

#### **Session One: Focus on Inflammatory Arthritis**

- What are your current MSK plan priority themes?
- How well are your MSK services performing and where are improvements needed?
- To what extent have patients been involved in developing service specifications and providing insight into service performance?
- What improvements could you consider in future plans from the above?

#### **Key action points from the room**

- Addressing mental health issues: improving access to psychological therapy
- Resource constraint: limited time at clinic and no local psychologist / pain team
- Improvements: encouraging patients to bring up mental health issues. Point them in right direction
- Correct triaging, not only EIA but other rheumatology conditions
- Support for GP and FCP in pathway and decision making
- Clinical signs and don't automatically do RF (as this can be misleading)
- Early arthritis. Clinic appropriate for local service areas. Improved clinical assessment for referrals, to triage
- Reduce variation between sites, by making use of Lancs Alliance
- Improve the way patients are getting involved by including patient reps and organisations (from CCG, charities)
- Improve joined up thinking between stakeholders, by better engagement and developing links between CCGs, Trusts, Consultants and GP e.g Healthy Minds Healthy Bodies

## **Session Two: Innovative ways to provide musculoskeletal services**

- What can we learn from the examples we have heard about?
- What innovative and/or high performing services exist in your area that you'd like to share with your table colleagues?
- Are there any practices that are ineffective that can be stopped?
- What aspects of MSK transformation would you now like to prioritise in future plans?

### **Key action points**

- Having pathways to optimise appointments (self-referral when needed, patient centric)
- Stable patients may feel wasting healthcare professionals time when being seen by consultants
- Virtual biology clinic
- Time to think and change rather than react
- Integration of planning and design – look at innovation
- Prevention is better than cure
- Integrate the mental health assessment into routine appointments
- Increase the use of digital applications and virtual clinics
- Seeing the wrong patients e.g seeing the patients who are well. Make use of the NICE guidelines