

# NCA Prostate QPI report

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Patients diagnosed from 1st July 2021 to 30th June 2022

Extracted from eCASE on 17/04/2023

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## Background

Definitions for the QPIs reported in this section are published by Health Improvement Scotland<sup>1</sup>, while further information on datasets and measurability used are available from Public Health Scotland<sup>2</sup>. Data for most QPIs are presented by Board of diagnosis, however QPI 5 & 8 are presented by Hospital of Surgery and QPI 6 is presented by surgeon. In addition, clinical trials and research study access is reported by patient's NHS Board of residence.

## Governance and Risk

QPI performance is overseen by the North Cancer Alliance and its constituent groups, with an assessment of clinical risk and action planning undertaken collaboratively and reporting at board and regional level. Actions will be overseen by the Pathway Boards and reported concurrently into the NCA governance groups and the relevant cancer governance groups in each of the health boards in the NCA.

[Further information is available here.](#)

The data contained within this report was extracted from eCASE. Cancer audit is a dynamic process with patient data continually being revised and updated as more information becomes available. This means that apparently comparable reports for the same time period and cancer site may produce different figures if extracted at different times.

\*Where the number of cases per Board is between one and four, results have been excluded from charts and tables to minimise the risk of disclosure. However, all board results are included within the total for the North of Scotland.

*QPIs v4.1 - published October 2020*

*Measurability v4.3*



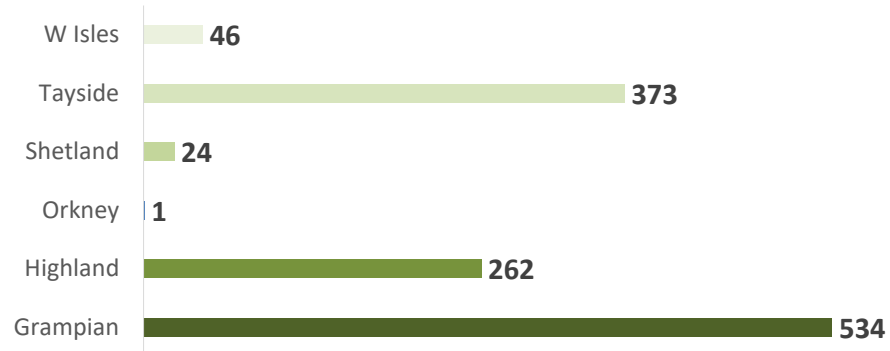


# NCA Prostate QPI Overview

## Patient overview

Number of Patients in the NCA **1240**

Most common age group **70-74**



## QPI Performance overview

		2021/22	vs Target	vs Target
<b>Diagnostics</b>	QPI 2: Radiological Staging	97.5%	vs 95%	●
	QPI 14(i): Diagnostic Pre-biopsy MRI	95.3%	vs 95%	●
	QPI 14(ii): Diagnostic Pre-biopsy MRI	97.6%	vs 95%	●
	QPI 11: Management of Active Surveillance	40.9%	vs 95%	●
<b>MDT Discussion</b>	QPI 4(i): Multi-Disciplinary Team (MDT) Meeting Non-metastatic	98.0%	vs 95%	●
	QPI 4(ii): Multi-Disciplinary Team (MDT) Meeting Metastatic	96.2%	vs 95%	●
<b>Treatments - Surgery</b>	QPI 5: Surgical Margins	19.5%	vs < 20%	●
	QPI 8: Post Surgical Incontinence	38.6%	vs 50%	●
<b>Treatments- Hormones</b>	QPI 7(i): Hormone Therapy and Docetaxel Chemotherapy	90.0%	vs 95%	●
	QPI 7(ii): Hormone Therapy and Docetaxel Chemotherapy	1.1%	vs 40%	●
<b>Treatments - Radiotherapy</b>	QPI 15(i): Low Burden Metastatic Disease	72.2%	vs 95%	●
	QPI 15(ii): Low Burden Metastatic Disease	65.5%	vs 60%	●



## QPI 2: Radiological Staging

### QPI 2

**Patients with high risk prostate cancer, who are suitable for radical treatment, should be evaluated for locally advanced, nodal or bony metastatic disease.**

**Description** Proportion of patients with high risk prostate cancer undergoing radical treatment who have had MRI and bone scan staging.

