

## Letter to STAKEHOLDERS:

NHS England & NHS Improvement - South West  
Public Health Commissioning  
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Date as per e-mail

Dear colleagues

### **RE: NHS Bowel Cancer Screening Programme (Bowel Scope)**

I am writing to inform you that following the outcome of a UK National Screening Committee (UKNSC) submission to the Secretary of State, NHS England and NHS Improvement will be permanently discontinuing Bowel Scope as part of the NHS Bowel Cancer Screening Programme. As this service has already been paused, this discontinuation will be applied with immediate effect.

This decision has been made within the context of a prioritisation and risk-based improvement to the NHS Bowel Cancer Screening Programme with a view to extending the home testing programme to include 50-59 year olds from 1 April 2021. In making this decision we considered the following:

- The introduction of FIT testing into the programme in 2019 which has enabled more sensitive testing;
- Implementation of age extension into the programme over the next four years which aims to reduce inequities in service provisions that were created by Bowel Scope roll out to cover only the population of 60% of GP practices, across England;
- The UKNSC recommendation to consider decommission Bowel Scope when FIT was available to 55-year-olds;

The UKNSC and the Department of Health and Social Care are supportive of this approach.

All persons who had been invited to Bowel Scope and have subsequently incurred a delay due to the ongoing response to the coronavirus pandemic will be invited to complete a FIT kit in April 2021. These persons will be informed of this outcome and alternative offer.

We recognise the efforts made by the workforce in delivering bowel scope and the support they have offered the wider NHS Bowel Cancer Screening Programme in recent times. We as commissioners will be working with the providers to ensure the capacity released is factored into capacity planning for age extension of NHS BCSP. We will also ensure all providers develop an implementation/exit plan identifying legacy tasks and the safe and smooth transfer of patients and staff to the wider screening programme.

Thank you for your ongoing support and if you have any questions, please contact us.

Yours faithfully,



James Bolt  
Head of Public Health Commissioning.

