

The North Tees model – An NHS physiotherapy led approach to ESCAPE Pain

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MSK Core Outpatients; Escape Pain



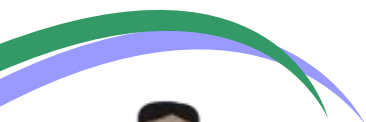
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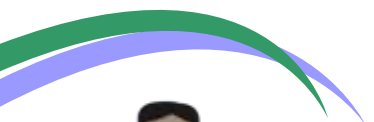
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Transforming our services - Putting patients first - Valuing our people - Health and wellbeing



NTHFT; Who we are ?



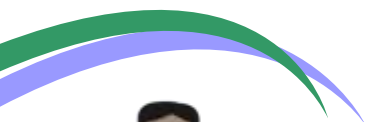
NTHFT; Who we are ?

University Hospital of North Tees & University Hospital of Hartlepool are general hospitals in covering Hartlepool, Stockton and parts of county Durham with a community base of approximately 400,000.



Key

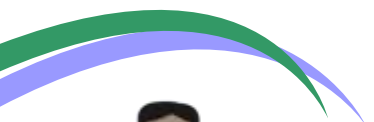
- General patient catchment area
- Extended patient catchment area for service developments



NTHFT; Our Population Hartlepool

The area's the trust covers are typically of low socioeconomic standing with (compared to national average);

- Lower education outcomes
- Greater risk of poverty (6th highest in UK)
- Higher risks of long term unemployment
- Higher risks of COPD/smoking related deaths
- Lower life expectancy
- Higher obesity rates
- Increased alcohol related hospital admissions
- Increased self-harm related hospital admissions
- Increased opioid use
- Reduced physical activity levels



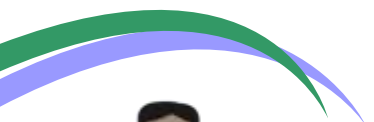
NTHFT; Our Population Stockton-on-Tees

The area's the trust covers are typically of low socioeconomic standing with (compared to national average);

Described in the media as “England’s most unequal town”

Lift expectancy difference of approx. 8.4 years depending on part of the town patients live in, as low as 64 years old.

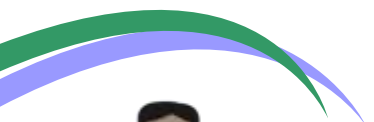
- Increased risk of poverty (36th in UK *Offset by Yarm, Ingleby Barwick)
- Increased risks of long term unemployment (60th in UK)
- Increased opioid use
- Reduced physical activity levels



NTHFT OA Knee Class

Physiotherapy outpatient clinic previously providing an OA Knee Class;

- 6 weeks
- 6 sessions (once per week)
- Adhoc 1-2-1 informal education
- rolling cohort

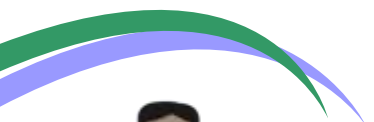


OA Knee to Escape Pain

NTHHFT Existing OA Knee Class changed to Escape Pain in 2018.

Escape Pain Class:

- 6 weeks
- 12 sessions (twice per week)
- Structured group education / discussion
- Static cohort.



OA Knee to Escape Pain (Funding)

Nil funding required; same staffing, taking place within NTHHFT rehabilitation building.

Positive relationship with NHS Hartlepool and Stockton-on-Tees CCG – Fully supportive of innovation within NTHHFT.

Allied Health Sciences Network has provided Escape Pain course training for 38 of our staff



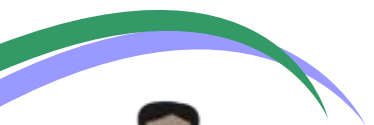
Escape Pain; Entry Pathways

GP Referral into MSK Service

Assessed and screened for Escape Pain by;

- Physiotherapist
- MSK Extended Scope Practitioner

We do not current accept self referrals.



Who's in ? Who's out?

