Central



How have we discovered new ways of working?

Transcript

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Coming up, five years, yes, it's a long time. I think we we have achieved so much over that period of time. It's still evolving and improving.

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It's all a learning sort of, uh, process and I think we do that really well.

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Yeah, I agree. The other thing that comes to mind is the amount the service has changed over the last five years and, particularly in the community service. I think that's a testament to, to us kind of not shying away from a challenge or just kind of remaining at the status quo, even though it might not be the best thing for the service. We kind of, we've undertaken some big, organizational and structural changes with the service.

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This year has thrown a massive curve ball. Something that shouldn't surprise me anymore is just how well we as a service respond to curve balls. We would ticking along nicely and then all of a sudden the pandemic hits and the MSK service was having to go through it's significant, you know, significant change in response. So, you know, within a couple of weeks, we were we had contacted everybody on our waiting list. It was a huge number of people that were active on our lists. You know, we are we are a big community service. We cover large geographical area. You know, we had fifteen thousand patients we needed to contact, um, and we reduced our service to a skeleton service. We were managing those patients who were urgent that needed to be seen, that we needed to continue to steward through their pathway, offer advice and guidance and so on. And we were still there for GPs who needed advice and guidance and we had to provide something for our for our staff as well, getting through this really, really tricky, uncertain and frankly, scary sort of time. You know, coming out of that first lockdown where we then had to look at restoring our services. Well that was while we were getting guidance coming through, the guidance, as we know, was changing all the time, but again, we responded to it.

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We made our spaces safe, both for patients and the staff. We got patients back into the service again, uh, mostly virtual and then moving back to face to face again. And I think what has really, what has really struck me is, again, this can do attitude that that it's just happened.

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Yeah, I agree. I think, in our service, we don't kind of rigidly stick to our job descriptions. I think if there's something that comes up and someone's got energy to do it or, feels passionately about it or plays into their skill sets, they always give them space to kind of go ahead with that and lead on in a lot of instances. I think, when we first went into BCP, I think that really showed amongst the people who work in our service in them taking on areas of work where they wouldn't usually do that in their day job.

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What we managed to do over those four months in terms of scaling the service down, making sure that we're doing it in a safe way, whilst maintaining as much as possible the well-being of our staff and our patients. I think it was a mean feat that we managed to achieve. One of the challenges that I personally felt and a few others in the team did was that, in the initial stages of the lockdown, it was kind of you and everyone, as I say, kind of sprung into action and there was a lot of adrenaline and it was, dare I say, bit exciting and new. People kind of getting used to it. I think the challenge for me came when probably between two and three months realising actually we're in this for the long haul now and it's the kind of adrenaline starts to wear off and you think, oh, we need to kind of start embedding these new ways of working and with the challenges that go with that and the challenges that we are still working through with things like enabling people to work from home. We're a lot more reliant on technology nowadays and the kind of challenges that come with that.

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Whilst covid-19 has been a challenge, it's also created opportunities for us in terms of how we move our service to a new way of working, uh, supporting some of the work around personalized care, in particular around empowering patients. You know, we often assume patients want to come in to see people face to face. But actually, how many would prefer to be seen, you know, virtually by video, because it means they don't have to travel

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This kind of period of time has given us a bit of time for reflection, although we have been kind of working quite flat out. I think there has been quite a few opportunities to reflect kind of on our own working practices on how we deliver care as a service, and how we operate in the local health economy, which I think in the normal day to day, operations of a service it can be quite difficult to have a circuit breaker and take a step back and have that time for reflection, which I think's really valuable.