**Numerator** Number of patients with high risk prostate cancer undergoing radical treatment who have an MRI of the prostate and isotope bone scan (or alternative whole body MRI evaluation).

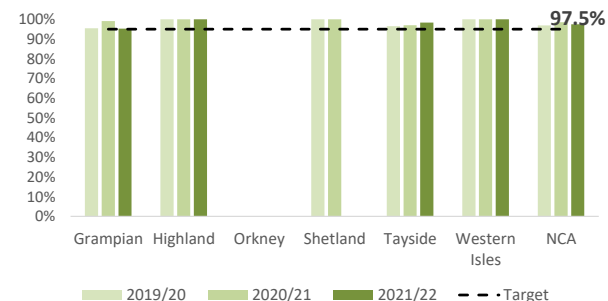
**Denominator** All patients with high risk prostate cancer undergoing radical treatment. (Excluding patients unable to undergo an MRI scan, patients who decline MRI, and patients with T2c tumours (with no other high risk factors)).

**Target**

**95%**

	2021/22	of	Numerator	2020/21	2019/20
<b>2021/22</b>					
Grampian	95.3%	128	122	99.1%	95.5%
Highland	100.0%	58	58	100.0%	100.0%
Orkney	-	0	0	-	-
Shetland	-	-	-	100.0%	100.0%
Tayside	98.3%	117	115	97.0%	96.5%
Western Isles	100.0%	9	9	100.0%	100.0%
<b>NCA</b>	<b>97.5%</b>	<b>316</b>	<b>308</b>	<b>98.5%</b>	<b>96.9%</b>

### NCA boards





## QPI 4(i): Multi-Disciplinary Team (MDT) Meeting - Non-metastatic

### QPI 4(i)

**Patients should be discussed by a multi-disciplinary team prior to definitive treatment**

**Description** Proportion of patients with prostate cancer who are discussed at MDT meeting before definitive treatment. Please note: The specifications of this QPI are separated to ensure clear measurement of patients with: (i) Non-metastatic prostate cancer (TanyNanyM0);

**Numerator** Number of patients with non-metastatic prostate cancer (TanyNanyM0) discussed at the MDT before definitive treatment.

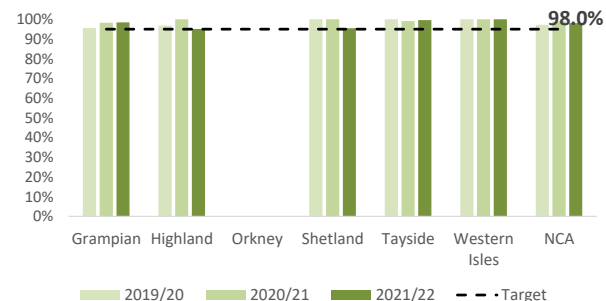
**Denominator** All patients with non-metastatic prostate cancer (TanyNanyM0) (Excluding patients who died before first treatment).

**Target**

**95%**

	2021/22	of	Numerator	2020/21	2019/20
<b>2021/22</b>					
Grampian	98.5%	391	385	98.2%	95.5%
Highland	95.1%	203	193	100.0%	96.8%
Orkney	-	0	0	-	-
Shetland	95.5%	22	21	100.0%	100.0%
Tayside	99.6%	261	260	99.1%	100.0%
Western Isles	100.0%	39	39	100.0%	100.0%
<b>NCA</b>	<b>98.0%</b>	<b>916</b>	<b>898</b>	<b>98.9%</b>	<b>97.2%</b>

**NCA boards**





## QPI 4(ii): Multi-Disciplinary Team (MDT) Meeting -Metastatic

### QPI 4(ii)

### Patients should be discussed by a multi-disciplinary team prior to definitive treatment

**Description** Proportion of patients with prostate cancer who are discussed at MDT meeting before definitive treatment. Please note: The specifications of this QPI are separated to ensure clear measurement of patients with:(ii) Metastatic prostate cancer (TanyNanyM1).

**Numerator** Number of patients with metastatic prostate cancer (TanyNanyM1) discussed at the MDT within 6 weeks of commencing treatment.

