Telephone Script for bowel screening non-responders

Introduction - Good morning/afternoon, can I speak to *[patient's first name]* please?

Hi there, *[patient's first name*] my name is X and I am calling you from your local GP practice.

There is nothing to worry about, I'm just calling with regards to your Bowel Cancer Screening kit that you received through the post late last year/earlier this year.

Receipt of bowel screening kit - Can I just check if you received your kit please, as your health records indicate that your kit was not completed?

YES

NO

Can I ask your reasons why you didn't return the kit please? Record why on patient tracker spreadsheet.

Check if the address is correct?

Offer to order a replacement kit on their behalf (consent required)

Wants to participate but didn't get round to it

Unsure whether to complete or not

Doesn't want to participate

Suggest practical tips to complete the kit and offer to send them a link to instruction video

Discuss reasons for and against screening

Patient will receive another kit in 2 years' time.

To opt out completely, patient needs to officially request by contacting the bowel screening hub on 0800 707 6060.

Order replacement kit for patient by sending email to screening hub (remember to code this).

Or patient can call 0800 707 6060 to order it themselves

Update patient tracker.

Wishes to participate

Doesn't wish to participate this time

Benefits:

Bowel screening saves lives from bowel cancer.

Test is for patients with no bowel symptoms.

Only 2 people out of 100 who complete the kit need a further test (colonoscopy).

Common reasons for not participating in bowel screening

Reason	Information to provide
Language barriers	Offer to send patient engagement letter in preferred language (if available). And/or: Send the *'How to use FIT bowel screening kit'* video link to patient's mobile phone with a short message. https://vimeo.com/showcase/6663813/ This short animation can be viewed with subtitles in 10 different languages plus BSL.
Test is messy / I don't know how to do it	Explain that the current test (FIT) is simple, quick and hygienic and can be done in the comfort of your own home. Talk through steps on page 5. There are clear instructions on the box of the screening kit on how to complete test kit. Alternatively, send '*How to use FIT bowel screening kit'* video link to patient's mobile phone: https://vimeo.com/showcase/6663813 Offer Bowel Screening Hub number if necessary 0800 707 6060.
I don't have any symptoms	The screening programme is for people with **no symptoms**. People with worrying symptoms should contact their doctor.
I've lost the kit	Offer to order patient a new one. Check with patient that they know how to complete kit. Please note: As this project is contacting people up to a year after they were sent their screening kit, we recommend that a new test kit is ordered, even if they still have it.
I don't want to know if I have cancer	Show understanding to their response – yet let them know it is important that they make an informed decision and provide the following information: • Bowel screening is a quick and easy wellbeing test of the bowel to prevent life changing illness or need for extensive treatment. • Each year in the UK over 5 million people complete the kit and less than 3% will have a positive result and need further investigation. • If changes in the bowel are detected early, it may be possible to treat this before cancer ever develops. • **If diagnosed at the earliest stage, more than 9 in 10 people will survive bowel cancer.**

I am too embarrassed	It is perfectly natural and common to feel embarrassed about completing the screening kit. However the test can be done in complete privacy in their own home, put in the discrete prepaid envelope and posted back without anyone needing to know. If they do need to talk to the bowel screening hub or screening nurses, remember these are health professionals who deal with queries about bowel screening every day and are extremely well trained to support people.
I've already done the test	Make sure the test was in the last two years, if so, apologise and end the call. If the test was longer than two years ago, explain this is another round of testing that happens every two years for those between the ages of 50-74.
I didn't think it was that important / I never got around to it	Bowel screening offers the best opportunity to identify changes in the bowel at an early stage and saves over 3500 lives in the UK per year. Offer to talk patient through the 'More about Bowel Cancer' section on page 4. Offer to order another kit.
Fear of colonoscopy	Explain that it is ultimately the patient's decision, but it is important they make an informed choice. If their screening result comes back as abnormal they will be offered an appointment with a specialist screening nurse who will talk them through the next steps. This is an ideal time to ask more questions about colonoscopy and make a final decision. Colonoscopies are safe, routine procedures and thousands are carried out across the UK each week. The majority of people experience no pain but painkillers or sedative are offered. Explain that everyone's experience is different and not to be put off by other people's accounts.
Negative perception of what a diagnosis of cancer could mean	Cancer survival rates have increased significantly over the last few decades due to earlier detection, screening programmes and improved treatments and surgical techniques. Bowel screening offers the best opportunity to identify problems at an early stage and saves over 3500 lives in the UK per year.
I don't need to do it, the blood found on the test will be from my haemorrhoids/other condition	If a patient does have conditions such as haemorrhoids, the abnormal screening result may be due to this. However it is not possible to confirm this without further investigation and it is important to rule out cancer so they can be reassured.

