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Review of the Regional Plastic Surgery
Service in Northern Ireland

June 2017

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Assurance, Challenge and Improvement in Health and Social Care

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Contact us

- ✉ RQIA,
9th Floor Riverside Tower
5 Lanyon Place,
Belfast, BT1 3BT
- ☎ (028) 9051 7500
- 💻 info@rqia.org.uk
- 🌐 www.rqia.org.uk

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RQIA Review of the Regional Plastic Surgery Service in Northern Ireland, June 2017



RQIA was commissioned by the Department of Health to review the Regional Plastic Surgery Service in Northern Ireland as part of its ongoing programme of review.

The review, led by experts from Wales and England, examines the current plastic surgery service in Northern Ireland and explores current issues for the service, including burns and paediatric plastic surgery. It also assesses the effectiveness and present relevance of regional policy guidance for the provision of the plastic surgery services - A Policy to Make Best Use of Resources in Plastic Surgery and Related Specialties (EUR, November 2006) - to ensure people have timely access to high quality services. Since this time there has been a significant increase in demand arising from both cancer and trauma cases, which has impacted on capacity to deliver non-urgent elective cases.

The review makes 10 recommendations for improvement, which must be underpinned by clear policy direction and strong clinical leadership to take Northern Ireland's plastic surgery service forward in the future.



Background

Plastic surgery specialises in the repair or reconstruction of missing or damaged tissue and skin, usually resulting from surgery, illness, injury or an abnormality present at birth. The main aim of plastic surgery is to restore the function of soft tissues and skin to as close to normal as possible. Burns surgery is a sub-specialty of plastic surgery, working in a wider multidisciplinary and multiprofessional team to provide care (and sometimes intensive care) to the victims of burn injury.

In Northern Ireland, the regional plastic surgery service is intended to be a single, integrated service managed by the South Eastern Health and Social Care Trust. However, it is based on multiple sites and managed by two trusts: the South Eastern and Belfast trusts.

The review team found dedicated plastic surgery staff working to provide a quality treatment to patients, within the confines of a service with limited capacity. We also noted that the service was unable to meet its targets for urgent referrals, and was not complying with joint orthopaedic – plastic surgery best practice standards. The review team noted that due to a shortage of trained surgeons, access to microsurgical breast reconstruction was limited.

RQIA considers that in the short term Northern Ireland's plastic surgery service needs assistance to meet increasing demand, and improved opportunities for doctors in training in all aspects of plastic surgery.

Recommendations

The RQIA review made **10** recommendations focusing on five broad areas for improvement:

Service Improvement: Complete the revision of the EUR policy and ensure that the EUR policy is being adhered to by all relevant surgical specialities within trusts and is communicated widely to GPs, provider trusts and the public.

Service Model: Progress the implementation of a single service model, managed by one trust, for burns and plastic surgery in Northern Ireland; consideration should be given to locating the service on a single site. This should include a review of the current configuration for sub specialism in plastic surgery, improved use of technology and local service provision.

Performance: Adopt the National Network for Burn Care National Burn Care Standards and self-assess against them aiming to provide 'burn unit' level care.

Resources: Identify recurrent funding to employ two additional plastic surgery consultants for the plastic surgery service in Northern Ireland immediately followed by a full evaluation of the wider resources required for the future.

Staff Training: Undertake joint agency working to provide further opportunities for doctors in training in plastic surgery within Northern Ireland.