

North East London Cancer Alliance Annual Report

2025-2026



North East London
Cancer Alliance





Contents

1	Introduction to the cancer alliance	4
2	Foreword from Professor Charles Knight OBE, Chair of the Cancer Alliance Board	5
3	The National Context	9
4	The Local Context	11
5	Performance against the national cancer standards	15
6	Early Diagnosis	18
7	Diagnosis and Treatment	24
8	Personalised Cancer Care	33
9	Workforce	38
10	Communications and Engagement	41

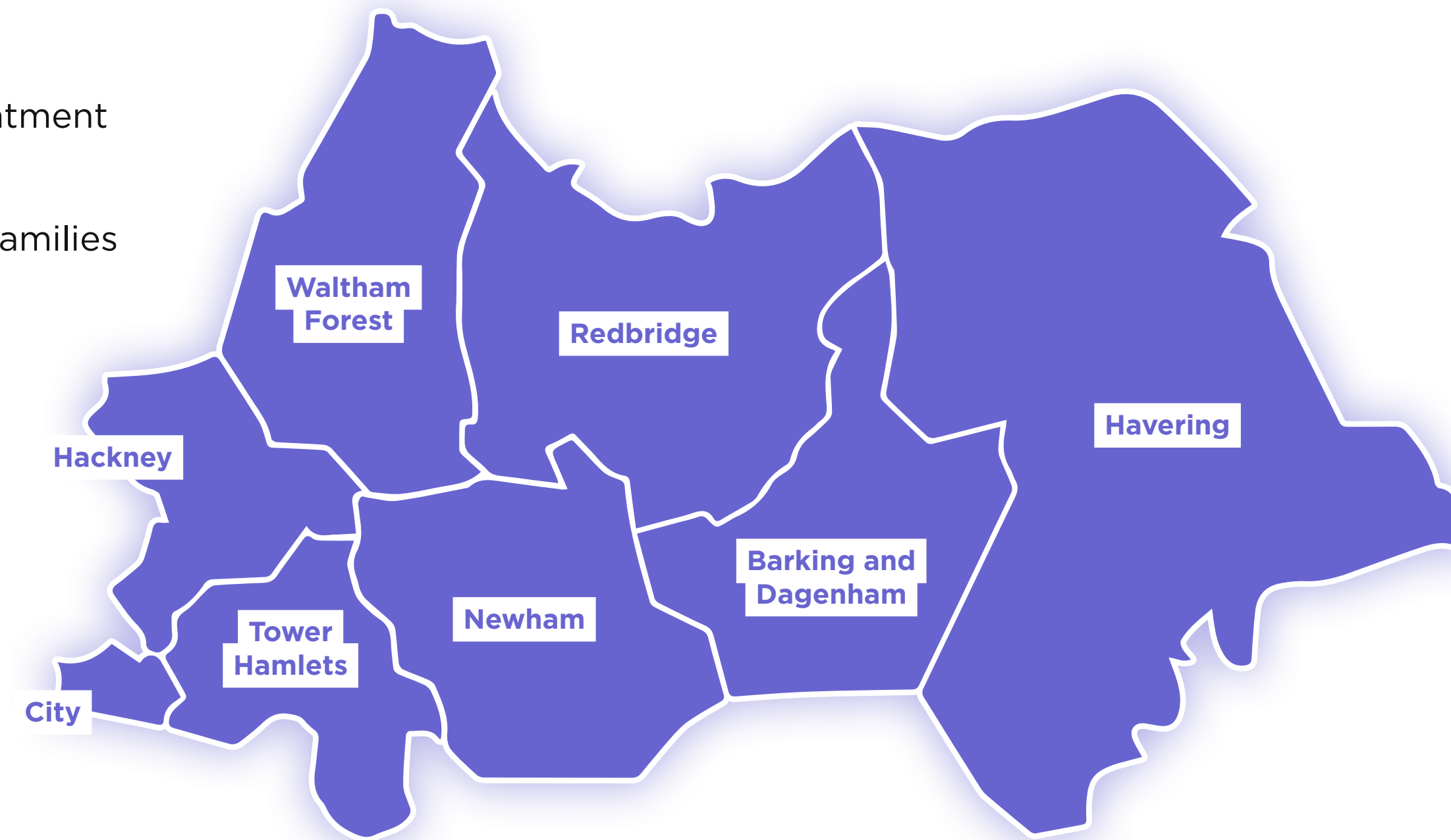
Introduction to the cancer alliance

1

North East London Cancer Alliance works with acute providers, GPs, local authorities, public health, voluntary and community organisations, and the local population to improve local cancer services and reduce health inequalities.

The aim is that everyone has equal access to better cancer services to help:

- prevent cancer
- spot cancer sooner
- provide the right treatment at the right time
- support people and families affected by cancer.



Watch a short video introducing our work:

<https://youtu.be/xsV4kGInu-Q>



Hear from some of our patients:

<https://youtu.be/yQV5JzV0-IQ>



Foreword by Professor Charles Knight OBE, Chair of the Cancer Alliance Board

2



“This has been a defining year for cancer services in north east London. Nationally, the publication of the NHS 10 Year Plan and the new National Cancer Plan sets a bold direction for the future. Locally, we have not only maintained strong performance against national standards, but continued to lead innovation, strengthen our partnerships, and take decisive action to reduce the stark health inequalities experienced by our communities.

At North East London Cancer Alliance, we are clear in our ambition: to ensure that every resident, regardless of background, circumstance or postcode, has access to timely, high-quality cancer care and the best possible outcomes. In one of the most diverse and complex populations in the country, this ambition matters more than ever.

World Cancer Day this year, marked by the theme *United by Unique*, could not better reflect our population. North East London is home to extraordinary diversity, but also to significant inequality: over half of residents are from minority ethnic backgrounds, around one in four live in some of the most deprived neighbourhoods in England, and more than 200 languages are spoken across our communities. These factors shape how people access and experience cancer services, and too often result in unequal outcomes.

Foreword by Professor Charles Knight OBE, Chair of the Cancer Alliance Board

Tackling these inequalities remains at the heart of everything we do. This year we have continued to deliver targeted, community-led interventions that are making a measurable difference. Our award-winning *You Need To Know* campaign has improved awareness and outcomes in womb cancer among Black African, Black Caribbean and South Asian women, and has also enhanced understanding of the symptoms of ovarian cancer in local communities.

We have partnered with Friends, Families and Travellers and the Roma Support Group to recruit and train 13 Health Champions, resulting in better health outcomes for Gypsy, Roma and Traveller communities. This project also received the accolade of being the Regional Champion for Improving Health Outcomes in the NHS Excellence Awards.

Our Lung Cancer Screening Programme continues to deliver strong results, particularly in deprived neighbourhoods, supporting earlier diagnosis and saving lives.

We are especially proud that our HPV self-sampling programme was recognised in the National Cancer Plan as a national case study. By offering over 27,000 kits across five London boroughs, we reached communities with historically low screening uptake. The response, particularly among ethnic minority and more deprived populations, demonstrates the power of innovation to reduce inequalities and transform access to care.

Looking ahead, the priorities set out in the National Cancer Plan closely align with our local direction. The three major shifts - from analogue to digital, from sickness to prevention, and from hospital to community - are already shaping our work.



Foreword by Professor Charles Knight OBE, Chair of the Cancer Alliance Board

We are embracing digital innovation, including the use of artificial intelligence to dramatically reduce diagnostic waiting times for lung cancer, and expanding similar approaches in other pathways. We continue to prioritise prevention and early diagnosis through targeted campaigns and the expansion of Community Diagnostic Centres, bringing services closer to where people live.

At the same time, we are strengthening support for people living with and beyond cancer, ensuring care extends beyond treatment into recovery and wellbeing.

Our performance remains one of the strongest nationally. We consistently met the Faster Diagnosis Standard – as of November 2025 we were ranked in first place nationally - which aims for 75% of patients to receive a diagnosis or ruling out of cancer within 28 days.

Partnership working is central to our success. Primary care, community pharmacies and our voluntary, community and social enterprise (VCSE) partners play a vital role in reaching underserved communities. Through neighbourhood-based approaches, we are building trust, tailoring services to local needs, and embedding cancer prevention and early diagnosis into everyday community life.



Foreword by Professor Charles Knight OBE, Chair of the Cancer Alliance Board

None of this progress would be possible without our workforce. This year we have developed a new Cancer Workforce Strategy to ensure we have the capacity, skills and support needed for the future. By investing in our people and creating opportunities across organisational boundaries, we are building a workforce that is resilient, representative and equipped to deliver compassionate, high-quality care.

Looking ahead, we have laid the foundations for the future through the development of three core strategies: our Artificial Intelligence Strategy, Health Inequalities Strategy, and Workforce Strategy. Together, these will guide our next phase of delivery and ensure we continue to meet both national ambitions and the needs of our local population.

While we are proud of the progress made this year, we are not complacent. Significant challenges remain, and there is more to do. But with strong partnerships, a clear strategic direction, and an unwavering focus on equity and outcomes, we are well placed to continue improving cancer care for all our residents.

We will keep our webpages and communications channels updated on our progress, and we look forward to working with you on this exciting journey ahead which is set to improve local cancer services even more.



Charles Knight
Chief Executive,
St Bartholomew's Hospital
and Chair of the Cancer
Alliance Board

The National Context

3

“What is set out in the National Cancer Plan gives us a real opportunity to build on the strong platform we have created over the last few years.

Personally, I am very excited by what the plan offers. It is ambitious, but also realistic and achievable. We have already made significant progress over the past five years, and the potential for what we can deliver over the next ten years is genuinely inspiring.”



Femi Odewale
Managing Director,
North East London
Cancer Alliance



It was World Cancer Day on 4 February 2026, and this day also marked the launch of the much-anticipated NHS National Cancer Plan.

This followed the NHS 10 Year Plan – Fit for the Future - which was launched on July 3, 2025.

10 Year Health Plan’s 3 shifts

The three big shifts outlined in the NHS 10 Year-Plan will transform how we deliver cancer services:

- **Analogue to digital:** harnessing new technology to improve access, efficiency and outcomes
- **Sickness to prevention:** accelerating work on primary prevention and early diagnosis
- **Hospital to community:** improving support to people before, during and after treatment, and for people living with and beyond cancer



The Cancer Plan is structured around 6 key themes

- 1

Driving up NHS cancer performance
- 2

Becoming a global leader in cancer outcomes by 2035
- 3

Designing cancer care around people's lives
- 4

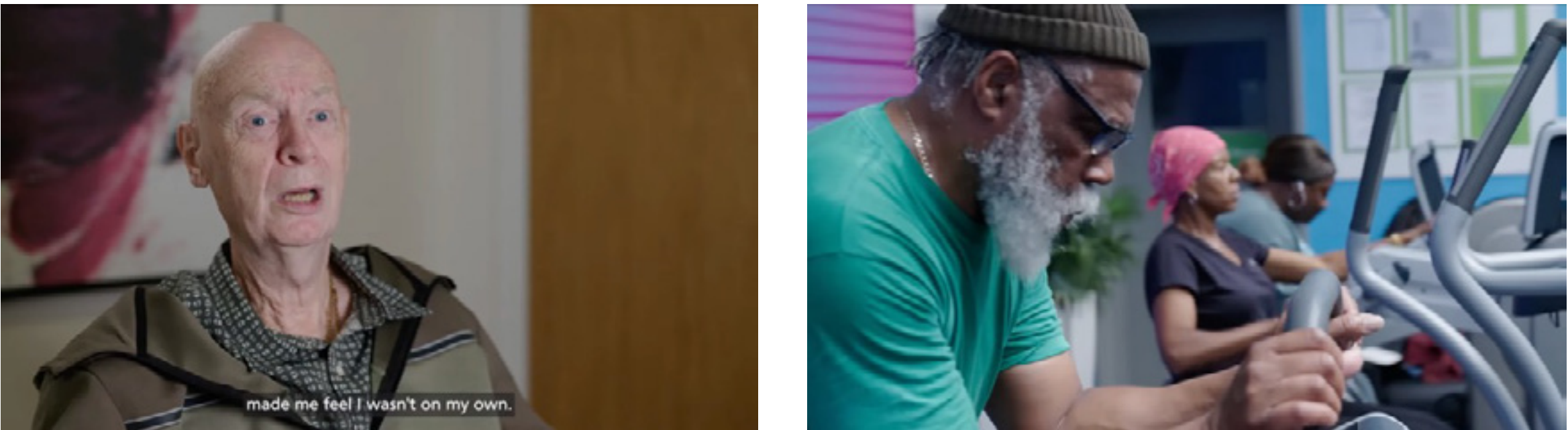
Delivering world class cancer care through world class research
- 5

Tackling cancer in children and young people
- 6

Prioritising rare and less common cancers

Delivering across these priorities will make England a global leader in cancer care over the next 10 years

The NHS has 3 key ambitions in cancer



- We will meet the Cancer Waiting Time standards by the end of this Parliament
- By 2035, three in four people diagnosed with cancer will be cancer-free, or living well with cancer after five years
- We will meet the Cancer Waiting Time standards by the end of this Parliament

The Local Context

4

Latest figures for cancer diagnoses in north east London show that:

In the financial year 2025 to 2026, there were

10,651 individuals

(as of March 2026) diagnosed with cancer, compared to the full year number of 11,403 individuals in 2024/25, 11,144 in 2023/24 and 10,996 in 2022/23.

