

**Greenwich Circle Musculoskeletal
(MSK) Service**

Healthwatch Greenwich Report

June 2018

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Executive summary

Introduction

In 2016 Greenwich Clinical Commissioning Group (CCG) procured a new contractor to provide an integrated Musculoskeletal (MSK) service. The contract to provide this service was awarded to Circle Health who also run hospitals, rehabilitation & health services, both independently and for the NHS. Circle Health became the service provider for MSK services as of April 1st 2017.



Healthwatch Greenwich, working with Greenwich CCG, Royal Borough of Greenwich and Circle MSK have been monitoring the implementation and delivery of the new Circle MSK contract. We have been attending CCG contract monitoring meetings, Circle MSK clinical steering group meetings, have carried out a series of Enter and Views to the Circle MSK Community hub at Eltham Hospital, and a series of focus groups to enable MSK patients to share their experiences.

Methodology

Healthwatch Greenwich gathers people's experiences of services using detailed qualitative information collected from individuals. We do not gather large scale quantitative information. Over the course of ten months, we used a variety of different methods to collect detailed information about people's experiences of using the new Circle MSK service. This included:

Online survey:

We produced an online survey targeted at patients of the service.

Enter and View visits:

We carried out five Enter and View visits over the course of several months. Four of these were to the new Circle MSK Hub at Eltham Community Hospital and one was to the Physio Clinic run by Lewisham and Greenwich NHS Trust at Queen Elizabeth Hospital.

Focus Groups:

We ran three focus groups aimed at bringing together Circle MSK service users and patients to gather more in depth information.

CCG contact monitoring meetings:

We have been attending contract monitoring meetings held by Greenwich CCG with Circle MSK, to better understand progress during the implementation period.

Social media and ebulletin requests for information:

In addition to the online survey, we also pushed out regular tweets and emails asking people to get in touch with us and share their experiences of the service.

Limitations

This report is based on a small sample size. In total, through our variety of different methods, we spoke to or heard from around 65 people. As with all of our research, we focus on in-depth qualitative reports. That said, we were disappointed with the number we managed to speak to over the year. We attribute this to a number of factors:

- MSK services are relatively specialist and the proportion of the population who are accessing the services at any one time is relatively small.
- The majority of people who did respond were happy with the service. Circle's own patient feedback process identifies a 95% satisfaction rate. Whilst this is of course positive, it does sometimes make gathering information more difficult. We often find that poor services illicit a greater volume of feedback.
- We produced 3000 leaflets with our contact details and dates of focus groups, designed to go out with Circle MSK's stage one and/or two letters over a two to three month period. Unfortunately, these were not sent out consistently and we only received contact from one person who had received a leaflet.
- We have been exploring with Circle MSK the possibility of gaining consent to contact their patients directly. However, this has so far not been possible.

Key Findings

Pros

- Light, clean and purpose-built premises.
- Efficient model of delivery reducing delays in treatment in most cases.
- Model is potentially replicable in other health areas, e.g. Mental Health.
- Very positive experiences of treatment, clinical and other staff.
- 95% of Circle's patients would recommend to friends and family.



- Genuine desire on the part of the provider to listen to patients and adapt the service to improve experiences.

Cons

- Administration can be patchy, with letters occasionally not being received, telephones sometimes difficult to get through.
- Patients with more complex needs occasionally struggle to understand and navigate the service.
- Lack of understanding from the general public about why they have to go through the service (when they're used to direct referrals to clinicians).



Recommendations

Premises

- **Recommendation 1:** Implement a children's area (e.g. a maze table or similar) in the waiting area.
- **Recommendation 2:** We are pleased to see Circle MSK are considering our previous recommendation regarding patient confidentiality at the reception desk (see Service Provider Response below) and we recognise the difficulties involved in changing the layout of the space, however until something more permanent can be implemented, we recommend a sign for patients clearly stating that they can speak to someone in private if they prefer, and space being made available for this.

Appointment booking/referral

- **Recommendation 3:** All correspondence should be printed at a minimum of 12pt font and any generic information should be made available in both large print and easy read formats.
- **Recommendation 4:** All core information should be available in multiple languages and clearly advertised in both the Hub reception area and referenced on all correspondence to patients.
- **Recommendation 5:** Circle should provide a wider range of methods for communication with patients beyond telephone calls. Ideally a patient would be able to at least choose to call, email, text, or write to book an appointment. In addition, Circle should look into providing an online chat or video consultation process for those that require it.

- **Recommendation 6:** Circle should attempt to confirm receipt of the stage one (and stage two) letters, if no contact is made by the patient within 2 weeks of the letter being sent out (prior to discharging back to GP).
- **Recommendation 7:** Notes should be attached to patient records to highlight any access requirements. These should make specific reference to permissions for family members to speak on the patients' behalf (for example, in cases where the patient may be deaf or not have the capacity to understand). We understand that Circle are working on providing additional training for staff on this issue.
- **Recommendation 8:** Circle should look at implementing a case support worker/care coordinator system for patients with more complex needs (for example, for those with disabilities and poor mental health). This coordinator can then remind patients about upcoming appointments in the most accessible manner and help to coordinate with other specialists and health care teams as appropriate. An example of a similar (although more short term) approach is the Greenbrook Patient Champion based at the Urgent Care Centre.
- **Recommendation 9:** The appointment choices available should be made more explicit, and clearer explanations of why choices may be limited be provided as appropriate. Venue choices for each major treatment option should be publicised in Circle literature (for example, an accessible leaflet handed out by the GP) to increase awareness of the choices available.

Treatment

- **Recommendation 10:** Circle should look into publishing performance data online, to demonstrate the total number of referrals, pathways identified (e.g. PhysioLine, physiotherapy, secondary treatment) and waiting times.
- **Recommendation 11:** Circle should continue to ensure that each patient is given basic, interim, advice on how to manage their symptoms at, or shortly after, the first appointment.

Overall service satisfaction

- **Recommendation 12:** Circle should consider sending out a follow up feedback request forms to patients, during treatment and/or after discharge.

Introduction

In 2016 Greenwich Clinical Commissioning Group (CCG) procured a new contractor to provide an integrated Musculoskeletal (MSK) service. The contract to provide this service was awarded to Circle Health who also run hospitals, rehabilitation & health services, both independently and for the NHS. Circle Health became the service provider for MSK services as of April 1st 2017.

The new model was designed to provide efficiencies in the system, save money for the CCG and improve outcomes for patients. Circle MSK provide services for NHS patients who have MSK problems. This includes problems with the muscles, joints, bones, tendons, ligaments, some nerve-related conditions and associated pain. All patients registered with a Greenwich GP with conditions that require physiotherapy or planned orthopaedic surgery are now referred into the service by the GPs. Following a fast turnaround (48 hours) clinical triage process, Circle MSK directs patients towards the most appropriate place to receive the treatment they require (for example, physiotherapy, podiatry and/or orthopaedic surgery).

Healthwatch Greenwich, working with Greenwich CCG, Royal Borough of Greenwich and Circle MSK have been monitoring the implementation and delivery of the new Circle MSK contract. We have been attending CCG contract monitoring meetings, Circle MSK clinical steering group meetings, have carried out a series of Enter and Views to the Circle MSK Community hub at Eltham Hospital, and a series of focus groups to enable MSK patients to share their experiences.

