

Uptake of screening for breast cancer in deprived GP practices: report for Health Scrutiny Committee July 2010.

Background

Around 1,400 lives are saved nationally by the breast screening programme every year (1). Screen detected cancers generally have a better prognosis than symptomatic breast cancers as they are usually smaller, of lower grade and less likely to have node involvement (2). The benefits of breast screening are demonstrated by the data on breast cancer survival rates. Both 1 and 5 year survival for women with screen – detected breast cancer are significantly higher than for symptomatic patients. Indeed 1 year survival for women with screening detected breast cancer is no different to that of the general population, across all ethnic groups (2). The 12% difference in 5 year survival for symptomatic cancers seen between women in the poorest and most affluent quintiles is reduced to 6.6% by screening (2).

It has been well documented that women from deprived areas are less likely to attend for screening in general and in breast screening there is a strong link between uptake of screening and wealth (1).

Screening in Stockport

The breast screening program is a national screening programme in which women between 50-70 are invited for screening every 3 years. In Stockport approximately 12,000 women a year are invited for screening and this number continues to increase year on year. From January of 2011, we will begin the age extension, inviting women between 47-74 in line with the Cancer Reform Strategy.

The delivery of programmes operate differently around the country and in Stockport our programme is delivered using a mobile breast screening van which moves around the borough. The programme here was set up specifically in this manner to provide greater access to women by siting the van in local areas. We have used up to 8 different sites:

- Brinnington Health Centre
- Memorial Park – Marple
- Massie Street Car Park – Cheadle
- Bramhall Health Centre
- Cherry Tree Hospital
- Romiley/Woodley Health Centres
- Heaton Norris Health Centre
- St Thomas' Hospital

However, the siting of the van has begun to present some very real challenges in the delivery of the service. As we move to the age extension with increased numbers of women being invited coupled with individual choices for appointment times, the programme needs to be offering appointments later in the day and also on weekends. This impacts on our van location to ensure it is an acceptable and safe site for both women attending and staff working on the van. We are currently working closely with the council to identify and secure new sites.

Following screening, for those women who require further investigation, their follow up is through the Breast Screening Unit at East Cheshire Trust. If surgery is required, the women have a choice of where they wish to have this done, but the majority of women chose to continue their care and treatment at East Cheshire.

Coverage and Uptake of screening

There are two measures we use to gauge performance for the breast screening programme - coverage and uptake. Both of these are required to fully understand the delivery and impact of screening in Stockport.

Coverage is the proportion of women resident and eligible at a particular point in time who have a test with a recorded result at least once in the previous 3 years. Currently coverage is best assessed by the 53-70 age group as women may be called anytime between their 50th and 53rd birthday.

Uptake is the proportion of women invited for screening over the year for whom a screening test result is recorded.

Local data:

- When interpreting the data it is important to be aware that the call and recall for breast screening is for all the women in the eligible population from one GP practice to be called at the same time and no further invitations are issued until 3 years later when all the eligible women at that practice are again called. Annual figures are influenced by the numbers of women who have entered and left the eligible age group between the screening rounds of that practice. This is a different system from other screening programmes where the call and recall is linked to individual birthdays when eligible people are called continuously throughout the year.
- Coverage figures show the attendance at screening in the last 3 years and are produced annually in the autumn for the preceding financial year.
- Coverage in the 50-70 age group has decreased in Stockport over the last year by 0.5%. The screening programme does not provide this age band at a national level so we are unable to compare Stockport with the national figure. Further analysis is still to be done locally.
- The range between the lowest coverage in a deprived practice and the highest in a non-deprived practice is 32% for breast screening (3).
- 36% of eligible women (3,413 women) from deprived practices do not attend for breast screening compared to 26% of women (6504 women) from non-deprived practices.
- An example is P88003 practice shows a coverage figure of 68.2% and an uptake rate of 71.7%
- Uptake figures show screening attendance at the time of the screening round.
- Not all deprived practices have uptake below 70%. Not all non-deprived practices have uptake above 70%.
- In the last year, in those deprived practices where additional promotional activity took place, we saw a slight increase in uptake - with an overall 2% increase.

