

Primary Care Breast Cancer Screening Improvement Toolkit:

An information and resource pack to support with breast cancer screening awareness and uptake

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This information toolkit offers an overview of the PCN Network Directed Enhanced Service 25/26. It is designed for primary and community care colleagues and provides a variety of information, resources, and educational opportunities to help improve uptake of breast cancer screening.

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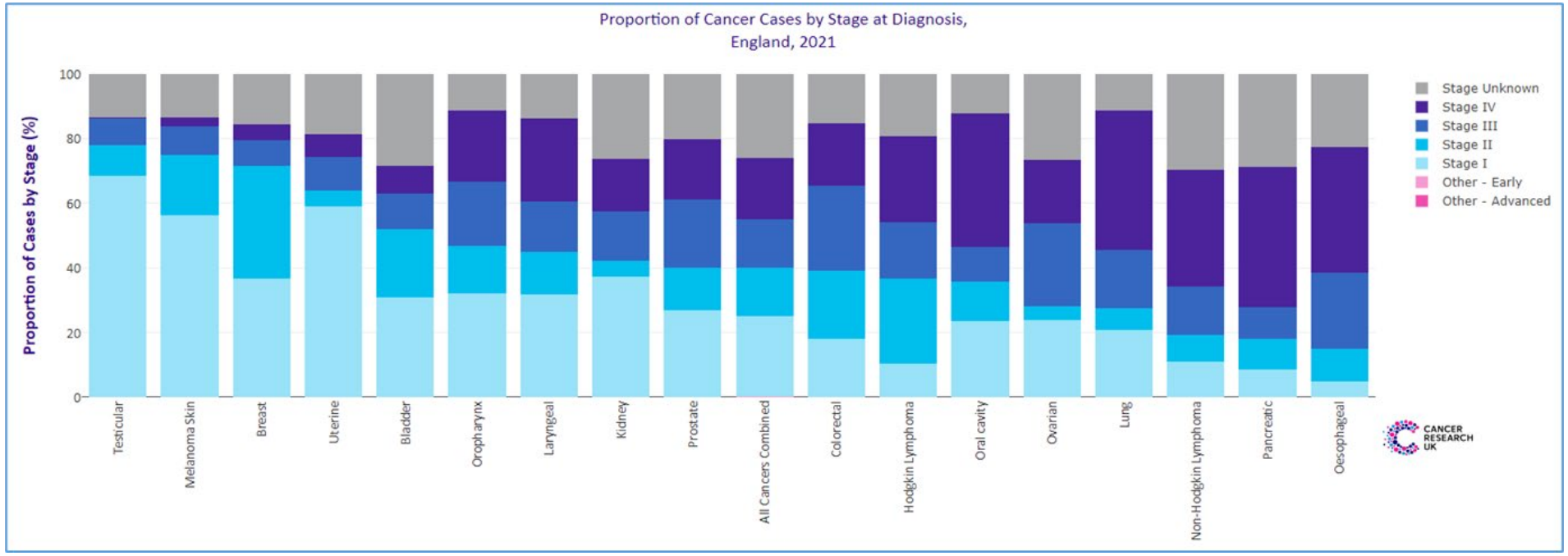
Why is diagnosing cancer early so important?

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If a cancer is diagnosed at an early stage, there is a **much greater chance of being able to treat the disease successfully**, often with less invasive procedures and fewer long-term side effects. But too many people are being diagnosed with cancer at later stages.

It is also important that we **diagnose cancers as fast as possible so that treatment can start quickly and as accurately as possible** - for example, identifying the genetic make-up of an individual's tumour tells us how best to treat it.

