Introduction

Due to the coronavirus pandemic and Government guidance regarding social distancing, NHS England & Improvement (NHSEI) has, together with Public Health England (PHE), rapidly reviewed the delivery of bowel scope screening and bowel cancer screening services.

On the basis of expert clinical advice, the NHS is rescheduling screening appointments. This is to reduce the risk of coronavirus to patients, colleagues and other front-line NHS staff. NHSEI will continue to monitor the situation and reschedule appointments as soon as possible.

This document should be read in conjunction with the Bowel Cancer Screening System (BCSS) technical advice document (see appendix 2 and 3), and the speciality guide for the management of patients requiring endoscopy services, available at: https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/04/C0076-Specialty-guide-for-endoscopy-and-coronavirus-v1-02April.pdf

Key principles for the bowel cancer screening programme

- People should be asked not to complete their screening test kit at this time, even if they have received a kit, but will be notified when it is safe to do so
- If people do complete their screening kit and send it into the screening hub, the test kit should be processed, and a result issued to the participant
- Given someone requiring further investigations (with a positive screening result) may be anxious, every effort should be made to deliver specialist screening practitioner (SSP) appointments over the telephone, even if diagnostic tests are currently being rescheduled. If the call is to provide reassurance or to assess clinical symptoms but the BCSS data set is not completed, another SSP appointment will be required before the
screening diagnostic test occurs
- If the SSP assessment (data set completed) is more than 6 weeks before the diagnostic test a courtesy check call is required to clarify if the health status remains the same
- People who receive a call, should be asked questions about any symptoms including whether or not they may be at risk of obstruction
- If a person describes clinical symptoms or appears to be at risk of obstruction, the SSP must seek the views of an accredited screening colonoscopist about arranging a colonoscopy. If this can be performed as a bowel cancer screening procedure, with an accredited screener and SSP present then the person should remain in the screening programme. If there is no capacity for this, the person should be referred for an urgent symptomatic diagnostic test and the persons open episode closed on BCSS. To close an episode at this part of the pathway, please e-mail the Open Exeter helpdesk Exeter.helpdesk@nhs.net

GP (primary care) FAQs

1. What is the advice for patients with a positive bowel cancer screening test result (further tests needed) who have not been offered a follow up appointment?

If the person is not symptomatic, please advise them to contact the bowel screening helpline (0800 707 6060) for advice. You may want to warn them that the helpline may be very busy and they may have to wait before their call is answered.

2. What action should I take if a patient with a positive bowel cancer screening test result (further tests needed) has symptoms but no appointment for further tests?

In the first instance you should advise the patient to speak to the screening centre for further clinical advice. If they do not know the contact number of the screening centre, they should call the screening helpline 0800 707 60 60 who will get someone to call them back. Please only refer a patient who has a positive bowel cancer screening test to the 2-week wait urgent referral pathway if the patient has specific symptoms of obstruction, such as a pain or lump in their abdomen after eating.

Hub Helpline FAQs: bowel scope screening

General questions

4. Is bowel scope stopping during the coronavirus outbreak?

Bowel scope screening is being rescheduled due to coronavirus and social distancing guidance. We will start to reschedule appointments when it is safe to do so.
5. Can I get another appointment when screening starts again? How will you know to invite me?

We will start to reschedule appointments when it is safe to offer them again. We are making sure we have details of everyone whose appointments need to be rescheduled.

**Invitations**

6. Is my GP practice included in bowel scope screening?

At the moment we are not offering bowel scope screening due to coronavirus and social distancing guidance. We will start to reschedule appointments for people who are waiting, when it is safe to do so.

7. I am 55 and have not been invited for bowel scope screening, when can I expect my invite?

At the moment we are not offering bowel scope screening due to coronavirus and social distancing guidance. We will start to reschedule appointments when it is safe to do so.

**Bowel preparation – Enema**

8. I have an appointment for bowel scope, but the enema has not arrived in the post. What should I do?

We cannot carry out bowel scope screening at the moment due to coronavirus and social distancing guidance. We will start to reschedule appointments when it is safe to do so. We will send you another enema when we reschedule your appointment. If your enema arrives in the meantime, do not use it. Please dispose of it with your normal household waste.

9. I have received an enema in the post, but my bowel scope appointment has been cancelled, what should I do with it?

We cannot carry out bowel scope screening at the moment due to coronavirus and social distancing guidance. We will start to reschedule appointments when it is safe to do so. Do not use the enema you have, please dispose of it with your normal household waste. We will send you another enema when we reschedule your appointment.
Procedure

10. I need a colonoscopy following my bowel scope screening test, but it has been cancelled. What will happen now?

We cannot carry out screening colonoscopies at the moment due to coronavirus and social distancing guidance. We will start to reschedule appointments when it is safe to do so. The screening centre will contact you when we are able to do this. If you have been given or sent bowel preparation, please do not take it. Please keep your bowel preparation in a safe place and we will let you know when to use it.

