

## ‘MSKPN’ Quality & Safety Standards

The MSK Partners Network ‘MSKPN’ and its members are committed to improving quality and raising standards across musculoskeletal medicine in the private and independent sector. To achieve this outcome, it is essential that we establish a set of systems and processes that members agree to collectively measure as a reflection of good quality care and safe service delivery.

The MSKPN Quality Committee has spent time considering what processes members should engage with to be able to examine all aspects of clinical standards and quality. There has been a great deal of focus on measuring treatment outcomes (Patient Reported Outcome Measures ‘PROMs’ and Patient Reported Experience Measures ‘PREMs’), and while these comprise an essential element of the assessment of a quality standard, there are other factors that are equally important.

Together with measuring PREMS and PROMS, MSKPN is advocating that all members ensure they implement and manage and maintain the following systems and processes within their organisations.

It is anticipated that these Quality Standards will be discussed with a variety of commissioners (incl private medical insurers) and other professional organisations to provide assurance to these groups that appropriate systems and processes are in place within all MSKPN member organisations, to ensure that patients receive safe and effective care.

Both AXA Health and BUPA have expressed a willingness to support Independent Providers who collect and report data on Outcomes alongside other processes for demonstrating quality and safety.

Below is a table of systems and processes that comprise the recommendations of the MSKPN Quality Committee:

Clinical Outcomes	Patient Experience
<b>PROMS</b> <ul style="list-style-type: none"> <li>- Pain: Numerical Pain Rating Scale (NPRS)</li> <li>- Function: Patient Specific Functional Scale (PSFS)</li> <li>- Overall change: Global Rating of Change (GROC)</li> <li>- Patient Acceptable Symptom State (PASS)</li> </ul>	<b>PREMS</b> <ul style="list-style-type: none"> <li>- Net Promotor Score</li> </ul> <b>Patient Complaints</b> <ul style="list-style-type: none"> <li>- Evidence of organisational policy for reporting and thematic review to ensure learning from these.</li> </ul> <b>Patient Plaudits</b> <ul style="list-style-type: none"> <li>- Evidence of organisational policy for reporting and sharing learning from these</li> </ul> <b>Patient Reviews</b> <ul style="list-style-type: none"> <li>- Use of consumer review platforms i.e. Trust Pilot / Doctify / Google Reviews to collect and review feedback</li> </ul>

Safety	Continuous Improvement
<p>Staff orientation and induction programme</p> <p>Mandatory Training</p> <ul style="list-style-type: none"> <li>- Ensure HCPC requirements are met</li> <li>- Yearly BLS / CPR training</li> <li>- Chaperone training</li> <li>- Safeguarding training (L2)</li> <li>- Infection control and sepsis</li> <li>- Information governance and confidentiality</li> <li>- Fire safety training</li> </ul> <p>Safeguarding</p> <ul style="list-style-type: none"> <li>- DBS process for all new starters / routine updates as required</li> </ul> <p>Insurance</p> <ul style="list-style-type: none"> <li>- Organisational policy in place to ensure public liability is in place for the company and all clinicians have indemnity insurance</li> <li>- Company professional indemnity in place (suggested cover £5m)</li> </ul> <p>Incident Management</p> <ul style="list-style-type: none"> <li>- Organisational policy in place to ensure active reporting and learning all reported incidents, identifying themes / trends</li> </ul>	<p>Audit</p> <ul style="list-style-type: none"> <li>- Organisational policy in place to evidence a yearly minimum audit process against common standards i.e. CSP   MSK standards</li> </ul> <p>Service Development</p> <ul style="list-style-type: none"> <li>- Evidence of a learning culture (i.e. an MDT education programme), yearly clinical practice audit schedule, culture of peer learning through observed clinical practice etc)</li> </ul> <p>Professional Development process</p> <ul style="list-style-type: none"> <li>- A documented appraisal process for professional development of staff</li> <li>- Organisational policy to evidence support for team attendance to post graduate training</li> <li>- Use of MSK AP Standards for recognition of clinicians as Advanced Practitioners in MSK and adaption of the Multi-Professional Framework for other areas of Physiotherapy and non HCPC registered clinicians</li> </ul>

## Collection

MSKPN can offer preferential rates for the use of the 'Patient Tracker' platform powered by Cemplicity to automate the collection of PROMs and PREMs and for those clinics unable to support electronic capture of data, MSKPN advocates manual data collection and collation.

## Audit / Evidence

Ultimately the monitoring of the Standards could occur using a process of peer audit in which members review the practices of other members in a self-selected process using a standardised approach. As well as providing a cost-effective mechanism of reviewing the clinical standards of members, it will also provide a valuable professional development exercise for all members.

Until a peer review process is agreed and operationalised, we expect members to self assess their organisational systems and processes against the standards set out by MSKPN.