



| DOCUMENT TYPE: | | | UNIQUE IDENTIFIER: | | | |
|--|--------------------------------|----------------|---|---------------|----------------|--|
| Standard Operating Procedure | | | SOP-03 | | | |
| DOCUMENT TITLE: | | | VERSION NUMBER: | | | |
| General Skull B | Base Referral Pathway | / | 1 | | | |
| | _ | | STATUS: | | | |
| | | | Draft | | | |
| SCOPE: | | | CLASSIFICATION: | | | |
| Trust wide | | | Departmental | | | |
| | | | | | | |
| AUTHOR: | JOB TITLE: | | DIVISION: | DEPART | MENT: | |
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| N/a | | | David Shakespeare | | | |
| VALIDATED BY | 7. | | DATE: | | | |
| Division of Med | - | | 06 March 2018 | | | |
| RATIFIED BY: | | | DATE: | | | |
| Procedural Docu | uments Ratification Gro | guo | 06 March 2018 | | | |
| (NOTE: Review dates may alter if any significant | | | REVIEW DATE: | | | |
| changes are made). | | | Click here to enter a date. | | | |
| WHICH PRINCI | PLES OF THE NHS | Tick | WHICH STAFF PLEDGES OF | FTHE | Tick | |
| CONSTITUTION APPLY? | | those which | NHS CONSTITUTION APPLY | (? | those which | |
| Click here for guidar | nce on Principles | apply | Click here for guidance on Pledges | | apply | |
| 4 TL NUIO : 1 | | | 4 5 | | | |
| available to all. | a comprehensive service, | | Provide a positive working environme and to promote supportive, open culture | | | |
| | vices is based on clinical | \checkmark | staff do their job to the best of their abilit | | | |
| need, not an individua | | | 2. Provide all staff with clear roles and | _ | 1 | |
| 3. The NHS aspires to excellent and professi | the highest standards of | $\sqrt{}$ | responsibilities and rewarding jobs for te individuals that make a difference to pat | | $\sqrt{}$ | |
| | at the heart of everything the | | families and carers and communities. | ients, their | | |
| NHS does. | | | 3. Provide all staff with personal develop | | | |
| 5. The NHS works acr | ross organisational | \checkmark | access to appropriate education and tra | | | |
| boundaries. 6. The NHS is commit | tted to providing best value | | their jobs, and line management supporthem to fulfil their potential. | to enable | | |
| for taxpayers' money. | | | 4. Provide support and opportunities for | | | |
| 7. The NHS is accountable to the public, | | | maintain their health, wellbeing and safe | | | |
| communities and patients that it serves. | | | Engage staff in decisions that affect the services they provide, individually, throut | | | |
| | | | Scratoes they provide, individually, tillou | An | | |

Lancashire Teaching Hospitals NHS Foundation Trust

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| | | representative organisations and through local partnership working arrangements. All staff will be empowered to put forward ways to deliver better and safer services for patients and their families. 6. To have a process for staff to raise an internal grievance. 7. Encourage and support all staff in raising concerns at the earliest reasonable opportunity about safety, malpractice or wrongdoing at work, responding to and, where necessary, investigating the concerns raised and acting consistently with the Employment Rights Act 1996. | |
|---|---------------------------------|---|---------------------------------|
| WHICH AIMS OF THE TRUST APPLY? Click here for Aims | Tick those which apply | WHICH AMBITIONS OF THE TRUST APPLY? Click here for Ambitions | Tick those which apply |
| To offer excellent health care and treatment to our local communities. To provide a range of the highest standard of specialised services to patients in Lancashire and South Cumbria. | √ √ | Consistently deliver excellent care. Great place to work. Deliver value for money. Fit for the future. | √ √ √ |
| 3. To drive innovation through world-class education, teaching and research. | | | |

Does this document meet the requirements of the Equality Act 2010 in relation to Race, Religion and Belief, Age, Disability, Gender, Sexual Orientation, Gender Identity, Pregnancy & Maternity, Marriage and Civil Partnership, Carers, Human Rights and Social Economic Deprivation discrimination? **Yes**

Document for Public Display: No

Has an evidence search been completed? N/a

If so, by whom? Click here to enter text.

