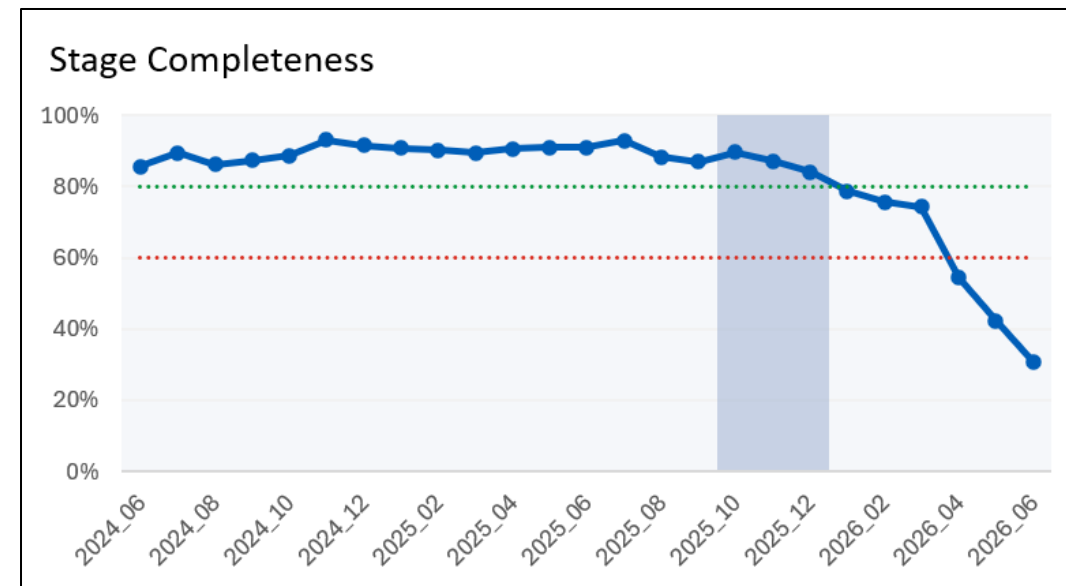
Improvements in volume of patients waiting over 62 days has improved across all tumour sites except Skin which has over 100 pts waiting over 62D more than 12 months ago – this is linked to seasonality which affects Skin cancer performance across the country

Cancer Outcomes and Services Dataset (COSD)

