

National PET/CT Contract

Clinicians Questions and Answers - Everything you need to know about the new PET/CT contract

Who is Alliance Medical Limited?

Alliance Medical operates a national network of over 50 MRI, CT and PET/CT static imaging centres. In addition, we provide mobile medical imaging services to over 100 NHS and independent sector hospitals through our fleet of mobile scanners.

In early 2015, along with partners in a collaborative network, we were successful in our bid to provide PET/CT imaging services on behalf of the NHS to each of the four Lots that were put out to tender. As a result, AML will be significantly increasing PET/CT scanning capability with an investment of over £80m across 30 sites in England working in partnership with the NHS and independent sector.

Alliance Medical also operates an integrated national network of four radioactive isotope production facilities and has an integrated SPECT radiopharmaceutical distribution agreement (including Mo-99 generators) as part of its goal to provide a secure supply of radionuclides / radiopharmaceuticals to UK patients and the UK diagnostic imaging market.

Why was Alliance Medical's bid chosen?

In our response to the invitation to tender, Alliance Medical proposed the creation of a Molecular Imaging Collaborative Network involving leading academic centres, local NHS sites and clinicians as partners. The aim of the network is, quite simply, to work together to deliver world-class patient-centred PET/CT services in support of NHS England's vision for improving cancer survivorship.

The network has committed to providing a significant level of investment in the PET/CT infrastructure in England over the lifetime of the contract. Local NHS sites that will host PET/CT services will help tailor the services to meet local needs and reduce geographical variations in access, whilst The Christie School of Oncology will provide staff development to deliver excellent patient care. In addition, performance will be monitored by a governance board with representatives from all parties in the collaborative network, patient groups and commissioning bodies.

What is the size of the contract?

The agreement to deliver PET/CT services is for 10 years. To meet the demands of the project, these services will be delivered at 30 sites throughout England.

Are there performance related incentives/penalties as part of the agreement?

The contract contains specific performance standards and, of course, requires AML and its collaborative partners to meet the service specification for PET/CT. Where Trusts are providing these services as subcontractors, AML has a contractual regime in place that ensures these sites meet precisely the same standards as those which AML are managing and operating. AML has managed these requirements as part of the previous national contract and believe strongly that these are integral to the effective delivery of high quality care to patients who require a PET/CT scan.

Is Alliance Medical confident it can carry out the service within the financial criteria set? How will any overspend affect the quality of service?

Yes. Any overspend is entirely the responsibility of Alliance Medical, and it will have no impact on patient care.

How much does Alliance Medical plan to invest into the service over the course of the contract?

Alliance Medical has committed to transitioning away from mobile services on the majority of sites which do not already have static facilities, to a sustainable, high-quality static infrastructure within a year of contract inception. We are also increasing the number of sites at which PET/CT services are delivered.

These pledges demonstrate Alliance Medical's support for NHS England's objective to optimise equity in patient access and reduce geographical variability in the quality of PET/CT infrastructures. We estimate that the investment over the course of the contract will be approximately £80 million.

Doesn't this contract award demonstrate that the NHS is being privatised?

No. As detailed in our response to the invitation to tender, Alliance Medical will be creating a Molecular Imaging Collaborative Network to deliver world-class patient-centric PET/CT services, with leading academic centres, local NHS sites and clinicians as partners. Collaboration is the key to improving the quality of services across the country, and Alliance Medical has sought to bring local NHS partners into the network solution to tailor the scanning environment based on local needs. In some cases, the NHS sites which form part of the collaborative network will be the ones delivering the services to their local populations.

How will Alliance Medical work with NHS Trusts to ensure the service is delivered as seamlessly as possible (and not seen as a separate entity)?

Alliance Medical has worked collaboratively with the NHS to deliver PET/CT services since 2007, as the incumbent provider for the previous PET North contract. Over the past seven years, we have developed highly effective working relationships with our site partners within NHS Trusts to develop safe, high quality PET/CT services, as part of a broader pathway of care, based on mutual knowledge sharing, promoting best practice and innovative new models of working. This will continue.

How will Alliance Medical improve the service over the term of the contract?

Over the past seven years, Alliance Medical has made a significant investment to improve PET/CT provision across the UK to standards closer to other leading health systems. In partnership with the NHS, we have continued to make significant investment in capital infrastructure, such as mobile and static sites, as well as leading molecular imaging technology to increase scanning capacity and enhance patient access to high quality PET/CT services.

