
Report To: Inverclyde Integration Joint Board **Date:** 11 September 2018

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Inverclyde Health and Social Care
Partnership (HSCP) **Report No:** IJB/42/2018/AS

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Subject: NHS GG&C MUSCULOSKELETAL (MSK) PHYSIOTHERAPY
ANNUAL REPORT 2017/18 FOR INVERCLYDE HEALTH &
SOCIAL CARE PARTNERSHIP

1.0 PURPOSE

- 1.1 The purpose of this report is to provide the Health and Social Care Committee members with the summary of NHS GG&C Musculoskeletal (MSK) Physiotherapy Service Annual Report 2017/18 for Inverclyde Health & Social Care Partnership.

2.0 SUMMARY

- 2.1 The NHSGGC MSK Physiotherapy Service is hosted by West Dunbartonshire Health & Social Care Partnership (HSCP) on behalf of all Partnerships and the Acute Service Division of NHSGGC.
- 2.2 In April 2017 the Service had 12,223 patients waiting more than 4 weeks on the waiting list, of whom 687 resided in Inverclyde. By March 2018 this had reduced to 10,177 patients waiting, of which 595 were from Inverclyde.
- 2.3 In 2017/18 the longest a patient waited for a routine appointment in NHS GG&C was 31 weeks in May 2017 (excluding periods of unavailability). By March 2018 this wait had reduced to 20 weeks.
- 2.4 Waiting times continue to be the major challenge for the MSK Physiotherapy Service and will remain a focus for the senior management team in West Dunbartonshire with a service review with the new NHSGG&C AHP Director and National MSK Lead ensuring a safe, efficient and effective service.

3.0 RECOMMENDATIONS

- 3.1 The Integration Joint Board is asked to note the contents of the MSK service (hosted by West Dunbartonshire HSCP) with 6% of Inverclyde patients exceeding the 4 week waiting time.

4.0 BACKGROUND

- 4.1 The NHSGGC MSK Physiotherapy Service is hosted by West Dunbartonshire Health & Social Care Partnership (HSCP) on behalf of all Partnerships and the Acute Service Division of NHSGGC. The MSK Physiotherapy Service Manager reports to the Chief Officer of West Dunbartonshire HSCP and the Service is included within their development plans and governance structures.
- 4.2 Musculoskeletal (MSK) conditions affect bones, joints, muscles and tendons and interfere with people's ability to carry out their normal activities. MSK Physiotherapists are highly skilled in assessing and treating people with physical problems caused by accidents, ageing, disease or disability.

They aim to:

- Totally relieve or reduce pain
 - Provide strategies to manage injuries or conditions
 - Help patients recover quicker and return to normal activities
 - Help prevent future injuries
 - Assist patients to achieve their goals
 - Improve flexibility, muscle strength and quality of movement
- 4.3 Across NHSGGC the number of referrals received from all sources has dropped during 2017/18 from 76,467 referrals to 70,097. It is difficult to state exactly why this happened as there are several factors which could affect referral rates. Staffing numbers had reduced in 2016/17 and the maximum waiting times rose to an all-time high of 31 weeks for a routine appointment. As a result, some GPs and Consultants reported they were not referring as many patients as they would like but were encouraging patients to use information on the NHS Inform website.
- 4.4 In 2016 the Scottish Government introduced a target that 90% of patients referred with a musculoskeletal problem would be seen within 4 weeks. This target remains a challenge across the whole of Scotland. Analysis of the national report from March 2018 shows services are ranging from 23.1% seen within 4 weeks to one Board at 92.1%. The average for Scotland was 48.4%, with NHSGGC at 46.5% seen within 4 weeks.
- 4.5 In April 2017 the Service had 12,223 patients waiting more than 4 weeks on the waiting list, of whom 687 resided in Inverclyde. By March 2018 this had reduced to 10,177 patients waiting, of which 595 were from Inverclyde.
- 4.6 In 2016 the Scottish Government introduced a target that 90% of patients referred with a musculoskeletal problem would be seen within 4 weeks. This target remains a challenge across the whole of Scotland. Analysis of the national report from March 2018 shows services are ranging from 23.1% seen within 4 weeks to one Board at 92.1%. The average for Scotland was 48.4%, with NHSGGC at 46.5% seen within 4 weeks.

