

The Cancer Professionals Podcast

Macmillan Membership: Sparking a revolution in cancer care

Episode transcript

(Intro music fades in)

Carly (0:10)

What is Macmillan's new workforce vision and how will it spark a revolution in cancer care?

Kim (0:15)

That's where the ambition is going to be able to bring into the community of fantastic Macmillan professionals more people that are able to support people closer to home. And this could be a wide range of clinical and non-clinical roles that we know offer absolutely essential support for people.

Carly (0:35)

Hello, I'm Carly, my pronouns are she her

Emma (0:37)

And I'm Emma and I go by she her. Welcome to the Cancer professionals podcast, a podcast from Macmillan. In this series, we chat to a wide range of guests, including health and social care professionals, to lift the lid on current issues faced by the cancer workforce.

Carly (0:53)

In this episode, which was recorded in front of a live audience at Macmillan's 2026 Professionals Conference, we explore our new workforce vision, Macmillan Membership. This is a new membership for health and social care professionals which sits alongside our existing Macmillan Professional offer. For anyone who is already a Macmillan Professional, you'll automatically become a member. Our new affiliate membership offer is open to all healthcare professionals who interact with or support people living with cancer as part of their role.

Emma (1:22)

If you enjoy this episode, please subscribe, rate, and share with your colleagues and friends. We'd also love to hear from you. Please get in touch to ask questions, give feedback, or even to suggest topics you'd like us to cover by emailing Professionalspodcast@macmillan.org.uk or by filling in our short survey linked in the episode description.

(Intro music fades out)

Carly (1:44)

So today we are exploring Macmillan's new workforce vision, Macmillan membership.

And I'm sure we can all agree as professionals, how committed we are to ensuring everyone living with cancer gets the best care in the UK, regardless of who they are or where they are. But we know that we can't do it alone, which is why our network of professionals is so vital.

Emma (2:07)

And the professional workforce is a core part of our strategy. In 2026, we'll be expanding our community further with the launch of our new Macmillan membership offer, welcoming more health and care professionals to our affiliate membership. And today we're joined by 3 fantastic guests who have played a key role in bringing this to its point now. So we're joined by Claire, Kim and Emma. So thank you for joining us today on the Cancer Professionals podcast. And it'd be great if we could start with some introductions and your connection to the topic.

So Claire, could we start with you please?

Claire (2:42)

Thank you, Emma. Hello, everybody. My name is Claire Taylor, my pronouns as she/her. I'm the Chief Nursing Officer here at Macmillan and I'm also a senior oncology nurse at London Northwest. In terms of this, I've been very closely working as part of the steering group and overseeing the development of the membership offer with Kim, Emma and many others. And I think we should acknowledge it's been a whole team coordinating the work to get us to this at this point. So thank you to everybody who's been involved.

Kim (3:14)

I'm Kim Bowles, I'm the head of Professional Engagement and I've had the privilege of being the delivery lead for this programme of work. As Claire said, we've worked with tonnes of people to help get this to a place of readiness and we've worked across the organisation within Macmillan with all types of colleagues to help develop the insights that we need. But critically, we've engaged with many professionals and over 300 professionals have really kindly and generously helped shape what it is they think they would need to succeed in that role. So over to Emma.

Emma Q (3:51)

Hi everyone, my name is Emma Quintal, my pronouns, are she/ her. I'm one of the senior innovation managers at Macmillan. I've been supporting membership offer in the kind of discovery and the early development phases, really trying to understand what affiliates need in practise to be able to deliver great care to people in cancer, and also really understanding the kind of landscape on where Macmillan can add the most value in this space.

Emma (4:16)

Thank you all so much. It's great to have you with us and to be able to explore the topic of Macmillan membership with you all.

Kim, if we could start with you, if you'd be able to share a bit of the background to the Macmillan professional offer and why this evolution into membership is happening now.

Kim (4:31)

So I think the first critical thing to say is for Macmillan professionals yourselves here in the room, nothing is changing. If anything, we just hope that the offer that we develop and deliver just becomes better, enables you to do your so for you at this moment, nothing will change.

Maybe in the future you'll have to access some of the learning offers and some of the grants office for a different sort of technological way. But for now, nothing will materially change with how you experience Macmillan.

So up on the screen, as you'll see at the moment, is our offer that all Macmillan professionals at this moment are able to access. And this is a wide offer that you can immerse yourself in as much or as little as you wish. That involves lots of really exciting things such as communities of practise or access to conferences.

Some of you may have benefited from the quality improvement support that many of our leads are able to give in your place based where you work. And also there's a whole offer around our networking capabilities. So communities of practise there's webinars, there's all kinds of ways that you can stay in touch. So nothing of that will change.

That will all remain in place, but we know that many more people living with cancer are having their cancer care in places outside of acute settings. So we now need to start thinking really differently about how we partner with the workforce. And we know that that workforce is probably less able to manage complex things related to that person's cancer care. They perhaps don't feel as confident, they don't feel connected, they perhaps don't know the networks as well. So thinking about that broader neighbourhood community, that community setting care closer to home has really been the driving force behind this.

And that's where the ambition is going to be able to bring into the community of fantastic Macmillan and professionals more people that are able to support people closer to home. And this could be a wide range of clinical and non clinical roles that we know offer absolutely essential support for people in their homes.

Emma (6:51)

Thank you. That's really helpful to have that background.

And Claire, what changes in cancer care with the workforce have created the need for a new approach? And why do we need to spark that revolution in cancer care?

