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ROLL-OUT OF THE NEW BOWEL CANCER SCREENING TEST – FAECAL IMMUNOCHEMICAL TEST (FIT)

BRIEFING FOR GPs AND GENERAL PRACTICE in the Southern region: NOT FOR WIDER PUBLICATION

January 2019

Summary:

- From February 2019 the new bowel cancer screening test (faecal immunochemical test – FIT) will begin a small scale, phased roll-out into the new NHS Bowel Cancer Screening Programme in England. Patients in the **Southern hub region** who self-refer for bowel screening will be the first to receive the new kits.
- This briefing is to help general practice staff to prepare for, and support the phased rollout of the new FIT kits, which are easier for patients to use and can detect signs of cancer earlier, saving more lives.
- The rollout will have a negligible impact on local screening centres – there is sufficient capacity in place to support the increase in the number of screening endoscopies forecast to be required. It will also enable elements of the pathway to be tested.
- The initial rollout will be followed by a single switch on, at which point hubs across the country will move fully to the new FIT test, replacing the current guaiac faecal occult blood test (gFOBt). This is planned for April 2019.

Bowel cancer screening saves lives and people should be actively supported to access screening. This update is to support GPs and staff working in general practice to prepare for the imminent phased rollout of the new bowel cancer screening test (faecal immunochemical test – FIT) into the NHS Bowel Cancer Screening Programme (BCSP) in England.

The main benefits of FIT are that it is easier to use - only one sample is required versus the current guaiac faecal occult blood test (gFOBt) which requires samples to be taken from three different stools. FIT, which will be rolled out at a sensitivity of 120 µg/g, is more sensitive than gFOBt and therefore able to detect signs of cancer earlier, saving more lives.

Procurement

NHS England can confirm that procurement of the new 'FIT kits' has now been completed and Chrystal is confirmed as the supplier. Images of the FIT kit can be seen below:



A full rollout will commence from April, although the first kits will be available immediately to enable an initial rollout to start, as described in the phasing plan.

It is important to note that FIT testing is also being introduced across England for some patients with symptoms that could indicate bowel cancer. Although the FIT kits used are similar (though may have different manufacturers), the screening and symptomatic pathways should not be confused as the sensitivities of the FIT kits will be different. More information about this is included in the attached FAQs.

Phasing plan

From February 2019, there will be a very small initial rollout of FIT to patients who self-refer for bowel screening across the Southern hub region. This phased approach will have a negligible impact on the screening centres and enable elements of the pathway to be tested. This initial rollout will be followed by a single switch on, at which point hubs will move fully to the new FIT test. This is planned for April 2019.

The key elements of this rollout plan are:

- Self-referral participants in the Southern hub region requesting a kit after February will be sent a FIT kit with the associated test processed in the same region.
- A contract mobilisation phase will run until April 2019. Full replacement of the current guaiac faecal occult blood test (gFOBt) in the NHS Bowel Cancer Screening Programme (BCSP) is planned to be achieved across England from April 2019.
- For a short period of time a small number of gFOBt will continue in the system beyond April 2019; these tests will relate to those on the gFOBt pathway before April 2019 for whom the process has not been completed.

An assurance programme has taken place to confirm that there is sufficient capacity to support the increase in the number of screening endoscopies that are forecast to be required to deliver the rollout plan set out in this letter. This includes an expected increase in FIT uptake due to the tests being more acceptable to the public and easier to complete (as seen in the pilots).

What will the Bowel Cancer Screening Programme look like after April 2019?

- FIT and bowel screening will be offered in the same way, ie men and women aged between 60 and up to their 75th birthday will be invited to take the test at home every two years.
- People aged 75 and over can continue to participate in the programme, but they will not be invited. To continue to participate in the programme people will need to self-refer to the programme by calling the freephone helpline on 0800 707 6060.

Next steps

- This briefing is to help general practice staff to prepare for the phased rollout. (FAQs are included alongside this briefing to help staff answer questions about FIT from patients).
- The NHS Bowel Cancer Screening Programme will continue to provide a safe and efficient service for the public and gFOBt will remain in use throughout the rollout period and beyond April 2019 for a small number of participants.
- Public Health England is currently working with stakeholders to develop a range of supporting materials for patients and for clinicians. Further details about these resources is included in the FAQs.
- Questions about how to administer and complete the new FIT screening test should be addressed to the hub helpline on freephone bowel cancer screening helpline on 0800 707 60 60. ***Other specific questions about the implementation of FIT should be referred to your local commissioners.***

ENDS

FAQs for Screening helpline staff, PHE helpline staff and GPs

General information for participants and potential participants in the Bowel Cancer Screening Programme

Q1 What is bowel cancer screening? What does it involve?

Bowel cancer is the [second largest cause of cancer deaths in the UK](#) and survival rates are greatly improved if an individual is diagnosed early. Bowel cancer screening aims to detect bowel cancer at an early stage, before people experience any symptoms, and when treatment is more likely to be effective. The later a diagnosis is made, the more difficult bowel cancer is to treat.

Bowel cancer screening can also identify polyps (small growths on the inner lining of the bowel), which are not cancerous, but may develop into cancer in future. Once identified they can be removed which reduces the risk of bowel cancer developing.

NHS bowel cancer screening is only offered to people of all genders aged 55 or over, as this is when you're more likely to get bowel cancer:

- if you're 55, you'll automatically be invited for a one-off [bowel scope screening test](#), also known as flexible sigmoidoscopy, if it's available in your area.
- if you're aged 56 – 60 you can self-refer for to the programme for flexible sigmoidoscopy, if it's available in your area, by calling the freephone helpline on 0800 707 6060.
- if you're 60 to 74, you'll automatically be invited to do a [home testing kit](#) every 2 years.
- if you're 75 or over, you can ask for a home testing kit every 2 years by calling the bowel cancer screening helpline on freephone 0800 707 60 60.

More information is available at www.nhs.uk/conditions/bowel-cancer-screening/

Q2 What is the main benefit of bowel cancer screening?

Having bowel cancer screening reduces your risk of dying from bowel cancer by at least 25%*. Although bowel cancer is the [second largest cause of cancer deaths in the UK](#), survival rates are greatly improved if an individual is diagnosed early.

Reference Hewitson P and others (2008) Cochrane systematic review of colorectal cancer screening using the fecal occult blood test (hemoccult): an update. American Journal of Gastroenterology 103(6): 1541-9.)

Q3 What is the current bowel cancer screening programme in England?

(Source: [BCUK](#) / [NHS Choices](#))

The Bowel Cancer Screening Programme in England offers both:

1. The guaiac faecal occult blood test (gFOBt): offered to men and women aged 60 to 74 every two years and is offered as a test that is used at home. This test checks for tiny amount of blood in poo to find out if further tests are needed. This is the test that will be replaced by FIT from April 2019.
2. Bowel scope screening: this is currently being rolled out to some men and women in England aged 55. Bowel scope screening uses a thin, flexible tube with a tiny camera on the end to look at the large bowel.

Q4 What is the faecal immunochemical test (FIT) and how does it work?

FIT works in a similar way to the current guaiac Faecal Occult Blood screening test (gFOBt) but is easier to use with only one sample required versus the current test which requires samples to be taken from three different poos. It is more accurate as it detects tiny amounts of human blood in the poo that could indicate cancer or polyps (growths that can develop into cancer).

Q5 Has there been a change in the age at which, and how frequently, people are called for bowel cancer screening?

No. Currently bowel cancer screening is offered to people of all genders from the age of 60, with invitations automatically continuing every two years until they reach the age of 75. After reaching 75 people can ask for a screening kit, every two years by phoning the free bowel cancer screening helpline on 0800 707 60 60.

The GP computer systems automatically generate contact details for the invitation letter that is sent to people in the eligible age group, so it's important to ensure that your GP surgery has your correct name and address.

The UK NSC has made recommendations regarding future changes to the age range for bowel cancer screening. See <https://legacyscreening.phe.org.uk/bowelcancer> for further details. NHS England and Public Health England are considering how best to implement these proposals.

Q6 Will bowel scope continue alongside the new FIT test?

Yes, the NHS will continue to offer bowel scope across England.

Bowel scope, also known as flexible sigmoidoscopy, is a complementary procedure to the current bowel cancer screening programme. The one-off procedure is being offered to people of all genders at the age of 55.

It is usually carried out at an NHS bowel cancer screening centre by a specially trained doctor or nurse. The appointment could take around one hour, but the bowel scope is usually completed in less than 15 minutes, and looks at the lower parts of the bowel where most cancers are found.

More information about bowel scope is available online at www.nhs.uk/conditions/bowel-cancer-screening/bowel-scope-screening/

Q7 Will the new FIT test be used by people of all genders?

The FIT kit will be used by people of all genders within the eligible age range and registered with a GP practice. Although men are at more risk of getting bowel cancer, it is not a gender specific cancer.

Q8 Does the new FIT test differ to the FIT test used to detect symptomatic colorectal cancer (CRC)?

Currently, and separately from the bowel cancer screening programme, some symptomatic patients with suspected colorectal cancer (CRC) are being given FIT tests, either as part of the rollout of FIT under NICE guidance to low risk symptomatic patients, or to participate in a study into use of FIT by high risk symptomatic patients. The FIT study seeks to establish whether symptomatic patients referred for a colonoscopy under the two week wait rule could instead be safely and effectively triaged with FIT. Patients with a negative FIT could be reassured that they are very unlikely to have colorectal cancer. Patients with a positive FIT could be referred for further investigation. Although the FIT

kits used are similar (though may have different manufacturers), the screening and symptomatic pathways should not be confused as the sensitivities of the FIT kits will be different.

FAQs for screening centre staff, supporting services and GPs

Information for professionals

Q1 When will FIT rollout as part of the National Bowel Cancer Screening Programme?

The English Bowel Cancer Screening Programme (BCSP) is a high-quality programme. Hubs have procured a new Faecal Immunochemical Test (FIT).

The phased approach will see a very small initial rollout of FIT to participants who self-refer for bowel cancer screening across the Southern hub region from February 2019.

A single switch on, to replace the current guaiac faecal occult blood test (gFOBt) with FIT, is planned for April 2019.

For a short period of time a small number of gFOBt will continue in the system beyond April 2019; these tests will relate to participants who were on the gFOBt pathway before April 2019 and for whom the process has not been completed.

Q2 Why have you chosen a staged rollout of FIT as part of the bowel cancer screening programme?

A staged rollout of FIT will enable the programme to ensure it is done as quickly and as safely as possible, with a negligible initial impact on screening centres.

The phased approach will distribute a very small initial rollout of FIT to participants who self-refer for bowel cancer screening across the Southern hub region from February 2019.

A single switch on, to replace the current guaiac faecal occult blood test (gFOBt) with FIT, is planned for April 2019.

For a short period of time a small number of gFOBt will continue in the system beyond April 2019; these tests will relate to people who were on the gFOBt pathway before April 2019 and for whom the process has not been completed.

Q3 When will full implementation of FIT into the bowel cancer screening programme be achieved?

Full implementation will be achieved from April 2019.

Q4 When will the same sensitivity threshold be used in England and in Scotland, where FIT was rolled out from November 2017?

NHS England plan to rollout FIT within the Bowel Cancer Screening Programme (BCSP) in a way that is sustainable and therefore safe for participants. An assurance process is underway to ensure that the sensitivity offer of 120 µg/g is operationally deliverable.

While the sensitivity threshold for FIT within the BCSP in Scotland is higher at 80 µg/g, sensitivity values are not directly comparable across the different FIT kits in use across Scotland and England. In England (unlike Scotland and Wales) an additional Bowel Scope Screening Programme is currently being rolled out as a one-off test to people of all genders aged 55 years.

After introducing FIT at the current sensitivity and ensuring the system continues to deliver a quality service, work will continue to ensure it is fit for purpose in the future. This includes the longer-term ambition to deliver FIT at the optimal sensitivity and screening at a younger age.

Q5 The sensitivity threshold in England (120 µg/g) is different to that in Scotland (80 µg/g), what else is being done in England to make sure that more bowel cancers are found earlier?

The NHS in England is rolling out Bowel Scope Screening which is additional one-off test for people aged 55 – this test is not available in Scotland. NHS England will continue to rollout the one-off Bowel Scope Screen alongside FIT.

Our longer-term ambition is to deliver FIT at the optimal sensitivity and screening at a younger age.

Q6 Why hasn't the age at which people are invited for bowel cancer screening reduced?

Bowel cancer screening using a home testing kit is offered to people of all genders from the age of 60 in England. There are almost 40,000 cases of bowel cancer

diagnosed each year, with [more than 80 per cent](#) found in people who are aged 60 and over*. Maintaining the age at which people are invited for bowel cancer screening at 60 – 74, will enable FIT to be rolled out in a way that is sustainable and therefore safe for participants. An assurance process is underway to ensure our offer is operationally deliverable.

The risk of bowel cancer rises steeply from around the age 50-54. In response, bowel scope, a one-off procedure also known as flexible sigmoidoscopy, will continue to be rolled out to men and women at the age of 55.

Through the Be Clear on Cancer campaign people of all ages have a better understanding of the symptoms of bowel cancer and need for prompt reporting of symptoms to their GP.

Data available following the introduction of FIT will inform a longer-term plan of how and when to reduce the current screening age from 60 to 50 for optimum benefit.

*Reference: <https://publichealthmatters.blog.gov.uk/2014/12/05/why-do-we-see-gender-differences-in-bowel-cancer-screening/>

Q7 How confident are you that once the kit is ready that it will be able to be rolled out especially given the demands on the current workforce capacity?

Rolling out FIT within the BCSP is a key deliverable in NHS England's Five Year Forward View, the Long Term Plan and the national Cancer Strategy. NHS England is supporting the BSCP hub provider trusts to ensure kits are produced and ready to be delivered as quickly as possible, with the first kits being sent out in the southern region from February 2019. We have undertaken an assurance process to make sure that the service has the necessary endoscopy capacity to safely meet the additional demands resulting from new test.

Health Education England (HEE) developed its Cancer Workforce Plan, published on 5 December 2017, with full consideration of the additional workforce demands expected following the introduction of FIT.

Q8 What assurance is there that there will be enough endoscopists to effectively deliver the screening service after introduction of the new FIT test?

Screening centres were asked in summer 2018 to put in place and mobilise operational plans to ensure - or increase and ensure - adequate endoscopy capacity to deliver the screening service after the introduction of FIT into the Bowel Cancer

Screening Programme. These operational plans, are based upon forecasted capacity, calculated using pilot data and additional capacity estimates from each screening centre.

Screening centres where existing capacity was judged insufficient have been contracting additional sessions of existing staff and/or training and recruiting additional staff to carry out the extra sessions, working with their Regional lead for FIT capacity to identify and tackle any barriers or delays to achieving the additional capacity.

NHSE Commissioning teams have responsibility for allocating 2018/19 funds to support mobilisation and making provisional arrangements for funding in 2019/20.

At a national level, NHS England continues to work with HEE to ensure sufficient availability of trained staff to meet the additional need and support our ambition to implement FIT in the National Bowel Cancer Screening Programme.

Q9 An optimal bowel cancer screening programme requires adequate pathology capacity. What has been done to consider the impact on pathology and to ensure adequate capacity?

Pathology capacity is part of the same NHS England assurance process as for endoscopy capacity. Regional leads receive screening centre plans for expanding capacity, seeking assurance to ensure sufficient workforce capacity is in place to match the implementation timescales. NHS England and Public Health England continue to work with HEE and the Royal College of Pathologists to identify new ways of working to improve efficiency.

Q10 Where can I get more information and ask specific questions?

To ask questions and find out more about the new FIT screening test and how to complete it, please contact the hub helpline on freephone on 0800 707 60 60.

Other specific questions should be referred to your local public health commissioners within NHS England.