

Bowel Cancer Screening Programme Guideline for Referring Patients to a Tertiary Centre

This guidance does not override the individual responsibility of health professionals to make appropriate decision according to the circumstances of the individual patient in consultation with the patient and /or carer. Health care professionals must be prepared to justify any deviation from this guidance.

Introduction

This operational guideline outlines the action required when a patient needs referring to a tertiary centre following a procedure under the care of the Bowel Cancer Screening Programme.

This guideline is for use by the following staff groups :

Bowel Cancer Screening Programme (BCSP) Specialist Screening Practitioners

Lead Clinician(s)

Mr S P Lake

BCSP Screening Director

Approved: Directorate Governance Meeting

06 August 2025

Review Date:

06 August 2028

This is the most current document and should be used until a revised version is in place

Key amendments to this guideline

Date	Amendment	Approved by:
June 2015	Document Created	Paula Smith
April 2020	Full Review of Document	Paula Smith
November 2022	Document reviewed and approved without amendments	SCSD Governance Meeting
July 2025	Full review – no changes	E Duggan

WAHT-BCS-031

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Introduction

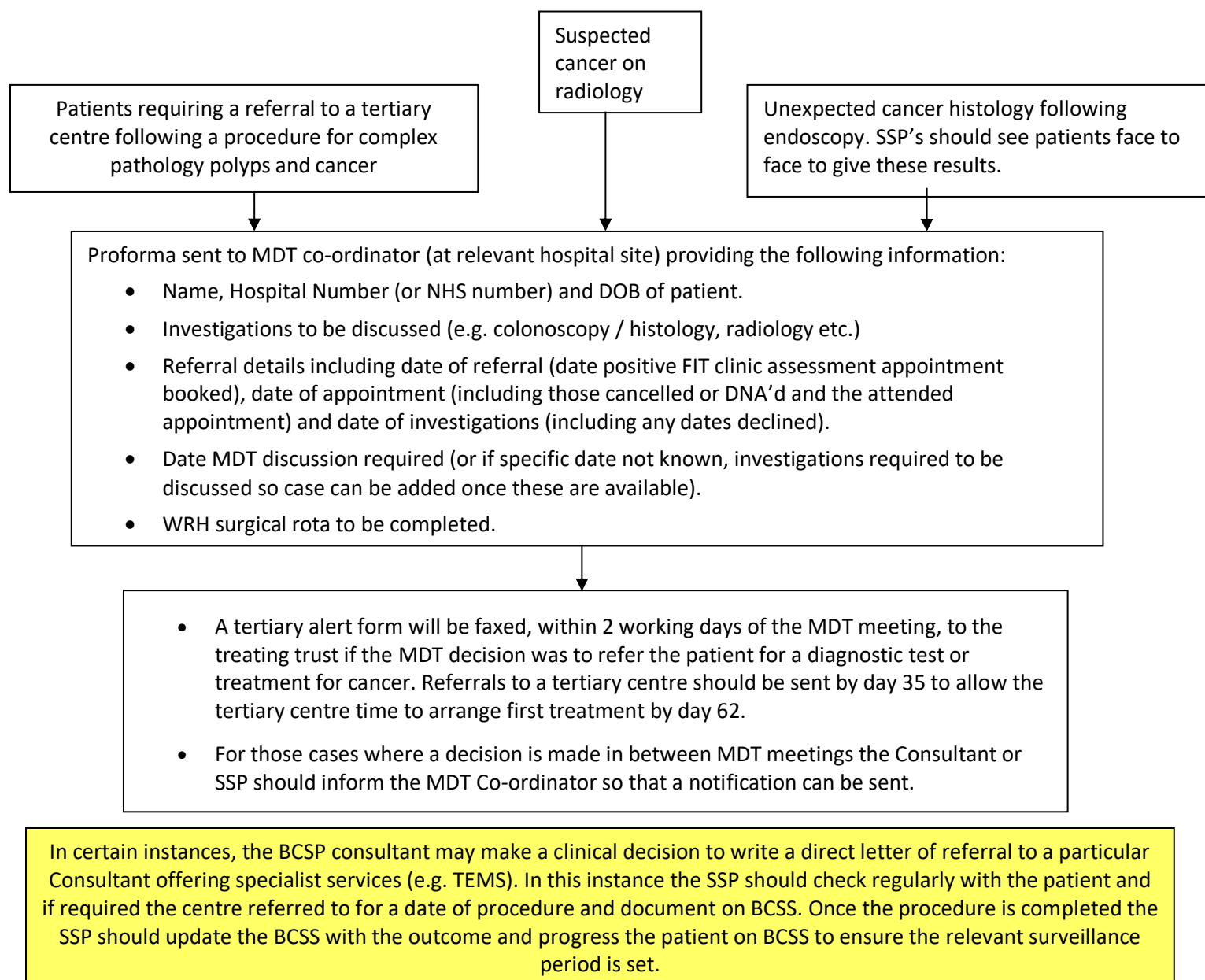
The purpose of this guideline is:

- In accordance with the requirements of the Bowel Cancer Screening Programme, screening centres must have a protocol for handover of responsibility for referral of patients with suspected pathology from BCSP to a named clinician at a treating hospital.
- In addition, screening centres are required to have prearranged referral pathways for any patients who need further investigation or treatment outside BCSP.
- To ensure patients requiring a referral to a tertiary centre following a procedure, and discussion at MDT (Multi-Disciplinary Team) meeting, is completed in a timely manner.

