

Reference	Dermatology Review Action Plan
Document Purpose	This document describes the actions being undertaken to address those recommendations made in the Dermatology Services Review
Version	6.3
Status	6 th submission for Overview and Scrutiny Committee
Title	Dermatology Service Project Action Plan
Sponsor	Vicky Bailey, Accountable Officer, NHS Rushcliffe CCG
Project Owner	Dr Guy Mansford, Accountable Officer and Clinical Lead, NHS Nottingham West CCG
Project Manager	Maxine Bunn, Director of Contracting, NHS Nottingham West CCG
Project Start Date	01 May 2015
Project End Date	31 March 2017
Review Date	n/a
Circulation list	Public domain
Associated documents	Dermatology Services Review Closed Action Plan V6: 30/10/15
Superseded documents	V6.1

Closed Actions						
Report Recommendation	Task	Lead	Start date of task	Finish date of task	Status (RAG)	Progress
Short term May 2015 - September 2015						
1. Rushcliffe CCG to initiate meetings with other key stakeholders to formulate a memorandum of understanding. This should be at a high level between chief executives of the organisations involved. We would suggest at a minimum that this involves Rushcliffe CCG, Circle and NUH.	Agree a memorandum of understanding between providers and commissioners	Vicky Bailey	Mon 08 Jun 15	Fri 31 Jul 15 Amended to Fri 25 th Sept Amended to 30 th November 2015 CLOSED 1 st April 2016	CLOSED	<p>NUH and Circle agreed to work up principles. First draft principles shared between NUH, Circle and CCGs. To be progressed at next meeting on 8.7.15</p> <p>13/08/15 Agreement between NUH and Circle to broaden into Memorandum of Understanding (MoU) about wider relationship across both organisations. This is at final draft stage. The dermatology MOU as a section of this continues to be progressed. Next meeting between the two medical directors due first week in September.</p> <p>30/09/15 Regular meetings with NUH and Circle in place. Draft principles in place. Draft MoU in place about broader collaboration. Various recruitment models considered but fundamental issue is agreeing joint recruitment including joint job plans with different terms and conditions of the providers (NUH and Circle). MoU to consider how an in reach service for urgent in hours ward referrals can be progressed</p> <p>30/10/15 Meeting scheduled for 04/11/15 with CCG, Circle and NUH to finalise MoU</p> <p>01/03/1 On the basis that NUH is not providing an adult consultant dermatology service, both parties have agreed an MOU will not go ahead. Discussions are ongoing between NUH and Circle around acutely ill inpatients at NUH, and remain as a residual issue in terms of continuing to review patient impact of the pathway agreed. Circle and University Hospitals of Leicester have signed a MOU to support preliminary</p>

						discussions to explore how services may be provided for adult dermatology patients
2. Investment should be made in supporting and developing consultants and other clinical staff, bringing together key players within the organisation to foster relationships. The consultants should work as a single body/team across both provider organisations. We believe that there are the beginnings of an understanding of how commissioners and the providers can build a relationship of trust and sustain the service. In particular it may be easier to appoint new consultants to NUH contracts who subsequently do a large part of their work within the Circle service. Appropriate job plans would need to be developed, with attention to training and research opportunities. Circle and NUH should continue to recruit, and do this together coordinating the job plans to maximise the chance of recruiting the best possible candidate and ensuring that workload and workforce are matched across the wider service.	Develop and coordinate job plans with training and research incorporated, with joint recruitment	Peter Homa and Helen Tait	Mon 15 Jun 15	Mon 31 Aug 15 Amended to 30 th November 2015 CLOSED 1 April 2015		<p>Meeting held with dermatology consultants and nurses from NUH and Circle on 15th June facilitated by HEEM and East Midlands Senate. Draft notes available subject to accuracy check</p> <p>On-going discussions between NUH and Circle. HR advice being taken as to nature of job plans for sustainable recruitment. Paediatrician with an interest in dermatology advertised by NUH.</p> <p>Agreement on Job plans to be progressed at meeting on 8.7.15</p> <p>13/08/15 Notes circulated and approved by clinicians. Agreement for two pathways in Nottingham: children and young people delivered by NUH, Adult by Circle.</p> <p>Further meeting organised by HEEM 07.09.15 where training and education will be discussed Paediatric recruitment positive. Details to be confirmed in due course when start dates confirmed.</p> <p>Meeting with Leicester and NUH and Circle on 11.08.15 to discuss supporting the adult in patient service. Actions agreed to be reported second week in September</p> <p>30/09/15 Stakeholder meeting agreed to:</p> <ol style="list-style-type: none"> 1. develop pathways and protocols across the network 2. Consider job plans that increase joint working across the east midlands 3. Review data and activity 4. Three pronged approach training: <ol style="list-style-type: none"> a. Medical trainees b. Nursing roles c. GP/primary care <p>Senate meeting agreed to consider how job plans can be organised to include urgent ward referrals in hours. See above for approach to workforce</p> <p>30/10/15</p>