The longest wait is recorded on a monthly basis across the whole service as the waiting times are monitored to ensure equity across the service. In 2017/18 the longest a patient waited for a routine appointment was 31 weeks in May 2017 (excluding periods of unavailability). By March 2018 this wait had reduced to 20 weeks.

- 4.7 During 2017/18 the Did Not Attend rate for new patients for the whole service was averaging 7.5% per month. Text reminders are sent to all new patients with details of their appointment and asking them to call if they are unable to attend.

Within Inverclyde the new patient DNA rate was slightly higher than average at 10.5% (down from 14% in 16/17). In total, 435 new appointments were not utilised in

Inverclyde during 2017/18 and could have been offered to patients on the waiting list if we had been informed that they were no longer required or patients cancelled with enough notice to refill the appointment.

- 4.8 The MSK Physiotherapy Service received a budget allocation for 2017/18 of £5.975m which reflected approved savings of £0.342m. The actual expenditure for 2017/18 was £5.858m.

5.0 IMPLICATIONS

FINANCE

5.1 Financial Implications:

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments

LEGAL

- 5.2 There are no legal implications in respect of this report.

HUMAN RESOURCES

- 5.3 There are no human resources implications in respect of this report at this time.

EQUALITIES

- 5.4 There are no equality issues within this report.

Has an Equality Impact Assessment been carried out?

	YES (see attached appendix)
√	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

6.0 CONSULTATION

- 6.1 This report has been prepared by the Chief Officer, Inverclyde Health and Social Care Partnership (HSCP) after due consultation with relevant senior officers in the HSCP and partners, and a full programme of ongoing engagement and consultation with

service users, carers, the public, staff and providers.

7.0 LIST OF BACKGROUND PAPERS

7.1 Inverclyde HSCP Adult Learning Disability Strategic Review 2016 - 2020.

**NHSGGC
Musculoskeletal (MSK)
Physiotherapy Service**



**MUSCLE
OR JOINT
PROBLEMS?**

**Annual Report 2017/18
For
Inverclyde Health & Social
Care Partnership**

Foreword

Musculoskeletal (MSK) disorders continue to be the leading cause of time off work for sickness worldwide. MSK conditions range from those that arise suddenly and are short lived, such as fractures and sprains; to lifelong conditions associated with on-going pain and disability.

MSK conditions significantly limit mobility and dexterity, leading to early retirement from work, reduced accumulated wealth and reduced ability to participate in social roles. These conditions are the second largest contributor to disability worldwide with low back pain being the single leading cause of disability globally.

MSK Physiotherapists have expertise in the assessment, treatment and prevention of muscle and joint conditions. They employ advanced clinical assessment and diagnosis methods and have been trained in a broad range of treatment techniques to help patients recover and return to normal activities. They also have a vital role in preventing ill health, maintaining mobility and encouraging older patients to remain active, thus contributing to falls prevention.

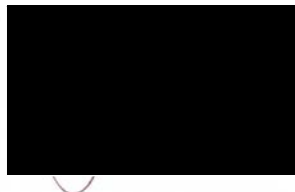
This report details the activities of the Musculoskeletal Physiotherapy Service with respect to residents of Inverclyde and across the NHS Greater Glasgow & Clyde (NHSGGC) area as a whole.

We started 2017/18 with significantly high waiting times for a routine appointment and have worked extremely hard to reduce this wait whilst still maintaining high quality, evidence based care. We continue to seek opportunities to improve efficiency whilst maintaining a safe and effective service.



