Tackling Cancer Together in Middlesbrough – Priorities & Workplan 2015/16



Tackling Cancer Together in Middlesbrough

Values	Priorities	Strategic Change	Key Workstreams	Enablers	Ambitions		
	Prevention and Early Intervention	Whole system	Changing perceptions campaign – overall messages re. lifestyle / risk factors	Sound communication Strong partnership	Basis of Prevention Strategy for multi-agency buy in		
Action based Change Agents	Increasing awareness Increasing access to support and	Culture shift	Geographical targeting – Central ward	Positive messages to encourage not enforce	Improved outcomes – cancer premature mortality		
	Empowering people	Changing perceptions / attitudes	perceptions /	perceptions /	Targeted lung cancer campaign	Making Every Contact Count	Improved outcomes and management of long term
	to take responsibility for themselves Dispelling myths / tackling fear	Supporting national awareness raising cancer campaigns	Insight from community engagement to ensure approach is fit for	Reduce late presentation and delayed diagnosis to			
		Core business objectives – local cancer provision, data, trends, performance	purpose	give people the best chance			

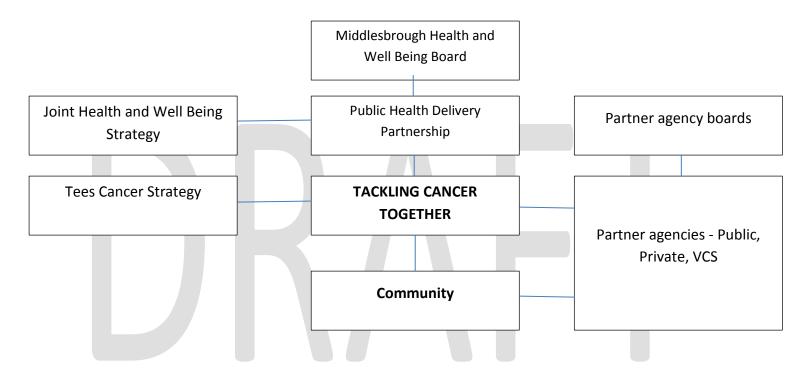
Patient Pathway:



The plan will focus on Prevention, Awareness, Early Detection and Surviviorship as the elements of the pathway where as a partnership we can have the most influence.



Accountability



Core responsibilities

- Overview of locality cancer related workstreams including gap analysis and ongoing development to strengthen existing work
- Oversight of cancer JSNA topic
- Overview of local cancer trends / performance data



The Case for Change – The national landscape

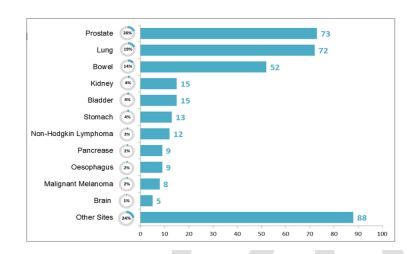
Prevelance	Late Diagnosis	Prevention
 1 in 2 people will be diagnosed with cancer in their lifetime Around half of cancer diagnosis are of the most common cancers – 		Long term health conditions (rather than illnesses linked to a one-off cure) now consume 70% of the health service budget nationally
breast, lung, prostate, colorectal	 Late diagnosis is one of the major reasons explaining poor outcomes 	 It is estimated that 70% of cancer patients have at least one other
 Cancer is the biggest cause of death from illness or disease in every age group 	 Delays in diagnosis and treatment can lead to avoidable deaths and considerable anxiety for patients 	 More than 4 in 10 cases of cancer are caused by aspects of our
 Mortality is significantly higher in men than women 	and carersTreating late stage patients is very	lifestyle which we have the ability to change
 Prostate is the most prevalent type in men and breast in women 	costly and almost always more expensive than treating patients with early stage disease	 Tobacco remains the highest risk factor, followed by obesity
Cancer survival is at its highest ever		With increasing numbers of people surviving their primary cancer, we
 More than half of people receiving a cancer diagnosis will now live 10 years or more 		need a stronger focus on preventing secondary cancers

