

# Colorectal Cancer Screening Programme



## Primary Care Doctor Guidebook

September 2019



[www.ColonScreen.gov.hk](http://www.ColonScreen.gov.hk)



Department of Health

# Purpose

This Guidebook provides detailed information on the Colorectal Cancer Screening Programme (Programme) with the aim to facilitate enrolled Primary Care Doctor (PCD) to provide screening service to participants under the Programme.

The content may be updated regularly in light of experience. The updated version will be uploaded to the Prevent Colorectal Cancer website ([www.ColonScreen.gov.hk](http://www.ColonScreen.gov.hk)).

Enquiry line for the Programme:  
3565 5665



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# 1

## Preparation after enrolment

Congratulations! You have successfully enrolled as a Primary Care Doctor (PCD) of the Colorectal Cancer Screening Programme (Programme).

PCDs are required to start providing screening service under the Programme within 30 days from the issue of the enrolment confirmation letter. Your practice information will appear on the Prevent Colorectal Cancer website ([www.ColonScreen.gov.hk](http://www.ColonScreen.gov.hk)) after the said 30 days.

To make preparation for providing screening service, PCDs are advised to

- (a) Understand the basics, workflow and their responsibilities
- (b) Liaise with the laboratory for optimal supply of Participant's Packs
- (c) Understand the Colorectal Cancer Information Technology System (CRC IT System)
- (d) Understand the programme materials
- (e) Assign clinical assistants

### 1.1 Understand the basics, workflow & your responsibilities

#### 1.1.1 Background and objective

The Government announced in the 2014 Policy Address the planning and implementation of a pilot programme that subsidises colorectal cancer screening for specific age groups.

With effect from 6 August 2018, the Government's Colorectal Cancer Screening Programme has been regularised and will be extended to asymptomatic Hong Kong residents aged between 50-75 in phases.

The aim of the programme is to:

- determine the ability of the healthcare infrastructure to handle increase in demand for assessment and follow-up treatment of cancer and pre-cancerous conditions;
- assess public understanding, perception and acceptance of colorectal cancer screening;
- devise a screening algorithm with assured quality which is most suited to local needs and circumstances; and
- evaluate performance of the screening programme.

#### 1.1.2 Eligible participants

Participants who are eligible to receive the screening service the Programme should fulfill the following criteria:

- Aged between 50 and 75
- Hold a Hong Kong Identity Card or Certificate of Exemption
- Registered in the Electronic Health Record Sharing System (eHRSS)
- Do not have symptoms of colorectal cancer, higher colorectal cancer risk, or screening/examination for colorectal cancer within a specified period

### 1.1.3 Recruitment phases

Eligible persons will be recruited in phases:

- Phase 1: individuals aged between 61 and 75
- Phase 2: Individuals aged between 56 and 75
- Phase 3: Individuals aged between 50 and 75

To facilitate public understanding of the eligibility for joining the Programme, the Department of Health will announce the arrangements for eligible age groups and their years of birth regularly.

The Government will inform the PCD in writing and announce to the public the starting date for each phase.

#### **Phase 1**

**Individuals aged between  
61 and 75**

#### **Phase 2**

**Individuals aged between  
56 and 75**

#### **Phase 3**

**Individuals aged between  
50 and 75**

### 1.1.4 Screening test

#### Introduction to faecal occult blood test

The Programme adopts a two-tier approach, offering faecal occult blood test (FOBT) as first line screening followed by colonoscopy examination for cases with positive FOBT result.

- FOBT is non-invasive and safe.
- Evidence from clinical trials has shown that FOBT can reduce colorectal cancer mortality by 15 - 33%.<sup>1,2,3</sup>
- The sensitivity of FOBT has been reported to be 55.0 - 92.2% in a meta-analysis of RCTs.<sup>4</sup>
- Many countries such as the United Kingdom, Italy, Australia and Singapore are using FOBT as the primary screening tool for colorectal cancer.

#### Introduction to faecal immunochemical test

There are two types of FOBT, namely the guaiac FOBT and the faecal immunochemical test (FIT).

FIT is better than guaiac FOBT because:

- FIT uses antibodies to detect human haemoglobin protein directly and is more specific.
- FIT does not require diet and medication restriction before testing.
- FIT has higher sensitivity, better overall performance and promotes greater compliance.

<sup>1</sup> Hardcastle JD, Chamberlain JO, Robinson MHE, Moss SM, Amar SS, Balfour TW, James PD & Mangham CM. Randomised controlled trial of faecal occult blood screening for colorectal cancer. *Lancet*. 1996, 348:1472-1477.

<sup>2</sup> Kronberg O, Fenger C, Olsen J, Jorgenson OD & Sondergaard O. Randomised study of screening for colorectal cancer with faecal-occult-blood test. *Lancet*. 1996, 348:1467-1471.

<sup>3</sup> Mandel JS, Bond JH, Church TR, Snover DC, Bradley GM, Schuman LM & Ederer F. Reducing mortality from colorectal cancer by screening for fecal occult blood. Minnesota Cancer Control Study. *New England Journal of Medicine*. 1993, 328:1365-1371.

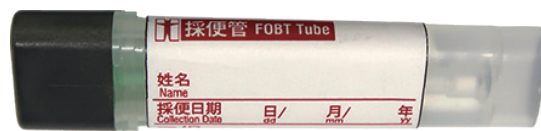
<sup>4</sup> Hewitson P, Glasziou P, Irwing L, Towler B, Watson E. Screening for colorectal cancer using the fecal occult blood test, Hemoccult. *Cochrane Database of Systematic Reviews*, 2007.

FIT can be further divided into qualitative and quantitative FIT. Quantitative FIT is gaining popularity in population-based colorectal cancer screening as the automation process allows high-throughput testing. Moreover, the cut-off level can be flexibly adjusted for quantitative FIT according to the characteristics of population to be screened and the colonoscopy capacity.

As a result, the Programme uses quantitative FIT as the screening test.

### Device and method for specimen collection

A "FIT tube" is used for specimen collection.



FIT tube

The FIT tube consists of a sampling probe and a container with a buffer solution, which preserves the integrity of the specimen for up to 7 days in room temperature.

The sampling probe has spiral grooves at its tip to facilitate the collection of stool specimen. The participant collects enough specimen to fill up the grooved part of the sampling probe, inserts the sampling probe back into the container, and screws the lid on firmly.

## Preparation after enrolment

On the surface of the container, there is:

- a pre-attached label to show the participant's name and the specimen collection date
- a pre-attached duplicate barcode label, in which one barcode label will be peeled off and stuck to the laboratory request form

It is critically important that the specimens are properly named and dated, and the laboratory request form is accurately labelled, otherwise the laboratory will not proceed to analyse the specimen.

### Number of FIT tubes in each screening round

Under the Programme, participants with negative FIT result should be re-screened after 24 months. This is called a screening round.

In each screening round, PCD issues two FIT tubes per participant in order to catch intermittent bleeding from separate bowel motions. In rare circumstances where both of these FIT tubes are lost, damaged or rejected by the laboratory, the PCD can re-issue a second pair of FIT tubes.

Within each screening round, the PCD may issue up to a maximum of two pairs of FIT tubes per participant.

### FIT processing and result interpretation

An accredited laboratory is commissioned to:

- Supply the FIT tubes (contained within the Participant's Pack) to the PCD's clinic
- Analyse FIT tubes collected from Specimen Collection Points
- Upload FIT results to the CRC IT System for viewing on the "To-do List" by the PCD

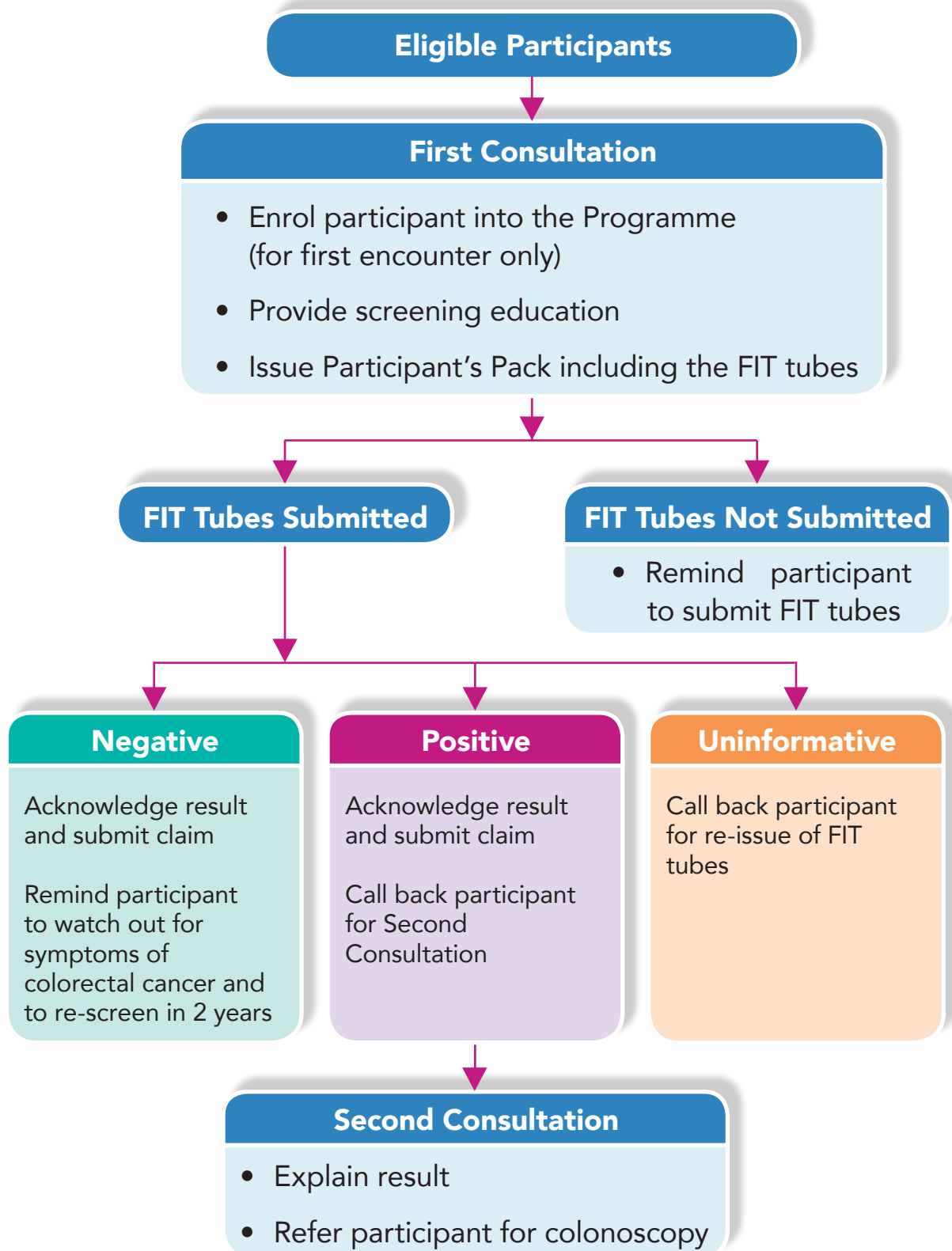
The following principles in FIT result interpretation apply:

- One FIT tube will be sufficient to produce an interpreted result.
- Two FIT tubes may increase the yield of a positive test result.
- Positive result – when at least one analysed FIT tube shows occult blood above the cut-off value. The PCD should call back the participant for a Second Consultation for explaining the implications of the positive result and refer for colonoscopy.
- Negative result – when none of the analysed FIT tubes show occult blood above the cut-off value. Re-screening after 24 months is recommended.
- Uninformative result – usually due to problems with the tubes (e.g. leakage/damaged/expired) or the forms (e.g. missing or wrong information, or a mismatch between the information on the form and tube). The PCD should call back the participant for re-issue of another pair of FIT tubes. Extra care should be taken to ensure causes leading to uninformative results are addressed.
- No result – usually due to participant failing to return the specimen by 8 weeks. The PCD will be alerted if no specimen is received by 4 weeks after the issuing date, so that the PCD may contact the participant to understand the reason, re-issue the tubes as appropriate and remind them to return the tubes to a Specimen Collection Point within 4 weeks.

## Preparation after enrolment

### 1.1.5 PCD's workflow

A diagram showing the workflow for PCD under the Programme:





### **1.1.6 Care pathway for participants with positive FIT result**

If the participant's FIT result is positive, the PCD should call back and see the participant again at the Second Consultation for explanation of the FIT result and its significance, and refer the participant for colonoscopy.

#### **Care Pathway**

For management of a positive FIT result, three referral options are possible:

- Referral to colonoscopy specialist (CS) enrolled under the Programme. The Government will provide subsidy for the "Standard Package of Colonoscopy Service" provided by these specialists. Depending on the participant's choice of CS, the participant may be required to pay a co-payment fee which should not exceed HK\$1,000. A list of enrolled CS with their essential practice information and co-payment fees, if any, is available at the Prevent Colorectal Cancer website ([www.ColonScreen.gov.hk](http://www.ColonScreen.gov.hk)). A hard copy of this list should be provided to the participant. In general, the waiting time from making an appointment with the CS until receiving the Colonoscopy Examination should normally be less than 8 weeks; or
- Referral to private sector. Participant will exit the Programme and no Government subsidy will be provided. Participant will need to pay all the charges out-of-pocket; or
- Referral to Hospital Authority (HA). Participant will exit the Programme, receive care under the usual pathway in the public sector and be required to pay for charges applicable to HA services.

#### **Standard Package of Colonoscopy Service**

If the participant opts for colonoscopy by a CS enrolled under the Programme, the Government will provide subsidy for a Standard Package of Colonoscopy Service which covers the following essential items:

## Preparation after enrolment

### (a) Pre-procedural Consultation

- CS should assess medical fitness of the participant for Colonoscopy Examination.
- If the participant is fit for Colonoscopy Examination, the CS should explain the procedure, obtain consent for Colonoscopy Examination, prescribe and provide instructions for bowel preparation, book a colonoscopy session, reach mutual agreement including management plan and associated charges in case of complications, clarify the arrangement and charges for extra services (if applicable) with the participant.

### (b) Colonoscopy Examination with or without polypectomy

- CS should provide Colonoscopy Examination as a day case including conscious sedation and consumables for the removal of polyp, e.g. clips, hot biopsy forceps or snare.
- If the Colonoscopy Examination is successful with polyps detected and can be safely removed, polypectomy should be performed and specimens should be sent to a laboratory designated by Government for histopathology examination, the charges of which will be fully covered by the Government.
- If the Colonoscopy Examination is unsuccessful, the procedure may be repeated by the same CS without additional charge to the participant. Alternatively, the CS may refer the participant to a radiology centre designated by Government to undergo computed tomography colonography investigations, the charges of which will be fully covered by the Government.

### (c) Post-procedural Consultation

- After Colonoscopy Examination, CS may arrange a Post-procedural Consultation(s) depending on the clinical need for explaining the Colonoscopy Examination result, the histopathology report result, making referral for further management and arranging post-procedural clinical care as appropriate.

