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| **Change Notification:**  cn\_2023\_NCAMP\_ National Bowel Screening Programme Events in NNPAC  **Date of Issue:**  05 December 2022 | |
| **Proposed Implementation Date:**  01 July 2023 | | **Subject:** National Bowel Screening Programme Events in NNPAC |
| **CHANGE NOTIFICATION** | | |
| **Summary:**  The National Bowel Screening Programme (NBSP) was launched in 2017.  A screening colonoscopy or computerised tomography colonography (CTC) is provided for eligible people who have a positive faecal immunochemical test (FIT) as part of the National Bowel Screening Programme. Included in the service delivery is a phone pre-assessment, undertaking the diagnostic procedure, histology and notification of any follow up required.  Screening colonoscopy or computerised tomography colonography (CT colonoscopy) are mostly performed same day, generally under three hours.  In the 2022 NCAMP sector notifications which were sent November 2021, an advisory was released indicating that bowel screening reporting would change to NNPAC.  **Impact**  Some hospitals are reporting NBSP events to the NMDS which means there is bowel screening data in both NNPAC and NMDS. When NBSP was implemented it was never intended for same day NBSP events to be reported to NMDS.  Same day NBSP events should be reported to NNPAC only and for hospitals to end reporting same day NBSP events to the NMDS.  National Bowel Screening Programme event records should be reported with the purchaser code 33 (MOH Screening pilot or programme), funding agency code 1236 (Ministry of Health) and purchase unit code MS02007 Colonoscopy - Any health specialty.  **Benefits**   * This change will reduce the cost for Districts to code in two systems * Bowel screening reporting will be consistent in the National Collections | | |
| **National Collections Impacted by Change:** | | National Non-Admitted Patient Collection |
| **Context of the Change:**  Where a patient has a screening colonoscopy performed under NBSP and also has polyps removed (polypectomy) at time of screening, the polypectomy is included as part of the screening event and reported to NNPAC with the purchaser code 33.  However, a subsequent admission for a colonoscopy as a result of findings during the NBSP screening colonoscopy are to have purchaser code 35 DHB-funded purchaser assigned.  Where a NBSP patient requires admission as an inpatient directly following the screening colonoscopy procedure the event end type code reported for the NNPAC event must be DW (Discharge to other service within same facility). The inpatient admission event should be reported with purchaser code 35 (DHB funded).  Where a NBSP patient is required to be admitted overnight and/or to have a screening colonscopy under a general anaesthesia the event should be reported to NMDS with purchaser code 33 and funding agency 1236. However, if the patient requires ongoing care after the screening colonscopy due to a complication or due to other circumstances, the event must be statistically discharged with event end type DF (Discharge due to change in funder) with a new inpatient admission reported with purchaser code 35 (DHB funded).  **Note:** Descriptions and names still refer to Ministry of Health and DHBs, as the descriptions/names have not been updated in tables for the national collections. | | |
| **Details of Proposed Change:**  Add a validation rule in NMDS to reject same day event records reported with purchaser code PHS 33.  The NMDS Data Dictionary and Common Counting Standards will be updated to reflect the updated reporting requirements. | | |
| **What is Expected of the Sector:**  That planningcommences to move to reporting same day National Bowel Screening Programme events to NNPAC from 1 July 2023. | | |
| **Impact of Change on National Collection(s):**  All national collections will be analysed to determine the impact of the changes. | | |
| **Contact:** If you have any questions regarding this change notice, please email [ncamp@health.govt.nz](mailto:ncamp@health.govt.nz) | | |