

MACMILLAN CANCER SUPPORT

Improving the Cancer Journey Lanarkshire

Quarterly Strategic Report

Reporting period: Q3 2025



Executive Summary

This quarter demonstrates continued delivery of the Improving the Cancer Journey (ICJ) service across Lanarkshire, with a strong focus on early intervention, equity of access, and person-centred care. The service remains well aligned with Realistic Medicine, supporting people to access the right support at the right time, based on what matters most to them.

A total of 404 referrals were received during the reporting period. While this represents a reduction compared to the previous quarter, the profile of referrals continues to indicate effective early engagement, with 35% at initial diagnosis and a further 31% early in treatment. This supports NHS Lanarkshire's strategic aim of anticipatory, preventative, and personalised care.

The service maintained strong partnership working, with 885 onward connections made to community and third-sector services, most commonly for financial and emotional support. ICJ continues to play a key role in reducing inequalities, with 72% of referrals originating from SIMD 1-3 areas.

Overall, the quarter reflects sustained impact in supporting people affected by cancer while identifying clear opportunities for service growth, learning, and continuous improvement.

Strategic Alignment

Alignment with NHS Lanarkshire Priorities

ICJ continues to contribute to NHS Lanarkshire's priorities by:

- Reducing health inequalities through targeted community-based support
- Supporting prevention and early intervention
- Strengthening partnership working across statutory and third-sector organisations
- Promoting staff wellbeing and sustainable workforce development

Realistic Medicine

The ICJ model strongly reflects Realistic Medicine principles by:

- Supporting shared decision-making through holistic conversations
- Focusing on outcomes that matter to individuals and families
- Reducing duplication and unwarranted variation through coordinated care
- Enabling people to access non-clinical, community-based support alongside treatment

Key Activity Highlights

- All staff completed a Palliative Care Learning Day, strengthening confidence in supporting people with complex and palliative needs.
- Recognition received through an NHS Lanarkshire Excellence Award for Best Team Collaboration – Non-Clinical Service.
- Launch of the first ICJ peer support group in Rutherglen, expanding community-based emotional and social support.
- Successful delivery of the first ICJ clinic within HMP Shotts, with ongoing participation in the Ageing Well MDT.
- Delivery of engagement activity within the prison setting, including a Macmillan awareness event for families and visitors.
- Recruitment activity commenced for the Compassionate Communities Project, targeting areas of highest deprivation.
- Delivery of a Staff Wellbeing Day, supporting team resilience and reflective practice.



404 referrals

404 total new referrals were made to the service between Oct-Dec 2025. This is a decrease of 67 referrals from the last quarter.

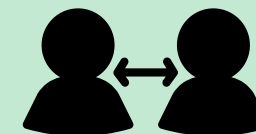
Most referrals were for females aged 66+

Most common cancer type

- Lung cancer received the highest referrals (15%)
- Followed by Breast cancer (14%)
- Then Head and Neck (9%)

885 referrals to community services

- The most frequent onward referral was for financial support



Primary support needs:

- Financial advice and benefits
- Emotional support services
- Community-based cancer support



Stage at Referral

- Initial diagnosis: 35%
- Early treatment: 31%
- Palliative care: 20%
- Family and carers: 6%

72% of referrals from SIMD 1, 2 and 3



442 Care Plans recorded

In this quarter, 442 care plans were recorded, which identified a total of 743 concerns

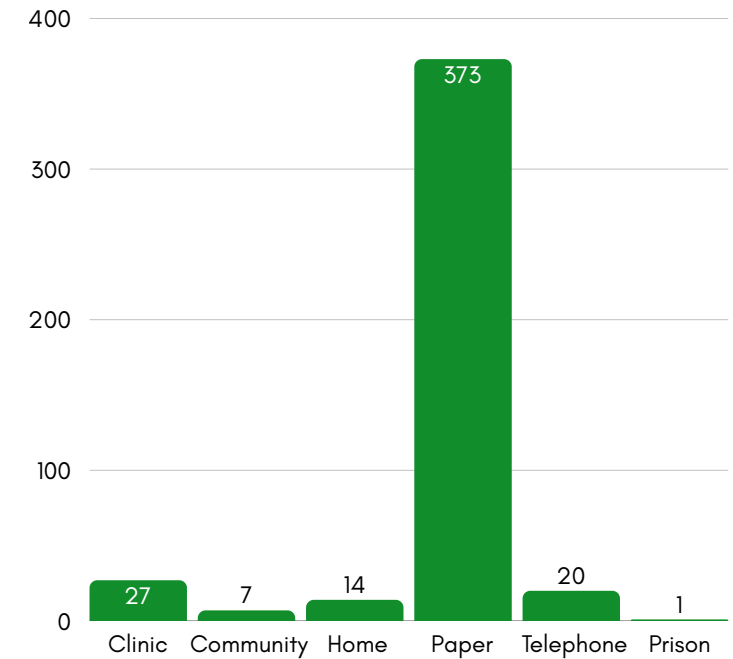
Electronic Holistic Needs Assessment (eHNA)

