

Supporting People to "Wait Well" for Spinal Orthopaedic Consultation

A National Clinician Scoping Survey Informing System-Level Approaches

Rosemarie Quinn · NHS Greater Glasgow & Clyde · NES AHP Careers Fellowship 2025–26

KEY MESSAGE

Information available to support people waiting for spinal orthopaedic consultation varies considerably across NHS Scotland services, highlighting a clear system-level opportunity for more consistent "Waiting Well" approaches.

BACKGROUND & METHODS

INTRODUCTION

Spinal orthopaedic waiting times remain prolonged across NHS Scotland, with **most people referred not proceeding to surgery**. Local referral data indicate approximately **18% of patients** proceed to surgery, highlighting the importance of appropriate expectations and early support while waiting.

82% — No Surgery

18% Surgery

Fig 1. NHS GGC Spinal Referrals (n=1,007)

National policy — **Realistic Medicine** and **Planning with People** — emphasises early information, shared decision-making, and consistent support while waiting.

Effective specialist consultations rely on people being prepared with **realistic expectations** and an understanding of the spinal pathway. However, provision of structured waiting-list information varies across services.

This work represents **Phase 1 of an NES Fellowship project** exploring system-level opportunities to support preparedness for spinal orthopaedic consultation.

METHODS

- Survey design:** 12 quantitative & free-text questions via Microsoft Forms
- Dissemination:** National professional networks, MSK/spinal networks & social media
- Participants:** First-contact clinicians (physiotherapists & surgeons) in spinal orthopaedic or neurosurgical pathways
- Analysis:** Descriptive analysis; qualitative comments reviewed thematically

SURVEY REACH

31 Clinician respondents

11 Health Boards represented



Fig 2. National survey reach across NHS Scotland

- Greater Glasgow & Clyde
- Lanarkshire
- Lothian
- Ayrshire & Arran
- Forth Valley
- Fife
- Tayside
- Grampian
- Highland
- Borders
- Dumfries & Galloway

RESULTS

PATIENT PREPAREDNESS

Respondents indicated that people are often **not well prepared** for their first spinal orthopaedic consultation.

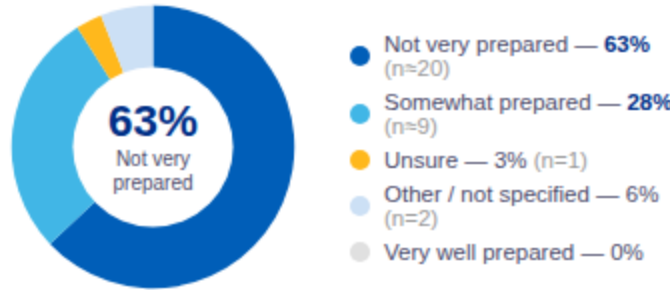


Fig 4. Clinician-rated preparedness for first consultation (n=31)

Variation in early information provision was perceived to **directly influence preparedness** for consultation and expectations of the spinal pathway.

DO PATIENTS RECEIVE INFORMATION AT REFERRAL?

Clinicians were asked whether patients receive any information when added to the spinal waiting list.

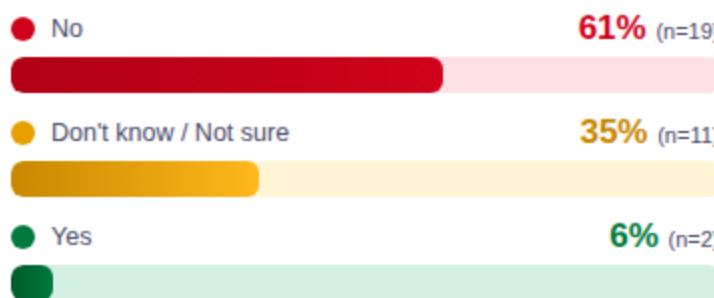


Fig 7. Clinician-reported information provision at point of referral (n=32)

Only **6% of clinicians (n=2)** reported that patients receive information when added to the spinal waiting list — underscoring a critical gap in early communication.

SUPPORT CLINICIANS NEED

Clinicians identified key system-level supports to better prepare patients while waiting:

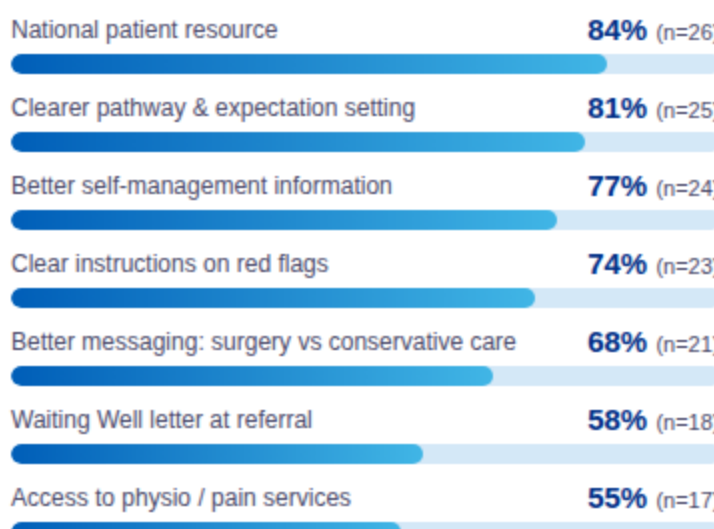


Fig 8. System-level supports identified by clinicians (n=31)

RESULTS (CONTINUED)

PRIORITY INFORMATION NEEDS

Clinicians identified the following as highest priority topics for people waiting for spinal consultation:



Fig 5. Priority information needs identified by clinicians (n=31)

SUPPORT FOR A NATIONAL RESOURCE

84%

(n=26 of 31)

of clinicians supported development of a nationally aligned "Waiting Well" resource

Fig 6. Clinician support for national resource (n=31)

These findings highlight a **system-level opportunity** to strengthen consistent, early information provision and support while people wait for specialist spinal consultation.

CONCLUSION

National clinician perspectives highlight a clear opportunity to **strengthen consistent, early information** to support preparedness for spinal orthopaedic consultation. Provision of structured waiting-list information currently varies across services, and this variation is perceived to influence patient expectations and consultation outcomes.

NEXT STEPS

- Phase 2 — Patient Engagement:** Engage with people currently on spinal orthopaedic waiting lists to explore their experiences and information needs while waiting for consultation.
- Co-design:** Insights from patient engagement will support co-design of a "Waiting Well" resource, aligning clinician priorities with patient-identified needs.
- National alignment:** Supporting national policy aims for early, person-centred care while waiting — with the aim of developing a *Once for Scotland* resource.

REFERENCES

- Scottish Government (2016). *Realistic Medicine: Chief Medical Officer's Annual Report*. Edinburgh.
- Scottish Government (2021). *Planning with People: Community Engagement and Participation Guidance*. Edinburgh.

ACKNOWLEDGEMENTS

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Phase 1 of an NES Fellowship project exploring system-level opportunities to support preparedness for spinal orthopaedic consultation across NHS Scotland.