



Sussex MSK Partnership

East

An abstract geometric background composed of various colored triangles and polygons in shades of teal, purple, and grey, arranged in a dynamic, overlapping pattern.

2020/21
**ANNUAL
REPORT**

2020-21 THE
YEAR IN REVIEW



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“

I was treated intelligently and with respect. My surgery was cancelled due to the Covid-19 pandemic. The fact that I was rested on furlough, and the long wait meant my condition had a chance to recover by itself. If the problem returns I know how to access treatment again. The whole process has been well planned and most helpful.

”

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OVERVIEW

Sussex MSK Partnership East (SMSKPE) was commissioned by High Weald, Lewes and Havens and Eastbourne, Hailsham and Seaford Clinical Commissioning Groups to tackle clinical variation in practice. Our success is based on putting the patient at the heart of everything we do, providing choice and using shared decision-making to embed an approach that considers physical and mental wellbeing. This report details the first year of a two year extension of the original five year contract.



Continuous improvement is part of our culture, enabling personalised patient care and empowering the workforce. As life became more restricted and waiting times for surgery grew longer, we were mindful of the strong association between mental health and MSK, and adapted quickly to support patients to cope with their conditions at home. We had to temper our ambition as the pandemic forced us to look at practices and redefine our goals. Every obstacle presents a possibility to improve and we successfully achieved our business objectives, used data more proactively, improved clinical pathways, delivered the First Contact Practitioner (FCP) role and physiotherapy self referral, developed and began implementing a new patient experience strategy.

Lorraine Reid
Managing Director

Your choice

“Everything was explained to me, I was given three pathways that I could go down, so I could go home and research in more detail.”



Introduction from our Chair

To keep people safe and support the NHS, MSK services were scaled back during national lockdown. Surgery was not available and longer waiting times coupled with social isolation increased the challenge for many of our patients. The SMSKPE team worked hard to keep connected with patients and to improve services. Our patient advisors and clinicians went the extra mile to provide reassurance and support. Virtual triage along with telephone consultations and easier access to online resources meant we could stay in touch. Reassuring those whose treatment had been delayed and checking how they were coping, kept people connected and we made better use of social media to monitor patient experience.

The Board wants to congratulate all staff that have been a part of delivering on our focus of putting the patient at the heart of everything we do. Staff continued working throughout both remotely and in the office, keeping patients informed and supported during these challenging and turbulent times.

Moving forward, our 21/22 Annual Plan sets out the learning that has been taken, including this last year's experience, reflecting the process of continuous review and improvement which is the hallmark of our focus for years to come. This future focus will result in better patient experiences, made possible by the hard work and dedication of our staff. We look forward to developing creative future partnerships and redesigning MSK services in Sussex for even better outcomes.



Annie Ralph
Independent
Chair

Distributed leadership

We work within a flat management structure and promote distributed leadership. We believe that good patient experience is wholly dependent on the systems that combine and intertwine to deliver care. As a leadership team we strive to maintain a complementary relationship between operations, resources and financial planning and performance to encourage creativity and enable clinical quality.

Matthew Carr
Clinical Director

Alister Meades
Operations Manager

Neil Waller
Finance Manager & Deputy MD



Matthew has a special interest in complex spinal conditions, he developed his career as a physiotherapist working in the NHS and independent sector. His role involves ensuring the clinical teams deliver high quality care and effective clinical outcomes. Matthew completed a Masters in clinical research focusing on these themes. His research has been presented at national conferences and published in an international peer-reviewed journal.

Ali has a background in MSK physiotherapy. He joined the team in 2019 and has been managing operations for the last year. He leads on service delivery and development and manages CRAS, our referral management business unit. Ali works closely with clinical and operational teams to ensure effective patient-centred care. Ali recently completed Oxford University's Executive Leadership Programme.

Neil joined the leadership team as Finance Manager five years ago and became Deputy Managing Director this year. He leads on organisational strategy and works closely with CCG colleagues and clinical providers to develop the financial modeling to support best practice. Neil recently graduated with the NHS Leadership Academy Award in Executive Healthcare Leadership and is currently studying for his MBA.

OUR PEOPLE

“Starting a new job this year could have been difficult, but the team were so welcoming, I feel this is a team I’m proud to be part of.”



100%

believe their role makes a difference to patients.

86%

said that patient feedback is used to inform decision-making.

90%

agree the leadership team act on feedback.

69%

feel there are frequent opportunities to show initiative at work.

