

# Wakefield GP Practice Cancer Screening project

## Telephone script for contacting non-responders - Breast Screening

### Introduction

“Hello \_\_\_\_\_ (verify who you are speaking with).

My name is \_\_\_\_\_ I’m phoning from \_\_\_\_\_ (name of GP practice).

There is nothing to worry about. Is now a convenient time to talk? (If not, arrange a convenient time to call back). Your GP has noticed you haven’t attended for your breast screening. Is it OK to have a chat with you about this? Can I just check that you received your invitation letter?”

**YES**

**NO**

Can I ask is **there a particular reason** why you haven’t attended your screening?

Check the address is correct

Wants to participate but didn’t get round to it

Had a test privately or abroad

Unsure if still eligible

Does not want to participate

Explain the process to add the test result to their screening history (see information on pg. 2, section 2).

Explain the ‘Breast Screening Programme’ including benefits of screening, eligibility and discuss any barriers (see information on pg. 2, section 1 and Q&A’s on pg. 3).

Does not want to participate

Wishes to participate

Thank you for your time. You will continue to be invited every 3 years. If you would like to discuss this further please speak to your GP.

Give the contact details for the local breast screening centre for them to book an appointment.  
**0113 2063818**  
**0113 2063816**

Final question for **ALL**: “Do you have any suggestions to help people take part in screening?”

**Ending the call and consent to follow up.** “Thank you for your time today. We are making this phone call as part of a project funded by Yorkshire Cancer Research which aims to help people in Wakefield take part in cancer screening.”

“Are you happy for us to contact you again regarding <sup>1</sup> your experience of the project and any feedback you have?”

## Information

### **1. Breast Screening Programme**

Breast screening is offered to all women aged 50-70 every 3 years. There is currently a trial to extend this to 47– 49 and 71-73. So you may have been part of this trial.

Breast screening aims to find breast cancers early. It uses an X-ray test called a mammogram that can spot cancers when they're too small to see or feel.

The mammogram takes place at a special clinic or mobile breast screening unit. This is done by a female health practitioner.

Your breasts will be X-rayed 1 at a time.

The breast is placed on the X-ray machine and gently but firmly compressed with a clear plate. Two X-rays are taken of each breast at different angles.

After your breasts have been X-rayed, the mammogram will be checked for any abnormalities. The results of the mammogram will be sent to you and your GP no later than 2 weeks after your appointment.

Whether or not to take part in breast screening is a personal choice.

#### ***Every time 100 women are screened:***

- 96 women have a normal result
  - 4 are called back for more tests
- Of those 4 called back:*
- 3 are found not to have cancer
  - 1 has cancer

*Screening saves about 1 life from breast cancer for every 200 women who are screened. This adds up to about 1,300 lives saved from breast cancer each year in the UK.*

### **2. Patients who have had a test done privately or abroad.**

Women registered with a GP Practice who have private tests or have tests carried out abroad are entitled to a free NHS test and can still take part in screening when invited. If you want you can have your screening done here.

If you bring a copy of the result into the practice we can update your records. This will help keep your records up to date and stop any letters being sent to you reminding you to attend.

### **3. Information for Transgender people**

If you are transgender it is important that your GP contacts the NHS Breast Screening Programme so you are invited for screening correctly.

If you do not want to be invited for breast screening, you will need to contact your local breast screening centre. They will explain how you can opt out of breast screening.

Let them know if you would:

- like your appointment at the beginning or end of a clinic
- prefer to be screened at your local breast screening centre rather than a mobile breast screening unit.

### **Important note:**

If you have any symptoms of any sort please make an appointment with your GP.

## Questions and answers

**1. I have found a lump in my breast or am experiencing a breast cancer sign or symptom. Can you tell me how I can get a mammogram?**

If you have found something that worries you, do not wait to be offered screening. See your GP. They'll decide whether or not you need to be referred for further tests or treatment.

**2. I'm worried that breast screening will hurt because of the size of my breasts.**

The mammography practitioners are used to screening women of all sizes and will do their best to minimise any discomfort. Try not to worry.

To get the best possible picture of the breast requires some compression of the tissues. Some ladies notice very little, some find it uncomfortable; a few do find it painful. The compression time is only a few seconds and is carefully monitored. The benefits far outweigh the temporary discomfort. For women with very large breasts, additional pictures are sometimes needed to make sure all the breast tissue is included.

**3. What if I have breast implants?**

If you have breast implants. Mammography can be less effective in women who have breast implants because the X-rays cannot "see" through the implant to the breast tissue behind it. You'll usually be able to have a mammogram, but let the screening staff know beforehand.

