

This document should be used by clinicians to support the MSK Physiotherapy Triage and Assessment, and Outpatients AQP Physiotherapy pathway.

1. What is the reason for the new service?

One of Caring Together's ambitions is to introduce planned, simplified care pathways that ensure people get the care they need, when they need it. The new service has a simplified the referrals process giving patients improved access through more capacity and greater choice as well as making it easier for them to see the right healthcare professional first time. Patients will be able to refer themselves directly into the Triage service or be referred straight into an AQP physiotherapy service by their GP, dependent on their condition.

2. Who are the new providers?

The Clinical Triage and Assessment Service are being provided by an organisation named:

- **Inhealth Ltd**

The AQP outpatient community physiotherapy services are being provided by:

- **East Cheshire NHS Trust**
- **HS Physiotherapy Ltd**
- **Mediscan Diagnostic Services Ltd**
- **Premier Physical Healthcare Ltd**
- **Total Physiotherapy Ltd**
- **Trinity House Practice**
- **Water Lane Clinic**
- **AIM Physiotherapy Ltd**
- **Vernova Healthcare Ltd**
- **Physiofit Ltd**
- **Spire Healthcare Ltd**

3. When did the new services go live?

The AQP outpatients' community MSK physiotherapy services went live on 1st September 2017.

The Clinical Triage and Assessment service went live on 1st October 2017.

4. What will the pathway look like from Clinical Triage and Assessment through to the AQP Physiotherapy providers?

Please refer to appendix C and D of this document.

5. What is the process should a patient present at the GP practice?

Should a patient present at the GP surgery with an MSK physiotherapy problem, following assessment by the GP, the GP can either refer the patient directly into any of the above AQP Physio providers (providing patient choice), or to the MSK Clinical Triage and Assessment service should the GP feel that the patient requires further diagnosis such that, they feel the referral needs assessment by a senior physiotherapist (Extended scope practitioner) then referral can be made to In Health for Triage and Assessment.

(The referral form is the same to carry out either option) If using the form to refer to In Health then the GP is to indicate on the form that the referral needs triaging (because of diagnostic or treatment

uncertainty).

The patient will also have the option to contact the Clinical Triage and Assessment service via self-referral where they shall then be triaged, provided with advice / guidance on self-management, assessed face to face, or promptly offered an appointment for AQP Physio provider of their choice.

6. What are the contact details for the new MSK Clinical Triage and Assessment Service?

Inhealth Ltd, Patient Referral Centre, Sandbrook House, Sandbrook Way, Rochdale, Lancashire, OL11 1RY

(Treatment location tbc – agreement with premises within Eastern Cheshire is in progress)

Tel: 0333 200 4042

Referrals: Can be sent by fax to 0333 321 1954 or emailed to INL_generalenquiry-nwats@nhs.net

Self-referrals: Can be completed via paper format and posted to the above address (using free post envelopes provided at the practice), or completed via email and sent to the above email address, over the telephone using the above telephone number, or online:

www.greater-manchester-cats.nhs.uk/eastern-cheshire-triage

In order to assist with freeing up GP appointments, please encourage patients to self-refer where possible.

Exclusions to self-referral are if the patient is experiencing the following symptoms:

- changes in their bladder and bowel habits
- has a hot swollen joint
- constant severe pain and is unable to find relief
- weakness, pins and needles, loss of feeling
- unexpected weight loss

Exclusions of which patients the MSK Triage and Assessment service is not permitted to see is outlined in Appendix A of this document.

7. What are the locations where the AQP providers will be providing treatment from?

East Cheshire NHS Trust

Congleton War Memorial
Handforth Health Centre and Clinic
Knutsford Community Hospital
Poynton Health Centre
Waters Green Medical Centre
Wilmslow Health Centre

Tel: 01625 661 875

Referrals: Can be sent by fax to 01625 661482 or emailed to ecn-tr.therapyreferral@nhs.net

HS Physiotherapy Ltd

Address and Contact details to follow *(hold off making referrals until location confirmed)*

Mediscan Diagnostic Services Ltd

Wilmslow Health Centre, Chapel Lane,
Wilmslow, SK9 5HX
Tel: 0161 820 1123

Referrals: Can be sent by EMIS Web,
faxed to 0161 820 1118 or emailed to
mdsl.physiotherapy@nhs.net

Premier Physical Healthcare Ltd

Readesmoor Medical Centre
Watersgreen Medical Centre
Chelford Surgery

Meadowside Medical Practice
Referrals: Can be sent by email to
premier.therapy@nhs.net

Total Physiotherapy Ltd

Address and Contact details to follow (*hold off
making referrals until location confirmed*)