### Waiting time

- The waiting time for the Pre-procedural Consultation should be less than 4 weeks after the participant approaches the CS.
- The waiting time for the Colonoscopy Examination should be less than 4 weeks after the Pre-procedural Consultation.
- The waiting time for the Post-procedural Consultation, if clinically indicated, should be less than 5 weeks after the Colonoscopy Examination.

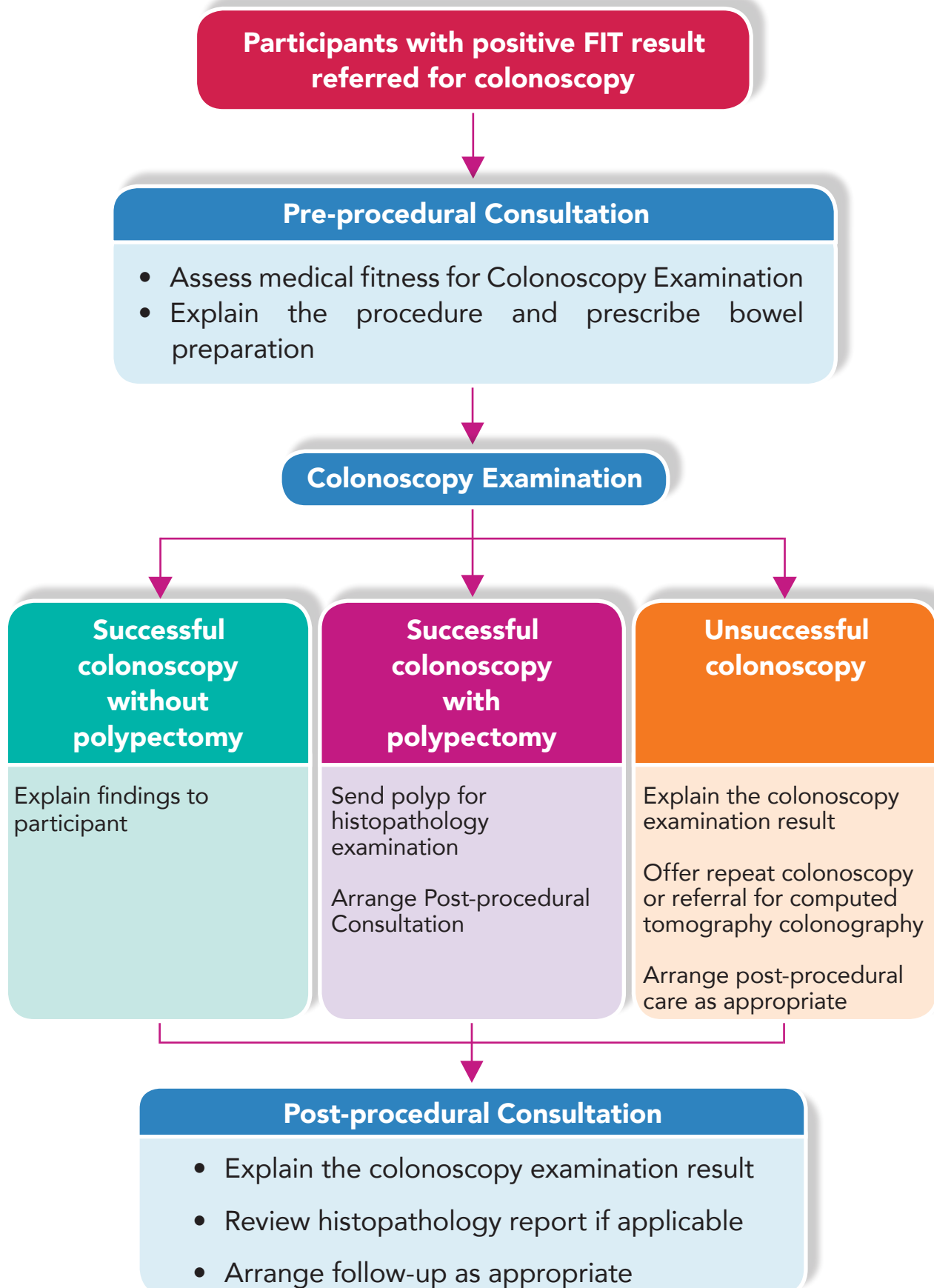
### Additional services NOT included in the Standard Package of Colonoscopy Service

Participants have to pay out-of-pocket for any additional services not included in the Standard Package of Colonoscopy Service. Some examples of these services are as follows:

- Overnight stay in a private hospital;
- Monitored anaesthetic care or general anaesthesia;
- Management for further polypectomy in the situation where the polyp(s) detected during the successful colonoscopy is/are not completely removed;
- Management of complications arising from the Colonoscopy Examination such as bleeding, infection, bowel perforation or severe reaction to sedation;
- Management of colorectal cancer or other lesion(s) detected after the Colonoscopy Examination.

## Preparation after enrolment

A diagram showing the care pathway for Colonoscopy Examination under the Programme:



### 1.1.7 Government Subsidy

Under the Programme, there are three types of Government Subsidy for the PCD, namely:

#### (a) Subsidy for processing enrolment

- The amount of subsidy for processing enrolment is HK\$76\*. It is a subsidy for the **one-off administrative services in the first screening round** for the enrolment of any eligible person into the Programme. This amount is payable together with the First Consultation.

#### (b) Subsidy for the First Consultation

- The amount of subsidy for the First Consultation is HK\$280\* . It is a subsidy for the provision of screening education and prescription of FIT tubes (contained within the Participant's Pack) in the First Consultation of each screening round.

#### (c) Subsidy for the Second Consultation

- The amount of subsidy for the Second Consultation is HK\$280\*. It is a subsidy for the Second Consultation provided to a participant with a positive FIT result. The purpose of the Second Consultation is to discuss the FIT result and refer the participant to a CS by issuing a signed referral letter.

A summary of the scenarios where the PCD may receive the Government subsidy after provision of services is as follows:

Participant's screening round	Participant's FIT result	Subsidy for		
		Processing enrolment	First Consultation	Second Consultation
First screening round	Negative	√	√	
	Positive	√	√	√
Subsequent screening round	Negative		√	
	Positive		√	√

\* By prior written notice to an Enrolled PCD and his Associated Health Care Provider (if any), the Government may at any time change the amount of any Subsidy.

### 1.1.8 Participant's co-payment

Co-payment fees refer to the fees charged to the participant by the PCD for the subsidised scope of services on top of the Government subsidy. The Government encourages PCD to set this at \$0 to promote participation by the less well-off members of society.

PCD **can** charge the participant:

- a co-payment fee for the First Consultation and
- a co-payment fee of the same amount for the Second Consultation if the FIT result of the participant is positive.

PCD may change the co-payment:

- after making a change request on the CRC IT System; and
- subject to written confirmation received from the Programme Office (PO).

PCD **cannot** charge the participant for:

- any part of the enrolment process as Government is providing a subsidy;
- laboratory analysis of the FIT as Government is funding this service centrally;
- additional encounter(s) between the participant and PCD other than the First and Second Consultations, as the primary objective is to enable and support the participant to comply or complete the screening pathway.

### **1.1.9 PCD's roles and responsibilities**

In summary, PCD has the following roles and responsibilities under the Programme:

- Ensure optimal and uninterrupted stock of Participant's Packs (containing the FIT tubes) at the clinic for deployment
- Encourage eligible persons to enrol in the Programme
- Enrol eligible persons and obtain their consents
- Ensure participants are medically fit to join the Programme
- Provide screening education
- Issue FIT tubes (contained within the Participant's Pack) and educate participants on how to collect specimen
- View and interpret FIT results
- Inform participants of FIT results
- Re-issue Participant's Pack when appropriate and support participants to comply and complete the screening pathway
- Remind participants to return FIT tubes
- Follow-up participants with positive FIT results (e.g. refer for colonoscopy)
- Submit information timely through the CRC IT System as required by the Government

### 1.2 Liaise with the laboratory for optimal supply of Participant's Pack

PCD should ensure optimal supply of FIT tubes at all times.

The FIT tubes come inside a Participant's Pack which contains:

- Two FIT tubes
- Two small plastic bags (for each individual FIT tube)
- One large plastic bag (for attaching the laboratory request form and inserting both FIT tubes once sealed within separate small plastic bags)
- One Instruction Sheet for Specimen Collection
- One Participant Guidebook
- Any other materials as deemed appropriate by PO



The PCD should contact the laboratory to order the Participant's Pack by completing the "Participant's Pack Request Form" and sending it to the laboratory by fax, allowing 3 working days for delivery.

The PCD is advised to check the stock of Participant's Pack regularly and take note of the expiry date of the FIT tubes to ensure uninterrupted supply of Participant's Pack at the clinic.



FIT tubes to expire in 2 months should not be prescribed and considered as void.

## 1.3 Understand the CRC IT System

The CRC IT System rides on the eHRSS. Hence, to use CRC IT System, all persons (PCD & clinical assistants), Health Care Providers (HCP) and Health Care Institutions (HCI) engaged in the provision of service under the Programme must be registered with the eHRSS.

### Key functions of the CRC IT System

The CRC IT System has three key functions: clinical, payment and administrative.

#### (a) Clinical function

The CRC IT System captures and tracks the processes, activities, transactions, test results and screening outcomes, as well as provides an online action checklist to remind PCD of follow-up tasks.

PCD should enter information as required by the CRC IT System and use it to:

- Process participant enrolment and print Participant Consent Form (two copies)
- Process the First Consultation, input clinical notes (optional) and print laboratory request form
- View FIT results on "To-do List" and act accordingly
- Process the Second Consultation, input clinical notes (optional) and print referral letter for colonoscopy

PCD may edit clinical notes on CRC IT System within 12 weeks of payment claim submission.

For details, please refer to sections 2.1 to 2.4.

### (b) Processing payment

After provision of service, PCD can, through the CRC IT System

- Submit payment claim for the Government subsidy
- View the submitted payment claims and statement

For details, please refer to sections 2.5 to 2.6.

### (c) Administrative function

PCD can, by means of the CRC IT System

- Submit request to amend and change information such as co-payment fee, HCP/HCI and bank account.

For details, please refer to section 2.8.

- Assign relieving doctors
  - ❖ Each PCD can assign up to three doctors who have enrolled in the Programme and work under the same HCP, to serve as relieving doctors to provide Second Consultation, view and act on the "To-do List", during the original PCD's absence, for a period of up to 12 months.
  - ❖ If the absent PCD has multiple HCI, the relieving doctor can be allowed to view some or all of the "To-do Lists" of each HCI.
  - ❖ Payment claims made during the relieving period will be credited to the designated account of the absent PCD.
- Assign clinical assistant
  - ❖ Each PCD can assign clinical assistants who have been registered under eHRSS to support the PCD in selected tasks under the Programme.

For details, please refer to section 1.5.

## Login to the eHRSS and access CRC IT System

PCD can login the eHRSS using the login name and token.

PCD can then access CRC IT System via the eHRSS platform by the following steps:

- Choose [Clinical] on the eHRSS menu bar.
- Click [CRC Programme – Primary Care Doctor] (Figure 1).

The “To-do List” of the PCD will be displayed after successful login to the CRC IT System.

If PCD has more than one HCl registered under the same HCP, PCD can select a specific HCl by the following steps:

- Click [Change HCl].
- Select the desired HCl.

The respective “To-do List” will subsequently be shown (Figure 2).

PCD can access different functions of the CRC IT System by navigating the PCD menu bar including “Participant Enrolment/Search Enrolled Participant”, “To-do List”, “Payment Claim”, and “My Profile”.

For details related to login functions of the eHRSS, please refer to the guidebook provided by the eHR Registration Office.

# Preparation after enrolment

Figure 1 : Accessing the CRC IT System via the eHRSS

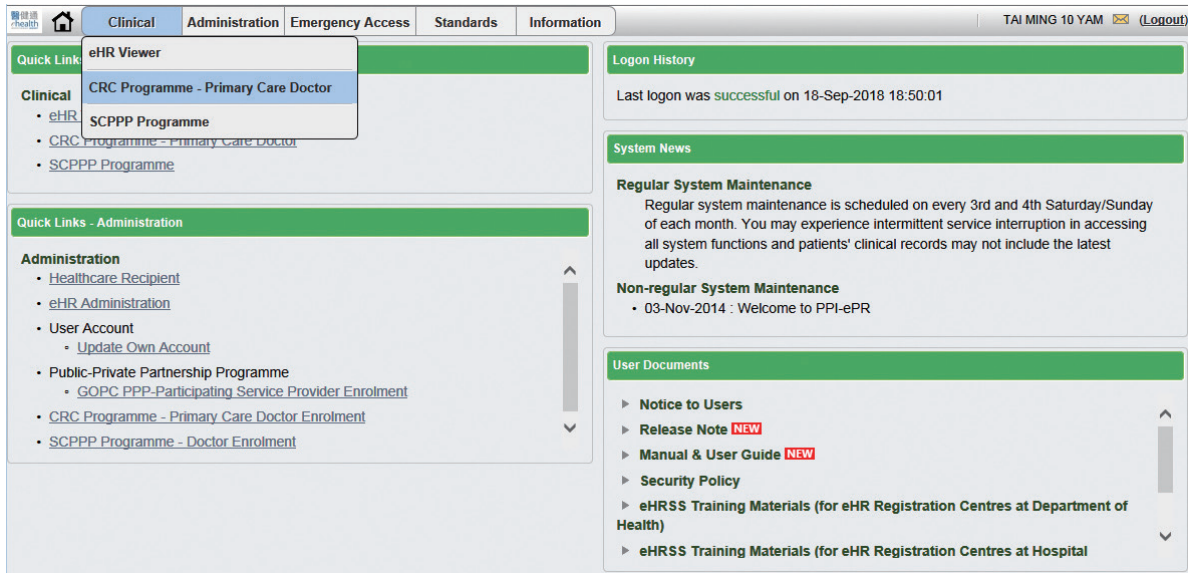
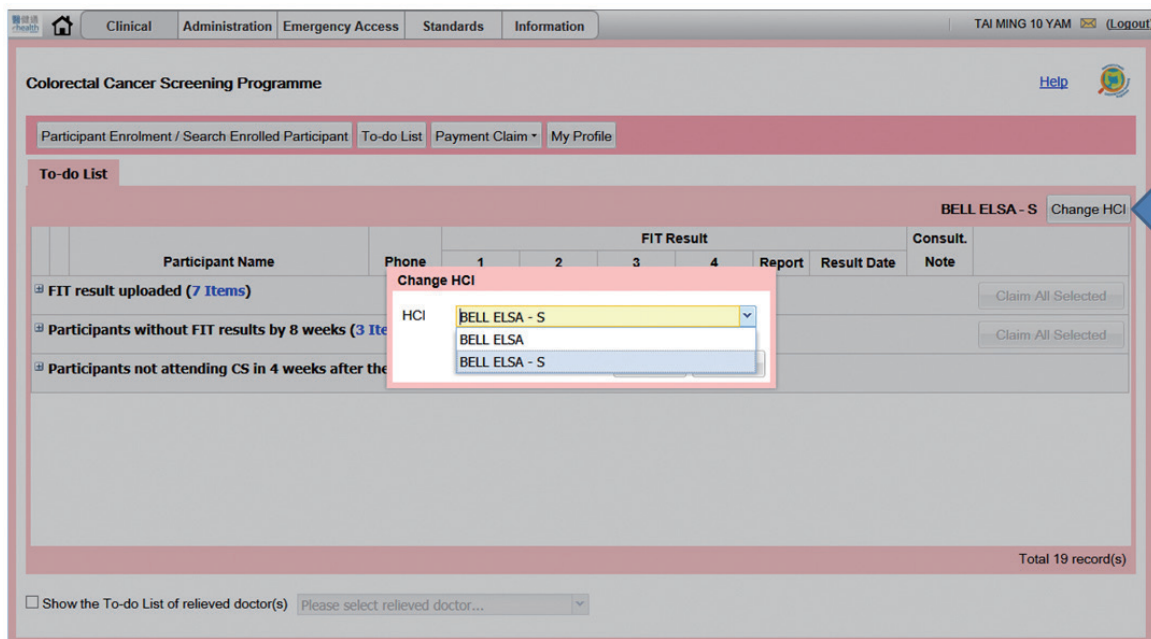


