

Ref: FOIA Reference 2024/25-418

Royal Stoke University Hospital
Data, Security and Protection
Newcastle Road
Stoke-on-Trent
Staffordshire
ST4 6QG

Date: 8th October 2024

Email foi@uhnm.nhs.uk

Dear Mr/Ms

I am writing in response to your email dated 25th September 2024 requesting information under the Freedom of Information Act (2000) regarding Breast Cancer.

As of 1st November 2014 University Hospitals of North Midlands NHS Trust (UHNM) manages two hospital sites – Royal Stoke University Hospital, and County Hospital (Stafford). Therefore the response below is for the two sites combined from that date where appropriate.

Q1 I am undertaking work on behalf of Breast Cancer Now. They are keen to understand more about how Personalised Stratified Follow Up (PSFU) is being delivered at a Trust level, as it relates to breast cancer.

At the end of their hospital-based treatment, all primary breast cancer patients used to be offered - in addition to yearly mammograms for suitable patients - an annual clinical appointment for a period of five years, known as Routine Follow Up. In recent years, there has been a move away from Routine Follow Up and towards Personalised Stratified Follow Up (PSFU) at the end of hospital-based treatment. PSFU would give the option of Patient Initiated follow-up (PIFU) or Routine Follow Up- with both pathways continuing to offer annual mammograms for suitable patients. While the terms PSFU and PIFU are sometimes used interchangeably, for the questions below PSFU is being used to mean the overarching approach which encompasses the specific options of Routine Follow Up and PIFU. Note that sometimes other terms are used instead of PSFU or PIFU, e.g. supported self- management follow up, stratified follow up or open access follow up.

In accordance with the Freedom of Information Act 2000, I would appreciate it if you could respond to the below questions. Please use an X in the boxes to indicate your answer when required or provide numerical data where requested. Note that some questions are open questions and some ask for copies of documents The questions in this request all relate to the PSFU pathway for primary breast cancer patients.

Key Relevant Documents

 Does your Trust have a Standard Operating Procedure - also referred to as a PSFU Protocol - that covers the PSFU pathway for breast cancer?

Yes	
No	
Don't Know	

If yes, please share your current, or most recent, version of this Standard Operating Procedure/PSFU Protocol







See below:				
Yes	Yes – SOP attached for the Self-managed (SMP) PSFU pathway for breast cancer which has been in place since 2019			
No				
Don't Know				
	Yes No			

Are all hospitals that form part of your Trust following the processes set out in the Standard Operating Procedure/PFSU Protocol for breast cancer?

Yes	
No	
Don't Know	

If no, please send the breast cancer related Standard Operating Procedure/PSFU Protocol of each hospital in the Trust

- A2 Yes
- Q3 Information provided about breast cancer signs and symptoms
 This section relates to the information given to women about signs and symptoms of primary breast cancer and signs and symptoms of secondary breast cancer.

At the end of hospital-based treatment do you provide primary breast cancer patients with information about the signs and symptoms of primary breast cancer?

Yes - for all patients	
Yes – but not consistently	
No	

If yes- please provide a copy of the information provided or a link to the information if it is available online. If this information is part of a longer document please provide the full document.

- A3 Yes for all patients
- Q4 At the end of hospital-based treatment, do you provide primary breast cancer patients with information about the signs and symptoms of secondary breast cancer?

Yes - for all patients	
Yes – but not consistently	
No	

If yes- please provide a copy of the information provided or a link to the information if it is available online. If this information is part of a longer document please provide the full document.

A4 Patients are given a full range of information pertinent to their type of cancer and treatment at diagnosis and will all receive an End of Treatment summary which will also list the signs and symptoms to be aware of.







Information included in attached information leaflet.

Q5 Number of patients

How many patients did you treat for primary breast cancer that finished their hospital-based treatment in each of the Financial Years 2022-23 and 2023- 2024?

	Number of Patients
2022-2023	
2023-2024	

A5 See below:

	Number of Patients
2022-2023	574
2023-2024	567

- Q6 For each of the Financial Years 2022-23 and 2023-24, of the primary breast cancer patients that completed hospital-based treatment, please provide an estimate of what proportion were stratified to each follow up pathway?
 - a) A PIFU pathway
 - b) A Routine Follow Up pathway

If you can provide the figures spilt between the age under 45 category and age 45 and over category that would be useful but if the information is not readily available by age, please provide for all ages combined.