As part of our ongoing commitment to sustainable PET/CT provision, Alliance Medical will continue to make improvements to the service throughout the life of the contract, ensuring long term quality and access for local patient populations.

For example, we will begin to transition away from the use of mobile-led services towards high quality static sites over the next twelve months. The move to static provision will lead to significant increases in capacity, with the ability to operate a seven days a week service, helping to accelerate patient access and reduce the time patients wait for their scans.

Furthermore, Alliance Medical, through the Molecular Imaging Collaborative Network with The Christie NHS Foundation Trust, will continue to support clinicians to improve turnaround time of investigations to five days or less, where clinically appropriate, within the first few years of the contract.

Are there any implications for NHS PET/CT staff working in these new sites? If so, what are they?

Staff that are currently employed by the NHS to deliver PET/CT services at the sites that we will be contractually responsible for delivering services from will continue to do so. This is because we recognise that value of local, well established services and we have worked hard to ensure they continue.

What equipment will be used?

Over the first year of the contract, Alliance Medical will look to transition away from a mobile-led service to a future-proofed, mainly static infrastructure able to provide enhanced patient access to high quality PET/CT services which are scalable and flexible.

Those mobile units used to deliver the contract will be GE Healthcare PET/CT scanners with minimum 16 slice CT capability. Our extensive fleet includes the world's first GE Discovery 710 unit (incorporating the next generation of Time-of-Flight image reconstruction) configured for mobile integration.

The fixed-site facilities will house state-of-the-art PET/CT scanners with at least 64 slice CT capability. Alliance Medical has worked very closely with GE Healthcare to understand the current market requirements and scope of equipment necessary to deliver a high throughput, world-class, patient-centric PET/CT service. Offering excellent image quality, utilising the latest developments in image reconstruction software, with a large bore and reduced scanning times, Alliance Medical believes the GE Discovery 710 unit fulfills the requirements to deliver the services for this contract, something which was specifically evaluated as part of our bid.

On what days will the services be operated?

Mobile services will, at the start, be delivered Monday to Saturday at a frequency to deliver the capacity required.

Fixed-site services will operate Monday to Saturday in line with referral demand.

When necessary, AML has committed to moving to a 7-day a week service.

Who confirms scanning dates and times?

Unless there are local agreements to the contrary, mobile service days will operate 8am until 8pm, with fixed-sites typically scanning from 9am until 5pm. However, the opening hours at fixed-sites will vary to accommodate demand.

If a service day falls on a Bank Holiday an alternate date will be agreed between Alliance Medical and the host site.

All patient appointments are made and confirmed with the patient by the Alliance Medical Patient Management Centre (PMC).

What referrals can be accepted?

AML is contracted to provide a service for NHS clinical PET/CT scans. The referrals should meet locally agreed indications and be covered by the local ARSAC certificate in order to be authorised for a PET scan by the ARSAC certificate holder or their delegate. The following are the conditions and characteristics that have been **excluded** from this contract:

Permanent contraindications to PET/CT

- Patients who are pregnant or breastfeeding
- Patients who weigh >180kg
- Patient body habitus above scanner dimensions – GE Scanner Bore Diameter 70cm, Philips Scanner Bore Diameter 80cm, Siemens Scanner Bore Diameter 90cm.
- NHS patients who have medical contraindications to the Tracer to be administered

Temporary contraindications to PET/CT

- Inability to cooperate with the scan process
- Blood Glucose Level outside ARSAC certificate holder's accepted limits, usually 4-10 mmol/L
- Chemotherapy/Radiotherapy outside recommended limits:
Chemotherapy - usually 2 week delay for mid-treatment assessment and 4-6 week delay for end of treatment assessment (local variations for certain indications)
Radiotherapy – usually 3 month delay for response assessment although shorter delays may be approved by the ARSAC certificate holder for assessment of areas outside of the radiotherapy field
- NHS patients who are medically unfit to undergo the scan

Other Procedures

- For non-oncology and non-FDG referrals, please discuss with your ARSAC certificate holder
- For paediatric referrals, please refer to our Paediatric Policy
- Research projects and private patients will need to be discussed on a case by case basis and agreed prior to commencement with NHSE and AML. Please contact your ARSAC certificate holder in the first instance.

