

North Staffordshire CCG – Key Elements of Orthotics Service Specification

Key Elements included in the Service Specification:

- All patients to be offered an outpatient appointment within 3 weeks of the referral being received into the service or within 3 weeks of contacting the service.
- Urgent appointments should be available and allocated against agreed criteria for urgent needs. Patients who have a clinical need against these criteria should be appointed within 48 hours of contacting the service.
- The provider should ensure that there is a clear protocol for booking appointments and that there is a dedicated telephone line manned at specified hours and an answer phone service available during call hours should a member of staff not be available. Advice and queries should also be able to be submitted via a dedicated email address and responses returned within one working day. Information in regards to this should be readily available to patients and their carers.
- The provider will ensure that all devices are ordered from the supplier within one working day of the patient's appointment at the latest.
- Regularly used orthoses should be held as stock items where appropriate to reduce waiting times.
- The provider will implement a robust clinical ordering system and to agree standards including set delivery times for collection/delivery with a small number of orthotics manufacturers where appropriate.
- The provider should ensure that suppliers are held to account for delivery times which should not exceed 10 working days from the point of ordering. Pre-emptive appointments should be made with the patient for the follow up fitting during the first/casting appointment to prevent any delays.
- Each patient should have a named orthotist as their 'case manager' who is responsible for the development and maintenance of an evidence based care plan for all service users to ensure continuity of care is delivered.
- The provider will ensure that there is a governance pathway in place in relation to the delivery of key competencies and standardisation of treatment.
- MDTs and Peer Reviews should be an integral part of the service and should be recognised as core and best practice.
- Ensure appropriate numbers of patients are booked into all clinic sessions to maximise capacity.
- Ensure effective management of waiting lists and waiting times via an appropriate clinic booking system and the implementation of efficiency measures in all clinics in order to reduce unnecessary delays within the system.
- Implement a strategy for identifying and reducing DNA rates in all clinics, including appropriate solutions to minimise and prevent missed appointments and to reduce wasted staff time.
- Interface / joint work with other appropriate services including musculoskeletal, orthopaedics, elderly care, stroke services, diabetes, paediatrics and secondary care surgical provision including the provision of multi/ interdisciplinary clinics where appropriate.
- Deliver basic training for secondary care ward staff.

- Use the results of the patient survey to develop and improve the service experience.
- Deliver services in line with professional guidance and national best practice.
- Ensure patients are integral to the design and on-going development of the service.
- Advice and information must be accurate, up-to-date, consistent and easily accessible. This requires a regular review of knowledge and the appropriate training and supervision of staff, including administration and reception staff and ward staff trained to fit basic orthoses. The provision of advice and information will be a core component of the service and will include support for carers and other health care professionals.
- The operating times should be between 8.30am to 4.30pm Monday to Friday, and clinics will operate for each day of the week. The hours that the service is open for must also be responsive to the needs of patients and therefore there should be provision for at least 2 late sessions up to 8.00pm during the week and/or Saturday morning sessions. The provider must ensure that a safe level of service is offered 52 weeks a year (excluding B/H and weekends).