



Skin Disorders and the NHS White Paper: A Position statement for Peers from the British Association of Dermatologists (BAD)

The BAD has submitted responses to the government consultations and to the Listening Exercise. There remain a number of areas where patient care will suffer. These include:-

Choice and Competition:

- **Do people have enough information?** People should know the details of the experience, qualifications and outcomes of those who are treating them.
Choice is only useful if it is informed choice.
- **Can we be sure that competition is fair and transparent?** Many GPs have financial interests in organisations which may benefit from allocation of public funds under their control.
There must be no conflicts of interest in competition
- **Will patients with complex cases be disadvantaged?** The elderly, those with chronic illness, the disabled may be disadvantaged because their cases are seen as unprofitable.
Providers must not be able cherry pick only the cases that provide profits.

Accountability and Patient Involvement:

- **Will people with rare diseases be ignored?** The large number of people with the thousands of rare diseases must not be ignored simply because they don't have a big enough voice.
All patient voices must be heard in decisions about commissioning.

Education and Training:

- **How can we ensure that training of NHS staff is not compromised?** It is essential that providers that offer NHS staff education and training should be remunerated appropriately.
We need to ensure a level playing field for those who support the NHS by providing training.
- **How can we ensure that we maintain sustainability despite short term financial problems?** Short term financial priorities should never dictate training numbers which should be determined by the Centre for Workforce Intelligence (CfWI), Deaneries and SACs.
We need to make sure that training numbers aren't dictated solely by short term financial considerations but pay heed to future needs.

Advice and Leadership:

- **How can we be sure that local services still have appropriate levels of local expertise?** The white paper still disenfranchises *local* specialists.
Lack of involvement of LOCAL experts make quality, integrated services less likely.
- **Expertise is needed if those with less common conditions are to receive appropriate care.** Excluding experts from commissioning will disadvantage those with less common conditions.
Without experts' input, commissioning decisions may be based on incomplete information.
- **Is the NHS Commissioning Board effectively representing all patient and public interests?** All medical specialties should be represented on the NHS Commissioning Board including dermatology to avoid local inequalities (25% of GP consultations relate to skin disease and 1-2% of the population are referred yearly to secondary care dermatology with over 2000 different skin diseases.).
Unless the NHS Commissioning Board is fully representative of all patient and public interests it risks delivering services with major local inequalities throughout England.