90%

report having the right tools to do the job.

87%

say that patients are given the opportunity to be involved in decisions about their care.

2%

Sickness absence
No leavers.



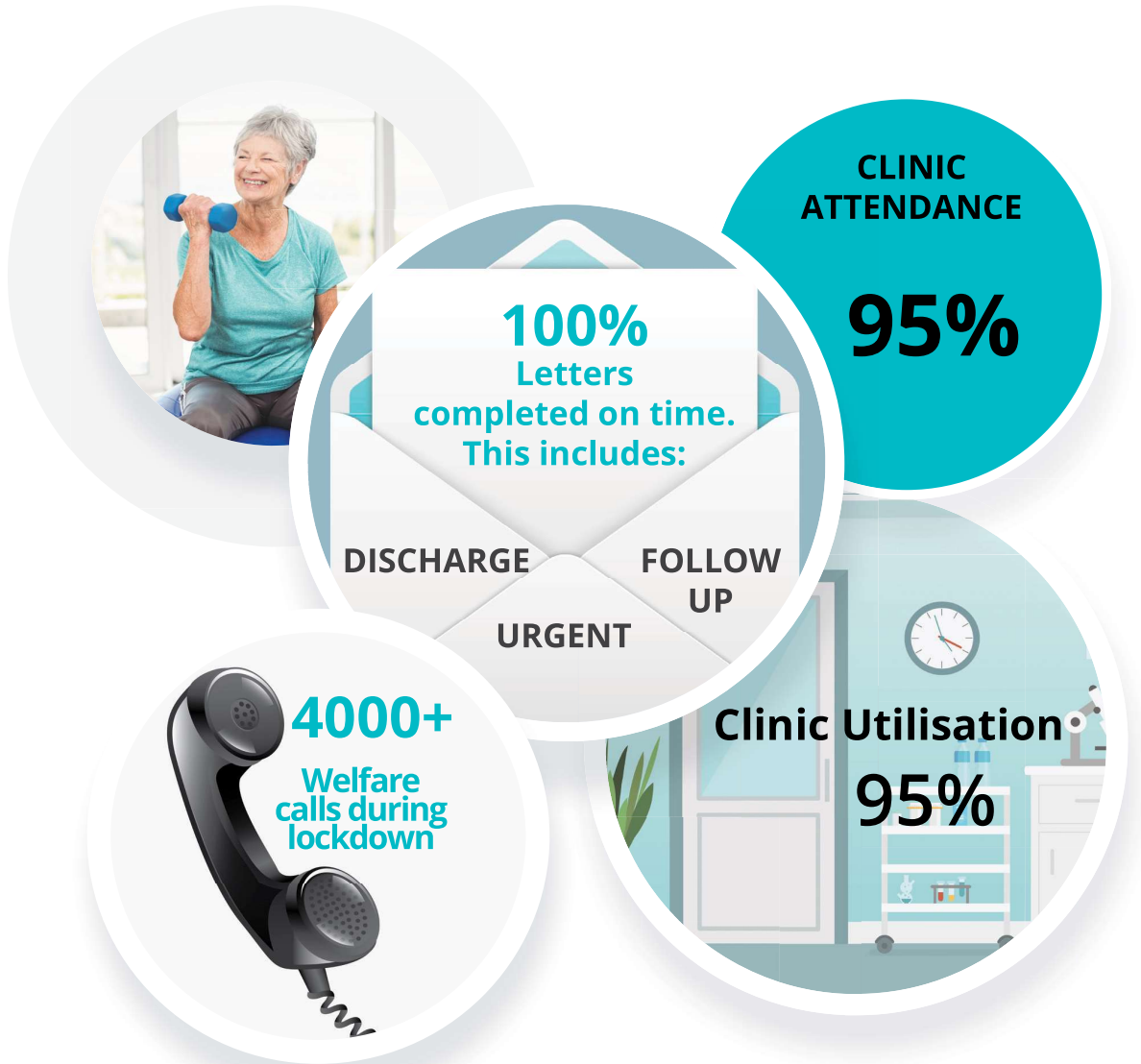
Say it like it is

We aim to engage and enable our people by providing an environment and training that encourages high performance. We encourage speaking up and try to locate decision-making as close as possible to source.

This year the staff survey highlighted concerns about the way key decisions were being communicated during lockdown.

So, we stepped up our briefing systems, went online and engaged the team in developing Covid-safe working practices.

