

Faecal Calprotectin Project

1

Faecal Calprotectin Project is an innovative and sensitive test to help GPs make the difficult discrimination between irritable bowel syndrome (IBS) and inflammatory bowel disease (IBD).

2

Dr James Turvill, a Consultant Gastroenterologist at York Teaching Hospitals Trust, developed a care pathway following research based on this diagnostic test and along with the Vale of York CCG were part of a pilot programme.



YORK FAECAL CALPROTECTION CARE PATHWAY

3

Following this pilot study, the pathway was refined and the York Faecal Calprotectin Care Pathway was developed.



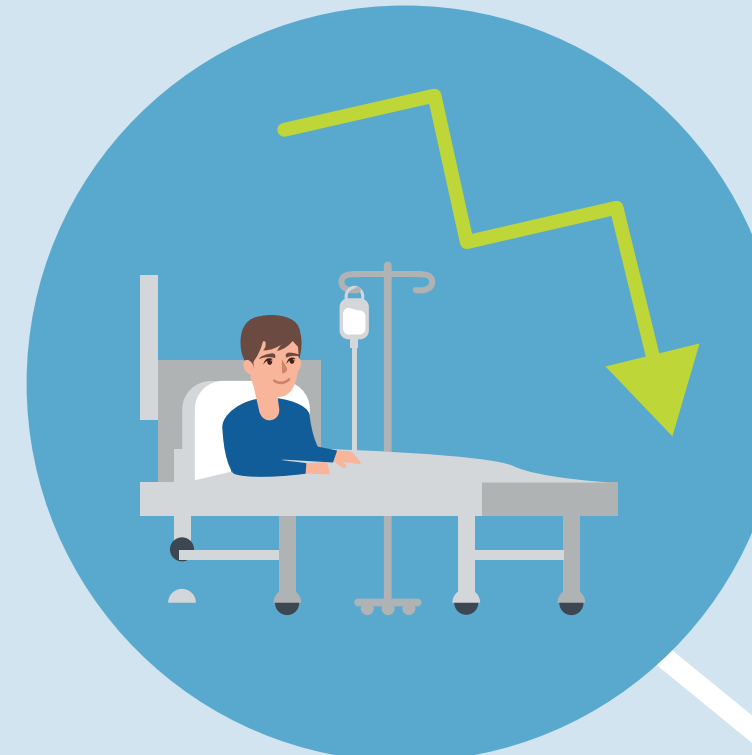
4

After hearing about Dr Turvill's work, the Yorkshire and Humber AHSN approached him to facilitate and enable the rollout of the York Faecal Calprotectin Care Pathway into primary care around the Yorkshire and Humber region.



5

Expected benefits of the pathway are:



Patient
- there will be a reduction in patients who do not have to undergo a colonoscopy for diagnosis which can be a risky and uncomfortable procedure, thus improving patient experience.

Primary Care
- reduction in costs due to the reduction in unnecessary referrals to secondary care.



Secondary Care
- better access to clinicians and endoscopy departments, reduction in 18 week wait targets.

18 WEEKS



6

Before engaging with CCGs and GPs, the AHSN developed a series of resources designed to help clinicians better understand the pathway and utilise it efficiently.

