

2024 Evaluation of the Introduction of the Senior Health Promotion and Improvement Officers-Cancer Prevention Roles and Practitioner Network



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Executive Summary

Between 30% - 50% of cancers are attributable to modifiable environmental and behavioural risk factors. Aligning with the recommendations from the National Cancer Strategy 2017-2026, Sláintecare, and the establishment of the HSE health regions, the HSE National Cancer Control Programme (NCCP) has partnered with HSE Health & Wellbeing to fund six regional Senior Health Promotion & Improvement Officer – Cancer Prevention (SHPIO-CP) positions. To date, five of these six posts are filled.

The SHPIO-CP posts are located in the HSE Health and Wellbeing Division within the relevant HSE health regions. The SHPIOs-CP remit is to work with their local Health Promotion and Improvement team to implement health and wellbeing initiatives which seek to reduce cancer risk, improve awareness of cancer symptoms and support timely help-seeking among target populations in the region.

Cancer Health Promotion and Improvement Practitioner Network (The Network)

In late 2023, the NCCP established the Cancer Health Promotion and Improvement Practitioner Network ('The Network'), with terms of reference agreed in 2024. The Network brings together all the regional SHPIO-CPs, HSE Health & Wellbeing and the NCCP Cancer Prevention/Early Diagnosis function to enhance collaborative working and support the SHPIO-CPs in their roles.

Evaluation

This evaluation reviews the operation and impact of the SHPIO-CPs and the Network, one year on, under the following headings: structure, processes, outputs, outcomes and survey feedback.

Summary of evaluation findings:

- Appropriate governance structures are in place.
- 77% of survey respondents nationally and 80% regionally agree that the objectives of the SHPIO-CPs roles have been achieved for 2024.
- There remains a key gap in the workforce as the HSE Dublin and Midlands post is unfilled.
- The NCCP and the Network actively support and facilitate SHPIO-CP work, develop shared resources, and facilitate collaboration.
- The NCCP provides support to SHPIO-CPs through resources, funding, education sessions and input into regional projects.
- The relationship between NCCP and HSE Health and Wellbeing has strengthened as a result of this ongoing collaboration.
- The NCCP and the SHPIO-CPs are developing regional cancer population profiles. These will inform SHPIO-CP work-plans as well as being of use to the wider Health and Wellbeing and Public Health workforce.
- SHPIO-CPs provide an effective focus on cancer prevention and early detection work regionally:
 - SHPIO-CPs are highly motivated and proactive, committed to upskilling, and collaborating closely
 - SHPIO-CPs have delivered education sessions with HSE staff (30), community organisations (118), and the general public (52)
 - SHPIO-CPs have established partnerships/ collaborations with a range of stakeholders e.g. Men's and Women's Sheds, Age Active Ireland, GAA Healthy Clubs, HSE Health and Wellbeing Priority programmes (total n=60) and embedding initiatives in organisations
 - There are opportunities to further collaboration with the wider HPIO workforce

Recommendations

The findings of this evaluation were presented at a Network meeting in November 2024, attended by the Director of the NCCP and the Assistant National Director of HSE Health & Wellbeing. A number of recommendations were agreed:

NCCP to seek funding for SHPIO-CP post for HSE Dublin and Midlands in the National Service Plan (NSP) 2025 as a priority.

NCCP will work to develop a Cancer Prevention & Early Diagnosis Programme and to review the need for additional resources.

NCCP will consider the development of a Cancer Prevention Plan or Framework.

NCCP to request HSE Health and Wellbeing to prioritise cancer prevention and early diagnosis, and provide dedicated time for regional health promotion staff to train in cancer prevention and early diagnosis and deliver initiatives.

Network will review frequency and focus of quarterly NCCP-SHPIO-Health Promotion and Improvement Manager meetings.

Network meetings to continue to be co-chaired by NCCP and HSE Health and Wellbeing, meeting face to face when possible.

NCCP to provide a summary update to HSE Health Promotion and Improvement Managers after Network meetings.

NCCP & SHPIO-CPs will collaborate to update the SHPIO-CP workplan template to be more user-friendly.

NCCP & SHPIO-CPs will continue to develop a cancer prevention awareness day calendar and population profiles, to inform 2025 workplans and identify specific needs in each region.

NCCP & SHPIO-CPs to develop a train the trainer/cancer prevention champion programme with SHPIO-CP to train regional staff.

NCCP to complete an annual evaluation of SHPIO-CP and the Network. This will include developing a standard evaluation template for SHPIO-CPs to update through the year.

NCCP and HSE Health and Wellbeing to consider future expansion of the SHPIO-CP posts.

Continue with the following

- NCCP education to SHPIO-CP
- SHPIO-CP building regional and national collaboration
- NCCP and SHPIO-CP deliver regional pilots and targeted initiatives
- SHPIO-CPs to develop regional stakeholder mapping

1 Introduction



1.1 Context

It is well documented that the proportion of cancer incidence attributable to modifiable lifestyle and environmental factors is estimated to be between 30% and 50%¹. Cancer prevention is highlighted as a cornerstone of The National Cancer Strategy 2017-2026 as it offers the most cost-effective long-term approach for cancer control². The strategy includes a number of recommendations in relation to cancer prevention, including the National Cancer Control Programme (NCCP) development of a cancer prevention function to work in conjunction with Healthy Ireland, HSE Health and Wellbeing and to lead in the development and implementation of programmes focused on cancer prevention. Reducing health inequalities and inequities is a key priority, as lifestyle risk factors generally follow social deprivation, gender and age patterns. In the development of the National Cancer Strategy, prevention awareness ranked third amongst priorities identified by the public².

Sláintecare is the HSE and Department of Health's overall strategy for reforming Ireland's health and social care system. One of the main aims of Sláintecare is for people to stay healthy in their own homes and communities for longer. The establishment of the HSE health regions will facilitate this, bringing care as close to home as possible and allowing health services to be planned around the needs of the population.

In line with the National Cancer Strategy, Sláintecare, and the newly established HSE health regions, the NCCP actively partnered with HSE Health and Wellbeing to fund six regional Senior Health Promotion & Improvement Officer – Cancer Prevention (SHPIO-CP) positions. The role of the SHPIO-CPs directly aligns with the aims of Sláintecare, the National Cancer Strategy, and HSE health regions through their cancer prevention and early diagnosis work in the community.

1.2 The role of the Senior Health Promotion & Improvement Officer – Cancer Prevention (SHPIO-CP)

The SHPIO-CP posts, funded by the NCCP, are located in the HSE Health and Wellbeing Division within the new HSE health regions (Figure 1 and Figure 2). In 2022, the first SHPIO-CP post was filled in Community Health Organisation 9 (CHO9). A further four positions were filled in 2023. The sixth position for HSE Dublin and Midlands has not yet been filled due to the HSE recruitment embargo. NCCP are seeking this post in the National Service Plan (NSP) 2025 as a priority.



Figure 1 HSE Health Regions

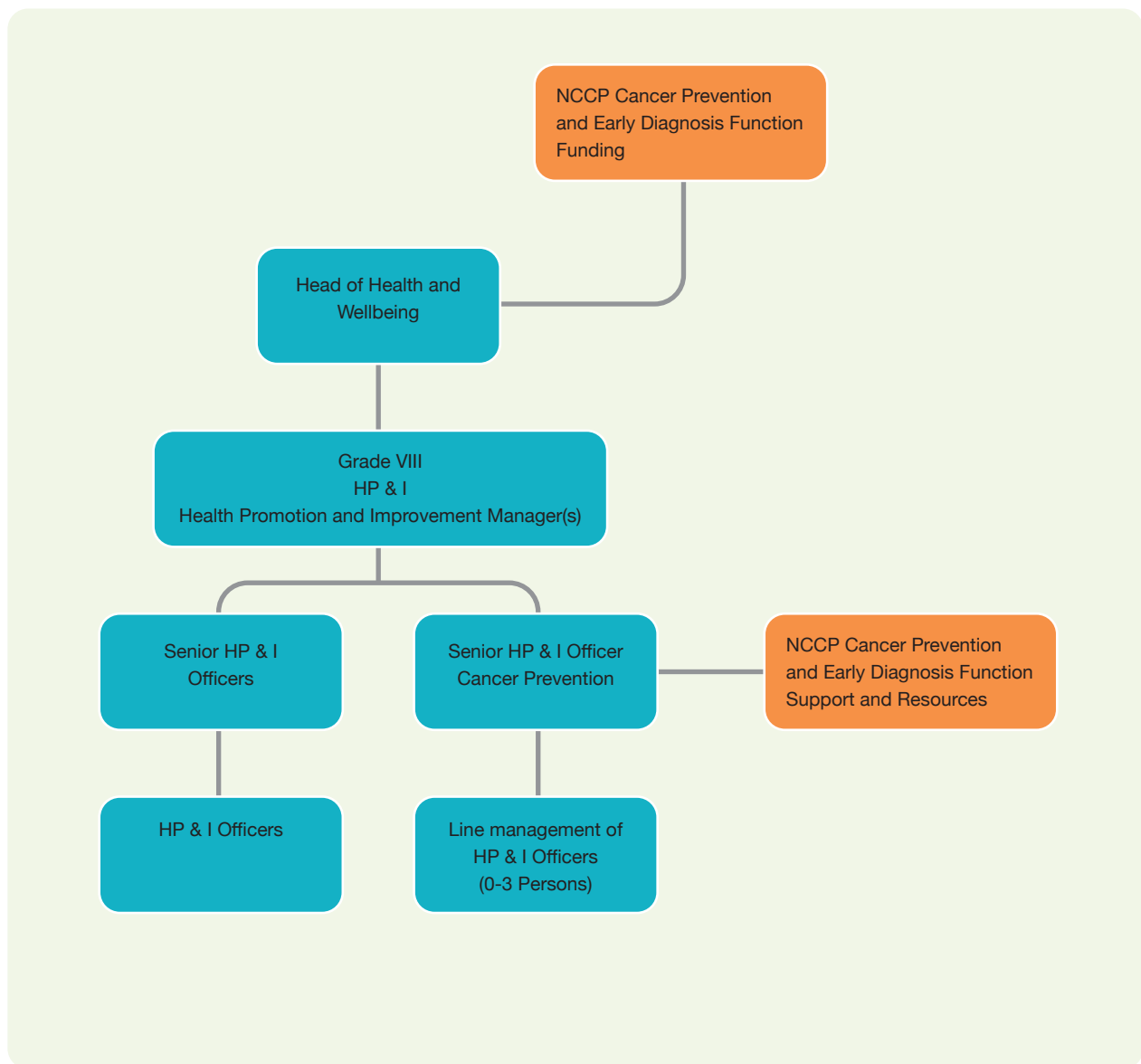


Figure 2 SHPIO-CP posts organogram

The SHPIO-CP's remit is to work, with their local Health Promotion and Improvement teams, to implement health and wellbeing initiatives which seek to reduce cancer risk, improve awareness of cancer symptoms and support timely help-seeking among target populations in their regions.

