



# South Yorkshire and Bassetlaw Abdominal Aortic Aneurysm Screening Programme



# A Contents

			Page	
For	eword		3	
1.	Intr	oduction	4	
	1.1	What is an Abdominal Aortic Aneurysm?	5	
	1.2	South Yorkshire and Bassetlaw	6	
	1.3	South Yorkshire and Bassetlaw Abdominal Aortic	8	
		Aneurysm Screening Programme		
2.	Stra	9		
	2.1	Aims	9	
	2.2	Strategy	10	
3.	Pro	gramme Delivery	11	
	3.1	Clinics	11	
	3.2	Programme Team	12	
	3.3	Contact Details	14	
4.	Scre	eening Pathway	15	
	4.1	Identification	15	
	4.2	Invitation	15	
	4.3	Inform	15	
	4.4	Test	15	
	4.5	Surveillance	16	
	4.6	Diagnosis	17	
	4.7	Treatment and Intervention	17	
	4.8	Monitor	17	
<b>5.</b>	Pro	gramme Performance	18	
	5.1	Headline Statistics	18	
	5.2	Data	18	
6.	Stal	keholder Engagement	22	
	6.1	Equality and Equity	22	
	6.2	Community and Service User Engagement	22	
	6.3	Health Professionals	28	
	6.4	Media	28	
7.	Key	Achievements	29	
8.	. Future Developments			



#### **Foreword**

## This report highlights the achievements to date of the South Yorkshire and Bassetlaw Abdominal Aortic Aneurysm Screening Programme (SYBAAA) and notes the high quality of services that has hitherto been achieved.

The SYBAAA Screening Programme has had another successful year through innovative service delivery and has achieved very high public satisfaction ratings.

The programme works in close partnership with both provider units in South Yorkshire and Bassetlaw thus enabling effective treatment of those whose aneurysms have been detected through screening.

The South Yorkshire and Bassetlaw Screening Team is a well-focused and enthusiastic team whose efforts have continued to make the South Yorkshire and Bassetlaw Programme one of the best in the country.

#### R J Cuschieri

MD, CHM, MEd FRCS

Consultant Vascular Surgeon
Clinical Director SYBAAA



# This is the second Annual Report of the South Yorkshire and Bassetlaw Abdominal Aortic Aneurysm (AAA) Screening Programme.

The report details programme performance for the 2016/17 screening year. It outlines key achievements and highlights how current activity and future developments will maintain the high standard of service delivery, encourage all eligible men to attend to be screened and continue to work to remove barriers to the uptake of screening.

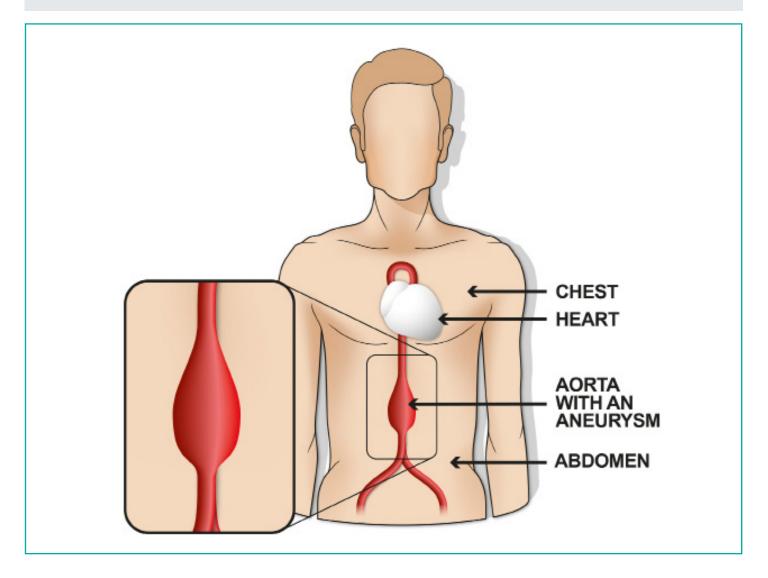
Following consideration of the requirement to reduce the number of deaths from ruptured aortic aneurysms, the UK National Screening Committee approved the introduction of the NHS Abdominal Aortic Aneurysm Screening Programme (NAAASP).

Established in 2009, the phased roll out across England was completed in 2013. The SYBAAA Screening Programme, which held its first screening clinic in Sheffield on 25 February 2013.

There are currently 41 local screening programmes offering AAA screening to men aged 65 and over residing in England.



## 1.1 What is an Abdominal Aortic Aneurysm?



An abdominal aortic aneurysm (AAA) is a swelling of the abdominal aorta. AAA screening is a process of identifying men who appear healthy but may be at risk of having an AAA. Aneurysms in the abdominal section of the aorta develop most commonly in men aged 65 and older, are predominantly asymptomatic and are often only detected incidentally in the course of investigations for often unrelated conditions.

There are a number of associated risk factors including smoking, high blood pressure and high blood cholesterol. Having a close relative who had, or has, an AAA also increases the risk of developing an AAA.

