TRAFFORD COUNCIL

Report to: **Health Overview and Scrutiny Committee**
Date: **7th March 2019**
Report of: **Director of Commissioning Trafford CCG**

Report Title

Physiotherapy

Summary

This paper aims to provide an overview and update on the Community Services which deliver physiotherapy as part of the clinical pathway.

Recommendation(s)

Health Scrutiny Committee are asked to note the paper and request further detail on any of the individual services to be provided at future meetings.

Contact person for access to background papers and further information:

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Background Papers: None

Background

The Chartered Society of Physiotherapist definition is as follows:

Physiotherapy helps restore movement and function when someone is affected by injury, illness or disability.

Physiotherapy is provided as part of a number of community services delivered by Pennine Care FT. Physiotherapy is also provided in secondary care following trauma or surgery.

This report focusses on the main community services which involve physiotherapy.

These are:

- Community MSK Service
- Community Rehabilitation Service & Outpatients
- Community Neuro Rehabilitation Services
- Pulmonary Rehabilitation

The community services also provide physiotherapy as part of Ascot House Therapy Led Intermediate Care Service, the Community Enhanced Care (CEC) Service Urgent Therapy team as well as the Children's Therapy Services (Physiotherapy/Occupational Therapy). We understand Health Scrutiny Committee has received presentations previously on Ascot House and the CEC Urgent Therapy Team.

Community Musculoskeletal (MSK) Service

Trafford CCG commissions an adult Community Specialist MSK Integrated service with the aim of treating more patients within the community setting and within a single integrated pathway of care. The service commenced on 1st July 2016 and will end in June 2021.

The integrated service comprises MSK physiotherapy and podiatry, along with specialist orthopaedic, rheumatology and pain management. The specialist service is separate to the main contract and while the lead provider is Pennine Care FT which delivers the physiotherapy and podiatry elements of the service, the specialist elements of the service - orthopaedic/rheumatology and specialist pain services, are delivered through a sub-contract arrangement with Manchester Foundation Trust (formerly University of South Manchester FT).

The aim of the service is to:

- Offer a single pathway of care for patients with musculoskeletal conditions and ensure the patient sees the most appropriate clinician to improve their care.

- Reduce unnecessary demand on secondary care services and improve waiting times and rates of conversion to surgery.
- Improve patient experience and confidence through prevention and self-management.

GPs refer patients to the service via the Trafford Coordination Centre (TCC) . The referral is then forward to the Single Point of Access for referral processing, then on to the MSK service for clinical triage. Where the referral is considered inappropriate for the service (e.g. where secondary care treatment is required) then the referral is passed back to the TCC to contact the patient, offer choice of provider and book the appointment.

The service has demonstrated a number of positive outcomes:

- Shared Decision Making between clinician and patient, evidenced on patient care plan
- Assessment clinics - patients are assessed & given initial advice/exercises then can opt back in for treatment if needed
- My Health My Community website – averaging over one hundred views per week, alongside information/exercise leaflets
- Introduction of a Pain app for chronic pain management
- Close working relationship with Trafford Leisure as part of the pain management programme and a new pilot “escape pain” supporting patients with Osteoarthritis hip and knee.
- Group sessions for patients
- GP education is through liaison - each GP practice has a named person from the MSK physiotherapy and specialist team to liaise with around any queries or educational needs.
- Conversion to surgery to surgery rates have improved significantly (awaiting latest data from Performance team)
- Reduced secondary care and independent sector activity
- Reduced MRI and Ultrasound scans ordered by GPs
- Positive patient feedback through friends and family test and one line feedback form
- The service has also submitted a business case to the CCG for a portable Ultrasound Scanning Machine so patients can receive the scans at the assessment. This is currently being discussed with MFT radiology before being considered by the CCG.

Current Demand

Overall the demand on the service is virtually in line with what was identified in the contract, although there are variations for the individual elements of the service as set out in the table below:

	Apr - Nov 18	Apr - Nov 18 (Av / Month)	18/19 contract target / month	Diff (Nos)	Diff (%)
Community Physio / Podiatry	**6892**	**862**	**769**	**93**	**12.0%**
Ortho / Rheum	**1755**	**219**	**384**	**-165**	**-42.9%**
Pain	**354**	**44**	**34**	**10**	**30.1%**
Total	**9001**	**1125**	**1187**	**-62**	**-5.2%**

In total the Physiotherapy and Specialist service will treat over 14,000 patients in the current year.