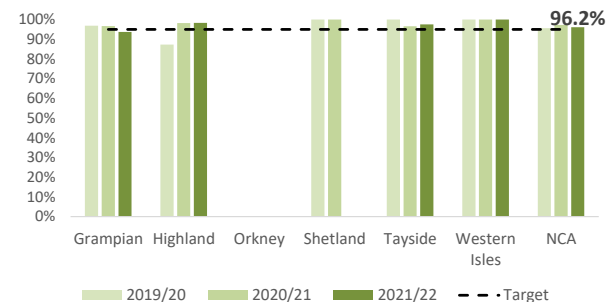
**Denominator** All patients with metastatic prostate cancer (TanyNanyM1) (Excluding patients who died before first treatment).

#### Target

95%

	2021/22	of	Numerator	2020/21	2019/20
<b>2021/22</b>					
Grampian	93.7%	111	104	96.7%	96.8%
Highland	98.3%	58	57	98.2%	87.3%
Orkney	-	-	-	-	-
Shetland	-	-	-	100.0%	100.0%
Tayside	97.6%	82	80	96.6%	100.0%
Western Isles	100.0%	6	6	100.0%	100.0%
<b>NCA</b>	<b>96.2%</b>	<b>260</b>	<b>250</b>	<b>97.2%</b>	<b>95.7%</b>

#### NCA boards



NHS Grampian reviewed cases failing this measure, and the majority received hormone treatment before MDT discussion. The NCA Urology Pathway Board believes this should not be cause for not meeting this measure.



## QPI 5: Surgical Margins

### QPI 5

**Organ confined prostate cancers which are surgically treated with radical prostatectomy should be completely excised.**

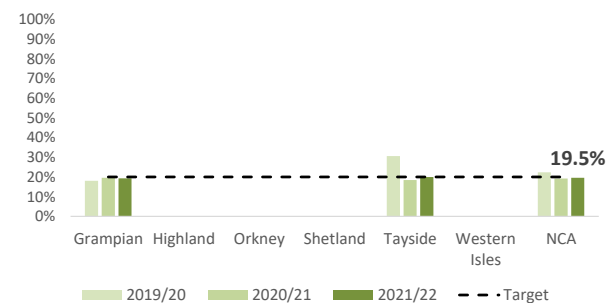
**Description** Proportion of patients with pathologically confirmed, organ confined (stage pT2) prostate cancer who undergo radical prostatectomy in which tumour is present at the margin, i.e. positive surgical margin

**Numerator** Number of patients with stage pT2 prostate cancer who underwent radical prostatectomy in which tumour is present at the margin

**Denominator** All patients with stage pT2 prostate cancer who underwent radical prostatectomy (No exclusions).

Target	< 20%					
	2021/22	of	Numerator	2020/21	2019/20	
<b>2021/22</b>						
Grampian	19.3%	88	17	19.6%	18.1%	
Highland	-	0	0	-	-	
Orkney	-	0	0	-	-	
Shetland	-	0	0	-	-	
Tayside	20.0%	40	8	18.4%	30.6%	
Western Isles	-	0	0	-	-	
<b>NCA</b>	<b>19.5%</b>	<b>128</b>	<b>25</b>	<b>19.2%</b>	<b>22.4%</b>	

### NCA boards





## QPI 6: Volume of Cases Per Surgeon

### QPI 6

### Surgery should be performed by surgeons who perform the procedure routinely

**Description** Number of radical prostatectomy procedures performed by a surgeon over a 1 year period

**Numerator** Number of radical prostatectomies performed by each surgeon in a given year

**Target** Minimum 50 procedures per surgeon in a 1 year period.

	Surgeon	2021/22	2020/21	2019/20	
2021/22	Grampian	1	59	67	58
		2	46	33	41
		3	43	30	41
		4	2	2	6
	Tayside	1	87	58	74

NHS Grampian's Urology team believes that this data is not a true reflection of activity, and on review of the data, Surgeon 4 did not take part in Prostate surgeries and was attributed in error



## QPI 7(i): Hormone Therapy and Docetaxel Chemotherapy

### QPI 7(i)

### Patients with metastatic prostate cancer should undergo immediate hormone therapy , and chemotherapy where appropriate

**Description** Proportion of patients with metastatic prostate cancer (TanyNanyM1) who undergo immediate management with hormone therapy, and docetaxel chemotherapy.