What is the process for referring electronically?

Alliance Medical will offer the latest web-based RIS and PACS technology that provides fully flexible local and central functionality (bookings, reporting, referring physician's portal), while embracing information governance principles. Key components include:

- Web facing portals (commissioners, referrers)
- Automated communications (SMS, e-mail) to patients
- Integrated and web-based RMS(RIS) and PACS
- Replicated dual data centres
- Integrated voice recognition with roaming profiles
- Interfaced PET/CT fusion module (Mirada's XD3)
- Advanced workflow engine

To enable receipt of electronic referrals (which significantly enhances audit integrity and data completeness), Alliance Medical will work with each respective Trust RIS, to facilitate the creation of an HL7 interface, ensure provision of an end-to-end IM&T solution, and allow for full order comms from referring physician to the Alliance Medical booking team. This referral route allows for enhanced information and clinical governance, and improved turnaround times.

Additionally a referral portal will be created allowing:

- Known referrers to login to the Alliance Medical integrated web portal;
- The use of agreed, relevant forms to ensure the minimum data set must be completed; and
- The tracking of patient's appointments and ultimately receipt of the clinical report.

How are the patients booked?

Alliance Medical has introduced a web-based RMS(RIS)-PACS to improve visibility of patient flow, provide an electronic tool for ARSAC authorisation, allow for integrated e-referrals, accommodate local bookings, reduce downtime, improve turnaround times (TAT) and improve radiologist reporting ability (including jump points).

Experienced Patient Management Centre (PMC) staff call each patient to discuss their proposed procedure. The system ensures patients are offered a choice of appointment, date and time at the patient's convenience, and as appropriate a choice of location (agreed with ARSAC certificate holders). It provides seamless access to patient literature, 'out of hours' contact details and 'reminder' communications. Optimised PET specific workflows, including offering provisional bookings prior to ARSAC approval to reduce the overall processing time, have also been implemented.

Where Alliance Medical staff are unable to speak to a patient on the first attempted call, the PMC operates extended opening hours ensuring contact can be made. Further escalation procedures are in place in the event of being unable to contact the patient by phone – these typically involve liaising with the ARSAC certificate holder, or as necessary the referring clinician.

Each patient is emailed and/or posted an information pack confirming their appointment time, location and providing contact details should they have further questions. Electronic invites can be sent upon request.

All patient referrals are actively monitored from the point of referral to the completion of a validated diagnostic report. The RMS improves TAT management and patient experience by generating standard reports, showing both performance and exceptions. These reports flag occasions that could result in increased TATs. The PMC monitor these reports, identifying available slots on the same day, and where appropriate using the web-enabled ordering system will gain remote ARSAC authorisation and trigger ordering of the isotope. Alliance Medical's integrated supply chain acknowledges the order electronically, confirming the booking with PMC.

What is the expected turnaround time from authorised referral to report?

Alliance Medical is committed to the safe and appropriate reduction of turnaround times where clinically appropriate. Alliance Medical commits to seven day turnaround for 100% of reports from contract inception, where clinically appropriate, and to improve turnaround performance to be within five working days by year 3 of the contract for 75% of reports. Achieved by:

- The implementation of optimised PET specific workflows including provisional bookings prior to ARSAC approval reducing the overall processing time;
- The introduction of static facilities offering increased capacity and more patient choice, thus reducing variation in time between booking and scanning;
- The refinement of processes based on Year 1 and 2 experience and Clinical System optimisation, thus reducing overall processing time; and
- Reducing reporting TAT from 48 hours on average to 36 hours on average through flexible reporting practices and capacity management.

What radiopharmaceuticals are included under the contract?

Alliance Medical will guarantee the primary and back-up supply of FDG, FEC and Na-F for all sites from fully vertically integrated, Alliance Medical operated and owned cyclotron radiopharmacies. This will provide patients and clinicians with a cost effective and secure supply of the appropriate radiotracer for their scan, over the life of the contract.

We will agree with each site what their specific requirements are as the clinical indications may be different between populations.

What happens for non-English speaking patients?

Any special requirements, such as the need for translation services, should be indicated on the referral form by the referring clinician.

