# Quality Improvement in the Axial SpA Service at Salford Royal

### BACKGROUND

Diagnostic delay in an ongoing challenge in Axial SpA. Reasons for this delay are multi-factorial and not all may be resolvable, however aiming to reduce this delay to diagnosis is crucial as any delay can leave those awaiting diagnosis prone to experiencing significant amounts of pain and functional limitation.

The Covid-pandemic has impacted our ability to follow up and support our Axial SpA patients. We are keen to ensure holistic care, supported self-management, timely follow up and optimal disease control as we reconfigure how our Axial SpA service runs post-pandemic.

# **OBJECTIVES**

(1) To increase FCP, GP and public awareness; improving early detection and including IBP pathway.

(2) To ensure axial SpA represented in pathway for rapid diagnosis, including screening and access to relevant diagnostic investigations.

(3) To offer a personalised, holistic assessment supporting self-management - knowing who can help with what. Informed, patient-initiated access to full MDT. Rapid access to medications and systems review for flares and annual review.

### METHODS

To support objective two and feed into objective one we have completed a survey of patients attending our Axial SpA clinic about their delay to diagnosis. We have recently implemented a new patient Axial SpA clinic as a test of change staffed by an appropriately trained physiotherapist following an agreed assessment protocol and with clear pathway in and out of this service.

We have completed a comprehensive review of our follow up services in Axial SpA. This has included acting as a host site for an online supported self-management programme as well as trialling ePROMs and initiating a PIFU service.

#### **OUR TEAM**



Dr Audrey Low – Consultant Rheumatologist <u> </u>Katie Porthouse – Specialist Physiotherapist Dr Mehgna Jani – Consultant Rheumatologist Paul Barratt – Consultant MSK Physiotherapist Will Gregory – Consultant Physiotherapist (Rheum)

**REFERENCES:** Gregory WJ, Kaur J, Bamford S, Tahir H. A Survey of Diagnostic Delay in Axial Spondyloarthritis Across Two National Health Service (NHS) Rheumatology Services. Cureus. 2022 Mar 30;14(3):e23670. doi: 10.7759/cureus.23670 Hay CA, Packham J, Ryan S, Mallen CD, Chatzixenitidis A, Prior JA: Diagnostic delay in axial spondyloarthritis: a systematic review. Clin Rheumatol. 2022, 10.1007/s10067-022-06100-7 Zhao SS, Pittam B, Harrison NL, Ahmed AE, Goodson NJ, Hughes DM: Diagnostic delay in axial spondyloarthritis: a systematic review and meta-analysis. Rheumatology (Oxford). 2021, 6:1620-1628. 10.1093/rheumatology/keaa807;

