



Northern Ireland Training Centre for Mammography



From left to right: H Speers/Breast Imaging Services manager, J Bennett/Lead Clinical Practice Educator/Advanced practitioner, M Murray/Trainee Advanced Practitioner, J Dean Clerical Officer, and O Fox Admin Support

For the last 20 years the Belfast HSC Trust's Breast Screening Unit (BSU) at 12 -22 Linenhall Street, Belfast has been the Northern Ireland Training Centre for Mammography. It is a satellite of the Nottingham International Breast Education Training Centre (NIBEC).

This has allowed radiographers across Ireland to obtain the Postgraduate Certificate in Mammography by successfully completing their clinical training in Belfast.

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NIBEC is one of the 5 training centres in England which provide specialist training for staff working in breast screening. The centres work closely with Quality Assurance Directors and with BSUs to meet the training needs of staff working in the programme.

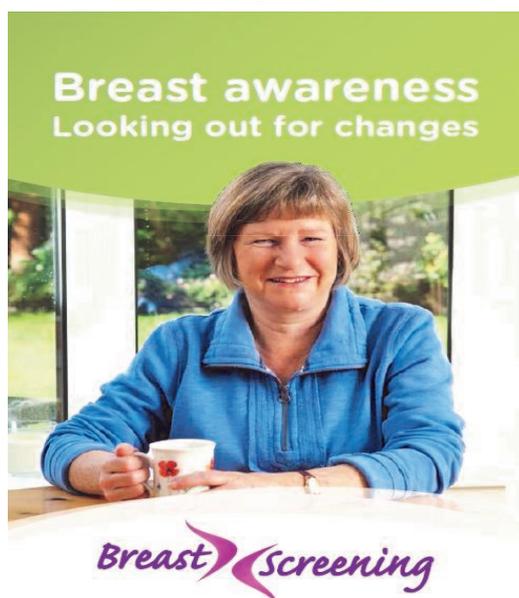
The introduction of digital mammography within the breast imaging service in April 2014, and changes to the academic provision for NIBEC, meant that the BHSCT BSU needed to submit an application for re-accreditation as a training centre with the College of Radiographers.

The Belfast Unit was notified on 24th June, 2015 that formal accreditation for mammography clinical training has been approved by the College of Radiographers and reinstated under the auspices of NIBEC. **This is a welcomed recognition of the status of the Northern Ireland Training Centre for Mammography.**

BREAST SCREENING FAQ's

A few new questions have been added to the Breast Cancer section of the NI Cancer Screening Programmes website

- I have no concerns about my breasts – do I need to attend for screening?
- I have no signs or symptoms of breast disease – do I need to attend for screening?



The breast screening programme is for women who have no signs or symptoms of breast disease. Its aim is to detect breast cancer at an early stage when treatment can be most effective. Around half of the cancers detected are so small they could not be felt (even by an experienced doctor) examining the breast.

If you do have concerns about your breasts, or have signs or symptoms of breast disease, you should see your GP without delay. Do not wait until you are called for breast screening. Breast screening is for women without signs or symptoms of breast disease.

Our leaflet "[Breast awareness – Looking out for changes](#)" shows the signs or symptoms of breast disease.

- Can I be screened at a different location?

Yes, simply contact your screening office at the contact details on your appointment letter and they will arrange for you to be screened at a more convenient location e.g. one that is closer to your work.

The various locations where you can be screened are shown here

http://www.cancerscreening.hscni.net/Location_contact_details_of_units.htm

Check our link for these and all our frequently asked questions

http://www.cancerscreening.hscni.net/Breast_Screening_FAQ.htm

Breast Screening Uptake Q3 2015/2016 1 October - 31 December 2015

Uptake% 50-70	Screen to assessment % within 3 weeks - date of first offered appointment	Round Length % within 36 months, 50-70	Screen to Routine Recall: Normal report letters % issued within 2 weeks
Eastern 71.0%	Eastern 97%	Eastern 99%	Eastern 99.0%
Northern 78.0%	Northern 99%	Northern 93%	Northern 100%
Southern 71.0%	Southern 89%	Southern 98%	Southern 98%
Western 76.0%	Western 94%	Western 98%	Western 84%
Region 74.0%	Region 95%	Region 97%	Region 96%
Minimum Standard 70%	Minimum Standard 100%	Minimum Standard within 36 months 90%	Minimum Standard Within two weeks >90%
Target 80%		Target 100%	Target 100%