Figure 2 : Choosing a specific HCI



## 1.4 Understand the programme materials

PCD is advised to make full use of the following materials to communicate with participants:

Programme materials	For additional copies
<b>PCD Guidebook</b>	<p>Complete a designated form accessible at Prevent Colorectal Cancer website (<a href="http://www.ColonScreen.gov.hk">www.ColonScreen.gov.hk</a>) and send to the Programme Office according to the instructions on the form.</p> <p>Printed materials will be available for viewing and downloading; and audiovisual materials will be available for viewing at Prevent Colorectal Cancer website (<a href="http://www.ColonScreen.gov.hk">www.ColonScreen.gov.hk</a>).</p>
<b>Door decal (Logo)</b> <i>For display at the clinic in order to alert the general public that screening service under the Programme is available.</i>	
<b>Mini poster</b> <i>For display at the clinic to show the co-payment fee.</i>	
<b>Large reading cards</b> <i>For eligible persons to read before First Consultation including the Undertaking and Declarations of the Participant Consent Form, checklist for assessment of medical fitness of participants and essential information on the Programme.</i>	
<b>Desktop cue card with stand</b> <i>For use during PCD consultations with the participant including a checklist for assessment of medical fitness of participants and information on the Programme.</i>	
<b>List of CS under the Programme</b> <i>For the participant (with positive FIT result) to retain for reference.</i>	

## Preparation after enrolment

Programme materials	For additional copies
<p><b>Programme poster</b> <i>For display at the clinic.</i></p>	<p>Complete a designated form accessible at Prevent Colorectal Cancer website (<a href="http://www.ColonScreen.gov.hk">www.ColonScreen.gov.hk</a>) and send to the Programme Office according to the instructions on the form.</p>
<p><b>Pamphlet</b> <i>For the general public with information on the Programme.</i></p>	<p>Printed materials will be available for viewing and downloading; and audiovisual materials will be available for viewing at Prevent Colorectal Cancer website (<a href="http://www.ColonScreen.gov.hk">www.ColonScreen.gov.hk</a>).</p>
<p><b>Participant's Pack</b> <i>Distributed to the participant during First Consultation, which contains one Participant Guidebook, two FIT tubes, two small plastic bags, one large plastic bag and one Instruction Sheet for Specimen Collection.</i></p>	<p>Complete the "Participant's Pack Request Form" and send to the laboratory according to the instructions on the form.</p>

## 1.5 Assign clinical assistants

PCD may wish to assign clinical assistants to undertake certain tasks, including:

- Processing of participant enrolment
  - ❖ Checking of eHR registration and building consent with PCD for use of eHR data
  - ❖ Checking eligibility of potential participant, including verification of eligibility status when a “C” or “U” symbol is displayed on the HKIC
  - ❖ Obtaining participant’s consent to be approached by research institutions for taking part in cancer-related research
- Educating participant about the use of FIT, specimen collection and return of specimen to Specimen Collection Point, etc.
- Viewing FIT results under the “To-do List” of assigned PCDs
- Contacting participant regarding FIT result and follow-up action

Clinical assistants **cannot**:

- Confirm enrolment of the participant
- View any clinical notes
- Provide consultations for the participant
- Print laboratory request form or referral letter for colonoscopy
- Submit payment claims

To enable clinical assistants to access CRC IT System for the stated tasks, PCD (or the User Administrator) must first complete the following procedures under eHRSS:

- Create a user account for the clinical assistant
- Assign “CRC PCD Clinical Assistant” role group for the clinical assistant

## Preparation after enrolment

The PCD can then assign clinical assistant under the CRC IT System:

- Click [My Profile] on the PCD menu bar (Figure 3A).
- Click [Relieving Doctor and Clinical Assistant] button (Figure 3B).
- Click [Edit] button (Figure 3C).
- Choose the [Clinical Assistant] tab and type the clinical assistant's eHR User ID in the box. Then click [Search] (Figure 3D).
- Click [Add] when details of the desired clinical assistant have been found.
- Click [Edit] and select the HCI which the clinical assistant is allowed to access. Then click [OK] (Figure 3E).
- Click [Save]. The Clinical Assistant will then be added under the Clinical Assistant tab.

Figure 3A : Assigning appropriate roles for a clinical assistant

Colorectal Cancer Screening Programme

Participant Enrolment / Search Enrolled Participant To-do List Payment Claim My Profile

To-do List

BELL ELSA - S Change HCI

Participant Name	Phone	FIT Result				Report	Result Date	Consult. Note	
		1	2	3	4				
FIT result uploaded (7 Items) Claim All Selected									
Participants without FIT results by 8 weeks (3 Items) Claim All Selected									
Participants not attending CS in 4 weeks after the second consultation (9 Items)									

Total 19 record(s)

Show the To-do List of relieved doctor(s) Please select relieved doctor...



Figure 3B : Assigning appropriate roles for a clinical assistant

Colorectal Cancer Screening Programme

Participant Enrolment / Search Enrolled Participant | To-do List | Payment Claim | My Profile

Last Online Amendment Submission Date 08-Aug-2018 | Amendment Status Pending for vetting | Cancel Submission | View Detail

Personal Particulars	HCP & HCI	Bank Information
Primary Care Doctor Name	YAM TAI MING 10	
eHR User ID	3888142398	
Hong Kong Identity Card No.	A123456(3)	
Correspondence Address	BUTTERFLY BEACH, TSUEN WAN DISTRICT, NT	
Contact Email Address	lwc176@ha.org.hk	
Daytime Contact Telephone Number	N/A	
Fax Number	N/A	
Professional Registration Number	ENG9000136	
Enrolment Reference No.	PCD00650	


Relieving Doctor and Clinical Assistant  Edit


Figure 3C : Assigning appropriate roles for a clinical assistant

Colorectal Cancer Screening Programme

Participant Enrolment / Search Enrolled Participant | To-do List | Payment Claim | My Profile

Relieving Doctor | **Clinical Assistant**

You have not nominated any relieving doctor.

 Edit Cancel

## Preparation after enrolment

Figure 3D : Assigning appropriate roles for a clinical assistant

The screenshot shows the 'Colorectal Cancer Screening Programme' interface. The user is logged in as TAI MING 10 YAM. The main menu includes Clinical, Administration, Emergency Access, Standards, and Information. The current view is 'Participant Enrolment / Search Enrolled Participant'. The 'Relieving Doctor' is set to 'Clinical Assistant'.

Two HCPs are listed:

- HCP Name (HCP ID):** BELL ELSA (6515286304)
  - Clinical Assistant:** eHR User ID  Search
  - Name (eHR User ID):**
  - Daytime Contact Telephone Number:**
  - Accessible HCI:**
  -
- HCP Name (HCP ID):** VHB2 HOSPITAL (6958751896)
  - Clinical Assistant:** eHR User ID  Search
  - Name (eHR User ID):**

Buttons at the bottom: Save, Cancel.

Figure 3E : Assigning appropriate roles for a clinical assistant

The screenshot shows the 'Accessible HCI' selection dialog. The user is logged in as TAI MING 10 YAM. The dialog displays a table of available HCIs:

HCI Name (HCI ID)	Address	Telephone Number
<input checked="" type="checkbox"/> BELL ELSA	FLOOR 16/F, ONE KOWLOON, ONE KOWLOON, 1 WANG YUEN ST, KOWLOON BAY, KWUN TONG DISTRICT, KLN	32569801
<input type="checkbox"/> BELL ELSA - S	FLOOR 15/F, ONE KOWLOON, ONE KOWLOON, 1 WANG YUEN ST, KOWLOON BAY, KWUN TONG DISTRICT, KLN	32569801

Buttons at the bottom: OK, Close.

Buttons at the bottom of the main window: Save, Cancel.

## 2 Provision of service

### 2.1 At the First Consultation

#### Key Tasks

- (a) Programme enrolment (only for first time participants)
- (b) Provide medical consultation on FIT screening
- (c) Issue FIT tubes

#### Key Steps

##### (a) Programme enrolment:

- To determine if a person is eligible to enrol in the Programme
  - ❖ Ask for the original Smart HKIC or the Certificate of Exemption, ascertain whether the person is the bearer of the identity document by checking against the photo.
  - ❖ Check the year of birth.
  - ❖ Look for presence of a "C" or "U" symbol on the HKIC which necessitates verification of the eligibility status of the person in accordance with PO's instructions.

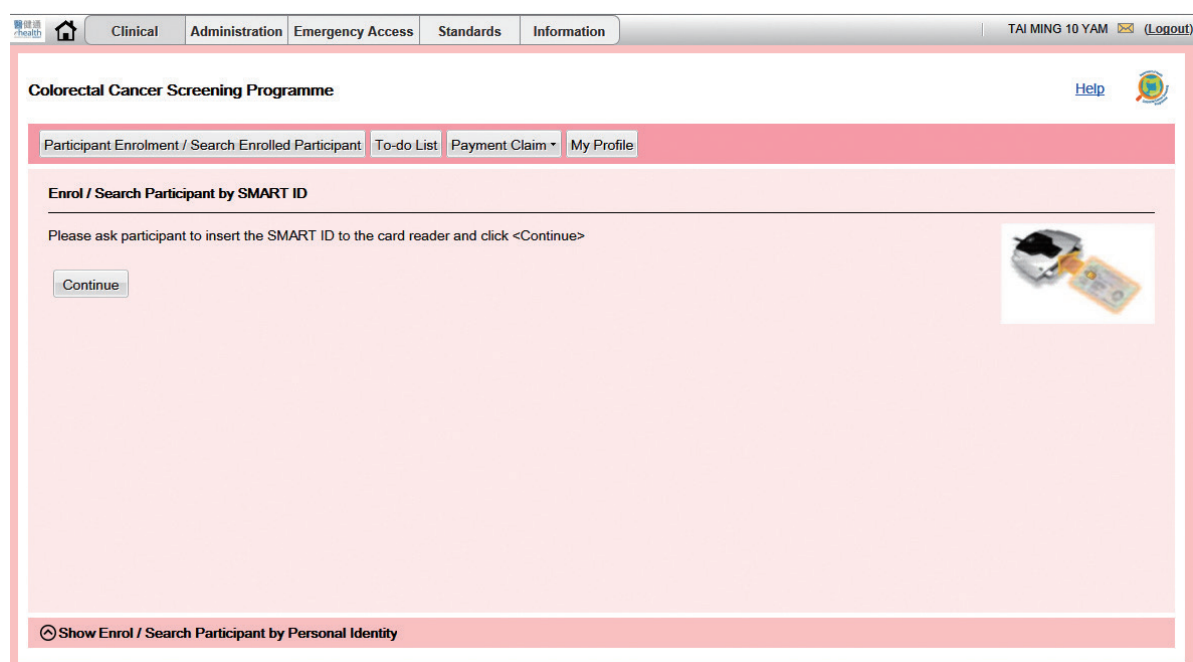
**No** payment will be made by the Government if PO did not confirm the eligibility status of the potential participant who had "C" or "U" symbol on the HKIC before enrolment.

## Provision of service

- Suggest the eligible person to study the large reading cards (including the Undertaking and Declarations of the Participant Consent Form, checklist for assessment of medical fitness of participants and essential information on the Programme) in the waiting room. Ask if the eligible person has any of the medical conditions in the checklist.
- Login the PCD account in the CRC IT System. Click [Participant Enrolment/Search Enrolled Participant] on the PCD menu bar (Figure 4).
- Request the eligible person to insert HKIC into the card reader. PCD is allowed to manually input the person's profile data only when the chip of HKIC is found faulty, use of the card reader is not feasible, the eligible person is a holder of Certificate of Exemption, or other cases with justifiable reasons. The validity of HKIC and Certificate of Exemption will be checked and closely monitored by the PO.
- If the eligible person's profile cannot be retrieved from the CRC IT System, it indicates that the eligible person has **not yet** registered with eHRSS. Please advise the eligible person to register with eHRSS and return to the clinic for screening afterwards. Details of eHRSS registration are available on eHR's website ([www.ehealth.gov.hk](http://www.ehealth.gov.hk)) or pamphlet.
- If the eligible person's profile can be retrieved from the CRC IT System, it indicates that the person has already registered with eHRSS. The screen will prompt the PCD to seek consent from the eligible person for sharing clinical information kept in eHRSS with the PCD if the eligible person has not yet done so. Although two options for sharing consent (Figure 5) are available, **only the "Indefinite Sharing Consent" option will be allowed for enrolling in the Programme**, in order to promote continuity of care. This consent will be valid until the eligible person revokes consent.

- Enquire if the eligible person agrees to be approached by research institutions (a third party which does not belong to the Government) for cancer-related research (which will involve the Government disclosing the eligible person's name, contact telephone number and correspondence address to the research institutions concerned) and indicate the decision in the CRC IT System. The decision is entirely voluntary.
- On-screen walkthrough:
  - ❖ Select the appropriate radio-button for the "HKID Card Symbol" item
  - ❖ Select the appropriate radio-button for the "Agree to be Approached by Research Institutions for Cancer-Related Research" item
  - ❖ Click [Save] to save information that has been entered into the CRC IT System (Figure 6)
- Please note that the subsequent steps of "printing and signing of consent form" and "confirming enrolment" will be done in the section 2(b) - Provide medical consultation for FIT screening.

**Figure 4 : Participant enrolment: the first step**



## Provision of service

Figure 5 : Building indefinite sharing consent with participant

**EPMI All-in-One - Registration / Activation / Sharing Consent**

eHR Registration System

HCR Management | Record Info Update | Sharing Consent Management | PPI/SCHSA Stage | Utilities (version 1.5.33 built on 27-Mar-2018)

**HCR Information**

eHR No.:	3467-7429-3237	English Name:	TEST, SIX
HKIC No.:	Q191106(2)	Other Name:	
ID Doc Type:	HKID Card	Chinese Name:	
ID Doc No.:		Communication Means:	SMS
Sex:	Male	SMS Phone No.:	852-91234567
Date of Birth:	01-Jan-1946	Mobile Phone:	852-91234567
Exact DOB:	EDMY	Other Phone:	852-91234567

**Sharing Consent**

Healthcare Provider	Healthcare Provider Chinese Name	Address	Phone	Consent Type
BELL ELSA (Official Name)	長者安康協會 (官方)	16/F, ONE KOWLOON, ONE KOWLOO...	32569801	<input checked="" type="radio"/> Indefinite Sharing Consent <input type="radio"/> One-Year Sharing Consent

**Authorisation Type**

Submission Method:

Application submitted by Authorised Person(AP) or SDM

Consent Means:  Smart ID Card  Access Key  Sign Consent Form

After information verification, collection of document is NOT required. Please click < Submit > button to proceed.

