

**INTER-DEPARTMENTAL PEER REVIEW REPORT**  
**STAFFING AND WORKLOAD**

<b>TRUST</b>	
<b>POPULATION</b>	

<b>HOSPITALS</b> (More than 2 outlying clinics is not ideal)			
<b>BASE</b>		<b>CONSULTANT</b>	<b>FREQUENCY</b>
<b>OTHERS</b>			

<b>STAFF</b>					
<b>CONSULTANTS*</b>	<b>CONSULTANT WTE : POPULATION –</b> (TARGET - 1: 100,000)				
	<b>SESSIONS</b>	<b>CLINICS</b>	<b>SURGICAL</b>	<b>NEW+/-OLD**</b>	
<b>NON-CONSULTANT</b>					
<b>JUNIOR DOCTORS</b>					

<b>CLINICS</b>		
<b>WAITING TIMES</b>	<b>URGENT</b> (ideally 1 wk)	
	<b>SOON</b> (ideally 4wks)	
	<b>ROUTINE</b> (ideally 12wks)	
<b>NEW PATIENTS per annum</b>		
<b>OLD PATIENTS per annum</b>		
<b>NEW/OLD RATIO</b> (1:2 ratio recommended)		
<b>DNA rate</b>		
<b>GP REFERRALS per annum</b>		
<b>SURGICAL PROCEDURES per annum</b>		

\*1 WTE Consultant Jobplan should comprise 5-7 fixed sessions of which 3-5 are clinics.

\*\* BAD recommend numbers of patients/ clinic as follows: New = 10-12, Old= 15-20, New/Old = 5-6/ 7-6