The eHNA is a simple questionnaire for patients to :

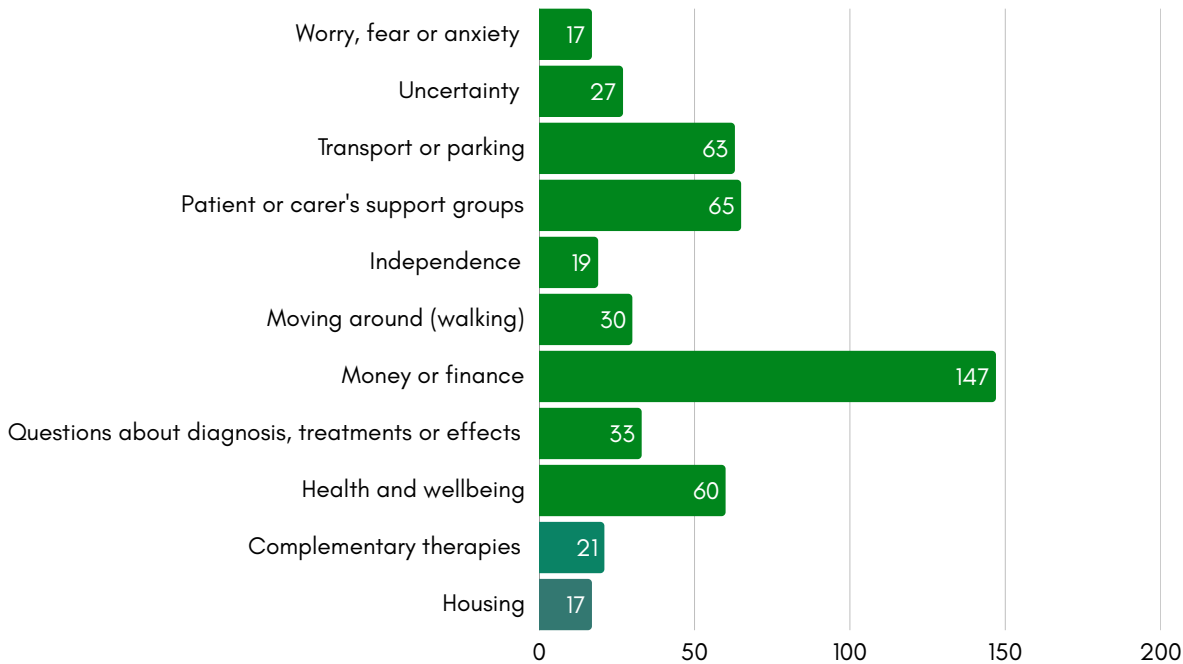
- identify a patient's concerns
- start a conversation about needs
- develop a Personalised Care and Support Plan
- share the right information, at the right times
- signpost to relevant services.