						<p>Meeting scheduled for 04/11/15 with CCG, Circle and NUH to finalise MoU</p> <p>01/03/16 Senate meeting held in February 2016 with clinical and non-clinical representatives from Nottingham, Derby, Mansfield and Leicester. A survey of attendees will agree future meeting arrangements and requirements to meet the needs for future workforce planning</p>
<p>2. Agreement of common objectives, the core of which is the preservation of dermatology services within Nottingham and a commitment to develop those services. This would enable all the organisations involved to organise an event involving all providers, stakeholders and patients and the public. This should be independently facilitated and should be charged with the task of trying to answer key questions regarding the immediate sustainability of the services, what is required, and the long term vision for the dermatology service.</p>	<p>Development of common objectives linked to principles.</p> <p>Organise a stakeholder event to agree the common objectives with the wider which preserve dermatology services in Nottingham.</p>	<p>Peter Homa and Helen Tait</p>	<p>Mon 08 Jun 15</p>	<p>Fri 31 Jul 15</p> <p>Wed 30 Sept 15</p> <p>Next date 30 November 2015</p>		<p>Common objectives feature in the principles (see 1 above), and are part of the MOU</p> <p>CCG and NHSE sourcing pathways via Senate and BAD CCG meeting with Leicester on 2.7.15</p> <p>The East Midlands Senate has agreed to take forward the Stakeholder event. This will be undertaken in September and from that the medium term actions No 5 and 6 described below will be agreed with stakeholders.</p> <p>13/08/15 Stakeholder event organised for 30/09/15</p> <p>30/09/15 Stakeholder meeting agreed to:</p> <ol style="list-style-type: none"> 1. develop pathways and protocols across the network 2. Consider job plans that increase joint working across the east midlands and meet legal requirements of provider employment law 3. Review data and activity 4. Three pronged approach to recruitment and retention: <ol style="list-style-type: none"> a. Medical trainees b. Nursing roles c. GP/primary care <p>30/10/15 Independent stakeholder meeting completed. Report published and issued to stakeholders.</p> <p>1.3.16 Survey will determine future collaboration requirements</p>

