

FINAL VERSION
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Communications & Engagement Strategy

ICJ Powys **Improving the Cancer Journey in Powys programme**

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1.0 INTRODUCTION

This Communications and Engagement Strategy sets out the strategic intent and direction of travel over the next three years, as a document to support the delivery of the *Improving the Cancer Journey in Powys* programme (ICJ).

The ICJ is a three-year partnership programme between Macmillan, Powys Teaching Health Board (PTHB) and Powys County Council (PCC). The aim of the programme is to create a community led integrated model of care, which helps people living with cancer to have a supported conversation with a trained professional about all the things that concern them and how and what support they might need or want post diagnosis. This support can be practical, physical, emotional, spiritual, or social. A holistic need assessment (HNA) is used as a tool to facilitate the conversation and to identify needs, resulting in the development of a care plan.

This strategy outlines a framework around the communication and engagement requirements so as to support the programme objectives, ensure that both the patient and practitioner voice is heard, that these influence the final model of care via a co-production / co-design approach and that there is a two-way dialogue in situ with all stakeholders. The strategy will support the intent set out in the Welsh Government's refreshed Cancer Delivery Plan for Wales 2016-2020¹ where it states:

“Services must ensure people living with cancer are at the heart of service design.”

For the ICJ Programme, this translates into creating opportunities for engagement and consultation with the residents of Powys who are living with cancer, health professionals and the community and third sector partners who support them. It also requires regular and ongoing conversations and communications to take place through a variety of established and emerging virtual engagement channels.

This strategy is supported by a detailed communications and engagement plan which acts as a blueprint for how to involve, engage and communicate with stakeholders throughout the different stages of the programme.

¹<http://www.walescanet.wales.nhs.uk/sitesplus/documents/1113/Cancer%20Delivery%20Plan%202016-2020.pdf>

How has Covid-19 impacted our engagement plans?

The impact of Covid-19 on developing a communications and engagement strategy has led to a change of focus and a need to redefine the more traditional, tried and tested best practice approaches to both communications and engagement but particularly engagement.

Hosting face to face workshops, focus groups or organising community drop-in sessions so people living with cancer can contribute their views are all out of scope in the current social distancing climate of Covid-19. As too, are attending community meetings, having a market stall, setting up a desk and chatting to people in supermarkets foyers – all typical and beneficial ways to raise awareness of the programme and seek views.

Until the restrictions are lifted and until people living with cancer feel that face to face conversations are a suitable and safe way to meet up and discuss their needs, the conversations and engagement channels for the programme will now be focused on a suite of more virtual opportunities with some limited one-to-one conversations conducted by those working closely with or caring for people living with cancer.

During lockdown, several Powys voluntary sector organisations and partners involved in the programme have embraced the scope of virtual tools like Zoom, Google Meet and Microsoft Teams to talk to clients, host sessions and listen to and continue to deliver their services.

Alongside these new tools, telephone conversations have continued to provide a personal and welcome channel by which people living with cancer have been able to interact, share their stories and seek advice or information from a range of services.

All current and emerging channels that enable stakeholder voices to be heard and a two-way communication channel to exist will be used for the programme.

In addition, full consideration will also be given to how best to reach the more seldom heard cancer patients who may wish to get involved, tell their story and express their views but are unsure how to do so under the current Covid-19 restrictions. Our Equality Impact assessment captures more details around the equality agenda but alongside the typical channels we have identified Welsh speakers, transgender residents, farmers and younger adults whom may not immediately come forward through the typical communication channels used.

Definitions of key terms

What do we mean by stakeholder engagement?

Stakeholder engagement is a process by which the programme partners will learn about the perceptions, issues, experiences and expectations of people living with cancer alongside those of other stakeholders, and use all these views to assist and influence the development of a model of care for Powys.

What do we mean by engagement?

For this plan 'engagement' means:

Any activity or event that is organised with the specific purpose of involving or capturing feedback from stakeholders to meet the programme objectives. Engagement activities will focus on listening to the experiences and views of people who have been affected by cancer in Powys, health professionals, plus the voluntary and community sector who may support people in their communities.

Engagement methods may include virtual focus groups, online surveys, social media posts inviting feedback, virtual meetings or workshops, telephone or virtual one-to-one interviews and online polls.

What do we mean by a stakeholder?

For this plan a 'stakeholder' is:

any person or group of people who have a significant interest in, and/or who may be affected by the development of a model of care to support people living with cancer. A stakeholder could be a charity group involved in supporting people following a diagnosis of cancer, a nurse, a social worker, a union representative, a personal assistant, the local Community Health Council, a MP or AM, a county councillor or a young person who cares for a parent with cancer.

What do we mean by communication?