BREAST AWARENESS LEAFLET FOR WOMEN OVER 70

The Public Health Agency has published a Breast Awareness Leaflet for women over 70. The leaflet is based on a leaflet produced by Kings College London which was used in a randomised controlled trial of an intervention to promote early presentation of cancer in older women. For more information on the trial see

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2790707/>.



The risk of getting breast cancer increases with age.

Kings College carried out a systematic review which concluded that older women had poorer awareness of symptoms, felt they had a lower risk of developing breast cancer and were more likely to have negative beliefs about breast cancer and its treatment ([Bish et al, 2005](#)).

Although women over 70 are not routinely invited for breast screening, they are encouraged to call their local unit to request breast screening every three years.

At their last routine breast screening women are already given a card with the date their next mammogram is due with contact details of their local Breast Screening Unit. They will now also receive our new leaflet specially tailored for the over 70's "Over 70 – what now? Looking after your breasts"

For more information on breast screening services for women over 70 please visit our website

http://www.cancerscreening.hscni.net/Over_70_Breast_Services.htm



Follow PHA on twitter for up to date news on screening programmes:
[@publichealthni](https://twitter.com/publichealthni)

The Role of the Breast Care Nurse Specialist in Breast Screening.

As part of a small team of employed by the Belfast Trust I have the opportunity to work in both the symptomatic breast setting (where individuals present to their GP and are referred to the Belfast City Hospital Breast Clinic for further investigations) and also the Breast Screening Unit in Linenhall Street, Belfast. Most women who attend for breast screening mammography will have normal mammograms. Approximately 4 in every 100 women screened are recalled to attend an assessment clinic for further investigations. Out of these 4 women, 1 will be found to have cancer.



Prior to each breast screening assessment clinic women who are recalled will have the opportunity to speak with a Breast Care Nurse Specialist via a telephone service.

As a Breast Care Nurse Specialist I am acutely aware how worrying the breast screening process can be. Having access to a trained professional to discuss what to expect prior to attending an assessment clinic can be very helpful in alleviating anxiety levels.

Breast Care Nurse Specialists are present at each assessment clinic to offer support, advice and information to all women attending and will meet with each woman to explain the reason why they have been recalled and talk through the investigations that will be carried out. Opportunities will be given at every stage of the process for the woman to ask questions. It can sometimes be helpful to bring someone such as a partner, relative or a friend to the assessment clinic for support.

For women with normal investigations following a recall to the assessment clinic, the Breast Care Nurse Specialist plays an important role in health promotion providing advice on breast awareness, future breast screening and lifestyle changes such as smoking, diet, menopausal questions and exercise.

When a diagnosis of breast cancer is given in the screening setting, the role of the Breast Care Nurse Specialist is pivotal. Working as the Breast Care Nurse Specialist and Key Worker (a person who with the patient's consent and agreement takes a key role in co-ordinating the patient's care and promoting continuity, ensuring the patient knows who to access for information and advice) I am able to provide support at a very difficult and highly emotional time, explain results of investigations given by the doctor and give information (verbally and written) about what will happen next. Contact details are also exchanged so that the woman can have on going access to the Breast Care Nurse Specialist from the point of diagnosis throughout the trajectory of her disease pathway.

Working in the Belfast Health and Social Care Trust (BHSCT), I am able to follow each woman from the breast screening setting through to the hospital site facilitating the on-going provision of specialist support. From a personal perspective, one of the most valuable aspects of my role as a Breast Care Nurse Specialist is that I have been given a unique opportunity to build and develop an on going relationship with my patients both within the breast screening and hospital setting. Without doubt, support from a Breast Care Nurse Specialist within the breast screening and symptomatic setting can ensure that each individual with breast disease can experience the highest level of quality care at a highly anxious time.

