

**Peninsula Cancer Alliance
Site Specific RDS – Bladder Pathway**

**Urology SSG Update
17 February 2022**

Aims and Objectives

A Bladder Task and Finish Group was set up in order to:

1. Identify symptoms that may facilitate an earlier referral of suspected bladder cancer from primary care
2. Identify differences in pathways across the alliance, sharing good practice and clarifying the 'pinch points' that lead to delays
3. Standardising good practice across the alliance where possible

Work to date

- Each Trust has submitted historic data from 2018/19 pre covid for analysis
- CSU has supported this analysis in the attached spreadsheet
- Key metrics are currently under discussion to identify those that can be collected by each Trust in future to support improvements in the diagnostic pathway and patient experience

Potential data areas for further data analysis and future collection

1. Average number of days between referral and first consultation
2. Was CT scan used in initial assessment
 - Dashboard showing variations in whether use, Exeter use Ultrasound rather than CT whereas Cornwall use CT rather than Ultrasound
 - Noted only 50 patients so may vary with larger numbers and may now have changed
3. TURBT Histology muscle included?
 - Links in with GIRFT recommendations
 - Can review further in Trusts to see who undertaking TURBT
4. Tumour stage by presenting symptom (amended to stage rather than type)
5. Mean pathway time

Next Steps

- Task and Finish Group to meet again (8th March) to identify potential pathway improvements / standardisation across alliance and agree metrics to be captured in future
- PCA to support Trusts and agree way forward for pathway improvement to meet FDS targets and appropriate data collection to support this

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