# A decade of difference: priorities to improve cancer care in the NHS 10-year plan

The NHS 10-year plan provides a fantastic opportunity to reset our ambitions for cancer care in England. Nearly 4 in 10 cancers are preventable through lifestyle changes. And while we are improving, cancer patients in England continue to experience poorer outcomes than other countries. We should be striving to prevent as many cancers as possible and to provide world-class care for those who develop cancer.

Over the next decade emerging technology, genomics, artificial intelligence, new types of diagnostic test, and better ways of working will shape the healthcare landscape and how care is provided. Cancer care will become more personalised and an ageing population means more patients will be diagnosed with cancer, many with multiple conditions and complex care needs.

Collectively we share an ambition to radically improve care for all cancer patients. We urge the Government to maximise the opportunity of the 10-year plan by:

#### Building on the existing cancer strategy to accelerate progress across the health system

The cancer strategy for England provides a strong basis from which to accelerate – but not all the core recommendations in the 2015-20 strategy have been fulfilled. Clear actions from this must remain a priority in the short to medium term. For example, sustainable funding must be given to Cancer Alliances, so they can fulfil their potential and drive improvement across geographical areas.

But the NHS doesn't work in isolation. It's vital that further investment is made in public health, planning for and training the cancer workforce, and in health research. With large increases in the number of long-term survivors, a sustainable approach to social care is also vital.

#### Planning for, and funding, the workforce needed to meet demand and transform care

A sufficiently resourced and skilled cancer workforce is fundamental to the success of the 10-year plan. Getting this right is pertinent across the cancer pathway. Staff shortages are impacting on our ability to diagnose patients at an earlier stage, when they have a better chance of survival, and to support patients through their treatment and beyond.

The plan must outline how NHS England will support Cancer Alliances and employers to deliver Health Education England's phase 1 cancer workforce plan to address urgent staff shortages, and to promote better use of skills mix. In the long-term, Government must ensure that estimates for future staffing needs are central, that adequate funding is made available to ensure there is the right pipeline of staff, and that retention levels improve.

### Addressing inequalities through a more personalised approach

Patient outcomes in England are subject to significant variation. Where this is unwarranted, we can see inequalities. For example, older patients, as well as children and young people, are more likely to be diagnosed with cancer as an emergency in England, which is associated with being diagnosed at a late stage and therefore poorer survival prospects. Older patients are more likely to have more complex health needs, with many having multiple conditions.

Care must be shaped around the individual, through diagnosis, treatment and beyond. Early assessments and discussions must take all their needs into account, including other health

conditions and any practical and emotional needs. Personalised and integrated care must continue to be available at end of life, with more people able to exercise their choice to die at home. The plan must set out clear ambitions to tackle inequalities. The role of Cancer Alliances in this will be critical. It is also critical that patients' experience of care is fully understood and improved, both through existing surveys and through engaging directly with patients.

The 10-year plan provides an opportunity to ensure cancer patients get world class care – let's work together to make this a reality.

## Signed by representatives of the National Cancer Advisory Group:

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