

Successes and challenges in the implementation of the HOPE self-management programme for people living with and beyond cancer



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The HOPE Programme© is a **self-management course** originally commissioned by the National Cancer Survivorship Initiative (NCSI). It was **co-created** with NCSI & people living with and beyond cancer.

National Cancer Survivorship Initiative

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It is based on **positive psychology**¹ and has been taxonomised using the Taxonomy of Self-Management Support.² It has been licensed and **delivered in practice** as a face-to-face course for 7 years by Macmillan Cancer Support (MCS) across the UK. 202 courses were delivered to 1296 people in the last year (see map on left). However, **delivery is inconsistent**, e.g., some areas deliver more courses & some do not deliver it at all. **The aim of this research was to examine barriers and successes of implementation to improve future delivery.**

Methods

- 10 focus groups & 27 phone interviews (n=73)
- Participants = all involved with delivery e.g., MCS staff, healthcare professionals, commissioners, course attendees and facilitators
- 6 UK regions covering North, South, East, West & Midlands
- Analysis using Framework Analysis

Results

Barriers

- More women and older adults on face-toface course
- Need to embed into pathway more
- Useful if MCS market nationally
- Some areas were reluctant to train patients/carers to deliver, yet these were viewed positively in successful areas
- Hidden costs
- Staff often worried when first start up that they have small numbers on course and stop running it, but other more successful areas say this is normal for the start and to stick with it as it will build up over time

Successes

- Ongoing social support Biggest theme
- MCS great facilitator training & support
- Wanting to give back e.g., patients becoming facilitators
- Venue and environment e.g., approachable and easily accessible
- Engaging men through specific cancer groups
- Writing a letter to employer to make the course part of return to work
- Phoning people before and during the course increased retention
- Best time to recruit is after discharge
- Listening to feedback and improving it
- Involve board & professionals from beginning for referral & support

Conclusion • It has been successfully implemented because of co-creation, embedded as Macmillan's package, dedicated staff/volunteers, evidence-based, measurable behaviour & impact.

- It can be improved by being part of the treatment pathway, being nationally marketed, increasing accessibility, include lay facilitators & consistently evaluate.
- To improve accessibility we have now developed an online version: iHOPE.
- Also co-designed for the workplace, other conditions & countries.
- See <u>www.h4c.org.uk</u> for more information.

¹ Turner, A. Pearce, G. (joint first authors), Faith, M., Clyne, W., Whiteman, B., Simon, R., De Voy, M., Barker, R & McGillian, M. (under review). The potential of a positive psychology self-management intervention to meet the unmet needs of people living with and beyond cancer: A mixed methods evaluation of the HOPE Programme. *Psycho-Oncology*

² Pearce, G., Parke, H.L., Pinnock, H., Epiphaniou, E., Bourne, C. L. A., Sheikh, A., & Taylor, S.J.C. (2016). The PRISMS Taxonomy of Self-Management Support: Derivation of a Novel Taxonomy and Initial Testing of Utility. Journal of Health Services Research and Policy, 21 (2), 73-82

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