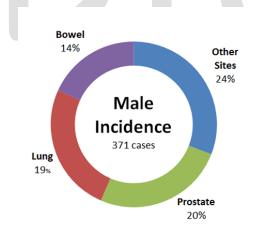


The Local Picture: Cancer Profiles for Middlesbrough – August 2015

The Most Common Cancers in Males – Incidence

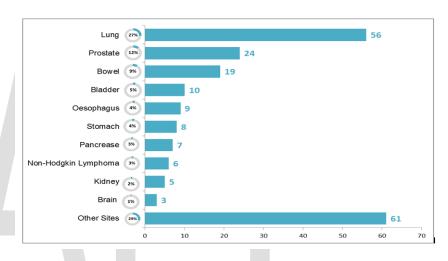
2008-10, average number of new cases diagnosed per year

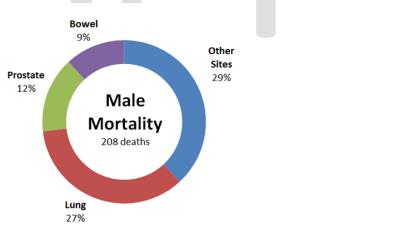




The Most Common Cancers in Males - Mortality

2008-10, average number of deaths per year

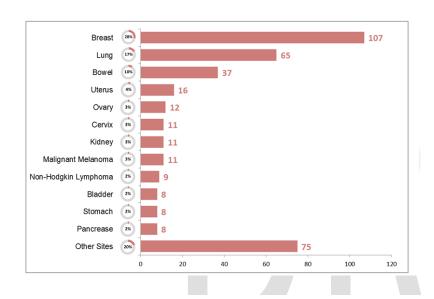


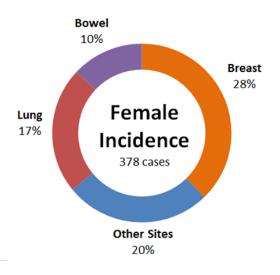




The Most Common Cancers in Females – Incidence

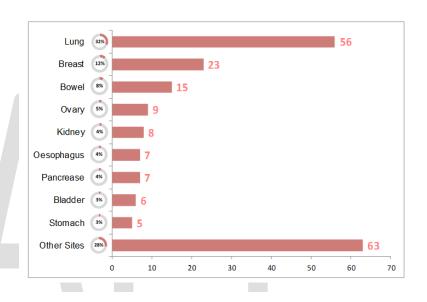
2008-10, average number of new cases diagnosed per year

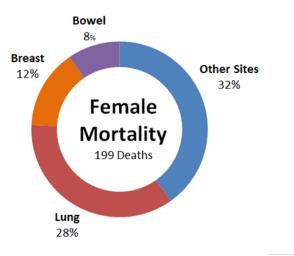




The Most Common Cancers in Females - Mortality

2008-10, average number of deaths per year





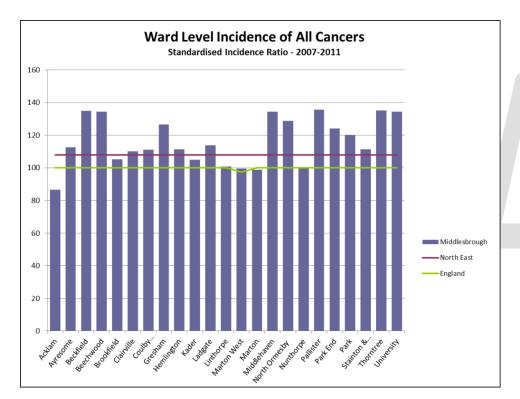


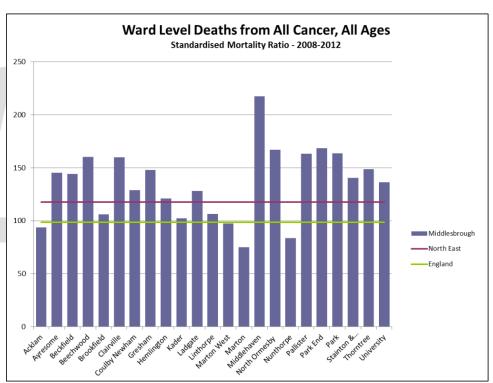
Middlesbrough Cancer Ward Summary

- New cases of all cancer, breast, colorectal, lung and prostate cancer as a standardised incidence ratio between 2007 2011
- Deaths from all cancer, all ages as a standardised mortality ratio between 2008 2012.
- Each cancer type has been ranked by ward, with a total rank across the board