Claire (7:05)

Thank you. So yes, this is about upsetting and disrupting the system and there's a moment in time is now.

I think if we just take a moment to look back to the role that Macmillan have played, it's nearly 50 years. In fact, we will be celebrating that next year for the first Macmillan post that we funded. So we've got this tremendous legacy that they're building on and we have made a really significant investment into posts and specialist cancer care.

We are of course particularly known for the CNS and I'm particularly proud as one myself that we have really evolved that role and defined what his contribution is in cancer care. But of course cancer requires a multidisciplinary team and that is and it requires a number of different professionals and a number of different settings, as Kim has said.

But why do we need to do it now? I think we just, we're seeing that increase in incidence. Those of you who are working in clinical roles would have seen not only the number of people who have been diagnosed increase, but the number of people who are living with and beyond. So that means now in the UK we've got 3.5 million people living with cancer. But it also means that every 75 seconds somebody's diagnosed with cancer in the UK. And how, how do we continue to keep managing this increase in workload?

I mean, it's fantastic, of course, that there's so many more cancer treatments, but how do you manage that if you're trying to deliver those therapies? And so we're dealing with this really difficult demand, but it's also more complicated because they're all more treatments.

It often means that people are having a number of different treatments at one time. And that requires skill, decision making and communication to make sure that we get it right for that individual. And that is more challenging than it used to be because so we're dealing with more people who are older with cancer because people are living longer, but they also because of that, more people will have another long term condition.

So what are the considerations we have to make if they're diagnosed with cancer but have arthritis, diabetes, hypertension, there's a lot more personalisation required to ensure that we give them the very best treatment to get the best outcomes and keep them safe and help them ultimately to live well in the future.

But worse than that, in a way, is that there is more variation and we're seeing some people getting those new innovations and others not. So depending on where you are, who you are, there is a difference. And that is inequity that we must challenge. And this is particularly why we need to spark a revolution because we want everybody to get the very best care, the best experience, the best outcomes. And we know that despite your very best efforts, we're, we're, we're not managing that yet. And we really do believe that we can do better. We've got huge ambition, but we can't do it alone. We have to work as one to make these changes. And I suppose I would reflect that the systems that we have right now haven't kept up. The models of care are pretty outdated.

Thankfully there's been some policy changes that are helping now to start making those shifts, but it's going to take that continued drive to deliver on these to really make that revolution happen. So we're really pleased to be working with you to make this change.

Emma (10:18)

Thank you, Claire. I think that really brings to life the complexities that the workforce are facing and supporting people and the importance of actually why those changes are needed and how. And Emma, you were really involved in the discovery phase for this work. Could you tell us a bit about the affiliates, who they are? What did you hear from them?

Emma Q (10:37)

Yeah, of course, as Kim's already mentioned, they're a really wide and kind of diverse range of professionals. They're not cancer specialists, but they're often supporting people's cancer at key points in their cancer journey. And so I think roles like allied health professionals, social prescribers, care coordinators, district and community nurses and a really wide range of roles across lots of different settings, community, primary, voluntary sector, social care.

And what is really interesting and came through in the research is despite not being cancer professionals, they're actually spending on average 40% of their their role supporting people cancer, which is really significant. And what we're hearing from them is they really care about doing this right. They want to better support people with cancer, but they're lacking the tools, the resources, the knowledge and the confidence to do that.

Some of the challenges that come across actually consistently across all goals. So regardless of the role in setting was around feeling really time poor and having lots of competing priorities. So we need to be really mindful when we're designing our membership offer that we designed for that reality intent that we develop has to be like really easy to access, dip in and out of and things like that.

Another of the challenges they're facing was around information signposting. Again, consistent across all roles, including our badged professionals. The insight we hold there is around not knowing what exists locally, not knowing how to signpost or refer in something that came through quite clearly, which was around where they, where they access support and information from. So our affiliates will go to rely kind of they rely on trusted sources. So Macmillan scored really highly on that great. But there's a bit of a disconnect between knowing that we in terms of our website and our support line, but having very little knowledge of all the other services and the kind of breadth and depth that we offer.

So that's something we've also got to be mindful of when designing our membership offer that we design something that takes the onus away from affiliates needing to know the breadth and depth of our offer. They can come to our website with a concern in mind and they'll be, they'll be presented with an array of kind of options and tools, resources, signposting for that particular situation. So that was something that came through that was really interesting.

Another was around systems challenges.

As we know, the system is really fragmented. They want to drive change, they're interested in driving change, but there's so many barriers in place that prevent them from doing that. So again, this is something that we need to design for. There's lots of appetite for change, but so many barriers.

We need to think of it as a way that their voice can be heard and they can influence in a way that fits seamlessly into their day-to-day role.

Emma (13:21)

Thank you. And it sounds like you've got a real wealth of information and insight from people that you were speaking to. And if we could expand on that a bit further, how did those insights shape the design of the membership that we're talking about now, the affiliate membership?

Emma Q (13:36)

Yeah, absolutely. So they have, I think we've steered away from where they're already crowded like spaces in the existing markets. We've moved away from like CPD or large content libraries and things like that because it is a saturated market and actually the information and content exists. But clearly that's not landing with our affiliates. We need to think differently in the space.

So we're really focusing on the gaps and the gaps that we've kind of surfaced around that in the moment support. So I'm sitting here with someone cancer, I've just seen someone with cancer and I don't know where to signpost them. I don't know the most appropriate resources. So in the moment support. So focusing on really quick practical kind of resources.

