

DUMFRIES and GALLOWAY NHS BOARD

PERFORMANCE COMMITTEE

4th March 2019



Allied Health Professions Musculoskeletal Waiting Times update

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RECOMMENDATION

The Performance Committee is asked to **discuss and note:**

- The update on the AHP MSK waiting times target
- The capacity challenges identified
- The action plan to address the situation

CONTEXT

Strategy/Policy:

The Scottish Government set a target that, from 1 April 2016, at least 90% of patients will receive a first clinical out-patient appointment with an Allied Health Professional (AHP) for Musculoskeletal (MSK) conditions within 4 weeks from referral. This may be by telephone, video or face-to-face. This target should be met by each profession individual within each NHS Board

Organisational Context/Why is this paper important/Key messages:

This paper reports the current concordance with the AHP MSK target and outlines the challenges being experienced in delivering this target.

Key messages:

- NHS Dumfries and Galloway is not achieving the AHP MSK 4 week target within any individual profession

- There are ongoing capacity challenges across all services however these are most acute in physiotherapy services.
- Physiotherapy services across the region are under significant pressure and are requiring to prioritise service areas to maintain flow.

GLOSSARY OF TERMS

AHP	Allied Health Professional
MSK	Musculoskeletal
NHS D&G	NHS Dumfries and Galloway
OT	Occupational Therapy
PFB	Patient Focussed Booking
ISD	Information Services Division
WTE	Whole Time Equivalent
MATS	Musculoskeletal Advice and Triage Service

MONITORING FORM

Policy / Strategy	Scottish Government waiting times targets
Staffing Implications	Nil
Financial Implications	Nil
Consultation / Consideration	Community Health and Social Care Management Team
Risk Assessment	Not carried out
Risk Appetite	<p style="text-align: center;">Low <input type="checkbox"/> Medium <input checked="" type="checkbox"/> High <input type="checkbox"/></p> <p>This is in the context of reputational risk where the Board has a risk appetite of medium</p>
Sustainability	Nil
Compliance with Corporate Objectives	To meet and where possible, exceed goals and targets set by the Scottish Government Health Directorate for NHSScotland, whilst delivering the measurable targets in the Single Outcome Agreement.
Local Outcome Improvement Plan (LOIP)	Contribution to Outcomes 1 and 3
Best Value	<p>Performance Management</p> <ul style="list-style-type: none"> • sound governance at a strategic and operational level • responsiveness and consultation
Impact Assessment	Not carried out

Situation

1. Following the initial redesign of Allied Health Professional (AHP), Musculoskeletal (MSK) services 2013 - 2015 NHS Dumfries and Galloway (NHS D&G) AHP services were achieving the Scottish Government target of 90% of all new MSK referrals receiving an appointment within 4 weeks. Over the last 21 months, due to a combination of increase in referrals, staff sickness absence, recruitment and retention issues this is now nearer 30%.
2. Concerns have been raised at NHS Board regarding current concordance and a paper requested for Performance Committee.

