



**Wessex**  
Cancer Alliance

# Teledermatology for suspected cancer referrals

28<sup>th</sup> November 2023



# Session outline

- Introduction, evidence and LIS support for teledermatology roll out
- Demonstration and Top tips
- Practical Session
- Q+A



# The Problem

- Skin cancer is the most common form of cancer in the UK and melanoma is now 5<sup>th</sup> most common cancer
  - Incidence rates predicted to continue to increase
- This has inevitably increased workload in primary care and put significant strain on secondary care dermatology services
- Locally there has been a sustained and increasing rise in suspected cancer dermatology referrals
  - Non-cancer dermatology referrals are therefore also waiting significantly longer as fast-track clinics have priority
  - This leads to distress for patients
  - Impacts on primary care workload with patients reconsulting



# Teledermatology

- WCA is supporting the use of teledermatology for **suspected cancer referrals** and is providing financial support with the LIS
  - This has already worked well on IOW with GPs, patients and secondary care all happy with the service
- The upload of images alongside the referral form allows for rapid virtual triage of patients, with all further communications provided directly to the patient from the dermatology dept
- This will streamline and speed-up the pathway, benefitting both patients and GPs.



# The Benefits



## For GPs

- Confident that your patient will be diagnosed rapidly
- Less likely to be queries from distressed patients chasing fast track appointments.
- Should begin to be reductions in routine dermatology waiting times, leading to a reduction in patients reconsulting in primary care
- Provides an education resource/ 2-way conversation
- Patients are given appointments in the right clinic and right time
- Reducing the risk of missing cancer

## For Patients

- Rapid diagnosis
- For some patients, a hospital appointment may be avoided
- Safe and effective guidance via the right route, avoiding delays with diagnoses and treatments
- Assigning appointments to the correct clinic at triage and often straight to surgery when appropriate, streamlining the patient's journey
- Significantly reducing waiting times
- Facilitating early cancer detection
- Being informed directly about the care pathway they are on, their diagnosis and treatment plan in a clear, compassionate and timely way



# Pathways and local availability

- Teledermatology for suspected cancer referrals is available at UHS and Portsmouth Hospitals
- Go live date for at HHFT is to be confirmed
- Please send the current 2ww form and attach the images via ERS
  - For those referring into UHS please use these clinic details:
    - 2ww Dermatology - Suspected Malignant Melanoma or SCC -Teledermatology Triage -Southampton-UHSFT-RHM (7987076)
    - If no images available, then choose 2ww -Dermatology - Suspected Malignant Melanoma or SCC - NO PHOTO'S - Triage -Southampton-UHSFT-RHM (7991788)
  - For those referring into Portsmouth Hospitals the suspected cancer referral form and photographs should be sent via advice and guidance to the trust using these clinic details:
    - i. Dermatology Suspected Cancer Advice and Guidance Service - PHU - SMH – RHU
    - ii. Specialty – 2WW Clinic Type 2WW Skin



# WCA support

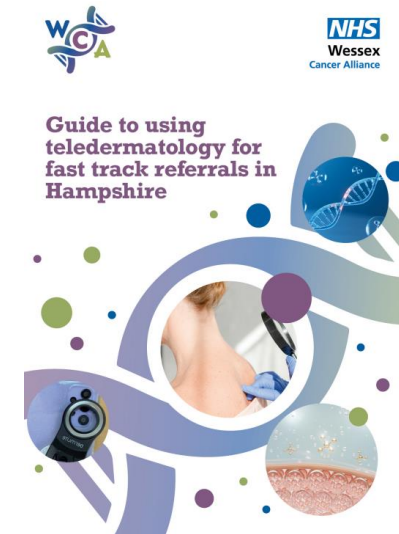


## Local improvement scheme

- Clinical and non-clinical cancer champion should work with their PCN to optimise the use of teledermatology where available and ensure readiness during set up
- 15 pence per patient plus £500 per practice to support this work
- PCN visit by WCA can include planning and discussion of the project

## WCA support:

- Resources, videos and links collated on toolkit: <https://wessexcanceralliance.nhs.uk/teledermatology>
- Step-by step support guide on teledermatology for suspected cancer referrals
- How to videos- coming soon to website
- Further education and support sessions to be arranged



Please contact us ([england.wessexcanceralliance@nhs.net](mailto:england.wessexcanceralliance@nhs.net)) for further information or any suggestions for resources that would support the use of teledermatology in your PCN