If you are concerned about any symptoms of bowel cancer, please contact your GP. Symptoms include:
- blood in your poo (faeces)
- looser poo, pooping more often and / or constipation
- a pain or lump in your abdomen (tummy)
- feeling more tired than usual for some time
- losing weight for no obvious reason.

11. I have been contacted by a specialist screening practitioner (SSP) and received my bowel prep as I need a colonoscopy after my bowel scope test, but my appointment has been cancelled. What should I do with the bowel preparation?

Please do not take the bowel preparation that we have given or sent to you. We cannot carry out colonoscopies at the moment due to coronavirus and social distancing guidance. We will start to reschedule appointments when it is safe to do so. Please keep your bowel preparation in a safe place and we will let you know when to use it.

Hub helpline FAQs: bowel cancer screening (faecal occult blood test (FOBt))

General

12. Is screening continuing through the coronavirus outbreak?

Bowel cancer screening is being rescheduled due to coronavirus and social distancing guidance. Rescheduling also means that NHS and other staff working in screening can help with the coronavirus outbreak. We will start to send screening invitations and test kits again when it is safe to do so.
13. Have you tested my screening test kit/have you got my result?

We are continuing to process screening results, but there are some delays due to the coronavirus outbreak. We will send your results out to you as soon as they are available.

14. When will screening start again?

We will continue to monitor the situation and will start to invite people as soon as it is safe to do so.

15. I have symptoms of coronavirus. Should I return my kit once the period of self-isolation ends?

Please do not use your kit. Keep hold of it, and we will contact you to let you know when to use it and send it back to us.

16. I have confirmed coronavirus, should I return my kit?

Please do not use your kit. Keep hold of it, and we will contact you to let you know when to use it and send it back to us.

Invitations/Sending FIT kits

17. I am 60 and have not been invited for screening, when can I expect my test kit?

Bowel cancer screening is being rescheduled due to coronavirus and social distancing guidance. Rescheduling also means that NHS and other staff working in screening can help with the coronavirus outbreak. We will start to send screening invitations and test kits again when it is safe to do so. If you are concerned about any symptoms of bowel cancer, please contact your GP.

Symptoms include:
- blood in your poo (faeces)
- looser poo, pooping more often and / or constipation
- a pain or lump in your abdomen (tummy)
- feeling more tired than usual for some time
- losing weight for no obvious reason

18. I have received my screening test kit, should I complete it?
**No.** Keep your kit, and we will contact you to let you know when to use it. If you are concerned about any symptoms of bowel cancer, please contact your GP.

Symptoms include:
- blood in your poo (faeces)
- looser poo, pooing more often and / or constipation
- a pain or lump in your abdomen (tummy)
- feeling more tired than usual for some time
- losing weight for no obvious reason

19. I have made a mistake on my test kit, why can’t I get a replacement?

We are not sending out any test kits at the moment. Bowel cancer screening is being rescheduled due to coronavirus and social distancing guidance. Rescheduling also means that NHS and other staff working in screening can help with the coronavirus outbreak. We will start to send screening invitations and test kits again when it is safe to do so.

20. Can I attend for my colonoscopy appointment when screening starts again? How will you know to invite me?

We will start to reschedule appointments when it is safe to offer them again. We are making sure we have details of all people whose appointments need to be rescheduled.

**Screening test kit results**

21. I have sent my test kit back, but I haven’t received my results, where are they?

We are continuing to process test kits, but this may change due to the coronavirus outbreak. If we can process your kit, we will let you know your results as soon as they are available. If you are concerned about any symptoms of bowel cancer, please contact your GP.

22. You have sent me a letter to say that I need further investigations, but you can’t offer me any appointments. I am concerned, what should I do?

We cannot carry out further investigations at the moment due to coronavirus and social distancing guidance. Rescheduling investigations also means that NHS and other staff working in screening can help with the coronavirus outbreak. We will start to reschedule appointments for those at highest risk following discussion with patients as soon as it is safe to do so.
If you are worried and would like to speak to someone please call the screening helpline 0800 707 60 60 and they will arrange for a member of the clinical team at the screening centre to call you.
(NB: If the individual is worried and wants further clinical advice please refer to the screening centre for clinical advice)

**Specialist Screening Practitioner (SSP) Appointment**

23. My specialist screening practitioner (SSP) appointment has been cancelled, what will happen now?

We cannot carry out SSP appointments at the moment due to coronavirus and social distancing guidance. Rescheduling appointments also means that NHS and other staff working in screening can help with the coronavirus outbreak. We will start to reschedule appointments when it is safe to do so. The screening centre will contact you when we are able to do this. If you are concerned about any symptoms of bowel cancer, please contact your GP.

Symptoms include:
- blood in your poo (faeces)
- looser poo, pooing more often and / or constipation
- a pain or lump in your abdomen (tummy)
- feeling more tired than usual for some time
- losing weight for no obvious reason

24. I have been invited for my SSP appointment, can this be done over the phone?

Most screening centres are not able to carry out any appointments in person or on the phone at the moment due to coronavirus and social distancing guidance. We will be rescheduling appointments so that NHS and other staff working in screening can help with the current coronavirus outbreak. We will start to reschedule appointments when it is safe to do so.