More about Bowel Cancer

Incidence

- Bowel cancer is the second most common cause of cancer death in the UK, after lung cancer.
- 1 in 15 men and 1 in 18 women will be diagnosed with bowel cancer during their lifetime.
- The number of deaths has been falling since the 1970s due to better treatments, early diagnosis, and the national bowel cancer screening programme.

Symptoms

- Bleeding from the bottom or blood in your poo
- A change in pooing habits e.g. going more often, diarrhoea
- Losing weight but not sure why
- Pain or a lump in your tummy
- Feeling very tired all the time but not sure why

If any patients mention they have concerning symptoms they should be advised to speak to a doctor. The FIT test for people with symptoms is more sensitive than the screening test.

Screening

- Bowel screening is for people **with no symptoms**.
- Bowel cancer is treatable and curable, especially if diagnosed early. **It is estimated 9/10 people diagnosed at the earliest stage will survive bowel cancer**. However, this drops significantly as the disease develops.
- **3500 deaths per year are avoided through screening.**

Benefits of screening

- Taking part in bowel cancer screening lowers your risk of dying from bowel cancer
- Screening can find non-cancerous growths (polyps) in the bowel that may develop into cancer in the future. Removing these polyps can reduce your risk of getting bowel cancer

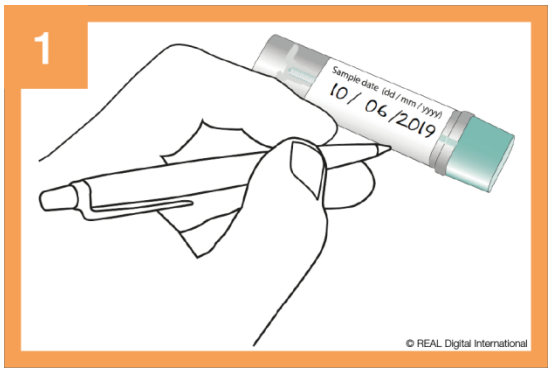
Risks of screening

- No screening test is 100% reliable. There's a small chance a cancer could be missed, meaning you might be falsely reassured.
- There are no risks to your health from completing the home testing kit.

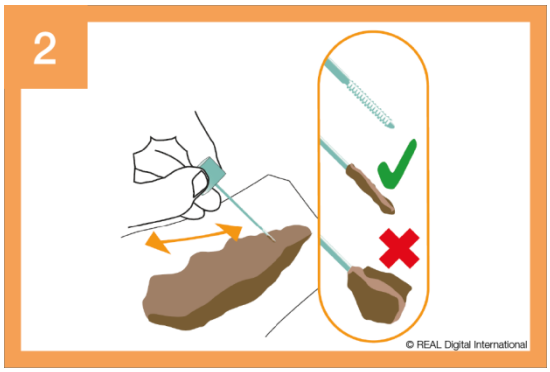
In summary

- Doctors at your surgery are very supportive of bowel screening and we are encouraging all our patients over the age of 50 to take part. More than 9 out of 10 people with early stage bowel cancer will survive. **Screening saves lives.**

How to complete the bowel screening test – Step by step guidance



- Write the date on both the bottle and the sample bottle in biro
- Use a container or layers of toilet paper to catch your poo
- Do not let your poo touch the toilet water