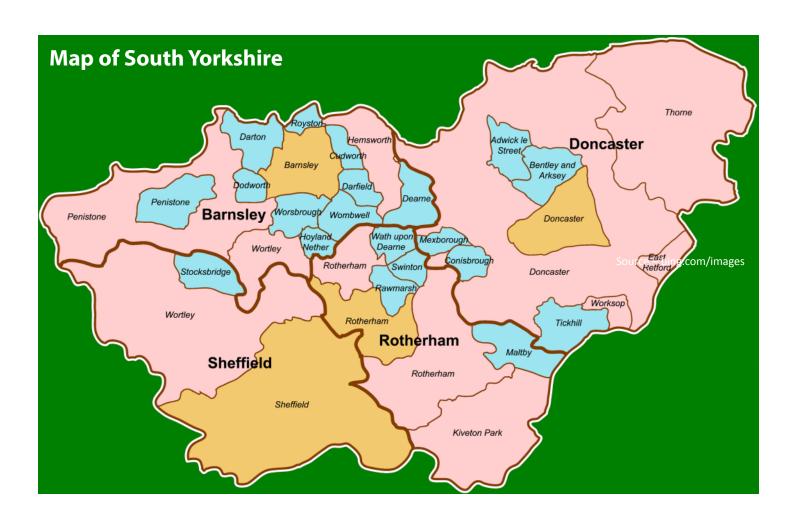
Large AAA's, over 5.5cm in diameter, are less common, but as they carry an increased risk of rupture they can be serious. In the UK ruptured AAA's account for 2.1 per cent of all deaths in men aged 65 and over, with almost a third of these dying in the community before reaching hospital.

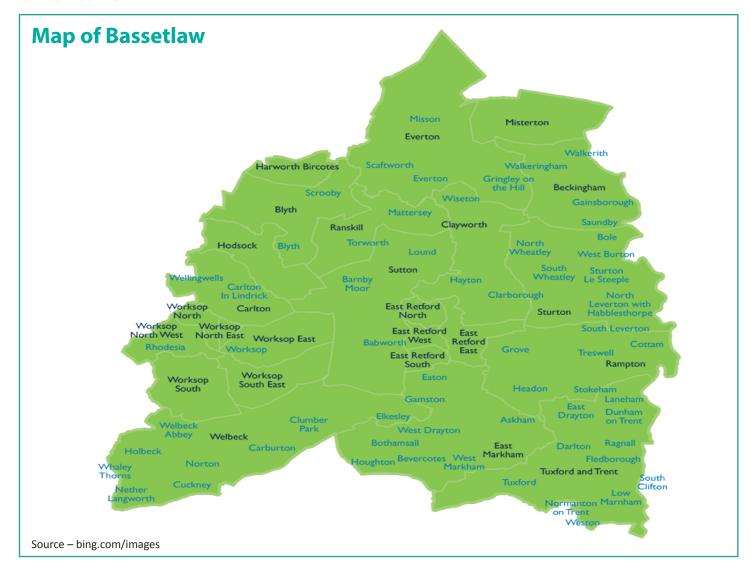
In contrast, through screening and early detection, treatment can be offered at an earlier stage. Open surgery or Endovascular repair surgery are the two most common treatments to repair large aneurysms and when offered in high quality vascular centres result in more than 98 per cent of patients surviving repair surgery.

#### 1.2 South Yorkshire and Bassetlaw

Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust is the local provider of the South Yorkshire and Bassetlaw AAA Screening Programme. Comprised of five Clinical Commissioning Groups (CCG's) the programme covers the large demographic area of:

- Barnsley
- Bassetlaw
- Doncaster
- Rotherham
- · Sheffield







## 1.3 South Yorkshire and Bassetlaw AAA Screening Programme

The South Yorkshire and Bassetlaw Abdominal Aortic Aneurysm Screening Programme is coordinated and managed via a centrally located screening office situated at Montagu Hospital, Mexborough, S64 0AZ.





## **Strategic Direction**

#### 2.1 Aim and Mission Statement

The goal of the SYBAAA Screening Programme is to perform within the top 10 per cent nationally in our category. We plan to achieve this aim by providing high quality, comprehensive systematic screening, surveillance and vascular referral to the eligible population. In doing this we:

#### Aspire to Always be the best in delivering Accurate equitable treatment

#### Specifically we will:

- Promote AAA screening across South Yorkshire and Bassetlaw
- Increase uptake of screening appointments
- Increase the number of self-referral service users
- Reduce the number of clients who do not attend for screening.



## 2.2 Strategy

Identity Invite Inform

The service has a firm strategic direction which is clearly articulated in the SYBAAA Strategic Map.

The mission and goals are aligned to the strategic direction of Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust, the aim of the NAAASP and the NHS outcome domains for improving health outcomes and improving quality.

# South Yorkshire and Bassetlaw Abdominal Aortic Aneurysm Screening: Strategy 2016 - 2019

The SYBAAA Screening Programme aim to be within the top 10 per cent nationally. Achieved by delivering high quality, consistent, comprehensive, systematic screening, surveillance and vascular referral to the eligible population.