25. I am in an at-risk group, but I have been invited to an SSP appointment, should I attend?

**No, you should not come to the screening centre.** Most screening centres are not able to carry out any appointments at the moment due to coronavirus and social distancing guidance. We will be rescheduling appointments so that NHS and other staff working in screening can help with the current coronavirus outbreak. We will start to reschedule appointments when it is safe to do so.

26. What action should I take if a patient with a positive bowel cancer screening test result (further tests needed) has symptoms but no appointment for further tests?
In the first instance you should advise the patient to speak to the screening centre for further clinical advice. If they do not know the contact number of the screening centre, they should call the screening helpline 0800 707 60 60 who will get someone to call them back. Please only refer a patient who has a positive bowel cancer screening test to the 2-week wait urgent referral pathway if the patient has specific symptoms as of obstruction, such as a pain or lump in their abdomen after eating.

**Bowel preparation**

27. I have been given/sent my bowel preparation for my test, but my appointment has now been cancelled – what should I do?

Please do not use the bowel preparation that we have given or sent to you. We cannot carry out screening colonoscopies at the moment due to coronavirus and social distancing guidance. We will start to reschedule appointments when it is safe to do so. Please keep your bowel prep in a safe place and we will let you know when to use it. The screening centre will contact you when your test has been rescheduled.

**Procedure**

28. My colonoscopy has been cancelled, but I have symptoms, what should I do now?

In the first instance we advise that you speak to the screening centre, who will be able to provide clinical advice. There is also a screening helpline on 0800 707 60 60 which you can call and ask for a member of the screening centre clinical team to call you back.

**Hub professional FAQs**

29. How should we manage overloaded test kits or samples returned not in test kits?

Normal hub personal protective equipment (PPE) should be used when dealing with samples. Overloaded samples or faecal samples returned not in a kit should be discarded. You should not try to clean overloaded test kits. This will increase the number of spoilt test kits, and we might not be able to identify the subjects if the demographics are obscured.

To reduce aerosol risk, kits that are not fully closed should be closed behind protective equipment.

30. Should we be printing letters?

Please see BCSS technical advice document (see appendix 2 and 3) for which letter batches
should not be processed or sent for printing

31. We have no biomedical science (BMS) staff to authorise results - what do we do?

All screening test results can be authorised across the 5 hubs as all hubs use the same middleware. Meetings are taking place with all the hubs twice a week to try and ensure any staffing issues being experienced can be managed with support from the other hubs.

32. We have no/limited helpline staff to manage calls – what should we do?

Helpline calls can be transferred across the 5 hubs. Meetings are taking place with all the hubs twice a week to try and ensure any staffing issues being experienced can be managed with support from the other hubs. PHE will agree to transfer calls if one hub is unable to provide a service, and this will be monitored on a regular basis.

33. We are getting lots of clinical questions we don’t feel we can answer, how we can manage these?

To provide support to the hub helpline staff, a request has been made for screening centres (that are able to support the process) to provide a specialist screening practitioner (SSP) to telephone people back who need clinical advice. They can also speak to medical staff for further advice if required.

34. What advice should we be giving to detained estates (prisons)?

Detained estates will be advised that screening is being rescheduled. Hubs should contact detained estates (prisons) in their area to inform them that they do not need to complete the spreadsheets with eligible people and kits should not be returned at this time. They will be informed when screening resumes.

Screening Centre FAQs

Bowel scope screening

General

35. How will we catch up if invitations stop?

PHE and NHSEI are working alongside NHS Digital and other experts to make plans for how screening will resume, once it is safe to do so.
Invitations

36. Should we continue to generate invitations for bowel scope screening?

Screening is being rescheduled at this time, so screening centres should not be generating invitations for bowel scope screening. This is to reduce the risk of coronavirus to members of the public and front-line NHS staff and to enable the workforce to be redeployed if necessary, to assist with the coronavirus response.

Bowel cancer screening (Faecal Occult Blood Test (FOBt))

General

37. Will invitations and screening test kits continue to be sent out?

Screening is being rescheduled due to coronavirus. This means that screening invitations and test kits are not going out at this time. This is to support screening centres and to enable the workforce to be redeployed as necessary, to assist with the coronavirus response.

38. How will we catch up if invitations stop?

PHE and NHSEI are working closely alongside NHS Digital and other experts to make plans for how screening will resume once it is safe to do so.

39. All our staff have been redeployed to work on wards so how do we continue screening?

The sending of screening invitations and test kits is being rescheduled. This is to reduce the risk of coronavirus to members of the public and front-line NHS staff and enable the workforce to be redeployed as necessary, to assist with the COVID-19 response. Screening needs to be rescheduled safely, so no one gets lost from their screening pathway on BCSS and this will also help us when screening resumes. Please follow the advice in the BCSS technical advice document (see appendix 2 and 3).

40. What is the stance on centres that operate across Trusts when one is continuing to deliver screening, but the other isn’t?

If a site can continue to operate safely, then it is acceptable for that Trust to do so.