John Honey Physiotherapy

Trinity House Practice
150-152 Cumberland Street,
Macclesfield, SK10 1BP

Tel: 01625 500777

Referrals: Can be sent by fax to 01625 616 161,
NHS email address to follow

Water Lane Clinic

106 Water Lane,
Wilmslow, SK9 5BB

Tel: 01625 252475

Referrals: Can be sent by fax 01625 548 515 or
frances.west1@nhs.net

AIM Physiotherapy Ltd

Holmes Chapel Health Centre, London Rd,
Holmes Chapel, Crewe, CW4 7BB

Tel: 01477 536073

Referrals: Can be sent by email to
ecccg.aimphysio@nhs.net

Physiofit Ltd

4 Trafford Road
Alderley Edge, SK9 7NT

Tel: 01625 590 444

Referrals: Can be faxed to 01625 586774

Spire Healthcare Ltd

Spire Regency Hospital
West Street, Macclesfield,
Cheshire, SK11 8DW

Tel: 01625 505 412 / 505 406

Referrals: Can be sent by fax 01625 501800 or GP
Connect

Vernova CIC

Bollington Medical Centre
Wellington Road

Bollington

SK10 5JH

Tel: 01625 462 593

Referrals: accepted via EMIS web or via email
ECCCG.bollingtonmc@nhs.net

8. How does this impact on the process for the MCATS service?

The service will continue seeing existing patients currently on the waiting list for MCATS, but will no longer accept any new referrals (in order to complete assessment and treatment by 1st October 2017).

In the case of a patient in which you would have historically considered referral to MCATS either continue to investigate and manage in house (if appropriate), refer the individual directly to an MSK Physiotherapy (AQP) provider as of 1st September or if you feel they require more refinement before physiotherapy, then to make a judgement as to if the referral could be delayed until the MSK Triage and Assessment service is available from 1st October 2017. The 3rd choice- would be to refer to secondary care consultant colleagues.

9. Is there an exclusion criterion of which the Clinical Triage and Assessment, and AQP Physiotherapy services will be following?

Yes, each of the two service models has an exclusion criterion. Please refer to appendix A and B of this document.

10. What happens if the previous MSK physio provider is no longer providing services in our local area (practice)?

Patients can be referred to any provider registered as an AQP. The providers would be keen to provide services and either you can contact them directly or discuss with Lucy Price lucyprice2@nhs.net at the CCG.

11. How will we know about the quality of providers and who we should refer to?

As part of contractual requirements, all providers will be expected to adhere to local policies and provide evidence of compliance to the CCG. This includes information governance, safeguarding children and adults, quality outcome measures, patient experience, as well as complaints.

12. Who will be providing specialist treatment?

All specialist treatment will be provided by East Cheshire NHS Trust. This treatment is based on what has been listed as exclusion within Appendix B of this document.

13. What is the process should a patient wish to raise a query / complaint / or concern?

For enquiries please contact us either via;

Post: NHS Eastern Cheshire CCG, 1st Floor, West Wing, New Alderley House,
Victoria Road, Macclesfield,

Cheshire, SK10 3BL

Tel: 01625 663 477

Email: ecccg.generalenquiries@nhs.net

Online: www.easterncheshireccg.nhs.uk/Contact-Us

***** End *****

Appendix A:

Exclusion Criteria – MSK Clinical Triage and Assessment Function

- People who require emergency treatment (immediate, serious and life threatening)
- Patients with non-mechanical pain: constant, progressive, not related to posture/activity
- Patients with red flag symptoms, e.g. cauda equina, systemically unwell, significant unexplained weight loss, suggestions of serious infection or malignancy
- Patients presenting with unexplained weight loss
- Patients with widespread neurology with or without upper motor neuron signs
- Patients in their own homes that do not meet the criteria for domiciliary care (i.e. are housebound whether this short term post op or long term). Providers would be expected to link with existing community teams in case patients were already receiving input from them.
- Acute joint injections will be provided at the point when a patient is seen and it is appropriate to do so and is part of a management plan. Patients, requiring joint injections as part of palliative care, should be referred back to appropriate services. GPs should not refer to the service primarily for an injection and should perform this themselves (under the DES) or refer to another practice (under the LCS)
- Patients post amputation (if specialist equipment not available).
- Patients who have undergone extensive , complicated surgery , as defined by the operating consultant for an orthopaedic or rheumatological condition which requires specialist intervention
- Patients requiring specialist intervention for women's health problems (except symphysis pubis dysfunction).

