

Cancer Alliance



Innovation Strategy 2025-2028



Acknowledgements

We would like to extend our sincere thanks to everyone who contributed to the development of this Innovation Strategy. This includes colleagues across the Somerset, Wiltshire, Avon and Gloucestershire Cancer Alliance, and the Health Innovation West of England team, whose insight, leadership and collaborative spirit have been instrumental throughout. We are especially grateful to our Patient and Public Voice representatives, voluntary sector partners, clinical teams, and system leaders who generously shared their experiences, expertise, and ideas. This strategy is a testament to co-production in action — built on shared ambition, mutual respect, and a collective commitment to transforming cancer care through innovation, equity and excellence.

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Foreword

ancer remains a defining priority for the NHS, with over 385,000 new cases diagnosed annually in the UK — more than 1,000 every single day¹. The NHS Long Term Plan (2019) set bold targets to radically improve cancer outcomes: diagnosing 75% of cancers at stage one or two by 2028 and ensuring that 55,000 more people survive their cancer for at least five years each year².

In September 2024, the Darzi Review issued a clear call to action. While acknowledging progress in early diagnosis, particularly through the Lung Cancer Programme, it sounded the alarm on the plateauing of survival rates. The review made an urgent case for unlocking productivity and transforming care by embedding innovation and integrating emerging technologies, particularly artificial intelligence, to deliver more personalised, effective and efficient services³.

The need for action is even more pressing considering the recent analysis from Cancer Research UK (February 2025), which exposed deep and persistent inequalities in outcomes. Cancer mortality rates are up to 60% higher in the most deprived areas compared to more affluent regions, contributing to 28,400 additional deaths each year, nearly half due to lung cancer. These disparities demand a focused, equity-driven response⁴.

Over the past decade, we have seen real progress in prevention, early diagnosis and treatment, including the impact of immunotherapy, molecularly driven medicine and the emerging role of cancer vaccines. However, to truly accelerate the pace of change and meet the scale of the challenge ahead, we must take a system-wide approach — one that not only drives innovation but also supports and sustains the workforce that delivers it.

This includes aligning with the SWAG Workforce Strategy and using intelligent automation and digital technologies to reduce administrative burden, improve workflow efficiency and enable clinicians to focus on what matters most: Delivering compassionate, patient-centred care with excellence. By doing so, we can build a more resilient, sustainable and valued workforce — one that feels supported, empowered and equipped to thrive in the new digital era.

Digital and technological innovation is already reshaping cancer care across England, including within the SWAG Cancer Alliance, where it underpins every aspect of our work. The recently published 10 Year Health Plan⁵, along with the upcoming National Cancer Plan, both signal a strong commitment to embracing technology to drive system-wide change.

¹ Cancer Research UK, Cancer incidence statistics | Cancer Research UK, Accessed February 2025.

² NHS England, NHS England » The NHS Long Term Plan. Published January 2019.

Department of Health and Social Care, <u>Independent Investigation of the National Health Service</u> in England. Published September 2024.

⁴ Cancer Research UK. Cancer in the UK 2025: Socioeconomic deprivation. Published February 2025.

Department of Health and Social Care, <u>10 Year Health Plan for England: fit for the future</u>, Published July 2025.

This Innovation Strategy sets out our roadmap for an ambitious, inclusive and action-oriented transformation. From Al-enabled diagnostics and precision therapies to redesigned care pathways and community-led screening, our focus is on embedding innovation that improves outcomes and eliminates disparities. Equity is central: Every person, regardless of where they live or who they are, must have timely access to world-class cancer care.

Collaboration is the engine of this strategy. By connecting the expertise of clinicians, researchers, technologists, industry partners, and, most importantly, patients, we can accelerate the translation of breakthroughs into everyday practice. This is not just about adopting new tools — it's about cultivating a culture of continuous learning, agility, fast-tracking life and time-saving technologies and continuous improvement.

We move forward with clarity, courage and commitment. The challenge of cancer is evolving, and we must evolve with it. With the right focus, investment and innovation, we can shift the trajectory of cancer care — delivering excellence, equity and effectiveness at pace for all.



Helen Winter, Clinical Director, SWAG Cancer Alliance



Mark Juniper, Medical Director, Health Innovation West of England



Thanks to Genomic innovation, my husband Mike is still living with Stage 4 Cholangio Carcinoma (Bile Duct cancer) after 8 years. It was as he came to the end of his initial first line chemotherapy treatment in 2019, we engaged in a conversation with a very forward-thinking Oncologist about "novel" treatments and genomics.

Analysing his Cancer's genetic makeup, using a simple blood test, led to specific mutations driving his cancer being discovered and further options of targeted therapies being made available to him through trials. Some of these drugs did not exist when he was first diagnosed.

