

Engagement Report for Clinical Commissioning Policies

Unique Reference Number	1783
Policy Title	Proton Beam Therapy for Children, Teenagers and Young Adults in the treatment of malignant and non-malignant tumours.
Lead Commissioner	
Clinical Reference Group	Radiotherapy
Which stakeholders were contacted to be involved in policy development?	A policy working group was established in line with NHS England's standard methods.
	The draft policy proposition was sent to the following groups for comment:
	 Registered stakeholders for the Radiotherapy Clinical Reference Group (CRG);
	Registered stakeholders for the Children and Young People's (CYP) Cancer CRG;
	Members of Radiotherapy CRG; andMembers of the CYP Cancer CRG.
Identify the relevant Royal College or Professional	The relevant Royal Colleges or Professional Societies are part of the Radiotherapy CRG, CYP Cancer CRG or registered stakeholders, and include:
	Royal College of Physicians;
Society to the policy and	 Royal College of Radiologists; Children's Cancer and Leukaemia Group (CCLG); and
indicate how they have been involved	Teenage and Young Adults Cancer (TYAC).
	Named representatives for each of these organisations were sent copies of the draft policy proposition and invited to provide comment.
Which stakeholders	Responses were received from CCLG and TYAC. 14 additional responses were received from other registered stakeholders.

have actually been involved?	
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?	The draft clinical commissioning policy statement was distributed to stakeholders via email for a period of two weeks of stakeholder testing, in preparation for public consultation. 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. Stakeholder testing asked the following questions: Do you have any further comments on the proposed changes to the document? 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'. Please declare any conflict of interests relating to this document or service area.
What has happened or changed as a result of their input?	There were 16 responses in total to stakeholder testing. Three respondents made no comment beyond making a recommendation on the length of public consultation. Several respondents made specific comments on the wording in the policy proposition. These were considered in turn by the PWG and where relevant an amendment to the policy was made or explanation given as to why the PWG chose not to amend the policy. The detail for this is included in Appendix 1.

Several respondents made comments that were considered outside of the policy scope. These included comments on the provision of anaesthetic services, and the timelines and process for managing referrals. These are comments have already been addressed in service specification for the NHS PBT Service or the Standard Operating Procedure: Proton beam therapy treatment application process and centre allocation.

Other comments outside of the scope of the policy were in two main themes:

- Funding/costs of travel for patients attending the NHS PBT Centre.
- Impact of the NHS PBT service on paediatric radiotherapy and cancer services across the country and further impact on recruitment and retention of paediatric clinical oncologists for these services.

Although outside the exact scope of the policy, these comments are noted and will be considered by NHS England separately by the relevant commissioning team.

How are stakeholders being kept informed of progress with policy development as a result of their input? All stakeholders (including CRG members and registered stakeholders) will be notified when the draft policy statement goes out to public consultation.

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

Of the 16 responses received: (i) 9 respondents recommended 12 week public consultation; (ii) 6 respondents recommended up to 6 weeks public consultation; and (iii) 1 respondent did not make a recommendation on the length of consultation.

Despite feedback from stakeholders, the PWG are recommending public consultation take place for up to 6 weeks. This is because some children and young people with cancer are already accessing PBT services through the overseas programme and therefore the policy proposition builds on the existing commissioning position. In addition, the comments relating to the impact of the NHS PBT service on existing paediatric clinical oncology services will be reviewed by NHS England outside of the development of this clinical commissioning policy.