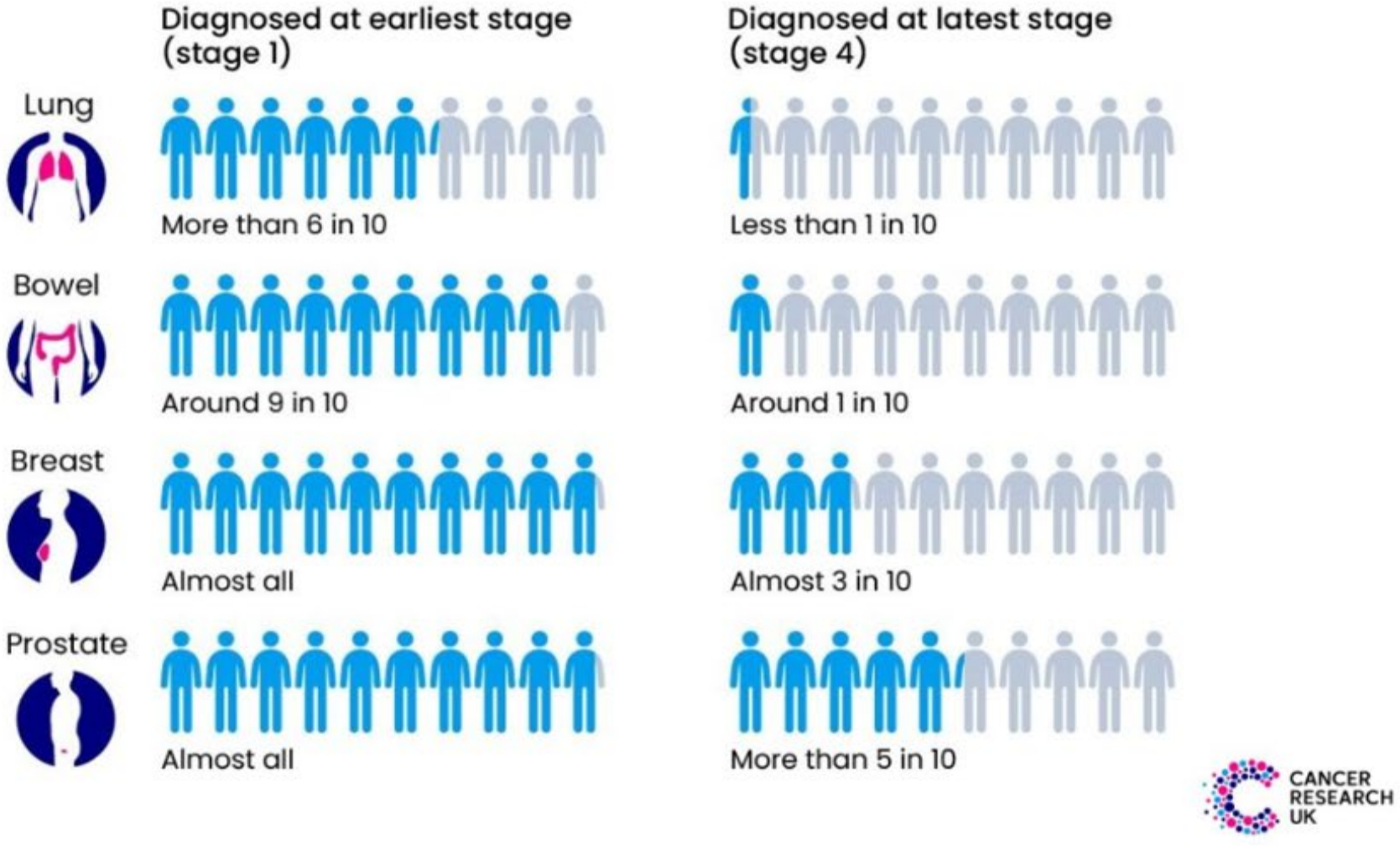
People diagnosed earlier with cancer are not only more likely to survive, but importantly also to have **better experiences of care, lower treatment morbidity, and improved quality of life** compared with those diagnosed late.



Reducing late-stage diagnosis is vital

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Finding and treating cancer earlier increases 5-year survival



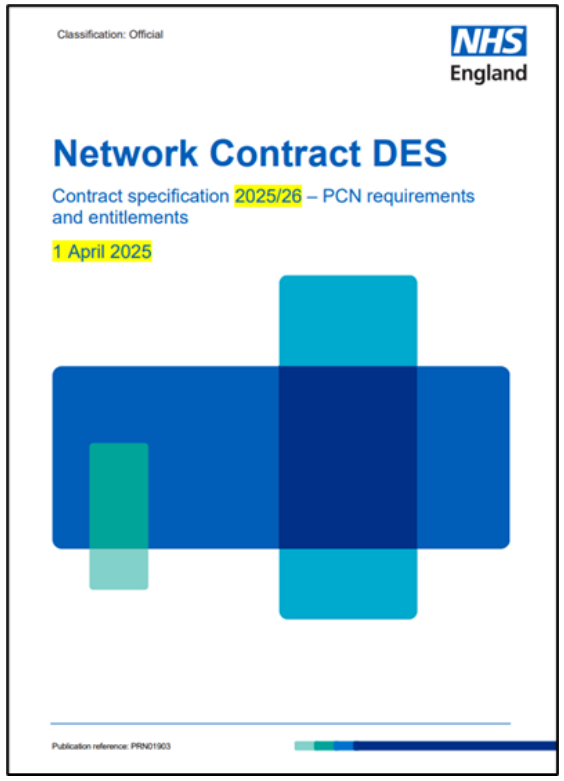
Sources: NHS Digital, Office for National Statistics

