

Buckinghamshire Integrated Musculoskeletal Service



Building an innovative, sustainable
& safe solution for all

What is MSK

- musculoskeletal: muscles and bones, including
 - Orthopaedics: treating bones and joints
 - Rheumatology: inflammation of bones and joints
 - Pain management

- ‘musculoskeletal’ is often abbreviated to ‘MSK’

Context

- The population of Bucks is 510,000 and growing;
- 9000 patients require musculoskeletal care in hospitals each year
 - Day case and inpatients (figure above does not include outpatient appointments)
- GPs refer 3500-4000 patients/month to Buck's musculoskeletal services
- This is forecast to increase by 16% over the next 5 years;
- We have a duty to ensure value for money and quality of care

Context

Existing service Buckinghamshire Musculoskeletal Integrated Care Service: 'MuSIC'

- Provided by CARE UK
- Commenced July 2011
- An integrated clinical assessment and treatment service for people with MSK complaints
- Multidisciplinary service
- Diagnostics and onward referral to secondary care

A review by commissioners of Musculoskeletal (MSK) care began with engagement to seek opinion of service users in Autumn 2014. Consistent themes emerged from feedback:

“2 ultrasounds were wasted when an MRI scan ordered by the surgeon I eventually saw immediately revealed the problem. ”

“..sent to incorrect specialist”

“I want a say in the treatment I can have, rather being told.”

“I think my injury would have healed sooner had there been a proper aftercare plan.”

“I wasn't sure who to contact during my pathway of care if I had questions I had forgotten to ask at my appointment”

“I had to go back to my GP for a blood test; surely the clinic could have done this?”

“The referral process took too long”

“I had to go back to my GP when the same pain returned, rather than being able to book another Physio appointment”

“I felt I was passed from one organisation to the next and there was no continuity.”

Patients "Ping Pong"



Current service developments

- Single point of access
- Triage system following referral
- Integrated diagnostics
- Scope of the work of physiotherapists has been extended
 - IRMER trained and ordering diagnostics
 - injecting under a patient group directive (PGD)
- Ultra sound guided injection (USGI) clinics
- Specialist hand and sports injury clinics

