Cancer Prevention and Screening for practice nurses

Thursday 17th September 2026

SNHN.ORG.AU

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National Cancer Screening Programs

Breast screening

20 minutes
every 2 years could
save your life

Book your **free** breast screen.

- Women aged 50–74 should have a free breast screen (mammogram) every two years.
- Aboriginal and Torres Strait Islander women should start screening from age 40.

13 20 50
breastscreen.nsw.gov.au

Bowel screening

Do the test
when it comes
in the post

Did you know over 90% of bowel cancers can be successfully treated they are found early?

- People aged 50–74 get a free test kit in the mail every two years
- People aged 45–49 can order their first kit ncsr.gov.au/bowseltest

1800 627 701
DoTheTest.com.au

Cervical screening

A test every
5 years could
save your life

Talk to your doctor or nurse to book a Cervical Screening Test.

Recommended for women and people with a cervix aged 25–74 who've ever been sexually active — even if they've had the HPV vaccine.

There are two options to do the test:

- A doctor can take your sample
- You can take your own sample with a vaginal swab (self-collection)

Lung screening

A lung scan could
save your life

You may be able to get a free lung scan every two years.

Talk to your doctor if you:

- are aged 50–70,
- don't have any symptoms of lung cancer,
- currently smoke or stopped smoking in the last 10 years,
- smoked one pack a day (about 20 cigarettes) for at least 30 years (this is called 30 pack-years)

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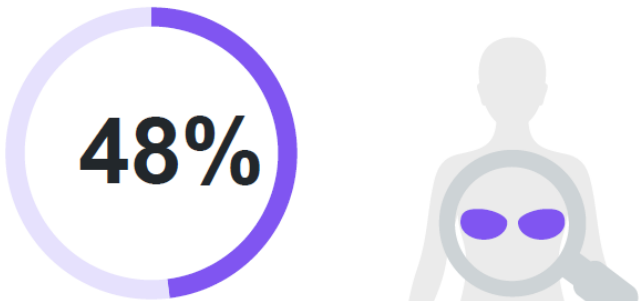
Northern Sydney Primary Health Network

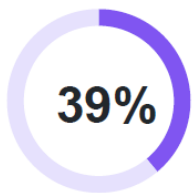
Screening rates (in NS PHN)

Breast screening

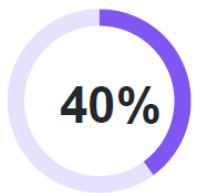
Participation rate for women aged 50–74 between July 2023–June 2025



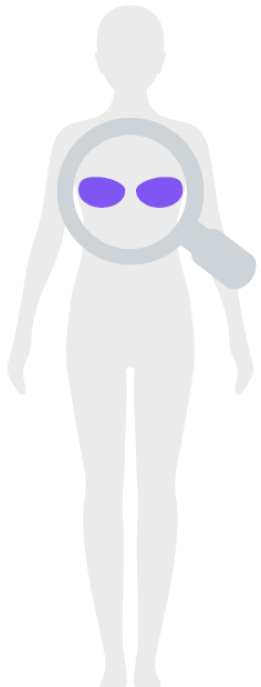
NSW (51%)



Aboriginal women

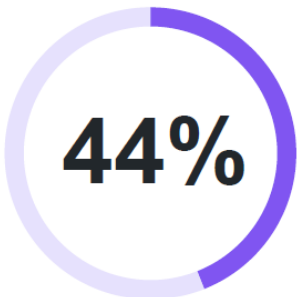


Culturally and linguistically diverse women

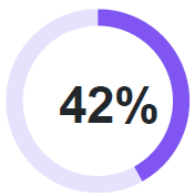


Bowel screening

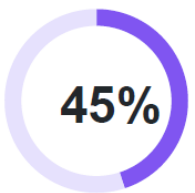
Participation rate for people aged 50–74 in 2024



NSW (40%)



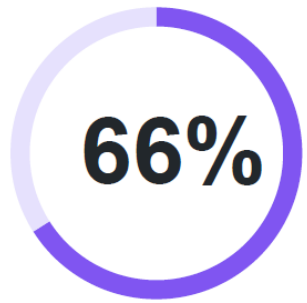
Male



Female

Cervical screening

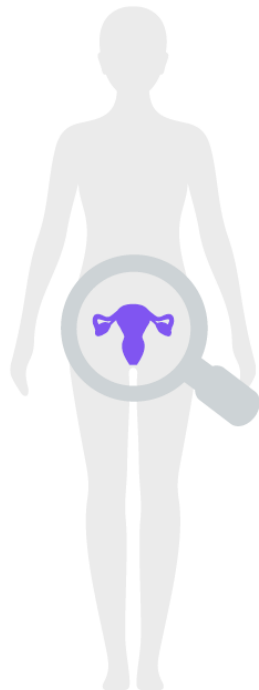
Participation rate for women aged 25–74 between 2020-2024



NSW (60%)

87%

Human papillomavirus (HPV) vaccination coverage (1 dose) at 15 years of age



Incidence and mortality (in NS PHN)

Total cancer incidence

2021	2025*
5,488	**5,919**
NSW (48,730)	**NSW (53,515)**

Total cancer mortality

2021	2025*
1,442	**1,490**
NSW (15,327)	**NSW (16,140)**

* 2025 data are projections only

National Cancer Screening Register (NCSR)

The NCSR provides a **single electronic record** for Australians participating in the bowel, cervical and lung cancer screening programs. It streamlines engagement and supports efficient screening for eligible participants and their healthcare providers.

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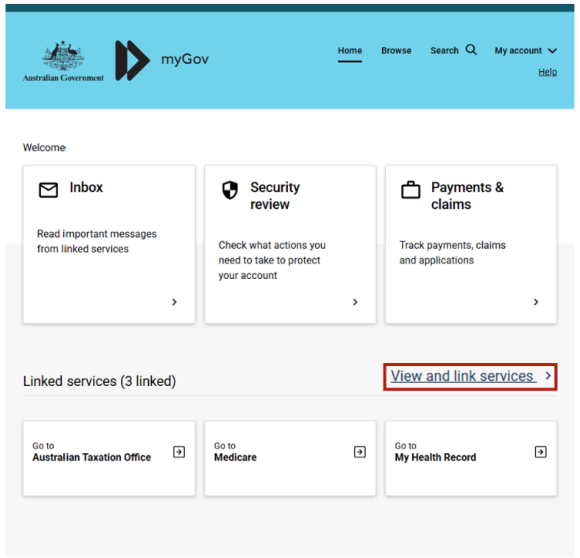
Accessing the Portal via myGov

The Participant Portal is accessed by **linking the National Cancer Screening Register (NCSR) to your myGov account**.

1. Log in to your **myGov** account.
2. Select **"View and link services"**
3. Choose **National Cancer Screening Register** from the list of available services.

This process is the same as linking other government services, such as My Health Record, the Australian Taxation Office, or Medicare.