The other is around tailored content and that's definitely an ambition for us. We're not going to be there just yet for launch, but having really role specific content is something that affiliates have said is necessary, necessary something they can use day-to-day that they can actually implement any relevant to /their role.

The um another of the gap is around service navigation as I've just mentioned, it's a really fragmented system. A lot of there is support exists, but people aren't aware of it, it's available or how to signpost. So that's something that I think we could do quite well within the membership offer is enabling people to understand what exists, particularly within Macmillan's services and be able to refer and signpost in.

And then the 4th kind of gap that we want to address is around connection and peer support and people feeling that they really want to be part of something wider the community and share the learning and best practise. So that's also an element that we're incorporating them to a membership offer, but also start to think beyond like information contents.

We want to provide almost like a guided pathway like you said, rather than like us being presenting you with yet another website or content. Affiliates are coming to the site with a situation or concern in mind. And we'll be presenting them with an array of resources that fit that situation and that that concern in that particular moment. So it enables them to provide people's cancer with the right information at the right time.

Emma (15:43)

Thank you. And Claire, are you able to talk a bit more about what gaps is the membership, that Macmillan membership is addressing?

Claire (15:53)

Yes, I think I'll take us back to thinking about what people with cancer are telling us, what we heard. We do a lot of advocacy and influencing work. We played a major role in the National Plan for England, cancer plan and thinking about those insights. But we hear them across the UK that people really want access to services, but they also want care in the right place at the right time, in the right way for them.

And predominantly they do want to have care close to home. So there has been more of a shift now to how thinking about how we can do that. I mean, historically so much cancer care has been delivered in the acute sector and undoubtedly there's some very specialist care. It's become increasingly specialised in many ways and so certainly care, a lot of care will still have to be delivered in hospital. But we must keep in mind that the person with cancer is spending a lot of time out in the community and maybe doesn't always feel that there are people there to support them.

So there is a need to upskill the people we would be looking to who might like to join our affiliate offer, who are working in the community to equip them because it's not fair that we're expecting them to be looking after people with cancer. Then they don't have necessarily there is resources and support around them to do that well, but that we think about the fact that that individual may well have many other issues that they're dealing with. So we need to look at that whole person, think about have they got other long term conditions, what are their wider needs. So does that need to think about what matters to that individual? What can we do to help them in that moment? Who are the people who are around them at every stage?

And I think there have been issues and delivering a very specialist and sort of expert care in the hospital and sometimes that can drop off when treatment finishes. And whilst we try to both, both start with stratified follow up and remote monitoring and giving people after care, they may go out into the community after they finish treatment, then they may be seeing people who haven't had the the training that they need to to manage some of those late effects, for example.

So we'd like to think that there's going to be more expertise across the journey, thinking about how we can do more shifting of care into the community, taking it closer to home. And there's already quite a lot we probably do that we don't realise that we do in the community, but there are more people working in the community. I think that

we can engage and equip. And this is one of the ways that we think we can do that to support people.

So yeah, greater personalization for the individual, greater joined up care. You know, we hear regularly people don't want to be repeating their story. And some of the answers will come through technology that hopefully that once they've told their story once, that individuals will then have that on record and will get passed from one person to the other. I'd like to think that data will be part of the solution to this, but also equipping and supporting those individuals, whether they could be put in health or social care to support the individual with cancer along that journey will be absolutely key.

Emma (18:58)

Thank you. And it really shows that value of being able to take those opportunities to improve experiences for people living with and after cancer. So thank you very much. And Kim, what is the Macmillan membership? What does it look like?

Kim (19:14)

Yeah, so it's really bringing together that beautiful blend of cancer specialist expertise that we know we have in abundance through our Macmillan professionals and building that thriving professional community with a wider workforce as Emma and Claire have just beautifully described that often feel ill equipped to manage people living with cancer, really ensuring that we're building something that is firstly fit for the future. So it is moving in the same direction to which our policies are going. So we're hearing and seeing, aren't we more people having neighbourhood-based care, So really getting behind the wider workforce and bringing obviously our Macmillan professionals along on that journey as well.

But in time building that into one thriving, purpose driven community that really starts to become a force for change, this is a place where connection is not just with like minded peers, but with other peers who might help solve critical problems. And we know that so many of you here today have brilliant community connections, but building that community together so that we are more able to respond to person need is going to be absolutely essential. So lots of things, it's going to be learning, it's going to be networking, it's going to be resources and tools that help members to do their job really well. But all around sort of those visions and ambitions around personalisation and better care.

Carly (20:45)

And I know that, I mean, you talked a little bit about affiliate members and kind of what they were saying they wanted and what they were needing. I was quite interested to hear from you, Kim, about how will it feel to be an affiliate member and I guess perhaps how will it maybe feel different before in terms of their membership?

Kim (21:03)

So when they join, they will immediately become part of the Macmillan family. They will be in our sort of register of professionals. They will have access to a membership portal, which you all will as well, which will mean that they can go directly to some of that

learning and development, some of that essential support and signposts. Then access to events and webinars and local conferences. And also have a badge that that tells the people that they're caring for, that they're supported by Macmillan. Not quite the same as a Macmillan Professional badge but it will acknowledge that there is a partnership. It will acknowledge that there is a connection with with us and that they are and part of something outside of their sort of normal day jobs. And the member will be able to come into a portal. I think we've got a picture on the screen at the moment which will do lots of things.

