

Expanded Practice Protocol for the Review of Patients with Prostate Cancer at a Urology Clinical Nurse Specialist Led Review Clinic

CONTROLLED DOCUMENT

CATEGORY:	Procedural Document
CLASSIFICATION:	Clinical
PURPOSE	To support a urology clinical nurse specialist led review clinic for patients with prostate cancer
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Controlled Document Lead:	Prostate Cancer Charity Nurse Specialist
Approved By:	Executive Chief Nurse Executive Medical Director Associate Director of Nursing, Division D Matron Clinical Service Lead
On:	September 2017
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Distribution:	<ul style="list-style-type: none"> • Essential Reading for: All urology clinical nurse specialists who currently undertake the review clinic for patients with prostate cancer and all urology clinical nurse specialists who wish to expand their practice to include this skill. • Information for: All clinical staff working in uro-oncology

EVIDENCE FOR PRACTICE

In line with the Department of Health Strategy for Cancer (2011), all patients with the diagnosis of cancer must have access to a named registered nurse specialist. The registered nurse specialist is in the ideal position to review this group of patients because they have had contact with the patient since referral to the specialist team and throughout their subsequent investigations, diagnosis and treatment.

According to the National Cancer Action Team (2010), registered nurse specialists provide a service that ensures that each patient receives high quality and compassionate care, continuity of care, of which is specific to individual needs. In order to demonstrate this within the specialism of uro-oncology, a summary of the urology clinical nurse specialist led review clinic for patients with prostate cancer, can be found in Appendix 3, however the urology clinical nurse specialist led review clinic aims to:

- Monitor patient's symptoms and advise on symptom control
- Refer patients on to the appropriate services for further advice and review where appropriate
- Monitor side effects to medications
- Provide patients with a point of contact for further advice and support

A review of the expanded practice protocol has been undertaken to ensure the practice covered by this document remains up to date. As part of this review, an audit was performed (Gledhill, 2017), which has confirmed that the expanded practice protocol has been adhered to. No significant changes to the protocol have been made.

CONSENT

Although formal written consent is not required for minor procedures, verbal consent for review at the urology clinical nurse specialist (CNS) led review clinic for patients with prostatic cancer must be obtained where possible and this must be documented in the patient's records. For further information regarding consent and mental capacity please refer to the following documents:

- Department of Health Reference Guide to Consent for Examination or Treatment (2009).
- Trust Policy and procedural document for consent to examination or treatment (current version).
- *Mental Capacity Act (2005)*.

INDICATIONS

The patient with prostate cancer who has been identified by their consultant to attend the urology CNS led review clinic, and who must meet one of the following criteria:

1. The patient has undergone radical prostatectomy.

2. The patient is undergoing or has undergone radical radiotherapy.
3. The patient is receiving/ has received hormone therapy treatment.
4. The patient requires active surveillance.
5. The patient who has had a TURP (with prostate cancer).

CONTRAINDICATIONS

1. The patient has capacity and does not give consent for treatment/review at the urology CNS led review clinic for patients with prostate cancer.
2. The patient is under 16 years of age.

LIMITATIONS TO PRACTICE

The urology CNS must either request a bone scan and/or CT scan (as per expanded practice protocol controlled document number: 945), make a lower urinary tract symptom (LUTS) assessment referral, or seek further advice from the consultant prior to continuing with the review of patients:

1. If the patient experiences any new bony pain.
2. If the patient develops any associated health problems e.g. anaemia.
3. If the patient experiences any severe LUTS or haematuria that may need treatment.
4. If the patient requests to see the Consultant.

If the urology CNS is concerned about the patient's condition they must immediately refer the patient to the specialist registrar or consultant for advice on any further action to be taken, and this must be documented in the patient's records.

The appropriate Health and Safety risk assessments must have been completed for the clinical area.

CRITERIA FOR COMPETENCE

1. A urology CNS with a minimum of 2 years experience in urology and an extensive knowledge of prostate disease management who has completed the relevant education and training programme as recognised by their Matron.
2. The urology CNS must be competent in accordance with CD 238 (formerly CP 08); expanded practice protocol for the performance of digital rectal examination and trans-rectal ultrasound of the prostate gland by registered nurses (current version).
3. Evidence of satisfactory supervised practice must be provided by the urology CNS as witnessed by a practitioner who is already competent in the protocol for review of patients with prostate cancer at a urology CNS led review clinic (Appendix 1).

