East Midlands Cancer Alliance (EMCA) Board Briefing
Meeting held Monday 29 June 2026

For the attention of EMCA Board members, Accountable Officers, CEOs, Cancer Senior Responsible Officers (SROs), Cancer Managers and Cancer Leads in ICBs and Trusts:

The East Midlands Cancer Alliance (EMCA) Board met on Monday 29 June 2026 via MS Teams to review the work and progress of partner organisations across EMCA. Richard Mitchell chaired the meeting. The Board has representation from the five East Midlands ICBs across both commissioning, medical and provider organisations. It also has representatives from Specialised Commissioning, Public Health, Workforce Training and Education, and Macmillan. The Chair opened the meeting and welcomed contributions from all colleagues.

National and Regional Cancer Performance Update

Simon Evans, Regional Chief Operating Officer, NHS England Midlands, provided an update on regional priorities, highlighting:

- Ongoing changes to the NHS performance regime are expected to strengthen EMCA's role in provider performance discussions, with greater emphasis on the impact of cancer investments and interventions alongside performance management.
- The region acknowledged EMCA's workforce challenges and confirmed support for accelerating recruitment, including regional assistance for critical vacancies where needed.
- Lung Cancer Screening remains a key regional priority, with the East Midlands currently the furthest behind nationally; however, the recovery plan is considered robust, early progress is encouraging and continued regional and national oversight will be maintained.

EMCA Cancer Alliance Update

Vicky Millward, Managing Director of EMCA, presented a strategic update on the Alliance, highlighting the evolving role of cancer alliances to be more active in supporting NHS Trust performance improvement.

Vicky also reported that national cancer performance remains challenged, especially regarding the 62-day standard. EMCA is working to proactively identify and address performance challenges, whilst also developing mechanisms to track and demonstrate return on investment.

Programme Overview

Gurjit Pahal, Associate Director of EMCA, provided a comprehensive update on programme delivery, highlighting achievements, ongoing risks, and mitigation strategies. She reported that most programmes are on track, with achievements including the implementation of GALEAS bladder testing at UHL, the go-live of project COMPASS pharmacy testing, increased HPV vaccination uptake, and expansion of community engagement activities.

Gurjit reported that workforce capacity and lung cancer screening mobilisation remain a high risk to delivery, with mitigation actions including executive oversight, targeted recovery plans, and alternative resourcing.

Performance Update

Yasmin Bhatt, EMCA Operational Performance Senior Programme Manager, reviewed regional cancer waiting times performance. April data showed a challenging picture, with performance declining across all three cancer waiting time standards compared with March.

Yasmin also provided an update on the Days Matter campaign, launched in late 2025 to support rapid improvements in 28-day and 62-day cancer waiting time performance. Overall, 28-day performance increased by 1.3%, with some tumour sites seeing particularly significant improvements. The campaign methodology is now established as a scalable improvement toolkit that can be applied more widely across the region.

Provider Board Updates

NHS Trust provider representatives shared updates on local performance, challenges and improvement initiatives:

- Nottingham University Hospitals: Reported a significant improvement in breast cancer 28-day performance. Challenges remain within gynaecology pathways, with administrative issues affecting booking processes and patient communications. Work is underway to enhance diagnostic capacity and address high DNA (Did Not Attend) rates.
- University Hospitals of Leicester: Reported ongoing performance challenges across breast, head and neck, and skin pathways. The launch of the GALEAS bladder testing service marks a significant milestone, alongside continued work to strengthen data management and improve triage processes.
- Northampton General and Kettering General Hospitals: Current priorities include increasing clinician awareness of pathway standards, publishing improvement plans across all tumour sites, and restructuring governance arrangements to better align cancer pathway meetings across both Trusts.
- Chesterfield Royal Hospital: Reported a 10% increase in referrals. Work is ongoing to improve referral quality and pathway management, while maintaining recent performance improvements, particularly across breast, lower gastrointestinal (GI) and skin pathways.

EMCA Finance and Investment Report

Vicky Millward reported that the first quarter of service development funding (SDF) has been allocated. Future funding will be prioritised for initiatives that demonstrate in-year performance improvements.

Life Sciences Hub Cancer Strategy

Vicky Millward provided an update on the progress with the Midlands Cancer Alliance's Life Sciences Partnership Hub. The Hub is matching providers with industry partners for innovation projects, with a focus on projects that are scalable. A regular update will be added to the monthly pack which is circulated to Board members.

ECAG Clinical Development

This agenda item was deferred to the next meeting.

Documents for Information

- Cancer Screening Public Health Commissioning Highlight Report
- Risk Report
- EMCA Communications Report March 2026

- EMCA Newsletter June 2026

Future Board Meeting Details:

Date: Monday 24 August 2026
Time: 01:00–03:00pm
Venue: MS Teams

EMCA ICB Leads contact details:

East Midlands ICB	EMCA Board Representative/s ICB Lead
Leicester, Leicestershire, and Rutland	Adam Andrews, Adam.andrews@nhs.net
Nottingham and Nottinghamshire	Gemma Whysall, gemma.whysall@nhs.net
Joined up Care Derbyshire	Monica McAlindon, Monica.mcalindon1@nhs.net
Better Lives Lincolnshire	Louise Jeanes, louise.jeanes@nhs.net
Northamptonshire	Peter Watson, peter.watson10@nhs.net