Hopefully in the future it will enable members to directly refer into some of our direct services, which is going to be really invaluable for our workforce that don't have those information support centres at hand or perhaps don't have access to specialist physiotherapists and you know, all of that essential support. So it's really starting to pull everything into one place and become a place of, you know, where I, I would go as a, as a professional to support that person in the moment. So in time, we hope that the membership will enable professionals to make a referral to our direct services line, our benefits advisors, who will then generate an appointment for that person in the future. And as we understand more about our members, including all of you, we'll be able to really then think about how we personalise the offers.

So if we're seeing a large community, for example, of social prescribers, what is it we might not need to think about in terms of learning opportunities, in terms of networking opportunities? It's very much going to be an iterative process and we're just really keen to learn. We've got 300 professionals that have helped shape us to this date who are really keen to stay on board and help continuing to shape. So I'm hoping it's going to feel like that members are part of something that's thriving, that's moving and that's making some really impactful change.

Cary (23:32)

Yeah, sounds great. I love that and Macmillan family, that's really nice. I know you talked about sort of learning and development having those opportunities and I was interested to know kind of how Macmillan membership will help with feeling that kind of able to grow and feeling valued, recognised.

Kim (23:51)

Absolutely. So we're in a process at the moment where we're we're reshaping our learning offer. We are looking at it in from every angle to ensure that it's intuitive is what professionals need. It responds to some of that bite size reality of what people need in their day-to-day, but also that we're embedding some real transformational elements in that to help professionals feel really confident in sustaining services.

So it's it's going to be a place that hopefully will become something that people will want to to develop more insight into and, and grown with. But it will start, you know, relatively small in terms of that the the member will be able to immerse themselves as much always literally say wish according to how busy they are.

Everything we are designing is meant to be helpful at the moment. And hopefully that, you know, sparked that revolution to not only change cancer care, but to also for that professional to feel more erm empowered to want to learn more.

Carly (24:56)

Yeah, great. And is there anything from the work that you have been doing with affiliates about actually and what you've heard from them about what that might look like in practise?

Emma Q (25:06)

Firstly, it would be us demonstrating that we've listened to them throughout the research we've done, the workshops and the surveys that we've listened, we've taken that on board, we've designed for their realities and that's reflected from the membership and membership offer that we launched.

So firstly, it's demonstrating that we've listened kind of you said we did, but I think it's also us designing something where they feel like this is for me. But then I've really listened and taken on board and designed for my role. And that will come as we get into what kind of model role specific content and development.

I think it's also about feeling connected to something bigger, which again, they'll be able to do through the new membership offer, connecting with other peers are doing a similar job, facing similar challenges, exchanging kind of tips and knowledge and shared learning. But I think ultimately it's about feeling like they have a voice and they have the ability to influence and kind of change system, where it isn't working where they're kind of they're on the ground, they're seeing what isn't working. They've got some great ideas and what what it could potentially look like, but often don't feel like they can act them out or don't have the capacity or support for their manager and things like that. So hopefully the membership offer will enable them to be not just an, you know, deliverer of services, but a contributor, someone who's actually able to shape the evolving services as well as deliver them.

Carly (26:30)

That sounds great. And I wanted to come to you, Claire, if that's okay to is there anything else in there around how membership can can help as you mentioned them and sort of raise the collective voice and bring those people together from your perspective?

Claire (26:45)

And yes, and I think on both accounts, thinking about professionals and affiliates, there's opportunities to come together and really, really, really key. We're really proud of the fact that we've got 50 communities of practise and they're so empowering. We're going to be listening to, you know, what is needed in the future and growing that.

There's already, I was hearing from Kim just this morning, the more forming this week. So we're really responsive to creating new communities of practise And just sort of reflection on the team I lead the centre of clinical expertise. They run the GP community of practise, which is growing in for in numbers for a lively monthly debate. So that's a

way of bringing that voice together. Escalating concerns there's something very unifying isn't there about sharing those concerns, those those ideas together as a group and bringing them back up and, you know, hearing about them at our team and perhaps taking them further to is there something that really needs to be addressed to policy or a national level?

I'm personally involved in the ACCEND community of practise and I really love hearing about the work that's going on across the Four Nations. It's really amazing, despite the fact that everybody here is really working absolutely flat out amazing creativity in designing workforce solutions. So I always come off those so energised and the fact that we're sort of all in this shared work together is I think, OK, very powerful. So, so more of that and I can see, yeah, other opportunities. I don't know if you want to come in on that Kim.

Kim (28:21)

Absolutely. I just, I just think, for example, we've got a number of regional conferences this year and the hope is that we're going to have a blend of affiliate members and Macmillan badged staff. And that's going to be the start of that connection.

And if those people are local, which we hope that they will be, that's going to be such a brilliant way of connecting what is often a really, you know, a specialist service with a community service building the network, building those local connect, which then just means better outcomes for people living with cancer. If you know somebody, it's always easier to fix the problem, isn't it? Because you can pick up a phone and you can have a conversation.

And if we can start to develop that more connected community, see through this, that means that, you know, people aren't perhaps being escalated through complex emergency routes, but there may be more direct conversations to the specialists that can make a difference. And that that person can then be managed in a more dignified and way without a long hospital corridor stay. So that's the kind of potential we have here.

Also, I think, you know, as well as being networked and connecting together, I just think just hearing different perspectives from professionals just helps us as an organisation really listen to that. And then what can we do that from an external affairs perspective? How can we escalate and talk truth to power in the work that we do with, you know, governments and decision makers across across the nation? So I think there's going to be so many kind of insights that come from this that are going to be so helpful in building that collective voice.

