Bury Integrated Musculoskeletal Service

**Background**

There are currently multiple points of access into MSK services (Orthopaedics, Rheumatology and Pain) within Pennine Acute NHS Hospitals Trust. In Bury orthopaedic referrals are triaged by Advanced Physiotherapy Practitioners (APPs) with 52% of referrals being deflected from secondary care. The Trust is working with Bury CCG to expand this service to incorporate rheumatology and pain referrals in order to create a single point of access (SPoA) for MSK services within Bury.

**Aim of the redesign**

To provide a high quality integrated multidisciplinary service for patients with musculoskeletal conditions.

To ensure that the service is efficient and cost effective by appropriately managing patients at all levels of the service.

**Process**

1. **Referral**

Referrals will be accepted from GPs and other healthcare practitioners via choose and book using a standard referral proforma. The completion of all fields is essential to ensure timely and accurate triage of referrals to the most appropriate practitioner.

2. **Advice & Guidance**

An advice and guidance service via choose & book will be piloted in the North sector. The service will link with consultants via email providing advice regarding patient management within 72 hours either before or instead of referral into the service. An evaluation at the end of the pilot will inform whether this service is to continue and be rolled out across all sectors.

3. **Triage**

Triage will be undertaken by Advanced Physiotherapy Practitioners and Clinical Nurse Specialists (CNS) with referrals being allocated to appropriate practitioners within the specialities in accordance with agreed triage criteria. Triage will be undertaken 5 days per week with the exception of public and bank holidays.

4. **Clinical Assessment**

The initial consultation will take place in the out-patient department at Fairfield General, North Manchester General or an identified location in the community in agreement with Bury CCG. The location options will ensure efficient use of resources and offer choice and convenience to patients.

Patients will be assessed in line with agreed protocols and clinical pathways. Where appropriate the assessment will be carried out by experienced and highly
trained APPs and CNSs thereby ensuring availability for patients who require the expertise of the consultant team.

5. Diagnostics

Diagnostics can be accessed either directly by the GP or following assessment in the Bury Integrated MSK Service.

6. Follow up & treatment

A large proportion of patients will receive treatment, often joint and soft tissue injections, at the first consultation. A smaller proportion of patients will return for a second appointment to receive injections.

Where appropriate, patients will be given the option of receiving investigation results by phone, post or in person.

The pain pathway has been redesigned to incorporate a bio psychosocial model of care. It is envisaged that a significant number of patients with chronic pain will be managed in the foundation level Pain Management Programme. This physiotherapy led pain management programme, which has been reviewed and commended in the independent Dr Frances Cole pain review, was established in 1998 and runs at North Manchester and Fairfield General Hospitals. We are currently working with Pennine Care to look at ways to expand this service utilizing IAPT and clinical psychology resources.

7. Discharge

Patients will be referred back to their originating clinician, with a report outlining the clinical impression/diagnosis, treatment carried out and recommendations for further treatment and management.

For any further information please contact

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