FIT in colorectal pathways. Primary care update June 2023

- Decision support flow chart for FIT in primary care
- Safety netting tools for FIT requesting
- IIF reminder + codes
- DES recommended QA/ QI activity

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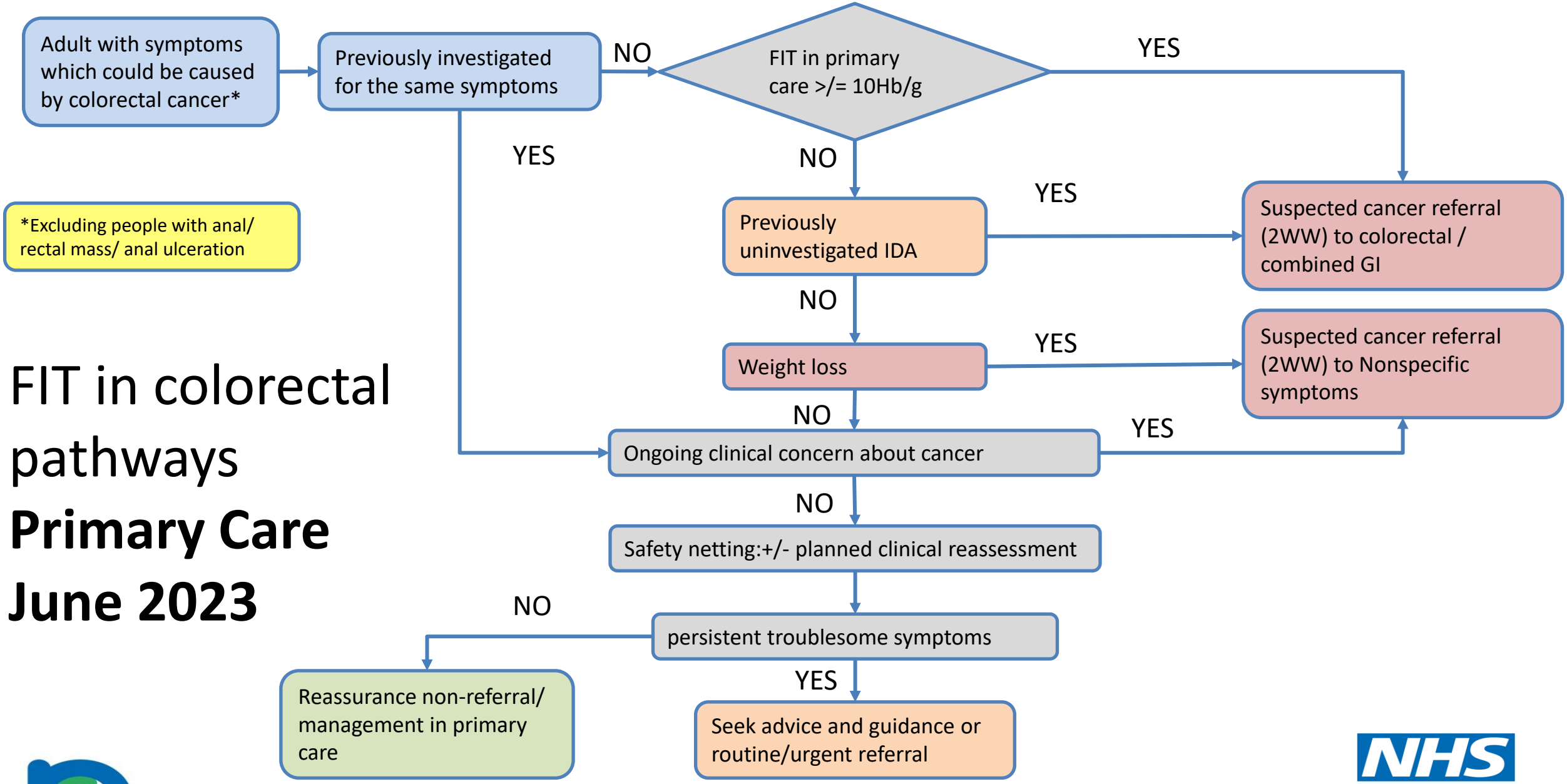
FIT in colorectal pathways

Primary Care

June 2023



Collaborating to improve cancer care

NHS Northern Cancer Alliance

2023-24 FIT IIF

- Criteria:

FIT result is recorded (coded) in the primary care notes up to 21 days before fast track suspected colorectal cancer referral.

Payment thresholds 65-80%

2023-24 FIT IIF

- Potential issues
  - The result code is attached to the date the patient write on the kit as having done the test, NOT the date we get the result in practice – risk of breaching IIF time scale if there is delay contacting / discussing with the patient
  - If the referral is returned pending FIT result or additional information and then re-sent with new UBRN number, the IIF will still count one of the referrals as missing the target.
    - Recommendation: mark the first referral in error

2023-24 FIT IIF

- SNOMED Codes

Indicator Code	Output_ID	Cluster_ID	Code Cluster Description	SNOMED Code	SNOMED Code Description
CAN-01	NCD112	FAECIMM_COD	Faecal immunochemical test codes	1049361000000101	Quantitative faecal immunochemical test (observable entity)
		FAECIMMDEC_COD	Codes indicating the patient has chosen not to receive a faecal immunochemical test	149441000000102	Provision of faecal immunochemical test kit declined (situation)
		GICANREF_COD	Fast track referral for suspected lower gastrointestinal cancer codes	276401000000108	Fast track referral for suspected colorectal cancer (procedure)
				892201000000106	Fast track referral for suspected lower gastrointestinal cancer (procedure)
		FITNI_COD	Codes for faecal immunochemical test not indicated	163326007	On examination - per rectum - rectal mass (finding)
				641351000000106	Anal and rectal ulcer NOS (disorder)
				140536008	O/E - PR - rectal mass (finding)
				197225001	Anal ulcer unspecified (disorder)
				197227009	Anal and rectal ulcer NOS (disorder)
				20928004	Ulcer of anus (disorder)
				248523006	Rectal mass (finding)
				254585003	Tumor of anal canal (disorder)
				641331000000104	Anal ulcer unspecified (disorder)
				91105001	Stercoral ulcer of anus (disorder)
				126850006	Neoplasm of anal canal (disorder)

Talk to your patient about the FIT test

- **Outline** what the test involves and should be completed even if they have already done bowel screening (Improve Compliance)
- **Check** that they'll be able to do it and don't object to doing it (Reduce Missing results)
- **Advise** to write the date of test on the sample bottle, & don't spill the liquid in bottle (Reduce Spoiled samples)
- **Reinforce** that result is needed quickly – complete test as soon as can and post back without delay (Reduce Referral delays)

Safety netting guidance and tools

At the time of requesting FIT

- Task to self to check FIT result is back and actioned
- Accurx message and follow up reminder sent 14 days automatically generated after first message sent
- Safety net template in Ardens
- ICE reminder at 14 and 28 days for tests requested from Gateshead lab

When test comes back

- Any result needs review of notes to check for any actions required

When sending referrals

- Admin/ secretarial teams should not let the referral go without FIT result where it is indicated without checking with GP
- If patient is unable to complete the test, clinical decision by GP must be made about referral without result and indicate the issue on the referral form

Recommended QI/ QA activities for DES 2023-24

- Check safety netting processes in practice

- Review missing patient in IIF report for people referred for fast track colorectal and no FIT recoded up to 21 days before referral. Search in SystmOne:

  Clinical reporting/ DCS/ CDRC/ Contracting/ IIF

- Validate the list of people with FIT >/=10 and no fast-track suspected colorectal cancer referral. Search is already available in SystmOne:

  Clinical reporting/ DCS/ CDRC/ Quality/ Cancer