Background

We want to make sure that people living with cancer hear about your physical activity scheme in a way that they are receptive to. Research shows that if the message comes from a healthcare professional, they are much more likely to take notice, as they see this as part of their care plan.

Although there are benefits to getting active throughout treatment, many people living with cancer have said that they are most likely to respond to messages about getting active after their treatment has finished. Because this is when they have least contact with healthcare professionals it’s a good idea to send a letter from a healthcare professional.

Previously, projects have returned response rates of 15%+. This means that if one hospital that your service covers has 2000 cases per year, you could get 300 extra referrals per year.

We have found the hardest part of the process is to get the initial sign off and set up a system for compiling the list of patients to write to. Once you’ve set this up, you can send a quarterly mailing without too much extra effort.

Results

- **Worcester**
  - Sent: 88
  - Referrals: 11

- **Dorset**
  - Sent: 200
  - Referrals: 34

- **Luton**
  - Sent: 150
  - Referrals: 22

- **Wales***
  - Sent: 116
  - Referrals: 14

- **Sheffield**
  - Sent: 337
  - Referrals: 148
Phase 1 – sign off

Macmillan intelligence
Talk to your Macmillan representative to get them on board. They might have insight from other local projects that have done similar mailings. And they can help get your Cancer Nurse Specialist (CNS) on board.

Steering group sign off
Explain the process to your steering group. They will probably have various questions, which we have tried to answer in the Frequently Asked Questions at the end.

Choose a tumour group
As part of the work with the steering group, choose a tumour group that you think will be good to start with. Recommended options are breast, prostate and bowel cancer. These are groups with significant numbers of patients who tend to be very receptive to getting active, and these are also cancer types for which we have the strongest evidence as to the benefits of physical activity.

By choosing one tumour group to start with you will have smaller numbers for that first mailing. You also create an internal case study to prove the success of sending this kind of mailing – this will help you to get other tumour groups on board.

Lead CNS sign off
If the lead CNS isn’t on your steering group you will now need to get them to sign off the project. The data must be accessed by a healthcare professional within the hospital, as the letter will be coming from them, so they will need to apply internally for access to the data. You can use the information in this factsheet to explain to the lead CNS the benefits of this project, and answer their questions.

We recommend you start small. If there is more than one lead CNS in your hospital, or if you have more than one hospital in your area then just start with one lead CNS at one hospital. This will allow you to make progress quickly, and then have a success to show to other CNSs.

Phase 2 – set up

List of patients
Option 1 (recommended for sites with electronic Holistic Needs Assessment)
If you have the eHNA in place at your trust then you can take this approach.

A Holistic Needs Assessment (HNA) is a process of gathering information from the patient and/or carer in order to inform discussion. This helps to develop an individual care plan. These are in place at all hospitals. The eHNA is simply an electronic version of the HNA.

Some of the answers people give to the questions in the eHNA trigger the system to recommend physical activity in their Care Plan. This includes the patient asking about walking and physical activity, but also includes them mentioning other symptoms (eg fatigue, not being able to sleep).

Macmillan can filter the results by trust (though we can’t see the names of patients). We have filtered results for prostate cancer patients and it shows physical activity is the intervention that most patients want to know about. Since Macmillan can filter these results the trust should be able to filter the list too. This will provide a list of people who want to know more about getting active.

Steps to follow
• Find the person in the trust who can filter down the Care Plans to find those who are interested in getting active (the job title of this person might be the Patient Involvement Lead, and is probably the person who organises the list for invitations to the health and wellbeing events).
• Find the person in the trust that they will listen to (this is probably the lead CNS).
• Get the lead CNS or other person to ask the Patient Involvement Lead to create the list.
Option 2 (recommended for sites without eHNA)
If your hospital does not have the eHNA then the process is still similar for accessing the list. Your trust will have a database of cancer patients. They probably can’t filter it by when people finish treatment, but instead they can filter it by when people start treatment.

- Find the person in the trust who can filter down the patient database to find those who are 6 months post start of treatment (the job title of this person might be the Patient Involvement Lead).
- Find the person in the trust that they will listen to (this is probably the lead CNS).
- Get the lead CNS or other person to ask the Patient Involvement Lead to create the list.
- Ensure the database is fully up to date

This approach has already been used in Swansea and Dorset. The project leads there asked for the data from their patient database. The data has been provided in both cases.

