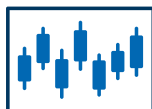


Quality Improvement Project to Increase the Uptake of Bowel Cancer Screening



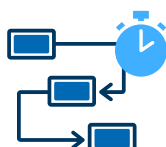
Use PHE fingertips to assess practice coverage for the bowel screening programme compared to local or national baselines. [Cancer Services - Data - PHE](#)

OPTION 1



Baseline analysis identifies x% of people eligible for screening for bowel cancer have not returned their FIT kit to the hub.

SMART aim: The practice aims to contact z% of non-responders to provide additional information to support informed decision making about bowel screening.



Process:

Complete a search to identify the patients who have not returned their screening kit. Review the list to exclude people for whom it may not be appropriate for the practice to contact e.g. those with a recent diagnosis of colorectal cancer or those currently under investigation on the suspected bowel cancer pathway.

Ardens have a template for this called - **2021-2022 – Cancer Screening – Bowel Cancer screening invitation sent**. This search can be broken down into months so the practice can run it and then look at the month previous.

It reports on the following SNOMED codes in the current year (April 21-March 22) – for all ages.

294201000000109 (XaN4r)- bowel cancer screening declined

373251000000108 (XaPf6)– no response to bowel cancer screening (this is the code that is automatically dropped into patient record when the notification of no response is received into the practice)

758851000000101 (XaX8y) – not eligible for bowel cancer screening program

862011000000104 (XaZx4) – telephone invitation

862031000000107 (XaZx5) – invitation letter sent



Contact the patient by phone CRUK have a useful telephone transcript to help frame your discussion[[cruk_gp_bowel_screening_sample_telephone_script_2016.pdf](#) ([cancerresearchuk.org](#))] and talk to patients about using the kit they have or to request a new one if they are willing to from the hub using the options [here](#)

Or



Contact the patient by letter or text message to contain question about any symptoms and links to leaflet and videos on how to use the kit

[Guidance – How to use the bowel screening kit](#) (Cancer Research UK)

[How to do the FIT bowel cancer screening test](#) (Cancer Research UK film)

A template letter and can be found [here](#)

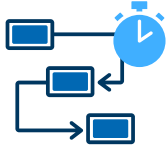
A template text using AccuRx can be found [here](#)

OPTION 2



Baseline analysis identifies x% of eligible patients with a learning disability or SMI or other underrepresented group did not return their screening FIT kit to the hub.

SMART aim: The practice aims to contact y% of non-responders with a learning disability or other underrepresented group over 6 months and provide appropriate support to make informed decisions or best interest decisions as appropriate.



Process:

Complete a search to identify the patients who have not returned their screening kit. Review the list to exclude people for whom it may not be appropriate for the practice to contact e.g. those with a recent diagnosis of colorectal cancer or those currently under investigation on the suspected bowel cancer pathway

Ardens have the following templates:

Screening Groups - BAME + bowel overdue + no advice in last 1y
Screening Groups - Blind + bowel overdue + no advice in last 1y
Screening Groups - Language + bowel overdue + no advice in last 1y
Screening Groups - LD + bowel overdue + no advice in last 1y
Screening Groups - LGBT + bowel overdue + no advice in last 1y
Screening Groups - Safeguarding + bowel overdue + no advice in last 1y
SMI | National screening - bowel cancer screening, aged 60 to 74 on 31/3/2020



Contact the patient or their carer by phone

[[cruk_gp_bowel_screening_sample_telephone_script_2016.pdf\(cancerresearchuk.org\)](#)]

talk to patients about using the kit they have or to request a new one if they are willing to from the hub using the options [here](#)

Or



Contact the patient by letter or text message to contain question about any symptoms and links to videos and easy read leaflet on how to use the kit

[Bowel Cancer Screening – Easy Reading Guide](#) (PHE)

[Bowel Cancer Screening- Beyond Words](#) (for people who cannot read or do not like written words)

A template letter and can be found [here](#) and a template text using AccuRx can be found [here](#)



Report at the peer review meeting

Contractors should participate in a minimum of two network peer review discussions unless there are exceptional and unforeseen circumstances which impact upon a contractor's ability to participate.



Reporting and verification

The contractor will need to complete the [QI monitoring template](#) in relation to this module and self-declare that they have completed the activity described in their QI plan.

Requesting Additional FIT Kits

Bowel Cancer Screening Programme
Southern Programme Hub
Guildford

Guidance for primary care on how to request bowel cancer screening faecal immunochemical test kits (FIT) for patients

The following options are available to GPs to arrange screening for eligible patients who have not responded to the invitation to be screening.

These options should only be considered where a patient has not responded and participated in Bowel Screening and has given consent to be sent a new kit.

