



Public Health
England

Quality Assurance Report

North Lancashire and South Cumbria Breast Screening Service visit on 9 March 2016

V1.0 / July 2016

Public Health England leads the NHS Screening Programmes

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About PHE Screening

Screening identifies apparently healthy people who may be at increased risk of a disease or condition, enabling earlier treatment or better informed decisions. National population screening programmes are implemented in the NHS on the advice of the UK National Screening Committee (UK NSC), which makes independent, evidence-based recommendations to ministers in the four UK countries. The Screening Quality Assurance Service ensures programmes are safe and effective by checking that national standards are met. PHE leads the NHS Screening Programmes and hosts the UK NSC secretariat.

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Published August 2016

PHE publications gateway number: 2016193



About this publication

Project/Category	Quality Assurance Visit Report
Document title	Quality Assurance Visit to North Lancashire and South Cumbria Breast Screening Service
Version and date	V1.0
Release status	Final
Author/s	Breast Cancer Screening Quality Assurance Team (North)
Owner	Comments can be sent to: pam.cumming@phe.gov.uk
Type	Report
Authorised by	Billie Moores, Regional Head of QA, Screening QA Service (North)
Valid from	Issue date
Review date	n/a
Audience	North Lancashire and South Cumbria Breast Screening Service and key stakeholders

Distribution

Name / group	Responsibility
Key stakeholders	North Lancashire and South Cumbria Breast Screening Service

Amendment History

Version	Date	Description
0.1	06/04/2016	Draft for corrections of factual accuracy
0.2	26/05/2016	Minor corrections to text comments from screening service.

Review / Approval

Version	Date	Requirement	Signed
1.0	27/04/2016	Approval for release	<i>B. Moones</i>

Executive Summary

The findings in this report relate to the quality assurance (QA) review of the North Lancashire and South Cumbria breast screening service held on 9 March 2016.

1. Purpose and approach to quality assurance (QA)

The aim of quality assurance in the NHS breast screening programme (NHSBSP) is to maintain minimum standards and promote continuous improvement in breast screening. This is to ensure that all eligible women have access to a consistent high quality service wherever they live. QA visits are carried out by the PHE Screening quality assurance service (SQAS) comprising QA staff and a team of professional and clinical advisors.

The evidence for this report is derived from the following sources:

- routine monitoring data collected by the NHS screening programmes
- data and reports from external organisations as appropriate
- evidence submitted by the provider(s), commissioner and external organisations as appropriate
- information collected during pre-review visits, including a review of patient case notes, relevant pathology, radiological images and reports
- information shared with the QA team as part of the visit process

2. Description of local screening service

The North Lancashire and South Cumbria breast screening service has an eligible screening population of 140,000 women aged 47 to 73 within the geographical area of North Lancashire and South Cumbria. The clinical commissioning groups (CCGs) covered by the service include Lancashire North, Blackpool, Fylde and Wyre, Greater Preston and Cumbria. The service is provided by the University Hospitals Morecambe Bay NHS Foundation Trust (UHMBT). NHS England (Lancashire and Greater Manchester) is the lead commissioner for the service.

Screening is carried out at four static sites across the patch and via a mobile screening service to four other sites. All mammographic equipment is fully digital and the service commenced the randomised trial for age expansion in January 2012. Assessment services are delivered from the Royal Lancaster Hospital (RLI) and surgical treatment is then carried out at various locations across the patch.

3. Key findings

The immediate and high priority issues are summarised below as well as areas of good practice. For a complete list of recommendations, please refer to the related section within this report or to the list of all recommendations on page 9.

3.1 Shared learning

The review team identified several areas of practice that are worth sharing:

- the service has a comprehensive system for evaluating client satisfaction
- technical recall rates meet the achievable standard
- there was evidence of good use of immunohistochemistry to aid diagnosis
- implementation of national survivorship standard at Blackpool

3.2 Immediate concerns for improvement

The review team was advised that on occasion women may be screened without complete documentation being available for correct patient identification. Such practice contravenes the local UHMBT policy to ensure all women receive the correct results from screening and IRMER regulations.

Since the QA visit, the local team have now clarified that there have been two instances in 2016 where this has occurred, but for different reasons than were described at the visit. Policies have now been amended to ensure that women who turn up to the mobile trailer, who are not listed on the clinic control sheets, are dealt with appropriately. The review team consider that this issue has now been resolved.

3.3 High priority issues

The review team identified three high priority areas as summarised below:

- screening round length performance and waiting times for results and assessment need to be improved to at least minimum NHSBSP standards
- the current MRI service for higher risk women does not meet NHSBSP guidance and there is no agreed service level agreement (SLA) in place. Actions need to be taken to ensure that high risk mammograms and MRI scans are performed within two weeks of each other and are then read together
- there are staffing issues to be resolved in radiology, radiography and nursing. The current recovery plan will be at risk if radiology and radiographic staffing is not improved. Nurses do not currently attend assessment clinics which does not meet national guidance

4. Key recommendations

A number of recommendations were made related to the high priority issues identified above. These are summarised in the table below. Additional high priority recommendations, beyond these themes, are contained within the report.

Priority	Theme	Description of recommendations	Full recommendations found on :
High	Performance	Service needs to meet minimum NHSBSP standards for round length and waiting times	Page 16 (PLN 1601) and page 30 (PLN1612)
High	Service for	Service for higher risk women	Page21 (PLN 1604) and 30

	higher risk women	does not meet NHSBSP guidance and there is no agreed SLA in place	(PLN 1613)
High	Staffing deficits	Insufficient staffing levels in radiology and radiography. Nurses do not attend assessment clinics.	Page 24 (PLN 1606), page 30 (PLN1608) and page 39 (PLN1620)

For more information on expected timeframe for completion of recommendations, please see the list of all recommendations (page 9).

5. Next steps

North Lancashire and South Cumbria breast screening service is responsible for developing an action plan to ensure completion of the recommendations contained within this report.

NHS England North (Lancashire and Greater Manchester) screening and immunisation team (SIT) will be responsible for monitoring progress against the action plan and ensuring all actions are implemented. SQAS (North) will support this process and the ongoing monitoring of progress.