<p>3. Investment should be made in supporting and developing consultants and other clinical staff, bringing together key players within the organisation to foster relationships. The consultants should work as a single body/team across both provider organisations. We believe that there are the beginnings of an understanding of how commissioners and the providers can build a relationship of trust and sustain the service. In particular it may be easier to appoint new consultants to NUH contracts who subsequently do a large part of their work within the Circle service. Appropriate job plans would need to be developed, with attention to training and research opportunities. Circle and NUH should continue to recruit, and do this together coordinating the job plans to maximise the chance of recruiting the best possible candidate and ensuring that workload and workforce are matched across the wider service.</p>	<p>Clinical summit to be held with outcomes agreed for future acute and paediatric pathways and agreed ways of working as a single body/team across providers, with consideration to BAD guidance</p>	<p>Jonathan Corne</p>	<p>Mon 08 Jun 15</p>	<p>Mon 15 Jun 15</p>		<p>Meeting held with dermatology consultants and nurses from NUH and Circle on 15th June facilitated by HEEM and East Midlands Senate. Draft notes available subject to accuracy check</p> <p>13/08/15 Notes circulated and approved by clinicians. Agreement for two pathways in Nottingham: children and young people delivered by NUH, Adult by Circle.</p> <p>Further meeting organised by HEEM 07.09.15 where training and education will be discussed</p> <p>30/09/15 Stakeholder meeting agreed to:</p> <ol style="list-style-type: none"> 5. develop pathways and protocols across the network 6. Consider job plans that increase joint working across the east midlands 7. Review data and activity 8. Three pronged approach training: <ol style="list-style-type: none"> a. Medical trainees b. Nursing roles c. GP/primary care <p>30/10/15 East Midlands Senate supporting ongoing engagement to continue developing robust working practices</p> <p>01/03/16 A survey of attendees will agree future meeting arrangements and requirements to meet the needs for future workforce planning</p>
	<p>Develop and coordinate job plans with training and research incorporated, with joint recruitment</p>	<p>Peter Homa and Helen Tait</p>	<p>Mon 15 Jun 15</p>	<p>Mon 31 Aug 15 Amended to 30 November 2015</p>	<p>CLOSED</p>	<p>On-going discussions between NUH and Circle. HR advice being taken as to nature of job plans for sustainable recruitment. Paediatrician with an interest in dermatology advertised by NUH. Agreement on Job plans to be progressed at meeting on 8.7.15</p> <p>13.08.15 Paediatric recruitment positive. Details to be confirmed in due course when start dates confirmed.</p> <p>Meeting with Leicester and NUH and Circle on 11.08.15 to discuss supporting the adult in patient service. Actions agreed to be reported second week in September</p>

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4. The commissioners should invite BAD representatives to planned events and for Circle to show them the good work done within the NTC. The situation has led to unfavourable news coverage and the bringing together and closer cooperation between the parties involved will allow for a much more favourable and positive reporting of the situation in Nottingham in the dermatological and medical media, and a greater chance of future recruitment of dermatologists to the area.	Identify British Dermatology Association lead	Vicky Bailey	Mon 08 Jun 15	Mon 15 Jun 15		<p>Commenced. Meeting with BAD following the June OSC meeting. Will be part of stakeholder events going forward.</p> <p>Agreement by BAD to support Nottingham.</p> <p>13.08.15 BAD part of stakeholder network going forward. Named dermatologists from BAD identified for event</p> <p>30/9/15 Stakeholder event agreed to:</p> <ol style="list-style-type: none"> 1. strengthen governance arrangements with Circle and main acutes (Derby/Leicester) 2. Review job plans to consider including urgent referrals, hot clinics, paediatric sessions for adult dermatologists 3. Five registrars to be recruited for Derby which will have rotation to Circle <p>30/10/15 BAD have standing invitation to the future Senate engagement events</p> <p>01/03/16 A survey of attendees will agree future meeting arrangements and requirements to meet the needs for future workforce planning</p>
Medium term May 2015 - March 2016						
5. Rushcliffe CCG should take the initiative to invite other CCGs to consider the requirements for a strategic clinical network, with the aim of looking at the larger geographical provision of specialist services and how they could be more	Proposal for a pan CCG dermatology strategic clinical network	Vicky Bailey	Tue 30 Jun 15	Thurs 1 Oct 15		All CCG associates contacted re future possible network, and impact of reduction in dermatology staff in Nottingham. 25% of activity is from out of area CCGs. Senate

