Increasing Bowel Screening uptake of non responders in Cwm Taf

Emma Cahill
Senior Public Health Practitioner
Cwm Taf Public Health Team
Bowel Screening

- Bowel screening test kits are currently sent to men and women aged between 60 and 74 yrs every 2yrs.

- The kit and information pack are received in the post and have a unique code for each patient. Patients are asked to provide three samples within 10 days of each other and return the kit by post.

- Patients are then informed of the results and any subsequent actions to follow.

- Non-responders are defined as eligible individuals who had not returned a test kit within 6 months of the invitation letter.
Bowel Screening Uptake Rates

• Uptake rates in Cwm Taf 2014/15
  ▫ Cwm Taf average 50.8%
  ▫ Wales Average 50.8%
  ▫ Wales target 60%

• However, uptake varies across clusters from 43.9% in North Merthyr Tydfil to 55.6% in South Taf Ely cluster.
Feasibility pilot

- The practice used a letter and phone call to encourage non-responders to complete existing kits or order new.
  - 49 patients sent letters
  - 29 could be contacted by phone of which 11 requested a new kit be sent.
  - 9 of the 49 non responders returned a kit
- Return rate of 18%
- Due to only 60% contactable by phone we next hoped to assess the impact of other approaches.
Phase 2 Methodology

Test 3 approaches, all if which will:

• provide information to increase awareness of:
  ▫ the importance of screening and promoting informed choice,
  ▫ where and how to seek more information,
  ▫ how to order a new kit if required.

• Common across all pilots:
  ▫ Flagging the patient records of non-responders resulting in a ‘pop up’ to health professionals to have an opportunistic conversation.
  ▫ Increase staff awareness of bowel screening through cascade of information.
Intervention 1 - Letter only

- Letters sent from the practice to non-responders informing patients they have not completed a test kit and information to take part.

- The letter included information on the how to order a new kit and where to seek further advice, as well as a copy of the bowel screening key messages flyer.
Intervention 2 - Letter and phone call

• The same letter and flyer were sent to non-responders.
• Two weeks later the practice tried to call the patients three times (different times and days).
• If successful contact is made the staff member would highlight the importance of screening and encourage the patient to make an informed choice.
• The patient could then decline, request a new kit through the practice or complete existing kit if still in date.
Intervention 3 - Information attached to repeat prescriptions

- All repeat prescriptions issued within the month to identified non-responders to have key message flyer attached.

- Pharmacists engaged to support the pilot by raising the issue of bowel screening with patients whose prescriptions had flyers attached.
# Results at 8 weeks

<table>
<thead>
<tr>
<th>Practice list size</th>
<th>Practice uptake rate</th>
<th>No. of non-responders</th>
<th>New kits requested</th>
<th>New kits returned</th>
<th>Existing kits returned</th>
<th>Return Rate (no. kits)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feasibility. Letter &amp; call</td>
<td>5,752</td>
<td>50.6%</td>
<td>49</td>
<td>13</td>
<td>7</td>
<td>2</td>
</tr>
<tr>
<td>1. Letter only</td>
<td>5,421</td>
<td>46.4%</td>
<td>49</td>
<td>6</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>2. Letter &amp; phone call</td>
<td>5,302</td>
<td>48.3%</td>
<td>49</td>
<td>5</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>3. Repeat prescription</td>
<td>17,138</td>
<td>58.4%</td>
<td>152</td>
<td>4</td>
<td>4</td>
<td>3</td>
</tr>
</tbody>
</table>
Feedback

- **Contact by phone**: across both feasibility and intervention 2 only 60% and 55% of non-responders were contacted by phone.

- **Practice time**: Letters alone and prescriptions took 1 hr of admin time. Interventions with phone calls recorded between 15-20hrs admin time.

- **Repeat prescription**: only 88% of non-responders were issued a repeat prescription.
Next steps

• Estimates of scaling up the letter only intervention would increase the Cwm Taf uptake rate from 50.8% to 55.9%, an extra 1,148 kits returned.

• Continue working together with primary care clusters to roll out a letters only approach across Cwm Taf.

• Work together with PHW screening division on the wider evaluations and possible ‘once for Wales’ approach to increase uptake of non responders.
Thank you

If you would like any more information or have any queries please contact Sara Thomas.

Sara.Thomas4@wales.nhs.uk
Consultant in Public Health, Cwm Taf Public Health Team.