Strategic drivers

The key strategic drivers for Healthwatch Greenwich's intervention include:

- The implementation of a new model of delivery, changing the way patients are able to access a range of musculoskeletal services including physiotherapy, podiatry and elective orthopaedic surgery.
- Initial concern from a variety of people and interest groups in the award of an NHS service to a private health care provider*, leading to additional scrutiny from Greenwich CCG and Royal Borough of Greenwich Healthier Communities and Adult Social care Scrutiny Panel during the mobilisation and implementation phase.

*N.B. Healthwatch Greenwich hold a neutral stance with regards to private/public providers of healthcare. We are instead concerned with the quality of patient experience.

Methodology

Healthwatch Greenwich does not seek to provide large scale, demographically balanced, quantitative research. Instead we gather an understanding of people's experiences of services using detailed qualitative information collected from individuals. Over the course of ten months, we used a variety of different methods to collect detailed information about people's experiences of using the new Circle MSK service. This included:

Online survey

We produced an online survey targeted at patients of the service. The survey was distributed via several Healthwatch Greenwich ebulletins and through our social media accounts (Twitter, Facebook and LinkedIn). The volume of responses was limited but provided good insight into people's experiences.

Enter and View visits

We carried out five Enter and View visits over the course of several months. Four of these were to the new Circle MSK Hub at Eltham Community Hospital and one was to the Physio Clinic run by Lewisham and Greenwich NHS Trust at Queen Elizabeth Hospital. As with all of our Enter and Views, we produced a patient questionnaire, gave a clear explanation to patients on who we are and why we were carrying out these visits, and made it clear to any respondent that they could withdraw consent for their information at any time. We also created an observation form for Authorised Representatives to complete, which gathered their view of the service from a patient's point of view.

Focus Groups

We ran three focus groups aimed at bringing together Circle MSK service users and patients to gather more in depth information. Focus groups are designed to be in depth conversations with a small number of service users, drilling into the detail of their experiences. In total, eight people contributed to the focus groups.

CCG contact monitoring meetings

We have been attending contract monitoring meetings held by Greenwich CCG with Circle MSK, to better understand progress during the implementation period.

Social media and ebulletin requests for information

In addition to the online survey, we also pushed out regular tweets and emails asking people to get in touch with us and share their experiences of the service.

Leaflets distributed with Circle letters and through the Eltham Hub

We produced 3000 leaflets (See Appendix 2) designed to be sent out with Circle MSK's stage two letters - letters patients receive after their initial appointment. The leaflets held our contact details, invited people to share their experiences with us and publicised the dates and venues of our three focus groups. Unfortunately, it appears that these leaflets did not go out in time to attract people to the focus groups.

Limitations and Weaknesses

Making Contact

Due to patient confidentiality and the difficulties inherent in sharing patient information, it was not possible to make contact with patients who had been through the Circle MSK service. As a result, and due to the nature of the appointments at the Eltham Hub, most of the people we spoke to were in the early stages of their engagement with Circle. This was mitigated slightly by the online survey and focus groups where we received a small number of responses from people who had begun or completed receiving treatment.

Sample Size

This report is based on a small sample size. In total, through our variety of different methods, we spoke to or heard from around 65 people (approximately ten people completed our online survey, eight people attended our focus groups and the remaining people were either spoken to during Enter and Views or contacted us directly. As with all of our research, we focus on in-depth qualitative reports. That said, we were disappointed with the number we managed to speak to over the year. We attribute this to a number of factors:

- MSK services are relatively specialist and the proportion of the population who are accessing the services at any one time is relatively small.
- The majority of people who did respond were happy with the service. Circle's own patient feedback process identifies a 95% satisfaction rate. Whilst this is of course positive, it does sometimes make gathering information more difficult. We often find that poor services illicit a greater volume of feedback.

- We produced 3000 leaflets with our contact details and dates of focus groups, designed to go out with Circle MSK's stage one and/or two letters over a two to three month period. Unfortunately, these were not sent out consistently and we only received contact from two people who had received a leaflet.
- We have been exploring with Circle MSK the possibility of gaining consent to contact their patients directly. However, this has so far not been possible.

We will be continuing to monitor the service over the next 12 months, including carrying out further Enter and Views and attending CCG contract monitoring meetings.

What is an Enter and View?



Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families, and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists, and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit. In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC, where they are protected by legislation, if they raise a concern. During our Enter and Views we always check with onsite staff regarding the ability of individuals give informed consent.



Service Details

Service information * Information received from the service provider

Service Provider:	Circle Musculoskeletal (MSK) Greenwich ¹
Service address	Eltham Community Hospital, 30 Passey Place, London SE9 5DQ. Additional services delivered by various providers including Oxleas NHS Trust and Lewisham and Greenwich NHS Trust.
Contact telephone:	020 3893 8382
Contact email:	msk.greenwich@nhs.net
Number of clinical staff:	19 clinical staff including Consultants, GPs, Physiotherapists and Extended Scope Practitioners
Number of patient referrals:	*Initially circa 2500 per month to Circle MSK service, this has now reduced to around 2000 per month.
Opening hours	
Monday:	07:30-17:30
Tuesday:	07:30-17:30
Wednesday:	07:30-17:30
Thursday:	07:30-17:30
Friday:	07:30-17:30
Saturday:	09:00-17:00
Sunday:	Closed
Services & clinics available:	
<p>ESP clinic for MSK Assessment and Treatment, Telephone Physiotherapy assessment and treatment, GPwSI clinic for complex MSK Conditions, Consultant Rheumatology Clinic, Consultant Pain Clinic, Consultant Orthopaedic Clinic.</p>	

*The Circle MSK service initially around 2500 referrals a month, this has since levelled out around 2000 referrals per month as originally expected.

Findings

Premises

External



Eltham Hospital is a newly built community hospital set back from the street. Five minutes walk from the main high street. The site is clearly signposted and well served by several bus routes from different areas of the borough. There are a limited number of disabled parking bays at the back of the building. Level entry and step free access. Drop off and pick up point in front of the main entrance. There is a local pay and display car park across the road and another car park by Sainsbury's five minutes walk away.

Internal

The MSK service shares the building with a number of other services, including two separate GP practices, A GP Access Hub (out of hours), a frailty unit, an intermediate care unit (operated by Oxleas NHS Trust on the second floor) and a new imaging department operated by Lewisham and Greenwich NHS Trust.

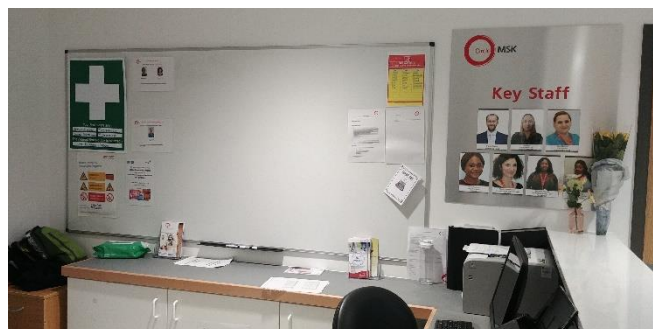


On our first visit, shortly after the service became operational, there was no clear signage to MSK waiting room. This was problematic as there are two waiting areas that patients need to pass through to get to the MSK waiting area (the main reception area and the imaging department).