Appendix B:

Exclusion Criteria – AQP Outpatient Community MSK Physiotherapy

- Patients who are not registered with an Eastern Cheshire CCG GP practice
- Patients who require specialist physiotherapy within the following defined areas as deemed appropriate:
 - Rheumatology (excluding musculoskeletal disorders that are not as a direct result of their rheumatological condition or where AQP deemed appropriate by the consultant rheumatology service)
 - Women's Health (except symphysis pubis dysfunction)
 - Widespread neurology with or without upper motor neuron signs

- Post amputation (if specialist equipment is not available)
- Respiratory Conditions
- Neurological Conditions

- **Complex / specialty MSK Conditions, which are defined as:**

- Extensive, complicated surgery / revision surgery / post op complications as identified by referring consultant
- Complex fractures / complex soft tissue injuries / multiple traumas as identified by referring consultant
- Children with developmental or neurological conditions that may impact on the presenting problem (these services can be accessed from the specialist community paediatric physiotherapy team)
- If the patient has been seen by the MSK AQP Physiotherapy service (any site, any provider) for the same condition within 6 months following discharge, unless the referrer can demonstrate that there is a significant change in the condition. Patients must be adhering to previous self-management advice.
- Patients in their own homes that do not meet the criteria for domiciliary care (i.e. are housebound whether this short term post op or long term)
- People who require emergency treatment
- Patients who are primarily being referred to the service for an injection
- Patients, requiring joint injections as part of palliative care, should be referred back to appropriate services

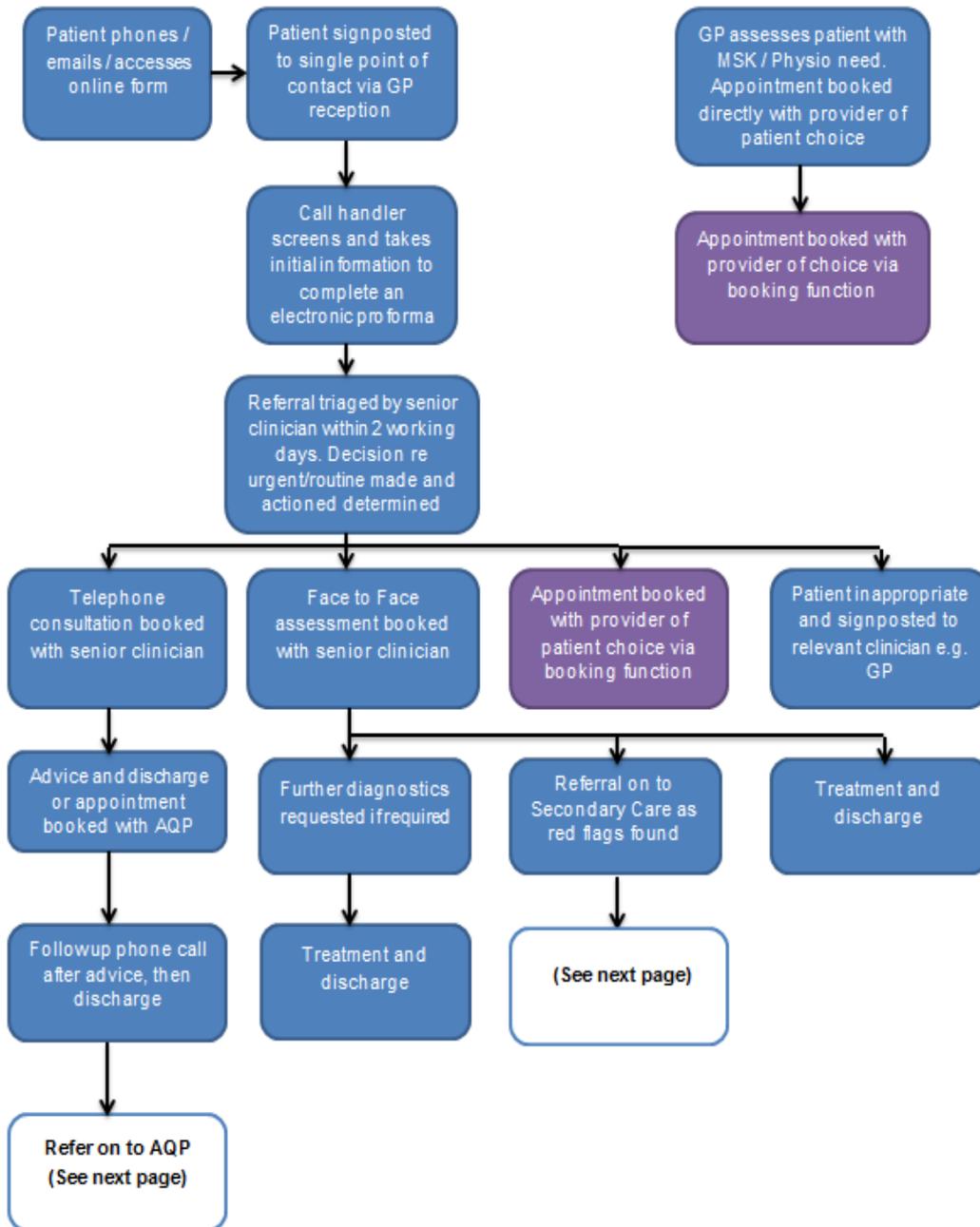
All of the following patients should be assessed for red flag symptoms by a Medical Professional i.e. GP

- Patients with non-mechanical pain: constant, progressive, not related to posture/activity
- Patients with red flag symptoms, e.g. cauda equina, systemically unwell, significant unexplained weight loss, suggestions of serious infection or malignancy.

