

Screening and Immunisation Survey Report

Version 1.0

December 2019



Screening and Immunisation Survey Report

1. Introduction

Healthwatch Worcestershire gathers feedback about local health and care services and makes recommendations to those who run them about how they could be improved from a patient, service user and carer perspective.

1.1 Why this work?

The **NHS Long Term Plan**, published in January 2019, sets out the vision of how the NHS will develop over the next ten years and makes a commitment to improve people's health through prevention.

- The NHS Long Term Plan is our opportunity to not only treat people, but also prevent them from getting ill in the first place

A vital part of prevention against illness is screening and immunisation. In England the NHS runs national programmes for screening and immunisation. There have been a number of reports recently in the media about the need to increase awareness and uptake of screening and immunisation. There are also currently a number of campaigns and initiatives to promote their uptake.

Screening

Tests to find out if someone has early stages of illness or identify risk factors associated with ill health.

This includes:

- National cancer screening programmes - Bowel Cancer, Breast Cancer and Cervical Cancer screening
- National non-cancer screening programmes - Abdominal Aortic Aneurysm, Diabetic Eye Screening, ante-natal and new-born screening
- Children's health screening - National Child Measurement Programme, hearing, sight and dental checks

Improving uptake of screening and early cancer diagnosis is a key priority within the NHS Long Term Plan. As a result, an Independent Review of Adult Screening Programmes in England has been carried out and was published in October 2019. The review states that currently over 10 million people a year take up screening

invitations out of the 15 million who are invited and that there has been a decrease in the proportion of women being screened for both Breast Cancer and Cervical Cancer. The report suggests there is a need to make booking of screening appointments as simple and convenient as possible to increase the take up.

Figures show that approximately 25% of women invited for Cervical Cancer screening do not attend. As a result Public Health England launched a national campaign to increase uptake in March 2019. Alternatives to the current screening, including home testing kits are currently being trialled.

Another priority within the Long Term Plan is ensuring children get the best start in life, with particular focus on reducing childhood obesity.

Immunisation

Vaccinations or injections to protect us against infection or disease.

This includes:

- Immunisations for babies and pre-school children - including Measles, Mumps and Rubella (MMR)
- School age immunisations - including HPV and meningitis
- Children's flu immunisation
- Adult immunisations including flu, pneumonia and shingles

The World Health Organisation has declared that the UK is no longer considered 'Measles free' due to a drop in the take up of the childhood MMR immunisation. Immunisation rates below 95% lose the so-called herd immunity effect, and this can put other children at risk who are not able to be immunised.

A report by the National Audit Office published in October 2019 suggests that there is not currently a consistent approach by NHS England and Public Health England to engage with 'under-served' groups, such as travellers, recent migrants and some religious faith groups. The report also found inconsistencies with how parents are contacted about booking immunisations for their children.

There has been recent discussion about whether or not immunisations for children should be made compulsory by the government.

Awareness and uptake of immunisations amongst adults is also a current issue. This autumn Public Health England has launched its largest seasonal flu immunisation campaign. They report that last year about 1,700 deaths were related to flu, but less than half of those in some of the target groups were immunised.

Screening and Immunisation in Worcestershire

The majority of screening and immunisations programmes in Worcestershire are commissioned by the NHS England West Midlands Screening and Immunisation Team (SIT) comprising Public Health England and NHS England staff.

Screening programmes delivered in schools in Worcestershire are commissioned by the Worcestershire County Council and Worcestershire Clinical Commissioning Groups.

Commissioners provided Healthwatch Worcestershire with information about the providers for the various programmes in Worcestershire in October 2019. Providers include GP Practices, Worcestershire Acute Hospital Trust, Worcestershire Health and Care Trust, University Hospitals Coventry and Warwickshire, EMIS care and for school age immunisations the Coventry and Warwickshire Partnership Trust.

As the primary commissioners we also requested data from NHS England relating to the take up of screening and immunisation broken down by equalities dimensions of gender, age, disability and ethnicity. We were told that this information is not routinely collected or collated for Worcestershire.

1.2 What did we do?

As part of our summer engagement activities we carried out a survey. 482 people took part. We asked people if they are aware of the screening and immunisations that they and their children may be entitled to, if they had taken these up and what their reason was if they had not.

The majority of the surveys were completed face to face at engagement events across Worcestershire including: Fortis Summer Fun Days in Malvern, Worcester and Droitwich; Worcester Community Trust Family Day and Eid Party; Worcester Show; Worcestershire Pride; Bromsgrove District Housing Trust Community Days in Sidmore, Wythall, Burcot and Charford; DY10 Big Picnic; Play Day in Lickhill Park in Stourport; Spring into Summer in Springfield Park in Kidderminster and Wyre Forest Showcase for Older People.