Option 3 (not recommended as too time consuming)
The last option is to ask your lead CNS to ask the other CNSs to put together a list of patients based on their existing case load. The lead CNS will probably do this at a team meeting, and then will need to chivvy the nurses by email and in person after that. It takes each nurse a couple of hours to do this.

Set up the freepost envelope
You can print the address directly onto envelopes or print the address on stickers and stick them to envelopes.

Agree who the letter will go from
There is considerable evidence that people living with cancer will get active if it is recommended by a health professional. The letter should therefore be signed by a trusted health professional – for example the lead CNS.

Write the letter
Macmillan has developed this template letter. Add your logos and contact details to the letter and change the details of the offer if needed (eg if you have any free sessions then this will need adding in). Apart from that, you should change as little as possible on the letter, as the copy has been developed based on research about what people living with cancer respond to best.

The letter includes a reply form.

Track the letter
Decide how you will track responses in your monitoring and evaluation system. The most common way to do this is to add another code to the “where did they hear about the project” option saying Letter 1 (when you send future mailings it will be useful to be able to name them Letter 2, 3, 4 etc. to distinguish one from another).

Editing the list
Talk to Information Governance to find out if they can run the data against a system that ensures it isn’t sent to anyone who’s already passed away. Macmillan uses a system called Mortascreen for this, but the hospital should have their own way of doing this.

Set up a freepost address
A freepost address is an essential part of the process as it will make it easy for people to respond to the letter. If you don’t have a freepost address already then you will need to set up a Response Standard freepost address.

The freepost address can be set up with Royal Mail by filling in their application form which can be downloaded from www.royalmail.com/responseservices.

IMPORTANT – in section 4 choose Response Standard (Business Reply/Freepost). This allows for the address to be printed easily yourself. All the other freepost options require more complicated printing set ups.

This will cost approximately £100. It should be taken from the marketing budget of your project.
Phase 3 – sending the mailing

Send the mailing

The letter should be printed and posted from the hospital, as the data can’t be sent to a third party. The process of printing the letters and putting them in envelopes itself has to happen in the hospital, so you might ask the Macmillan Information Centre, if there is one, if they can offer to help with this.

When you send the mailing make sure to include the reply form and a freepost envelope with every letter. Even if you have a phone number on the letter you will still find that about 90% of responses will be by freepost.

Time required

Organising mailing

<table>
<thead>
<tr>
<th>Task</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Figure out who will physically send the letter, agreeing that they have right number of hours available.</td>
<td>2 hours</td>
</tr>
<tr>
<td>Getting sign off for the project.</td>
<td>3 hours</td>
</tr>
<tr>
<td>Agreeing who the letter will go from.</td>
<td>1 hour</td>
</tr>
<tr>
<td>Get enough paper, ink cartridges, window DL envelopes, plain DL envelopes for printing freepost address on, or you can get labels and stick them onto plain DL envelopes.</td>
<td>0.5 hours</td>
</tr>
<tr>
<td>Get hold of the database.</td>
<td>3 hours</td>
</tr>
<tr>
<td>Edit the data with Information Governance.</td>
<td>1 hour</td>
</tr>
<tr>
<td>Setting up freepost address.</td>
<td>2 hours</td>
</tr>
<tr>
<td>Set up mail merge.</td>
<td>1 hour</td>
</tr>
<tr>
<td>Check mail merge – make sure there is a replacement for any gaps (eg if you don’t have first names what goes there), make sure that no-one’s name, or address is in capitals.</td>
<td>0.5 hours</td>
</tr>
</tbody>
</table>

Sending mailing

<table>
<thead>
<tr>
<th>Task</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Print letters and freepost envelopes or labels.</td>
<td>Depending on printer</td>
</tr>
<tr>
<td>Stuff letter into envelope.</td>
<td>150 in 1.5 hours</td>
</tr>
<tr>
<td>Stuff freepost envelope into windowed DL envelope.</td>
<td>150 in 1 hour</td>
</tr>
<tr>
<td>Stamp envelopes.</td>
<td>150 in 0.5 hours</td>
</tr>
<tr>
<td>Post letters.</td>
<td>0.5 hours</td>
</tr>
</tbody>
</table>

Tracking mailing

<table>
<thead>
<tr>
<th>Task</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Make a note of how many letters were sent.</td>
<td>0.25 hours</td>
</tr>
<tr>
<td>Track how many responses received.</td>
<td>0.25 hours</td>
</tr>
<tr>
<td>In 8 weeks’ time figure out response rate.</td>
<td>0.25 hours</td>
</tr>
</tbody>
</table>

Costs

We estimate that the cost of the mailing will be about £300, depending on the size of your database.
Frequently asked questions

Why are we doing this?
We want to make sure that people living with cancer hear about your physical activity scheme in a way that they are receptive to. Research shows that if the message comes from a healthcare professional, they are much more likely to take notice, as they see this as part of their care plan.