The main issue with the service is meeting the waiting times KPI as set out in the contract.

The service is expected to see and treat 95% of patients within 4 weeks. Currently only 20% of patients are meeting this target for physiotherapy. PCFT has provided assurance that all urgent referrals are seen within 2 weeks and in December Pennine Care reported that average routine waiting times for physiotherapy is between 5-7 weeks.

There a number of reasons for this including: physiotherapist vacancies in the service, patients not attending for appointments (DNAs - 14% in January, 10% previously), and the referral process. A joint CCG & PCFT Steering Group meets monthly and an action plan has been agreed to improve performance, which included temporarily reintroducing assessment clinics with shorter assessment times and exploring introducing a new system for booking referrals via the Community EMIS system. Further data is awaited, including a capacity & demand review, before a trajectory can be agreed as to when the waiting time KPI will be met. It is hoped this can be agreed at the next steering group meeting in March.

A GP survey was carried out recently with the waiting time being the major concern for GPs as patients are going back to the practice to chase up appointments as well as concerns over the referral process and referral template. A response to the survey is being prepared through the MSK Steering Group, which will include a quarterly update for GPs around waiting time performance and shared learning.

The transition of the Community Services to Manchester University Hospital Foundation Trust (MFT) does provide significant opportunities to develop the Community MSK service further, given MFT currently provide the specialist element of the service.

Community Rehabilitation Service and Outpatients

Trafford's Community Rehabilitation service is comprised of 4 teams which are based in each of Trafford's neighbourhood and an outpatient rehabilitation team.

The service sees patients in their own homes and provides a comprehensive assessment of individual need which leads to the development of a patient centred rehabilitation programme, which aims to enable the patients to gain maximum independence with activities of daily living and mobility.

The rehabilitation programme runs for up to six weeks and is managed by occupational therapists, physiotherapists and experienced support workers. Community Outpatients Team also delivers Trafford's Stability Training and Movement Programme (STAMP). This programme provides 8 weeks of classes which focus on:

- Improving balance and stability
- Improving mobility and reducing the need for walking aids, where possible
- Provide strategies to reduce the risk of falling and support patients to introduce them into daily life.
- Highlight health improvement opportunities available in Trafford

In addition to supporting patients to remain at home and access self-management tools, the community rehabilitation teams also offers support for patients with declining health, including rehabilitation to maximise function where a chronic disease or its impact has significantly changed.

The team works with patients to develop advance plans, and work closely with district nurses, Community Neuro Rehabilitation Team, social care, and community matrons to ensure patients receive appropriate support in accordance with their wishes. This service includes support regarding provision of mobility and functional aids, and appropriate onward referrals.

<u>Current Demand</u>

Demand for community rehabilitation services is increasing. In Pennine Care's latest performance report (December 2018) it is reported that the number of referrals for Trafford's Community Rehabilitation Service has increased by 32% compared to the same period in 2017/18.

An increase in referrals has also been seen for Community Outpatients, with particular waits being reported for STAMP (Stability Training and Movement Programme) classes. At the end of December 2018 33 patients were waiting for outpatients rehabilitation (a reduction of 6 from the previous month) and 6 of which have been waiting over 18 weeks.

In addition to the natural growth in demand due to Trafford's aging population, the increase in demand for community rehabilitation highlights the impact of the successful introduction of the frailty index in General Practice. The frailty index was introduced into General Practice to improve the earlier identification of older people who are at high risk of adverse health outcomes, enabling preventative interventions such as focused rehabilitation to improve mobility to be provided ahead of an event such as a fall.