Buttons: Cancel, Print Consent Form, Submit

Close

Figure 6 : Saving information entered during participant enrolment

Clinical | Administration | Emergency Access | Standards | Information | TAI MING 10 YAM (Logout)

**Colorectal Cancer Screening Programme**

Participant Enrolment / Search Enrolled Participant | To-do List | Payment Claim | My Profile

**Enter Participant Information**

Name	YUEN, ORANGE (袁禮)
HKIC No.	Q191XXX(X)
Date of Birth	01-Jan-1946
Sex	Male
Date of Issue	18-Sep-2018
Holder of Certificate of Exemption	No
HKID Card Symbol	<input checked="" type="radio"/> A <input type="radio"/> C <input type="radio"/> R <input type="radio"/> U

By checking this box, I confirm that I have contacted Programme Office and verified the eligibility of this participant.

Agree to be Approached by Research Institutions for Cancer-Related Research  Yes  No

Buttons: Close, Save

**HKID Card Symbol Legend:** First alphabet denotes residential status (HKID Card Symbol)



## (b) Provide medical consultation for FIT screening

- It is a **medical** consultation provided by the PCD who should personally see and meet with the eligible persons/participants to deliver the services under the Programme.
- Enquire if the eligible person has any of the conditions in the checklist (desktop cue card with stand) to ascertain medical fitness for colorectal cancer screening. Persons having one or more of these conditions should be managed accordingly and they should **not** be enrolled in the Programme.
- Provide screening education to eligible persons making use of the desktop cue card with stand. The following issues should be highlighted:
  - ❖ Screening is the carrying out of tests on people **without symptoms** to detect disease or identify people at increased risk of having disease, so that treatment can be commenced earlier to improve the disease outcome. Thus, persons with symptoms should not be screened, but managed accordingly as a matter of priority.
  - ❖ People with early stage colorectal cancer or at higher risk of having colorectal cancer may not notice any symptom despite stool already containing small amounts of blood invisible to the naked eye.
  - ❖ The screening test used here is FIT, which can detect invisible and small amounts of blood in stool and is very safe. The participant collects stool specimens at home and brings the specimens to a designated Specimen Collection Point, which will then be transported to laboratory for analysis. Timing for specimen collection and drop-off at collection points is critically important.
  - ❖ If the FIT is positive, the PCD will ask the participant to return for a Second Consultation where the results will be explained and a referral for colonoscopy will be made. It is thus important for contact information to be accurate

## Provision of service

and kept up-to-date. The Colonoscopy Examination is a direct inspection of the inside lining of the large bowel by passing a thin flexible tube with a small camera at its end.

- ❖ If the FIT is negative, which happens in most cases, participants should continue to watch out for symptoms of colorectal cancer and seek prompt medical advice accordingly. Participants should repeat FIT screening every 2 years. This is to increase pick up rate if early cancer does develop.
- Discuss and agree with the eligible person for the arrangements with respect to notification of a negative FIT result. Possible arrangements, depending on the normal clinic workflow, include a telephone call, no further contact, etc.
- Enter the information as required by the CRC IT System (Figure 7) including:
  - ❖ Check box for the “Medically fit for screening” item
  - ❖ Box for notes (optional)
- Click [Print Consent Form] to print two copies of the Participant Consent Form.
- Request the eligible person to sign both copies of the Participant Consent Form.
- Click [Confirm Enrolment and Print Lab Request Form] to print the system-generated laboratory request form.
- Give one copy of the signed Participant Consent Form to the eligible person and keep the other copy in safe custody to be collected by the PO on regular basis.
- Once the eligible person is enrolled into the Programme and has signed the Participant Consent Form, the eligible person becomes a participant of the Programme.



Figure 7 : First Consultation

Colorectal Cancer Screening Programme

YUEN, ORANGE  
HKIC No. : Q191008(2)    DOB : 01-Jan-1946    Age : 72 years    Sex : M

**Consultation History**

<ul style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>18-Sep-2018 Issue FIT (Dr. YAM, TAI MING 10)</li> </ul> </li> </ul>		
--	--	--

**Issue FIT**

Consultation Date: 18-Sep-2018

Medically Fit for Screening:  Yes

Note: [Empty text area]

Consent Form Language:  Chinese  English

Buttons: Print Summary, Print Consent Form, Close, Confirm Enrolment and Print Lab Request Form

(c) Issue FIT Tubes

- Show the participant a Participant’s Pack which contains the Participant Guidebook, Instruction Sheet for Specimen Collection, two FIT tubes, two small plastic bags and one large plastic bag for holding the laboratory request form.
- Check the expiry date on each FIT tube and ensure that there should be **at least** 2 months’ time before the date of expiry for the participant to collect stool specimens. The expiry date on the FIT tube is displayed near to the image of an hourglass.



FIT tube label

## Provision of service

- Write the participant's name on each FIT tube. Peel off one barcode label from the duplicate barcode on each of the FIT tubes and stick it onto the laboratory request form.
- Put the laboratory request form into the large plastic bag.
- Explain the instructions for specimen collection to the participant by using the Instruction Sheet for Specimen Collection. Please highlight the following essential information:

### (i) Before specimen collection

- ❖ Store the FIT tubes in a cool place.
- ❖ Take note of the opening hours of the Specimen Collection Points. In general, the collection of the first stool specimen can start during the weekend (unless during a long holiday weekend). Finish collecting two specimens within 4 days counting from the day of first specimen collection.
- ❖ Do not collect specimen when there is bleeding from haemorrhoids.
- ❖ Do not collect specimen when there is diarrhoea.

### (ii) During specimen collection

- ❖ Use one FIT tube for each bowel movement.
- ❖ Do not tamper with or dispose of the liquid in the FIT tubes.
- ❖ Do not allow stool to be in contact with urine or toilet water.
- ❖ Prepare a holder, such as a plastic bag, for collecting the stool. Place the holder in the toilet bowl, then open your bowels.
- ❖ Twist lid off the FIT tube and scratch sampling probe across stool surface in all directions.
- ❖ Specimen will be enough when the grooved part of the sampling probe has been completely filled up. Too much or not enough specimen will affect laboratory results.

- ❖ Insert the sampling probe back into the FIT tube and screw the lid tightly.
- ❖ Write the collection date and check that the participant's name is correct. Place the FIT tube into the small plastic bag and seal it. Keep the specimen in a cool place.
- ❖ Repeat above steps using the second FIT tube during your next bowel movement.

(iii) **After specimen collection**

- ❖ Make sure the participant's full name and specimen collection date are written clearly on the FIT tubes.
- ❖ Store the FIT tubes in a cool place.
- ❖ If only one specimen was collected within 4 days, participant should still return that specimen.

(iv) **Before returning specimens**

- ❖ Participant's full name and specimen collection date are written clearly on each FIT tube.
- ❖ Each FIT tube is placed and sealed in a separate small plastic bag.
- ❖ FIT tubes and laboratory request form are placed in different pockets of the large plastic bag, and that the large plastic bag is sealed.

## 2.2 Viewing FIT results

- PCDs will be able to view all FIT results via the “To-do List” of the CRC IT System (Figure 8).
- When FIT results are available, a message will be delivered to the CRC IT System inbox. Moreover, PCD can choose to receive notification through their registered personal email when messages are delivered to the CRC IT System inbox.

Figure 8 : To-do List

Colorectal Cancer Screening Programme

Participant Enrolment / Search Enrolled Participant | **To-do List** | Payment Claim | My Profile

To-do List

BELL ELSA - S | Change HCI

Participant Name	Phone	FIT Result				Report	Result Date	Consult. Note	
		1	2	3	4				
<b>FIT result uploaded (7 Items)</b>									
LAI, KA WAI	26272627	Negative	Positive				04-Jul-2017		Update Claim Reason
MA, KA	26272627	Rejected	Positive				04-Jul-2017		Save
NG, WAI MING	26272627	No result	No result	Negative	Positive		04-Jul-2017		Save
PANG, LEMON (彭檸檬)	90000001	Positive	Positive				11-Dec-2017		First Claim
PANG, LYCHEE (彭荔枝)	90000001	Positive	Positive				11-Dec-2017		First Claim
PANG, ORANGE (彭橙)	90000001	Positive	Positive				11-Dec-2017		First Claim
WONG, KA WAI	26272627	No result	No result	No result	Positive		04-Jul-2017		Save
<b>FIT result pending (&lt; 4 weeks) (1 Item)</b>									

Total 20 record(s)

Show the To-do List of relieved doctor(s) | Please select relieved doctor...

### "FIT result uploaded" – Positive result

- Positive results will be highlighted in red and displayed at the top of the "To-do List" (Figure 9A).
- For a positive FIT result, the PCD should acknowledge reading the result and contact the participant for attending a Second Consultation as soon as possible.
- To submit claim for the First Consultation, the PCD should:
  - ❖ Click [+] to the left of the participant's name to expand the row (Figure 9B).
  - ❖ Select the appropriate radio-button.
  - ❖ Click [First Claim].
- If the radio-button "Participant will turn up for CS referral encounter" had been selected, and first claim submitted, the row of positive result will remain on the "To-do List" as the participant is expected to attend the Second Consultation (for the CS referral). This row will disappear after the participant has attended the Second Consultation.
- If the radio-button "Participant could not be contacted despite repeated attempts for 4 weeks" or "Participant refused follow-up" has been selected, the row of positive result will disappear and the participant is regarded as lost to follow-up.
  - ❖ Please note that PCD can only select "Participant could not be contacted despite repeated attempts for 4 weeks" 4 weeks after the notification of result. This is to allow sufficient time for PCD to contact the participant.

# Provision of service

Figure 9A : To-do List showing positive FIT results

The screenshot shows the 'To-do List' for the Colorectal Cancer Screening Programme. The interface includes a navigation bar with 'Clinical', 'Administration', 'Emergency Access', 'Standards', and 'Information'. The user is identified as 'TAI MING 10 YAM'. The main content area is titled 'Colorectal Cancer Screening Programme' and contains a 'To-do List' section. The list is divided into two categories: 'FIT result uploaded (7 Items)' and 'FIT result pending (< 4 weeks) (1 Item)'. The 'FIT result uploaded' section contains the following data:

Participant Name	Phone	FIT Result				Report	Result Date	Consult. Note	Action
		1	2	3	4				
LAI, KA WAI	26272627	Negative	Positive				04-Jul-2017		Update Claim Reason
MA, KA	26272627	Rejected	Positive				04-Jul-2017		Save
NG, WAI MING	26272627	No result	No result	Negative	Positive		04-Jul-2017		Save
PANG, LEMON (檸檬)	90000001	Positive	Positive				11-Dec-2017		First Claim
PANG, LYCHEE (荔枝)	90000001	Positive	Positive				11-Dec-2017		First Claim
PANG, ORANGE (橙)	90000001	Positive	Positive				11-Dec-2017		First Claim
WONG, KA WAI	26272627	No result	No result	No result	Positive		04-Jul-2017		Save

The interface also includes a 'Show the To-do List of relieved doctor(s)' checkbox and a dropdown menu for selecting a relieved doctor. The total number of records is 20.

Figure 9B : Submitting claim: positive FIT results

The screenshot shows the 'To-do List' for the Colorectal Cancer Screening Programme. The interface is similar to Figure 9A. The 'FIT result uploaded' section contains the following data:

Participant Name	Phone	FIT Result				Report	Result Date	Consult. Note	Action
		1	2	3	4				
MA, KA	26272627	Rejected	Positive				04-Jul-2017		Save
PANG, LYCHEE (荔枝)	90000001	Positive	Positive				11-Dec-2017		First Claim
WONG, KA WAI	26272627	No result	No result	No result	Positive		04-Jul-2017		Save
YUEN, ORANGE (袁橙)	91234567	Positive	Positive				18-Sep-2018		First Claim

A blue arrow points to the 'YUEN, ORANGE' row. Below this row, there are three radio button options for submitting a claim:

- Participant will turn up for CS referral encounter
- Participant could not be contacted despite repeated attempts for 4 weeks
- Participant refuses follow-up, reason

The 'Participants without FIT results by 8 weeks (3 Items)' section contains the following data:

Participant Name	Phone	1	2	3	4	Report	Result Date	Consult. Note	Action
PANG, MELON (蜜瓜)	90000001	No result	No result				20-Mar-2018		Claim

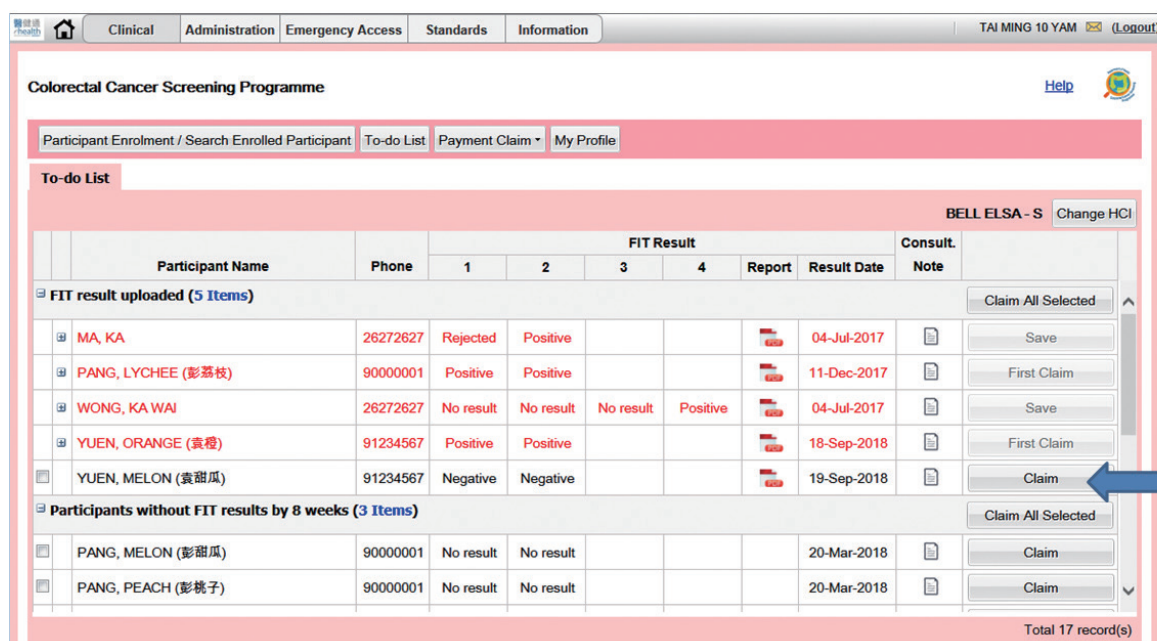
The interface also includes a 'Show the To-do List of relieved doctor(s)' checkbox and a dropdown menu for selecting a relieved doctor. The total number of records is 16.