41. How will we know who needs to be seen when we resume screening?

If the screening episodes are left as described in the BCSS technical advice document (see appendix 2 and 3), NHS Digital will be able to work with us to identify everyone. PHE is working with NHS England and clinical experts to plan for how screening is rescheduled, when it is safe to do so.
42. Can we use non-JAG accredited units for bowel screening?

Units that do not have JAG accreditation can be used if a safety checklist is completed (see appendix 1). The checklist must be sent to regional commissioners and PHE Quality Assurance (QA) teams. An accredited screening colonoscopist and SSP must be present at the list, along with the JAG recommended endoscopy staff for an endoscopy list.

Specialist Screening Practitioner (SSP) Appointment

43. How should I cancel specialist screening practitioner (SSP) appointments?

To ensure this is done safely, please follow the advice in the BCSS technical advice document (see appendix 2 and 3). If you are not sure about how to do something, please e-mail the Open Exeter helpdesk Exeter.helpdesk@nhs.net

44. Can we do telephone SSP appointments rather than face-to-face assessments?

To reduce contact and therefore lower the risk of infection between individuals, telephone consultations are advised, rather than face-to-face appointments. Before proceeding with a diagnostic test, a full telephone consultation must have taken place and the BCSS data set completed. In circumstances where there is no opportunity to do a full assessment, it is acceptable to have a conversation with the patient to explain the current situation. They will need to be booked for a full SSP appointment when screening is rescheduled. Please make an episode note of the conversation.

45. Can specialist practitioners (SPs) or assistant screening practitioners (ASPs) be used instead of SSPs for assessment appointments or post investigation appointments?

It is not acceptable for an SP/ASP to do the pre-assessment or post investigation clinics, even if this is done over the telephone. It must be an SSP.

Procedure

46. How should I cancel a patient’s diagnostic test?

To ensure this is done safely, please follow the advice in the BCSS technical advice document (see appendix 2 and 3). If you are not sure about how to do something, please e-mail the Open Exeter helpdesk Exeter.helpdesk@nhs.net

47. Can non-accredited colonoscopists work on bowel screening lists?
Staffing for screening colonoscopy lists should continue to follow current BCSP guidance. An accredited screening colonoscopist should do the procedure with an SSP in attendance, in addition to normal endoscopy room staff.

In circumstances where the accredited screener is not available at short notice (this would be after patients have started to take bowel preparation), a suitably experienced non-accredited colonoscopist may do the list. Patients should be told about this and given the choice of whether to continue or re-book when an accredited colonoscopist is available. This should be recorded on BCSS as an episode note. Screening centres should not plan to run screening lists without accredited staff being available.

48. Can SPs or ASPs be used instead of SSPs in the endoscopy room?

It is not acceptable for an SP/ASP to be in the procedure room instead of an SSP, as this cohort of people will be extremely anxious due to any delay to their procedure and coronavirus. It must be an SSP.

**Surveillance**

49. Do we need to carry on with the review of surveillance cases against the new guidance?

The priorities are for all screening centre staff to support any remaining screening centre work or to support the wider workforce with the coronavirus response. The national QA team will continue to check surveillance dates and send to NHS Digital as long as there are cases coming through and staffing allows, however, there may be a delay. Any individuals who are returned to recall and are due surveillance now will not be invited until screening is rescheduled.

**Pathology**

50. Several centres have reported that even if they continue with colonoscopy lists, they do not have reporting pathologists available – what should they do?

Initially there might be some challenges with processing the samples at the current time. However, if an endoscopist has a sample that they believe is a cancer they should make extra efforts to speak to the pathologist to highlight the sample. This should then be prioritised.

The pathologists believe that their workload will improve as elective surgery and other services are paused.
Appendix 1

Minimum safety requirements for an endoscopy unit that is not JAG accredited, to perform screening colonoscopy

PHE has been asked by NHS England to provide a checklist of essential safety requirements that a non-JAG accredited endoscopy unit must have before they can scope screening colonoscopies. To provide this information PHE has taken advice from JAG and Professional Clinical Advisors.

<table>
<thead>
<tr>
<th>Available YES/NO</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency resuscitation equipment is available</td>
<td></td>
</tr>
</tbody>
</table>

13
<table>
<thead>
<tr>
<th>Clear blue-light policy in emergency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to emergency inpatient bed if required</td>
</tr>
<tr>
<td>Clinical governance – (depends on who owns the endoscopy facility)</td>
</tr>
<tr>
<td>Pathology transportation in place for specimen</td>
</tr>
<tr>
<td>Recommended BSG endoscopy nursing staffing levels to include competency levels for complex procedures</td>
</tr>
<tr>
<td>Induction for staff that are not familiar with screening</td>
</tr>
<tr>
<td>Admin and discharge of screening patients - training required if not familiar with screening</td>
</tr>
<tr>
<td>BCSP needs more therapeutic equipment (because of more advanced polypectomies and more polyps)</td>
</tr>
<tr>
<td>Enough scopes of good quality</td>
</tr>
<tr>
<td>Safe diathermy that the endoscopist and staff are familiar with</td>
</tr>
<tr>
<td>N3 connection and access to BCSS in the room to allow live data collection – if this is not possible, evidence of a robust SOP surrounding a paper-based system, that describes how and when the information will be entered onto BCSS after the procedure must be available</td>
</tr>
<tr>
<td>Co2 – to reduce pain</td>
</tr>
</tbody>
</table>

### Appendix 2

**Reschedule Screening - Using the Bowel Cancer Screening System to manage invitations**

This document lists the operations to be performed in the Bowel Cancer Screening System (BCSS) to reschedule bowel cancer screening. The steps below provide system details about how to stop inviting subjects for screening. A separate document will describe how to cancel SSP appointments for those individuals already on a screening pathway.

