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Summary

Improving a colorectal service: 28-day faster diagnosis

UEG Week Barcelona 2026 | Presentation

Nurses

October 18, 2026

A UK colorectal team improved performance in meeting the NHS 28-day faster diagnosis standard from 60% to 80% through restructured clinical endoscopist roles, radiology collaboration, and automated pathway tracking.

KEY POINTS

- The speaker reported that before intervention the trust was informing only 60% of patients by day 28 whether they had a cancer diagnosis, with the main delay being that results were available but clinicians had not informed patients
- Clinical endoscopist job plans were restructured to include dedicated triage and CT result actioning sessions, reducing endoscopy lists from 6-7 per week to 4-5 per week
- Radiology created protected CT and MRI booking slots accessible to colorectal nurses, allowing same-visit booking during post-colonoscopy cancer consultations with immediate text confirmation to patients
- Same-day or next-day CT colonography slots were introduced for failed colonoscopies, eliminating waits the speaker stated were previously 5 to 10 days and avoiding repeat bowel preparation
- A robotic process automation system was implemented to read standardized result letters and automatically close pathways, and a daily escalation spreadsheet identifies patients approaching day 28
- The speaker stated the trust now consistently performs at 80% compliance with the 28-day standard, working six days per week with two daily triage sessions

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