The number of people living with cancer in 2025/26 (as of March 2026) was

57,124

compared to 54,507 in 2024/25 and 51,943 in 2023/24.

The number of people referred for a cancer diagnosis in 2025/26 was

92,075

(covering Apr 25 to Mar 26 Faster Diagnosis Standard) compared to 88,040 in 2024/25.

Of these people referred,

88,817

(covering Apr 25 to Mar 26 Faster Diagnosis Standard), or 96.5%, were given the all clear, compared to 84,898 (96.4%) in 2024/25.

Top killers in north east London by cancer type are:

Lung

19%

Upper Gi

19%

Colorectal

13%

Urology

11%

Latest Cancer Survival in England published by NHSE shows that the top cancers in north east London with low ranges in 1-year survival are Melanoma at 97.3% (Eng 98.2%) and Breast at 96.1% (Eng 97.2%).

Impact of deprivation

Between April and November 2025, 21% of cancers with a recorded stage were among people living in the most deprived areas, known as Index of Multiple Deprivation quintile 1. A further 29% were among people living in IMD quintile 2, the second most deprived group. This means that half of all staged cancers during this period were recorded in people living in the two most deprived deprivation groups.

This finding suggests that a large proportion of cancers with known stage are being diagnosed among people living in more deprived communities. This is important because deprivation is often linked to wider health inequalities, including differences in access to services, earlier diagnosis, treatment outcomes and overall cancer experience.

Top cancer types in north east London by diagnosis

Tumoursites	2025-26	%
Skin	1,897	17.81%
Breast	1,422	13.35%
Prostate	1,375	12.91%
Lung	1,058	9.93%
Lower GI	934	8.77%
Urological	723	6.79%
Gynaecological	636	5.97%
Lymphoma	360	3.38%
Other	355	3.33%
HPB and Gall Bladder	275	2.58%
Oesophagogastric	262	2.46%
Pancreatic	253	2.36%
Head and Neck	246	2.31%
Myeloma	203	1.91%
Brain and CNS	168	1.58%
Leukaemia	146	1.37%
Endocrine	116	1.09%
Unknown Primary	75	0.70%
CLL	74	0.69%
Bone and Soft Tissue	38	0.36%
Cardiothoracic	37	0.35%
Grand Total	10,651	

Tumoursites	2024-25	%
Skin	1,995	17.50%
Breast	1,542	13.52%
Prostate	1,392	12.21%
Lung	1,168	10.24%
Lower GI	1,011	8.87%
Urological	717	6.29%
Gynaecological	707	6.20%
Lymphoma	378	3.31%
Other	347	3.04%
Head and Neck	340	2.98%
Oesophagogastric	297	2.60%
HPB and Gall Bladder	288	2.53%
Brain and CNS	253	2.22%
Pancreatic	230	2.02%
Myeloma	193	1.69%
Leukaemia	180	1.58%
Endocrine	134	1.18%
Unknown Primary	105	0.92%
CLL	68	0.60%
Cardiothoracic	40	0.35%
Bone and Soft Tissue	18	0.16%
Grand Total	11,403	

Tumoursites	2023-24	%
Skin	1,974	17.71%
Breast	1,712	15.36%
Prostate	1,623	14.56%
Lung	1,049	9.41%
Lower GI	981	8.80%
Urological	590	5.29%
Gynaecological	572	5.13%
Other	407	3.65%
Head and Neck	339	3.04%
Brain and CNS	316	2.84%
Lymphoma	303	2.72%
Oesophagogastric	273	2.45%
HPB and Gall Bladder	243	2.18%
Pancreatic	204	1.83%
Myeloma	152	1.36%
Endocrine	123	1.10%
Leukaemia	101	0.91%
Unknown Primary	64	0.57%
CLL	63	0.57%
Cardiothoracic	29	0.26%
Bone and Soft Tissue	26	0.23%
Grand Total	11,144	

Cancer screening uptake in north east London

This table shows the uptake of the three national screening programmes for 2025 to 2026 for each borough, alongside the previous year’s figures as a comparison.

Please note that for cervical screening, this year’s figures are currently unavailable as the result of a delay due to a significant, ongoing transition in the NHS IT system.



 Cervical Screening	Borough	2024 to 2025	2023 to 2024
	Barking & Dagenham	61.50%	61.20%
	City and Hackney	62.60%	62.50%
	Havering	70.30%	70.20%
	Newham	59.40%	59.10%
	Redbridge	58.70%	58.40%
	Tower Hamlets	53.70%	53.50%
	Waltham Forest	65.50%	65.10%

 Bowel Screening	Borough	2025 to 2026	2024 to 2025
	Barking & Dagenham	49.47%	51.07%
	City and Hackney	49.85%	51.21%
	Havering	62.08%	64.24%
	Newham	46.98%	48.86%
	Redbridge	52.84%	54.80%
	Tower Hamlets	47.33%	49.19%
	Waltham Forest	53.38%	54.80%

 Breast Screening	Borough	2025 to 2026	2024 to 2025
	Barking & Dagenham	61.29%	62.55%
	City and Hackney	59.37%	56.93%
	Havering	78.20%	76.71%
	Newham	57.50%	55.73%
	Redbridge	68.59%	70.02%
	Tower Hamlets	58.10%	54.42%
	Waltham Forest	63.76%	64.54%

Performance against the national standards

5

“There has been a 15% increase in cancer incidence since 2015 and so we have continued expanding access to services, for example through our Community Diagnostic Centres, offering services 12 hours a day, 7 days a week.

“Our clinically focused transition is progressing well, and we are committed to maintaining our position as a leading provider of cancer services, consistently delivering improved cancer care for our patients in north east London.

“The dedication and hard work of the trusts have not gone unnoticed. We remain steadfast in our mission to achieve the goals outlined in the recently launched National Cancer Plan, ensuring the best possible outcomes for our patients.”



Angela Wong
Chief Medical Officer



As of November 2025, the Alliance was ranked:

1 ST	nationally for Faster Diagnosis Standard
5 TH	nationally for 62-day performance (1st in Sept and Oct 2025)

Our rankings reinforce a pattern of sustained improvement throughout the year:

- In the first quarter, the Alliance was ranked number one nationally for the 62-day combined standard, achieving 75.5%, demonstrating strong pathway management from referral through to treatment.
- In August 2025, the Alliance was 1st nationally by Cancer Alliance, and 2nd by national ICB for the Faster Diagnosis Standard. The Alliance was 2nd both nationally and by Cancer Alliance for the 62-day standard.
- Across the second quarter, the system continued to lead regionally, becoming the best-performing Integrated Care Board in London across all three national cancer targets, including the 28-day Faster Diagnosis Standard.
- In quarter three, performance against the Faster Diagnosis Standard reached 82.2%, again ranking first across London.
- Performance from January to March 2026 showed continued progress across the standards, including consistently strong 31-day performance and improvement in the 62-day pathway. Continued system support has also been provided to BHRUT following EPR implementation to support pathway stability and performance.
- The year closed in March 2026 with 28-day performance at 78.1%, 31-day performance at 97.4% and 62-day performance at 76.3%, reflecting a strong overall performance across North East London.

Cancer target	Jan	Feb	Mar
28-day Faster Diagnosis Standard	76.3%	78.8%	78.1%
31-day combined Standard	97.2%	97.7%	97.4%
62-day combined Standard	73.3%	74.1%	76.3%



Achieving high performance

North East London Cancer Alliance led a whole-system improvement programme to help people get faster cancer diagnosis and treatment, leading to the best results in the country against the national cancer standards.

Working with Barts Health, Homerton Healthcare, Barking, Havering and Redbridge University Hospitals, primary care and community services, the Alliance focused on reducing delays and improving the reliability of the cancer pathway.

The Alliance introduced Best Practice Timed Pathways across tumour sites, supported by stronger performance tracking and collaborative working, so delays were identified and acted on quickly.

At the same time, they increased diagnostic capacity through improved use of imaging, better scheduling and expanded use of community diagnostic services, as well as bringing in the latest technology such as the use of Artificial Intelligence in chest X-Rays.

North East London Cancer Alliance also achieved the highest national improvement in gynaecology, urology and skin pathways, with improvement seen in 7 of 8 measures, representing 88%.



“Whether it is our administrators supporting clinicians to enable a speedy experience for patients; nurses delivering first class care; or diagnostic teams bringing in new technology in a seamless way; our cancer staff have been working above and beyond.”

Femi Odewale

Managing Director,
North East London
Cancer Alliance



Early Diagnosis

6

“Our vision is that by 2029, we will diagnose 62% of cancers in North East London at stage 1 or 2 through sustainable transformation and technological innovation, which delivers equitable access and high-quality, safe care. Working closely with our neighbourhood teams and being informed by lived experience will be key to leading improvements to earlier diagnosis pathways and reducing health inequalities.

Our mission is to increase early cancer diagnosis across North East London by improving awareness of symptoms, uptake of screening services and the timeliness of referrals from GPs. We will empower residents to seek help early, implementing innovative interventions to ensure every community can access the right services at the right time. Using a data-driven approach and collaborating with local communities and system partners, we aim to reduce health inequalities, improve equity in early detection and achieve better outcomes, a reduction in preventable cancers and healthier lives for our population.”



Caroline Cook
Programme Lead,
Early Diagnosis



Early Diagnosis Achievements

 You Need to Know (womb and ovarian) and CoppaFeel! (breast) campaigns shortlisted for multiple awards

 Recruited and trained 13 Health Champions from across Gypsy, Roma and Traveller communities – Regional Champion in NHS Excellence Awards

 35,000 lung checks, 20,000 CT scans, 187 cancers diagnosed, 75% at stage 1 or 2 thanks to Lung Cancer Screening

 4,229 interactions with It's Not A Game prostate cancer campaign achieved and 715 surveys completed

 Spoke to over 500 students as part of the HPV awareness campaign to encourage uptake of the vaccine

 HPV self-sampling referenced in the national plan as a best practice case study

 LDN Get Sun Set sun safety campaign was successfully launched in Victoria Park, raising awareness of skin cancer

 The prostate cancer van visited 10 locations seeing over 1,500 residents and highlighting risk factors in prostate cancer

Early Diagnosis Projects

Inequalities strategy

Working in partnership with a Citizens' Panel – with a wide range of underrepresented communities such as sex workers, GRT, asylum seekers – the Alliance developed a health inequalities strategy which will be launched in April 2026.



“The day was productive, and we are grateful for your commitment to community health and wellbeing. Your contributions made a significant impact.”