Appendix C: (From 1st October 2017)

MSK Triage and Outpatient Community Physiotherapy Service

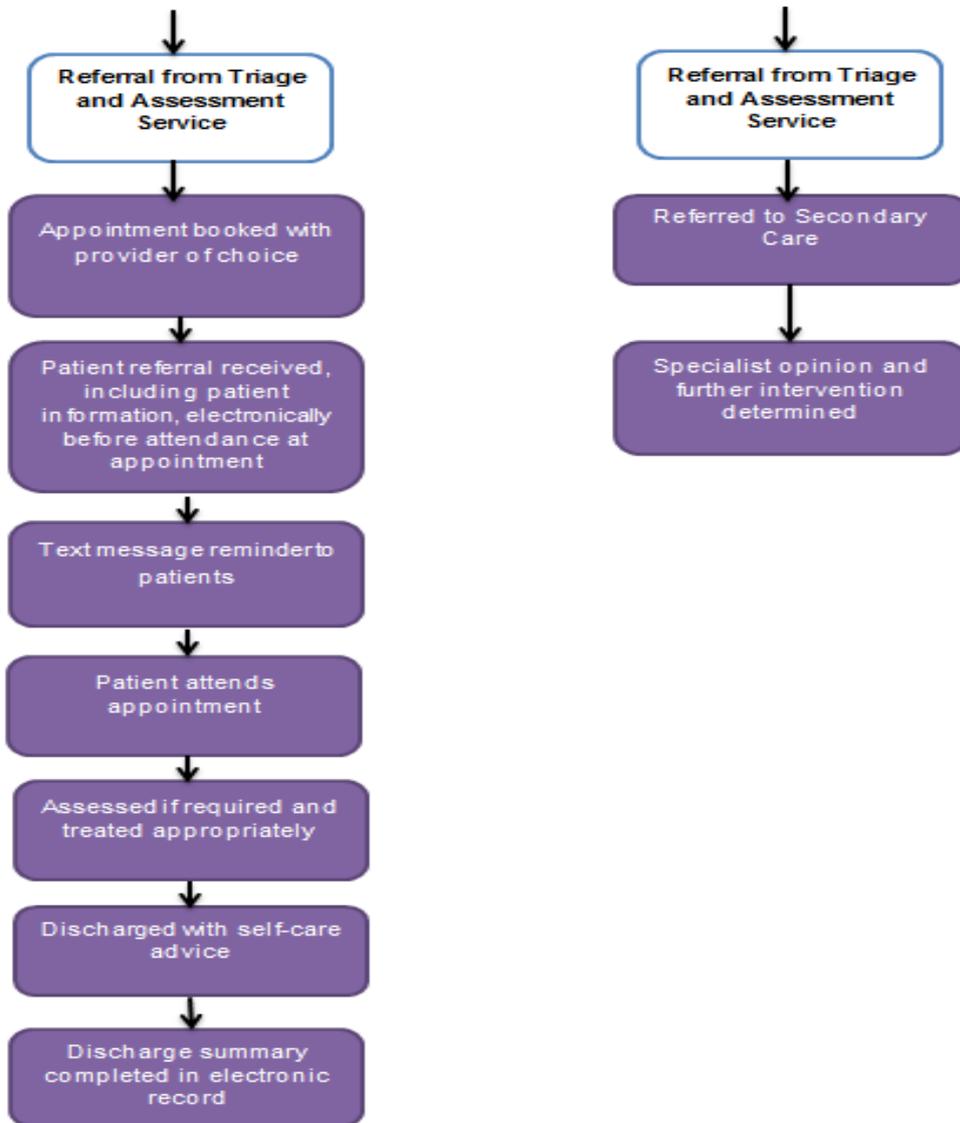
MSK Triage and Assessment Service Flow Chart



Taken from version 11 of the Clinical Triage and Assessment Service Specification

Appendix D (From 1st September 2017)

Outpatient Community Physiotherapy Flowchart



Taken from version 8 of the AQP Outpatients Community Physiotherapy Service Specification