Suffolk and North East Essex Integrated Care Board (ICB) | Community 360 Together We Thrive | CVST Bringing Unity to Our Community | Suffolk Community Foundation

Cancer Community Partnership Funding Guidelines and Criteria

Outcome: An increase in the proportion of those diagnosed with Cancer at stage one and two.

One in every two people in this country will be told they have cancer at some point in their lives.Our NHS Long Term Plan aims to save thousands more lives each year by dramatically improving how we diagnose and treat cancer – our ambition is that by 2028, an extra 55,000 people each year will survive for five years or more following their cancer diagnosis.

This will include improving our national screening programmes, giving people faster access to diagnostic tests, investing in cutting edge treatments and technologies, and making sure more patients can quickly benefit from precise, highly personalised treatments as medical science advance

Equally the NHS Long Term Plan focuses on delivering **personalised** health and care services, supporting people to have choice and control over the way their care is planned and delivered, based upon 'what matters' to them. Personalised care is fundamental to deliver the NHS cancer ambition.

However, A person's health is determined by a complex interaction between individual characteristics, lifestyle and the physical, social and economic environment. Likewise, these factors impact significantly on a person's ability to live well once they have a health or care concern

In Suffolk and North East Essex we cover an area that is diverse in terms of rural and urban communities, with populations of varying socio-economic backgrounds and demographics. The diverse geography and population within Suffolk and North East Essex creates the complex interaction of health determinates that require our community organisations, charities and voluntary sectors local knowledge and expertise to support us achieving Early Cancer Diagnosis.

The SNEE ICB Joint Forward Plan takes account of the key priorities of the Suffolk Transitional Joint Health and Wellbeing Strategy 2022 to 2023. This strategy was developed by considering the wider determinants of health using an asset-based approach by working in collaboration with others. A key priority of this is Listening and engaging with local voices: Residents and communities will become more involved in decisions that affect their lives, health and wellbeing as evidenced through the engagement undertaken on the Joint Forward Plan.

The Joint Forward Plan strategy builds on and brings together earlier work and thinking from across local partners and describes a shared vision from the perspective of 'what matters' to people living across Suffolk and North East Essex.

Purpose

The purpose of the Cancer Community Partnership fund is to support the achievement of an increase in the proportion of those diagnosis with cancer at stage one and two. The way in which this is proposed to be achieved is through the following indicators:

1. **Increased uptake of National Screening Programmes**
   - Increase the number of people who attend national screening programme appointments, particularly those who are currently facing additional challenges and/or barriers
   - Delivery of education/educational material, promoting and signposting the purpose of screening, support available for attending and highlighting extended access.

2. **Early Cancer Diagnosis: Improve signs and symptoms awareness for cancer**

- Ensuring people across Suffolk and North East Essex have the knowledge required to recognise changes within their body that are signs and symptoms of cancer. This could include a focus on various targeted events.
- Delivery of education/educational material, promoting and signposting prevention/early intervention, and reducing delay in presentation at primary care.
- Reduce the number of people presenting with late stage cancer.
- Provide the right support for those who face barriers and health inequalities.

3. **Reducing health inequalities and improving access for Inclusion Health across SNEE as relating to earlier diagnosis :** Inclusion health is a 'catch-all' term used to describe people who are socially excluded, typically experience multiple overlapping risk factors for poor health (such as poverty, violence and complex trauma), experience stigma and discrimination, and are not consistently accounted for in electronic records (such as healthcare databases). These experiences frequently lead to barriers in access to healthcare and extremely poor health outcomes as well as contributing considerably to increasing health inequalities.
4. **Personalised Care:** A joined up whole system approach supporting and empowering people to manage their own health and increase the direct control that people have of the care that is provided to them based upon 'What Matters' to them. Delivering the six components of Personalised Care, which brings together the health and care system in partnership with the voluntary sector.

Outcomes

Timely presentation facilitated by Increased uptake of National Screening Programmes and improved education/awareness of early cancer signs and symptoms.

We want our local population supported by the Community Partnership fund to be able to say:

- I know when I'm due for my national screening appointment.
- I know why it's important to attend my national screening appointment.
- I know how to arrange my national screening appointment.
- I can access support through a range of sources (including face to face).
- I have someone to help me navigate the system when I need it.
- I know how and where to access information on early cancer signs and symptoms.
- I can access services with reasonable adjustment when I need it.
- I get the right support at the right time by the right service.