Nimo Mohamed
Director of Outreach
and Engagement,
People Street

Early Diagnosis Projects

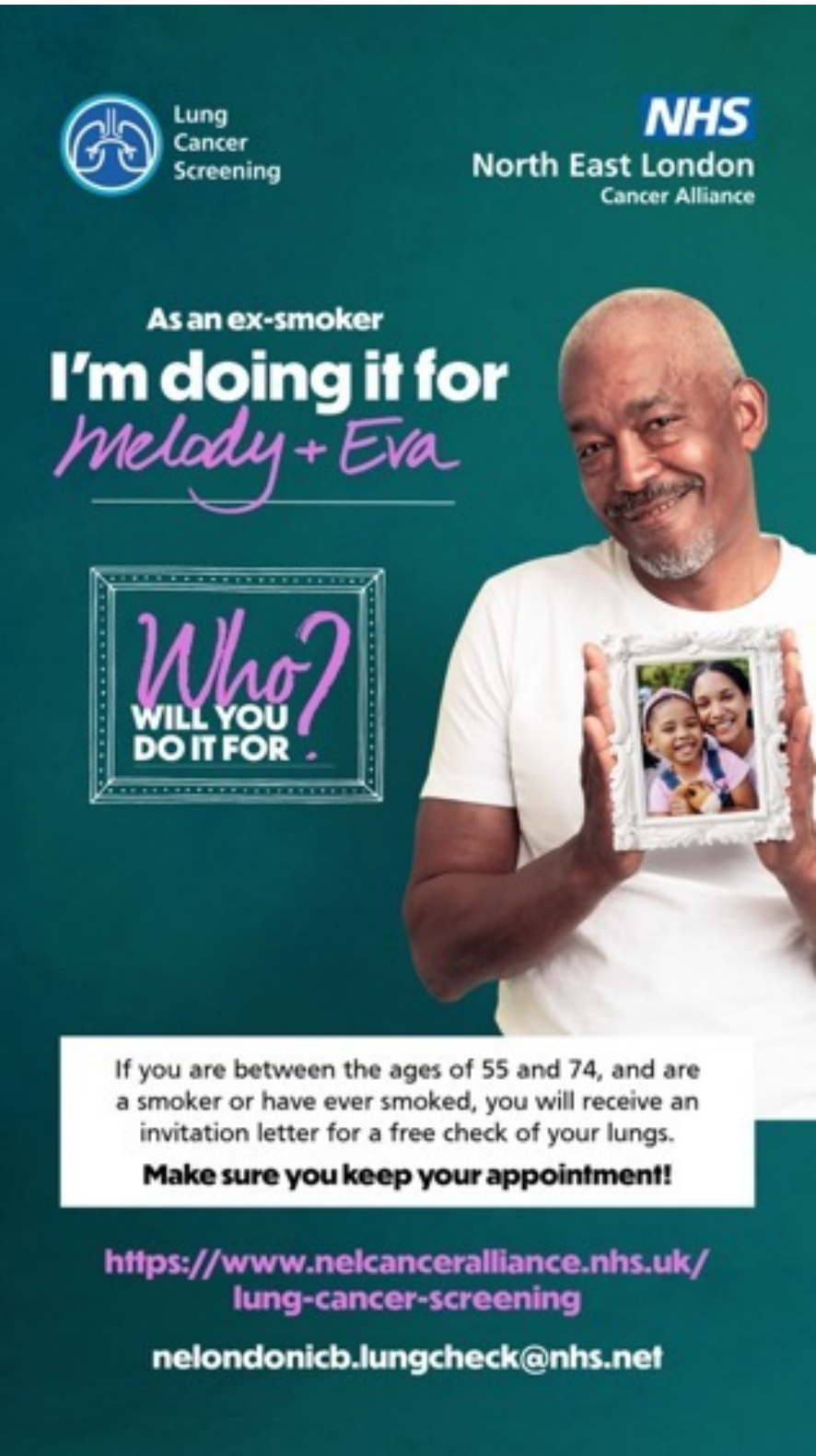
Lung Cancer Screening

Since the start of the programme, over 35,000 checks have been carried out, with over 20,000 CT scans undertaken. This has resulted in the diagnosis of 187 lung cancers, 75% of which have been at stage 1 or stage 2. The uptake rate is 55.6%, one of the highest rates in the country and strongest regionally, reinforcing its status as a flagship early-diagnosis initiative within the system.

10,311 patients were offered the free local stop-smoking services. 1,411 patients have taken up the offer, 345 patients have successfully quit smoking, contributing to improved prevention and wider population health outcomes.

The business case for 100% rollout of lung cancer screening was approved, supported by a direct award via the MECCS framework, securing InHealth as delivery partner until March 2029.

Continuous performance monitoring shows stable engagement, strong CT attendance levels, and consistently positive patient experience feedback.



Early Diagnosis Projects

You Need To Know awareness campaigns for womb and ovarian cancers:

Shortlisted for an award and assets have been shared with South East London Cancer Alliance and Greater Manchester Cancer Alliance to promote in their areas.

CoppaFeel! breast screening campaign for young people

Shortlisted for an award after helping to raise awareness of breast cancer signs and symptoms and encouraging young people to check themselves.

“The campaign seeks to challenge the cultural and personal barriers that often lead women to delay or avoid screening, reminding them that early detection can save lives.”

Harjeet Dhanota

Project Officer for North East London Cancer Alliance



Gypsy, Roma and Traveller campaign

Recruited and trained 13 Health Champions from across Gypsy, Roma and Traveller communities.

The project evaluation has shown significant shifts in knowledge, confidence and capability among Health Champions. Before training, only 25% of Champions rated themselves as “very aware” of available health services; following the programme, **this increased to 92%**, with no Champions reporting low or uncertain awareness.

Confidence talking about cancer screening **rose from 58% before training to 92% after**, while confidence in supporting others to navigate screening pathways **increased from 50% to 92%**.

“The evaluation shows that a peer-led, community-based approach can deliver rapid and meaningful improvements in health knowledge, confidence and engagement, while also strengthening cultural competence within healthcare services.

“With continued investment and partnership working, the Health Champions model offers a strong foundation for tackling cancer inequalities and supporting more inclusive, culturally responsive healthcare across North East London and beyond.”

Nikki Poland

Project Manager, North East London Cancer Alliance

Early Diagnosis Projects

LDN Get Sun Set skin cancer awareness campaign

LDN Get Sun Set sun safety campaign was successfully launched. Hosted at Victoria Park, the ‘sun-cream van’ was a point of attraction catching much attention, despite the weather.

As a result, the team had the opportunity to engage with hundreds of people in conversations about the importance of using protection in the sun and even on cloudy days.



“We swapped cones for coverage and sprinkles for SPF. It may have been raining when we set up, but that actually helped start important conversations. UV rays don’t take a break just because the sun’s not shining. So many people were surprised to learn that even on grey days, their skin can still be at risk.”

Rosie O’Dea
Project Manager
at North East London
Cancer Alliance



It’s Not A Game prostate cancer campaign

Over the five-month sprint, the campaign achieved 4,229 interactions, with approximately 42% (1,768) classed as meaningful, high-quality engagements.

In total, 715 surveys were completed, demonstrating strong commitment and interest from participants. Conversations focused on awareness of prostate cancer risk, whether individuals had ever had a PSA test, and how likely they were to use the PCUK risk checker.



A branded prostate van has been visiting sites in north east London to raise awareness of the risk of prostate cancer in the communities with highest risk. The onboard ambassadors have had in-depth conversations with men about their risk of developing prostate cancer and have signposted them to Prostate Cancer UK information and the risk assessment tool. Up the middle of December, the van had visited 10 separate locations, and the ambassadors had 1515 interactions with members of the public. 681 of these were in-depth.

Early Diagnosis Projects

HPV vaccine campaign

The team attended Freshers’ Fairs at Queen Mary’s University and the University of East London as part of Phase 1 of improving HPV vaccination uptake in 18–25-year-olds. Spoke to 500+ students about the HPV vaccine, cervical screening and cancer awareness.

Following the interest in the campaign at university fresher’s fairs, the Alliance has extended outreach to sixth form colleges.



“Many students told us they had already been vaccinated and were keen to share reliable information with friends at university. Others had not yet had the vaccine or were not registered with a GP, which gave us valuable opportunities to offer practical support on the spot.”

Sherrice Weekes
Project Manager,
North East London
Cancer Alliance

HPV Self-Sampling

One of our flagship initiatives – HPV self-sampling for cervical screening – was referenced in the National Cancer Plan as a case study, highlighting the impact of this work and the dedication of the teams involved. HPV self-sampling kits were distributed across five boroughs in north and east London with historically low screening uptake.

Across London, more than 27,000 people were offered kits, with 8,838 samples returned. Importantly, 64% of responses came from people from ethnic minority backgrounds and 60% from those living in more deprived areas. This level of engagement significantly exceeded previous campaigns and demonstrates the potential of self-sampling to reduce health inequalities.



Diagnosis and Treatment

7

“Our vision is to improve Diagnosis & Treatment and to improve cancer outcomes for the population of north east London. We will:

- facilitate delivery of world class services
- providing equitable access for all patients, carers and communities
- drive innovation and transformation to continually improve outcomes

Our mission is to implement innovative approaches to transform and improve our:

- speed of cancer diagnosis by achieving the Faster Diagnosis Standard, especially for patients who receive a confirmed diagnosis
- treatment variation by treating patients effectively and efficiently
- health equalities by addressing gaps identified and implementing solutions to remove them”



Wayne Douglas
Programme Lead,
Diagnosis and Treatment

“Robotic surgery offers minimally invasive procedures that can reduce pain, shorten hospital stays, support faster recovery, and enable doctors to treat complex conditions that previously required open surgery.

“For cancer patients in particular, faster recovery and fewer complications can make a profound difference. Barts Health’s rapid expansion of robotic services means more patients can benefit sooner, and with more choice, than ever before.”

Elly Brockbank
Consultant Gynaecological
Oncologist at Barts Health

Diagnosis and Treatment Achievements



Using AI in chest X-rays has reduced time to review significant findings from three weeks to just three days



A pilot using Signatera™ to inform follow-on treatment decisions of early stage bladder and gastro-intestinal cancer patients



Launch of a virtual hospital tour of St Bartholomew’s Hospital to help cancer patient prepare for their appointment



Development of Patient Engage – a 24/7 chat bot – to help reduce the number of missed colonoscopy appointments



Publication of an MDT article on leadership styles in the *BMJ*, reflecting the recognition of the Alliance work at a national level



Completion of a series of clinical animations designed to explain complex procedures for patients in different languages



Improving MRI scan quality and consistency across providers to reduce repeat imaging and delays



A pilot which supports faster assessment and triage of suspected skin cancer referrals using digital imaging

“I felt really well looked after. The surroundings are lovely, and the team were smiling and so supportive, that’s 50% of the journey for me.”

