

# **Appendix SC2A Service Specifications**

## ***CMT-1129\_ UNIVERSITY HOSPITALS OF NORTH MIDLANDS***

FINAL 24 April 2023

<b>Service Specification No.</b>	UHNM23_Resp Physio_Service Spec
<b>Service</b>	Respiratory Physiotherapy
<b>Commissioner Lead</b>	Paul Brown, Chief Finance Officer NHS Staffordshire and Stoke on Trent ICB
<b>Provider Lead</b>	Noeleen Hellis – Divisional Therapy Manger
<b>Period</b>	1 <sup>st</sup> April 2023 – 31 <sup>st</sup> March 2024
<b>Date of Review</b>	Annual

## 1. Population Needs

### 1.1 National/local context and evidence base

UHNM reviewed year on year non-elective admissions for respiratory disease which identified that there was a 2.9% increase in non-elective admissions in 2011 compared to 2010 and 14% increase in 2012 compared to 2011.

UHNM reviewed non-elective admissions for Q1, 2012/13 to model the number of admissions that could have been avoided and the potential reduced length of stay had there been outpatient or community respiratory physiotherapy provision.

#### Policy Guidance

- National Framework for Children and Young People’s Continuing Care (2010);
- Department of Health (2009) Healthy Lives, Brighter Futures: The Strategy for Children and Young People’s Health;
- High Quality Care for All: NHS Next Stage Review Final Report (2008);
- Aiming High for Disabled Children: Better support for families (2007);

## 2. Outcomes

### 2.1 NHS Outcomes Framework Domains & Indicators

<b>Domain 1</b>	<b>Preventing people from dying prematurely</b>	
<b>Domain 2</b>	<b>Enhancing quality of life for people with long-term conditions</b>	
<b>Domain 3</b>	<b>Helping people to recover from episodes of ill-health or following injury</b>	
<b>Domain 4</b>	<b>Ensuring people have a positive experience of care</b>	
<b>Domain 5</b>	<b>Treating and caring for people in safe environment and protecting them from avoidable harm</b>	

### 2.2 Local defined outcomes

- Improve patient experience
- contribute towards a reduction in NEL and LOS’

## 3. Scope

### 3.1 Aims and objectives of service

The aim of the service is to assess and treat children’s acute respiratory conditions both in hospital and in outpatient clinics and to provide timely access for consultants and GPs who require advice and management of children with respiratory compromise who would benefit from specialist physiotherapy intervention.

- Provision of training and education to ensure carers can continue with on-going management of the child which is evidence based.
- Admission avoidance through review and management of children with complex or long term

conditions in relation to their respiratory function to reduce recurrent admissions.

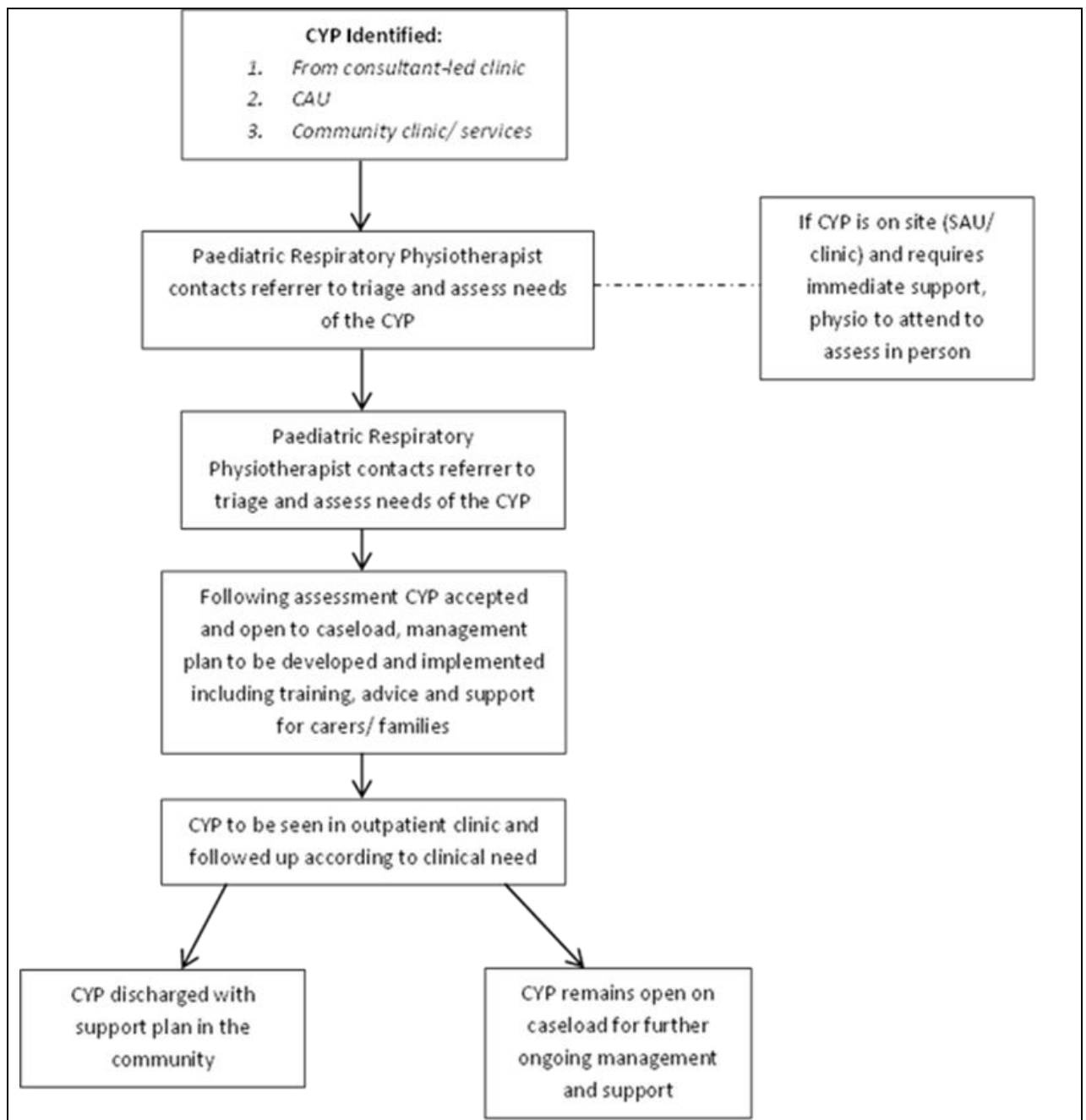
- Decreased length of stay for patients with more complex needs in particular those requiring on-going ventilator or cough assist management in the community through supported early discharge.
- Care would be delivered closer to home for children with long term conditions or those with complex needs; this may extend to school or other care environments depending on the needs of the child.