Log in to myGov to link the NCSR Participant Portal to your account

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Access to the NCSR for healthcare providers

Healthcare Provider Portal

Via Clinical Software Integration

(Best Practice, Medical director, Genie, Communicare)

[Using the NCSR: Clinical Software Integration and Healthcare Provider Portal]

Benefits of having access to the NCSR

- **Identification of eligible people who are due and overdue for bowel, cervical and lung cancer screening**
- **Access to accurate screening information and submitting relevant forms electronically.**
- **Support timely screening, results management and follow-up.**
- **Reduction in missed screening opportunities and support earlier cancer detection.**

Accessing the NCSR – Healthcare Provider Portal

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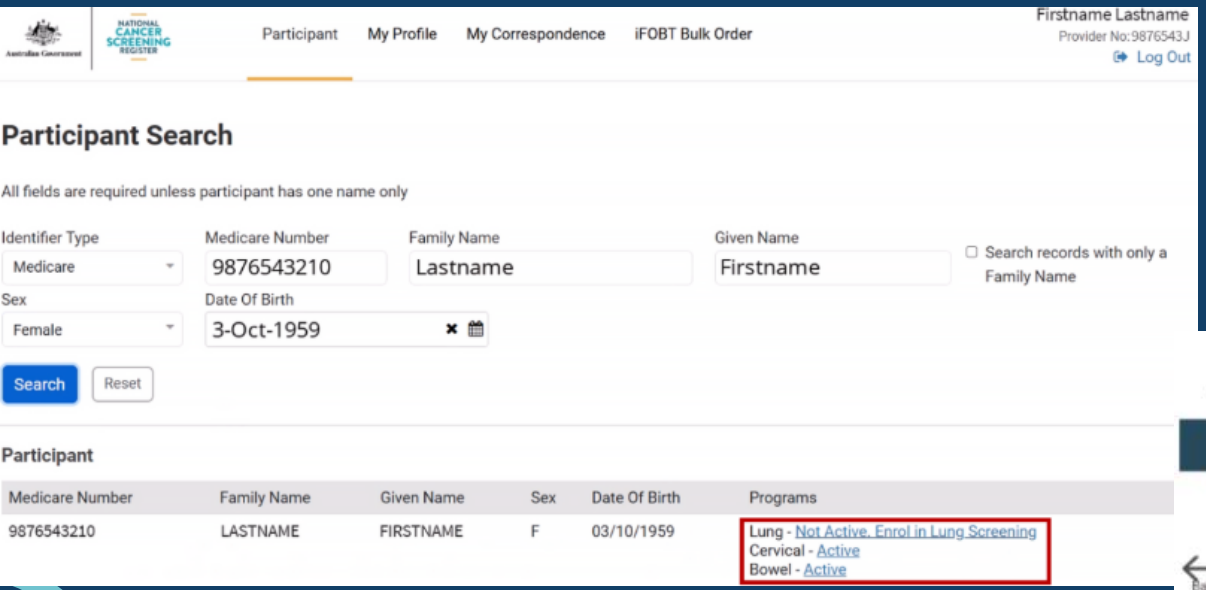

