Sussex MSK Partnership

East



MSK NEWS SPRING 2017

MSK, RHEUMATOLOGY AND PAIN MANAGEMENT PROVISION IN HIGH WEALD, LEWES, HAVENS AND EASTBOURNE, HAILSHAM AND SEAFORD



Welcome to our spring newsletter

Sussex MSK Partnership East has now been running for two years. Since launching in April 2015, the service has:

- Managed 70,000 patient referrals; an average of 3,000 every month
- Opened six community clinics, to bring healthcare closer to our patients
- Seen around 21,000 patients at our Extended Scope Practitioner clinics and since October 2015 a further 2,100 at our Orthopaedic Consultants' clinics
- Implemented new pathways for the diagnosis and treatment of various musculoskeletal problems
- Established support groups for people affected by ankylosing spondylitis and a training and support programme for people with rheumatoid arthritis
- Run 19 patient forums across the region
- Developed a website to provide resources for patients and clinicians
- Launched a dedicated patient newsletter the first issue can be seen on our website

Feedback from patients is very positive with more than 90% saying they would recommend the service to friends and family. We are constantly improving the service and look forward to keeping you updated with the latest developments.

We are always happy to hear what you think, so please get in contact if you have a comment to share.

If you would like to get in touch with us please

Telephone: 0300 300 0003 Email: smskp.east@nhs.net

Write: Sussex MSK Partnership East, PO Box 3196, Eastbourne, BN21 9QH

You can find out more about us on www.sussexmskpartnershipeast.co.uk

SMSKPE NEWS Spring 2017

The latest from Dr Simon Thorp and Dr Daniela Penge



Clinical Director Dr Simon Thorp (pictured above) is doing the rounds with GPs and other clinical staff to talk about various issues relating to the SMSKPE service, including pain management and opioid dependency.

Dr Thorp has two hats. He's Clinical Director of SMSKPE and also Consultant Anaesthetist and Consultant in Pain Medicine. He combines educational sessions with a Q&A about the MSK service, although he's happy for GPs to set the agenda on their areas of interest.

He is currently discussing a programme to help patients dependent on prescription opioids to taper and stop. Having run a similar programme in collaboration with GPs in Brighton and West Sussex, Dr Thorp feels it would be very useful to get feedback from your practice about how this could work in this area.

To set up a visit, email simon.thorp@nhs.net. He's happy to pop in at lunchtime or any other convenient time.

Our GP liaison, Dr Daniela Penge, is the vital link between Sussex MSK Partnership East and GPs.

Dr Penge (pictured below right) helps us to improve the way we integrate with primary care teams and works to ensure we have good communication with GP practices, identifies problems and liaises with GPs to find solutions.

Dr Penge is a GP at Green Street Clinic in Eastbourne. You may have already seen one of her regular Clinical Updates aimed at clinicians, but if you haven't and would like to in future, please email news@sussexmskeast.com. In Dr Penge's latest Clinical Update, she talks about issues with MSK referrals.

Why do MSK referrals sometimes get sent back?

These are the top two reasons for "bounced" referrals and how they can be overcome:

1. The requisite x-rays for the clinical pathway have not been requested.

Some pathways - particularly suspected OA - require an x-ray before referring to SMSKPE. If you check the pathway on DXS it should say what imaging is needed before making the referral.

2. MRI has been requested but the report is outstanding.

This situation happens because referrals can't be held in the system while waiting for imaging reports, so the only course of action is to send it back. The simplest way to avoid this is to make the referral without requesting an MRI.

You don't actually need to have an MRI for any referral to SMSKPE and it won't speed things up for the patient if you do - in fact it will be quicker if we request the imaging as our waiting times are shorter.

If you've got any questions, comments or suggestions about referrals, imaging or anything else about the service, you can contact Dr Penge at daniela.penge@nhs.net.



SMSKPE NEWS Spring 2017

SMSKPE launches pilot scheme for patient self-referral

What is self-referral?

Self-referral means that patients can access our service themselves without needing a referral from their GP.

How does self-referral work?

Patients will be advised by their GP about how to self-refer and be provided with the contact information. Patients will make the referral by completing a referral form, either online or by calling our Patient Care Advisor team.

What are the benefits of self-referral?

MSK conditions account for approximately one third of GP appointments and owing to the range and complexity of the specialism, 10 minutes is rarely enough time to explore a patient's symptoms and aspirations. The opportunity for

patients to self-refer is anticipated to have a positive impact on GPs' time and resources.

The self-referral form allows patients to provide us with a high level of detail about their symptoms, lifestyle and what matters to them.

Having this information before a patient's first appointment helps us to determine the best form of care at the outset. This means quicker treatment and less waiting for patients.

When will self-referral become available to patients?

We have just launched a pilot self-referral scheme with two local GP practices and, if successful, plan to roll the service out to all GP practices in stages later this year.

What people say about our service

We want everyone who uses our service to have a good experience, so we were delighted to receive more than 200 compliments between January 2016 and February 2017.

Data was collected via the Patient Reported Experience Measures (PREMs), physiotherapy questionnaires, feedback to the Patient Forums and directly to our Patient Care Advisors.

PREMs are sent to patients 10 days before their first appointment and again the day after they are discharged from our service.



Comments include:

"The practitioner was excellent. He had a very good manner, took time to explain, answered all questions thoughtfully and made sure that I understood the issues."

"Professional, knowledgeable physio listened to me and was not dismissive. I have not experienced this in the past."

"I was very impressed overall. The doctor went out of his way to reassure me and make me feel as comfortable as possible while undergoing treatment."

"It was reassuring to be treated with dignity and as an individual, and to be given time."

"First class treatment throughout."

"The physio I received was much more person-centred, interested and welcoming."

SMSKPE NEWS Spring 2017

These are some of our recent activities to encourage patients to take responsibility for their own health

Arthritis Action Group



People living with arthritis learnt more about how the NHS can help them during a talk from SMSKPE's Patient Director. Anne Sabine.

Dietician Martin Lau facilitates the local Arthritis Action Group and said: "Anne's talk gave a real insight into what's on offer and feedback from members was that they found it interesting."

How to love your bed

It was National Bed Month in March – and who doesn't love a good night's sleep? But for people who are in constant pain, an undisturbed night is just a dream.

Most people spend an average of a third of their lives in bed - and for those suffering an illness

or injury it can be much more - but it doesn't mean they're sleeping soundly.

Visit our website http://sussexmskpartnershipeast.co.uk/patient-information/sleep-rest where you can find out more information about pain, sleep and rest.

We supported Walk to Work Day

It's estimated that around a third of adults don't get enough exercise and if you do a sedentary job, it's not always easy to incorporate activity into your routine.

Lifestyles that revolve around days spent at a desk and evenings slumped on the couch are causing all kinds of health problems, including musculoskeletal conditions.

But while you may not be able to change the way you work, you could change the way you get to

work. If you live within a couple of miles of your place of work, it's easy to make the journey on foot, but if you live further away, consider getting off the bus or train a stop or two earlier or driving part way and walking the rest.

You may have to get up and out of the house a bit earlier but you will arrive at work feeling energised and ready for the day ahead. So get your trainers on and put your best foot forward. And if you can do it once, then there's no reason why you can't make it your normal routine.

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