#### Aspire to be the best in Always delivering Accurate, equitable treatment

Quality		Performance		Development		Addressing health inequalities	
Quality Assurance	In response to incident root cause analysis activate quality assurance action plan	Quality Standards and Service Objectives	Robust compliance to NAAASP standards and objectives	National Policy Changes	Timely implementation of national policy changes	Eligible Screening Population	Ensure needs are reflected for coverage and uptake
Staff	Service appropriate recruitment to optimise staff retention	National Metrics/ KPI's	Timely submission of outpatient and referral data	Staff	Raise the profile of the programme locally and nationally	Identification and Invitation	Monitor identification in compliance with national data. Ensure format and language
Failsafes	Included, implemented and functioning. Responsive to QA action plans	SIAG	Timely submission of local and national reporting	Innovation	Develop in line with best practice. Use technology to improve uptake	Champions locally and nationally	Strategically liaise with AAA communications to optimise service promotion. Annual Report
Engagement	Escalate complaints, embed in QA action plan. Bi annual patient satisfaction survey	Regional Networking Meeting	Benchmarks performance regionally. Network for best practice	Technology	Equipment up to date, quality assured and electrically safe	Governance supporting Equity and diversity	Monitor and evaluate diversity of population at quarterly intervals

The NHS AAA Screening Programme aims to reduce AAA-related mortality by providing asystematic population-based screening programme for the male population during their 65th year, and on request, for men over 65.

## **Programme Delivery**

## 3.1 Clinics

Providing widespread access across South Yorkshire and Bassetlaw, there are 36 screening clinic sites within the five CCG cohort boundaries. This includes provision at the following types of premises:

• GP practices • LIFT buildings • Local community hospitals

Barnsley	Barnsley Bassetlaw		Doncaster Rotherham	
Hill Brow Surgery Long Croft Mapplewell Barnsley S75 6FH	Bassetlaw District Hospital Blyth Road Worksop S81 0BD	Bentley Surgery 128 High Street Bentley Doncaster DN5 0AT	Aston Customer Services Worksop Road Swallownest S26 4WD	Avenue Medical Practice 7 Reney Avenue Sheffield S8 7FH
Park Grove Medical Centre 124-126 Park Grove Barnsley S70 1QE	Harworth Medical Centre 104 Scrooby Road Bircotes Doncaster DN11 8JT	Conisborough Medical Centre The Stone Castle Centre Gardens Lane Conisborough DN12 3JW	Clifton Medical Centre Doncaster Gate Rotherham S65 1DA	Crystal Peaks Medical Centre 15 Peaks Mount Sheffield S20 7HZ
Roundhouse Medical Centre Wakefield Road Athersley Barnsley S71 1TH	Retford Hospital North Road Retford DN22 7XF	<b>Montagu Hospital</b> Adwick Road Mexborough S64 0AZ	<b>Maltby Joint</b> Services Centre Braithwell Road Maltby Rotherhan S66 8AB	<b>Darnall Health Centre</b> 2 York Road Sheffield S9 5DH
The Cudworth Centre Carlton Street Cusworth Barnsley S72 8SU		Sandringham Road Health Sandringham Road Intake Doncaster DN2 5JH	Morthern Road Surgery 2 Morthen Road Wickersley Rotherham S66 1EU	<b>Dovercourt Surgery</b> 3 Skye Edge Avenue Sheffield S2 5FX
Kingswell Surgery 40 Shrewsbury Rd, Penistone, Sheffield S36 6DY		The Flying Scotsman Centre St Sepulchre Gate West Doncaster DN1 3AP	Ravenfield Surgery 8 Hollings Road Ravenfield Rotherham S65 4PU	<b>Richmond Road Surgery</b> 400 Richmond Road Sheffield S13 8LZ
	South Yorkshire and Bassetlaw AAA Screening Programme Clinical Venues  Abdominal Aortic Aneurysm (AAA) screening		Rawmarsh Joint Services Centre Barbers Avenue Rawmarsh S62 6AE	Sheffield City GP Medical Centre Rockingham House Broad Lane Sheffield S1 4BT
Clinical \			Rotherham Community Health Centre Greasborough Road Rotherham S60 1RY	<b>Tramways Medical Centre</b> 54 Holme Lane Sheffield S6 4JQ
			<b>New York Stadium</b> New York Way Rotherham S60 1AH	Valley Medical Centre Johnson Street Stocksbridge Sheffield S36 1BX
The Health Bus various sites available			Kiveton Park Primary Care Chapel Way, Kiverton Park S26 6QU	<b>Wincobank Medical Centre</b> 205 Tyler Street Sheffield S91DJ
			<b>Dinnington Group Practice</b> New Street Dinnington S25 2EZ	
			Woodsetts Health Centre 2 A Berne Square Woodsetts S81 8 RJ	



Widespread provision through the 36 sites is enhanced by the unique local initiative of a mobile clinic delivered on the "Health Bus", allowing the service to provide clinics within:

- Working Men's Clubs
   Community Centres
   Golf Clubs
   Shopping Centres
- Supermarkets
   Football Stadiums
   Places of Worship



AAA screening is offered and delivered to eligible men at local prisons and places of detention thanks to excellent liaison with healthcare and administrative staff at the centres. Additional clinics have also been delivered in secure Mental health Units.