It includes FOBT, bowel scope, and surveillance.

It assumes:
1. FOBT pre-invitations are not sent
2. FIT kits are not sent in any situation (including to complete an episode)
3. Bowel scope pre-invitations and appointments are not sent
4. Surveillance health check forms are not sent
5. Reminder letters are not sent for any of the above.

The overriding principle is to leave episodes open so that they can continue when screening resumes.

**FOBT**

**Set Invitation Plans to Zero**

A hub manager or director must set all their invitation plans so that no new routine invitations will be sent:

- From the Call and Recall menu, select Planning and Monitoring
- Select each screening centre in turn. For each one:
  - Create a Plan
  - Choose to Switch to Data View
  - Change the first x weeks of the plan to have an Invitation Rate of 0. The system will ask you to confirm you want to do this. Select “OK” to confirm you do.
  - Recalculate to see the effect of the changes. You must do this before the system allows you to save the plan.
  - Save the plan.
- When prompted, enter a reason for changing the invitation rates.

**Note:** when you recalculate the plan, it may now appear many weeks behind. If a subject has a historic screening due date, the system sees they have not been invited and that is how behind the screening centre is until they are invited. For example: if someone has been screened, emigrates for several years and then returns to the country, they will have a historic screening due date.

**Continue to Run Daily Invitations**

Continue to Generate Invitations every day. With all plans set to zero this creates no new invitations However it:

- Keeps the invitation runs synchronised with the plan (i.e. BCSS is looking for the right day in the plan to find its invitation rate)
- Provides a check of whether any self-referrals have happened. If they have happened, the letters should not be sent at this time. See
- Self-referrals and Opt-ins
New self-referrals and opt-ins will continue to be added to the system, but no kits will be sent at this time.

d) Monitor Letter Batches below.

Self-referrals and Opt-ins

New self-referrals and opt-ins will continue to be added to the system, but no kits will be sent at this time.

Monitor Letter Batches

The following letters include a FIT Kit. They must not be sent at this time. **Do not “Prepare”** the letters below.

<table>
<thead>
<tr>
<th>Initial Kits</th>
<th>Letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code</td>
<td>Letter</td>
</tr>
<tr>
<td>S9f</td>
<td>Invitation &amp; Test Kit</td>
</tr>
<tr>
<td>S83f</td>
<td>Invitation &amp; Test Kit (70+ Self-Referral)</td>
</tr>
<tr>
<td>S157f</td>
<td>Invitation &amp; Test Kit (Opt-In)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Retest Kits</th>
<th>Letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code</td>
<td>Letter</td>
</tr>
<tr>
<td>U178f</td>
<td>Retest (Assisted; Weak +)</td>
</tr>
<tr>
<td>N179f</td>
<td>Retest (Assisted; Weak + &amp; Normal)</td>
</tr>
<tr>
<td>S5f</td>
<td>Retest (Tech Fail)</td>
</tr>
<tr>
<td>U67f</td>
<td>Retest (Tech Fail; Weak +)</td>
</tr>
<tr>
<td>N113f</td>
<td>Retest (Tech Fail; Weak + &amp; Normal)</td>
</tr>
<tr>
<td>S127f</td>
<td>Retest (Tech Fail)(Spoilt)</td>
</tr>
<tr>
<td>U128f</td>
<td>Retest (Tech Fail; Weak +)(Spoilt)</td>
</tr>
<tr>
<td>N129f</td>
<td>Retest (Tech Fail; Weak + &amp; Normal)(Spoilt)</td>
</tr>
<tr>
<td>U7f</td>
<td>Retest (Weak + &amp; Normal)</td>
</tr>
<tr>
<td>S177f</td>
<td>Retest (Assisted)</td>
</tr>
<tr>
<td>U66f</td>
<td>Retest (Spoilt; Weak +)</td>
</tr>
<tr>
<td>N112f</td>
<td>Retest (Spoilt; Weak + &amp; Normal)</td>
</tr>
<tr>
<td>U6f</td>
<td>Retest (Weak +)</td>
</tr>
<tr>
<td>U131f</td>
<td>Retest (Weak +)(Spoilt)</td>
</tr>
<tr>
<td>U130f</td>
<td>Retest (Weak + &amp; Normal)(Spoilt)</td>
</tr>
<tr>
<td>Code</td>
<td>Letter</td>
</tr>
<tr>
<td>------</td>
<td>------------------------------</td>
</tr>
<tr>
<td>S3f</td>
<td>Retest (Spoilt)</td>
</tr>
</tbody>
</table>

**Ad-hoc Requests for Another Kit**

<table>
<thead>
<tr>
<th>Code</th>
<th>Letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>K188f</td>
<td>New Kit</td>
</tr>
</tbody>
</table>

**Result Letters**

<table>
<thead>
<tr>
<th>Code</th>
<th>Letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>S2</td>
<td>Subject Result (Normal)</td>
</tr>
</tbody>
</table>

**Reminder Letters**

These letters prompt a subject to return a kit. **Do not “Prepare”** these letters.

