

Knee Osteoarthritis – Transformational change in Musculoskeletal Physiotherapy Service Delivery

A Patient Centred Approach Integrating Shared Decision Making and Realistic Medicine

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Background

- Osteoarthritis (OA) is the most common musculoskeletal condition in older people ²
- The knee is the most common site for OA in the body ²
- The prevalence of knee OA in adults over 45 in Scotland is reported at 16.6%²
- Currently within Lothian approximately 150,000 people are living with knee OA
- There is a projected increase of 66% in people >65 years of age in population in Lothian over the next 20 years
- Typically 1 in 5 people aged >45 will seek treatment for their knee OA²
- People with knee OA commonly refer themselves or are referred from their GP/ Consultant to Musculoskeletal Physiotherapy to receive help for their condition
- In response to increasing and future service demands, variation in physiotherapy management between clinicians, increasing complexity and co-morbidities of people with knee OA and in response to the developing external evidence base, alternative models of service delivery were explored, developed, tested and refined utilising existing resources.

Aim

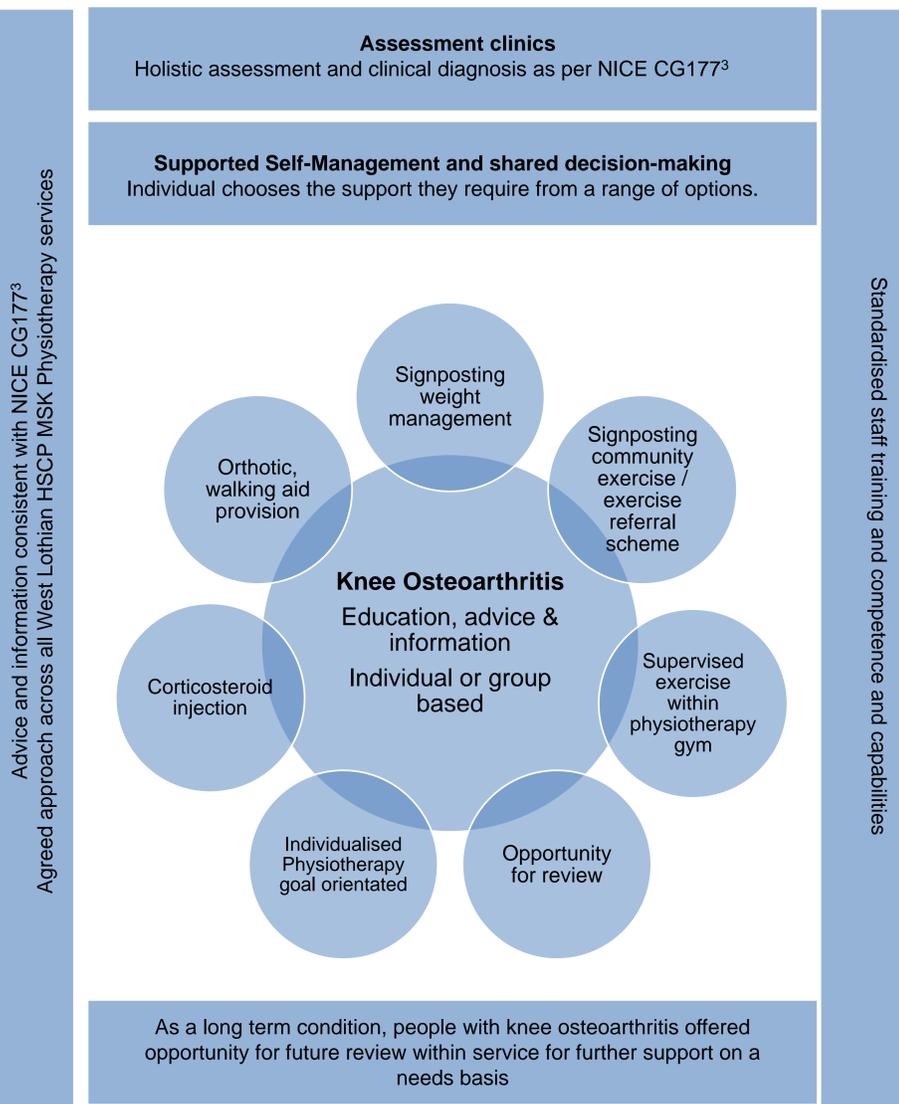
To develop a high quality programme of care for people with knee OA, which is safe, effective and truly patient-focused, integrating the principles and values of shared decision-making and realistic medicine.

Methods

- Existing clinical practice was evaluated through patient focus groups, profiling referrals, case note evaluation and outcome
- National guidance documents, expert opinion and partnership with patients through focus groups developed a shared vision for service redesign.

