

Sheffield Axial SpA Team



Axial SpA works silently. We don't.

BACKGROUND

We established the Sheffield MDT in 2012 to grow and develop the axial SpA service. Our team of consultant, clinical nurse specialist and extended scope physiotherapist have evolved from running quarterly to twice monthly clinics but capacity remained limited. Overall 180/ 550 departmental axial SpA patients were looked after within our dedicated MDT team. We have a city-wide MSK e-referral hub; potential new axial SpA patients are consultant- triaged into the axial SpA clinic. One of the biggest issues is that whilst we have developed our MDT service, there is limited capacity. This means sometimes long waits for routine FU appointments, and restricted NP capacity. Audit data shows a 2 tier service – those outside the specialist service do not receive equity of care as those within it.

OBJECTIVES

- Our main goal is to improve equity of service for axial SpA patients across Rheumatology. To achieve this we needed to:
 - Understand our service - huge amount of data collection!
 - Increase capacity within the axial SpA service
 - Establish an axial SpA patient pathway for use with all patients.
 - Establish flare management/patient education pathways
 - Listen to our patient voice
 - Introduce an annual review form for axial SpA patients to standardise care across Rheumatology

METHODS

- Data collection – to understand current service; establishment of database to continually audit
- Increased clinic capacity - continual PDSA cycles to streamline to clinic flow
- Develop and test annual review form
- Patient & staff questionnaires
- Audit helpline for axial SpA patient contact

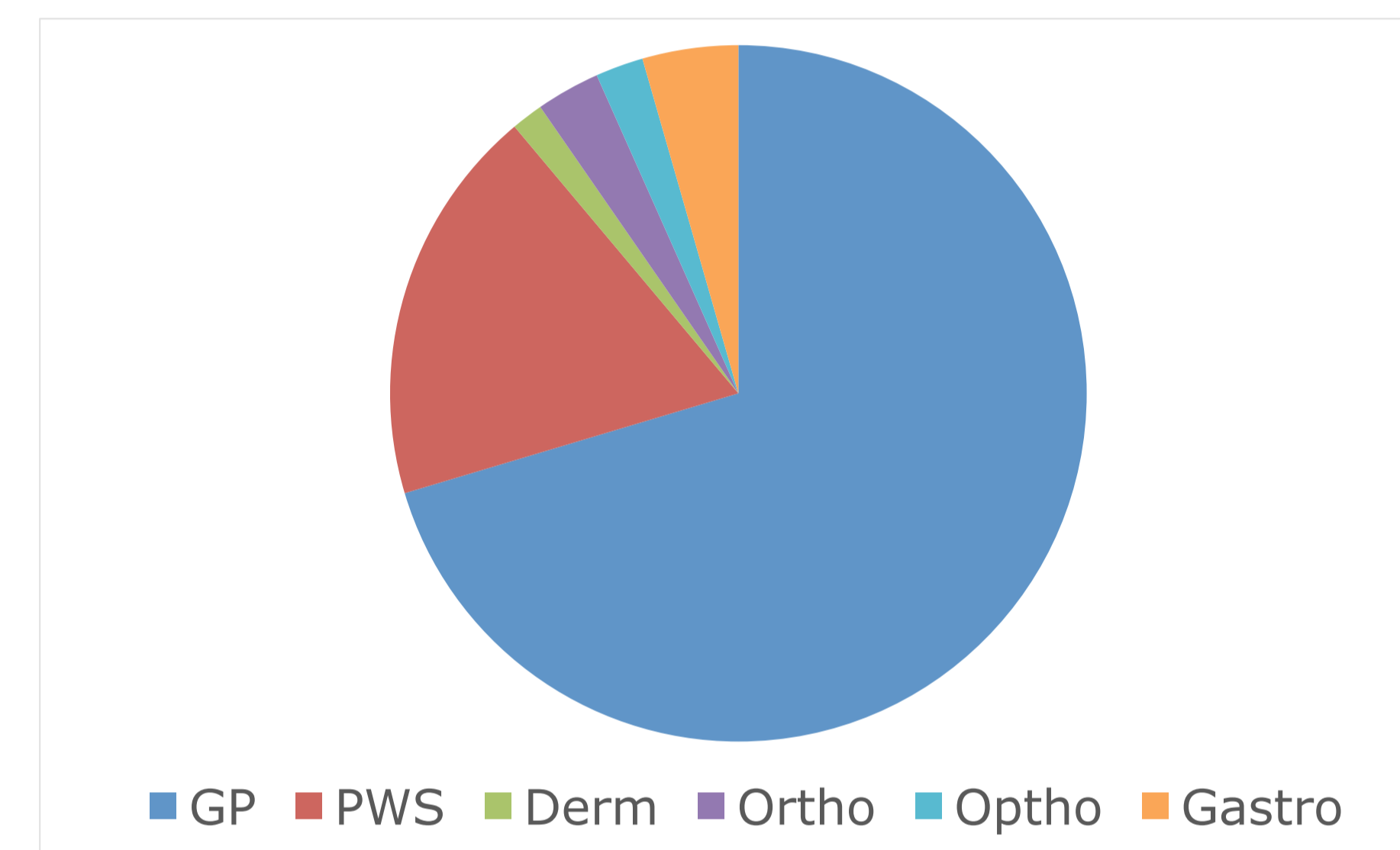
RESULTS

- Gathered lots of data which underpinned our knowledge of the service and from which we could drive changes
- Increased capacity to 330 in the axial SpA service
- Flare management slots implemented for all departmental axial SpA patients
- Draft of annual review form currently undergoing PDSA cycles