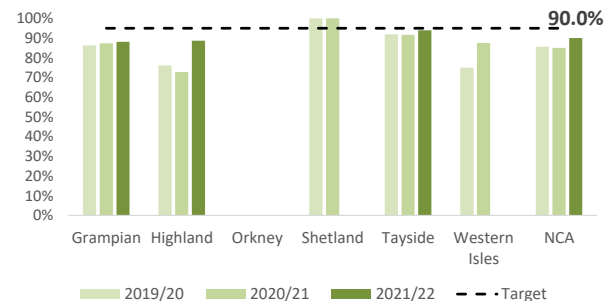
Please note: The specifications of this QPI are separated to ensure clear measurement of patients who undergo (i) Immediate hormone therapy;

**Numerator** Number of patients presenting with metastatic prostate cancer (TanyNanyM1) treated **with immediate hormone therapy**

**Denominator** All patients presenting with metastatic prostate cancer (TanyNanyM1). (Excluding patients documented to have declined immediate hormone therapy, and patients enrolled in clinical trials).

Target	95%							
	2021/22	of	Numerator	2020/21	2019/20			
<b>2021/22</b>								
Grampian	88.1%	109	96	87.4%	86.3%			
Highland	88.6%	44	39	72.7%	76.1%			
Orkney	-	-	-	-	-			
Shetland	-	-	-	100.0%	100.0%			
Tayside	93.9%	82	77	91.7%	91.9%			
Western Isles	-	-	-	87.5%	75.0%			
<b>NCA</b>	<b>90.0%</b>	<b>241</b>	<b>217</b>	<b>85.0%</b>	<b>85.6%</b>			

NCA boards



In most cases patients are receiving hormone therapy, but just outside of the 31 day target or before the MDT. There are plans to streamline patients to see Prostate specialist urologists.





## QPI 7(ii): Hormone Therapy and Docetaxel Chemotherapy

### QPI 7(ii)

### Patients with metastatic prostate cancer should undergo immediate hormone therapy, and chemotherapy where appropriate

**Description** Proportion of patients with metastatic prostate cancer (TanyNanyM1) who undergo immediate management with hormone therapy, and docetaxel chemotherapy.

Please note: The specifications of this QPI are separated to ensure clear measurement of patients who undergo (ii) Immediate hormone therapy and

**Numerator** Number of patients presenting with metastatic prostate cancer (TanyNanyM1) treated **with immediate hormone therapy and docetaxel chemotherapy.**

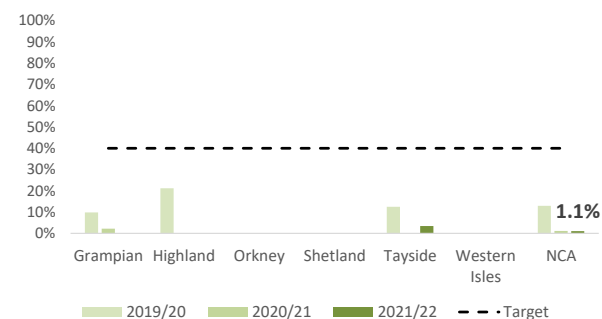
**Denominator** All patients presenting with metastatic prostate cancer (TanyNanyM1). (Excluding patients documented to have declined immediate hormone therapy, patients documented to have declined chemotherapy, patients enrolled in clinical trials, and patients receiving ARTA (Androgen Receptor Targeted Agent) treatment).

**Target**

**40%**

		2021/22	of	Numerator	2020/21	2019/20
<b>2021/22</b>	Grampian	0.0%	44	0	2.2%	9.8%
	Highland	0.0%	18	0	0.0%	21.2%
	Orkney	-	-	-	-	-
	Shetland	-	-	-	-	0.0%
	Tayside	3.4%	29	1	0.0%	12.5%
	Western Isles	-	-	-	0.0%	0.0%
	<b>NCA</b>	<b>1.1%</b>	<b>95</b>	<b>1</b>	<b>1.1%</b>	<b>12.9%</b>

### NCA boards



Chemotherapy is no longer the first line treatment in M1 disease. This QPI has recently been changed to reflect this in subsequent years.