We had information about screening and immunisation programmes available at these events to share with people completing the survey. This included laminated lists and timelines explaining what the different types of screening and immunisation are for and who is entitled to what.

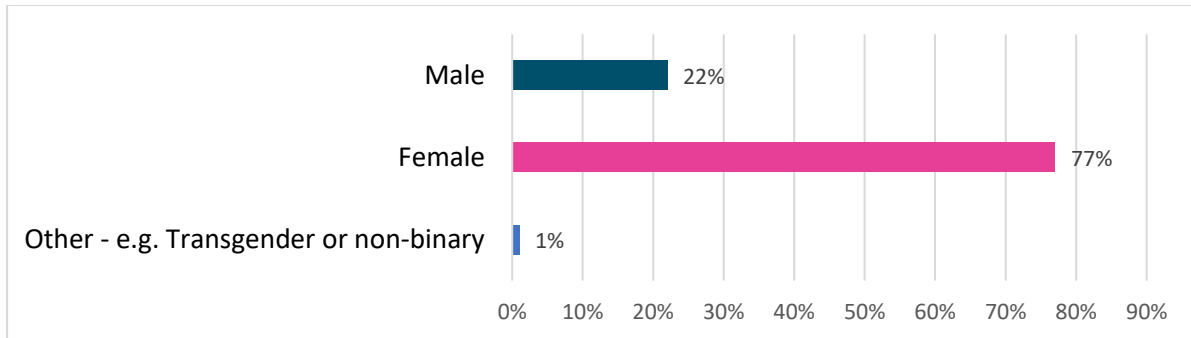
An online version of the survey was also available on our website alongside links to further information about screening and immunisation.

As part of our prison engagement work with HMP Hewell 30 surveys were completed by prisoners and analysed separately due to different screening and immunisation processes within the prison.

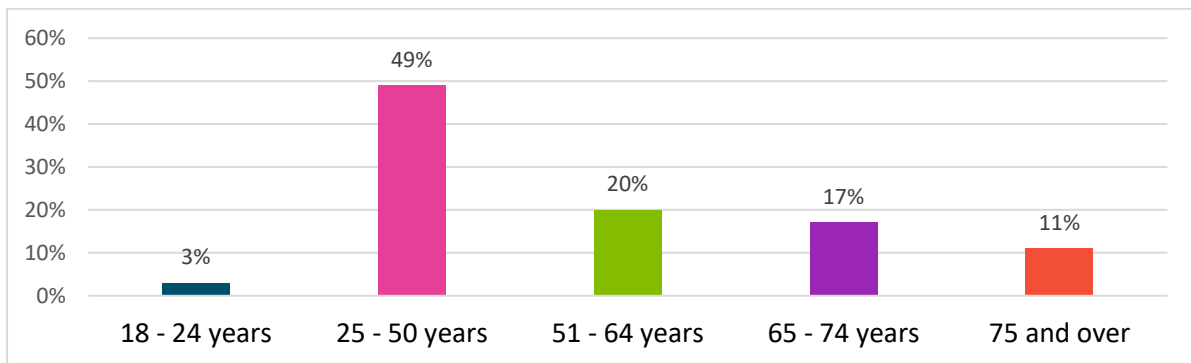
1.3 Who took part?

452 people completed our main survey. The majority of these were completed face to face.

Gender of respondents:



Age of respondents:



- 46% of respondents had a child or children under 18
- 25% of respondents considered themselves to have a disability or long term health condition
- Those who considered themselves to have a disability or long term health condition, selected in order of frequency: physical disability, long term medical condition, learning disability, mental health, hearing impairment, Autism Spectrum Condition and visual impairment.
- 91% of respondents identify as being white British. Other ethnic groups (in order of prevalence) were - Asian / Asian British Pakistani, Asian / Asian British Indian, White Irish, White other, Asian other, Asian / Asian British Bangladeshi, Mixed Ethnic - White and Black Caribbean, Chinese, White Gypsy / Irish Traveller, Mixed Ethnic Group - White and Asian and Black / Black British Caribbean.

2. Screening

2.1 Screening for Adults

NHS Screening Programmes for Adults in Worcestershire

Provided by Worcestershire Acute Hospital NHS Trust:

- Breast cancer screening - women aged 50 to 70
- Abdominal Aortic Aneurysm (AAA) screening - men aged 65
- Antenatal screening

Provided by GP Practices and sexual health clinics:

- Cervical screening - women aged 24 to 64

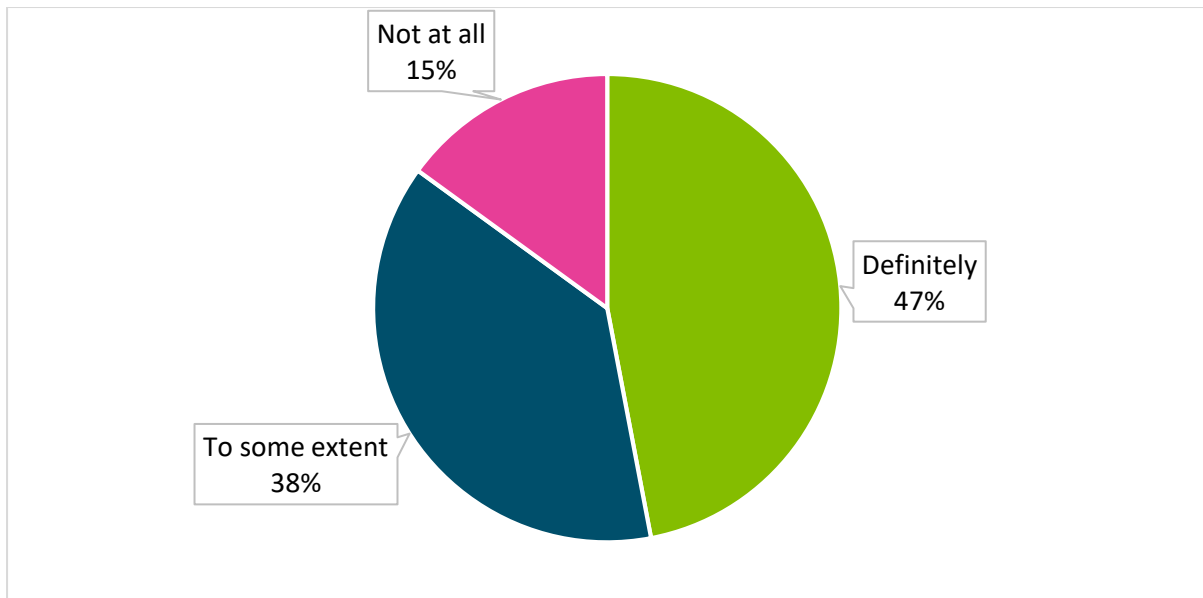
Provided by EMIS Care:

- Diabetic eye screening - age 12 and over

Screening kits distributed by University Hospitals Coventry and Warwickshire

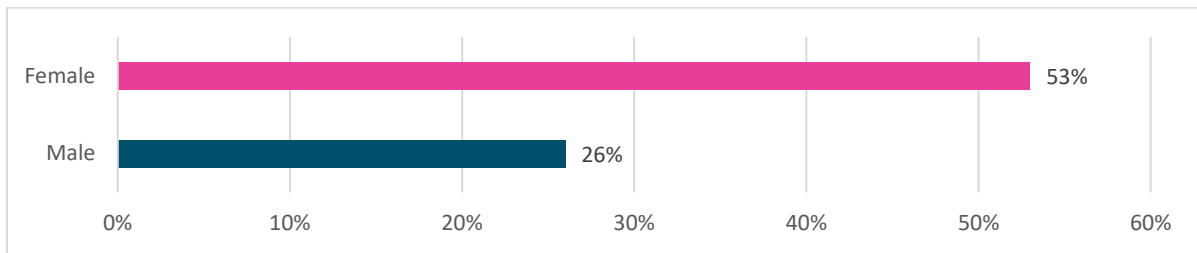
- Bowel cancer screening - men and women 55 to 74

Are you aware of the screening you may be entitled to?



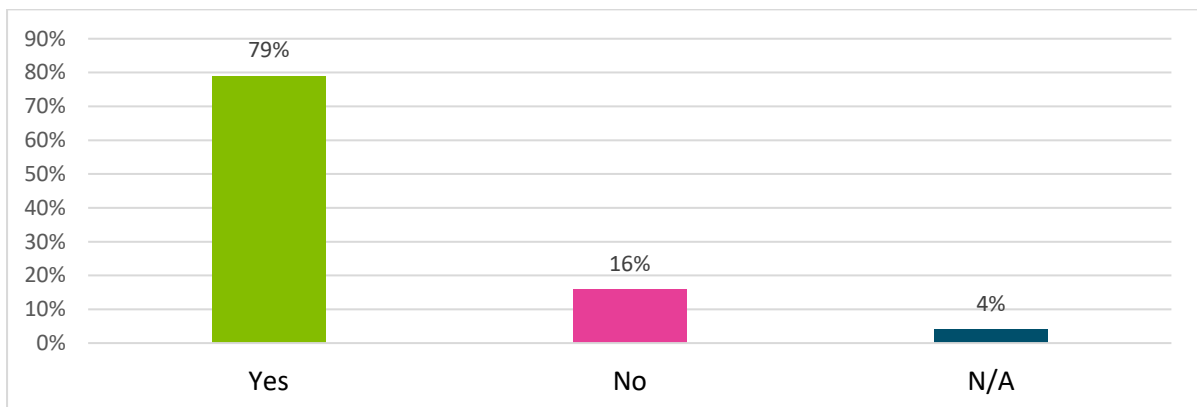
Responses show that only 47% of the respondents felt they were definitely aware of the screening they were entitled to and 15% - 68 people - told us that they were not aware at all of their entitlement.