Actions developed to impact on uptake in deprived practices

In September 2009, the screening round started inviting the practices in the Stepping Hill and Victoria area then moved to call the practices in the Heaton and Reddish areas.

Aim:

Working in partnership with the Neighbourhood Renewal Team to contribute to reducing inequalities in health by improving uptake in breast screening in some of the most deprived areas of the borough by promoting informed choice through promotional materials, community events and brief interventions by healthcare staff.

Objectives:

- To develop local promotional materials in partnership with the breast screening service.
- To disseminate promotional materials to local venues.

- To promote informed choice within the programme by providing women with the necessary information so they are fully informed of both the benefits and risks of screening so that they can decide whether or not to take part in breast screening.
- To promote informed choice within the programme by empowering healthcare staff and community staff to raise the issue of breast screening in an appropriate manner.
- To develop and deliver update session on breast awareness /screening at each practice prior to screening starting.
- To provide resources on breast awareness/screening to support health professionals and community staff.
- To work in partnership with other healthcare professionals and Neighbourhood Renewal team to coordinate with other health promotion events in the local areas.
- To work in partnership with breast awareness charity.

Development of the promotional materials

Some research suggests that although there is a strong link between wealth and uptake of breast screening there is no association between breast screening and other factors such as education and ethnicity (1). As the benefits of screening are evident for all ethnic groups and there are differences in survival in ethnic groups (2) it is important that all promotional materials developed were as accessible as possible to all women, including those from black and ethnic minority groups. In Stockport the 6 most commonly spoken languages after English are Arabic, Bengali, Chinese, Farsi, Polish and Urdu.

Poster

The only national poster available in languages other than English is “open your eyes” poster. Therefore this was chosen and permission was gained from the producers to customise it with our local service information. Although it only covered 3 of the 6 languages mentioned (not available in Arabic, Farsi or Polish). GP practices were issued with enough for each consulting room, toilet, waiting area.

It was also sent to nearest pharmacy and library (when one was nearby).

Local shops were approached in person with varying success.

Flyer

Permission was obtained to use the “open your eyes to breast screening” phrase and an eye image on a flyer. Permission was obtained to have the phrase translated into the 6 most commonly spoken languages in Stockport after English. This was to be handed out by healthcare staff at each GP practice to initiate a brief intervention about breast screening, that the GP practice were recommending the programme, where and how to obtain information to assist the woman to decide – this would include the offer of an appointment and/or information on how to contact the breast screening service.

The flyer was developed in accordance with the policy for writing patient information and the feed back from one of the focus groups about patient information used in the cervical screening programme. It was assessed by the reading group, which is part of the LiNKS organisation, and it was approved for use.

Prior to using it at the first practice the opinions of practice staff were sought and concerns were expressed that women could be offended at being approached about the screening programme but were not yet 50 years of age. No changes were made to the flyer but it was emphasised at the update sessions with each practice that it was about promoting breast screening as part of breast awareness. So it was for all women to know about from the breast awareness point of view and to pass the message on to any women they knew in the 50 to 70+ age group. All of the practices in the Stepping Hill and Victoria, those in the other areas with uptakes below 70% and the deprived practices in the other areas mentioned agreed with this approach.

GP update resource pack

The information was delivered in the manner chosen by the practice. This varied from in person at a practice meeting to the whole team, or with practice nurse(s), lead receptionist, and practice manager. Some practices preferred a telephone conversation(s), supplemented with emails.

This time period coincided with the seasonal flu and swine flu immunisation programmes, run up to Christmas, influenced the practices decision about the most appropriate way to discuss the breast screening invitations.

Summary

The localised “open your eyes to breast screening” posters were displayed at GP practices, pharmacies, libraries and local shops.