For this plan 'communication' means:

Any activity that provides timely and useful information to all stakeholders about the programme objectives, how to get involved and the progress being made.

Communication materials that will be used for this purpose may include e-newsletters or bulletins, press releases, e-posters, website content, presentations given at virtual workshops/events/meetings, social media posts, advertisements (social media and media)

video's, media briefings, 'stand-alone' banner/pop-up stands, feature articles for specialist or local press, news articles for intranet sites, staff e-circulars, emails, reports.

What do we mean by 'people living with cancer'?

For the purpose of this plan, the terms 'people living with cancer' means:

The individual person with a diagnosis of cancer and their family and/or carer.

Please refer to **Appendix A** for a glossary of terms and **Appendix B** for acronyms which are commonly used by the three partners involved in delivering the programme.

DRAFT

1.1 The national context

The key drivers for this programme include the Cancer Care Plan for Wales², the Macmillan Strategy 2019 - 2021³ and the recommendation from the Parliamentary Review into Health and Social Care in Wales⁴ which states ...

“new models of care must be co-designed and co-developed with the public and users of care alongside front-line health and social care professionals, and be underpinned by the design concepts set out in Prudent Healthcare, the Wellbeing of Future Generations (Wales) Act 2015 and the Social Services and Wellbeing (Wales) Act 2014.”

The ICJ programme for Powys will also look to, and learn from, work that is progressing nationally e.g. the ‘Living With & Beyond Cancer’ programmes, take inspiration and learning from the more urban ICJ model which was developed in Glasgow in 2014 and take stock of the situation facing cancer care services following the Covid-19 outbreak.

The ICJ programme is funded by Macmillan for three years as part of its commitment to help everyone with cancer live life as fully as they can. This commitment is at the heart of the Powys programme, with the outcome being to create a new, integrated model of care, within a rural county. Building on the work in Glasgow, the ICJ in Powys aims to create the following:

- A cultural shift in the approach to care and support for people living with cancer – to a greater focus on recovery, health, and wellbeing after cancer treatment.
- A shift towards holistic assessment, information provision and personalised care planning. This is a shift from a one size fits all approach, to follow up and personalised care planning based on assessment of individual risks, needs and preferences.
- A shift towards support for self-management. This is a shift from a clinically led approach to follow up care, to supported self-management, based on individual needs and preferences.

Please refer to the Programme Initiation Document for more background information and links to national documents and legislation.

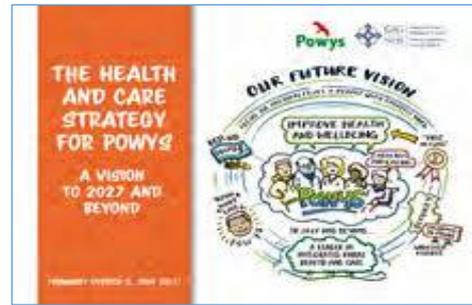
²<http://www.walescanet.wales.nhs.uk/sitesplus/documents/1113/Cancer%20Delivery%20Plan%202016-2020.pdf>

³ <https://learnzone.org.uk/strategy/>

⁴ <https://gov.wales/sites/default/files/publications/2018-01/Review-health-social-care-report-final.pdf>

1.2 The local context

Powys County Council and Powys Teaching Health Board are key partners in the Powys Regional Partnership Board. In 2018, the board launched its ten-year **Health and Care Strategy** which sets out a vision to integrate and deliver health and social care services to its residents. It includes the concept of promoting wellbeing, offering early help and support to people, under three programmes of work called 'Start Well', 'Live Well' and 'Age Well' respectively.



The Powys Health and Care Strategy

Alongside these, the key drivers are to tackle and create joined up care for the big four diseases that limit life in the county. These are: cancer, circulatory diseases, mental health, and respiratory diseases. Cancer – as one of the 'Big 4' - forms the essence of the *Improving the Cancer Journey in Powys programme*.

The programme concept also enables further links with the council's Technology Enabled Care strategic approach - aimed at improving residents' access to health care via technology fitted in their homes. The programme will also allow for further exploration and development of community/person centred solutions so as to boost self-management and improve community resilience in more rural settings.

1.3 Powys demographics and statistics

Powys is the most sparsely populated county in England and Wales, with a population of 133,000, living in an area of 2,000 square miles. Powys is about 100 miles north to south, and 25 miles east to west. The largest centre of population is in the North of the county in Newtown but residents are spread out across a wide geographical boundary from Ystradgynlais in the south bordering Swansea to Welshpool in the North and from Machynlleth in the North West to Presteigne and Knighton in the East. Powys is a county that covers a quarter of Wales in terms of landmass but has approximately only 26 people per square km.

