Dear Prime Minister, Chancellor of the Exchequer and Secretary of State for Health and Social Care

Cancer affects every family across the UK. 1 in 2 of us will get cancer in our lifetime and incidence is disproportionately high among older people and those in the most deprived communities. There are around 30,000 extra cancer cases attributable to deprivation each year in the UK.

Before COVID-19, cancer services were under considerable strain. In England, we have been routinely failing to meet the 62-day Cancer Waiting Time target for patients to begin treatment following an urgent GP cancer referral - this has not been met since December 2015. Not only has the target been missed, but it has been in continual decline since 2017, showing a service under increasing pressure. And with almost 1 in 10 NHS posts vacant before the pandemic, too few cancer specialists in the NHS and insufficient kit meant we have been failing to meet patient need. The lack of adequate support is putting a strain on other parts of the NHS, with evidence of more patients...
experiencing a serious medical problem and needing to attend A&E. Tragically, the pandemic has only put further pressure on cancer services, and on patients and the lives of family’s dependent on those services.

This poses an enormous challenge. As a group of 51 cancer charities, we are speaking with One Cancer Voice to ask the Government to urgently respond to this challenge and improve outcomes for patients in the forthcoming Spending Review by: growing the cancer workforce and investing in kit to meet patient need and drive innovation to provide better care; levelling-up on cancer to address socioeconomic factors which mean poorer communities are disproportionately affected by cancer, and; strengthening investment in cancer research and development. This investment is vital to deliver the ambitions in the NHS Long Term Plan and meet the needs of cancer patients today and in the future so that every patient can have a good quality of life and the best chance of survival.

Whilst we welcome the recent announcements of further funding to help clear the elective care backlog, this is funding only one part of the cancer challenge. And, to date, no funding has been publicly earmarked to help address existing and future cancer workforce shortages. We have been waiting for years for a fully funded long-term plan for the NHS workforce and the Government cannot delay any further. We estimate that an additional investment of around £200m in Health Education England is needed over the next three years to fill cancer workforce gaps. We are gravely concerned that without action to improve prevention, diagnosis and treatment, cancer care will deteriorate. Without action and political leadership, we are in danger of seeing cancer survival rates slipping backwards in this country and even further behind comparable countries. This means more people will die unnecessarily. We don’t believe any government would want to approach the next General Election with that record.

Without action this will become worse. The number of people diagnosed with cancer each year in the UK is projected to grow to over 500,000 by 2035, up 40% on 2015 levels. Without investment there is a real danger the Government could fail to deliver on its manifesto commitment to improve cancer survival and to diagnose 75% of cancer early by 2028 (we are currently at around 55%).

The economic and human case for investing in cancer services, research and support is clear. It will improve cancer outcomes, drive innovation and help establish a healthier and more resilient population.

The Comprehensive Spending Review is the opportunity for the Government to turn the corner on cancer. To establish the UK as world beating in cancer survival and care, and to build a life-saving legacy that will be remembered by, and benefit, generations to come. We hope that you will respond positively to the action needed on cancer.

4 Actions the Government must take at this Comprehensive Spending Review:

1. **Address gaps in the cancer workforce and kit to improve diagnosis, treatment and care**
   - Deliver on the Government’s manifesto pledge to plan for the cancer workforce by providing a multi-year settlement to train and employ more cancer staff to fill current vacancies and ensure that the workforce has the capacity to meet increasing demand, innovate and drive lifesaving research. Around £200m additional investment in Health Education England is needed over the 3 years to grow the key cancer professions by 45% by 2029.
   - Create a Cancer Nurse Fund of £124 million to train the next generation of Cancer Nurse Specialists, helping to deliver on the NHS Long-Term Plan promise for every patient to get a named cancer nurse.
   - Substantially invest to refresh and expand diagnostic equipment and radically reforming how diagnostic services are delivered. **The Government must fully implement the recommendations of the 2020 Richards review of diagnostic services (including rolling out the Community Diagnostic Hub model in the 150 sites committed to across England in coming years) and invest the £1.3 billion in capital funding required to bring CT, MRI and PET-CT equipment capacity to the average across comparable OECD countries.**
   - Drive earlier and faster diagnosis by implementing the reforms proposed by the 2019 Richards screening review to maximise the benefits of national cancer screening programmes.

2. **Levelling up on cancer**
• People from more deprived areas are not only more likely to get cancer, they’re more likely to be diagnosed at a late stage for certain cancer types and have trouble accessing cancer services. And, sadly, they’re more likely to die from the disease.
• Smoking is the largest single preventable cause of cancer in the UK and prevalence remains higher in more deprived communities. The Government won’t achieve its Smokefree 2030 target until 7 years too late, if recent trends continue. This target needs to be backed by investment - a Smokefree Fund should be implemented to raise revenue from the tobacco industry to pay for measures to help people quit smoking.
• The 1-year cancer survival index for England shows that variation exists across Cancer Alliances – ranging from 72.1% to 76.7% for 2018. Targeting additional funding to level up this geographic inequality so that each Alliance achieves the same indexed survival as the best Cancer Alliance would contribute substantially to improving the rate of improvement in cancer survival.
• The Government must recognise and make progress on less survivable cancers as there is substantial variation in progress to refer, diagnose and treat different cancer types.

3. **Strengthen oncology R&D – invest in an area where we can be a science superpower**

• Fulfil its commitment to increase annual public investment in R&D to £22 billion by 2024-25.
• Deliver on the cancer commitments in the Life Sciences Vision and Clinical Research Delivery Vision and increase multi-year funding for the underpinning health research infrastructure.
• Make cancer a top priority in the UK’s R&D portfolio and build a global cancer alliance to tackle the major challenges in cancer.

4. **Cancer Care**

• Cancer care and follow up must be age appropriate and tailored according to unique needs - from children and young people to older people
• The Government must work to achieve excellent psychosocial care in cancer alongside third sector organisations (aligning with the NHS Psychosocial Task and Finish group recommendations)
• The Government should publicly re-commit to its cancer care commitments in the NHS Long-Term plan of everyone getting the personalised care they need

Yours sincerely

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