Breast Screening for Individuals with Learning Disabilities

SaTH Improvement Hub

Theme | Health Inequalities

Produced by | Breast Imaging Department

Case Study Date | February 2025 – June 2026

NHS The Shrewsbury and Telford Hospital NHS Trust

REASON WHY?

People with learning disabilities experience significant inequalities in breast screening access, resulting in lower attendance and higher DNA rates than the general population (NHS Digital, 2021; Sykes *et al.*, 2022; Sykes, McGeechan, and Giles, 2024). As breast screening can reduce breast cancer mortality through early detection, these disparities can lead to poorer health outcomes (Independent UK Panel on Breast Cancer Screening, 2012). Limited information sharing between GP practices and the breast screening service further contributed to a reactive rather than proactive approach to support.

SMART AIM

S SPECIFIC | M MEASUREABLE | A ACHIEVABLE | R RELEVANT | T TIME-BOUND

Reduce inequalities in breast screening attendance for people with learning disabilities in Shropshire, Telford and Wrekin by lowering the rate of mom-attenders (DNAs) from 16.87% (2024-25) to 12% (2025–26) by June 2026.

PLAN

To improve access to breast screening for people with learning disabilities through personalised support, accessible information and targeted interventions, supporting NHS England priorities to reduce health inequalities and improve early diagnosis.

Key Interventions

Accessible Information and Communication
Co-produce local easy-read resources.
Improve communication between GP practices and screening services to identify reasonable adjustments early.

Community Engagement
Deliver breast screening awareness sessions.
Work with people with lived experience, carer and partner organisations to co-produce resources and gather feedback.

Familiarisation and Desensitisation
Offer pre-visit opportunities to meet staff and explore the screening environment.
Pilot familiarisation appointments before screening.

Personalised Support
Introduce pre-screening contact to identify support needs.
Enhance staff knowledge through learning disability awareness and communication training.
Strengthen partnerships with community services.

Evaluation Measures
DNA rates and screening uptake
Attendance and feedback from events
Patient, carer and staff experience
Engagement with workforce development activities

DO

Following consultation with people with lived experience, community partners and specialist services, a programme of targeted interventions was implemented.

Pre-screening Support
Introduced pre-screening calls from May 2025 to identify support needs and reasonable adjustments.
Developed a formal pathway for invitation process, declined invitations and enhanced support.

Breast Health Check Appointments
From May 2025 letters were reframed as a familiarisation opportunity providing longer, quieter appointments before screening commenced. This was trialled with eight individuals.
Implementation of pre-screening calls made this appointment style redundant.

Workforce Development
Delivered bespoke training to 15 staff members in May 2025 on learning disability health inequalities, communication, reasonable adjustments and LeDeR learning.

Community Engagement
Delivered an accessible Breast Screening Awareness event on 28/10/25 supported by five stakeholders with 12 individuals in attendance.
Delivered two interactive community workshops to approximately 15 individuals in October 2025 and February 2026 in partnership with local organisations.

Accessible Resources
Started developing easy-read information leaflet in May 2026 for breast, bowel and cervical screening to support Annual Health Check conversations.

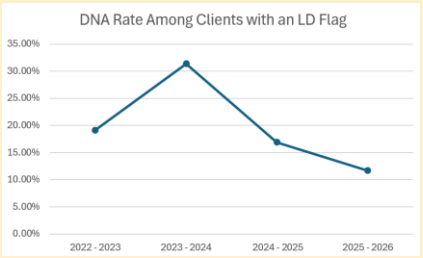
STUDY

The project achieved **5.18%** reduction in DNA rates, **falling from 16.87% in 2024-25 to 11.69% in 2025-26**. This represents the lowest DNA rate since 2022 and exceeded improvements seen across the wider screening population.

Key Findings

Pre-screening phone calls had the greatest impact.

- 64 calls completed between May 2025 and June 2026. Successful contact made with 54 individuals.
- Supported:
  - 28 completed screenings
  - 8 attended but were not successfully screened
  - 18 informed declines
  - 5 previous non-attenders to engage
  - Only 3 subsequent DNAs



Breast Health Check Appointments

- Provided an effective reasonable adjustment for individuals needing additional support.
- Feedback demonstrated increase in confidence, trust and informed decision-making.

Awareness Events and Community Workshops

- All participants rated themselves as 'confident' on the exist survey, demonstrating the value of experiential learning in a calm, controlled setting.
- Demonstrated the value of delivering information in familiar, low-stimulus environments using accessible and sensory-friendly approaches.
- Strengthened partnerships with local organisations supporting people with learning disabilities.

The project improved engagement with screening, reduced DNAs and demonstrated the value of personalised, proactive support in reducing health inequalities. The findings suggest personalised communication is more effective than the standard reminder systems for this population.

ACT

Due to impact on reducing DNAs and improving informed attendance. Pre-screening phone calls and will be **ADOPTED** as will targeted awareness events.

Breast Health Check appointment model will be **ADAPTED** to be offered during pre-screening calls.

The dedicated DNA open afternoon model trialled in May 2025 will be **ABANDONED** due to lack of engagement and clinical capacity.

Next steps

- Expand community outreach across the screening programme area and include care provider sessions.
- Complete audit to identify barriers to successful screening.
- Finalise and implement easy-read screening resources.

ACKNOWLEDGEMENTS & REFERENCES | We would like to thank everyone who contributed to this project. Your expertise, feedback, and lived experience insights have been invaluable in shaping interventions that better support individuals with learning disabilities and their support networks through meaningful co-production. Full references available on request.