## "FIT result uploaded" – Negative result

- For a negative FIT result, the PCD should acknowledge reading the result and submit claim for that participant (Figure 10). PCDs can follow the arrangement previously agreed with the participant during the First Consultation with respect to the arrangements for notification of negative FIT result.
- PCD can select multiple participants with negative FIT result and submit the claims collectively by the following steps:
  - ❖ Select the check box to the left of the participant's name.
  - ❖ Click [Claim All Selected].

Figure 10 : Submitting claim: negative FIT results



The screenshot shows the 'Colorectal Cancer Screening Programme' web interface. The 'To-do List' tab is active, displaying a table of participants. The table has columns for Participant Name, Phone, FIT Result (1, 2, 3, 4), Report, Result Date, and Consult. Note. A blue arrow points to the 'Claim' button for the participant YUEN, MELON (袁甜瓜).

Participant Name	Phone	FIT Result				Report	Result Date	Consult. Note	Action
		1	2	3	4				
<b>FIT result uploaded (5 Items)</b>									
<input type="checkbox"/> MA, KA	26272627	Rejected	Positive				04-Jul-2017		Save
<input type="checkbox"/> PANG, LYCHEE (彭荔枝)	90000001	Positive	Positive				11-Dec-2017		First Claim
<input type="checkbox"/> WONG, KA WAI	26272627	No result	No result	No result	Positive		04-Jul-2017		Save
<input type="checkbox"/> YUEN, ORANGE (袁橙)	91234567	Positive	Positive				18-Sep-2018		First Claim
<input type="checkbox"/> YUEN, MELON (袁甜瓜)	91234567	Negative	Negative				19-Sep-2018		Claim
<b>Participants without FIT results by 8 weeks (3 Items)</b>									
<input type="checkbox"/> PANG, MELON (彭甜瓜)	90000001	No result	No result				20-Mar-2018		Claim
<input type="checkbox"/> PANG, PEACH (彭桃子)	90000001	No result	No result				20-Mar-2018		Claim

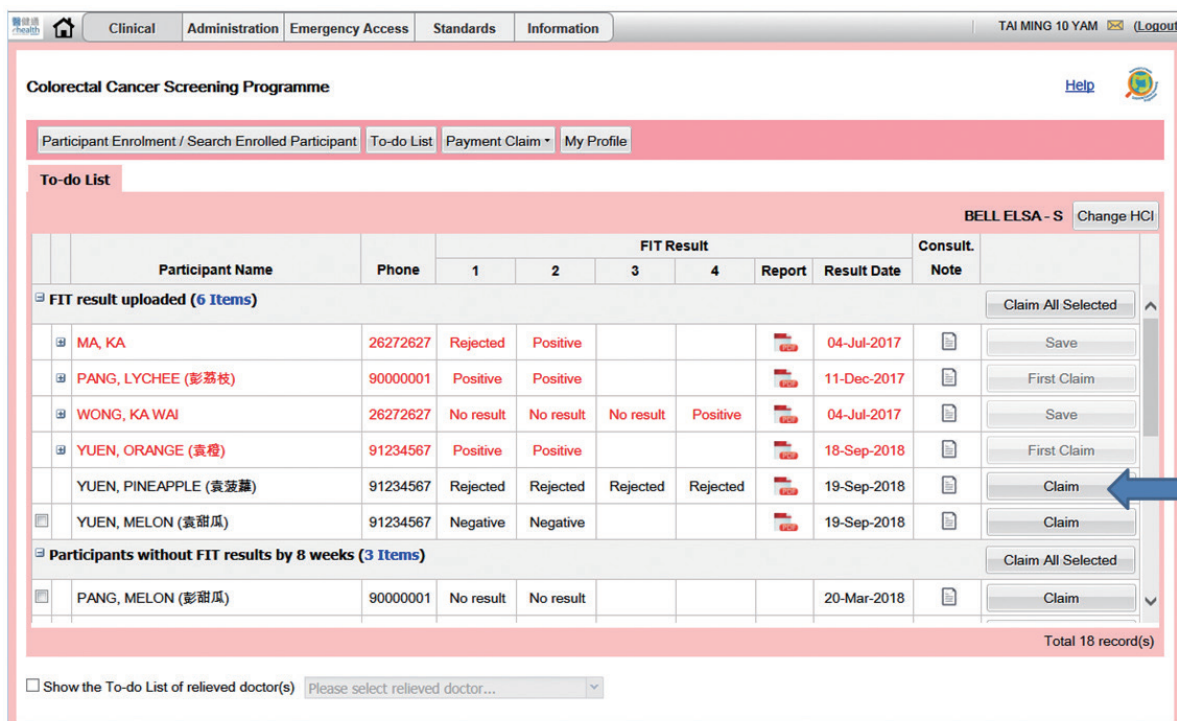
## "FIT result uploaded" – Uninformative result

- For an uninformative result i.e. none of the two FIT tubes submitted could be analysed, the PCD should call back the participant to re-issue another pair of FIT tubes (contained within the Participant's Pack) as soon as possible. The reasons for an uninformative result can be due to problems with the FIT tubes (e.g. leakage/damaged/expired) or problems with the forms (e.g. missing or wrong information, or a mismatch between the information on the form and tube).

## Provision of service

- In cases where the results of all four FIT tubes are uninformative, the PCD can submit the claim for the First Consultation (Figure 11).
- If the participant cannot be contacted after 8 weeks upon the notification of the uninformative result, the participant will be regarded as defaulted and the PCD can then submit the claim for the First Consultation.
- The PCD will be prompted by the CRC IT System to acknowledge the following statement, "I confirm the participant(s) have been called or the participant(s) cannot be contacted despite repeated attempts", before submitting the payment claim. You are advised to make a note in the clinical notes as this may have medicolegal implications.

Figure 11 : Submitting claim: four uninformative FIT results



The screenshot shows the 'To-do List' section of the Colorectal Cancer Screening Programme. The table lists participants with their names, phone numbers, and FIT results across four tubes. The 'Consult.' column contains buttons for 'Save', 'First Claim', or 'Claim'. A blue arrow points to the 'Claim' button for YUEN, MELON (袁甜瓜).

Participant Name	Phone	FIT Result				Report	Result Date	Consult. Note
		1	2	3	4			
<b>FIT result uploaded (6 Items)</b>								
MA, KA	26272627	Rejected	Positive				04-Jul-2017	Save
PANG, LYCHEE (彭荔枝)	90000001	Positive	Positive				11-Dec-2017	First Claim
WONG, KA WAI	26272627	No result	No result	No result	Positive		04-Jul-2017	Save
YUEN, ORANGE (袁橙)	91234567	Positive	Positive				18-Sep-2018	First Claim
YUEN, PINEAPPLE (袁菠蘿)	91234567	Rejected	Rejected	Rejected	Rejected		19-Sep-2018	Claim
YUEN, MELON (袁甜瓜)	91234567	Negative	Negative				19-Sep-2018	Claim
<b>Participants without FIT results by 8 weeks (3 Items)</b>								
PANG, MELON (彭甜瓜)	90000001	No result	No result				20-Mar-2018	Claim



## "Participants without FIT results by 4 weeks"

- PCD should proactively find out why the participant did not submit the FIT tubes and encourage the participant to submit the FIT tubes as soon as possible, and no later than 8 weeks (Figure 12).

Figure 12 : To-do List showing participant without FIT result by 4 weeks

Colorectal Cancer Screening Programme

Participant Enrolment / Search Enrolled Participant | To-do List | Payment Claim | My Profile

**To-do List**

BELL ELSA - S | Change HCI

Participant Name	Phone	FIT Result				Report	Result Date	Consult. Note
		1	2	3	4			
<b>FIT result uploaded (6 Items)</b> <span>Claim All Selected</span>								
<b>Participants without FIT results by 4 weeks (1 Item)</b>								
PANG, PINEAPPLE (彭菠蘿)	90000001	Pending kit return	Pending kit return				20-Aug-2018	
<b>Participants without FIT results by 8 weeks (2 Items)</b> <span>Claim All Selected</span>								
<b>Participants not attending CS in 4 weeks after the second consultation (9 Items)</b>								

Total 18 record(s)

Show the To-do List of relieved doctor(s) Please select relieved doctor...

### "Participants without FIT results by 8 weeks"

- By 8 weeks, if the participant has not returned any of the tubes, the participant will be regarded as defaulted. PCD should have made attempts to contact the participant. If the participant still fails to return the specimens, then the PCD may submit the claim after 8 weeks from the issuing date of the FIT tubes (Figure 13).
- The PCD will be prompted by the CRC IT System to acknowledge the following statement, "I confirm the participant(s) have been called or the participant(s) cannot be contacted despite repeated attempts", before submitting the payment claim. Likewise, documentation on the clinical notes is advisable.

**Figure 13 : To-do List showing participant without FIT result by 8 weeks**

Colorectal Cancer Screening Programme

Participant Enrolment / Search Enrolled Participant | To-do List | Payment Claim | My Profile

**To-do List**

BELL ELSA - S | Change HCI

Participant Name	Phone	FIT Result				Report	Result Date	Consult. Note	Action
		1	2	3	4				
FIT result uploaded (6 Items) <span>Claim All Selected</span>									
Participants without FIT results by 4 weeks (1 Item)									
Participants without FIT results by 8 weeks (2 Items) <span>Claim All Selected</span>									
<input type="checkbox"/>	PANG, MELON (彭甜瓜)	90000001	No result	No result			20-Mar-2018		Claim
<input type="checkbox"/>	PANG, PEACH (彭桃子)	90000001	No result	No result			20-Mar-2018		Claim
Participants not attending CS in 4 weeks after the second consultation (9 Items)									

Total 18 record(s)

Show the To-do List of relieved doctor(s) Please select relieved doctor...

## 2.3 Additional encounter

Additional encounter means any contact other than the First Consultation and Second Consultation provided by the PCD to the participant to enable or encourage the latter to comply with and complete the screening pathway.

An additional encounter is mainly for the purpose of re-issuing a Participant's Pack containing the two FIT tubes in case the first pair of FIT tubes are lost, damaged or rejected by laboratory.

When re-issuing FIT tubes, please:

- Login the CRC IT System and search the participant.
- Enter the information as required by the CRC IT System for re-issuing (Figure 14).
  - ❖ Select the radio-button for the reason of re-issue.
  - ❖ Type notes as appropriate.
  - ❖ Click [Save and Print Lab Request Form].
- A system-generated laboratory request form will be printed.
- Stick the two duplicated barcode labels peeled from the FIT tubes onto the form.
- Write the participant's name on each FIT tube.
- For detailed instructions, please refer to section 2.1, part (c).
- Remind the participant to
  - ❖ Use the new laboratory request form
  - ❖ Collect the stool specimens within 4 days counting from the first day of stool specimen collection and return them to a designated Specimen Collection Point as soon as possible.
- Noting the reason given for failed analysis, provide clear instructions to the participant with respect to FIT specimen collection, handling and returning to collection points.

# Provision of service

Figure 14 : Additional encounter for re-issuing Participant's Pack

[Clinical](#) | [Administration](#) | [Emergency Access](#) | [Standards](#) | [Information](#)
TAI MING 10 YAM [Logout](#)

彭桃子 PANG, PEACH  
 HKIC No. : Q302008(4)    DOB : 01-Jan-1946    Age : 72 years    Sex : M    [Details](#)
[Allergy & ADR](#)

---

Colorectal Cancer Screening Programme [Help](#)

**Consultation History**

- ▲ CRC Screening Prog. (2018)
 

▲ PCD Summary <ul style="list-style-type: none"> <li>19-Sep-2018 Follow up (Dr. YAM, TAI MING 10)</li> <li>17-Mar-2018 Issue FIT (Dr. YAM, TAI MING 10)</li> </ul>	[Icon]
--	--------

Enrolment (20-Mar-2018)
Issue FIT (17-Mar-2018)
Follow up (Today)

**FIT Result**

FIT Kit Set	Issued On	FIT Result		FIT Result Date & FIT Report	
First	20-Mar-2018	Rejected	Rejected	19-Sep-2018	19-Sep-2018
Second					

**Follow up**

Consultation Date:

Re-issue Reason:
  Lost   
  Damage   
  Reject Result

Other

Note:

## 2.4 At the Second Consultation

Upon notification of a positive FIT result on CRC IT System, the PCD should promptly inform and call back the participant for the Second Consultation.

This involves two main tasks:

- (a) Discuss with the participant for referral to colonoscopy
- (b) Provide a signed referral letter

### (a) Discuss with the participant for referral to colonoscopy

- It is a **medical** consultation provided by the PCD who should personally see and meet with the participants to deliver the services under the Programme.
- The PCD should discuss with the participant about the implications of a positive FIT result and the need for referral to colonoscopy. Explanation can be facilitated using the Desktop cue card with stand. Please highlight the following essential information:
  - ❖ The presence of occult blood in stool indicates bleeding somewhere in the bowel. Currently, colonoscopy is the best method to examine the entire colon to find out what the problem is.
  - ❖ Colonoscopy involves the use of a scope to inspect the entire colon. Bowel preparation and low residue diet are required beforehand. Complications are uncommon and may include bowel perforation and bleeding. Before the procedure, the doctor will see the participant for assessment and will explain the procedures in detail.
  - ❖ There are three options for the referral for colonoscopy and the fees charged can be different.
    - (i) Referral to **CS enrolled under the Programme**. The Government will provide subsidy for the "Standard Package of Colonoscopy Service". Depending on the choice of CS, the participant may be required to pay a

## Provision of service

co-payment fee which should be no more than HK\$1,000. In general, the waiting time for the procedure is usually less than 8 weeks (i.e. the waiting time from making an appointment with the CS until having the pre-procedural consultation is less than 4 weeks; and the waiting time from after having the pre-procedural consultation until the colonoscopy procedure is less than 4 weeks). A list of enrolled CS and their co-payment fee is available at Prevent Colorectal Cancer website ([www.ColonScreen.gov.hk](http://www.ColonScreen.gov.hk)). A hard copy of this list should be provided to the participant; or

- (ii) Referral to **private sector**. Participant will exit the Programme and no Government subsidy will be provided. Participant will need to pay all fees out-of-pocket; or
- (iii) Referral to **Hospital Authority (HA)**. Participant will exit the Programme, receive care under the usual pathway in the public sector and be required to pay for charges applicable to HA services.

### (b) Provide a signed referral letter


- Input the information as required by the CRC IT System (Figure 15).
- Select the appropriate radio-button for the referral option for colonoscopy.
- Type notes as appropriate.
- Click [Save, Print Letter and Submit for 2nd Claim]. A pop-up window will appear where the PCD may enter participant's clinical details which will be automatically transcribed onto the referral letter. If the participant refuses referral, the PCD can still type a clinical summary in the pop-up window for the participant's retention.
- Print and sign the referral letter and give it to the participant.
- Provide a list of enrolled CS for the participant.
- Remind the participant to make a decision on which CS to consult and seek advice from the CS as soon as possible.