Vanya

First breast cancer patient at the new Smithfield Wing at St Bartholomew’s Hospital

Diagnosis and Treatment Projects

Artificial Intelligence Strategy

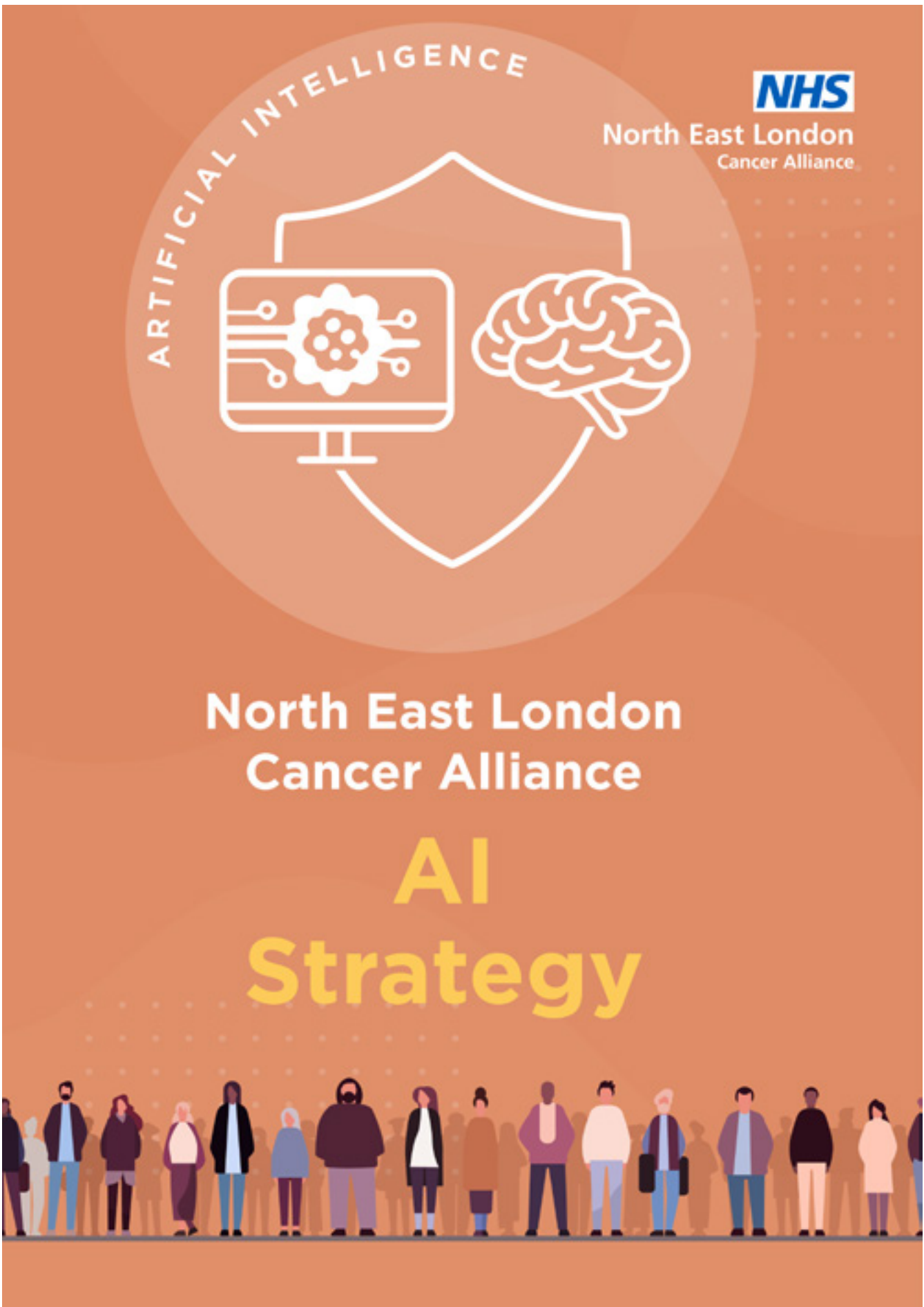
Working with innovation partners, trusts and staff, the Alliance has developed a comprehensive approach to implementing Artificial Intelligence and new technology across cancer pathways.

The strategy sets out how AI can help improve cancer care by reducing administrative pressure, supporting faster diagnosis, improving pathway monitoring and helping teams make better use of data.



Our vision is to use AI in a way that strengthens, not replaces, human care. This means using technology to support clinicians, improve patient experience and help ensure people affected by cancer receive timely, personalised and equitable care.

The Alliance has already designed pathways using AI to identify abnormal chest X-rays quickly and prioritise urgent cases. These tools have reduced the time to review significant findings from three weeks to just three days.



“These early results show how AI can play a supportive role in diagnostic pathways. Working with North East London Cancer Alliance and Sectra, we are seeing measurable improvements in reporting times and greater confidence in identifying urgent cases.”

Bhargava Reddy

Chief Business Officer,
Oncology at Qure.ai

Diagnosis and Treatment Projects

Colon Capsule Endoscopy

Offers a less invasive diagnostic test for suitable lower gastrointestinal referrals, helping streamline investigation pathways and improve patient experience.



Community and diagnostic capacity expansion

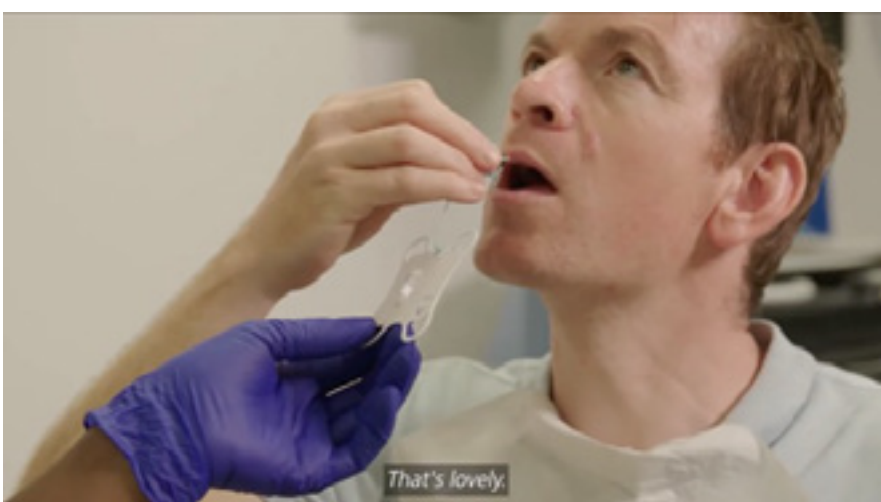
Includes projects such as additional imaging services and diagnostic centres that increase access to tests and reduce delays across pathways.

MDT Improvement

The Alliance's evidence-based approach to MDT improvement has led to the publication of an article on leadership styles in the *British Journal of Hospital Medicine*, reflecting the impact and recognition of the Alliance work at a national level.

Cytosponge Programme

Enables earlier detection of oesophageal cancer through a minimally invasive diagnostic test.



“Proud to represent BHRUT at the NHS Imaging and Transformation Conference in Manchester today. We shared lessons learned from both of our Community Diagnostic Centres and how we’re moving more diagnostic services and pathways closer to the communities we serve.”

Christiane Zelenyanszki PhD
Programme and Service Development Lead- Community Diagnostics, BHRUT

“And best of all - it was all on the National Health Service, free at the point of delivery, world class treatment, positive attitudes from everyone, not just me. Cancer can be beaten - a positive attitude (plus a sense of humour) helps!”

Joel
Bowel Cancer Patient

Diagnosis and Treatment Projects

Teledermatology

Supporting faster assessment and triage of suspected skin cancer referrals using digital imaging.

MRI Optimisation

Improving scan quality and consistency across providers to reduce repeat imaging and delays.



“This is a really exciting development for our community and has been an excellent example of collaboration between Together First, the Cancer Alliance, BHRUT and Skin Analytics. By using AI to detect skin cancer earlier we can improve the patient experience and reduce waiting times for our residents.”

Dr Shanika Sharma
Clinical Lead and GPwER
in Dermatology, Together
First

Clinical animations

The scripts and videos for all Faster Diagnosis Standard Pathways Clinical Animations were successfully developed and rigorously reviewed by a multidisciplinary team, including clinicians, cancer managers from each trust, patient reps, carers, and a clinical psychologist.

These animations help explain what the patient can expect after a referral is made to secondary care including tests, in a variety of languages, helping to reassure patients and reduce missed appointments.

The gynaecology procedure project that this builds on, resulted in being an HSJ Digital award finalist (Reducing Health Inequalities through digital).



Diagnosis and Treatment Projects

Signatera

Evaluating the real-world impact in an NHS setting of circulating tumour DNA (ctDNA) testing using Signatera™ to inform follow-on treatment decisions of early stage urothelial and gastro-intestinal cancer patients.

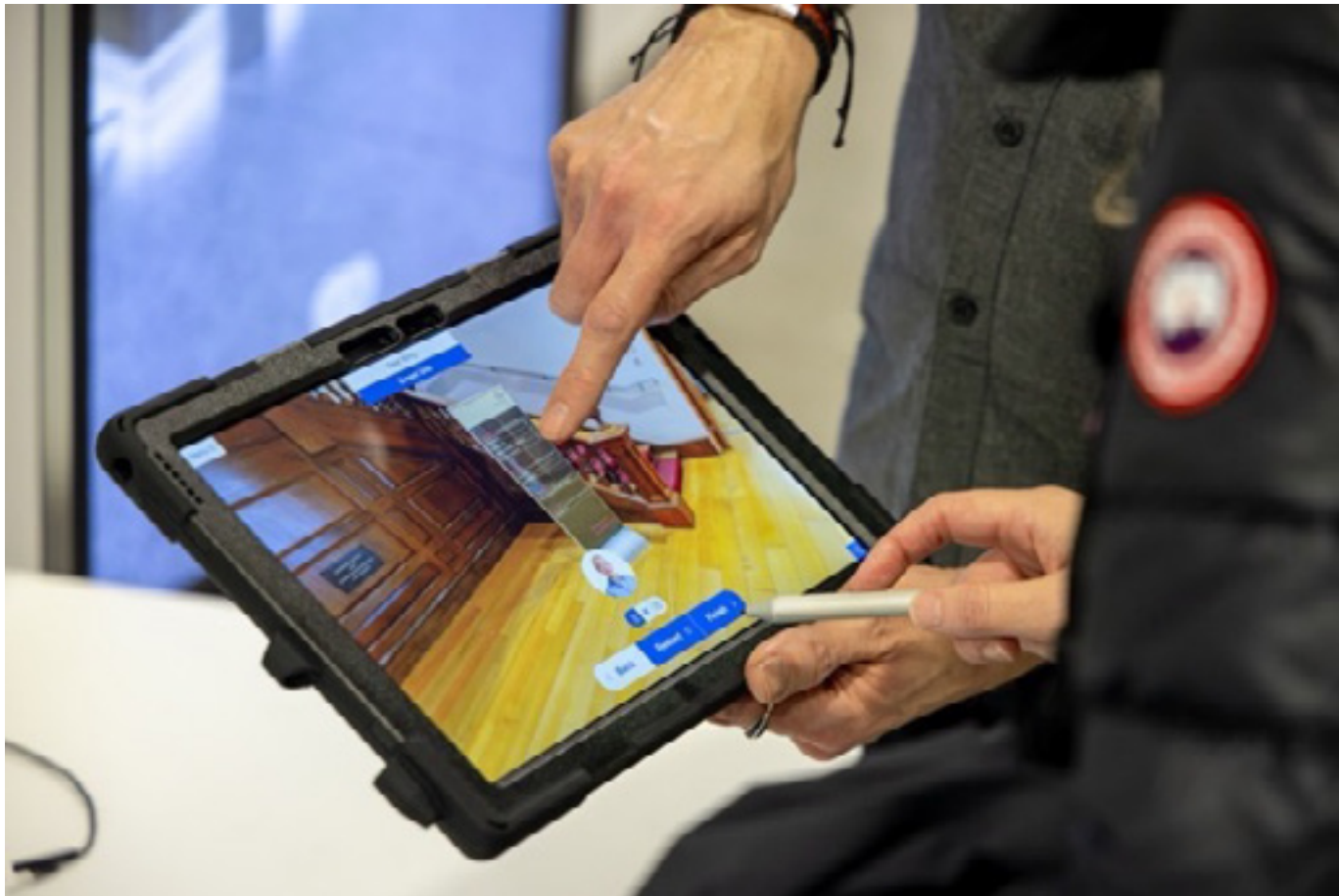


Virtual Hospital Tour

Cancer patients now have an additional tool to help them prepare for urgent cancer appointments, thanks to a new interactive virtual tour of St Bartholomew’s Hospital.

Patients can access the virtual tour via a link or QR code included in their appointment letter.

After selecting their preferred language, guide type (spoken, on-screen text or silent) and pace, they are taken on a personalised route through the hospital.



“The route to a cancer diagnosis is often complex and can cause significant stress and anxiety. For many people, attending unfamiliar hospitals only adds to this burden. It’s something we regularly hear from patients and their families.

