

**Meeting of the PCA Urology Site Specific Group**

Wednesday 16<sup>th</sup> May 2018: 14:00-17:00

Roadford Lakes, Broadwoodwidge, Devon

**THIS MEETING WAS SPONSORED BY ASTELLAS, PFIZER AND ROCHE**

**FREEDOM OF INFORMATION**

*This group will observe the requirements of the Freedom of Information Act (2000) which allows a general right of access to recorded information including minutes of meetings, subject to specific exemptions. No one present today had any objections to their names being distributed in the minutes.*

**Draft Notes** (to be ratified at the next SSG meeting)

**Meeting Chair:** Martin Moody

*Consultant Urologist-North Devon Healthcare NHS Trust/SSG Vice Chair*

Reference	Notes
1.0	<b>Welcome and Introductions.</b>
1.1	Please refer to separate record of attendance via <a href="#">this link</a> .
2.0	<b>Minutes of the previous meeting (8<sup>th</sup> November 2017) and actions arising;</b>
2.1	<i>Ref 3.6:</i> Trust Leads for the project work have been confirmed and Nick Burns-Cox will provide the group with an update today.
2.2	<i>Ref 3.8:</i> Bone Scanning Criteria; the following referral criteria has been agreed:  PSA equal to or greater than 20 or primary pattern 4 or any pattern 5 prostate cancer. It was also agree that the second PSA should be done at 6 weeks (it is acknowledged that currently there is a lack of good evidence).
2.3	<i>Ref 4.2:</i> The West Midlands Urology Clinical Guidelines have been adapted and will be circulated to the group for final comments prior to agreeing via the MDT Leads.
2.4	<i>Ref: 9.3:</i> Guest speaker invited to talk at today' meeting about MECC (Making Every Contact Count).
2.5	The minutes were accepted as an accurate record.
3.0	<b>MDT Effectiveness</b>
3.1	The CRUK MDT Effectiveness Executive Summary document was circulated to the group and the recommendations were discussed.
3.2	Exeter is experiencing a significant influx of referrals into the MDT without all of the relevant information being available to the team to consider.

## Peninsula Cancer Alliance

- 3.3 Trusts using Somerset Cancer Registry are also experiencing absence of patient data due to IT problems.
- 3.4 The important of streamlining MDTs and ensuring that all relevant information is available prior to the patient discussion was emphasised. This includes identifying and having proper processes in place for patients who can be stratified onto a protocolised pathway and who may not need to be discussed at MDT. This frees up time to discuss more complex cases.
- 3.5 Concern was raised that scan results are not available to clinicians when patients are in theatre (not all trusts).
- 3.6 One of the CRUK recommendations was to have a separate MDT M&M; this was discussed and it was felt that the logistics of undertaking this could be prohibitive and this may also be a repetitive exercise as M&Ms are carried out via other groups (such as surgical/chemo/radio M&Ms).

### 4.0 **Prostate Pathway Transformation Project**

4.1 Update presented by Nick Burns Cox (Consultant Urologist Taunton and Somerset NHS Foundation Trust).

4.2 Please refer to presentation slides via [this link](#).

### 5.0 **Patient Pathways/Clinical Guidelines**

5.1 The group agreed that consensus across the Peninsula is needed on the timing of 2<sup>nd</sup> PSA test level testing for patients with a raised (non UTI related) PSA. There is no good data to support when this should be done.

5.2 **Action:** MDT leads to agree upon a standardised approach.

5.3 The group discussed how patients are followed up following a negative biopsy result and what information is passed back to GPs with regards to what PSA level would prompt re-referral. It was accepted that this can vary depending on the overall clinical picture for each patient.

5.4 Plymouth is experiencing challenging primary care issues (relating to GP numbers/availability). This is affecting routine PSA testing-patients are currently being referred back to the hospital for this to be undertaken.

5.5 Exeter has stopped tracking benign patients.

### 6.0 **Living with and Beyond Cancer (LWBC)**

6.1 Maria Bracey sent her apologies.

6.2 LWBC update from Exeter: Health and Well-being clinics for pre-surgery patients are going really well. Patient representatives are invited to talk to the group as part of the break-out session and this provides a very valuable patient insight. Feedback from attendees has been very positive.

## Peninsula Cancer Alliance

- 6.3 Steve Orme (SSG patient representative) echoed how fantastic and informative the H&W clinics are.
- 6.4 The pre-operative assessment is also completed on the same day which is beneficial for patients and keeps costs down for remote patients.
- 6.5 The Exeter team are due to publish a paper on their LWBC Health and Wellbeing Clinics (this will be circulated to the group in due course).
- 6.6 Exeter reports a considerable increase in 2ww referrals over the last year. There is some concern that prostate cancer patients are being given priority over patients with other urological cancer diagnoses and patient cohorts (such as bladder cancer) who often require more CNS support.
- 6.7 Macmillan is supporting a Prostate Cancer Specialist Nurse position at Taunton.

### 7.0 **Shared Clinical Guidelines**

- 7.1 The West Midlands Urology Clinical Guidelines will be adopted by the group and have been drafted/ amended to reflect local service provision. A second draft will be circulated to the SSG contact list for final comments prior to the document being ratified by the MDT Leads on behalf of their respective trusts.

### 8.0 **Research Update**

- 8.1 Mohini Varughese presented a research update to the group.
- 8.2 Please refer to the presentation slides via [this link](#).

### 9.0 **Making Every Contact Count**

- 9.1 Guest Speaker: Lucy O'Loughlin (Public Health Specialist-Devon County Council).
- 9.2 Please refer to Lucy's MECC presentation slides via [this link](#).

### 10.0 **AOB**

- 10.1 It was noted that consultant attendance from some of the trusts was lacking- this is disappointing as attendance from the across all member trusts is necessary in order for the SSG to be fully representative and to facilitate decision making.

### **Date of Next SSG Meeting**

*Wednesday 7<sup>th</sup> November 2018*

*2pm-5pm*

Roadford Lake (Burrator Room), Broadwoodwidge, Devon