Initially, there were also no notice boards or displayed information, making the waiting room somewhat stark. Following initial feedback from Healthwatch Greenwich, signage was improved, notice boards and a TV were installed and pictures were put up on the walls, making the waiting area more inviting.



The waiting area is bright and clean, with more than enough chairs for the volume of patients we witnessed on our visits. There is no natural light but the room is well lit, with a good sense of space and doesn't feel over crowded. Bins and hand anti-bac dispensers are available. On our visits there were some magazines to read on a table and leaflet stand with information.



Directly off the waiting area are a number of large, clean, well equipped consulting rooms and a recently opened minor surgery operating theatre.

Appointment booking

Circle operate a provisional booking system. A letter is sent out (post referral) inviting patients to contact them to arrange their initial appointment. Patients are offered a choice of date and time within a time frame. At this stage, a significant percentage of patients (around a fifth), do not respond to the letter. If patients do not reply within a fix time frame, they are discharged and will need to be referred into the service by their GP. The advantage of this system is that it significantly reduces non-attendance at appointment, with the MSK service running a small four or five 5% DNA (Did Not Attend) rate. This is compared to 15 to 18% DNA rates at GP surgeries and hospital appointments in other services. A low DNA rate means appointment utilisation is more cost effective.

<i>Observation Criteria</i>	Yes	No	Comment
<i>Wheelchair/Pushchair accessible?</i>	X		Fully accessible.
<i>Clear guidance on how to inform the surgery of your arrival?</i>	X		Clear signage, although the multiple reception desks can make access confusing

<i>Is there confidentiality/privacy at reception?</i>	X	The open counter is pleasant, and staff are friendly and approachable. However, the desk is close to the seating area, with no dividers, so all discussions with reception staff, including any personal information can be heard throughout the waiting room.
<i>Are Reception Staff approachable and friendly?</i>	X	All of the staff we met on all of our visits were friendly, approachable and went out of their way to ensure we had everything we needed.
<i>Is there a call system for appointments?</i>	X	Most of the consulting rooms are directly off the waiting area, so clinicians come out into the reception area to introduce themselves to the patient and escort them to the rooms. The waiting room is small enough for this to be a reasonable approach to notifying patients, but additional consideration should always be given to patients who may have hearing difficulties.
<i>Are waiting times displayed/patients informed?</i>	X	Waiting times are not displayed but the receptionist did notify patients of expected wait. On all four of our visits to the centre no patients had a wait longer than half an hour from arrival to being called in.
<i>Is the waiting room child friendly?</i>	X	There are no facilities for children in the waiting area.
<i>Is a hearing loop installed?</i>	X	There is a T-loop system installed and displayed clearly on reception desk.
<i>Toilets Available?</i>	X	There are male, female and accessible toilets available. These are well sign posted, clean and tidy.
<i>Are there clear notice boards with up to date information displayed?</i>	X	Notice boards have been installed and leaflets are available on a stand and at the reception desk.

<i>Is the information provided available in other formats?</i>	X	We did not observe notices informing patients about the availability of information in other formats. Information on health topics are displayed in the waiting area.
<i>Is signage clear and up to date?</i>	X	Signage is clear; however, it could be larger and more prominent for people with visual impairments, especially for the main reception desk.
<i>Is there a comments/complaints box available?</i>	X	No box displayed. All patients are asked to complete a feedback slip after their appointments.
<i>Are the names/photographs of staff at the service displayed?</i>	X	On our last visit, names of some staff were displayed, but not all of them.

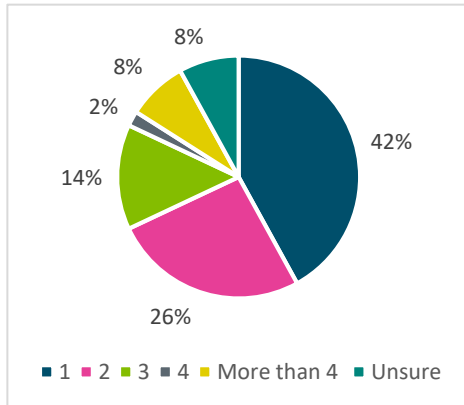


Circle MSK Hub reception area

Patient experience

This section includes the combined feedback from patients we spoke to during our Enter and Views and from those that completed our online survey.

Number of appointments



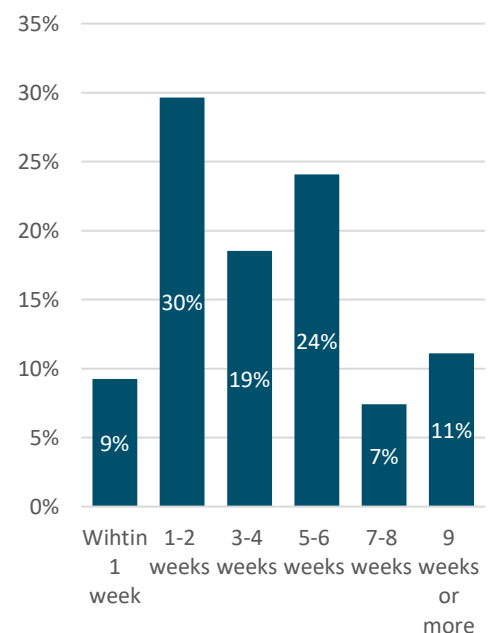
The majority of patients we spoke to were on their first or second appointment. Following referral into the service, patients generally receive their first clinical assessment or consultation at the Eltham hub. Some continue to receive treatment there, but a large proportion are referred on to other services (for example orthopaedic surgery or group physiotherapy at QE

Hospital) at other venues.

Waiting times

The time patients have had to wait from their initial visit to the GP to their first appointment with the MSK service varied considerably with some being seen within a week, to a handful who had to wait more than two months. However, the majority were seen within a month.

Some people felt that their condition had deteriorated from the time they went to the GP to the time they had their first MSK appointment (46%) compared to 37% who felt the condition had stayed the same and 7% who felt it had improved.



Case study - 'Julie'

Julie attended one of our focus groups specifically to share her positive experience of the Circle MSK service. Julie was referred to the MSK service by her GP for a problem with her shoulder that had persisted for around 15 years. Following the referral by her GP, the stage one letter arrived very quickly, offering a date, but clearly stating that she could change

the date if she preferred. From then it was only a week before she was in the room with a consultant, who helped immediately.

The consultant offered advice about exercises, posture and usage of her shoulder and Julie noticed a positive improvement straight away. The consultant called Julie regularly whilst she continued with her exercises. A few weeks later, the Julie had her second appointment with the consultant who referred her to a physiotherapist. The wait to her first appointment with the physio was only a month, and around four months from her initial referral.

Overall, Julie was hugely impressed with the service. In her own words: *“I was astonished at how caring they were. I felt they wanted to listen to me and they diagnosed me properly. The consultant explained everything to me.”* Julie had previously had negative experiences of services, having seen several clinicians, had ultrasounds and other tests, with no diagnosis or useful treatment *“before [the Circle MSK referral] it had all been guys in suits, being dismissive and not offering explanations”*.

Appointment booking



The appointment booking system used by Circle MSK minimises non-attendance and missed appointments. This is likely to have a knock impact of reducing waiting times for appointments and speeding up referral to treatment times.

