

## **Neighbourhood Mobile Cancer Prevention**

**Project lead and organisation** - Simon Evans, NCL CA

**Partner organisation(s) involved** - Haringey and Camden Boroughs, Federations

**Funding requested (£)** - £174,800

**Proposed start and end dates** - September 2026 – March 2028

### **Summary**

This bid proposes a Neighbourhood Mobile Cancer Prevention service to improve cancer prevention, early detection, and health equity across North Central London (NCL), focusing initially on Camden and Haringey. It addresses key gaps: despite around 40% of cancers being preventable, there is currently no integrated, accessible service offering holistic cancer prevention advice, and screening uptake in NCL is below the national average, particularly in deprived communities. Additionally, many patients discharged from urgent suspected cancer (USC) pathways receive no structured prevention support despite ongoing risk factors.

The project will deliver a clinician-led mobile service (via a community bus) offering two core functions. First, targeted prevention support for patients discharged from cancer pathways, linking them to lifestyle interventions and ongoing care. Second, open-access, neighbourhood-based services providing advice on smoking cessation, weight management, alcohol reduction, physical activity, and mental wellbeing. The service will also promote cancer screening (e.g. FIT, HPV self-sampling), support appointment booking, and raise awareness of symptoms.

The model prioritises deployment in high-deprivation areas and will expand geographically over time. It builds on partnerships with local authorities, primary care, and community organisations to maximise reach and engagement.

Expected outcomes include increased screening uptake, improved awareness, reduced inequalities, and greater engagement with prevention services.

## **NCLCA Big Ideas Fund – Expression of Interest**

*Submit by 25 June 2026. Only NCLCA colleagues may submit.*

Questions marked with an asterisk indicate additional guidance on page 2 of this document.

Section 1 – Project Details			
<b>Proposal title</b>	<b>Neighbourhood Mobile Cancer Prevention</b>	<b>Project lead and organisation</b>	<b>Simon Evans, NCL CA</b>
<b>Partner organisation(s) involved</b>	<b>Haringey and Camden Boroughs, Federations</b>	<b>Funding requested (£)*</b>	<b>£174,800</b>
<b>Proposed start and end dates*</b>	<b>September 2026 – March 2028</b>		
Section 2 – The Idea			
<b>1. What is the challenge you are seeking to address?*</b>	<p>Cancer Research UK estimates that around 4 in 10 cancer cases in the UK are preventable. However, across NCL there is currently no dedicated service providing holistic, wrap-around conversations about cancer prevention, bringing together lifestyle risk factors, screening, symptom awareness and personalised risk reduction in a single intervention. There is also no neighbourhood-based, drop-in service where residents can easily access cancer prevention advice, screening support and referral into existing health and wellbeing services.</p> <p>Cancer screening uptake across NCL is around 10% lower than the England average for breast, bowel and cervical (25–49 years), while 62% of cancers are diagnosed at stage 1 or 2, below the national ambition of 75%. These challenges are greatest in our most deprived communities, highlighting the need for neighbourhood-based approaches.</p> <p>This pilot combines an open-access neighbourhood cancer prevention service with targeted support for patients discharged from Urgent Suspected Cancer (USC) pathways. Each year, over 100,000 people are discharged from USC pathways across NCL without a cancer diagnosis, many with modifiable cancer risk factors, yet these patients typically leave the pathway without structured prevention support. This proposal aims to convert that opportunity into meaningful action.</p>		
<b>2. What is your proposed project and – at a high level – how would it be delivered?</b>	<p>A clinician-led Neighbourhood Mobile Cancer Prevention model, on a bus that reaches into Camden and Haringey. The service would partner with local authorities, drawing on local knowledge and relationships.</p> <p><b>The service would have two complementary functions:</b></p> <p><b>1. Targeted prevention interventions for patients discharged from cancer diagnostic pathways</b></p> <ul style="list-style-type: none"> <li>• Referral from UCLH, NCUH and Whittington Health following discharge from urgent suspected cancer pathways. Positioned as the final OPA of the cancer pathway.</li> <li>• Links to further support focused on reducing future cancer risk and improving long-term health outcomes.</li> </ul>		