The SHPIO-CPs work closely with the NCCP Cancer Prevention and Early Diagnosis Functions. Their work plan is informed by, and contributes to the implementation of, the National Cancer Strategy recommendations in relation to cancer prevention and early

detection¹, the National Skin Cancer Prevention Plan³ and the NCCP Early Diagnosis of Symptomatic Cancer Plan⁴.

The NCCP, the local Health Promotion and Improvement Manager, and the Head of Service Health and Wellbeing agree upon the SHPIO-CP work plan based around four key areas.

These are:

- I. Planning and prioritisation
- II. Cancer risk reduction
- III. Skin cancer prevention
- IV. Early diagnosis of cancer

1.3 Cancer Health Promotion and Improvement Practitioner Network

In late 2023, the NCCP established the NCCP Cancer Health Promotion and Improvement Practitioner Network, with Terms of Reference agreed in 2024. The purpose of the Network is to bring together all six SHPIO-CPs, HSE Health and Wellbeing and NCCP Cancer Prevention/Early Diagnosis team members to work collaboratively towards reducing cancer risk and promoting early diagnosis of cancer. The Network is co-chaired by the NCCP and nominated Health Promotion and Improvement / Health Promotion and Improvement Manager.

The aim of the NCCP Cancer Health Promotion and Improvement Practitioner Network is to:

- Support delivery of the SHPIO-CP roles
- Provide a forum to discuss and develop new health improvement initiatives under development by NCCP
- Provide a forum to identify and prioritise initiatives and target population groups
- Share cancer prevention and early diagnosis project updates
- Facilitate information sharing between NCCP, National Programme Leads and other staff engaged in delivery of respective cancer prevention and early diagnosis projects
- Build connections with colleagues working on similar programmes across regions
- Report on evaluation of completed projects

The NCCP Cancer Health Promotion and Improvement Practitioner Network Terms of Reference can be found in Appendix I.

The SHPIO-CP posts and Network are well suited to addressing complex issues, such as cancer prevention and early diagnosis, promoting positive change in individuals, families and communities, and placing a strong emphasis on community building and empowerment.

1.4 Rationale for this Evaluation

Evaluation is the process of assessing the value of a given intervention, be that a project, a programme, or a policy.

An evaluation was conducted by the NCCP in 2023, once the SHPIO-CP in CHO9 had been in post for one year. The evaluation report helped to assess the effectiveness of the role and how it could be improved. Learnings were applied in 2023/ 2024, when a further four posts were filled.

Evaluation is an ongoing process. This second evaluation is being undertaken to assess the impact of the addition of further SHPIO-CP posts and the establishment of the NCCP Cancer Health Promotion and Improvement Practitioner Network. Learnings will be applied in 2025 as well as informing further expansion of the posts.

2 Evaluation Methodology



The SHPIO – CP role is an example of a complex community-based health promotion initiative: complex because of the number of components involved, the range of behaviours targeted, the number of groups, settings, or levels targeted, and the permitted level of flexibility of the interventions or their components.

Some of the interventions may not be implemented directly by the individual SHPIO – CP practitioner, but rather by existing groups with the support of, or driven by, the SHPIO-CP, making it difficult to quantify the role played by the SHPIO – CP. In addition, measuring long-term outcomes, such as changes in cancer incidence or stage shift, will be challenging as they may not be seen for many years to come. It's also difficult to demonstrate a cause and effect relationship between cancer prevention and early diagnosis initiatives and these outcomes.

A purely quantitative approach is rarely adequate for evaluation of complex interventions, meaning qualitative and mixed methods designs are necessary to answer questions beyond effectiveness. This evaluation takes these challenges into account.

This evaluation uses the Donabedian model⁵ as a baseline framework with the addition of a component to include feedback from those involved with the SHPIO-CPs and Network. The following components are included in the evaluation:

- a. Structure
- b. Process (activities)
- c. Outputs
- d. Outcomes (impact and value)
- e. Feedback

Data were collated from the following sources to inform the evaluation:

1. Review of meeting minutes by NCCP.
2. Review of activity conducted by SHPIO-CPs, collated by the SHPIO-CPs project records.
3. Review of activity conducted by SHPIO-CP and the Network, collated by NCCP Cancer Prevention and Early Diagnosis function logs.
4. Review of SHPIO-CP 2023 evaluation recommendations.
5. Data on extent of community activities.
6. Case studies.
7. Feedback from SHPIO-CPs, HSE Health Promotion and Improvement Managers and NCCP (please see Appendix II for copy of feedback form).

	Structure	Process	Outputs	Outcomes	Feedback
Review of meeting minutes by NCCP	●	●			
Review of activity conducted by SHPIO-CP, collated from the SHPIO-CPs project records	●	●	●	●	
Review of activity conducted by SHPIO-CP and Network, collated from NCCP Cancer Prevention and Early Diagnosis Function	●	●	●		
Review of SHPIO-CP 2023 evaluation recommendations			●		
Data on extent of community activities.			●	●	
Case studies				●	
Feedback from SHPIO-CP, HSE Health Promotion and Improvement Managers and NCCP					●

Figure 3 depicts the evaluation framework components and data collection method

3 Findings



3.1 Structure

Workforce

- The NCCP had secured funding for two pilot posts in 2022. Additional posts were secured by NCCP in 2023, to increase the total number to six SHPIO-CP posts, one in each of the new HSE health regions.

By end 2023, five of the six SHPIO-CPs were in post

HSE Health region	CHO	Post filled
HSE West and North West	CHO 1 and 2	2023
HSE Mid West	CHO 3	2023
HSE South West	CHO 4	2023
HSE Dublin and South East	CHO 5 and 6	2023
HSE Dublin and Midlands	CHO 7 and 8	Post not filled due to HSE recruitment embargo. NCCP are seeking this post in the National Service Plan (NSP) 2025 as a priority.
HSE Dublin and North East	CHO 9	2022

Governance

- SHPIO-CP posts are line managed by the HSE Health Promotion and Improvement Manager and sit within the HSE Health Promotion and Improvement team in the relevant CHO/health region.
- Each SHPIO-CP's 2024 work plan was drafted with input from the NCCP and overseen by the relevant HSE Health Promotion and Improvement Manager.
- Each SHPIO-CP and HSE Health Promotion and Improvement Manager meets with the NCCP Cancer Prevention and Early Diagnosis Functions team quarterly, to discuss SHPIO-CP projects and identify supports required.
- Some of the SHPIO-CP line manage health promotion and improvement officers, act for Health Promotion and Improvement Manager and other Senior Health Promotion and Improvement Staff during leave/absences and in some areas on the HP & I team- (e.g. Health Inequalities).

NCCP Support for SHPIO-CPs

- The two NCCP Cancer Prevention Officers are a point of contact daily for each SHPIO-CP for queries or to provide support for regional projects.
- Education sessions and educational packs have been provided to the SHPIO-CPs, tailored to their requirements
- Funding was provided to each of the SHPIO-CPs in post, and to HSE Dublin and Midlands, towards the delivery of cancer prevention and early diagnosis projects – totalling €30,000 in 2024.
- Resources were developed and provided to the SHPIO-CP to support delivery of projects, and to be shared with local health promotion and improvement teams for use.

NCCP Cancer Health Promotion and Improvement Practitioner Network

- The Network was established in September 2023
- The Network is co-chaired by NCCP and HSE Health and Wellbeing
- The Network met quarterly in 2024 and provided a forum to support SHPIO-CP, enable collaboration, build connections with relevant national programmes, review activity, improving efficiency and avoiding duplication of efforts.

3.2 Process (Activities)

SHPIO-CPs

- All five SHPIO-CPs completed all modules of the HSeLanD Reducing cancer risk (11 modules) and Early diagnosis of cancer (2 modules) e-learning programmes.
- SHPIO-CPs engaged in a range of continuous professional development activities to increase their knowledge and expertise in their posts – 23 different CPD sessions.
- SHPIO-CPs attended ten conferences each in 2024, including delivery of a presentation on their roles at the Annual Health Promotion Conference.
- Regional population profiles are under development. These profiles will provide SHPIO-CPs with baseline health information for the population in their regions, which will inform their cancer prevention and early diagnosis interventions.
- Stakeholder mapping is underway or completed by all five SHPIOs. Stakeholder maps will be living documents which will provide SHPIO-CPs with routes to the target populations in their communities.
- Each SHPIO-CP engaged with a large range of stakeholders to inform them of this new role, provide education and/or collaborate on initiatives. See Figure 4 for list.
- The SHPIO-CPs meet weekly since October 2023, to facilitate collaborative working and learning. Additional meetings are held as required, e.g. event planning meetings.

