

10/10

MSK Clinical guidelines

Cutting clinical variation and improving patient care.

CLINICAL EXPERTISE

Connect

Connect has developed a unique set of clinical guidelines covering the top 10 most common conditions in order **to deliver and measure the most clinically effective care.**



“It’s great being able to reassure the patient from the outset that they are receiving the right treatment.”

Sue Campbell, Senior Physiotherapist, who developed the lateral epicondylitis guideline

The problem

Clinical Variation

Clinical supervision is subjective and limited monitoring
Clinical supervision has been proven to promote a healthy culture for development, improve competence of staff and reduce clinician stress and sickness rates, but **NOT** been proven to address variation in practice.

Patients should have equity of access to care across the UK regardless of where they live

Patients who live in areas of deprivation are much less likely to have a knee or hip replacement than from affluent population areas.*

Information overload

7,000 good quality MSK Randomised Control Trails are produced per YEAR in English alone
It takes **17 years** to translate evidence based practice into routine clinical practice and National Clinical Guidelines produce updates every 3 years

If you read **one article per day, you’d be 20 years behind**, so we needed to close this gap and help our clinicians have evidence at finger tips.

10/10 Traffic light system – covering what to do and what not to do

Below is an example 10/10 guideline for low back pain +/- radiculopathy



TENS, Traction, Supports, Electrotherapy, Acupuncture

Massage/manual therapy, Yoga, Psychological treatment combined with physiological

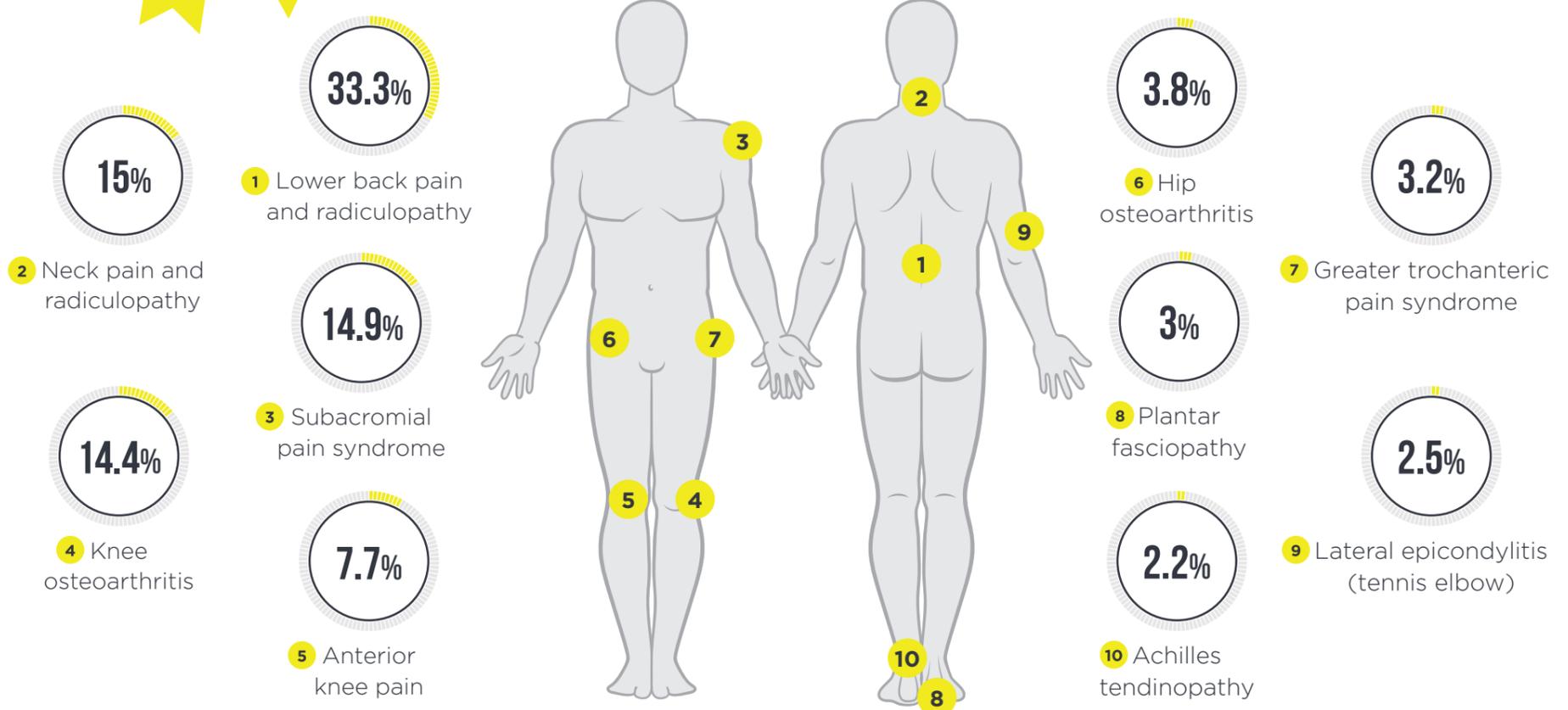
Lifestyle advice, Pharmacological treatment, Physical therapy/exercise programmes, Nerve root injection (after 6 weeks if severe)

*www.qualitywatch.org.uk/indicator/deprivation-and-access-planned-surgery

**TOP
TEN**

The top 10 most common MSK complaints

Prevalence of 10/10 conditions in Connect's services



“As a clinician 10/10 offers clear guidance as to best practice in managing these common MSK complaints and helps us to deliver the most evidenced treatments to our patients.”

Ellie Beck, ESP Physiotherapist, Clinical Team Leader, CMATS, who developed the knee osteoarthritis guideline

Benefits of 10/10 MSK Clinical guidelines

1. Continuous improvement

- a. Created the ability to nationally benchmark our services, identify variation in practice, ask intelligent questions and empower clinicians and service leaders to optimise quality outcomes for patient care.

2. Patient outcomes

- a. Through transparent performance management measures, our clinical outcomes have improved – EQ5D scores have improved from a range of 0.05 to 0.21 in 2013, to a range of 0.1 to 0.40 in 2017.

3. Performance management

- a. Drives performance evidenced by Clinical Outcomes above published data
- b. Facilitates Improvement of collection rates by **50%**

4. Innovation

- a. Continues Connect's record of innovation in MSK services
- b. Provides research material/ data for publication presentations

Performance management dashboard

Simple and effective tool gives a live snap shot of activity

- 1 Interactive body map
- 2 Average score shift of EQ5D by 10/10 pathway
- 3 EQ5D completion performance
- 4 Average no. days to treatment
- 5 % referred to secondary care
- 6 EQ5D improvement performance
- 7 Ave no. of treatment sessions
- 8 Ave time in service
- 9 Ability to filter by time period, region, contract and clinician



“The 10/10 guidelines are a good way of ensuring we are working within the **evidence base** and a good opportunity for anyone interested in research.”

Mark Leighton, Senior Physiotherapist, who developed the anterior knee pain/patellofemoral syndrome guideline