

New Colorectal 2 WW and FIT Referral Pathway Pilot for Yeovil District Hospital (YDH) and Musgrove Park Hospital (SFT) patients – Colorectal Diagnostic Hub

Background

In November 2020 it was recommended that Primary Care should arrange a qFIT test for all low-risk patients with NG 12/DG30 bowel symptoms (change in bowel habit, weight loss, abdominal pain) and then only refer these patients via the 2 WW lower GI pathway if their qFIT was ≥ 10 mg/g to reduce the number of unnecessary colonoscopies being performed. It should be noted that conditions other than cancer can cause a raised qFIT (eg Ulcerative Colitis, Crohns, Diverticulosis) and that qFIT should not be used for patients with active rectal bleeding.

The age range for qFIT was expanded down to the age of 18 years due to the increasing incidence of colorectal cancer in younger patients, particularly in the South West.

If the results of a qFIT test are not known prior to the 2 WW referral being made this can lead to the wrong pathway being used, and delays at the start of the pathway in secondary care.

Current Process

If the patient is low-risk of having a lower GI cancer and has NG 12/DG30 bowel symptoms (change in bowel habit, weight loss, abdominal pain) currently GPs complete a paper referral form and hand this with a qFIT test kit to the patient and it is then up to the patient to complete it and post it to Southmead. This process does not have an audit trail. The result is then reviewed by the GP and if the qFIT is ≥ 10 mg/g then the patient is referred via the 2 WW Lower GI referral form with the result.

Unfortunately, qFIT tests do not always get done as shown by secondary care audits and some referrals are currently being made without the required qFIT results being included causing delays.

Colorectal Diagnostic Hub - Somerset Pilot

To ensure that the Lower GI 2 WW referrals that require a qFIT have the results available at the time of referral a new Colorectal Diagnostic Hub is going to be piloted for patients referred to either Somerset Foundation Trust or Yeovil District Hospital patients **from 8th November 2021**. Somerset Foundation Trust has secured funding to establish this Somerset-wide Hub for 12 months, as part of SWAG Cancer Alliance 2021 Innovation Funding.

The aim of the Hub is to create a single point of contact for GPs for all qFIT requests and 2WW Lower GI referrals. **GPs will no longer be required to give the patient the qFIT form and qFIT test kit prior to making a 2 WW Lower GI referral for patients being referred to YDH and Musgrove Park Hospital**, instead there will be a new form on C The Signs which will not require a qFIT result. GPs will still need to examine the patient (including a digital rectal

examination) and request bloods, as they always have done, prior to making the referral. The new 2 WW Lower GI Referral form will automatically be received by the Hub via eRS once primary care has made the referral in the normal way.

If the patient does not require a qFIT test then the 2 WW Lower GI referral will be passed directly on to secondary care once all bloods have been completed as before and the patient will be contacted by them.

If a qFIT is required, once the Hub receives the referral form, the Hub will undertake an administrative triage to ensure suitable patients have completed a qFIT test. The Hub will order the qFIT via Ordercomms and send the patient the labelled qFIT test in the post. The Hub will be responsible for chasing up the patient and the result. Once the patient has completed the qFIT test they will bring it back to the Surgery for it to go via internal post (as do all other pathology samples) to Somerset Pathology Services at Taunton to be processed and sent to Southmead. The benefit of this qFIT process is that it will be auditable and will no longer be the responsibility of primary care.

Please ensure that bloods are done prior to the referral being made to avoid the need for patients having to attend the surgery again.

Positive qFIT results will automatically be referred onto secondary care by the hub, the patient and referring GP will be notified of this by the Colorectal Hub.

If the qFIT results are negative the 2 WW Lower GI referral that was made will be voided and no further action will be taken by the hub or secondary care. Patients will be informed of this and the letter will be copied to the referring GP. At this point patients will need to be safety netted by primary care.

If there are any ongoing clinical concerns then the patient can be re-referred back into the 2WW Lower GI service using the previously used Lower GI 2WW referral form on C the Signs but with the box "FIT negative with ongoing high clinical suspicion of cancer (Please include details in referral letter below)" being ticked and an accompanying referral letter being written and attached. These can then be sent via eRS and the referral will go through to the 2 WW Lower GI service without further delay.

Further Information

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