Healthy Outcomes



CARING	INNOVATIVE	DETERMINED	COLLABORATIVE
We put people first, the patient is at the heart of everything we do and treatment is based on shared decision-making.	We continuously strive to improve, optimise technology, use data effectively and find new solutions	We are determined to deliver cost-effective, safe and sustainable MSK services.	We work in partnership with patients, carers, providers and other stakeholders to get the best outcomes.

PERFORMANCE

As a team we aim to use data in an interactive way, analysing systematically to enable proactive decision-making.

Andy Gray
Contracts & Quality
Governance Manager



Improving Physiotherapy Waiting Times



Average waiting times for physiotherapy improved significantly this year, we have invested in more capacity and directed patients to their local provider with the shortest waiting times.

Secondary Care Delays

Waiting times for consultant new appointments steadily rose in the first 2 quarters. When restrictions eased in Q3 an additional 200 new appointments per week were made available. As a result of this extra capacity, by January 2021 all patients affected by the delay had received a new appointment.

	no. referrals delayed	new appointments created
Oct	1627	430
Nov	1197	615
Dec	582	292
Jan	290	290
Feb	0	

90%
Pain & Rheumatology
Triage within 2 working days

88%
Trauma & Orthopaedics
Triage within 2 working days

83%
Reduction in the number of patients in community services waiting longer than 25 weeks

1830
New appointments created for patients delayed by Covid pressures

ACTIVITY AND FINANCE

Despite the impact of Covid-19, we received 23,733 referrals in 2020/21. This table shows the impact by pathway in comparison with the previous three years.

Referrals by Pathway

	2017/18	2018/19	2019/20	2020/21
Hip	2638	2944	2458	1468
Knee	4291	4828	4613	2935
Shoulder & Elbow	2261	2743	2538	1978
Hand & Wrist	2531	2757	2407	1705
Spine	4162	5161	4621	3403
Rheumatology	2158	2452	2637	2116
Pain	1729	2037	2275	1546
Foot & Ankle	2638	2944	2458	1468
Physiotherapy	14432	13322	11472	6856
Total	36388	38817	35569	23733

Summary Profit and Loss

	17/18 £'000	18/19 £'000	19/20 £'000	20/21 £'000
Income	37201	35630	35816	24961
<u>Expenditure</u>				
Block Physio Contracts	3207	2555	2540	2480
Secondary Care Contracts	27495	25807	26414	15683
Integrated Care Contracts	2942	3470	3479	3619
Overheads	3435	3368	3365	3132
	37079	35200	35798	24914
Surplus	122	430	18	47

SMSKPE received full funding during 20/21 but Horder Healthcare and Non-Contract providers were funded centrally during the pandemic and this has required a deferral of income. As a result, reported income and secondary care spend were approximately £10.4m lower in 2020/2021 than 2019/2020. 'Cash flow Support Funding' was made available to all NHS providers and 'Business Support Funding' to independent sector providers to sustain them. This gave all providers financial certainty, and the ability to function in a lower risk environment.

Financial risk was mitigated as SMSKPE and the CCG had agreed funding principles for 2020/2021. This meant that all expenditure was funded and a small surplus could be achieved. 100% of suppliers were paid within 30 days. SMSKPE continues to pass all of the going concern tests - profitability, net worth and liquidity.

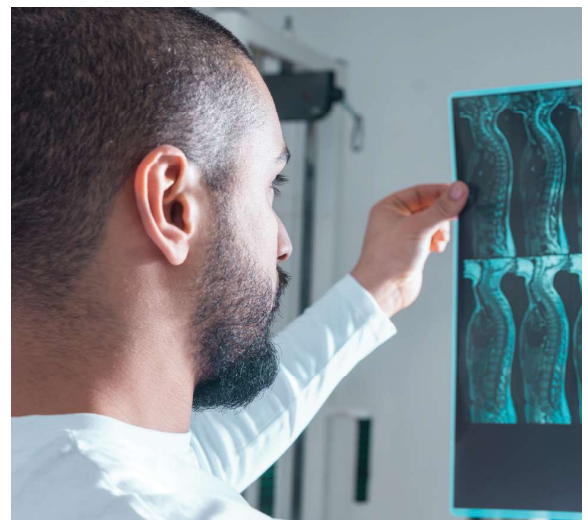
Learning throughout the year

This has been a year of continuous adaptation and change. A key challenge involves identifying the initiatives that brought about positive change and converting them into everyday practice.

