

Driving innovation in prostate cancer care

Local examples of improving patient outcomes



The national picture

Local prostate cancer services are under growing strain, managing rising referral volumes, diagnostic bottlenecks and an expanding treatment population – all against the backdrop of ongoing workforce shortages.

55,300

new cases in the UK every year¹ – prostate cancer is now the **most common cancer** in England²



1 in 4



Black men and **1 in 8 men overall** will be diagnosed in their lifetime³

Only **67.3%**

of patients begin treatment within 62 days of referral, well below the NHS target of 85%⁴



15% shortfall in oncology consultants, with treatment delays reported in **95% of centres**⁵

Against this backdrop, NHS providers across the UK are showing how service innovation and new workforce models can help to manage current pressures and deliver more equitable care, whilst helping local systems prepare for future demand.

Astellas has developed a report, endorsed by leading prostate cancer charities, showcasing **six local areas** delivering innovative approaches to service reform in prostate cancer care. These approaches were developed in collaboration with healthcare professionals leading on the reform and endorsed by key patient and professional organisations in the prostate cancer community.

CLICK HERE TO READ MORE ABOUT OUR RECOMMENDATIONS IN THE FULL REPORT



What needs to happen now

The 10-Year Health Plan, 10-Year Workforce Plan, and National Cancer Plan together provide a pivotal opportunity to embed and scale proven service innovations that can help deliver the Government's wider ambitions for a more preventive, productive, and patient-centred NHS. In prostate cancer, these innovations have a crucial role in improving access, reducing waiting times, and supporting earlier intervention for at-risk men - outcomes that speak directly to national priorities on tackling health inequalities and reducing pressure on hospital services.

1

Shaping the future of education for advanced non-medical practitioners in prostate cancer

TRAINING AND EDUCATION: *Guy's and St Thomas' NHS Foundation Trust, London*

A 12-week online course co-designed with patients and clinicians is equipping advanced non-medical practitioners with specialist skills in prostate cancer care.

KEY OUTCOME: Five cohorts of advanced practitioners (around 60 learners in total) have completed the course since 2022, with overwhelmingly positive feedback on skills development and patient communication.

2

Improving prostate cancer outcomes with the SPEED Pathway

DETECTION AND DIAGNOSIS: *The Royal Marsden NHS Foundation Trust, London*

A nurse-led diagnostic pathway streamlining assessment, imaging and biopsy to speed up prostate cancer diagnosis and treatment.

KEY OUTCOME: Significant cancer diagnosis **increased from 27% to 52%** and average referral-to-MRI time **reduced from 9 days to 3 days**.⁶

3

Improving prostate cancer triage with the Filters and Cascades model

DETECTION AND DIAGNOSIS: *Queen Elizabeth University Hospital, Glasgow*

A risk-based triage model prioritising high-risk men and streamlining referrals to improve diagnostic efficiency and equity.

KEY OUTCOME: Referral-to-first-appointment time **reduced from 40 days to 2 days** and metastatic patients treated within 62 days increased from 16.6% to 87.5%.⁷

4

Integrating non-medical prescribers into prostate cancer care

ACCESS TO TREATMENT: *Oxford University Hospitals NHS Foundation Trust, Oxford*

Pharmacists and nurses are leading non-medical prescriber (NMP) clinics within the oral systemic anti-cancer therapy (SACT) pathway, improving access for patients and easing consultant workload.

KEY OUTCOME: Freed up consultant time for new and complex cases, while ensuring patients continue to receive safe, sustainable, high-quality care through non-medical prescribers. Similar models using electronic patient-reported outcome measures (ePROMs) have reduced the need for in-person follow-up appointments, cutting unnecessary travel, lowering emissions, and improving patient convenience, with each avoided appointment **saving around 4 kg of CO₂**.⁸⁻¹⁰

5

Redefining patient pathways with the Virtually Assessed Patient (VAP) Clinic

TREATMENT ASSESSMENT AND MONITORING: *Velindre Cancer Centre, Cardiff*

A virtual nurse- and pharmacy-led clinic delivering remote assessments for stable prostate cancer patients across South-East Wales.

KEY OUTCOME: Over **17,000 patients assessed**, including **3,000 prostate cancer patients**, **saving 1,500 hours of oncology time saved** and **3,000 fewer urology clinic appointments**.¹¹

6

Adopting a multidisciplinary team approach to prostate cancer care

FOLLOW-UP CARE: *The Clatterbridge Cancer Centre NHS Foundation Trust, Liverpool*

Therapeutic radiographers and advanced nurse practitioners have taken on expanded roles in treatment and follow-up, easing pressure on oncologists.

KEY OUTCOME: Therapeutic radiographers and advanced nurse practitioners now complete **around 60% of all annual patient consents for radical radiotherapy** at Clatterbridge, easing pressure on oncologists and supporting more timely treatment for patients.¹²



For more information on this infographic or the report, please contact Klark Mullen, Government Affairs Lead, Astellas UK at Klark.Mullen@astellas.com

1 Cancer Research UK, **Prostate cancer statistics**, 2025. Available [here](#) **2** The All-Parliamentary Party Group, **Report: Ensuring Early Diagnosis of High-Risk Prostate Cancer**, 2025. Available [here](#) **3** Prostate Cancer UK, **Are you at risk?** Available [here](#) **4** Cancer Research UK, **Cancer waiting times: Latest updates and analysis**, 2025. Available [here](#) **5** The Royal College of Radiologists, **Clinical Oncology Workforce Census**, 2023. Available [here](#) **6** RMH Audit and RMP data **7** NHS Greater Glasgow and Clyde, **Filters and Cascades – Efficient Diagnostic and Treatment Pathways for Prostate Cancer** **8** RAC Foundation, **Environment**, 2025. Available [here](#) **9** Department for Environment, Food and Rural Affairs, **The social cost of carbon**, 2005. Available [here](#) **10** Government Commercial Function. **Guide to using the social value model**, 2020. Available [here](#) **11** Velindre Cancer Centre, **Business Intelligence Report** **12** The Clatterbridge Cancer Centre NHS Foundation Trust, **Annual Patient Consent Data for Radical Radiotherapy**, 2023-2024