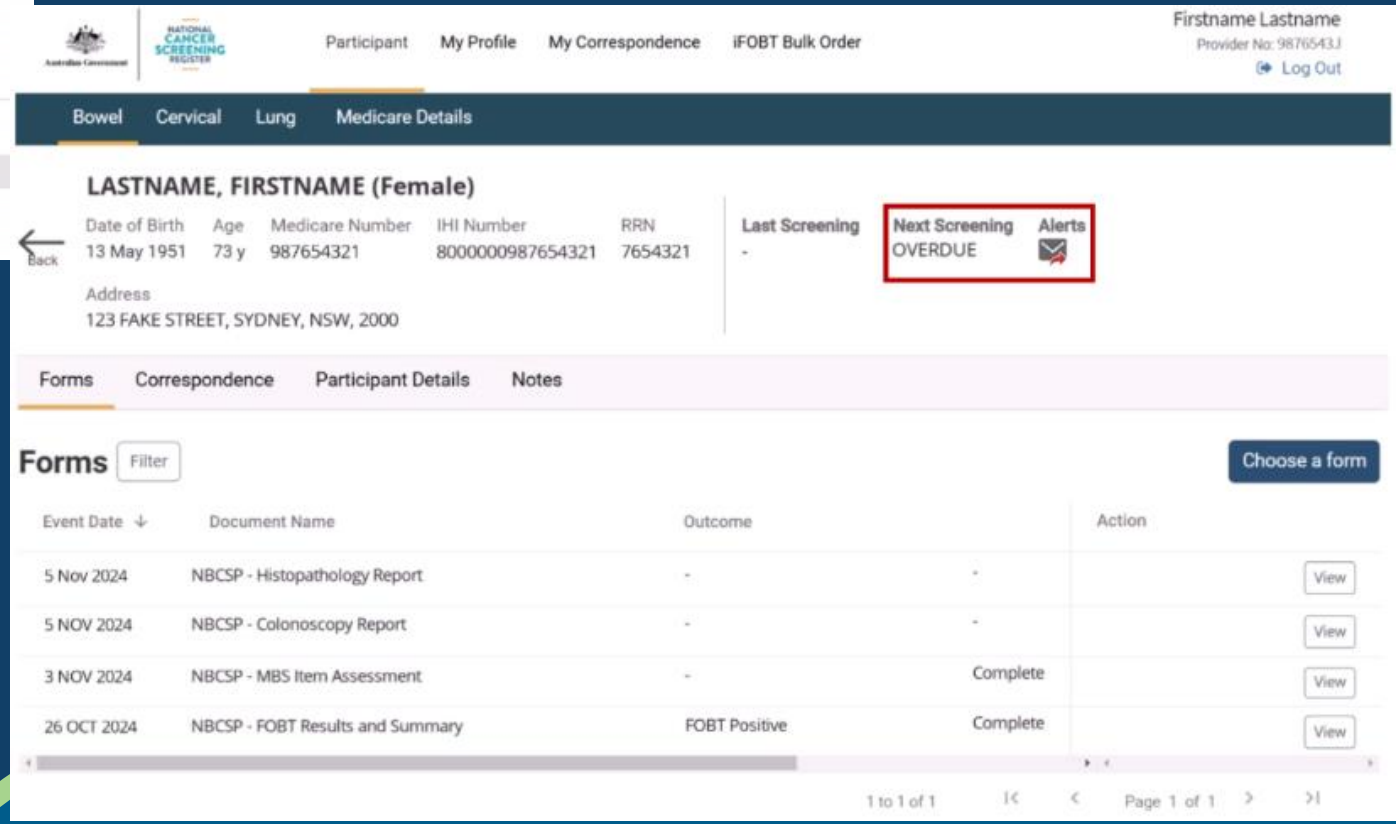

Accessing the NCSR – Best Practice NCSR Hub

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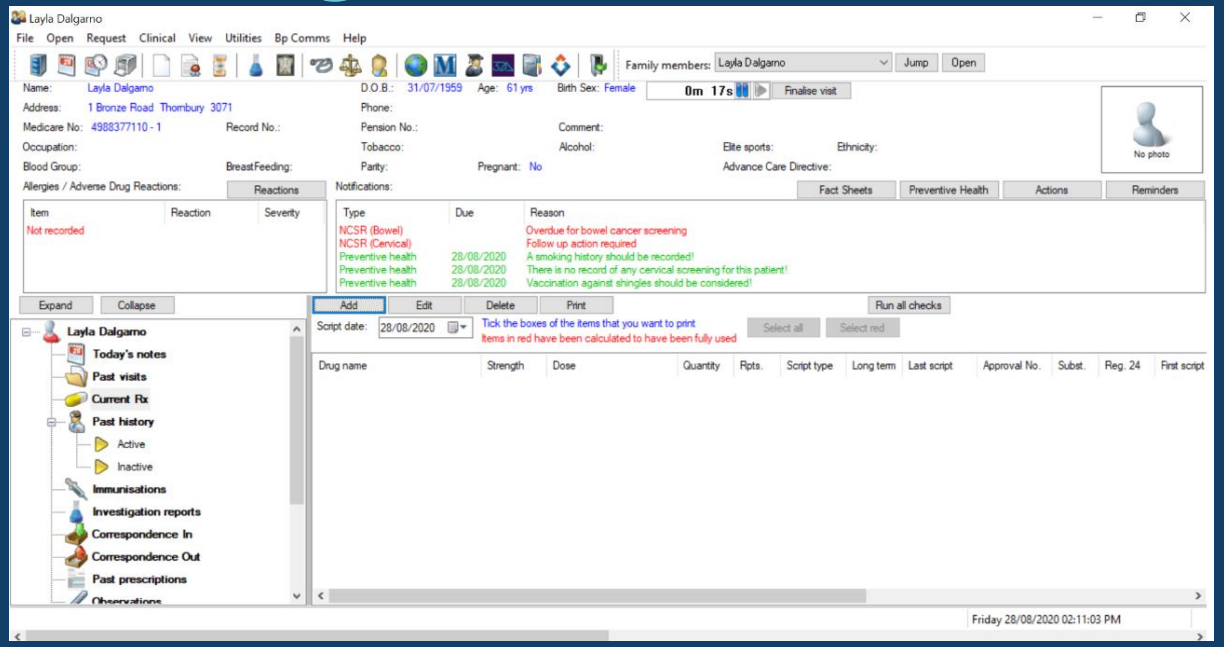