## 3.2 Programme Team

The service is provided by a highly motivated multi-disciplinary team of clinical and administrative staff. Their dedicated work is key to the local provision of a high quality, safe, effective service.

In compliance with NAAASP recommendations all clinical staff possess, as a minimum, the following qualification and competencies and undertake the mandatory training within the national framework:

- NAAASP approved training and accreditation course for screening technicians (Level 3 Diploma for Health Screeners)
- NAAASP approved 'Fast Track' training and accreditation course for the Clinical Skills, Trainer and Nurse practitioner

## The Team:



Mr Ray Cushieri
AAA Clinical Director
Consultant Vascular
Surgeon



Michelle Keefe
Screening Programme
Co-ordinator



Amanda Ford

AAA Screening

Technician



Emma Veitch

AAA Screening

Technician



Pamela Hinchliffe Screening Programme Administrator



Louise Walters

AAA Clinical Skills

Trainer



Simon Lindley

AAA Screening

Technician



Joanne Swift

AAA Clinical Skills

Trainer



Nicola Wilkinson

AAAScreening

Technician



Rachel Lambert
Nurse Practitioner



## 3.3 Contact details

#### The programme can be contacted by telephone, email, text or by post.

South Yorkshire and Bassetlaw AAA Screening Programnme Montagu Hospital, Adwick Road

Mexborough

South Yorkshire.

S64 0AZ

Tel: 01709 649100

Email: dbh-tr.dbhaaa@nhs.net

Website: aaa.dbh.nhs.uk





## **Screening Pathway**

Abiding by the NHS Public Health Function specification, the service and screening pathway provided by SYBAAA Screening Programme is divided into the eight following stages:

## 4.1 Identification

The cohort details of men who will be 65 within the cohort year 1 April to 31 March are uploaded annually via the Screening Management and Recall Tracking (SMaRT) database, the NAAASP approved database for managing call and recall of AAA screening and surveillance clients. The cohort details are restricted to client name, date of birth, NHS number, residential CCG and address plus general practitioner CCG and address.

#### 4.2 Invitation

Complying with NAAASP specified standards SYBAAA Screening Programme generates and posts out invitation letters three weeks before the clinic appointment date.

## 4.3 Inform

The information provided in the appointment letter is provided in a variety of formats including:

- Paper format
- Electronic format
- Other languages on request.
- Easy read format

Clients are also signposted to contact the c/o the AAA Screening website, aaa.screening.nhs.uk, should they require further information.

#### 4.4 *Test*

Upon arrival at the clinic men are met by a screening technician who will explain the screening process, possible outcomes, benefits and any risks. The technician will also ask for the man's consent for the screening and for his personal information to be retained by NAAASP for the purpose of programme evaluation, audit and research. The man is offered the opportunity to ask any questions.

A simple ultrasound scan is then carried out which produces an image of the abdomen enabling the technician to measure the width of the aorta. The measurement is taken at the widest point and recorded in paper and electronic form.



#### 4.4.1. Screening Outcomes

Men receive verbal and written confirmation of their result at the screening clinic. Their GP is then sent a letter confirming the result.

There are five possible outcomes to the scan as follows:

- **Normal:** the aorta measures less than 3cm and is not enlarged, meaning there is no aneurysm. No treatment or monitoring is required, the man will be informed he is discharged from screening and will receive no further invitations for screening.
- Small aneurysm: the aorta measures between 3cm and 4.4cm. Any man with a small aneurysm is invited back for scans every twelve months for monitoring.
- Medium aneurysm: the aorta measures between 4.5cm and 5.4cm. Men who are found to have a medium aneurysm are invited back every three months to monitor the size.
- Large aneurysm: the aorta measures 5.5cm or above. These men are referred to a vascular surgeon for further investigation and to discuss possible treatment which is usually an operation.
- **Non visualisation:** the aorta could not be visualised at the screening attendance. The man will be invited to re-attend for another appointment or referred to a Medical Imaging department for further imaging.

#### 4.5 Surveillance

Any man with a screen detected small or medium aneurysm is invited back for surveillance appointments as follows:

- Small (3.0 4.4 cm) aneurysm will be invited for annual surveillance scans
- Medium (4.5 5.4 cm) aneurysm will be invited for quarterly surveillance scans.

When a small or medium AAA is diagnosed men are also offered a face to face appointment with the nurse specialist at follow up or before their first scan The appointment covers:

- Height
- Weight
- BMI
- Smoking
- Medications Statins/Aspirins
- Exercise
- Any Concerns 3 month follow-up where requested.

A written journey will be provided and a copy sent to the GP.



## 4.6 Diagnosis

Detection of a large aneurysm triggers patient referral to a NAAASP approved vascular unit for confirmation of the diagnosis and consideration of treatment options.

