



# Musculoskeletal (MSK) Transformation Programme

## Overview

- ▶ Musculoskeletal (MSK) services treat conditions which affect the joints, bones and muscles, as well as rarer autoimmune diseases and back pain.
- ▶ The MSK Transformation Programme is about strengthening community provision over the next five years to improve the care that people receive.
- ▶ Our community MSK services include a range of specialisms which are delivered by a number of providers who have different ways of referring patients and running their services.
- ▶ By simplifying the referral process, and enabling our highly skilled teams across these services to work in a more joined up model, we can improve the patient experience and ensure people can access and move through and between our MSK services more smoothly.

## Key Data

- ▶ This programme will be delivered in three phases over five years and includes therapies, rheumatology, pain management, and closer working with mental health services.
- ▶ It will see a new clinically designed model of care to improve care for our patients. This means:
  - If a patient requires our services a referral will be made through a single point of access.
  - Referrals will then be (electronically) clinically triaged and allocated to the appropriate team / clinician.
  - Patients will then be referred for the appropriate level of care.
- ▶ We are not proposing to reduce services or limit the treatment options available.
- ▶ This work is being taken forward as a system, including: Shropshire Community Health NHS Trust; Robert Jones and Agnes Hunt NHS Foundation Trust; Shrewsbury and Telford Hospital NHS Trust (SaTH); Shropshire, Telford and Wrekin Clinical Commissioning Group (CCG).
- ▶ The programme only includes patients referred by GPs or Consultants within Shropshire, Telford and Wrekin.
- ▶ In our recent patient survey, patients across all treatment streams agreed that the proposed changes would deliver an improved experience.

## Next Steps

- ▶ The programme has temporarily slowed so that staff can focus on responding to the increasing pressures on services due to winter and COVID.
- ▶ Continue with the clinical governance arrangements and planning for the system-wide Electronic Patient Record system.
- ▶ Develop an operational plan for each Trust and agree the initial workforce needed.
- ▶ Set out a system approach to address the current waiting lists.
- ▶ Share the results of the patient survey with patients and staff and embed the learning.
- ▶ Continue work to improve the Rheumatology service, including direct engagement with patients.





# Reasons for change

- In line with the rest of the country, our services are under huge pressure due to staff shortages and record levels of demand.
- Dealing with the pandemic has impacted the amount of planned care the NHS has been able to provide. Estimates suggest over 10 million patients did not come forward for treatment when they may have needed it during the pandemic.
- The population of Shropshire, Telford and Wrekin is ageing and more people are living with long term conditions.
- Musculoskeletal (MSK) conditions account for 30 per cent of GP consultations in England. Low back and neck pain are the greatest cause of years lost to disability in the UK, with chronic joint pain or osteoarthritis affecting more than 8.75 million people in the UK.
- We have looked at patterns across a person's journey in MSK services and found that some people need care and treatment from multiple services, for example orthopaedics and physiotherapy, which have different ways of referring people, recording information, and running their services. This has led to people's experiences being different depending on how and where they access services, with individuals and staff often feeling frustrated by the time it takes for information to be passed from one service to another, resulting in delays to care and treatment.
- Often a person is referred back to their GP to make a further referral rather than the services working together and communicating to ensure their needs are met. This is inefficient in terms of waiting time, capacity and cost for both the NHS and the individual.
- The current model of delivery is unsustainable for the future and we are unlikely to be able to afford future demand for services if they continue to be delivered in the current way.





# Patient feedback

- ▶ To help shape the transformation of our Musculoskeletal services in Shropshire, Telford and Wrekin, we asked people who have used the services to share their experiences and their views about what they will look like in the future.
- ▶ The feedback we received from our survey and outreach captured what was good about the services and identified opportunities where things could be improved.
- ▶ People's responses strongly reflected their positive views of our staff and how they were treated. They told us that they felt respected and listened to when they are undergoing treatment and felt involved in making decisions about their care.
- ▶ The findings from the survey also suggest areas where we might be able to make improvements. These include: reducing the time between referral to treatment; providing more joined-up care; ensuring people have access to advice when they need it; and timely communications to patients.
- ▶ Views about the future service model were positive. People agreed that a single referral process, multi-disciplinary triage teams, closer working between services and earlier therapy intervention will all help to deliver a better experience.
- ▶ The feedback received through our community outreach engagement and CCG PALs process reflects the feedback we have received in the survey.
- ▶ We are undertaking some specific engagement with our rheumatology patients. This will help us to better understand their experiences, share changes that have been made to improve the service since the survey, check the impact of those changes and together identify what else we can do.





# Phases of the programme

## Phase 1 (Year 1)

- We are working as a system to develop a more joined up model for our MSK services to improve people's experience and service quality. This will include therapies, rheumatology, pain services and closer working with mental health teams.
- We will introduce a Referral Centre which will be the single point of access for all referrals and general enquiries across the county. This will provide a clear entry route into the service where a team of specialists will assess and diagnose every person so that they are signposted to the most appropriate treatment, when it's needed, to reduce waiting times for first appointments.
- People will be better supported to manage their own conditions through access to advice and therapies and we will reduce or prevent people's need for surgery with earlier therapy intervention.
- All our staff will have access to a virtual MSK multi-disciplinary team to provide advice and mentoring so that they can support people living with MSK conditions with the most appropriate care and information.
- We will deliver a strengthened rheumatology service built on best practice, reducing inequalities in service provision and improving our rheumatology helpline.
- The future service will make better use of digital solutions.





