



VOT / DOT Hull & East Riding

Joanne Robinson – TB nurse



TB in Hull & ER

- Lower incidence of 20-30 notifications per year
- Of current caseload of 20 index cases – 3 are on standard treatment, 2 of which have poor compliance
- High level complex needs – no recourse to public funding, undiagnosed mental health issues and other co-morbidities, re-activation
- Currently have 2 MDR TB cases



Staffing

1 x FT B6, 1x 30 B6, 2 x FT B5 (equivalent) and 1 x HCA 24 hours

No longer have dedicated B7 team lead as B7 is now clinical team lead for four specialist nursing teams.

1 respiratory consultant (TB lead physician), 1 x ID consultant, 1 x Paediatric Intensivist (Paediatric TB lead)



Team challenges

- Staff deployment
- Staff turnover
- Staff sickness
- Increasingly complex caseload
- No dedicated nurse leadership.



DOT provision

Contractually provided by community pharmacists funded through local commissioning. Recent challenges include:

- Stock availability (puts obstacles in the way)
- Patients being too unwell to physically attend

Nurse DOT provision challenging due to:

- Staffing issues and cover (especially if 2 nurse visit is required)
- Access to patient's with compliance issues



VOT

Not currently provided in Hull but it is a requirement to do so as we are a regional MDR TB centre.

Despite best efforts on behalf of the ID consultant to progress setting this up – dead end

VOT trialled in Hull 03.2015 to 04.2015 – Outcome?

TB nurses have means to provide 'Live' VOT through SystemOne patient records and did provide this service to an MDT TB patient (LAC) who transferred out of area last year until service could be provided by new area. ? sustainable in long term



VOT pro's/con's

- Offers more patient choice (useful when patients return to work)
- Potential increase in convenience for both patient and staff
- Increased confidentiality (as opposed to DOT home/pharmacy visits)
- Can cover out of hours
- Still relies on patient compliance to an extent (you can take the horse to water, but you can't make it drink!)
- Access to smartphone technology and network access
- Language barrier, learning difficulties, memory issues



Thanks for listening