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	<p><b>2. Open-access cancer prevention and wellbeing support</b></p> <ul style="list-style-type: none"> <li>• Initial advice then referrals to smoking cessation, weight management, alcohol reduction, physical activity and mental wellbeing services.</li> <li>• Promote conversations around cancer screening for eligible groups, including ordering of FIT tests, HPV screening and self-sampling kits and support with booking appointments directly, for those overdue on cancer screening.</li> <li>• Raising awareness of cancer 'red flag' symptoms.</li> </ul> <p>The pilot would initially use the existing Camden Health and Wellbeing Bus to deliver targeted services in neighbourhoods with the highest deprivation levels, and lowest screening uptake, promoted with VCSEs. We would next lease an additional vehicle, enabling an expansion to Haringey, with a longer-term plan to develop an NCL-wide model.  </p>
<p><b>Section 3 – Impact &amp; Strategic Alignment</b></p>	
<p><b>3. Which <u>NCL strategic objectives</u> and/or National Cancer Plan ambitions does your project align with?</b></p>	<p>A key focus in the National Cancer Plan is the shift to a neighbourhood-based delivery of services. This proposal would offer a flexible and scalable neighbourhood model for cancer prevention and earlier diagnosis. It demonstrates a commitment to working alongside ICB, local authority, neighbourhood and public health partners, ensuring cancer remains a central consideration in future neighbourhood health models.</p> <p>The pilot focuses on reducing risk factors for preventable cancers and improving screening participation. Screening drives earlier diagnosis and better survival in line with the national aim of 75% of people diagnosed with cancer to be cancer-free or living well with cancer by 2035.</p>
<p><b>4. What impact do you expect the project to have on NCL cancer outcomes and/or patient experience?</b></p>	<p>The proposal is based on three established principles: that around 40% of cancers are preventable through modification of risk factors such as smoking, obesity and alcohol consumption, that community-based services can improve engagement amongst underserved populations; and that significant health events can create a "teachable moment" for behaviour change (McBride et al., 2003). We expect:</p> <ul style="list-style-type: none"> <li>• Increased uptake of smoking cessation, weight management and alcohol reduction services</li> <li>• Reduce inequalities through targeted deployment</li> <li>• A novel pathway linking cancer diagnostics and prevention.</li> <li>• Improved awareness of cancer 'red flag' symptoms.</li> <li>• Increased participation in screening.</li> </ul>
<p><b>Section 4 – Resources</b></p>	
<p><b>5. What do you see as the likelihood of attracting external funding?</b></p>	<p>This project would be a collaboration with Camden and Haringey councils. Camden Council will support the new service with in-kind funding from the start, via provision of the existing Camden Health and Wellbeing bus and staff time.</p> <p>The proposal aligns strongly with the priorities of charities, and the national prevention and health inequalities strategy. Evaluation could support future funding bids for expansion across NCL and beyond.</p>
<p><b>6. High-level indication of how the budget</b></p>	<p>Haringey mobile unit lease (4 days/week × 78 weeks @                      £124,800</p>

<b>would be used*</b>	<p>£400/day)</p> <p>Vehicle fit-out and branding, including re-branding for Camden bus <span style="float: right;">£10,000</span></p> <p>Equipment, consumables and IT integration <span style="float: right;">£10,000</span></p> <p>GP clinical lead (1 PA/week for 18 months) <span style="float: right;">£30,000</span></p> <p><b>Total</b> <span style="float: right;"><b>£174,800</b></span></p>
<b>Section 5 – Anything Else</b>	
<b>7. Is there anything else you would like to flag?</b>	<p>The proposal builds on established partnerships with Camden and Haringey councils, primary care, public health teams and local VCSE organisations. Existing community programmes, including Health Champions, Community Protect and One You Health Ambassadors, provide trusted routes into underserved communities and a strong foundation for neighbourhood-based engagement.</p> <p>There is an opportunity to collaborate with the EOI on Mobile cervical screening if either bis unsuccessful or indeed if both are successful</p>

## Additional Guidance on Completing this EOI

### General

- All EOIs must not exceed 2 pages.
- Please submit to [uclh.nclcanceralliance@nhs.net](mailto:uclh.nclcanceralliance@nhs.net) by 25<sup>th</sup> June 2026.
- Only NCLCA colleagues may submit.

### Section 1 – Project Details

- Our current expectation is that we will fund a small number of projects from a total funding pot of ~£600k.
- Proposed end date for the project must be no later than March 2029.

### Section 2 – The Idea

- Question 1 - Describe the problem or unmet need. Include relevant data or evidence where possible.

### Section 4 – Resources

- Question 6 - e.g., staffing, clinical time, technology, evaluation, overheads. Precise costings are not required at EOI stage.