Improving cancer services for local people

Prevention

Diagnosis



Improving NHS Bowe Cancer Screening uptake in North East London



Introduction

This guide is intended to provide local and practical information for NEL practice and PCN staff to support them with bowel cancer screening uptake.

The guide has been produced by the NEL Cancer Alliance with support from the Cancer Research UK Health Professional Facilitator Programme and our two regional bowel cancer screening centres.

Remember!

Bowel cancer screening is for patients with no symptoms.

Anyone worried about possible bowel cancer symptoms should contact their GP asap to be referred to a specialist.

More information about spotting bowel cancer early can be found <u>here</u>.



Nurse

Contents

- **1. Bowel Cancer Screening**
- 2. Who is eligible?
- **3. How to improve uptake**
- 4. Reducing health inequalities
- **5. Other initiatives to improve uptake**
- 6. Additional resources

Appendix A - Resources in different languages and formate

Appendix B - Health Promotion Specialists

Appendix C - Health Promotion Specialist, Leena Khagram s insights about speaking to NEL residents about bowel scre



	4
	5
	6
	8
	9
	10
S	11
	13
shares her ening	14

З

1. Facts about bowel cancer

Bowel cancer facts

- Bowel cancer is the fourth most common cancer in the UK
- Over 42,000 people are diagnosed with bowel cancer every year in the UK.
- 94% of cases are diagnosed in people over the age of 50

Bowel cancer screening in north East London

- Recent data shows that NEL as a whole is achieving the 60% target, but there is variation between boroughs and practices.
- There are also inequalities in uptake by gender and ethnicity.





2. Who is eligible?

- Men and women aged between 60-74 in England are invited every 2 years
- Anyone over 74 can still request a bowel screening kit

Expansion of the screening NHS Cancer Bowel Screening programme

From April 2021, NHS England and NHS Improvement (NHSE/I) expanded the population eligible to receive a Faecal Immunochemical Test (FIT) as part of the NHS BCSP to include 50-59 year olds.



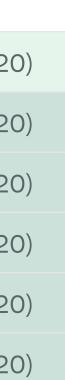
The age extension will be gradually rolled out across the country in a phased approach over the next four years:

	Year 1	Year 2	Year 3	Year 4
Age	2021/22	2022/23	2023/24	2024/25
60-74	Invite (FIT 120)	Invite (FIT 120)	Invite (FIT 120)	Invite (FIT 120
58		Invite (FIT 120)	Invite (FIT 120)	Invite (FIT 120
56	Invite (FIT 120)	Invite (FIT 120)	Invite (FIT 120)	Invite (FIT 120
54			Invite (FIT 120)	Invite (FIT 120
52				Invite (FIT 120
50				Invite (FIT 120

Year 1 - 56 year olds Year 2 - 58 year olds

Year 3 - 54 year olds

Year 4 - 52 & 50 year olds





3. How to improve uptake

Be aware of your practice's bowel screening uptake rates

You can access bowel cancer screening data for your individual PCN/practice in the following ways:

- From your local NHS bowel cancer screening service
 - Newham, Tower Hamlets, Waltham Forest and City & Hackney Email <u>leena.khagram@nhs.net</u>

Barking Havering and Redbridge Email <u>bhrut.bowelcancerscreening@nhs.net</u>

 The Clinical Effectiveness Group (CEG) has produced screening data with practice/ PCN breakdowns including data for people with serious mental illness and learning disabilities.

To access this information go to: <u>https://www.qmul.ac.uk/blizard/ceg/dashboards/</u>

All practices should have received a log-in for these dashboards.



3. How to improve uptake

Provide information in different languages and formats

 Bowel screening kit instructions and information is available in different languages and easy read formats. See appendix A for how to find these.

Activate on-screen reminders

 It is easy to activate on-screen reminders in your GP systems to flag patients who have not completed their bowel cancer screening.
Simple instructions on how to activate reminders on your practice software can be found here; <u>EMIS</u> and <u>SystemOne</u>.

