

# COVID-19: The role of local government in supporting screening recovery

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## COVID-19 and screening programmes – what do we know?

- COVID-19 has significantly impacted the cancer landscape – from access to screening services → diagnosis and treatment.
- There is now considerable pressure to **address the backlog** in screening appointments.
- Service models have also changed. The recovery programme for breast cancer screening has introduced **significant changes** to the normal NHSBSP.
- As we seek to restore screening programmes – it is **critical** to retain a focus on reducing inequalities in screening uptake.

# The screening inequalities landscape

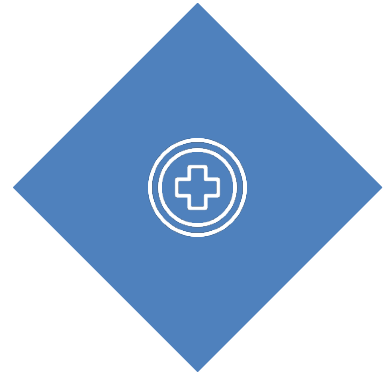
Screening inequalities can appear at any point along the screening pathway.

The pathway consists of:

- cohort identification (invitation)
- provision of information about screening
- access to screening services
- access to treatment
- onward referral
- outcomes

Inequalities may be at:

- national programme level
- regional level
- local programme level
- small geography level e.g. specific setting or catchment area



## The screening inequalities landscape post-COVID (part 1)

The pandemic risks exacerbate existing inequalities in screening coverage and uptake and expose new inequalities. Key groups affected by this include:

- **Clinically vulnerable individuals**
- **Higher risk populations**
- **Carers**
- **People with learning disabilities**
- **And many more!**

There are also a range of practical barriers which may affect screening uptake during the pandemic e.g. access to transport, availability of local support etc.

## The screening inequalities landscape post-COVID (part 2)

- As well as the specific barriers there may also be wider challenges that risk exacerbating health inequalities – even after the pandemic.
- These include factors such as residual fear/mistrust of healthcare settings, misinformation regarding availability of services and treatment, significant changes to individual circumstances, and competing stressors (financial, family, health).
- Addressing these inequalities must form a critical part of all screening recovery activities.



**‘BUILD BACK BETTER’**

- Local authorities and local public health teams can play an active role in supporting screening recovery.

## What role can local authorities play in addressing screening inequalities?

- The wider **determinants of health** have an impact on screening uptake, many of which fall within the remit of local authorities. Improving uptake of screening services can form part of a wider public health approach.
- **Local authority public health teams** are also important community facilitators. They 'know' their community, understand the pattern of health inequalities across their area, and have strong relationships with the local community and voluntary sector.
- This role makes local authorities well placed to support **screening recovery activities** and **address local inequalities** in both coverage & uptake, especially given their wider role in responding to the impacts of the COVID-19 pandemic on the health & wellbeing of their residents.
- So what might this look like?

## Key action areas for local authorities

Local authorities can help support screening recovery activities and help address inequalities through the following key action areas:

1. Scrutiny and assurance
2. Joined up commissioning
3. Supporting and empowering local communities
4. Strategic communications
5. Leadership on inequalities
6. Working in partnership

They can also drive change through discharging their legal duties in relation to health inequalities – an important tool for change.



# Case Study: Southwark Council

## COVID-19: Rapid Impact Assessment with a focus on cancer screening

*Southwark's Joint Strategic Needs Assessment*

Healthcare Public Health

Public Health Division, Environment, Leisure and Public health department June 2020

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## Case Study: Southwark Council

### The Project

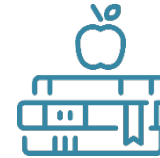
Review of evidence around how to reduce breast cancer screening uptake inequalities.

### Key Findings

- Good evidence that factors such as ethnicity, disability and deprivation impacts breast cancer screening uptake
- Less clear consensus on which novel interventions are effective in addressing this
- Reminders via letters or SMS are effective
- CBHW interventions are effective – no clear evidence about which approach is best
- Other interventions show mixed results depending on setting
- Lack of evidence focused on reducing inequalities
- Opportunities for digital or virtual interventions?

# Local authority toolkit on breast cancer screening recovery activities

- We are in the process of developing a **toolkit** for local authorities in London to support breast cancer screening recovery activities.
- This will include recommendations on how to **assess the impact** of the pandemic on local screening inequalities, key ways to **improve communications** and **outreach**, and how to integrate screening into wider Covid-19 response and recovery activities.
- The toolkit will also feature good and emerging practices to reduce screening inequalities, drawing on examples from different local authorities and exploring areas for learning.



# We want to hear from you

- 'Building back better' – strategies for improving access to screening for people with learning disabilities
- Examples of local good practice and partnership working for screening recovery



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IDEAS.

EXAMPLES.

Email us at [lucy.fagan@southwark.gov.uk](mailto:lucy.fagan@southwark.gov.uk) and [samantha.field@southwark.gov.uk](mailto:samantha.field@southwark.gov.uk)