Communication with the MSK service is an area that has been flagged with Healthwatch Greenwich on a number of occasions over the last year. The majority of people are content with the process, however there are various persistent issues, including appointment letters going missing or being delayed, and telephones not being answered. In addition, the accessibility of the letters (for example font size) has been raised as a concern.



“When I received my letter of confirmation for my referral to circle I also received information about Greenwich MSK. This information was printed on an A4 piece of paper and the font size was incredibly small and difficult to read. If people are unable to read it, they may miss important information about their appointment. It also includes a link to the Circle Bedfordshire MSK service website

(circlebedfordshiremsk.co.uk) should this information not be available on the Circle Greenwich MSK service pages?”

MSK Patient

Recently, Circle have identified a particular issue with their phone lines that meant many people were unable to get through to confirm their appointments. This situation is being addressed and patients are also provided with an email address (although this is not always an accessible communication method for some patients).

It is possible that some of the non-responses to stage one letters may be due to letters going missing, being sent out late or to the wrong address, which needs further investigation.

“My husband was not sent an appointment, he only got one because we 'phoned to ask why he hadn't received one 4 weeks after Circle advised him he had been referred. He was offered two dates, one not very suitable but only five weeks from Circle advising him of the referral (which was two weeks after we know the GP referred him), the next eight weeks from the Circle letter. We took the appointment which was in five weeks. He then saw a physio and she gave him his second appointment to suit him.”

Wife of MSK Patient

About half of the people we spoke to had tried to contact the MSK service by telephone before their first appointment. Of these 65% found it easy or very easy to do, with 24% describing it difficult or very difficult.

Case Study - 'Jackie and Steve'

Jackie first became aware of the Circle MSK service when she tried to make an appointment for her son, Steve, who has a range of complex issues including poor mental health. The GP made the initial referral, which then led to some confusion with the letters that were sent. Following a phone call to Circle MSK, Steve was given an initial physiotherapy assessment. Steve also receives care from the neurology department at Kings Hospital, which has made accessing treatment more complicated.

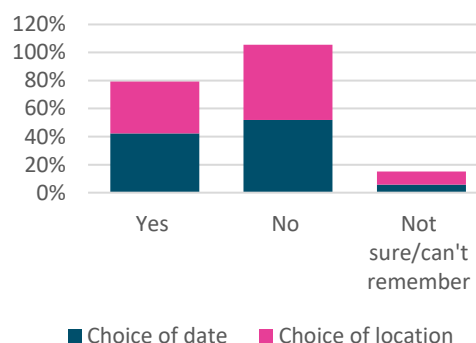
Steve eventually began physiotherapy at QE Hospital physio clinic, Steve has found it very helpful and Jackie has been impressed with the progress being made. The first round of physiotherapy was for Steve’s hand. Steve also needed physio on his leg, but because this hadn’t been mentioned on the initial referral, Steve would need to go back to the GP to get another referral for his leg.

In January, Steve accidentally missed an appointment, and didn’t notice for two weeks. When Jackie called to rearrange, she was informed that Steve had been discharged and that they would have to start the whole process from the start.

Jackie has found this process to be very fragmented and has had to make multiple calls to both Circle MSK and to Kings Hospital to try and coordinate care for Steve.

Choice and access

Circle MSK offer a choice of date and location for appointments and treatments, although this choice doesn’t seem to be being offered consistently across patients. 42% of those we spoke to said they had been offered a choice of appointment date and 37% had been offered a choice of location. The majority either had not been offered a choice or didn’t remember the choice.



Case Study - Peter’

Peter initially went to his GP with persistent, considerable pain in his hip area. The GP sent Peter for an X-ray at QE Hospital which happened on the same day, and was advised to buy a walking stick, which he did. A few days later Peter was sent a letter by the GP asking him to come in and talk about the X-ray. Whilst Peter was waiting for his GP appointment he received a letter from Circle MSK saying he had been referred to them and should expect an appointment within four to six weeks. Two weeks later, Peter had his GP appointment but hadn’t been offered a Circle appointment, so he called them and was offered a choice of either three weeks or seven weeks away.

At the first appointment with the physio, Peter was informed he may have osteoarthritis, and was advised to undertake certain exercises whilst waiting for his next appointment, which was around five weeks later and recommended that Peter have an injection of corticosteroid to his left hip. Three weeks later, Peter hadn't received an appointment for his injection so called and was given an appointment three weeks later. At this appointment, the clinician was unable to access Peter's original X-ray, but was able to give the injection and a second X-ray on the same day (at Eltham Community Hospital). He was advised to have a review in four weeks.

Four weeks later, Peter had a telephone review with another clinician who had not seen the second X-ray (but did have access to the first). This was followed by a letter the next day saying there had been a 70% improvement, which Peter challenged, as he had only had minor improvements in pain following the injection, and then mostly at night. A month later Peter had another face to face appointment and was told that the problem is not with his hip but from arthritic back muscles. He was referred to GP for painkillers and to have more physio with a review in six months.

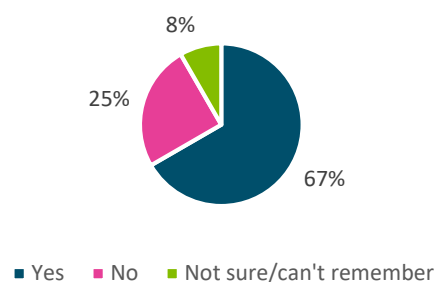
Another three weeks later and Peter started physio at QE Hospital, and was given new exercises. Shortly after he received a letter from the physio saying that the problem has got worse and that Peter should go back to his GP for a referral to a rheumatologist. Instead, he decides to refer Peter to an orthopaedic consultant, which led to another letter from Circle saying that Peter had been referred to them and should call for an appointment for an assessment. Peter calls and asked why he needed another assessment when the GP has already made the referral and knows which consultant he wants to see. Peter's GP also writes to ask this and receives an explanation from the Circle clinician.

Four weeks later, Peter was referred for an MRI scan of his lumbar spine (not his hip) but was then informed by telephone a week later that the problem is not with his lumbar and would need a referral to an orthopaedic consultant for a possible hip replacement. Peter eventually received a consultant appointment six weeks after that and is now awaiting surgery.

The total time from first GP appointment to first orthopaedic consultant appointment is 10 months.

Information

We asked patients about the information given at their first appointment with regards to managing their condition. 67% said they were given information on how to manage their condition, but a quarter of people we spoke to said they had not been given any information about ongoing management of their condition. Through the focus groups, the lack of information was a concern for people, especially if they felt they had to wait for a long period of time to get appointments.



When they did receive information, were generally pleased with it, with 61% feeling it was just the right amount. However, about a third (32%) felt it wasn't enough information.

“My father is 82 and registered deaf and was scheduled for a knee operation at Queen Mary’s last December. However, he failed his pre-assessment due to a low platelet count. He did get well but had to go through the assessment process again with Circle. The contact I have had with them has been incredibly difficult. They always refuse to talk to me initially on the phone even though my father is deaf, and he has authorised me to talk on his behalf, but this has not been recorded on his notes. They push us to complete a feedback form after every assessment, but it would be more useful to gather this feedback after a week to allow the opinions to settle. Since the last assessment he has been referred for surgery, but we can’t get them to confirm which hospital this will be taking place and we certainly weren’t given a choice.”