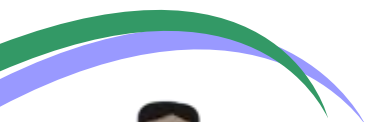
CONTRAINDICATIONS;

- Unstable Diabetes
- Unstable Angina
- Systolic BP >180, Diastolic BP >100, BP Drop >20
- Resting Tachycardia >100bpm
- Uncontrolled Atrial or Ventricular Arrhythmias
- Unstable or Acute Heart Failure

INDICATIONS;

- Patients that would benefit from a generic loading exercise programme for osteoarthritis
- Patients that would benefit from osteoarthritis education
- Patients that would be appropriate for a group setting - ?would they be more appropriate for a 1-2-1
- Patients that would be able to attend twice weekly for 6 weeks

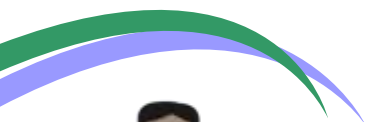
**'IF ITS
NOT OA,
ITS NOT
OKAY !'**



Escape Pain; Unable to attend?

1-2-1 sessions with Physiotherapist or Specialist
Therapy Assistant.

Refer to Phone App.



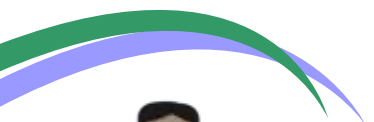
Escape Pain; Exit Pathways

Internal;

- Physiotherapist
- Musculoskeletal Extended Scope Practitioner(CSI, Orthopaedic Referral)

External;

- Self Management
- Active Health Referral
- GP

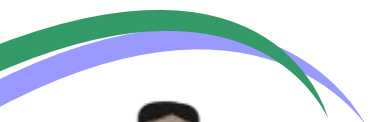


Escape Pain Class; Outcomes

Results collated by staffing at site and graphed by health innovation network.

Outcome Measure;

- HOOS
- KOOS
- SWEMWEBS
- Retention Rates



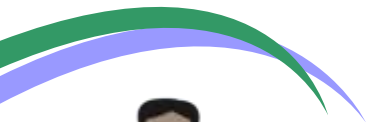
Escape Pain DNA Rates

Initial DNA rates were particularly high; patients would often not understand the commitment or requirements necessary.

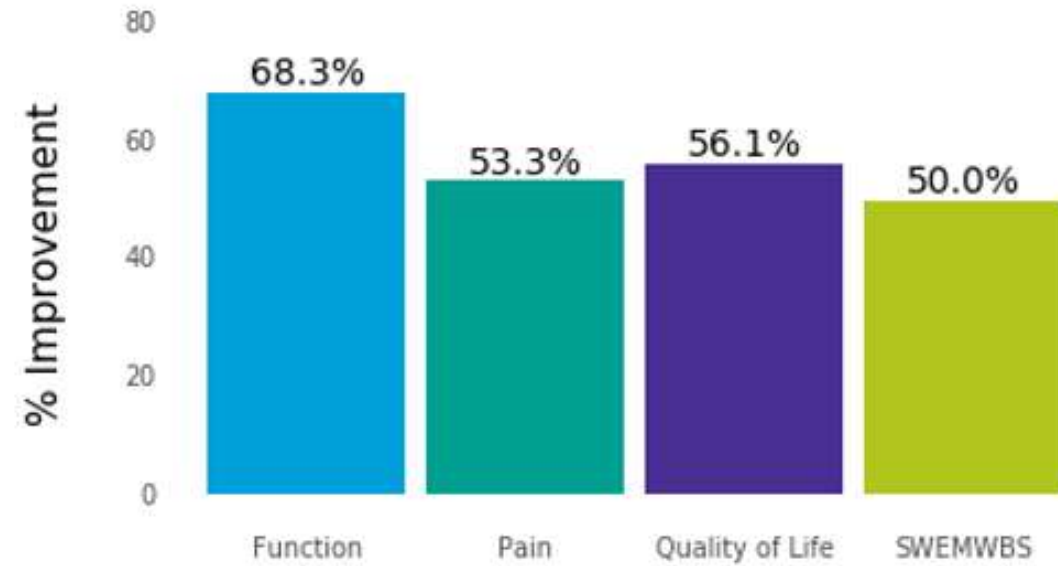
46%

This was overcome by educating the patients about the benefits of escape pain and expectations at the point of referral, triaging referrals coming in to avoid inappropriate referrals.

