

Scottish Cancer Conference 2026 Programme

09:00	Registration and refreshments
10:00	Welcome Miles Briggs MSP, Co-Convener, Scottish Parliament Cross-Party Group on Cancer Iain Macleod and Jenny Bisset, Lived Experience Working Group Members
10:20	Michelle Mitchell OBE and Cabinet Secretary for Health and Care, Angela Constance MSP
11:00	Break and networking
11:30	Keynote speech: Finding purpose through patient involvement and turning lived experience into change Ally Boyle MBE, Patient and Chair of Public Health Scotland
12:15	Breakout sessions Session 1: Dr David Hogg Cancer Survivorship: What is it and how can it help to inform care of people with cancer now, and in the future. Session 2: University of Strathclyde and Myeloma UK From Data to decisions: Embedding quality of life and lived experience in cancer care and medicines decision-making Session 3: AstraZeneca UK Designing screening around communities: Lessons from lung cancer screening on improving awareness, trust and uptake

13:15	Lunch and networking
14:15	Breakout sessions Session 1: University of Glasgow School of Health and Wellbeing Our lives, our stories: Harnessing the power of storytelling Session 2: NHS Scotland Cancer Collaborative, Public Services Delivery Scotland Living with and beyond cancer: National Managed Clinical Networks' role in supporting, engaging and involving patients and carers affected by cancer Session 3: Cancer Research UK Scotland Centre Nothing about us without us: How can patients shape discovery cancer research within the laboratory?
15:15	Panel session
16:00	Closing remarks Jackie Baillie MSP, Co-Convener, Scottish Parliament Cross-Party Group on Cancer Jenny Bisset and Iain Macleod, Lived Experience Working Group Members
16:30	Conference close

Session synopses

09:00 Registration and refreshments

10:00 Welcome

Miles Briggs MSP, Co-Convener, Scottish Parliament Cross-Party Group on Cancer
Jenny Bisset and Iain Macleod, Lived Experience Working Group Members

10:20 Conversation with Cabinet Secretary for Health and Care Led by Michelle Mitchell OBE

Three years on from the publication of the Scottish Government's 10-year Cancer Strategy, join Cancer Research UK's Chief Executive, Michelle Mitchell OBE, for a conversation with the Cabinet Secretary for Health and Care, Angela Constance MSP, about progress so far and the challenges and opportunities ahead. Hear more about the Scottish Government's vision for improving cancer outcomes, including through prevention, early diagnosis, workforce planning and research. There will be an opportunity for the audience to ask questions of the Cabinet Secretary towards the end of the session.

11:00 Break and networking

11:30 Keynote speech: Finding purpose through patient involvement and turning lived experience into change – Ally Boyle MBE

Ally will reflect on how living with blood cancer changed the way he thinks about prevention, care, research and the voices that shape them. His keynote will trace a journey from practical action in fire and rescue, through medical retirement and uncertainty, to finding renewed confidence and purpose through patient involvement with Cancer Research UK. He will speak about the moment he realised lived experience was not simply something to be shared, but something that could challenge assumptions, improve decisions and open new opportunities to contribute. Drawing on his experience across patient involvement, cancer charities, NHS governance and public health, Ally will explore why genuine PPI must be built in from the start. The keynote will ask what it really means to listen well, share power honestly, and create the conditions for people affected by cancer to influence the decisions that shape their lives.

12:15 Breakout sessions

These sessions will showcase practical approaches, emerging evidence and shared learning that are helping to drive improvements across:

- Cancer services
- Patient experiences
- Cancer outcomes

Session 1: Dr David Hogg

Cancer Survivorship: What is it and how can it help to inform care of people with cancer now, and in the future.

In 2023, Dr Hogg was diagnosed with a brain tumour. As a GP with 13 years' experience (in rural and semi-rural settings), the insights that David experienced allowed him to reflect on the practical supports and challenges experienced as a patient. In early 2026, he co-authored a paper in the British Medical Journal with authors from Harvard and Aberdeen Universities entitled Cancer is a Chronic Disease: why don't we treat it as one? Noting that he had received input from over 40 health disciplines (a marker of superb care), he has reflected on the challenges in tracking appointments, understanding the roles of these disciplines, and the administration required to track appointments, follow-up investigations and coming to terms with his diagnosis in terms of impact on family, career, friends and practical supports after losing his driving licence, regular income and career.

The terminology of being a 'cancer survivor' sometimes sits uncomfortably with patients who are immersed in coping mechanisms of a new and often terminal diagnosis. However, there is a growing use of the term in the international literature, and it is essential that patients' lived experience sits at the core of advancing the understanding of achieving quality of life and pragmatic support for patients who have been diagnosed with and provided with treatments for cancer. As a remarkable outcome of the success of skill, talent, international research and development, survivorship from cancer is growing. Patient experience stands to benefit from increased understanding of the experience of a cancer diagnosis and treatment.



Session 2: University of Strathclyde, Cancer Medicines Outcomes Programme – Public Health Scotland (CMOP–PHS) and Myeloma UK

From data to decisions: Embedding quality of life and lived experience in cancer care and medicines decision-making

As cancer treatments and care pathways become increasingly complex, understanding quality of life (QoL) is essential to delivering person-centred care and informed decision-making. While routine healthcare data provides important information on treatments and outcomes, it does not always capture what matters most to people living with cancer. This session will explore how patient-reported outcome measures (PROMs) and real-world data (RWD) can be used

together to strengthen decision-making across the cancer pathway, from individual treatment choices to medicines access decisions. Bringing together patients, researchers, charities and decision makers, the discussion will examine how QoL evidence is currently used, where gaps remain, and how linking PROMs with RWD could better reflect patient priorities, support shared decision-making, and improve cancer care and outcomes.