Breakdown by gender - respondents *definitely* aware of screening entitlement



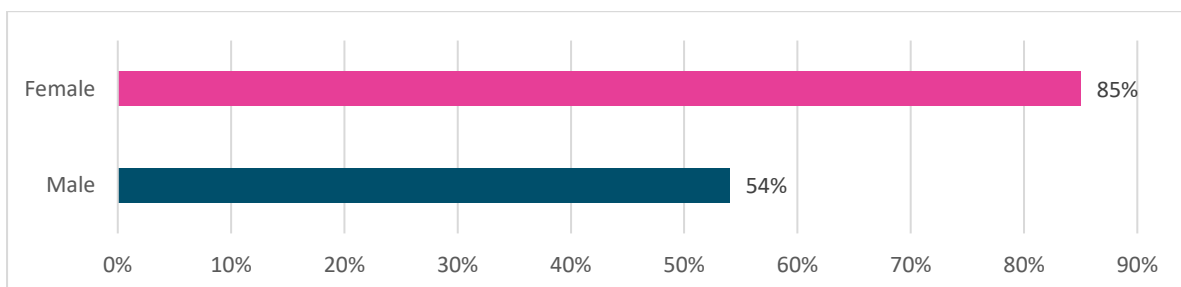
Responses suggest that women have a better awareness of screening than men, as 53% reported they were definitely aware of the screening they are entitled to, while only 26% of men said they were definitely aware.

Have you taken up the screening you are entitled to?



The majority of respondents had taken up the screening offered to them. However, 16% - 71 people - had not taken up screening they were entitled to.

Breakdown by gender - respondents who have taken up screening



Responses suggest that women are more likely to take up screening than men as 85% of women responded yes, while only 54% of men did.

Reasons given for not taking up screening:

1. Lack of awareness or not being called (23)

'Didn't know about it'

2. Anxiety about the nature of the screening - mainly around cervical cancer screening (10)

'Keep putting off smear test. Booked appointment and didn't go. It's just a bit scary. I know I need to go'

'Nervous, apprehension as its just that intrusion'

'Don't know what happens'

3. Being too busy or other constraints e.g. work and childcare (8)

'Time constraints - my working vs available screening times'

'No one to look after the children'

4. Do not feel that screening is necessary (7)

'I don't want to be focussed on ill health'

'I think I am healthy'

5. Not sure why they haven't (6)

Other reasons included: being unwell or pregnant at the time and a lack of reasonable adjustments.

2.2 Screening for Children

NHS Screening Programmes for Children in Worcestershire

Provided by Worcestershire Acute Hospital NHS Trust:

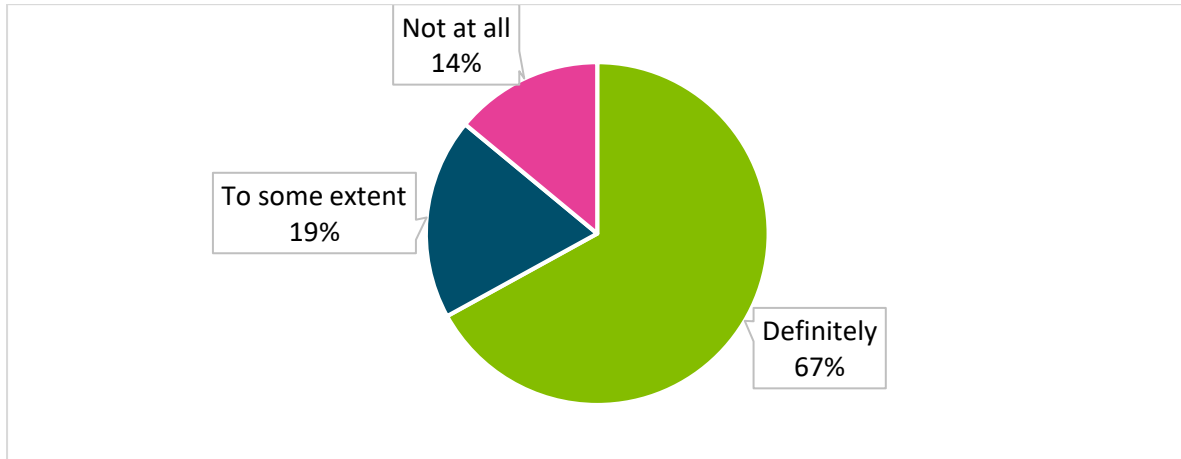
- Checks for new born babies - physical examination, hearing test and blood test for rare conditions
- Eye tests in schools in Reception class

Provided by Worcestershire Health and Care Trust - Starting Well Service:

- National Child Measurement Programme - height and weight checks in Reception class and Year 6
- Hearing screening - Reception class

46% - 205 people who took part in our survey had children under 18 and answered questions in relation to their awareness and uptake of screening for their children.

