

COLONOSCOPY ACCESS PROJECT

Optimising Access to Colonoscopy in the Grampians



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Background

In 2023, Grampians Integrated Cancer Services (GICS) conducted an audit against the parameters of the Colorectal Optimal Care Pathway (OCP) for 22 colon and 23 rectal cancer patients. Adherence to the OCP timeframes was identified but increased risk of fragmented care was observed owing to current referral processes. In August 2024, with Commonwealth funding provided through the Expansion of Colonoscopy Triage Services initiative, GICS commenced a large-scale project to improve timely colonoscopy for patients returning a positive result from the National Bowel Cancer Screening Program (NBCSP).

Project Aims

- Streamline and expand referral pathways to improve equitable and timely access to colonoscopy for NBCSP participants
- Improve colonoscopy reporting to the National Cancer Screening Register (NCSR)
- Reduce stage of disease at diagnosis through earlier detection, enabled by the NBCSP
- Decrease the number of patients diagnosed following emergency presentations.

Methods

This project comprises patient, primary care, and health service perspectives. Health service data review identified median times for referral to waitlist and waitlisting to procedure. Pathway mapping has informed areas of service improvement and optimisation. Baseline awareness and use of the NCSR has been identified through data analysis and clinician surveys.

Results

This project has completed an extensive exploration/diagnostic phase from both Primary Care and Health Service perspectives. Patient interviews and journey mapping has recently commenced and will further inform solution design.

14% of patients referred for Colonoscopy at Grampians Health Ballarat were from the NBCSP and average time from referral to procedure for these patients was well above 28 days noted as best practice in the Colorectal Optimal Care Pathway. These findings align with other category one referral priority classification areas.

Across the Grampians local government catchment areas 19 general practices (28%) are integrated with the NCSR (November 2024). This is below the Victorian average of 39% and the Australian average of 46% (NCSR, 2024).



This project has proposed a number of solutions to improve timely access to colonoscopy with activity recently commenced;

- System and process enhancements - creating improved visibility of the referral pathway from referral to procedure
- Improved health service Colonoscopy and Histopathology reporting to the NCSR
- Increase number of GPs/ACCHOs within the Grampians catchment integrated to NCSR to above Australian average (>15 GPs/ACCHOs)
- Development of operational Colonoscopy Dashboard with real-time referral, waitlist and procedure data
- Endoscopy e-Referral
- 6-month pilot program: Endoscopy Planned Care Navigator.



Initial progress is evident

Average 22-day reduction from referral triage to waitlist entry



Primary Care NCSR Integration

Increase of 20 GP clinics and 1 ACCHO integrated to NCSR

Conclusions

This project has recently entered its implementation phase with evaluation for project outcomes to be reported in early 2026. Ensuring equity of access and timely colonoscopy for patients with suspected bowel cancer will have a significant impact on mortality and morbidity.

References

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