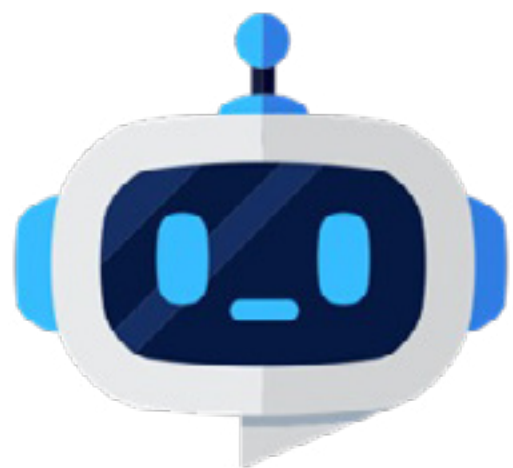
“Our aim was to create a way for people to familiarise themselves with our hospital, in their own language, so they can feel confident about getting to and around the building. This allows them to focus on what truly matters: the important conversations with their healthcare team.”

Dr Adam Januszewski
Consultant Medical Oncologist, Barts Health

Diagnosis and Treatment Projects

Patient Engage

The Alliance has been developing a 24/7 chat bot to help cancer patients prepare for bowel tests, helping to reduce the number of missed appointments.



Welcome to Patient Engage...



We are piloting a new digital assistant – **Patient Engage** - to help you prepare for your bowel test (a colonoscopy).

- ✓ Available 24/7
- ✓ Answers to common questions
- ✓ Quick and easy to use
- ✓ Tips to make preparation easier
- ✓ Helpful resources and videos



Please use the QR code - or web link below - from a smart phone, tablet, laptop or desktop.
Visit: www.example.com/chatbot

We'd love your feedback!

This is a **pilot**, and your experience will help us improve it for others.
You'll be invited to share your thoughts after using the tool.

No personal medical information is stored. This tool is here to support, not replace, your clinical care.

Bladder Cancer Clinical Standardisation

The formal approval of updated clinical standardisation guidelines for bladder cancer at the Urology Expert Reference Group marked a significant milestone. These guidelines encompass best practice recommendations for imaging modality in haematuria assessment, the strategic use of cytology to alleviate pressure on pathology services, imaging protocols for high-risk bladder cancer, criteria distinguishing deep from mapping biopsies, and clear indications for repeat TURBT procedures.

To support consistent implementation, standardised documentation tools such as TURBT templates and a comprehensive one-stop clinic proforma have also been adopted.

The Unscheduled Bleeding (UB) on HRT pathway

This was fully embedded into business-as-usual operations. Notably, Faster Diagnosis Standard performance has shown consistent improvement, rising 4.7% between October to September (68.4% to 73.1%). Barts Health has sustained steady performance levels (72.8% to 71.9%), while BHRUT achieved a marked increase of 5.5% (from 69.5% to 75.0%). Homerton stands out with a substantial improvement of 18.3%, jumping from 56.7% to 75.0% in the period.

Diagnosis and Treatment Projects

HIPEC

Barts Health NHS Trust offered a complex procedure, known as HIPEC, to ovarian cancer patients for the first time thanks to funding provided by Barts Charity.

HIPEC stands for Heated Intraoperative Intraperitoneal Chemotherapy (HIPEC). A heated chemotherapy solution is applied directly into the affected area to target any remaining cancer cells. By heating the chemotherapy, it becomes more effective at penetrating tissues and destroying cancer cells.

HIPEC has the propensity to completely remove cancer which is invisible to the human eye, offering both extended life and an improved quality of life to ovarian cancer patients.



“I really can’t praise them enough. The oncologists were incredible; they are compassionate, personable and determined to do everything they could do to fight the cancer in order to help me get better. I felt I had the best team taking care of me.”

“To come from such a low to such a high after the CRS-HIPEC surgery has been incredible. Thank you so much to everyone that was involved. I am so delighted to have that opportunity because we know so many hospitals don’t offer that at all. I feel really privileged that it was available to me.”

Amna

One of the first ovarian cancer patients to undergo HIPEC

Diagnosis and Treatment Projects

HIPEC (continued)

BHRUT performed a rare surgical achievement: a pelvic exenteration combined with HIPEC in a 64-Year-Old Female. This is a highly complex procedure reserved for selected patients with advanced pelvic malignancies and peritoneal disease.

Pelvic exenteration aims to achieve complete tumour removal, while HIPEC delivers heated chemotherapy directly into the abdominal cavity to eradicate microscopic residual disease.

Evidence suggests that complete cytoreductive surgery with HIPEC can significantly improve survival outcomes. In selected patients with peritoneal surface malignancies, median overall survival has been reported to increase from approximately 12-24 months with systemic therapy alone to 40-60 months or longer following complete cytoreduction and HIPEC.

Long-term survival exceeding five years has also been documented in carefully selected cases. The successful completion of this rare procedure highlights advances in surgical oncology and offers the potential for improved disease control, prolonged survival, and enhanced quality of life.



Personalised Cancer Care

8

Our vision is that by March 2029, in collaboration with our patient partners and healthcare professionals, North East London patients will receive inclusive, effective, high quality personalised cancer care with improved patient experience and quality of life.

Our mission is to

- Champion a comprehensive, community-centred approach to cancer care, ensuring every voice is valued and every experience informs our services.
- Foster collaboration between hospitals, local communities, voluntary, and faith sectors to design accessible and innovative care that meets diverse needs.
- Develop a confident, skilled, resilient workforce able to spot cancer early, support people living with cancer, and deliver high-quality care at every stage of the pathway.
- Harness technology and expertise to enhance personalised, high-quality support at every stage of our patient's cancer pathway.
- Embrace integration, empowerment, and continual learning to improve outcomes and quality of life for all those affected by cancer.



Sarita Yaganti

Programme Lead,
Personalised Cancer Care

Personalised Cancer Care Achievements



Continuing prehabilitation services to help prepare cancer patients for treatment and reduce length of hospital stays



Delivering level 2 Psychological support training across north east London with positive feedback



Successfully launched a short film that addresses some of the cultural attitudes, myths and stigmas attached to cancer



The Alliance has seen a 63% increase in EoT Holistic Needs Assessments since the beginning of the financial year



Established an Unpaid Carers Network with events taking place across Trusts to provide support



Initiative to improve uptake of physical exercise reached over 200 residents and patients, bringing together local health partners

“Cancer is a fact of life — let’s make the experience better.”

Dr. Jagan John
GP at Aurora Medcare, Personalised Care Clinical Director for NHS England (London), and Primary Care Board Representative for NEL ICB

Personalised Cancer Care Projects

Prehabilitation

Prehabilitation services – helping patients to prepare for their cancer treatment to improve recovery and reduce length of hospital stay - have been sustained with local arrangements in place for business-as-usual across north east London.

Psychological support services

Level 2 psychological support training is well attended and equipping key staff with essential skills to identify, assess, and manage psychological distress in patients affected by cancer.

Cancer cultural attitudes

Successfully launched a short film that addresses some of the cultural attitudes, myths and stigmas attached to cancer that can impact patient experience and quality of life whilst on the cancer care pathway. This film featured patients with lived experience from South Asian, Black African and Caribbean ethnic groups.

Video link: <https://youtu.be/94NT-UyXq-U>



**“It is so important-
life changing- to
be having honest
conversations about
our cultural attitudes
towards cancer. There
is still a long way to go
before we can speak
freely, without stigma
attached. We need to
learn from one another
and support each other
by sharing our stories-
opening this space
together.”**

Dr Adam Januszewski
Consultant Medical
Oncologist, Barts Health

Personalised Cancer Care Projects

Physical activities

Despite the operational challenges, The Community Games initiative successfully reached over 200 residents and patients. Notably, 12.5% of patients pledged to incorporate more physical activities in their daily lives, which is an improvement from the previous year’s position.

The programme also fostered valuable connections between local activity providers and health service, strengthening system wide collaboration.

Personalised Cancer Care Metrics

The new PCC Dashboard allows much deeper interrogation of data. The Alliance has seen a 63% increase in EoT Holistic Needs Assessments since the beginning of the financial year. This is largely due to improvements being made by the new Personalised Cancer Care Lead at BHRUT.



“These games not only bring together communities in a safe space to have fun and make new connections in their local area, they also provide invaluable opportunities to improve your health and fitness, and all for free!”

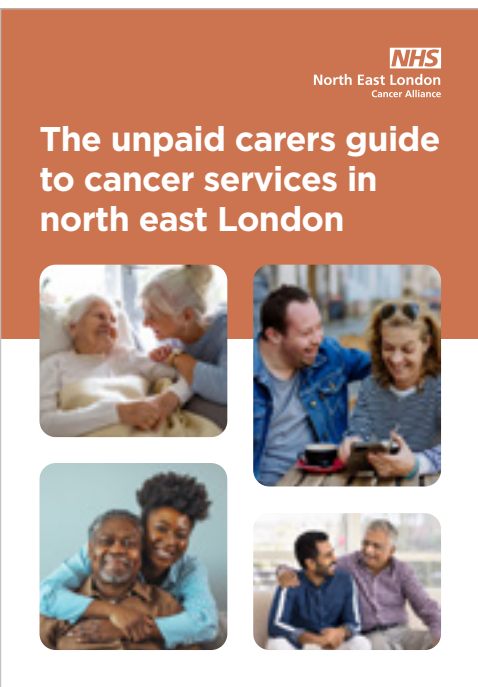
Sarita Yaganti
Programme Lead

Personalised Cancer Care Projects

Unpaid carers network

Established as a collaborative initiative between the Royal London Hospital, the Tower Hamlets Carers Centre, and Macmillan, the event was positively received. Participants were also offered and took part in a CPR training session that was facilitated by the London Ambulance Service.

A second event took place at BHRUT King George Hospital in partnership with Redbridge Carers Centre and Macmillan. The session received very positive feedback, with carers valuing the London Ambulance Service’s CPR training and finding the social prescribing session particularly insightful.



“If we don’t look after ourselves, how are we going to look after the people we care for?”

Sharon

Local carer

Cancer Patient Experience Survey

Continued to work with secondary and primary care colleagues, and grassroot charities such as From Me 2 You and Sakoon Through Cancer to increase the response rates by promoting the survey using postcards, posters and leaflets and social media to remind patients to complete the surveys.

Recorded a podcast to promote and raise the profile of the survey and to encourage uptake by highlighting the benefits of taking part.

Ongoing work to raise the profile of the survey and promote cancer patient experience surveys at health awareness events to increase engagement and uptake amongst the diverse population groups in north east London.



“It’s always a pleasure to be out in the community, sharing insights on the importance of completing the National Cancer Patient Experience Survey. These conversations help raise awareness about how patient feedback directly shapes and improves cancer services.”

Rita Majek

Communications and Engagement
North East London Cancer Alliance

Workforce

9

Workforce Achievements



Development of comprehensive Workforce Strategy



27 CNSs receiving enhanced support from the CNS Development Lead and launched pilot ACCEND e-portfolio for 25 professionals



Launched a series of cancer education sessions for healthcare professionals working in cancer



“Recognising the critical role that our workforce plays in meeting challenges in delivering first class cancer care, North East London Cancer Alliance is committed to developing a Cancer Workforce Strategy that will guide us through the next decade. This strategy provides a clear framework for identifying, planning and prioritising the transformation, innovation, and education needs of our workforce, ensuring that we have the right people, with the right skills, in the right roles, to deliver excellent cancer care.”