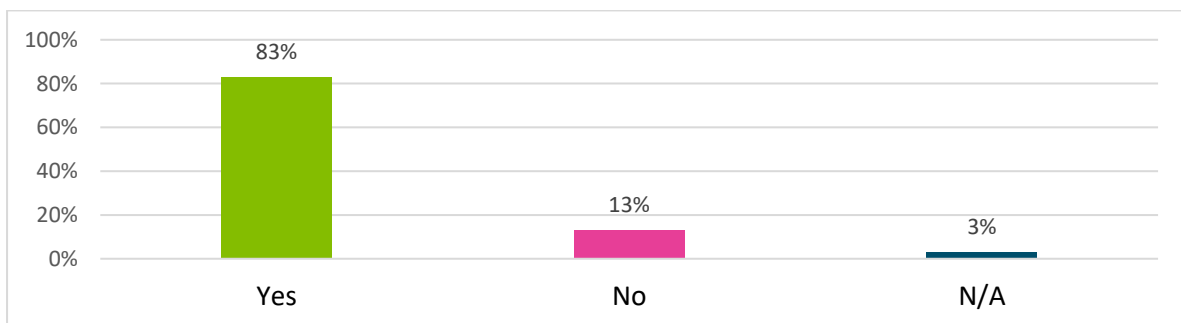
Are you aware of the screening your child or children may be entitled to?



Although the majority 67% of parents and carers of under 18s felt that they are aware of the screening their child or children were entitled to, 19% were unsure and 14% - 27 people - said they had no awareness.

In discussion with parents and carers many commented that they had been aware of screening carried out at school because of letters sent telling them it was going to take place, rather than having a prior knowledge or expectation.

Have your children taken up the screening they are entitled to?



The majority of additional comments to this questions related to being unsure about what screening they should have had, rather than expressing a reason as to why they had not taken it up. This tended to relate to the screening carried out at school. Many parents and carers commented to us that if they had a letter sent home from school they would let their child take part, but might not recollect which screening they have had or know if they had missed any.

Other comments to this question related to needing more information and one person stating that they did not agree with the way the weight screening is carried out for children.

3. Immunisation

3.1 Immunisations for Adults

NHS Immunisation Programmes for Adults in Worcestershire

GP Practices provide:

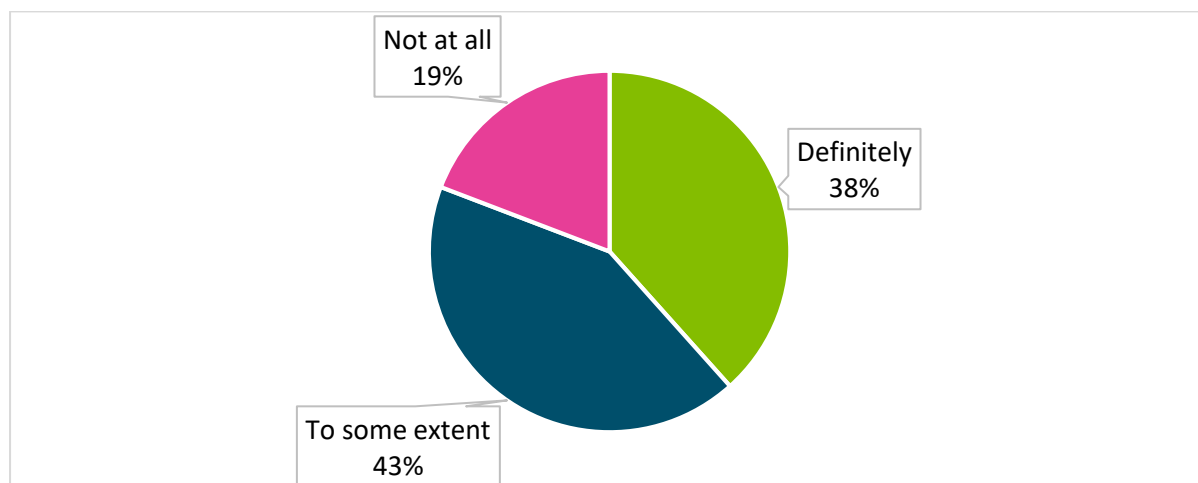
Immunisations for 'at risk' adults - for example those with long term health conditions, who are over 65, carers or pregnant.