Emma (30:01)

It's really fantastic to hear about the opportunities to build these connections, build bigger, stronger networks while continuing that sharing best practise, sharing knowledge and learning with each other. And it's brilliant to hear the impact for the workforce, but ultimately people living with cancer at the heart of the offer and it would be great, Claire, if we could sort of explore actually what does the Macmillan

membership mean for people living with cancer and what are the tangible differences that they'll experience as a result of this?

Claire (30:34)

Yes, I suppose thinking about Macmillan professionals and also our affiliates together in answering that question and across the journey, I've talked about perhaps what might happen after treatment. But you know, we hear from a lot of people about the difficulties they have in getting to treatment quickly. But I'm just wondering, the more we can support and educate people who might be in that early phase in the diagnostic phase, can that make a difference to speed up the waiting times to help them get into the system quicker, particularly if they're out in community primary care so that that person gets to their diagnosis and and treatment quicker.

But also think as they go through their journey, having people who are really listening to them, who can understand, who have some appreciation of what it means to have cancer, who have the contacts, who have the signposts. It might be that they can link them into some of our services like the Cancer Care Map and navigate them to some great services for them locally. And it's so it's about being heard, it's about supporting them. And I think it's about that kind of constant presence along the journey. Continuity is really important, but I think it's always we get that the messaging right, we get the handovers right, that maybe somebody's working out in the community who's part of our affiliate offer gets to know the professional who's working in the acute cancer care with that specialist knowledge.

And then again, maybe there's handover again at the end. So that that person really feels that somebody there for them all the time is really important so that they feel that they're not abandoned, that they they continue to be supported. And there's perhaps have the skills. So I mentioned about cancer care becoming increasingly complicated. That means that we have to have some very challenging conversations with people. And there's certainly levels of skill needed for that. Making sure all our professionals have the right communication skills will really help in those difficult conversations to help to make the best decisions and make it shared. Making that individual with cancer feel that they're taking a really active role and getting to the right place for them. I think those are really important skills that hopefully with the right education, yeah, that that's that's felt by the individual with cancer.

Kim (32:42)

Can I just add a couple of things there. So I think as well as, you know, obviously the, the workforce benefits, I think is that professional being able to refer to trusted services, use trusted information. And it may be that, you know, that connection that that affiliate member may have with their patients at that moment to say that I'm affiliated with Macmillan and I've had some training. I know this service and I've, you know, I can vouch that it's worked and, and it has great outcomes and you'll be looked after. I just think that trust building is also really important in this. So hopefully much more about signposting. Absolutely. But being able to understand where they're signposting, to understand the service, being able to describe it to a patient, to a person living with cancer, so that you know, that enables some trust within where they go in and what that what that service might provide.

Claire (33:41)

I totally agree with you, Kim. I was just to give back the referrals you used to make in my CNS role. It's so much easier to describe it to somebody if you know that individual and, you know, know what they can offer, you make an appropriate referral, which is more efficient. But it's also, it's more likely, I think to end up with that individual taking on that service. I'm thinking perhaps particularly for a psychological service or whatever. But if you say, yeah, I really know, you know what she's going to be able to offer you, it's more likely that that will deliver.

Kim (34:07)

And can I also say, you know, not all people want face to face support. They want it in other ways, they want it digitally. You know, they may want it in their own time, they may want it through to just the community groups or other ways. And the membership approach will enable that knowledge to be known. So a deeper understanding of online communities, for example, or a volunteer buddy service. So I think it's about thinking about that person as a whole. And not everybody wants to go and sit to talk to somebody. They want to be able to do their own research in their own time. So having confidence that actually, you know, this is trusted research, this is trusted resources, being able to vouch for that I think is going to be incredibly powerful in that interaction with that person.

Claire (34:53)

I've wondered whether we should almost have a, a Macmillan checklist that's as a Macmillan professional, I sort of make sure that I've gone through actually have I told them about all the Macmillan services that there are because I'm not sure that everybody does get offered them. And it'd be really nice to think that as we kind of grow our membership offer that people are really [inaudible].

Kim (35:12)

You've just reminded me. So every member will get a list of all of our Macmillan services and a description of them as part of their welcome pack. But obviously that will be on the website too. Sorry.

Claire (35:22)

No, no, that's fine. Yeah, because they, they, otherwise they might miss out on the buddy service and that might be just exactly what they want. Or it might be that they want a particular type of information that we haven't offered them. Yeah. Making sure that we tell them what's available. And then it's for the individual to choose what's right for them.

Emma (35:39)

And you can really see how making those connections is really going to support person centred care and that personalisation. And if we think wider, Kim, are you able to kind of expand maybe on how does the Macmillan membership help Macmillan as an organisation reach more people to ensure that everyone with cancer gets the best care wherever they are and whoever they are?

Kim (36:03)

Absolutely. So I thought that, you know, that that is kind of one of the underlying principles of this is that we do want to reach as many people as possible with the right support and right care and we know one of the ways to do that is, is through the workforce. And as I said at the beginning, in order to do that, we have to diversify what we think of the workforce. And our cancer professionals are so valued and incredible, but not always in every part of that journey.

So thinking about how we empower other incredible professionals along that journey to be able to provide support, provide signposting never, you know, with that sort of specialist cancer knowledge and depth, but have have some confidence to do that and to do that well in the moment is going to be it's going to be one of the founding principles of this.

