The adult CF service at Castle Hill Hospital, Hull, is a small, geographically isolated clinic in an area with a high deprivation index. It is situated in a teaching hospital with all the appropriate specialties necessary for the management of adult people with CF and has good links to the Newcastle Transplant Centre. However, despite the clinic’s longevity and the length of service of some of the team, because of its small size and slow incremental growth there is limited clinical experience across the multidisciplinary team compared with other clinics, and its viability as a standalone centre is problematic, hence the recent discussions with the adult CF service at York to form a joint centre. There is strong motivation and obvious passion within the team, some considerable burden of responsibility, and a willingness to learn. The facilities are reasonable with a promising outpatient development, although the en suite inpatient facilities are at a different hospital, which may pose logistical problems, and are not fully equipped for young patients’ needs. Due to the low level of inpatient care need, the ward nurses also have limited cumulative experience.

Service users rated the CF team, ward team and hospital as excellent, and also noted outpatient care as an area of excellence, including waiting times, cross-infection measures, cleanliness, annual reviews and the availability of the team. They also noted that accessibility, communication and out-of-hours provision by the MDT as areas of good practice.

The peer review team identified the following areas of good practice:

- Innovative attempts to utilise video for MDT and joint clinics with York, with discussions around joint management based on pooled experience.
- Sterling effort to provide 24-hour cover by a diminutive team via the CF phone. Patients comment ‘access is good’ and they carry contact number cards and the mobile numbers of the team members.
- Huge commitments and breadth of responsibility falls upon the CF nurse, who clearly strives to provide high-quality care and without whom there would be no CF service.

The peer review panel noted that the level of care currently provided does not meet the Standards of Care in many areas, and to address this the service needs to improve staffing shortfalls in medical, physiotherapy, nursing, pharmacy and social work disciplines. Psychology appears to be well provided for, and a good service is provided.

At present the service is predominantly CF nurse led, including the on-call commitments, which is unsustainable, and more input is required at senior medical level. A sustainable on-call model is required.

The Peer Review team recommend that, with Commissioner approval, the adult service at York should be approached to be the lead of a joint York–Hull CF adult centre, with services for local patients provided at Castle Hill by the current Hull staff overseen by the joint MDT. While new medical, social work, pharmacy, and possibly nursing appointments are urgently needed at Hull, staffing...
requirements should be reviewed in conjunction with a proposed joint team with York to best suit long-term strategic development.

Patients should be formally reviewed by the joint MDT for optimisation of their care. The model of care should be developed on a collaborative basis with the Hull and York teams embedding a continuing process of Quality Assurance that can be externally validated.