Genomic research is helping to identify new therapeutic targets, leading to the development of novel cancer treatments offering more options and hope to a patient.

Mike is shortly due to start his 6th line treatment, and we continue to hope for further discoveries to give us more options when needed.

Kate, SWAG Patient and Public Voices

Executive Summary

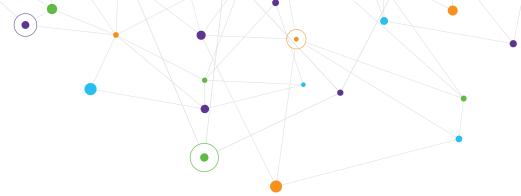
Vision:

Driving innovation to elevate cancer care — delivering earlier and faster diagnoses, more personalised treatments, and enhance outcomes for every patient

This Innovation Strategy for 2025-2028 outlines our vision, aims, and approach to ensuring the adoption and integration of cutting-edge solutions across cancer services, with a strong emphasis on digital transformation, equity of access, and collaboration.

Strategic Aims

- 1. Empower Our Workforce and Communities: Champion a culture of ambitious innovation by equipping healthcare professionals with the tools, training and confidence to feel empowered to lead and implement transformative change. Actively engage communities and patients as co-creators of progress ensuring that every individual, regardless of background, can understand, access and benefit from cutting-edge advances in cancer care.
- 2. Drive Purpose-Led Innovation Where It Matters Most: Target the biggest challenges in cancer services with high-impact, co-designed solutions. Focus innovation where it will make the greatest difference accelerating early diagnosis, transforming treatment pathways and delivering a more personalised, seamless and equitable experience for every patient.
- Lead with Integrity, Collaborate for Impact: Put strong, agile governance at the heart of everything we do. Build powerful alliances across the NHS, research, industry and communities to scale what works, share learning and drive system-wide transformation that delivers real-world results. Navigate existing roadblocks and bureaucratic complexity with purpose and precision, ensuring patient safety and robust governance remain uncompromised as we accelerate innovation.



Implementation Approach

- Workforce and Patient
 Engagement: Provide training,
 education, and support to enable
 the seamless integration of
 innovation in patient pathways.
- Technology Adoption and Evaluation: Invest in evidencebased solutions, rigorously test new technologies, and implement real-world evaluations to measure impact and acceptability.
- Partnerships and Knowledge Sharing: Collaborate with diverse stakeholders, including NHS organisations, Health Innovation Networks, Industry, the Third Sector and Research bodies to accelerate the adoption of proven innovations.

Equity and Accessibility:
 Ensure that innovation reduces health disparities and supports improvements in care that are accessible to all patients, regardless of background or geography.

By embedding innovation into every aspect of cancer care, SWAG Cancer Alliance aims to improve patient outcomes, reduce health inequalities, and position the region at the forefront of digital and technological advancements in oncology. This strategy serves as a roadmap for a future where innovation transforms cancer care, ensuring world-class treatment and support for all individuals affected by cancer across our region.

Strategy in Practice

What does this mean for?

Patients and carers – we will ensure the views of our patients and carers are central to our work on innovation. We will ensure that they are brought on our journey to co-develop plans to embrace new technologies and ways of working within cancer services. We want patients and carers to understand and influence how innovation can support their care, and we want to ensure no one is left behind and all have equity of access and quality.

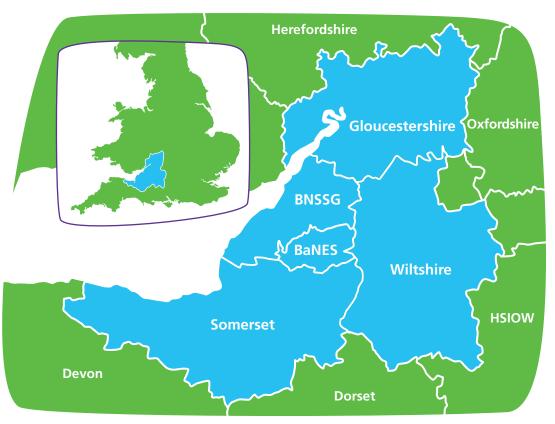
Workforce – We will support our workforce to explore innovative ways to improve patient care and outcomes and streamline pathway processes. We will co-design and implement a training and education programme to ensure colleagues feel empowered and confident to deliver innovation locally.

The Health and Care Systems – We will work in collaboration with our NHS, research, industry, local government, community partners, patients and carers to be at the forefront of digital and innovative cancer care.

