**Colorectal 2 Week Wait (2WW) suspected cancer pathway and referral process**

**Distribution:** GPs ANPs all services

**From:** Simon Hincks

*Sent to all GP Senior Partners and Practice Managers on behalf of Dr Sarah Richards*

Dear Colleagues,

As previously highlighted, GPs are asked to ensure that Lower GI referrals are completed as follows:

- Sent in with a FIT result (wherever possible)
- Physical examination to be carried out (as priority dictates)
- Blood tests: including current (within 3 months) U&E, eGFR, FBC, CRP and ferritin for all patients

The new 2022/23 NHS England Priorities and Planning Guidance has also now stated the need to ensure that "every urgent suspected lower GI cancer referral is accompanied by a faecal immunochemical test result”

The FIT is one of the key filter tests required within the colorectal cancer pathway and therefore should be used, wherever clinically appropriate, in primary care prior to referral.

**Further information:**

As part of the ongoing level 4 incident requirements, it remains essential that cancer pathways are prioritised and that we work collaboratively as a ‘system’ to ensure that patients suspected of cancer receive the ‘right test at the right time’.

This particularly refers to the use of Faecal Immunochemical Testing (FIT) in primary care as a means of enabling more precise risk stratification to enable timely diagnosis of bowel cancer, whilst avoiding unnecessary investigation of patients with transient symptoms from benign conditions.
The new 2022/23 NHS England Priorities and Planning Guidance has stated the need to ensure that: “Every urgent suspected lower GI cancer referral is accompanied by a faecal immunochemical test result”

Therefore, a system-led Task and Finish Group has been convened with the emphasis on achieving the above, as well as making further improvement to the secondary care pathways, to ensure faster cancer diagnosis as well as developing more robust alternative pathways for patients with lower FIT scores but still potentially urgent, non-cancer related conditions.

Referral volumes have remained elevated in the context of the pandemic, with patients rightly coming forward with symptoms of concern, and workforce and capacity for investigation continues to be challenging. However, referrals that continue to be made without the inclusion of a FIT result are causing patient delays for those who are at highest risk, as they continue to experience longer waiting times for colonoscopy. It is acknowledged that the optimum pathway continues to be contingent upon the following:

- Effective safety netting of patients in primary care whilst the FIT result is awaited as well as information/resources to support patient engagement in completing a FIT (e.g., through a decision support tool such as Ardens Pro)
- Acceptable standards of patient assessment prior to referral, including physical examination wherever possible
- Assured fast FIT result turnaround across the ICS
- A widespread understanding of the efficacy of using FIT as part of secondary care clinical decision making to exclude colorectal cancer, given it offers a NPV of 99.6% (for example, when compared to the use of Chest X-rays providing only 77-80% lung cancer sensitivity)

Data dashboards will be put in place at each of the Sussex acute trusts to monitor utilisation and provide support for GPs in the management of the FIT process. A National Incentive Scheme for primary care is also anticipated.

In the meantime, we thank you for your continuing support in ensuring that referrals that are made are as ‘complete’ as possible (including the patient’s FIT result), and if there is any other primary care level support needed to enable compliance, please link in with your Clinical Directors, who will be happy to discuss.

Many thanks

Dr Sarah Richards

Dr Sarah Richards  
Local Medical Director  
Clinical Director for Planned Care and Cancer Sussex CCGs.  
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Please see link below for further details

https://www.improvingaccessservices.co.uk/welcome-to-the-extended-hours-service/ehs-staff-resources/cas-alerts/
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