

Engagement Report for Clinical Commissioning Policies

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| Unique Reference Number | 1901 |
| Policy Title | External beam radiotherapy for patients presenting with hormone sensitive, low volume metastatic prostate cancer at the time of diagnosis |
| Clinical Reference Group | Radiotherapy |
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| Which stakeholders were contacted to be involved in policy development? | <p>A policy working group was established in line with NHS England's standard methods.</p> <p>The draft policy proposition was sent to the following groups for comment:</p> <ul style="list-style-type: none"> • Registered stakeholders for the Radiotherapy Clinical Reference Group (CRG); and • Radiotherapy CRG. <p>After a review of the Clinical Reference Group Stakeholder list, the following organisations were identified as 'missing' and were contacted and invited to take part in stakeholder testing:</p> <ul style="list-style-type: none"> • Prostate Cancer UK. |
| Identify the relevant Royal College or Professional Society to the policy and indicate how they have been involved | <p>The following societies were included in stakeholder testing:</p> <ul style="list-style-type: none"> • Royal College of Radiologists. • Society of Radiographers. • Royal College of Physicians. |
| Which stakeholders have actually been involved? | Responses were received from Royal College of Radiologists, NCRI Clinical and Translational Radiotherapy Research Group (CTRAd), the Bay prostate cancer support group and Walnut |

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| | Group PC support. In addition, a further 10 responses were received from registered stakeholders. |
| Explain reason if there is any difference from previous question | Not applicable |
| Identify any particular stakeholder organisations that may be key to the policy development that you have approached that have yet to be engaged. Indicate why? | None |
| How have stakeholders been involved? What engagement methods have been used? | <p>Stakeholders have been involved in the policy working group. The draft policy proposition was distributed to stakeholders via email for a period of 2 weeks of stakeholder testing between 2-19 September 2019, in preparation for public consultation.</p> <p>Stakeholders were asked to submit their responses via email, using a standard response and in line with NHS England's standard processes for developing clinical commissioning policies.</p> |
| What has happened or changed as a result of their input? | <p>All 14 respondents supported the policy proposition. 5 of the 14 respondents considered that the trial data seemed to show a slight benefit of 20 fractions over 6 fractions.</p> <ol style="list-style-type: none"> a) A review of the published evidence included in the policy by the PWG has been completed by PHE lead and an evidence report completed. b) It is confirmed that the Stampede /HORRAD trials and subsequent Burnett meta-analysis did not comment on dose. c) The two schedules of 20 fractions and 6 fractions were not part of a randomised comparison in STAMPEDE but chosen by physicians and patients. d) The STAMPEDE trial has shown there is a statistically significant advantage for both overall and failure free survival for radiotherapy in the pre-specified analysis for the low metastatic burden group of patients. This advantage was not seen in patients with a high burden of metastatic disease. |

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| | <p>e) There was some evidence of heterogeneity in the effect on failure-free survival by nominated but non-randomised radiotherapy schedule in the low and high burden metastatic groups combined but this difference did not reach statistical significance (interaction $p=0.072$, see Parker et al Lancet Supplementary Fig 3) The analysis covered the whole trial and is not specific to the low burden population as defined within this policy.</p> <p>f) The 6 fraction schedule is considerably more convenient for patients and is therefore recommended.</p> <p>PWG is recommending no change on this basis.</p> |
| <p>How are stakeholders being kept informed of progress with policy development as a result of their input?</p> | <p>All registered stakeholders will be notified when the policy goes out to public consultation.</p> |
| <p>What level of wider public consultation is recommended by the CRG for the NPOC Board to agree as a result of stakeholder involvement?</p> | <p>Given the unanimous support for the policy, the PWG recommends 30 day public consultation.</p> |