## QPI 8: Post Surgical Incontinence

### QPI 8

**Post-surgical incontinence for patients with prostate cancer should be assessed using a validated Patient Reported Outcome Measures (PROMs) tool.**

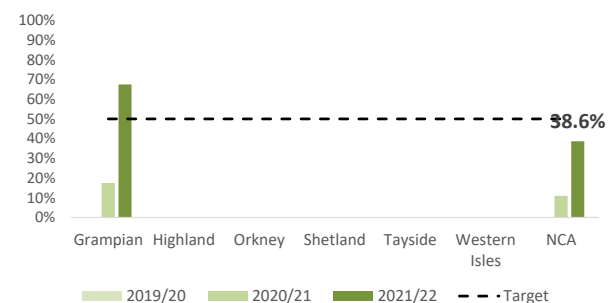
**Description** Proportion of prostate cancer patients who undergo radical prostatectomy that have returned a PROMs tool both pre-operatively and post operatively (12-18 months following surgery) for assessment of incontinence.

**Numerator** Number of patients with prostate cancer undergoing radical prostatectomy that have returned a PROMs tool both pre-operatively and post operatively (12-18 months following surgery) for assessment of incontinence.

**Denominator** All patients with prostate cancer undergoing radical prostatectomy. (Excluding patients who undergo salvage prostatectomy and patients who receive adjuvant radiotherapy within 12 months of surgery).

Target	50%					
	2021/22	of Numerator	2020/21	2019/20		
2021/22						
	Grampian	67.5%	83	56	17.4%	0.0%
	Highland	-	0	0	-	-
	Orkney	-	0	0	-	-
	Shetland	-	0	0	-	-
	Tayside	0.0%	62	0	0.0%	0.0%
	Western Isles	-	0	0	-	-
	<b>NCA</b>	<b>38.6%</b>	<b>145</b>	<b>56</b>	<b>11.0%</b>	<b>0.0%</b>

NCA boards



From next year, all patients will have PROM tools collected pre- and post-operatively for assessment of incontinence and this is currently being implemented for all North of Scotland boards.



## QPI 11: Management of Active Surveillance

### QPI 11

### Men under active surveillance for prostate cancer should undergo biparametric MRI (bpMRI) or multiparametric MRI (mpMRI) within 12-18 months of diagnosis.

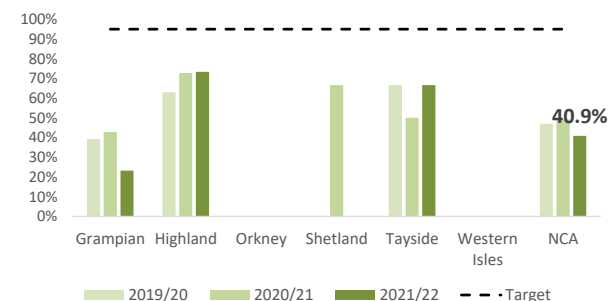
**Description** Proportion of men with prostate cancer under active surveillance who undergo bpMRI or mpMRI within 12-18 months of diagnosis.

**Numerator** Number of patients with prostate cancer under active surveillance who undergo bpMRI or mpMRI within 12-18 months of diagnosis

**Denominator** All patients with prostate cancer under active surveillance (Excluding patients unable to undergo an MRI scan and patients who decline MRI).

Target	95%					
	2021/22	of	Numerator	2020/21	2019/20	
<b>2021/22</b>						
Grampian	23.3%	86	20	42.9%	39.2%	
Highland	73.3%	30	22	72.7%	63.0%	
Orkney	-	0	0	-	-	
Shetland	0.0%	2	0	66.7%	0.0%	
Tayside	66.7%	15	10	50.0%	66.7%	
Western Isles	-	-	-	0.0%	0.0%	
<b>NCA</b>	<b>40.9%</b>	<b>137</b>	<b>56</b>	<b>49.2%</b>	<b>47.0%</b>	

### NCA boards



On review, the patients who did not meet this QPI either received their repeat MR before or marginally after the 12 to 18 month target window.