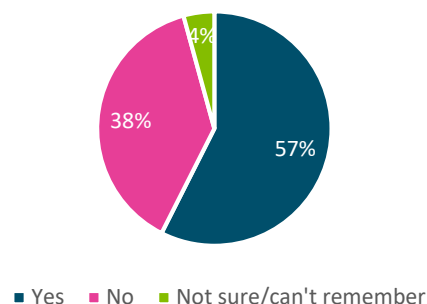
Daughter of MSK Patient

Control



We asked patients if they felt they had been involved in the making decisions about their condition and treatment. The vast majority (69%) said yes, fully or partially involved.

We then asked people if the appointments met their needs. Whilst only 57% said yes, as mentioned earlier, the majority of people we spoke to were on their first or second appointments, primarily undergoing assessment before starting treatment. On this basis, it would be reasonable to assume that people’s needs haven’t been met yet as they are still suffering from the issue that caused them to be referred into the service.



“I was given a diagnosis and told I would need to purchase a thumb spica (£10) and that I would be referred for physio. I have been wearing the thumb spica but am unsure if I am wearing correctly. I did not hear anything for weeks. I went to my GP and asked about what I should do, and they said I should call Circle directly. I did call, and they immediately offered me an appointment for the coming Saturday. Why did I not hear from them for weeks and I wasn’t given any information for what the appointment is even for?”

MSK Patient

Overall satisfaction

Finally, we asked people about their overall satisfaction with the service so far. Circle MSK’s own patient feedback forms, which are given to every possible patient with an average 80% response rate (from 2000 referrals per month into the service) demonstrate that 95% of people who complete a form would recommend the service to their family and friends. To an extent, Healthwatch will generally attract responses from people who are less satisfied with services, however, even with that proviso 65% of people we spoke to rated the service as satisfactory or above, with 52% rating the service as good or excellent.

“How can you improve on 'perfection'? I was unaware of Eltham Community Hospital but really impressed and would recommend to everyone.”

MSK Patient

As highlighted already, the vast majority of (limited) negative feedback was specific to the administration of the service, with most people more than happy with the treatment once they were able to access it. There is still a perception from some patients that Circle MSK

is simply an assessment and referral service (not actually treating patients). This has led to the belief that by acting as a third party (go-between), treatment would be delayed, and was quicker under the previous system. In particular, we have heard frustrations from people who don't understand why their GPs can't refer them directly to the consultant of their choice, which they perceive as causing an unnecessary delay to their treatment.

“Prior to Circle implementing their service, patients could get referral from their GP direct to the MSK team in Oxleas who are excellent. They assessed, diagnosed and treated all on the same day with extremely specialist clinicians and expertise. Circle are wasting lots of patient time with their lack of treatment, provision and simply passing onwards. I preferred the previous service where I could access the right care at the right time without delays.”

MSK Patient

“I was referred to the Circle Greenwich MSK service by my GP. I was sent a letter in July, which asked me to confirm my first appointment. I called straight away, and I was offered a choice of dates for my first appointment. I was sent a confirmation of my appointment which was set for three weeks' time. At my first appointment I was seen in a bed on an empty ward. The clinician was great and very attentive.

MSK Patient



Conclusion and recommendations

Premises

The Circle MSK service is based in the new Eltham Community Hospital. The waiting room is large and clean, with artwork on the walls.

- **Recommendation 1:** Implement a children's area (e.g. a maze table or similar) in the waiting area of the Eltham MSK Hub.
- **Recommendation 2:** We are pleased to see Circle MSK are considering our previous recommendation regarding patient confidentiality at the reception desk (see Service Provider Response below) and we recognise the difficulties involved in changing the layout of the space, however until something more permanent can be implemented, we recommend a sign for patients clearly stating that they can speak to someone in private if they prefer, and space being made available for this.

Appointment booking/referral

Waiting times for initial appointments were generally felt to be reasonable, with a handful of exceptions. The administration of the service was a persistent problem highlighted to us by patients, particularly for patients with additional or complex needs.

Most people we spoke to received their referral confirmation (stage one) letter quickly and were seen for their first appointment within six weeks of their initial GP visit. However, the information sent with the letter may not be accessible for all (see Appendix 3) due to its very small font. In addition, Circle MSK do not currently provide information in other languages. Poor use of translation and interpretation services has been identified as a considerable access block for many seldom heard communities.

- **Recommendation 3:** All correspondence should be printed at a minimum of 12pt font and any generic information should be made available in both large print and easy read formats.
- **Recommendation 4:** All core information should be available in multiple languages and clearly advertised in both the Hub reception area and referenced on all correspondence to patients.
- **Recommendation 5:** Circle should provide a wider range of methods for communication with patients beyond telephone calls. Ideally a patient would be able to at least choose to call, email, text, or write to book an appointment. In

addition, Circle should look into providing an online chat or video consultation process for those that require it.

We did hear from some patients who felt they had been waiting a long time for confirmation letters and were yet to be seen. Several people stated that they had not received a letter, so didn't get an appointment until they phoned Circle directly. More recently, there have been problems with access to the Circle telephone number, meaning many people have not been able to get through to confirm appointments. We also heard from some patients that delays had occurred between the first and second appointments (initial assessment to treatment). Again, some people had to chase second appointments themselves, before they heard anything from Circle.

- **Recommendation 6:** Circle should attempt to confirm receipt of the stage one (and stage two) letters, if no contact is made by the patient within 2 weeks of the letter being sent out (prior to discharging back to GP).

With the exception of the recent telephone line issues, most of the people who contacted Circle MSK by phone found it easy to get through and were pleased with how their enquiries were handled. However, we spoke to two people with relatives referred to MSK services with hearing difficulties, who often found it difficult to speak to the service on their relative's behalf. Even after they had called a few times and previously been given authorisation from the patient, the information did not appear to be routinely stored on the patient's records. They found that they needed the patient to authorise them to speak on their behalf at every call. In addition, patients with complex needs may struggle to navigate the service, especially where it need coordinating with other treatments.

- **Recommendation 7:** Notes should be attached to patient records to highlight any access requirements. These should make specific reference to permissions for family members to speak on the patients' behalf (for example, in cases where the patient may be deaf or not have the capacity to understand). We understand that Circle are working on providing additional training for staff on this issue.
- **Recommendation 8:** Circle should look at implementing a case support worker/care coordinator system for patients with more complex needs (for example, for those with disabilities and poor mental health). This coordinator can then remind patients about upcoming appointments in the most accessible manner and help to coordinate with other specialists and health care teams as appropriate. An example of a similar

(although more short term) approach is the Greenbrook Patient Champion based at the Urgent Care Centre.

Around a third of the people we spoke to said they were not offered a choice of date or location for their appointment.

- **Recommendation 9:** The appointment choices available should be made more explicit, and clearer explanations of why choices may be limited be provided as appropriate. Venue choices for each major treatment option should be publicised in Circle literature (for example, an accessible leaflet handed out by the GP) to increase awareness of the choices available.

Treatment

Most of the people we spoke to described their overall experience as satisfactory or better. We have only received a small handful of complaints about the quality of treatment, and these were usually due to confusion around the referral process or delays in receiving treatment.