Bucks iMSK Alliance

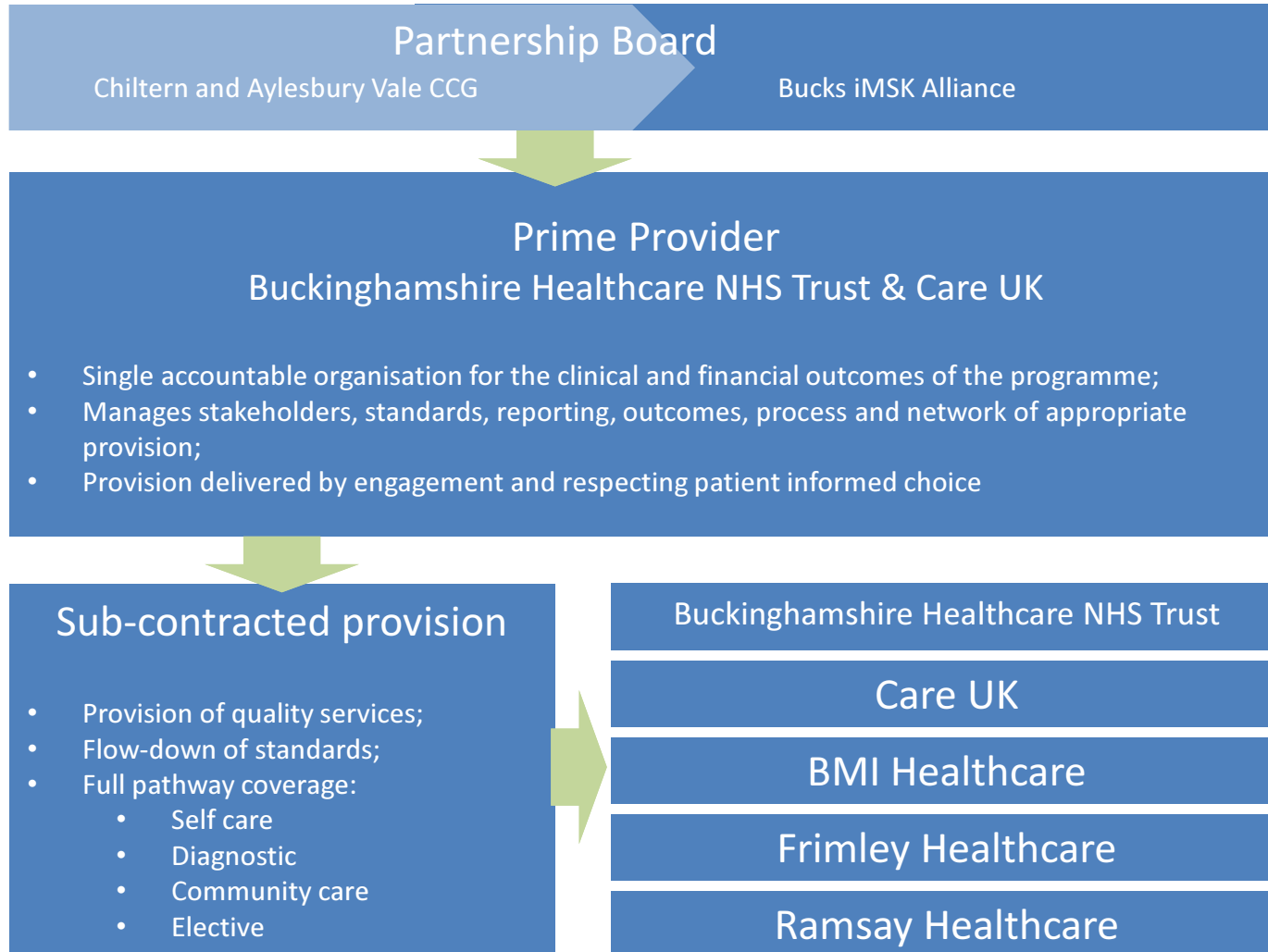


Buckinghamshire Healthcare
NHS Trust



Frimley Health 
NHS Foundation Trust





Long term aspirations for new service

- 1) Improved patient access to self-management advice and signposting
 - Patient portal / website
 - Education leaflets

- 2) Supported patient management in primary care
 - Evidence based GP clinical pathways
 - Education support to 'up-skill' GPs
 - Role for GPs with special interests in MSK
 - Dedicated GP liaison
 - Professional helpline
 - Improved referral form

Long term aspirations for new service

- 3) Self referral
- 4) Multidisciplinary triage for complex cases - right clinician, right time
- 5) Consultant led community clinics - 'One stop shop' ethos
- 6) 'Care navigator' role and patient helpline
- 7) Evidence based clinical pathways, with shared decision making
- 8) Care plans – personalised, enhanced
- 9) Green card system

How will we assess the success of the new service?

Desired outcome	measurement method	suggested metrics
Equitable access to resources and services delivered through a 'one stop shop' setting wherever clinically possible	Data monitoring	Friends and family test score. Patient questionnaire - Did you set goals? Were you supported to achieve them? Did you achieve them? If not, what would have helped you achieve them? VAS score pre and post treatment - did ADLs improve?
Patients with MSK conditions are supported to achieve their jointly agreed goals	Patient engagement	Number of hot clinics, self referral offered, number of one stop clinics offered
Patients do not experience boundaries between parts of the MSK service during their journey along their care pathway	Staff engagement	Care navigator for every patient, appropriate re-referral and open access to return with re-occurring condition
MSK staff and GPs thrive in a culture that is supportive and rich in positivity which allows them to be proactively engaged in the service benefit of the service to patients	Staff engagement	Staff satisfaction survey results, GP satisfaction survey, training and education plan for staff, primary care GPs observing iMSK clinics, GP education programme, 100% PDPs completed
In the final year of the contract it will be apparent that the MSK service has been constantly developed by the prime provider and an ethos of consistent innovation and improvement is evident.	Annual service delivery plan	Self referral, patient portal, patient website, GP pathways, sharing of images, patient held care record, pocket physio, patients fully engaged in recovery following procedure, multi-disciplinary triage, group support sessions, pre op earlier in the pathway

Patients as Partners