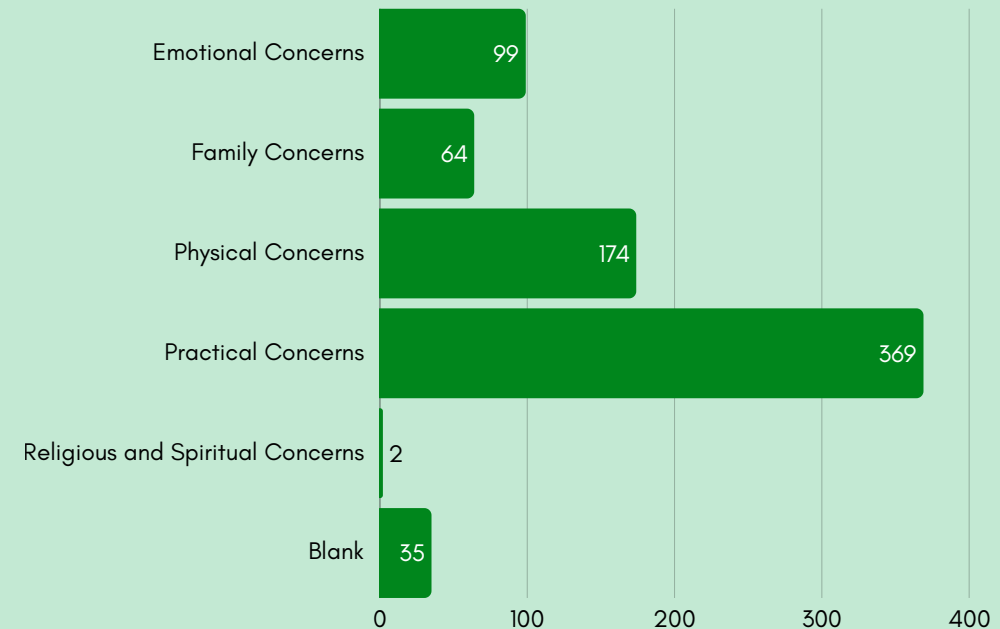
eHNA Setting



Top 10 Concerns

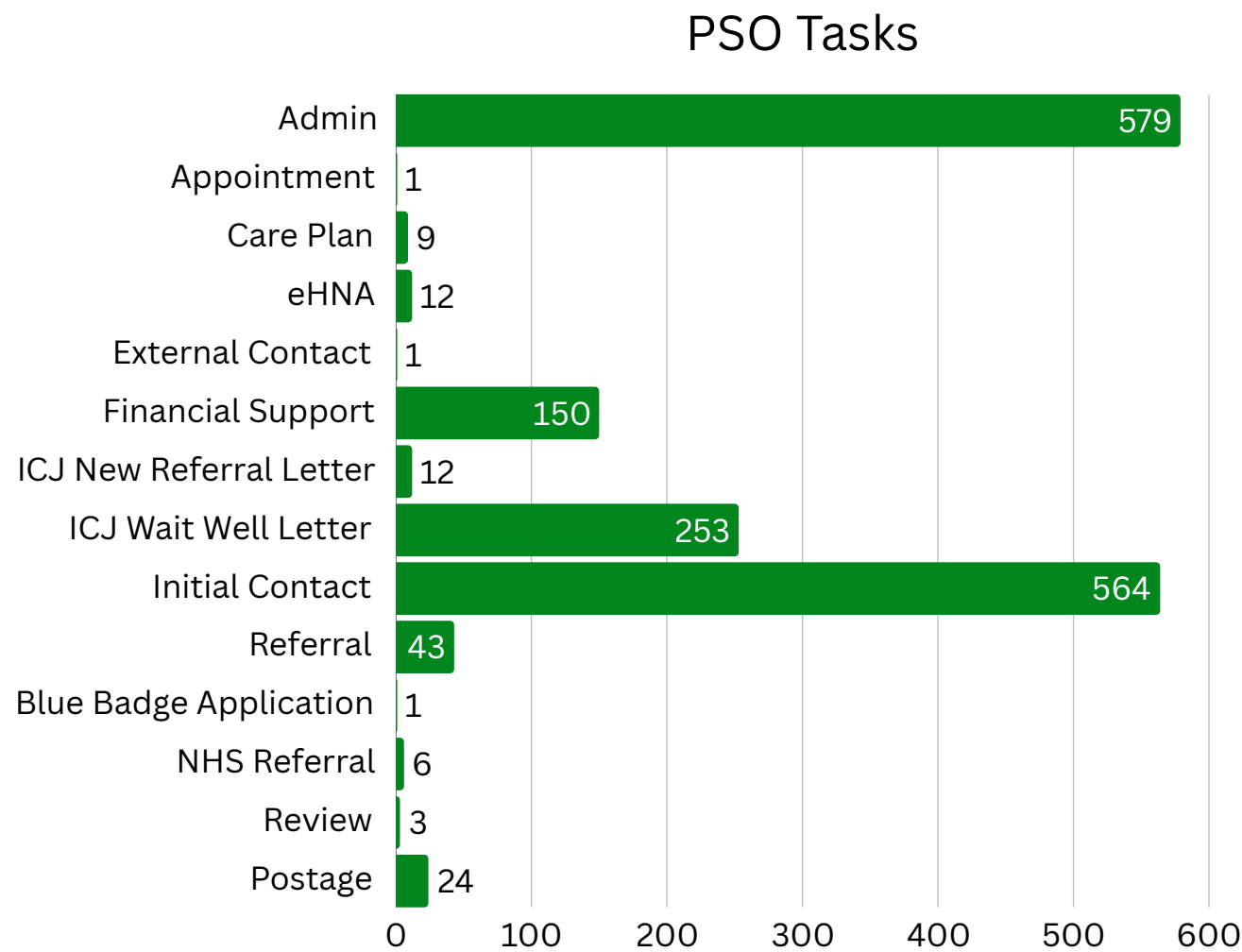


Total Concerns by Group



Project Support Officer (PSO) Activity

Our Central hub is staffed by 1.8 WTE Project Support Officers (PSO). This role has proven crucial in the daily running of ICJ. This Quarter PSO carried out 1597 tasks which equates approximately to 361.5 hours of work.



By having band 3 project support carry out these tasks we save **361.5** hours of work that would need to be picked up by band 4 Link workers.

Evaluation

Care Opinion Highlights

Care Opinion is an online platform where people can share their experience of health or care services, and help make them better for everyone. The following feedback was received from service users this quarter.



“Exceptional Support From MacMillan Improving Cancer Journey”

Posted by Scatcho24 (as a service user)

I was referred to MacMillan Improving Your Cancer Journey a few months back after being diagnosed with AML and needing a stem cell transplant to save my life. The service has made a huge difference to me in terms of being able to speak about my journey for me to realise just how far I've come. The service also provided me with support and advice with financial services and benefits which takes a huge weight off you at a very uncertain time in your life. Pauline's manner, time and support had been invaluable to me. She really is a credit to your team. She really has went above and beyond to ensure I feel supported in the best way. You can truly hear the passion she has for caring and supporting people in a very difficult situation. For this I would like to express my appreciation for Pauline's time it really has meant so much to me. Going through a journey with cancer makes you realise how much you rely on charities and support networks as they really do make such a difference to your whole journey. I believe Pauline is very special and absolute in the right job. I will forever be grateful for her everything she has done for me. I have a few people that stand out in my journey for their care, support and time and Pauline certainly is one of them. MacMillan Improving Your Cancer Journey really has been amazing. You all do such a special job. Thank you so much once again Pauline.



“My Cancer Journey”

Posted by MartinO2 (as the patient)

I was struggling with a sore chest for a few months then went to the hospital. They gave me antibiotics thinking I had an infection. I then had to return due to breathing they gave me sinus relievers. I then went to my doctor and they referred me for an X-ray which had shown some shadowing. I was referred to the respiratory clinic, which showed cancer. I went through all tests that day and waited 9 days for my results, to be admitted