



NHS Health Screening and Health Check Awareness for BME Communities in Trafford

EXECUTIVE SUMMARY



SAVING LIVES PROJECT

MARCH 2016

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1 OVERVIEW

- 1.1 Saving Lives Project was established by VBME-T with Public Health, Trafford Council and Clinical Commissioning Group (CCG) NHS in March 2015 with a one year delivery plan, focusing on improving the public health screening uptake in BME communities. While working with existing services, the aim of the project was to reduce inequalities and improving health outcomes in the North Trafford locality, create awareness and ultimately improve results in an increased number of people from BME communities attending screening and health checks. This would be reflected by the Public Health Outcomes framework indicators.
- 1.2 National screening programmes and NHS Health Checks show that there is a significantly low number of BME take up in the North Locality of Trafford, which has the highest levels of deprivation and also a high population of Black and minority ethnic (BME) communities in comparison to Trafford's average.
- 1.3 Trafford Health and Wellbeing strategy 2013-16 states that People of Black or Asian ethnicity are at higher risk of developing long-term health conditions, such as diabetes or heart disease. It is also apparent that in relation to cervical screening life expectancy for women in Gorse Hill, is 5 years less than women in Hale Central. Early diagnosis and disease prevention can significantly improve the health of residents in Trafford and the awareness-raising of the Savings Lives Project has been vitally important.
- 1.4 Health professionals working in support of VBME-T Saving Lives Project across the North locality have been from Trafford Metropolitan Borough Council, Trafford Public Health, Clinical Commissioning Group, Cancer Research UK.

2 METHODOLOGY & APPROACH

- 2.1 The Saving Lives Project selected a combination of qualitative and quantitative measures; as well as primary data, set targets, monitored outcomes, collected feedback from the community events, evaluated the project outcomes, and held an end of project event to share and inform on outcomes with the Trafford community.
- 2.2 The project delivery consisted of:
 - Events held in the community to promote awareness and highlight concerns
 - Outreach work within the BME communities to promote Public Health campaigns
 - The setting up of an established BME Health Steering Group
 - Identification of the perceived barriers to cancer screening and health checks
 - Sharing information on factors related to the lack of BME take up with the appropriate professionals
 - Monitoring of the work of the project, particularly in terms of any improvements
 - Medical practice sessions held to communicate directly to patients over the phone to encourage take up
 - Talks and presentations at events or community gatherings
 - Distribution of written information in community languages: Gujarati, Hindi, Punjabi, Urdu
 - Organisation of independent health/wellbeing events
 - Telephone calls from GP surgeries to non-attenders of screening in low-uptake groups to discuss and raise awareness of screening programmes
 - Educational on healthy nutrition, including pampering was provided as a bonus to attendees

3 OUTCOMES

3.1 Quantitative outcomes of the Project exceeded targets:

Total number of events/sessions held in year 18 sessions	18 (target 6)
Average Number of people attending per event	15 (target 10)
Number of individuals reached through Outreach and Health events sessions	270+
Percentage of clients assessing the session as good/very good/excellent	90% (target 50%)
Total patients contacted residing in the North Trafford area	777 (target 300)
Total Patients booked for smear test (no target set)	169
Total patients booked for health checks (no target set)	133 [70 Male & 63 Female]

3.2 Feedback results from attendees are:

Attendees who agreed that they gained information from the sessions	95%
Attendees who agreed that it was useful to have these sessions	90%
Attendees who agreed to attend screening	85%
Attendees who were happy with us to follow-up with them in the future	80%

3.3 During VBME-T Saving Lives Project intervention two patients informed VBME-T staff that the cervical screening has detected abnormal cells and they have been invited for the treatment; hence two lives have been reported saved that we are currently aware of during this project.

3.4 Range in Uptake of Public Health Screening Programmes in Trafford

Programme	Trafford Average	North Locality Average	National Target
NHS Health Checks	4.5%	5.1%	20%
Breast screening	70.1%	65.6%	80%
Bowel screening	54.4%	43.1%	55%
Cervical screening	79.9%	73.8%*	80%

Source: Trafford Clinical Commissioning Group, (2014/15) Local GP Score Card

3.5 VBME-T has contributed to the North Locality in this area and is recognised by its track-record of providing health projects in line with reducing health inequalities. This has been done by creating awareness in the local community of these health screenings over past years.

