

Understanding uptake in the Bowel and Cervical Cancer Screening Programmes for those with Learning Disabilities or Mental Health Conditions in Barnsley

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Protecting and improving the nation's health

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INTRODUCTION

The Barnsley Health Protection Board recommended a work programme aimed at:

- Understanding uptake across Barnsley in the Bowel and Cervical Screening programmes for those with a learning disability or mental health condition
- identifying if the uptake was identical to that of the general population or if inequalities existed for these groups
- Recognising if any quality improvements are necessary to meet any additional requirements for those with a learning disability or a mental health condition

The work programme was conducted in collaboration with Barnsley Clinical Commissioning Group and NHS England/PHE Screening and Immunisation team.

METHODS

Quantitative methods was used to identify:

The number of patients registered per practice in Barnsley with learning disabilities or mental health condition and of those identified, the number of patients who had an appropriate cervical and bowel screen recorded

Qualitative methods was used to identify:

The practice processes for offering screening to people with learning disabilities and those with a mental health condition

18 out of 36 practices responded.

QUANTITATIVE RESULTS

Cervical Screening uptake reported for women with learning disabilities

QUALITIATIVE RESULTS

Qualitative responses were grouped into common themes

Table 1 Those aged 25 to 49 years



90 Women aged 50-64 80 Number identified with 70 learning disabilities 60 Number Received cervical 50 screen in last 5 years 40 30 Number not screened 20 10

Table 2 Those aged 50 to 64 years

Cervical Screening uptake reported for women with mental health conditions Table 3 Those aged 25 to 49 years

 Table 4
 Those aged 50-64 years



Bowel Screening uptake for learning disability



mental health conditions

1. Identification of Patients

There were robust processes in practices to identify patients with learning disabilities through READ codes and also the GP practice Learning Disability Register, however the identification of patients with mental health conditions was more complex with no systematic process seen across practices.

2. Practices demonstrated varied ways on how they attempt to respond to individuals needs with learning disabilities and those with a mental health condition. These included :

- Liaison and referral to learning disability service
- Annual learning disability health checks
- GP and Nurse lead with specialist training
- Individualised approach dependent on patient
- Non-attendance follow up by clinician
- Clinical and admin meeting to discuss any new cases or existing cases which may require a review or additional support
- Relationships built with relatives
- Various appointment options offered i.e. at the end of a surgery to ease access and avoid waiting in the waiting room
- Alerts added to the patient screen

3. There was no systematic process demonstrated across practices on how they ensure that the individual is informed about and understands the cervical screening programme. However a number of practices demonstrated that they:

- Have carers and client discussions
- Use literature suitable for those with learning disabilities
- Practice invitation letter with pictures

Table 5 Those aged over 60 years



Table 6 Those aged over 60 years



29% of women aged between 25 to 49 years and 27% of women aged between 50 to 64 years with Learning Disability had routine cervical screen reported compared to 71% and 78.2% respectively n the general population.

• 40% of women aged between 25 to 49 years and 44% of women aged between 50 to 64 years with a Mental Health Condition had routine cervical screen reported compared to 71% and 78.2% respectively in the general.

• 61% of people aged over 60 years with a Learning Disability and 58% with a Mental Health Condition had routine Bowel Screen reported which is similar to those in the general population at 56%.

Notice board displays

4. Practices demonstrated a number of reasonable adjustments they made to support individuals with learning disabilities and those with mental health conditions through the cervical screening pathway. These included:

- Familiar nurse does the screen
- Pre-appointment with nurse available
- Longer appointment times so that patients can receive reassurance about the procedure and to assess fears and anxiety through role play
- Use of models to explain the procedure. Looking, feeling and touching speculum and how it is used

5. There were systematic processes reported by practice s in the process to make decisions about a patient's ability to be involved in the screening programme. These included:

- Use of mental capacity assessment
- Use of best interest forms
- Discussions including Doctors, Nurses, Carers and relatives sharing of information as a group

DISCUSSION

• The quantitative findings mirror data from the Joint Health and Social Care Self-Assessment Framework in 2014 ¹ which showed that uptake in all the cancer screening programmes was lower for those with learning disabilities, with the greatest difference seen in the cervical screening programme compared to population as a whole. • There is no national data available for people with mental health conditions to be able to compare. The data for Barnsley demonstrates similar uptake in bowel screening for people with mental health conditions compared to the general population, however a lower uptake in the cervical screening compared to the general population. • The qualitative findings demonstrate there are some systematic processes across all the reporting practices to identify patients and make reasonable adjustments for people with learning disabilities, however it was more sporadic for those with a mental health conditions.

CONCLUSIONS

1. There was considerably lower uptake of the cervical screening programme for those with a

ACKNOWLEDGEMENTS

Barnsley GP practices that participated in the study. Barnsley Clinical Commissioning group Barnsley Local Authority DBHFT Community and Engagement team and Mencap visitors for the use of the photograph. REFERENCES

- There was limited evidence on how practices engage with other services who have face to face contact with those with learning disabilities and mental health conditions to have a collective approach to support individuals through a screening pathway
- The quantitative data confirms that additional focus is required to reduce the number of women who have not taken part in the routine cervical screening for both patients with a learning disability and patients with mental health conditions.

learning disabilities and those with mental health conditions compared to the general population.

2. There was no difference in the uptake for the bowel screening programme for those with a learning disability or those with mental health conditions compared to the general population.

Joint Health and Social Care Self-Assessment Framework in 2014



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