<table>
<thead>
<tr>
<th>Code</th>
<th>Letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>U14</td>
<td>Reminder Of Retest (Weak +)</td>
</tr>
<tr>
<td>U15</td>
<td>Reminder Of Retest (Normal; Weak +)</td>
</tr>
<tr>
<td>U69</td>
<td>Reminder Of Retest (Spoilt; Weak +)</td>
</tr>
<tr>
<td>U75</td>
<td>Reminder Of Retest (Assisted; Weak +)</td>
</tr>
<tr>
<td>U78</td>
<td>Reminder Of Retest (Tech Fail; Weak +)</td>
</tr>
<tr>
<td>U132</td>
<td>Reminder Of Retest (Normal; Weak +) (Spoilt)</td>
</tr>
<tr>
<td>U136</td>
<td>Reminder Of Retest (Tech Fail; Weak +) (Spoilt)</td>
</tr>
<tr>
<td>U144</td>
<td>Reminder Of Retest (Weak +) (Spoilt)</td>
</tr>
<tr>
<td>S10</td>
<td>Test Kit Reminder</td>
</tr>
<tr>
<td>S11</td>
<td>Reminder Of Retest (Spoilt)</td>
</tr>
<tr>
<td>S12</td>
<td>Reminder Of Retest (Assisted)</td>
</tr>
<tr>
<td>S13</td>
<td>Reminder Of Retest (Tech Fail)</td>
</tr>
<tr>
<td>S135</td>
<td>Reminder Of Retest (Tech Fail) (Spoilt)</td>
</tr>
<tr>
<td>S84</td>
<td>Test Kit Reminder</td>
</tr>
<tr>
<td>N115</td>
<td>Reminder Of Retest (Spoilt; Weak + &amp; Normal)</td>
</tr>
<tr>
<td>N116</td>
<td>Reminder Of Retest (Assisted; Weak + &amp; Normal)</td>
</tr>
<tr>
<td>N117</td>
<td>Reminder Of Retest (Tech Fail; Weak + &amp; Normal)</td>
</tr>
<tr>
<td>Code</td>
<td>Letter</td>
</tr>
<tr>
<td>-------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>N137</td>
<td>Reminder Of Retest (Tech Fail; Weak + &amp; Normal) (Spoilt)</td>
</tr>
</tbody>
</table>

**Notes**
Not preparing batches means there is no way of accidentally printing them or sending them to RDI for printing. However, the downside is that this approach loses some control over restarting screening.

**Leave Episodes Open**
Generally, episodes should be left open to be progressed again when screening has resumed.

This includes **patients awaiting a clinician review** to determine suitability for diagnostic tests. If the clinical review will not be possible in a timely way, do not close the episode.
Bowel Scope

Do not Generate Routine Invitations

Screening centres must not generate bowel scope invitations.

Cancel Bowel Scope Appointments

Appointments that will not take place must be cancelled. The screening centre can cancel individual appointments or whole lists. Lists are recommended as they will cancel batches of appointments in one operation and mirror what is happening.

- From the main menu select: Bowel Scope, Bowel Scope Appointments, View Bowel Scope Appointments
- For each day on which appointments exist, select the day to Manage FS Lists on this day
- Select each List in turn and choose to Cancel list

This makes the patients visible on the alert for Subjects that Require a Bowel Scope Appointment until they an appointment is booked for them (if required).

Remove Availability

Removing future slots is **recommended** to avoid appointments accidentally being booked manually or through the Generate Invitations route.

- Navigate to the page displaying bowel scope availability. From the main menu select: Bowel Scope, Bowel Scope Appointments, Set Bowel Scope Availability, then Bowel Scope Availability
- Select the link to SLOTS for each site and week in turn.
- Select each day in turn and choose to Delete List for each list
- Save each day’s changes to action the change

**Note:** if appointments are booked, lists cannot be deleted. You will need to select and delete appointments.

Monitor Letter Batches

**Do not “Prepare”** the letters inviting people to for bowel scope appointments or reminding them of their appointments.
### Initial appointments

<table>
<thead>
<tr>
<th>Code</th>
<th>Letter</th>
<th>Hub or Screening Centre Letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>F2</td>
<td>Bowel Scope Pre-invitation</td>
<td>Hub</td>
</tr>
<tr>
<td>F9</td>
<td>Bowel Scope Invitation &amp; Appointment</td>
<td>Hub</td>
</tr>
<tr>
<td>F11</td>
<td>Invitation Reminder</td>
<td>Hub</td>
</tr>
<tr>
<td>F33</td>
<td>Bowel Scope Appointment Confirmation Letter</td>
<td>Hub</td>
</tr>
<tr>
<td>F84</td>
<td>Bowel Scope Invitation &amp; Appointment (Self-refer)</td>
<td>Hub</td>
</tr>
</tbody>
</table>

