

University Hospitals North Midlands (UHNM) Partnership: Developing an optimisation model for Cancer MDTs

Summary of Collaborative Working Project	This project was a collaborative working initiative between the University Hospitals of North Midlands (UHNM) and Regeneron to develop and implement a model for optimising cancer-care multidisciplinary teams (MDTs) meetings. The work focused on three MDTs, reviewed in a staggered sequence, to identify challenges and opportunities that would improve efficiency, consistency, and outcomes. For each MDT, a tailored implementation plan was created; changes were evaluated, and lessons learned were shared across teams to drive broader adoption. Ongoing funding was secured for a 12-month Project Manager post to continue MDT optimisation across the Trust.
The organisations involved	University Hospitals North Midlands NHS Trust Royal Stoke University Hospital, Newcastle Road, Stoke-on-Trent, ST4 6QG Regeneron The Charter Building, Vine Street, Uxbridge, Middlesex, UB8 1JG
Objectives of the Project	• Develop a process and supporting materials to optimise 3 specialist oncology MDTs within UHNM. • To share learning to support MDT optimisation across other cancer MDT within UHNM. • To secure funding for 12 months for a UHNM Project Manager to optimised MDTs.
Expected outcomes	Patients • Reduction in delays, leading to more efficient communication to patients from the MDT, and therefore an opportunity to support patients along the process. • Earlier communication of a treatment plan, due to a more efficient MDT process. • Improved patient outcomes. UHNM • Potential improvement in use of limited staff resources when supporting the MDT process. • Improvements in staff satisfaction. • Enhance quality of service. • Improve cancer waiting times performance. • Development and publication of case study relating to MDT streamlining. Regeneron • Building a collaborative working relationship with the NHS • Showing evidence of expertise and offering to support optimal care for patients. • May provide improved access to treatments in line with NICE guidance which may or may not include Regeneron medicines.
Outcomes	Regeneron provided Project Management support and applied Regeneron's "Optimising the skin cancer MDT – MDT toolkit" to understand the current skin cancer MDT processes and identified areas that were impacting on the efficiency of the 3 MDT's: Lung Cancer, Colorectal Cancer and Skin Cancer. Regeneron

	supported the NHS stakeholders to create a tailored implementation plan, supported the implementation of the plan and evaluated its impact. The evaluation demonstrated an improvement to the end of the project for the Lung cancer and the Colorectal Cancer MDTs (outlined below). The skin cancer MDT is still in the implementation phase, and this will be the initial focus for the UHNM Project Manager. The Project Manager and wider MDT team at UHNM will continue to monitor the impact as the implementation plan continues into 2026. The evaluation to the end of the project has demonstrated the following benefits: Patients • 57% Reduction in number of patients being removed from Lung Cancer MDT list (2025 vs 2024) • An extra 96 patients having confirmation of cancer/no cancer (28-day CWT) (quarterly performance Oct-Dec 25 vs Jan-Mar 25) UHNM • Creation of a process of continual improvement and embedding 12 interventions as the foundation to support the MDT • Improvement of Lung Cancer Wait Times 28-day 31-day and 62-day (quarterly performance Oct-Dec 25 vs Jan-Mar 25): ○ 28-day improved from 75.41-78.22% standard achieved ○ 31-day improved YTD 97.4 standard achieved ○ 62-day improved from 57%- 66.8% • Improvement of Colorectal Cancer Wait Times 28-day 31-day and 62-day (quarterly performance Oct-Dec 25 vs Jan-Mar 25): ○ 28-day improved from 56.78%-62.98% ○ 31-day was 87.5%-87.4% ○ 62-day improved 54.67%-56.9% • Positive staff satisfaction scores. Funding secured for 12 months MDT Project Manager employed by UHNM and in post January 2026. Shared learning across other MDTs within UHNM.
Lessons Learnt	The importance of regular project meetings to ensure tasks keep to time. Regular communication with the wider team was key to ensure the project was on track and that communication was cascaded down through the core MDT members. The importance of visibility across all the specialties in order to agree solutions that impact the patient and the MDT pathway. To view the project as evolution and continual improvement as the skin cancer service and demand fluctuates.
Funding and resources	This project involved shared time commitment from University Hospitals of North Midlands NHS Trust and Regeneron.
Publications	A case study is planned to share learnings. No publication is planned to date. Learnings are to be shared at the HSJ Cancer Forum meeting on 11th March 2026.
Date	February 2025 – January 2026