

Local Enhanced Service Specification:

PSA Surveillance and Monitoring

Service Specification No.	
Service	PSA Surveillance and Monitoring in primary care
Commissioner Lead	Lancashire and South Cumbria ICB
Provider Lead	GP Practices in Lancashire and South Cumbria
Period	1 st April 2026 – 31 st March 2027
Date of Review	To be reviewed annually

<p>1. Population Needs and Background</p> <p>NHS Lancashire and South Cumbria ICB covers 195 GP Practices and has a total weighted population of 1,988,701 (as of Jan 2026) patients.</p> <p>The scope of this specification will cover all 195 practices and registered patients along with temporary residents (where appropriate) that live within the geographical area of Lancashire and South Cumbria.</p> <p>The ambition of the commissioner is to secure the highest quality and most responsive services for local people that are clinically effective and safe but also importantly are consistent and equitable to the population.</p> <p>Prostate cancer is the second most common cause of cancer deaths in UK men. Each year about 47,000 men are diagnosed with prostate cancer and approximately 11,000 die from the disease. The condition of many patients with prostate cancer can be stable for a number of years post diagnosis, or post radical treatment.</p> <p>Patients with a raised PSA (Prostate Specific Antigen) will be referred to secondary care via the appropriate suspected cancer referral pathway, for investigations and evaluation with subsequent follow up through the Urology Department. Patients with no confirmed prostate cancer may be followed up, even if active treatment is not initially or subsequently indicated.</p> <p>The purpose of this specification is to establish a formal arrangement for primary to monitor patients that require ongoing prostate blood monitoring for:</p> <ul style="list-style-type: none"> • patients with a raised PSA who require no further secondary care intervention and do require regular structured blood test monitoring. • patients diagnosed with prostate cancer who have completed treatment and have been followed up for 5 years.
<p>2. Scope & Service Standards</p> <p>2.1 Aims</p> <p>The aim of the service is to deliver a universal offer to patients in Lancashire and South Cumbria, setting out the services that General Practice are expected to deliver</p>

to their registered and temporary registered patients.

To deliver high quality and responsive services for local people that improve patient outcomes and the experience of service delivery for both patients and the General Practice team.

Furthermore, the aim of the offer is to ensure an equitable and consistent service to all patients across Lancashire and South Cumbria and to deliver care closer to home, this will include:

- Improved access – patients receive their follow up care closer to home by their GP practice
- Improved call and recall processes in general practice – supported by DQ case finding searches to improve the safety of clinical recall for patients who have historically been discharged from follow up and for any new patients discharged from secondary care.

Implementation of a primary care prostate monitoring service will positively impact secondary care pathways and release capacity to support new referrals to secondary care.

2.1.1 Requirements

The practice to create a register of patients that require regular PSA blood test monitoring (searches will be provided to help practices where patients have not previously been coded and recalled).

The practice to recall patients for 6 monthly or annual blood test monitoring based on the advice given at the time of discharge from urology (for most patients this will be annual monitoring).

Where PSA remains under the level advised at the time of urology discharge, patients should be advised of the result and arrangements made to recall in 12 months or as appropriate.

Where PSA is raised above the level agreed, patient assessment (this may include face to face assessment and rechecking PSA levels) and appropriate re-referral using the suspected cancer pathway should be undertaken.

2.2 Service Description/Care Pathway

The service will be provided to patients deemed suitable for discharge from hospital based follow-up care.

Referrals to Primary Care

New referrals will be made to primary care by a Urology specialist, who will have agreed a management plan that safely allows patients to be monitored and followed up in primary care.

The clinic discharge letter will include:

- Patient Details (incl. name, address, dob, NHS Number)
- Details of Diagnosis (incl. PSA level on discharge, other issues/complications, e.g., evidence of metastases)
- Recommendation / Management Plan (incl. assessment interval and threshold for fast track re-referral)
- A clear explanation when advice deviates from agreed local guidelines (incl. substantial management/active management received by the patient to date)
- Confirmation that appropriate information has been given to the patient (incl. explanation of condition and that their ongoing follow up care will be managed in primary care)

Patients moving into the area from outside the ICB area or patients transferring from private to NHS care may be suitable for primary care follow up. Where a PSA discharge letter is not accessible, appropriate guidance should be sought via advice and guidance to the local urology service.

Acceptance onto Practice Register

Patients who have been monitored in primary care prior to the commencement of this contract will need to be identified and added to the register using DQ case finding searches, or the previous practice register if available.

New patients discharged from urology follow up should have the relevant SNOMED code added to their record and a diary entry invite where appropriate.

