



saving the lives of people with blood cancer



INVITATION TO TENDER

Ensuring people in the United Kingdom with cancer receive the best care and treatment

Who we are?

A group of specialist cancer charities with a shared interest in improving cancer patient experience and outcomes.

Henny Braund MBE	CEO, Anthony Nolan
Gemma Peters	CEO, Blood Cancer UK
Genevieve Edwards	CEO, Bowel Cancer UK
Baroness Delyth Morgan	CEO, Breast Cancer Now
Diana Jupp	CEO, Pancreatic Cancer UK
Angela Culhane	CEO, Prostate Cancer UK
Richard Davidson	CEO, Sarcoma UK
Ceinwen Giles	Director, Shine Cancer Support
Annwen Jones OBE	CEO, Target Ovarian Cancer
Kate Collins	CEO, Teenage Cancer Trust
Rachel Kirby-Rider	CEO, Young Lives vs. Cancer

What is our ambition?

We want cancer patients in the UK to have world-leading cancer outcomes. However, even before the COVID-19 pandemic cancer outcomes in the UK lagged behind those in comparable countries. The pandemic has resulted in cancer diagnoses, treatment, support and service delivery being set back significantly. Behind every piece of data is a person, and their family, who deserve the very best from the NHS.

Health care professionals have worked incredibly hard to keep cancer care and treatment on track but concerted effort needs to be made to improve outcomes.

Although there are a number of groups (NHS England Cancer Board, Cancer Recovery Taskforce, Task and Finish Groups, Scotland’s National Cancer Recovery Group and the Wales Cancer Alliance) monitoring cancer care and outcomes in the UK, we feel that there is a role for our organisations to facilitate a new emphasis on listening to, and learning from, people with cancer and healthcare professionals and considering these voices alongside the performance metrics from all four nations of the UK.

As charities we are all focused on the needs of people with cancer and improving their experience, and are seeking through this work to provide valuable insight to improve their experience. We will

have a particular focus on ensuring our approach is inclusive and specifically considers the needs of people from under-served communities whose voices are often not heard enough in policy making.

Why is independence important?

Independence will help make sure that any analysis or report is not solely our view as charities and help secure buy-in from people affected by cancer and the staff involved in their care.

Although a strengthened NHS Cancer Board in England plays an important role overseeing the delivery of the cancer elements of the Long-Term Plan it is focused on managing the cancer programme rather than directly hearing from patients and health care professionals.

The project

Based on the principles above we are commissioning an external organisation, individual or consortia that can help us build a project or programme which is:

- **Centred around all cancer patients** and their holistic needs.
- Particularly focused on the **needs of people from under-served communities** with whom we as charities do less well in engaging.
- Inclusive of the views and experiences of **frontline healthcare staff**.
- Is solely focused on working to **improve cancer experience and outcomes**, including the role for charities.
- **Pan-UK** - so that cancer services in all four nations are considered.
- **Ambitious** – it needs to aspire to raising standards to compare to the best in Europe.
- **Thorough** – so not just focused on a handful of metrics for the most common cancers.
- **Evidence-based** – access to, and analysis of, a range of data sources is important.
- **On-going** – so that trends and performance over time can be considered.
- **Additive** – Builds on and enhances existing work, doesn't duplicate.

What would we like to see?

There are specific approaches we would be particularly keen to see in any proposal presented to us for consideration:

- A review of the current evidence and data across the four nations of the UK that brings forward ideas as to how we can radically improve outcome and experiences for people with cancer.
- Innovative and responsive mechanisms to engage the views and experiences of people with cancer on an on-going basis both from within our existing patient communities and beyond. This should ensure we understand the experience from all parts of the cancer community, people at different stages post-diagnosis including at different stages of treatment and post-treatment, and people with incurable or indolent cancers.
- Regular reporting to the group, and publicly where appropriate, of how care and treatment for people with cancer is improving or not with a focus on what people with cancer tell us matters most to them.
- Building compelling case studies which help a case for change.
- Involvement of health care professionals which enables them to speak freely about their ability to provide high quality treatment.
- Open and non-political comparison between approaches in the four nations so we can learn what works.

- Associated public affairs and media relations support.

Timeline

Proposal submissions: 1st September 2021

Shortlisting decision: w/c 6th September

Pitch meeting (to include CEO & patient panels): w/c 20th or 27th September

Budget

The initial budget for the development of the project is up to £30,000, with an expectation that any recommendations will include future funding options.

Selection criteria

Although there are no formal criteria, we will look for:

- Experience of involving communities of people with lived experience in programme design
- Experience of similar projects with people affected by cancer with demonstrable outcomes (client references would be welcome).
- An understanding of the cancer landscape, and the associated NHS and political dimension, in all four nations of the UK.
- Value for money.

Submitting your proposal

We would like proposals which are no longer than 15 pages not including CVs and proposed budgets.

To tender for this project, or discuss the brief please email Rachel.Kirby-Rider@younglivesvscancer.org.uk (CEO) and richard.davidson@sarcoma.org.uk (CEO).

Although we have set out what we would want to see, we welcome further ideas or refinement, including proposed timelines. This ITT covers the initial proposals but we view this as a long-term project and understand that to achieve some of the longer-term objectives we will need to secure additional funding.

We would welcome joint proposals which bring together different expertise, particularly from under-served communities and patient groups.

Next steps

The process for appointing to this project is as follows:

ITT published	26 July 2021
Deadline for responding	1 September 2021
Remote interview for shortlisted applicants	TBC w/c 20 September 2021
Notification of successful applicants	End September 2021

After we have selected the successful applicant, we would expect them to organise a meeting with the chief executives to further shape the project, including if and how we want to focus on particular aspects of patient outcomes and experience.