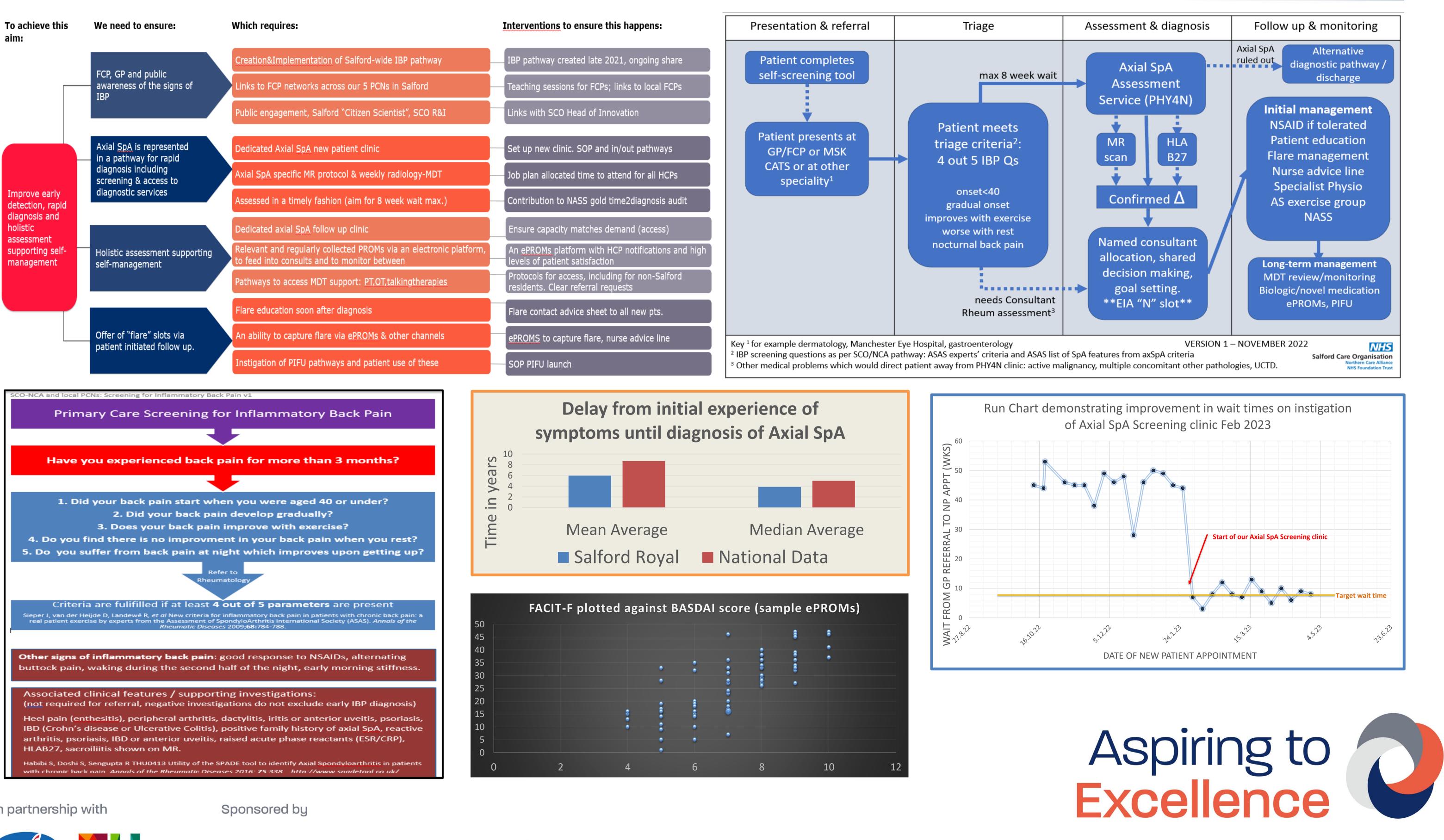


## RESULTS

Our 2021 survey data demonstrated that Salford was already delivering a substantially lower delay to diagnosis than UK average. However, our delay from initial appointment in Rheumatology to formal diagnosis was at risk of worsening due to NEIA audit pressures and changes to our access pathways. Run chart analysis shows our unacceptable wait times through autumn 2022; our new Axial SpA screening clinic has already made improvements.

Our ePROMs test of change has given mixed results. A success with regards to providing better understanding of our patients, but a failure as we also the vast amounts of data difficult to process when it does not link up with our electronic records.

We have now launched PIFU, with initial phase looking at those with stable disease and managed on NSAID level medication support.



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### CONCLUSIONS

Our time invested in the Aspiring to Excellence programme has allowed us to appreciate what we were already doing well, but more importantly to focus on improvements that would impact areas of importance.

We have renewed our pathways and optimised our use of staff to ensure rapid pathway to diagnosis as well as to improve our follow up service and assist in recovering from the Covid pressures.

Challenges remain, our new QI skills will support us in adapted to these and any new challenges to keep our Axial SpA service delivering the very best for our patients.











**Axial SpA** works silently. We don't.

Driving improvements in axial SpA care