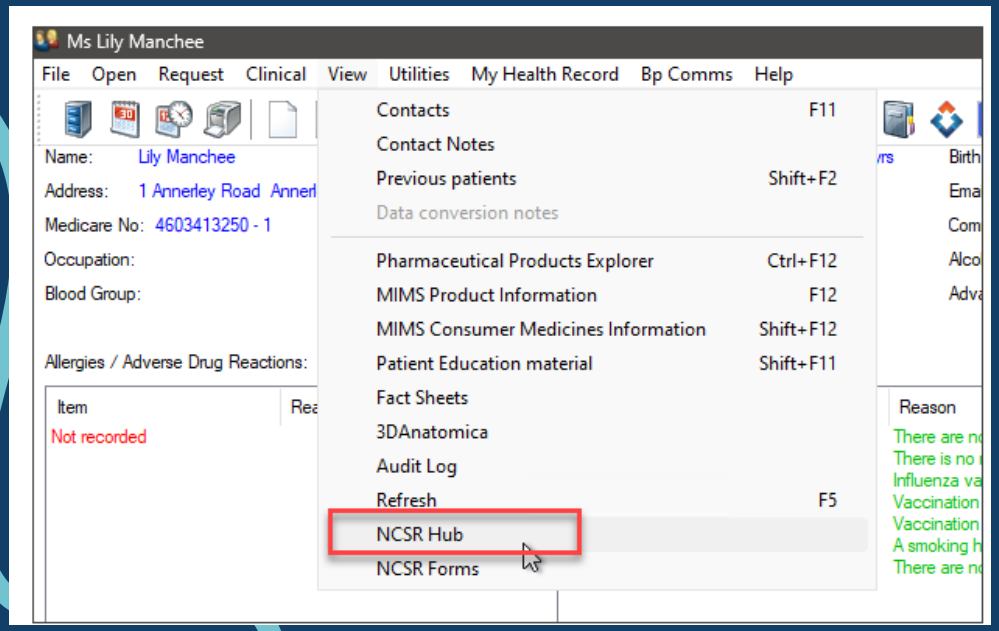
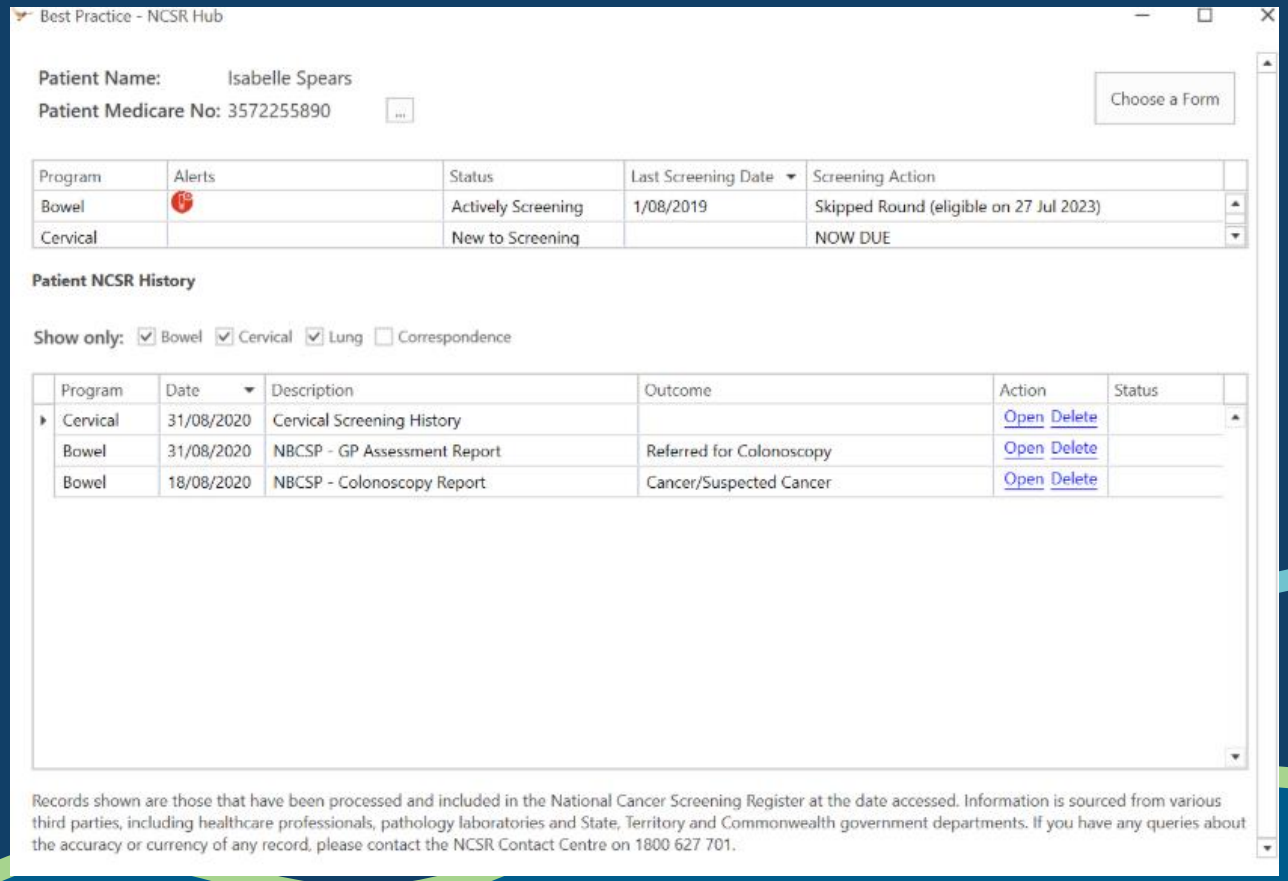
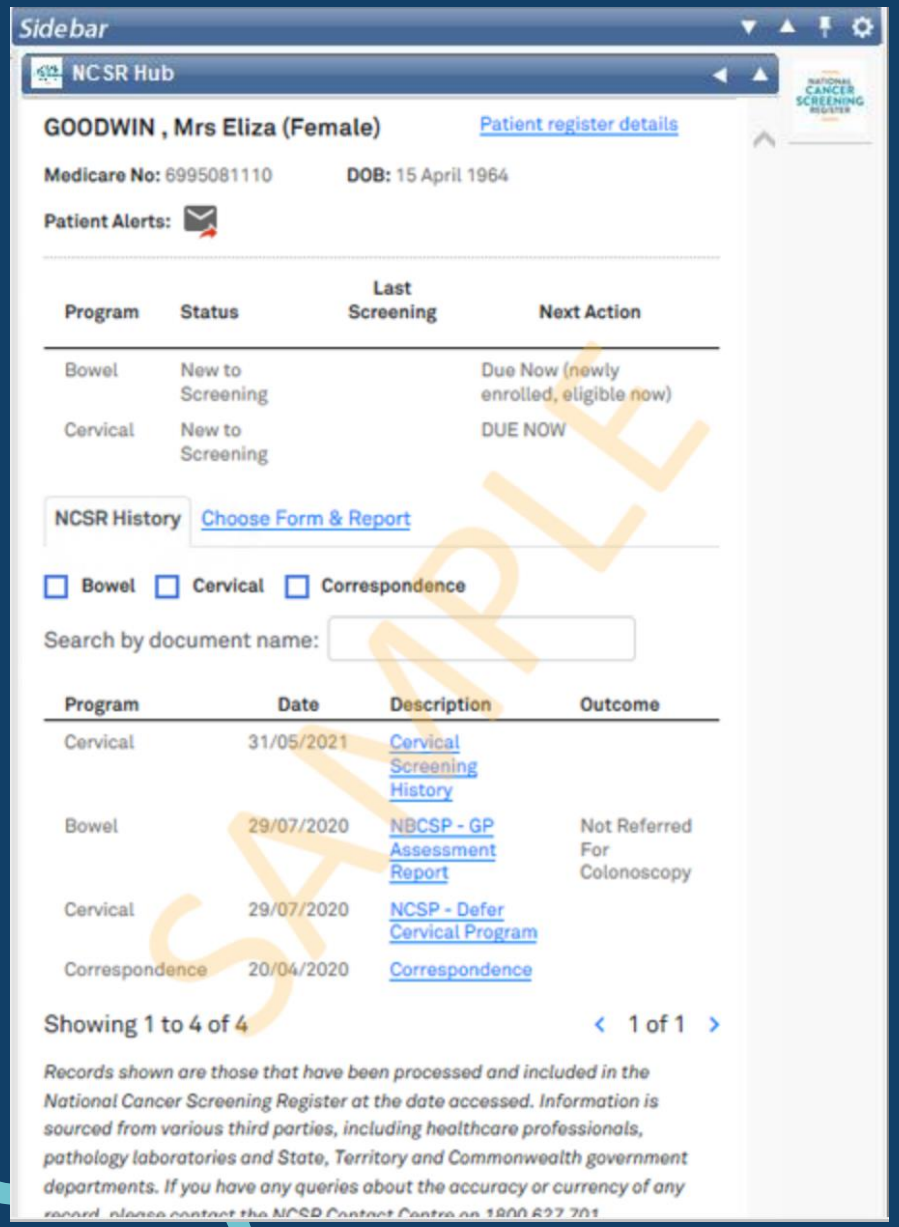
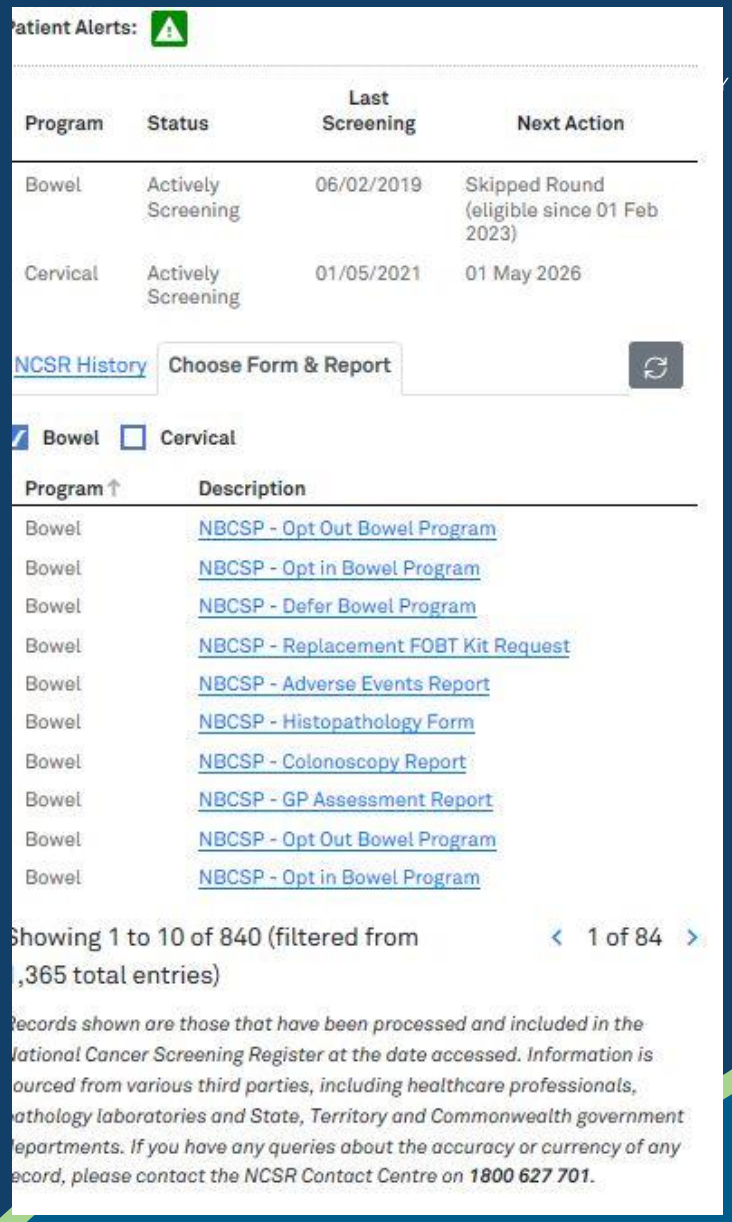