Figure 15 : Second Consultation



[Home](#) | [Clinical](#) | [Administration](#) | [Emergency Access](#) | [Standards](#) | [Information](#) | TAI MING 10 YAM | [Logout](#)

袁橙 YUEN, ORANGE | HKIC No. : Q191008(2) | DOB : 01-Jan-1946 | Age : 72 years | Sex : M | [Details](#) | [Allergy & ADR](#)

### Colorectal Cancer Screening Programme



[Help](#) 

#### Consultation History

- CRC Screening Prog. (2018)**
  - PCD Summary**
    - 19-Sep-2018 Follow up (Dr. YAM, TAI MING 10) 
    - 18-Sep-2018 Issue FIT (Dr. YAM, TAI MING 10) 

Enrolment (18-Sep-2018)
Issue FIT (18-Sep-2018)
Follow up (Today)

#### FIT Result

FIT Kit Set	Issued On	FIT Result		FIT Result Date & FIT Report	
First	18-Sep-2018	Positive	Positive	 18-Sep-2018	 18-Sep-2018
Second					

#### Follow up

Consultation Date: 19-Sep-2018 x 3

Participant Option:
  PPP
  Private
  HA
  Refuse Referral
  Others

Note:

### 2.5 Payment claim submission

Only the PCD can submit payment claim for Government Subsidy through the CRC IT System.

There are three types of Government Subsidy:

- [\(a\) Subsidy for processing enrolment](#)
- [\(b\) Subsidy for the First Consultation](#)
- [\(c\) Subsidy for the Second Consultation](#)

#### [\(a\) Subsidy for processing enrolment](#)

The amount of the subsidy for processing enrolment is HK\$76\*. It is a subsidy for the **one-off administrative services** provided at the First Consultation of the first screening round for enrolling any eligible person into the Programme.

In the CRC IT System, the payment claim for the subsidy for processing enrolment would be submitted together with that for the subsidy for the First Consultation. Hence, the Government would acknowledge receipt of the claim of subsidy for processing enrolment and process it together with the payment claim of subsidy for the First Consultation. It is payable together with the subsidy for the First Consultation.

If a clinical assistant is assigned by more than one PCD to process enrolment, the clinical assistant should make sure the enrolment is processed under the same PCD who performs the First Consultation. Otherwise, the PCD will NOT be able to receive the subsidy for processing enrolment.

#### [\(b\) Subsidy for the First Consultation](#)

The amount of the subsidy for the First Consultation is HK\$280\*. It is a subsidy for the provision of screening education and prescription of FIT tubes (contained within the Participant's Pack) in the First Consultation of each screening round.

\* By prior written notice to an Enrolled PCD and his Associated Health Care Provider (if any), the Government may at any time change the amount of any Subsidy.



In the CRC IT System, payment claim for the subsidy for the First Consultation can be submitted under the following circumstances:

- Positive FIT result.
- Negative FIT result.
- Two sets of uninformative FIT results (i.e. rejected by the laboratory for analysis due to problems with the tubes or laboratory request form).
- One set of uninformative FIT result and the participant was not re-issued another set of FIT tubes: 8 weeks after the receipt of the notification of the result.
- One set of uninformative FIT result and the participant was re-issued another set of FIT tubes but did not return them for analysis: 8 weeks after the Additional Encounter for the re-issuing of the second set of FIT tubes.
- No FIT result (i.e. no FIT tubes were returned by the participant) 8 weeks after the First Consultation.

Prompts given by the CRC IT System will facilitate the PCD's submission of payment claims.

### **(c) Subsidy for the Second Consultation**

The amount of the subsidy for the Second Consultation is HK\$280\*. It is a subsidy for the Second Consultation where the participant's FIT result is positive. The purpose of the Second Consultation is to discuss FIT result with the participant and refer the participant for colonoscopy by issuing a signed referral letter.

In the CRC IT System, the payment claim for the subsidy for the Second Consultation can be submitted whenever:

- The Second Consultation has been provided to participant and
- A system-generated referral letter for colonoscopy (if the participant accepts referral) or a summary of the participant's condition (if the participant refuses referral) has been provided to the participant.

\* By prior written notice to an Enrolled PCD and his Associated Health Care Provider (if any), the Government may at any time change the amount of any Subsidy.

### After payment claim submission

PCD can view the submitted payment claims and the payment status via the enquiry function in the CRC IT System. The PCD should:

- Click [Payment Claim] on the PCD menu bar.
- Click [Claim Enquiry] (Figure 16A).
- Select desired claim dates and click [Search] (Figure 16B).

The submitted payment claims will then be displayed on screen (Figure 16C).

Payment claims are processed by PO on a monthly basis. When the process has been completed, an inbox message will be sent to the PCD for notification and a monthly payment statement will be generated providing details of processed payments. To view payment statements, the PCD should:

- Click [Payment Claim] on the PCD menu bar.
- Click [Payment Statement] (Figure 17A).
- Select desired payment cutoff date and click [Search] (Figure 17B).
- Click [View Statement] (Figure 17C).
- A printable version of the payment statement will be displayed on screen (Figure 17D).

Figure 16A : Viewing submitted payment claims

The screenshot shows the 'Colorectal Cancer Screening Programme' interface. At the top, there are navigation tabs: Clinical, Administration, Emergency Access, Standards, and Information. The user is logged in as TAI MING 10 YAM. The main menu includes 'Participant Enrolment / Search Enrolled Participant', 'To-do List', 'Payment Claim', and 'My Profile'. A dropdown menu for 'Payment Claim' is open, showing 'Claim Enquiry' (highlighted with a blue arrow) and 'Payment Statement'. Below this, the 'To-do List' section shows 'BELL ELSA - S' and a 'Change HCl' link. A table displays FIT results for 7 items. The table has columns for Participant Name, Phone, FIT Result (1, 2, 3, 4), Report, Result Date, and Consult. The data rows are as follows:

Participant Name	Phone	1	2	3	4	Report	Result Date	Consult
MA, KA	26272627	Rejected	Positive				04-Jul-2017	
PANG, LYCHEE (彭荔枝)	90000001	Positive	Positive				11-Dec-2017	
WONG, KA WAI	26272627	No result	No result	No result	Positive		04-Jul-2017	
YUEN, ORANGE (袁橙)	91234567	Positive	Positive				18-Sep-2018	
PANG, PEACH (彭桃子)	90000001	Rejected	Rejected				19-Sep-2018	
YUEN, PINEAPPLE (袁菠蘿)	91234567	Rejected	Rejected	Rejected	Rejected		19-Sep-2018	
YUEN, MELON (袁甜瓜)	91234567	Negative	Negative				19-Sep-2018	

Below the table, there is a section for 'Participants without FIT results by 4 weeks (1 Item)'. At the bottom, there is a checkbox for 'Show the To-do List of relieved doctor(s)' and a dropdown menu for 'Please select relieved doctor...'. The total number of records is 18.

Figure 16B : Viewing submitted payment claims

The screenshot shows the 'Colorectal Cancer Screening Programme' interface. At the top, there are navigation tabs: Clinical, Administration, Emergency Access, Standards, and Information. The user is logged in as TAI MING 10 YAM. The main menu includes 'Participant Enrolment / Search Enrolled Participant', 'To-do List', 'Payment Claim', and 'My Profile'. The 'Claim Enquiry' form is displayed, with the following fields:

- Claim Date: From 20-Aug-2018 to 19-Sep-2018
- Status: Pending Processing
- HCP: BELL ELSA

There are 'Search' and 'Cancel' buttons at the bottom right of the form.

# Provision of service

Figure 16C : Viewing submitted payment claims

Colorectal Cancer Screening Programme

Participant Enrolment / Search Enrolled Participant To-do List **Payment Claim** My Profile

**Claim Enquiry**

Claim Date From 20-Aug-2018 to 19-Sep-2018 Status Pending Processing  
 HCP BELL ELSA

Search Cancel

Claim Date	Participant Name	Nature Of Claim	Claim Amount (HKD)	Claim Status	Suspension / Cancellation Reason
18-Sep-2018	LAI KA WAI	2nd Claim	280	Pending Processing	N/A
18-Sep-2018	NG WAI MING	2nd Claim	280	Pending Processing	N/A
18-Sep-2018	PANG LEMON (彭檸檬)	1st Claim (with enrolment fee)	356	Pending Processing	N/A
18-Sep-2018	PANG LEMON (彭檸檬)	2nd Claim	280	Pending Processing	N/A
18-Sep-2018	PANG ORANGE (彭橙)	1st Claim (with enrolment fee)	356	Pending Processing	N/A
18-Sep-2018	PANG ORANGE (彭橙)	2nd Claim	280	Pending Processing	N/A
19-Sep-2018	YUEN ORANGE (袁橙)	1st Claim (with enrolment fee)	356	Pending Processing	N/A

Claim Amount (HKD) Total: 2,188

Figure 17A : Viewing payment statement

Colorectal Cancer Screening Programme

Participant Enrolment / Search Enrolled Participant To-do List **Payment Claim** My Profile

**To-do List**

Claim Enquiry  
 Payment Statement

BELL ELSA - S Change HCI

Participant Name	Phone	FIT Result				Report	Result Date	Consult. Note
		1	2	3	4			
<b>FIT result uploaded (7 Items)</b>								
MA, KA	26272627	Rejected	Positive			04-Jul-2017		Save
PANG, LYCHEE (彭荔枝)	90000001	Positive	Positive			11-Dec-2017		First Claim
WONG, KA WAI	26272627	No result	No result	No result	Positive	04-Jul-2017		Save
YUEN, ORANGE (袁橙)	91234567	Positive	Positive			18-Sep-2018		Update Claim Reason
PANG, PEACH (彭桃子)	90000001	Rejected	Rejected			19-Sep-2018		
YUEN, PINEAPPLE (袁菠蘿)	91234567	Rejected	Rejected	Rejected	Rejected	19-Sep-2018		Claim
YUEN, MELON (袁甜瓜)	91234567	Negative	Negative			19-Sep-2018		Claim
<b>Participants without FIT results by 4 weeks (1 Item)</b>								

Total 18 record(s)

Show the To-do List of relieved doctor(s) Please select relieved doctor...

Figure 17B : Viewing payment statement

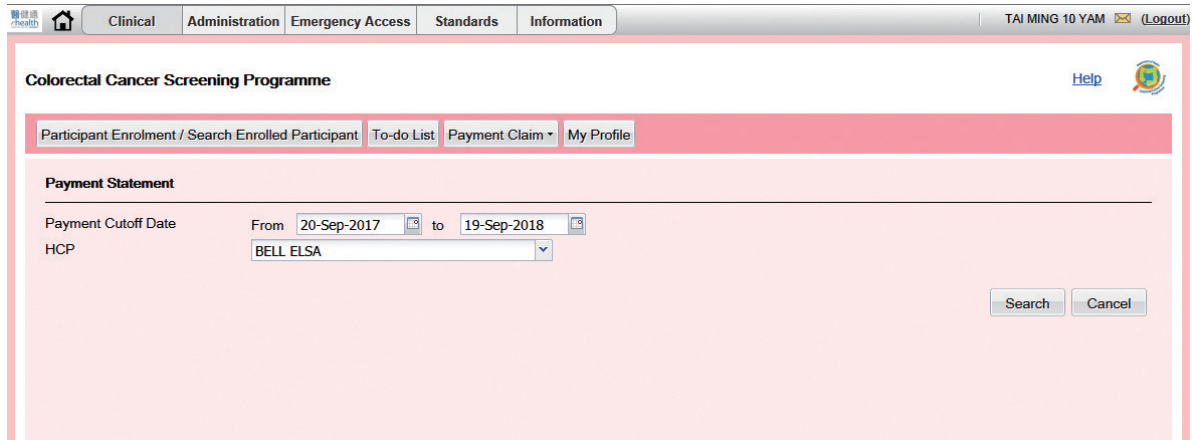


Figure 17C : Viewing payment statement

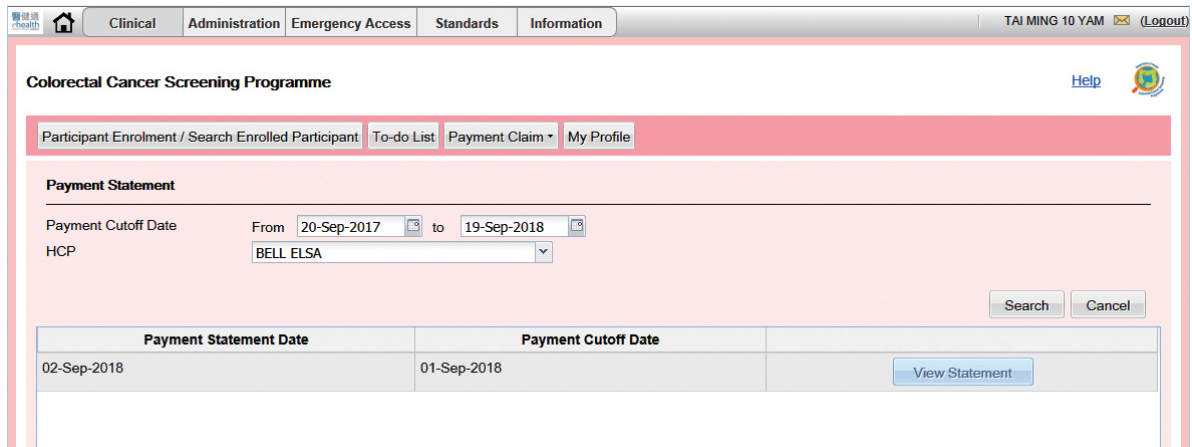
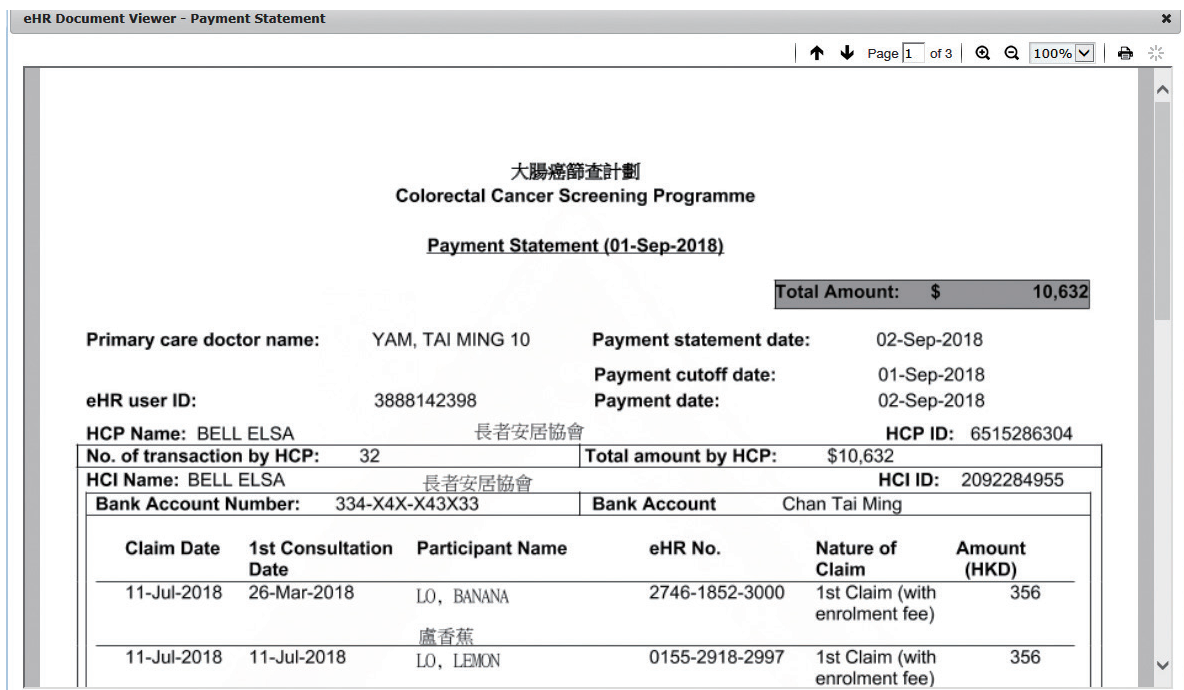


Figure 17D : Viewing payment statement



### 2.6 Payment by the Government

#### Processing payment

Payment claims will be processed by the PO on a monthly basis. Claims for subsidy by the PCD for the services provided in a particular month will be settled within 30 days after the last day of that month.

