Collaboration to improve MSK health and outcomes for people with MSK conditions

Thank you for joining the webinar
The session will start at 11.00
Housekeeping Rules

• Please keep your skype and phones on MUTE
• Please note that this session will be recorded
• This is an interactive session and questions can be asked via the skype messaging system.
• Please note that everyone can see your questions
• We will aim to answer your questions after the presentations.
• We will post the Q&A, the presentation and recording on the K-hub after the webinar
Outline

• Welcome and introduction overview to the Webinar, Nuzhat Ali, National Lead for MSK Health, PHE

• Raising ambition to improve the MSK health of the population, Prof. John Newton, Director of Health Improvement, PHE

• System partners working in collaboration towards prevention, early detection and better outcomes for people with an MSK condition, Dr. Liam O'Toole, CEO, Versus Arthritis

• MSK health: NHS 10 year plan and prevention, Prof. Peter Kay, National Clinical Director for MSK, NHS England

• Launch of the MSK Knowledge-hub, and Faculty of Public Health-MSK Special interest Group, Clare Perkins, Deputy Director Priority & Programmes, PHE.

• Highlight existing key MSK resources, Clare Perkins

• Panel Q and A – Audience
The MSK Burden- What do we know?

- **Global Burden of Disease study 2016** MSK conditions are the leading cause of years lived with disability and the 3rd largest cause of disability adjusted life years (DALYs) in the UK today.

- Affects over 14 million people nationally. This number is predicted to increase significantly in the next 10 years.

- 1 in 5 primary health care consultations

- Are associated with a large number of co-morbidities, including depression and obesity.
**What health problems cause the most disability?**

- Communicable, maternal, neonatal, and nutritional diseases
- Non-communicable diseases
- Injuries

### Years lived with disability (YLD):
A measure of the number of years somebody has lived with a disability or in a state of ill-health. Weighted so that more severe conditions are attributed a higher value.

### Top 10 causes of years lived with disability (YLDs) in 2017 and percent change, 2007-2017, all ages, number

<table>
<thead>
<tr>
<th>2007 ranking</th>
<th>2017 ranking</th>
<th>% change 2007-2017</th>
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</thead>
<tbody>
<tr>
<td>Low back pain</td>
<td>1</td>
<td>Low back pain</td>
</tr>
<tr>
<td>Headache disorders</td>
<td>2</td>
<td>Headache disorders</td>
</tr>
<tr>
<td>Depressive disorders</td>
<td>3</td>
<td>Depressive disorders</td>
</tr>
<tr>
<td>Neck pain</td>
<td>4</td>
<td>Neck pain</td>
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<tr>
<td>Falls</td>
<td>5</td>
<td>Diabetes</td>
</tr>
<tr>
<td>COPD</td>
<td>6</td>
<td>Falls</td>
</tr>
<tr>
<td>Age-related hearing loss</td>
<td>7</td>
<td>Age-related hearing loss</td>
</tr>
<tr>
<td>Diabetes</td>
<td>8</td>
<td>COPD</td>
</tr>
<tr>
<td>Anxiety disorders</td>
<td>9</td>
<td>Anxiety disorders</td>
</tr>
<tr>
<td>Asthma</td>
<td>10</td>
<td>Other musculoskeletal</td>
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<td>Other musculoskeletal</td>
<td>11</td>
<td>Other musculoskeletal</td>
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</tbody>
</table>

| 12 | Asthma | -8.5% |

Musculoskeletal conditions are a costly and growing problem.

Prevalence of MSK conditions is being fuelled by our ageing population and rising levels of physical inactivity and obesity.

Each year 20% of people in the UK see a doctor about a MSK problem.

The NHS in England spends £5 billion each year on treating MSK conditions.
Impact of MSK on productivity

MSK 2nd biggest cause of days lost in work after cough and colds

In 2016,
over 30.8 million working days are lost due to MSK conditions

that accounts for 22% of sickness absence

MSK conditions cost the UK an estimated £7 billion a year
Quality of Life

Type of long term condition

- No long term condition
- Diabetes
- High blood pressure
- Cancer
- Asthma
- Angina or heart problem
- Kidney/Liver
- Musculoskeletal
- Mental health

Quality of life score

Financial year 2016/17

Source: PHE analysis of GP Patient Survey (GPPS)
Raising ambition to improve the MSK health of the population