Strategic Context

The Somerset, Wiltshire, Avon and Gloucestershire (SWAG) Cancer Alliance

The Somerset, Wiltshire, Avon and Gloucestershire (SWAG) Cancer Alliance is one of 20 Cancer Alliances in England, serving a population of approximately 3.3 million people. It operates across four Integrated Care Boards (ICBs)



Gloucestershire ICB

Bristol, North Somerset and South Gloucestershire ICB

Bath and North East Somerset, Swindon and Wiltshire ICB (Note: Swindon is part of the Thames Valley Cancer Alliance)

Somerset ICB

Cancer remains the leading cause of early death across the south west of England, with significant disparities in outcomes across the region. SWAG Cancer Alliance leads the planning and delivery of cancer services, aligning with the 10 Year Health Plan's ambitions to:

 Diagnose cancer earlier, improve survival, and reduce treatment variation.

- Improve patient experience and quality of life, supporting providers to implement new follow-up pathways for personalised care.
- Reduce health inequalities in cancer services, using the latest data and working with partners to identify solutions.
- Speed up cancer pathways, reducing waiting times and improving operational performance.

The Cancer Alliance collaborates with NHS organisations, local councils, charities, community and voluntary groups, patients, and others affected by cancer to design and deliver transformative services and care. Clinicians within SWAG maintain active relationships with local research bodies, aiming to strengthen these ties to ensure better linkage between clinical research and local implementation.

In line with national strategies, SWAG Cancer Alliance's annual objectives are outlined in the NHS operational planning guidance, focusing on delivering key priorities such as earlier and faster diagnosis, personalised care, reducing variation in treatment, and reducing health inequalities.

National Innovation Policy and Support

Following the change in government in summer 2024, a renewed commitment to NHS reform was signalled. As a result of this, two new cornerstone policy documents have come to fruition. The National Cancer Plan is in development and due to be published in Autumn 2025. The 10 Year Health Plan was published in July 2025 and highlights three key shifts needed across the health system:

- moving care from hospitals to communities
- making better use of technology
- focusing on preventing sickness, not just treating it

The Cancer Plan recognises the need to maximise the impact of cutting-edge innovations, such as the Cancer Vaccine Launch Pad and the emerging technologies in digital and AI, to improve outcomes and give patients the best chance of survival.

In this context, SWAG Cancer Alliance wants to lead cancer innovation across Somerset, Wiltshire, Avon and Gloucestershire. This strategy will remain iterative and responsive to future national policy, ensuring SWAG remains aligned with the NHS's evolving innovation agenda.

Regional Innovation Leadership: SWAG and the Health Innovation Network

With this ambition in mind, SWAG Cancer Alliance, Health Innovation West of England (HIWE), and Health Innovation South West (HISW) Boards approved a new collaboration in March 2024 to accelerate the discovery, development, and deployment of innovations in local cancer services. This collaboration was to fund a new joint post of Programme Manager for Cancer Innovation, along with relevant support, to establish and coordinate the delivery of a local Cancer Innovation Programme across the SWAG geography. The programme manager came into the post in July 2024 with funding agreed for an initial 24-month period.

The Cancer Innovation Programme engages with local and national cancer teams to accelerate the adoption of innovation in response to local priorities, identifying proven innovations that are ready for local deployment and promising innovations suitable for further development and evaluation.

This role is a dedicated position within HIWE, supported by the broader expertise and resources of the team. This includes access to specialists in commercial due diligence, insight and evaluation, as well as communications and engagement.

The role also benefits from being embedded within a well-established innovation ecosystem. This ecosystem connects all local health service providers, ICBs, and local universities, and maintains a dynamic interface with innovators and industry partners. The SWAG Cancer Alliance footprint covers the majority of HIWE's footprint (excluding Swindon) as well as Somerset, which is covered by HISW and therefore both HINs are working together with SWAG Cancer Alliance to deliver this programme.

It was agreed at the commencement of the programme partnership that the scope of work would include the following activities:

- A) Developing links with local, regional, and national teams involved in the diagnosis of cancer to understand specific innovation needs.
- B) Identifying and comparing proven innovations that may improve early diagnosis.
- C) Working with local cancer leads to agree on the adoption and spread of projects of selected innovations.
- Developing metrics to measure and monitor impact.

The development of this strategy was agreed to be a key deliverable to support the above and gain broader consensus on the Alliance's approach to delivering meaningful innovation.

The Health Innovation Network (HIN) plays a critical role in accelerating the spread of proven innovations across the NHS to improve patient care and health outcomes. Commissioned by NHS England and the Office for Life Sciences, the HIN operates as part of a national network of 15 regional Health Innovation Networks (formerly known as Academic Health Science Networks). Each HIN acts as a bridge between the health and care system, academia, and industry, helping to identify effective solutions to local healthcare challenges and match them with innovative technologies or models of care. The HINs manage a national innovation pipeline featuring more than 1,200 vetted products and interventions, and support their adoption through expert advice, evaluation, and implementation support. In the SWAG region, HIWE and HISW collaborate closely with the SWAG Cancer Alliance to ensure that innovations relevant to cancer prevention, diagnosis, and treatment are identified and integrated into services effectively, ultimately enhancing outcomes and patient experience.