Men from SYBAAA Screening Programme are referred to one of two vascular referral centres, they are:

- Doncaster Vascular Centre (DVC), Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust
- Sheffield Vascular Institute (SVI), Sheffield Teaching Hospitals NHS Foundation Trust

SYBAAA Screening Programme acknowledges client choice and does not influence the referral pathway.

All men referred to a vascular unit must be seen by a vascular surgeon within two weeks of the referral being made.

The vascular surgeon then takes over the management of the man's treatment often scheduling further diagnostic tests and offering either further surveillance or treatment, which is either surgical or endovascular.

If a further diagnostic test at the vascular unit shows the aneurysm to be less than 5.5cm in diameter, or the patient is unfit for surgery, continued follow up is arranged under the care of the vascular surgeon, not the screening programme.

#### 4.7 Treatment and Intervention

Clinical decisions on treatment and intervention are made by the host Vascular Team.

## 4.8 Monitor

SYBAAA Screening Programme monitors the vascular service management of referred clients to establish whether management timeframes comply with NAAASP service specifications. This includes monitoring to ensure that:

- Attendance at a Vascular outpatient appointment within 2 weeks of screen detection has been undertaken.
- If clinically appropriate surgical intervention is undertaken within 8 weeks of screen detection.



## **Programme Performance**

#### 5.1 Headline Statistics

South Yorkshire and Bassetlaw Abdominal Aortic Anneurysm Screening 2016/2017			
Uptake	81.5%		
AAA's detected	72		
Referrals made	12		
Surgery undertaken	10		

Table to show South Yorkshire and Bassetlaw headline statistics for 2016/2017

#### 5.2 Data

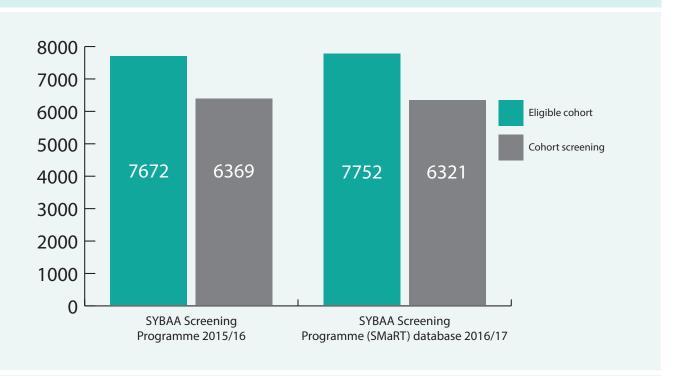
The report focuses on the data for the screening year 2016/2017 and includes references to data from the screening year 2016/2017.

The data is derived from NAAASP reports published on the Screening Management and Recall Tracking (SMaRT) database, the NAAASP approved call and recall system to manage screening, surveillance and vascular referral data.

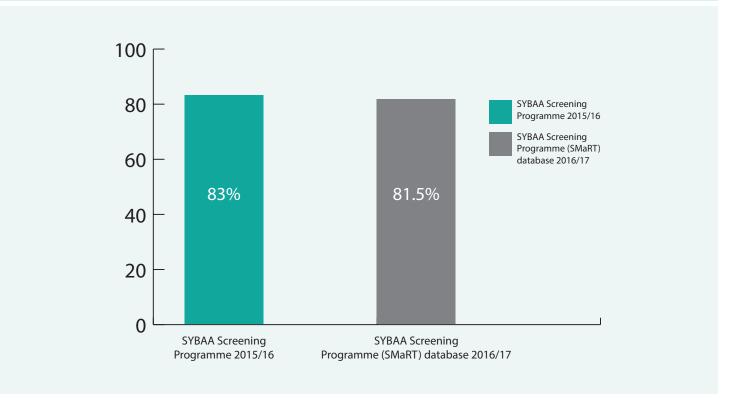
5.2.1 Within the SY and B cohort boundaries 7,752 men in their 65th year, 1 April 2016 to 31 March 2017, were eligible for AAA screening and were sent an invitation to attend an AAA screening appointment. From this eligible cohort of 7,752 men, 6,321 men attended their screening appointment resulting in an uptake of 81.5%.



The graph below shows the eligible cohort and the number men with a definitive scan result 2015/2016 and 2016/2017.



#### Graph to show percentage uptake 2015/2016 and 2016/2017

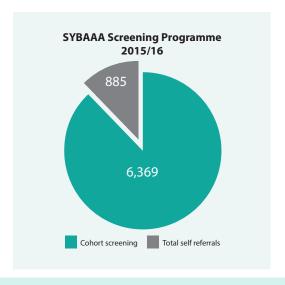


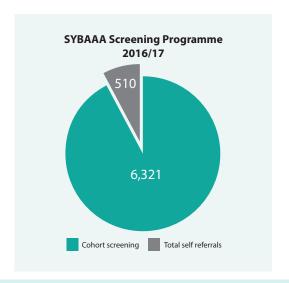
#### Summary

• Cohort uptake has remained over 80 per cent



5.2.2 The cohort numbers were boosted by the self-referral for screening of men aged over 65 in the year 1 April 2016 to 31 March 2017.





