

Leeds Dermatology Patient Panel



Submission for Scrutiny Board Meeting (Health) 16 March 2010

Dear Steven,

As you now know Bill Cunliffe and myself with the help of a few patients have set up a patient panel for dermatology at the LGI with a growing membership, with myself as chairman and Bill Cunliffe as secretary and have compiled a constitution that has been agreed by all members of the panel.

In summary the Dermatology Panel will be

- An Independent Advocate for Dermatology Patients.
- A partnership involving patients and professionals working together to bring about improvements.
- A relationship of collaboration and mutual respect.
- A Forum for ensuring good clinical practice.
- A committee for understanding the different ways a Patient Panel can help to bring about improvements in dermatology services (ie Internal improvements by sharing experiences; acting as a sounding board and by offering new ideas).
- A Forum to assist the Trust meet its Patient & Public Involvement requirements.
- An opportunity to better understand the NHS and how it works.
- Inclusive: it will try to represent the diversity of Dermatology Patients;
- Such that all our activities are transparent with no hidden agendas
- To notify the membership of dermatology fund raising events.

As the panel is newly formed and still evolving has the main aim to contribute to the re-provision of Ward 43 and dermatology services and to maintain the high quality of patient care and to this end the panel has set up links with the following departments, section or a groups representative within the LTHT.

- Directorate Manager of Speciality Medicine - Judith Lund
- Divisional Nurse Manager - Alan Sheward
- Consultant Dermatologist - a representative attends
- Matron Seconded for option appraisal - Beverley Craggs
- Matron (dermatology) - Emma Day
- Senior Sister (dermatology) - Beverley Moussa
- Sister (dermatology) - a representative attends
- Communication Officer - Ross Langford

The national dermatology groups and organisation that we are in contact for support and advice are,

- SCC (The Skin Care Campaign)
- BAD (The British Association of Dermatologist)
- BDNG (The British Dermatology Nursing Group)
- Patient Support Groups (such as the Eczema Society, Psoriasis Society, Etc)

We have on the panel a committee member of the Leeds Local Involvement Network (LINKs) who is also a patient Ken Ward

It took some time to set up and arrange the first meeting as it was difficult to know who to contact and how to be recognised within the Trust Higher Management structure and we were past around departments. So we arranged the first meeting ourselves and invited the above listed representatives who after the first meeting said that the panel was recognised by all and could provide valuable input to dermatology services. Since our first meeting the LDPP has

been meeting every four weeks and my self as chairman meeting with management in between for updates and input from the panel members and all meetings have been open and transparent.

In January a Matron was seconded in for three months to work only on an "options appraisal" for ward 43 possible relocation to be presented I believe at the March LTHT board meeting and then for formal consultation to take place with all interested stakeholders and service providers including the Scrutiny Board.

We have been very active with input into the completion of the option appraisal, by compiling a comparison list between Ward 43 at LGI and a proposed Ward 2 at CAH this has been achieved with visits by Consultants, nursing staff, patients and myself to Ward 2 at CAH, from this comparison we are compiling a survey questionnaire to go out to patients who have been a dermatology inpatient within the last two years. The trust has stated that they will help and fund this survey.

The comparison subjects that are being addressed at the moment with input from consultants, nursing staff, patients and myself are,

- The site of the ward within the city and within the hospital complex
- General ambience and facilities on the ward for patients and visitors
- General ambience for nurses and facilities for nurses
- Facilities for patients and nurses which influence the delivery of care
- Medical care at the two sites
- Requirement for inpatients to have treatment with treatment facilities which are presently in the outpatient department
- Medical student teaching
- Postgraduate training of registrars

During the last three months the Trust has been very helpful open and transparent at all our meetings and with many actions on the trust from questions asked which we believe are honest and open. We are just waiting now to see how the next stage (consultation) will take place.

Lastly it has come to the notice of the LDPP that changes are taking place in community dermatology services commissioned by Leeds NHS PCT that will impact on the Dermatology Department of LGI and if not implemented to the correct level of dermatology knowledge will have an impact on the quality of patient care and lead to patient safety issues. Our understanding is that there has been little or no consultation with involved stakeholders and patients. As we see this as a significant change in the delivery of dermatology services we will be writing to the Leeds NHS PCT asking who has been included in the consultation and when, for this change in service. Although we do not yet have access to all the facts there is a strong possibility that the patient dermatology panel may suggest that these plans be put on hold until there is appropriate consultation between community and the hospital medical, nursing and managerial staff.

Should you require any more information then do not hesitate to contact myself or Bill Cunliffe

Yours sincerely



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