

Completion of Bowel Cancer Screening System Datasets and Adding Episode Notes to **Bowel Cancer Screening System**

| Key Document code: | WAHT-KD-021 | WAHT-KD-021 | | |
|----------------------|--------------------------------|--------------------------------------|--|--|
| Key Documents Owner: | Emma Duggan | Bowel Cancer & Bowel Scope Screening | | |
| | | Manager | | |
| Approved by: | Endoscopy Govern | Endoscopy Governance Meeting | | |
| Date of Approval: | 4 th September 2024 | 4 th September 2024 | | |
| Date of review: | 4 th September 2027 | 4 th September 2027 | | |

| Date | Amendment | Approved by |
|----------------------------|--|---------------------------------|
| 19 th June 2019 | Documents extended for 6 months whilst reviewed | Emma Duggan |
| 11 th Feb 2020 | Documents extended for 6 months whilst review and approval is processed | Emma Duggan |
| 27 th July 2020 | Documents extended for 6 months during COVID-19 period | QGC/Gold Meeting |
| April 2020 | Full review of document Change in responsibility of incomplete datasets report | April 2020 |
| 1 st March 2021 | Document extended for 6 months as per Trust agreement 11/02/2021 | |
| 16 th July 2021 | Documents extended for 6 months whilst review and approval is processed | Emma Duggan/ Mr Stephen Lake |
| November 2022 | Document approved without amendments | SCSD Governance Meeting |
| August 2024 | Additional sentence related to Information Governance – page 2 | Avril Turley |

Introduction

The Bowel Cancer Screening System is the dedicated national IT system for administration of and data capture for the Bowel Cancer Screening Programme.

This guideline outlines the process for completing Bowel Cancer Screening System datasets and circumstances in which an episode note should be added to Bowel Cancer Screening System.

The NHS Bowel Cancer Screening Programme, Guide Book for Programme Hubs and Screening Centres, Version 3 section 5.9 states that the SSP is responsible for ensuring that all the screening datasets are completed and that outcomes from all the screening episodes are entered on the Bowel Cancer Screening System. Furthermore, IGU 16 states that clear, accurate and complete records must be kept of assessments, treatments and results and in addition relevant discussions with patients should also be recorded. It goes on to set out that all data must be recorded in real time or where this is not possible recorded on an identical paper proforma which must be transferred to the Bowel Cancer Screening System by the end of the next working day.

Scope of This Document

This document applies to BCSP Specialist Screening Practitioners (SSPs) Screening Practitioners (SPs) and administrative staff working within the Herefordshire & Worcestershire Bowel Cancer Screening Programme.

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Please note that the key documents are not designed to be printed, but to be used on-line. This is to ensure that the correct and most up-to-date version is being used. If, in exceptional circumstances, you need to print a copy, please note that the information will only be valid for 24 hours and should be read in conjunction with the key document supporting information and/or Key Document intranet page, which will provide approval and review information.

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Implementation

This guideline will need to be implemented when having contact with patients within the Bowel Cancer Screening Programme (BCSP) and when completing datasets for these patients. All BCSP staff will be notified of this documents existence and it will form part of the induction plan for new staff.

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NHS Trust

All BCSP staff, in keeping with information governance must use their own unique password (no sharing of passwords) to access the system for security.

Completion of Datasets

In accordance with the National Office guidance, it is necessary:

- To record all data required by Bowel Cancer Screening System on a paper proforma, where real time data capture is not possible.
- To input any data recorded on paper proforma by the end of the next working day.
- That where the data drives the patient episode (e.g. investigation dataset) the data is input only by the SSP **or SP** who collected it.
- That records are clear and accurate.
- That original records are not tampered with in any way.
- Any changes or additions made to entries or paper records by a second party are clearly marked as such.
- That no data is falsified in order to progress a patient along the pathway.
- That where data cannot be completed in full an episode note is created to explain which elements are incomplete and why. If this information is to become available at a later date, the system must be updated as soon as possible.
- That investigation datasets correspond with the colonoscopy report and histology report.