Accessing the NCSR – Medical Director NCSR Hub





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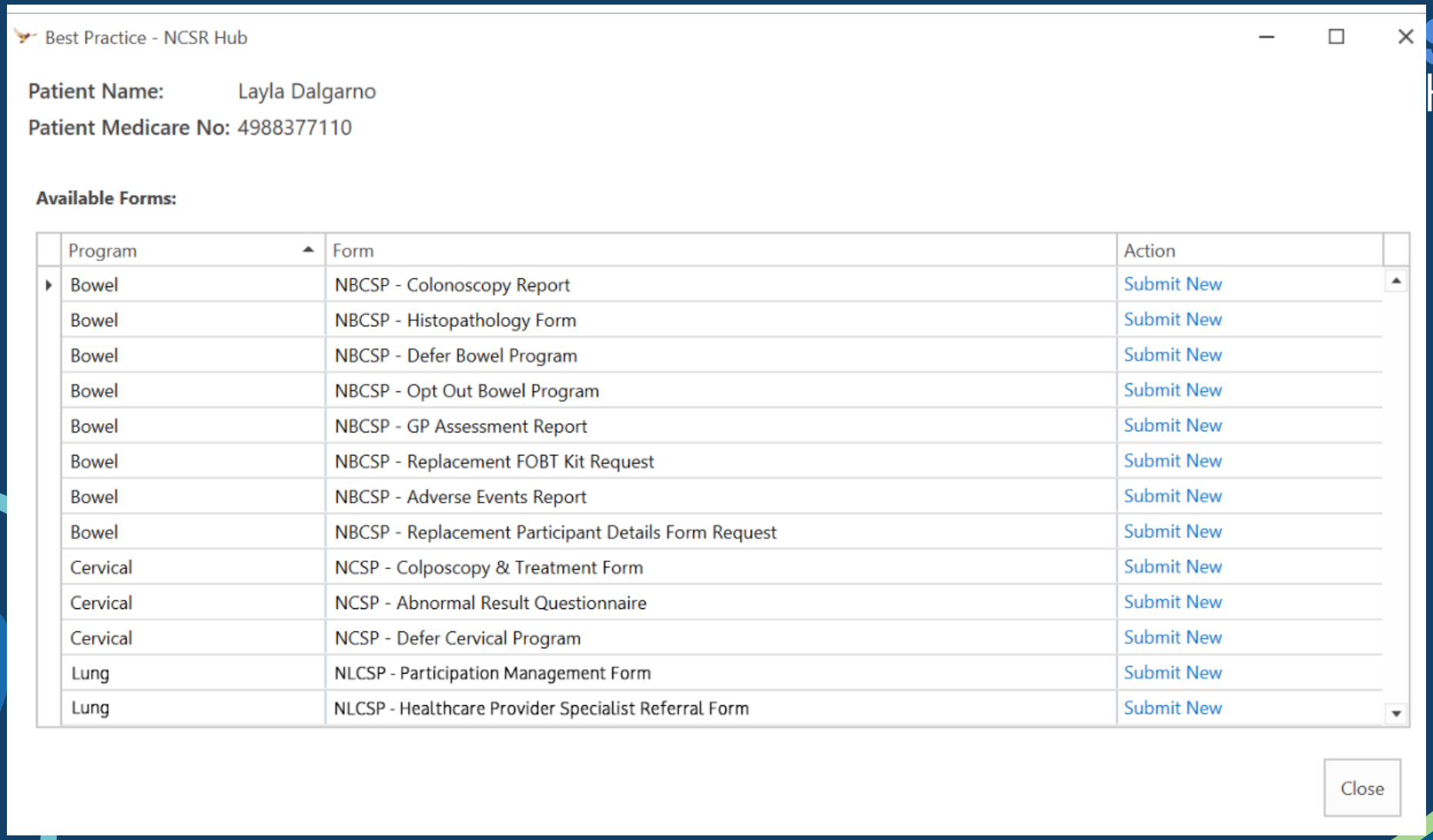
NCSR Forms For GPs



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Sydney North HealthPathways

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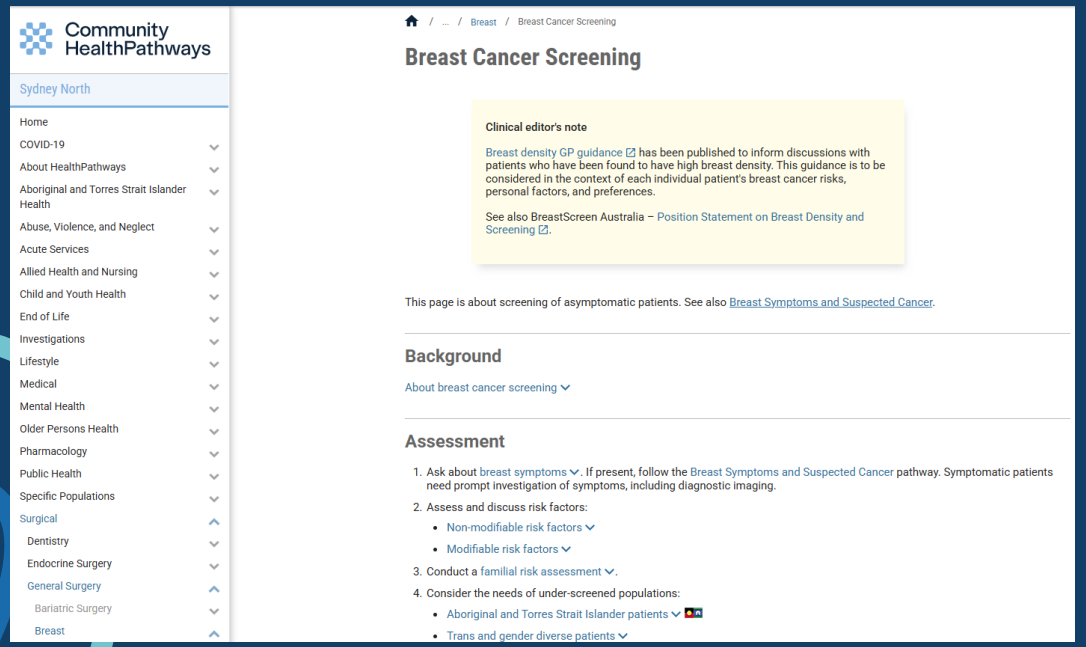
HealthPathways offers clinicians locally agreed information to make the right decisions together with patients, at the point of care.

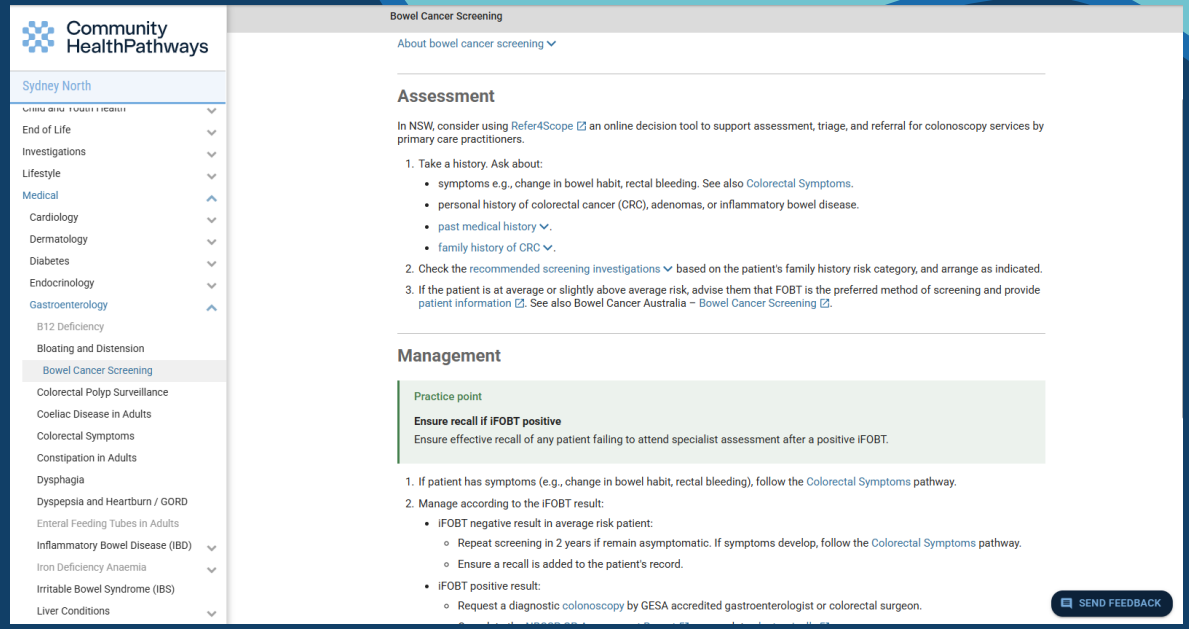
The pathways are designed primarily for general practice teams, but are also available to specialists, allied health professionals, and other health professionals in your region.

