Early Presentation of Cancer Symptoms Programme in North East Lincolnshire

Background and Context

The Cancer Collaborative (now part of the Health & Wellbeing Collaborative) in North East Lincolnshire has had a long community experience of raising awareness of the signs and symptoms of cancer, encouraging early presentation at Primary Care Services. The Programme has been running since 2007 and as such has gained valuable experience in the field which was recognized nationally when it was awarded the NHS Innovation Challenge Prize in 2012 for its Early Presentation of Cancer Symptoms Programme. Part of the work includes aspiring to increase the uptake of screening for cancers, and in 2008 when bowel screening was first introduced locally, the team rose to the challenge. It should be noted that this programme is via a community-led engagement approach, and has recruited in the region of 35 community team members (volunteers) who work in partnership with health care professionals on an equal basis. There is also a wider network of 770 cancer champions across North East Lincolnshire who spread the word locally on a personal networking basis.

Understanding the Need – Bowel screening barriers and motivators

A small team of volunteers in Immingham (a deprived locality within North East Lincolnshire) had been raising awareness of the signs and symptoms of bowel cancer in their neighbourhood for over a year before the bowel screening programme was introduced. Part of the training for the volunteers was to look at aspects of social marketing, to understand local needs, what their target audiences were and what were the barriers and motivators for people to take action. This had developed into a range of locally produced marketing material, aimed primarily at the over 50 age group, both men and women, with the ‘Don’t Sit on it’ campaign. When the bowel screening programme was introduced, this team undertook further insight to understand the barriers and motivators for the 60-69* age group in their neighbourhood and subsequently developed a range of promotional material to support the call to action.

Barriers

The barriers that people cited were similar for both the general bowel cancer awareness and the bowel screening programmes:

- Fear of cancer and thus tendency to delay in acting
- Embarrassment – due to the nature of ‘bowels’

Author: Julie Grimmer, 23rd April 2015
• Not understanding that early presentation can lead to 9/10 people overcoming bowel cancer
• Worrying about ‘posting’ the ‘poo’ in the postbox
• Not wanting to deal with their own ‘poo’

Motivators

• Understanding that early presentation ‘saves lives’
• Being able to do the screening in the privacy of their own home
• The main motivator that our volunteers found was that people seemed prepared to overcome their barriers for the ‘sake of their loved ones.’

Local Social Marketing Resources

Keeping at the forefront of their minds the theme of ‘for a loved one’, the volunteers tested out a number of ideas with people from their local community. Consequently the material below was developed.
The premise of the design is to portray a large peachy green bottom, (colour to reflect what at that time was the national cancer promotional material colour) showing heart shapes (love symbol) coming away as pieces of ‘poo.’ A shade of brown was initially tested out but this was not well liked due to its obvious association with faeces. The circular messages were produced in the form of badges and also stickers. This has enabled health care professionals, including GP staff and volunteers, to initiate conversations with people whilst wearing them, as they inevitably prompted questions: ‘have I done what yet?’ This also fits in with national research which has indicated that the endorsement of health care professionals, especially GPs can nudge people into action.

**Bowel screening uptake**

The bowel screening campaign commenced fully in North East Lincolnshire in June 2008. Right from the outset, the locality had a good screening uptake, especially when compared with the rest of the country where the lowest uptake was in the region of 20%. This level of uptake has remained consistent throughout the subsequent years. In 2010, the then Humber and Yorkshire Cancer Network commissioned a Cancer Awareness Measure (CAM) survey. North East Lincolnshire was found to have the highest awareness of the region sampled, which prompted the surveyors to ask ‘what’s been going on in North East Lincolnshire – their awareness is much higher than elsewhere.

**NHS Bowel Cancer Screening Uptake – North East Lincolnshire ALL AGES**

<table>
<thead>
<tr>
<th>Year</th>
<th>Bowel Cancer Screening Uptake (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>55.2%</td>
</tr>
<tr>
<td>2009</td>
<td>56.6%</td>
</tr>
<tr>
<td>2010</td>
<td>56.9%</td>
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<tr>
<td>2011</td>
<td>55.4%</td>
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<tr>
<td>2012</td>
<td>61.3%</td>
</tr>
<tr>
<td>2013</td>
<td>59.9%</td>
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</tbody>
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The proportion of people aged 60-69 attending bowel cancer screening is 59.9% in NHS North East Lincolnshire CCG. This is higher than the English average (58.8%).

Author: Julie Grimmer, 23rd April 2015
Proportion of those aged 60-69 screened for bowel cancer in the last 30 months (2.5 year coverage), 2013.
Confidence intervals around the CCG mean were calculated by the Statistical Information Team at Cancer Research UK using NCIN GP Profile data.

Data source – CRUK cancer statistics.

Conclusion

North East Lincolnshire has some of the most deprived wards in the country, and yet in terms of screening uptake, it is performing above the national average when compared to England overall. Drawing on the considerable experience of the programme team in North East Lincolnshire, there is a belief here that what helps to maintain this, is the constant ‘reminding’ of the key messages to the local target population by the incredible activity of the Cancer Collaborative volunteers. During 2014, the volunteers spoke to 11027 local people about cancer. People seem more ready to discuss cancer here now, compared to when the programme was launched in 2007, and it seems that cancer is now more readily regarded as a long term condition, rather than a ‘death sentence.’ Many of the volunteers are survivors of cancer themselves, and this helps to promote positive messages.

In planning for the future, we continue to monitor uptake, working with Primary Care to focus on low up take areas and work with local media to promote positive stories.

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