Six out of twenty people said they were either not given any information or advice at their first appointment on how to manage their condition. One person noted that the only advice given was to exercise to see if this offered any improvement but was not given any information about exercises that would be useful to them. Of the twelve people who said they did receive information, nine people said it was ‘just the right amount’ and three people said it was ‘not enough’.

- **Recommendation 10:** Circle should look into publishing performance data online, to demonstrate the total number of referrals, pathways identified (e.g. physiotherapy, secondary treatment) and waiting times.
- **Recommendation 11:** Circle should continue to ensure that each patient is given basic, interim, advice on how to manage their symptoms at, or shortly after, the first appointment.

Overall service satisfaction

Feedback is requested from all patients after their appointments, but it may be more appropriate to collect later in the process, following initial treatment and after their opinions have had time to formulate.

- **Recommendation 12:** Circle should consider sending out a follow up feedback request forms to patients, during treatment and/or after discharge.

We spoke to one person who wanted to make a complaint about the service they had received but were originally unable to find the complaints procedure online. Since we raised this with Circle MSK, they have updated their website and the complaints procedure is now easily accessible on the site (and can be found via google):

<https://www.circlehealth.co.uk/msk/comments-and-complaints/>

Service provider response

We provided Circle MSK with some of our preliminary findings in November 2017. Below they have outlined the changes made as a result. We are very pleased to see the progress being made and at Circle's clear sincerity in wanting to improve the quality of experience for patients using the service.

YOU SAID...WE DID

Please see below some of the things we have done so far based on your feedback to us.

You said...	We did...
There is no medium for patients to give anonymous Complaints / compliments/comments and feedback.	<ul style="list-style-type: none"> - A complaints box is now clearly visible at our reception in the main community hub and is being used to collect anonymous feedback from patients - Our complaints procedure is now clearly listed on the Circle MSK website with details on how to access via different methods (phone, email, in writing). The website page also signposts to the Healthwatch website, the Healthwatch online survey, the Parliamentary Ombudsman and NHS Complaints Advocates
The reception area looked plain	We have since added pictures and plants to the area to make it a warmer and friendlier space. We are also now putting up a "Key staff" board to enable patients familiarise themselves with the staff onsite.
There was no Entertainment for patients during their wait for appointments.	Magazines, pictures and a television have been installed in our reception area for patients waiting for appointments.
There was no Hearing loop at reception for use of patients that are hard of hearing.	A hearing loop has been installed, tested and clearly signposted for the use of patients.
Drinking Water facility is not at a convenient distance to Circle patient waiting area	We have installed a water dispenser within the reception area.
Complaints procedure not clear on the website	Circle now has a clear link from the homepage to a complaints page, which details the different methods to get in touch, signposts

You said...	We did...
	users to the Healthwatch website and also has details of NHS Complaints Advocates and the Parliamentary Ombudsman. See https://www.circlehealth.co.uk/msk/comments-and-complaints/
Photographs of staff not displayed	We have put up a staff board with names and photographs of key members of staff in our reception area.

RESPONSES TO RECOMMENDATIONS MADE BY HEALTHWATCH

Please see below the Key issues / recommendations that have been highlighted so far and our actions in response:

Key Area	Recommendations	Circle's Response / Action
Premises	Previous Recommendation: Clearer signage needed to indicate reception and waiting room areas.	Signage has now been installed as of February 2018 at the Eltham Community hub.
Premises	Recommendation 2: Further consideration should be given to patient confidentiality when sharing information at the reception desk, for example, putting up an acoustic screen to minimise the	Circle have taken this recommendation on board and are exploring this and more options to ensure patients' confidentiality is maintained at this level.

	opportunity to overhear other people.	
Appointment booking/ Referral.	Recommendation 3: All correspondence should be printed at a minimum of 12pt font and any generic information should be made available in both large print and easy read formats.	This action has been taken on board and will be part of the ongoing company-wide Admin transformation project. In the meantime, we have expanded our website pages so that information about the service can be accessed online. All information is standardised so it can be enlarged using browsers windows. We continually signpost patients to our website to access service information.
Appointment booking/ Referral.	Recommendation 5: Circle should provide a wider range of methods for communication with patients beyond telephone calls. Ideally a patient would be able to at least choose to call, email, text, or write to book an appointment. In addition Circle should look into providing an online chat or video consultation process	We currently offer two key ways of booking appointments, via telephone or email (see details below). We understand the need for other ways of interacting with the service and we are exploring ways of expanding patient interaction. Any new system must be installed safely across a service of this size, so this work is still ongoing. Patients are currently to contact us via the following methods : Telephone 020 3893 8382 Email msk.greenwich@nhs.net

	for those that require it.	
Appointment booking/ Referral.	Recommendation 7: Notes should be attached to patients' records to highlight any access requirements. These should make specific reference to permissions for family members to speak on the patients' behalf (for example, in cases where the patient may be deaf or not have the capacity to understand).	Circle can confirm that alerts are available and in use on administration systems to inform of any requirements stated by patients referred on to the Circle MSK service. We're sorry if there were problems for individual cases (as mentioned in the report) and we will review how we deliver training to our administrative teams on this topic.
Appointment booking/ Referral. Appointment booking/ Referral.	Recommendation 9: The choice of appointment date should be made more explicit. Venue choices for each major treatment option should be publicised in Circle literature (for example, an accessible leaflet handed out by the	We absolutely agree we need increase the awareness of choice to patients and we're working on promoting this. We'd like to note that under the NHS Constitution, patients can request to be seen at NHS provider and that waiting times, venue choices and details change regularly - printing this in a leaflet and distributing to GP practices would almost guarantee out of date information. This is why any patient who is referred to secondary care has a choice discussion over the phone using up to date information (some patients are limited in

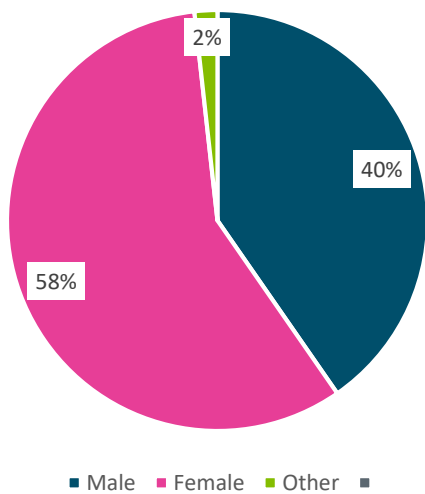
	<p>GP) to increase awareness of the choices available.</p>	<p>choice because of their specific condition) and we have information available on our website about local providers. All patients seen in clinics receive a card directing them to the website, to support promotion of choice. We do take on board the feedback and we are looking at ways to promote choice better to every patient - we just want this recommendation to reflect patient needs.</p> <p>We offer one-to-one choice conversations for almost all of patients going on for hospital treatment. Some patients have limited choice because of their conditions (these are limited by the hospitals, not by Circle). We publicise patient choice both on our website and on our patient leaflet to ensure patients know when they have a choice. We also signpost patients to NHS Choices, which allows them to compare hospitals directly. We will continue to promote patient choice and will look at other avenues to offer it.</p>
<p>Assessment Processes</p>	<p>Recommendation 10: Circle should look into publishing performance data online, to demonstrate the total number of referrals, pathways identified (e.g. PhysioLine, physiotherapy,</p>	<p>Circle is looking to make this data more widely available. Waiting times for hospitals are publicly available on the NHS England website but we understand the need for transparency. This work is ongoing.</p>

