

Engagement Report for Clinical Commissioning Policies

Unique Reference Number	1901
Policy Title	External beam radiotherapy of the prostate for newly diagnosed patients with hormone sensitive prostate cancer presenting with low volume metastatic disease
Clinical Reference Group	Radiotherapy
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?	<p>Responses were received from Royal College of Radiologists, NCRI Clinical and Translational Radiotherapy Research Group (CTRAd), the Bay prostate cancer support group and Walnut Group PC support. In addition, a further 10 responses were received from registered stakeholders.</p>

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> <ul style="list-style-type: none"> a) A review of the published evidence included in the policy by the Policy Working Group (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. 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

	<p>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 proposition, the PWG recommends 30 day public consultation.</p>