Justine Hasson



It is with great sadness that we report the death of Justine Hasson, Office Manager of the Breast Screening Unit, Altnagelvin Hospital. The loss of this inspirational colleague occurred on the 16th of February 2015.

Although Justine was born with spina-bifida and faced an uncertain future, her courageous and determined personality came to the fore at an early age and she overcame many obstacles in

her younger life to grow to the amazing young woman that we all came to know and love.

After completing her education she decided to move to London. Most people would take the easy route and fly but, having just passed her driving test 6 months earlier, Justine decided in her usual courageous way to drive from her home in Limavady to London with her then boyfriend/best friend who later became her husband and soul mate Kieran Hasson. In London Justine took up a post at the Priory Hospital, North London where she gained valuable experience. However home started to call to them both and they returned to Limavady a few years later.

The experience and knowledge that she gained in London, quickly led to her taking up a temporary post in the Western Trust. She took up her permanent post in the breast screening office at the end of 2001. At that time the screening office had no official office manager, but as time went on Justine became everyone's go-to person and in 2006 was officially appointed office manager, to everyone's delight.

In the 9 years of her role as Office Manager, she saw many staff come and go in all the disciplines involved in breast screening and her friendly and welcoming nature made life easier for everyone working in or passing through the unit. Justine was much loved and respected by all her colleagues in the Western breast screening unit who miss her very much. The nature of her post brought her into contact with all the Breast Screening Units in Northern Ireland, QA Reference Centre and various departments within the Western Trust, all of whom have also felt her loss.

On Friday 13th February, Justine was admitted to the Royal Victoria Hospital, Belfast with a brain aneurysm. Unfortunately on Saturday evening she became gravely ill and the devastating news of her untimely passing came on Monday morning.

We feel her loss every day and our thoughts and sympathies are with her husband Kieran and two little boys, Evan and Isaac who were her whole world.

Finally a message to Justine: We think of you every day ... you will never be forgotten... and our staff nights out will never be the same.

Promoting Informed Choice Among Target Service Users



For a number of years, the Public Health Agency has held a contract with the Women's Resource and Development Agency (WRDA) to raise awareness of cancer screening programmes, thereby promoting informed choice in women and men from communities and populations who are often hard-to-reach, and historically have low uptake levels of screening programmes.

Initially this contract covered the Belfast and South Eastern Health and Social Care Trust areas only. Following an open tender, the PHA awarded a three year contract to WRDA, commencing in

June 2015, to extend this service model to all of Northern Ireland.

WRDA's target service user groups include (but are not limited to) deprived communities (e.g. 20% most deprived wards in each Health & Social Care Area as per the NISRA



deprivation index); people from a black or ethnic minority group; travellers; LGBT people; and people with learning, physical or sensory disabilities.

WRDA have been busy and the following has taken place since June 2015:

- 73 educational awareness sessions have been delivered to approximately 725 attendees from target service user groups.
- 39 bespoke specialist workshops have been delivered to 826 participants with additional support needs, including those with learning, physical or sensory disabilities. 91 staff members also attended these workshops
- 10 promotional events have been held, providing information on the three cancer screening programmes to approx. 440 attendees.
- 32 community facilitators have completed their peer facilitator training with WRDA. Of these 30 have received a Level 3 certificate in learning & Development

WRDA are also facilitating the delivery of 'special breast screening clinics' for women with Additional Support Needs.

Dr Catherine Bane, Public Health Project Manager.

PHA scoops prestigious British Deaf Association award

As part of the British Deaf Association's (BDA) 125-year celebrations, Belfast recently welcomed delegations from the World Federation of the Deaf (WFD) and World Federation of the Deaf Youth Section (WFDYS).

In honour of their visit, the BDA welcomed the delegates to Northern Ireland at a Civic Reception in Belfast City Hall on Tuesday 3 November. A highlight of the event was an awards ceremony to recognise local organisations which have shown outstanding commitment to the deaf community.



