#### **WHO ARE WE?**

This study is being conducted by:

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Cancer researcher

**Professor Jon Emery** 

Academic GP and Lead Investigator

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Colorectal cancer statistician & epidemiologist

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#### CONTACT

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If you have concerns about the conduct of this research please contact:

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## GENERAL PRACTITIONER PLAIN LANGUAGE STATEMENT



### **THANK YOU**

FOR YOUR SUPPORT WITH THIS STUDY



### **SMART** screen Trial

A randomised controlled trial of a patient SMS message sent from general practice to increase participation in the National Bowel Cancer Screening Program in Victoria.

### WHY DO THIS RESEARCH?

#### **Colorectal Cancer in Australia**

Australia has one of the highest rates of bowel cancer in the world. 1 in 13 Australians will develop the condition in their lifetime.

Bowel cancer is Australia's second deadliest cancer. Colorectal cancer is largely preventable mainly because screening is a simple and effective way to detect colorectal cancer when in a pre-cancerous or early stage disease so it can be treated prior to becoming an invasive malignancy.

The NBSCP sends a free screening test to every Australian from the age of 50 to 74 years old. The screening test — an immunochemical faecal occult blood test (iFOBT) — has a sensitivity of 53-100% and specificity of 93%, can be self-completed at home, and is safe. Despite this, screening with FOBT is low with only 41% of people completing the NBCSP test.

#### **HOW IS THIS STUDY BEING FUNDED?**

This study has been funded by a dedicated grant from the Victorian Cancer Agency Prevention and Screening Research Grant (CPSRG19018).



### WHAT IS THE PURPOSE OF THIS RESEARCH?

SMARTscreen will measure the impact of using an SMS which includes an endorsement from the general practice, a positive narrative video about screening and an animated video about how to collect the test to eligible patients to increase the uptake of the NBCSP. The intervention is evidence-based and simple, and if effective will have an impact on increasing the early detection of colorectal cancer.

### WHAT DOES PARTICIPATION INVOLVE?

If your general practice agrees and consents to take part, the general practice will be randomised into an intervention or control group. If in the intervention group, this will allow the research team to work with a designated staff member to generate a list of patients aged between 49 and 60 years old who are due to receive their NBCSP kit. Patients on the list will be sent the SMS. We will collect deidentified data about screening numbers for the eligible practice population in both the intervention and control groups to see if there is any effect from sending the SMS.

#### WHY HAVE I BEEN INVITED?

We are inviting eligible general practices in the WVPHN region to be involved in SMARTscreen. All GPs will be asked to allow the SMARTscreen SMS to be sent to eligible patients and for the data to be collected.

### HOW WILL THIS STUDY AFFECT ME OR MY PRACTICE?

GPs do not need to do anything. Some patients may let you know that they have received the SMS or they may call the general practice to confirm that they have received the SMS. We would ask the reception staff to reassure the patients that the message is from the general practice. You might be contacted to be interviewed about your experience of being involved with the research project. All data collected will be deidentified, and only used for research purposes.

### DATA COLLECTED

Details of participating practices is confidential. No patient identifying information is taken from the general practice. The data collected includes: The number of patients who attend the general practice in each age group (50, 52, 54, 56, 58, 60 years) and gender. The number of patients sent a SMS monthly at each age point before they are due to receive a NBCSP kit and whether the SMS is opened and what links within are opened, (positive narrative, aminated video about how to collect the test and bowel screening information). The number of patients who have a FOBT test result. Data will be collected in the intervention general practice monthly and at the end of the trial in the control general practices. The number of colonoscopies done over the six month period will also be collected.

# DOES GENERAL PRACTICE & PATIENT DATA REMAIN CONFIDENTIAL?

All information provided by the general practice for the study will remain strictly confidential. All data will be stored securely and disposed of 5 years after publication according to University of Melbourne guidelines. Data will be shredded if paper based or deleted from all computers, hard drives and/or servers. This information will not be used to assess individual clinicians' practice.

### WHAT ARE THE BENEFITS AND RISKS OF PARTICIPATION?

The benefits of participation in SMARTscreen outweigh the risks. There is minimum risk to patients to receive an SMS, as those who do are due to receive the NBCSP kit. Your general practice currently uses the Healthily GoShare Plus application to communicate with your patients,

YOUR PARTICIPATION IS VOLUNTARY, AND YOUR GENERAL PRACTICE CAN WITHDRAW AT ANY STAGE.