



## MEMBERS UPDATE

### 7th January 2019

Dear All,

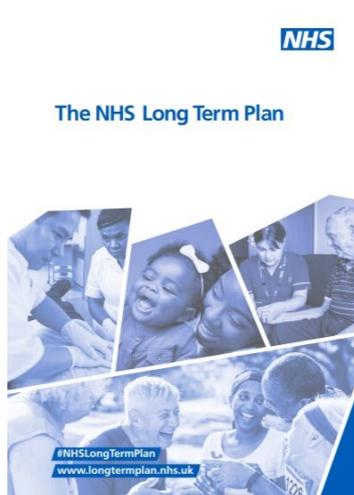
I hope you are well and enjoying your return from the festive break .... and a quick update to let you know if you don't already that the full NHS Long Term Plan is now available on [the NHS Long Term Plan website](#).

Topline plans for cancer run for about five pages from page 56.

Our initial response is as below. We will also be working up a more detailed response over the next week or so with the help of our policy group which we will also share.

In the interim - we also went live today with our film of patient voices of people with rare and less common cancers - available on [our website](#) and via our [twitter](#) feed. Please do retweet/onwardly share etc to help keep a focus on people with rare and less common cancers.

### Cancer52 welcomes Long Term Plan



This is an ambitious plan by NHS England to move more care into the community and out of hospital, accompanied by increased funding for primary and community care, as well as continuing the trend of greater integration of services.

The cancer commitments are relatively few but hearteningly take an 'all cancer' approach, which by definition includes rare and less common cancers, instead of previous approaches, which have sometimes prioritised the four more common cancers.

Cancer52 specifically welcomes the following cancer commitment.

- The ambition to ensure that 75% of cancers are diagnosed at stage 1 and 2 by 2028
- A commitment to collect data for all patients in 2019 to support the development of the faster diagnosis standard, which will be rolled out from 2020 and will ensure that people have cancer ruled in or out within 28 days from a referral by their GP or from screening
- Increasing the roll out of Rapid Diagnostic Centres (RDCs) from 2019 to help the diagnosis of cancer, and allowing self referral by patients
- Extending the use of molecular diagnostics
- That from 2021 all patients will have access to the right support, including a personalised care plan and either a Clinical Nurse Specialist or a support worker

We would however reemphasise the need for an appropriately resourced workforce as staffing gaps are currently impeding our ability to provide world leading cancer care.

Very best wishes and thanks.

Jane Lyons  
CEO  
Cancer52

[www.cancer52.org.uk](http://www.cancer52.org.uk)

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