Janice Miller

MSK Physiotherapy Service Manager & Professional Lead (Partnerships)



Background

Musculoskeletal (MSK) conditions affect bones, joints, muscles and tendons and interfere with people's ability to carry out their normal activities. MSK Physiotherapists are highly skilled in assessing and treating people with physical problems caused by accidents, ageing, disease or disability.

They aim to:

- Totally relieve or reduce pain
- Provide strategies to manage injuries or conditions
- Help patients recover quicker and return to normal activities
- Help prevent future injuries
- Assist patients to achieve their goals
- Improve flexibility, muscle strength and quality of movement

The NHSGGC MSK Physiotherapy Service is hosted by West Dunbartonshire Health & Social Care Partnership (HSCP) on behalf of all Partnerships and the Acute Service Division of NHSGGC. The MSK Physiotherapy Service Manager reports to the Chief Officer of West Dunbartonshire HSCP; and the Service is included within their development plans and governance structures.

Our Vision: To offer expert diagnosis and intervention to maximise the potential of people with musculoskeletal (MSK) conditions, the most common cause of disability and work related absence in the UK.

Our key objectives are to:

- Provide an efficient, timely and equitable MSK service.
- Provide an effective MSK service.
- Provide a person centred MSK service.
- Ensure staff wellbeing within the MSK service.
- Provide a safe MSK service.
- Provide a creative and innovative service that will be responsive to current and future challenges.

The Service treats adults over the age of 14 and across NHSGGC received over 70,000 referrals in 2017/18 with over 142,000 return appointments.

The delivery of the service is divided into four geographical quadrants: South, East, West & Clyde. There are 36 sites across Glasgow & Clyde providing MSK Physiotherapy with three sites within the Inverclyde HSCP - Port Glasgow Health Centre, IRH and Greenock Health Centre.

Patient Care

In line with Scotland's Health and Social Care Standards, the MSK Physiotherapy Service is focused on improving people's experience of care.

We strive to ensure patients:

- Experience high quality care and support.
- Are fully involved in all decisions about their care and support.
- Have confidence in the people who support and care for them.
- Have confidence in the organisation providing their care and support.
- Experience a high quality environment.



Regular audits including our record cards and a yearly Consultation and Relational Empathy (CARE) Measure ensure quality of care.

Results from our record card audit are detailed below.

	2016	2017
Quantative results	94%	97%
Qualitative results	91.5%	94.3%

Our average CARE score for 2017 was 48.4 out of 50. This validated patient reported experience measure seeks feedback from our patients on their experience of the therapeutic interaction. The results demonstrate the empathy and interpersonal effectiveness of our excellent clinicians.

We continue to update and use our evidence based clinical pathways which we have established for over 90% of the conditions seen in MSK Physiotherapy. Regular case review sessions link into these pathways which include exit routes and onward escalation guidance if required. All back pain patients are assessed using a validated risk stratification tool to ensure they receive appropriate evidence based care that is safe and effective.

All treatment is based on current research, evidence and appropriate guidelines when available. We will routinely discuss a patient's general health and wellbeing, offering signposting to various health promotion resources including weight management, physical activity, smoking, mental health services, alcohol and employability services.

Developments in 17/18 saw our Patient Reported Outcome Measures (PROMs) included into our IT system to allow us to measure the impact of our physiotherapy interventions. We record pain, function, work status, age, body part, number of treatments, health improvement activity and discharge outcome. We are now finalising the reports from the system to allow us to analyse the information received.

In 2017/18 the MSK Physiotherapy Service received 12 complaints, of which 9 were resolved at the informal stage 1 level. Most of these complaints arise from patients expecting a specific form of treatment or to be seen urgently yet they do not fulfil our criteria for an urgent appointment. The other 3 complaints were all addressed through the formal route and all 3 were partially upheld. If there is any learning from a complaint it is shared at our extended management team meetings. All complaints are scrutinised through the West Dunbartonshire HSCP Clinical & Care Governance Group.