Date evidence search conducted: Click here to enter a date.

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General Skull Base Referral Pathway Indicator 005 Special Cases: Complex NF1 - Patients may require input Further Imaging if from H&N MDT &/or Complex Spine MDT Required based at LTHTR. **NF2** – Patients referred to NF2 Service. Back to ** currently based at Manchester. Referral Sarcoma - Patients referred to sarcoma MDT from based at The Christie (See PBT pathway). H&N Follow-Up at Referral to MDT * Skull Base Skull Base Clinic For Surveillance **Patient** Service Secretarie Discussed Is Post-Operative Referral at Skull Radiosurgery s via Radiosurgery Clinic +/-Indicated? from Posted or Base MDT For Radiosurgery Treatment at Manchester or DGH or Faxed Sheffield Other Letter/ In-MDT House Υ Electronic Referral/ Is the On-Call Patient Tumour Pre-Op Assessment For Surgery 24h Incidental **Printout** Consultant Benign? +/- Surgery Discussed at MRI Radiology **Notifies MDT** Skull Base Finding Coordinator MDT Oncology Clinic +/-For Oncology Therapy Ν Treatment at LTHTR Radiology Report to Follow-Up at **TYA Patients:** Referring Skull Base or Patients aged 16-18 are referred to the TYA Consultant MDT at the Young Oncology Unit, Christie. **H&N Clinic** Patients aged 19-24 are given the choice of referral to Christie or treatment at LTHTR.

* Patients with skull base tumours presenting to the H&N MDT should be discussed at the skull base MDT prior to any treatment decisions.

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Department/Function

What is being assessed?

Lead Assessor



Equality, Diversity & Inclusion Impact Assessment Form

Interim Director of Governance

Introduction of SOP and guidelines

Neurosurgery

| Date of assessme | nt | | | | | | |
|---|------|--|------------------------------------|---|------------------------------|--|--|
| | | Equality of Access to Health Group | ' | Staff Side Colleagues | | | |
| | | Service Users | | Staff Inclusion Network/s | | | |
| details of involver the Equality Impa | | | Personal Fair Diverse Champions | e 🗆 | Other (Inc. external orgs) | | |
| Assessment proc | | | Please give details: | | ed Peer review is managed by | | |
| | | | an external assessment team. | | | | |
| 1) What is the im | pact | on the | following equality g | roups? | | | |
| Positive: | | | Negative: | - | Neutral: | | |
| Advance Equality of opportunity Foster good relations between different groups Address explicit needs of Equality target groups | | Unlawful discrim harassment and victimisation Failure to addres explicit needs of Equality target g | SS: | It is quite acceptable for the assessment to come out as Neutral Impact. Be sure you can justify this decision with clear reasons and evidence if you are challenged | | | |
| Equality Groups Impact (Positive / Negative / Neutral) | | Comments: ➤ Provide brief description of the positive / negative impact identified benefits to the equality group. ➤ Is any impact identified intended or legal? | | | | | |
| Race (All ethnic groups) | Ne | eutral | | | | | |
| Disability (Including physical and mental impairments) Neutral | | | | | | | |
| Sex | Ne | eutral | | | | | |
| Gender reassignment Neutra | | | | | | | |
| Religion or Belief (includes non belief) | | | | | | | |
| Sexual orientation Neutral | | | | | | | |
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| Age | Neutral | | | |
|--|---------|--|------|-----------|
| Marriage and Civil Partnership | Neutral | | | |
| Pregnancy and maternity | Neutral | | | |
| Other (e.g. caring, human rights, social) | Neutral | | | |
| 2) In what ways does any impact identified contribute to or hinder promoting equality and diversity across the organisation? | | | | |
| 5. gaca | | | | |
| If your assessment identifies a negative impact on Equality Groups you must develop an action plan to avoid discrimination and ensure opportunities for promoting equality diversity and inclusion are maximised. This should include where it has been identified that further work will be undertaken to further explore the impact on equality groups This should be reviewed annually. | | | | |
| ACTION PLAN SUMMARY | | | | |
| Action | | | Lead | Timescale |
| | | | | |
| | | | | |
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