

5th Floor Stephenson House
Hampstead Road
London
NW1 2PL

Monday 4th September 2017

Dear GP Colleagues,

Re: **Primary care stratified follow-up of stable prostate cancer patients**

We last communicated with you, regarding the Prostate Cancer follow-up Locally Commissioned Service (LCS) for patients with stable prostate cancer, in June 2017, at the locality meetings. This letter is to provide an overview and update of the Prostate Cancer Service. I apologise for the silence over the months since; this is due to the logistics of gaining agreement and organising the service across the 5 North Central London (NCL) CCGs.

The NCL Primary care stratified follow-up prostate cancer service for patients with stable prostate cancer has been developed with primary and secondary care clinicians; it built on the successful Croydon CCG pilot, which was launched in 2014. The rationale for the service is to ensure patients receive care closer to home and reduce unnecessary hospital attendances which add no value to patients, incur unnecessary costs and block hospital appointments which are needed for more complex patients.

As part of this service GPs/Practice Nurses will be expected to:-

- Provide patients with a 30 minute 'Cancer Care Review' to explain their PSA monitoring in the community, within 4 weeks of receiving the patient's treatment summary
- Complete a 'Holistic Needs Assessment' (HNA), to provide patients with information on or refer patients to services they might benefit from and to plan their next PSA test. Secondary care will stipulate the frequency of the PSA test in the patient's treatment summary and the Urology departments of the Acute Trusts have agreed to send out for all patients within 4 weeks of discharge of the patient from secondary care. The CCG has developed a template for EMIS to support this review (this will be sent out in due course)
- Appoint a lead GP/practice nurse for this work who could attend an education event about this service (there are two upcoming at Islington and Haringey CCGs and the details will be provided in due course on the Camden CCG website). The named clinical lead (GP or Nurse) is expected to complete a one-off minimum 1 hour training session accredited by BMJ Learning and disseminate training material to other staff within the practice.

Practices will be paid **£50** per patient for providing the PSA test, the HNA and maintaining the register per year. Payment will be made on an annual basis. Monitoring of the service will be on a bi-monthly basis initially.

Please note that the Prostate Cancer follow-up Steering Group led by Dr Clare Stephens (NCL Cancer Commissioning Board Chair and Barnet CCG Cancer Clinical Lead) will continue to meet throughout the year to monitor the progress of the project. There will also be a full evaluation of the project in March 2018 taking into account GP practice feedback, patient views and LMC feedback as well as other measures – a designated research registrar has been appointed to undertake the **Working with the people of Camden to achieve the best health for all**

evaluation. The results of the steering group meetings and the evaluation will be used to identify any required changes to the service to ensure it is working for all in going forward.

A 'go live' date, of **Monday 2nd October 2017**, has now been agreed across NCL.

Please find attached the ***Primary care stratified follow-up of stable prostate cancer patients*** service specification version 10 and other key documents relating to the service. As already mentioned the EMIS template will be forwarded during September in advance of the go-live date.

The specification defines the cohort of stable prostate cancer patients, which can be managed within the service. There are three ways for patients to be included in this service; the majority will be discharged from secondary care; however, this LCS has been specifically crafted to allow GPs to include stable prostate patients that are already being followed-up without dedicated resourcing to date; also practices can audit their patient lists and identify to secondary care the patients they believe would benefit from the service should they wish to do so.

To express an interest in delivering this service, please sign and date the enclosed form and return to the Primary Care Team via email (camdenlcs@nhs.net) by **Monday 11th September 2017**.

If you have any concerns, queries or feedback about the service don't hesitate to contact me directly on my email astrid.holness@nhs.net.

Yours sincerely,



Astrid Holness
Commissioning Manager – Cancer Services



Dr Imogen Staveley
GP Clinical Lead

Cc. Trevor Myers
Gordon Houlston
Jess Peck

Agreement

This document constitutes the agreement between the CCG and the Provider relating to the Prostate Cancer Follow-Up Service for stable prostate cancer patients.

All providers are required to provide essential services, and those additional services that they are contracted to provide, to all of their patients. The service specification defines more specialised services to be provided, and covers the aspects of clinical care of the patient which are beyond the scope of essential services.

I can confirm that all staff training, accreditation, equipment and service provision requirements in this service level agreement will be fully adhered to at all times when the service is being provided by this practice.

Service	Prostate Cancer Follow up service
Date of agreement	2 nd October 2017
Service commencement agreement	2 nd October 2017
Duration of agreement	2 nd October to
Provider	<INSERT PRACTICE NAME>
Commissioner	Camden CCG

SIGNED by Gordon Houlston for and on behalf of CAMDEN CCG	Signature: Title: Date: 2 nd October 2017
SIGNED by [INSERT AUTHORISED SIGNATORY'S NAME] for and on behalf of [INSERT PROVIDER NAME] Signature Title Date

Note: CCG to retain original signed document.