

## The implementation of the Faecal Immunochemical Test (FIT) across the South West

### May 2018 Project Update Bulletin

#### What's New?

- **FIT Guidance for GP's:** At the beginning of May the Steering Group wrote to all of the clinical commissioning groups (CCG's) across the Peninsula and SWAG Cancer Alliances asking them to notify GP's and secondary care colleagues in their areas that FIT would be implemented from mid-June. We also provided CCG's with educational information on the use of FIT in the form of a video, written guidance and a quick reference guide.
- **FIT Information Video** A video has been produced to be shown in GP practices to provide information on this new test including who it is for, how to refer patients for the test and what to do with the result.

The video can be viewed at this link: <https://youtu.be/zb1o8ykvS6U>

- **Cohort of patients eligible for the test:** In SWAG and Peninsula, FIT can be requested in a subgroup of patients from the criteria described in the 2015 NICE guidelines on the recognition and referral of patients with suspected cancer (NG12) and referred to in more recent diagnostic guidance (DG30). These are people without rectal bleeding who are:
  - Aged over 50 with unexplained abdominal pain or weight loss
  - Aged 50 to 60 with changes in their bowel habit or iron deficiency anaemia
  - Aged 60 or over with anaemia without iron deficiencyThis set of criteria differs very slightly from those recommended in DG30 or NG12. This is because our provision of this service is part of a project to evaluate the impact of the test. Pending the evaluation of the project we may expand the criteria. For the moment though, samples for patients under the age of 50 will be rejected. If a patient has concerning symptoms and is not eligible for FIT, GP's are advised to seek advice via the usual channels.
- **Advice to GPs about the results:** If the Faecal occult blood test is positive GP's are advised to consider using a referral for suspected cancer under the local 2WW arrangements. GP's are further advised that occult blood in the stool can be caused by a wide variety of benign conditions as well as colorectal cancer, and further assessment may be appropriate to rule these out before referring. If the Faecal occult blood test is negative: GP's are advised that FIT negative patients have an extremely low risk both of colorectal cancer, and of high risk adenoma. GP's are further advised that the patient therefore does not need referral for suspected colorectal cancer, but as always you should consider seeking specialist advice if worrying symptoms persist. In patients with symptoms of significant concern, GP's are advised to consider non-luminal cancers and may still wish to send a suspected upper GI cancer referral. Advice and guidance services may also be used as per local arrangements.

- Changes to 2WW Referrals:** The qFIT has been recommended though NICE DG30 (published last year) as the test to assist in determining which of this cohort of patients should go into the 2WW system. Patients with a positive test for the relevant groups will access the 2WW service in the usual way via the referral form. CCG's are in the process of updating referral forms in advance of implementation to capture a positive fit test and the value.
- What is the level of confidence in the test?** The patient population for whom we are recommending FIT are at less than 3% risk as they do not meet the NG12 suspected cancer referral criteria. At the test threshold we are using, and in this specific population, research demonstrates a negative predictive value of over 99% and specificity variously reported at 84 or 100%.

**What's Next?**

- Implementation of FIT:** We are now entering the implementation phase. At the end of the month GP Practices will begin to receive their sample packs. The timeline for implementation is set out below.

Date	Action	Actionable by:
Circa 9 <sup>th</sup> May	Letter to CCG's from Steering Group to provide GP educational tool kit, video, written guidance and explain how to access further resources.	FIT Steering Group
From 16 <sup>th</sup> May to 27 <sup>th</sup> May	CCGs to write to GP's to: <ul style="list-style-type: none"> <li>Confirm they may commence using the tests once stock of tests are received.</li> <li>Provide education tool kit, video, written guidance and explain how to access further resources.</li> </ul>	CCG's
From 16 <sup>th</sup> May to 27 <sup>th</sup> May	CCG's to write to secondary Care to update on start date and explain how to access further resources.	CCG's
From 27 <sup>th</sup> May May	Sample kit and letter to GP's including confirmation of how test results will be received.	Laboratory Provider
Mid-June	Stock of test packs to be distributed	Laboratory Provider

We continue to raise awareness of this test via local GP events. If you have an event and would like us to support it, please contact [Sarah-jane.davies@nhs.net](mailto:Sarah-jane.davies@nhs.net)

#### Key highlights for May from the project plan

- Steering group wrote to inform CCG's of the process for go live and provide them with information to distribute to GP's.
- CCG's are writing to all GP's and providing educational information provided by the project team and information on how to access further support.
- Programme of educational / informative events across the South West commenced.
- Laboratory verification of assay performance, appropriate training and documentation completed.
- Laboratories have established the interface between analyser and host computer system for transmission of results.
- Laboratories have tested data extract procedure on both sites and reporting mechanisms; and, reporting of results to GP practices across alliance area from both Exeter and Bristol.
- The distribution plan for sample packs and test packs is in place.
- Laboratories have placed an order for packs for delivery to Bristol and Exeter for distribution. Distribution mechanisms with local laboratories are confirmed.
- Mechanisms to replenish packs in GP practices and monitor requirements agreed.
- 3 largest surgeries identified in Peninsula and SWAG area to undertake more focused audit and design methodology for securing feedback about implementation including staff views and patient experience .
- Metrics for project evaluation agreed.
- Practice run of distribution of tests completed.

#### Next Steps for June

- Packs prepared and distributed to GP Practices across the South West.
- Reporting templates and timetables agreed with Laboratories and Cancer Managers
- Information gathering exercise into how FIT is being implemented elsewhere in the country
- Feedback from the Cornwall Audit to Steering Group and report to stakeholders via June Bulletin
- Review of implementation and any learning identified.
- Review of laboratory financial package to include previously unknown costs of tests and estimate project length against variable take-up.
- Patient experience / GP feedback plan commenced

#### Where can I access further information and support?

- Contact the programme team for information about the project: [sarah-jane.davies@nhs.net](mailto:sarah-jane.davies@nhs.net)
- For more information about the test kit visit: [www.exeterlaboratory.com/](http://www.exeterlaboratory.com/) and [www.nbt.nhs.uk/severn-pathology](http://www.nbt.nhs.uk/severn-pathology)
- For more information about FIT the following website might be of interest: [www.faecal-immunochemical-test.co.uk/](http://www.faecal-immunochemical-test.co.uk/)