Regional Bowel Cancer Screening campaign
North West of England
Monday 9 January – Sunday 2 April 2017

A regional Be Clear on Cancer campaign will launch across the North West of England in early 2017, aimed at increasing participation of 60–74 year olds in the English NHS Bowel Cancer Screening Programme.

Why the focus on bowel cancer screening?
Bowel cancer is the fourth most common cancer and the second most common cause of cancer death in the UK, yet trials show that bowel cancer screening can cut deaths from the disease by 15% in the target population (60–74 year olds). The guaiac faecal occult blood test or gFOBT (see image 1) is currently used for bowel cancer screening in England. It can detect early signs of bowel cancer, when it is often easier to treat successfully (see table 1). Despite this, overall uptake of bowel cancer screening in England is low at 58% (2014), and as low as 40% in some areas.

Table 1: Percentage of bowel cancers diagnosed at the earliest stage via different routes to diagnosis

<table>
<thead>
<tr>
<th>Route to Diagnosis</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Bowel cancer screening (gFOBT)</td>
<td>37%</td>
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<tr>
<td>Urgent or routine GP referral</td>
<td>18%</td>
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<tr>
<td>Emergency presentation</td>
<td>6%</td>
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What is this campaign aiming to achieve?
Increased awareness and participation in the NHS Bowel Screening Programme (specifically, gFOBT).

Has this campaign run previously?
No, a Be Clear on Cancer bowel cancer screening awareness campaign has never run before; previous Be Clear on Cancer campaigns have always focused on improving early diagnosis by raising awareness of cancer symptoms. However, Cancer Research UK (CRUK) has undertaken three bowel cancer screening pilot campaigns to date, in London (2014), Wales (2015) and England (2015–16). The Department of Health (DH) helped to fund CRUK’s first pilot and has supported the Wales and England projects. Insights gained from CRUK’s pilot projects will be used to inform this campaign.

Is there any evidence this campaign will work?
Evidence indicates fear of the test outcome, being asymptomatic, having a low perceived risk of bowel cancer and concerns about the practicalities and cleanliness of the screening test can act as barriers to participation. CRUK’s previous pilots all aimed to explore ways of improving participation of 60–74 year olds in the Bowel Screening Programme. In London, a pack (containing gloves & poo catchers) and endorsement flyer achieved a greater impact when supported with advertising, increasing uptake by 6.1 percentage points among 60–69 year olds, and 7.3 percentage points among 70–74 year olds. In Wales, a personalised CRUK endorsement letter was found to be most effective among ‘First Timers’ (+9.1 percentage points), while a letter + pack (containing latex-free gloves) was most impactful among more deprived ‘Non-Responders’ (+3.2 percentage points).

Who is running this campaign?
CRUK will lead, fund and evaluate this pilot however Public Health England (PHE), DH and NHS England colleagues will provide consultancy, support with engagement of stakeholders, and produce some campaign materials.

Why is PHE working in partnership with CRUK on this campaign?
In July 2015, the Independent Cancer Taskforce included a specific recommendation in their strategy “Achieving World Class Outcomes: A Strategy for England 2015 to 2020” for PHE to “explore the use of the Be Clear on Cancer brand...
to improve uptake of screening programmes, particularly among disadvantaged groups”. CRUK and PHE fully support this recommendation and have therefore come together in partnership, along with DH and NHS England, to trial the use of the Be Clear on Cancer brand on a bowel cancer screening awareness campaign. The long-term ambition of this partnership is for PHE to roll the campaign into their regular programme of work, should it prove to be successful.

Who is the campaign aimed at?
• 55-74 year olds from lower socioeconomic groups, with a skew towards men.
This targeting will allow us to reach both those eligible and soon to be eligible for screening, and to focus our advertising on those least likely to participate.7

What activities will be taking place and when?
An advertising campaign including TV, posters at bus stops, and adverts in newspapers will run for 12 weeks from 9 January to 2 April 2017. Advertising will run for the full campaign period, whilst direct mail will run alongside advertising from 20 February to 2 April only. Direct mail will consist of two versions:
• Version one: A personalised CRUK endorsement letter, sent to First Timers only (i.e. those being invited to bowel screening for the first time)
• Version two: A personalised CRUK endorsement letter and a pack containing 3 pairs of latex-free gloves, sent to Non-Responders (i.e. those who have been invited previously but have never responded) only

Previously screened invitees will not be targeted with the CRUK direct mailing.

The mailings will arrive two – three days following an NHS bowel screening test kit.
• Advertising will run across the North West of England (Lancashire, South Cumbria, Greater Manchester, Merseyside and Cheshire), while direct mail activity will be restricted to Greater Manchester, Merseyside and parts of Lancashire only

What are the main messages of the campaign?
• If you’re aged 60–74 you’ll be sent a free NHS bowel screening kit every two years
• It’s meant for people with no bowel related symptoms at all
• It can help detect the disease early, when it is easier to treat
• So don’t ignore it, take the test
• Be clear on cancer

What impact is the campaign likely to have on NHS services?
Should the campaign achieve a 10% increase in uptake amongst First Timers and a 3% increase in uptake in Non-Responders, across all 32 campaign CCGs there would be an estimated:
Additional 280 people adequately screened* per week
Additional 8 colonoscopies per week
*Reached a definitive result (‘Normal’ or ‘Abnormal’).

Regional NHS Screening and Immunisation teams and their providers are being consulted with regularly throughout the development phase of the campaign, with the aim of understanding pressures on capacity. Regional modelling data will also be shared with Screening Centres in Autumn 2016, to help them to prepare as best they can for the anticipated increase in demand for diagnostic services.

We do not anticipate a significant increase in GP practice visits as a result of this campaign, since the advertising will not be directing people to their GP. However, we do advise that practice teams are aware of the campaign and can answer related patient queries.

How will the campaign be evaluated?
Evaluation metrics are being discussed with a range of experts and, as with all Be Clear on Cancer campaigns, will be set prior to activity commencing. It is anticipated that bowel cancer screening uptake will be analysed by screening history in the target areas, and compared to those invited in a pre-campaign control period and those invited in comparison areas (demographically similar but not exposed to advertising). The impact of advertising on awareness, knowledge and attitudes will also be measured with pre and post surveys, and impact on local services will also be carefully measured. Some cancer outcomes data will also be analysed, e.g. number of bowel cancers diagnosed.

What can I do to support the campaign?
1 Share this briefing with NHS, Public Health England and Local Authority (Public Health) colleagues who will find it useful to hear about the campaign.
2 Please send any feedback or questions about the campaign to: Helen O’Connor, CRUK: helen.oconnor@cancer.org.uk

Further information:
1 Scoping the Future: an evaluation of endoscopy capacity across the NHS in England
2 Engaging primary care in bowel cancer screening: GP good practice guide

7 England bowel screening data for FY 2014/15, persons aged 60-74. “Percentage of people adequately screened out of those invited for FOBT screening” were provided by Public Health England (PHE) Screening on request April 2016.

These estimates assume that 19% of the sample will be First Timers and 36% Non-Responders, as informed by the London and Wales pilots.