Pie charts 1 and 2: Pie charts to show the contribution of self-referrals to overall number of men screened 2015/16 and 2016/17

5.2.3 In the screening year 2016/2017, **346** surveillance scans were performed by SYBAAA Screening Programme.

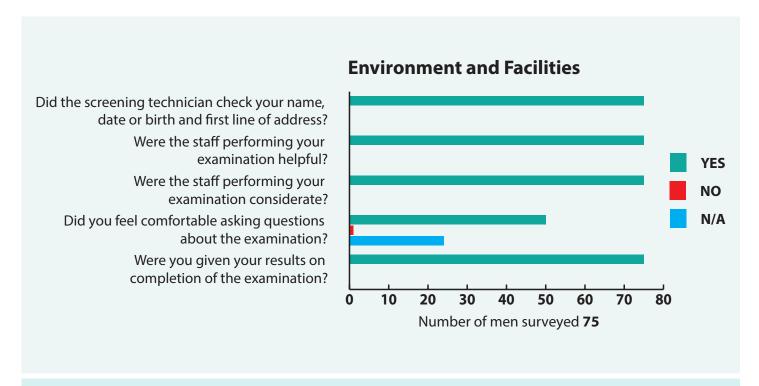
5.2.4 In the screening year 2016/2017, **12** referrals >= 5.5 cm were detected and referred, on the basis of service user preference and choice, to Doncaster Vascular Centre (DVC) or Sheffield Vascular Institute (SVI).

All service users (100%) received vascular consultation at the vascular referral centre of their choice within two weeks of their screen date. **Four** service users opted to refer to DVC and **eight** to SVI.

South Yorkshire and Bassetlaw Abdominal Aortic Anneurysm Screening 2016/2017					
Referral	Residential CCG	Size (cm)	Referral Centre		
1	Doncaster	6.0	DVC		
2	Rotherham	5.5	DVC		
3	Doncaster	6.4	DVC		
4	Doncaster	5.5	DVC		
5	Sheffield	7.4	SVI		
6	Sheffield	5.5	SVI		
7	Sheffield	6.6	SVI		
8	Barnsley	6.3	SVI		
9	Sheffield	5.5	SVI		
10	Rotherham	5.5	SVI		
11	Barnsley	7.4	SVI		
12	Sheffield	7.6	SVI		



- 5.2.5 Ten of the twelve men were found to be suitable for surgery and have received open repair or endovascular repair. One man declined surgery, one was unsuitable for surgery. Two men had their surgery completed within eight weeks of the screen date triggering referral. Four men had their surgery delayed for valid reasons.
- 5.2.6 Feedback from the bi-annual client satisfaction survey for 2016/17 indicates service users are happy with the facilities offered and the service delivered and 100% of those responding would recommend SYBAAA screening programme to family and friends.



Graph 3: Graph to show client satisfaction survey results - facilities





## **Stakeholder Engagement**

## 6.1 Equality and Equity

Screening is available to all men aged 65 who are registered with a GP, and have not been previously diagnosed with an AAA. All men over 65 who have not previously been screened can self-refer directly to the programme.

The SYBAAA Screening Programme is committed to ensuring screening is equally available to all eligible men.

## 6.2 Community and Service User Engagement

The health profile across South Yorkshire and Bassetlaw is a picture of high deprivation with the life expectancy of men lower than national average. SYBAAA Screening Programme ensures individuals, or groups of individuals are treated fairly and equally, specific to their needs. There are varied communities within the cohort boundaries including gypsy and traveller groups, LGBT and BME communities, learning disability groups, refugees and asylum seekers, a large prison population as well as an ex-mining community. Consequently, SYBAAA Screening Programme employs a variety of innovative screening and promotional opportunities to ensure equitable service delivery.

In order to reach all eligible members of our communities SYBAAA Screening Programme has worked to:

- Develop relationships with organisations and influential groups who will come in to contact with South Yorkshire and Bassetlaw men aged 65 and above
- Have a presence in areas where South Yorkshire and Bassetlaw men aged 65 and above, their partners and family are likely to be found
- Maximise the opportunities to raise awareness through the media by developing case studies and organising unique screening opportunities.

To achieve this, in 2016/2017 the service was promoted and clinics held in a wide variety of locations including shopping centres, football grounds, golf clubs and town centre locations. Case studies and service user champions were utilised to raise awareness. Examples of these methods are shown on the following pages.

6.2.1 **Barnsley,** a small town surrounded by several smaller villages, contains a large ex- coal mining community. Deprivation is higher than average and the life expectancy for men can be up to 8.5 years lower than the national average. In 2016/2017 there were 1,394 eligible for screening within Barnsley CCG.

A significant amount of engagement work has taken place in Barnsley, ranging from having a presence at various fairs in villages across the district, health promotion stands at tea dance venues and information to raise awareness included in publications, such as 'Barnsley Cares', the local carers newsletters.



- 6.2.2 **Bassetlaw** is predominantly rural with two towns, Worksop and Retford. It sees deprivation which is higher than the national average and records a life expectancy at 5.9 years lower for men than the national average. The eligible population for screening in 2016/2017 was 670 men. The screening team have been working with local garden centres and amenities to raise awareness of the programme.
- 6.2.3 **Doncaster** is a large town where the health of people is generally worse than the England average resulting in life expectancy being 9.4 years lower than the national average. A total of 1,738 men were eligible for screening in Doncaster CCG in 2016/2017.