## QPI 14(i): Diagnostic Pre-biopsy MRI

### QPI 14(i)

**Patients with prostate cancer who undergo biopsy should be evaluated initially with a pre-biopsy biparametric MRI (bpMRI) or multiparametric MRI (mpMRI) and reported using a PI-RADS/Likert system of grading.**

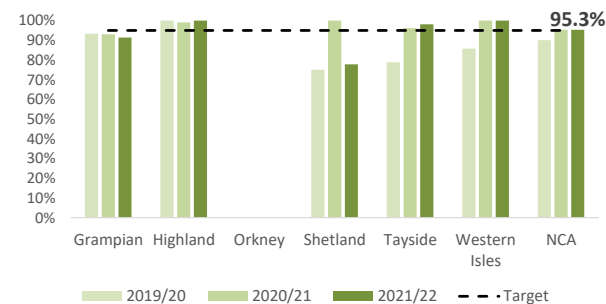
**Description** Proportion of patients with prostate cancer who undergo biopsy and have a pre-biopsy bpMRI or mpMRI as their first line diagnostic investigation, with imaging reported using a PI-RADS/Likert system of grading. Please note: This QPI measures 2 distinct elements. The specifications are separated to ensure clear measurement of i) Patients with prostate cancer who undergo biopsy that have a pre-biopsy bpMRI or mpMRI as their first line diagnostic investigation.

**Numerator** Number of patients with prostate cancer who undergo biopsy that have a pre-biopsy bpMRI or mpMRI as their first line diagnostic investigation.

**Denominator** All patients with prostate cancer who undergo biopsy (Excluding patients unable to undergo an MRI scan, patients who decline MRI, patients who have undergone TURP, patients who have undergone laser enucleation, and patients with locally advanced (Clinical T3 and above) and/or M1 disease).

Target	95%					
	2021/22	of	Numerator	2020/21	2019/20	
<b>2021/22</b>						
Grampian	91.4%	267	244	93.0%	93.4%	
Highland	100.0%	133	133	99.1%	100.0%	
Orkney	-	0	0	-	-	
Shetland	77.8%	9	7	100.0%	75.0%	
Tayside	98.1%	160	157	96.2%	78.8%	
Western Isles	100.0%	32	32	100.0%	85.7%	
<b>NCA</b>	<b>95.3%</b>	<b>601</b>	<b>573</b>	<b>95.3%</b>	<b>90.0%</b>	

NCA boards





## QPI 14(ii): Diagnostic Pre-biopsy MRI

### QPI 14(ii)

**Patients with prostate cancer who undergo biopsy should be evaluated initially with a pre-biopsy biparametric MRI (bpMRI) or multiparametric MRI (mpMRI) and reported using a PI-RADS/Likert system of grading.**

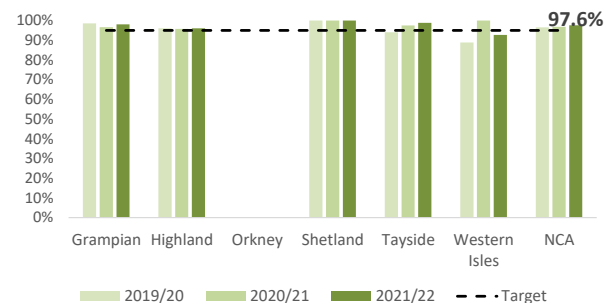
**Description** Proportion of patients with prostate cancer who undergo biopsy and have a pre-biopsy bpMRI or mpMRI as their first line diagnostic investigation, with imaging reported using a PI-RADS/Likert system of grading. Please note: This QPI measures 2 distinct elements. The specifications are separated to ensure clear measurement of (ii) Patients with prostate cancer who undergo biopsy that have a pre-biopsy bpMRI or mpMRI as their first line diagnostic investigation

**Numerator** Number of patients with prostate cancer who undergo biopsy that have a pre-biopsy bpMRI or mpMRI as their first line diagnostic investigation with imaging reported using a PI-RADS/Likert system of grading

**Denominator** All patients with prostate cancer who undergo biopsy that have a pre-biopsy bpMRI or mpMRI as their first line diagnostic investigation (No exclusions)