- Flu vaccine (also available in Pharmacies and from Maternity services)
- Pneumonia vaccine
- Shingles - at age 70 or 78

Worcestershire Acute Hospital NHS Trust - Maternity Services provide:

- Immunisations for pregnant women - including whooping cough

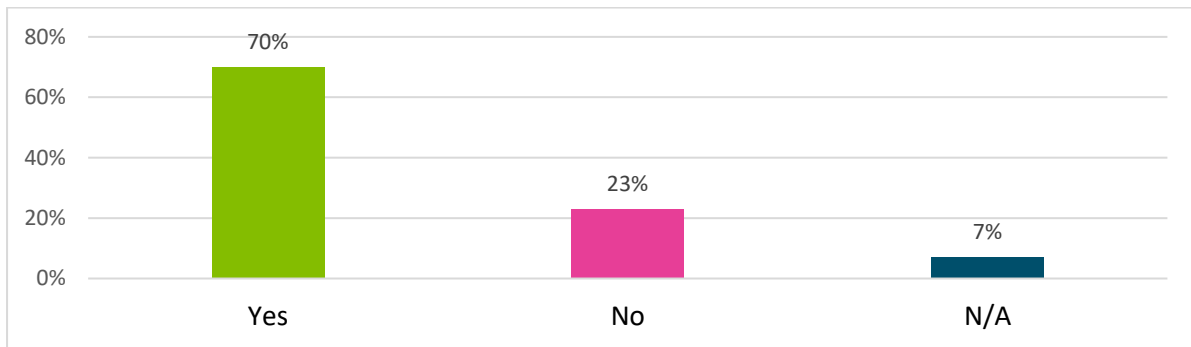
Are you aware of what immunisations you may be entitled to?



Only 38% of respondents were confident they knew what immunisations they were entitled to and 19% - 85 people - told us they were not aware at all of what they were entitled to.

Responses suggest that women are likely than men to be sure about the immunisations they are entitled to as 41% of women said 'definitely' where as only 29% of men said 'definitely'.

Have you taken up the immunisations you are entitled to?



While 70% of respondents told us that they had taken up the immunisations they were entitled to, 23% - 103 people - had not. There was a slight variation between men and women, as 71% of women told us they had taken up immunisation, where as 65% of men said they had.

Reasons given for not taking up immunisations:

1. Not aware of entitlement or not been given enough information (24)
'Didn't realise that you get immunisations'
'Don't feel I have enough info'
2. Don't feel that they need an immunisation or that they are not effective (11)
'I believe we are better off without'
'Don't mix with enough people to catch flu'
'Concerned that it was as ineffective as it was last year'
'On the advice of a doctor many years ago who said it wouldn't work for all strains of the flu'
3. Put off by perceived reaction to the immunisation or reports from others (8)
'Flu jab - think it makes people ill'
'Have heard others saying they reacted to it'
4. Not liking injections or a previous bad reaction (7)
'Had a bad reaction in the past'
'Poorly after vaccination 40 years ago'
5. Being too busy or other constraints e.g. work (6)
'Never get time to go'
'Surgery inaccessible in work hours'
6. Unwell or medical reasons (4)
'In hospital couldn't get to GP'

3.2 Immunisations for Children

NHS Immunisation Programmes for Children in Worcestershire

Provided by GP Practices - New-born and pre-school immunisations including:

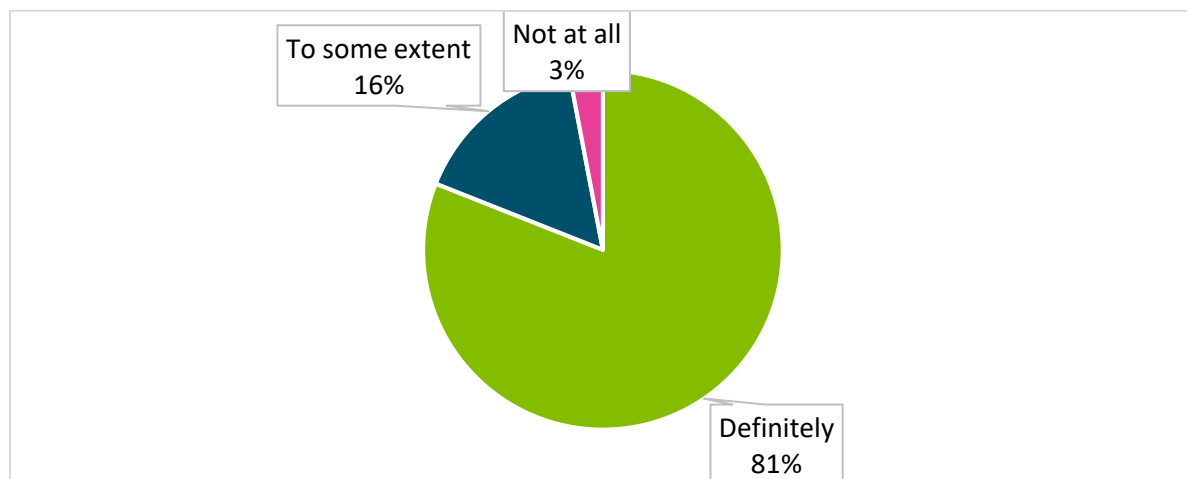
- Tetanus, polio, pneumonia, septicaemia, meningitis, whooping cough
- Measles, mumps and rubella (MMR)