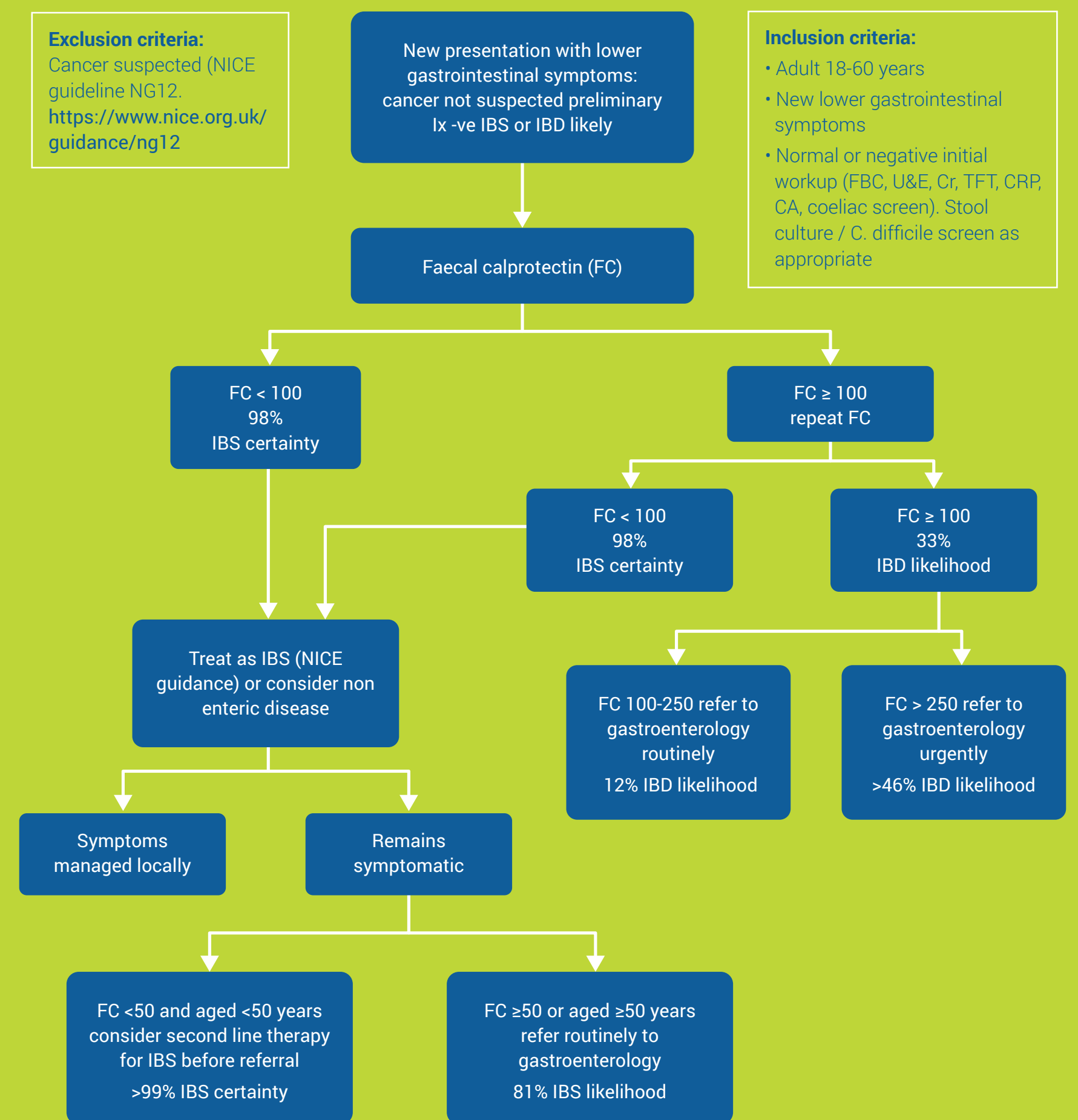
8

When approaching CCGs in the wider Yorkshire and Humber region, it was important to engage clinicians and lab staff (where appropriate) in the hospital trusts.



