

North East Lincolnshire Early Presentation of Cancer Symptoms Collaborative

Linda Henry

Unique Improvements



unique improvements
there for tomorrow

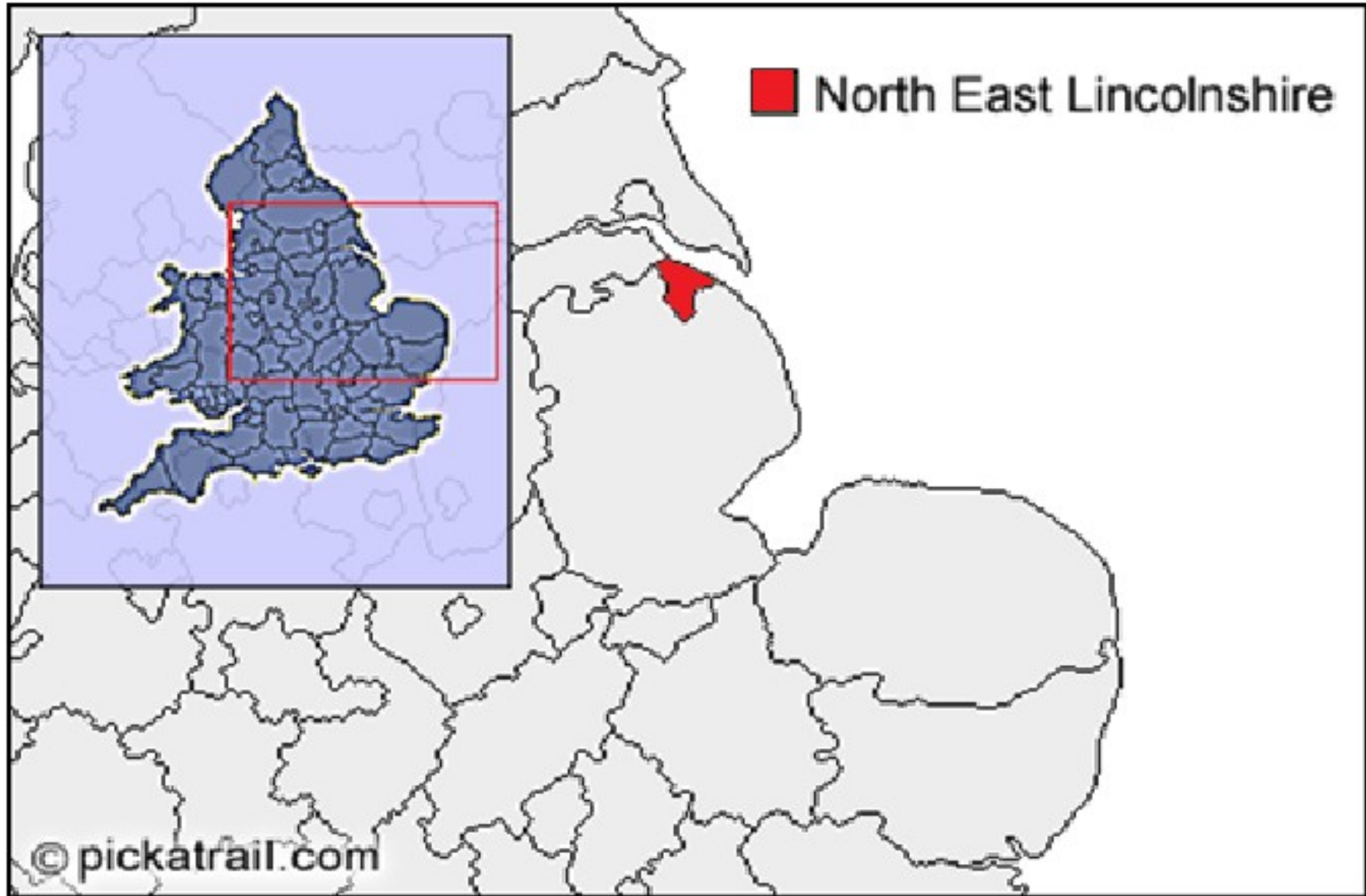
North East Lincolnshire 
Care Trust Plus

Setting the 'hamsters' free:

Towards a new model of
community led social
marketing



Where



Cancer Specific

- Stubborn health Inequalities
- Variations in referral and conversion rates
- Failing screening targets