Option One: <i>GP can call the hub</i>	Call the hub helpline on 0800 707 60 60 and request a FIT kit on behalf of the patient. Please ensure you have the NHS number, Date of Birth and current address to enable appropriate checks to take place.
Option Two: <i>Email the hub</i>	Email the hub generic email address and request a FIT kit on behalf of the patient rsc-tr.bcspssouthernhub@nhs.net . Please ensure you quote the NHS number, date of birth and current address to enable appropriate checks to take place.
Option Three: <i>Patient can call the hub</i>	Provide the hub helpline number (0800 707 60 60) to the patient and ask them to call us. Please ensure they quote the NHS number, date of birth and current address to enable appropriate checks to take place.
Option Four: <i>Hub can send kit to GP Practice</i>	The hub can send the FIT kit for the attention of the patient but C/O the GP practice. Please use the email rsc-tr.bcspssouthernhub@nhs.net Please ensure you quote the NHS number, date of birth and current address of the patient and the GP address you wish the kit to be sent too. Note: This will only take effect for the FIT kit. Any reminders and results will be sent to the patient direct.

Please note: When sending any patient details via email please ensure these are sent from an NHS.net email address ONLY.

To enable easy identification of GP emails to the hub please place “GP Kit Request” in the subject line of the email.

The following “GP Good Practice” guide has also been produced by CRUK and contains a number of proven initiatives that can improve participation.

https://www.cancerresearchuk.org/sites/default/files/england_gp_good_practice_guide_2018_v6_web.pdf

If you would like to discuss any aspect of this guide or have any general questions relating to the programme please contact either

Sally Benton, Consultant Biochemist and Hub Director, sally.benton@nhs.net
Martin Brealey, Hub Manager, martin.brealey@nhs.net

Template Letter – use SNOMED code ‘advice about bowel cancer screening’ which is 382161000000102 (XaPyB)

Private & Confidential

<Patient Name>

NHS No: <NHS number>

<Patient Address>

<Today's date>

Dear <Patient Name>

Important information from your GP about

The NHS Bowel Screening Programme at <insert name of GP surgery>

We have recently been informed that you have not returned your bowel cancer screening test (FIT KIT) to the screening program, so are writing to you to express our support for the NHS Bowel Screening Programme.

Bowel cancer is the fourth most common cancer in the UK. The aim of the Bowel Screening Programme is to discover bowel cancer at an early stage before symptoms have a chance to develop. The sooner it's caught, the easier it is to treat, and treatment is more likely to be successful.

Bowel screening involves a simple test that you carry out in your own home. We encourage you to consider doing this screening test, which you then send off in the envelope provided with your kit.

If there has been a problem with performing the FIT kit or returning it to the screening programme, please contact the NHS Bowel Cancer Screening Programme on **0800 707 60 60** who will be happy to send you a further FIT kit and can provide further information on completing the kit if needed.

If you would like more information about the screening programme/test please visit www.nhs.uk/conditions/bowel-cancer-screening. We would encourage you to look here, even if you don't plan to do the test as we would recommend that you have all the facts in order to make your decision.

Yours sincerely<GP Name>

Template SMS Message – use SNOMED code ‘advice about bowel cancer screening’ which is 382161000000102 (XaPyB)

Here is a template that can be sent out via Accurx:

Dear Miss/Mr/Mrs XXXX

The NHS Bowel Cancer Screening team have told us that you haven't returned your FIT (poo) test. We wanted to tell you that we support the screening programme, see www.nhs.uk/conditions/bowel-cancer-screening for more information. Call 0800 707 60 60 if you need a replacement test. See us if you have symptoms you are worried about (tummy pain/bleeding from your bottom/diarrhoea/weight loss).

Thanks, <GP name>, <GP surgery>

QI module reporting template: Early cancer diagnosis

It is anticipated that the responses noted here should total 1 A4 sides in Arial font size 11.

Practice name and ODS code
Identifying areas for improvement
<i>What areas of improvement did the practice identify in relation to early cancer diagnosis?</i>
<i>What changes did the practice make to address the areas of improvement identified?</i>
Results
<i>Please describe any achievements, feedback or improvements that have occurred as a result of these changes.</i>
<i>What changes will/ have been embedded into practice systems to improve early cancer diagnosis in the future?</i>
<i>How did the network peer support meetings influence the practice's QI plans and understanding of early cancer diagnosis?</i>

For all questions practices should refer specifically to the six areas set out in the QI module: uptake in screening programmes; and how to improve current referral practices including their use of guidelines, professional development, safety netting of those referred on suspected cancer pathways and shortening of diagnostic intervals.