

**Three Questions received from member of the public:**

Dr Diane Johnson PhD MSc BSc (Hons FGS FRMS)

**Answers (responded at 22.3.24 Board in Public):**

*Response from BLMK ICB (Dr Sarah Whiteman, Chief Medical Director)*

*MOP's opening comments*

*Where the NHS constitution for England makes clear that the patient has "the right to make choices about the services commissioned by NHS bodies and to information to support these choices". More specifically "decide which provider you would like to receive care from as an outpatient and choose the clinical team who will be in charge of your care within that provider organisation". Sadly, currently patients in Milton Keynes are being told that they have to be referred by primary care to the commissioned "Ravenscroft" for musculoskeletal issues with **no other choice being offered** on how to access specialist musculoskeletal care.*

*Three questions and answers then split below:*

**Q1. What provision does BLMK-ICB make for ensuring musculoskeletal patients in Milton Keynes receive their legal right to choice at the point of their referral for specialist care as defined by the NHS Constitution for England and how is this being communicated to both patients and GP's?**

There are a number of conditions, pathways and providers that support patients in Milton Keynes with Musculoskeletal problems, but the right to choice of provider is not applicable to all services.

Part 8 of the NHS Standing Rules places obligations on commissioners in relation to patient choice, including enabling the legal rights to choice of provider and team. The rights apply when:

1. the patient has an elective referral for a first outpatient appointment (new episode of care)
2. the patient is referred by a GP, optometrist or dentist into secondary care
3. the referral is clinically appropriate as determined by the referrer
4. the service and team are led by a consultant or a mental healthcare professional
5. the provider has a commissioning contract with any ICB or NHS England for the required service.

Therefore, the legal right to choose does not apply to community services (in this instance MSK) as they are not consultant led services. If the community service recommended a referral to consultant-led services in secondary care, a choice of provider will be offered in line with the criteria set out above.

***Q2. What process exists for patients in Milton Keynes to receive specialist musculoskeletal care if they don't consent to treated by Ravenscroft/a non-NHS commissioned service provider and how is this being communicated?***

Patients have the legal right to choose whether to access services or not, regardless of whether it is consultant led or not. If a patient with capacity chooses not to be referred to the community MSK service as part of their initial consultation, this must be noted and the implications to their health care condition discussed. Ultimately, if the patient still decides not to be referred, that is their right but the choice is informed.

*(There is no question 3!)*

***Q4. What plans do BLMK-ICB have to obtain and assess patient feedback to ensure the current and futures proposed new musculoskeletal service providers for Milton Keynes will not just become barriers to care but are actual real useful effective service providers?***

During the last two years, the ICB has listened to feedback from residents to help inform what services should look like in the future. Residents have told us that sometimes they find services difficult to navigate and we have placed a lot of emphasis on improving this. We are working in partnership with the four Healthwatch's in BLMK to further refine the model and also to hear views from seldom heard groups. The outcome will enable the system to conclude the work on the future model of Musculoskeletal care before we move forward and seek new provider arrangements during 2025/26.