

Circle Nottingham submission to Joint Overview and Scrutiny Panel

In support of the papers that have been submitted by Commissioners and Nottingham University Hospitals NHS Trust (NUH) and response to the issue raised by this Committee regarding Dermatology, Circle wishes to provide the following additional information.

Service History

Circle has been providing adult dermatology services since 2008 which includes outpatients, diagnostics and treatments such as surgery, topical therapies and light therapy. This is a full and comprehensive service which includes specialised services. Since 2008 we have treated 344,000 patients. This service is presently delivered by 61 staff that includes 13 doctors, 34 nurses and 12 administrators. When the contract for services (including dermatology) at the Treatment Centre was renewed in 2013, many of the seconded NUH consultants were directly employed by Circle in accordance with TUPE rules triggered by the terms of the procurement. Consideration was given to whether the consultants could remain employed by NUH but it was concluded that this was not legally possible.

We have high patient satisfaction and have consistently been recommended to friends and family by 97%¹ of patients. Our skin cancer service has been of a high standard and we consistently have achieved 95% of patients seen within 2 weeks and 98.82% treated within the national 62 day target of 85%².

NUH recently announced their decision to cease the provision of acute dermatology. Circle were keen to help the patients affected by this decision and have therefore provided dedicated appointment slots for these patients to be urgently seen. This solution supports the majority of the acute dermatology patients.

Service Developments

There is an increased demand for dermatology services and therefore innovative models of service delivery are required. This is mainly due to the increase in skin cancers and an aging population. Since the re-procurement of the Treatment Centre contract in 2012/3 we have been working with commissioners and primary care providers to implement an integrated care model across GP and hospital settings. We are at the point of implementing teledermatology which means that fewer patients will need to travel to hospital. GPs can take images and send them to a specialist for advice and then direct patients to the right place if they require specialist treatment. Combining the use of new technology and skilling up [training] nurses and GPs is a key solution to ever-increasing demand.

¹97.2% in January 2015

²Data for the calendar year 2014

Consultant specialists have an important role but increasingly their role will be supervising the care offered by the whole team.

Staffing

Circle Nottingham has a growing, high quality direct hire medical workforce across a number of specialities. There have been recent Consultant appointments in Anaesthetics, Gynaecology, Orthopaedics and Respiratory Medicine, as well as Dermatology. However, there is a shortage of Dermatology clinical staffing in the UK affecting both doctors and nurses, with over 200 of 1000 posts vacant across the country. Like many units across the country, Circle has utilised Locum doctors as and when required to sustain high quality patient care and delivery of the service. We have also expanded the use of specialist nurses, providing a holistic, appropriately qualified team in line with best practice.

There is considerable commitment to training and development within Circle, with the Treatment Centre supporting over 300 Specialist Trainee sessions every month across all specialities. Unfortunately, there has been considerable loss of specialist trainees in Dermatology, despite there being a number of permanent Consultants at Circle who can support some teaching and training. Circle is keen to do more and have been vocal about welcoming more specialist trainees.

Collaborative Working

We welcome integration with all providers across primary and secondary care. We have no objection to other providers delivering dermatology services. This has been highlighted to commissioners and NUH. If new providers are introduced, we believe that there should be a coordinated and integrated solution that avoids duplication. Also, any change to the current provision of service across the health community should ensure that where the transfer of patients between providers is required, that this is undertaken in a seamless and appropriate way. We support our Commissioners in developing new ways of delivering high quality care and value for the patients of Nottingham.