# Phases of the programme

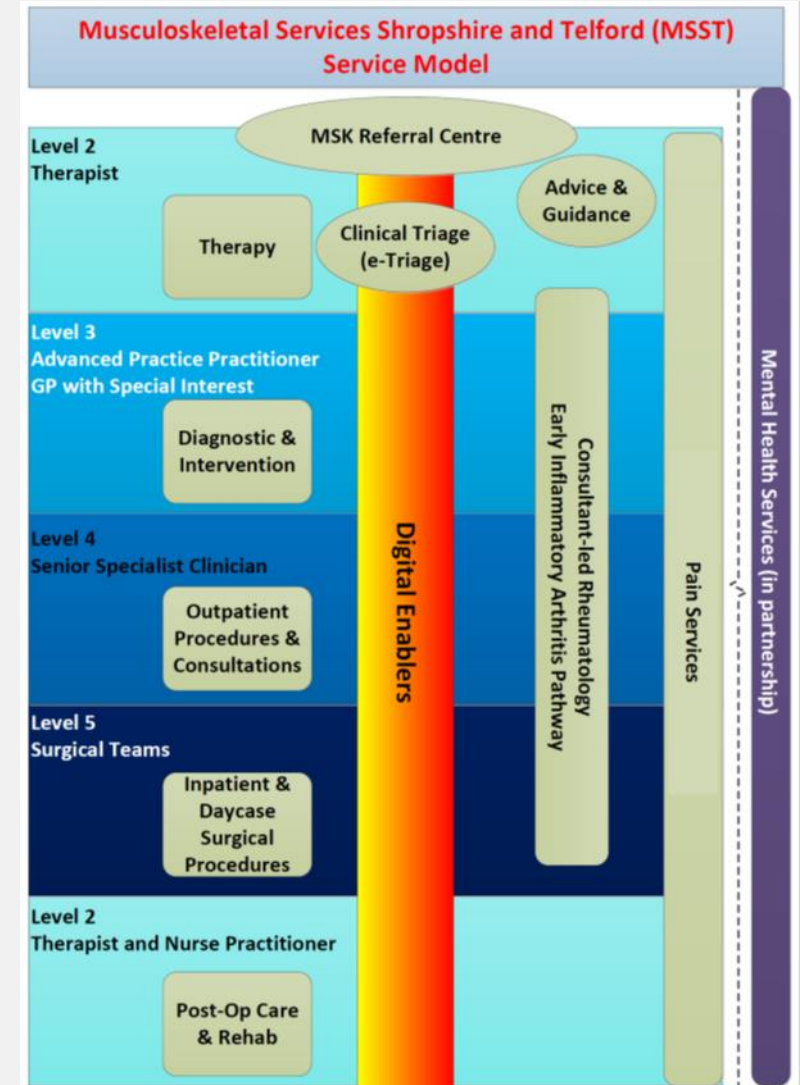
## Phase 2 (Year 2 to 3)

- Enhance our orthopaedics services
- An outpatients improvement project
- Strengthen the support available for Primary Care
- Potential work to focus on falls, fractures and osteoporosis

## Phase 3 (Year 4 to 5)

- A focus on the support for people with long term MSK conditions
- Develop self-management models

## The new model:





# Benefits

- ▶ A more joined up MSK model across Shropshire, Telford and Wrekin.
- ▶ One referral pathway and point of advice and guidance for referrers and people.
- ▶ People can be referred into the service at any point of their condition.
- ▶ Oversight of all our MSK patients so we can spot inequalities or issues that need addressing.
- ▶ A triage team made up of different specialists so people are directed to the right service first time.
- ▶ Shared patient information for smoother transfers between services.
- ▶ Equal access to MSK services for everyone across the whole county.
- ▶ People better supported to manage their own conditions through self-care.
- ▶ People have access to earlier therapy support.
- ▶ A workforce able to work more closely with different specialists and provide more holistic support to people.





# What's happened so far

- ▶ Work to transform MSK started in January 2020 following approval for the development of a MSK Alliance.
- ▶ The MSK Alliance is now known as the MSK Transformation Programme.
- ▶ The work is being taken forward through various groups made up of representatives from clinical and operational teams supported by Finance, HR, Estates and Digital services.
- ▶ We have started with phase 1, where we will be testing a new model of care which places greater emphasis on earlier therapy intervention to reduce or prevent the need for surgery.
- ▶ Work has been undertaken to understand and set out what is needed for the referral centre, and the therapy and triage services, considering the demand and capacity for the service, staffing need, operational hours, and the digital systems.
- ▶ We have been working with our Healthwatch colleagues and patient representatives so that the views and experiences of people using our services shape the programme.





# Road Map

