1. INTRODUCTION/SUMMARY

A briefing paper presented to the Tower Hamlets HWBB on 13 January 2015 highlighted serious concerns about the decline in coverage of the NHS breast cancer screening programme in Tower Hamlets since April 2013. NHS England (London) was invited to respond to concerns and was represented at the meeting by Jo Murfitt, Head of Public Health Commissioning and Adrian Brown, Principal Public Health Screening Advisor.

In April 2013 commissioning of NHS screening programmes was transferred from the former Tower Hamlets PCT to NHS England (NHSE). However, Local Authority Public Health maintains an assurance role to monitor trends and to highlight concerns, in order to ensure adequate delivery of the service to the local population. A review of current trends around cancer screening programmes (breast, cervical and bowel) highlighted a particular area of concern around breast cancer screening where there has been a decline of almost 6.5% in breast cancer screening coverage over one year from 67.8% to 61.5%.

2. RECOMMENDATIONS

The Health and Wellbeing Board is asked to note the improvement plan and progress since the position set out at the January 2015 Board.

3. BACKGROUND

The Health and Wellbeing Board recommended that assurance was sought from NHS England (London) that it was taking the necessary measures to reverse the decline in uptake of breast cancer screening. It further recommended that the Health and Wellbeing Board Executive Officers Group continues to monitor progress on breast cancer screening uptake.
NHSE committed to an improvement plan to increase breast cancer screening coverage in Tower Hamlets. The plan included reintroduction of a targeted telephone outreach service to support women to access screening. This was to be based on a service successfully commissioned by Tower Hamlets PCT between 2007 and 2013 resulting in an increase in coverage from 53% to 67.8%.

Initially this would be by extending NHSE’s existing contract with Community Links (a community organisation based in Newham) to work with Tower Hamlets GP practices. NHSE will subsequently tender for a provider to deliver this service in Tower Hamlets on a longer term basis.

4. **PROGRESS**

The calling service in Tower Hamlets has not yet commenced.

Community Links is ready to begin service delivery, depending on certain challenges being overcome.

(i) The next active screening round in Tower Hamlets will begin in February 2016. The current service is therefore limited to contacting women invited during the last screening round between September 2014 and March 2015 who did not attend 2 appointments (1,500 women). Contact details held by the breast screening service may be missing or inaccurate for these women.

(ii) Central and East London Breast Screening Service (CELBSS) propose that only one appointment date/time is offered to each of this group of women. CELBSS is under pressure to improve performance by offering earlier invitations in the 5 other CCGs for which it provides a service, all of which have active screening rounds this year.

Community Links has commenced delivery of a phone calling service for breast screening in Camden (which currently has a screening round in progress) and continues to deliver the same service in Newham.

NHSE is seeking increased flexibility of appointments by CELBSS, in order to avoid widening inequalities in coverage between Tower Hamlets and other CCGs.

5. **ASSURANCE STATEMENT**

Public Health and Tower Hamlets CCG are working with NHSE to address potential barriers to service delivery and increasing breast screening coverage. It is too early to provide assurance that the drop in breast cancer coverage has been addressed.
6. **REASONS FOR THE DECISIONS**

6.1 The HWB has requested a progress update for information.

7. **ALTERNATIVE OPTIONS**

7.1 None

8. **COMMENTS OF THE CHIEF FINANCE OFFICER**

8.1 There are no direct financial implications as a result of the recommendations in this report.

9. **LEGAL COMMENTS**

9.1 It is a function of the HWB to have oversight of the quality, safety, and performance mechanisms operated by its member organisations, and the use of relevant public sector resources across a wide spectrum of services and interventions, with greater focus on integration across outcomes spanning health care, social care and public health.

9.2 Further, it is a function of the HWB to identify the needs and priorities across Tower Hamlets and publish and refresh the Tower Hamlets Joint Strategic Needs Assessment (JSNA) so that future commissioning/policy decisions are based on evidence.

9.3 When considering any response to the evidence regard must be given to the public sector equalities duty to eliminate unlawful conduct under the Equality Act 2010. The duty is set out at s.149 of the 2010 Act and requires the Council, when exercising its functions, to have ‘due regard’ to the need to eliminate discrimination (both direct and indirect discrimination), harassment and victimization and other conduct prohibited under the Act, and to advance equality of opportunity and foster good relations between those who share a ‘protected characteristic’ and those who do not share that protected characteristic.

10. **ONE TOWER HAMLETS CONSIDERATIONS**

10.1 Uptake of the breast cancer screening service will impact on health and health inequalities in the borough

11. **SUSTAINABLE ACTION FOR A GREENER ENVIRONMENT**

11.1 Not applicable

12. **RISK MANAGEMENT IMPLICATIONS**

12.1 An improvement plan has been agreed with NHS England to mitigate risks. A risk remains of CELBSS not providing flexibility of appointment times.
13. **CRIME AND DISORDER REDUCTION IMPLICATIONS**

13.1 Not relevant

14. **EFFICIENCY STATEMENT**

14.1 There is no council expenditure involved

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**Appendices**

- None