



## Knowledge and Library Services (KLS)

### Impact stories

**Title:** A successful mobile chest x ray tuberculosis (TB) screening event occurred in Bristol as the effectiveness of active case finding was demonstrated via evidence from a Knowledge and Library Services (KLS) literature search in March 2016.

**Client testimonial:** “*Your findings were the basis for our business case so without your help we would have really struggled to obtain the funding we needed*” **Helen Trudgeon**  
**Health Protection Practitioner, PHE South West**

**Challenge:** Rates of TB are not decreasing in Bristol. NICE guidelines advised mobile chest x ray machines should be utilised for active case finding but this was believed to be expensive and complex. The question asked was ‘Is it cheaper and more specific for drug workers or homeless health care centres to opportunistically collect sputum samples from hard to reach people with productive coughs?’



**Solution:** Evidence from an in-depth literature search (Jan 2000 – March 2016) showed that active case finding using mobile chest x ray machine screening programmes for TB were cost effective and successful for drug users and the homeless. A business case for a mobile chest screening programme for hard to reach populations in Bristol was accepted by the Clinical Commissioning Group (CCG) and the event took place in Feb 2017

**Impact:** Mobile unit screened 216 people over two days. Nine individuals were referred to acute services for further investigations. Individuals were also offered testing for blood borne viruses, vaccination against Hepatitis B and influenza and liver fibro-scans (for those with Hepatitis C). Access to primary care registration and the Bristol Drugs Project harm reduction team was also available.

**Success factors:** Our initial concerns regarding costings were unfounded and the findings presented to us by KLS enabled us to demonstrate this in our business case. We were able to identify our target group and had a clear awareness of the benefits and limitations of using a mobile chest x ray service over other interventions. We had a target number of individuals

we wanted to screen but through the hard work of over 27 different agencies who were involved, we saw almost double the number we had anticipated.

**Lessons:** Look at the evidence rather than relying on any preconceived ideas. We used a systematic approach right from the outset of this project and achieved far more than we had anticipated as a result. The KLS gave us the platform on which to build the case for this event and relationships have been strengthened with numerous agencies and frontline providers across the Bristol area as a result.

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