Wards	All ca	ncer	Bre	ast	Color	ectal	Lui	ng	Pros	state	Dea	aths	Total
	SIR	Rank	SIR	Rank	SIR	Rank	SIR	Rank	SIR	Rank	SMR	Rank	Rank
Pallister	135.7	1	104.4	9	178.1	1	250.7	5	72.9	20	163.3	5	1
Thorntree	135.1	2	103.9	10	146.8	4	249.5	6	94.2	11	148.5	8	1
Beckfield	134.9	3	103.7	11	137.6	8	249.1	7	99.6	8	144.2	11	3
Gresham	126.6	8	119.5	4	138.8	7	220.9	9	92.4	12	147.9	9	4
North Ormesby and Brambles Fare	128.6	7	146.7	1	105.1	17	262	3	74.5	18	167	3	4
Middlehaven	134.4	4	63.3	22	150	2	292.8	1	66.9	21	217.5	1	6
Park	124.1	9	102.4	13	123.1	10	185.2	12	102.3	7	168.6	2	7
Beechwood	134.3	6	103.1	12	112.1	13	237.6	8	85.9	13	160.1	6	8
University	134.4	5	63.3	23	150	3	292.8	2	66.9	22	136.2	13	9
Ladgate	113.7	11	108.1	7	113	12	185.7	11	82.6	15	128.1	15	10
Hemlington	111.3	13	73.4	20	143.9	5	164.2	15	108.4	5	121.1	16	11
Stainton and Thornton	111.3	14	73.4	21	143.9	6	164.2	16	108.4	6	140.4	12	12
Park End	119.8	10	94.3	16	101.8	19	254.4	4	57.1	23	163.7	4	13
Marton	99.5	20	114.3	5	87.6	20	92	18	130.3	1	97.4	20	14
Coulby Newham	111	15	102	15	112	14	176.1	14	82.9	14	128.7	14	15
Brookfield	105.1	17	126.8	3	65.7	23	74.2	22	110.9	4	106.2	18	16
Ayresome	112.6	12	79.1	19	109.9	15	181.4	13	73.7	19	145.1	10	17
Clairville	110	16	86	17	82.4	22	188.5	10	75	17	160	7	18
Marton West	98.9	22	137.2	2	107	16	69.7	23	117.4	3	75	23	18
Nunthorpe	99.5	21	114.3	6	87.6	21	92	19	130.3	2	83.6	22	20
Linthorpe	100.8	19	106.4	8	104.3	18	90.1	21	97	9	106.4	17	21
Kader	104.9	18	102.3	14	130.9	9	116.2	17	75.8	16	102.4	19	22
Acklam	86.5	23	80.3	18	113.2	11	91.3	20	95.2	10	93.5	21	23
North East	10	7.9	95	.3	11	0.7	14	8.7	85	5.2	11	7.7	
England	10	00	10	0.5	99	9.7	95	5.7	10	0.3	98	3.6	1