4. The number of supervised practices required will reflect the individual urology CNS's learning needs.
5. Evidence of competence must be provided and a copy kept in the urology CNS's personal file and in the ward or department where the skill is practised (Appendix 2). Following each review and update of the protocol the urology CNS has a responsibility to ensure that their evidence of competence is against the current version of the protocol.
6. Urology CNSs new to the Trust, who have been performing the skill elsewhere, must read, understand and be signed off against this protocol. Evidence of appropriate education and competence must be provided and checked by their line manager before undertaking this expanded practice at the Trust. The decision whether the urology CNS needs to complete Trust training and competence will be at the discretion of the urology CNS's line manager.
7. In accordance with codes of professional practice, the urology CNS has a responsibility to recognise, and to work within, the limits of their competence. In addition, the urology CNS has a responsibility to practise within the boundaries of the current evidence based practice and in line with up to date Trust and national policies and procedural documents. Evidence of continuing professional development and maintenance of skill level will be required and confirmed at the urology CNS's annual appraisal by the urology CNS's line manager.

A list of urology CNS's competent to perform this skill must be kept by the line manager.

PROTOCOL AND SKILLS AUDIT

The Prostate Cancer Charity Nurse Specialist will lead the audit of the protocol with support from the Practice Development Team. The audit will be undertaken in accordance with the review date and will include:

- Adherence to the protocol
- Any untoward incidents or complaints
- Number of registered nurse's competent to perform the skill
- Patient feedback

All audits must be logged with the Risk and Compliance Unit, using the Clinical Audit Registration and Management System (CARMS).

CLINICAL INCIDENT REPORTING AND MANAGEMENT

Any untoward incidents and near misses must be reported via the Trust incident reporting system, and where required escalated to the appropriate management team. In addition, the Risk and Compliance Unit must be notified by telephone of any Serious Incidents (SI).

REFERENCES

Department of Health (2009) **Reference Guide to Consent for Examination or Treatment** 2nd edn. HMSO London

Department of Health (2011), **Improving Outcomes: A Strategy for Cancer**. Department of Health. London. H.M.S.O.

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Gurun M, Mc Guire I, Conn G (1998) **A Nurse Led prostate cancer follow up clinic: initial experiences and patient perceptions** *British Journal of Urology* 81 (supp. 4)

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Nursing and Midwifery Council (2015) **The Code: Professional standards of practice and behaviour for nurses and midwives**

<https://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/nmc-code.pdf> (Accessed 01.06.2017)

University Hospitals Birmingham NHS Foundation Trust (current version) **Policy for consent to examination or treatment**, University Hospitals Birmingham NHS Foundation Trust

http://uhbpolicies/Microsites/Policies_Procedures/consent-to-examination-or-treatment.htm (Accessed 01.06.2017)

University Hospitals Birmingham NHS Foundation Trust (current version) **Procedure for consent to examination or treatment**. University Hospitals Birmingham NHS Foundation Trust

http://uhbpolicies/Microsites/Policies_Procedures/consent-to-examination-or-treatment.htm (Accessed 01.06.2017)

University Hospitals Birmingham NHS Foundation Trust (current version) **Standards for Working with Carers**, University Hospitals Birmingham NHS Foundation Trust

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University Hospitals Birmingham NHS Foundation Trust Risk Assessment Documentation <http://uhbhome/Resources/RiskAssessmentDocs/Home.aspx> (Accessed 01.06.2017)

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EVIDENCE OF SUPERVISED PRACTICE

Appendix 1

To become a competent practitioner, it is the responsibility of each urology clinical nurse specialist to undertake supervised practice in order to provide review of patients with prostate cancer at a urology clinical nurse specialist led review clinic in a safe and skilled manner.

Name of urology registered nurse specialist:

DATE	DETAILS OF UROLOGY CLINICAL NURSE SPECIALIST LED REVIEW CLINIC FOR PATIENTS WITH PROSTATE CANCER	SATISFACTORY STANDARD MET	COMMENTS	PRINT NAME, SIGNATURE & DESIGNATION
		Yes / No		
		Yes / No		
		Yes / No		
		Yes / No		
		Yes / No		
		Yes / No		

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Appendix 2
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CRITERIA FOR COMPETENCE

END COMPETENCE: To review patients with prostate cancer at a urology clinical nurse specialist led review clinic

Date(s) of Education and supervised practice:

Name of Urology Registered Nurse Specialist:

Name of Supervisor:**Designation:**.....