Background

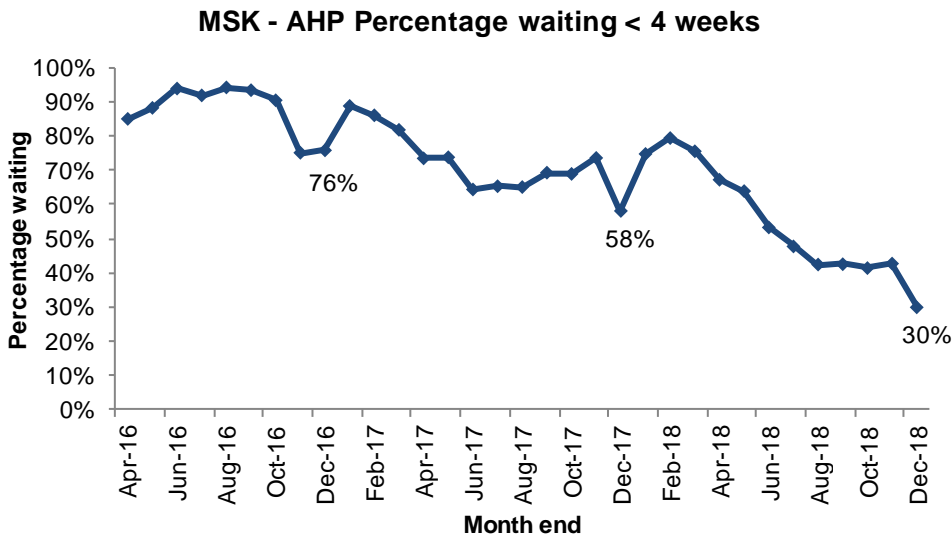
3. The Scottish Government set a target that, from 1 April 2016, at least 90% of patients will receive a first clinical out-patient appointment with an AHP for MSK conditions within 4 weeks from referral. The target at 90% reflects the fact that for some patients it may not be clinically appropriate for treatment to begin within the target's timeframe. The target should be met by each profession individually within each NHS Board.
4. AHP MSK problems include a diversity of complaints and diseases localised in joints, bones, cartilage, ligaments, tendons, tendon sheaths, bursa and muscles. MSK problems also include out-patient pre or post orthopaedic surgery, peripheral nerve lesions (e.g. carpal tunnel, sciatica) or complication of fracture/dislocation/trauma.
5. This target refers to adult (age 16 and over) where MSK is the primary reason for referral. The professions included are:
 - Occupational Therapy (OT) hand therapy only in NHS D&G)
 - Orthotics
 - Physiotherapy
 - Podiatry (foot and ankle conditions only in NHS D&G)
6. The first appointment may be via the telephone, video or face to face.
7. NHS Boards are still in the process of developing systems to collect this information. ISD and the Scottish Government are working with Boards to improve the completeness and quality. Data is at an early stage in development but is published for 14 Boards.
8. The most recent AHP MSK publication, released in December 2018, for the quarter ending September 2018 indicates that in Scotland 45.6% of the patients had been seen within 4 weeks and that NHS D&G, with a concordance of 44.3% for that quarter, was sitting in 10th of 14th place within Scotland. Concordance ranged from between 26.3% and 57.6% across Scotland

Assessment

- 9. NHS Dumfries and Galloway is one of the few Boards who have achieved the 90% target as is demonstrated in the table below however recent concordance has seen deterioration.

Current local performance as of 31st December 2018

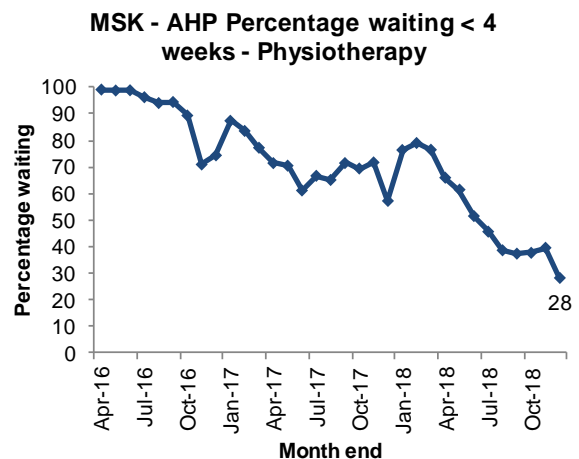
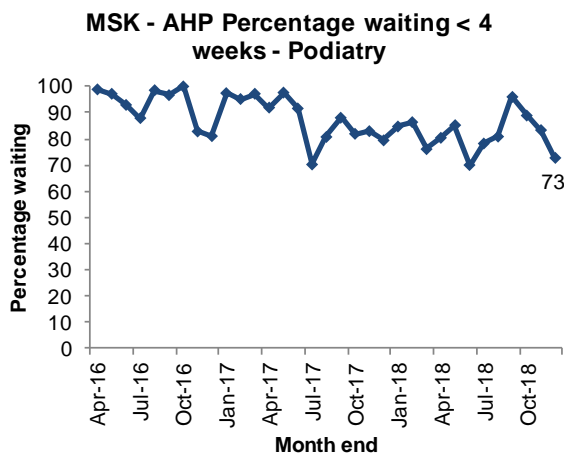
Chart 1

