Appendix 3

 

**QIS Quarterly highlight/progress reporting template**

|  |  |
| --- | --- |
| Practice Name: |  |
| Person completing this form | Name:Email: |
| Date: |  |
| Please indicate which quarter you are reporting on by ticking the box below |
| Quarter 1 (due 30th June 2021)  |  |
| Quarter 2 (due 30th Sept 2021) |  |
| Quarter 3 (due 31st Dec 2021) |  |
| Quarter 4 (due 31st Mar 2022) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Service Requirement | Pre Covid 2019 2020 | Baseline data2020 - 2021 | Actions undertaken/comments |
| Confirmation of actions taken to increase screening uptake |  |  |  |
| Understand the barriers to screening uptake and undertake initiatives to increase cancer screening uptake / coverage in all three programmes  | Bowel Screening  |  |  |  |
| Breast Screening  |  |  |  |
| Cervical Screening  |  |  |  |
| Confirmation of actions taken to increase LD screening uptake and submission of LD baseline audit and 2nd audit | **Baseline audit**  | **Second audit** | **Actions undertaken/comments** |
| Understand the barriers to screening uptake and undertake initiatives to increase cancer screening uptake / coverage for patients identified as having a learning disability | Bowel Screening |  |  |  |
| Breast Screening |  |  |  |
| Cervical Screening  |  |  |  |
| Confirmation of actions taken to increase screening coverage for an additional low screening uptake cohort | **Baseline audit** | **Second audit** | **Actions undertaken/comments** |
| Understand the barriers to screening uptake and undertake initiatives to increase cancer screening uptake / coverage for one further low screening uptake cohort of patients(Please name your chosen low uptake patient cohort) | Bowel screening |  |  |  |
| Breast Screening |  |  |  |
| Cervical Screening |  |  |  |
| Perform an audit every 3 months of all new cancers diagnosed, to see if patients could have been referred earlier and if there were any missed screening opportunities | **Narrative confirmation and evidence of audit carried out and audit findings**: |
| Narrative confirmation and evidence of usage of the TVCA Toolkit - e.g. Case Studies |  |
| Confirmation that at least 50% of GPs have completed at least 2 modules of Gateway C  |  |

**Please complete and return to** **cherry.jones@nhs.net**