Broader perspectives

- Inequalities across engagement indicators
- Move to Care Trust Status
- Programme to engage minds and possibilities

1

To contribute to a reduction in cancer mortality rates

2

To get patients and local people involved in making a difference, by focusing on the topic

3

To support communities & agencies to work together for common goals

To increase earlier presentation of cancer symptoms

- Increase bowel screening rates
- Increase cervical screening rates
- Increase membership of community action teams
- Increase perceptions of ability to affect change
- Increase rates of volunteering
- Increase social, bridging and bonding capital across communities
- Increased skills and use of social marketing approaches



The Programme Outline



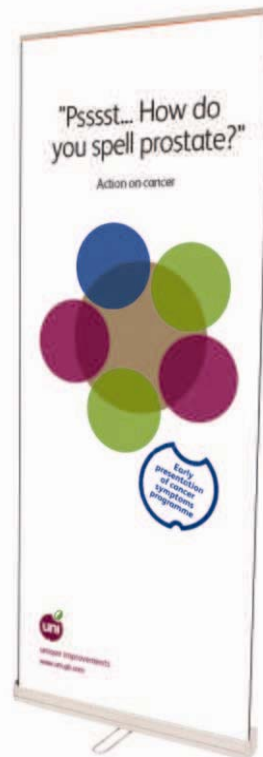
1. 'What works'
(Review evidence and good practice)

2. 'Understand local needs'

3. 'Involve local people and services'

4. 'Activity across programme'

- Test innovation
- Measure progress



- Review of best practice
- Handbook Resource
- Training from national experts
- Experts on the Ground
 - Raise awareness of need to change
 - Establish priorities – areas/topics
 - Identify networks
 - Draw on capacity, creativity local knowledge and skills

Community change agent teams

- Made up of local people
- Supported by professionals
- Draw on local networks

Steering Group to enable and support system change



- Invest in social and human capital (*179 training opportunities*)
- Relationship marketing – people as passports
- Recognise implicit and explicit reward mechanisms
- Equitable learning events

- Examine and adapt best practice for local use
- Understand local needs and contribute insight
- **Rapid doing (PDSA)**
- Use local data and measures to drive work

**People are not the problem
they are the solution**

- Translate Social Marketing Benchmark into Change Principles
- Total Planning Process Model into Rapid PDSA cycles

National Social Marketing Centre

Social marketing benchmark criteria

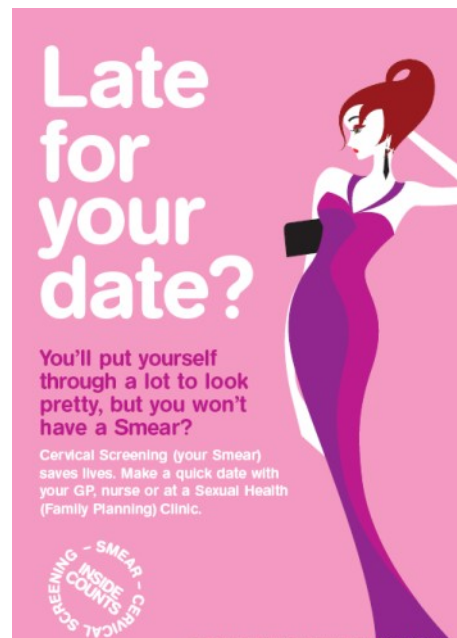
French, Blair-Stevens (2006) based on and adapted from original benchmark criteria developed by Andreasen (2002)