With no District General Hospital, the rurality creates various challenges in delivering health and care services. In comparison to the Glasgow ICJ programme, for Powys the rurality aspects will create a different set of challenges.

1.4 Cancer in Powys

In 2017, 846 people were diagnosed with cancer in Powys, excluding non-melanoma skin cancer (Wales Cancer surveillance and Intelligence Unit). Of those, 400 were female and 446 males. The most common cancers - breast, colorectal, prostate and lung - account for just over half of the total of cancers in Powys and a significant majority are in the over 60 age group. In engagement terms, one of the key aspects to consider is how best to take account of the age range of people living with cancer and utilise the most appropriate channels so as to enable all, but in particular, this key 60+ age group to feed into and influence a model of care. Our Equality Impact assessment and our action plan considers and sets out how we would aim to engage meaningfully with all respective stakeholders irrespective of age, race, sexuality and language preference.

Nearly all cancer services are provided outside Powys, by either Welsh or English providers. The current service provision within Powys includes primary prevention, screening, some endoscopy and imaging services, advice and guidance and end of life support including hospice care. Powys residents requiring treatment are referred to one or more of 12 or more cancer care providers. It is therefore important that we work with providers to allow us to capture insights to feed into our model of care.

The Macmillan/Welsh Government Cancer Patient Experience Survey conducted between July and October 2016 resulted in 173 responses from 263 identified residents living with cancer within the Powys Teaching Health Board area. For the purposes of the communications and engagement work and the overall programme objectives, some of the key views given by patients are listed in the chart below.

Statement	Percentage
Received information in their preferred language	98%
GP had all the information required for their care	97%
Treatment options were fully explained before starting	94%
Rated their overall care as 7 out of 10 or higher.	90%
Offered practical advice for dealing with side effects of treatment	55%
Told about voluntary and charity support	49%
Offered opportunity to discuss needs and concerns to develop a care plan	49%
Able to completely discuss the impact of cancer on their day-to-day activities.	45%
Given information on financial help/benefits they might be entitled to	41%
Offered a written care plan	15%

Follow up local focus groups were also held by the Lead Cancer Nurse and insights and data captured from the recent Powys Community Nurse project were used to inform the programme

application and provide a baseline of evidence for the post holder to build on. Previous insights and data have provided further baseline of evidence for the ICJ Programme in Powys. These included the Project Closure Report for the Community Cancer Nurse Project Lead Role and a report of findings from focus groups held throughout Powys in 2016, in order to discuss the participants' experience of having had a cancer diagnosis and treatment whilst being resident within the Powys Teaching Health Board area.

2.0 – Our Strategic Approach

The strategic approach for all communications and engagement work is to follow best practice guidance but to also align our approach with the existing communication and engagement strategies that all three partners have in place.

Each partner has their own brand, style and protocols in place which support their existing communication and engagement activities both externally and internally. In writing this document due regard and consideration has been given to all of these strategies so that the programme reflects, complements, and brings together the key values, principles, and approaches without detracting from the key purpose. These include consideration of aspects such as continuous engagement, co-production, open and honest conversations, building trust, working together in partnership, taking account of the Gunning principles and robust feedback mechanisms. The documents that have been considered and cross referenced in producing this document include:

- External Stakeholder Engagement Strategy (2015) PTHB
- Powys Patient Experience Strategy (2016) PTHB
- Workforce Futures Strategy. (2019) PTHB
- Communications and Engagement Plan (2019) Powys County Council
- Communications Toolkit (2019) PCC
- Consultation and Engagement Framework (2019) PCC
- Style Guide (2019) PCC
- Macmillan Engagement Theory of Change Framework (2017/18)
- Macmillan Branding Guidelines – core and partnership

The National Principles for Public Engagement in Wales⁵ (Appendix C) which both Powys Teaching Health Board and Powys County Council have signed up to - list ten items which support good engagement practice. They advocate engaging with stakeholders in a planned,

⁵ <https://www.participationcymru.org.uk/national-principles/>

meaningful, and timely manner and suggest that the right level of jargon free information is a must for stakeholders to be able to respond well.

The Chartered Institute of Public Relations⁶ is an industry leader in communications and PR. Their website states that *“Public relations helps businesses to communicate value, tell stories and manage their relationships and reputation.”*

Our strategy and action plan aims to deliver on all these aspects.

In drawing together this Communications and Engagement Strategy, the over-riding aim is to actively engage with and inform all relevant stakeholders in a respectful and empathetic way, using the principles around co-production and co-design, promoting opportunities so people can share their experiences and get involved right at the start, if they wish.

All communications and engagement activity will be transparent and open, explaining and highlighting the benefits that having a model of care will bring to people living with cancer in Powys and the professionals working in the various clinical settings. Adoption of this communications and engagement strategy will support the objectives set out in the Programme Initiation Document.