Details of Guideline

This guideline applies to Specialist Screening Practitioners (SSPs) working within the Herefordshire & Worcestershire Bowel Cancer Screening Programme.

Pathway for patients requiring referral to Tertiary Centre



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Monitoring Tool

Page/ Section of 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: <i>(Responsible for also ensuring actions are developed to address any areas of non-compliance)</i>	Frequency of reporting:
	WHAT?	HOW?	WHEN?	WHO?	WHERE?	WHEN?
Two.	Patients with suspected cancer/complex histology should be discussed at MDT meeting.	E-Mail to be sent to the MDT Co-Ordinator with the relevant patient information.	As soon as able to when patients investigation is completed.	Specialist Screening Practitioner/MDT Co-Ordinator.	Specialist Screening Practitioner.	Weekly MDT agenda.

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References

WHAT-CG-446 Operational Escalation Policy for Monitoring Cancer 14/31/62 Day Targets.

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

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Supporting Document 1 - Equality Impact Assessment Tool

To be completed by the key document author and included as an appendix to key document when submitted to the appropriate committee for consideration and approval.

Please complete assessment form on next page;



Herefordshire & Worcestershire STP - Equality Impact Assessment (EIA) Form

Please read EIA guidelines when completing this form

Section 1 - Name of Organisation (please tick)

Herefordshire & Worcestershire STP		Herefordshire Council		Herefordshire CCG	
Worcestershire Acute Hospitals NHS Trust	x	Worcestershire County Council		Worcestershire CCGs	
Worcestershire Health and Care NHS Trust		Wye Valley NHS Trust		Other (please state)	

Name of Lead for Activity	
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Details of individuals completing this assessment	Name	Job title	e-mail contact
	Emma Duggan	Bowel Screening Programme Manager	Emma.Duggan2@nhs.net
Date assessment completed	05/03/2025		

Section 2

Activity being assessed (e.g. policy/procedure, document, service redesign, policy, strategy etc.)	Title: Referring to Tertiary Centre			
What is the aim, purpose and/or intended outcomes of this Activity?	This operational guideline outlines the action required when a patient needs referring to a tertiary centre following a procedure under the care of the Bowel Cancer Screening Programme.			
Who will be affected by the development & implementation of this activity?	<input type="checkbox"/> Service User x Patient <input type="checkbox"/> Carers <input type="checkbox"/> Visitors	x <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Staff Communities Other _____	
Is this:	x Review of an existing activity <input type="checkbox"/> New activity			

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	<input type="checkbox"/> Planning to withdraw or reduce a service, activity or presence?
What information and evidence have you reviewed to help inform this assessment? (Please name sources, eg demographic information for patients / services / staff groups affected, complaints etc.	
Summary of engagement or consultation undertaken (e.g. who and how have you engaged with, or why do you believe this is not required)	
Summary of relevant findings	

Section 3

Please consider the potential impact of this activity (during development & implementation) on each of the equality groups outlined below. **Please tick one or more impact box below for each Equality Group and explain your rationale.**

Please note it is possible for the potential impact to be both positive and negative within the same equality group and this should be recorded. Remember to consider the impact on e.g. staff, public, patients, carers etc. in these equality groups.

Equality Group	Potential positive impact	Potential neutral impact	Potential negative impact	Please explain your reasons for any potential positive, neutral or negative impact identified
Age		X		No impact
Disability		X		No impact
Gender Reassignment		X		No impact
Marriage & Civil Partnerships		X		No impact
Pregnancy & Maternity		X		No impact
Race including Traveling Communities		X		No impact
Religion & Belief		X		No impact
Sex		X		No impact
Sexual Orientation		X		No impact
Other Vulnerable and Disadvantaged Groups (e.g. carers; care leavers; homeless; Social/Economic deprivation, travelling communities etc.)		X		No impact
Health Inequalities (any preventable, unfair & unjust differences in health status between groups, populations or individuals that arise from the unequal distribution of social,		X		No impact

Equality Group	Potential <u>positive</u> impact	Potential <u>neutral</u> impact	Potential <u>negative</u> impact	Please explain your reasons for any potential positive, neutral or negative impact identified
environmental & economic conditions within societies)				

Section 4

What actions will you take to mitigate any potential negative impacts?	Risk identified	Actions required to reduce / eliminate negative impact	Who will lead on the action?	Timeframe
	N/A	N/A	N/A	N/A
How will you monitor these actions?	N/A			
When will you review this EIA? (e.g in a service redesign, this EIA should be revisited regularly throughout the design & implementation)	On next review of document			

Section 5 - Please read and agree to the following Equality Statement**1. Equality Statement**

1.1. All public bodies have a statutory duty under the Equality Act 2010 to set out arrangements to assess and consult on how their policies and functions impact on the 9 protected characteristics: Age; Disability; Gender Reassignment; Marriage & Civil Partnership; Pregnancy & Maternity; Race; Religion & Belief; Sex; Sexual Orientation

1.2. Our Organisations will challenge discrimination, promote equality, respect human rights, and aims to design and implement services, policies and measures that meet the diverse needs of our service, and population, ensuring that none are placed at a disadvantage over others.

1.3. All staff are expected to deliver services and provide services and care in a manner which respects the individuality of service users, patients, carer's etc, and as such treat them and members of the workforce respectfully, paying due regard to the 9 protected characteristics.

Signature of person completing EIA	E Duggan
Date signed	18/07/2025
Comments:	
Signature of person the Leader Person for this activity	S Lake
Date signed	18/07/2025
Comments:	



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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