Benchmark	What to look for
1. Clear focus on behaviour, with specific behaviour goals	<ul style="list-style-type: none"> • Intervention clearly seeks to impact on behaviour with specific and measurable goals • Key performance indicators have been established • Fuller approach adopted (beyond just changes in behaviour)
2. Uses consumer and/or market research	<ul style="list-style-type: none"> • Formative consumer/market research used to identify audience characteristics and needs • Range of different research techniques and data synthesis methods used, from public and commercial sector sources, to inform development
3. Is theory-based & informed	<ul style="list-style-type: none"> • Transparent use of theory – the theoretical underpinning for work is clear • Mixed theory-based approach used to underpin and inform the development of interventions
4. Is insight driven	<ul style="list-style-type: none"> • Focus is clearly on gaining a deep understanding and insight into what moves and motivates the consumer • Approach based on identifying and developing 'actionable insights' using considered judgement, rather than simply generating more data and intelligence
5. Uses exchange concept	<ul style="list-style-type: none"> • Clear analysis of the full cost to the consumer in achieving the proposed benefit (financial, physical, social, etc.) • Analysis of the perceived costs versus perceived benefits • Incentives, recognition, reward, and disincentives are considered and tailored according to specific audiences
6. Uses competition concept	<ul style="list-style-type: none"> • Both internal and external competition addressed • Strategies employed to minimise the potential impact of competition
7. Uses a segmentation approach (not just targeting)	<ul style="list-style-type: none"> • Beyond a simple demographic or epidemiological targeting • Segmented approaches that focus on what motivates the target audience using psycho-graphic data • Interventions tailored directly to specific audience segments • Future life-style trends addressed
8. Integrates a mix of methods ('intervention mix' or 'marketing mix')	<ul style="list-style-type: none"> • Range of methods used to establish an appropriate mix of marketing methods • Avoids reliance on single methods or approaches used in isolation • Methods and approaches developed taking full account of any other interventions in order to achieve synergy and enhance the overall impact

Please note: These criteria focus on specific aspects of social marketing that should be considered when developing or assessing an intervention. They do not cover elements that are considered good practice in programme and project management and development e.g. strategy planning, review and evaluation. These are clearly also essential in order to develop an effective intervention.

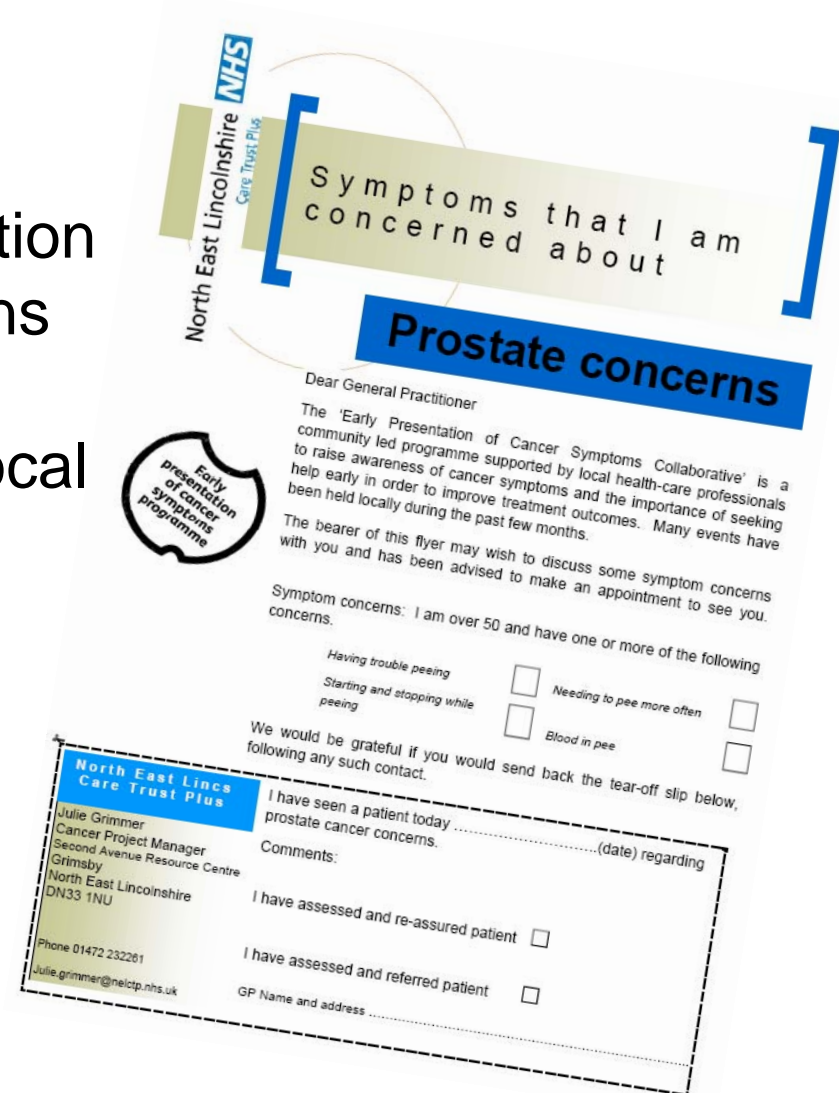
Insight

- What motivates
- What inhibits
- Existing behaviours that are transferable
- Service changes to support action