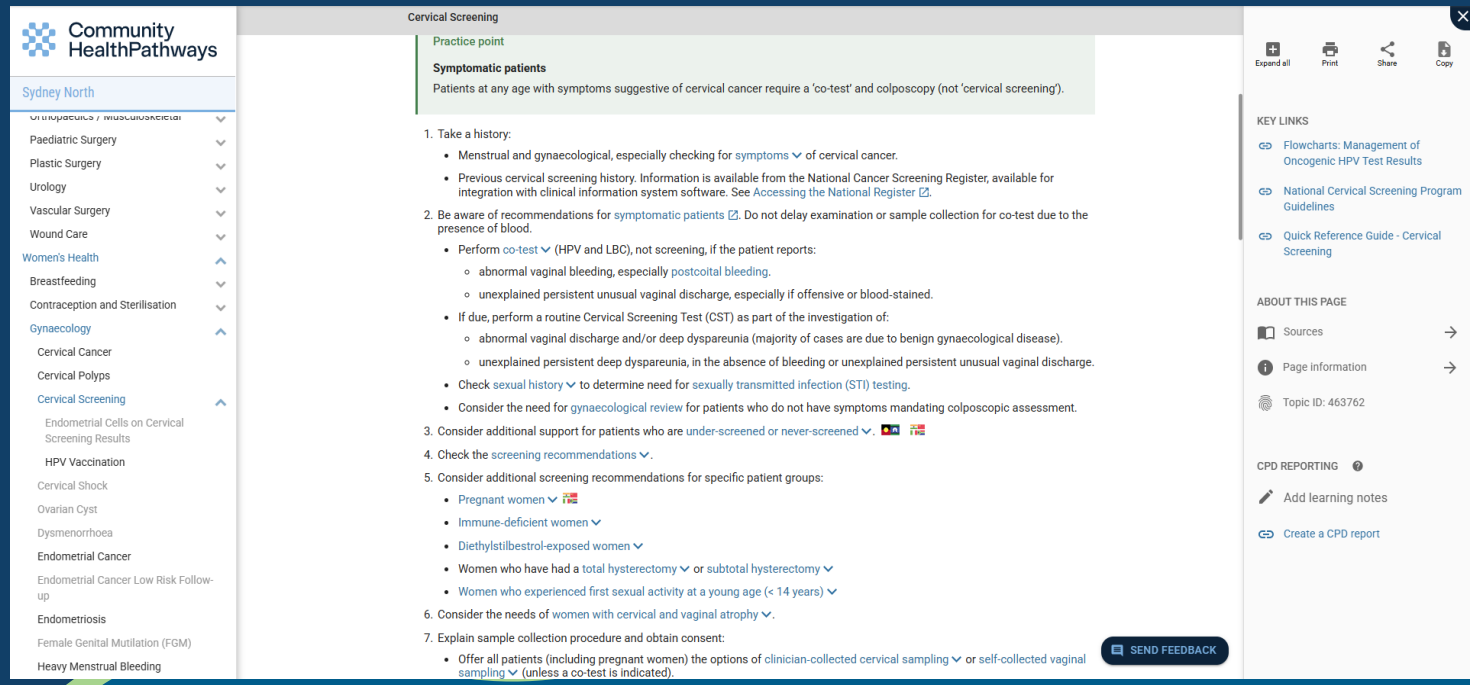
SEARCH HealthPathways:

Bowel Cancer Screening

Breast Cancer Screening







Direct Access Colonoscopy Service – Ryde Hospital

The service fast-tracks referrals for colonoscopy and aims to increase detection of early-stage bowel cancer and provide timely direct access to colonoscopy assessment.

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Eligibility & Referral Pathway

ELIGIBILITY

Positive FOBT • Age 45–74 • Lives in NSLHD • No complex history
• Suitable for Telephone appointment (no Cognitive impairment)

REFERRAL → PROCEDURE → FOLLOW-UP

REFERRAL

- GP referral via Healthlink
- Sufficient information for CNS triage (<30 days)
- GI specialist oversight

PROCEDURE

- CNS nurse-led telephone consult
- Support, education & booking
- Day-of-procedure support

FOLLOW-UP

- Discharge & colonoscopy report
- Post-operative phone checks from the day surgery unit
- GP letter after receiving pathology report

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Northern Sydney BreastScreen

Accessible, inclusive breast screening services across Northern Sydney

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📍 Locations

- RNSH Community Health Centre
- North Ryde
- Hornsby Ku-ring-gai Hospital
- Brookvale Community Health Centre
- Mona Vale Community Health Centre

🤝 Inclusivity Services

♿ Disability support
🖤 Aboriginal & Torres Strait Islander programs
🧠 Mental health supported sessions
🌏 Interpreter-assisted appointments
🏳️‍🌈 LGBTQI+ Rainbow Clinics

🩺 Breast Density Information

✓ Density reported using Lunit Insight MMG
✓ BI-RADS density information provided
✓ Reports sent to clients and nominated GPs
✓ Breast density factsheet supplied
✓ Four density categories used

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How to obtain Breast Screening data from CINSW

Cancer data and statistics

- Data available now
- Data available on request
- Data and research governance
- **Information for patients, clinicians and notifiers**
  - Request data about me
  - How and why we collect your data
  - Submit cancer cases to the NSW Cancer Registry
  - Request data about my patients
  - Prostate Cancer Outcomes Registry – NSW
- Data Breach Policy and Notification Register

Request data about my patients

Information on how clinicians can request information on their patient's cancer diagnoses or updates on patients they have lost contact with.

Family cancer service clinicians and other health professionals may request a cancer verification to help assess the risk of hereditary cancer for patients and their families. See **cancer verifications service** for more information.

General practitioners requesting information on clients that have screened with BreastScreen NSW can do so by completing the **GP Data Request Form: BreastScreen NSW** and emailing this to: **cinsw-screeningandpreventiondata@health.nsw.gov.au**

Clinicians participating in the NSW Prostate Clinical Cancer Registry may have access to their own case level data. Case level data refers to data provided by that participating clinician to the PCCR. Information obtained from other sources will not be provided. Please contact **CINSW-DARenquiries@health.nsw.gov.au**

Should you require death data please contact the NSW Department of Justice: **researchunit@justice.nsw.gov.au**.