Provided in schools by Coventry and Warwickshire Partnership Trust:

- Children's flu vaccine - up to Year 6
- HPV - girls aged 12-13 (Year 8) to protect against cervical cancer
- 3 in 1 Teenage Booster - age 14 (Year 9)
- MenACWY - teenagers (Year 9 or 10) - to protect against meningitis and septicaemia

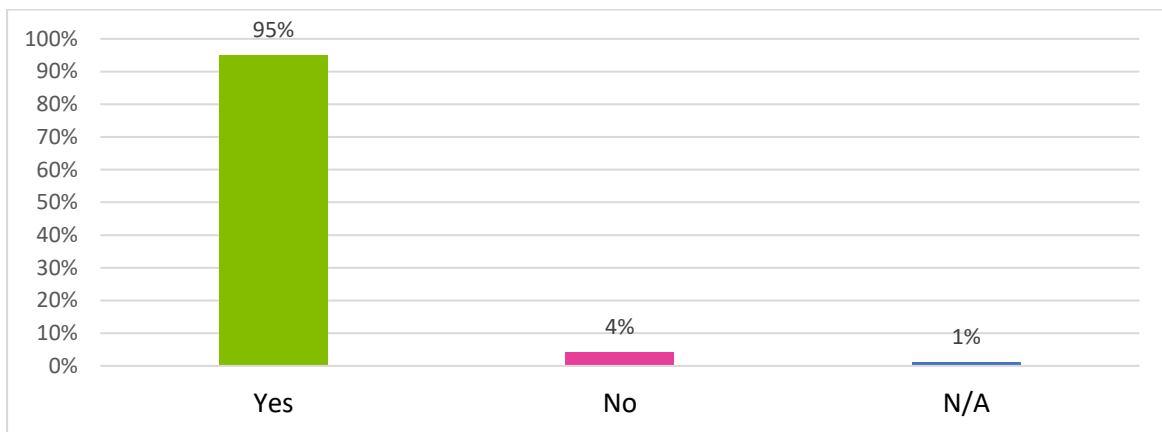
46% - 205 people who took part in our survey had children under 18 and answered questions in relation to their awareness and uptake of immunisations for their children.

Are you aware of what immunisations your child or children may be entitled to?



The majority 81% of the parents and carers we spoke to told us felt confident that they knew what immunisations their children were entitled to. However discussion with parents suggests that this may often be due to receiving notifications that immunisations will be taking place, rather than an advanced awareness of what they might be entitled to.

Have your children taken up the immunisations they may be entitled to?



Nearly all of the parents and carers we spoke to told us that their child or children had received the vaccinations they are entitled to.

Three people said that their child had not had immunisation due to a previous bad reaction, while another said they were not convinced about immunisations because others have had it and become ill.

One respondent told us that while her daughter had received her immunisations she was not keen on needles and that having it done with others at school had increased her anxiety.

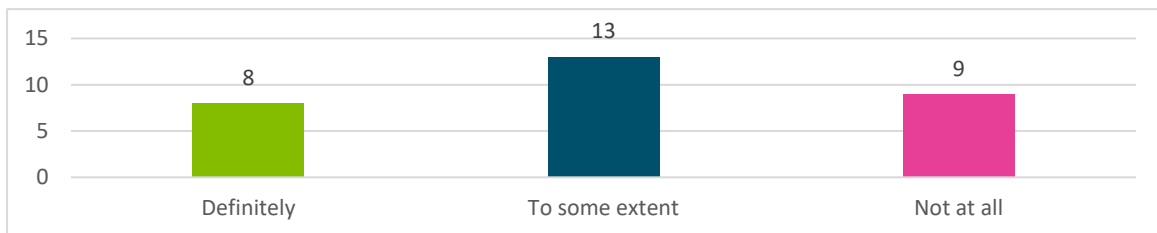
4. Feedback from Prisoners

We received 30 responses from HMP Hewell, a male prison in Worcestershire.

- Screening for Bowel Cancer and Abdominal Aortic Aneurysm is carried out by Worcestershire Acute Trust and Diabetic Eye Screening by Northgate Public Services.

- Immunisations are provided by Care UK who provide primary care service within the prison.