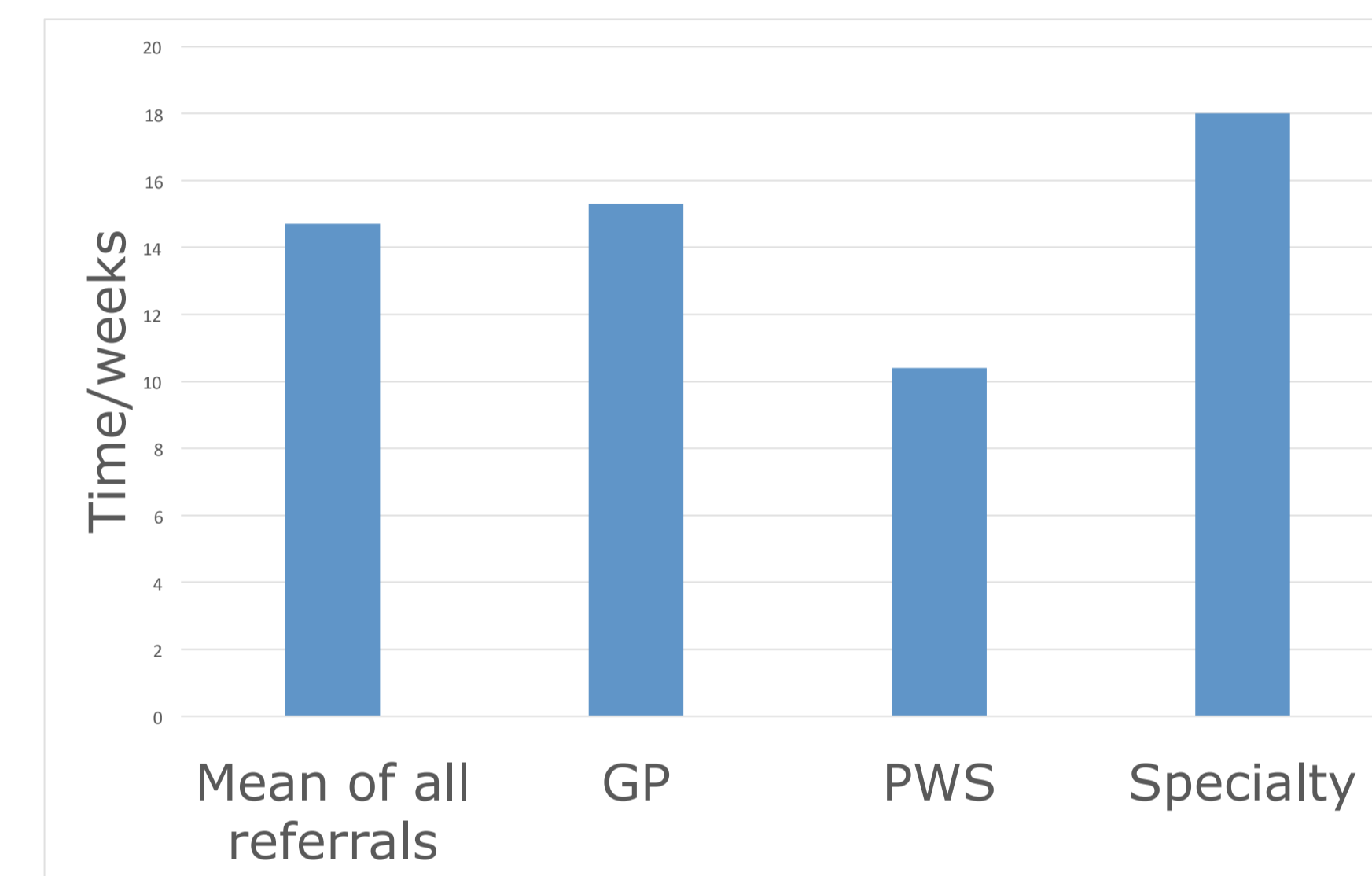
CONCLUSION

- We managed to achieve all of our initial objectives.
- Greater understanding of our service which has underpinned the need for continual data collection without which we could not have progressed
- Huge increase in capacity
- Closing gaps in inequity of service
- Next steps – to embed the annual review form across the department and re-audit patient outcomes once the annual review form is in place.

Source of referral for all NPs in the ESP led clinic (Nov2019-Nov 2021)



Average time from referral to NP appointment in the ESP led clinic (Nov 2019-Nov2021)



Total number of patients in MDT Service