Entering Breast/Bowel Screening Results to Investigation reports(BP)/Results Tab(MD)

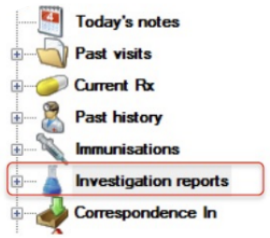
Breast screening data must be entered into the Investigation Reports area in Best Practice (BP) Premier in order for it to be recognised in search queries. The test name should be entered as '**Breast Mammogram Screening**'. The test result can be entered from the Patient record.

To add Mammogram Test Result data:

From the Patient Record:

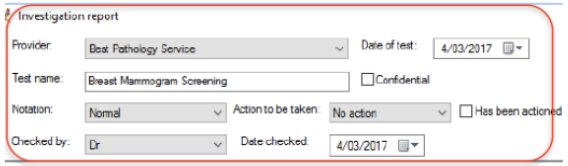
1. Select the **Investigation Reports** item on the menu (left of patient screen)
2. **Select the Add button**
3. **Enter the details of the Mammogram Screening test:**
   - Provider
   - Test name = Breast Mammogram Screening
   - Date of test:
   - Notation:
   - Action to be taken
   - Has Been actioned
   - Checked By
   - Date Checked
   - Comments (if necessary)
4. **Select the Save button.**

1.



2.

3.



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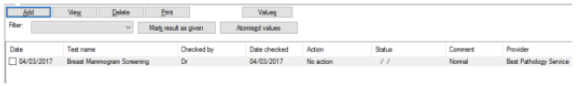


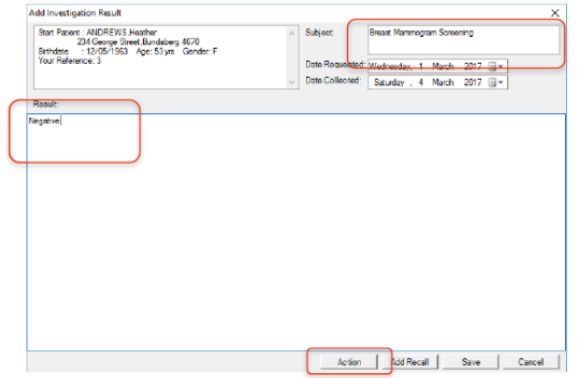
Breast screening data must be entered into the Results tab in Medical Director in order for it to be recognised in search queries. The test name should be entered as 'Breast Mammogram Screening'. The test result can be entered from the Patient record.

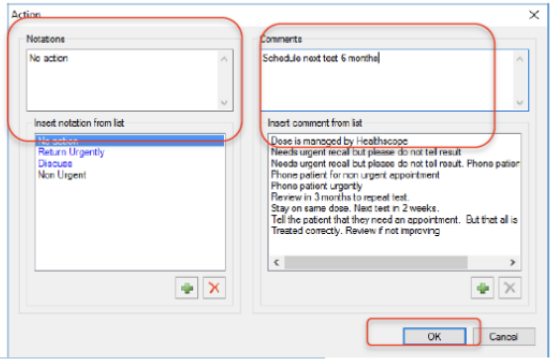
To add Mammogram Test Result data:

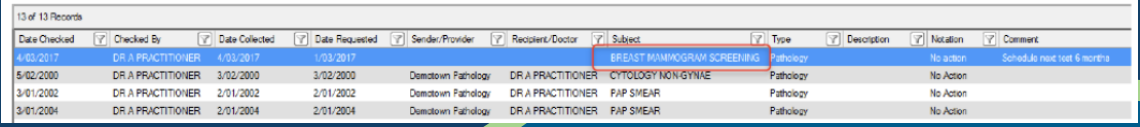
From the Patient Record:

1. Select the **Results** tab
2. Select the red '**+**' symbol at the top left of screen.
3. **Enter the details of the result:**
   - Subject : "**Breast Mammogram Screening**"
   - Date Performed:
   - Date Collected:
   - Result:
4. Select the **Action** button
   - Choose a **Notation**
   - Enter a **comment as required.**
5. Select **OK**.
6. Select **Save**.

This test result will be added to the list of investigation results for the patient in the Results tab.







Role of Practice Nurses in Cancer Prevention and Screening

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- Family history recording - other cancers and risk
- Lifestyle factors conversations
- Smoking and Alcohol recording – opportunity to ask and record accurate details and consider whether eligible for Lung Screening Program
- Dietary elements
- Accessing the Hub and using the overdue notifications to prompt conversation
- Incorporating into Health assessments and care plan/reviews
- Offering self-collect sample for cervical screening
- Offering NBCSP home test kit (AAM)
- Skin type and protective measures; skin checks referral
- Ask whether concerns

Health assessment (in NS PHN)

2023-2024
8%
of Aboriginal people participated in an Aboriginal health assessment*
NSW (28%)

2022-2023
19%
of Aboriginal people received follow-up services within 12 months of an Aboriginal health assessment*
NSW (37%)

* MBS item 715

Prevention (in NS PHN)

2024
5%
of adults smoked (daily or occasionally)
NSW (10%)

2023-2024
71%
of regular clients* have their smoking status record and result in their GP record
National (69%)

2024
68%
of adults consumed alcohol within recommended levels
NSW (69%)

2023-2024
78%
of regular clients* have their alcohol consumption status recorded in their GP record
National (68%)

* regular client is a person that has visited a practice three or more times in the two years prior to the date of data extraction.

2023
65%
of Aboriginal women quit smoking during pregnancy
NSW (33%)

NSW GOVERNMENT

Primary Sense Reports

Breast and Bowel Cancer Screening

PRIMARY SENSE

Bowel and Breast Cancer Screening

Demo Practice

23 April 2025 09:55

Which patients are included in this report? | What data is in this report? | How do we use this report? | What are ACG patient complexity levels?

Which patients are included in this report?

- Patients 50 to 74 years without evidence of bowel and or breast cancer screening completed in the past 2 years - noting not all screening data may be sent to the GP. Patients with related interventions e.g colonoscopy are not included as they are likely already known to the GP
- Patients recorded as 'active' in the practice software

Male patients eligible for bowel cancer screening

N/A means not recorded

Information about this table

Show 25 patients per page

Export To Excel | Export To CSV | Export To CSV (SMS)

Search:

Remove	Patient Name	Patient Phone	Last Visit	Existing Appt	GP Name	Age	Smoking Status	Alcohol Status	Obese
Remove	Borne, Mark	0457391167	2022-01-14		Dr Wang	54	Ex	No harm	N
Remove	Patison, George	0435269967	2021-10-13	2025-07-14	Dr Wang	59	N	Low Risk	Y
Remove	Taylor, Anthony	0523479945	2025-01-22		Dr Wang	45	N/A	N/A	N
Remove	Travis, Donald	043567297	2024-08-02		Dr Wang	45	N	High Risk	N
Remove	Jones, Verity	0435279986	2023-11-05	2025-07-04	Dr Wang	73	Ex	N/A	Y

Female patients eligible for breast cancer screening and or bowel cancer screening

The 'screening' column indicates which screening could be done. N/A means not recorded

Information about this table.

