This briefing is the first in a series aimed at helping local teams in Devon, Cornwall and Somerset to prepare for the forthcoming skin cancer awareness campaign.

How are Be Clear on Cancer campaigns developed?
The tumour types covered by Be Clear on Cancer are prioritised based on a number of factors including: the number of deaths that could be avoided if survival rates matched the best in Europe; and the presence of an early sign or symptom that the public can identify and act upon.

Each campaign is tested locally and then regionally. If they prove effective after thorough evaluation, they are rolled out nationally.

Has the skin cancer campaign been run before?
This campaign was developed over the last six months and will run for the first time in June 2014. Department of Health (DH), NHS England and Public Health England (PHE) have taken a number of steps to make the pilot campaign as robust as possible, including:

- working with a group of experts from across different fields, including academics, dermatologists and GPs
- testing campaign materials with the target audience to ensure they understand the messages
- qualitative research with GPs in the South West to understand their thoughts on the pilot campaign
- learning from other skin cancer campaigns, including the DH funded pilot run by Cancer Research UK in Devon in 2013.

Where will the pilot activity be taking place?
Following a review of incidence and mortality data for malignant melanoma, the South West of England was identified as a good area to pilot the activity. Working in collaboration with the Strategic Clinical Network and other local partners, Devon, Cornwall and Somerset were chosen as the pilot campaign areas.

When will the Be Clear on Cancer skin cancer campaign run?
The campaign will start on Monday 16 June 2014 and will run for six weeks until the 27 July.

What sort of activity will it include?
The campaign will include leaflets, posters, radio adverts, events in your community and advertising in local newspapers. A mailing will also be sent to around 50,000 individuals in the target audience – men and women over the age of 50. There will be no TV advertising at this phase in the piloting.

What is the key message for the campaign?
A change to a mole isn't the only sign of skin cancer – if you notice any unusual or persistent changes to your skin, go to your doctor.

There are three posters, two featuring GPs and one that includes a case study of someone who has had melanoma. All the posters use the same key message and highlight that early diagnosis can improve treatment options. The leaflet goes in to more detail on the other signs of skin cancer.
What will the impact of the campaign be on GP surgeries and secondary care?
This is the first phase in the pilot process and so there are no previous results for the Be Clear on Cancer skin cancer campaign. We will use this pilot to fully understand the impact on services. This will allow us to gather information so that we can provide guidance in future, should this campaign become a regional pilot.

What impact did other Be Clear on Cancer campaigns have on NHS services?
Over the last three years we have been gathering information on Be Clear on Cancer activities. Demand on NHS services varies according to a range of factors including tumour type, symptom being promoted and the level of advertising – if TV is included then the impact is often greater. The examples below illustrate the range of impact past campaigns have had to help you plan for the skin cancer pilot*:

GP attendances: When comparing the campaign period with the same time the previous year:
- local ovarian campaign saw around 0.04 additional visits per practice, per week
- first national lung cancer campaign (which included TV) saw around 2.99 additional visits per practice, per week

Requests for diagnostic tests:
- first national lung cancer campaign saw a 20% increase in GP-referred chest x-rays
- regional blood in pee campaign (which included TV) saw a 3% rise in cystoscopy activity in the pilot areas

Urgent referrals for suspected cancer (two week wait):
- local oesophago-gastric campaign saw a 26% increase in urgent referrals in the pilot areas
- first national bowel cancer campaign (which included TV) saw a 40% increase in urgent referrals

*full details available at www.naedi.org/beclearoncancer/background

These campaigns increase pressure on NHS services, but do they actually work?
An update on results from previous Be Clear on Cancer campaigns has recently been produced and can be viewed at www.naedi.org/beclearoncancer/background. Highlights include the results of the first national lung cancer campaign. This showed that when comparing the campaign period to the same time in the previous year, there was an increase in:
- lung cancer cases diagnosed (equating to around 700 additional cases)
- the proportion of non-small cell lung cancers diagnosed at an early stage (approximately 400 more cancers)
- the proportion of lung cancer patients receiving surgical resection as a first definitive treatment (equating to around 300 more patients)

Are there any materials to help prepare local teams for the campaign?
A range of resources will be available:
- campaign briefing sheets. Two further briefings will be available to help key audiences including GPs, pharmacy teams and non-clinical colleagues
- communications colleagues in area teams, local authorities and local NHS teams will receive a PR toolkit to help them promote the campaign locally and a question and answer document to help them respond to any press or media interest
- skin cancer leaflets and posters which will be delivered to over 300 GP surgeries in the Devon, Cornwall and Somerset area. They are also available free of charge via the Health and Social Care Publications orderline telephone: 0300 123 1002
- the public-facing website for the campaign is NHS Choices and several dedicated campaign web pages are currently being created. They will be at www.nhs.uk/skincancer when the campaign launches. These pages will include a case study and a short animation. The animation will show how malignant melanoma can develop and spread to other organs, emphasising why early diagnosis and treatment is important.
- information for health care professionals at www.naedi.org/beclearoncancer. Pages dedicated to skin cancer will be live in early June.

What can I do now to start preparing for the skin cancer campaign?
- Make sure your practice teams know about the campaign and are aware of the key messages.
- Plan for an increase in appointments, diagnostic tests and urgent referrals.
- Review the Cancer Research UK GP Skin Cancer Toolkit available at Doctors.net. An evaluation of the toolkit found GPs who used it significantly increased their knowledge and confidence to refer suspicious lesions. www.doctors.net.uk/skincancer

For more information
If you have any queries about the skin cancer campaign, please email BeClearOnCancer@NHSIQ.nhs.uk

If cancer survival in England matched the best in Europe, it is estimated that 190 deaths from melanoma could be avoided each year