

## Engagement Report for Clinical Commissioning Policies

<b>Unique Reference Number</b>	1704
<b>Policy Title</b>	<b>18F-flourodeoxyglucose (FDG) positron emission tomography-computed tomography (PET-CT) as part of radical radiotherapy treatment planning for oesophageal cancer (all ages)</b>
<b>Accountable Commissioner</b>	Nigel Andrews
<b>Clinical Reference Group</b>	Specialised Cancer Diagnostics
<b>Which stakeholders were contacted to be involved in policy development?</b>	<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"> <li>• Members of Specialised Cancer Diagnostics Clinical Reference Group (CRG);</li> <li>• Registered stakeholders of the Specialised Cancer Diagnostics CRG;</li> <li>• Members of the Radiotherapy CRG; and</li> <li>• Registered stakeholders of the Radiotherapy CRG.</li> </ul>
<b>Identify the relevant Royal College or Professional Society to the policy and indicate how they have been involved</b>	<p>The relevant Colleges and Societies are part of the members of the Specialised Cancer Diagnostics CRG and Radiotherapy CRG. This includes:</p> <ul style="list-style-type: none"> <li>• Royal College of Radiologists</li> <li>• Society of Radiographers</li> </ul> <p>Named representatives for both of these organisations were sent copies of the draft policy proposition and invited to provide comment.</p>

	In addition, Cancer Research UK were asked to comment as a key stakeholder.
Which stakeholders have actually been involved?	No responses were received from relevant Colleges or Societies. However, 12 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 identified
How have stakeholders been involved? What engagement methods have been used?	<p>The draft policy proposition was distributed to stakeholders via email for a period of two weeks of stakeholder testing, 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> <p>Stakeholder testing asked the following questions:</p> <ul style="list-style-type: none"> <li>• It is proposed that highly specialised products will go for period of public consultation. Please select the consultation level that you consider to be most appropriate. (6 weeks or up to 12 weeks)</li> <li>• Do you have any further comments on the proposed changes to the document?</li> <li>• If Yes, please describe below, in no more than 500 words, any further comments on the proposed changes to the document as part of this initial 'sense check'.</li> <li>• Please declare any conflict of interests relating to this document or service area.</li> </ul>
What has happened or changed as a	No changes have been made to the policy proposition as a result of stakeholder feedback.

<p>result of their input?</p>	<p>Out of the 12 responses received, 6 stakeholders actively supported the policy proposition. No stakeholders disagreed with the policy proposition but commented that:</p> <ul style="list-style-type: none"> <li>• Although FDG PET-CT may have a role in ensuring treatment is targeted appropriately, ultimately improvements in outcomes for patients with oesophageal cancer will be driven by improvements in treatments such as chemotherapy and radiotherapy. The PWG support this feedback.</li> <li>• FDG PET-CT is used routinely in the staging of oesophageal cancer in line with the Clinical Commissioning Policy Statement for PET-CT Guidelines (NHS England Reference: B02/PS/b) and this scan can also be used as part of treatment planning. This negates the need for a separate planning scan and different teams within centres should work together to share the appropriate images. The PWG acknowledge that this is becoming increasingly common practice in some centres.</li> <li>• FDG PET-CT for treatment planning should not be looked at in isolation but should be considered in a wider context. The PWG acknowledge that there are other techniques that could be used in treatment planning but these are outside of the scope of this document.</li> <li>• There is currently an ongoing trial (SCOPE-2 Chemo-RT) involving the use of PET-CT. The PWG acknowledge that although the trial mandates the use of PET-CT as part of treatment planning, the focus of the study is on the impact of radiotherapy and chemotherapy treatments as opposed to the impact of the use of PET-CT and therefore the findings are likely to be outside of the scope of this policy.</li> </ul>
<p>How are stakeholders being kept informed of progress with policy development as a result of their input?</p>	<p>All stakeholders (including CRG members and registered stakeholders) will be notified when the draft policy proposition goes out to public consultation.</p>
<p>What level of</p>	<p>The PWG is recommending a 4 week public consultation.</p>

wider public  
consultation is  
recommended  
by the CRG for  
the NPOC  
Board to agree  
as a result of  
stakeholder  
involvement?