Trafford CCG and Trafford Council are committed to improving proactive management of frailty and in reducing the number of falls experienced by our residents. Subsequently, as more residents are being identified earlier a need was recognised for clearly articulated referral pathways between commissioned services and to ensure each service was being utilised by seeing the right patients, at the right time.
In October 2017, in response to national data which suggested that Trafford performs poorly with regards to the number of falls when compared to similar areas, the CCG began working closely with partner organisations across the Trafford healthcare economy to agree and implement a new falls referral management pathway.
Through collaborative design across all partners (including the CCG, Council, Fire and Rescue Services, Ambulance Trust, Age UK, Trafford Leisure and Pennine Care) the new referral pathway, coordinated via the Trafford Co-ordination Centre (TCC), ensures that as many patients as possible are accessing the preventative multi-factorial interventions set out in NICE guidance:

- strength and balance training
- home hazard assessment and intervention
- vision assessment and referral
- medication review

The increase in demand for community rehabilitation in Trafford can, at least in part, be attributed to successful implementation of this the frailty index and falls referral pathway as patients are directed to services earlier. Whilst meeting this demand remains an ongoing challenge for our community providers it must be noted that such schemes have ensured more of our residents age well and remain their independence for longer and thereby over time will support the reduction of urgent acute episodes of care.

Pennine Care continues to implement service improvements and initiatives to support the management of capacity and demand pressure. These include:

- An assessment day for all patients waiting over 18 weeks for STAMP classes. In addition to assessing patients this day was utilised to review the appropriateness of referrals received by the service and if any referrals could be supported via organisations such as Age UK or Trafford Leisure Trust.

- Implemented a project to encourage improved adoption of self-management by patients. Patients involved in this project are sent motivational messages by the service, encouraging participation in their at home exercise programmes. This is to support continued rehabilitation and improvement outside of the face to face programme delivered by the service. Improvement has been noted in those patients who have participated in this project.

- Begun to develop new ways of delivering STAMP education to compliment the programme, including by PowerPoint presentation and in through a patient handbook.

To ensure sufficient capacity is available to meet future need, the community rehabilitation service will be considered as part of the wider therapy review which will be undertaken as Trafford's Community Services transition to Manchester University Hospitals NHS Foundation Trust (MFT).

Community Neuro Rehabilitation Service

Trafford's Community Neuro Rehabilitation Service provides specialist rehabilitation to patients aged 18 or over who have an acquired brain injury or have neurological conditions within a community setting, predominately in a patient's home. The service delivered is provided by two pathway teams, stroke and neuro rehabilitation, who deliver care through a multidisciplinary approach. Each pathway team consists of (or has access to) a clinical neuropsychologist, physiotherapists, occupational therapists, speech and language therapists, dieticians and nurse specialists.

The Trafford Community Neuro Rehab Team (CNRT) has a pivotal role in facilitating a patient's discharge from acute and post-acute hospital based rehabilitation back into the community. The timeliness and coordination of this care, delivered through individualised care plans, is vital in ensuring patients are in acute services only when clinically necessary and for only as long as medically required and in supporting patients to maximise their rehabilitation potential and to remain at home for as long as possible. The service also accepts a high number of referrals from community and primary care for patients who require a re-referral to the service for specific rehab intervention.

<u>Current Demand</u>

Trafford's CNRT has longstanding extensive waiting times to access the service and for specific professions within the team. Specific professions within the team with the most significant waits are physiotherapy and occupational therapy.
In 2018 this issue was raised as a priority concern for both the CCG and Pennine Care where it was noted that immediate steps were required to stabilise the service is in the short and medium term, whilst opportunities for longer term sustainability were considered.

To provide some stability to the service in the short and medium term, a proposal was developed focusing on reducing the number of patients waiting to access the service, the length of time waiting and to explore opportunities to maximise the efficiency and clinical time of substantive team to manage the internal waiting list and existing caseload.

This proposal was presented to the CCG's Quality, Finance and Performance Committee on 2nd October 2018, where a non- recurrent investment of £106,348 was agreed to support the short-term employment of additional physiotherapy and occupational therapy capacity; the two areas with the greatest capacity and demand pressures.

To maximise the impact of the investment provided, it was agreed that the scope of this project would focus on:

1) Reduction of length of time waiting to access the service for first intervention
The investment agreed would be used to employ additional locum capacity to focus on the assessment and treatment of those patients who had been waiting the longest and were yet to receive any intervention. This would reduce the waiting time from the longest wait of 52 weeks to 10 weeks (one month over the 6 week access KPI for this service). This target has been modelled as the highest possible reduction with the envelope of the agreed additional investment.