PARTNERSHIP WORKING

Physiotherapy referrals fell steadily in the first quarter. People were perhaps less active or reluctant to contact their GP. We were able to support the NHS by using the smaller physiotherapy providers, diverting patients waiting from East Sussex Hospitals Trust. This supported the redeployment of physiotherapy teams to work with people affected by Covid-19 and assist their rehabilitation.

MSK patients requiring physiotherapy received a telephone consultation, they were given advice on managing their condition along with an initial diagnosis and management plan. The provider-patient allocation process was derived from previous pathway modelling, the principles of which continue to help us combat the impact of Covid-19 on waiting times.



ENSURING SAFETY

Community services introduced virtual consultations and group programmes were provided by video link. To keep waiting areas safe, face to face appointments were staggered. These appointments were reserved for patients with complex presentations and those whose condition might deteriorate without treatment.

Consolidating the gains

An evaluation of Covid-related changes in practice identified a number of opportunities to improve patient experience. We now offer telephone consultations for those conditions and pathways where this type of intervention is most effective and was well received by patients.

Wellbeing

Between April and June, our patient care advisors contacted more than 4000 patients to check on their welfare, reassure and advise about managing their condition while elective surgery was suspended.



“

I t felt Corona-safe. Spacious. I was greeted with a big smile from the receptionist. Seen on time. Excellent practitioner. Accessible with good parking. Top marks !

”

QUALITY OUTCOMES

The single point of access enables rapid triage and referral on to the right setting. Advanced Practitioners (AP) are physiotherapists with the skills to assess, arrange investigations, agree an appropriate plan, provide treatment or refer on. The more complex conditions are seen by a pathway specific AP.

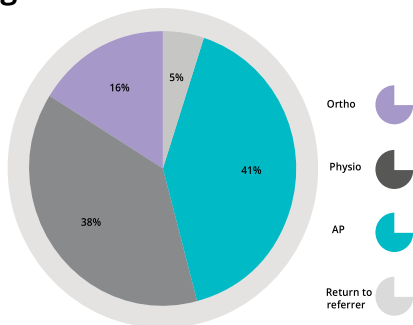


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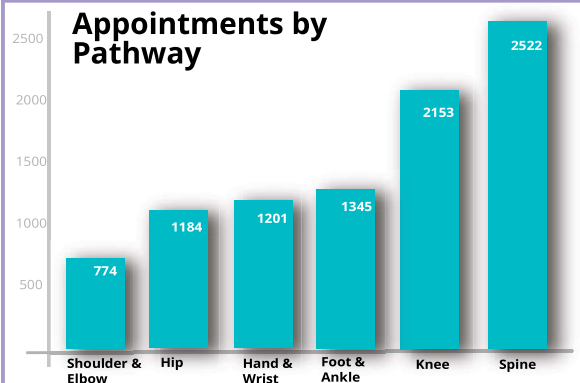
Advanced Practitioner appointments

The charts below show the distribution of appointments by pathway. Patients with complex back pain often require a range of treatments such as physiotherapy, pain management, psychology and activity modification, and are less likely to be referred for surgery. This is demonstrated by the number of people requiring surgical resolution as the spine pathway shows the lowest conversion rate at 43%. Non-complex knee and hip conditions, in contrast, usually achieve good outcomes with surgical intervention and therefore a much higher number of patients from these pathways go on to have surgery.

Triage Outcomes

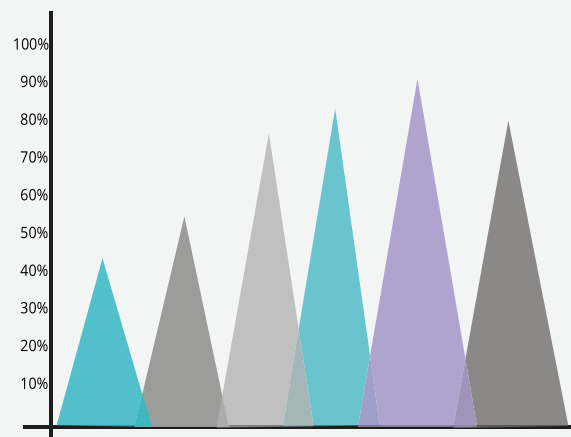


Appointments by Pathway



Conversion to Surgery by Pathway

- Spine 43%
- Foot & Ankle 57%
- Shoulder & Elbow 74%
- Hand & Wrist 80%
- Knee 82%
- Hip 93%



What patients say



The Patient Care Advisor team provide a courteous and helpful service.