### Rebooked appointments

<table>
<thead>
<tr>
<th>Code</th>
<th>Letter</th>
<th>Hub or Screening Centre Letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>F38</td>
<td>Bowel Scope Invitation &amp; Appointment (SC rebook, subject not responded)</td>
<td>Hub</td>
</tr>
<tr>
<td>F37</td>
<td>Bowel Scope Invitation &amp; Appointment (SC rebook)</td>
<td>Hub</td>
</tr>
<tr>
<td>F73</td>
<td>Bowel Scope Invitation &amp; Appointment (Another Required)</td>
<td>Screening Centre</td>
</tr>
<tr>
<td>F74</td>
<td>Bowel Scope Invitation &amp; Appointment (misc rebook)</td>
<td>Hub or Screening Centre</td>
</tr>
<tr>
<td>F75</td>
<td>Bowel Scope Invitation &amp; Appointment (misc rebook, subject not responded)</td>
<td>Hub</td>
</tr>
<tr>
<td>F35</td>
<td>Bowel Scope Invitation &amp; Appointment (SC book)</td>
<td>Screening Centre</td>
</tr>
</tbody>
</table>

### Non-response

Letters of non-response **must still be “Prepared”**. This closes episodes. Unlike FOBT screening where a communication could prompt a subject to return a kit, this letter prompts the subject to contact the programme to make another appointment hence is more manageable.
### Cancelled appointments

Letters where appointments have been cancelled must still be “Prepared”. This informs the subject of the cancellation.

<table>
<thead>
<tr>
<th>Code</th>
<th>Letter</th>
<th>Hub or Screening Centre Letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>F40</td>
<td>Bowel Scope non response</td>
<td>Hub</td>
</tr>
<tr>
<td>F41</td>
<td>Bowel Scope non response (GP Practice)</td>
<td>Hub</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code</th>
<th>Letter</th>
<th>Hub or Screening Centre Letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>F50</td>
<td>Bowel Scope Appointment Cancellation</td>
<td>Hub or Screening Centre</td>
</tr>
<tr>
<td>F77</td>
<td>Subject not available for offered appointment, letter to subject</td>
<td>Screening Centre</td>
</tr>
<tr>
<td>F78</td>
<td>Bowel Scope Insufficient Availability at Screening Centre</td>
<td>Screening Centre</td>
</tr>
</tbody>
</table>

### Leave Episodes Open

Generally, episodes should be left open to be progressed again when screening has restarted.

This includes patients awaiting a clinician review to determine suitability for diagnostic tests. If the clinical review will not be possible in a timely way, do not close the episode.
Surveillance

Do not Invite for Surveillance

Screening centres must not produce the healthcheck forms to start surveillance episodes if all screening has been rescheduled.

Monitor Letter Batches

Do not “Prepare” the letters inviting people to for surveillance or reminding them to respond.

<table>
<thead>
<tr>
<th>Code</th>
<th>Letter</th>
</tr>
</thead>
<tbody>
<tr>
<td>X500</td>
<td>Surveillance Selection &amp; Healthcheck Form</td>
</tr>
<tr>
<td>X505</td>
<td>Surveillance Selection &amp; Healthcheck Form Reminder</td>
</tr>
</tbody>
</table>

Leave Episodes Open

Generally, episodes should be left open to be progressed again when screening has restarted.

This includes patients awaiting a clinician review to determine suitability for diagnostic tests. If the clinical review will not be possible in a timely way, do not close the episode.
Appendix 3

Reschedule Screening - Using the Bowel Cancer Screening System to manage SSP Appointments

This document lists the operations to be performed in the Bowel Cancer Screening System (BCSS) should the instruction to reschedule bowel cancer screening be issued. The steps below provide system details about managing SSP appointments and diagnostic tests. A separate document details how initial invitations are managed.

This document is for any type of screening episode: FOBT, bowel scope, and surveillance. It assumes:

1. Existing SSP appointments may be:
   a. Go ahead as booked.
   b. Be a telephone appointment in the first instance
   c. Cancelled and not rebooked at this time
2. Diagnostic tests will not be available

The overriding principle is to leave episodes open so that they can continue when screening resumes.

Existing SSP Appointments

Below are some possible scenarios for subjects who are already booked in to an SSP appointment.

Where face to face appointment are still going ahead

Attend the appointment as usual on BCSS.
Advance the patient to the appropriate next stage in their pathway. Do not leave the patient as simply having attended their appointment.
If the patient is suitable but cannot progress to a diagnostic test at this time, advance the patient to be suitable for a diagnostic test. This action makes the patient visible on the alert for Patients Awaiting Action Regarding Diagnostic Test until such time that a test can be booked.