Emma (36:54)

Kim, if we were sitting here in three years' time, what would you like to see having changed through the Macmillan membership offer?

Kim (37:03)

I anticipate that we'll have a diverse family of Macmillan professionals working in various different settings across the acute settings, across the private sector, across community organisations. And I would imagine that those professionals will be more connected than ever before because of the events and the opportunities to network and to be part of solving problems and sticky issues.

You know, we're going to all need to come together to do that. So in three years' time, I think, you know, hopefully we're all going to have a broader network of people that we know that we can call upon to help us with things that we know are there supporting the the, the mission that we're on.

Emma (37:49)

And Emma and Claire, was there anything that you wanted to add in terms of kind of what that success would look like, what you would hope for in those three years' time?

Emma Q (37:59)

For me, everything like Kim just said. But also them thinking, oh, they, they've got that voice and they're actively involved in shaping the system, Macmillan's direct services, the membership offer. So them thinking that they're valued and recognised and have a voice.

Claire (38:14)

Totally agree with you, connected, empowered, yes, seeing your role in changing the system.

We are the change makers. We are here seeing what's happening on the ground. We

can, you know, call that out and do something about it hopefully. And I think that support element is really key. You know, we've been hearing this, quite a lot of people are isolated, have so much pressure that it's really hard to actually take time to study. But hopefully by making what we're offering accessible and more personal, there will be opportunities for people to dip in and out of that to to educate them. And then they maybe feel more capable and more confident and able to continue to care. So I really do feel that there's a huge amounts that we will continue to develop. But we'll be doing that by listening to you all. And whilst we've always had an annual survey, we've taken that feedback and we've tried to address it.

I think we've getting more sophisticated at evolving our offer and we're really absolutely committed to making sure that we're listening to what you're saying and responding to that in the best way that we can at that time. Yeah, we really do want you to engage with us. And I guess some examples of that. You will have seen our new campaign, you know, this is there was a lot of consultation with healthcare professionals and Macmillan professionals to make sure that we've got that right. And hopefully it's landing well with you all. But there's many other examples where we've made sure that we have heard what you've said and we'll continue to do that going forward. And so hopefully there's a sense that we're working together to to make that change.

Emma (39:42)

Thank you.

Carly (39:43)

Wow, amazing. Yeah. Thank you so much for all of your insights kind of so far. I think it might be quite a nice time to do some question and answers, so I'll start with the first one. So what does Macmillan membership mean for my role as a Macmillan professional?

Kim (40:00)

So hopefully you'll be benefiting from an enhanced offer we're designing all the time. Adaptations and optimising what we're giving professionals. So hopefully for you, you'll start to feel the benefits of that coming through to your role and give you a quick example. I know I've heard how frustrating it is for many of you to apply for professional grants, for example. It's a laborious process at the moment that often means that your organisation has to get ravelled up in invoicing. We are working actively at the moment to try and just get that money directly to you if you want to go off and do some sort of CPD or study.

So that's kind of one of the benefits. I think you will hopefully develop a broader network that will be useful to you. You will know this network all already. So my my ask is that you start to share this with the people that aren't Macmillan professionals that can possibly benefit from this. So that would be that would ask.

Claire (41:02)

So I'm thinking making sure that they're taking advantage of all the offer. So have they got a relationship with their relationship lead? You know, have they had a chat about how Macmillan can help them? Is there a grant that they may be entitled to, whether it be two more personal development grants, maybe there's some service improvement

work that they could do together because they've been trained now to offer that service. I don't know whether you want to come in on that Kim, but I think that's a, that's a really valuable offer that everybody has access to help them look at maybe a problem they have and try to work out with a solution to that through quality improvement.

Kim (41:39)

That's absolutely right Claire, that the team have all undertaken NHS quality coach improvement training. So they're really well placed now to help you work through any kind of service design within your own teams. And we've got some really great examples underway at the moment where we're working through some pathway issues that people have or addressing inequities, particularly around learning disabilities communities.

We've got some improvement collaboratives, but they are little ways that, you know, if we do that everywhere, we really start to spark a revolution because we start to understand what's made a difference. We can then start to share that this fabulous network and that those ideas might spark ideas within your own services. So I'm particularly excited about how our service improvement offer can help so many things within your services, whether that's improving pathways, as I've said, whether that's helping embed ACCEND and competences within your team, whether that's thinking about how you might connect with other services and build those sort of necessary bridges, business cases, whatever it might need to be. So that's that's, that's part of this offer that I'm particularly excited about.

Claire (43:01)

I'm glad you mentioned ACCEND because Macmillan co-lead that with NHS England, and we're really trying to stretch it out across the Four Nations to make sure everybody has access to that. Because I think it's a really vital way of doing the assessment to find out what level of practise you work at, what capabilities you might be missing in your practise, and then be having a conversation with a mentor or a manager to be thinking how I might develop those.

It might be this experience you can undertake in your current role, or it might be there's some particular training that you want to do. There's some free funded courses through the ACCEND offer and there's this amazing course finder that I need to mention that if you just Google ACCEND course Finder, you'll find because then you can put in what your needs are and find out what course might be appropriate to you, if indeed it's a course that you want. But I think it's a great part of the offer and that it is the team are being trained up to help explain that and make sure people have decided because it's it's a large document. It's a complex framework and not everybody finds it that easy to navigate. Although it's gone digital now.