2) Maximising operational capacity and efficiency
To run concurrently with the waiting list initiative, this review is taking a systematic approach to ensure that all avenues were being explored to maximise the team's clinical capacity and efficiency in managing the internal waiting list (where a patient is currently under the care of one specialism i.e. Speech and Language Therapist but is currently waiting to receive input from another professional such as physiotherapy) and those new referrals to the service outside of the waiting list.

To support the management of the internal waits within the service, Pennine Care are providing additional 6 week physiotherapy capacity and additional support workers to the substantive team.

Following the employment of two locum physiotherapists, the waiting list initiative started on 1st December 2018. To date the reduction in the number of waits for neuro physiotherapy have reduced significantly from 81 waits to 31 waits in a period of 8 weeks, which is ahead of estimated position of 65 waits. In the main this has been due to those patients waiting not requiring as intensive input following face to face assessment.

Following implementation there has also been a significant impact on the number of patients waiting and the length of time they are waiting; with patients waiting for first intervention for physio stroke having been reduced from 47 weeks to 26 weeks and

physio neuro form 41 weeks to 27 weeks within an 8 week period. There are currently no concerns regarding delivery against physio trajectory by the end of the project. Whilst the additional investment from the CCG and the extensive work undertaken by Pennine Care has had a significant impact, the challenges of capacity and demand pressures remain ongoing. To ensure continued improvement following the end of the initiative and sustainability in the long term, this service has been identified as a priority service for review and development during the transition of community services from Pennine Care to MFT, with governance for this programme ultimately reporting up to the Board overseeing the transition.

Pulmonary Rehabilitation

Pulmonary rehabilitation (PR) is a programme of exercise, education and personalised management planning for patients with mild to severe Chronic Obstructive Pulmonary Disease (COPD) whose function is affected by the disease. In Trafford, the PR service is provided by Pennine Care NHS Foundation Trust (PCFT).
The service is overseen by the respiratory physiotherapist Occupational therapists and support workers and provides courses of rehabilitation lasting 8 weeks, delivered from various venues across Trafford. Treatment includes an initial assessment to ensure that the patient is suitable for PR, to determine the baseline outcome measures, and to confirm the personalised plan for the individual patient.
Referrals are received from GPs, practice nurses; specialist nurses/AHPs within secondary care; secondary care consultants.
Pulmonary Rehab benefits patients by:

- improving muscle strength so oxygen can be used more efficiently
- supporting patients to better cope with being out of breath
- improving fitness and confidence
- improving mental health

<u>Current Demand</u>

The service is experiencing an ongoing increase in referrals (a yearly increase of 17% as of December 2018) which is contributing to current long waits. Of 275 referrals received up to December 2018; 22 were waiting longer than 18 weeks. In response the service has undertaken an internal capacity and demand review with the following findings:

- The referral criteria will remain the same with the service investigating whether all patients are clinically appropriate for PR and signposting to other services where necessary
- A reduction in length of the programme from 8 to 7 weeks and an increase in the number of patients accommodated into the programme sessions at some

locations (these changes remain within the parameters of national guidelines and are not expected to have any negative impact on patient outcomes)

- The long waiters are reviewed regularly and are offered alternative locations, with the exception of those whose clinical needs dictate they need to attend the programme on a hospital site
- Waiting times will continue to be monitored via PCFT internal governance & CCG performance, quality and information groups with escalation to HILG and CCG Performance and Contract Board if the waits/increase in referrals remain challenging
- Moving forward the service will be reviewed as part of the planned joint rehabilitation services review

Ascot House

Ascot House provides an intermediate care service with 36 beds available. The service runs under a Therapy led model, which includes physiotherapy, occupational therapy and social work support as required.

Avoidable hospital admission is prevented by the therapy team who provide frequent and intensive therapy to identified individuals via a step up facility

The team also provides short term therapy and rehabilitation to identified people who are medically well enough to be discharged from hospital, enabling them to return to their own address post.

Next Steps:

- To ensure sufficient capacity available in the services to meet future need, all the community rehabilitation services will be considered as part of the wider therapy review which will be undertaken as Trafford's Community Services transition to Manchester University Hospitals NHS Foundation Trust (MFT)