CANCER RESEARCH UK

PCN Directed Enhanced Service

The Network Contract Direct Enhanced Service (DES) underpins the role of PCNs in empowering general practice within the wider NHS and improving the range and effectiveness of primary care services.

At a PCN level, practices can discuss variation, build consensus, implement best practice and hold each other to account. They can potentially benefit from operational economies of scale and a shared primary care workforce.



Essential Resources:

- PCN DES specifications for 2025-26
- PCN DES Video Mini-Series **25/26**
- CRUK GP Contract Hub **25/26**
- CRUK PCN top tips **(2022)**

Note: there are no national requirements for monitoring of the early cancer element of the PCN DES and the only monitoring and direct funding is for IIF element. However, we would encourage PCNs to feedback using the Des checklist at the end of this toolkit so we collate learning and exchange ideas.
Send to england.tvcaadmin@nhs.net

PCN Directed Enhanced Service: Early cancer 25/26 – **No change**

The PCN Directed Enhanced Service ask for two things focused on cancer:

1. Review referral practice to improve early detection with clear actions and milestones
2. **Work with partners to improve screening uptake (this toolkit)**

The Des also focuses on health inequalities:



2.1.6 A PCN should **"actively seek to reduce health inequalities across its Core Network Practices in line with guidance and the CORE20PLUS5 approach."**

2.1.7 A PCN should **work in partnership within local communities to address health inequalities** that are amenable to primary care interventions. The CORE20PLUS5 approach provides a helpful focal point for galvanising action and guiding targeting and outreach regarding conditions which disproportionately affect people from areas of greater deprivation.

2.1.8 Two of the five clinical areas set out in the of CORE20PLUS5 approach for adults focus on improving cardiovascular disease (CVD) prevention and diagnosis, and **early cancer diagnosis**.



Improving breast cancer screening uptake

NHS Breast Cancer Screening Programme: Overview

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Eligibility:

- Patients between the ages of 50 and 71, who are registered with a GP as female, will be invited for breast screening every 3 years. Patients over 71 years of age can request screening.
- Transgender and non-binary patients may be automatically invited but they may need to talk to their GP surgery or call their local breast screening service to ask for an appointment. More guidance is available at Best for My Chest.
- People with hearing or speech difficulties, you can use the Relay UK service. Dial 18001 then 0800 707 60 60 from your textphone or use the Relay UK app.

Why is breast cancer screening so important?

- Breast cancer is the most common cancer in the UK with around 55,000 women diagnosed each year.
- Breast screening finds abnormal cells before they turn into cancer, allowing early treatment
- Regular breast screening has been shown to reduce the risk of dying from breast cancer by identifying tumours when they are smaller and less likely to have spread. It is estimated that breast screening prevents around 1,300 deaths from breast cancer in the UK each year.
- Breast screening programs help raise awareness about breast health and encourage women to be vigilant about changes or symptoms.

Developing a plan

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It only takes small steps to improve - *example*

STEP 1	Baseline analysis identifies x% of people eligible for cancer screening have not responded to invites.
STEP 2	Conduct a review or engagement to understand the reasons behind non-attendance
STEP 3	SMART aim: The PCN/ Practice aims to contact x% of non-responders over the next six months
STEP 4	Think about how you will do this e.g. phone call/AccuRx/text message/NHS App/ care coordinator
STEP 5	How will you change practice e.g. with videos/ leaflet, myth busting etc/ clinic times/ use of extended access
STEP 6	Repeat analysis to evaluate impact of changes and share learning

Resources and tools for health professional:

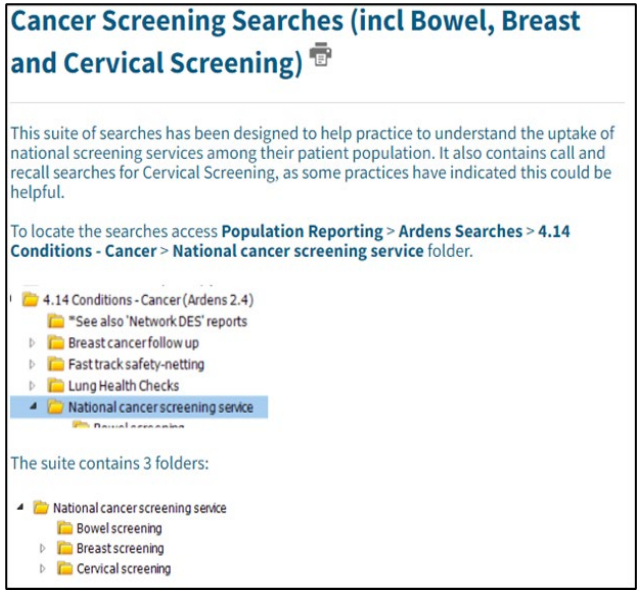
- CRUK Breast Screening
- CRUK Supporting access and tackling barriers to breast screening
- Macmillan Cancer Screening Quality Improvement Toolkit
- Help Us Help You cancer screening campaigns
- Screening Saves Lives which can be delivered locally
- Breast Screening: Programme Overview
- National Screening Programmes: Breast Screening - GatewayC
- Breast implants and breast screening
- Breast screening with family history and/or inherited risk

It's important to review and **understand your screening data** – use PCN level reports from OHID Fingertips, and Gov.uk

Practice level actions: Identifying non responders

Ardens:

- Ardens have produced a suite of searches designed to help practices to understand the uptake of national screening services among their patient population. Use Ardens to **run a search** for eligible patients who have not been screened in the last 2 years, including newly eligible patients.
- Ardens also contains call and recall searches for breast screening, as some practices have indicated this could be helpful.
- To locate the searches access **Population Reporting** > **Ardens Searches** > **4.14 Conditions –Cancer** > **National cancer screening service** folder.



Ardens Support Desk: Monday - Friday (08:30 - 18:30) www.ardens.org.uk/

Ardens SystmOne Support: support-systmone@ardens.org.uk

Ardens Manager Support: support-manager@ardens.org.uk

TOP TIP: Use SNOMED codes to monitor the impact of any interventions

Practice level actions: opportunistic Conversations (1)

- Making Every Contact Count (MECC) encourages health professionals to use everyday interactions to promote positive health behaviours, including cancer screening. Coding these conversations can support local audits and quality improvement initiatives.
- MECC is not limited to GPs and nurses. Health care assistants, pharmacists, receptionists, social prescribers, and volunteers also have valuable opportunities to share health-positive messages.
- Integrating MECC into routine care helps healthcare providers identify people who are overdue for screenings and motivates timely participation



Click on the image above to access e-learning for health training resources and MECC toolkit

What you can do:

- **Systematic Screening Checks:** Implement prompts that automatically display a patient's screening status during GP visits.
- **Staff Training:** Equip healthcare professionals with the skills to routinely ask about cancer screenings during consultations, making it a regular part of the conversation.
- **Automated Reminders:** Utilise AccuRx / SMS, the NHS App, email, or patient portals to send personalised screening reminders ahead of appointments.
- **Opportunistic Outreach:** Encourage staff to review screening history and promote participation during all healthcare interactions, whether addressing minor illnesses, managing chronic conditions, or administering vaccinations.

Practice level actions: opportunistic Conversations (2)

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You can use the MECC approach to improve screening uptake: example

Start the conversation	use routine appointments such as vaccine clinics, blood pressure checks and chronic condition reviews to ask patients if they are up to date with their breast cancer screening. "I noticed you're due for your breast screening; it's a quick test that can prevent breast cancer. Would you like me to help book an appointment?"
Normalise and reassure	Keep the conversation casual, normalise talking about the screening process. "Have you had any recent changes to your breasts?"
Address concerns	Provide clear information about the test, how to do it and why it's important. "The test is quick and done by a trained health professional. Some women find it uncomfortable, but most say it's not painful, and it really helps catch problems early."
Address barriers	Barriers such as fear, embarrassment and concerns about hygiene should be considered. Offer practical support, such as information on how to use the kit. "If you want, I can help book an appointment that suits you, including options for female practitioners or weekend clinics."
Signpost and support	Signpost patients to helplines and guidance. Eligible patients can request a test kit if they have not received one or if they have lost the kit they received. Breast cancer screening helpline on 0800 707 6060, or consider the TVCA breast screening videos. "Here's some information you can look at, and I'm here to answer any questions whenever you're ready."

