

West Midlands Cancer Alliance (WMCA) Board Briefing Note

Wednesday 25 March 2026

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

The WMCA Board met on Wednesday 25th March 2026 to review the work and progress of WMCA and its partner organisations. The meeting was chaired by Prof Andy Hardy, Chair WMCA Board. The Board had representation from all West Midlands Integrated Care Systems (ICSSs). It also has representatives from NHSE England Screening and Public Health, Healthwatch and patient representation.

Patient Advocate Report:

Patient Advocate recruitment and therefore involvement is variable across ICBs, with ongoing work to expand numbers, improve diversity and strengthen support. A standardised training offer is being developed, alongside increased use of patient insight in pathway design and communications. For further information contact: carolyn.parker3@nhs.net

Performance and Programme Update:

Performance Update:

Overall cancer performance shows continued improvement, with strong year-on-year gains in Faster Diagnosis Standard despite seasonal pressures. Performance remains 3.3% above the national average with a 4% year on year improvement. The 62-day pathway has also seen a 4% year on year improvement however, some providers remain challenged, particularly in skin, breast and urology pathways, and targeted support is in place. For further information contact: andy.field2@nhs.net

Screening Update:

Screening specifications for 2026/2027 have been issued, with bowel FIT80 on track and digital improvements progressing in cervical screening. Workforce fragility and variable uptake remain key risks, alongside a continued focus on addressing health inequalities. For further information contact: stephanie.beaumont@nhs.net

WMCA Cancer Programme Delivery Group Report:

A detailed programme report was presented. Programme delivery is being strengthened through improved PMO systems and a sharper focus on priority pathways, workforce challenges and health inequalities. The optimisation offer and targeted pathway work remain central to driving sustainable improvement. For further information contact: Debra.palmer2@nhs.net

WMCA Planning 2026 / 2027:

The Alliance has secured three-year funding and is shifting emphasis from short-term recovery to longer-term transformation. Resources are being prioritised towards challenged pathways, early diagnosis and community-based approaches, within a complex national planning environment. For further information contact: sarah.hughes25@nhs.net

Lung Cancer Screening Planning and Trajectories:

WMCA has received the largest national lung cancer screening allocation, supporting expansion to 60% population coverage in 2026/2027. Delivery is on track, but systems are asked to protect funded screening workforce to maintain momentum. For further information contact: Harvir.singh@nhs.net

Cancer Alliance Life Science Hub Update:

The Life Sciences Hub continues to align industry innovation with system-identified cancer pathway challenges, with strong partner engagement and early pilots underway. Board members are encouraged to review current offers and support opportunities for local adoption and scale-up. For further information contact: alison.tonge1@nhs.net

National Cancer Plan:

The National Cancer Plan, published February 2026, provides renewed national ambition around earlier diagnosis, improved survival and quality of life. Further detail around implementation is being developed nationally. Cancer Alliances are well placed to lead coordination and support implementation. For further information contact: sarah.hughes25@nhs.net

Investment Committee and Finance Report:

The 2025/2026 funding allocation has been fully deployed, with a higher provisional envelope for 2026/2027 driven by lung cancer screening expansion. Reductions are expected in later years, highlighting the need for strong financial oversight and sustainable planning. For further information contact: jillian.guild1@nhs.net

Feedback from ICS Cancer Boards:

ICBs reported progress by exception, highlighting local improvements, innovation and engagement activity. Key challenges remain around workforce capacity, pathway resilience and system reorganisation impacts.

Any Other Business:

No other business was noted; therefore, the meeting was closed.

FOR REFERENCE:

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

Date of next Board Meeting: The next meeting of West Midland Cancer Alliance will be on Wednesday 20th May 2026 (9am – 11am). 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
Coventry and Warwickshire	Joseph Hardwicke / Richard Rawlinson Joseph.hardwicke@uhcw.nhs.uk / richardrawlinson@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 / Gareth Wright Ned.hobbs1@nhs.net / gareth.wright3@nhs.net
Black Country	Diane Wake / Gail Fortes-mayor d.wake@nhs.net / g.fortes-mayer@nhs.net