NCCP Support for SHPIO-CPs

- In each of the five regions, four quarterly meetings were held between November 2023 and November 2024 to review work plans, support needs and governance. Each of these meetings was attended by staff from the NCCP Cancer Prevention and Early Diagnosis Functions, the SHPIO-CP, their line manager (HSE Health Promotion and Improvement Manager) and occasionally the Head of Service for Health and Wellbeing.
- Updates on national activity were sent to SHPIO-CPs by the NCCP Cancer Prevention Officers. NCCP Cancer Prevention Officers attended the SHPIO-CP weekly meetings approximately once a month across 2024 to maximise information sharing and support.
- Bespoke education sessions were developed and delivered by NCCP staff to the SHPIOs, in response to specific requests and/or to support specific initiatives. The topics covered were breast cancer, lung cancer, bowel cancer, men's health, skin cancer and early diagnosis of cancer. Sessions were recorded so they could be viewed back by SHPIOs to further support their learning.

- NCCP has developed a regional cancer population profile template that includes regional demographics, cancer incidence and stage of diagnosis for the most common cancers. The template also includes, awareness of, and engagement in, modifiable cancer prevention behaviours with a particular focus on skin cancer prevention and awareness and behaviours in relation to potential early signs of cancer. NCCP delivered 6 education sessions to guide the SHPIO-CPs on populating each chapter and reviewed the profile chapters as the SHPIO-CPs populated them. The regional population profile will be completed in 2025 and used to inform 2025 workplans.
- The NCCP created and agreed templates for SHPIO-CPs to support their work, including an event feedback form, a learner feedback form, PowerPoint education templates, a protocol for resource development, and a decision support tool for requests from groups to engage with their work.
- Resource packs, banners, and social media content have been provided to SHPIO-CPs for cancer awareness days: lung cancer, breast cancer, bowel cancer, SunSmart, Reducing cancer risk e-learning programme.
- The NCCP has developed and funded monthly social media content promoting cancer risk reduction and early diagnosis of cancer. These resources have been provided to the SHPIO-CPs for their use. These include new and existing content and 21 new videos.

NCCP Cancer Health Promotion and Improvement Practitioner Network

- Terms of reference were agreed and signed off in 2024.
- Six Network meetings were held in person in NCCP offices (between November 2023 and November 2024), with an average attendance of >85% at each meeting.
- NCCP Survivorship, HSE National Screening Service and HSE Making Every Contact Count attended and presented at Network meetings and discussed opportunities for collaboration.

3.3 Outputs

SHPIO-CPs

- Delivered training sessions, provided written education resources or delivered awareness raising sessions on cancer prevention, skin cancer prevention and/or early diagnosis of cancer to:
 - **HSE staff** to incorporate into their work, to deliver as part of their own cancer prevention and early diagnosis initiatives, or for their own health and wellbeing. 30 face to face education sessions were delivered and 239 written resources disseminated
 - **community organisations** to incorporate into their work with their populations -118 face to face education sessions and 130 written resources disseminated
 - **the public** to increase awareness of, and engagement in, cancer prevention and early diagnosis - 52 face to face engagement sessions

Please see Figure 5 for examples of sessions delivered.

- SHPIO-CPs reached specific target groups who are at higher cancer risk, including the Traveller Community, people with disabilities, parents, the migrant community. See Figure 6 for details.
- Delivered a range of communications activities, including radio (16 slots), printed press (8 articles) and social media.
- Established partnerships/collaborations with stakeholders n=60. See Figure 4 for list.
- Involved in commencement of two research projects:
 - (i) Breast Cancer Awareness & Intellectual Disabilities/Public Patient Involvement IGNITE Studentship Cancer Peer Support Evaluation, UCC, Marie Keating Foundation
 - (ii) Public Health Department West/ North-West- research with lifeguards on UV radiation (summer 2024)
- Four pilot projects delivered or underway, including Traveller Health Project, Cancer Genetics & Prevention Centre, Integrated Care Pilot Project - Stop Smoking Services and Regional Cancer Centre University Hospital Waterford, Lung Cancer Early Diagnosis Pilot Project.

NCCP Support for SHPIO-CPs

- Recommendations from the 2023 Health Promotion and Improvement Officer Evaluation Report were implemented, including:

Recommendation from 2023 evaluation	Output in 2024
Agreement of the SHPIO-CP annual work plan between the HSE Health & Wellbeing line manager and the NCCP ensuring clarity and structure to the role.	Input from NCCP and HSE Health and Wellbeing on workplans, workplan activity reviewed at quarterly meetings.
SHPIO-CPs should work collaboratively on national resources and educational materials, as well as offering support to each other in their roles.	The Cancer Health Promotion and Improvement Practitioner Network and weekly meetings have facilitated collaboration and support.
Create a range of discrete packages of resources on different topics (e.g. lung cancer signs and symptoms), similar to the SunSmart package of resources. Resources should be accessible for those with lower literacy levels and should include resources which people can 'take-away'	Education packs on lung, breast, bowel and SunSmart were developed and shared. These included hard copy resources provided by NCCP, for example NALA approved reduce cancer risk A5 leaflet, roll up banners on prevention and early signs and symptoms of cancer.
Improved engagement between SHPIO-CPs and with HPIOs. Provide resources, line manage HPIOs, collaborate with senior HPIOs working in specific lifestyle areas to promote cancer prevention and early diagnosis messaging.	Some SHPIO-CP line manage HPIOs. SHPIO-CP have provided education and resources to HPIOs and attended some of their public outreach events working with them.
SHPIO-CP should actively seek feedback and undertake evaluation of all sessions they host/facilitate, both with the public and with other healthcare providers.	NCCP developed and provided a template feedback form. Need to identify a method to collate all feedback forms centrally.

- In collaboration with the SHPIO-CPs, the NCCP has developed and provided a number of resources for their use, including roll-up banners for the most common cancers in Ireland to use at community events, NALA-approved Reduce Your Cancer Risk leaflet, Cancer risk reduction e-learning promotional leaflet, Cancer Prevention Awareness Day calendar, breast health leaflet (piloted in CHO 9), cancer prevention notebooks, early diagnosis of cancer notebooks, cancer risk reduction water bottles, sunscreen dispenser boards, hand held signage props, social media videos, 'know the signs of cancer' posters
- Reported on SHPIO-CP and network activity for the annual National Cancer Strategy implementation report

NCCP Cancer Health Promotion and Improvement Practitioner Network

- The SHPIO-CP collaborated on organising a national webinar with support from the NCCP. The webinar, 'Integrating Cancer Prevention and Early Diagnosis into Health Promotion' provided examples of the SHPIO-CP work and how to integrate cancer prevention and early diagnosis into current health promotion areas of work. This took place on 20th November 2024.
- Collaborated on collating and reviewing the evaluation of the SHPIO-CP and Network.
- Contributed to the SunSmart campaign review.
- Published articles on the SHPIO-CO in the Irish Cancer Prevention Network quarterly ezine.
- Agreed to use the NCCP Cancer Prevention Awareness Day calendar to inform 2025 workplans.
- Collaborated on submitting feedback to consultations for the National Sexual Health Strategy and National Men's Health Action Plan.

Stakeholder Meetings	
Internally – HSE	Externally
National Meetings	National Meetings
✓ NCCP Quarterly meetings	✓ National Skin Cancer Implementation Group
✓ NCCP- Practitioners Network meetings	✓ Early Diagnosis Steering Group
✓ Project Managers - Tobacco, MECC, Sexual Health	✓ Irish Cancer Prevention Network
✓ Peer HP & I Cancer prevention weekly meetings	✓ Irish Cancer Society
✓ HSE Spark Fusion	✓ Marie Keating Foundation
✓ Cancer Peer support programme	✓ Sport Ireland and New Physical for Health Officers, Sports Partnership
✓ Public Health	✓ Cancer Peer Support Evaluation subgroup
✓ National Screening Service	✓ Association of Health Promotion Ireland
	✓ GAA Healthy Clubs and Cúl Camp coordinators

Figure 4 Range of stakeholder engagement meetings by SHPIO-CPs

Stakeholder Meetings	
Internally – HSE	Externally
Regional and Local Meetings	Regional and Local Meetings
<ul style="list-style-type: none"> ✓ Health Promotion Department Meetings ✓ Network and Hub Health Promotion Officers ✓ Seniors HP & I meetings ✓ Local County Team meetings ✓ Sláintecare Healthy Communities ✓ Priority programme leads -Tobacco Team, Education Team, Sexual Health Team, Staff Health & Wellbeing Team, MECC, HEAL ✓ Population Profile meetings ✓ Public Health Department ✓ Practice Nurse Professional Development Coordinator ✓ HSE HPV Vaccination Lead ✓ Regional Oncology Services – psycho-oncology, medical oncology ✓ HSE Community Health Network Team meeting ✓ ICPOP, Healthy Aging Services ✓ Child Health Development Officer ✓ Patient & Service User Engagement Co-ordinators ✓ Men's Health lead ✓ Other HSE divisions- older people services, mental health, disabilities, Health and Wellbeing, Primary care ✓ Regional cancer services ✓ National Screening service community Champions programme ✓ Menopause Resource development 	<ul style="list-style-type: none"> ✓ Traveller Health Unit Committee meetings & Traveller Primary Healthcare Projects ✓ Universities and colleges: e.g. School of Nursing, UCC Breast Cancer & ID Consultation group, Cancer Genetics & Prevention Group, SETU – Nursing, Mens Health, UCD – Stop Smoking Cancer Treatment ✓ MTU Connectors' Event ✓ PPI Ignite, UCC Public Patient Involvement Studentship ✓ Department of Public Health ✓ OECI Peer Review Panel Cancer Prevention & Early Diagnosis ✓ Social Prescribers and Community Connectors ✓ Sports Partnerships ✓ Schools – primary and post-primary ✓ County Councils – Staff H&W, HI Co-ordinators, Physical Activity for Health Officers Locally ✓ Construction Workers ✓ Men's and Women's Sheds ✓ Adult Literacy for Life ✓ Age Friendly Ireland ✓ Community Tobacco Stake Holders Group ✓ Positive Ageing groups - e.g. Alone ✓ Cancer Support Groups ✓ HSE Delivery Partners ✓ Youthreach ✓ Kerry Agribusiness ✓ Clare Marts
Other Regional/Local groups:	
<ul style="list-style-type: none"> ✓ Menopause events planning groups ✓ Breastfeeding Week planning groups 	