Practice level actions: Communication tools

AccuRx:

AccuRx is a communication platform for healthcare professionals and patients and is primarily used in GP practices and reduces the number of calls made to patients.

- Increase uptake on invites through SMS Text service
- Enables information to be sent directly to patients
- Messages can be saved and coded, and usage can be tracked.

Text messaging, telephone calls and the NHS App:

- Batch text messaging is available at practice level using SystmOne and EMIS (at a cost) and can be used to post/host a URL link. Free messaging is available via NHS App. See gov.uk principles of screening text messages.



Example texts: You may have received an invitation for breast screening. Please contact XXXXX XXX Gateway to book – it's simple and could save your life. For more information visit: www.nhs.uk/tests-and-treatments/breast-screening-mammogram/"

OR

"You may have received an invitation for breast cancer screening. For more information watch this Thames Valley Cancer Alliance video about breast cancer screening breast screening video "

Example call script: "You've been sent an invitation for breast screening. Just checking if you have any questions or need help with anything?"

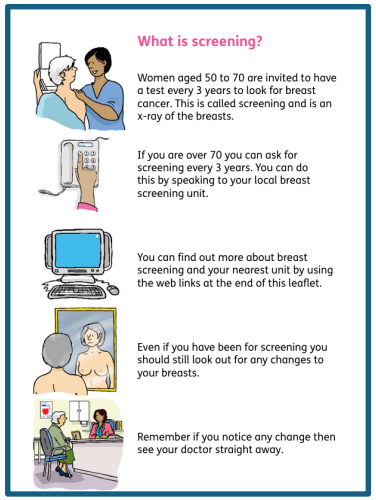
Supporting priority groups: learning disabilities

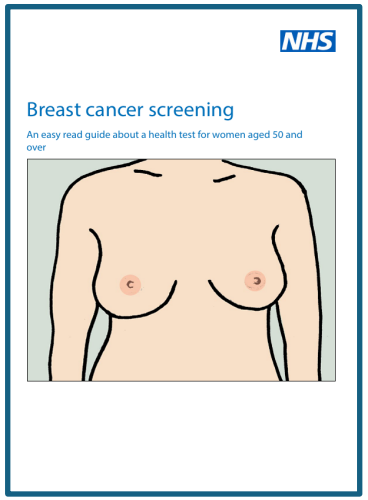
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- Evidence shows that eligible people with a learning disability are less likely to complete their breast cancer screening compared to those without, leaving them at risk of undetected breast cancer.
- NHS England easy read leaflet to support people with learning disabilities to access breast screening
- NHS England also have an easy read leaflet about breast cancer awareness, checking your breast and breast cancer screening
- West Yorkshire and Harrogate Cancer Alliance have produced breast cancer screening videos with subtitles to support patients with learning disabilities: Polish, Punjabi, Urdu, British Sign Language

For health professionals: Watch this NHS England video about how to support your patients with learning disabilities and top tips for having a conversation about breast cancer screening.

The South East London Cancer Alliance, has collaborated with the Baked Bean Charity and the Guys Cancer Academy, Learning disabilities and cancer educational module. The training module is designed to help healthcare professionals better support people with learning disabilities in accessing cancer care and screening services







Click on the image to access resource

Supporting priority groups: LGBTQ+ and non binary communities



There are a number of resources available for the trans community to help understand more about cancer screening and whether they should be screened:

- NHS population screening: Information for trans and non-binary people
- Cancer Research UK public information to include trans and non-binary
- OUTpatients, the UKs leading LGBTQ+ charity Cancer risk and screening



You can also access training and resources:

- Gateway C cancer keys - Barriers to early cancer diagnosis in the trans community
- Ardens have templates and resources to support at practice level Ardens LGBTQ, Non-Binary and Gender Dysphoria resources – screening

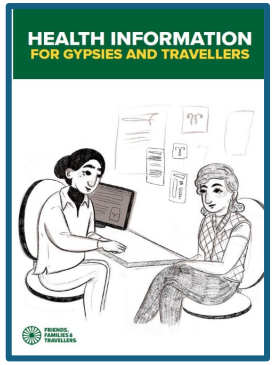
Supporting priority groups: language and accessibility (1)