National Infrastructure Supporting NHS Innovation

SWAG Cancer Alliance also benefits from a rich national ecosystem of innovation support. At the time of creating this strategy, innovation support organisations across England include:

- Accelerated Access Collaborative
 (AAC) NHS England's flagship body
 to expedite access to promising health
 technologies. The AAC coordinates
 key stakeholders to support rapid
 adoption and scale.
- Health Innovation Network 15
 health innovation networks across
 England, established by NHS England
 in 2013 to spread innovation at pace
 and scale, improving health and
 generating economic growth. HIWE
 and HISW benefit from their position
 within the wider Health Innovation
 Network, offering the ability to pull
 and push proven innovations to
 increase impactful adoption, spread,
 and shared learning.
- NHS Innovation Service A free online portal providing a single-entry point for innovators to access tailored support across NHS organisations, including NICE and HINs.
- NHS Innovation Accelerator (NIA)

 A fellowship programme helping scale high-impact innovations across the NHS, delivered in partnership with HINs.

The recently published 10 Year Health Plan outlines three shifts that the Government, health service, and experts agree need to happen, one of which is making better use of digital technologies. The National Cancer Plan consultation is signalling a focus on maximising our impact through the most up-to-date technology and

- Clinical Entrepreneur Programme (CEP)

 A national workforce development initiative empowering NHS staff and patient entrepreneurs to develop and implement innovation, with a pilot programme launched in 2024 focused on patients with lived experience.
- National Institute for Health and Care
 Excellence (NICE) Guides to support
 the adoption of safe, effective and
 value-for-money technologies, including:
 - Technology appraisals
 - Medical technologies and diagnostics guidance
 - Al and digital health assessment services
- Medicines and Healthcare Products
 Regulatory Agency (MHRA) Regulates
 medical devices and digital health
 technologies under a national statutory
 framework, ensuring safety and efficacy.
- National Institute for Health and Care
 Research (NIHR) Funds and delivers
 applied research to improve health and
 care. SWAG is directly linked to two
 Applied Research Collaboratives (ARCs),
 ARC West and ARC South West Peninsula,
 enabling strong translational research
 pipelines into local practice.

innovations and building on successful NHS initiatives, such as the Cancer Vaccine Launch Pad, so that patients have the best chance of beating cancer. This strategy will therefore need to be iterative based on the innovation-related ambitions that may be outlined in the upcoming national plans and flexible to local and national priorities.

Case Studies: Innovation in Action

A series of case studies from across SWAG Cancer Alliance have been written throughout the document to illustrate how our strategic aims are being translated into real-world impact. These are a mixture of completed projects and projects in train.

These examples showcase practical applications of innovative tools, pathways,

and partnerships already improving outcomes, streamlining services, and addressing inequalities in cancer care. Each case study provides insight into the problem addressed, the innovation implemented, and the measurable benefits delivered, offering a blueprint for wider adoption across the region and beyond.

Case Study 1: Cost-Effective Triage of Incidental Pulmonary Nodules Using AI

The Radiology team at the Royal United Hospitals Trust assessed and trialled an automated lung nodule triage AI tool, Veye Lung Nodule from Deep Health Limited.

The team reviewed 243 thoracic CT scans from one week in March 2022 and identified a 10% error rate in nodule reporting, including missed actionable nodules and incorrect management recommendations.

Three simulated triage pathways were evaluated using the Veye Lung Nodule Albased tool, and results showed that virtual clinic review triggered by a combination of Al and radiologist input could reduce costs and improve management accuracy.

The potential savings were greatest when a secondary review was triggered when AI failed to identify nodules, but a

non-specialist radiologist identified a nodule, highlighting the nuanced value of human-Al collaboration.

Despite limitations such as sample size and setting, the study supports integrating Al triage to enhance clinical outcomes and reduce unnecessary expenditures.







Case Study 2: Supported Self-Management Pathways with Digital Remote Monitoring

In line with the Long Term Plan, NHS England set out plans for supported self-management pathways, with digital remote monitoring, for less complex patients for breast, colorectal, and prostate cancers initially, with further roll out to appropriate pathways. This pathway ensures that patients will not have to travel back to hospital simply to be given scan/test results that show no cause for concern. Using digital platforms allows for patients to get more control over their own health with patient portals as they could access their results and outputs of personalised care interventions i.e. Personalised Care and Support plans and End of Treatment Summaries.

SWAG Cancer Alliance was one of the early pioneers across the country to take a regional approach to support roll out of these pathways with digital remote monitoring. SWAG Cancer Alliance provided clinical leadership to support with the change of the follow up model after 20+ years, funding to support trusts with implementing the digital solutions, and a dedicated project



manager to coordinate, support trusts, and drive implementation. Somerset expanded Somerset Cancer Register, their cancer management system, and the rest of the trusts procured My Medical Record.