	% of patients					
	2022-2023			2023-24		
	Under 45 45 and All ages			Under 45	45 and	All ages
		over			over	
PIFU						
Routine						
Follow						
Up						

A6 See below:

	% of patients					
	2022-2023		2023-24			
	Under 45	45 and	All ages	Under 45	45 and	All ages
		over			over	
PIFU	25	303	328	27	329	356
Routine Follow Up	above it is there will be are decease	not possible e several pe ed. This req	to provide the ople still on a uires a case	ast PSFU is keen number of active treatments. Each of the control	n routine foll nent and a n riew, therefo	ow up as umber who







Q7	At the end of hospital-based treatment, is there a set period of time during which all
	patients in the Trust receive Routine Follow Up, with the decision between a Routine
	Follow Up pathway and a PIFU pathway being taken at a later date?

Yes- all patients receive routine follow up for a set period of time at the end of hospital- based treatment	
No- patients are immediately placed on	
Routine Follow Up or PIFU	

If yes, which hospitals offer this and for each hospital how long is the set period of time?

- A7 No -patients are immediately placed on Routine Follow Up or PIFU
- Q8 Description of the pathway

We are hoping to understand in more detail how the breast cancer PIFU pathway works and how people are able to make contact when they have a concern. If you are providing a Standard Operating Procedure/PFSU Protocol as part of your response, you only need to respond to questions 8, 9, 10 and 11 if the answers to these questions are not fully available in the document.

If a patient wants to raise a concern about a breast cancer sign or symptom (either primary breast cancer or secondary breast cancer) while on a PIFU pathway, what are the options for them to do so (please tick all that apply):

<u> </u>	\ 1	,	
A telephone service			
Email contact			
Drop in clinics			
Other- please detail			

A8 See below:

A telephone service	Yes Breast Care Nurse Advice Line
Email contact	
Drop in clinics	
Other- please detail	

Q9 Monitoring of the pathway

Are all breast cancer patients on a PIFU pathway logged and tracked on the organisation's IT system?

All are logged	
All are logged and tracked	
Some are logged	
Some are logged and tracked	
No	







	are logged	
All a	are logged and tracked	Yes using RMS (Remote Monitoring
•		System from Somerset)
Son	ne are logged	System nom comercely
	ne are logged and tracked	
No	To are logged and tracked	
110		
		The Born of the Control of the Contr
	nere a standard time limit o ents e.g. 5 years?	n how long PSFU pathways are available to be
•	<u> </u>	
Yes		
No		
	es, how frequently is the sta ays	andard time limit applied?
	ays st of the time	
INIOS	St Of the time	
Son	natimas	
Rare If ar	ny patients have a differenc	ce to the standard time limit, please detail and
Rare If ar wha	ely ny patients have a differenc	ce to the standard time limit, please detail and rs and the range of time limits?
Rarolf arwha	ely ny patients have a difference nt circumstances this occur below:	
Rare If ar wha	ely ny patients have a difference at circumstances this occur below:	
Rare If ar wha See Yes	ely ny patients have a difference at circumstances this occur below:	rs and the range of time limits?
Rare If are what See Yes Alwa Mos	ely ny patients have a difference at circumstances this occur below: ays	rs and the range of time limits?

A11

See below:

Yes No



Yes - see attached Virtual MDT SOP





Don't Know	

- Q12 We are keen to discuss in more detail the answers to this FOI with a small number of Trusts. If this is something you would consider, please let us know and we will follow up if needed.
 - Yes
 - No

If yes, the person to contact is:

A12 No

*Please note that any individuals identified do not give consent for their personal data to be processed for the purposes of direct marketing.

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An anonymised copy of this request can be found on the Trust's disclosure log, please note that all requests can be found at the following link: http://www.uhnm.nhs.uk/aboutus/Statutory-Policies-and-Procedures/Pages/Freedom-of-Information-Disclosure-Log.aspx

This letter confirms the completion of this request. A log of this request and a copy of this letter will be held by the Trust.

If you have any queries related to the response provided please in the first instance contact my office.

Should you have a complaint about the response or the handling of your request, please also contact my office to request a review of this. If having exhausted the Trust's FOIA complaints process you are still not satisfied, you are entitled to approach the Information Commissioner's Office (ICO) and request an assessment of the manner in which the Trust has managed your request.

The Information Commissioner may be contacted at:

Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF or via www.ico.org.uk.

Yours,







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Rachel Montinaro

Data Security and Protection Manager - Records