efficiently provided.						<p>discussing this nationally via their senate networks.</p> <p>13.08.15 Agreed by East Midlands CCG and the Senate to have the network. First meeting on 30.09.15 will confirm with providers if they agree for this to be taken forward</p> <p>30/09/15 Senate stakeholder meeting showed appetite for a network with two or three working groups.</p> <ol style="list-style-type: none"> 1. Workforce – increase non medical workforce, increase trainees, educational programme for GPs 2. Job planning <p>01/03/16 A survey of attendees will agree future meeting arrangements and requirements to meet the needs for future workforce planning</p>
6. Bring together a dermatology action group with representation from local CCGs, present providers and patients and the public to consider the longer term strategy for dermatology	Establish a dermatology action group	Peter Homa and Helen Tait	Mon 15 Jun 15	Mon 30 Nov 15		<p>Not commenced. See point 2 above</p> <p>30/09/15 Plan to be produced to follow on from Senate meeting</p> <p>30/10/15 East Midlands Senate supporting ongoing engagement</p> <p>01/03/16 A survey of attendees will agree future meeting arrangements and requirements to meet the needs for future workforce Healthwatch (city and county) letter to all known patient and public groups issued in January 2016 with reply by 5 Feb 2016. No responses received to City and only two to County.</p>
7. NHS Education England to urgently consider the need for expansion of dermatology training numbers.	Produce workforce plan with particular reference to increasing trainees	Jonathan Corne	Mon 08 Jun 15	Mon 30 Nov 15	CLOSED	<p>Meeting arranged with HEEM July 2015. On-going work for trainees locally. Independent Panel Chair has contacted HEEM regarding the workforce issues.</p> <p>13.08.15 National meeting have taken place. Details can be provided if required – this action will be on going</p> <p>30/09/15 Senate meeting confirmed immediate recruitment of five additional trainees which</p>

						<p>will include rotation to Circle. Workforce will be a key area for developing non medical workforce with more nurses and fast tracking staff grade to consultant role, alongside the national requirement increasing commissioning. 30/10/15</p> <p>Health Education England nationally have no plans to increase training numbers. The Senate engagement programme will continue to discuss and review this position 01/03/16</p> <p>A survey of attendees will agree future meeting arrangements and requirements to meet the needs for future workforce placements</p>
Other actions outside of recommendations - reporting						
Report on implementation to key stakeholders and accountable organisations	NHS England checkpoint assurance meetings	Guy Mansford (NUH) and Vicky Bailey (Circle)	Mon 08 Jun 15	Thu 31 Mar 16	CLOSED	<p>Commenced and on-going next report 1 October 2015</p> <p>30/10/15 Monthly updates in place</p> <p>01/03/16 updates submitted on request</p>
	CCG Governing Bodies	Vicky Bailey	Mon 08 Jun 15	Wed 30 Sept 15	CLOSED	<p>In progress. Reports circulated to all CCG Governing Bodies in Nottinghamshire</p> <p>30/10/15 Updates as required</p>
	NUH and Circle committees/boards	Peter Homa and Helen Tait	Mon 08 Jun 15	Wed 30 Sept 15	CLOSED	<p>In progress.</p> <p>13.08.15 30/10/15 East Midlands Senate supporting ongoing engagement</p> <p>01/03/16 Providers continue to meet as appropriate</p>
	Joint OSC	Vicky Bailey	Mon 08 Jun 15	Thurs 31 Dec 15		<p>In progress. Meeting 16 June 2015. Agreed this plan will be circulated to the OSC. Further request for attendance in six months. OSC is one of the stakeholder organisations and will be involved going forward.</p> <p>13.08.15 Further attendance requested at November meeting</p> <p>30/10/15 Updates as required</p> <p>01/03/16 Update requested to be presented April 2016</p>

Other actions outside of recommendations - Communication, engagement and stakeholder management						
Ensure robust stakeholder management	Key communication produced for patients and staff through organisation newsletters and patient groups	Peter Homa and Helen Tait	Mon 08 Jun 15	Thu 31 Mar 16	CLOSED	<p>Not commenced. Links to the outcome of the stakeholder event</p> <p>30/09/15 Senate meeting complete. Healthwatch attended. Plan to be developed.</p> <p>30/10/15 Healthwatch briefed and update to be provided</p> <p>Further updates provided as required from the Senate engagement programme</p> <p>01/03/16 Healthwatch (city and county) letter to all known patient and public groups issued in January 2016 with reply by 5 Feb 2016. No responses received to City and only two to County.</p>