There has been a substantial amount of engagement in the town and surrounding areas ranging from Partnership working with Doncaster Rovers Football Club, resulting in a series of pilot clinics at the football stadium and promotion on match days, on the football club website and in match day programmes.

6.2.4 **Rotherham** is a commercial town in a largely rural district. Recorded deprivation is higher than average and men here have a life expectancy 8.9 years lower for men than the national average. Rotherham saw 1,515 men eligible for screening in 2016/2017.

Partnership working with Crossroad Carers, promoting the importance of AAA screening to carers and staff. Further promotion includes awareness sessions at Rotherham Mencap and Rotherham United Football Club.

6.2.5 **Sheffield** is a large geographically diverse city in South Yorkshire. Again the deprivation is higher than average and life expectancy for men can be 10 years lower than the national average for men in the most deprived areas. 2,557 men living within Sheffield CCG were eligible for screening in 2016/2017.

Relationships have been established with community leaders in specific BME communities to educate and raise awareness in Sheffield including promotional and screening sessions at Zest Community Centre and Darnall Health and Wellbeing Centre.

## **Communication and Engagement:**

Image to show the variety of methods employed to promote South Yorkshire and Bassetlaw AAA Screening Services within the cohort boundaries.

**Doncaster** The Priory Place Church Hall





**Bassetlaw** Northern Garden **Supplies** 

Rotherham Cross Road Carers





Sheffield Talk and Screening Clinic at **Bramall Lane** (Silver Blades)



**Barnsley** Community Shop and New Lodge Club Screening Clinic



**Health Bus Clinic** at Meadowhall **Shopping Centre** 





## **Communication and Engagement Highlights 2016/17**

The Trust's Screening Communications and Engagement Team is responsible for the promotion of AAA screening across South Yorkshire and Bassetlaw.

The team's main objective for 2016/17 was to provide men who were due to turn 65, with the information needed to make an informed decision about AAA screening. On many occasions, men have been unaware that the programme existed, so was very appreciative of the time taken to explain the process of screening and the importance behind it. The majority said that they would look out for their invitation in the post and confirmed they would take up their offer of AAA screening.

#### **Increasing Self-Referrals**

In order to reach as many males over the age of 65, the Communications Team worked closely with the AAA Screening Team to establish numerous community based screening clinics – in village halls, football clubs, golf clubs and on board the health bus. These clinics ensured that the service was as accessible as possible. Due to such a positive response from golf clubs and working men's clubs the team have continued to approach these establishments and have arranged for the AAA team to screen members.

Following these clinics, press releases were developed highlighting the success of the event with a call to action for men aged 65 and over to be screened. These were sent out to the local media which generated significant coverage of the AAA Screening Programme.

#### **Engagement**

A large number of events and community groups have been attended across South Yorkshire and Bassetlaw, where engagement with the public has led to a large number of AAA self-referral packs being distributed to eligible men. Events include the Sheffield United Health Roadshow, Northern Garden Supplies, Doncaster Tea Dance, MG Dons – socially isolated group and the Macmillan Chinese Community Event.

The Screening Communications and Engagement Team delivered a talk to over 230 members of the Silver Blades (over 60's Sheffield United fans). This was to promote the upcoming screening clinic at Bramall Lane and to encourage men to sign up to be screened. The team received such a positive response with over 40 men self-referring on to the programme. A number of gents had already been screened, due to having such a positive experience, three of them came forward to act as case studies as and when needed.

A pilot scheme was established at Doncaster Rovers Football Club, in order to deliver 3 screening clinics at the Keepmoat Stadium. In order to promote the pilot, a press release was issued from both parties and coverage sought in match day programmes and on the Doncaster Rovers Football Club website.

Educational awareness sessions have been held within organisations that engage directly with the target audience on a regular basis. Examples of these are Rotherham and Bassetlaw mobile libraries, Home Instead Senior Care, Crossroad Carers, South Yorkshire Housing, Mencap and local community clubs such as bowling, cricket and rugby clubs. All members of staff were educated on the AAA screening programme and were given posters and AAA business cards to signpost eligible men to the programme.

The team has received continuous support from local shopping centres in the promotion of AAA screening.



#### **Local Case Studies**

Successful case studies have also been shared with the local media as a method of encouraging men to take up AAA screening. To coincide with 'Men's Health Week', a local case study was sourced. Victor Fairhead, from Doncaster, had a small aneurysm detected through an outreach clinic at Parklands Sport and Social Club's Tea Dance. He is currently under surveillance but jumped at the opportunity to promote the importance of screening to local men.

The press release was covered in four newspapers and on BBC Radio Sheffield which led to a large number of men contacting the AAA screening office to self-refer onto the programme.