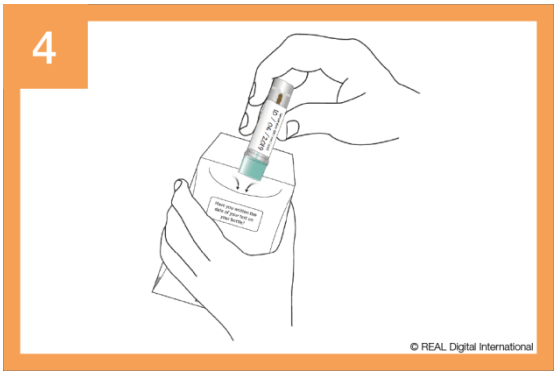
Collecting the sample

- Twist the cap to open the sample bottle
- Collect a small sample by scraping the stick along the poo until all grooves are covered
- We only need a little poo to test. **Please do not add extra.**



Clicking the sample bottle shut

- Put the stick back in the bottle and 'click' the cap to close it
- Do not reopen the bottle after use.
- Please wash your hands after use



Preparing to post the completed kit

- Make sure you have written the date on the sample bottle
- Put the sample bottle in the return envelope supplied
- Peel off the tape, and seal the envelope and post

Other questions that might arise during the conversation

1. Where is the bowel? And what does it do?

The large bowel is a long pipe in the digestive system just below the stomach.

It absorbs water and nutrients from food and passes waste out of the body as poo. The small bowel connects the large bowel and the stomach.

2. What is bowel cancer?

Bowel cancer is a general term for cancer that starts in the large bowel, which consists of the colon and rectum. It is also sometimes called colorectal cancer, colon cancer or rectal cancer.

The cells in your body normally divide and grow in a controlled way. When cancer develops, the cells change and can grow in an uncontrolled way.

3. Why is it so important to spot bowel cancer early?

Most bowel cancers don't kill us if they're treated at an early stage. If cells are given time to spread to other parts of the body the chance of survival reduces significantly. That's why spotting cancer early saves lives. More than 9 out of 10 people with bowel cancer will survive when it is found early.

4. Why should I be screened for bowel cancer?

Screening helps to detect bowel cancer early, even before you could notice symptoms. The risk of bowel cancer increases with age, and that's why people aged 50 to 74 are sent a screening kit every two years. People over 75 can request a screening kit by calling **0800 707 60 60**.

5. I have piles (haemorrhoids); does this mean blood in my poo won't be caused by bowel cancer?

People with haemorrhoids are as likely to get bowel cancer as anyone else. The blood could be due to several different reasons; going through the screening pathway can help to rule some of these out. If you see blood in your poo, even if you have haemorrhoids – always check with your GP.

6. Can I reduce my chances of getting bowel cancer?

You cannot prevent bowel cancer but there are things you can do to lower your risk:

- Eat more fibre to support a healthy digestive system
- Limit red and processed meat
- Maintain a healthy weight
- Stay active – we should aim for 150 minutes of moderate activity each week
- Drink less alcohol
- Stop smoking

7. My parent/sibling had bowel cancer; does this affect my chances of getting it?

A family history of bowel cancer (a close relative) can put you at greater risk of developing the disease. Screening can help you to understand what is going on in your bowel right now. Consider offering patient GP follow up if concerned about genetic risk/family history.

8. I've already had a negative FIT test after visiting my GP with symptoms, do I still need to do the screening test?

We recommend taking the opportunity to submit another sample when invited for screening as it acts as another opportunity to detect any changes, and can provide additional reassurance.

Do's and Don'ts when making follow up calls	
Do	**Don't**
Take the patient through security questions at the beginning of the call.	Give any medical advice, health advice or guidance outside of bowel screening.
Advise bowel screening is supported by their GP.	Try to persuade or pressure patients to take up screening
Tell patients that each year around 5 million people complete the kit	Tell patients they must take part.
Show understanding and respect, particularly around patients' decisions not to complete screening.	Discuss a patient's details with someone that picks up the phone (spouse, family member, friend etc.) unless agreed by the patient.
Promote an informed decision.	Argue with a patient
Advise any medical issues must be discussed directly with GP.	Discuss patient information with anyone apart from appropriate practice staff, screening centre staff and regional hub staff.
Consider all information to be confidential unless told otherwise.	