straight away. I went through chemo immuno therapy, which was called R-CHOP. This has been the hardest thing I have ever been through in my life and I struggled, physically, mentally and emotionally. I spoke with Mcmillan and Jennifer had spoken to me and helped me so much with paperwork, befrienders and therapies. Which helps me so much. Jennifer was very professional and fabulous with me and my partner and checked in regularly. I have now been told I'm in remission and the next 2 years are crucial for me. I am hoping to get back to work in January, this will help me massively financially and mentally.



Evaluation

Care Opinion Highlights cont'd

Care Opinion is an online platform where people can share their experience of health or care services, and help make them better for everyone. The following feedback was received from service users this quarter.



"My Fathers Cancer Care"

Posted by Ammoairdrie (as a relative)

In March 2020 my father was diagnosed with a cancerous brain tumour, which required immediate surgery. Following this 10 hour surgery, in the blink of an eye, my father was unable to work, drive, talk and his mobility had been seriously impacted also.

Fast forward 5 years and in summer 2025 he has been diagnosed with a second cancerous tumour which is growing on the part of the brain which controls mobility. My father lives alone with only 1 forty year old son, me.

Due to his severely impacted mobility he is now single level living and struggles to get from room to room, take a shower, make food, get dressed etc. We contacted the social work hub in Airdrie to ask if there was any help available.

Jennifer from McMillan cancer journey contacted us and went through everything we should be looking at or may require to make my dad's journey easier. Hopefully now we have a date when his care will start and hopefully allow us to ease a bit of stress with having to care for him.



Evaluation

Case Studies

Case Study A

Abstract

This case study demonstrates the impact of ICJ for P, a gentleman diagnosed with metastatic melanoma. P was struggling to cope with his diagnosis, retain complex information, and manage day-to-day responsibilities, including caring for his father with dementia. ICJ involvement provided a single point of contact, coordinating practical, emotional, and financial support. This included home visits, referrals to spiritual care, dietetic guidance, financial support, peer support groups, and carers services for his wife. As a result, P engaged positively with face-to-face emotional support, submitted applications for financial support and a Blue Badge, and plans to attend ICJ drop-in sessions and peer support groups. This case highlights ICJ's role in reducing isolation, improving access, and supporting both client and family.