Kim (43:58)

And just on that our fabulous professional development and knowledge team have mapped all of the Macmillan learning offer it to the ACCEND capabilities. So you'll know when you're going into that and affiliates, if, if they start to delve into ACCEND, there's

probably a bit of work to do there. Will also be able to easily navigate what course would help them develop that competency in that specific area. So that's really helpful.

Claire (44:25)

So it's, it's nice to be aligned, but what's really great on a learning offer at the moment, there's quite a lot of education available for people who are working in community and primary care, if you're supporting people with cancer and long term conditions module, etcetera. So it's really worth having a look.

Carly (44:39)

So the next question is we might have already covered this, but we'll see if there's anything maybe to add. So the next question is how does my non Macmillan professional colleague find out more & up?

Kim (44:49)

So we are going to do this in a bit of a staged ways. Many of you will know the Macmillan Learning Hub, which is the place where you get your sort of education and training. So we're going to be right into all non-Macmillan professionals on the Learning Hub. There's about 17,000 members altogether. Forgive, forgive me, I can't remember how many are wider workforce, but probably about 10,000 of those I would say.

So we're going to be writing to those individual and invite them to transfer their kind of affiliation from the hub to membership. So that will hopefully we'll see some significant growth through that. Just to reassure everyone, nobody will lose their learning hub content. So if they're midway through doing a module or midway through doing some learning, that will all be saved. And then our brilliant marketing and communications team have developed an absolutely fantastic kind of set of approaches to be able to communicate through audiences, to be able to market. So we've worked really closely with the Centre of Clinical Expertise to work through professional bodies, to work through membership, other membership organisations to work through sort of senior trusted clinicians across the system. Haven't we Claire to be able to raise awareness of this and ask for their help for when we're ready to share.

Claire (46:15)

So spread the word.

Kim (46:17)

Yeah, so spread the word.

Carly (46:18)

Lovely. Thank you. The next question I think is to all of you. So what is the most exciting element of Macmillan membership to you? Should we start with you Emma?

Emma Q (46:27)

Sure. I think for me it's probably the sheer kind of scale of the opportunity. It's a really large, quite under supported workforce that are already interacting with people with cancer at key points in their cancer journey. And they've already described feeling kind

of under equipped and lacking confidence and skills. And if we're, if we're able to upskill this workforce, the kind of ripple effect, the, the impact that we'll have for people with cancer is huge. The number of people they're going to support is absolutely huge. So for me, it's the, the opportunity of us to kind of really scale this. And despite, you know, across all the different role types that we've heard from across different settings, a lot of the kind of challenges and barriers are consistent they're the same, which gives us confidence that we can really make this work at scale. So for me, it's like the scale of it, it's grand. So, yeah.

Kim (47:21)

So apart from all the other benefits that we've spoken about, I think the opportunity here for me is that we have such a moment through the cancer plan for England and the other devolved nation plans, but also through the ambitions around neighbourhood health. And I just think this has come in at a time where we can really offer a workforce within those other sort of system change plans that grounds people in person centred and support that helps people that have got cancer. So I think the timing of this is really sort of important in terms of where we can see care go in, where we can see change in the system. So I think we're probably ideally placed to help support that. So I think that would be my opportunity.

Claire (48:12)

Was it what excites or what's the best thing?

Carly (48:14)

What is the most exciting, Most exciting?

Claire (48:17)

Well, I think you've had some brilliant answers. Definitely the scale with opportunity that's there for more people to join and receive some of the benefits to come together. The fact that we are working a little bit ahead and that we are going to sort of help to prepare the system, prepare the professionals and hopefully support people with cancer better. Definitely. But hopefully the fact we've got great vision still and what we might be able to achieve and but then we want to do it with you and hopefully really respond to your needs and developing and supporting you as we go forward.

Carly (48:47)

Great, lovely. Thank you. So the next question is, I know we've, we have touched on this slightly when we were talking about that kind of impact and the difference for people living with cancer. But there might be some, some more to kind of add in. But this question is how/ when will we see a difference for people living with cancer with Macmillan membership who wants to take that one?

Claire (49:09)

Well, I hope well, right now.

Kim (49:13)

Well, I mean, I think you, you could say an immediate difference if if somebody was

supported to the right service at that right moment, then obviously that that's an immediate difference of that person, isn't it? What sits behind all of this of course is like how do we, how do we actually understand that issue? What is the evaluation around understanding that issue. So we have a whole team in the delivery group that are looking at evaluation that and looking at how we are improving outcomes through this, what it's doing to confidence in the workforce, how we might be help people living with cancer. Some of those things are really hard to measure because of just, you know, we just might not know that an affiliate member, for example, has made a referral to a specific service. So some of it is going to be that continued kind of communication, focus groups, feedback.

We're going to want to, you know, survey this group of professionals and yourselves to understand, you know, if this is helping people do exactly that. So I think it's going to be a combination of some sort of complicated kind of theories and evaluation frameworks alongside narrative that we hear back from professionals and people with lived experience.

Claire (50:36)

Yeah. So getting those metrics because it needs to be more than the reach. Yes, we want to reach everybody. We particularly want to reach those who have the highest need, but what's that going to feel like? What difference is that going to make to that individual with cancer? That I got the information when I needed it, that I got heard, people asked me the questions that mattered to me, that somebody did the holistic assessment and came up with the care plan that helped me address those needs.

But to what extent can we attribute that to being, you know, the contact with the Macmillan professional or part of the wider care experience? So we can look at it certainly through trends like the patient experience survey and, and, and other measures, but it's trying to find key performance indicators that are we can say there's a direct attribution. I don't know whether in innovation Emma you've got thoughts on that?