25%



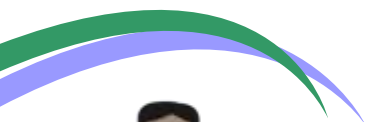
Escape Pain Class; Outcomes



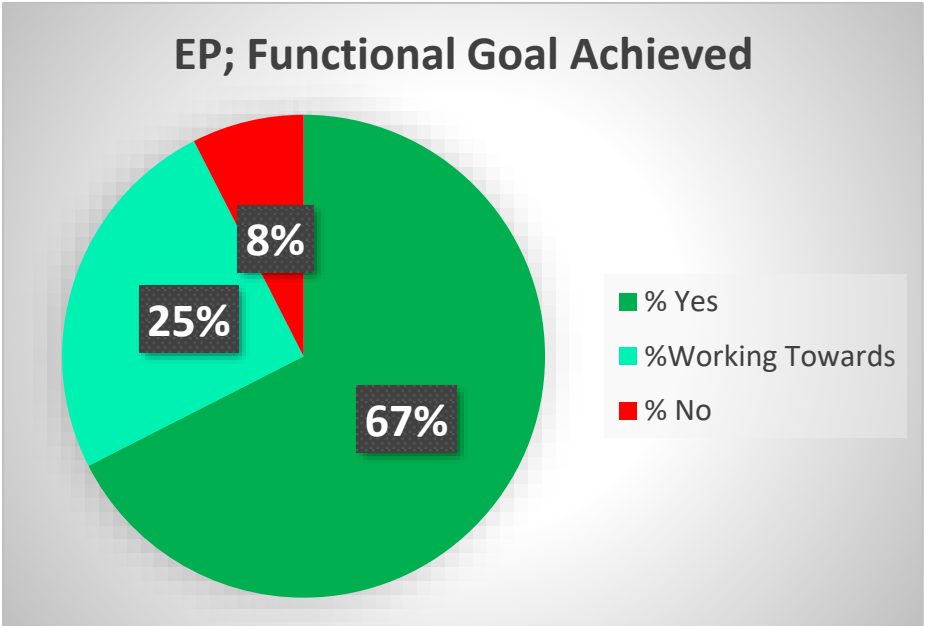
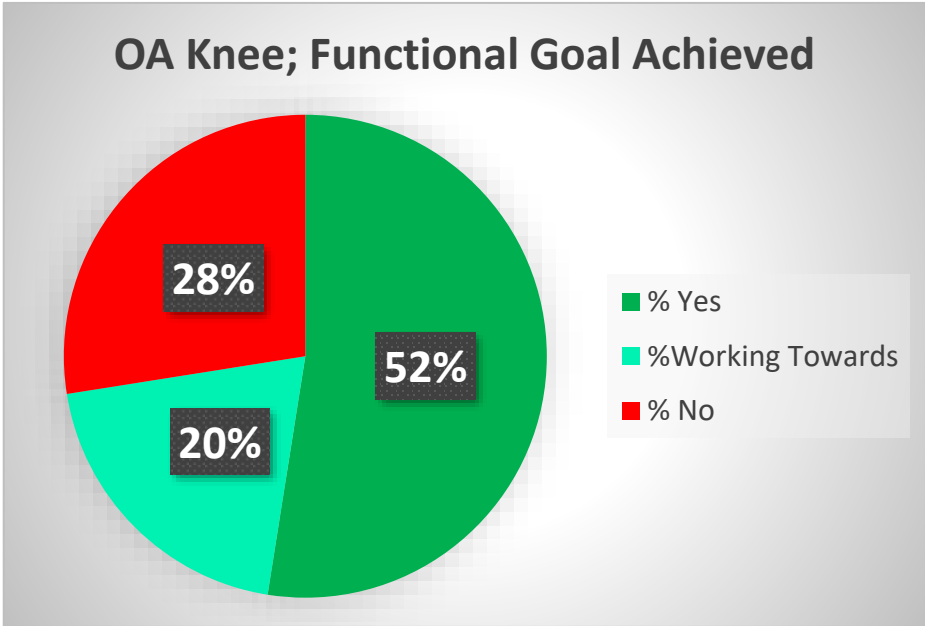
OA Knee / Escape Pain Class Audit

Internal Audit compared 40 patients undertaking the OA Knee class; compared 40 patients(knee) undertaking Escape Pain class. North Tees only.