It was acknowledged both locally and nationally, that providing this dedicated support was key to successful implementation and these pathways are fully embedded across SWAG improving patient experience and quality of life for people following treatment for cancer, as well as making services more efficient and cost-effective.



Our Strategic Aims

The SWAG Cancer Alliance is committed to leveraging innovation and technology to enhance early and faster diagnosis and treatment.

1. Empower our workforce and communities by developing and establishing a culture of innovation

Although technology and innovation are increasingly embedded in our daily lives, their use within clinical settings can still be met with some hesitancy among both patients and healthcare professionals. However, with the NHS facing persistent challenges in workforce recruitment, retention, and funding, and as the public becomes more accustomed to using technology in other areas of life, embracing innovation is an essential lever for improving cancer outcomes. Across the NHS, there are already numerous examples where innovation has successfully accelerated detection and diagnosis and enhanced support for patients throughout treatment.

To embed innovation effectively within cancer pathways, our workforce and infrastructure must be equipped to adopt and sustain it. Even the most advanced technologies will fall short if the staff using them lack confidence or trust, or if the environment is not adequately prepared for implementation. Some of the challenges often experienced when implementing innovation are

the data sharing agreements required across the NHS and innovators, clarity around procurement processes, and project management experience. Staff seeking to adopt innovations may require support relating to diverse topics such as datasharing, procurement and project management. Navigating these areas requires early and expert involvement from experts to allow projects to deliver impacts at pace.

This strategy aligns with the SWAG Workforce Strategy (November 2022), both of which focus on learning and development, skill mix, new models of care, and the enablement of staff to work to the full scope of their capabilities. Our ambition is to ensure that all staff feel confident and supported in incorporating innovation into pathways, and that they understand the steps involved in making it a success. Equally, we are committed to transparent communication with our citizens, helping them understand the benefits of clinical innovation and the safeguards in place to ensure its safe and ethical use.

Our Commitment:

We will:

- Identify local champions at all levels to maximise innovation opportunities and to develop a community of practice to drive innovation in cancer
- Work with partners to design and deliver training modules that cover the full innovation implementation process, including evaluation, to enable our workforce to confidently deliver innovation locally.
- Work with our senior decision makers, with support from our clinical leaders, to create the culture and ethos required to test new innovations with an aim to reduce risk adversity.
- Engage with members of SWAG's Patient and Public Voices Group and the Voluntary, Community, Faith, and Social Enterprise (VCFSE) sector to co-design and deliver communications to support all of our communities to understand the importance of innovation within cancer services.

- Work with partners to develop and share resources to provide support and consistency when it comes to the implementation of innovation in a clinical setting.
- Learn from local, successful implementations, and draw on learning from the national team, other HINs, and Cancer Alliances, to create a regional Data Protection Impact Assessment to streamline the implementation process.
- Work with the Cancer Innovation Community of Practice (a national group bringing together Cancer Alliances, HINs, NHS England, Cancer Research UK, and Macmillan) to establish key messages for procurement when it comes to testing and evaluating innovations. This will feed into the training and education to upskill our workforce.

Drive purpose-led innovation initiatives where it matters most

The NHS Long-Term Plan is aiming to increase early-stage (stages 1 and 2) cancer diagnoses from 55% to 75% and NHS England's Cancer Programme has prioritised funding towards innovation that can support earlier detection. Research published in *The BMJ* (2020) highlights the urgency of this goal, showing that each month's delay in cancer treatment increases mortality risk by around 10%⁶. In response, national attention has intensified on performance against the Cancer Waiting Times Standards, where timely diagnostics

are essential. While SWAG Cancer Alliance supports innovation across the entire cancer pathway, this strategy will prioritise innovation that enables earlier and faster diagnosis and treatment.

Despite the NHS seeing a surge of technology adoption over the past decade, not all innovations have originated from clearly defined needs. At times, solutions have been introduced based on persuasive marketing rather than being designed to address real, locally identified challenges. We are

⁶ Hanna, T., et al, (2020) Mortality due to cancer treatment delay: systematic review and meta-analysis, *BMJ*; 371:m4087.

committed to best practice innovation processes, beginning with needs identification to avoid this.

We will involve stakeholders, including clinicians, operational staff, and patients, throughout this process, helping to define needs and co-design solutions. This aligns with our first strategic aim, ensuring stakeholders understand and contribute to every stage of the innovation pathway, starting with clearly articulated problem statements.

Testing and evaluation are essential components of successful innovation adoption. Innovations must be assessed for clinical safety and accuracy (typically during the research phase) and then tested under real-world conditions to determine their usability and effectiveness in everyday practice. Our partnership with the HIN enables us to explore adaptive evaluation models that can support rapid, yet robust assessment of innovations, particularly those at earlier stages of development and supports agile decision-making and smoother transitions from pilot to implementation.