Advanced Practitioners involve patients in decisions about their care.



Satisfaction with time, date and location of appointment.

At the heart of everything we do



Complaints and Plaudits

There were fewer complaints during lockdown with a slight spike as restrictions were lifted. Response times were adversely affected during the pandemic due pressures on provider organisations. The themes were related to waiting times for appointments and surgery. Patient experience measures were not collected between April and September, in spite of this 339 plaudits were received, only 35% fewer than 2019/20 when there were no interruptions in collection.



PROMS our two major surgical provider hospitals deliver strong clinical outcomes, above the national average in the specific areas recorded.

“Taking into account the present Covid conditions, the appointment, timing and consultation was very good, and I came home feeling assured.”

“Very friendly and efficient. I felt Covid-safe which was much appreciated.”

“In the whole 12 years of pain, I've never had my condition and treatment options so well explained to me.”

Improving the patient journey

We began introducing the First Contact Practitioner (FCP) role in September 2020. This was achieved in a collaborative with Horder Healthcare and East Sussex Hospitals Trust which enabled the development of a consistent model providing a high quality service that is good value for money, integrating care across primary, community and secondary care services.

The role was designed as part of a national initiative to expand the primary care workforce. FCPs are physiotherapists with advanced skills who work in GP practices to treat people with MSK conditions. Around 30% of GP consultations are MSK related, this new role provides access to treatment, reduces prescribing costs and promotes self management, freeing up time in primary care and reducing the GP workload. This initiative complements physiotherapy self referral improving overall accessibility.

This year we successfully enabled FCP services across 7 of the 8 local primary care networks. The collaborative have developed systems for reviewing and monitoring outcomes to ensure these services as they expand continue to improve patient experience and provide optimal care.



The appointment and consultation was excellent I came home feeling very reassured.



SPINE

Patients with high-risk spinal conditions now benefit from improved care. Warning cards are provided to anyone with a condition that can require urgent attention. This helps patients to understand what signs to monitor and what action to take should these signs develop.

GETTING IT RIGHT

Pathway Improvement

DIRECT LISTING PILOT

The upper limb team are combining physio and consultant appointments to streamline the pathway for patients with trigger finger and carpal tunnel syndrome.

This will also enable patients opting for surgery to complete all consenting procedures in a single appointment.



Self Referral Physiotherapy

A previous self referral pilot scheme was well received by GPs and patients however, the processes used were incompatible with our systems.

The technical ability to provide self referral more efficiently was in place by 2020 and we started working on an approach that would improve the patient experience and save time in primary care too. If physiotherapy is required, the patient completes an online referral form, which was co-designed with our patient partners. We added Recite Me, an accessibility tool, to the website to provide more equitable access making the self referral form easier to complete.

This system provides clear and comprehensive information about the problems the patient is experiencing and helps us to ensure they get the care and treatment they require smoothly and efficiently.



I felt like I was being taken seriously, the plan for moving forward was very clear.



Patient Experience

Treating the patient and not just the symptoms

Rose had sought help from MSK services for over 30 years, suffering with lower back, foot and joint pain. Her multiple joint problems led to multiple referrals, and assessments and types of treatments. With SMSKPE, she says, the approach has been more integrated. She found the service very useful during the pandemic when she was supported by telephone appointments.

The patient care advisors are very efficient, helpful and friendly. The physiotherapists and other team members are very professional and understand the difficulties of chronic pain. I tell my friend not to put up with their pain. In my younger days, I feel that this did more harm than good.



**I left with
a book of
instructions
which should
help me avoid
surgery.**



Rachel Slack,
Patient Engagement
Lead

joined the team this year. With experience of working in primary care, Rachel had previously used our services. She is passionate about improving patient experience and since joining has secured patient partners representation at key meetings. Providing accessible information and to enable patients to manage their condition at home has been another key priority.



Pain management on the phone

Sandra suffered with widespread pain for many years. She managed some of the symptoms with alternative therapies in the past, however when the pain in her knees and hands became troublesome her GP referred her to our services and she was assessed by Rheumatology and later saw the Pain Management Team.

This was all seamless, quick and efficient. Due to Covid19 my appointment was by telephone, however, Dr Hazan really understood my conditions and looked at the widespread issues I was experiencing. He liaised directly with my GP and arranged for new medication, which is helping. He also arranged for a telephone consultation with a hand therapist. The treatment for the Heberden's nodes on my hands has been so beneficial.





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