#### A small aneurysm was detected at Victor's appointment.

Victor said: "I did not know about AAA screening and what an Abdominal Aortic Aneurysm was until there was a talk about the condition and we were offered screening appointments for a clinic which was all organised through the club. A number of my friends were going to appointments and I decided to get screened too as it wouldn't do any harm.

"I had absolutely no symptoms of anything at all so I am glad I took up the opportunity, and I'm grateful to the club for organising the clinic, otherwise I wouldn't be aware that I had a small aneurysm. I really hope other men aged 65 and over will do what I did and take the opportunity to get screened when they are offered it."

#### Other successful case studies include:



#### Roger, aged 66 from Sheffield.

Roger attended his routine AAA screening appointment shortly after retiring in 2014. Working for more than 7 years as a taxi driver, Roger described himself to feel in full health before the appointment and was shocked to hear that a large aneurysm had been detected requiring lifesaving surgery.

Roger said: "I am unbelievably grateful - I had no symptoms at all and if I had not been screened, it's hard to say for sure, but I might not have been here today. The funny thing is I am not usually interested in invitations to appointments to do with my health however, as the letter said that the appointment would only take 10 minutes and was very close to where I live, I luckily decided to go. It was there and then that the screening technician found an aneurysm larger than 5.5cm."

## △ △ Section 6



(L-r) Dave and Stephen

#### Stephen, 71 of Harworth.

Stephen discovered he had a large aneurysm after being screened at Harworth Comrades Social Club after a roll out of clinics to local social clubs in Doncaster and Bassetlaw.

The scan revealed that the former miner, now treasurer for the club, had an abdominal aortic aneurysm of over 7.8cm. Stephen is extremely grateful to Doncaster Branch Secretary at Doncaster Trades for pioneering the roll out of clinics and the AAA team for screening him on that day and spotting the aneurysm.

Stephen said: "I saw the clinic advertised at the club and thought that I would take 5 minutes out of my day to get screened.

I am so grateful to Dave for setting up the clinics and working with the AAA team to make screening so convenient for club members and for potentially saving my life as I wouldn't have known otherwise until it could have been too late."



## 6.3 Health Professionals

SYBAAA screening team have worked closely with health professionals across South Yorkshire and Bassetlaw to raise the profile of the AAA screening programme. Awareness sessions have been delivered at numerous PLT events and to members of staff working with individuals with learning disabilities, and alcohol and/or drug addictions.

#### 6.4 Media

After initial TV coverage on local ITV news programme, Calendar at its launch in 2013, SYBAAA Screening Programme has continued to build relationships with local media teams which has been invaluable in order to raise awareness of AAA amongst both the target audience and the general public. This has included coverage in local newspapers and radio interviews about the AAA screening on Penistone FM, (Barnsley), Sine FM (Doncaster), Radio Sheffield and Dearne FM (Barnsley and Rotherham).



AAA Screening Technicians with the Chair of Mens Group Doncaster (MG Dons).



## **Key Achievements**

In 2016/17 the Health Bus mobile screening unit has become well established. The SYBAAA screening team are the only AAA team in the country to have a mobile screening facility, enabling them to take the bus into hard to reach and deprived communities, where the uptake of screening has previously been poor. The cost attached to using the health bus is minimal and seen as a good investment per number of screenings it enables the service to complete, on location in the community.

Further key achievements for 2016/17 include the development of the local AAA screening website, designed with clients in mind, the web destination is easy to navigate ensuring visitors can access information about the screening programme, how to self-refer, contact details, local case studies and much more. In addition, the content of the site is fully compatible with mobile devices, making it easy to access on a wide range of web browsers and devices. Most information is just one or two clicks away, with an emphasis on graphics and images to give the site a slick and modern feel.

Furthermore the AAA Screening Team have successfully delivered a pilot screening clinic at Doncaster Rovers Football Club, offering clients an accessible town centre location for screening, with ample free parking. Due to partnership working with Doncaster Rovers Communications and Marketing Team, coverage was sought on the fans website and in match day programmes, resulting in three successful clinics.

# Section 8

## **Future Developments**

Future plans for the promotion of SYBAAA Screening Programme continue to grow as relationships are established with specialist hospital teams across the region, links will be made with influential members of the community, including secretaries of faith groups and traveller communities, maximising media opportunities by promoting and developing bespoke partnership events.

Partnership working is essential moving forward, working with organisations such as Healthwatch, Mencap, MIND, local libraries, GP practices, pharmacies, CCGs and hospitals, local authorities, prisons, parish councils and the voluntary sector, all of whom have a duty of care and wish to look after the health and wellbeing of people in the wider community.

#### Our priorities for 2017/2018 are to:

- Continue to improve access, sourcing new venues for mobile clinics utilising the Health Bus and ensuring the SYBAAA service model is fit for purpose to meet all service users' needs
- Further promote the service within South Yorkshire and Bassetlaw
- The team would like to see the uptake of AAA screening increase from 81% to 85%.
- Enhance staff training and professional development to continue to provide a quality and safe service
- Consolidate screening clinics within prisons/place of detention activity
- Maintenance of the local South Yorkshire and Bassetlaw programme website
- Increase access for individuals with learning disabilities
- Increase access for individuals in secure mental health units.