After PO completes the payment process, PCD will be informed through the CRC IT System by

- An inbox message; and
- A payment statement providing the payment details.

The payment amount will be credited to the PCD's designated bank account within 14 days of this message.

Any subsidy claim not made within 6 months counting from the date of the First Consultation will be considered as a late claim and the Government shall have the absolute discretion to refuse payment.

There are conditions and scenarios where the Government has no obligation to pay the subsidy to the PCD. For details, please refer to the Terms and Conditions of Agreement.

#### Checking payment

PCD should keep all Participant Consent Forms signed by the participants in safe custody pending collection by PO staff on a regular basis and limit the number of persons who can access the personal data to protect them from indiscriminate or unauthorised access.

PO staff may visit the PCD clinic at any reasonable hour to inspect and obtain the Participant Consent Form and any other information or record related to the Programme. PCD and the clinical assistant shall co-operate and provide assistance required by PO staff.



Please note that:

- PO staff may contact the participants to enquire about any information related to the Programme.
- If there are any irregularities detected during the inspection visit or on the Participant Consent Form, PO shall investigate and inform the PCD for
  - ❖ rectification as appropriate e.g. calling participants to duly sign the Participant Consent Form if it has not been completed properly; and/or
  - ❖ submission of the required information to substantiate the payment claim.
- There are conditions and scenarios where the Government has no obligation to pay the subsidy to the PCD. For details, please refer to the Terms and Conditions of Agreement.

## 2.7 Re-screening

Under the Colorectal Cancer Screening Programme, participants with negative FIT result / uninformative FIT result (e.g. no result/rejected result) in the previous screening round can receive subsidised FIT re-screening after 2 years.

Negative FIT result / uninformative FIT result participants who are due for re-screening will receive re-screening notification via SMS, email or postal mail sent by the Government; and may visit any enrolled Primary Care Doctor's clinic to request subsidised FIT re-screening services.

The workflow for providing the FIT re-screening service is essentially the same as what the PCD is doing in the provision of screening service including assessment of medical fitness for FIT, providing medical consultation for FIT screening, data entry into the CRC- IT System, printing the laboratory request form, prescription of FIT and explanation on specimen collection, subsequent notification of results and claim submission, calling back for second consultation if FIT is positive etc.

## Provision of service

As the FIT re-screening participants have already been enrolled in the Programme, in the re-screening round, there is no need for (i) printing and signing of consent form by participants ; and (ii) requesting consent to be approached by academic institution for research. The CRC-IT system will guide the PCD to perform data entry.

- If the participant is due for re-screening, the CRC-IT system will allow the PCD to provide FIT re-screening service.
- If the participant is not due for re-screening, the CRC-IT system will not allow the PCD to provide FIT re-screening service and the following message will appear (Figure 18A).

Figure 18A : Participant is not due for re-screening

The screenshot displays the 'Colorectal Cancer Screening Programme' interface. The top navigation bar includes 'Clinical', 'Administration', 'Emergency Access', 'Standards', and 'Information'. The user is identified as 'TAI MING 10 YAM (Logout)'. The main content area shows 'Participant Information' for 'WONG, PINEAPPLE (王菠蘿)'. A pop-up message titled 'Information' states: 'The participant can receive government subsidised FIT screening again **on or after 03-Jun-2020**.' The pop-up has an 'OK' button. Below the pop-up, two callout boxes provide instructions: 'PCDs can remind the participant about the day which he/she is eligible to re-screening.' and 'Click [OK] to remove the pop up message.'

Participant Information	
Enrolment Reference No.	00092601
Name	WONG, PINEAPPLE (王菠蘿)
HKIC No.	Q300XXX(X)
Date of Birth	01-Jan-1946
Sex	Male
Holder of Certificate of Exemption	No
Agree to be Approached by Research Institutions for Cancer-Related Research	No

Information  
The participant can receive government subsidised FIT screening again **on or after 03-Jun-2020**.

OK

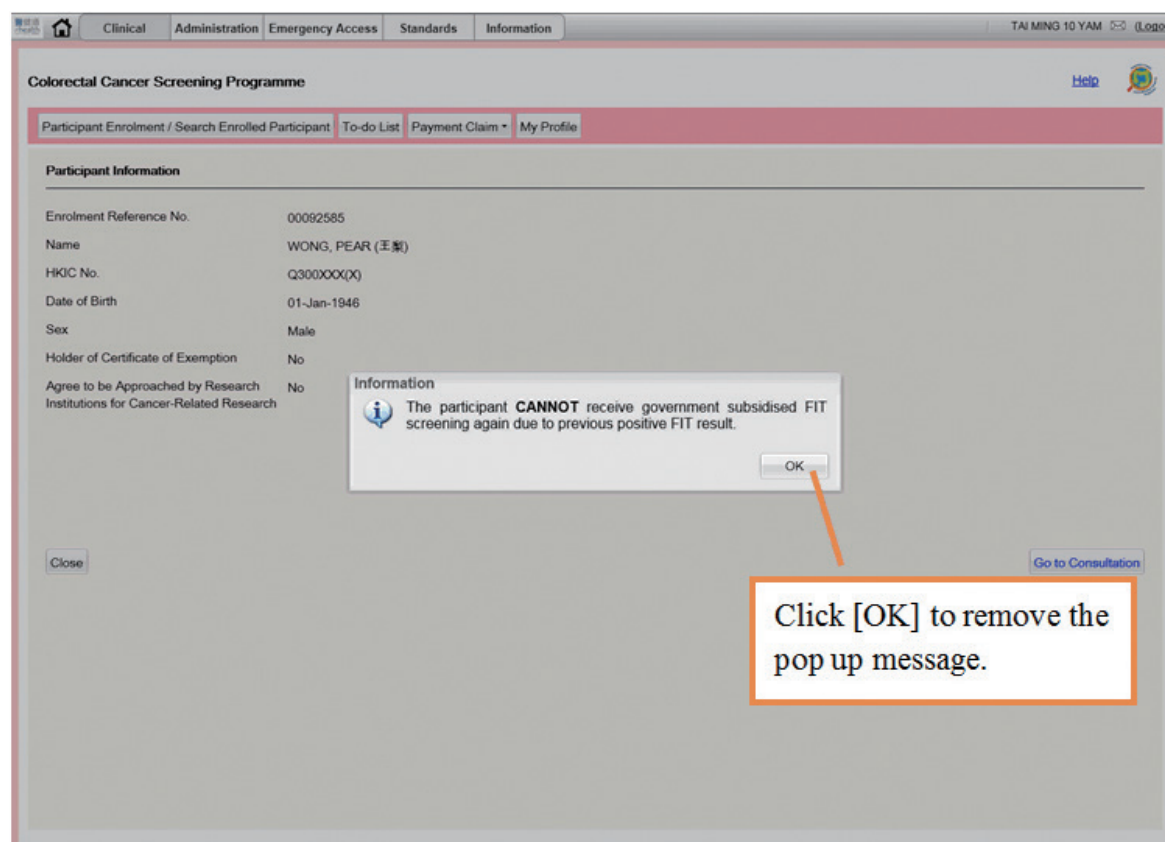
PCDs can remind the participant about the day which he/she is eligible to re-screening.

Click [OK] to remove the pop up message.



Any FIT positive participant should have been referred to colonoscopy examination and should not receive FIT re-screening under the Programme. The following message will appear in the CRC-IT system (Figure 18B). The CRC-IT system will not allow the PCD to provide the FIT screening service for the FIT positive participant.

**Figure 18B : Participant with previous positive FIT result**



## 2.8 Amendment and change

For change of PCD's correspondence address, fax number, relationship between parties, co-payment fee, bank account information, personal particulars of HCP in-charge, adding HCP or HCI, the PCD should:

- submit the request to PO electronically via the CRC IT System and
- submit supporting documents (if applicable)

For change of PCD's contact number, the HCP's correspondence address and the HCI's telephone number, the PCD should:

- submit the request to Electronic Health Record Registration Office by calling 3467 6230 or e-mail ehr@ehealth.gov.hk

For change of PCD's email address, the PCD should:

- submit the request by using the "Update Own Account" function in eHRSS (Figure 19)

Figure 19 : Changing e-mail address

The screenshot shows the 'Update Own Account' web interface. At the top, there are navigation tabs: Clinical, Administration, Emergency Access, Standards, and Information. The user is identified as TAI MING 10 YAM. The main content area is titled 'Update Own Account' and contains several sections:

- Update Own Account** (Summary):
 

eHR UID:	3888142398	Token Serial No. (in use):	232600263
Surname:	YAM	Token Issuer HCP:	6515286304
Given Name:	TAI MING 10		
Chinese Name:			
Contact Phone No.:			
- Update User Name**: Current User Name: gpdoctoryam [Modify]
- Communication Means**: Selected Communication Means:  Email  SMS
- Update Mobile Phone No.**: Current Mobile Phone No.: 98765432 [Modify]
- Update Internet Email Address**: Current Internet Email Address: dr.yam@ha.org.hk [Modify]
- Update Password**: [Modify]
- Relationship Information**: Active Relationship table with columns: Healthcare Provider, Healthcare Staff Type, Relationship Sta..., Relationship En...

## Information change through submitting request to PO

For change of PCD's **correspondence address, fax number** and **relationship between parties**

- Submit the request to PO via CRC IT System:
  - ❖ Click [My Profile] on the PCD menu bar (Figure 20).
  - ❖ Click [Edit].
  - ❖ Enter the updated details in the appropriate fields.
  - ❖ Follow the on-screen instructions and click [Submit].
- Submit supporting document to PO:
  - ❖ For change of **correspondence address**, submission of address proof (eg. public utility bill) is required.
  - ❖ For change fax number or relationship between parties, there is no need to submit supporting documents.
- PO's processing time: 14 days upon receiving all supporting documents (if applicable).

Figure 20 : Changing personal particulars

The screenshot shows the 'Colorectal Cancer Screening Programme' web interface. The user is logged in as 'TAI MING 10 YAM'. The 'My Profile' section is active, displaying a table of personal particulars. A blue arrow points to the 'Edit' button at the bottom right of the profile area.

Personal Particulars	HCP & HCI	Bank Information
Primary Care Doctor Name	YAM TAI MING 10	
eHR User ID	3888142398	
Hong Kong Identity Card No.	A123456(3)	
Correspondence Address	BUTTERFLY BEACH, TSUEN WAN DISTRICT, NT	
Contact Email Address	lwc176@ha.org.hk	
Daytime Contact Telephone Number	N/A	
Fax Number	N/A	
Professional Registration Number	ENG9000136	
Enrolment Reference No.	PCD00650	

Relieving Doctor and Clinical Assistant Edit

## Provision of service

### For change of co-payment fee

- Submit the request to PO via CRC IT System:
  - ❖ Click [My Profile] on the PCD menu bar.
  - ❖ Click [Edit].
  - ❖ Click [Next] to go to the "HCP & HCI" tab.
  - ❖ Enter co-payment fee in the box next to the heading "New Fee" (Figure 21).
  - ❖ Follow the on-screen instructions and click [Submit].
- There is no need to submit supporting documents to PO.
- PO's processing time: 30 days.

Figure 21 : Changing co-payment fee

The screenshot shows the 'Colorectal Cancer Screening Programme' web application. The user is logged in as 'TAI MING 10 YAM'. The navigation menu includes 'Clinical', 'Administration', 'Emergency Access', 'Standards', and 'Information'. The main menu has 'Participant Enrolment / Search Enrolled Participant', 'To-do List', 'Payment Claim', and 'My Profile'. The 'My Profile' section shows 'Last Online Amendment Submission Date: 18-Sep-2018' and 'Amendment Status: Discarded'. The 'HCP & HCI' tab is selected, and the 'Bank Information' sub-tab is highlighted with a blue arrow. The form contains the following fields:

- Applicant's Relationship with HCP:** Radio buttons for Sole proprietor (selected), Partner, Shareholder, Director, Employee, and Others (please specify).
- HCI Name (HCI ID):** BELL ELSA (2092284955) with a Delete button.
- Address:** FLOOR 16/F, ONE KOWLOON, ONE KOWLOON, 1 WANG YUEN ST, KOWLOON BAY, KWUN TONG DISTRICT, KLN.
- Address (Chinese):** 九龍觀塘區九龍灣宏遠街1號一號九龍一號九龍16樓樓
- Telephone Number:** 32569801
- Type of Practice:** Private
- Copayment Fee (if any):** Existing \$ 0, New Fee \$ [input field]. A blue arrow points to the 'New Fee' input field.
- Bank Account Number:** Bank Code 334, Branch Code 343, Account No. 343333 with a Select button.
- HCI Name (HCI ID):** BELL ELSA - S (5006475036) with a Delete button.

At the bottom, there are buttons for Back, Next, Save Draft, Submit, and Cancel.

## For change of bank account information

- Submit the request to PO via CRC IT System:
  - ❖ Click [My Profile] on the PCD menu bar.
  - ❖ Click [Edit].
  - ❖ Click [Next] to go to the “HCP & HCI” tab (Figure 22).
  - ❖ Enter the updated details in the appropriate fields.
  - ❖ Click [Next] to go to the “Bank Information” tab.
  - ❖ Enter the updated details in the appropriate fields.
  - ❖ Follow the on-screen instructions and click [Submit].
- Submit supporting document to PO:
  - ❖ Duly signed and completed Appendix B of transaction documents for enrolment (available at [www.ColonScreen.gov.hk](http://www.ColonScreen.gov.hk)).
  - ❖ Certified true copy of bank correspondence.
- PO’s processing time: 30 days upon receiving all supporting documents.

