

Final project report

Collaborative working agreement between Sanofi and The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust (RJAH) to undertake a review of the neuromuscular service.

Background

The Neuromuscular (NM) service at The RJAH provides diagnostic and clinical management services for both children and adults living with neuromuscular conditions including patients with Pompe Disease.

The NM service is the main referral centre, covering Shropshire, Midlands, Staffordshire, and Wales, with over 300 new referrals a year. The NM service plays a vital role in the early diagnosis of patient with NM conditions, thus any impact on the services can have a delay on NM patients being effectively diagnosed and referred to a specialist treatment centre.

1. Project Aims and Objectives

Project Aims:

Review the current neuromuscular service and identify any changes to the service to help improve efficiency of the neuromuscular service and patient experience

Project objectives:

- Undertake a review of the capacity and demand within the service.
- Review how workforce is utilised within the service and explore what changes could be made to best use of the workforce.

2. Project Outcomes

Pathway mapping and analysis:

A comprehensive assessment was conducted through staff interviews with 10+ staff members and a staff survey of 14 respondents in February 2025. This dual methodology approach served to map the current pathway, identify gaps and issues within the service, and gather insights into employee satisfaction and service improvement opportunities

Current Challenges:

The pathway mapping interviews and staff survey revealed several interconnected challenges that impact service delivery and staff wellbeing across multiple domains.

Workforce capacity constraints:

- Staff shortages across multiple roles, creating unsustainable workload
- Many staff covering various roles
- Low staff to patient ratio compared to other neuromuscular teams
- Survey finding: Team members identified optimising staffing levels and resource allocation as a critical priority to alleviate workload pressures

Infrastructure Limitations:

- Insufficient dedicated clinical space
- Lack of appropriate facilities for service delivery
- Survey finding: Staff prioritised expanding clinical workspace to increase patient capacity and enhance clinic time efficacy

Service demand pressure:

- Growing volume of patient referrals
- Extended patient waiting times affecting care delivery
- Survey findings: Staff rated the overall patient service at 3.6 out of 5, indicating room for improvement. Staff identified implementing condition specific clinics would enable better coordination of services and allow staff to tailor resources more effectively

Work environment:

- Working environment scored 4.2 out of 5 from staff perspective
- Enhanced mental health and wellbeing support highlighted as a needed improvement
- Currently no processes in place to address staff wellbeing

Capacity and demand:

- Currently scheduling new patients who are within the 18-week referral-to-treatment window. This however is creating an unintended consequence of delaying follow-up appointments.
- The service is currently operating with significantly reduced capacity following the departure of two visiting consultants. This reduction in specialist clinical workforce has created substantial constraints on the service's ability to maintain previous appointment volumes and throughput.
- With the loss of the 2 adult neurologists there will be a requirement to absorb 12% more patients into the current service. This excludes any new adult referrals to the service.
- Adult NM referrals have been temporarily suspended, pending appointment of a neurology consultant.

4. Timescale

Planned project timescale – Q4 2023- Q1 2024

Time scale of project – Q3 June 2024- Q4 2025

Delay in starting project was due to RJAH internal signing off project. The length of project was extended due to staff workload and data gathering.

5. Resources utilised

The resources utilised in the project were as planned at the outset. The total cost of the project was: £5,523.34 This was split into NHS and Sanofi contribution as follows:

Sanofi - indirect costs £2,800

NHS Financials- indirect costs- £2,723.34

6. Service impact of project and recommendations

A report on the outcomes of the pathway review and recommendations for improving the pathway was presented to the Department Team meeting. This included the following recommendations:

High Priority:

- Recruit adult neurologist to strengthen the clinical team and address current capacity gaps in adult patient care
- Recruit NM fellow to support both adult and paediatric services
- Work with finance team to optimise remuneration for clinics and other services provided. Explore how other NM teams charge for their clinics and services
- Develop condition specific clinics to provide a more tailored, specialised care pathway for patients. This approach could reduce the need for patients to attend multiple clinic appointments, streamlining their care journey
- Establish a risk register to provide objective evidence of capacity shortfalls and resource constraints that are affecting patient care, enabling informed decision making and prioritisation
- Enhance clinic space to accommodate growing patient numbers
- Enhance psychology services to better understand the wellbeing and mental health needs of patients living with NM conditions

The recommendations will serve as a key component of a business plan to be presented to the Trust by the department, with the objective of securing funding for the neuromuscular service.

6. Benefits of report

Patients

- Potential reduction in waiting times for patients accessing neuromuscular services.
- Potential future earlier access for patients to appropriate health care professionals.

NHS

- Greater clarity of the patient pathway and service to support specific needs of health professionals within RJAH and referring hospitals.
- Review of current service provision and identification of gaps and issues within the neuromuscular Service.
- Completion of workforce review to inform future service provision
- Increase awareness of NM service for adults and paediatric patients

Sanofi

- Improved reputation with the neuromuscular team

7. Customer feedback

Prof Tracey A Willis -Consultant Paediatric Neurologist with a Specialty Interest in Neuromuscular Disorders

“The report is a fantastic demonstration of working together as a team, to identify pinch points in the team and highlights both the challenges and limitations but also the potential of the neuromuscular service given the correct resources and capacity.

It's good to have a baseline of what the NM service looks like now for a comparison in for example 5 years' time, when it would be beneficial to undertake a similar exercise”

Dr Richa Kulshrestha- Consultant in Paediatric Neurodisability (Special interest in Neuromuscular disorders)

“This report has been helpful to have a baseline formal assessment of our service. Lots of potential ideas for service improvement are collated”

Nick Emery -Neuromuscular Clinical Specialist Physiotherapist

“This collaborative work has been extremely beneficial in identifying where the gaps in our service lie and providing a sound base for helping address those gaps”