Training delivered to HSE Staff training groups – Oct'23-Oct'24 (Note multiple sessions were delivered on each of these topics)

- Lung Cancer Awareness Training (Stop Smoking Advisors - HP & I Officers)
- WCQ (We can Quit) Facilitators
- Traveller Health Workers Lung Cancer Awareness
- CHO staff: SunSmart and Skin Cancer Awareness Workshop
- CHO Staff Broadcasts on Cancer Prevention, Skin Cancer Prevention and Early Diagnosis
- CHO staff newsletter articles
- CHO staff Breast Cancer Prevention & Early Diagnosis workshop
- CHO staff General Cancer Prevention for Men including early diagnosis

Community Organisations training or education delivered to groups and topics (Note multiple sessions were delivered on each of these topics)

- County Councils: Cancer Prevention - General-Bowel, Lung, Prostate, men's
- Community Health workers - Traveller Community: Cancer Prevention - Bowel, Prostate, Breast, Lung
- Men's Sheds/Women's sheds: Cancer Prevention - Bowel, Prostate Breast
- Community Health workers- Coolock Slaintecare Healthy Communities: Cancer Prevention & Early Diagnosis - Bowel, Prostate, Breast, Lung & Skin
- Healthy Communities parenting course facilitators: SunSmart & Skin Cancer Awareness
- County Council Outdoor Staff workshops: SunSmart, Skin Cancer Prevention & Diagnosis
- County Council - Lifeguards' training: SunSmart, Skin Cancer Prevention & Diagnosis
- Sports Partnerships - Staff: SunSmart, Skin Cancer Prevention & Diagnosis
- Community Health workers - Traveller Community: SunSmart, Skin Cancer Prevention & Diagnosis, Sunbed use
- Primary School teachers Workshop: SunSmart, Skin Cancer Prevention & Diagnosis
- Summer schools CPD: SunSmart, Skin Cancer Prevention & Diagnosis
- Community Slaintecare Healthy Communities SunSmart Events
- GAA Cul Camp coaches: SunSmart, Skin Cancer Prevention & Diagnosis
- GAA Clubs: SunSmart
- Mental Health Services Residents & Staff: SunSmart
- Connections with Farming Community: SunSmart
- Community Health workers - Traveller Community: Early Diagnosis- Bowel, Prostate, Skin, Breast, Lung
- Men's Sheds/Women's Sheds: Early Diagnosis- Bowel, Prostate, Skin, Breast, Lung

Figure 5 Education, training or awareness raising activity examples

Public education or awareness raising initiatives activity (Note multiple sessions were delivered on each of these topics)

- National Breastfeeding Week Seminar: Importance of Breastfeeding - including reducing risk of Breast Cancer
- Positive Ageing: Seminar/presentations on Cancer Prevention & Early Diagnosis
- Disability Services
- Men's Health Group Lung (NEIC): General Cancer Prevention & Early Diagnosis presentation for Men
- Eve Mental Health Community Clubhouses: General Cancer Prevention & Early Diagnosis presentation
- Breastfeeding Group, Women's shed & Community Group in Ballymun: Breast Cancer Awareness talk including Prevention & Early Diagnosis
- Cancer Prevention Awareness Stands held across CHO for World Cancer Day
- Public awareness stands across CHO DNCC: SunSmart
- Clare Age Expo stand
- Men's Health Week stand in Galway city (in conjunction with community partners in city)

Figure 5 Education, training or awareness raising activity examples

Specific Target Groups Reached

• Traveller Community	• Community Groups
• Outdoor Workers	• Community Health Workers (from HSE delivery partners)
• Older adults	• Sports and Recreation Groups including players and mentors
• Children 0-12 years	• Parents
• Adolescents and Young Adults 13-24 years	• Farming Community
• Teachers	• Migrant community
• Men's groups	• HSE HP&I Staff
• Women's groups	• People with disabilities

Figure 6 Specific groups reached

3.4 Outcomes

SHPIO-CPs

- A number of initiatives delivered are now embedded in organisations, including County Council Initiatives, SunSmart Schools Initiative and Clare County Traveller Health Teams
- The Reducing Cancer Risk e-learning modules on HSeLanD remained stable on the number of completions. These had been launched in Q4 2022–Q2 2023. This sign of continued engagement in 2024 is a positive one and shows the value of ongoing promotion by the SHPIO-CPs in their regions.

	01/11/2022 – 01/11/2023	02/11/2023 – 01/11/2024
	Total completions	Total completions
Reducing cancer risk: Alcohol	256	166
Reducing cancer risk: Body Weight	133	131
Reducing cancer risk: Breastfeeding, hormonal contraceptives and HRT	131	124
Reducing cancer risk: Healthy Eating	152	154
Reducing cancer risk: Physical Activity	110	116
Reducing cancer risk: Population-Based Cancer Screening Programmes	106	110
Reducing cancer risk: Radon	93	110
Reducing cancer risk: Skin Protection	341	149
Reducing cancer risk: Tobacco	142	128
Reducing cancer risk: Vaccinations to Prevent Cancer	87	102
Reducing cancer risk: Workplace Carcinogens	107	112
Total	1,658	1,402

- A number of HSE Health Promotion and Improvement staff are integrating cancer prevention and early diagnosis within their everyday work.
- The national webinar, 'Integrating Cancer Prevention and Early Diagnosis into Health Promotion' on 20th November 2024 had 194 individuals registered.
- A range of projects have been delivered by the SHPIO-CP. Case studies for cancer prevention, early diagnosis and skin cancer prevention, outlined below, exemplify the impact and value of work undertaken.

3.4.1 Case Studies

Case Study Cancer Prevention: Traveller Community Health Workers Programme

Activity:

The project involved training the Traveller Community Health Workers (TCHW) in Galway and Roscommon around the five main cancers, and co design of resources and messaging in relation to each cancer. These cancers are Skin, Prostate, Breast, Bowel and Lung. The training covered how to reduce your risk of each cancer (prevention), what signs and symptoms to look out for (early diagnosis) and screening (Bowel and Breast).

The TCHWs then in turn disseminated these messages to the Traveller community on the ground in their outreach programmes. They did this face to face, through WhatsApp video messages and use of the developed co-designed literature.

Outcome:

- Pre and post training surveys with TCHWs showed an increase in knowledge of risk factors and signs and symptoms of each cancer and an increase in confidence in talking to other Travellers about each of the five cancers.
- Qualitative feedback has been gathered from TCHWs in terms of their outreach programmes, WhatsApp messaging and developed resources. (Analysis underway)
- Feedback from TCHWs on any increased use of Health services, e.g. Traveller community attending their GP with any concerns. (To be collated)
- The TCHWs had a potential reach of 6,000 travellers in their outreach programme- face to face and through WhatsApp video messaging and social media.

Outputs:

- 30 TCHWs took part in the training and development of resources and messaging across four Traveller projects in Galway and Roscommon.
- Five A5 back to back resources were developed- one for each cancer covered.

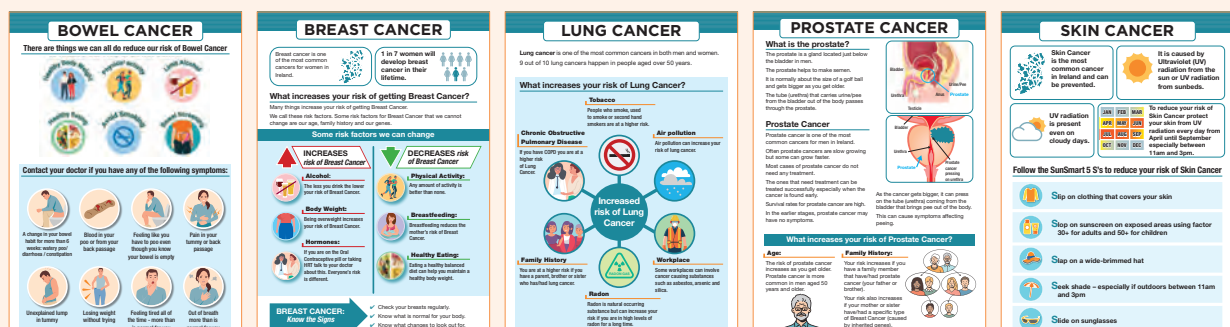


Figure 7 Example of resources developed

3.4.1 Case Studies

Case Study Early Diagnosis: Early Diagnosis of Lung Cancer Public Awareness Pilot Campaign North Dublin

Activity:

The HSE National Cancer Control Programme (NCCP), in conjunction with HSE Community Healthcare Organisation, Dublin North City & County (CHO DNCC) and HSE National Programmes and Campaigns, piloted an early diagnosis of lung cancer public awareness campaign in North Dublin.

The rate of lung cancer in North Dublin is high compared to other areas. North Dublin has significant areas of deprivation and an older population compared to the rest of the country. There was service readiness in North Dublin, as there has been a SHPIO-CP in North Dublin since 2022. There are two Lung Cancer Rapid Access Clinics in the region, in the Mater hospital and Beaumont hospital.

