The Melanoma Taskforce
Chaired by Siân James MP

FREEDOM OF INFORMATION REQUEST

Melanoma Taskforce FOI request into NHS care for patients with melanoma

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Position: **Consultant Dermatologist, Skin cancer lead clinician**

Name of NHS Acute Trust: **Kettering General Hospital NHS Trust**

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Please return your completed response to the Melanoma Taskforce secretariat:

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Under the Freedom of Information Act 2000, the Melanoma Taskforce is writing to Strategic Health Authorities (SHAs), NHS Acute Trusts and Cancer Networks to request the following information:

SECTION ONE
Adherence to Melanoma Patient Pathways

1) Does your Trust have its own standard clinical pathway for the diagnosis, management and treatment of patients with melanoma? *Place an X in one box. If the answer is yes, please go to question 4.*

Yes	**X**
No	

2) Does your Trust have any plans to introduce a standard clinical pathway for melanoma? *(Place an X in one box)*

Yes	
No	

3) Does your Trust follow the published melanoma patient pathway of another Trust, SHA or cancer network? *(Place an X in one box)*

Yes	**X**
No	

If yes, please provide further details

_____
_____We are part of the East Midlands Cancer Network and link in to their regular meetings._____
_____
_____

4) **Is the Trust's pathway publicly available?** *If so, please state below where the pathway can be found.*

Yes	
No	**X**

5) **When was your melanoma patient pathway first published?**
_____The patient pathway used by the Trust was published by the East Midlands Cancer Network in 2009.

6) **When was the pathway last updated?**
_____August 2011

7) **Which of the following sources or other pieces of guidance, if any, were referred to in the construction of the pathway?** *Place an X in each box that is applicable.*

British Association of Dermatologists, '*Revised UK Guidelines for the Management of Cutaneous Melanoma 2010*'	X
European Society for Medical Oncology, '*Melanoma: Clinical practice guidelines for diagnosis, treatment and follow-up*', 2010	
NHS Map of Medicine	
NICE CGSTIM '*Improving Outcomes for People with Skin Tumours Including Melanoma*', 2010	X
Royal College of Physicians, '*The Prevention, Diagnosis, Referral and Management of Melanoma of the Skin*', 2007	
None of the above	
Other(s), please state	

8) Do you carry out regular audits to ensure that the pathway is being followed? *(Place an X in one box)*

Yes	X
No	

9) If so, when was the last audit carried out?
_____August 2011

10) What were the levels of adherence to the pathway shown by the most recent audit?
Please provide as much detail as possible.

_____The pathway is well adhered to. The only problems are in preventing Melanomas from being excised (usually by accident) within primary care. The pathway for ongoing care shows no problems.

SECTION TWO
Patient Care in Melanoma

Section two of the survey is split into five short sections. Please answer all questions that are applicable to your Trust.

PART ONE: DIAGNOSIS AND REFERRAL

11) How many GPs with a Special Interest in Dermatology practice within your Trust?
_____2_____

12) What training in melanoma does your Trust encourage GPs to undertake? *Please tick all boxes that are applicable.*

Continuous Professional Development (CPD) courses	X
Online training courses	

No courses offered / encouragement	

Please provide any further explanatory information

The Trust's 2 GPwSIs are new in post and have therefore not undergone any specific yearly update. They have both completed the Cardiff diploma in dermatology. They are intending to go on a skin cancer course

PART TWO: MELANOMA MANAGEMENT

13) Does your Trust have a Specialist Skin Multidisciplinary Team (SSMDT)? *(Place an X in one box) If the answer is no, please go to question 15.*

Yes	X
No	

14) Which of the following professionals are represented on your SSMDT? *Please place an X in the box for all those that apply.*

Dermatologist	X
Plastic Surgeon	X
Clinical Oncologist	X
Medical Oncologist	
Melanoma Specialist Nurse	X
Pathologist	X
Radiologist	X
Other	

15) How many melanoma nurse specialists currently practice within your Trust?

0 Between posts for 6months. New CNS due to commence in post 7th November. 2011.

16) Does your Trust undertake Sentinel Node Biopsy? *(Place an X in one box)*

Yes	
No	X

If the answer is no, please describe why your Trust does not use Sentinel Node Biopsy.
___Patients requiring a Sentinel Node Biopsy are referred to the Royal London Hospital_____

17) For what purposes does your Trust use Sentinel Node Biopsy? *(Place an X in all boxes that apply)*

As a prognostic tool in a defined subset of patients	
As part of ongoing research	
In order to provide continued practice to maintain clinical skills	

PART THREE: MELANOMA TREATMENT

18) Which of the following potential melanoma treatments are available within your Trust? *For each, please state whether the treatment is fully funded by the Trust, available through Individual Funding Requests (IFR), available via the Cancer Drugs Fund (CDF) or through clinical trials.*

Treatment	Fully Funded by Trust	Funded via IFR	Funded via CDF	Available only in clinical trials	Not available
Bevacizumab					x
Carmustine					x
Cisplatin					x
Dacarbazine					x
Interferon-alpha					x
Interleukin-2					x
Ipilimumab					x

Tamoxifen					x
Vemurafenib					x
Vinblastine					x

Please use the table below to provide details of any other treatments not listed above

Treatment	Fully Funded by Trust	Funded via IFR	Funded via CDF	Available only in clinical trials	Not available

19) Are patients routinely made aware of clinical trials taking place that may be appropriate for them? *Place an X in one of the boxes below*

Yes	x
No	

20) Are patients routinely made aware of clinical trials that may be appropriate for them that are taking place in another Trust? *Place an X in one of the boxes below*

Yes	x
No	

PART FOUR: END OF LIFE AND PALLIATIVE MELANOMA CARE

21) Which of the following factors might lead the Trust to consider referring patients to specialist palliative care services? *Place an X in all boxes below that are applicable.*

Complex symptom management issues	X

Difficulties in adjusting to the diagnosis or disease progression	X
Psychological and family issues - such as communication problems within the family	X
Spiritual issues - such as the challenging of belief system/faith/cultural values as a result of the cancer	X
Other (please provide further details below)	
None of the above	

22) What proportion of patients within your Trust decided against receiving treatment for Stage IV melanoma in the last year for which data is available?

_____25%_____
___

PART FIVE: PATIENT EXPERIENCE & INFORMATION

23) What sources of advice and information does your Trust use to provide information to patients about how to self-examine for signs of melanoma or metastases? *Please tick all boxes that apply*

NHS Choices	
National Cancer Action Team	
Cancer Research UK	
Macmillan Cancer Support	x
British Association of Dermatologists	
None of the above	
Other *(please state and provide further detail below)*	

24) At which of the following stages does your Trust provide reassurance and psychological counselling routinely for melanoma patients?

Primary presentation	x
Referral	

Diagnosis	x
Management	x
Progression to advance disease	x
Palliative and end of life care	x
Every stage	
No stage	

SECTION THREE: Additional Information

25) Please indicate which of the following you believe would improve care for patients with melanoma. *Please place an X in all boxes that you think apply*

More money and resources	x
Better information and data	
A comprehensive and standard clinical pathway	
Commissioning Support / Guidance	x
None of the above	
Other (*please state and provide further details below)* *STAFF!*	