Kent Community Health NHS Foundation Trust

# Pilot: To introduce a sustainable stock of elbow crutches that reduced waiting times for patients.

## Topic Area

## **Please** **identify (more than one option may be selected)**

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| Adaptation |[ ]  Communications and engagement  |[ ]  Estates and facilities (energy, waste, water) |[ ]  Food, catering and nutrition  |[ ]
| Funding and financial mechanisms  |[ ]  Medicines |[ ]  Research, innovation and offsetting |[ ]  Strategic ambition  |[ ]
| Supply chain and procurement |[x]  Sustainable models of care |[x]  Travel and transport |[ ]  Workforce, networks and system leadership |[ ]
| Green/blue space and biodiversity |[ ]  Digital transformation | [ ]  | Sustainability education | [ ]  |  |  |
| Other (please specify):  |

\*Topics aligned with the 12 Greener NHS workstreams (NHS England) are shaded.

##

## Key message / aim

To introduce a timely process in the provision of elbow crutches to community patients. Reducing waste and protecting and managing resources efficiently (greener AHP).

What was the problem?

Elbow crutches are not core stock items for Kent Community Health NHS Foundation Trust (KCHFT) community teams. Following the Covid-19 pandemic, some of the needs of community rehabilitation patients changed. In some cases, patients are waiting for orthopaedic surgery for longer and they are being discharged back into the community sooner. This has increased the need for elbow crutches to be provided by KCHFT physiotherapists.

The ordering of specialist items is lengthy. The physiotherapist had to look up the product, request a quote, complete request forms along with clinical reasoning to be agreed by a panel. There was the wait for the product to be delivered to Nottingham Rehab Supplies (NRS) and then finally, the crutches were delivered to the patient.

This process took the physiotherapist at least 30 minutes and could take up to six weeks for the crutches to arrive. A six week wait in a patient’s acute rehabilitation process can be detrimental to their overall outcome. The number of requests for special orders in the financial year of 2021-2022 was 15, which did not seem to correlate with the perceived need and frustration within the teams.

It was hypothesised that the physiotherapists were using other ways of making sure their patient received best care and the elbow crutches in a timely manner, by, for example, using old recycled stock, paying for equipment from their community team budget, or borrowing from other teams’ buffer stock.

Furthermore, whilst working in the community, clinicians were also seeing elbow crutches being thrown away, sitting in cupboards, garden sheds or at waste sites. We needed to find a quicker and sustainable way.

## What was the solution?

The ‘change’ idea was to pilot having elbow crutches as core stock items for one community team to assess the actual need and the benefits to patients. We process mapped the original way of doing things, and the proposed new way. After some time, the Clinical Commissioning Group (CCG), now known as Integrated Care Board (ICB) agreed to fund 50 pairs of elbow crutches. To ensure sustainably and recyclability, a local agreement was set up with Nottingham Rehab Supplies (commissioned equipment provider) to have one central drop off site to which clinicians were able to have direct access. The elbow crutches were bar coded and can be tracked if a recall was required. The elbow crutches could be returned and reused into the stock.

## What were the challenges?

The time taken to convince the CCG via the Integrated Care and Equipment Services operational group that this was an essential change was time well spent.

It was difficult to prove the need, due to low numbers of elbow crutches being ordered via the specialist orders system in 2021. However, the need has been proven by the use of the elbow crutches that have been used form the stock with the pilot team.

## What were the results/Impact?

Clinical time saved: 3.33 hours were saved during the pilot by changing the process of completing the forms.

Waiting times: No wait time

If elbow crutches are added as core stock items for the whole of KCHFT, this could mean a clinician time saving of at least 80 clinical hours in a year. The likelihood is that demand will continue to increase. The pilot empowered the physiotherapists to progress and support the rehabilitation of their community patients more effectively, in a critical time in their rehabilitation process. It enabled patients to progress to independence and has helped with waiting list caseload management by being able to rehabilitate and discharge patients quicker, (eliminating the potential 6 week wait for crutches) to not have to wait at all. This change would benefit ALL services that access NRS for crutches not just KCHFT.

Cost saving: If each of the eight community teams used 24 pairs of crutches a year at £9.07 instead of £14.99, a saving of £1,136.64 in one year could be realised.

The pilot has ended and proven to be such a success that this will be rolled out to other community teams with the remaining pairs of crutches, (mirroring the pilot process), to enable patients within other teams to benefit as soon as possible.

Following the pilot further discussions were held with ICB and additional funds were provided to provide a buffer stock of elbow crutches to all KCHFT community hospitals (10 sites) across Kent. A process map was identified which enabled patients, family and cares to drop off the elbow crutches back to site and then be recycled into stock.

## What were the learning points?

We learned that changing elbow crutches to core stock would:

* Benefit patients by reducing waiting times for equipment
* Save physiotherapists clinical time
* Have the potential to help with caseload management and reduce waiting times to access community rehabilitation
* Improve sustainability
* Services: cost saving through the re-use of equipment and reduction of waste, reduced mileage for NRS fleet
* The model can be replicated in other teams across Kent within KCHFT

## Next steps

The next step is to provide the data from this pilot to the ICB contracts meeting to prove that if elbow crutches are identified as a core stock item, it reduces waiting times for patients, reduces the clinical time spent in the ordering process, and saves money. This would benefit all other organisations which are affiliated to the Integrated Care and Equipment Services. This includes hospices, acute services, community NHS trusts and social care.

## What the team and/or patients and carers had to say

Following comments captured by Physiotherapist who participated in the pilot:

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| --- | --- |
| Impact on the patient | Impact on the service |
| More empowered, increase in confidence.  | No delay in rehab, able to provide better outcomes, required shorter interventions as progressed more quickly |
| Patient feels more confident mobilizing with E/crutches, helps manage fatigue | Reduced time on caseload as able to provide aid sooner |
| Patient very happy to be able to mobilise independently indoors and out to the car with a suitable aid | Better outcome for patient |
| Patient found EBC allowed her to be more mobile as wzf cumbersome now. Patient can mobilise safely outdoors with appropriate aid | Progress patient sooner off wzf.  |
| Patient able to mobilise with EBC, improving his balance and confidience | Progress patient sooner off wzf. |

## Resources and references

<https://qi.kentcht.nhs.uk/>

## Want to know more?

Contact 1:

* + Shirley Rashid
	+ Professional Lead for (Adult Services) Occupational Therapy
	+ Shirley.rashid@nhs.net
	+ Location & NHS Region if within the UK:Kent Community Health NHS Foundation Trust
	+ Partner organisations involved: NHS Kent & Medway Integrated Care Board & NRS HealthCare
	+ [Reducing the wait for elbow crutches | Quality Improvement (kentcht.nhs.uk)](https://qi.kentcht.nhs.uk/reducing-the-wait-for-elbow-crutches/)