

West Midlands Cancer Alliance (WMCA)

29th January 2025

Board Briefing Note

For the attention of WMCA Board Members, Accountable Officers, CEOs, Cancer Managers and Cancer Leads in ICB and provider organisations:

The WMCA Board met face to face on Wednesday 29th January 2025 to review the work and progress of the partner organisations in the WMCA. The meeting was chaired by Professor Andy Hardy, CEO of University Hospitals Coventry and Warwickshire (UHCW). The Board had representation from five out of six West Midlands Integrated Care Systems (ICs). It also had representatives from Specialised Commissioning, Screening, Healthwatch, Public Health, NHS England (NHSE) and patient representation.

PRESENTATIONS

Community Diagnostic Centres (CDCs)

A presentation was given on the Diagnostics Programme showing the mapping of operational CDCs in the region, CDC activity and impact, performance, and future CDC locations for 2025/2026. Each ICB area has been asked to deliver on three priority pathways and funding for pathway redesign has begun for the breathlessness pathway, children and young people's asthma and cancer and Women's Health. A major focus for 2025/2026 will be reforming elective care for patients and supporting the re-development of 10 pathways by March 2026. Further growth is expected in the CDC programme for 2026/2027, including increasing links with elective care to assist one-stop pathways. For further information contact andrea.pettitt1@nhs.net

PERFORMANCE & PROGRAMME UPDATE:

Screening:

Bowel Cancer Screening Summary

All centres have commenced, or are planning to commence, the remaining age extension cohorts for age fifty-two and age fifty. These will go live by the end of March.

Breast Screening Summary

There are no reported concerns across the West Midlands but pressure points for screening and symptomatic are visible in the East. An advanced awareness and information campaign for breast screening will be launched on 17th February 2025 which will run until the end of March. A pin notice has been shared, and a bespoke survey is being developed for

stakeholders and patients to better understand what breast screen services will look like in the future and what patients require from this offer.

Cervical Screening Summary

There are no reported concerns, but turnaround times are being monitored. Coloscopy referrals continue to be monitored as these remain a pressure point regarding the onwards referral pathway. In Q4, more information about HPV self-sampling for non-responders will be available. For more information contact stephanie.beaumont@nhs.net.

Performance Update - The Royal Wolverhampton NHS Trust has been downgraded from Tier 1 to Tier 2, thresholds have been shared Tier 1 and Tier 2.

28-day Faster Diagnosis - The national target for this standard is 77% and WMCA November performance was 74.8%. The Electronic Patient Record (EPR) system at UHCW remains the biggest factor is FDS performance, but they have shown significant upturning of 7.6% for November.

31-day Treatment standard – These will not be incorporated into the quarterly review tiering this summer.

62-day referral to treatment – The interim national target for this standard is 70% and WMCA November performance was 63.9%. Intensive work is ongoing at WMCA to support West Midlands Trusts in improving cancer waiting time performance, and the alliance was the fourth most improved alliance in the country. For more information contact: andy.field2@nhs.net.

Q3 REPORT AND PROGRAMME OVERVIEW:

The Q3 report has been submitted and areas of achievement included agreement of unscheduled bleeding on HRT pathway, the establishment of two new clinical pathway leads for head and neck, MDT optimisation and the Lung Screening programme. Areas of concern included the liver programme, navigator posts and non-specific symptoms pathways. For further details contact debra.palmer2@nhs.net.

Early Diagnosis – An early diagnosis dashboard has been created and WMCA will be working with Public Health to help target health inequalities. Extra support is being allocated to FIT to ensure data quality and WMCA are working on an application for the national pancreatic case-finding pilot.

Operational performance and improvement – Urology remains a pathway of concern. A n additional clinical lead and project support being allocated to support the pathway. GIRFT sessions have now been circulated for Breast, and WMCA now have a well-established transformation group around genetics, genomics and cellular pathology.

Treatment and care - From April 2025, staff delivering chemotherapy will have access to a training module, created with Birmingham City University, which links directly to quality and patient safety.

PROGRAMME FOCUSED UPDATES:

Peer Review Update - This update was presented to introduce a quality framework and review process for all cancer pathway providers in WMCA. This framework will aid shared learning, improved outcomes, and will highlight good practice for all MDT Cancer Pathways for all tumour types in the WMCA by the end of Q4 2025/2026. For more information contact: marie-claire.wigley@nhs.net

Personalised Care – Prehabilitation update – The board was asked to support the development of a framework and set of standards to support the delivery of high-quality personalised care and prehabilitation in the West Midlands. The outputs of this work would be implemented in ICBs and providers to support future sustainable commissioning of personalised care services. For more information contact: joanna.fairhurst4@nhs.net

BUSINESS AND GOVERNANCE:

WMCA Finance Report:

A summary report of allocations and spend for 2024/2025 was provided to the board.

Papers for Ratification:

The following papers were presented for ratification, and approved by Board members present:

- Endometrial PSFU Protocol
- Merkel Cell Carcinoma (MCC) Guidelines

For further information contact: rwh-tr.wmcanceralliance@nhs.net

FEEDBACK FROM ICS CANCER BOARDS:

Representatives from each ICB Cancer Board in attendance presented updates by exception.

Any Other Business:

Colleagues asked for a directory of meetings and working groups to guarantee representation and to ensure work is not being duplicated.

FOR REFERENCE:

For further information please contact: Sarah Hughes, Managing Director, Midlands Cancer Alliances, email: sarah.hughes25@nhs.net, Telephone: 07876 869436.

Date of next Board Meeting: The next meeting of West Midland Cancer Alliance will be on Wednesday 26 March 2025: 9:30am – 11:30am. This meeting will be held face-to-face only.

Please find below a table showing you who your West Midlands Cancer Alliance ICB representatives are:

ICB	Cancer Alliance Board ICB Representatives Clinical Representative / Cancer SRO
Coventry and Warwickshire	Joseph Hardwicke / Rachael Danter Joseph.hardwicke@uhcw.nhs.uk / rachael.danter1@nhs.net
Staffordshire & Stoke-on-Trent	Gary Free / Helen Ashley gary.free@nhs.net / Helen.Ashley@uhnm.nhs.uk
Birmingham & Solihull	David Peake / Martin Richardson David.Peake@uhb.nhs.uk / Martin.richardson@uhb.nhs.uk
Hereford and Worcestershire	Mari Gay / Angus Thomson marigay@nhs.net / angus.thomson1@nhs.net
Shropshire, Telford & Wrekin	Ned Hobbs / Maureen Wain ned.hobbs1@nhs.net / Maureen.wain1@nhs.net
Black Country	Vacant / Diane Wake d.wake@nhs.net