Exchange

- ‘Concern slips’ to enable presentation
 - Easy way to articulate concerns
- Placement of survivor stories of local people
- Consistent messages



North East Lincolnshire NHS Care Trust Plus

Symptoms that I am concerned about

Prostate concerns

Dear General Practitioner

The 'Early Presentation of Cancer Symptoms Collaborative' is a community led programme supported by local health-care professionals to raise awareness of cancer symptoms and the importance of seeking help early in order to improve treatment outcomes. Many events have been held locally during the past few months.

The bearer of this flyer may wish to discuss some symptom concerns with you and has been advised to make an appointment to see you.

Symptom concerns: I am over 50 and have one or more of the following concerns.

<input type="checkbox"/> Having trouble peeing	<input type="checkbox"/> Needing to pee more often
<input type="checkbox"/> Starting and stopping while peeing	<input type="checkbox"/> Blood in pee

We would be grateful if you would send back the tear-off slip below, following any such contact.

I have seen a patient today(date) regarding prostate cancer concerns.

Comments:

<input type="checkbox"/> I have assessed and re-assured patient
<input type="checkbox"/> I have assessed and referred patient

GP Name and address

North East Lincs Care Trust Plus

Julie Grimmer
Cancer Project Manager
Second Avenue Resource Centre
Grimsby
North East Lincolnshire
DN33 1NU

Phone 01472 232261
Julie.grimmer@nelcnp.nhs.uk

Segmentation

Bowel Cancer Screening

Proposition - 5 minutes for the one you love

- Who are the 40%.
- Primary and Secondary audiences to engage variety of professionals

DO YOUR BIT. USE THE KIT.

Aged 60-69? Please return your completed home screening kit and help us beat bowel cancer.

Freephone 0800 707 60 60
www.cancerscreening.nhs.uk

NHS
Bowel Cancer Screening Programme

BOWEL CANCER DON'T SIT ON IT.



Methods mix

- Video across surgeries
- Local and community media
- Back of busses
- Match programmes
- Community Events
- Parades
- Fashion Shows
- Beer mats and other resources
- Calendars to target homes
- Web sites
- Supermarkets
- Staff canteens
- Book marks distributed through libraries
- Sponsored bingo
- At football turnstiles
- Training for staff and volunteers
- Collaborative work, learning and planning between services & communities





DON'T

SIT

ON

IT



Working Together
action on cancer

**SITTING
COMFORTABLY?**

EXERCISE REGULARLY
DON'T BE A SITTER
MAINTAIN A HEALTHY WEIGHT
CALL YOUR DOCTOR

**DO IT
SIT
OUT
IT.**

goodbye come back soon

goodbye come back soon

"Doctor doctor"

Action on



University of Nottingham
www.nottingham.ac.uk

EARLY PRESENTATION OF CANCER SYMPTOMS PROGRAMME

Inside Counts!

Inside Counts!

Great of



SEATING
TICKETS ONLY



LOWER SMITHS
SEATING

MARINER TICKETS
DISCOUNT ONLY
CARD HOLDERS ONLY



35









Clinical Measures

- Improvements in referrals – 2 week 31 day
- Practice Based Registers
- Uptake/Improvements in Screening Services

Community measures

- Awareness Events
- Numbers receiving training
- New resources
- Media Placement

monthly

Pre/Post measurement tools

- Constant Feedback each team meeting
- Informing PDSA cycles
- Qualitative data regularly discussed

Clinical Measures

Tumour Site % improvement

- Gynae **13.7**
- Bowel **30.3**
- Prostate **61.9**
- Breast* **3.1***

Community measures

- 7770 significant contacts
- 402 distribution points
- 179 training opportunities

Pre/Post measurement tools

- **Increase of 15%** of people feeling confident in identifying early symptoms of cancer
- **Increase of 11%** of people who report they would seek help if they identified early symptoms of cancer

- Broader starting point
- Evidence review & handbook to use
- Ownership – not just suits instigating change?
Setting the Guinea Pigs free
- Move from a service articulation of health/wellbeing
- Enabling to do
- Translating more traditional methodology into every day framework



Contact

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