Contact your local Health Promotion Specialist (HPS) for advice

 Bowel cancer screening services employ HPSs to work with other local health services to improve uptake of screening. See Appendix B to find out what help they can offer.





4. Reducing health inequalities

Both the Early Diagnosis DES and QOF require practices and PCNs to tackle screening inequalities to improve uptake.

In Quality Improvement it is helpful to set a SMART aim once you've looked at your data and considered where you might want to focus your efforts and introduce a intervention(s) to increase screening uptake.

Here are some examples of SMART aims that might work in NEL.

To tackle inequalities:

Increase percentage of _____ (ethnicity/men/learning disability/other) patients completing their bowel screening test from _____ (% current uptake rates) to ______ (% aspirational target) in our PCN/GP practice in _____ (time period).

To initiate a specific project for non-responders:

We will contact _____ (total number of non-responders) bowel screening non-responders in our practice (via telephone and letter) and re-send a bowel screening kit to all who request one using the London request form [link here]. We aim to have 40% of our contacted patients return the kit.

This case study explains how requesting kits on behalf of patients made a difference to uptake in Lancashire. Please note the London form to order replacement kits is not automated and patient details must be filled in and emailed to the hub - <u>https://www.cancerresearchuk.org/sites/default/</u> files/automatic_email_request_from_emis_gp_systems_in_ lancashire.pdf







5. Other initiatives to improve uptake

- In London a health professional can order a bowel cancer screening kit on behalf of a patient, with the patient's consent.
 For more information see page 10 of the TCST best practice screening guide. Click <u>here</u> to access a word document version of the form to order a kit.
- Patients are being contacted as they reach screening age to remind them to complete the FIT kit and also answer any questions they have. This is provided by different organisations in different areas:

City and Hackney – Community African Network

Newham, Tower Hamlets and Waltham Forest – Community Links (Catch 22)

Barking and Dagenham, Havering and Redbridge – the GP Federations are providing this service.





9

6. Additional resources

Information for health professionals

Bowel cancer tests https://www.cancerresearchuk.org/health-professional/screening/ bowel-screening-evidence-and-resources/bowel-screening-test

Good practice guidance

https://www.cancerresearchuk.org/sites/default/files/england_gp_ good practice guide 2018 v6 web.pdf

Good practice screening guide (Healthy London Partnership) https://www.healthylondon.org/wp-content/uploads/2016/09/Good-Practice-Screening-Guide-2020.pdf

Reducing inequalities

https://www.cancerresearchuk.org/health-professional/screening/ bowel-screening-evidence-and-resources/bowel-screening-resources #BowelScreeningResources1



Information for patients

Bowel cancer screening https://www.bowelcanceruk.org.uk/about-bowel-cancer/screening/

Bowel cancer screening https://www.cancerresearchuk.org/about-cancer/bowel-cancer/ getting-diagnosed/screening

Informed consent

https://www.gov.uk/government/publications/bowel-cancer-screeningbenefits-and-risks/nhs-bowel-cancer-screening-helping-you-decide



Appendix A - Resources in different languages and formats

Patient videos

- <u>English</u>
- <u>Arabic</u>
- <u>Bengali</u>
- Chinese <u>simplified</u> & <u>Traditional</u>
- <u>Farsi</u>
- <u>Gujarati</u>
- <u>Polish</u>
- <u>Portuguese</u>
- <u>Punjabi</u>
- <u>Urdu</u>

A <u>British Sign Language</u> version of this video is also available.

Bowel screening kit instructions

- <u>English</u>
- <u>Arabic</u>
- <u>Bengali</u>
- Chinese <u>simplified</u> & <u>Traditional</u>
- <u>Farsi</u>
- <u>Gujarati</u>
- <u>Polish</u>
- <u>Portuguese</u>
- <u>Punjabi</u>
- <u>Urdu</u>



Patient leaflet

- English
- <u>Arabic</u>
- <u>Bengali</u>
- Chinese <u>simplified</u> & <u>Traditional</u>
- <u>Farsi</u>
- <u>Gujarati</u>
- <u>Polish</u>
- <u>Portuguese</u>
- <u>Punjabi</u>
- <u>Urdu</u>

Appendix A - Resources in different languages and formats

Learning Disability resources

- <u>Patient video</u>
- Kit instructions
- Patient leaflet

Areas also have Community Learning Disability Teams that can support where best interest decisions/practical support is needed.