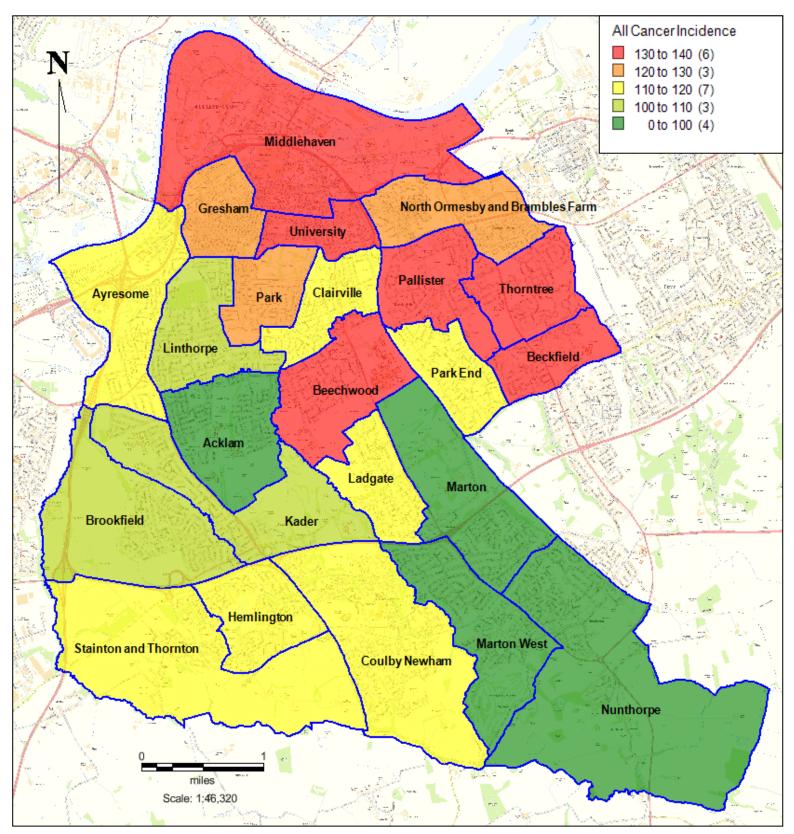






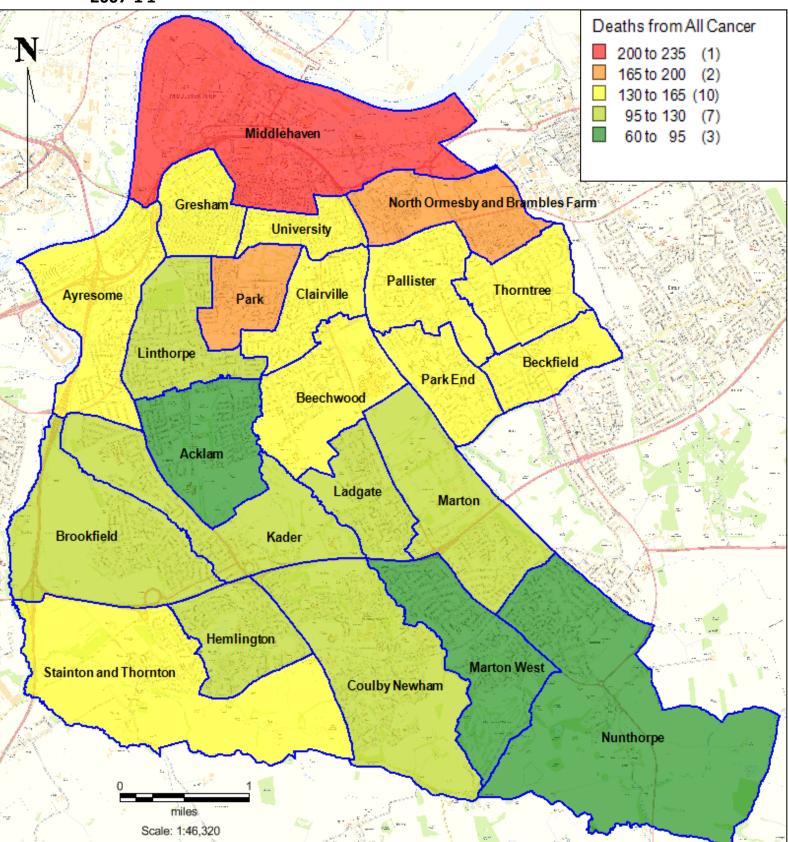


All Cancer Incidence by ward (2007-11)





All Cancer Deaths by Ward 2007-1 1





ACTION PLANS 2015/16

- > Geographical Targeting
- ➤ Lifestyle / Changing Perceptions Campaign
- > Lung Cancer Campaign
- **>** Business Objectives

RAG Rating:

Complete / on track
On track with some issues outstanding
Concerns / issues
Not commenced



TCT Workstream Leads:

Becky James, Abdul Rauf, Berni Doab

Workstream 1 – Geographical targeting

What?

- > Focus on Central Ward Middlehaven and University
- Improved offer of health and wellbeing within the area to promote positive lifestyle choice and cancer prevention
- Use as a target area for launching related campaigns (ie. lung cancer)

How?

- In depth asset map of the area in relation to people, facilities and services
- Community conversations to determine the needs of the people living in the area – issues, barriers, preferred methods of engagement etc.