⁶ <https://cipr.co.uk/>

WORKSHOP SESSION

A strategic workshop was held in January 2020, the purpose of which was to set out a shared vision and direction for the programme. These, along with the mission and aims and objectives, are outlined below:

Improving the Cancer Journey in Powys Programme

Vision

Everyone affected by cancer in Powys gets the right help and support to achieve what matters most to them.

Mission

To improve the experience and the quality of life for people living with cancer in Powys by enabling access to and coordination of personalised emotional, practical, and physical support.

Aim and Objectives

The aim of the proposed programme is to develop a sustainable, supportive, integrated community model of care to support people living with cancer in Powys.

Our approach to achieving this aim will be by involving those affected by cancer and those supporting people with cancer to:

- 1. Develop a deeper understanding of issues and experiences for residents* of Powys**
 - Hold ongoing conversations with those living with cancer via various engagement events/multi-media resources
 - Establish a cross section of health, council and third sector staff perception of issues and experiences for residences affected by cancer in Powys.
 - Desktop exercise to review and gather information around where residents diagnosed with cancer receive their treatment and around the ways in which holistic needs assessments are being carried out
 - Output: Report and recommendations to Strategic Programme Board

- 2. Offer to people living with cancer a supported conversation, based on their needs, out of which a care plan and the supporting arrangements around this care plan will be developed.**

**Residents in this sense means people aged 18 and over who live in Powys and who receive a confirmed diagnosis of cancer.*

3.0 – ICJ COMMUNICATION AND ENGAGEMENT OBJECTIVES

The key principle of good communications and engagement objectives are that they support the overall programme and are specific, measurable, achievable, realistic, and timely (SMART). The objectives have been split into the three stages as set out in the Development Approach section of the Programme Initiation Documentation. (PID) and Activity Schedule.

Stage 1: Build on current knowledge and understanding of the needs of Powys people living with cancer. (July 2020 – March 2021)

Key Communication Objectives:
1) To raise awareness of the ICJ in Powys programme using a mix of existing communication tools and channels including partner and third sector ones. (press releases, social media posts, partner e-bulletins, newsletters, blogs, intranet sites, staff engagement groups, FB groups, animations, case studies etc.) so that people living with cancer , health professionals, the voluntary sector and any interested stakeholders are aware of the programme and the opportunities to get involved.
2) To raise awareness of the programme by sharing stories about how people are affected by cancer in Powys, their experiences to date and their aspirations about what a programme like the ICJ in Powys could mean to them.
3) To provide feedback and updates during Stage 1 to all relevant stakeholders using a mix of communication tools and channels (as above) so as to build trust, protect the reputation of the programme, sustain a two-way communications approach and engender interest and involvement going forward.
4) Provide information for people living with cancer about where to get support whilst a model of care is being developed – Macmillan helpline and new Telebuddies service, via links re: PCC Assist/PTHB primary care services, Powys Macmillan Welfare Benefits Team, community connectors (PAVO), Bracken Trust etc.
Key Engagement Objectives:
1) To involve, engage with and seek the views of people living with cancer in Powys using a mix of existing and emerging engagement channels (online surveys, e-focus groups, virtual workshop sessions, telephone interviews) so as to develop a deeper understanding and insights into their cancer journey so as to inform and add value to the current knowledge base and mapping exercise. <i>The insights sought include how and if supported conversations are taking place (known as: a Holistic Need Assessments), what support networks and services are available locally post diagnosis, what needs people have that are not met currently, what's working well, what isn't and what would improve their quality of life post diagnosis/treatment.</i>
2) To seek insights from professionals working with people living with cancer in Powys using a mix of engagement channels so as to listen, learn and inform the current knowledge base and mapping exercise. <i>The insights sought include knowledge around the use of the HNA, best practice, what is working well, what is not, what needs to happen or what could improve service delivery, a joined up approach, a case for change etc.</i>

- 3) To seek insights from **third sector partners** working with people living with cancer in Powys using a mix of engagement channels so as to listen, learn from and inform the current knowledge base and mapping exercise.

The insights sought include knowledge around the use of the HNA, best practice, what is working well, what is not, what needs to happen to embed a model of care for Powys from a third sector perspective, what could improve service delivery, a joined up approach, a case for change etc.

Stage 2: Develop, implement, test, and evaluate different options (models) for Powys (Dates for this stage – to be confirmed)

Key Communication Objectives:

- 1) To provide regular updates and feedback on Stage 1 of the programme using a mix of communication tools and channels to reach a good cross section of stakeholders and intended audiences (press releases, social media posts, infographics, partner websites and community newsletters or e-bulletins etc...) so all are aware of the programme's progress and the models that are being developed to be tested in Stage 2 and their role/remit in the next stage.
- 2) To establish a regular feedback channel on Phase I of the programme so that people living with cancer are reassured, can see progress, and understand how and what this means/will mean going forward.