	secondary treatment) and waiting times.	
Overall Satisfaction	<p>Recommendation 11: Circle should continue to ensure that each patient is given basic, interim, advice on how to manage their symptoms at, or shortly after, the first appointment.</p>	<p>We completely agree that patients should have basic advice shortly after their first appointment. Currently, we provide this through:</p> <p>Circle clinicians hand out self-management signposting cards to patients during hub visits. This card is wallet-sized and signposts patients to the self -management website - circlemk.co.uk where patients can find information, resources and exercises on a wide range of MSK conditions to help patients to self-manage their conditions. This website has been specifically designed to help patients in the early stages of their condition - it offers advice on exercise, medication, heat and ice, wellbeing advice and has signposting to mental health organisation, NHS choices and Arthritis Research UK.</p> <p>For patients visiting the main community hub, there is a selection of leaflets at reception providing information on specific / more common MSK conditions</p> <p>Circle is also working on an interactive self-management app to help patients feel empowered to participate in self-managing their conditions and their overall care.</p>
Overall Satisfaction	<p>Recommendation 12: Circle should consider sending out a follow up feedback</p>	<p>We do seek feedback from patients following certain appointments. However, patients who have treatment with a sub provider (e.g. an NHS trust) will be contacted by that</p>

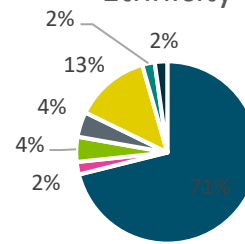
	<p>request form to patients, during treatment and/or after discharge.</p>	<p>trust and in the interest of not over-contacting patients, we elect to gain information from providers instead of contacting patients directly.</p> <p>For patients visiting at hub, we provide feedback forms to capture feedback.</p> <p>We are also in the process of implementing a process where letters are sent to patients post discharge which could also be used to capture feedback. We will consider this as a way of understanding our patient experience in more depth.</p>
<p>Overall Satisfaction</p>	<p>Ensure the complaint procedure is clearly displayed on the Circle Greenwich MSK service website and include the link on the patient feedback form.</p>	<p>The complaints procedure is now better located on the Circle MSK website and is available via the link below: https://www.circlehealth.co.uk/msk/comments-and-complaints/</p> <p>On this page, we also provide a link to give feedback to the service via Healthwatch and to fill in the Healthwatch patient survey.</p> <p>Patients are also welcome to provide feedback via the forms available at reception provided during visits to hub.</p>

Demographics

Gender

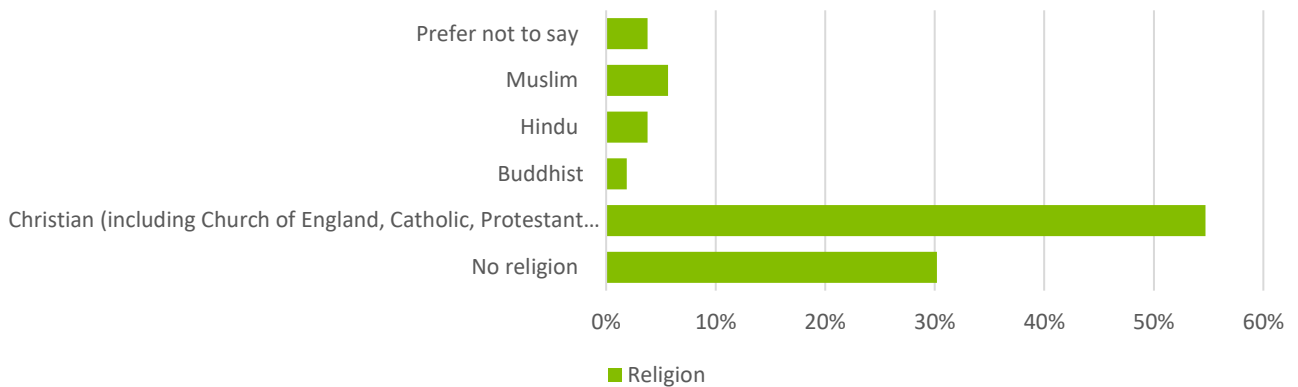


Ethnicity

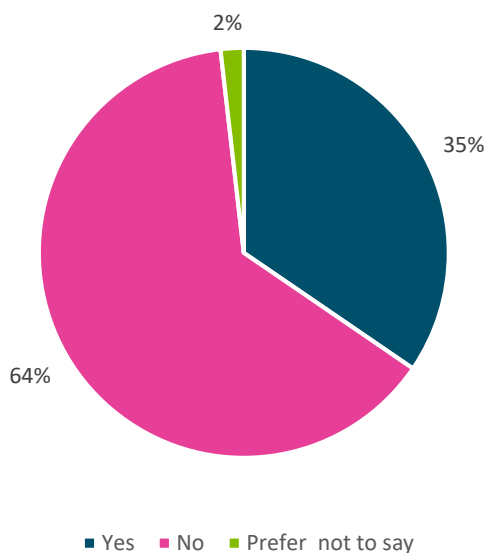


- White: English / Welsh / Scottish / Northern Irish / British
- White: Any other White background, please describe
- Mixed / Multiple ethnic groups: White and Black African
- Asian / Asian British: Indian
- Black / African / Caribbean / Black British: African
- Other ethnic group, please describe
- Prefer not to say

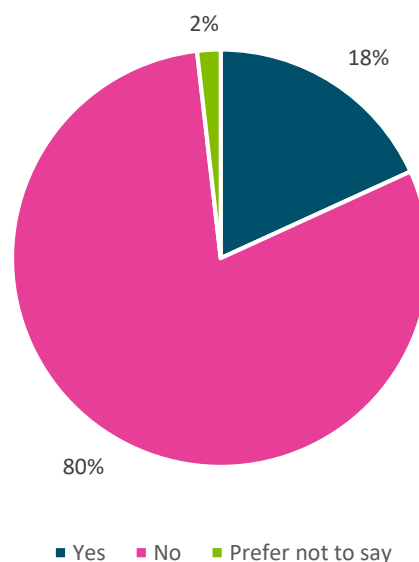
Religion



Disability



Carer



References

<https://www.circlehealth.co.uk/locations/greenwich-msk-service>

<http://www.greenwichccg.nhs.uk/News-Publications/news/Pages/New-provider-for-our-Musculoskeletal-service.aspx>

Appendix 1: Online survey questions (unformatted)

- 1) Is this your first appointment?
 Yes
 No
- 2) If no, how many appointments have you had?
 1
 2
 3
 4
 More than 4
 Unsure
- 3) Please state your medical issue, in general terms (i.e. back pain, sore foot)
- 4) How long after seeing your GP did you receive confirmation of your referral to the musculoskeletal service?
 Within 1 week
 2 weeks
 3 weeks
 4 weeks or more
 Comment:
- 5) How long after seeing your GP did you wait until your first appointment?[RG1]
[RG1]I wonder if we should put a specific question about the Circle triage process in here?
 Within 1 week
- 6) Between seeing your GP and your first appointment did your condition?
 Improve
 Stayed the same
 Deteriorate
 Unsure
- 7) Were you able to choose the date of your appointment?
 Yes
 No
 Not sure/can't remember
- 8) Were you able to choose the location of your appointment?
 Yes
 No
 Not sure/can't remember
- 9) Did you try to contact the department by phone before your appointment?
 Yes
 No
 Not sure/can't remember

10) If yes, please rate how easy it was to talk to someone on the phone

- Very easy
- Easy
- Ok
- Difficult
- Very difficult
- Unsure

11) How would you rate the following from 1 to 5?