Yvonne Beadle

Workforce Programme Manager
North East London Cancer Alliance

Workforce Projects

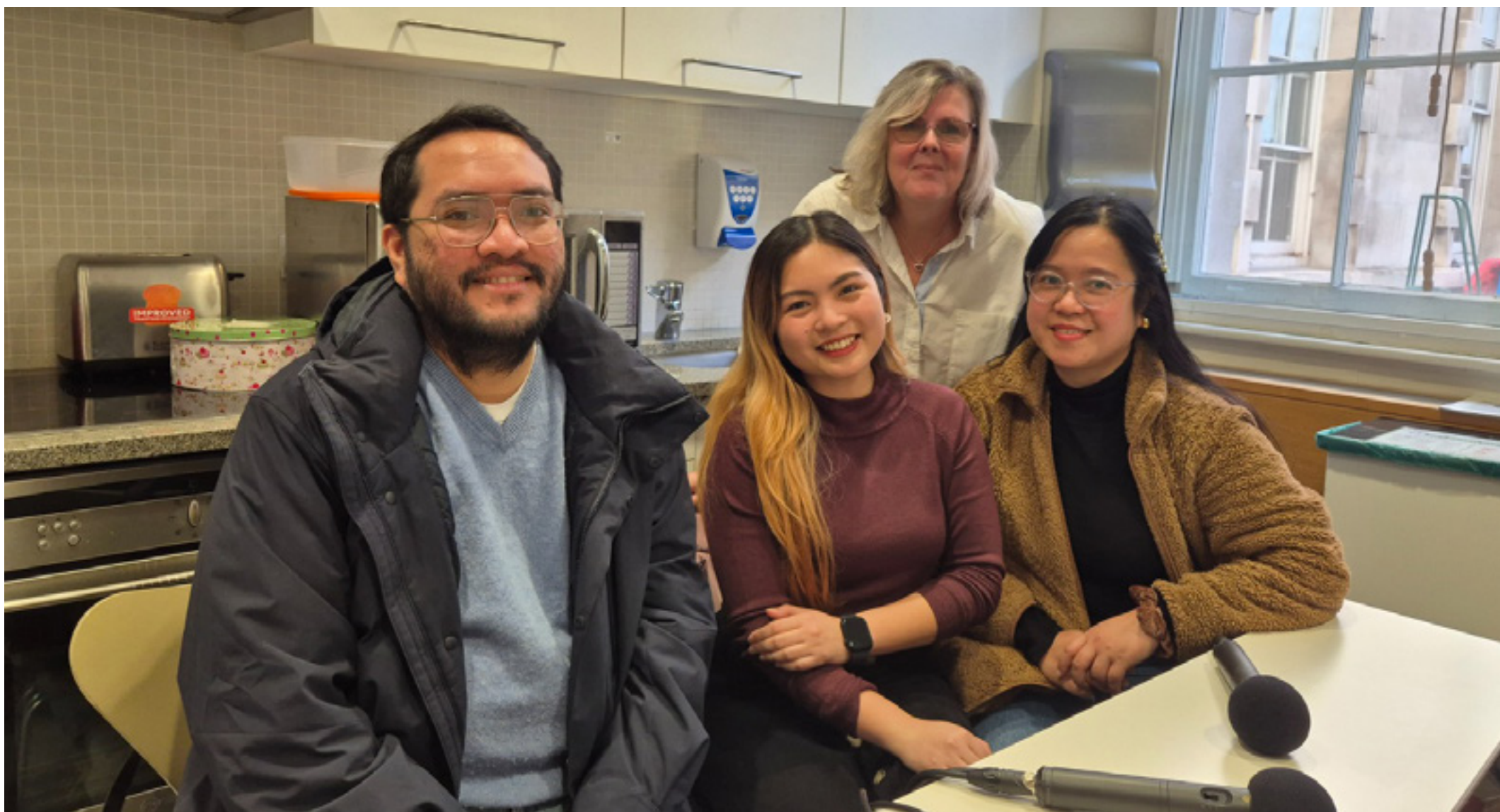
Cancer CNS Development Lead Project

Supporting 31 new CNSs to achieve CNS competencies aligning with the ACCEND framework; delivered two universal training sessions (52 and 29 attendees), peer support groups (six sessions facilitated), and five local education events on ACCEND and the role of the CNS (average six attendees per event); contributed to Pan-London evaluation and national comms.



Leadership, Collaboration and Equity

Secured NHSE Workforce Planning Masterclass placement for north east London and strengthened AHP leadership voice and cultural competence initiatives.



“This very special awareness day recognises that Cancer Clinical Nurse Specialists are not only delivering high-quality clinical care, but also driving improvements in services and making a life-changing difference to patients and families.

“We want to recognise this – not just on the awareness day itself, but throughout the year – and give our thanks to all our cancer clinical nurse specialists who are making such a positive difference to our patients.”

Alison Hill

Macmillan Director of Nursing for Cancer & Palliative Care

Workforce Projects

Workforce Strategy

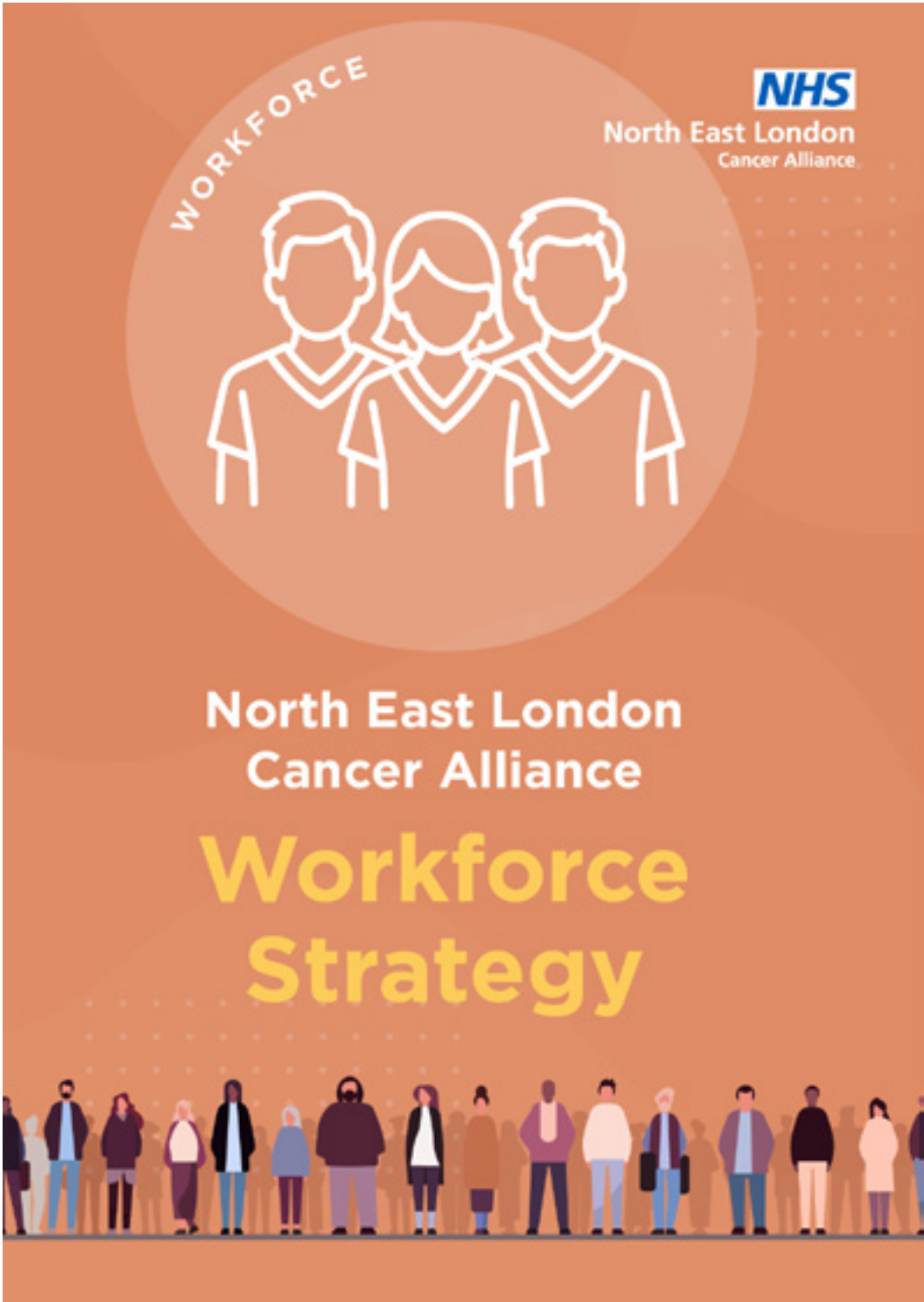
Workforce mapping and scoping of the current cancer workforce across the north east London system has been completed, with a report that will be disseminated to the Alliance stakeholders.

The Workforce Strategy has been finalised and will be launched in April 2026.

ACCEND

27 new CNSs currently receiving enhanced support from the CNS Development Lead in which the ACCEND and the capabilities frameworks are applied. ACCEND guidance for line managers has been developed. The Alliance has delivered ACCEND training at two out of our three Trusts with the last Trust scheduled for Q3.

Launched pilot ACCEND e-portfolio for 25 professionals.



“Thanks for putting on such a great and thoughtful event, really appreciated! It was really nice to hear updates on the prehab guidance and ACCEND, things we often don’t get the headspace to think about over the course of a busy week. It was great to be able to network and connect with colleagues old and new across the whole of London.”

Heather Munro

Lead Psychologist in Cancer & Palliative Care, Homerton Healthcare

Communications and Engagement

10

In 2026 to 2027, we want to build upon what we have achieved over the last three years in increasing the profile of the cancer alliance, establishing core channels and building relationships with our stakeholders.

We want to take this a stage further and – in line with the NHS 10-Year Plan and National Cancer Plan - allow our patients, the public, health and care professionals, community groups and stakeholders to have a pro-active input into our communications and engagement work so we can be confident it meets the needs of the local population and reduces inequalities.



Paul Thomas
Communications and
Engagement Manager



“Always a pleasure to have the team join us - North East London Cancer Alliance is truly an invaluable service”

Parisse Devaux
Founder, The Village UK

Patient and carer community of practice

Continued to work with our Community of Practice, which now has well over 150 members representing patients and carers.

Hosted a number of events, including sharing best practice and top tips to improve health and wellbeing.



“This was a great event. It was useful to hear about the services and support available, many of which I wasn’t aware of. Kevin and Judith’s patient stories were so inspirational and it was very helpful that we were given opportunity to ask the speakers questions. I was very satisfied with the event, would recommend to others and I would attend again.”

Event attendee
Patient

Engagement: attendance at community events

Attended over **100 community events** across all boroughs, engaging with over **5,000 local residents**.

Region	April 2024 to March 2025	April 2025 to March 2026
Barking & Dagenham	8	14
City and Hackney	7	9
Havering	2	13
Newham	7	16
Redbridge	6	7
Tower Hamlets	20	25
Waltham Forest	1	6
North East London Wide	27	7
National	8	4
Total	86	101



“It’s always great to join up with local community services and meet residents face to face to talk about the importance of getting checked early and cancer screening programmes. We welcomed the opportunity to chat with local residents about the challenges they face when it comes to cancer, so that we can help to improve local services.”