Key Engagement Objectives:

- 1) To engage with, involve and seek the views of anyone living with cancer in Powys so as capture feedback on the development of, and the actual models being tested.
- 2) To seek insights from professionals working with people living with cancer in Powys using a mix of engagement channels so as to utilise their expertise and knowledge to shape the next phase of the programme and priorities.
- 3) To seek insights from third sector partners working with people living with cancer in Powys using a mix of engagement channels so as to gauge their views on the next phase of the programme and priorities.

Note: A workshop event involving a mix of all stakeholders was set out in the PID as an action for Stage 2. However due to Covid how this is progressed virtually will now be considered.

Note: Agreeing a methodology for ongoing service user feedback was set out as an action in Stage 2. This methodology could be an e-bulletin, a quarterly news piece circulated to all partners for inclusion in their communiques or another channel to be explored.

Stage 3: Develop the preferred model into a business case (Dates for this stage – to be confirmed)

Key Communication Objective:
To provide regular updates and feedback on Stage 2 of the programme using a mix of communication tools and channels to reach a good cross section of stakeholders and intended audiences (e-bulletin, press releases, social media posts, digital stories, podcasts, infographics, partner websites and community newsletters etc...) so all are aware of the programme's progress and which model of care is being proposed in the business case.
Key Engagement Objective:
To involve the Stakeholder Reference Group in discussions around the business case and preferred model of care to be put forward as the key group who represent the views of all stakeholders.

The SWOT analysis on the following page sets out the strengths, weaknesses, opportunities, and threats that may impact on the success of the communications and engagement approach. All will need due consideration as the programme progresses and be cross-referenced to the risks outlined in the PID and the programme's Equality Impact Assessment.

STRENGTHS

- Opportunity to develop a sustainable model for Powys allowing for meaningful engagement with key stakeholders
- The Glasgow ICJ programme and evaluation report (2014 – 2019) and contact with Communications Lead will provide useful insights to aid communications/ engagement planning
- Awareness of joint Health & Care strategy already exists in PCC/PTHB providing a good knowledge base from which to promote the ICJ Powys aims.
- Feedback from residents re: the North Powys Well-being project around cancer care support and links to the H&C and ICJ Powys programme aims
- Good relationships re- communications teams in PCC/PTHB and growing Macmillan links
- Knowledge gleaned and gained during Covid-19 outbreak regarding cancer care services in Powys

WEAKNESSES

- Programme is in its infancy with new partnerships in place and need to agree clear processes and protocols so post holder is able to deliver timely and effective communications and engagement.
- Rurality of county means there are limited/few cancer support community support groups in existence, so reaching those with a cancer diagnosis may require more creativity / planning.
- Knowledge base re- virtual /digital engagement channels now required due to Covid-19
- Response rate from the Patient Experience Survey was relatively low for Powys residents and it suggested just under half of Powys residents with a cancer diagnosis did not get a holistic needs assessment or conversation
- Identification of people living with cancer in Powys is complex due to the different IT systems and various referral and treatment pathways

OPPORTUNITIES

- Skills set and established links between PTHB and PCC communications teams already exist and scope to draw upon and utilise shared expertise for the benefit of programme
- Opportunity to engage with key stakeholders via new virtual channels and networks so as to inform and shape a Powys programme
- Shared knowledge, insights and collaboration on communications and engagement opportunities with a range of partners and communities
- Macmillan has an Engagement and Volunteer role for North Wales and Powys who could provide some engagement support
- Powys has a strong community spirit and cohesion which can be built upon
- To become an exemplar for Wales

THREATS

- Coronavirus outbreak and impact on all communications and engagement work and willingness of people living with cancer to take part at this time
- Lack of appetite to engage by some residents with a diagnosis for various reason so missed insights
- Lack of buy in and thus support from other organisations crucial to the success of the -programme due to differing priorities
- Media / Politicians / Pressure groups campaigning for better access to cancer treatment as awareness of project grows. Raised expectations

3.0 – Target audience/stakeholders

This communication and engagement plan will aim to involve, engage, and listen to the following stakeholders over the three years, alongside keeping them informed about the Improving the Cancer Journey in Powys programme. Effective stakeholder analysis considers firstly who might be affected by a programme or project and who might contribute towards it. It is then important to consider who is most interested and who has influence so engagement and communications can be tailored to these needs looking at four quadrants. For the purposes of the ICJ Programme, an initial breakdown of primary and secondary stakeholders was conducted followed by the more detailed breakdowns.