Context and Referral to ICJ

P was referred to ICJ by their CNS due to metastatic melanoma and complex care needs that would not be fully addressed through existing clinical pathways. P was experiencing fatigue, weight loss, emotional distress, and difficulty retaining information about his diagnosis and treatment. He and his wife were also responsible for caring for his father, who has dementia, and P was not receiving any financial support, further compounding stress. ICJ involvement aimed to provide a coordinated, person-centred response that addressed both practical and emotional needs, ensured access to relevant services, and reduced the risk of unmet support.

Client Needs and Barriers

At the time of referral, P was struggling to cope emotionally with his diagnosis and found it difficult to retain important information. He expressed concerns about his weight loss, fatigue, and general wellbeing, as well as the impact of his responsibilities in caring for his father. P and his wife had limited knowledge of available support services, including financial assistance, community groups, or dietary guidance. The complexity of navigating multiple services, coupled with mobility challenges and the burden of caregiving, created barriers to accessing timely support. These needs highlighted a gap in care that extended beyond the clinical focus of the CNS and required a holistic, coordinated approach.

ICJ Intervention and My Role

ICJ became involved to provide a single point of contact for P and his family, ensuring that his practical, emotional, and health-related needs were addressed. Referrals were coordinated to the Lanarkshire Listening Service for emotional support, to Money Matters for financial guidance, and to the dietician for advice on building up nutrition to counteract weight loss. The Wellbeing Practitioner conducted home visits to discuss support face-to-face, assist with applications for a Blue Badge, and help with financial support submissions. ICJ also introduced P to the local ICJ peer support group and weekly drop-in sessions, and offered his wife referrals to Lanarkshire Carers Services and complementary therapy at the Macmillan EK Library Hub. By facilitating these connections and maintaining consistent communication, ICJ ensured that both P and his wife were aware of and able to access the support they needed.

Impact on the Client

Through ICJ involvement, P engaged actively with face-to-face emotional support, which he found valuable for discussing his feelings and concerns. He submitted applications for financial support through Maggie's and for a Blue Badge, easing the burden of accessing appointments and reducing practical stress. P and his wife intend to attend the ICJ peer support group and library drop-in sessions, providing ongoing social and emotional support. P reported feeling relieved and reassured to have a consistent point of contact for guidance and support, which enhanced his confidence in managing both his health and caregiving responsibilities.

Evaluation

Case Studies

Case Study A cont'd

Wider Impact and Service Value

This case demonstrates ICJ's role in improving coordination across multiple services, linking health, social, financial, and emotional support in a cohesive way. By addressing gaps in service provision, ICJ reduced the risk of unmet needs, duplication, and fragmentation of care. The practitioner's involvement also supported P's wife through carers' services, ensuring family needs were recognised and addressed. Through this holistic approach, ICJ enhanced communication between services and facilitated safer, person-centred care that reflected P's priorities and circumstances.

Reflection and Learning

This case highlights ICJ's unique contribution in providing a holistic, person-centred approach that bridges gaps between clinical care and wider practical and emotional support. Without ICJ involvement, P's complex needs may have remained fragmented across services, potentially increasing stress, isolation, and health risks. The case reinforces the importance of a single point of contact for coordinating support, advocating for clients, and ensuring that both immediate and wider family needs are addressed. It demonstrates how ICJ can reduce inequality, improve access, and enhance wellbeing in complex situations where multiple services are involved.

Evaluation

Case Studies

Case Study B

Abstract

This case study demonstrates the impact of the ICJ for Mrs C, recently diagnosed with stomach cancer, who was experiencing significant financial, practical, and emotional challenges. She and her husband had just started new businesses and were under financial stress, with rent arrears and no immediate income. ICJ involvement provided a single point of contact to coordinate urgent support, including emergency housing payments, welfare rights assistance, fuel vouchers, pet care support, hospital transport, and a Blue Badge application. As a result, Mrs C was able to stabilise her financial situation, access essential services, and attend hospital appointments without additional stress. This case highlights ICJ's role in reducing immediate risk, coordinating multiple services, and supporting clients holistically during a critical period.