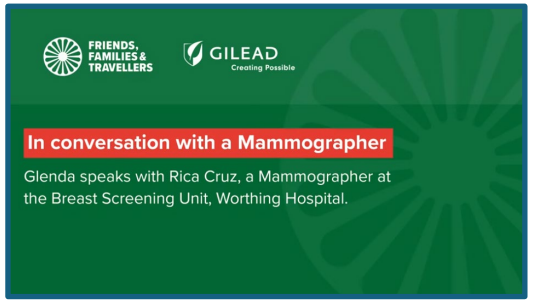
- The NHS breast screening information leaflet for people considering screening is available 30 languages in addition to English. Alternative formats can be requested by email england.contactus@nhs.net or telephone 0300 311 22 33.
- NHS audio version of Help Us Help You breast screening poster is available for people with low literacy or visual impairment
- NHS Breast screening awareness TV advert with British sign language interpreter.
- In partnership with the Screening and Immunisation team, the Surrey and Sussex Cancer Alliance have co-designed a Nepalese Breast Screening Invitation Leaflet

Traveller community:

- The Friends, Families and Travellers organisation have worked with the Gypsie and Traveller community to develop a helpful breast cancer screening resource for Gypsies and Travellers and a guide to reducing the risk of cancer.
- You can also view Cancer Awareness videos by visiting the Friends, Families and Travellers YouTube Channel, including a conversation with a mammographer.







Click on the image to access resource

Supporting priority groups: language and accessibility (2)

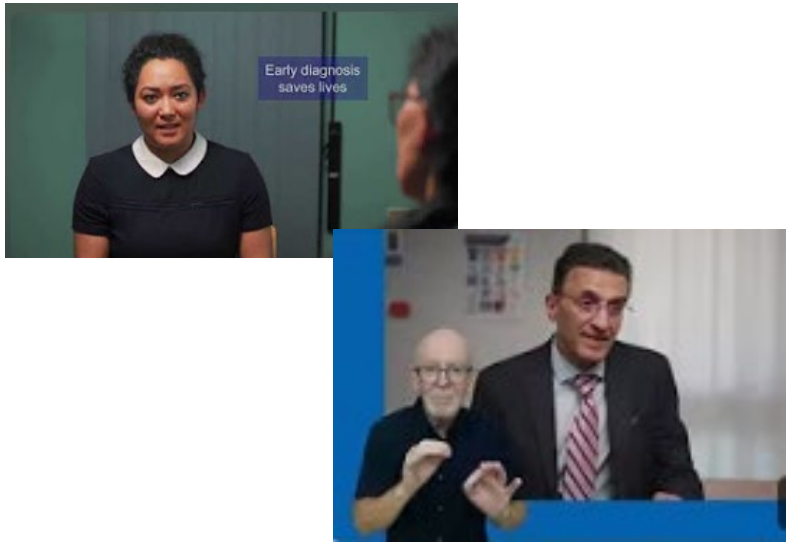
A new set of educational videos has been created to support Primary Care and help patients understand the importance of cancer screening.

The videos explain:

- How to use the symptomatic faecal immunochemical test (FIT)
- Cervical screening
- Breast screening
- Bowel screening

To make this information accessible to more people across the Thames Valley, the videos are available in:

- British Sign Language (BSL)
- Hindi
- Polish
- Gujarati
- Nepali
- Punjabi



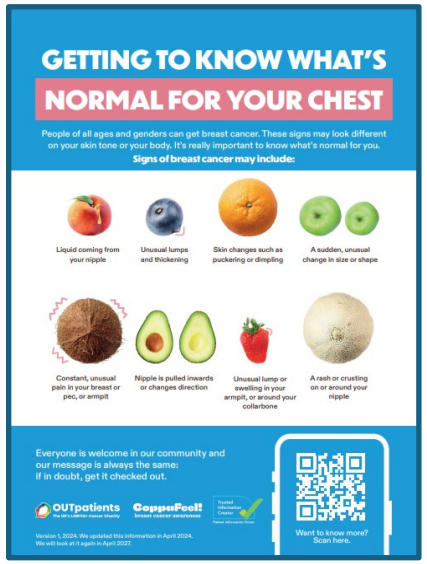
- Link and QR code to full length videos: https://bit.ly/screeningvideos