Primary Stakeholders	Secondary Stakeholders
<ul style="list-style-type: none"> - People living with cancer (this includes Individuals with a diagnosis, their families, and carers) - GPs, front-line NHS staff involved in supporting those living with cancer including neighbouring health boards/trusts - Social Care professionals and other PCC services e.g. housing, welfare, and benefits advice etc. - Third sector (including but not limited to PAVO, Credu, Bracken Trust & Age Cymru etc.), supporting community groups (including but not limited to Rhayader Home Support etc.) - Macmillan specific Powys funded employees and services e.g. Powys Macmillan Welfare Benefits Team, GP specialists, Macmillan nurses - Other parties – chemists, libraries, housing associations, energy companies, Mid and West Wales Fire service, Freedom Leisure, cafes, theatres, banks etc... - Powys Community Health Council 	<ul style="list-style-type: none"> - Partnership Boards – PCC, PTHB, PSB, PRPB - Wales Cancer Network - Local authorities and other health boards/trusts in Wales and UK - NHS Wales - Welsh Government and politicians from all parties - UK Government - Cancer charities in the UK - Macmillan volunteers

Improving the Cancer Journey in Powys Programme

Stakeholder Map Stage One:

Build on current knowledge and understanding of the needs of Powys residents living with cancer.

The first phase when considering the stakeholders is to split them into two groups

- those who will be **affected** by the programme/project
- those that will **contribute to** its success

NOTE:

Some stakeholders fit into both categories. For example people living with cancer will be contributing in this stage by sharing their stories to aid understanding about the current post diagnosis support they receive, but they will also be affected by the outcomes in terms of the model of care that is developed for Powys.

Affected by...

- **People living with cancer (including their families and their carers)**
- PLUS...**
- **Macmillan professionals**
 - **PCC professionals (working in social care, housing, benefits, libraries etc.)**
 - **Health professionals**
 - **Third sector/voluntary organisations (PAVO, Credu, Age Cymru, Mind, Bracken Trust etc)**
 - **Macmillan volunteers**
 - **GPs**
 - **Welsh Government**
 - **Wales Cancer Network**
 - **Community Health Council**
 - **Other parties - e.g. employers / trade unions / residential and nursing homes**

Contributes to...

- **People living with cancer (including their families and their carers)**
 - **Macmillan**
 - **Powys County Council**
 - **Powys Teaching Health Board**
 - **Powys Regional Partnership Board**
 - **Powys Public Service Board**
 - **Project Sponsors**
- PLUS...**
- **Media (local and Welsh)**
 - **Politicians (local and national)**
 - **Wales Cancer Network**
 - **LWBC projects**
 - **Other parties - Freedom Leisure**