Alliance Medical has enlisted the services of a professional translation agency. The availability of the professional translation agency enables the PMC team to successfully arrange the PET/CT scans of non-English speaking patients, whilst also ensuring the patient receives all the relevant safety checks and is provided with the appropriate information required. Alliance Medical will also continue to link with each host Trust's language services, ensuring patient continuity.

Patient guides are also available in the following languages (other languages are available on request):

Arabic, Bengali, Chinese, Gujarati, Hindi, Polish, Punjabi and Urdu.

At the time of arranging the appointment, each patient will be asked if they have a relative/friend who they would be happy to accompany them for their PET/CT scan and provide translation. If they are not happy for a relative/friend to accompany them, an interpreter will be arranged to assist on the day.

Is information available for visually impaired patients?

Yes. Patient literature is available in Braille format.

Again, any special requirements or disabilities should be indicated on the referral form by the referring clinician.

What if patients are hard of hearing?

At the time of arranging the appointment, the patient will be asked if they have a relative/friend who could be spoken with on their behalf to book the appointment. A letter is also sent outlining the procedure and asking the patient to contact us to confirm receipt and understanding. The referrer is informed if there has been any difficulty in booking the patient and they are also asked to provide details for a next of kin with whom we could communicate the appointment details.

Any special requirements or disabilities should be indicated on the referral form by the referring clinician.

What happens if the patient is unable to proceed to scan?

Alliance Medical will notify the referring clinician in the event that we are unable to appoint their patient for the PET/CT scan, along with the reasons for our inability to proceed. If requested, Alliance Medical will return the referral form back to the referring clinician.

What happens if there is a breakdown?

Alliance Medical has in place full scanner service and breakdown cover ensuring any breakdowns are dealt with quickly and efficiently. In most cases we can arrange for repairs during the day. Alliance Medical also operates a 24 hour FDG supply management process to ensure that any failures in supply are dealt with as soon as these occur and that alternative Alliance Medical facilities are engaged to deliver FDG. We will do all that we can to minimise the disruption to your patients. Where possible we will utilise back up mobile scanners or provide access to alternative Alliance Medical fixed-site facilities should the situation require.

There is a full and continuous Preventative Maintenance Service (PMS) programme covering all scanners. Where possible PMS is carried out during unscheduled days / time but this is not always possible so PMS may take place during a scheduled service day.

What is the process once the patient is scanned - where do the images go?

Image transfer from scanners to Alliance Medical central PACS will utilise the N3 network where possible. If unavailable, Alliance Medical will utilise alternative internal networks (all 256-AES encryption standard), such as MPLS/ADSL, with portable media being a back-up solution.

At static sites, image transfer to reporting workstations will be automated and be direct from the local Alliance Medical PACS (firewall to firewall interface may be required). Where images are acquired on a mobile unit, they will be pushed to reporting workstations by the Case Management team.

Personalised reporting worklists, structured report templates and voice recognition (including jump points and canned text) will be provided on the Alliance Medical PACS. Reporting will mainly be performed on an Alliance Medical supplied workstation locally.

The Alliance Medical PACS is provided by Intelrad. The client used by Radiologists is IntelViewer. Integrated VR is provided by M*Modal. PET/CT image fusion and assessment will be provided by Mirada Medical's XD3, a plug-in which may be launched from within the PACS with the current patient in context. The Alliance Medical PACS has the proven capability to distribute images to remote reporters to support Trusts where there are capacity limitations.

What reporting clinicians will Alliance Medical be using to report the scans?

We are using a number of UK based Radiologists and Nuclear Medicine Consultants, based locally to the host site where possible. This ensures effective working and communication between reporters, referrers and MDTs. All clinicians are registered with the GMC and are on the Specialist Register for Clinical Radiology.

Alliance Medical recognises, nonetheless, that the provision of a broader reporting solution to cover periods when local reporters are not available or where supplementary capacity is required is absolutely necessary for a resilient, patient-focused service. Integral to maintaining best practice in the delivery of the services, Alliance Medical has partnered with The Christie NHS Foundation Trust to provide back-up contingency such as overflow reporting to support Trusts where there are capacity limitations. This resource will be available for each site at which PET/CT services are carried out.

All reporters are available for conferral with radiographic staff and referring clinicians. Whenever possible, reporting clinicians will participate in MDT meetings where PET/CT scans are discussed.

How do referring clinicians receive the completed reports and scan images and in what format?