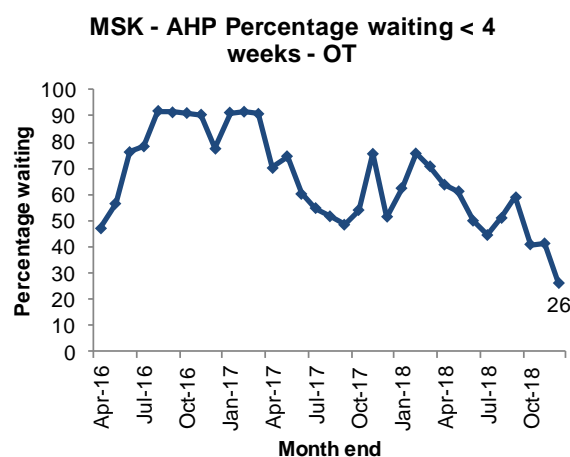
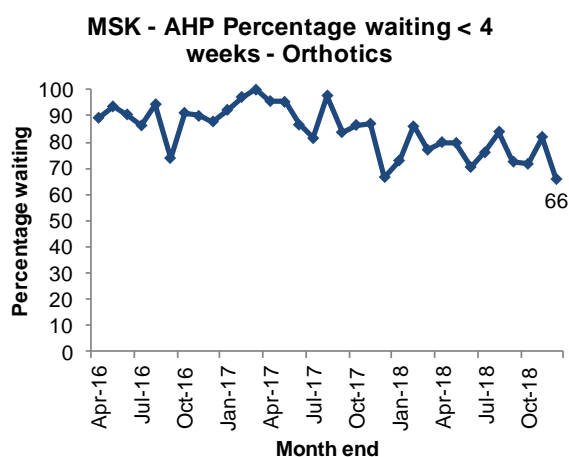


- 10. As at the 31st December NHS Dumfries and Galloway was demonstrating a 30% concordance with the target when considered cumulatively.

Waiting times by profession

Chart 2





11. As previously outlined delivery of the target is required by each individual profession within the MSK family. The charts above indicate that no individual profession was achieving the target as at 31st December 2018.

Percentage of referrals by profession

Table 1

Quarter	Physio	OT	Podiatry	Orthotics	Total
Apr-Jun 2016	72%	10%	11%	7%	100%
Jul-Sep 2016	72%	11%	12%	6%	100%
Oct-Dec 2016	71%	12%	11%	6%	100%
Jan-Mar 2017	72%	11%	11%	5%	100%
Apr-Jun 2017	72%	11%	12%	5%	100%
Jul-Sep 2017	73%	11%	10%	6%	100%
Oct-Dec 2017	74%	12%	9%	5%	100%
Jan-Mar 2018	72%	13%	10%	5%	100%
Apr-Jun 2018	72%	12%	10%	5%	100%
Jul-Sep 2018	74%	14%	7%	6%	100%
Oct-Dec 2018	71%	15%	8%	6%	100%

Referral pathways

12. Patients may be referred into the system via several routes:

- The Musculoskeletal Advice and Triage Service (MATS) operated by NHS 24 which is a phone service for people experiencing symptoms of MSK disorders. This service takes patients with MSK pain through a range of questions to determine their clinical need for self management advice, AHP referral or occasionally immediate attendance at the Emergency Department.
- GP referral
- Consultant referral this Health Board
- Consultant referral other Health Board
- Other health care professionals