A working group was set up and activity included:

- Maintaining a project log
- Conducting pre-campaign survey
- Developing and delivering the campaign
- Conducting post campaign survey (results awaited)

Outputs:

- The Early Diagnosis of Lung Cancer Public Awareness Campaign was public facing, targeting the population at high risk of getting lung cancer (smokers and ex-smokers, aged 50 and over, living in socio-economically deprived areas).
- Patient focus groups informed the design of social media creatives and 'out of home' advertising/leaflets.
- There was a multi-pronged promotional approach to the campaign which included social media, print media, and other methods. The campaign messages were displayed on:
 - out of home advertisements such as bus shelters
 - advertisements on in-store pharmacy screens
 - press advertisements
 - social media messages
 - partner pack went out to over 820 relevant stakeholders across North Dublin.



Outcome:

Our key campaign messages where:

- a persistent cough that lasts longer than 3 weeks could be a sign of lung cancer.
- contact your GP/doctor without delay if you develop a cough that does not go away after 3 weeks.

Initial prompted symptom recognition data show that there was an increase in recognition of the 3 week cough as a sign of lung cancer. It also shows that there was an increase in recognition of all other symptoms of lung cancer with the exception of haemoptysis, coughing up blood which stayed the same.

Comparison of pre- and post-evaluation data also shows that when asked “how soon would you seek medical advice?” there was an increase in the number of people who would seek medical advice, if they had a 3 week cough.

When asked about “the barriers to contacting a doctor” pre campaign the commonest barrier was, “I would think it was a cold or a cough” (63%). This fell to 36% post campaign.

As a result of seeing the campaign advertisement:

- **84%** of participants would be more likely to advise someone with a cough for 3 weeks or more to visit or contact the GP.
- **84%** agree that if they had a cough for 3 weeks or more, they would be more likely to visit or contact their GP.
- **7%** of people who recall the campaign contacted a GP after seeing the advertisement.

The above are the initial findings post evaluation however a robust evaluation is underway to assess the performance of the pilot campaign and the impact of the campaign in North Dublin, and will include evaluation of all aspects of the campaign.

3.4.1 Case Studies

Case Study Skin Cancer Prevention: Castleisland Community College, Co Kerry 'Developing a SunSmart School'

Background:

Castleisland Community College Transition Year students participated in the Marie Keating Foundation Schools Cancer Awareness Programme (funded by the NCCP). This inspired an interest in skin cancer and an idea to apply for the Young Social Innovators (YSI) Programme for 2024. The students contacted the NCCP requesting support with the project. An initial online meeting with the school and the co-ordinating teacher was arranged with the SHPIO-CP in the region. A collaboration with the Health Promotion Department began. The students conducted their own background research and decided to name the group 'The Sun Smarties'. A proposal was submitted to YSI and they were shortlisted to the next stage.

The school designed a four-step process that would make their school Ireland's first SunSmart School. Their work allows other schools the opportunity to also implement this model and become SunSmart Schools.

Outputs:

- ✓ **SunSmart Charter** – through surveys of students, parents and staff, the students assessed skin cancer and SunSmart awareness among the whole school community. Based on the findings, a SunSmart Charter was developed for the school and is displayed in the school.
- ✓ **Awareness Campaign** – The students conducted a campaign to increase awareness of skin cancer, the SunSmart 5S's, and to implement their SunSmart Charter through:
 - ✓ Availability of a sunscreen dispenser for students and staff
 - ✓ SunSmart lesson plans. Lessons and activities as part of SPHE
 - ✓ Use of the Met Eireann app to monitor the UV Index
 - ✓ Displaying the SunSmart 5 S's in school
 - ✓ Promotion of participation in the NCCP SunSmart awareness webinar
- **Communication with Parents** - All parents were provided with access to the SunSmart Charter. They were informed about sun safety by sending them a link to access the HSE Health Promotion 'Healthy Habits for Parents' and resources on www.hse.ie/sunsmart
- **Publicised the awareness campaign:** The development of the SunSmart school was promoted in local media, i.e. school newsletter, website, local papers and social media.

The students connected with local pharmacists to help promote awareness around skin cancer in the community.

Outcome:

In May, the students were crowned winners of the Young Social Innovators 2024 for their skin cancer awareness project called 'Sun Smarties'.

The next stage is called 'Elevate' in which they hope to continue the good work and work with the NCCP in the development of a SunSmart toolbox that other schools can use to become accredited as a SunSmart School.

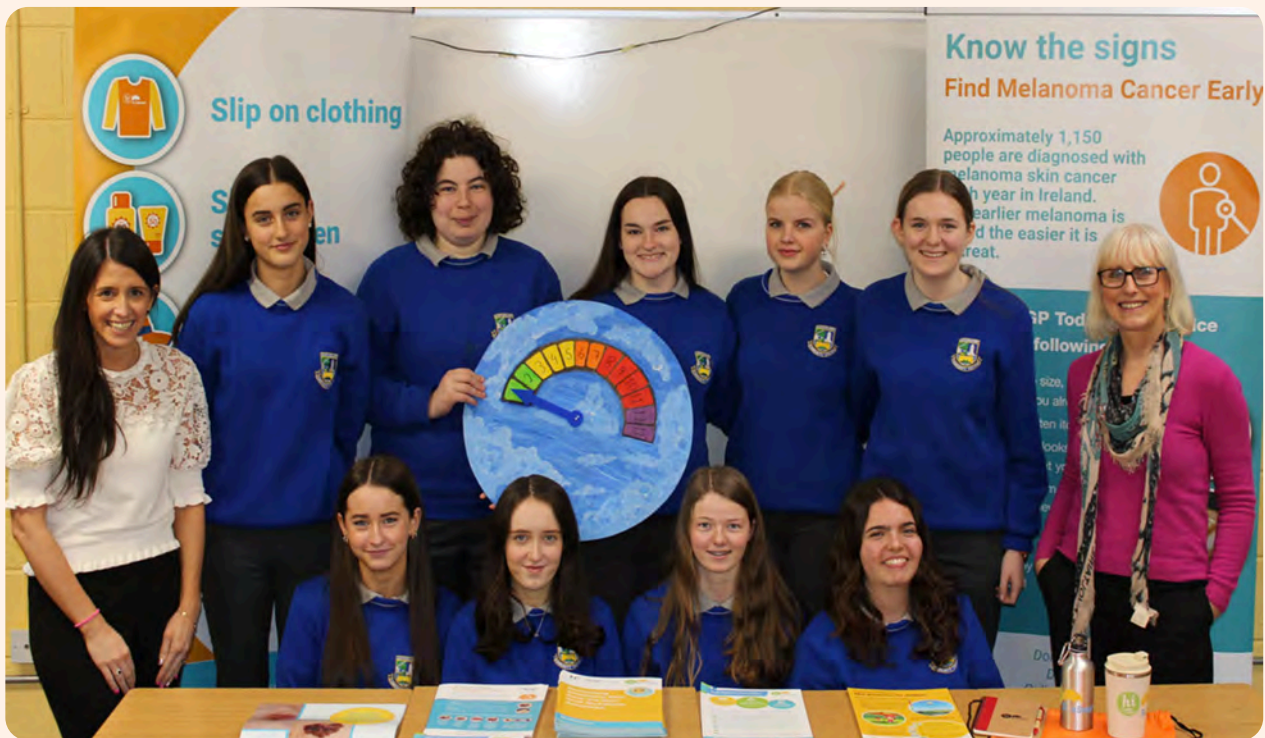


Figure 9 SunSmarties

3.5 Feedback

Feedback on the SHPIO-CP roles and network at a national and regional level was received from SHPIO-CPs, HSE Health Promotion and Improvement Managers and NCCP (please see Appendix II for copy of feedback form and Appendix III for feedback). Feedback is grouped into common themes in Table 1 . H&WB manager n = 6, NCCP staff = 4, SHPIO = 5, Total N = 15

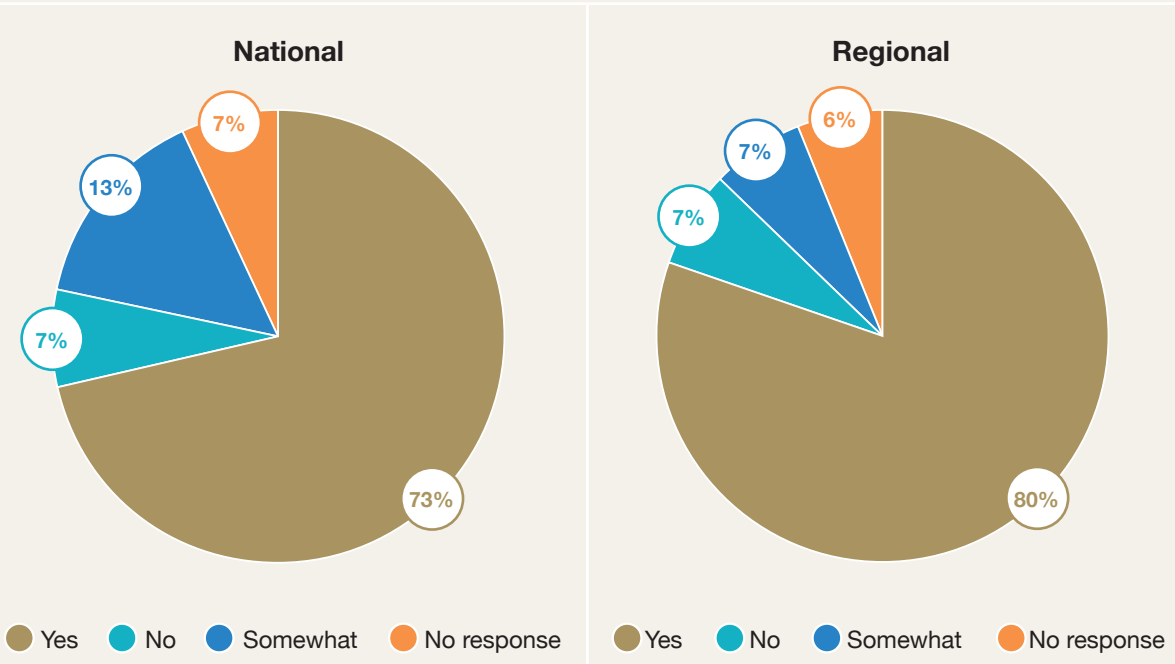
Table 1 Feedback common themes

Were objectives achieved nationally? Reasons why/why not?	Were objectives achieved regionally? Reasons why/why not?
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Objectives: The role of the SHPIO-CP is to implement health and wellbeing initiatives, which seek to reduce cancer risk, improve awareness of cancer symptoms and support timely help-seeking among target populations in the region, working with their local Health Promotion and Improvement team.