Referral back to Secondary Care

The Practice will re-refer the patient to the acute urology provider via Urgent Cancer referral if:

- The criteria for re-referral as specified in the discharge letter are reached
- There are other clinical concerns that require specialist intervention

Practices will be responsible for

- Holding and maintaining a register of patients who require ongoing surveillance and management of their PSA in primary care
- Providing a robust recall system from the register to ensure patients receive monitoring in a timely manner and follow up those patients who fail to attend
- Reviewing the results of PSA testing and follow the appropriate guidance with regards to surveillance or fast track re-referral

2.3 Population covered

NHS Lancashire and South Cumbria ICB covers 195 GP Practices and has a total weighted population of 1,988,701 (as of Jan 2026) patients.

The scope of this specification will cover all 195 practices and registered patients along with temporary residents (where clinically appropriate) that live within the

geographical area of Lancashire and South Cumbria.

2.4 Any acceptance and exclusion criteria and thresholds

The service will not accept referrals for the following:

- Any patients felt inappropriate for discharge within this pathway by secondary care or the receiving GP practice.

2.5 Interdependence with other services/providers

- Acute trust providers
- Independent sector secondary care services

2.6 Applicable national standards (e.g. NICE)

- Suspected cancer: recognition and referral. NICE guideline [NG12] Published: 23 June 2015 Last updated: 02 October 2023
- Prostate cancer: diagnosis and management. NICE guideline [NG131] Published: 09 May 2019 Last updated: 15 December 2021

3. Applicable quality requirements and CQUIN goals

4. Location of Provider Premises

Service delivery must be from the premises identified within the providers NHS Contract or where the service has been sub-contracted, the premises must be in suitable premises for delivery of the services as set out in the specification.

5. Finance

Finance

Practices will be paid £32 per test/review per patient.

The provider will need to submit monthly claims stating the number of test/reviews provided to patients under this specification.

The overarching Local Enhanced Service (LES) claims process, timescales, and parameters for practices to submit claims for LES activity is within a 3 month period after the activity has been completed and to ensure that this is included within contractual agreements.

The provider must email scicb.localenhancedservices@nhs.net by the 10th of every month. Forms must be submitted within 3 months of the activity taking place. Please note that claims submitted to the Enhanced Service Contract Team after the 3 month period will not be approved for payment.

If you have any questions, please contact the Contract Team
scicb.localenhancedservices@nhs.net or your local primary care team.

Fraud Policy

In the event of suspected fraud or other illegality being uncovered at any stage the ICB will implement the ICB Fraud Policy and will investigate.

Information supporting reported activity and monitoring information must be made available to the ICB or its representatives upon request. Failure to provide this information, or the provision of incomplete or inaccurate information, may result in suspension of payments or clawback, as well as further investigation by the ICB and its representatives.

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6. Contract and Monitoring Arrangements

The provider must supply the ICB with such information as it may reasonably request for the purposes of monitoring the provider's performance of its obligations under this service level agreement.

As a minimum, this will include a monthly return showing activity and activity should be recorded using the appropriate SNOMED codes and an appropriate Data Quality Template will be supplied by the commissioner to support automated extraction, where possible.

All details regarding data quality (codes, guides, searches, templates and data extraction) can be found in the Data Guide in Appendix 1. Any changes to data or coding throughout the contractual year will be shared with practices via the Data Quality Team and the GP intranet.

APPENDIX 1 – PSA LES DATA QUALITY GUIDANCE

CLAIM CODES

Code	Description
1488852010	Prostate-specific antigen monitoring

GUIDES AVAILABLE

Guides for the following can be found on the GP Intranet/Learning Academy/DQ Specialist:

ML DQ PSA LES Guide

For activating the template launcher: **LSC ICB LES Protocol Guide**

TEMPLATES

The page for the PSA LES is available as part of the **ML ICB Local Enhanced Services** template and is available through your shared folder in Resource Publisher. Emails will be sent whenever the template is updated. Please ensure that you keep Resource Publisher refreshed to ensure that you are using the most up to date template.

A template picker is also available to support the selection of the appropriate template. Instructions on how to enable these protocols are provided in the guide referenced above.

SEARCHES

All searches for the PSA LES are available through Enterprise Searches & Reports, the CCG tab at the bottom of Population Reporting. Searches are managed by the Data Quality Team and emails will be sent from the Data Quality Team regarding the location, also when any searches have been updated. Any updated searches will be available in the same place. Searches need to be copied and pasted into your practices folder to be able to use them.

DATA EXTRACTS

All data is extracted based on left/deceased patients and the code above being added to the patients record within the specified timeframe.

CONSULTATION TYPES

All searches are based on a face to face, home visit or Enterprise consultation type.

All other consultation types will appear in the ACTION searches as CHECK consultation type and these should be reviewed. If you find any activity in the Action/Check Consultation Type searches that should count towards claims, add a new consultation to the patient's record (on the same date as the excluded one) using an acceptable consultation type and the correct claim code(s). This keeps the original consultation unchanged and ensures the patient appears in the claims searches.

DATA QUALITY CONTACT DETAILS

All requests for support or query resolution should be logged on the Self-Service Portal at: <https://sunrise-saas.com/mlcsu/SContacts/>

For any urgent queries please ring: **0300 555 0212**