Identifying the barriers and facilitators for people with severe mental illness and/or learning disabilities for PErson Centred Cancer Screening services (PECCS)

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NIHR | Applied Research Collaboration North East and North Cumbria

This project is supported by the NIHR Applied Research Collaboration (ARC) North East and North Cumbria (NENC)

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INTRODUCTION

- Cancer screening programmes are used to improve survival and reduce mortality from cancer, through early identification and thus treatment.
- The physical health of people with learning disabilities or severe mental illness is poorer than the general population, leading to a reduced life expectancy.
- The uptake of screening for people with severe mental illness *(Public Health England, 2021)*, and people with learning disabilities *(NHS Digital, 2021)*, to those without differs greatly:

	Uptake of people with severe mental illness (SMI)		Uptake of people with learning disability (LD)	
	With a SMI	Without SMI	With a LD	Without a LD
Cervical	70.0%	75.0%	30.5%	66.8%
Breast	57.0%	63.0%	48.1%	62.6%
Colorectal	59.0%	45.0%	43.3%	62.7%

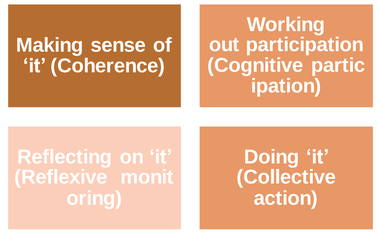
AIM AND OBJECTIVES

The aim of this research is to identify how cancer screening services can be adapted to support the uptake of people with severe mental illness and/or learning disabilities.

1) To explore the barriers and facilitators for people with severe mental illness and/or learning disabilities in accessing NHS cancer screening services;
2) To make recommendations for healthcare practice, ensuring equality of access to person centred screening services for both groups;
3) To plan and design future research to obtain an expert consensus on solutions to implement recommendations to support informed and shared decision making and uptake cancer screening for both groups.

THEORETICAL UNDERPINING

The study is underpinned by Normalisation Process Theory (NPT) *(May et al. 2009)*.This will ensure the research is focused on implementation science to minimise the barriers and enhance the facilitators to ensure access to and acceptability of cancer screening.



METHODS

Timescale - 18 months from March 2022 to September 2023.
Ethical Approval - Ethical approval has been obtained from the Health Research Authority (HRA) and Teesside University.
Patient and Public Involvement - People with severe mental illness and people with learning disabilities are members of the study team and the projects advisory board and are involved in the design, development and analysis phases of the study with involvement being reimbursed according to NHS (2021) rates.



Database searches: PsycInfo, MEDLINE, SCOPUS, CINAHL, EMBASE, ProQuest Nursing & Allied Health, MEDNAR and Google scholar.
Inclusion criteria: Focus on the three cancer screening programmes, focus on severe mental illness, focus on barriers and facilitators, English language, all research designs accepted.
Analysis: Framework Synthesis using the concepts of NPT.
Total Papers: 480
Papers Included: 17
Gaps in literature: Bipolar, male participants only, and colorectal screening.

Phase 1a – **A mixed methods systematic review** of barriers and facilitators for people with severe mental illness accessing cancer screening services.

To address the gaps in evidence identified by the systematic review, of the barriers and facilitators to cancer screening, up to 36 people will be interviewed.
Inclusion criteria: Have a confirmed diagnosis of bipolar, aged between 25-74, live in the North-East of England or North Cumbria, happy to talk about cancer screening, can consent to participate and speak English.
Three groups of participants:
1. Males aged 50-74 with bipolar, to discuss colorectal cancer screening.
2. Females aged 50-74 with bipolar, to discuss colorectal cancer screening.
3. Females aged 25-71 with bipolar, to discuss cervical and breast cancer screening.
Analysis: Framework Synthesis using the concepts of NPT.

Phase 1b – **Semi structured interviews** of people with severe mental illness whose voice has not been represented in the systematic review.

Phase 2a – **Triangulation** of phase 1a and 1b, with research already completed involving people with learning disabilities.

Future phase of the project.

Phase 2b – **Future research** planning and **protocol development**.

Future phase of the project.

HELPING TO REDUCE INEQUALITIES

- The findings of the research aim to identify commonalities across the populations of people with severe mental illness and people with learning disabilities, as well as population specific considerations in relation to the barriers and facilitators in accessing cancer screening.
- These will be used to make recommendations for cancer screening services to implement reasonable adjustments, that can support people with severe mental illness and people with learning disabilities in accessing cancer screening services.
- This aligns with the Equality Act 2010, which is a legal framework for supporting people to access services in the UK, that stresses reasonable adjustments must be made to services if it is reasonable to do so.
- The findings from this research can ensure that services take a proactive approach to making reasonable adjustments to ensure person centered cancer screening services that meet the needs of people with severe mental illness and people with learning disabilities. Thus, resulting in informed decision making, uptake of cancer screening, and a reduction in equalities.

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REFERENCES

Farmer, T., Robinson, K., Elliott, S.J. and Eyles, J., 2006. Developing and implementing a triangulation protocol for qualitative health research. Qualitative health research, 16(3), pp.377-394.

May, C.R., Mair, F., Finch, T., MacFarlane, A., Dowrick, C., Treweek, S., Rapley, T., Ballini, L., Ong, B.N., Rogers, A. and Murray, E., 2009. Development of a theory of implementation and integration: Normalization Process Theory. Implementation Science, 4(1), pp.1-9.

Public Health England (2021). Severe mental illness (SMI): inequalities in cancer screening uptake report. [online]. Available at: https://www.gov.uk/government/publications/severe-mental-illness-inequalities- in-cancer-screening-uptake.

NHS Digital (2021). Health and care of people with learning disabilities. [online]. Available at: https://digital.nhs.uk/data-and-information/data-tools-and-services/data-services/general-practice-data-hub/health-and-care-of-people- with-learning-disabilities#top.

NHS Reimbursing expenses and paying involvement payments. (2021). https://www.england.nhs.uk/wp-content/uploads/2017/08/B0869_Working-with-patient-and-public-voice-partners-reimbursing-expenses-and-paying-involvement-payments.pdf

PECCS Person Centered Cancer Screening Services

Teesside University

Northumbria University NEWCASTLE

Acknowledgements: We would like to thank the project advisory group and the North-East and North Cumbria Integrated Care System Mental Health Programme for their support on the project. We would also like to thank ARC North East North Cumbria Research Design Service.