

# NHS Fife: Service redesign in the Spinal clinic to improve patient engagement and self management.

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

## BACKGROUND

The Fife Rheumatic Diseases Unit is a small Rheumatology Team located in East Scotland. People with Axial Spondyloarthritis are mainly managed in the FRDU by the Consultant, Advanced Physiotherapist, Specialist Nurse and Pharmacist. We were conscious that there were often people from the spinal clinics referred to physiotherapy that did not attend. Spinal clinics felt chaotic and it was disappointing when people were not achieving their goals. We had previously tried some service redesign with mixed results. We are a committed and enthusiastic Team keen to facilitate changes that ensure the best possible service delivery.

## OBJECTIVES

Our aim was to improve patient engagement and self management of AxSpa flares. We are also aiming to provide an efficient and effective standardised service.

We utilised quality improvement tools such as the driver diagram to identify the necessary components. Our goal was to improve availability and ease of access to physiotherapy. We worked to establish a pathway for flares and improve knowledge of AxSpa within the FRDU. It was all underpinned with patient education to facilitate self management. We developed a virtual MDT meeting to decide on the most appropriate management for patients. We wanted to standardise assessments, establish criteria for patient initiated follow up and audit this to ensure appropriate selection.

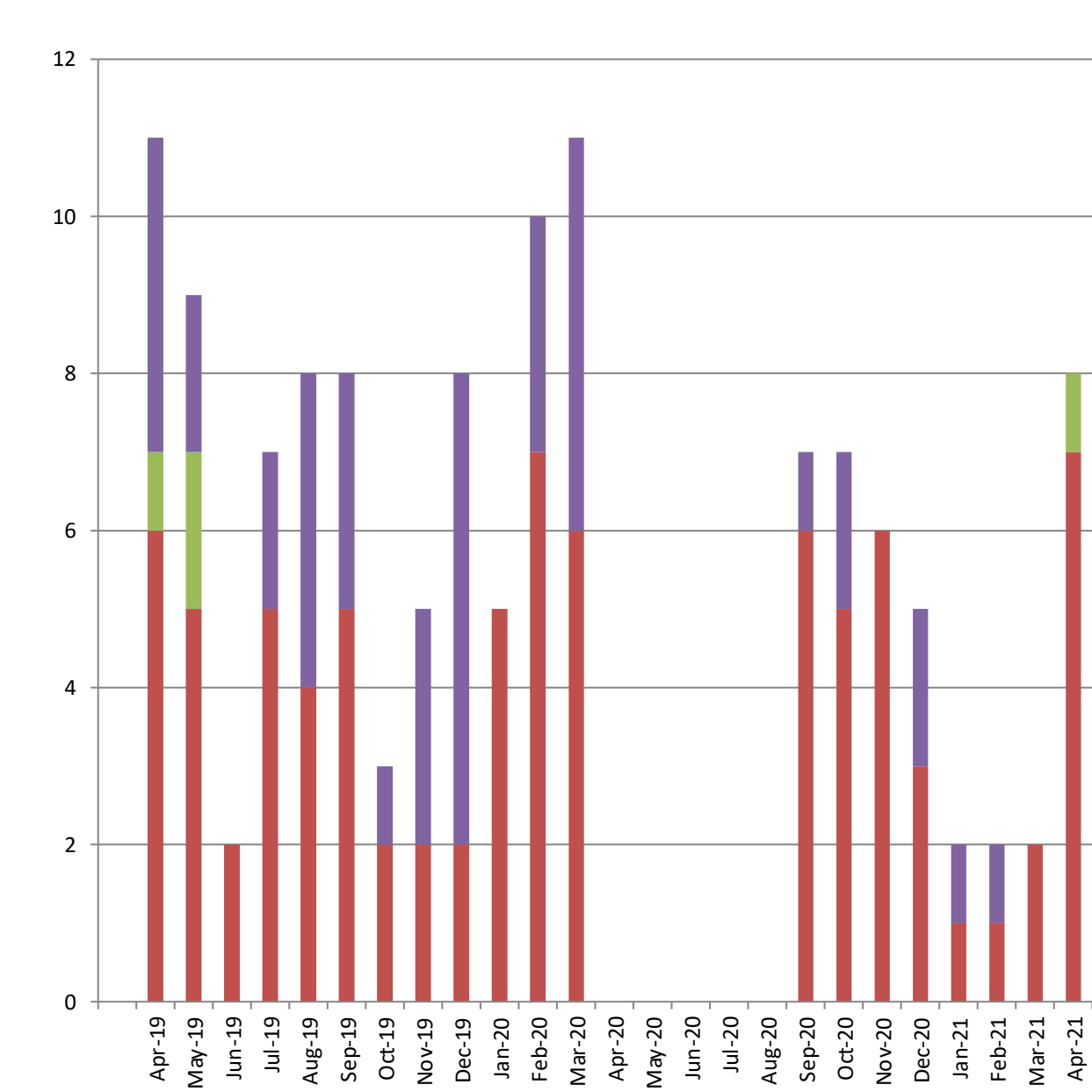
## METHODS

The appointment data was analysed to identify attendance at the spinal clinics and uptake of physiotherapy referrals. We changed the face to face clinic to only new patients and complex reviews, who were seen by the Consultant and Advanced Physiotherapist. Virtual clinics were set up with the Specialist Nurse and Pharmacist. A virtual Spinal MDT clinic was established. We developed an information pack and education session for wider Rheumatology Team.

