Review of Neurology Services – Terms of Reference

Introduction/Background

The current neurology service model in NI has largely focused on outpatient delivery. There are approximately 11,000 referrals from GPs for outpatient neurology per annum and 7,000 referrals from other consultants. Current outpatient clinic capacity is for 11,535 patients per year to be seen. There is, therefore, a significant shortfall in outpatient capacity, which is compounded when the capacity required for planned reviews is taken into account.

Neurological disorders (including stroke) also account for about 15% of emergency department attendances and about 10% of emergency medical admissions (excluding stroke). The involvement of neurologists in unscheduled care, in addition to that provided from the Regional Neurology Unit in the Belfast Trust, is an area of increasing focus.

As currently configured, neurology therefore faces significant challenges in terms of waiting list size and length of wait. There are large waiting lists for patients waiting for a first consultant-led neurology outpatient appointment. At the beginning of June 2018 there were 17,987 people on the waiting list with 15,751 waiting more than 9 weeks, 14,168 people waiting more than 18 weeks and 9,325 people waiting more than one year.

On 1 May 2018, the Belfast Trust recalled 2,529 neurology patients following an internal Trust review of one consultant's patients and an external review carried out by the Royal College of Physicians (RCP) which raised a number of concerns.

On 31 July 2018, in the context of the commitment in Health and Wellbeing 2026: Delivering Together to undertake a programme of service configuration reviews, the Department announced a comprehensive regional review of neurology services covering all neurology specialties. While the review focuses on the neurology service for adults, consideration will be given to the challenges faced in the transition from paediatric to adult neurology services.

Following a workshop with stakeholders in September to help shape the review, work commenced in December 2018 with the aim of producing an initial report by early 2019.

Objectives

- Building on existing information from an earlier Neurology Service Needs
 Assessment, National guidance and benchmarking against professional best
 practice, identify future demand for adult neurology services taking into
 account future demographic changes and the range of interlinking
 specialties/specialists;
- Review the existing policy framework and developments across the UK and, taking into account service user and carer views, consider how the future configuration of neurology services can adopt:
 - advancements in technology including the use of e-triage and virtual clinics:
 - new models for both scheduled and unscheduled care; and
 - integrated care pathways spanning primary and community, secondary and tertiary care.
- Building on the Neurological Workforce Planning report 2017-2024, which estimated consultant workforce requirements, identify the workforce and training needs of future service models having regard to:
 - extant professional, clinical and Departmental guidance;
 - new clinical roles, skill-mix, multi-disciplinary working and limits of professional competence;
 - building effective networks of care across the region;
 - ensuring region-wide service resilience with appropriate escalation arrangements.
- To consider the potential for:

- joint initiatives nationally and internationally including on a crossborder basis; and
- the development of research capacity including participation in clinical trials.
- Identify actions required to ensure services are underpinned by effective governance and quality assurance mechanisms, taking into account the findings of the RQIA review.
- Produce a strategic framework with accompanying implementation and investment plan setting out a resilient platform for neurological services that will:
 - ensure that patients across Northern Ireland receive timely access to neurological assessment, diagnosis, treatment, condition management support, and rehabilitation; and
 - enhance primary and community service provision so that unnecessary admissions, excess bed days and length of stay are reduced.

Membership

The review will be chaired by Dr John Craig, Consultant Neurologist.

Membership of the project team will include:

- HSC Board Commissioning;
- HSC Board Data
- PHA Public Health Medicine;
- HSC Neurology X 2;
- PHA Nursing/AHP;
- niNCA;
- NIMDTA;
- Royal College GPs.

Membership will be kept under review to ensure suitable representation. The work of the Project Team will also be supported by workstreams as required.

Meetings

Meetings will take place at least every four weeks, with workstreams meeting more frequently as required.

Proposed Approach

The Review Team will produce an interim report by March 2019 with a final report by Summer 2019.

Outputs

- Identification of future demand and capacity;
- Engagement strategy;
- Identification of new/revised service pathways;
- Revised governance procedures; and
- Strategic framework with investment and implementation plan underpinned by a robust business case.

Outcome

Identification of optimal service configuration of neurology services for the next 10-15 years