The “open your eyes to breast screening” flyer was handed out by reception staff/healthcare staff to any woman attending the practice to initiate a brief intervention on GP endorsing screening – offering appointment for pros and cons/ contact breast screening service for more information – phone or website.

After the first couple of practices the flyer was also included in the appointment letter.

All the GP practices received an update session on the breast screening programme – either face to face or on the telephone (chosen by the practice) and a pack of resources.

The emphasis of the update session was to empower healthcare staff to promote informed choice and reduce anxiety levels. Therefore the focus was on

- language services for women with first language other than English.
- resources for women with learning disabilities, visual/hearing impairment, physical disabilities.
- pre screening visits to mobile unit.
- pre screening appointment to discuss pros and cons on individual basis
- updating health professional knowledge base on the pros and cons of breast screening.
- Personalising the breast screening service with pictures of the women who worked on the mobile unit.
- being accompanied by friend/family member

There was also the emphasis on the practicalities of the service:

- Ease of changing an appointment.
- Ease of travelling to the mobile unit, as it was not possible to relocate the van closer to any of the areas. Travel directions were developed highlighting public transport, ring and ride service, map showing bus stops closest to the mobile unit, car parking facilities, cycle facilities.

Additional promotional activities

- Practice managers forum presentation to promote breast screening service website.
- Borough wide breast cancer awareness month campaign in pharmacies promoting breast screening – October 09.
- Black history month – October 09: linked this to promoting breast awareness in BME groups - breast awareness talk, local radio slot.
- Breast awareness talk to women’s group in priority 1 area (Adswood and Bridgehall)
- Urdu and Farsi leaflet, big display in waiting area – Dr Jeffs.
- Urdu leaflets – Drs Marshall and Murthy.
- Promotion by staffed stall at Neighbourhood Renewal event for older people in Adswood and Bridgehall.

- “At a glance” screening chart for neighbourhood renewal team to promote when opportunity arises.
- Added screening section to health professional resource pack on healthier lifestyle choices (all GP practices, health centres and pharmacies).
- Easy order sheet for breast screening resources for health professionals disseminated – what’s available for our vulnerable groups.
- Handy size breast screening website address and facilities for desks/ stick on computer per consulting room at practice (developed following feedback from one of the early practices visited).
- Breast screening service website promoted in newsletters for GPs and practice nurses.
- Breast screening update session for health trainers.
- Asians women’s event in Heaton Mersey.
- Exploring relocating the mobile unit nearer to the GP practices – not possible due to access problems.
- Public Health nurses were to assist with promotional activities but were unable to do so as response to swine flu epidemic took priority.
- Website as link in libraries – people in deprived areas are less likely to have home access to web. Not possible in the time frame due to website address being changed.

Outcomes

The evaluation was by anonymous questionnaire completed by the woman on attendance at her appointment on the mobile screening unit.

- 16% of the women who saw the materials said they had prompted them to attend (50 women).
- 3.5% of the total number of women who attended breast screening during this time period stated they were prompted to attend by the promotional materials.
- The women who were prompted to attend most noticed the materials in the appointment letter (78% = 39 women) and the GP surgery (46% = 23 women)

Comment:

The evaluation was not specific enough to identify if the appointment letter was the prompt or if it was the promotional material with the letter so caution should be exercised in interpreting these results

Unexpected outcome: sharing of good practice .GP practice sharing letter for non attenders to cascade to other practices – all willing to send out without additional help or payment. Implementing one of the recommendations in the Greater Manchester Health Practice Unit paper on “approaches to increase attendance at breast and cervical screening in Greater Manchester” 2009.

Uptake

Uptake information is available for 7 of the practices in the Stepping Hill and Victoria area.

Of the 6 deprived practices –:

5 had increased uptake

3 achieved the 70% target, which is one more practice than from the previous round

1 did not achieve the target and had a decrease in uptake (0.7% decrease).

