



Exploring Low Uptake for Breast Screening in West Sussex Report

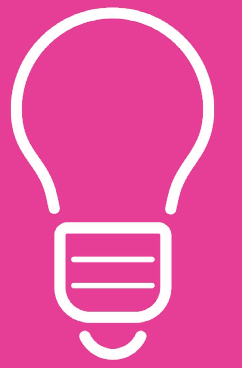
November 2023

Report by:

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Our approach



This project is a partnership between West Sussex County Council Health Protection and Screening Manager, NHS England, NHS South East Cancer Screening, West Sussex Breast Cancer Screening and Health Watch West Sussex.

The approach consisted of a survey and follow up telephone conversations and the information contained in our report is from the breast screening survey responses and the follow up conversations.

The survey



The survey was opened on the 18th of July till the 29th of October 2023. **12** Telephone conversations were conducted with local people who completed the survey and provided their contact details.

The survey was widely promoted across West Sussex, supported by the partnership.

And the survey has been fully or partially completed by **531** people. **484** responses are from West Sussex residents and **47** responses were received from residents living outside of the West Sussex area and do not form part of the report.

We'd like to thank all of the local residents who have supported this work, those who've viewed the initial survey, completed the survey, and the **12** people we spoke to who shared their stories to support this important piece of work.

Our findings



The survey and telephone conversations responses highlighted 1 recurring theme that staff at the breast screening centres conduct the breast screening process in a professional way and are efficient throughout from the initial contact to the final letter.

The survey informed that **66%, 322** responses do attend the breast screening appointment when invited, which is in line with West Sussex data for breast screening coverage 2021-2022.

Top reasons why breast screening invitations are not taken up



Number 1: Personal or work commitments **24%**

Number 2: Fear and embarrassment **17%**

Number 3: Lack of online booking **13%**

Reasons given for not attending when invited



Experience of the service, administration and information issues.

Staff.

Not being invited for the screening is aged over 70 years, not being invited for screening as aged under 53 years.

Transport and parking, dignity, pain and discomfort, disability and accessibility of the screening unit, working age and personal choice.

Other reasons given



Location of the appointment, unsure about the breast screening examination, inconvenient appointment, lack of suitable appointments and lack of support.

It is important to note that **20%, 98** responses are from carers and **4.5%, 22** responses stated that being a carer would affect their ability to attend an appointment due to time transport considerations.

Appointments which need to be flexible and work commitments.

Disability and health condition



The survey also captured that **16%, 79** respondents have a disability, **33%, 160** stated they had a long term condition.

5.7%, 28 responses stated that their health condition would affect them attending a screening. The main reason cited was impact of health condition difficulties accessing the screening and needing more flexible appointments and support.

Communication



Disappointingly, people stated they experienced **poor communication** from healthcare professionals.

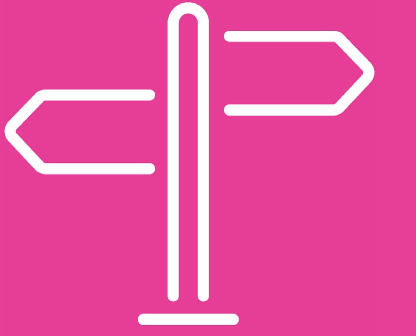
This included some people feeling not listened to, not treated with **dignity** by the process.

How staff communicated **instructions** during the procedure and when giving results.

Suggestions to increase breast screening uptake were provided by respondents as to what to what might help other people take up the invitation, and it is included more **flexible** appointments, such as being able to book a specific appointment.

A bit like booking a table in a restaurant to have an online option for appointments, a drop in session and appointment being available in evenings and at weekends.

Location



This was especially important for those with work and caring responsibilities. The location of the appointment needs to be provided locally and consider **parking, transport** and **location**.

Someone raised the issue of public transport in rural areas, which could offer an opportunity of partnering with local community transport schemes.

Another respondent stated that the mobile unit can be **too hot** during the summer as there is no air conditioning.

Other ideas shared



Promoting the service through social media and wider promotion within local communities.

Maybe a **roadshow** to various Women's Health groups using videos, including a short quote from a patient in the invitation letter, a description of the process and links to information and to promote reassurance that screening is done by women only.

To have on site or remote access to a nurse or health worker running internal health and well-being **campaigns**.

Other responses suggested promotion using **celebrities** and **TV stars**, such as those from Strictly Come Dancing, who have been diagnosed with breast cancer, and case studies or a quote was suggested to be included in the appointment letters.

A slight change could be made to the **screening letter** for those approaching 70 years from the current wording of not automatically inviting you.

To add the **correct details** of who to contact to continue the screenings. This would be more helpful and supportive to attendees.

Confirming the appointment by message along the lines of, “if we do not hear from you to confirm the appointment, we will offer it to someone else”.

With regards to accessibility, the letter could state that **if you need support**, do let us know as this would make people feel more comfortable to speak about with the team to to expect another person.

The **age of the screening** beginning and end was a cause of concern as cancer does not always have a physical sign of a lump, regardless of age. A number of people suggested that the screening should be clearer as to when it begins and continues until the age of 80 years.

In summary



There are many reasons as to why invitees to the breast screening invitation do not take up the appointment, such as arranging the **appointment, location, age range** and **access**.

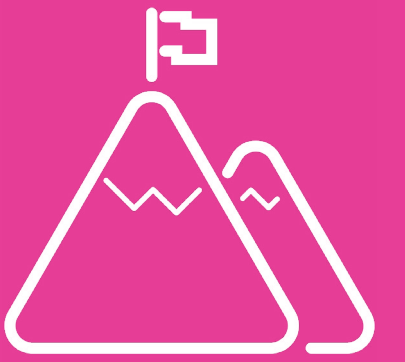
The top reasons stated for not attending included due to **work commitments, fear, embarrassment** and the **booking** process. The system does need to consider a more **flexible** appointment approach for those we care and responsibilities and disabilities.

From the suggestions shared by responders, minor changes to the **invitation letter** are needed, more flexible appointments. Considerations for **locations** with better **parking** and **transport** access.

Promotion of the service through social media and local communities. Maybe local **road show** to promote that women complete the screening to reassure.

One area that came through very strongly was how much respondents **appreciated** the **professionalism** and **efficiency** of staff throughout the breast screening process.

Next steps



This report has been shared with West Sussex County Council Health Protection and Screening Manager, NHS England, NHS South East Cancer Screening Lead and West Sussex Breast Screening Lead.

Our aim is that the findings contained in this report and supplementary information not published will help inform appropriate changes to be considered to improve the service, ultimately to increase the take up of the breast screening invitation service.

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