### **3.2 Service description/care pathway**

The service shall deliver 2 outpatients physiotherapy-led clinics per week at the Royal Stoke University Hospital Site, with a maximum of 7 (2 x new & 5FUs) slots available per clinic. Both NP and FU appointments will be for 1 hour in line with complex needs of patients. Personalised Care and treatment plans with multiagency involvement where appropriate.

The service shall be delivered as detailed below:

#### Admission Avoidance



### Intensive Inpatient Support/ Supported Early Discharge

#### **3.3 Population covered**

The service shall be available to children and young people aged 0-16 years of age, who are registered with a GP in Stoke-on-Trent or North Staffordshire.

#### **3.4 Any acceptance and exclusion criteria and thresholds**

Referrals are accepted from:

- Secondary care consultant
- GPs
- Community Physiotherapist
- Specialist Community Nurses

The conditions requiring outpatient respiratory physiotherapy input are:

- Dysfunctional Breathing
  - Vocal Cord Dysfunction
  - Hyperventilation
- Bronchiectasis
- Congenital Myopathies
  - Duchenne Muscular Dystrophy
  - Ullrich Muscular Dystrophy
  - SMA
- CCHS
- Spinal Injuries need airway support and clearance
- Long Term Ventilation
- Chronic Lung Disease
- Difficult to treat asthma

### **3.5 Interdependence with other services/providers**

Stakeholder, interdependencies and key relationships are:

- Patient, family and carers
- GPs
- Secondary care consultants
- Secondary care nursing staff
- Community Nursing Team
- Community physiotherapy services

## **4. Applicable Service Standards**

### **4.1 Applicable national standards (e.g. NICE)**

- NICE Guidance for related paediatric conditions – for example anticipated guidance (2012) Spasticity in children and young people

## **5. Applicable quality requirements and CQUIN goals**

### **5.1 Applicable quality requirements (See Schedule 4 Parts A-D)**

### **5.2 Applicable CQUIN goals (See Schedule 4 Part E)**

Not applicable.

### **5.3 Applicable Local Reporting Requirements (See Schedule 6, Part A)**

## **6. Location of Provider Premises**

### **6.1 The Provider's Premises are located at:**

University Hospital of North Midlands NHS Trust  
Royal Stoke University Hospital  
Newcastle Road  
Stoke-on-Trent

<b>7. Individual Service User Placement</b>
Not applicable
<b>8. Activity</b>
<b>8.1 Indicative Action Plan</b>  14 clinic slots per week (4 new/ 10 FU) x 42 = 588 (168new/ 420 FU) 1 MDT clinic per week 1 Asthma Clinic per month 1 clinic for inpatient review with team 1 clinic for telephone triage
<b>9. Price and Costs</b>
<b>9.1 Price</b>  £30,000 (05G Stoke-on-Trent CCG, £18,000, 05W North Staffordshire CCG £12,000)