Rochdale Borough Council

Health Smart Programme Case Study



Brief

Rochdale Borough Council commissioned ICE Creates to deliver a borough wide Health Smart programme across Heywood, Middleton, Rochdale and Pennines.

The programme was set against RMBC's core priority in the Public Health Outcomes Framework (Domain 4) to reduce premature mortality. Rochdale ranks 140th out of 150 local authorities for premature mortality and is in the 'worst' category.

Smoking, obesity/diet, poor uptake of screening programmes and improving faster access to care for people who have had a stroke in the community were identified as the key focus moving forward, with the Health Smart Programme specifically targeting:

- Stroke symptom awareness and early diagnosis -more people in target areas will know what the signs of a stroke are and will know the importance of early action in saving lives via early treatment
- Cancer symptom awareness, early diagnosis and increasing screening uptake more people in target areas aged <75 will have measurable awareness of the importance of early presentation to GP with possible signs and symptoms of cancer, which will result in a fall in early cancer deaths. More people will attend for cancer screening, which will result in earlier diagnosis and a fall in early cancer deaths

 Food portions linked to obesity awareness - more people will understand food portioning as a tool to manage weight, which will result in reducing the increasing rise in obesity. This will link to the British Heart Foundation's recent work on food portions.

The primary target audience for the programme included:

- South Asian communities men and women at higher risk for stroke, cancers and obesity and evidencing lower cancer screening uptake rates
- Older men who live alone isolated, vulnerable, living in deprived communities and lower propensity to seek health related help
- People living in deprived communities – higher risk and higher health inequalities and lower cancer screening uptake rates
- The over 50s age group higher risk groups, especially those living in deprived areas.

The secondary target audience groups included:

 Families, friends, carers and those people who can influence the primary target audience groups

- The general population most notably for general awareness raising and portion control messages and interventions
- We will also focus on segments of the borough's population for targeted activities e.g. breast cancer awareness will pre-dominantly target women over 50 to increase awareness about signs and symptoms and screening; cervical cancer awareness will target women over 25 to raise awareness and encourage them to take up screening.

The purpose of the communications and engagement campaign was to support Rochdale's Public Health Strategy to reduce premature mortality rates by focusing upon key priorities that the Council had identified as making a significant improvement towards health outcomes: food portion and portion control, signs, symptoms and screening of breast, bowel, lung and cervical cancer and recognising the signs of stroke and responding appropriately (act FAST – Face, Arms, Speech Time).

To achieve the desired outcomes, ICE developed an integrated three-stage campaign, including:

- Champions programme recruitment and training of Health Smart Champions and extensive community engagement
- 2. Communication campaign
- 3. Campaign evaluation.

Our approach

The development, management and execution of the campaign were based upon our 'people shaped' philosophy. Using the principals of insight, co-creation and engagement:

- 1. We generated **insight** through baseline surveys to establish current levels of awareness and understanding of representatives from across the borough in relation to food portions/healthy eating, signs and symptoms of cancer and signs of and response to stroke.
- 2. The Health Smart campaign creative was **co-created** with RMBC and community representatives to agree campaign identity and logo, key messages, tone of voice and design style.
- 3. Finally, the campaign embraced an asset-based community development approach empowering and up-skilling stakeholders and Champions to deliver face-to-face **engagements**, create connections using social media and traditional channels of communication, and bringing together stakeholders and support services to deliver informative and engaging interventions.

Insight

Health Smart Champion Recruitment and Training

Community engagement is one of the most effective means of communicating messages and activating communities. ICE designed a community activation programme through a network of stakeholders and recruited 'Health Smart Champions' to support the delivery of the programme through a co-ordinated approach using engagement, brief interventions and community-based events. The role of the Champions was to:

- Raise awareness of the Health Smart campaign
- Encourage dialogue about health topics and general wellbeing
- Encourage the community to take positive action relating to their own lifestyle and health behaviours
- Activate and empower the community to make positive lifestyle choices.

As part of this programme we linked with stakeholders, community groups and volunteers to raise awareness of cancer, stroke and food portions amongst people living and working within the borough. Working within these community networks, we recruited and trained volunteers to become 'Health Smart Champions', with a particular focus on one or all topics.

The Champions played an integral role in delivering the community engagement programme locally to people living in Heywood, Middleton, Pennines and Rochdale. Their extensive reach and community links, knowledge of the area and their passion for making a difference to the lives of their friends, family, neighbours and other people living in their community meant that they could take the key messages of stroke, cancer and food portion sizes as far and wide as possible.

Key to the strategy was stakeholder mapping and engagement to identify the raft of groups, organisations and individuals operating across the borough who could be instrumental in opening doors and acting as 'gatekeepers' to local people and local communities. We engaged with over 250 local stakeholders to discuss the programme and were able to recruit 100 Champions. The programme team contacted stakeholders via telephone, emails and meetings and established a Health Smart database.