The 1 non deprived practice achieved the target with a decrease in uptake (0.6% decrease)

Evaluation from healthcare staff perspective

This was by conversation, telephone or face to face.

All practices found the update useful and interesting and expressed that the teams had felt more confident in raising the issue.

Some practices requested further supplies of the promotional materials.

It prompted some practices to request information about other screening programmes.

Brinnington area

Keeping to the aim of working in partnership with the Neighbourhood Renewal Team to contribute to reducing inequalities in health by improving uptake in breast screening in some of the most deprived areas of the borough by promoting informed choice through promotional materials, community events and brief interventions by healthcare staff.

and incorporating learning from these experiences the Neighbourhood Renewal Team and Public Health staff have worked together on a series of joint initiatives to improve uptake in breast screening in Brinnington.

These include the GP team resource pack and update sessions detailed above.

The possibility of locating the van at First House where it would be more visible was explored. Constraints of time and finances made this impossible for this screening round.

Additional initiatives are focused on implementing the recommendations in the Greater Manchester Health Practice Unit paper on “approaches to increase attendance at breast and cervical screening in Greater Manchester” 2009.

1. Reminding women to attend

All invitation letters posted out at the same time to allow greater flexibility of women to alter their appointment

A generic reminder letter sent from the breast screening service call and recall.

Contact from the GP practice offering support – either by letter or phone.

Invitation letter wording altered to alter women that the screening van will move out of Brinnington.

2. Informing women about their own risk

A postcard developed and produced “in house” personalising the risks of breast cancer and benefits of screening will be sent to all women who do not attend their appointment. Offering appointments/telephone consultations prior to attending.

3. Community interventions

- Health trainer in Brinnington promoting breast screening and offering appropriate providing information and support during all contacts in the weeks before the screening started and whilst the screening taking place.
- Pharmacy staff given short update session, resource pack, and promotional materials.
- Breast awareness talk by breast awareness charity offer to women’s groups in the months before the screening started – one was arranged but then cancelled by the group.
- Neighbourhood Renewal Team community events – stall promoting screening.

4. Reducing anxieties

- Two open evenings were held for women to look around the screening van meet the staff, see the rooms were private, that no-one jumping up could see through the windows etc. The flyer was sent out in all the invitation letters. It was also on display in the pubs, clubs, shops, library and health centre in and around Brinnington. This flyer also contained the phrase “open your eyes to breast screening” in the 6 languages most commonly spoken in Stockport after English. This was to try to ensure that women who did not speak English were aware of the service and how to contact the interpreting service if they wanted to know more.
- Open evening flyer had photo of the women who work on the van.
- Postcard emphasised that you can bring someone with you if you are anxious.
- Travel directions – to van and also to Macclesfield breast screening unit if assessment required.

Promotional activities – emphasising the practical issues – ease of being screened, availability of female screeners, ease of making/changing appointment, how to get to the appointment.

- Purchase by Neighbourhood Renewal of a large banner displayed on the main street.
- Powerpoint presentation in library at First House from December 2009.
- National poster adapted with permission to add local service contact numbers displayed in all housing office properties, pharmacy, health centres, local shops, pubs, churches, care homes, Lapwing Centre, community centre, family centre, train station, Morrisons, Subway and Spar.
- Open evening flyer also distributed to these sites.
- Static display at library.
- Health trainer promoting service at Brinnington fun day.
- A series of talks at the Ethnic Diversity Service.

Evaluation

This will be supported by the Greater Manchester Health Practice Unit.

All women on attending the van will be asked to complete a questionnaire.

As many women as is possible will interviewed following their screen. The interviews will be conducted by Public Health and Neighbourhood Renewal staff.

Uptake figures will be available about 6 months after the women have been screened.

References

1. 2009 NHS Breast Screening Programme. Annual Review.
2. 2006 All breast cancer report. NHS Cancer Screening Programmes.
3. Coverage figures 2008 -09. NHS Stockport Public Health Department.
4. Breast screening programme, England 2008-09. The Information Centre.

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