Context and Referral to ICJ

Mrs C was referred to ICJ following a recent diagnosis of stomach cancer. At the time, she and her husband had just started their own businesses, and both were under significant financial stress. The council had contacted them regarding rent arrears, and Mrs C had no income until her husband's first pay at the end of February. She was relying on child benefit and prioritising feeding her children and caring for their dog, often concealing the extent of the difficulties from her older son to avoid worrying him. ICJ involvement was to support Mrs C in managing practical, financial, and emotional challenges while ensuring she could attend essential hospital appointments.

Client Needs and Barriers

Mrs C was facing multiple urgent needs. Financially, she had no income and was at risk of eviction due to rent arrears. She had limited access to necessities, including food for herself, her children, and her pet. Her car had broken down, limiting her ability to attend hospital appointments, and she was concerned about the impact on her husband's work and income. Emotional stress was high, with worry about her health, her family's wellbeing, and managing practical tasks while awaiting further test results. Barriers included navigating multiple services, accessing urgent financial and practical support, and managing logistics while undergoing cancer treatment.

ICJ Intervention and My Role

ICJ provided a single point of contact and coordinated multiple services to address Mrs C's immediate needs. The Wellbeing Practitioner contacted the council to request an emergency housing discretionary payment, resulting in her rent arrears being placed on hold. Welfare rights services were contacted for an emergency referral, facilitating completion of her Universal Credit application within hours. CAB was contacted to arrange fuel vouchers, and a referral was made to a pet pantry for her dog. The Wellbeing Practitioner collected pet food when Mrs C was unable to attend due to car issues. During a home visit, the Wellbeing Practitioner also liaised with Lanarkshire Cancer Care Trust to arrange transport for hospital appointments and completed her Blue Badge application. The Wellbeing Practitioner continues to support Mrs C through follow-up appointments and ongoing coordination.

Impact on the Client

Mrs C experienced immediate relief and a sense of stability following ICJ involvement. Urgent financial needs were addressed, ensuring rent arrears did not escalate, and welfare support was accessed quickly. Access to fuel and pet food reduced practical stress, and transport arrangements ensured she could attend hospital appointments without negatively affecting her husband's work or income. The coordinated approach alleviated some emotional burden, allowing Mrs C to focus on her health and treatment. She expressed gratitude for having a single, reliable point of contact, reporting a significant reduction in stress and anxiety.

Evaluation

Case Studies

Case Study B cont'd

Wider Impact and Service Value

This case demonstrates ICJ's role in connecting multiple services rapidly to meet urgent and complex needs, reducing the risk of financial crisis, missed medical appointments, and potential harm due to unmet basic needs. By coordinating housing, welfare, transport, and community resources, ICJ prevented escalation of financial and practical issues while supporting family wellbeing. The involvement also enhanced communication between services and enabled a person-centred approach tailored to Mrs C's priorities, illustrating ICJ's unique contribution in bridging gaps across health, social, and community support systems.

Reflection and Learning

This case highlights the importance of a proactive, holistic approach in ICJ practice, particularly when clients face urgent financial, practical, and health-related challenges simultaneously. Without ICJ involvement, Mrs C may have experienced eviction, missed hospital appointments, or additional emotional and practical stress. The case reinforces ICJ's role as a single point of contact, ensuring timely coordination, advocacy, and support for both clients and families. It demonstrates how ICJ can reduce inequality, support continuity of care, and provide practical and emotional reassurance during critical periods of a cancer journey.

Next Steps/Forward Look

Planned Actions

- Review the reduction in referral numbers and implement actions to strengthen awareness and referral pathways
- Embed ICJ further within HMP Shotts MDT structures and extend support to prison staff
- Deliver ongoing staff development, including a further ICJ Development Day
- Enhance bereavement knowledge and skills across the whole team
- Launch the Compassionate Communities Project to strengthen local community presence.
- Expand peer support provision, with a new group planned in Blantyre
- Explore application of the ICJ model to energy-limiting conditions in North Lanarkshire (Project will be led by NLDF)
- Ensure all administrative staff complete Good Conversations Training and Supporting People with Cancer Care Programme

Anticipated Challenges

- Managing reduced referral volumes while sustaining service visibility
- Ensuring quality and consistency as services expand
- Balancing development activity with staff capacity and wellbeing

Opportunities for Collaboration

- Deepening partnership with HMP Shotts and prison healthcare teams
- Strengthening community and third-sector partnerships through Compassionate Communities
- Collaborative development with North Lanarkshire Disability Forum
- Expansion of peer-led community support networks