Emma Q (51:26)

It's a sticky problem and I don't have a solution for it other than it would probably be a combination of like analytics from our website. How many affiliates are kind of coming through and what they're accessing and then that kind of qualitative stuff like the workshops, the focus groups, the surveys. I think we need to build in mechanisms on the site for people to kind of join a kind of a group where they can come feedback on.

We just need to make it as easy as possible for them to kind of feedback on what they're doing, take the kind of any barriers that might prevent them from kind of reporting the impact.

Claire (52:01)

You do collect quite a lot of data already.

Kim (52:03)

Yeah. We do but it's it's actually quite difficult to attribute that to the outcomes for people living with cancer because we often don't see that data. And I know it's something that our internal evaluation teams kind of are really lively grappling with at the moment because we do want to make those correlations between by doing this, we, we see this difference. So it's, it's a big thought piece. It really is.

But in terms of the difference that professionals make and the interventions that you give, then we have a lot of evidence around if you know, we support or you help develop a service improvement exercise, the difference that makes for people with with cancer, that's really quite easy to see. So it's about bringing all that together into a place where we can start to synthesise it and understand it and it help us drive forward even better thinking.

Claire (53:01)

And you'll continue to get our survey data as well where we'll be hearing. Are we supporting you adequately? Are you liking our offers? Are we giving you what you want as professionals and affiliates?

Carly (53:11)

I've got one more question from the Q&A. And again, we've kind of touched on this, but there might be some more to add. So is Macmillan membership tailored to individual roles or is it kind of one membership for all so it kind of brings in that personalisation that we've touched on.

Claire (53:28)

I think there's going to be greater personalisation. We're starting to understand where somebody might work in the role that they have and then maybe what courses might be more appropriate to them. And certainly in that respect through your portal. But Kim, you, you know better.

Kim (53:39)

Yeah, definitely we want to move to a place of personalisation. At the moment obviously, we've tried to cover kind of that generic cover all bases kind of approach, but we definitely want to as we start to understand what our membership is made-up of. We certainly want to get to a place where we can design things specifically for an audience, assuming, you know, the numbers are tell us that that that's the right thing to do, because we know that different professions and different roles dependent on where they are well required slightly different things.

We do want to get to a place of personalisation and in terms of our portal and our tech team have been incredible on this journey, certainly want to get that, don't they Emma get that to a place of personalisation. So it's going to in the future become a little bit like referred a patient here, have you also considered this? So it starts to build in that kind of algorithm of support. So that's actually really quite helpful because if you're not feeling as confident in where to send that person living with cancer, hopefully you know that the the portal will start to give you some of those kind of prompts and to at least consider them. So that in itself I think is a great, a great set forward and helping that personalised obviously care for the person.

Claire (54:59)

And I suppose in terms of our education offer, you can already go in and see where the different courses might be relevant to you depending on the level. And I might just bring up the ACCEND course finder again, because then you can even go to another level and say has that course got particular capabilities that I'm looking to to address and develop.

So in terms of education, I think we're getting more sophisticated in terms of how we can make that personal to an individual.

Carly (55:26)

Yeah, it's great. I love the course finder too.

Emma (55:28)

Thank you. It's been really great to explore some of those topics a little bit further and now kind of to bring our conversation to a close. We have our regular feature, which is our final question. What one thing would you like the audience from today and those listening to take away from this conversation? So Claire, if we could start with you first, please.

Claire (55:51)

Well, we're all in it together to spot this revolution, but also to make sure that people get the very best support today.

Emma (55:58)

Thank you Claire. Kim?

Kim (55:59)

Tell your network that the network is growing and how it's growing and what they can do about it, which is to become a member.

Emma (56:08)

Fantastic. Thank you. And Emma?

Emma Q (56:10)

I think for me it's around the importance of co-design. We've not designed this in isolation and it links back to members feeling valued and heard. So we're hopefully demonstrating that in what we're about to launch.

Emma (56:21)

Fantastic. Thank you.

Carly (56:22)

I love those. Very short and snappy. That was great. Yeah. And I learned so much about

about kind of Macmillan membership and thanks so much for kind of sharing your insights and all the really hard work that's gone into it.

And we know that I know we've talked quite a bit about that kind of sparking a revolution or what really came through is actually how we can really achieve that through some of the really great features that Macmillan membership will offer. So it's really great to hear. Thank you so much to Claire, Kim, and Emma for joining us on The Cancer Professionals podcast.

(Outro music fades in)

Kim, Claire and Emma Q (56:55)

Thank you.

Carly (56:57)

You've been listening to the Cancer Professionals Podcast, which is brought to you by Macmillan Cancer Support. If you work in health or social care, visit macmillan.org.uk/learning to find out more about our Learning Hub, where you can access free education and training. For links to the resources mentioned, see the episode description.

Emma (57:16)

If you enjoyed this episode, follow us so you don't miss our next conversation when we'll be joined by Julian Marchesi and Emma Nicholson to talk about the gut microbiome.

Carly (57:25)

We'd love you to rate our show and share with your colleagues. Get in touch with us by emailing professionalspodcast@macmillan.org.uk. New episodes are released on the first and third Wednesday of each month.

Emma (57:37)

I'm Emma

Carly (57:39)

And I'm Carly, and you have been listening to The Cancer Professionals Podcast by Macmillan Cancer Support.