Session 3: AstraZeneca UK

Equity by Design: Raising Awareness and Uptake in Lung Cancer Screening

This breakout session will explore how targeted, equity-led awareness activity can support more inclusive participation in lung cancer screening and help reduce inequalities in diagnosis and outcomes. Drawing on learning from Greater Manchester, the session will showcase two contrasting but complementary campaign approaches designed to improve awareness and uptake among underserved communities. The first presentation will highlight a broad population campaign developed to raise awareness of lung cancer screening across diverse local communities, focusing on key messages, channels, partnerships and early learning on reach and engagement. The second will present a campaign co-created with the LGBTIQ+ community, demonstrating how community insight, trusted voices and c

culturally relevant messaging can strengthen relevance, trust and participation. A patient voice will bring lived experience into the discussion, offering practical insight into the barriers, motivations and communication approaches that matter most to those invited for screening.

The session aims to inspire delegates with practical examples of how equity-led awareness campaigns, designed with and not simply for communities, can reduce stigma, enhance health knowledge and improve uptake of screening invites. The learnings are relevant to both nascent approaches to lung cancer screening and embedded screening programmes across breast, bowel and cervical cancers.

13:15 Lunch and networking

14:15 Breakout sessions

These sessions will explore how patient voices, experiences and perspectives can shape:

- Cancer research
- Cancer services and support
- The way we understand and communicate experiences of cancer

Session 1: University of Glasgow, School of Health and Wellbeing

Our Lives, Our Stories: Harnessing the Power of Storytelling

Led by people directly affected by cancer, this breakout session will examine the power of storytelling and its capacity to support and improve the lives of those living with and beyond cancer. It will explore three examples: 'A Waiting Game', a powerful new play about the complexities of living with cancer; 'Stories of Cancer and Hope', a brilliant collection of 42 stories from people affected by cancer; and 'Elephant', a book in which the author curates her own emails, tweets and other found texts to tell the story of cancer diagnosis, treatment and its aftermath. The session will demonstrate that storytelling provides a vital and often untapped wellspring of insight and information and can also build community, dispelling loneliness and isolation

Some of the standard narratives around cancer are unhelpful for those living with and beyond cancer, their families, friends and carers. It is in the act of storytelling that we are able to challenge, reimagine and rewrite these narratives into something much closer to reality, so that people can feel seen, heard, known, understood and supported. It is in sharing the stories of those affected by cancer, their clinicians and carers that deep connections are formed and humanity shines.

Session 2: NHS Scotland Cancer Collaborative

Public Services Delivery Scotland, Living with and Beyond Cancer – National Managed Clinical Networks' role in supporting, engaging and involving patients and carers affected by cancer

National Managed Clinical Networks (NMCNs) support the delivery of equitable, high-quality care for a range of rarer and more specialised cancer types across Scotland. Adopting a Once for Scotland approach, these networks bring together clinicians, patients, carers, third-sector organisations and other stakeholders to develop best practice, build clinical consensus and improve treatment pathways for the benefit of patients and healthcare professionals.

A vital component of each network is the patient and carer voice. Through their lived experience, patients and carers provide unique insights that help identify opportunities for improvement, strengthen relationships between healthcare teams and those receiving care, and ensure that network activities remain centred on patient needs throughout their design, development and implementation.

Networks support patient and carer involvement in several ways, including dedicated patient and carer groups. These groups have contributed to a wide range of key initiatives across the networks and play an important role within established governance structures, helping to shape priorities and inform decision-making. Drawing on perspectives from patients, carers, clinical leaders and network teams, this session will explore the role and impact of patient and carer groups within NMCNs and consider how patient voices can continue to be embedded within network structures. Representatives from the Scottish Adult Neuro-Oncology Network (SANON) will share their experiences and insights.



Session 3. CRUK Scotland Centre

Nothing about us without us: How can patients shape discovery cancer research within the laboratory?

It's clear to see why and how patients can shape clinical research. But what does Patient and Public Involvement (PPI) look like when you're studying signalling pathways, tumour evolution or molecular mechanisms?

Discovery research underpins future advances in cancer prevention, diagnosis and treatment, yet opportunities for people affected by cancer to influence this work remain limited.

Through round table discussions, this session will explore how meaningful PPI can be embedded in laboratory-based cancer research. Researchers, PPI professionals, clinicians, public members, and others will be invited to discuss questions such as:

- "What are the current challenges of involving patients and the public in discovery research?"
 - "How can the public meaningfully influence discovery research?"
 - "How can we encourage both lay members and researchers to undertake PPI in discovery research?"
 - "How do we avoid tokenistic PPI?"
- By bringing together people from a range of backgrounds and professional expertise, we will encourage individuals to share their perspectives and to challenge and learn from one another.

15:15

Panel session

In this closing session, people affected by cancer and professionals share what matters most to them, the changes they want to see and what decision-makers need to hear. Together, they reflect on how we can put people at the heart of cancer policy, services, research and care.

16:00

Closing remarks

Jackie Baillie MSP, Co-Convener, Scottish Parliament Cross-Party Group on Cancer
Jenny Bisset and Iain Macleod, Lived Experience Working Group Members

16:30

Conference close