The team also attended a number of community groups to directly engage and recruit, issued a press release to the local media and to community based publications and used social media to push out engaging tweets through the RMBC Twitter account and posts to followers on our GET MON£YSMART Facebook page. 108 volunteers were recruited as Health Smart Champions from across the borough.

In total, 7 training sessions were held between November 2014 and January 2015. The team mapped the areas where the Champions lived and organised a variety of venues in those locations. The training sessions were also organised at different times of the day to match the requirements of the Champions, including during the working day and in the evening.

The training sessions were designed for community stakeholders and were informal and delivered in relaxed environments where Champions felt comfortable, could share experiences, contribute to the conversations and support each other on the journey. Where possible, we grouped people together who knew each other and were from similar communities.

Health Smart Digital Development

Community engagement is one of the most effective means of communicating. Given the digital age we are living in, the role of digital in any campaign development and delivery is paramount. As such, ICE recommended that the Health Smart programme tap into the existing health and wellbeing online portal: Puffell.com (Puffell). Puffell.com is the platform underpinned by Pathways for Life – a strategy for transformation and integration through wellbeing, digital and behaviour change.

The ICE team developed a bespoke Health Smart dashboard available for all residents living across the borough, which contains three pre-loaded campaign decks: cancer, stroke and food portions. The dashboard has been programmed to ensure that any new users who live in the borough and register are automatically signposted directly to the Health Smart dashboard, in order to maximise the exposure of the Health Smart campaign to people living across the borough. A dedicated URL has also been created and used across all campaign materials and promotion including press releases, briefings and presentations.

www.puffell.com/healthsmart

ICE worked with the Public Health team to develop bespoke content for each deck, which was informative and designed to increase awareness about the health condition and the signs and symptoms, importance of early diagnosis, tips and myth busters.

Each deck also has its own user group, where users can meet virtually and communicate with each other about the topic.

Puffell was included in the 7 Champion training sessions and each Champion was given instructions and promotional materials to encourage people they engage with to explore Puffell as part of their ongoing health and wellbeing management. Following the training, a number of Champions have also run further sessions with their clients and community groups.

Campaign Activity

Our approach to delivering the campaign was based upon key social marketing principles, using a combination of social engagement activities combined with traditional advertising channels:

- Stakeholder launch event
- A two day tour of the borough to engage with young people and adults on the topic of food portion sizes, including presentations at 4 primary schools
- Bus advertising campaign to raise awareness of healthy portion sizes, followed by a stroke awareness campaign
- by stakeholders, using a series of tools to generate conversations with the public, including a giant inflatable bowel, a breast vest and a portable photo booth. Our team posted photographs on the Health Smart Facebook page, where the participants could tag themselves, show support for the campaign and download their photographs.







 The Health Smart Facebook and Twitter social media were used to spread the word locally and push out the key messages. On the day, a mix of tweets and photos were posted to inform the public of our location and invite them to pop along for free information and advice

- The Health Smart campaign Twitter and Facebook channels were used consistently throughout the campaign by the ICE team, and were updated on a daily basis to share information and engage with the public. Specific campaign support was also shared, such as posting healthy eating tips, and sharing stroke association content and screening information as part of the cancer campaign. We were able to promote the engagement events, bus tour and the Champions events, and encourage online conversations related to the Health Smart campaign, as well as signposting the Health Smart Puffell platform and encouraging sign ups
- Throughout the campaign, traditional PR methods were also utilised to engage local press and stakeholder organisations, complimenting the ongoing activity on social media. This included a Health Smart slot on Crescent Radio's Thursday Health Show.

Evaluation

In order to establish a baseline position upon which to build the campaign, ICE conducted a pre-campaign survey comprising mostly of closed questions to understand levels of awareness of: cancer, stroke and portion sizes.

The survey covered:

- Cancer and stroke signs and symptoms
- Cancer screening programmes
- Intentions and attitudes towards seeking help
- Awareness of portion sizes and healthy eating.

The survey featured a short screener with initial demographic based questions designed to ensure that the respondent resided within the target borough. This was available online and as hard-copies.

Data collection was conducted via a number of methods:

- Online survey: link was available via RBC website and stakeholder organisation websites, as well as being emailed out to stakeholder contacts for further distribution - including health trainers, health Champions, health chatters, and service providers who have access to or engage with the target audience
- Hard copies: were distributed to stakeholders and organisations for completion
- On-street: our field researchers conducted on-street surveys with members of the public opportunistically in key target areas to bolster the sample and to ensure we engaged with a cohort that most closely represents our target audiences and localities.