Target	95%				
	2021/22	of Numerator	2020/21	2019/20	
2021/22					
Grampian	98.1%	310	304	96.7%	98.5%
Highland	96.1%	204	196	95.8%	96.1%
Orkney	-	0	0	-	-
Shetland	100.0%	9	9	100.0%	100.0%
Tayside	98.9%	266	263	97.5%	94.0%
Western Isles	92.7%	41	38	100.0%	88.9%
<b>NCA</b>	<b>97.6%</b>	<b>830</b>	<b>810</b>	<b>96.8%</b>	<b>96.6%</b>

NCA boards





## QPI 15(i): Low Burden Metastatic Disease

### QPI 15(i)

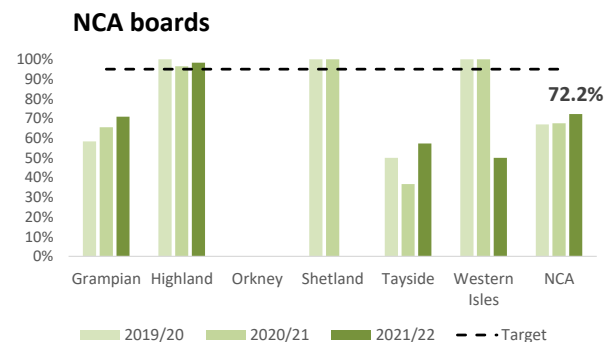
**Patients with metastatic prostate cancer should have their burden of disease assessed, and undergo radiotherapy where appropriate.**

**Description** Proportion of patients with metastatic prostate cancer who have their burden of disease assessed, and undergo radiotherapy if metastatic burden is low. Please note: This QPI measures 2 distinct elements. The specifications are separated to ensure clear measurement of: **(i) Patients with metastatic prostate cancer in whom burden of disease is assessed;**

**Numerator** Number of patients with metastatic prostate cancer in whom burden of disease is assessed.

**Denominator** All patients with metastatic prostate cancer (No exclusions)

Target	95%					
	2021/22	of	Numerator	2020/21	2019/20	
<b>2021/22</b>						
Grampian	70.9%	110	78	65.6%	58.3%	
Highland	98.3%	58	57	96.4%	100.0%	
Orkney	-	-	-	-	-	
Shetland	-	-	-	100.0%	100.0%	
Tayside	57.3%	82	47	36.7%	50.0%	
Western Isles	50.0%	6	3	100.0%	100.0%	
<b>NCA</b>	<b>72.2%</b>	<b>259</b>	<b>187</b>	<b>67.6%</b>	<b>67.0%</b>	



Teams at NHS Grampian and MHS Tayside have reviewed these cases and expect to meet this measure going forward, to ensure burden of disease is met for each patient.



## QPI 15(ii): Low Burden Metastatic Disease

### QPI 15(ii)

**Patients with metastatic prostate cancer should have their burden of disease assessed, and undergo radiotherapy where appropriate.**

**Description** Proportion of patients with metastatic prostate cancer who have their burden of disease assessed, and undergo radiotherapy if metastatic burden is low. Please note: This QPI measures 2 distinct elements. The specifications are separated to ensure clear measurement of: **(ii) Patients with metastatic prostate cancer who have a low metastatic burden that receive radiotherapy.**

**Numerator** Number of patients with metastatic prostate cancer who have a low metastatic burden that receive radiotherapy

**Denominator** All patients with metastatic prostate cancer who have a low metastatic burden (Excluding patients documented to have declined radiotherapy).

**Target**

**60%**

	2021/22	of	Numerator	2020/21	2019/20
<b>2021/22</b>					
Grampian	50.0%	14	7	50.0%	66.7%
Highland	81.0%	21	17	84.2%	81.8%
Orkney	-	0	0	-	-
Shetland	-	0	0	100.0%	-
Tayside	60.0%	20	12	100.0%	73.3%
Western Isles	-	0	0	100.0%	50.0%
<b>NCA</b>	<b>65.5%</b>	<b>55</b>	<b>36</b>	<b>70.8%</b>	<b>71.4%</b>

**NCA boards**