**Figure 22 : Changing bank information**

The screenshot displays the 'Colorectal Cancer Screening Programme' web interface. At the top, there is a navigation bar with tabs for 'Clinical', 'Administration', 'Emergency Access', 'Standards', and 'Information'. The user is logged in as 'TAI MING 10 YAM'. Below the navigation bar, there are several menu items: 'Participant Enrolment / Search Enrolled Participant', 'To-do List', 'Payment Claim', and 'My Profile'. The 'My Profile' section shows the 'Last Online Amendment Submission Date' as '18-Sep-2018' and the 'Amendment Status' as 'Discarded'. There are buttons for 'Cancel Submission' and 'View Detail'. The main content area is divided into three tabs: 'Personal Particulars', 'HCP & HCI', and 'Bank Information'. The 'Bank Information' tab is active, showing a list of HCP & HCI entries. The first entry is for 'BELL ELSA (2092284955)' with a 'Delete' button. Below this, there are fields for 'Address', 'Address (Chinese)', 'Telephone Number', 'Type of Practice', 'Copayment Fee (if any)', and 'Bank Account Number'. The 'Bank Account Number' section includes fields for 'Bank Code' (334), 'Branch Code' (343), and 'Account No.' (343333), with a 'Select' button. The second entry is for 'BELL ELSA - S (5006475036)' with a 'Delete' button. At the bottom of the form, there are buttons for 'Back', 'Next', 'Save Draft', 'Submit', and 'Cancel'.

## Provision of service

### For change of personal particulars of HCP in-charge including the name, position and contact details of the authorised signatory

- Submit the request to PO via CRC IT System:
  - ❖ Click [My Profile] on the PCD menu bar.
  - ❖ Click [Edit].
  - ❖ Click [Next] to go to the "HCP & HCI" tab (Figure 23).
  - ❖ Enter the updated details in the appropriate fields.
  - ❖ Follow the on-screen instructions and click [Submit].
- There is no need to submit supporting documents to PO.
- PO's processing time: 14 days.

Figure 23 : Changing personal particulars of HCP in-charge

The screenshot shows the 'Colorectal Cancer Screening Programme' interface. The user is logged in as 'TAI MING 10 YAM'. The 'My Profile' tab is selected, and the 'HCP & HCI' sub-tab is active. The 'Last Online Amendment Submission Date' is 18-Sep-2018, and the 'Amendment Status' is Discarded. The 'Personal Particulars' section is expanded, showing the following details:

<input checked="" type="checkbox"/> HCP Name (HCP ID)	BELL ELSA (6515286304)
HCP Official Name	BELL ELSA (Official Name)
Address	FLOOR 16/F, ONE KOWLOON, ONE KOWLOON, 1 WANG YUEN ST, KOWLOON BAY, KWUN TONG DISTRICT, KLN
Business Registration Number	Bm 12122
HCP In-charge Name	Tai Ming
HCP In-charge Position	Doctor
HCP In-charge Email	taiming@gmail.com
HCP In-charge Telephone Number	2343233
HCP In-charge Fax Number (Optional)	
Applicant's Relationship with HCP	<input checked="" type="radio"/> Sole proprietor <input type="radio"/> Partner <input type="radio"/> Shareholder <input type="radio"/> Director <input type="radio"/> Employee <input type="radio"/> Others (please specify)

At the bottom of the form, there are buttons for 'Back', 'Next', 'Save Draft', 'Submit', and 'Cancel'. A blue arrow points to the 'HCP In-charge Name' field.



### For adding HCP/HCI

- Submit the request to PO via CRC IT System:
  - ❖ Click [My Profile] on the PCD menu bar.
  - ❖ Click [Edit].
  - ❖ Click [Next] to go to the “HCP & HCI” tab.
  - ❖ Follow the on-screen instructions for adding HCP or HCI.
- Submit supporting document to PO:
  - ❖ To add a **new HCP**, PCD is required to submit:
    - Duly signed and completed copy of Appendix A of transaction documents for enrolment
    - Copy of Address proof of the HCP (e.g. public utility bill or bank statement)
    - Duly signed and completed copy of Appendix B of transaction documents for enrolment
    - Certified true copy of bank correspondence
  - ❖ To add a **new HCI**, PCD is required to submit:
    - Duly signed and completed copy of Appendix B of transaction documents for enrolment
    - Certified true copy of bank correspondence (if a new bank account is to be used)
    - Duly signed and completed copy of Appendix A of transaction documents for enrolment
- PO’s processing time: 30 days upon receiving all supporting documents.
- Please note that:
  - ❖ Enrolment guide and transaction documents for enrolment are available at [www.ColonScreen.gov.hk](http://www.ColonScreen.gov.hk).
  - ❖ Before adding HCP/HCI, PCD should ensure that the **HCP/HCI has registered with the eHRSS** and the **HCP has been affiliated with the PCD** according to the guidelines from the eHR Registration Office.

## Provision of service

### For removal of HCP/ HCI

- To remove an HCP/HCI, PCD and HCP should complete and return a designated form available at [www.ColonScreen.gov.hk](http://www.ColonScreen.gov.hk) to PO at least 30 days in advance of the desired date of removal.

The following table summarises the above-mentioned amendment and changes:

Information to be changed	Means	Illustration
PCD's contact number	Submit request to eHR Registration Office by calling 3467 6230 or e-mail <a href="mailto:ehr@ehealth.gov.hk">ehr@ehealth.gov.hk</a>	
HCP's correspondence address		
HCI's telephone number		
PCD's e-mail address	Submit request by using the "Update Own Account" function in eHRSS	Figure 19
PCD's correspondence address	CRC IT System	Figure 20
PCD's fax number		
Relationship between parties		
Co-payment fee		Figure 21
Bank account information		Figure 22
Personal particulars of HCP in-charge		Figure 23
Adding HCP/HCI		
Removal of HCP/HCI		
	Complete and return a designated form available at <a href="http://www.ColonScreen.gov.hk">www.ColonScreen.gov.hk</a>	



## 3 Frequently asked questions

### 3.1 Participant enrolment

#### 3.1.1 Can a family member or carer enrol for the eligible person?

No. The eligible person needs to be present in person at the PCD clinic and insert the HKIC into the Smart Card reader by himself/herself. PCD should also check the photo on the HKIC to confirm the identity of the eligible person.

#### 3.1.2 What if the smart HKIC reader malfunctions?

Manual input of the HKIC details can be used but this mode of input should not be done as a routine. PCD should contact eHR Registration Office to get a new Smart Card Reader as soon as possible.

#### 3.1.3 A person's HKIC has C or U code, what should be done?

The C or U code represents non-permanent resident status, so the current status should be checked in accordance with PO's instructions. Only those confirmed eligible could proceed for enrolment. Non-eligible persons enrolling into the Programme will not attract a payment to the PCD's claim.

#### 3.1.4 Where can the "Undertaking and Declarations" of the Participant Consent Form be obtained from?

The "Undertaking and Declarations" of the Participant Consent Form can be obtained from Prevent Colorectal Cancer website ([www.ColonScreen.gov.hk](http://www.ColonScreen.gov.hk)).

## Frequently asked questions

### **3.1.5 Why are two copies of the Participant Consent Form printed?**

One copy is to be given to the participant for retention and the other copy is to be kept in safe custody for collection by the PO on a regular basis. If desired, PCDs may also make another copy for their own records.

## **3.2 First and Second Consultations**

### **3.2.1 Is it mandatory to provide information in the 'clinical notes' section of the CRC IT System?**

No. The section or box for clinical notes provides an aid for PCDs in recording the consultation. The consultation page can be printed out and kept by the PCD. PCDs are advised to make proper documentation of the medical consultation as for any other patients of the PCD.

### **3.2.2 What are the essential documents to be printed from the CRC IT System during the First and Second Consultations?**

During the First Consultation, duplicate copies of Participant Consent Form will first be printed. Once the participant is enrolled for screening, the laboratory request form can be printed from the CRC IT System, which should then be inserted into the large plastic bag for return of specimens.

During the Second Consultation, which only applies to a participant with positive FIT result, a referral letter for colonoscopy will be printed from the CRC IT System.

## 3.3 FIT tubes and specimen collection

### 3.3.1 Why do the FIT tubes need to be returned to the Specimen Collection Points within 4 days of first specimen collection?

The buffer solution in the FIT tube can maintain the stool integrity for around 7 days under room temperature, even during hot weather. With the allocation of up to 4 days for specimen collection, there leaves 3 days for handling of specimens covering pick up from specimen collection points to laboratory and carrying out tests. Therefore, it is vital that the 4-day rule is strictly followed. To help the laboratory check if the 4-day rule is followed, the participant should write down the specimen collection date on each tube and keep the specimens in a cool dry place before dropping off at the specimen collection points.

### 3.3.2 What if my participant has infrequent bowel movement and may not be able to obtain two specimens within 4 days?

Ask the participant to return even if only one FIT specimen is available. This specimen should be returned together with the laboratory request form in the large plastic bag. A single FIT specimen, if collected properly, will be able to generate an interpretable result.

### 3.3.3 My participant is concerned about the hygiene of the FIT tubes. How should I deal with this?

The collection of stool specimen is hygienic. Once the collection stick is returned to the FIT tube and the cap twisted firmly, leakage is uncommon. Each FIT tube is individually placed and sealed into a small specimen bag, and then together, put into a larger plastic bag with a laboratory request form attached. If specimen is collected as instructed, hygiene should not be a concern.

## Frequently asked questions

### 3.3.4 Is there an expiry date for the FIT tubes?

The expiry date for a FIT tube is printed on the label by the manufacturer, which is indicated by the image of an hourglass.



FIT tube label

When issuing the Participant's Pack, the PCD or clinical assistant should check the expiry date on each FIT tube and ensure that there should be **at least** 2 months' time before the date of expiry for the participant to collect stool specimens.

### 3.3.5 What if the participant does not return the FIT tubes?

The PCD will receive an alert at 4 weeks in the "To-do List" and should remind the participant to return tubes as soon as possible, and in any case within 8 weeks. If the participant does not return the FIT tubes by 8 weeks, the participant would be considered defaulted provided the PCD has made repeated attempts to remind the participant. The PCD may then submit a payment claim for the First Consultation.

### 3.3.6 What if the participant has rejected result for all the four FIT tubes?

If all four FIT tubes returned by a participant are rejected by the laboratory for analysis, the laboratory will return an uninformative result for the participant's current screening round. The participant will only be able to be issued FIT tubes again during the next screening round i.e. after 2 years (as calculated by the CRC IT System). If the participant is keen on receiving FIT screening, payment out-of-pocket in the private sector may be considered.

## 3.4 Additional encounters

### 3.4.1 What are the circumstances that additional encounters are needed?

If the participant has lost both the FIT tubes, or have both results rejected by the laboratory, the participant may have another pair of FIT tubes issued. An additional encounter with the PCD is needed for re-issuing FIT tubes (contained within the Participant's Pack) and printing of replacement laboratory request form. If the FIT results were rejected due to poor collection technique or missing specimen collection date, it will be a good opportunity to educate the participant again in order to 'get things right' this time.

### 3.4.2 Will there be extra Government subsidies for these additional encounters?

No. The duty of re-issuing of FIT tubes (contained within the Participant's Pack) is part of the tasks involved in the First Consultation, and the payment is included in the subsidy for the First Consultation.

### 3.4.3 Can a representative collect the extra FIT tubes (contained within the Participant's Pack) for the participant?

Yes. Depending on individual clinic workflow, the extra FIT tubes (contained within the Participant's Pack) can be collected by a family member or carer nominated by the participant. However, if the tubes were rejected because of faulty collection technique or missing specimen collection date, it would be important that the participant understands the reason and to 'get things right' this time.

### 3.5 Informing results to participants

#### 3.5.1 Can I arrange an extra consultation to inform the participant of a negative FIT result?

Yes, if you and the participant think this is the best arrangement. However, no Government subsidy will be provided for this encounter. Subsidy is only provided for Second Consultations to participants who have positive FIT results.

#### 3.5.2 What if the participant cannot be reached?

If the participant cannot be reached, payment claim is still possible after 8 weeks from the First Consultation. For participants with positive FIT results, it is important that repeated attempts should be made to invite the participant to come back for the Second Consultation. If, by 4 weeks, it is clear that the participant will not return for the Second Consultation, then a payment claim may be submitted for the First Consultation. The PCD should note that once payment claim is submitted, the participant's name will disappear from the "To-do List" and the participant will be regarded as lost to follow-up. If, subsequent, to claiming payment, the participant turns up at the clinic, the PCD should complete the screening workflow without charging the participant further.

## **3.6 Government subsidy & co-payment**

### **3.6.1 When will the claims for subsidy be paid?**

Claims for subsidy by the PCD for the services provided and submitted in a particular month will be settled within 30 days after the last day of that month.

### **3.6.2 How to view the payment status of the claims submitted by PCD?**

PCDs can view the payment claims submitted and the payment status via enquiry function in the CRC IT System.

### **3.6.3 Will there be any notifications to the PCD when claims have been processed?**

Yes. Payment claims are processed by PO on a monthly basis. When the process has been completed, the PCD will be notified via an inbox message and a monthly payment statement providing details of processed payments.

## **3.7 Participant withdrawal from eHR**

### **3.7.1 What will happen if the participant withdraws from eHR?**

The participant information will no longer be shown on eHR as well as the CRC IT System. PCD will not be able to access the records of the participant and will not be able to submit payment claims. If necessary, please contact PO for assistance. The participant will not be notified of outstanding FIT results, if any.

### **3.7.2 What will happen if the participant revokes consent on eHR?**

In order to enrol into the Programme, the participant should opt to build an “Indefinite Sharing Consent” with the PCD, rather than a “One-year Sharing Consent”. This is to allow a smooth continuity of care to be provided by the PCD to the participant under the Programme.

The participant may revoke consent to a particular PCD, anytime, at an eHR outlet. The PCD will subsequently not be able to gain access to the participant’s information via the eHRSS or the CRC IT System.

## **3.8 Other issues**

### **3.8.1 A participant previously under the care of another PCD approaches me for follow-up under the Programme. What should be done?**

Participants are not allowed to change PCDs for the continuity of care during the same screening round. Hence, if the participant is still under the care of another PCD, the participant should be directed back to that PCD.



## 4 Glossary of terms

Abbreviation	Definition
CRC	Colorectal Cancer
eHRSS	Electronic Health Record Sharing System
FOBT	Faecal Occult Blood Test
FIT	Faecal Immunochemical Test
HKIC	Hong Kong Identity Card
PO	Programme Office

Term	Explanation
Programme	Short form for Colorectal Cancer Screening Programme
CRC IT system	Means the Colorectal Cancer Information Technology System, a specific IT system for the Programme built upon eHRSS for the collection, storage, sharing and use of data, including clinical data, of the Participant.
FIT tube	A tube for the collection of stool specimen for carrying out the faecal immunochemical test.
Participant's Pack	Contains one Participant Guidebook, two FIT tubes, two small plastic bags, one large plastic bag and one Instruction Sheet for Specimen Collection.
Screening Round	Means a period of 24 months within the Programme Term during which an Eligible Person may receive FIT screening once under the Programme.



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Department of Health

# 大腸癌篩查 計劃

COLORECTAL CANCER SCREENING PROGRAMME