Address of screening centre

(font Arial 14)

Date to be inserted (font Arial 14)

Dear

|  |  |
| --- | --- |
|  | Today you attended your bowel scope screening appointment.  |
| Image result for flexible sigmoidoscopy | We were not able to do the test.  |
| http://cdn.shopify.com/s/files/1/0606/1553/products/Information_Sign_compact.png?v=1417850564 | We think you would benefit from more help to understand the test. |
| I:\Waterfront\Clinical Networks & Senate\Workstreams\Learning Disability Network\Improving access to cancer screening group\Julie Tucker\Bowel\Images\You_Choose2_1024x1024.png | Then you can make a choice about whether or not you want to take part in the test.  |
| http://cdn.shopify.com/s/files/1/0606/1553/products/Group-33_compact.png?v=1417855028 | Your local community learning disability team can help support you. Their contact details are:(Contact details of CLDT) |
| I:\Waterfront\Clinical Networks & Senate\Workstreams\Learning Disability Network\Improving access to cancer screening group\Julie Tucker\Bowel\Images\Staff_Nurse_1024x1024.png | You can also talk to the bowel screening centre.Our contact details are:(contact details and name of SSP) |
| Image result for tick crossImage result for flexible sigmoidoscopy | Bowel scope screening is important. We want to make sure everybody understands the test and can make a choice about taking part. |
| http://cdn.shopify.com/s/files/1/0606/1553/products/Telephone-Blue_compact.png?v=1417857576 | We will contact the community learning disability team to help you. |

Yours faithfully

Signature of lead SSP (Font Arial 14)