Appointment is now by telephone, full assessment can take place

There is no need to change the existing booking.
Attend the appointment as usual on BCSS.
Note: BCSS assumes it is a face to face meeting and this cannot be changed.
Advance the patient to the appropriate next stage in their pathway. Do not leave the patient as simply having attended their appointment.
If the patient is suitable but cannot progress to a diagnostic test at this time, advance the patient to be suitable for a diagnostic test. This makes the patient visible on the alert for Patients Awaiting Action Regarding Diagnostic Test until such time that a test can be booked.

**Appointment is now by telephone, full assessment cannot take place**

This scenario is where, for example, an initial telephone call is booked to explain the situation. When a telephone call cannot determine a patient’s suitability for a diagnostic test, the full assessment should be in two parts:

1. The initial telephone conversation now
2. A subsequent SSP appointment where the full assessment will be carried out when screening has resumed

To do this:
- There is no need to change the existing booking
- Attend this telephone conversation like any other appointment (or if you cannot contact the person record DNA as usual).

**Note:** BCSS assumes it is a face to face meeting and this cannot be changed.
- Record that a subsequent appointment is required:
  - Advance FOBT screening
  - Select Previous attendance, further assessment required as the reason for needing a subsequent appointment
  - Click Subsequent Assessment Appointment Required
  - When prompted, click OK to progress the episode
  - Add an Episode Note to explain the situation

This makes the patient appear on the alert for Patient(s) requiring a Positive Assessment Appointment with the reason selected above. They will remain here until they can be booked into another appointment.

**Appointments cannot go ahead and you have had no contact with the patient**

If appointments (face-to-face or telephone) cannot take place, each one will need to be cancelled manually:
- From the main menu select: Screening Practitioner Appointments, View Appointments
- For each day on which appointments exist, select the day to View appointments on this day
- Select each patient in turn
- Make sure “Cancel” is selected on the Appointment Detail screen then choose “Screening Centre Cancelled – Other Reason” as the reason for cancellation
- Save the change

This makes the patients visible on the alert for Patient(s) requiring a Positive Assessment Appointment with the reason selected above until such time that an appointment can be rebooked (if required).

Cancelling an appointment makes the slot available to be rebooked. If the slot is not available, it should be removed to stop it being rebooked. See Update Availability for SSP Appointments below.
New Bookings for SSP Appointments

This section relates to booking/rebooking appointments.

Update Availability for SSP Appointments
Availability of SSP appointments must be kept up to date.

Remove Slots
To make sure an appointment is not accidentally booked into a slot that is not available, the availability should be reviewed, and slots removed if necessary:
- From the main menu select: Screening Practitioner Appointments, Set Availability, Practitioner Availability - Screening Centre Slot Summary
- Select the SLOTS to be changed and for which screening practitioner
- Select the individual slots to be removed or Select All
- Choose to Remove Selected
- Save to remove the slots

Add Slots
Slots must be added if you believe the appointments will take place. This is as per the existing process in BCSS.
Only set up appointments if you believe they will take place. Do not set up “dummy” appointments.
Note that BCSS does not distinguish between telephone and face to face appointments.
Therefore, if telephone appointments are being offered, they should be set up through this screen like any other SSP appointment.

Appointments can be Booked
If appointments are available, they may be booked as normal. This is true for face-to-face or telephone appointments.

Unable to Book Appointments
If no appointments are available, the subject must be left in their open episode. This makes them visible on the alert for Patient(s) requiring a Positive Assessment Appointment. They will remain here until they can be booked into an appointment.
Cancel Diagnostic Tests

At this time the assumption is that no diagnostic tests will take place. BCSS does not contain the appointment diary for diagnostic tests so any cancelled tests will be triggered from the screening centre host trust’s system(s).

For each patient, the screening centre should cancel the diagnostic test on BCSS. This makes the patient visible on the alert for Patients Awaiting Action Regarding Diagnostic Test until such time that a test can be rebooked (if required).
<table>
<thead>
<tr>
<th><strong>Project / Category</strong></th>
<th>PHE Screening – FAQs CoVid-19</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Document title</strong></td>
<td>Covid-19 Bowel Cancer Screening FAQs</td>
</tr>
<tr>
<td><strong>Version</strong></td>
<td>COVID-19 FAQs Final 20200408</td>
</tr>
<tr>
<td><strong>Release Status</strong></td>
<td>Final</td>
</tr>
<tr>
<td><strong>Author</strong></td>
<td>Karen Emery-Downing</td>
</tr>
<tr>
<td><strong>Owner</strong></td>
<td>Bowel Cancer Screening Task and Finish Group – CoVid-19</td>
</tr>
<tr>
<td><strong>Authorised By</strong></td>
<td>Bowel Screening Task and Finish (CoVid-19)</td>
</tr>
<tr>
<td><strong>Valid From</strong></td>
<td>14/04/2020</td>
</tr>
<tr>
<td><strong>Review Date</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Audience</strong></td>
<td>General Practitioners, Screening Hub Staff and Screening Centre Staff</td>
</tr>
</tbody>
</table>