This is supported nationally by the HSE’s National Cancer Control Programme (NCCP) and by the NCCP Cancer Health Promotion and Improvement Practitioner Network. The purpose of the Network is to:

- Support delivery of the SHPIO-CP roles
- Provide a forum to discuss new health improvement initiatives under development by NCCP and prioritise focus areas
- Share cancer prevention and early diagnosis project updates
- Facilitate information sharing between NCCP, National Programme Leads and other staff engaged in delivery of respective cancer prevention and early diagnosis projects
- Build connections with colleagues working on similar programmes across regions
- Report on evaluation of completed projects



**Were objectives achieved nationally?
Reasons why/why not?**

Reasons

- Larger reach for national projects and campaigns due to higher engagement at regional level and collaboration between regional and national stakeholders
- Improved collaboration between NCCP and HSE Health and Wellbeing
- Increased understanding at national level for regional population needs to inform tailored messaging and resources
- Collaboration and sharing of resources to increase impact of initiatives
- SHPIO-CP role and the Network established

**Were objectives achieved regionally?
Reasons why/why not?**

Reasons

- One region has no SHPIO-CP meaning no resource to develop cancer prevention and early detection projects exists in this region
- Projects developed specific to regional needs
- Cancer prevention is not a priority programme in Health Promotion or included as part of Chronic Disease Management programme therefore impacting regional staff engagement in projects
- Workplans with specific objectives informed initiatives
- SHPIO-CP engaged with opportunistic initiatives
- Meaningful engagement between NCCP and SHPIO-CP and H&WB managers
- Some minor objectives were not met, due in part to SHPIO-CP capacity

What worked well nationally?	What worked well regionally?
<ul style="list-style-type: none"> • Support from NCCP to SHPIO-CP (education sessions, resource packs) • Collaboration between NCCP and HSE Health and Wellbeing (quarterly meetings) • Promoting initiatives at national and regional level increased engagement • Collaboration between SHPIO-CPs • Development of national resources with input from SHPIO-CPs • Network co-chaired by NCCP and HSE Health and Wellbeing • Face to face Network meetings • Development of population profile to inform future work • SHPIO-CP part of regional HSE Health and Wellbeing teams • Governance structures were established at the outset, which assisted with initial implementation • Annual workplan • Collaborating on national stakeholder consultations • Attendance at other national groups and collaboration with other national programmes 	<ul style="list-style-type: none"> • SHPIO-CP provides a focus on cancer prevention and early detection regionally • Engagement with local health promotion and improvement officers, collaboration and increasing their confidence to cover cancer in their work • Implementation of regional pilots to inform future national work • Higher engagement with specific target populations • Greater reach into regional communities • Sharing of research and evidence based initiatives to inform local work • Engagement with some health promotion officers to include cancer messaging in existing programmes

Suggestions to improve nationally	Suggestions to improve regionally
<ul style="list-style-type: none"> • Develop a Cancer Prevention and Early Diagnosis Programme to co-ordinate and oversee ongoing work • Secure SHPIO-CP post for HSE Dublin and Midlands • Strengthen collaboration with other HSE Health and Wellbeing Programmes • Continue to develop national and regional partnerships • Development of a National Cancer Prevention Plan or framework • Clarity on reporting / annual evaluation • Review need and agenda for quarterly meetings between NCCP and HSE Health Promotion and Improvement Managers • Continue to build and strengthen collaboration between NCCP and SHPIO-CPs • HSE Health Promotion and Improvement Managers to be updated on network activity • Develop training for HSE Health Promotion teams 	<ul style="list-style-type: none"> • Build capacity to train HSE staff and community organisation staff to deliver cancer prevention and early detection initiatives • It is challenging for one staff member to cover an entire health region due to the large geographical areas and populations involved. Therefore there is a need to increase number of SHPIO-CPs in each region. • Improve workplan template • Continue regional pilots, create implementation template for other regions from the pilot • HSE Health Promotion and Improvement Managers to provide protected time for health promotion staff to complete training in cancer prevention and early detection • Embed evaluation into initiatives

4 Recommendations

The evaluation of the role of the SHPIO-CP was presented at a Network meeting in November 2024. This meeting was attended by the Director of the NCCP and the Assistant National Director of HSE Health & Wellbeing. Following this meeting, a number of recommendations were agreed:



4. Recommendations

NCCP to seek funding for SHPIO-CP post for HSE Dublin and Midlands in the National Service Plan (NSP) 2025 as a priority.

NCCP will work to develop a Cancer Prevention & Early Diagnosis Programme and to review the need for additional resources.

NCCP will consider the development of a Cancer Prevention Plan or Framework.

NCCP to request HSE Health and Wellbeing to prioritise cancer prevention and early diagnosis, and provide dedicated time for regional health promotion staff to train in cancer prevention and early diagnosis and deliver initiatives.

Network will review frequency and focus of quarterly NCCP-SHPIO-Health Promotion and Improvement Manager meetings.

Network meetings to continue to be co-chaired by NCCP and HSE Health and Wellbeing, meeting face to face when possible.

NCCP to provide a summary update to HSE Health Promotion and Improvement Managers after Network meetings.

NCCP & SHPIO-CPs will collaborate to update the SHPIO-CP workplan template to be more user-friendly.

NCCP & SHPIO-CPs will continue to develop a cancer prevention awareness day calendar and population profiles, to inform 2025 workplans and identify specific needs in each region.

NCCP & SHPIO-CPs to develop a train the trainer/cancer prevention champion programme with SHPIO-CP to train regional staff.

NCCP to complete an annual evaluation of SHPIO-CP and the Network. This will include developing a standard evaluation template for SHPIO-CPs to update through the year.

NCCP and HSE Health and Wellbeing to consider future expansion of the SHPIO-CP posts.

Continue with the following

- NCCP education to SHPIO-CP
- SHPIO-CP building regional and national collaboration
- NCCP and SHPIO-CP deliver regional pilots and targeted initiatives
- SHPIO-CPs to develop regional stakeholder mapping

Appendix

Appendix I – NCCP Cancer Health Promotion and Improvement Practitioner Network Terms of Reference

NCCP Cancer Health Promotion and Improvement Practitioner Network Terms of Reference

Context

The HSE's National Cancer Control Programme (NCCP) has an integral role to play in the implementation of the recommendations in the National Cancer Strategy (NCS) 2017-2026⁶, which includes a particular focus on prevention and early diagnosis of cancer. In line with the vision of Sláintecare, NCCP has actively partnered with Community Healthcare Organisations to fund six Senior Health Promotion & Improvement Officer – Cancer Prevention positions. These positions are located in the HSE Health and Wellbeing Division within the relevant Community Healthcare Organisation (or future Regional Health Area). The posts are funded by, and delivered in conjunction with, the NCCP. The post holders' work is to implement health and wellbeing initiatives, which seek to reduce cancer risk, improve awareness of cancer symptoms and support timely help-seeking among target populations in the region.

Purpose

The purpose of the **NCCP Cancer Health Promotion and Improvement Practitioner Network** is to:

- Support delivery of the Senior Health Promotion & Improvement Officer - Cancer Prevention roles
- Provide a forum to discuss new health improvement initiatives under development by NCCP and prioritise focus areas
- Share cancer prevention and early diagnosis project updates
- Facilitate information sharing between NCCP, National Programme Leads and other staff engaged in delivery of respective cancer prevention and early diagnosis projects
- Build connections with colleagues working on similar programmes across regions
- Report on evaluation of completed projects

The Network aims to contribute to the delivery of the following National Cancer Strategy 2017-2026 recommendations (Figure 1).

Recommendation 1

The Department of Health will ensure policies under the Healthy Ireland framework are implemented in full and that the opportunities to address cancer prevention measures under those policies are maximised. In particular, measures at further reducing smoking levels will be pursued.

Recommendation 2

The NCCP will develop a cancer prevention function, working in conjunction with the broader Healthy Ireland initiative, and will lead in relation to the development and implementation of policies and programmes focused on cancer prevention.

Recommendation 3

The Department of Health will develop a national skin cancer prevention plan and oversee its implementation as a priority. It will prioritise children, outdoor workers, sunbed users and those who pursue outdoor leisure activities.

Recommendation 7

The NCCP and the HSE Health & Wellbeing Directorate, in partnership with the voluntary sector, will develop a rolling programme of targeted multi-media based public awareness and education campaigns, aimed at the early detection of specific cancers and with particular focus on at-risk populations.

Figure 1: Recommendations of the National Cancer Strategy 2017-2026

Membership

- Core network members:
 - Senior Health Promotion & Improvement Officers - Cancer Prevention
 - NCCP Cancer Prevention and Early Detection team.
 - Health Promotion and Improvement / Health and Wellbeing (HP&I/H&W) Manager
- Additional invitees:
 - Health and Wellbeing priority programmes (Alcohol Programme; Health Eating and Active Living Programme; Healthy Childhood Programme; Positive Ageing Programme and Tobacco Free Ireland Programme).
 - Members of the Irish Cancer Prevention Network.
 - NCCP Survivorship Programme.
 - National Screening Service.
 - Consultants in Public Health Medicine – Health Improvement.
 - HSE Social Inclusion.
 - Healthy Ireland.