Image transfer from the Alliance Medical central PACS to referring Trusts will be over N3, via a direct PACS to PACS interface or utilising the IEP. Images will be DICOM v3 compliant and will include the referring site's MRN and accession numbers (if supplied).

Reports will be made available via NHS.net, the referrer's portal and an HL7 interface (if applicable).

Is patient information sent in an encrypted format?

Yes. N3 connectivity provides a private network, not a secure network. Therefore all images are sent via VPN which is encrypted to current IP Sec AES256 Standard.

What quality assurance processes are in place?

The majority of reports are being undertaken by local reporters, and where applicable, these are double read. All reporters will be required to report a minimum 300 cases per year and the quality of their reporting will be monitored to ensure they meet the standard required.

In addition, there is a continuous programme of quality audit, whereby a minimum of 50, or 10% of each reporter's reports are independently audited. This data is reviewed internally and by the Clinical Guardian to the service.

How can a clinician become an ARSAC certificate holder for the service?

Alliance Medical welcomes the interest of clinicians who wish to be involved in the delivery of this important diagnostic modality.

It should be noted that there is no requirement for Radiologists whose only responsibility is the reporting of PET/CT scans to be ARSAC certificate holders. However, AML is fully committed to best practice in alignment with guidance issued by the Administration of Radioactive Substances Advisory Committee (ARSAC), and seeks to engage competent and eligible clinicians to support PET/CT services locally wherever possible in line with current guidance and the most practicable model.

If interest is expressed by experienced PET/CT reporters who wish to apply for an ARSAC certificate for a service provided by Alliance Medical, we will consider supporting the candidate in the application process.

Advice on training and experience needed by those who wish to apply for a certificate to administer radioactive medicinal products as required under the MARS Regulations can be found on the ARSAC website: www.arsac.org.uk

Will Alliance Medical provide training to new and existing NHS staff to deliver PET/CT services?

Yes. Alliance Medical is committed to improving the delivery of PET/CT services and improving understanding among all clinicians with whom we work through regular sharing of knowledge and best practice.

As part of the Molecular Imaging Collaborative Network, Alliance Medical and The Christie NHS Foundation Trust have developed a School of Oncology, which aims to be the UK leading provider of cancer education. This organisation is the first of its kind in the UK and will provide training and education to patient-facing staff, as well as support staff to enhance expertise and improve the quality of patient care.

How do patients, clinicians or RHSB's provide formal feedback or constructive criticism on the service?

All formally-advised issues are registered on a schedule which is shared regularly with NHS England. Learning from such issues and adapting processes is a formal part of the contract service review.

All formally-advised issues are acknowledged within 2 days, with a considered response provided within 20 working days. If the latter is not possible, then you will be advised of the status of the enquiry and the likely response time. Issues should be sent to the address below:

Customer Care Co-ordinator
Alliance Medical Limited
Iceni Centre
Warwick Technology Park
Warwick CV34 6DA

Tel: 01926 482063

E-mail: customercare@alliance.co.uk

Patient Satisfaction Survey

As agreed with NHS England, at least 10% of patients are given a Patient Satisfaction Survey (PSS) to complete on the day of their appointment. All patients have the opportunity to access the PSS via the website www.alliancemedical.co.uk

Clinician Satisfaction Survey

All clinicians have the opportunity to access a Clinician Satisfaction Survey (CSS) via the website www.alliancemedical.co.uk. In addition, new referrers and random selections of referring clinicians are included in a monthly posting of the CSS.

As a private provider, will your shareholders be receiving a massive dividend as a result of this contract win?

We will announce any financial results in line with regular financial reporting, but what we can say is that we estimate that our investment into these services over the course of the contract will be approximately £80 million. This is a demonstration of our support for NHS England's objective to optimise equity in patient access and reduce geographical variability in the quality of PET/CT infrastructures.

Is Alliance Medical creating a monopoly in the provision of PET/CT services?

No – 50% of the total number of scans carried out in England will continue to be provided by organisations outside of this procurement. Moreover, a number of organisations who have a history of delivering safe, high quality PET/CT services will continue to do so as part of the delivery of this contract, for example University Hospitals Coventry & Warwickshire NHS Trust, and Cobalt.

Doesn't Alliance Medical's significant presence in isotope production risk destabilising PET/CT services?