Count of Referrals to AHP MSK

Table 2

Quarter	GP	Consultant (this HB)	NHS24	AHP	Self Referral	Consultant (outwith HB)	Other	Total
Apr-Jun 2016	1378	1057	853	119	35	67	47	3556
Jul-Sep 2016	1240	893	855	90	39	44	30	3191
Oct-Dec 2016	1279	1033	659	70	19	70	59	3189
Jan-Mar 2017	1890	885	715	95	24	48	60	3717
Apr-Jun 2017	1830	927	610	92	14	71	25	3569
Jul-Sep 2017	1680	925	658	105	19	59	24	3470
Oct-Dec 2017	1647	832	605	115	13	74	40	3326
Jan-Mar 2018	1560	839	664	147	55	65	33	3363
Apr-Jun 2018	1722	781	738	140	103	77	37	3598
Jul-Sep 2018	1403	768	739	180	117	69	45	3321
Oct-Dec 2018	1398	891	609	133	100	80	23	3234

13. Table 2 illustrates referral routes over time and demonstrates that there has been no increase in referral numbers overall and no demonstrable increase in referrals from GPs. It is not possible to identify whether there has been an impact upon increased activity for GPs as a result of increased waiting times within AHP MSK
14. Latest published figures for the MATS service indicates that for the quarter Jul-Sep 2018 they received 1,239 calls from people resident within Dumfries and Galloway. Of these calls 187 people were referred to self management resources and 736 were referred to the AHP MSK service locally.

Physiotherapy

15. Physiotherapy is the single biggest recipient of MSK referrals (receiving over 70%) and had a concordance of 28% against the target as at 31st December 2018. Due to the numbers of referrals when compared with the other professions Physiotherapy concordance drives the overall Board position.
16. Within Adult NHS services Physiotherapy provides support to all inpatient areas (Acute and Community Hospitals); to outpatient clinics in acute and community facilities including GP practices and health centres across the region; and within people's own homes. In Dumfries and Galloway Royal Infirmary (DGR I) they provide a seven day service to support patient flow and a 24/7 service to support people with acute respiratory conditions. The 24/7 service is on an on-call basis overnight.
17. In the last 21 months, due to people changing post, going off on sick and maternity leave and retiring, physiotherapy has experienced a 20% vacancy rate within its registered staff (10.6 WTE of a total compliment of 52.31 WTE) which has placed extreme pressures on the service. Despite consistent attempts it has not been possible to fill these vacancies by either NHS employed or locum staff. This reflects a national shortage of physiotherapists. In discussion with the Health and Social Care Partnership senior management

team a decision was taken to prioritise services and staff resources to support patient flow rather than MSK resulting in a 47% vacancy rate within the MSK services and the consequential impact upon overall concordance.

18. The period since 1st February 19 has seen the introduction of a further three locum members of staff (now a total of six locums in service) and one new band 6 member of staff has commenced employment. In addition there are two new band 5 physiotherapists finalising their Health and Care Professions Council registration to enable them to work within the NHS and due to enter the service shortly. It should be noted that whilst this will help improve concordance, it is unlikely to make a significant impact as the overall challenges for the service will continue for the foreseeable future
19. Meantime we are out to recruitment for six vacancies although we are not overly hopeful of a successful outcome given the continuing national shortage. The situation is expected to become more challenging again over the next few weeks with two more individuals due to go on maternity leave.
20. The service within Dumfries and Galloway Royal Infirmary continues to be under significant pressures as they attempt to provide a seven day a week, 24/7 service for inpatients and it is not considered possible at this time to divert further resource to support delivery of the MSK target.