These will all be invited to attend annually to keep abreast of the cancer prevention agenda under each programme and identify areas for collaboration. Additional input may also be sought from within the NCCP on an ad hoc basis.

Nominated members to attend – an alternate to be identified so that in the event of the representative being unavailable there is consistency of their representation through an agreed deputy.

Governance

The network is co-chaired by the National Cancer Control Programme (NCCP) and nominated HP&I/H&W Manager.

The work of the network will be reported to the Department of Health by the NCCP through the standard reporting process for implementation of the National Cancer Strategy 2017-2026.

Meeting arrangements

- Meetings will be co-chaired by the National Cancer Control Programme (NCCP) and nominated HP&I/H&W Manager.
- Meetings will be held quarterly at NCCP offices (dates to be agreed by network).
- The agenda will be issued in advance of meetings.
- Documentation and meeting notes will be circulated in a timely manner post meetings.
- Administration support for meetings will be provided by NCCP.

In addition to quarterly meetings, the network will plan and deliver an annual symposium providing professional development and showcasing the work of the network.

Roles and responsibilities of members

- Declare any conflicts of interest in full.
- Support the implementation of the National Cancer Strategy 2017-2026.
- Support national programmes with a unified voice.
- Actively contribute to design, delivery and evaluation of cancer prevention and early detection initiatives.
- Identify and build relationships with stakeholders for collaboration in own region.
- Identify and build relationships with target population stakeholders in own region.
- Notify the co-Chairs in advance if unable to attend quarterly network meetings, and nominate an alternate.
- The network may invite relevant stakeholders to provide input at quarterly meetings on an ad hoc basis, with prior approval by the co-Chairs.

Review

The ToR will be reviewed after 1 year by core network members.

Appendix II – Evaluation Form

Senior Health Promotion and Improvement Officer – Cancer Prevention (SHPIO-CPs) Evaluation Form

Objectives of SHPIO-CP role and the Practitioner Network

The role of the SHPIO-CP is to implement health and wellbeing initiatives, which seek to reduce cancer risk, improve awareness of cancer symptoms and support timely help-seeking among target populations in the region, working with their local Health Promotion and Improvement team.

This is supported nationally by the HSE's National Cancer Control Programme (NCCP) and by the NCCP Cancer Health Promotion and Improvement Practitioner Network. The purpose of the Network is to:

- Support delivery of the Senior Health Promotion & Improvement Officer - Cancer Prevention roles
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- Build connections with colleagues working on similar programmes across regions
- Report on evaluation of completed projects

The purpose of this feedback form is to understand the impact of the SHPIO-CP and how we can improve, nationally and regionally. When answering the feedback questions, please reflect on the role locally, how things are organised across regions and how the roles are supported nationally.

Please return by email to prevention@cancercontrol.ie by **MONDAY 11th NOVEMBER**

Feedback questions on next page

1. Which category do you fall into (please delete as appropriate):

Health Promotion and Improvement Manager/ SHPIO-CP/ Other Health Promotion & Improvement staff/

NCCP staff/ Other – please specify _____

2. Were objectives met regionally and nationally?

Regionally: Yes /No

Nationally: Yes /No

Reasons:

3. What worked well, regionally and nationally?

4. Your suggestions for improvement, regionally and nationally:

Appendix III – Feedback received from SHPIOs-CP, HSE Health Promotion and Improvement Managers and NCCP

H&WB manager n = 6, NCCP staff = 4, SHPIO = 5, Total N = 15

Were objectives achieved nationally? Reasons why/why not?	Were objectives achieved regionally? Reasons why/why not?
<p>Yes = 11 (73%)</p> <p>No = 1 (7%)</p> <p>Somewhat = 2 (13%)</p> <p>No answer = 1 (7%)</p> <p>Reasons</p> <p>Higher engagement on SunSmart campaign as able to push from regional and national level. Some messaging reaches further if has a local spin on the messaging</p> <p>Cross linkages of key stakeholders at regional and national level has allowed for more engagement</p> <p>Understanding what is required and feedback on the ground in HSE regions from staff and local communities has allowed for better messaging to be developed and better avenues for reaching people</p> <p>Understanding how H&W works regionally has allowed NCCP at national level to engage with Making every contact count, sexual wellbeing strategy, men's health strategy, HSE Staff Health and Wellbeing etc</p> <p>Collaboration on resources and merchandise has helped to understand what local communities need and best approach for engagement and messaging</p>	<p>Yes = 12 (80%)</p> <p>No = 1 (7%)</p> <p>Somewhat = 1 (%)</p> <p>No answer = 1 (%)</p> <p>Reasons</p> <p>Only region without a Cancer Prevention Post and we would really appreciate anything you can do to highlight and address this inequity.</p> <p>Good groundwork by SHPIO in role.</p> <p>Prioritising work (understanding limits regarding the region)</p> <p>SHPIOs have tried to develop initiatives specific to their local areas. This means that initiatives are more likely to be relevant.</p> <p>The SHPIOs have been very strategic in identifying clear objectives-it's easier to achieve objectives if they're clear and well-defined (SMART).</p> <p>Yes most objectives were met especially if the objective was under the control of the SHPIO-CP. Where objectives may not have been met, it may be due to the objective dependent on external stakeholder's time or interest in achieving the objective.</p>

Were objectives achieved nationally? Reasons why/why not?	Were objectives achieved regionally? Reasons why/why not?
<p>SHPIOs collaborate well together, I believe this overall collaboration will increase individual impact.</p> <p>As Public Health Lead for Early Detection in NCCP, key objectives were to support delivery of evidence-based, data driven early detection/awareness-raising initiatives by SHPIOs. In North Dublin, pilot lung cancer awareness campaign was delivered with support of SHPIO – this was a priority project for the Early Detection Programme, and delivery was supported by SHPIO – her input was integral, she facilitated access to a vast local/regional network of stakeholders.</p> <p>Nationally there has also been good engagement with all members of the network, building connections and sharing resources and initiatives. The Sn HP&IO cancer prevention provides unique opportunities for national work to be realised on the ground and to provide two-way feedback and support on new initiatives</p> <p>The goals set were realistic and allowed the opportunity for the establishment of the programme</p> <p>Staff member in post since Aug 2022 and has been progressing actions since commencing in role. Very committed, dedicated post</p> <p>X is linked into the planning process with the other Snr. HP&IOs in the team.</p>	<p>The core objective was to support the delivery the role of the SHP&IO Cancer Prevention and embed this into the teams regionally. This can be seen in the breadth and depth of work and initiatives across the region of Dublin and South East since September 2023 to present day within the resources provided in Dublin and South East. Within the geographical spread there has been meaningful engagement from both HP&I teams with the new post of cancer prevention and cancer prevention and early diagnosis initiatives and sharing of information from NCCP with local teams.</p> <p>Some Plans that were developed at the beginning of the CP role did not get delivered on, other opportunistic plans presented during the year.</p> <p>Lack of focus on CP as a priority programme in Health Promotion or as part of chronic disease Programme</p> <p>The goals set were realistic and allowed the opportunity for the establishment of the programme</p> <p>Cancer prevention is not looked upon as a priority programme in health promotion and therefore there is a lack of focus.</p> <p>X reports directly to me and we plan & review progress at monthly 1:1 meetings.</p>

What worked well nationally?	What worked well regionally?
<p>The SHPI gets a lot of useful and practical support from NCCP and the engagement with local management is appreciated and useful</p> <p>Having a clear plan of work the year and targeted campaigns helps</p> <p>Clear support from the national cancer colleagues</p> <p>Pushing initiatives at a national and regional level has helped to get the key messages out such as through schools for art competition or lesson plans.</p> <p>Collaboration amongst SHPIO's was highly effective, as was collaboration between NCCP and SHPIOs.</p> <p>Focus on awareness months/days.</p> <p>Collaboration with NSS.</p> <p>Development of resources, as guided by SHPIOs themselves.</p> <p>Collaboration between NCCP and HSE H&W.</p> <p>The fact that the SHPIO posts sit in the HSE H&W Division works well – they have access to many stakeholders and target groups/ high-risk cohorts for cancer through established services/ networks.</p> <p>Strong NCCP input and collaboration with SHPIOs on work planning.</p> <p>Guidance and support from Triona, Maria and Aine</p> <p>Training from Una and public health doctors regarding specific cancers</p> <p>Partner pack development in relation to cancers</p> <p>'Practioners network' meetings face to face</p>	<p>Having a SHPI officer for cancer prevention has most certainly brought the topic area to the fore of our minds, it's a subject area that the community are curious about and happy to actively engage. The literature is very clear from a Health Literacy perspective.</p> <p>Local cancer champion. Engagement with existing priority work to broaden the scope of work to include cancer prev.</p> <p>Higher engagement regionally via the SunSmart campaign due to SHP&IO – CP being able to engage with media locally, more pick up locally with regional spin on it</p> <p>Key pilots undertaken regionally such as SunSmart School in Castleisland which is difficult to conduct at a national level. Learnings from pilot can help inform other regions and approach at national level.</p> <p>More engagement with at risk groups conducted at regional level which in turn has allowed for engagement at national level with key organisations such as county councils, lifeguards, Traveller community etc</p> <p>Collaboration with local health workers e.g. Quit services is a good idea, minimises duplication of effort.</p> <p>SHPIOs are very engaged and enthusiastic – this enthusiasm and willingness to engage has contributed to the success of the network.</p> <p>Regionally spending time to engage with HP&I teams and gain interest and foster support for this subject matter face to face proved very valuable. Embedding cancer prevention into work of colleagues by role playing, turning up to events and delivering key messages alongside colleagues gave confidence to other staff to engage in the topic more easily.</p>