However, regulation has not always kept pace with innovation. While NICE and NHS England are developing guidance, particularly around higher-risk innovations such as artificial intelligence (AI), the thresholds for when an innovation has "enough" evidence to warrant widespread roll-out remain ambiguous and will vary based on various organisational risk appetites.

With hundreds of cancer-related innovations at different stages of maturity, our ambition is twofold. We want to position SWAG as both a leader in piloting cutting-edge solutions and a reliable adopter of proven innovations across our geography. In doing so, we will support equitable access to innovation for all our partners and the populations they serve.

Our Commitment:

We will:

- Work with our HINs, workforce, patients, and VCFSE colleagues, using the NHS-approved Quality, Service Improvement, and Redesign (QSIR) framework, to build on our knowledge of the needs within our Alliance and identify solutions based on their insights to enable earlier and faster diagnosis.
- Ensure solutions are inclusive and where appropriate, targeted to those who are currently underserved and that plans do not widen existing inequities.
- Align with the Clinical Leadership Strategy by collaborating with visionary clinical leaders to encourage and support the adoption of innovative technologies, treatments, and forward-facing approaches to enhance the quality, efficiency, and effectiveness of cancer care.
- Provide financial support to our stakeholders to test innovations within a real-world setting, including evaluation to measure the impact of the innovation and, in turn, evidence the benefit of SWAG funding to drive innovation.
- Actively collaborate with our local research partners, including universities and the NIHR, to attract research funding to our region, explore earlier opportunities for cancer.
- With support from our HINs, collaborate and develop meaningful partnerships with industry to identify, refine, and co-deliver solutions that meet the needs of our population.

Case Study 3: Post-Menopausal Bleeding (PMB) Pathway

The Bleeding After Menopause Service is a self-referral diagnostic service designed to allow women to bypass their GP and be seen by a specialist quicker with unexplained bleeding after menopause.

- 1. Online Self-Referral Form
 Patients complete an online
 self-referral form bypassing
 the need to contact their GP
 with worrying symptoms for
 womb cancer.
- 2. One stop PMB Clinics
 Patients eligible for the
 service are invited to attend
 an appointment at one of
 7 locations across Somerset,
 whereby they will receive an
 ultrasound scan and clinic
 appointment with a specialist.
- 3. Results
 Following the clinic the patient is either given reassurance, or further investigations are arranged via the urgent suspected cancer pathway to rule cancer in or out.
- 4. Supporting Materials
 A dedicated online PMB selfreferral form and patient
 information leaflet ensure
 consistency, patient engagement,
 and sustained performance
 against Cancer Waiting
 Times targets.

This pathway has significantly reduced waiting times, with many patients being seen within five working days. It also enhances accessibility for underserved populations and optimises the use of community hospital locations across Somerset. The Bleeding After Menopause Service exemplifies a proactive strategy to improve early detection of endometrial cancer and reduce health disparities in Somerset.





Case Study 4: SWAG Cancer Alliance Innovation Funding Call

In 2024-25 SWAG Cancer Alliance held an open innovation funding call for later stage innovations with a focus on early and faster diagnosis. The projects could bid for up to £75,000 and needed to include independent evaluation to measure the impact and inform future sustainability and roll out across SWAG.

SWAG Cancer Alliance used a multidisciplinary panel including clinical, ICB, patients, and commercial (the latter via the Health Innovation Network) representatives to review all the bids received against a criteria set out throughout the application process.

SWAG Cancer Alliance awarded funding for 7 projects which mobilised Q4 2024/25 and Q1 of 2025/26 and will run for 18 months. Projects funded include testing prostate MRI AI tools at 2 trusts, an AI tool, and telepresence technology across the endoscopy units in the Community Diagnostic Centres across the region to support training and supervision. Other projects involve a test to detect for signs or oesophageal conditions



that can be a precursor to cancer in 2 primary care practices, using an algorithm to model demand and capacity for ensuring patients are directed to the appropriate test on the colorectal pathway ahead of changes to the bowel cancer screening programme, and testing a urinary biomarker on the non-visible haematuria pathway to see if it can improve faster diagnosis.

We are excited to test these innovations within SWAG Cancer Alliance and explore opportunities for further roll out across the region once evaluations are completed.



3. Lead with integrity, collaborate for impact

The SWAG Cancer Alliance is determined to be at the forefront of innovation to improve patient outcomes and support our workforce. In 2023, it became clear that a more structured and resourced approach was needed to drive this ambition. As a result, we established the partnership with our two local Health Innovation Networks, which included the appointment of a co-hosted Programme Manager within Health Innovation West of England, in July 2024.