Occupational Therapy

21. Occupational Therapy (OT) receives 10-15% of MSK referrals and this relates to a range of hand conditions (including trauma, surgery post op and routine referrals). Concordance with the target was 26% as at 31st December 2018.
22. Staff follow agreed pathways to manage particular hand conditions and operate a “one stop shop “ approach to some of these conditions by seeing the patients from triage through surgery to rehabilitation and recovery. There are competing priorities and demands of having to manage a caseload of trauma (which is unpredictable), post op and routine patients.
23. Occupational Therapists undertake a range of activities that in the past would have been carried out by other clinicians – e.g. listing for surgery, wound management, injection therapy which improves the patient pathway for patients. They also fabricate thermoplastic splints and initiate functional treatment programmes. They are about to commence undertaking nerve conduction tests locally which means patients will not need to go to Edinburgh for these tests. Currently there is a significant waiting time for these tests and resulting waiting for further treatment
24. The OT staffing for the MSK service is small (1.9WTE) and due to long term sickness the staffing compliment was reduced to 1.4WTE which has had an impact on waiting lists and concordance. Locums for the specialist area of hand therapy are very difficult to source and we have been unable to secure locum cover in this regard.

25. The majority of long waiters for the service are patients who live in the West of the region and who are unwilling to attend clinics in other areas.
26. Within Adult NHS services OT provides support to all inpatient areas (Acute and Community Hospitals), to outpatient clinics in acute and community facilities including GP practices and health centres across the region and within people's own homes. In Dumfries and Galloway Royal Infirmary they provide a seven day service to support patient flow.

Patient focussed Booking

27. The Patient Focussed Booking (PFB) service supports Physiotherapy and Occupational Therapy in relation to managing outpatient appointments. This service has been experiencing high rates of sickness and recruitment challenges which, at times, has led to clinics not being maximised to full potential.

Orthotics

28. This service receives a very small proportion of the MSK referrals (5-7%) and is a contracted service for the West of Scotland. Orthotics has fluctuated over time between 66% and 100% concordance against the target with current concordance at 66%. There are no specific challenges within this service meantime.

Podiatry

29. Podiatry services receive between 7 and 12% of all MSK referrals which relate to foot and ankle conditions. Concordance with the target was at 73% in December 18 with this fluctuating between 70 -100% during the period Apr 16 – Dec 18. Podiatry covers both MSK and Podiatry Wound Care which is delivered in health care facilities (both inpatient and clinic based) and within the patient's own home. Podiatry wound care can be more of a priority in terms of need and is the biggest cohort of patients by way of service.
30. There are no vacancies within the service at the point of writing with one locum in service covering a maternity leave. It is however anticipated that this locum will leave in April with the maternity leave due to end in December 19. It is challenging to attract new podiatrists into service locally and there is a shortage of podiatry locums.
31. The MSK service is delivered by 2WTE staff which comprises 1 WTE and two practitioners who provide 0.5WTE into the service. Both established part time individuals left the service in Autumn 18 and whilst we have recruited into the service we are currently in the process of supporting the development of their MSK skills meaning that capacity for appointment is currently slightly reduced.
32. Podiatry administrative support is provided directly from within the service however as with PFB there has been a capacity issue which has occasionally resulted in clinics not being fully utilised.

Action Planning

33. The following actions are being taken to address the issues:

- Weekly review of clinic templates/adaptations to maximise capacity
- Review of pathways of care and links to each stage of the patient pathway continue and areas of improvement identified. (e.g. increase non-medical prescribing, Group educational sessions)
- Continued promotion of self referral through NHS 24 MSK advice and triage
- Utilisation of telehealth - 'advice lines', NHS 24 online apps, text reminder and automated reminder (Florence) continue to be tested.
- Promotion of Return to Practice
- Increase in Bank staff
- Vacancy control process (fast-tracked)
- Conversion fixed term to permanent posts
- Review of skill-mix "Grow our own" (support staff)
- Continued use of locums / locum finder fees
- Recruitment campaigns regionally and nationally
- Open recruitment advert (various hours / posts available – encouraging contacts)
- Student placements Programme / Links with Universities promoting D&G
- Band 5 to band 6 development programme supported by NHS Education Scotland

Recommendation

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- The capacity challenges identified
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