Rita Majek

Communications and Engagement, North East London Cancer Alliance

Taking Control of Cancer Podcast Series

- Over 50,000 listens across over 50 episodes
- Downloaded in 52 different countries
- New webpage and individual pages for each episode:
<https://www.nelcanceralliance.nhs.uk/taking-control-cancer>



YouTube Performance

- **1,600,000** views
- Over **6,500** subscribers
- **8,800** hours of watch time
- Over **43,500** views of D&T innovation video
<https://youtu.be/urpQ6-AnExc?si=9O6ZCMnqv0AoGyxG>
- Top 20 Christmas countdown campaign
- Over 350 videos on our channel in over 15 different languages

Visit <https://www.youtube.com/@nelcanceralliance>

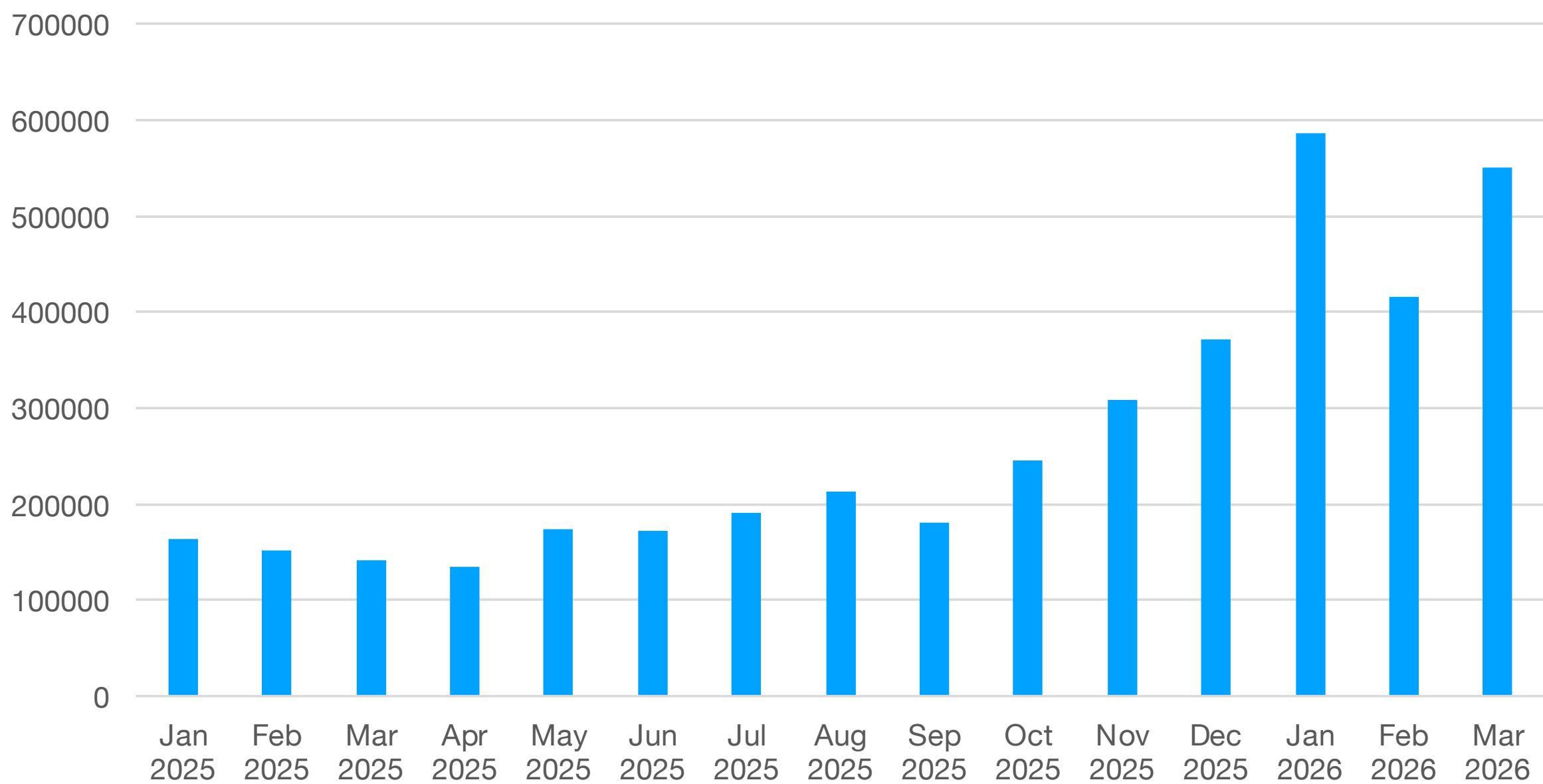


Website statistics

<https://www.nelcanceralliance.nhs.uk>

We continued to improve our website, adding new content and working on updated to enhance our rankings in Google Search, so that our local residents can find information more easily. This resulted in:

- **3,545,785** impressions from 1 April 2025 to 31 March 2026, compared to 1,050,647 for the previous financial year (an impression is every time a link to your page appears in a search engine results page)
- **2,212** pdf file downloads from our website since 1 April 2025
- A **36% increase** in link clicks from Google searches compared to last financial year



Website insights

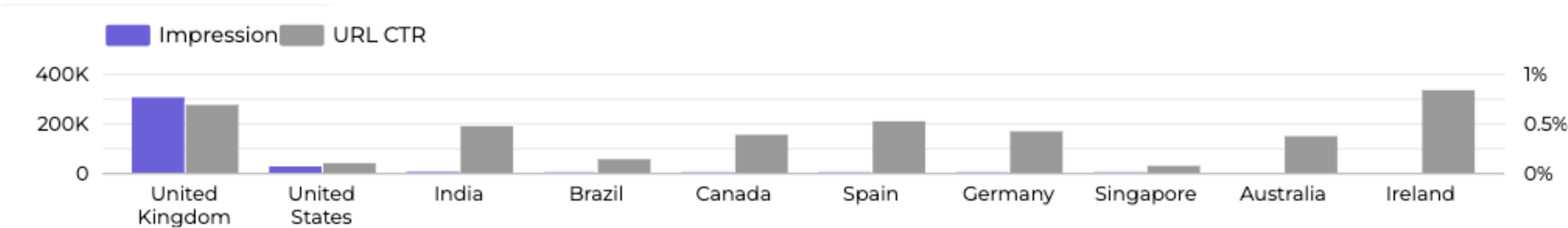
We use Recite Me’s accessibility checker tool to assess every page on our website to improve accessibility of cancer information for our local residents.

Our current score is **95%** and we are working on improving this.

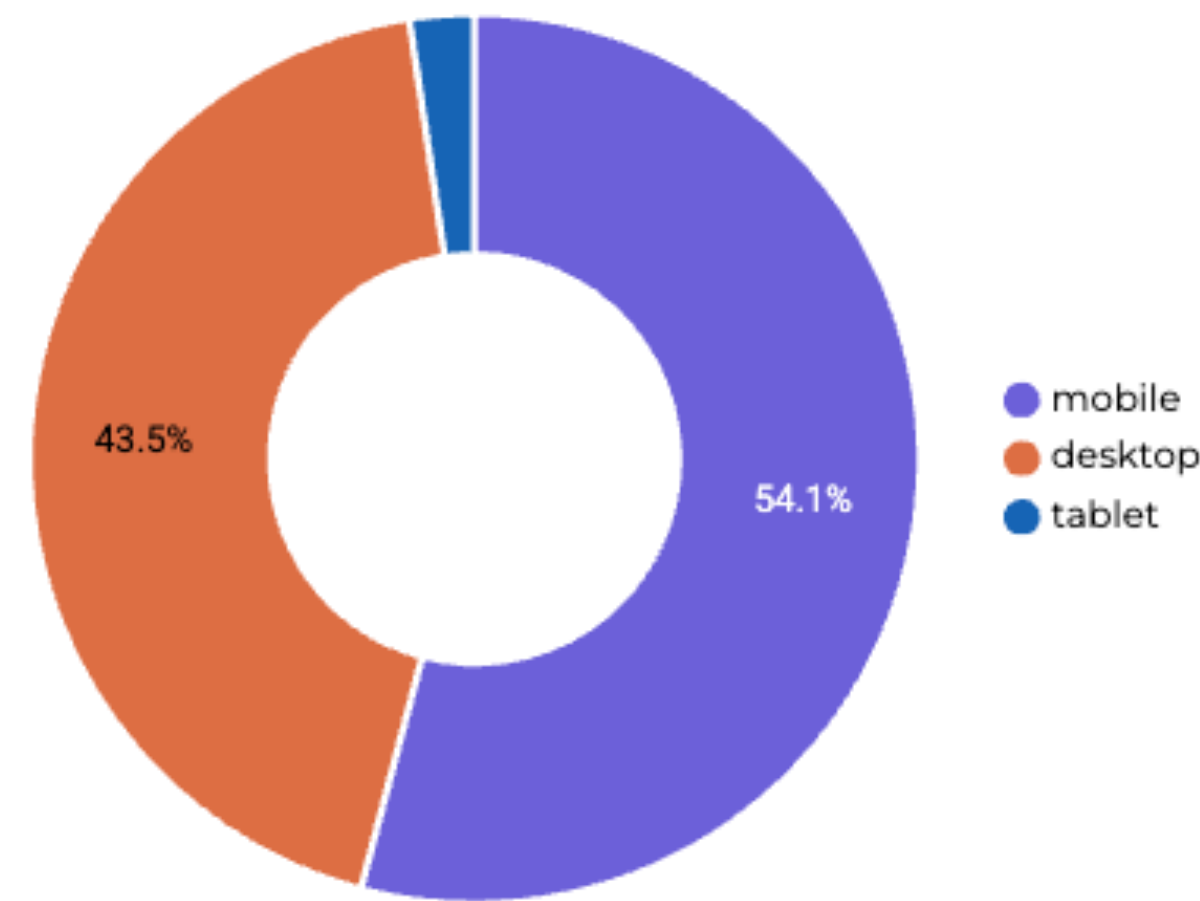
Accessibility Score

We believe your site has a rating of:

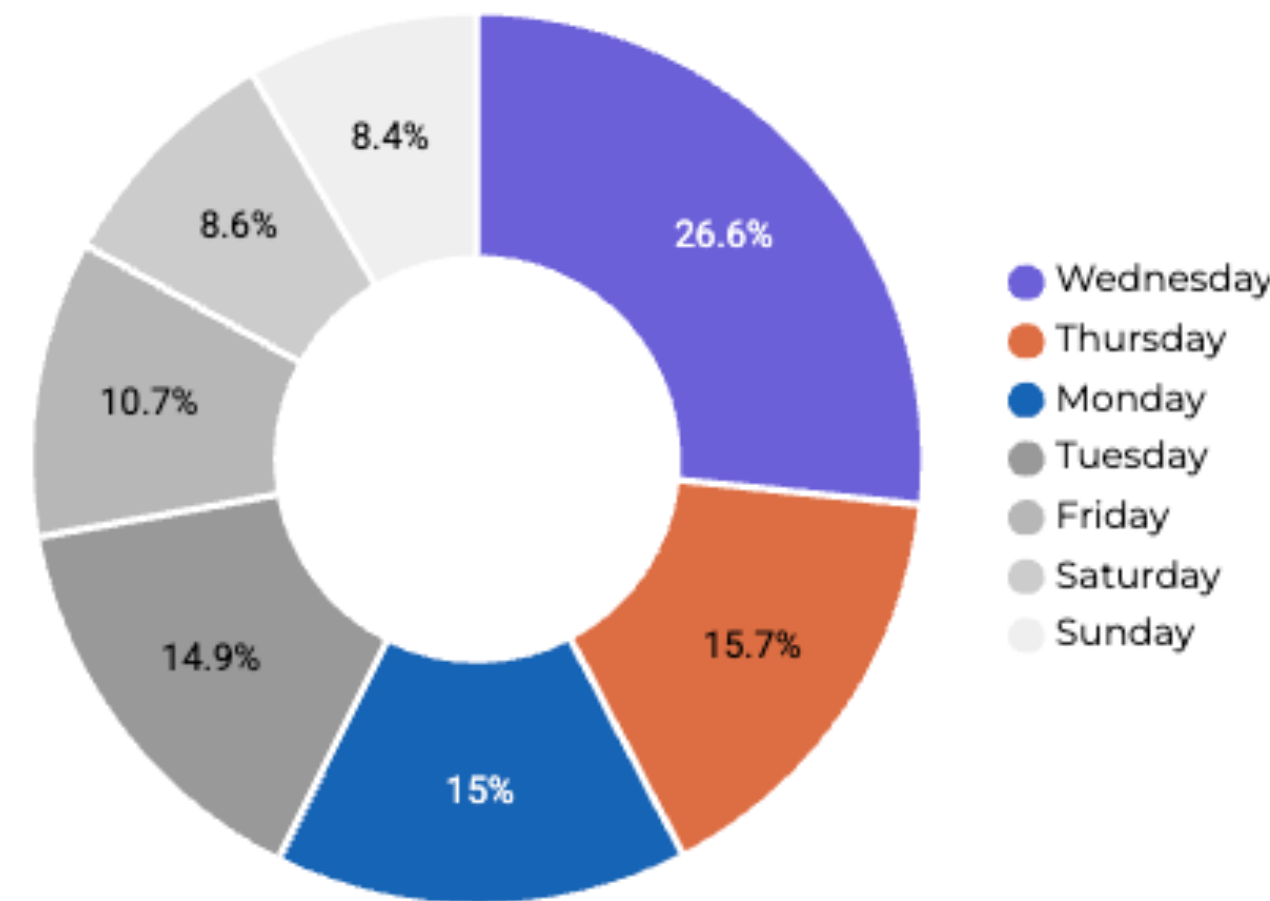
95%



What devices are commonly used?