Engaging with industry can be complex and unfamiliar territory for many NHS staff, particularly those without commercial experience. Interpreting the evidence base behind new technologies, understanding regulatory requirements, and assessing readiness for adoption can be time-consuming and difficult to navigate. We aim to support those working in cancer to navigate these complexities and be confident to develop new innovative approaches. Through the HIN, innovators are assessed for their clinical evidence, regulatory status, and practical viability. The Programme Manager role has significantly increased awareness of this service across SWAG, offering our workforce a trusted point of contact and helping them feel more confident when engaging with external companies.

Implementing innovation, from earlystage pilots through to full adoption and spread, requires coordinated input from multiple areas, including regulation, information governance, I have prostate cancer, and my father died of it. It's really important to me that new technology brings in a safe screening method. This, thanks to recent developments, now seems to be on the horizon.

Nigel, SWAG Patient and Public Voices Group

and procurement. These processes are often complex and time sensitive. Our planned, structured innovation programme will help coordinate expertise across these domains and facilitate smoother progression of innovation projects by involving the right people at the right time. It will also support the development of meaningful partnerships and to develop business cases to embed successful pilots into routine practice and support sustainability and wider adoption.

Resources and funding are critical to innovation success. Robust governance will enable us to track progress, evaluate outcomes, and

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ensure public resources are used responsibly. This structure also helps monitor health inequalities, ensuring our innovation projects reduce, rather than exacerbate, disparities in access and outcomes.

National collaboration is also key. With 20 Cancer Alliances and 15 Health Innovation Networks operating across England, there is a significant opportunity to share best practices and learnings. The SWAG Programme Manager

is actively involved in national networks, including the HIN Cancer Pipeline Development Group, the National Cancer Innovation Community of Practice, and forums focused on AI adoption. We will also work closely with local Endoscopy, Imaging, and Pathology Networks to avoid duplication and align regional efforts. Regular engagement with neighbouring Cancer Alliances ensures shared learning and enables joint delivery of projects where appropriate.

Our Commitment:

We will:

- Ensure we have the appropriate leadership and expertise, with clear roles and responsibilities, to support the innovation programme. Ensure projects are appropriately funded and resourced to achieve their objectives, including evaluation.
- Ensure projects are set up effectively with clear project plans, provide regular highlight reports, and outline routes of escalation to the SWAG Delivery Group. Each project will also be asked to complete an Equality Impact Assessment to ensure we identify and mitigate against any health inequalities through the implementation of the project.
- Continue work with national partners, Cancer Alliances, Charities, and HINs to be at the forefront of innovation. Work with our local partners, academia and industry to submit successful bids for applicable research and innovation projects.
- Showcase SWAG's innovation projects at conferences, regional, and national meetings, and establish a SWAG innovation share and learn group to share measurable impacts from our innovation projects and import successful projects from outside SWAG's geography to identify best practices and new opportunities from others.

Case Study 5: NHS Cancer Vaccine Launch Pad (CVLP)

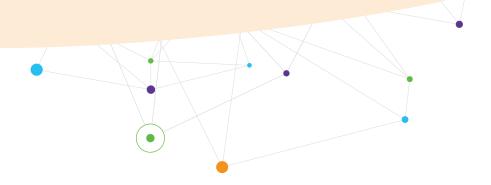


The SWAG Cancer Alliance is actively participating in the NHS Cancer Vaccine Launch Pad (CVLP), a pioneering, national initiative aimed at accelerating access to personalised cancer vaccine clinical trials across England. This programme is designed to facilitate the identification and enrolment of eligible patients into innovative mRNAbased vaccine trials, thereby enhancing early-stage cancer treatment options. The vaccines are designed to prevent recurrence of disease after the standard of care treatments have been completed. They are called vaccines because they teach the immune system to fight cancer in the same way that regular vaccines teach the immune system how to fight infections from bacteria and viruses.

The initial study (BNT 122-01), in collaboration with BioNTech SE was for colorectal cancer; recruitment commenced in April 2024 and has now reached its target with Gloucestershire having recruited the second-highest number of patients in the country to date. New studies for recurrent or metastatic head and neck and squamous cell carcinoma, and malignant melanoma are starting shortly.

This approach streamlines the process of matching patients to suitable trials, ensuring timely access to cutting-edge therapies. SWAG has successfully launched the CVLP across multiple locations, including Bristol, Gloucestershire, Bath, and Somerset. This initiative aligns with the NHS Long Term Plan's objectives to improve early diagnosis and treatment outcomes through the adoption of advanced medical technologies.

For more information about the project, and cancer vaccines in general, please see NHS England » NHS Cancer Vaccine Launch Pad or contact Mr James Bristol, Genomics Lead, GHNHSFT james.bristol@nhs.net



Measures of success

To ensure that the Innovation Strategy delivers meaningful and lasting impact, it is essential to define clear, measurable indicators of success. These measures will enable us to track progress, demonstrate value, and continuously improve our approach. They encompass patient outcomes, workforce development, technology adoption, governance, and collaboration—each aligned with our strategic aims.