Show 25 patients per page

Export To Excel | Export To CSV | Export To CSV (SMS)

Search:

Remove	Patient Name	Patient Phone	Last Visit	Existing Appt	GP Name	Age	Smoking Status	Alcohol Status	Obese	Screening
Remove	Jeffries, Emina	0423485567	2022-04-18		Dr Wang	58	N	N/A	Y	Bowel and Breast
Remove	Philps, Deborah	0436378992	2022-06-07	2025-07-01	Dr Wang	55	EX	N/A	N	Bowel and Breast
Remove	More, Tracey	0437289977	2020-07-24		Dr Wang	45	Y	High Risk	N	Bowel
Remove	Fresia, Sally	0432478890	2024-10-17		Dr Wang	45	Y	No harm	N	Bowel

Female Aboriginal and Torres Strait Islander patients between ages 40-49

The 'screening' column indicates which screening could be done. N/A means not recorded

Information about this table.

Show 25 patients per page

Export To Excel | Export To CSV | Export To CSV (SMS)

Search:

Remove	Patient Name	Patient Phone	Last Visit	Existing Appt	GP Name	Age	Smoking Status	Alcohol Status	Obese	Screening
Remove	Abbot, Joan	0428756678	2022-02-18		Dr Wang	40	N	N/A	N	Breast

Showing 1 to 1 of 1 entries

Previous 1 Next

Primary Sense reports

Cervical Cancer Screening

Patients Due Cervical Screen Testing

Information about this table

Show 25 patients per page

Export To Excel | Export To CSV | Export To CSV (SMS)

Search:

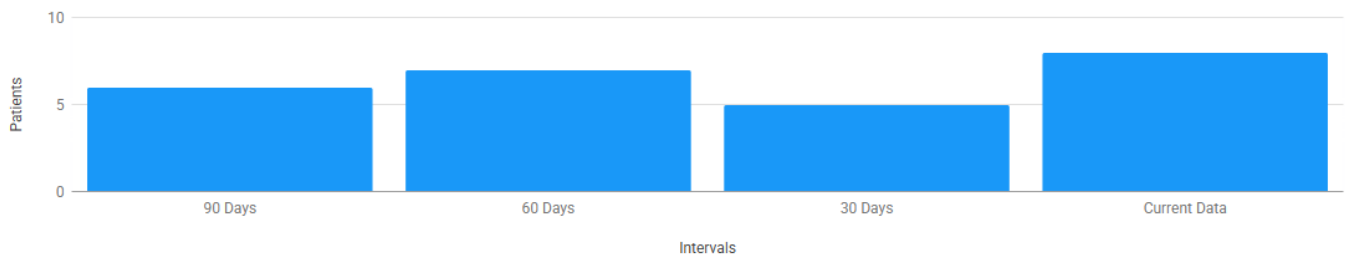
Remove	Patient Name	Patient Phone	Last Visit	Existing Appt	GP Name	Clinic	Age	CST date later than 5 yrs
Remove	Jones, Esme	0423203346	2024-10-03	2025-07-01	Dr Bell		25	
Remove	Taylor, Samantha	0423457789	2021-10-09		Dr Bell		25	
Remove	Smit Mary	0423203369	2023-07-02	2025-07-03	Dr Sharma	Home Clinic	27	
Remove	Black, Grace	0423439908	2022-04-16		Dr Bell		35	
Remove	Whitfield, June	0423245586	2024-01-19	2025-06-30	Dr Sharma	Home Clinic	33	
Remove	Cootes, Alicia	0423468892	2023-12-09		Dr Sharma	Home Clinic	34	2020-04-10
Remove	Shah, Sanvi	0423296657	2024-08-07		Dr Sharma	Home Clinic	56	2020-01-17
Remove	Jones, Layla	0423206678	2025-03-14		Dr Bell		64	2019-06-14

Showing 1 to 8 of 8 entries

Previous 1 Next

Report Synopsis

Patients due cervical screen testing in the practice across 30 day intervals



Patients

All Doctors

View As Columns

Report-Related Data:

Patients Due Cervical Screen Testing : 8
Patients With Recent Screening : 6
Patients Self collected : 3
Patients With HPV Vaccine : 1
Patients Opted Out Or Ineligible : 2

Note: Empty interval columns will populate over time.

Primary Sense reports

Lung Cancer Screening

phn NORTHERN SYDNEY
An Australian Government Initiative

Sydney North Health Network

Patients possibly eligible for the National Lung Cancer Screening Program

Information about this table

Show 25 patients per page

Export To Excel | Export To CSV | Export To CSV (SMS)

Search:

Remove	ACG Complexity	Patient Name	Patient Phone	Last Visit	Existing Appt	GP Name	Clinic	Age	Smoking Status	History of Cessation Medications	Smoking Start Date	Smoking Quit Date	Respiratory Diagnosis	Low Dose CT Scan Date	Smokes Per Day	Pack Years
Remove	3	Borne, Mark		2023-11-06		Dr Jones		54	Ex-smoker		2000-01-01	2021-01-01	Asthma		40	44
Remove	4	Philps, Denise	0423289141	2025-06-20		Dr Jones	Main surgery	55	Smoker	varenicline	1980-01-01		COPD	2025-07-22	15	34
Remove	3	Jeffries, Emina	0423468976	2024-12-10	2026-02-17	Dr Jones	Main surgery	58	Smoker							
Remove	4	Patison, George	0438251167	2025-05-13	2026-02-19	Dr Jones		59	Ex-smoker		2019-01-01	2022-01-01			15	3

Showing 1 to 4 of 4 entries

Data quality considerations

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Sydney North Health Network

Data extraction tools generally draw from evidence of screening testing recorded in the pathology request(cervical, lung), as a reason for the visit, and from the results coming back to the practice.

If clinician learns that a screening has taken place- from either NCSR, BreastScreen or patient, accurate details from the NCSR and BreastScreen, may be entered into clinical software. This would mean the patient would not show as overdue in report.

Important that patient data is accurate and comprehensive e.g. smoking status, evidence of colonoscopy as bowel screening method, hysterectomy. Depending on how coded/included and the report, patient may show up in the report with an exclusion or not show at all.

Cervical screening investigations are requested like any pathology request, but added to the Cervical Screening section of the patient record in BP.

Not all screening results are sent to the GP(bowel kits and BreastScreen due to self-referral– only if identified.

Opt Out and Opt In of Screening is available for HCPs and participants to further improve data and reduce wastage.

Patients with active disease recorded are generally excluded from reports.

Quality Improvement Ideas

- Use NCSR integration hub/widget to proactively identify eligible patients at the time of consultation
- Incorporate the screening question at each eligible Health Assessment and Care Plan/review, “well women and man" checks, opportunistic screening conversation/invitation on the day but also via pre-planning (using PS report) /appointment book
- Ensure CST kits and self-test kits & info are available in consult rooms- inform clinicians
- Ensure team know how to order & complete form for practice supplied bowel home test kits
- Calculate baseline participation numbers and compare after a ~3 month active campaign
- Use social media/website/posters/brochures to inform and promote a cancer screening focus; offer nurse dedicated session(s) for patients needing assistance/ teaching of self-collection of CST
- Implement action plans for cancer patients and provide active management of patients with cancer
- Promote Cancer Awareness Weeks

Resources

- HealthPathways
- SNHN Website and Video Library
- New Alcohol & smoking cessation modules within the CI NSW Toolkit
- NCSR
- Primary Sense data extraction tool
- GP Data Request Form: BreastScreen NSW