Although there are benefits to getting active throughout treatment, many people living with cancer have said that they are most likely to respond to support about getting active after their treatment has finished. As this is when they have least contact with healthcare professionals, a letter from a healthcare professional can have a good response rate.

What benefit will I get from investing all this time?
When this has been done before, we have achieved response rates of approximately 15%. For example, if one hospital that your service covers has 2000 cases per year then you can get an extra 300 self-referrals per year.

We have found the hardest part is to get the initial sign off and set up a system for compiling the list of patients for writing to. Once you’ve set this up once you can send a quarterly mailing without too much extra effort.

This is therefore the most effective use of your time to increase referrals for your project.

It also helps to get healthcare professionals on board. For example, in Luton, the bowel nurses weren’t making referrals because they thought their patients wouldn’t be interested. When they saw how many of their patients registered after the mailing the nurses became much more engaged and started discussing the physical activity scheme with their patients.

What if getting a letter upsets someone and reminds them about their diagnosis?
In order to avoid this being a problem, we’ve written the letter using supportive language, explaining the benefits of activity. It is advice about how to manage health, not a sales pitch. It is also simply an offer and not a directive. The fact that it is coming from a healthcare professional also helps with this. We haven’t experienced people becoming upset to date, but of course everyone is different, so we you draft a letter ready to send to people if they do complain.

What if someone thinks that we’re saying they’re overweight?
In the letter we talk about the many benefits of physical activity, only one of which is weight management. There are physical benefits and psychological benefits such as getting people who have been through a really difficult time a way to take control and feel that they can influence what happens to them.

Because of this approach we have not found this to be a problem in the past.

What if a letter is sent addressed to someone who’s died?
We have included details of how to run the database of contacts against Mortascreen or the bereavement register. This will mean that you don’t accidentally write to someone who’s passed away.
Won’t we be overwhelming our patients?

It’s easy to be concerned that because patients are already getting lots of information that we’ll be sending them too much. However, Macmillan’s research has found that a high percentage of people would like to hear about a service like this, and that the point at the end of treatment is the time that people would most like to hear about it. We are simply providing information and not telling patients this is something they must do. This is one way we are offering support and people rarely complain about being overwhelmed with support!

This sounds time consuming – who’s going to do the envelope stuffing?

In the past we have worked with volunteers, temporary staff or admin assistants. This is time consuming, but very simple work.

If you do not have access locally to volunteers who can help with this work then Macmillan may be able to help you find volunteers. Try Macmillan’s volunteering village online or talk to your Macmillan information centre.

There are also of course huge benefits in addition to those experienced by the patients. Healthcare professionals will be saved time because people will be able to access support groups and services and may have less contact with their healthcare professionals.

Case study

Background

Luton’s physical activity project has been running since 2012, and has had between 100 and 150 referrals a year.

What they did

The steering group in Luton approved a mailing to people who’d finished cancer treatment in the past three months. The lead CNS asked each CNS to provide a list of their patients. She then passed these names and addresses to the Macmillan Information Centre. They printed the letters, put them in envelopes along with a freepost reply envelope, and posted them. This mailing went out to 150 people.

Results

By the end of December, 22 people had responded. If continued, it is estimated the project will lead to around 100 more referrals per year, nearly doubling the number of referrals.
Being told ‘you have cancer’ can affect so much more than your health – it can also affect your family, your job, even your ability to pay the bills. But you’re still you. We get that. And, after over 100 years of helping people through cancer, we get what’s most important: that you’re treated as a person, not just a patient.

It’s why we’ll take the time to understand you and all that matters to you, so we can help you get the support you need to take care of your health, protect your personal relationships and deal with money and work worries.

We’re here to help you find your best way through from the moment of diagnosis, so you’re able to live life as fully as you can. For information, support or just someone to talk to, call 0808 808 00 00 or visit macmillan.org.uk