Staff and management receive many thank you cards and letters from patients expressing their appreciation for the care and treatment they have received. Letters this year included the following comments:



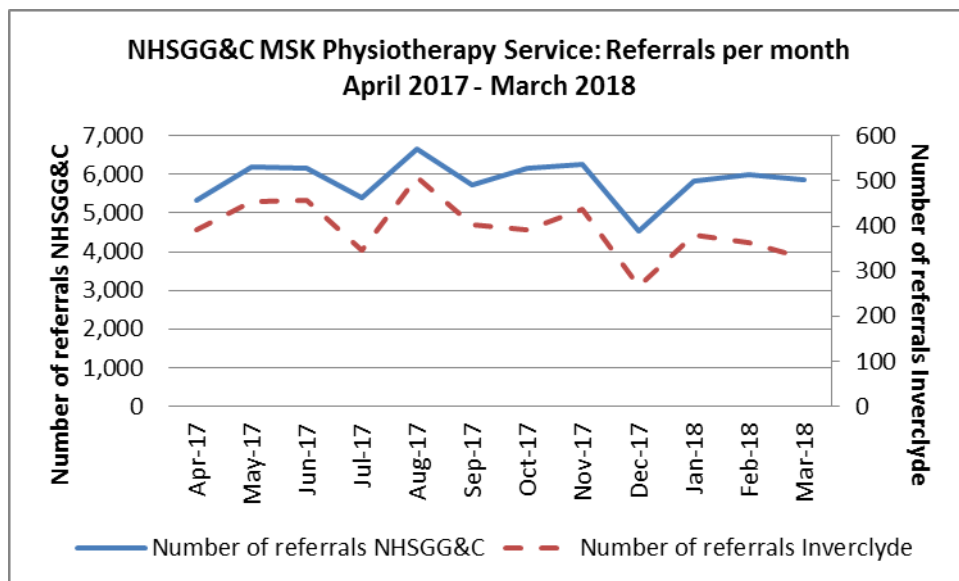
“The care that I have received is outstanding. I really appreciate that X took the time to understand what my goals for recovery were and tailored my treatment accordingly”

“I will never be able to thank X enough for what they did to help me and my family. X has shown a great deal of empathy, determination and genuine care with my case. She looked outside the box and used her experience, knowledge and instinct to diagnose what was debilitating me so badly. Most importantly she listened to me as an individual, a key skill often forgotten in today’s NHS”

Referrals to the Service

Patients can access MSK Physiotherapy via GP referral, self-referral or referral by another Health Care Professional. All referrals are logged onto our electronic system and vetted by a clinical member of staff to identify any clinical priorities. A small proportion of patients are phoned directly as they require an immediate appointment whilst the majority are sent a letter inviting them to call and book an appointment at a time and place suitable to the patient. They are usually offered the first available appointment within their local quadrant but many patients choose to wait for an appointment closest to home or work. Figure 1 below shows the number of referrals into the MSK Physiotherapy Service from across the NHSGGC area and from Inverclyde.