Looks at; Functional Goals, Post Class patient pathway, MSK Assessment Outcomes, Staff Feedback, Patient Feedback.

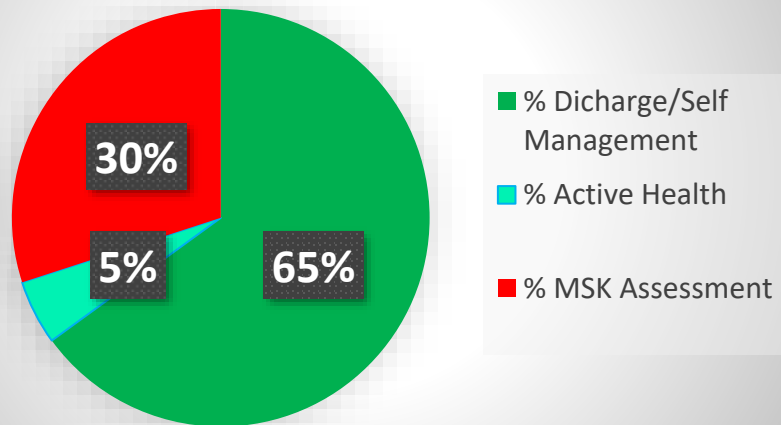


Post Class Functional Goals Achieved

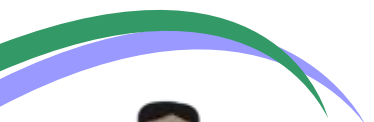
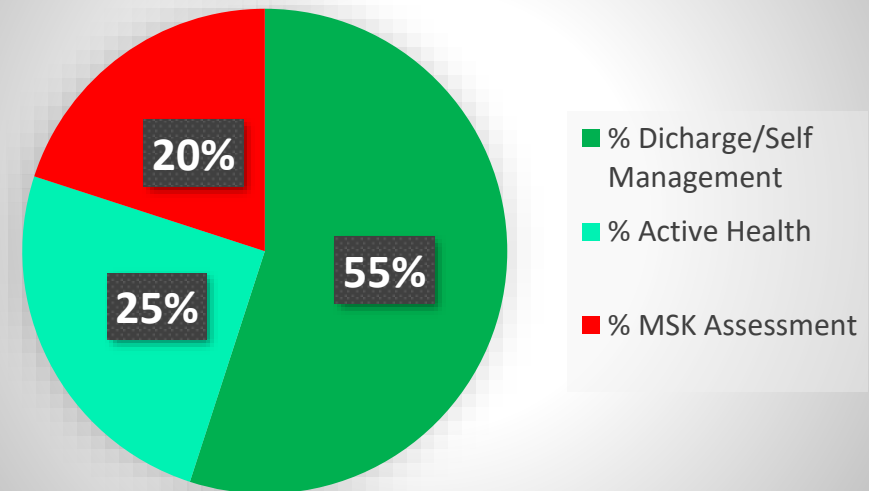