The Quality Assurance Reference Centre (QARC) within the Public Health Agency (PHA) was presented with a prestigious 'Access to Information' award for the inclusion of signing language on three cancer screening information videos – which are available on the QARC website [here](#)

Speaking at the award ceremony, Dr Carolyn Harper, Director of Public Health at the PHA said: "This is a well-deserved and unexpected acknowledgement of the excellent work the PHA's QARC team undertakes, and in particular Joan McSorley, in promoting informed choice for cancer screening in Northern Ireland. Many congratulations to all involved".

Pictured above, Dr Carolyn Harper at the Awards Ceremony receiving the award on behalf of the PHA.

The picture below features QARC members of staff, Frances Redmond, Joan McSorley and Ken McInnes, with Dr Carolyn Harper.

For more information on the work of the BDA in Northern Ireland click [here](#)



Why do some people not participate in screening ?



A local study examining the reasons why some people do not participate in bowel cancer screening has been published in BMJ Open. [BMJ Open 2015 5: doi: 10.1136/bmjopen-2015-008266](https://doi.org/10.1136/bmjopen-2015-008266)

The transcripts of focus group sessions with groups of men and women in the Belfast and Armagh areas were analysed and organised into key themes.

The primary barriers identified were - a fear of cancer; the test procedure; social norms; past experience of cancer and screening; lack of knowledge or understanding about bowel cancer screening, and resulting behaviour towards the test.

Fear about receiving bad news and reluctance to conduct the test themselves were reactions that participants seemed willing to overcome after taking part in open discussion about the test.

The insight from the study have been used to develop new materials to support delivery of the programme, including an information video which can be found on [QARC website](#)

The screenshot shows the HSC Public Health Agency website. The main navigation bar includes links for Home, QARC, Breast Screening, Cervical Screening, Bowel Screening, and Contact Us. The current page is titled "Bowel Screening Film - What happens at Bowel Screening". The page content includes a video player showing a man holding a leaflet titled "Bowel cancer screening: how to take the test". To the right of the video is a "Contents" table of links.

Contents
Overview of the NI Bowel Cancer Screening Programme
Bowel Screening Health Professionals Site
Bowel Screening Film - What happens at Bowel Screening
What happens at Bowel Screening - Subtitled
What happens at Bowel Screening - BSL
What happens at Bowel Screening - ISL
Bowel Screening Contacts
Signs and Symptoms
How to take the test
What happens next
Bowel Screening Leaflets
Bowel Screening Programme Publications
Glossary
Bowel Screening Links
Bowel Screening - Frequently Asked Questions

Patient Satisfaction with Bowel Cancer Screening

In October 2013 the Northern Ireland Bowel Cancer screening programme carried out a patient satisfaction survey to obtain feedback from participants on their experience.

The survey was distributed by Specialist Screening Practitioners to participants who had received a positive screening result and attended for a screening colonoscopy. It included all aspects of the screening pathway from their invitation and results to the colonoscopy

One hundred and three surveys were returned, equating to a response rate of 40%

Twenty four per cent of survey respondents were female, 66% male and 10% did not indicate their gender.



Overall the survey reported a very positive experience with all aspects of the programme, with no significant variations in response across Trusts.

One area for improvement which was noted was in relation to participants receiving histopathology results after colonoscopy. Clear information needs to be given to all patients on discharge, in a timely manner and in a format which is readily understood.

The survey is to be repeated during 2016 with the intention of using a larger sample of participants.

 Bowel Screening uptake rates, Quarter 1 April-June 2015	Belfast	Northern	South Eastern	Southern	Western	Northern Ireland
	52.9%	60.4%	64.1%	56.1%	58%	58.4%

Produced by QARC for Health Professionals in NI Cancer Screening Programmes Spring 2016

If you would like to submit a news item, or would like to publish the results of an audit in **Screening Matters**, please contact Ken McInnes on 02890 311611 or write to Public Health Agency QARC, Ormeau Baths Office, 18 Ormeau Avenue, Belfast BT2 8HS. For further information, and back issues, please visit our website at: www.cancerscreening.hscni.net.