What worked well nationally?	What worked well regionally?
<p>Development of population profiles and guidance from Dr. Breeda in relation to this.</p> <p>Nationally having that good relationship form all our face to face meeting build a sense of team and colleagues which really supported the development of this new post.</p> <p>Weekly team meetings provides support, sharing information and resources as well as collaborative working</p> <p>Cancer Prevention Practitioners Network meetings</p> <p>Attendance at other national groups and events is useful and provides opportunities for further work</p> <p>Opportunity for SHPO-CP to update and share ongoing work from each region and look for shared opportunities for funding, advocacy and contribution to strategy and policy development</p> <p>The network meeting face to face quarterly strengthened working relationships, sharing work being undertaken by the NCCP and discussion of learnings.</p> <p>The SHPIO-CP feedback in relation to what supports regionally work helped inform the NCCP on required resources and used healthpromotion.ie for storing these.</p> <p>There seems to be an open avenue of communication between the NCCP and the SHPIO-CPs, enhancing work both nationally and regionally.</p>	<p>Well established network in my local region enabled me to reach many stakeholders in the health service, education and community settings</p> <p>Linking with HP teams to collaborate on service delivery and integrate CP messages and information</p> <p>Tapping into current research and development in Cancer in HSE and UCC</p> <p>The delivery of the pilot lung cancer awareness campaign was enhanced and made stronger due to the SHPIO-CP in this region, without this post the stakeholder engagement would not have been as strong.</p> <p>Greater reach into the community to deliver cancer prevention and early detection initiatives</p> <p>There has been great progress made at this stage regarding pilot programmes which show promised for future expansion and upscaling</p> <p>Staff member is very committed and motivated to progress this work and has a lot of experience working across HSE and with groups, communities and organisations. Very strong HR focus and working with people where they are not.</p> <p>Linking with health promotion officers to include Cancer Prevention messages in existing programmes were relevant.</p>

What worked well nationally?	What worked well regionally?
<p>Online education sessions to increase knowledge, developed by relevant expertise.</p> <p>Collaborating on national stakeholder consultations</p> <p>Clear Communication between NCCP and the CHO (with respect to governance and in relation to funding)</p> <p>Governance structures were established at the outset, which assisted with initial implementation</p> <ul style="list-style-type: none"> • There is a National Health Promotion Manager lead (national group) • Quarterly review meetings • Peer group for SHP&IOs <p>The Network is a great forum for sharing information and providing updates.</p> <p>Weekly team meetings allows us to support each other, work collaboratively and share resources and information.</p> <p>Attendance at other national groups and collaboration with other national programmes</p> <p>Receiving National Literacy funding</p> <p>Linking closely with fellow Cancer Prevention HP Officers</p> <p>Assistance from the NCCP officer re Podcasts, webinars etc.</p>	<p>Working on the Sun Smart Campaign with the local Lifeguards, on-site construction workers.</p> <p>Training Traveller peer support workers on cancer prevention & co-production of communication materials</p>

Figure 12: Sid the Seagull SunSmart Campaign Australia

Suggestions to improve nationally	Suggestions to improve regionally
<p>Having the 6th CPO filled would be important for 2025 as there is a gap in having a focus on cancer prevention and early diagnosis work in the region.</p> <p>Is there any creative options given that our new Region is challenged re wte ceiling and we are unlikely to be able to recruit into HP&I/ HWB team due to wte ceiling?</p> <p>There is a clear inequity in how some areas of the country have this role and some do not. A population needs based approach would ensure a fair spread and ensure further posts are resourced.</p> <p>Ensuring other Health and Wellbeing Programmes within the HSE are aware of these posts and the importance of them for collaborating with is an important consideration going forward as they should be prioritised in line with other programmes within each region. Strengthening existing partnerships and continuing to develop new partnerships with key stakeholders at national and regional level should be a big focus for 2025 as it is only by working with others can CPO's develop initiatives specific to their local areas.</p>	<p>Given we just have once staff member we need to</p> <ul style="list-style-type: none"> – target larger events, – targeted population group campaigns and education (Consider a population health approach) – Build capacity of industry workplaces to provide most up to date information on cancer prevention <p>It is a challenge for one staff member to meet the needs across a region so ideally a SHPIO would not need to cover the full region and that there would be multiple posts (or HPIOs resourced for his work to work under direction of regional senior HPIO). What has worked for us in *** is that we have identified a cancer Prev HPIO Champion. While this is working in practice I am cautious to recommend this and this as this is a resource that is not dedicated to cancer and so other areas may not prioritise this post in this way</p> <p>Cross collaboration and engagement is key.</p> <p>Population profiles will help CPO's to focus work plans better in 2025</p> <p>Having each of the CPO's work on a range of initiatives helps to gain learning for each CPO and to then take on in their own region rather than all working on the same thing at the same time</p>

Suggestions to improve nationally	Suggestions to improve regionally
<p>Consider development of a three year ‘Cancer Prevention Plan’ akin to the Early Diagnosis of Cancer Plan’ to include an over-arching national plan with local regional plans. To consider:</p> <ul style="list-style-type: none"> - focus on equity. Each SHPIO could identify under-served groups in their regions - major modifiable risk factors e.g. target smoking, sun protection. - age groups e.g. develop a strategy to target younger age groups for prevention messaging - responsiveness e.g. identifying areas/ groups with low uptake of vaccine or screening. <p>On a national level, NCCP could lead on collaborating with schools and third level institutions on a plan to promote cancer prevention.</p> <p>My understanding is that objectives have been achieved, but I would like to see an annual report/ evaluation to provide objective data on the activity and impact of the SHPIO network.</p> <p>A clear NCCP lead/ co-ordinator for the SHPIO network.</p> <p>NCCP capacity to support the network – growing SHPIO network, with large volume of activity – need to ensure sufficient capacity in NCCP to engage, co-ordinate, support work planning, delivery and evaluation etc.</p> <p>Clarity around how the network will report on their work/ will be evaluated – are we planning an annual evaluation/ report, KPIs etc?</p>	<p>Pilots in a region and understanding learnings for the next region should continue such as the lung campaign and SunSmart school in Castleisland.</p> <p>Encourage promotion of NCCP resources e.g webinars. Develop a clear plan to promote NCCP public-facing webinars and educational events e.g develop a stakeholder list for each region to be informed of NCCP events.</p> <p>Work towards having a health promotion officer on broader HP & I team with specific remit for cancer prevention.</p> <p>Fostering interest in colleagues to become ‘champions’ who then deliver when supported by the SHP&IO CP created a greater reach and more sustainable work. Having a champion within the HP&I Team in CHO 6 meant I could be more strategic in my ways of working covering such a big geographical area. This is still evolving and not a dedicated/protected resource but an add to a HP&IO with a full workload. Similar staff are popping up in CHO 5 purely whom have an interest and are able to integrate it into their current work.</p> <p>Regionally if the managers could provide more protected resources (HPO hours) to support the Sn HP&IO CP</p> <p>CPD and upskilling of Health Promotion Teams to enable collaborative working</p> <p>Use the cancer prevention awareness calendar to schedule work for the year</p> <p>Have a clearer workplan template, make it SMART)</p>

Suggestions to improve nationally	Suggestions to improve regionally
<p>Need to complete the network to provide full geographic coverage – one post still outstanding.</p> <p>Continue to build the profile of the SHPIO-CP at a local and regional level and what their remit involves.</p> <p>How quarterly meeting updates can be provided to everyone- may not need to be quarterly?</p> <p>Collaborate on projects/development of resources if applicable/worthwhile.</p> <p>Process in place to feed in nationally from regional areas in relation to strategies etc.</p> <p>Nationally – The network would seek to provide protected/dedicated time to support the SHP&IO CP and build capacity to cover the geographic spread regionally.</p> <p>To continue the process of this network development and promote the resource and experience of the HP&I teams (where the HP&IO CP sit) in terms of new developments/ initiatives via two-way feedback on design and implementation where initiatives are used. The process of network development of NCCP and Regional SHP&IO CP should continue to be viewed as two-way support and collaboration.</p> <p>Feedback to HP managers to raise CP agenda via the co-chair of network</p> <p>Provide a Health promotion focus on Cancer prevention by developing training that will build capacity of HP teams and other HCP's</p> <p>Move to a more targeted, focused and strategic approach to the delivery of cancer prevention based on current evidence</p>	<p>Embed evaluation into initiatives</p> <p>Stronger engagement linkages between community and the acute system</p> <p>While it is a common issue across the system the spending limits imposed has made it more challenging to manage a programme at initial stages of implementation</p> <p>In order to build capacity and to have a health promotion focus to cancer prevention develop specific training for health promotion teams and health care professionals.</p> <p>Continue to build relationships with groups & organisations in the community</p> <p>Link with other HP&I Officers to build in Cancer prevention into their work plans</p>

Suggestions to improve nationally	Suggestions to improve regionally
<p>Develop a cancer prevention implementation framework or plan, focusing on specific risk factors, populations</p> <p>Regional role is huge from geographic perspective (covers 2 former CHOs) not practical to deliver role across huge regions. Ideally one role per old CHO region</p> <p>National meetings of HP&I officers in this role v supportive</p> <p>Ensure feedback is given to health promotion managers, this could be done through the co-chair who could put it on the agenda for the H&W managers meetings.</p> <p>Put together a package for awareness raising for staff on large worksites in the private sector</p> <p>Target organisations with a large male workforce (e.g. County Council Groundsmen/ farmers at marts) on bowel cancer awareness & register all interested for the national bowel screening programme. These men do not have ready access to a computer to register themselves – make it easy for them.</p>	

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