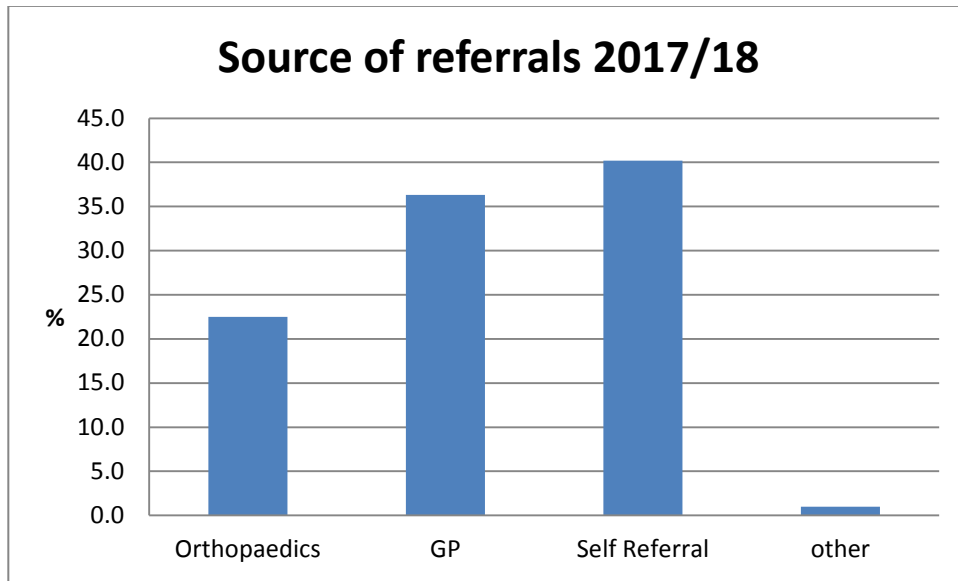
Figure 1



Across NHSGGC the number of referrals received from all sources has dropped during 2017/18 from 76,467 referrals to 70,097. It is difficult to state exactly why this happened as there are several factors which could affect referral rates. Staffing numbers had reduced in 2016/17 and the maximum waiting times rose to an all-time high of 31 weeks for a routine appointment. As a result, some GPs and Consultants reported they were not referring as many patients as they would like but were encouraging patients to use information on the NHS Inform website. Staff have also put a lot of work into supporting patients to manage their own conditions so this may also be reflected in the reduced number of referrals received.

Figure 2 shows the main referral sources into the MSK Physiotherapy Service. As mentioned above, referrals are mainly from GPs or patients referring themselves (usually on the back of a GP suggesting they refer if not resolving). The other main source of referrals is from Orthopaedics.

Figure 2



During 17/18 we worked closely with GPs to develop referral guidance which would clarify where MSK Physiotherapy would make the most impact. Other options for referrals and management were included based on the feedback from GPs.

Service Activity

In 2017/18 there were 54,116 new patient appointments available across the MSK Physiotherapy Service with respect to the NHSGGC area as a whole. Within the Inverclyde HSCP area, 4,167 appointments (7.7%) were available and patients from the area have accessed the service outwith the HSCP area. Figures 3 and 4 below show the new and return appointments available each month across the whole service, the variation is mainly due to periods of annual leave and public holidays.

Less than 3% of all appointments are outwith the HSCP area. These are predominantly at the RAH and Johnstone Health Centre, although Inverclyde residents are accessing the service across the whole of NHSGGC (possibly due to work or family commitments). Less than 3% of all Inverclyde

appointments are used by residents from outwith Inverclyde. Each month in the Inverclyde HSCP area there are between 250 and 450 new appointments, the variation due to the number of days in the month and staff on duty at any one time.