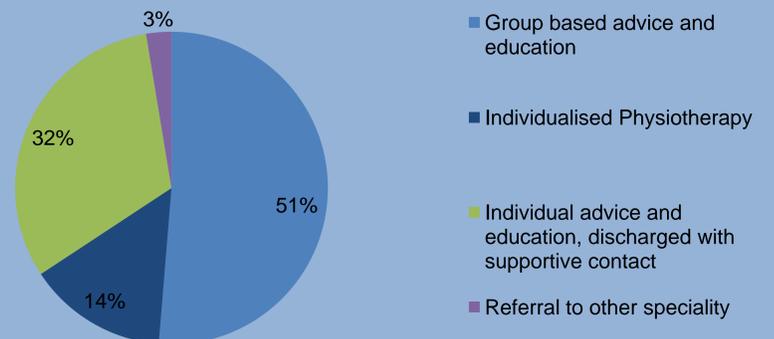
Knee OA Programme- Key aims and components

- To help people understand their condition better
- To help people make informed choices
- To demonstrate that exercise is safe and effective

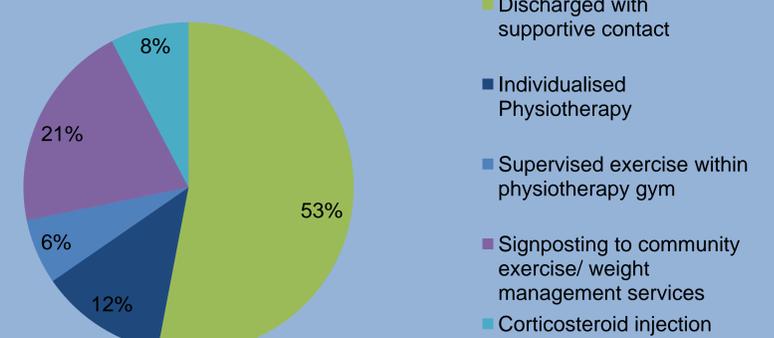


Outcomes

Outcome choices for people with knee OA who attended assessment clinic n=509, April 2016 - August 2018

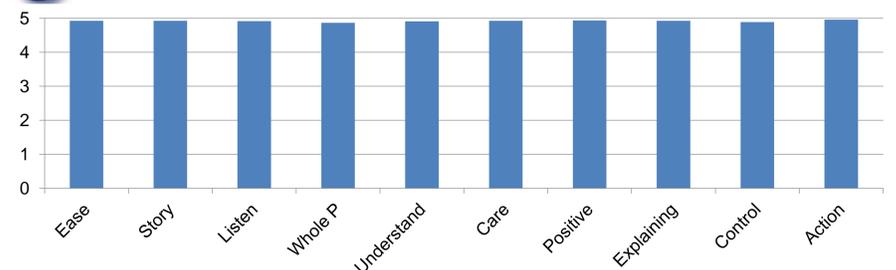


Outcome choices for people with knee OA who attended the group based advice and education classes n= 256, April 2016- August 2018



As a long term condition, people with knee osteoarthritis offered opportunity for future review within service for further support on a needs basis. Current re-attendance rate = 2.9%

CARE Measure "A person-centred consultation process measure which assesses empathy in the context of the consultation between patient and clinician."



“Class very helpful and informative. Enjoyed hearing from other patients.”

“Very helpful and re-assuring.”

“Class really beneficial, answered all my questions.”

“Motivated to lose weight and undertake exercise.”

“Helpful information, attending the gym has helped so much.”

“Class - well explained, understand condition better, speaking to people with the same problem.”

“Back to eat humble pie! I didn't think such a difference could be made with such simple things.”

Conclusions

When provided with a diagnosis in a meaningful way, with time to discuss a variety of management options, in a shared decision-making context, patients with knee OA in the majority feel empowered to be able to self manage with advice and signposting alone.

References

- 1 Ackerman, P., Smyth, J. (2017) Embedding a realistic medicine approach for patients with knee osteoarthritis in West Lothian Physiotherapy Services. Results from pilot of service delivery redesign.
- 2 Arthritis Research UK (2018) State of musculoskeletal health 2018.
- 3 National Institute for Clinical Excellence (2014) CG177. Osteoarthritis : Care and management
- 4 Scottish Government (2017) NHS Scotland Chief Medical Officers Annual Report 2015-16. Realising Realistic medicine

Acknowledgements

Crummey, O. Lead Physiotherapist, Musculoskeletal Out -Patient Services, West Lothian HSCP