## RESULTS

Attendance at physiotherapy appointments has increased from 60% of patients to 84.5%. Improved education at the first clinic appointment has improved understanding, engagement in physiotherapy and self management. The spinal MDT provides protected time to discuss patients, plan treatment and allocate future appointments. It provides an opportunity to learn from each other and this has resulted in high staff satisfaction. We have standardised the paperwork, agreed criteria for patient initiated follow up and the audit is still in progress.

Improved attendance at physiotherapy appointments

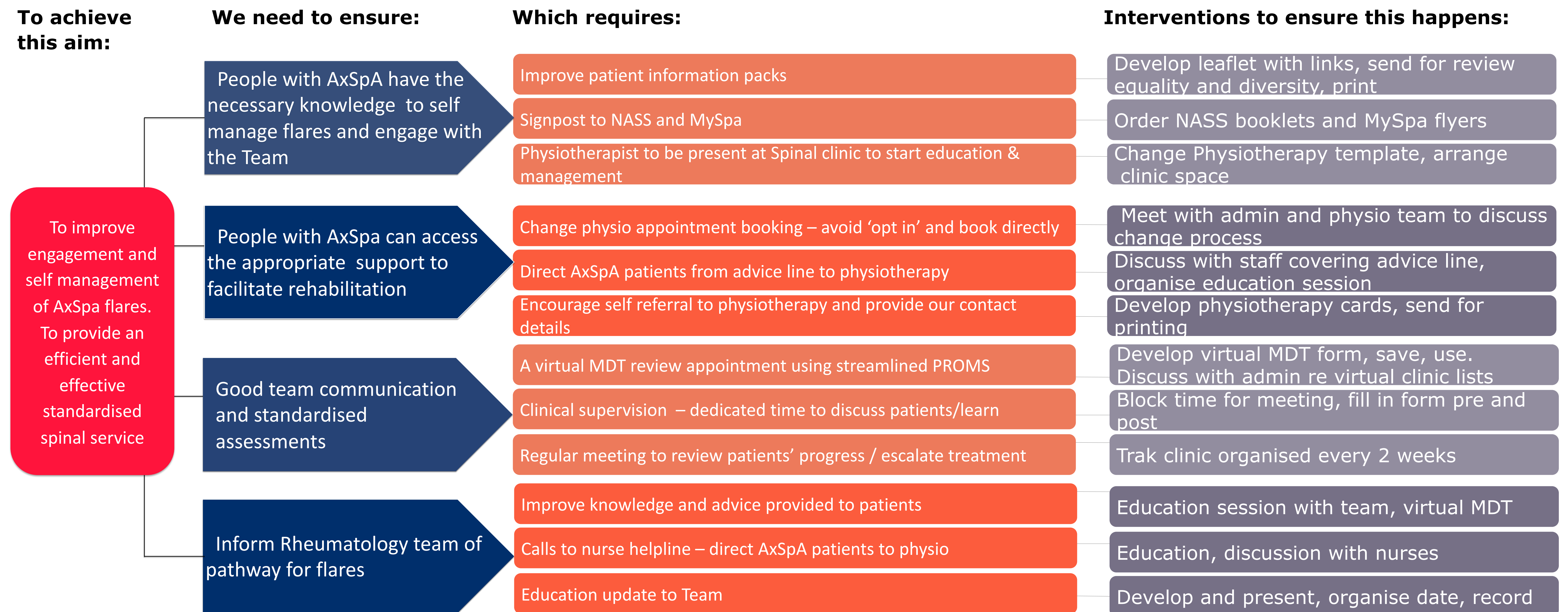


## CONCLUSION

We have improved our new patients' engagement and experience. We are now focusing on efficient and effective follow up for review patients. We believe that the changes will lead to improved patient outcomes and more patients moving to patient initiated follow up. It is too early to judge this outcome. The clinics have been severely impacted by the COVID pandemic, with limited access to clinics and physio. We have grown in confidence with our quality improvement skills and this has infiltrated other areas of our clinical practice

With acknowledgement of S Piotrowicz & K McMillan for their help with data gathering and analysis

## RECOMMENDATIONS



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