Figure 3

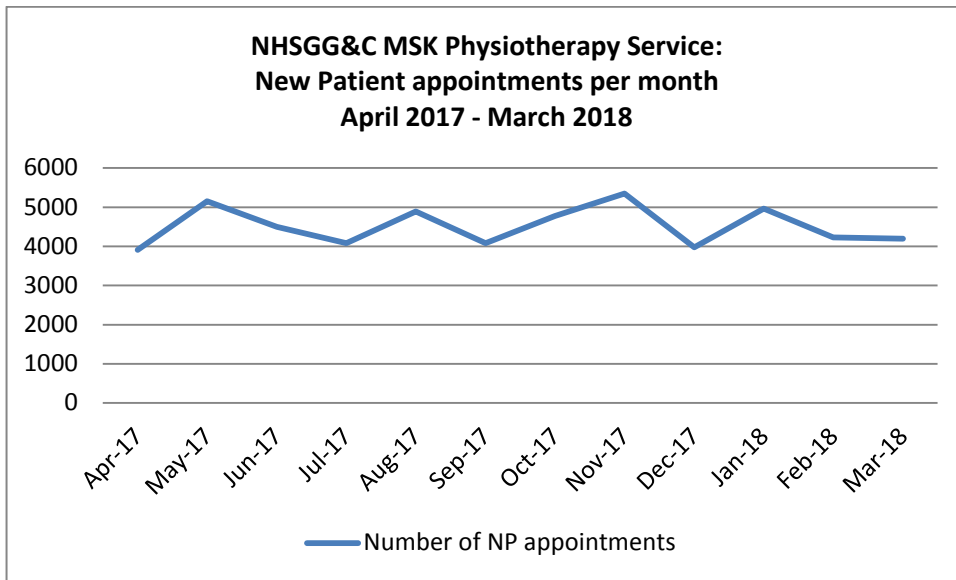
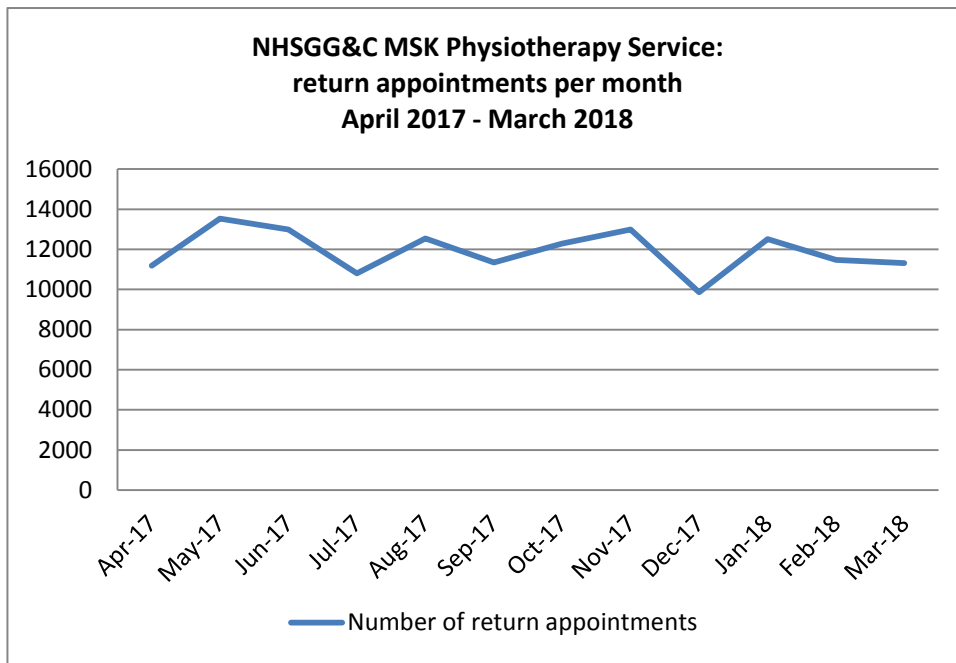


Figure 4



Did Not Attend (DNA) Rates

During 2017/18 the DNA rate for new patients for the whole service was averaging 7.5% per month. Text reminders are sent to all new patients with details of their appointment and asking them to call if they are unable to attend. We encountered problems with the text reminder service during June – August 2017 and our DNA rate rose to an average of 12.3% during this period. This highlights how effective the text reminders are for new patients.

Within Inverclyde the new patient DNA rate was slightly higher than average at 10.5% (down from 14% in 16/17). In total, 435 new appointments were not utilised in Inverclyde during 2017/18 and could have been offered to patients on the waiting list if we had been informed that they were no longer required or patients cancelled with enough notice to refill the appointment.