Progress against these measures will be monitored through quarterly reports to the SWAG Delivery Group, with project leads responsible for providing updates on implementation milestones, evaluation outcomes, and any emerging risks or barriers.

This structured approach ensures accountability, supports shared learning, and enables successful innovations to be adopted more widely across the region.

Metrics for each strategic aim will be agreed with key stakeholders, however, may include those outlined on the following pages. It is recognised that some activities will take longer to evidence patient outcome impacts, therefore measure relating to uptake, confidence, and experience will also be important.

1. Patient Outcomes and Equity

- Aim to increase early-stage (stage 1 or 2) cancer diagnoses across the SWAG region to 75% by 2028.
- Reduction in regional disparities in cancer survival and treatment access.
- Improved patient-reported outcome measures (PROMs) and patient-reported experience measures (PREMs) in areas implementing innovation.

2. Workforce Capability and Confidence

- Number of staff trained in innovation adoption, digital tools, or Al applications.
- Increase in reported staff confidence in delivering innovation.
- Number of locally led innovation projects initiated or scaled by clinical teams.

3. Technology Adoption and Implementation

- Number of innovations piloted, evaluated, and scaled through the SWAG Innovation Programme.
- Average time from pilot to implementation for new technologies or care models.
- Volume and diversity of innovations supported (e.g., diagnostics, digital tools, community pathways).



4. Governance and Evaluation

- All funded projects include documented evaluation plans, data collection, and Equality Impact Assessments.
- Quarterly reporting of innovation KPIs to the SWAG Delivery Group.
- Number of innovations leading to business cases for sustained adoption or spread.

5. Stakeholder Engagement and Collaboration

- Number of co-designed initiatives with patient and public voice (PPV) representatives.
- Number of collaborative projects with Health Innovation Networks, research bodies, and industry.
- Stakeholder satisfaction with SWAG's innovation process.

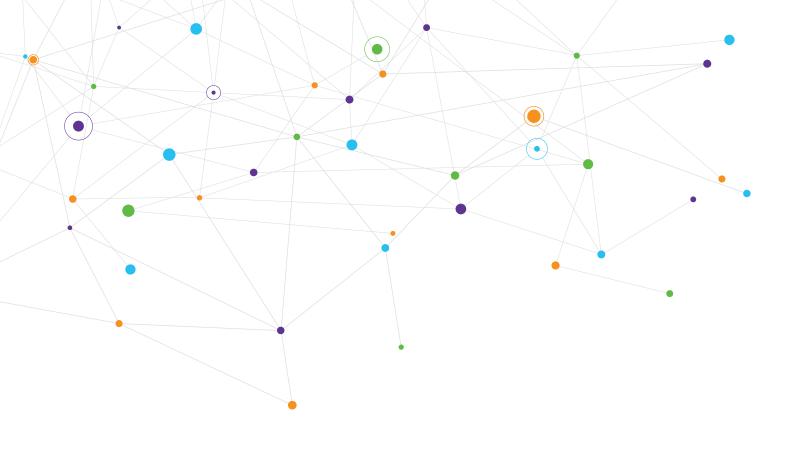
6. Visibility and Learning

- Number of SWAG case studies published or presented at regional/national conferences.
- Establishment and activity of a SWAG Innovation Share and Learn group.
- Contributions to national innovation forums or best practice publications.

Next Steps

The SWAG Cancer Alliance Innovation Strategy marks a clear and ambitious commitment to transforming cancer care through purposeful, equitable, and evidence-led innovation. As we move into the implementation phase, our immediate priorities include establishing the Innovation Programme infrastructure, finalising evaluation frameworks, and engaging with stakeholders to prioritise high-impact projects for 2025–2026. We will continue to work closely with our workforce, patients, and partners to co-design solutions, share learning, and build a culture where innovation is embedded in everyday practice.

This strategy is not a one-off plan, but a dynamic and evolving framework that will adapt to new challenges, technologies, and opportunities. By staying focused on outcomes, rooted in equity, and aligned with national direction, SWAG Cancer Alliance is well-positioned to lead the way in delivering innovative, high-quality cancer services. Together, we can ensure that every person across Somerset, Wiltshire, Avon, and Gloucestershire benefits from timely, personalised, and world-class cancer care — now and in the future.





Somerset, Wiltshire, Avon, and Gloucestershire

Cancer Alliance website: www.swagcanceralliance.nhs.uk

Email: swagca@nbt.nhs.uk

Health Innovation West of England website: www.healthinnowest.net

Email: healthinnowest.innovation@nhs.net