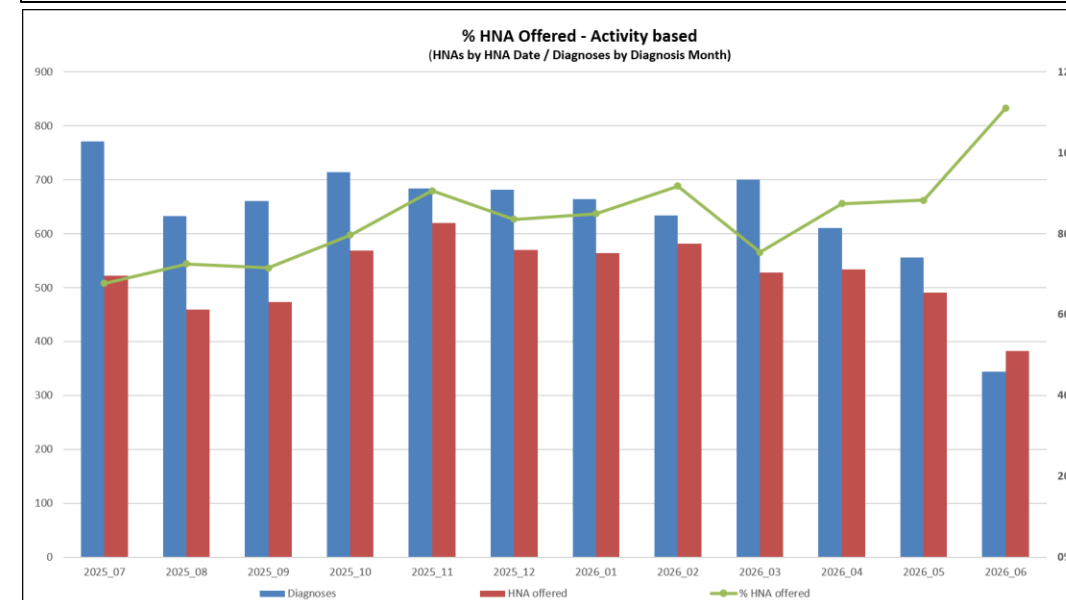


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- Staging Completeness
 - Significant work has been undertaken to redesign the data capture and monitoring processes, and to retrospectively go back and recapture missing data which has impacted positively on timely data capture and therefore data quality.
 - Jan-Mar 2023 = 63.8%
 - Jan-Mar 2024 = 74.7% (+10.9%)
 - Oct-Dec 2025 = 82.4% (+7.7%)
- (most recent “quarter of interest” shaded blue in the graph on the right)



- Holistic Needs Assessments
 - Patient welfare reviews, to signpost patients to the right support, information and help
 - Covers psycho-social wellbeing, financial, nutritional and physical wellness
 - Rebuild of Trust “Cancer Information” patient website currently underway for better accessibility, formatting and timely information



MDT Transformation

- Agenda
 - Continued roll-out of automated circulation of MDT Meeting Agendas
 - Standardised layout
 - More effective use of workforce
 - Work underway to digitally support MDT preparation
- Standards of Care (SOC)
 - Development and implementation of SOC to optimise MDT Meetings
 - Continued work on this is required to embed current practices
- MDT Meeting Outcomes
 - Working to ensure all MDT Meeting outcomes are visible to Trust-wide clinicians
 - Digital solution to make this more efficient and consistent

- Improved turnaround times (TAT) for Endoscopy access for suspected cancer patients
 - From an average of 44.5% TAT within 10 days of request in 2024/25 to 63.3% in 2025/26 (to note YTD in 2026/27 10-day TAT performance is 76.1%)
- Patient Stratified Follow-Up (PSFU)
 - Implemented PSFU protocolised follow-up pathway for Colorectal and Prostate Trust-wide
 - Just finalising last bits for full go-live in Breast
 - Already well underway in developing the SOP's and procedure guides for Endometrial, High-Grade Lymphoma and Uveal Melanoma
- RT Operational Transformation
 - Review of demand & capacity (seeking outsourcing and mutual aid) and recovery trajectories
 - Review of internal use of data, to better understand the specific issues
 - Looking to develop a real-time pathway capacity report (i.e. no. of pts waiting CT, waiting voluming, waiting start date, waiting to start, waiting follow-up dose)

- Relocation of LGI Surgery from Brighton to Worthing
 - Significant transformation project to move all LGI cancer surgery to Worthing involving complete remapping of pathways and appointment of 4 new surgeons
 - Benefits relate to improved access to theatres and zero cancellations on the day which was often a theme in RSCH due to acute pressures on the site
 - 62D performance has improved but still work to do in the middle part of the pathway (diagnosis to decision to treat)
- Skin Demand & Capacity
 - Detailed assessment of demand based on machine learning of past 5 years of referral patterns
 - Capacity review including:
 - Base funded capacity
 - Internal options for extra capacity
 - Externally sourced capacity (insourcing and outsourcing)

- NHS Cancer Plan – in partnership with SSCA and ICB – roadmap to meet key ambitions (community/digital/prevention)
- Full recovery of radiotherapy delays by Christmas 26 – new (additional) linear accelerator due for installation July 26
- Best use of our workforce
 - Optimising pathways
 - right test first time
 - linked to the frailty work, test requirements
 - Utilising digital solutions
 - EPR
 - Using our systems more holistically for patients
- Building inequalities into our daily work
 - Plain English letters to patients
 - Looking at areas of higher late-stage presentation for patterns and unmet needs
 - Considering frailty earlier in the pathways to better manage these patients
 - Continuing to support Lung Cancer Screening to identify patients at an earlier stage

New Sussex Cancer Centre at RSCH

The new Sussex Cancer Centre is a unique catalyst for improvement and transformation

- Transforming treatment – *best-practice care*
- Transforming experience - *a healing place*
- Transforming research - *improving outcomes*

Foundation Stone Ceremony - 22 May 2026

Opening for patients - Spring 2029