The post-campaign survey was designed based very closely on the baseline questions to allow our researchers to ascertain impact of the campaign from pre to post campaign and measure the changes in attitude, behaviours and propensity to act.

Questions were also added to understand intention to change for food portions – to understand the impact of the campaign materials and messages on individuals' decision-making processes about their own food intake.

As with the baseline survey, it was identified that 383 respondents were to be captured in total to achieve 95% confidence level.

The data collection methods mirrored the baseline survey. The deadline for data collection was extended due to a slow uptake and response rate from stakeholders. The ICE team also used telephone surveys to capture data from the Health Smart Champions to bolster the sample.

Summary Findings

Health Smart Champions:

- 71% of Champions felt either fairly or very confident to talk to people about portion size and healthy eating
- 94% of Champions recognised the 'ideal' food plate unprompted
- 70% said they felt either fairly or very confident to talk to people about the signs and symptoms of cancer
- Majority of Champions understood and recognised the different signs and symptoms of cancer
- 84% said they would see a GP within a week if they had concerns about a cancer sign/symptom
- Majority of Champions understand the signs of a stroke
- 82% said they would call 999 immediately if they were concerned someone was showing signs of a stroke.

The Champions reported over 2,000 local engagements at a grass root level through conversations and dialogue with people locally. In total, 17 community events were funded across the borough, resulting in a further 600 community level engagements.

Communications Campaign:

- The launch events resulted in 1830 direct face-to-face engagements with members of the public living across the borough
- 1720 campaign packs and goody bags were distributed between the launch events and via Primary Care
- The campaign bus advertising provided over 700,000 opportunities to see, with 71% coverage across the borough between the bus exterior and interior adverts
- The Health Smart Twitter account resulted in over 362,000 impressions and Facebook garnered 380 followers
- 102 current Rochdale borough members signed up and using the Health Smart dashboard on Puffell.com

Combined with the launch events and campaign activity including the food tours, the programme resulted in 4,500 face-to-face engagements and over 3,000 goody bags and packs distributed to local people. This was supported by social media and PR activity and advertising to help take the campaign's messages out to the heart of the communities.

Cancer Awareness and Intention Data:

From baseline to post campaign, there was a 16% increase experienced in those participants who felt **very confident** in recognising the signs and symptoms of cancer against the required KPI of a 5% increase. The increased awareness was experienced across all signs and symptoms, showing a positive uplift across the board with the highlights being awareness of unexplained bleeding increasing by 13% and unexplained weight loss increasing by

11%. The campaign and engagement focused on intention to change messages to encourage people to take action, resulting in a 7% increase in participants citing they would attend their GP within 1-3 days of experiencing a sign or symptom of cancer against the required KPI of 5%.

The level of awareness of all screening programmes also increased, with awareness of breast cancer screening increasing by 20% from 72% at baseline to 92% post survey; awareness of cervical screening increased by 21% from 62% at baseline to 83% post survey, and bowel screening by 30% from 45% at baseline to 75% post survey. These results are exceptionally positive against the desired KPIs of 5% for breast, 5% for cervical and 10% for bowel. Importantly, the intention to attend data also shows a positive incline of 6% for those citing they are 'very likely' to attend screening when invited, an 8% increase for those who cited 'likely' and a 6% decrease in those citing they are 'unlikely' to attend, dropping from 8% at baseline to 2% at post survey.

Stroke Awareness and Intention Data:

From baseline to post campaign, there was a 23% increase in those participants who felt very confident in recognising the signs and symptoms of a stroke against the KPI of a 5% increase. Similar to the cancer data, the awareness of signs and symptoms increased across the board, with a 14% increase in recognition of face falling to one side. The intention to act and call 999/ambulance immediately increased by a very positive 13%, from 79% at baseline which was already exceptionally high to 92% post campaign – against the required KPI of 5%.

Food Awareness and Intention Data

From baseline to post campaign, there was a 15 % increase in the identification of the recommended healthy food plate against the set KPI o f 5% increase. The level of awareness at baseline was already 72%, which was higher than anticipated.

In order to understand if participants correlated their understanding of the 'ideal' healthy plate and portion sizes to their own eating habits, this was explored post survey. The survey explored intention to change current eating habits, with 63% of survey respondents identifying that they do intend to change their eating habits. In this case, the intention to change data wasn't measured at baseline as, through the evaluation, the important measure was the impact the campaign had on an individual's recognition of their food intake against the 'recommended', and to capture whether this identification then impacted on their intention to make a change. The reason this data was deemed important was to evidence the actual impact of the campaign, as often food related campaigns such as 'Change 4 Life' have high recall levels, due to the financial spend on advertising, but limited or little evidence of behavioural shift.

For more information please contact:



