# Yorkshire and Humber Cancer Alliances

## Outline Business Case for Faecal Immunochemical Test (FIT) for Colon Cancer

### Introduction

A critical component of STPs across the country is the delivery of the NHS Constitution 62 day cancer waiting standard, including by securing adequate diagnostic capacity; continuing to deliver the constitutional 2 week and 31 day cancer standards and making progress in improving 1 year survival rates by delivering a year-on-year improvement in the proportion of cancers diagnosed at stage 1 and stage 2; and reducing the proportion of cancers diagnosed following an emergency admission. The vehicle for doing this and addressing other Cancer Taskforce ambitions are Cancer Alliances. These provide an opportunity to adopt a new way of working involving the adoption of a whole population, whole pathway approach to transforming cancer services and improving outcomes.

The use of faecal immunochemical testing (FIT) in symptomatic patients is being advocated by the national cancer taskforce programme as one of the transformation programmes to enable early diagnosis and support delivery of the 62 day cancer standard. At a national level the cancer programme is consolidating the ongoing work in order to build the evidence base to encourage roll out of FIT at scale and pace. This national emphasis has led to alliances across the country to consider the efficacy of FIT in both low and high risk patients. NICE guidance has also been recently issued on FIT making recommendations that including the adoption in primary care to guide referral for suspected colorectal cancer in people without rectal bleeding who have unexplained symptoms but do not meet the criteria for a suspected cancer pathway referral.

Yorkshire and the Humber Clinical Cancer Network commissioned Transforming Care to develop an outline business case to support the early implementation of a regional service in conjunction with the three constituent Cancer Alliances.

### Support Provided

A systematic and practical approach, adapted from the Five Case Model, a "thinking" framework for business case development, which aligns with HM Treasury's Green Book Guidance on Appraisal of Policies, Programmes and Projects was adopted to develop the outline business case. The approach involved five key stages with oversight from a project steering group and input from a clinical reference group:

**1. Mobilisation** - An intensive period of mobilisation - crystallising the requirements, scope and expected outputs. Planning in detail the delivery of our support. Engaging key stakeholders and mobilising CCG and provider resources. Embedding the governance and reporting structure.

**2. Identify** - Baselining of the current diagnostic models and their capacity to incorporate FIT. Identifying options for the service model and routes to procurement. Identifying key data sources and owners to input into the development of an activity and financial model and requesting formation.

**3. Design** - Crystallising the current clinical pathway and developing a proposed future pathway, including safety netting. Developing and undertaking a high level evaluation of service models, routes to procurement and FIT kits. Designing the framework and structure for the activity and financial model. Designing a benefits realisation framework.

**4. Appraisal and Build** - Building, testing and scenario modelling of the activity and finance model. Appraising the service models and routes to procurement against agreed criteria.

**5. Document and Handover** - Drafting the outline business case. Developing supporting documentation for the activity and finance model and handing over to BAU. Showcasing the model with key stakeholders of the Alliances.

### Value Delivered To Client

- Clinical consensus on a proposed pathway and diagnostic model
- Buy-in and commitment from managerial and clinical representatives from each STP to implementation
- A compelling outline business case that could be tailored to local STP requirements
- A dynamic activity and finance model tool with key alliance representatives trained in its use
- Clarity on next steps/timeline to implement FIT