(1 = Poor, 2 = Fair, 3 = Good, 4 = Very Good & 5 = Excellent)

Rating

The treatment from non-clinical staff (e.g. receptionists)

The treatment from clinical staff

The length of time you waited for an appointment

The environment/cleanliness

Quality of the services you receive

Overall satisfaction

12) What was your first appointment like?

- A group treatment session
- A personal treatment session
- A personal assessment of your condition by a Physiotherapist
- Other:

13) At your first appointment were you given advice and information on how to manage your condition?

- Yes

- No
- Not sure/can't remember

14) If you were given advice or information, was it?

- Not enough
- Just the right amount
- Too much
- Not sure/can't remember
- I was not provided with information about my condition or treatment

15) Do you feel you were involved in making decisions about your condition and treatment?

- Yes, fully
- Yes, partially
- No
- Not sure/can't remember

16) Do you feel your appointments meet your needs?

- Yes
- No
- Not sure/can't remember
- Details?

17) Please rate your overall experience of the MSK service.

- Excellent
- Good
- Satisfactory
- Poor
- Very Poor

18) Please tell us what you liked about the service.

Muslim

Sikh

Any other religion?:

19) Please tell us how the service could be improved.

24) Sexual Orientation

Heterosexual/Straight

Gay/Lesbian

Bisexual

Other - Write In:

20) Are there any other comments you would like to make?

21) Gender

Male

Female

Other - Write In:

25) Do you consider yourself to have a disability?

Yes

No

22) Age

26) Are you a carer?

Yes

No

23) Religion

No religion

Christian

Buddhist

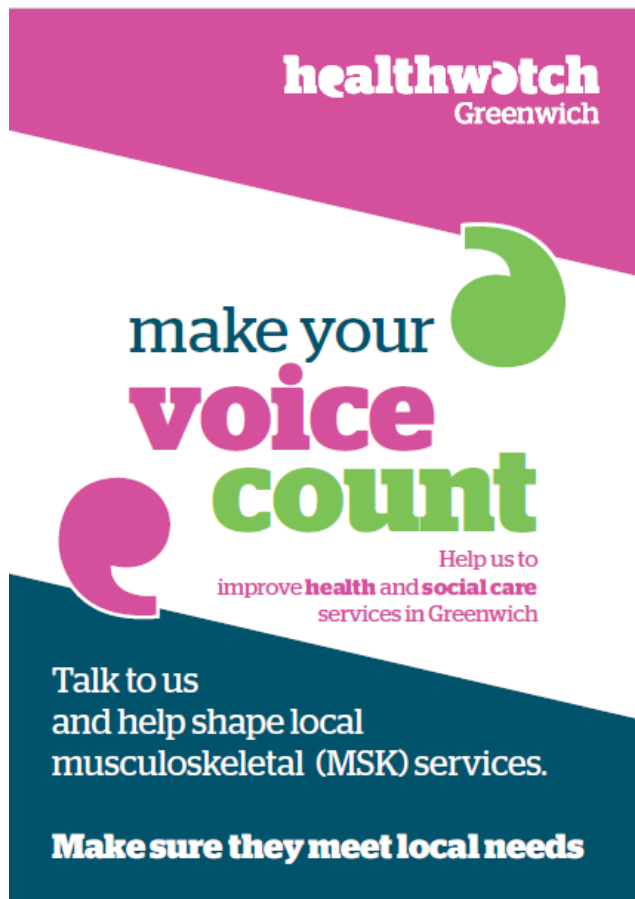
Hindu

Jewish

27) Contact details

Thank You!

Appendix 2: Copy of Leaflet sent out with Circle MSK letters



healthwatch
Greenwich

make your
voice
count

Help us to
improve **health** and **social care**
services in Greenwich

Talk to us
and help shape local
musculoskeletal (MSK) services.

Make sure they meet local needs



healthwatch
Greenwich

Who we are

Healthwatch Greenwich is an independent consumer champion for health and social care services (e.g. doctors, hospitals, dentists and care homes). We give you a powerful voice in influencing the delivery and design of local services.

We need to hear from you

We're working with Circle MSK to gather independent feedback about people's experiences of the new Greenwich MSK service. We are carrying out a number of visits, running an online survey, and holding a series of focus groups. This information will be used to develop and improve services.

We want to hear from you. Come along to one of our focus groups:

- 26th September 2017, 2pm to 4pm, Eltham (venue tbc).
- 23rd November 2017, 10am to 12pm, Christchurch Priory, Eltham
- 26th January 2018, 10am to 12pm, Woolwich Town Hall.

Email sophie@healthwatchgreenwich.co.uk for more details.

Complete our online survey: <http://bit.ly/MSKsurvey> (case sensitive)

Contact Us:

- 📍 : Gunnery House, 9-11 Gunnery Terrace, Woolwich, SE18 6SW
- ☎ : 020 8301 8340
- 🌐 : www.healthwatchgreenwich.co.uk
- ✉ : info@healthwatchgreenwich.co.uk
- 🐦 : @HWGreenwich
- 📘 : [facebook.com/healthwatchgreenwich](https://www.facebook.com/healthwatchgreenwich)
- 🌐 : [linkedin.com/company/healthwatch-greenwich](https://www.linkedin.com/company/healthwatch-greenwich)

Contact us

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Website: www.healthwatchgreenwich.co.uk

Twitter: @HWGreenwich

If you require this report in an alternative format, please contact us at the address above.

Acknowledgements

Healthwatch Greenwich would like to thank the Circle MSK, patients, service users, visitors, and staff for their contribution to the Enter and View programme, focus groups, surveys, and this report. Healthwatch Greenwich would also like to thank the Healthwatch volunteers and representatives who assisted with the visits.

Disclaimer

Please note that this report relates to findings observed on the specific dates set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

Transparency Statement

Healthwatch Greenwich are periodically commissioned by providers and other organisations to support their work. In addition to our core contract, we have currently been commissioned by Circle MSK to provide additional support and engagement throughout 2017/18. This includes additional Enter and Views, surveys, and a number of targeted focus groups.

Our work is designed to better understand the patient and service user experience, and reflect that experience back to commissioners, decision makers and providers, with the sole intention of improving the quality of services and the patient and service user experience.

Healthwatch Greenwich is an independent organisation with no contractual obligation to

deliver anything other than those objectives set out under the Health and Social Care Act 2012. All of our board meeting minutes, annual accounts, policies, procedures and governance mechanisms are either published on our website or available on request. Each project, whether carried out under our core contract or commissioned separately, will be clearly identified, published on our website and held to the same level of scrutiny and objectivity.

Every report we produce is sent to the relevant provider for comment, factual accuracy checks and a formal response. No provider, commissioner or elected member can veto our reports or recommendations.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

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