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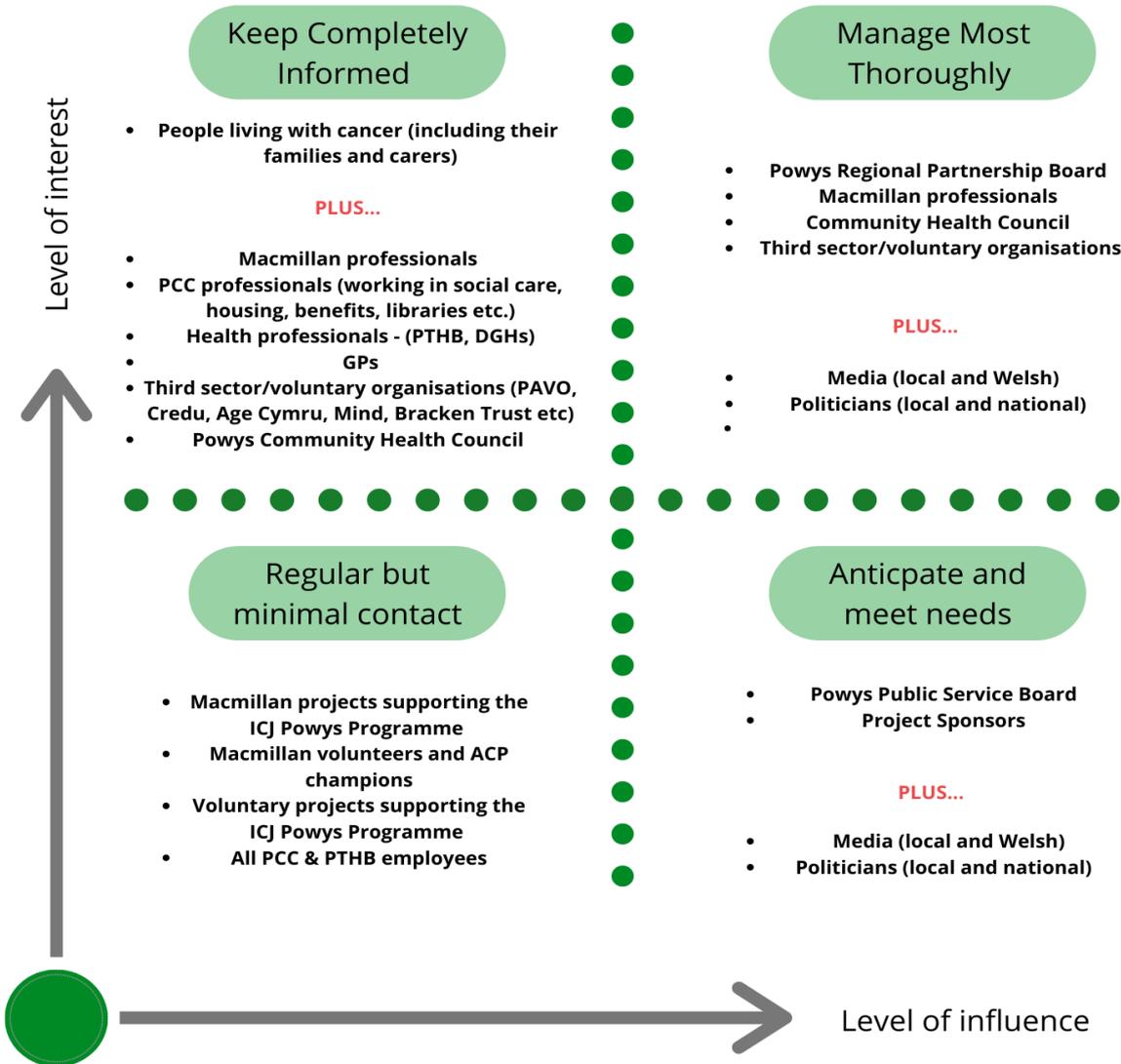
Improving the Cancer Journey in Powys Programme

Stakeholder Map Stage One:

Build on current knowledge and understanding of the needs of Powys residents living with cancer.

The second phase is to consider what level of interest and influence the different stakeholders may already have or should have in relation to the programme/project outcomes in Stage One and then categorise them accordingly. There are four headings to consider. This analysis ensures that all stakeholders are involved or kept informed about progress at the right time, in the right way with information that is relevant to their needs and their role within the programme.

Some may feature in more than one quadrant.



3.1 - Key messages

Key messages give the recipients a clear understanding about the programme outcomes. They should be concise and written in plain English/Welsh. Often key messages can be split into specific categories so as to be relevant to the specific stakeholder groups. Two overarching messages about the programmes aim and one about the process have been outlined below for use when communicating with the key stakeholders.

Reworked vision statement from workshop for PR purposes:

“We want everyone living with cancer to live life as fully as they can, by providing practical, physical, emotional, spiritual and social support so people can achieve what matters most to them.”

Longer ICJ Focus statement:

“The key focus of the ‘Improving the Cancer Journey in Powys’ programme is to improve the experience and quality of life for people living with cancer so that they feel listened to, in control, and are able to access and receive personalised practical, physical, emotional, spiritual and social support when they need or want it, so as to live well with (and beyond) cancer.”

The how we aim to deliver on this objective:

“The Improving Cancer Journey in Powys programme will develop a multi-agency model of care that will ensure that everyone living with cancer in Powys is offered a ‘supported conversation’ with a trained professional following diagnosis, providing choice and control over their cancer journey and what matters most to them.”

a. Key messages for PABC

- ✓ ICJ Powys is about listening to your needs so you get the support that is right for you
- ✓ Working to support your needs so you can live well with cancer
- ✓ Offering support at the right time, in the right place for the things that matter most to you following a diagnosis of cancer
- ✓ Helping you to access practical, physical, emotional, spiritual, and social support to help improve your cancer journey
- ✓ Giving you choice and control over your cancer journey
- ✓ Helping you to decide what matters most on your cancer journey

b. Key messages for professionals or third sector/community groups working with individuals

- ✓ ICJ Powys is about listening to your experiences so as to shape a future model of care
- ✓ Helping you to support individuals living with cancer
- ✓ Helping you to improve the well-being of Powys people living with cancer
- ✓ Supporting you as professionals to deliver for and help Powys residents feel more in control on their cancer journey
- ✓ Providing a model of care that delivers for individuals living with cancer in Powys
- ✓ Helping to build seamless partnership working arrangements in Powys

c. Generic messages

- ✓ Working to deliver the support people need to live well with cancer
- ✓ Helping to improve the well-being and lives of Powys individuals living with cancer

