



Health Scrutiny Panel

12 March 2015

Report title	Musculoskeletal (MSK) Services Consultation	
Cabinet member with lead responsibility	Councillor Sandra Samuels Health and Well Being	
Wards affected	All	
Accountable director	Noreen Dowd, Interim Director of Strategy and Solutions	
Originating service	Wolverhampton Clinical Commissioning Group	
Accountable employee(s)	Sharon Sidhu	Solutions & Development Officer (Planned Care)
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Report to be/has been considered by	N/A	

Recommendation(s) for action or decision:

The Panel is recommended to:

1. Receive and note the Musculoskeletal (MSK) commissioning and consultation plans.
2. Comment on the proposed consultation plans

1.0 Purpose

- 1.1 To provide health scrutiny with an overview of the proposed musculoskeletal (MSK) commissioning and consultation plans.

2.0 Background

- 2.1 The Orthopaedic Community Assessment Service (OCAS) was originally established and managed by the PCT (pre CCG) to provide efficient and effective management of adult non-emergency musculoskeletal (MSK) patients registered with general practices within Wolverhampton. OCAS became part of the Orthopaedic Directorate at RWT in 2011 under Transforming Community Services.
- 2.2 The service was developed to improve the management of patients with MSK problems by ensuring appropriate and timely management of referrals through high quality triage assessment and management, and a source of accessible and expert advice on conservative management. Its other functions included ensuring patients were seen by the right person in the right place at the right time, minimising multiple steps or delays, and supporting the treatment of patients within the 18 week RTT targets.
- 2.3 Within the current system, the services that deliver MSK (OCAS, Physiotherapy, and Orthopaedics) are disjointed, inefficient and slow. There are many steps in the patient's journey which could be deemed unnecessary and this drives down efficiency in terms of time, capacity and cost.
- 2.4 The procurement and implementation of an integrated MSK service will provide a more streamlined and efficient service for patients. The development of a new service model could encompass and be extended to include all aspects of MSK care, including secondary care treatment which could be undertaken in a community setting. A new integrated MSK model could help facilitate an MDT (Multi-Disciplinary Team) approach to care planning with the skills and expertise of each clinician being accessed as needed in a streamlined efficient way.

3.0 Public Consultation

- 3.1 As part of any procurement process the CCG has a duty to engage with patients and the public on any proposed service changes, and ensure that any feedback is considered in the development of the service specification.
- 3.2 As part of the pre-engagement the CCG held a number of focus groups which were promoted through the following forums: Patient Participation Groups, Patient Partnership Database, Citizens Forum and the CCG website. In addition a pop-up shop was held in the Mander Centre during December 2014.
- 3.3 Feedback from the focus groups and pop-up shop has helped inform and shape our consultation document (see appendix 1). Stakeholder consultation will run for twelve weeks commencing on Monday 16 March 2015 and ending on Monday 8 June 2015, and will be available in hard copy and via the CCG website.

3.4 The table below provides an overview of the consultation plan.

Stakeholders	Event/Activity	Location and Date
Public and stakeholders	South East Locality workshop	19 March 2015 Bilston Town Hall 6.30pm to 8.30pm
Public and stakeholders	South West Locality workshop	24 March 2015 Linden House, Tettenhall 6.30pm to 8.30pm
Public and stakeholders	North East Locality workshop	26 March 2015 Lowhill Community Centre 6.30pm to 8.30pm
GPs	North East GP Locality Meeting	14 May 2015
Public and Stakeholders	City wide event workshop	15 May 2015 Linden House, Tettenhall 2pm to 5pm
GPs	South East GP Locality Meeting	27 May 2015
Public and stakeholders	Patient Participation Group (PPG) Chairs Meeting	28 May 2015
GPs	South West GP Locality Meeting	4 June 2015
Engagement with existing service users of MSK Services	Drop-in sessions Survey/questionnaire	Outpatient clinics - June 2015 (Dates TBA)
Public and stakeholders	Citizens Forum Meeting	TBC
Healthwatch and stakeholders	Joint Engagement Advisory Group (JEAG)	TBC
Public and Stakeholders	Consultation Document available online via CCG Website	16 March 2015 to Monday 8 June 2015
Public and Stakeholders	Consultation Documents and/or posters will be distributed to GP practices, libraries, health centres, pharmacies, outpatients and Patient Advice and Liaison Services (PALS).	16 March 2015

4.0 Financial implications

4.1 The key drivers for the development of an Integrated MSK service are to provide a local, accessible and cost effective service for patients.

5.0 Legal implications

5.1 Wolverhampton CCG is responsible for engaging with patients and the public regarding proposed changes to existing services.

6.0 Equalities implications

6.1 The Integrated MSK Service Specification will adhere to equalities legislation, a Equality Impact Assessment will be undertaken on the new proposed service.

7.0 Environmental implications

7.1 Not applicable.

8.0 Human resources implications

8.1 Not applicable.

9.0 Corporate landlord implications

9.1 Not applicable.

10.0 Schedule of background papers

10.1 Not applicable.