Further information on previous projects undertaken can be found in the following VBME-T reports found on our website www.voicebmet.co.uk

- *Cancer Outreach Project 2012 report*
- *Raising awareness for Cancer, Stroke and Heart diseases in the BME communities of Trafford 2013 report*
- *Cervical Screening for BME communities in Trafford 2015 report*
- *NHS Health Screening & Health Check Awareness for BME communities in Trafford 2016 report*

3.6 Out of 13 people having health checks at the Saving Lives project events, 8 were sent back to their GPs with an action to follow-up. This was a good initiative for VBME-T to have as an addition to the original project to create awareness with regard to cardiovascular health and other NHS screenings.

3.7 It is important to note that additional support also was provided by blueSCI to further extend the Saving Lives Project events.

3.8 During a visit to VBME-T Saving lives event by a health nurse from CRUK, a Question & Answer feedback session was held, which provided CRUK with information to support their new trials of weekend cervical screening clinics to be implemented.

3.9 The Steering Group meetings have generated a number of ideas to improve take-up. Therefore, it is heartening to acknowledge that CRUK will now be adopting a model with a similar approach to VBME-T of contacting patients to improve uptake. This will be in the form of **Non-Medical Champion** working in surgeries.

4 BARRIERS, MYTHS & MISCONCEPTIONS

- 4.1 *'The main reasons for non-access of cervical screening services for women aged 25-34 in NHS ...were fear and embarrassment. This was fear of pain associated with having a smear test and fear of the unknown..... Specifically, it is the idea of not knowing enough about the screening procedure and the reasons screening is important which leads to avoidance'.*
(Farrington, April 2010)
- 4.2 Despite the knowledge and awareness spread by NHS and other health organisations, there are still some misapprehensions due to limited knowledge about Health screening /checks.
- 4.3 Some of the following reasons mentioned are noted below on the Saving Lives Project for reasons of declining to book a cervical smear test:
- Other Health issues such as suffering with other illnesses, pregnancy, irregular bleeding.
 - Mental trauma or bereavement
 - A few individuals mentioned that they believe whatever is destined is going to happen
 - Unmarried and Sexually inactive women declined as they think this test is only for the sexually active
 - It was a painful experience in the past and was sent to hospital after several tries.
 - For Brest screening a women responded, *'I know it is a woman who does it, but it is painful and embarrassing'*
 - In some cases people were reluctant to book due to work commitments and were keen to book for test on weekends.

5 RECOMMENDATIONS

- 5.1 Develop initiatives from the GPs and medical practices by sending letters or text messages to invite patients to book the test. This communication would act as a catalyst if it is done in the patient's own community language where possible.
- 5.2 Doctors could ask the patients to book for screening when they see patients at the surgery.
- 5.3 Once the screening appointment is booked, a text message reminder should be sent to the patient.
- 5.4 Health Service providers should invest in community groups to work proactively with NHS for delivering awareness on health issues and supporting the reduction of inequality within Trafford.
- 5.5 Commission tailored awareness for the BME communities to change myths and mindsets.

6 CONCLUSION

- 6.1** Saving Lives Project has been an initiative taken to reduce health inequalities in Trafford by creating awareness in regards to NHS Health Screenings and Health Checks in the BME communities where the uptake for screening has been really low. This project has eventually helped to increase the uptake in the North of Trafford.
- 6.2** Feedback provided by the medical practices and the anecdotal data depicts that this project has helped to save lives. Public Health and CCG Trafford has expressed gratitude on the projects performance and the successful outcomes achieved in comparison to the targets specified in the service specification document. Therefore Saving Lives Project has the capacity to significantly change the behaviour of BME communities in relations to improved uptake in the North of Trafford. Saving Lives Project has been utilised as a model for change in the practice by CRUK, and also a new initiative introducing of Saturday and evening Cervical Screening Programmes.
- 6.3** The Saving Lives health events have brought significant outcomes for the community groups and organisations by providing a platform to spread the health message across Trafford to the BME communities such as Pennine Care, Smoking Cessation Trafford, CRUK (Cancer Research UK), Alzheimer's society, TDAS (Trafford Domestic Abuse Services), Trafford Partnership.
- 6.4** This positions VBME-T as a strategic organisation keen to work in partnership with NHS, CCG, Public Health and Trafford Council to reduce health inequalities, utilising it's good working relationships not only within the community but with health professionals and organisations.

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