9

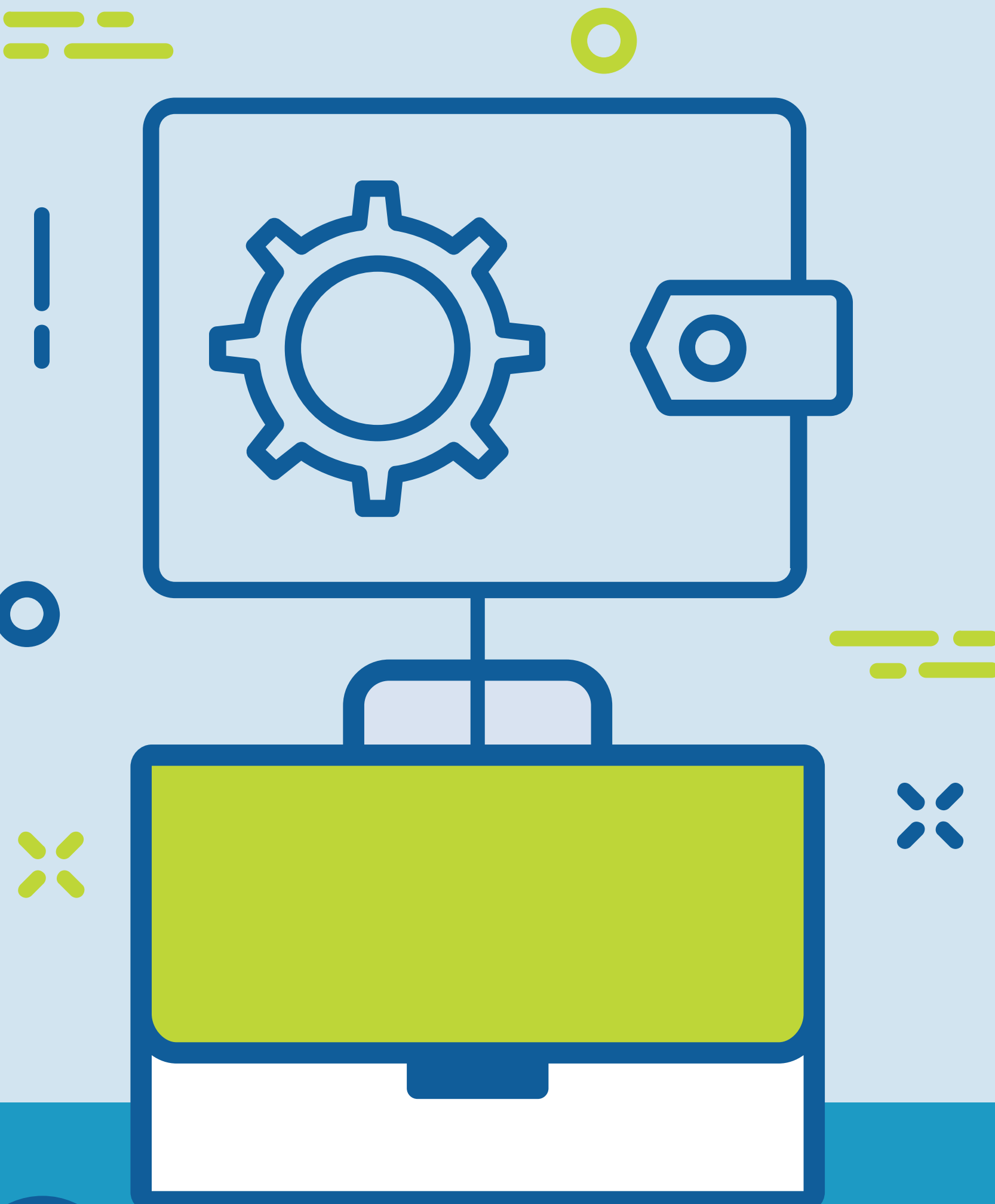
Faecal Calprotectin Guideline for testing in Primary Care (Scaling up FC Testing)



Reference: Turvill, James et al, 2016. Proposed guidelines for the use of faecal calprotectin (FC) in the management of patients presenting with lower gastrointestinal symptoms. IBS = irritable bowel syndrome; IBD = inflammatory bowel disease; NICE = National Institute for Health and Care Excellence; CRP = C-reactive protein.

7

Business cases were also developed to support both CCGs and trusts who do not use Faecal Calprotectin testing currently.





Faecal Calprotectin Project

Impact

The CCGs and Trusts below are actively involved in the programme.