No, in fact quite the opposite. Alliance Medical's portfolio of cyclotrons and radiopharmacies provide clinicians with a cost effective and secure supply of appropriate radiotracers for scans, with a guaranteed back up supply. This means that in the event that production issue occurs at one of the sites, we are able to switch production to another facility without any disruption to service provision.

Does this contract replace existing PET/CT services?

The existing PET/CT North and PET/CT South contracts expire at the end of March 2015. As a result, the NHS Strategic Projects Team has, on behalf of NHS England, been managing the process for the procurement of PET/CT services across England, amounting to c50% of the total volume of PET/CT scans carried out annually. In essence, this replaces both the PET/CT North and South contracts.

Alliance Medical was invited to bid for four Lots which essentially divided the country into distinct geographies in which PET/CT services have been delivered. These were (i) North West (ii) North East, Yorkshire and the Humber (iii) Birmingham, East Midlands and East Anglia (iv) South and South West.

Alliance Medical developed a collaborative network that included the sites at which services will be delivered as well as The Christie NHS Foundation Trust and leading academic institutions, recognising the value that bringing this expertise together has on patients. This network not only offers PET/CT scanning services but also, through The Christie School of Oncology, training and development for clinical teams delivering PET/CT services.

When does the contract go live?

Contract commencement dates at individual sites will be phased during 2015 and proposed dates are as follows:

Lot 1 - North West: Liverpool, Stoke-on-Trent and Wirral

To commence 1st April 2015

Lot 2 - North East, Yorkshire and the Humber: Bradford, Carlisle, Hull, Leeds, Lincoln, Middlesbrough, Newcastle and Sheffield

To commence 1st April 2015, with the exception of Lincoln which will commence on 1st June 2015

Lot 3 - Birmingham, East Midlands and East Anglia: Birmingham, Cambridge, Colchester, Coventry, Leicester, Northampton, Norwich and South Essex

To commence 1st August 2015, with the exception of Birmingham and Coventry which will commence on 1st April 2015

Lot 4 - South and South West: Bath, Bristol, Canterbury, Cheltenham, Maidstone, Poole, Portsmouth, Plymouth, Southampton, Taunton and Truro

To commence 1st December 2015, with the exception of Cheltenham which will commence on 1st April 2015, dates for Bristol and Bath are still to be confirmed

What will happen to the patients currently referred to existing PET/CT locations?

Alliance Medical will work closely with all stakeholders to deliver a safe, high quality service at the point at which we take over responsibility for the service, and to ensure services to patients will not be disrupted.

Who do I contact if I want to discuss the service and day-to-day issues?

Each Lot and location has been assigned a day-to-day point of contact and Director-level Sponsor. In the first instance, please contact:

Lot 1 - North West

Liverpool, Stoke-on-Trent and Wirral:

Julie Armstrong

Mobile: 07717 203419

E-mail: jarmstrong@alliance.co.uk

Lot 2 - North East, Yorkshire and the Humber

Bradford, Carlisle, Hull, Leeds, Lincoln, Middlesbrough, Newcastle and Sheffield:

Julie Armstrong

Mobile: 07717 203419

E-mail: jarmstrong@alliance.co.uk

Lot 3 - Birmingham, East Midlands and East Anglia

Cambridge, Colchester, Leicester, Northampton, Norwich and South Essex:

Mike Saunders

Mobile: 07799 380202

E-mail: msaunders@alliance.co.uk

Birmingham and Coventry:

Julie Armstrong

Mobile: 07717 203419

E-mail: jarmstrong@alliance.co.uk

Lot 4 - South and South West

Bath, Bristol, Canterbury, Maidstone, Poole, Portsmouth, Plymouth, Southampton, Taunton and Truro:

Lisa Savage

Mobile: 07876 283 699

E-mail: lsavage@alliance.co.uk

Cobalt (Cheltenham):

Julie Armstrong

Mobile: 07717 203419

E-mail: jarmstrong@alliance.co.uk

Referrals, Triage, Patient Bookings, Receipt of Reports

If you have any queries regarding the processing of your referrals, in the first instance please call or write to the address below to contact a member of the PET/CT team at our PMC:

PET/CT Team

Patient Management Centre

Alliance Medical Limited

Iceni Centre, Warwick Technology Park, Warwick CV34 6DA

PET/CT team Telephone: 0845 045 0103

Fax: 01926 482148

E-mail: pet@alliance.co.uk