Awareness of screening and immunisation entitlement



Responses showed a variation in awareness of both screening and immunisation entitlement. The responses were the same for both screening and immunisation.

Only 8 people felt they were definitely aware what they were entitled to, 13 said to some extent and 9 said not at all.

Although 11 people reported not having immunisations and 8 not having had screening, the reasons given for not having them were all due to not knowing what they are entitled to. With the exception of one response saying they had not had an immunisation due to a fear of needles. However as only four of the men are over the age of 50 it is likely that they may not be entitled to any screening or immunisations and therefore because they have not been notified do not have any awareness of the programmes. This suggests that other than individual notifications there may not be information available to all prisoners about screening and immunisation.

We will explore these issues further as part of our ongoing engagement with prisoners at HMP Hewell.

5. Conclusions and Recommendations

Based on the findings from our survey we have made the following conclusions and recommendations.

5.1 Screening

Responses suggest that there is a need for greater awareness about what screening is available, who it is for, when it should take place and who is responsible for carrying it out. People's awareness of screening for themselves and for their children is often dependent on being sent a letter or reminder to inform them, rather than having an awareness and understanding in advance.

Some of the reasons given about why adults have not taken up screening suggest that there is a need for greater understanding about the importance of the screening and reassurance around anxieties about attending.

It may be therefore that if a reminder or notification is not sent for some reason, is overlooked or mislaid or if a child is not in school when screening takes place that screening may be missed and people might be either unaware of it or unsure how to follow this up.

Consideration could also be given to how screening can be made more accessible, in particular around working hours and for those with young children.

It would be useful for data to be routinely collected and collated about the uptake of screening, so that campaigns and initiatives can be specifically targeted across the County.

It would also be useful to consider how to increase awareness and uptake of screening amongst men, as our results suggest lower awareness and take up rates for men.

Commissioners and providers should consider:

1. How to increase awareness and understanding of screening programmes prior to appointments or reminders being sent.
2. Including information about:
 - what screening is for
 - age range and gender of those who should be having it
 - when they should have it
 - the importance of taking up screening and reassurance for those who may be worried about screening

3. If there is a need to specifically increase awareness and take up of screening amongst men.
4. Providing more flexible opportunities for screening appointments that can fit in with work and caring commitments.
5. Collecting and collating data on take up of screening broken down by equalities dimensions of age, gender, disability and ethnicity in order to target promotion and take up initiatives.
6. Providing more information for parents about screening that takes place within schools, for example on school websites and as part of induction or welcome meetings.
7. Ensuring that systems are in place to follow up if a child is absent when screening takes place and provide information for parents about the results of screening and any further action required.

5.2 Immunisation

Responses suggest there is less awareness of what immunisations respondents are entitled to than screening and a higher number who have not taken up immunisations. Lack of awareness of what respondents are entitled to seemed to be the most prevalent reason for this. Awareness and take up of immunisations was slightly lower for men than women. The take up of immunisations may be reliant on the relevant systems identifying and notifying individuals. In some cases qualifying data may not be recorded for individuals, for example, if they are a carer.

Responses showed in some cases there was also a lack of understanding or misunderstanding about their effectiveness and the effects of having the immunisation.

Generally the awareness and take up of immunisations for children was reported by parents and carers as high. But as with screening this may be more due to letters sent in advance of the specific immunisation rather than a more general understanding that it will be happening.

Commissioners and providers should consider:

8. How to increase awareness and understanding of immunisation programmes, who is entitled to them, when they should have them and where they will take place.
9. Ensuring that everyone receives a direct invitation or notification for immunisations they are entitled to. For example, GP Practices notifying

patients over 65 or in at risk groups that they are entitled to annual flu immunisation and pneumonia Immunisation.

10. Use of digital and non-digital methods of notifying patients about their entitlement. Including: text message and email reminders, information displays within the practice and information attached when dispensing prescriptions.
11. How to get specific messages to people about immunisations to address misinformation and misconceptions.
12. Providing information to parents and carers via schools in advance about immunisations that will be offered, for example at the start of the school year and available on school website.
13. Promoting online resources to parents and carers giving information about immunisations.
14. Checking there is a system to follow up if children are not in school on the day immunisations take place.
15. Ensuring there is a system for parents to have a record / monitor that their children have received immunisations.
16. Collecting and collating data on take up of immunisations broken down by equalities dimensions of age, gender, disability and ethnicity in order to target promotion and take up initiatives.
17. Ensuring that medical records have the correct data to identify those who require immunisation e.g. those with caring responsibilities.

Links to Key Documents and Information:

[NHS Long Term Plan](#)

[Information about NHS Screening Programmes](#)

[Information about NHS Immunisation Programmes](#)

[National Audit Office - Investigation into Pre School Immunisations - October 2019](#)

[Independent Review of Adult Screening Programmes in England - October 2019](#)