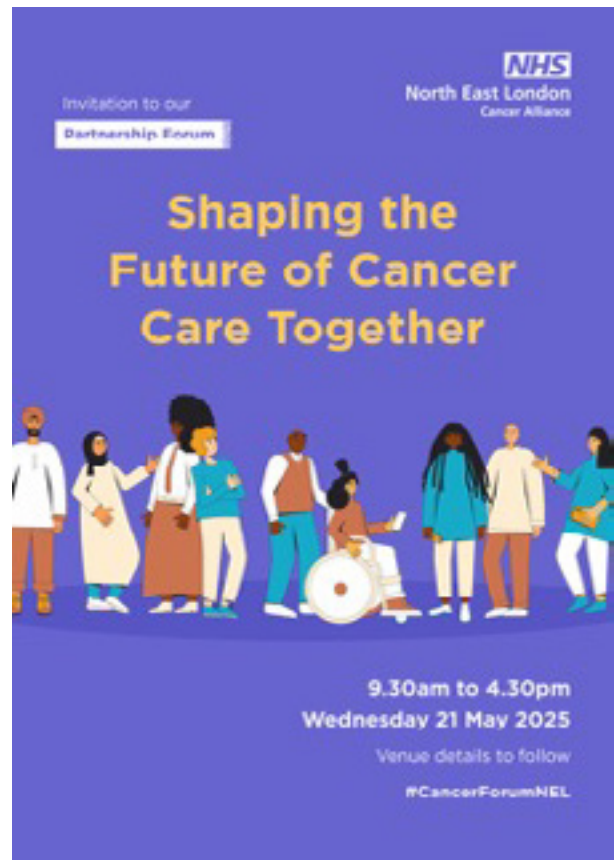
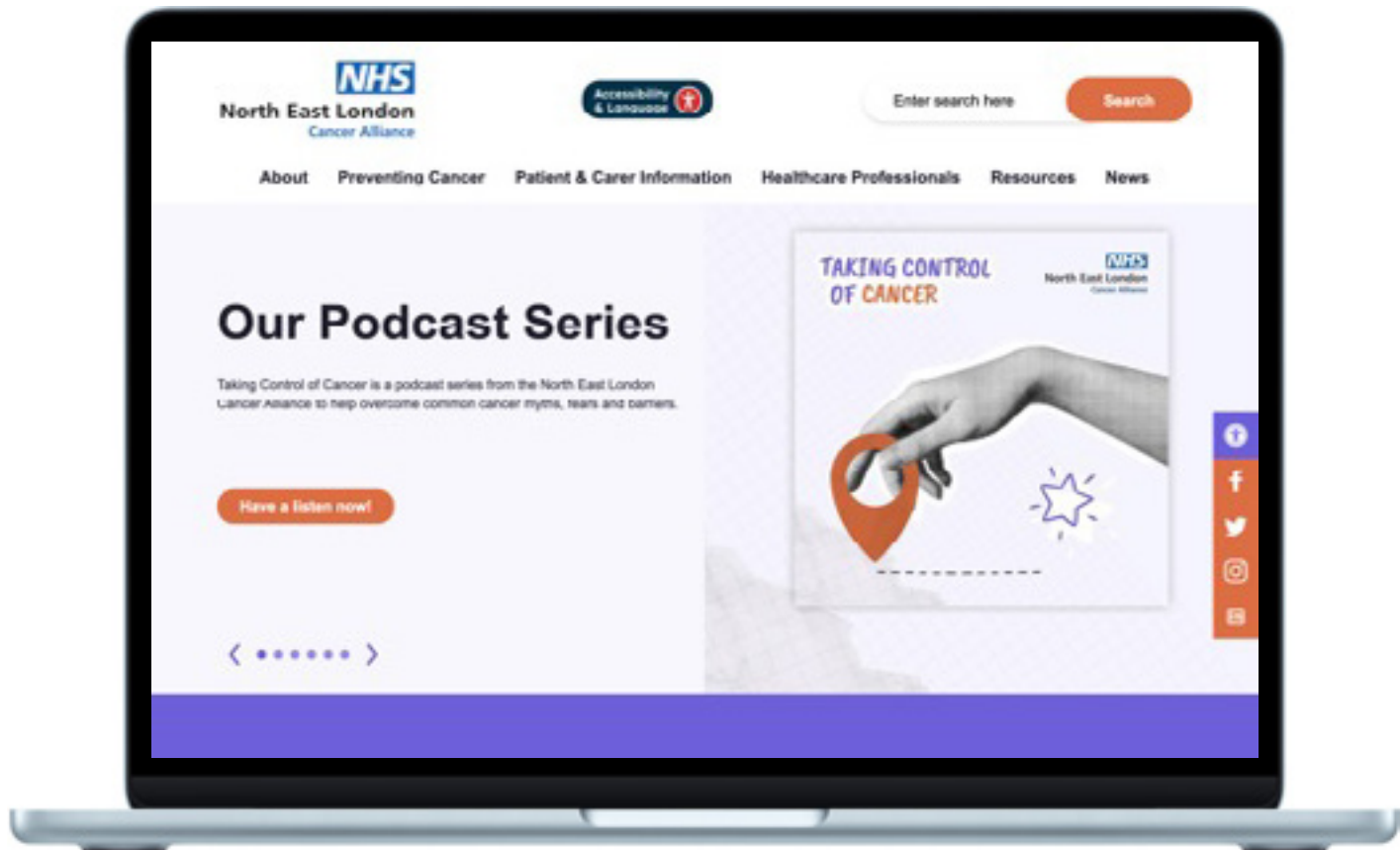
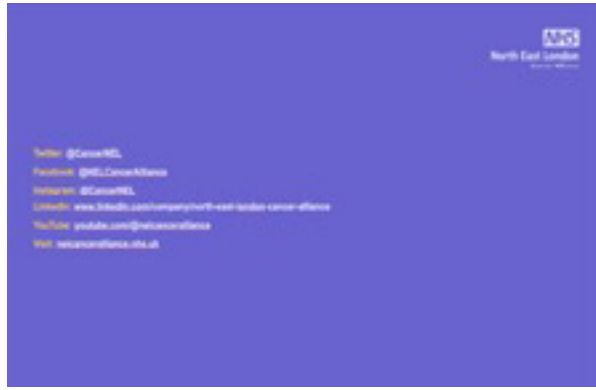
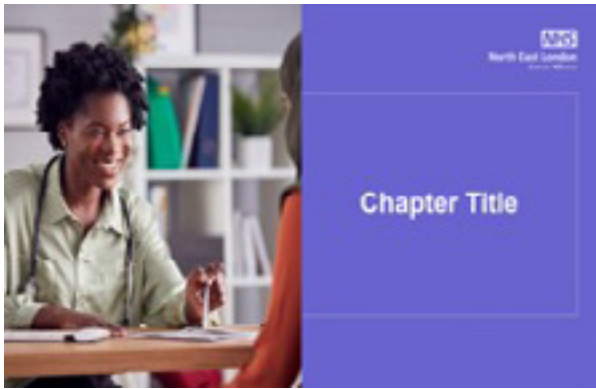
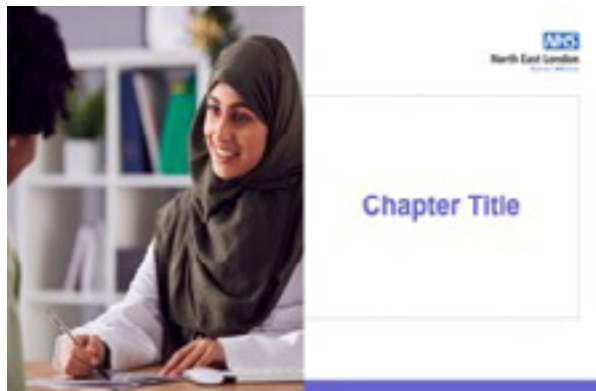
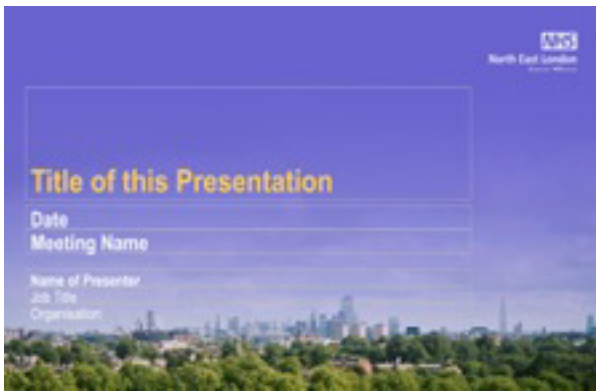
What days are we most likely to see traffic?



“It is important to provide an inclusive online experience, where everyone can use our digital world in a way in which best suits their needs. As more organizations provide accessibility tools online, those who face online barriers can access information and services hassle-free. The digital world must be accessible for all.”

Ross Linnett
Founder and CEO,
Recite Me

Cancer alliance branding



Resources and materials



Improving local cancer services

Our aim is that everyone has equal access to better cancer services so that we can help to:

- Prevent cancer
- Spot cancer sooner
- Provide the right treatment at the right time
- Support people and families affected by cancer

Follow us on social media
Facebook: @NELCancerAlliance
Instagram: @CancerNEL
X: @CancerNEL
Bluesky: @nelcanceralliance.nhs.uk
TikTok: @nelcanceralliance
YouTube: @nelcanceralliance

SCAN ME to find out more

Improving local cancer services

4 elements you should receive during your cancer journey

1. Heart icon
2. Clipboard icon
3. Lotus icon
4. Doctor icon

Improving local cancer services

SCAN ME to find out more

Top tips for a healthier you

- Not smoking
- Not drinking alcohol
- Keeping a healthy weight
- Eating and drinking healthily
- Keeping active
- Staying safe in the sun

SCAN ME to watch our videos on how to lower your risk of getting cancer

TAKING CONTROL OF CANCER

Host Steve Bland, award-winning podcaster and producer of the BBC podcast You, Me and the Big C, chats to special guests about common cancer myths, fears and barriers.

It is packed full of top tips and advice to keep you healthy!

www.nelcanceralliance.nhs.uk/taking-control-cancer

Get in touch!



North East London Cancer Alliance

Improving local cancer services

Our aim is that everyone has equal access to better cancer services so that we can help to:

- Prevent cancer
- Spot cancer sooner
- Provide the right treatment at the right time
- Support people and families affected by cancer

Follow us on social media
Facebook: @NELCancerAlliance
Instagram: @CancerNEL
X: @CancerNEL
Bluesky: @nelcanceralliance.nhs.uk
TikTok: @nelcanceralliance
YouTube: @nelcanceralliance

SCAN ME to find out more

Your guide to cancer services in north east London

TOP TIPS FOR PHYSICAL ACTIVITY AND EXERCISE

Web www.nelcanceralliance.nhs.uk

Facebook @NelCancerAlliance

Instagram @CancerNEL

LinkedIn <https://www.linkedin.com/company/north-east-london-cancer-alliance>

Reddit <https://www.reddit.com/user/CancerNEL>

TikTok @nelcanceralliance

WhatsApp <https://bit.ly/4oSF8Ku>

X @CancerNel

YouTube <https://www.youtube.com/@nelcanceralliance>