Spinal triage by ESP's in a diagnostic interface clinic: spinal unit conversion rates from a 12-month service evaluation.

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Background

The Back and Neck Service (BaNS) was established in 2003 with the aim of reducing unnecessary secondary care spinal referrals in Suffolk. Since this time the service has expanded and now consists of six Extended Scope Physiotherapists (ESP) operating from two teams (BaNS-West & BaNS-East). Referral criteria into the service are radiating symptoms (>6/52 duration) and/ or axial symptoms that have failed to improve with appropriate primary care intervention.

Purpose

To establish the referral rate from the BaNS to a secondary care spinal unit (Ipswich Hospital) and to report the conversion rate of appropriate referrals to surgically led intervention (nerve root block/surgery).

Methods

A retrospective service evaluation incorporating data from January 2018 to January 2019.

Results

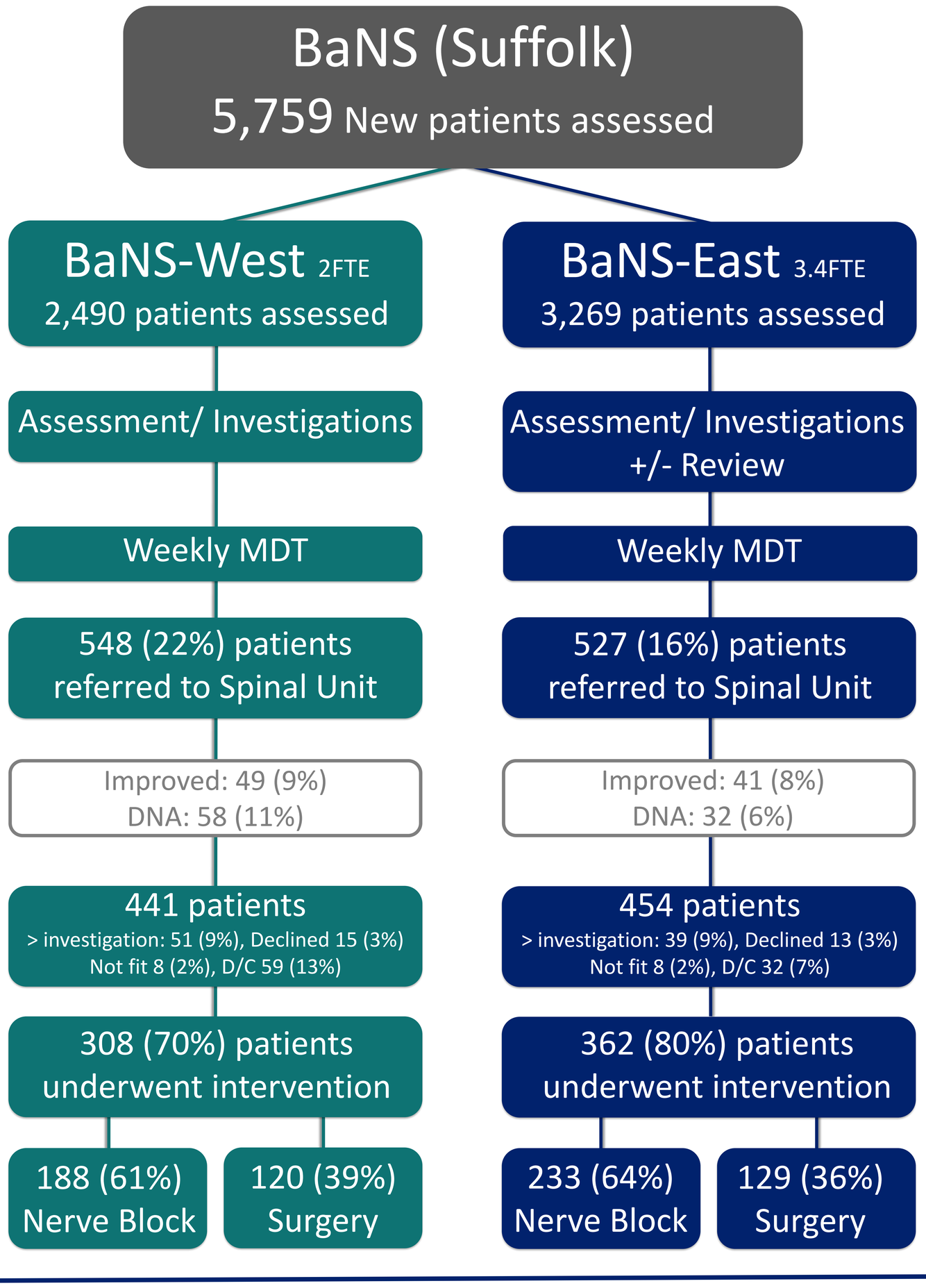
A total of 5,759 patients were assessed during the data collection period. 548 (22%) patients from the BaNS-West and 527 (16%) patients from the BaNS-East were referred into the secondary care spinal unit. Excluding patients that had improved or failed to attend their Spinal Clinic appointment, 308 (70%) of patients referred by the BaNS-West and 362 (80%) of patients referred by the BaNS-East underwent surgically led intervention (nerve root block and/ or surgery).

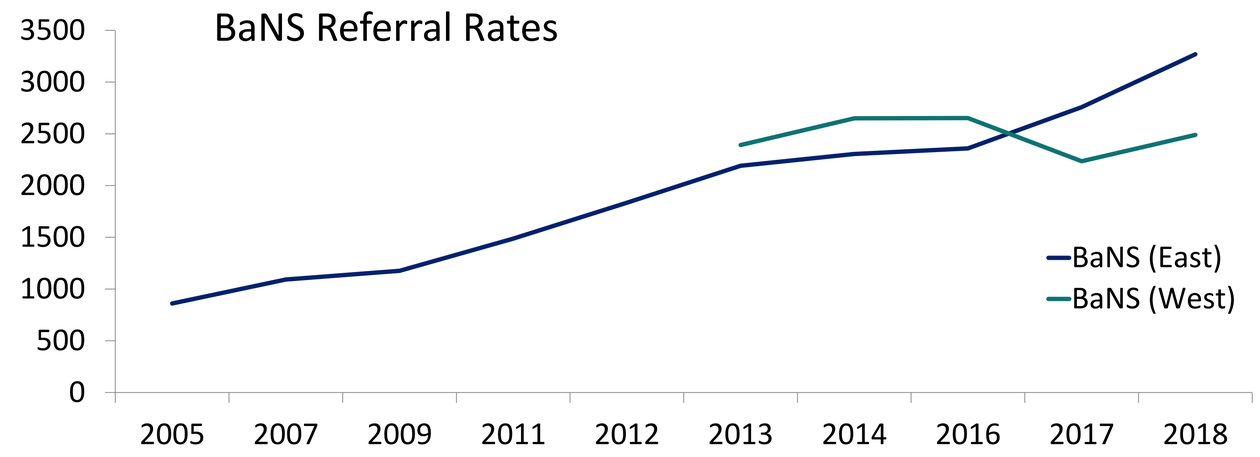
Conclusion

An ESP led diagnostic interface service is effective at triaging appropriate patients for surgically led spinal intervention.

Implications

This evaluation demonstrates the effectiveness of utilising ESP's in spinal triage. Incorporating the ability to review patients following investigation might facilitate improved conversion rates. This data from an established service might be helpful for those wishing to develop and justify a similar pathway.





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