Macmillan response to Committee Questions:

Q1) **Macmillan Cancer Support is a strong supporter** of the Detect Cancer Early programme and all its different features. When the DCE campaign started fewer than 1 in 4 people in Scotland were detected at Stage 1. Since the programme began we have seen Stage 1 and Stage 2 diagnoses rise – with some indications that there has been more improvement in deprived areas.

We are fully aware that DCE is a long-term programme that is faced with a challenging starting point. Macmillan believes that Detect Cancer Early must be viewed beside all other cancer services and statistics to fully understand the scale of the challenge we face. Indeed, much wider issues than just cancer are at play in the Staging Data figures we see.

The key for Macmillan is that there has not been enough joined up thinking from all the authorities, and we want to see this approach embraced as we go forward. We should use the wider opportunities in communities to give preventative messages. We need to focus on where people already have good engagement, and that is often **outside** the GP practice. Joined up approaches could take the form of getting a **Holistic Needs Assessment** for the whole family when someone is diagnosed with cancer, and using the opportunity as a broader teachable moment.

**Macmillan’s library services** also present an opportunity where we can use our expertise to tackle problems around health literacy - in other words, we shouldn’t just focus on when people enter the health service.

Macmillan believe we have a strong reputation as of the key agencies that people engage with, and we have a range of services to support people including: **our information bus that tours deprived and remote communities**, **our free phone support line staffed by trained nurses and advisers**, **our welfare advice services across Scotland**.

We want to help people integrate back into health system too. We know that when people see our logo they feel they can trust Macmillan, and we can support people to enter a health system that they often are reluctant to trust. Another example would be when those with cancer access **Macmillan’s Move More project**, this can be a moment to encourage their families to join them in getting active – again building on existing engagement and trust and broadening approaches to health improvement.

Engagement with deprived communities through our **Glasgow Improving the Cancer Journey** service shows that 30% of engagement is with the most deprived vigintile (deprivation categories split into 20). We should be working with people to use this an opportunity to promote messages to the wider family and community. It should not just be Macmillan doing it, and we want to see more partnership working so that we ensure that we are making best use of every agencies expertise and influence.
Q2) In the joint Macmillan/ISD research document published in February 2017 – we stated “This new research gives us an up to date and in-depth understanding of the scale of the cancer survival gap in Scotland. It also provides the most comprehensive ever look at the reasons behind it.

“While the sheer number of factors that impact on survival means there is no magic bullet to solving this problem, this research points to clear areas for improvements, including encouraging earlier diagnosis and the take up of screening in deprived areas.

“The Scottish Government recognised the need to tackle cancer inequalities in its cancer plan published last year. Macmillan want to work with them, the NHS and local authorities to make sure people with cancer from deprived areas have the best possible chance of survival.”

Both Macmillan and ISD look forward to discussing the findings at the committee.

Q3) This is not an area we have particular focus on. However, we believe that is clear that any cost benefit analysis of detecting a cancer early will show huge savings in cost to the NHS.

Q4) Clearly the regular publication of ISD statistics on cancer survival, cancer staging data, cancer incidence and uptake of screening programmes for Bowel, Breast and Cervical cancers show an enormous amount more work will have to be done to reduce economic inequalities.

The Scottish Government Cancer Plan commits to “Invest £9 million over 5 years to support access to health and social care services during and after treatment, via for example, Link Workers to provide support in the most deprived communities and initiatives such as Macmillan’s Improving the Cancer Journey”.

Macmillan passionately believes this roll-out will have a beneficial impact on the well-being of people with cancer in the most deprived areas – and will ensure benefits and financial advice – as well as housing and other social needs – are recognised whilst tackling health conditions of the population. Too often these services are unconnected, and we need to ensure that Health & Social Care Integration also dovetails with the work of the new Social Security Department’s services.

*Using this type of support can start to ensure those from the most deprived backgrounds get the most support needed as they go through their cancer journey.*
Macmillan’s work on Cancer Poverty in Scotland:

Innovative Benefits Services
Macmillan Benefits Services currently provide the opportunity of face to face support for people affected by cancer through 22 partnerships that cover 27 of the 32 local authorities throughout Scotland. As an example of that work, the first 6 months of 2016 saw the services provide support to over 8000 people with financial gains of over £20 million. It is essential moving forward that we ensure face to face provision is an option for those cancer patients requiring benefits and financial advice.

Improving the Cancer Journey – Deprived Communities
The 2016 SNP Manifesto and the Scottish Government Cancer Plan in March 2016 – both commit to the spread of Link Workers to improve the health of the population. Link Workers are vital to ensure an Holistic Needs Assessment for people to ensure their care is properly co-ordinated, and signposting to existing vital services always takes place. (The joint Macmillan/Scottish Government Transforming Care After Treatment programme is demonstrating how vital an holistic needs assessment is for cancer patients).

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ESA WRAG
Macmillan Cancer Support has campaigned vigorously to keep the ESA WRAG payment for cancer patients. At their most vulnerable moments after treatment ends, cancer patients need support to start their journey back into the workplace. There is a clear distinction between people on JSA and those receiving ESA WRAG. Claimants in the WRAG have, by definition, been assessed to have only a ‘limited capability’ for work and cannot be reasonably required to work. Instead, they need to be given time to recover and properly supported to return to work if and when they are ready and able. The removal of the £29pw payment is causing huge hardship to cancer patients and making it harder to support them returning to work. With the new powers of Work Able Scotland, together with a drive toward better vocational rehabilitation, Macmillan believe the new Scottish Social Security System should re-instate the weekly payment to cancer patients who will not receive this payment to help them return to work.