





December 2020

An update for stakeholders from Wessex Cancer Alliance

To complete the introductions to the RDS team, Kelly Spiller is now working as the RDS Programme Manager following the departure of Jane and the Hub Team being recruited. Kelly has been integral to the roll out of the RDS since the start of the year, supporting PCNS, CCGs and Hospital Trusts with all aspects of the RDS set up and infrastructure.

The RDS has now gone live with Hampshire Hospitals Foundation Trust (HHFT) and so there only remains a few Hampshire CCG areas to go live. These few final areas will be able to refer to the RDS before the end of January 2021, in line with our planned roll out of this service.

To date, the RDS has received and accepted 39 referrals and at this stage, no one has been referred onto a cancer pathway, however we do know that the filter tests that are mandatory before referral, have led to some patients, being put on a tumour site specific pathway as a result of those tests. We will continue to monitor the referrals process as the service expands into the new areas.

Work is starting to look at breast lump self-referral and dermatology pathways with initial discussions underway with plans to ensure communication and engagement across all Trusts, SSGs, CCGs and other stakeholders in Wessex. This work will start to take further shape in the new year.

At our Steering Group meeting in November, the patient feedback that has been collated to date by Wessex Voices on behalf of the RDS, was raised on the Agenda. One of the common themes that was shared with the group, was that there had been a misconception that the RDS would be able to provide a confirmed diagnosis, be that of a cancer or otherwise, for patients referred to this service. Patients felt they were not made aware that the service was designed to rule out, or diagnose cancer, but was not able to always offer a diagnosis. For this reason, a decision to rename the service, was agreed. From January 4, 2021 the RDS will become the **Rapid Investigation Service** (RIS) and leaflets as well as website copy, will make it clear that the service is not always going to be able to offer a diagnosis for the patients' symptoms. The <u>Cancer Matters Wessex website</u> has a downloadable service leaflet, which will be updated and is available for you to use at anytime.

As well as providing useful feedback which has already been used to enhance some aspects of the service, including the name change, there has also been some very positive feedback from patients, in particular around how supported they have felt during their time with the service. To use some direct quotes which are representative of the overall feedback one patients said the RDS was, 'very good at coming back and talking it all through,' and 'a damn good team – great at working together'.

We would like to thank the patients who took part in this initial feedback, our engagement with patients will continue and we will use the insight to inform future decisions and amendments to the service as we have done on this occasion.