Department of Plastic and Reconstructive Surgery
In Roscommon Hospital
“See and Treat” Model of Care

HISTORY
The “See and Treat” service commenced in September 2011

- Strong emphasis on education and training for all staff
- Extensive catchment area (shaded pink)
- Constantly evolving and improving unit efficiency
- Day Cases, Outpatients, and Theatre

Based on “See and Treat” Model of Care
- Consultation and same-day procedure where possible
- Majority of patients attend the service only once

Demographic served
- Older population with limited transport options
- Younger population restricted by working hours and family commitments

INNOVATION
National Cancer Control Programme
- Pilot site for the introduction of electronic referral of pigmented lesions from primary care - (NCCP initiative)
- Regular teleconferencing links to Multidisciplinary Team Meeting (MDT) in Galway University Hospital

Surveillance Clinics
- Commenced in July 2013
- Opportunity to review high risk skin cancer patients
- 70 patients reviewed per surveillance day
- 600 patients on this programme to date
- Ensures accurate follow-up care for patients with melanoma, squamous carcinoma and other high-risk skin cancers
- Early identification of recurrence decreases morbidity rates and improves survival
- Patient education: Sun protection, self surveillance and skin cancer prevention

Surveillance Booklet
- New initiative, entirely nurse-led
- Patient Record/Educational tool
- Increases effective communication between secondary and primary care and paves the way for shared hospital/GP care in the future
- Patient empowered through understanding and control
- Adherence to international gold standards of follow-up for high risk skin cancers

Safety Huddle
- Thursday mornings 8.15 a.m.
- Weekly multidisciplinary team-meeting
- Promotes communication and understanding
- Identifies risks and improves patient safety
- Addresses waiting list
- Identifies staffing requirements
- Produces ideas and initiatives

Initiative Days
- Prompt surgical treatment with painful or debilitating conditions
- Very flexible service
- Attempt to see urgent referrals promptly
- Carpal Tunnel Release Days- (12-14 patients per day under local anaesthetic)
- Extra outpatient clinics when possible

STATISTICS
Number of patients treated (based on 2 days per week)

Skin cancers treated in 2014

- Benign : Malignant Ratio = 2:1 (Approximately)

EDUCATION AND RESEARCH
National Cancer Control Programme
- Advanced Nurse practitioner candidates
- Plastics: Minor Surgery, Skin Cancer
- Wound closure course (Suturing for nurses)
- Nipple/Areola tattooing
- Journal club
- GP Information evenings
- PHN Information talks
- Formulation of Patient Information leaflets
- Unit is an education resource for: Local GPS, student nurses, NCHD’s, Medical Students, Bio-Engineers
- Future research

FUTURE DEVELOPMENTS
- In order to meet service need, a 5-day unit with an internal management structure is needed
- Registering of Advanced Nurse Practitioners and creation of CNS posts to provide a holistic service to patients from screening and diagnosis to treatment and follow-up
- Autonomous nurse-led clinics
- Database development and research
- Introduction of digital imaging for all patients
- Laser therapy