- I understand my risk and symptoms, and I feel supported to manage my health and wellbeing.
- The service I receive is based upon 'What Matters to Me'

The Cancer Programme's Primary Health Indicators are:

- All communities are enabled to live healthy lifestyles, are aware of concerning symptoms and know how to seek appropriate help (Prevention and Awareness)
- Achievement of the national screening targets for breast, colorectal and cervical across all the communities, considering deprivation and addressing pockets of worst performance
- Addressing Health inequalities

Personal Health Budget Allocation

A proportion of the funding will also be allocated to people within SNEE who may benefit from a one-off Personal Health Budget, delivered by VCFSE partners, to provide one-off goods or services ensuring equitable access to cancer screening and/or diagnostic where inequalities presents a barrier. One-off, small budget PHB's are used to address health inequalities and disadvantaged individuals to achieve health outcomes that may previously have gone unmet. There is no legal right to have a PHB and each project will have a determining criteria for access. Further detail outline below:

- Applications for a small pot of money to be held by the organisation to distribute a one off PHB to individuals meeting locally agreed criteria for your project. Supported by the ICB PHB Delivery Advisor to develop your service model and governance, fund holding organisations would hold delegated authority to purchase products or services on behalf of the person who otherwise would be unable to achieve their health goals. Examples are diverse and individual, based upon each personal set of circumstances, focusing on what matters to the person and their personal barriers to achieving health goals.
- A small budget one-off PHB may be essential where the goods or service cannot be provided personally, through local community assets, including the voluntary sector, or cannot be provided by them without this additional support. Examples may include supporting people to access screening or cancer related appointments where they lack personal means or support network and would otherwise not attend, or a person may receive treatment which requires home essentials they lack the means to personally provide. An example of this is where a person is prescribed medication requiring fridge storage, eg insulin, but doesn't have a fridge or personal means to purchase.
- Organisations seeking to incorporate one-off PHBs within their fund bid will be required to keep a comprehensive spread sheet detailing those persons receiving one-off PHB funding including the date of delivery, cost, item or service provided and a brief description of the case scenario including the person reported outcome and/or experience. This information will be shared with the ICB PHB Delivery Advisor every 3 months, upon request, for NHSE benchmarking and ICB support is available throughout your PHB project delivery. Reporting will also capture age, ethnicity, gender and locality for wider benchmarking. Spreadsheet examples are available if required.

Fund Value

Total funding available is £300,000 across

- Ipswich and East
- West Suffolk
- North East Essex

NB: *Only one application is required if the project supports multiple locations. However, applications are split and assessed by population proportion.*

Applications

- All funding will be allocated and distributed by Suffolk and North East Essex Integrated Care Board
- Projects will run for up to 2 years from funding allocation date.

Who Can Apply:

The grant fund invites applications from not-for-profit organisations and public sector partnerships such as:

- Registered voluntary and charitable organisations (including Local Delivery groups of schools with charitable status)
- Community groups
- Tenants and residents' groups
- District, parish, town councils and Local Authority
- NHS organisations
- Faith groups
- Housing associations (not for profit only)
- Most sports organisations (voluntary and charity only)
- Private clubs (voluntary and charity only)
- Most co-operatives and social enterprises (provided profits are retained for the benefit of the members or community served)
- Community interest companies
- Not for profit trade associations
- Partnerships of community focussed organisations

Target Groups

- Suffolk and North East Essex residents
- Those affected by Health Inequalities.

Conditions

- Be open to cross cutting themes and partnership working.
- All approved applications will need to complete EIA - Equality Impact Assessment section on application form.
- All applications will need to demonstrate value for money and an Exit Strategy.
- All applications must be able to demonstrate that they will support and offer a solution that reflects and contributes to the overarching outcome of earlier diagnosis of cancer and then linked to one or more of the three indicators listed earlier above.
- Please highlight the location/s your project covers.
- Funds can be used for Capital and/or Revenue- Please note there are implications if one or more community partner wanted to utilise funding for significant assets e.g building or vehicles. Revenue can be used on capital items valued at less than £5k

Monitoring Requirements

Evidence will be required of:

- Improved access to screening opportunities.
- Increased knowledge and awareness of early cancer symptoms.
- "Prevention of Cancer" education.
- Promotion of the lived experiences of local people to better inform the development of local infrastructure by reducing inequalities.
- Activities, case studies, events and workshops which improve early diagnosis and/or increase uptake of national screening programmes for cervical, breast and bowel cancer.
- Improving the cancer journey.

Frequency of Reporting:

- **Grants of £2000 and under-** a yearly outcome report
- **Grants over £2000 up to £10,000**- Six monthly outcome report
- **Grants greater than £10,000-** The funding will be distributed on a quarterly basis, monitoring will also be requested on quarterly basis**.**

Application process:

- **25/09/23- Cancer Community Partnership Fund online launch**
- **20/11/23- Applications open**
- **05/12/23- First Panel meeting**

Colchester Based Organisations - funding@community360.org.uk or by post to Community360, Winsley's House, High Street, Colchester, CO1 1UG
Phone 01206 505250

Tendring Based Organisations - funding@cvstendring.org.uk or by post to CVS Tendring, Imperial House, 20 – 22 Rosemary Road, Clacton-on-Sea, CO15 1NZ
Phone 01255 425692

Suffolk based organisations – grantsteam@suffolkcf.org.uk or by post to Suffolk Community Foundation, The Old Barns, Peninsula Business Centre, Wherstead, Ispwich, Suffolk, IP9 2BB Phone 01473 602602.