

How Barking, Havering and Redbridge University Hospitals NHS Trust are working to reduce the delay to diagnosis and improve care for Axial SpA



Axial SpA
works silently.
We don't.

BACKGROUND

At Barking, Havering and Redbridge University hospitals NHS Trust (BHRUT) we had effective existing Early Inflammatory Arthritis Clinics, Virtual Biologics Clinics and group nurse led biologics education sessions. However we had identified the following service issues:

- Variability in Axial SpA referral pathway
- No dedicated Axial SpA Clinics
- Under-reporting of inflammatory signs on MRI
- No Rheumatology patient database
- No automatic physiotherapy referral
- No formal education sessions for Axial SpA patients

OBJECTIVES

To address these issues we set a number of clear objectives:

- To improve quality and speed of suspected Axial SpA referrals
- Commence dedicated Axial SpA clinics
- Standardise inflammatory back pain MRI protocols and reporting
- Establish a patient database
- Formalise automatic referral pathway to Physio for all newly diagnosed Axial SpA patients
- Provide dedicated patient education

METHODS

We utilised various QI methodology techniques and undertook the following steps towards service development:

- Education sessions to GPs/MSK Physiotherapists/other AHPs
- Incorporated Rheumatology Pathways into Trust's revised e-referral tool
- Revised Axial SpA referral pathway
- Reviewed NICE/ASAS and BRITSpA guidance to identify audit standards
- Notes audit of rheumatology time to diagnosis
- Engaged with Radiology
- Brainstormed ideas for patient education using "Six Thinking Hats"

RESULTS

- Pathway agreed for Axial SpA to be referred via EIA
- Improved triage tools via revised e-referral tool
- Business case to purchase commercial patient database
- Notes audit for 40 Axial SpA patients completed: time to diagnosis from first rheumatology appointment average for BHRUT is a mean of 4 months (shortest 20 days, longest 375 days)
- Standardised inflammatory back pain MRI Protocol agreed with Radiology. Current delay to MRI reporting identified as 87.8 days
- Pre Pilot ran and Pilot agreed for physio-led online group education sessions

CONCLUSION

We found the QI training and tools extremely useful, enabling us to identify specific issues we wanted to address and then implement small changes (QI PDSA cycle) to address the objectives identified. The Pre Pilot of the content for the Group Education session received excellent feedback and provided useful feedback to improve the service further. One of biggest difficulties initially was collecting data in the absence of a database. Some of our key learning to date has been to set ourselves achievable goals and to pilot ideas where we have a strong instinct of the need and likely success.

ABBREVIATIONS: Axial SpA: Axial Spondyloarthritis; EIA: Early Inflammatory Arthritis; PDSA: Plan, Do, Study, Act; PIFU: patient initiated follow up; QI: Quality Improvement

RECOMMENDATIONS