Rates of DNA for follow up appointments are always slightly higher but have remained at an average of 10% with our text reminders (11.3% during June – August 2017). Inverclyde patients have a slightly better return attendance rate at 8.5% (down from 10.9% in 16/17) but this has still resulted in 936 appointments not attended.

Staff are encouraged to remind patients to cancel appointments as soon as possible so they can be used by other patients and new posters were developed for waiting areas during 17/18 to promote this message.

Waiting List

In 2016 the Scottish Government introduced a target that 90% of patients referred with a musculoskeletal problem would be seen within 4 weeks. This target remains a challenge across the whole of Scotland. Analysis of the national report from March 2018 shows services are ranging from 23.1% seen within 4 weeks to one Board at 92.1%. The average for Scotland was 48.4%, with NHSGGC at 46.5% seen within 4 weeks.

Patients are offered the first available appointment within their quadrant (and outwith their quadrant if requested). The longest wait is recorded on a monthly basis across the whole service as the waiting times are monitored to ensure equity across the service. In 2017/18 the longest a patient waited for a routine appointment was 31 weeks in May 2017 (excluding periods of unavailability). By March 2018 this wait had reduced to 20 weeks.



In April 2017 the Service had 12,223 patients waiting more than 4 weeks on the waiting list, of whom 687 resided in Inverclyde. By March 2018 this had reduced to 10,177 patients waiting, of which 595 were from Inverclyde.

Budget

The MSK Physiotherapy Service received a budget allocation for 2017/18 of £5.975m which reflected approved savings of £0.342m. The actual expenditure for 2017/18 was £5.858m.

Staffing

In June 2017 the Service had 170.66 whole time equivalent (wte) posts, with 224 staff in post. This includes non-qualified support staff, administrative staff, and also 21 Extended Scope Practitioners (ESPs) and 20 rotational staff who are employed by the Acute Division but provide sessions within MSK Physiotherapy. Qualified clinical staff totalled 130.432wte. With on-going consolidation of posts, reviewing skill mix and delivering turnover savings for 2017/18, current staffing sits at 172.55wte, with 226 staff and 132.5wte qualified clinical staff.

	Total wte	No. of staff	Qualified clinical wte
April 2016	180.24wte	243	138.22wte
June 2017	170.66wte	224	130.42wte
April 2018	172.55wte	226	132.5wte

All qualified staff are registered with the Health & Care Professions Council (HCPC) with registration checked on a monthly basis. Staff attend in-service training and courses whilst regular case reviews ensure all patients receive safe and effective treatment, regardless of where they receive their treatment across the NHSGGC area.

The average sickness absence during 2017/18 was 3.3%. This rate is below the 4% set by NHSGGC with all absences closely monitored and managed within the NHSGGC sickness absence policy. We will continue to support the staff governance commitments and promote the health and wellbeing of our staff and patients.

Looking Forward

Waiting times continue to be the major challenge for the MSK Physiotherapy Service and will remain a focus for the senior management team. A service review with the new NHSGG&C AHP Director and National MSK Lead will ensure we are delivering a safe, efficient and effective service.

Work to develop the Advanced Practice Physiotherapist (APP) posts within Primary Care has been progressing during 2017/18. These posts are an alternative first point of contact within GP practices and are being established within all Primary Care Improvement Plans. Recruitment to these posts and subsequent backfill will begin late summer and be closely monitored to ensure no impact on the core MSK Physiotherapy Service.

A project with our colleagues in secondary care through the Trauma & Orthopaedics ACCESS programme (Addressing Core Capacity Everywhere in Scotland Sustainably) continues into 18/19. The project is ensuring patients are seen by the right person at the right time. Hip and knee patients meeting the agreed criteria will be transferred to MSK physiotherapy for conservative management and outcomes will be monitored.

We continue to link with the work developing a new national web based access tool. This tool would allow patients to enter their symptoms online and following specific questions, gain access to relevant exercises, advice and support to self-manage their problem or provide an onward referral to physiotherapy if appropriate.