ODN/Specialised clinical network	twork		Author	Cecilia Clarke and Gordan Grahovac	Date 29/09/22	
Please list ICSs covered			ay ICS			
Key Achievements April to September 2022			Focus over the next 3 & 6 months (please provide dates for milestones) Please indicate which ICSs are affected			
 PACs access across the region - King's (hub site) now has with all district hospital (Dartford and Gravesham, Guys and St Thomas, Medway, East Kent, Maidstone Tunbridge Wells, Lewisham and Greenwich with the exception of Queen Elizabeth Woolwich) Electronic Spinal Fracture referral form- form now embedded on King's EPR Waiting list significant reduced across the region according to surgeons. 		Embed National Back Pathway across Kent developing online training, communications and engagement with GPs Pilot the exemplar CES pathway in Southeast London and Kent				
		Specialist triage and treat training for MSK spinal practitioners				
 Standardised patient leaflets - BASS patient leaflets used by all spinal centres across the Network 		Strengthen pathway between surgical service and pain management. Aligned to National Back Pathway				
	 Pain services mapped across the Network – key contact list created and good engagement. 		Engage with Neurosurgery Network with Shared Decision Making			
has agreed to provide r intelligence team. The referrals from communi conversion rate of the r	erapist referral data This hub site King's regular Data, through their business data will be used to measure the quality of ty physiotherapist service to see the eferrals into spinal surgery. First report 2022 and quarterly going forward.					

 MRI hours have been extended a majority now increased service Connection with key contacts in Medway ICBs 	from 8am-8pm.			
Specific Issues/Concerns inc areas the	at may require escalation	Actions/mitigations		
Access to Queen Elizabeth Woolwich PACS. This has been outstanding for around 18 months No 24/7 access to MRI access in Kent. Radiography workforce issues nationally.		Working with ICT team at King's to finding capacity to complete this piece of work. Requesting regular updates. At the time of writing this report the IT assured they are two weeks from completion. Explore other models for local MRI cover.		
Getting regional data of spinal waiting lists		Working Kent and Medway to obtain PACS RIS Data Sharing		
Patient Public Voice & Engagement Understanding and improving experience of care by embedding patient, carer and public voices in guidance, service development and delivery	Draft SELK Network Spinal Fra fracture patients, aiming to com Draft spinal fracture format Sep	Lucture leaflet – This will be reviewed by patients, through a cohort of spinal hplete in January 2023.		
Workforce	surgery. Already demon	rse Strong– helps to support work in enhanced recovery after spinal strating reduced LOS and improved patient experience. developing the shared decision making. (See evidence below)		

Update on workforce successes, challenges across the network service/s				
Network Team Development	Restructure of Spinal Network governance and meetings to improve engagement.			
Includes ensuring representation, Equality, diversity and inclusion, staff training and development.	There are now subspecialties SELK Network meetings. The subspecialties meetings include: Radiography, Surgical, MSK, Pain, and A&E Consultant. The Network has found this provides an improved forum to drill down to specific issues and needs relating to the specialities and identify areas for improvement.			
	A SELK Network Leadership Action Group will be set-up in the 2023. Stakeholders to be recruited to the group through expressions of interest to encourage diversity and inclusion.			
Key Impact Headlines:				
Health outcomes/addressing inequalities	Variability in access to OOH MRI in Kent. Patients routinely transferred to hub sites in London.			
Clinical pathway effectiveness and efficiencies Innovations	This Spinal Network is driving the National Back Pain Pathway which aims to reduce variation of spinal service and enhances role of triage and treat practitioners. Aiming to reduce inappropriate scanning referrals by GPs as well as making direct referrals to secondary care.			
Quality	King's direct access to PACS across the region (bar Queen Elizabeth Woolwich)			
	Improved Shared decision making through consultation and consent aligned to CQUIN.			

	Progress report	t against workplan 2022/23 mid-year report			
	Workplan area: Please indicate if aligned to/signed off by relevant ICS's & NHS England London	Deliverables: Please indicate specific service area & expected impact	Please provide data/metrics/evidence to demonstrate impact: this can be linked, embedded, or sent as a separate attachment	RAG rating	Further support required: Indicate: Trust, ICB, Regional, National
1	Establishing optimum pathways	Pilot the exemplar CES pathway in Southeast London and Kent	Initial 'as is' audit complete – waiting for GIRFT to release final agreed CES document to pilot locally		GIRFT to release CES updated pathway – due Autumn 22
2	Flow improvements	Reduce length of stay – This is the neuro-spinal work on the wards around ERAS (Enhanced recovery after surgery) – good results show delays in length of stay and working to develop this further with the spinal network	ERAS Spine Mid-Year Report.pdf		Additional funding for 2 nd ERAS nurse to provide full service and cover.
3	Planning, Operational & Recovery	Reduce waiting lists to increase capacity for elective surgery	Extremely difficult to get data from all trusts. Only managed to obtain Medway Spinal Waiting lists.pptx		Real time data of elective waiting lists for the region. Better engagement from service managers
4		Drive extension of 24/7 MRI service. To serve the Kent reducing the need for patients to travel to King's for out of hours MRI.	MRI Spine - QIP.pdf		ICB engagement and ownership.

5		Strengthen pathway between surgical service and pain management. Aligned to National Back Pathway	SELK Pain Teams Mapping - June 202		
---	--	--	---------------------------------------	--	--