Post Class Pathways

OA Knee; Post Class Pathway

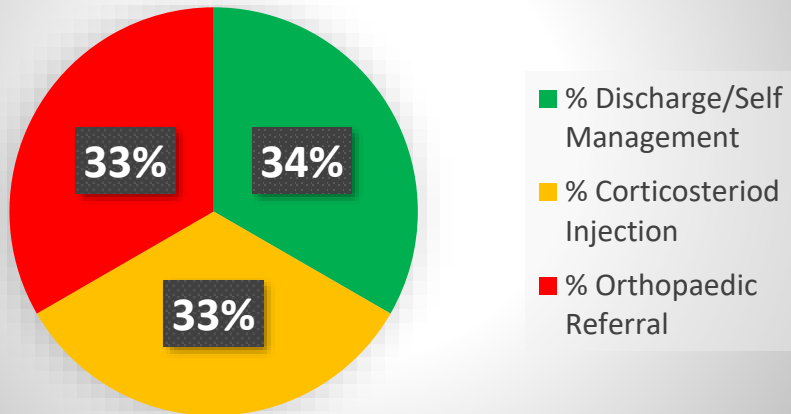


EP; Post Class Pathway

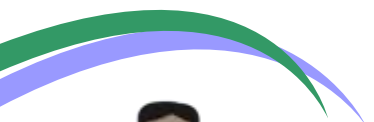
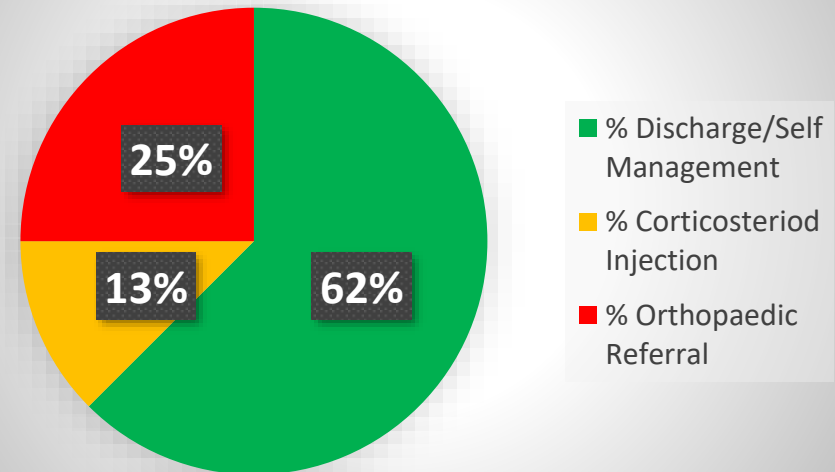


MSK Assessment Outcomes

OA Knee; MSK Assessment Outcomes



EP; MSK Assessment Outcomes



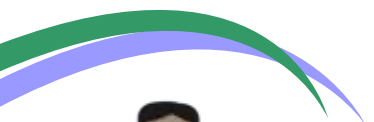
Staff Feedback

“Those that complete the course appear to have a better result than previously, however twice weekly restricts certain patients from attending / completing course”

“I like the structure of the class – everyone is getting the same input”

“Patients sometimes not aware they have to attend twice weekly”

“Still some confusion re triage process”



Patient Feedback

“I don’t think I would get the benefit of the class if this was only once per week”...

“The Education is very thorough and found a lot of my questions where answered”...

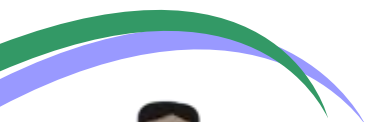
“Before the class, I didn’t think I had the time to do my exercises, now I am going to keep up my exercises at home every Tuesday and Thursdays at 14:30”...

“I have really enjoyed spending time with my cohort and we have already organised to all meet up for a coffee”...

“Very informative with pain management, staff helpful and professional”

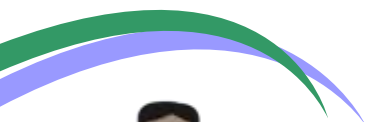
“Patients not liking different clinicians on different days”

“Difficult to attend twice weekly – cost of parking / time.”



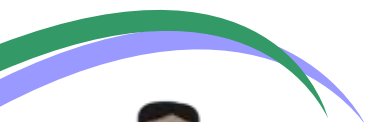
Conclusion

- Improvement in patient undertaking overall self management(70%-80%).
- Improvement in overall functional goal achievement/working towards(72%-92%)
- Greater uptake in active health referrals(5%-25%).
- Reduction in patients sent to MSK for an assessment(30%-20%).
- Reduction in Corticosteroid injections(33%-13%).
- Reduction in orthopaedic referrals(33%-25%).



Escape Pain; where do we go from here

- Continual increased demand for classes as more patients become aware of it
- Conversations have taken place with Tees Active exploring a potential working partnership between the trust and the leisure organisation
- Setting up a peer support group in conjunction with versus arthritis
- Possibility to using Band 4 Technical Assistants to run the class



Any Questions ?

Thank You