These CCGs are;

NHS
Leeds West
Clinical Commissioning Group

NHS
Leeds North
Clinical Commissioning Group

NHS
Leeds South and East
Clinical Commissioning Group

NHS
Wakefield
Clinical Commissioning Group

NHS
North Kirklees
Clinical Commissioning Group

NHS
Hambleton, Richmond and Whitby
Clinical Commissioning Group

NHS
East Riding
Clinical Commissioning Group

NHS
Scarborough and Ryedale
Clinical Commissioning Group

NHS
The Leeds
Teaching Hospitals
NHS Trust

NHS
Vale of York
Clinical Commissioning Group

The Mid Yorkshire Hospitals
NHS Trust

Dr Turvill and the AHSN were approached by the Faecal Calprotectin Task and Finish Group, a National steering committee tasked with providing **national guidelines** on the best use of Faecal Calprotectin testing in primary care.

This group is overseen by Prof. Sue Hill and has members from around the country with representation from:



Commissioners



Gastroenterologists



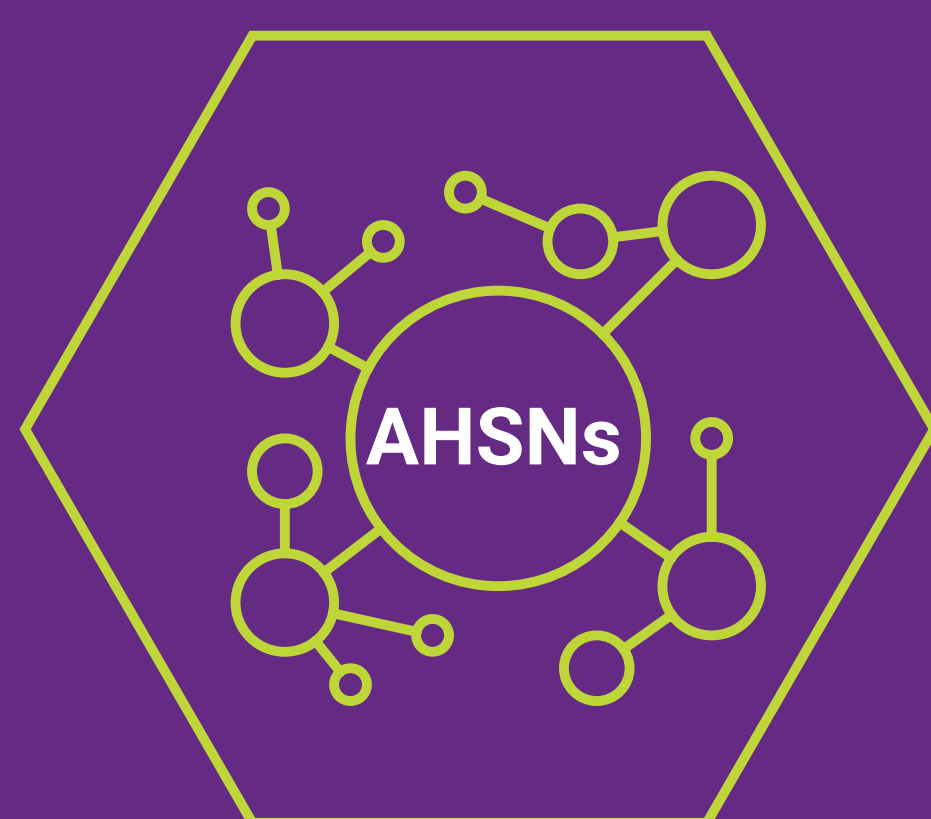
Biochemists



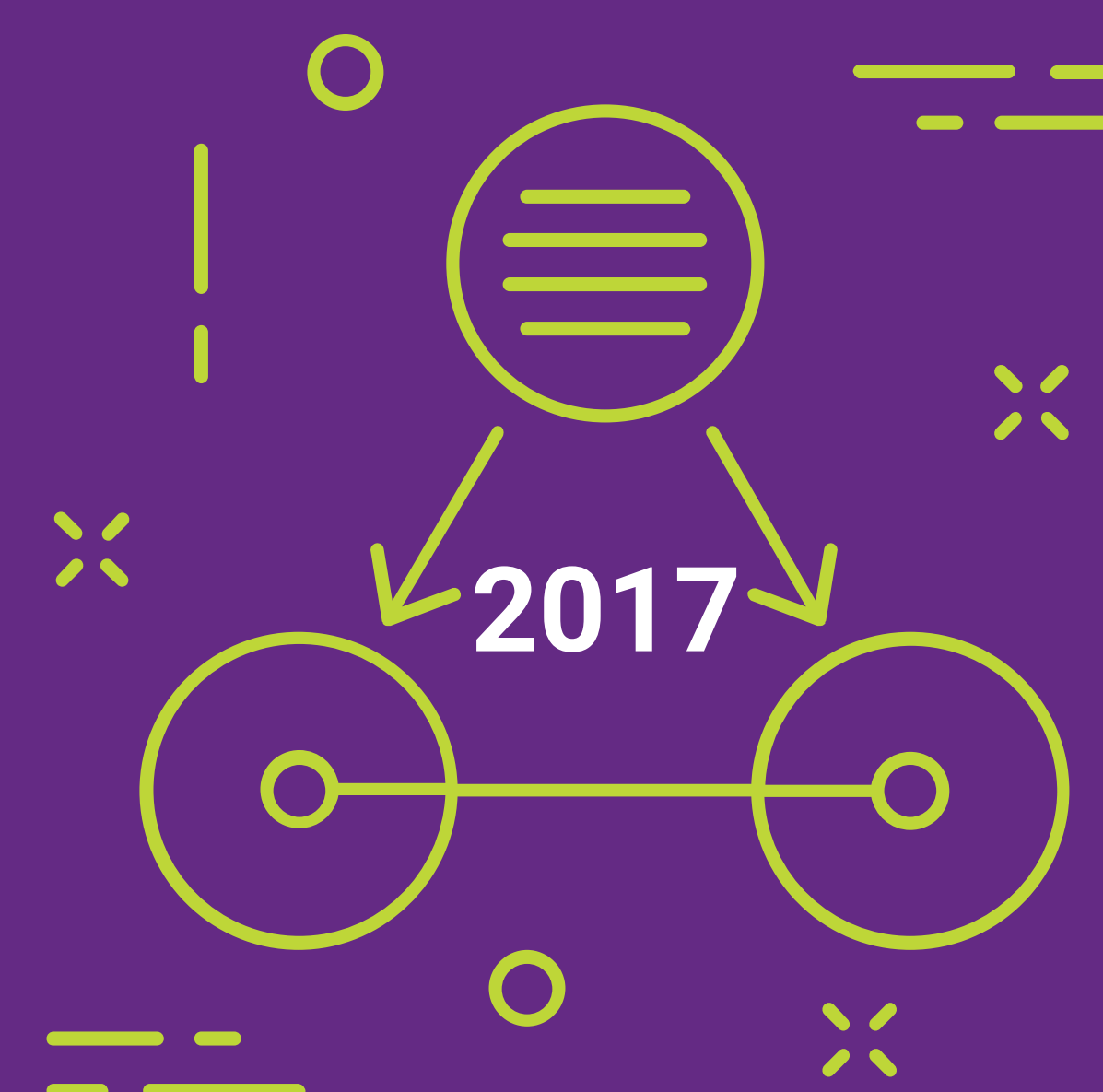
NHS BSA



NHS England



and AHSNs



The agreed algorithm created by this group will be finalised and launched nationally in 2017 is strongly based upon the York Faecal Calprotectin Care Pathway.

409
people
across
51 GP PRACTICES

Based on the tests which have been requested in the past quarter, we have seen **409 people across 51 GP Practices.**

Next steps for the project

- 1 There will be a health economics analysis from York Health Economic Consortium.
- 2 There will be a GP survey to understand how the new pathway has been perceived by GPs
- 3 There will be a patient survey to understand their satisfaction with the pathway, and the leaflet they were presented with.