Episode / Subject / Additional Care Needs Notes

The Bowel Cancer Screening System has the functionality to record notes against a patient's record. There are three types of notes and each has a different function. These are set out below:

- Episode notes are episode specific e.g. patient rescheduled colonoscopy.
- Subject notes apply to the patient rather than the current episode e.g. patient prefers to be contacted by mobile phone.
- Additional Care Needs notes allow for the recording of a patient's disability which staff may need to be aware of when interacting with the patient e.g. patient is deaf.

Notes should be used to record any events not recorded within a dataset e.g. ad-hoc telephone calls, discussions within clinic etc.

Incomplete Datasets

Incomplete datasets are monitored by the Lead Nurse and discussed with the Screening Director and Programme Manager on a monthly basis. For further details see Guideline for Running 'Missing Data' Reports.

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Monitoring Tool



| Key Document | Key control: | Checks to be carried out to confirm compliance with the policy: | How often the check will be carried out: | Responsible for carrying out the check: | Results of check reported to: (Responsible for also ensuring actions are developed to address any areas of non-compliance) | Frequency of reporting: |
|------------------|--|---|---|---|--|----------------------------|
| WAHT- BCS-008 | All datasets should be completed as soon as possible (dependant on clinical information available). | Review of 'Missing Data' reporting tool on BCSS. | Monthly | Lead Nurse | Outstanding incomplete datasets are provided to individual SSPs, SPs and if necessary at BCSP Operational Group meeting. | Monthly |

References

Gray, S. (2008) NHS Bowel Cancer Screening Programme, Guide Book for Programme Hubs and Screening Centres, Version 3 Sheffield, NHS Cancer Screening Programmes

Griffiths, H. (2012) IGU 016 Completion of BCSS Datasets Sheffield, NHS Cancer Screening Programmes

Worcestershire Acute Hospitals NHS Trust, Bowel Cancer Screening Programme Operational Policy

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CONTRIBUTION LIST

Key individuals involved in developing the document

| Name | Designation | |
|-------------|------------------------|--|
| Siân Webley | BCSP Programme Manager | |
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| | | |

Circulated to the following individuals for comments

| Name | Designation |
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| Lorraine McGregor | Specialist Screening Practitioner (SSP) |
| Paula Smith | Specialist Screening Practitioner (SSP) |

Circulated to the following CD's/Heads of dept for comments from their directorates / departments

| Name | Directorate / Department | |
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| Mr S Lake | BCSP Screening Director | |
| | | |
| | | |

Circulated to the chair of the following committee's / groups for comments

| Name | Committee / group |
|-----------|------------------------|
| Mr S Lake | BCSP Operational Group |
| | |

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Supporting Document 1 - Equality Impact Assessment Tool

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

| | | Yes/No | Comments |
|----|--|--------|----------|
| 1. | Does the policy/guidance affect one group less or more favourably than another on the basis of: | | |
| | Race | No | |
| | Ethnic origins (including gypsies and travellers) | No | |
| | Nationality | No | |
| | Gender | No | |
| | Culture | No | |
| | Religion or belief | No | |
| | Sexual orientation including lesbian, gay and bisexual people | No | |
| | Age | No | |
| 2. | Is there any evidence that some groups are affected differently? | No | |
| 3. | If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable? | N/A | |
| 4. | Is the impact of the policy/guidance likely to be negative? | No | |
| 5. | If so can the impact be avoided? | N/A | |
| 6. | What alternatives are there to achieving the policy/guidance without the impact? | N/A | |
| 7. | Can we reduce the impact by taking different action? | N/A | |

If you have identified a potential discriminatory impact of this key document, please refer it to Human Resources, together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact Human Resources.

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Supporting Document 2 – Financial Impact Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

| | Title of document: | Yes/No |
|----|--|--------|
| 1. | Does the implementation of this document require any additional Capital resources | No |
| 2. | Does the implementation of this document require additional revenue | No |
| 3. | Does the implementation of this document require additional manpower | No |
| 4. | Does the implementation of this document release any manpower costs through a change in practice | No |
| 5. | Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff | No |
| | Other comments: | None |

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval

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