

Oxford AHSN case study

Date: Q1 2018/19

Programme/Theme: Clinical Innovation Adoption

Title: Establishing networks to improve patient care in early inflammatory arthritis

Overview summary

Rheumatology teams across the Oxford AHSN region have come together to form an Early Inflammatory Arthritis (EIA) network focussed on improving secondary services for EIA patients, as well as improving patient and GP awareness of the symptoms of EIA and the risks and consequences of delayed diagnosis and treatment.

Challenge identified and actions taken

There is strong evidence to suggest that if inflammatory arthritis is identified, diagnosed and treated at an early stage patients are less likely to suffer debilitating irreversible joint damage. Nationally, there is evidence that patients with inflammatory arthritis experience a multitude of unnecessary delays between symptom onset, presentation in primary care and eventual referral, diagnosis and treatment. Recognising a clinical need in this area, the Oxford AHSN brought together healthcare professionals from across the region to form an Early Inflammatory Arthritis network. Led by Professor Peter Taylor the network has had engagement from rheumatology consultants, registrars, specialist nurses and pharmacists. Since its inception in 2016 the network has focused on five core workstreams based on improving care for EIA patients (see Figure 1 below).

Supporting quote

“We had particular problems around getting to see our EIA patients quickly and working with the network helped us to bring attention to our services from the management within the trust, to increase our staffing at specialist nurse level. That has really transformed the service.”

Malgosia Magliano, Consultant Rheumatology, Buckinghamshire Healthcare – EIA network member

Working in partnership with patients and public

Key to the success of this project has been strong engagement with patients and patient organisations. A patient champion was appointed at an early stage. For the planned patient education activity the network has been working closely with the National Rheumatoid Arthritis Society (NRAS) to run focus groups with patients with inflammatory arthritis who suffered unnecessarily as a consequence of delays in getting the treatment they needed.

EIA Network				
Rheumatology teams in 5 Acute NHS Trusts in the Oxford AHSN region		Tasks	Achievement	
COMPLETED WORKSTREAMS	1	Understand variation in practice in secondary care	<ul style="list-style-type: none"> • Map EIA pathways across the region • Analyse service outcome data against NICE quality standards 	<ul style="list-style-type: none"> • Service baselines established • Variation in practice and areas of service improvement highlighted • Data used in local business cases for service improvement
	2	Optimise EIA pathways in line with “best practice”	<ul style="list-style-type: none"> • Supporting partner trusts to move to “best practice tariffs” 	<ul style="list-style-type: none"> • 2 trusts implemented “best practice tariff”
	3	Understanding variation in workforce across region	<ul style="list-style-type: none"> • Audit staff levels at partner trusts around consultants, registrars and specialist nurses 	<ul style="list-style-type: none"> • Audit used to highlight variation in staff workforce across the region • Data used in business case to secure 3 new rheumatology nurse posts in the region
	4	Supporting adoption of biosimilars in Rheumatology	<ul style="list-style-type: none"> • Supporting local partner trusts in switch program for etanercept • Engaging patients to shape patient information offered across the region 	<ul style="list-style-type: none"> • All trusts now started patient-centred, biosimilar etanercept and rituximab switches. • Patient centred video developed with National Rheumatoid Arthritis Society (NRAS)
	5	Improving awareness of EIA in patients	<ul style="list-style-type: none"> • Develop campaign to address the need for awareness and education around early disease 	<ul style="list-style-type: none"> • Working with NRAS project team engaged patient group to develop regional awareness campaign called “the angry hand”

Impacts

The formation of the network gave rheumatology leads across the region a forum to share best practice and resources, and to co-develop plans for improving care for EIA patients. In addition, the workstreams have delivered some specific benefits in a number of trusts:

- Additional rheumatology nurse posts authorised which, once training is complete, will increase capacity and the number of EIA clinics offered, allowing more people with potential EIA to be seen by a specialist and receive disease modifying drugs at an earlier stage
- Sharing information and planning resources in the areas listed below, freeing up time in local clinical teams so they can spend more time improving services for patients
 - Business cases
 - Patient tracking tools and databases
 - Patient information

- Shared care guidelines
- Identifying areas needing improvement, highlighting where investment is required and helping teams make local business case for support to improve care for patients
- Saving trusts hundreds of thousands of pounds through working with patients to switch them from branded biologic etanercept to biosimilar etanercept - for some these savings will be reinvested into rheumatology services to further improve patient care
 - As part of this a biosimilars information video (Figure 2) was developed to help answer critical questions for rheumatology patients being asked to switch to biosimilars (<https://www.youtube.com/watch?v=6P7kwu3UzmQ>)



Figure 2 Screenshot from Oxford AHSN biosimilars patient information video

- Raising awareness of Early Inflammatory Arthritis, the project team forged a collaboration and joint working group with Sandoz and the National Rheumatoid Arthritis Society. This brought together patients and lay people to design an engaging awareness campaign - a model called 'The Angry Hand – Don't ignore your joints' was developed (see Figure 3 below). This involved construction of a 12ft tall, articulating and talking blue hand with glowing red joints which was taken to busy central locations across the Thames Valley and London. The hand, which was voiced by a comedian, attracted, surprised and engaged the public. Video footage was collated and turned into a campaign film (<https://www.youtube.com/watch?v=b2sBz8hIELA>) which was publicised widely. The number of views received is over 13,000 – and counting! The campaign was awarded third place in the Best Public Awareness Campaign at the Pharmaceutical Marketing Awards 2018.

The Angry Hand

Raising public awareness of early rheumatoid arthritis



Figure 3 Overview of the Campaigns Publicity

National NHS priorities addressed

- Care and quality
- Health and wellbeing

AHSN priorities addressed

- Long-term conditions
- Workforce development

Future plans

The AHSN EIA network aims to continue to stay connected to industry and NRAS, and to mobilise task and finish groups as and when promising innovations emerge that are ready for spread.

Continuing to work with national stakeholders to shape educational campaigns aimed at primary care will be critical in ensuring that recognition of the early disease and referral from general practice does not pose a barrier to diagnosis and treatment.

Contact

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