ELEMENT OF COMPETENCE TO BE ACHIEVED	Date Achieved	Clinical Nurse Specialist Sign	Supervisor Sign
Demonstrate an extensive knowledge of prostate disease management			
Discuss the: <ul style="list-style-type: none"> • Indications • Contraindications • Limitations to practice for the review of patients with prostate cancer at a urology clinical nurse specialist led review clinic according to this expanded practice protocol.			
Demonstrate knowledge of the service provided by the urology clinical nurse specialist led review clinic for patients with prostate cancer (Appendix 3)			
Discuss what is involved during "Active Surveillance"			
Discuss what is involved in hormonal treatment for prostate cancer			
Discuss what the possible side effects of hormonal therapy are			
Discuss the treatments for the side effects of hormonal therapy			
Discuss the relevance of prostate specific antigen (PSA) testing and its use in the monitoring of patients with prostate cancer.			

ELEMENT OF COMPETENCE TO BE ACHIEVED	Date Achieved	Registered Nurse Sign	Supervisor Sign
State how you would recognise when a patient has hormonal escaped disease			
Demonstrate accurate provision of information in a way that the patient understands			
Demonstrate accurate explanation of test results to the patient			
Demonstrate involvement of the patient and their families/carers, in decision making about their care and treatment.			
Demonstrate application of the Trust Principles for Carers			
Demonstrate accurate record keeping			
Demonstrate how to maintain the patient's privacy and dignity throughout the clinic			
Discuss why it is important to audit the nurse led clinic			
Demonstrate the ability to check the patient's infection status on PICS and practise safe infection prevention and control practices throughout, to include: <ul style="list-style-type: none"> • Standard precautions • Aseptic non touch technique (where applicable) 			
Demonstrate a working knowledge of the <i>Mental Capacity Act</i> .			
Discuss accountability in relation to the NMC Code: Professional standards of practice and behaviour for nurses and midwives (2015).			
Demonstrate a working knowledge of the Trust's policy for consent to examination or treatment			
Demonstrate knowledge of the Trust's Clinical Incident Reporting system.			

I declare that I have expanded my knowledge and skills and undertake to practice with accountability for my decisions and actions.

I have read and understood the protocol for: **the Review of Patients with Prostate Cancer at a Urology Clinical Nurse Specialist Led Review Clinic**

Signature of Urology Clinical Nurse Specialist: **Date:**.....

I declare that I have supervised this urology clinical nurse specialist and found her/him to be competent as judged by the above criteria.

Signature of Supervisor: **Date:**

Designation:.....

A copy of this record must be placed in the urology clinical nurse specialist's personal file, a copy must be stored in the clinical area by the line manager and a copy can be retained by the individual for their Professional Portfolio.

NB All interventions and treatments must be documented in the patient's records.

1. PRIOR TO CONSULTATION

The urology clinical nurse specialist must have the following available before seeing the patient:

- The patient's case notes/details on PICS.
- The histology report where histology has been taken.
- The prostate specific antigen (PSA) result.
- Previous PSA readings for comparison.
- Any results of other investigations that have been performed e.g. bone scans.
- A receptionist to book the patient in on the computer system and who will make the patient's follow up appointment.

2. PATIENT SELECTION

All patients attending this clinic must have been identified by their consultant as suitable to attend the urology clinical nurse specialist led review clinic.

3. CONSULTATION CONTENTS

The urology clinical nurse specialist must discuss the following with the patient:

- General health
- Prostate cancer specific symptoms (LUTS (lower urinary tract symptoms), ED (erectile dysfunction), bone symptoms)
- Appropriate referrals for ED and biofeedback as required
- Recent PSA result and relationship of previous PSA results
- Medication tolerance/side effects if applicable
- Predicted discharge timescale to GP follow up
- Anything additional the patient wishes to discuss

4. CRITERIA FOR REFERRAL BACK TO THE CONSULTANT

If any of the following occur the urology clinical nurse specialist must discuss these with the patient's consultant prior to the patient attending the next urology clinical nurse specialist led review clinic for patients with prostate cancer:

- If the patient experiences any new bony pain
- If the patient develops any associated health problems e.g. anaemia
- If the patient experiences any severe LUTS (Lower urinary tract symptoms) or haematuria that may need treatment
- If the patient requests to see the Consultant