**4. Can I walk into the mobile breast screening unit and request a mammogram?**

No. The NHS Breast Screening Programme does not operate on a walk-in basis.

You can contact your local breast screening service on 01132063816 to make an appointment. If you're concerned about your breast health, please see your GP.

**5. Why does breast screening stop at 70?**

Although women aged 71 and over are not routinely invited for breast screening, they're encouraged to call their local breast screening unit to request breast screening every 3 years.

**6. Can women with a physical disability be screened?**

If you have a disability, please contact the breast screening unit before your appointment.

You have to be carefully positioned on the X-ray machine and must be able to hold the position for several seconds. This may not be possible for women with limited mobility in their upper bodies or who are not able to support their upper bodies without help. Your breast screening unit should be able to tell you if screening is possible and about the most appropriate place to be screened. If a mammogram is not technically possible, you should still remain in the call and recall programme, as screening may be easier if your mobility gets better in the future.

**7. I'm a carer looking after someone who lacks the mental capacity to make their own decisions about screening. They have been invited for breast screening. How should I deal with their invitation?**

If the person you care for is not able to make their own decisions about screening, then you, as their carer, should make a "best interests" decision on their behalf.

You can speak to their GP for advice if the person you care for does not have the capacity to give their consent. You can ask them about the person's risk of developing the cancer in question and how screening might affect them. To help someone with limited capacity understand the screening process, you may find the 'easy guide to breast screening' leaflet helpful. This can be found on the gov.uk website under breast screening.

**8. I'm in the process of changing from a man to a woman. I'm over 50. Am I entitled to breast screening?**

If you're undergoing male to female gender reassignment and are registered as male with a GP, you will not be invited for breast screening. However, if you have been on long-term hormone

therapy, you may be at increased risk of breast cancer. Talk to your GP about getting a referral for a mammogram. If you have any symptoms of breast cancer, you should see a GP in the usual way.

**9. I'm changing from a woman to a man. Will I still be offered breast screening?**

If you're going through female to male gender reassignment, you'll continue to be invited for breast screening as long as you're registered as female with your GP practice, unless you ask to be removed from the programme or have had both breasts removed.

**10. What happens to my mammograms after screening?**

The NHS Breast Screening programme will keep your mammograms for at least 8 years. These are saved securely. The screening programme regularly checks records to make sure the service is as good as possible.

**11. Why does the NHS offer breast screening?**

The NHS offers screening you save lives from breast cancer. Screening does this by finding breast cancers at an early stage when they are too small to see or feel. Screening does not prevent you from getting breast cancer. Following screening, about 1 in 25 women will be called back for further assessment. Being called back does not mean you definitely have cancer. The first mammogram may have been unclear. Most women who receive an abnormal screening result are found not to have breast cancer. These women may experience unnecessary worry and distress. About 1 in 4 women who are called back for further assessment are diagnosed with breast cancer.

**12. What if I have a family history of breast cancer?**

If you think you may have an increased risk of breast cancer because you have a family history of breast cancer (female or male) or ovarian cancer, talk to your GP so you can be referred to a hospital high-risk clinic. The clinic may refer you for genetic testing if they feel it's appropriate.

**13. I find the whole thing embarrassing and uncomfortable.**

The mammogram only takes a few minutes and the trained staff will explain what will happen and try to make the experience as comfortable as they can. The whole appointment takes less than half an hour.

**14. I'm worried about what the test might find.**

Breast screening aims to find breast cancers early. It uses an X-ray test called a mammogram that can spot cancers when they're too small to see or feel. If it's detected early, treatment is more successful and there's a good chance of recovery.

**15. Mammography uses radiation. Is this investigation safe?**

Radiation can be dangerous if used inappropriately. A mammogram is a type of X-ray, and X-rays can, very rarely, cause cancer. We are exposed to radiation all the time, this is called background radiation. The radiation dose from a mammogram is similar to the radiation exposure obtained in an air flight to America from the U.K. But the benefits of screening and early detection are thought to outweigh the risks of having the X-ray.

**16. Finding cancers that would have never have become life threatening?**

For every 1 woman who has her life saved from breast cancer, about 3 women are diagnosed with a cancer that would never have become life threatening. Researchers are trying to find better ways to tell which women have breast cancers that will be life threatening and which women have cancers that will not. It's up to you to decide if you want to have breast screening

For more information, visit [www.nhs.uk](http://www.nhs.uk) and search for 'breast screening'.

*Information taken from <https://www.nhs.uk/conditions/breast-cancer-screening/>*