Action Plan							
Action	Lead	Timescale					
Area Profiling		Oct 15					
Detailed maps of area / postcodes	Becky James	28.09.15					
Agree template for data collection / asset mapping	Becky James / all	02.09.15					
Map assets	Becky James	31.12.15					
Gap analysis / full picture of current offer within target area and how assets could work better	Workstream Leads	31.01.16					
Community Engagement		Dec 15					
Look for community events where engagement opportunities may be possible	All	Ongoing					
Agree standard general cancer awareness survey and promote to encourage high participation	Becky James / all	31.12.15					
Commission TFM to promote awareness survey as on-air competition	Becky James	31.12.15					
Analyse the results of the awareness survey and pick out key themes	Becky James	31.01.16					
Look for opportunities to engage businesses within the area	Workstream Leads / all	Ongoing					
Summary report of community engagement – key themes	Becky James	28.02.16					
Forward work plan for locality work TBC once results of mapping and awareness survey results complete	Workstream Leads	Jan 16					

TCT Workstream Leads:



Becky James, Carly Tasker, Katie Bannister, Rachel McIllvenna

Workstream 2 – Lung Cancer Campaign

What?	How?				
Targeted lung cancer campaign	Based on insight from target communities in central ward				
	Multi-agency approach linking up key stakeholders				
	Range of materials to appeal to different members of the				
	community				
Action	n Plan				
Action		Lead	Timescale		
Make links with partners involved in smoking cessation and enforcemen	nt to involve them from	Becky James / Rachel	30.09.15		
the outset		McIlvenna			
Professional insight from key partners to inform the development of the campaign		Becky James	30.11.15		
Use insight from the cancer awareness survey to inform key messages		Becky James	31.12.15		
Hold dedicated focus groups to gain insight from local people around what a local campaign		Workstream Leads	31.01.16		
should look like gaining representation from a mix of age groups					
Link with Open Access Chest X-ray pilot to ensure consistent messages		Victoria Ononeze	Awaiting		
			confirmation of		
			funding		
Agree overall outcomes, timescales, measurables, parameters of campa	nign	All	28.02.16		
Draft and design campaign materials	Workstream Leads	Feb 16			
Develop campaign plan detailing campaign methods, reach, engagement etc		Workstream Leads	Feb 16		
Official launch of campaign		All	Mar 16		
Agree evaluation scope		All	Mar 16		





TCT Workstream Leads:

Workstream 3 – Lifestyle / Changing Perceptions Campaign

Becky James, Carly Tasker, Katie Bannister

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> Overall lifestyle / risk factors awareness raising campaign to change perceptions and encourage real behaviour change

How?

- > Development of a range of materials / resources with uniform brand and consistent messages

High profile coverage with mix of engagement methods							
Action Plan							
Action	Lead	Timescale					
Explore opportunity to devise competition for design of overall campaign message	Becky James / Toni McHale/	31.10.15					
	all						
Establish internal public health working group (to bring together leads for various lifestyle	e factors) and Becky James	31.10.15					
feed in to the campaign development							
Use insight from cancer awareness survey to inform the key messages to be covered	Becky James / all	31.01.16					
Agree title for campaign and key messages	All	28.02.16					
Draft and design campaign materials	Workstream Leads	31.03.16					
Develop campaign plan detailing campaign methods, reach, engagement etc	Workstream Leads	31.03.16					
Agree overall outcomes, timescales, measurables, parameters of campaign	All	31.03.16					
Development / adaptation of existing risk factor tool checker	Workstream Leads	31.03.16					
Source real life stories to promote as part of the campaign	All	31.03.16					
Develop off-shoot information specific to raising awareness of individual cancers linked t	o national Workstream Leads / all	In line with					
campaigns		national					
		campaigns					
Develop 'Lead by Example' initiative to launch the campaign with engagement from a rar	ge of partners All	30.04.16					
Official launch of campaign	All	June 2016					
Agree Evaluation scope	All	June 2016					
Strands to be built in:							
Lifestyle choice including practical advice and access to support to make changes	All						
Engagement of businesses to promote corporate awareness and employee health	All						
Explore options for targeted work with specific groups – LD, BME etc	All						
Education programme for schools / young people	Becky James / PH leads						
Screening promotion / awareness via screeningsaveslives	Workstream leads						



Workstream 4 – Business Objectives

 What? ➤ Core business of the group to ensure joined up approach to tackling cancer 	 How? Maintaining a clear overview of local provision, trends, policy and performance 				
Actio	n Plan				
Action		Lead	Timescale		
Link our plan to relevant groups, partners (HWBB, Health inequalities w	orkstream, GP lead	Becky James / All	Nov 2015		
etc)					
Town-wide Prevention Strategy – multi agency approach		All	Summer 2016		
Review of local cancer trends – update of data		All	Annually		
Update and review local cancer provision		All	Partners to keep group		
			updated		
Update and review national policy		All	Annually		