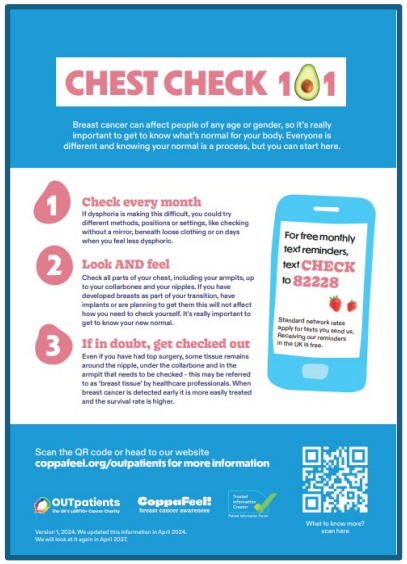
- YouTube link to reels for social or your waiting room display board https://www.youtube.com/playlist?list=PLEm1CvSoQcDLK9EiVyfCa1dXWwLs9-Dbj)

Resources for your waiting room

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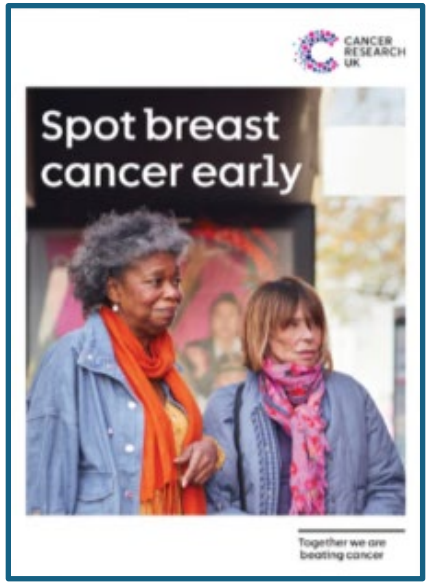
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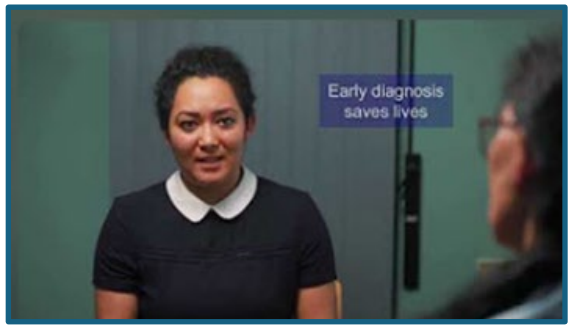












YouTube link to reels for social media or your waiting room display board

The role of the Cancer Care Coordinator

The Care Co-ordinators role requirements stated in the Network DES Contract can help to deliver many of the objectives expected of Primary Care for Cancer patients

A cancer care co-ordinators can:

- Support the delivery of cancer priorities within the Network Contract DES
- Support achievement of Quality Outcome Framework (QoF) Indicator
- Provide opportunities to support personalised care planning throughout the cancer pathway

They can do this by:

- Providing extra time and capacity, with a personalised patient centred approach;
- Providing expertise to support patients when preparing for clinical conversations;
- Following up discussions with primary care professionals;
- Working closely with the GPs and other primary care colleagues within the primary care network (PCN) to identify and manage a caseload of identified patients; and by
- Ensuring that a patient's changing needs are addressed.

For more information about Cancer Care Co-ordinators please click here to watch a webinar from Wessex Cancer Alliance

How can a cancer care co-ordinators support y patients?

Thames Valley Cancer Alliance

Prevention:
- Identify at risk populations through QoF Register: including obesity and smoking
- Lead on advertising preventative advice within surgeries, social media and websites
- Signposting to services (lifestyle/support)
- Coding

Screening:
- Identify low screening rates, non-responders, low participation groups
- Run searches through GP systems
- Make contact with patients to provide information and support/encourage uptake

Early diagnosis and safety netting:
- Arranging follow-up GP appointments, providing information and leaflets to patients
- Promote use of digital tools to aid decision making and safety netting
- Follow up patient groups that may not attend appointments
- Monitor completion of FIT
- Monitor suspected cancer referral and escalate breaches
- Audit PCN Safety Netting process
- Care navigation

Personalised Care:
- Coordinate care for anyone diagnosed with cancer in the practice (signposting)
- Prepare the patient for cancer care reviews
- Help maintain the palliative care register

For more information about the ARR roles please click on the links below:

Network Contract Directed Enhanced Service - Contract specification 2023/24 – PCN Requirements and Entitlements (england.nhs.uk)

Care Co-coordinator recruitment pack This contains a sample JD, person specification, sample advert and example interview questions

Workforce development framework

Competency framework