

Please note the local reference for this work instruction is WISSP2.1

## **1. Introduction and Who Guideline applies to**

A Bowel cancer screening patient with a +ve FIT will attend a pre appointment clinic with an Specialist Screening Practitioner (SSP). At this appointment a full assessment is taken and discussion is held with the patient and any family present with regard to proceeding to have an investigation to examine the large bowel. When a colonoscopy is required the consent for the procedure is obtained at the 1<sup>st</sup> appointment and date for procedure agreed with bowel preparation confirmed. Contact details for the screening SSP team are given so the patient can call if there are any problems which may require further information or a procedure date change.

This work instruction has been developed to assist in identifying the process to follow when a Bowel cancer screening patient does not attend for the colonoscopy agreed.

## **2. Guideline Standards and Procedure**

If the person does not attend their bowel cancer screening procedure, it will be necessary for a member of the screening centre team to telephone or write to the participant to understand the reason for the DNA. The screening centre should make every effort to explain the necessity of the appointment and arrange another appointment that is suitable. They should also explain that if the person does not attend this 2nd appointment, no further appointments will be offered unless there are extreme unforeseen circumstances (this is at the discretion of the screening centre). The screening centre is responsible for closing the screening episode on BCSS which will produce a letter informing the participants GP and automatically recalculates the participants next screening invitation due date. If the participant does want to be screened, they can contact the screening centre who will provide an appointment if appropriate.

*Bowel Cancer screening Service Specification No26*

[See Appendix 1](#)

## **3. Education and Training**

All screening staff made aware of SOPS and Work Instructions on induction and any changes/reviews are fed back to the team via email and at team meetings. All staff have access to QMS.

## **4. Monitoring Compliance**

What will be measured to monitor compliance	How will compliance be monitored	Monitoring Lead	Frequency	Reporting arrangements
DNA rate	Audit	K Steel	On going	3 monthly team meetings Programm board

## **5. Supporting References (maximum of 3)**

Bowel Cancer screening Service Specification No26

## **6. Key Words**

DNA, bowel cancer screening

<b>CONTACT AND REVIEW DETAILS</b>	
<b>Guideline Lead</b> Claire Almen and Amanda Smith, Lead Specialist Screening Practitioners, UHL Bowel Cancer Screening	<b>Executive Lead</b> Alex Bonner UHL Bowel Cancer Screening Manager
<b>Details of Changes made during review:</b> General update on process from local work instruction to Trust format	

## Appendix 1



