

## Cancer Alliances London Research Fellowship Programme - Call for Projects

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For 2018-19, the three Cancer Alliances across London have come together once again to announce another round of 12 month research fellowships. With continued support from the BRCs at RMH/ICR and Imperial, we are now **calling for potential supervisors for project titles and a short brief describing the project.**

The appointment process will be in two stages:

- a) An invitation to potential supervisors to submit brief proposals, which will form the basis of a shortlist selected by an appropriate panel.
- b) An advertisement based on this shortlist for potential fellows to submit joint applications for the proposed project alongside supervisor with whom he/she wishes to work.

We aim to offer research fellowships to pre-doctoral individuals interested in healthcare improvement, including clinicians, nurses and allied health professionals (AHP) who wish to obtain further research experience. Funding is available on a full time 12 month basis, but we would also consider part time fellowships over a longer period. Research projects that lead to the completion of a higher degree are desired.

### **Cancer Alliances & research**

Since April 2017, Cancer Alliances have been set up across England, to drive the change needed to achieve the Cancer Taskforce's vision. This includes supporting the delivery of improvements in cancer outcomes, promoting best practice pathways to reduce variation in outcomes and experience across cancer pathways, and facilitate collaborative working.

Across the three Cancer Alliances, research and innovation, where possible, has been embedded into new models of care. There is now an opportunity to deliver patient - based and clinically relevant research, directly linked to new models of care initiated by Cancer Alliances in London. Current projects address various questions in early detection/diagnosis and involve biomarker/imaging initiatives. Future screening programmes are likely to incorporate methods of risk stratification to enrich populations; therefore research identifying and assessing circulating biomarkers for personalised screening is priority.

Our pan London research strategy focusses on two main strands:

- 1) Early diagnosis and detection;
- 2) Living with and beyond cancer;

In additions, we encourage the inclusion of two cross cutting themes:

- 3) Cancer in Older People; and
- 4) Applications of big data

### **1. Early Diagnosis**

**Early diagnosis/detection is a priority area for the Cancer Alliances and its research strategy.** The top five tumour types diagnosed via A&E in London are: lung, colorectal, prostate, oesophago-gastric and pancreas, and cumulatively account for more than 50% of all cancer diagnoses via emergency presentations. Our research strategy will follow two major themes to improve survival: (a) to increase the impact of existing methodology by improving risk stratification; and (b) to examine the utility of new techniques, e.g. circulating biomarkers and imaging, along with improved understanding of risk factors and population behavioural change.

## 2. Living with and Beyond Cancer

The number of patients surviving cancer treatment continues to increase and this provides new challenges for the delivery of care for patients' carers and families. This includes supportive care and rehabilitation which aims to minimise consequences of treatment and improve quality of life. The Cancer Taskforce Strategy recommends research into better understanding of the prevalence and incidence of multiple co-morbidities and their effects on outcomes and quality of life. In the recent survey 'Living With and Beyond Cancer: Survey of Healthcare Professionals' Understanding' carried out by the RM Partners Living With and Beyond Cancer Pathway Group, the need to understand long term side effects and/or late effects of cancer and/or treatment was identified as a research priority. Evidence to support models of stratified follow up, including risk-stratification and supported self-management is needed. Research is also needed to improve the coordination and planning of end-of-life and palliative care services for patients with cancer. This includes early case planning that is personalised to patients' needs and preferences.

## 3. Cancer in Older People

A priority area in the diagnosis and treatment of cancer is the elderly population. There is a growing body of evidence that older people diagnosed with cancer in the UK have poorer outcomes than in other countries and it is conceivable that older patients may be receiving substandard care due to age-related bias. There are age-related variations along the cancer patient pathway, which ultimately affect survival, and research has shown that more emphasis should be placed on a patient's physiological age, rather than their chronological age. Age may co-exist with other geographic, ethnic, cultural and economic factors which may affect outcome. There is a gap in evidence base for patient choice in the understanding of quality versus quantity of life with cancer treatment options.

## 4. Big Data

Predictive analysis of large healthcare datasets is a new cross cutting work stream introduced this year. It can encompass data mining of large databases, through to the application of artificial intelligence or machine learning. It aims to address healthcare inequalities and variations in outcome, or enable measurements of real time cost effectiveness. There is a priority to link up primary care with secondary care datasets to understand the complex challenges of early diagnosis. Working across London and beyond, could permit contrasts to be drawn in outcomes and variations by socioeconomic, demographic and genetic factors, but would also provide scalable and replicable models of care to take forward across the country.

**Closing date for research proposals, using attached template, is 25 March 2018. Please send completed proposals to [RMPartners.Research@nhs.net](mailto:RMPartners.Research@nhs.net) with details of how your project will utilise expertise and/or patient populations across London. Shortlisted projects will be notified and advertised for potential fellows who would then be encouraged to contact supervisors of their choice. Interview dates will take place week starting 18 June 2018. Projects should commence no later than September 2018.**

**Please circulate this email to interested colleagues. For any queries please contact RM Partners Project Lead, Sarah Adams: [RMPartners.Research@nhs.net](mailto:RMPartners.Research@nhs.net)**