4.0 - Evaluation

Some of the methods to evaluate the programme's communication and engagement outputs will include:

- Number of press releases issued and resulting positive coverage
- Number of press enquiries received and resulting positive coverage
- Number of responses, likes, comments and shares from social media campaigns and video's
- Number of people interested in being on the Stakeholder Reference Group
- Number of people joining the Macmillan Engagement Network
- Number of website hits
- Number of people reading/viewing blogs on partner sites like PAVO's mental health blog etc.
- Number of people responding to surveys
- Number of people joining the specific virtual engagement sessions with a ICJ in Powys focus
- Number of PACB patient stories, testimonials, case studies organised and promoted
- Survey feedback on project outcomes from patients at regular intervals during the project
- Feedback from boards and partners involved in the project
- Data captured by partner agencies (PAVO and Community Connectors who signposted to the project
- Patient representatives' involvement in whole programme – numbers attending meetings etc...

Appendices

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Appendix A

Glossary of terms

Holistic Need Assessment	A structured method of identifying needs and concerns and discussing and agreeing the best way to meet them from the person with cancer's perspective. It involves identifying and prioritising needs and concerns and recording them electronically.
Supported Conversation	A structured conversation, interaction or dialogue, in real time, between a person who has cancer and the relevant Personnel but who must have the capability and skills to support the person to identify their holistic needs, prioritise them, and facilitate addressing those needs.
Care and Support Plan	A document that is co-developed between a person with cancer and a professional that records the goals, actions, and approaches jointly agreed to address the needs and concerns identified in a supported conversation. The Care and Support Plan should document any needs or concerns that were addressed immediately through the Holistic Needs Assessment as well as any actions to be taken by the person or the Macmillan Professional after the Holistic Needs Assessment.
Co-production	A way of involving people so that all parties are equal partners, having their voices heard and are involved in decision making so as to produce a model of care that is fit for purpose.
Co-design:	Similar to above and a process in which people who run services work with people who use their services to design these. Normally co-design means that final decisions are still taken by the formal structures in place in the organisations. (Political or Legislative)

Appendix B

Acronyms used in the strategy/action plan

AMs	Assembly Member at Welsh Government
eHNA	Electronic Holistic Needs Assessment
HNA	Holistic Needs Assessment
ICJ	Improving the cancer journey
LWBC	Living with and beyond cancer
MPs	Member of Parliament
PAVO	Powys Association of Voluntary Organisations
PLWC	People living with cancer
PID	Programme Initiation Document
PCC	Powys County Council
PSB	Powys Service Board
PTHB	Powys Teaching Health Board
PRPB	Powys Regional Partnership Board

Appendix C

The National Principles for Public Engagement in Wales

NATIONAL PRINCIPLES FOR PUBLIC ENGAGEMENT IN WALES



- 1 Engagement is effectively designed to make a difference**

Engagement gives a real chance to influence policy, service design and delivery from an early stage.
- 2 Encourage and enable everyone affected to be involved, if they so choose**

The people affected by an issue or change are included in opportunities to engage as an individual or as part of a group or community, with their views both respected and valued.
- 3 Engagement is planned and delivered in a timely and appropriate way**

The engagement process is clear, communicated to everyone in a way that's easy to understand within a reasonable timescale, and the most suitable method/s for those involved is used.
- 4 Work with relevant partner organisations**

Organisations should communicate with each other and work together wherever possible to ensure that people's time is used effectively and efficiently.
- 5 The information provided will be jargon free, appropriate and understandable**

People are well placed to take part in the engagement process because they have easy access to relevant information that is tailored to meet their needs.
- 6 Make it easier for people to take part**

People can engage easily because any barriers for different groups of people are identified and addressed.
- 7 Enable people to take part effectively**

Engagement processes should try to develop the skills, knowledge and confidence of all participants.
- 8 Engagement is given the right resources and support to be effective**

Appropriate training, guidance and support are provided to enable all participants to effectively engage, including both community participants and staff.
- 9 People are told the impact of their contribution**

Timely feedback is given to all participants about the views they expressed and the decisions or actions taken as a result; methods and form of feedback should take account of participants' preferences.
- 10 Learn and share lessons to improve the process of engagement**

People's experience of the process of engagement should be monitored and evaluated to measure its success in engaging people and the effectiveness of their participation; lessons should be shared and applied in future engagements.

These Principles were developed by Participation Cymru working with TPAS Cymru, under the guidance of the Participation Cymru partnership. Endorsed by The First Minister of Wales, The Right Hon. Carwyn Jones AM on behalf of the Welsh Government. Further guidance on the National Principles can be found at www.participationcymru.org.uk
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