NHS screening programme videos

Public Health England has produced <u>short videos</u> explaining the various NHS screening programmes, including bowel cancer screening in the following languages Somali, Romanian, Lithuanian, Latvian, French.



The bowel cancer screening hub also has access to interpreters **0800 707 60 60** and can advise on arrangements for people who are blind/partially sighted.

Appendix B – Health Promotion Specialists

The NHS Bowel Screening Programme has two Health Promotion Specialists in north-east London dedicated to improving bowel screening outcomes in the following ways:

- **1. Offering expertise around patient communication through** including training members of staff on how to make effective phone calls, handling patient queries and advice on key messages to motivate patients to participate in screening.
- 2. Designing, piloting and evaluating novel interventions to reduce inequalities and target community groups with low screening uptake through data collection, systematic population mapping, conducting local needs assessments and reporting on best practice.



3. Offering patient-centred approaches to support access to bowel screening through: motivational health coaching for patients (in different languages, for non-responders and other community groups i.e. people with learning disabilities, BAME communities) including workshop facilitation in a range of settings, arranging test kit requests and monitoring screening participation.

Contact:

Leena Khagram

(Newham, Tower Hamlets, Waltham Forest and City & Hackney) <u>leena.khagram@nhs.net</u> | **07917 554 352**

Phillippa Hickey

(Barking & Dagenham, Havering and Redbridge) phillippa.hickey1@nhs.net | 07973 736 946

Appendix C - Health Promotion Specialist, Leena Khagram shares her insights about speaking to NEL residents about bowel screening

What's the biggest concern people have when you talk to them about bowel screening?

The biggest concern most people have about bowel screening is collecting the stool sample. To address this concern, I have found it useful to show people what the test kit looks like and discussing the most simple way of collecting the sample. Adding a touch of humour to the conversation also puts people at ease and makes the completion process seem less daunting!

Are there particular barriers to bowel screening in NEL?

We have a very diverse population in NEL and therefore a variety of barriers to screening. The most common barriers to screening in NEL tend to be centred on a lack of knowledge and awareness about bowel cancer and screening including difficulty understanding how to complete the test kit and a general reluctance to participate.



What do you do to reassure people?

Offering literature in different languages in addition to having open face to face conversations about bowel health and screening especially amongst people with learning disabilities and people from ethnic minority groups is very important for encouraging participation in NEL. Also, most people already have a list of reasons for not participating in screening so an important part of my work is to encourage them to see another perspective by explaining the benefits of being screened for bowel cancer.

Are there any practical tips patients might not be aware of?

One practical aspect of screening patients tend not to be aware of is the fact that there is support available to them if they have any questions or concerns about the screening process. I encourage people to contact the Freephone number – **0800 707 6060** and inform them that support is also available in different languages.



Appendix C - Health Promotion Specialist, Leena Khagram shares her insights about speaking to NEL residents about bowel screening

What's the main thing to be mindful of when talking to patients about screening?

This may be an interesting answer but I have found that having empathy for the person you are speaking to is very important. When I speak to patients, I am always mindful that they may have other health issues that they're dealing with and bowel screening may not be on their list of priorities. So while I am very tempted to focus the conversation solely on bowel screening, I generally start by gauging how receptive the person is to hearing about bowel screening by having a friendly conversation beforehand. This builds rapport and helps guide the conversation about bowel screening and bowel health.

Any words of encouragement?

I would encourage people to participate in screening on the basis of the fact that they have access to a free screening programme which is saving hundreds of lives every year from a very common cancer that's easily treatable if detected early. The test kit itself is very simple to complete and could save your life.



