

Title

Teledermatology service Provision

Reference Number: RDF2136-23

Date of Response: 14/12/23

Further to your Freedom of Information Act request, please find the Trust's response(s) below:

Please be aware that the Royal Devon University Healthcare NHS Foundation Trust (Royal Devon) has existed since 1st April 2022 following the integration of the Northern Devon Healthcare NHS Trust (known as Northern Services) and the Royal Devon and Exeter NHS Foundation Trust (known as Eastern Services).

1. *Do you have a current Teledermatology service?* Yes.
2. *Do you use the service for skin conditions and lesions (please percentage for each)* Answer: Teledermatology is used for all dermatology conditions, including inflammatory skin conditions and lesions. It is not possible to give a breakdown as this information is not routinely collected by the Trust.
3. *What type of lens are you using: macroscopic or dermatoscopic (please name the equipment(s))?* Answer: Both Macroscopic and dermoscopic images are collected. A wide range of dermatoscopes are used to capture images in primary and secondary care, including DermLite and Heine dermatoscopes. Images are usually taken with smartphones – again a wider range of devices in accordance with teledermatology roadmap and teledermatology standards are available at:

British Association of Dermatologists - bad.org.uk
4. *Is there a restriction on the number of lesions per consultation and if so, how many?* No restriction through the Advice and Guidance service. Maximum of 2 lesions through urgent suspected skin cancer teledermatology service.
5. *What teledermatology image sharing platform(s) are you using?* Answer: NHS e-Referral service for Advice and Guidance (A&G).
6. *What Teledermatology service model do you use:*
 - a. *NHS provider led* Yes.
 - b. *3rd party provider* No
 - c. *Other* N/a
7. *What percentage of patients are managed in primary care?* Answer: Approximately two thirds of Advice and Guidance requests are managed in primary care with Specialist Advice

8. *What is the split for first dermatology appointments Face to Face, Non-Face to Face?* Answer: This information is not routinely available however we estimate > 90% of first dermatology appointments are face-to-face.
9. *What is the turnaround time for reporting?* Answer: A&G turn-around time is 2-5 working days, with majority turned around in two working days.
10. *Using the NHS e-Referral Service (e-RS). Can you please confirm the following:*
 - a. *Volume of advice and guidance requests per GP/referrer.* Answer: Approximately 400 A&G requests a month from all GP practices.
 - b. *Percentage of advice and guidance requests where further information is requested by provider.* Answer: Not routinely available but likely to be < 5%.
 - c. *Percentage of advice and guidance requests where 'referral only' is recommended.* Answer: This is not relevant as if referral is required the provider will convert directly (~ one third of patients)
 - d. *Percentage of advice and guidance requests referred to same speciality within a defined window - 3 months or 6 months for example.,* Answer: Approximately 40% (this includes the ~ 30% converted directly at time of initial A&G).
 - e. *Percentage of advice and guidance requests which have been converted to a referral.* Answer: Approximately 30%.
11. *What is the percentage of patients on the 2 Week Wait (2WW) suspected skin cancer pathway are rejected and referred back to primary care with "advice and guidance" in your area, per locality? (for 2022-2023; or if not available, for 2021-2022).* Answer: It is not possible to reject a patient on the urgent suspected skin cancer pathway without discussion with the GP. It is not possible to reject an urgent suspected skin cancer referral with advice and guidance. The 2ww pathway no longer exists since October 23. In our Trust, the majority of patients on the urgent suspected skin cancer pathway are directly booked for face-to-face appointment.