Professor John Newton,
Director Health Improvement, PHE
Musculoskeletal Health:

A 5 year strategic framework for prevention across the lifecourse
Help maintain and improve the musculoskeletal health of the population in England (across the life-course), supporting people to live with good lifelong MSK health and freedom from pain and disability (e.g. prevention)
MSK Health Programme
Impacts in 5 years

- Improved MSK health outcomes and equity across the life course through primary prevention
- Increase in the Quality of Life (QALY) s for people living with MSK Health conditions
- Reduce the social and economic gap for people with a MSK condition
- Improve the employment outcomes of people disabled through MSK Conditions.
Public Health England

Commissioners
- commission training to improve the skills and competencies of the current and future workforce
- commission evidence-based interventions for people with specific MSK conditions

Voluntary Sector
- empower local communities and influence and shape policy decisions regarding MSK

Local Government
- support discussions between the wider public health workforce to promote a healthier ageing environment
- engage with local businesses to develop local workplace health standards

Royal Colleges and Associations
- provide pre and post-graduate education and professional development

Healthcare Professionals and Providers
- influence behaviour to improve MSK health as part of making every contact count (MECC)
- raising awareness of MSK key risk factors and interventions
Collaboration towards prevention, early detection and better outcomes for people with an MSK condition,

Dr Liam O'Toole, CEO, Versus Arthritis
MSK health: NHS 10 year plan and prevention,

Prof. Peter Kay, National Clinical Director MSK
MSK Health Resources

Clare Perkins, Deputy Director, Public Health England
MSK Knowledge Hub Site

- The PHE Musculoskeletal Health Improvement team has recently developed a Knowledge hub site.
- Join the group to share knowledge and keep up-to-date with the latest news, events and resources.
- Please note that any information or activity posted via this forum by others does not necessarily represent the view, or have the endorsement of PHE, unless expressly identified as such.
- An account must be set-up in order to access the page.
- Free access: https://khub.net/group/phe-musculoskeletal-health-and-well-being
1. Facilitators – All MSK Team.
2. Forum – interactions/ threads on questions, issues raised etc
3. Group Blogs – MSK Team set out professional perspectives on issues not PHE representative.
4. Events – Posting MSK related events
5. Announcements – Facilitators post updates to keep things moving.
The MSK Special Interest Group (SIG) is an opportunity to share information and public health practice.

Active horizon-scanning of key developments in the field of MSK, with an opportunity for consultation on relevant policy.

Become an advocate, raise awareness, enhance and reinforce communications, and ensure a wider reach of professionals are engaged and knowledgeable around MSK health.

An opportunity to participate in events, engage with system partners leading on Public Health policy translation and reform, health intelligence and research.

If you would like to become a member or would like further information please contact: ginder.narle@phe.gov.uk
MSK Resources

**Work and Health**
- MSK Employers Toolkit
- Work and Health eLearning programme

**Evidence into Practice**
- MSK Return On Investment Toolkit
- Physical Activity Interventions for people with Musculoskeletal Conditions

**Data & Intelligence**
- PHE Finger Tips Tool for MSK
- Local Authority - Local Government Inform
- MSK bulletins (PHE and Versus Arthritis)

**Workforce**
- E-Learning modules on MSK, work and health for health professionals.
- MSK Competency Framework
The aim of this tool is to provide meaningful data, on a single platform, to enable the commissioning of high value musculoskeletal services.

Musculoskeletal data is essential for understanding the health needs of local populations, the amount of people accessing services, the cost of services and the outcomes services deliver.
Further Resources

Guidance
Musculoskeletal Health: applying All Our Health
Published 3 January 2019

Why promote Musculoskeletal Health in your professional practice?

Good musculoskeletal health (MSK) is an important component of maintaining a person’s functional abilities throughout the life course. It is also fundamental to healthy ageing, which the World Health Organization (WHO) has characterised as ‘the process of developing and maintaining the functional ability that enables wellbeing in older age’.

Social perceptions of ageing are gradually changing. People increasingly expect to lead independent, active and pain-free lives in their older years. For many people this includes remaining part of the workforce. For most this includes an active retirement.
Effective interventions for MSK prevention

PHE’s ROI tool shows that for every £1 invested in...

- STarT Back (Stratified Risk Assessment and Care), saves £226 in healthcare savings, quality of life year & productivity gains
- ESCAPE-pain, saves £5 in healthcare savings
- Self-referral to physiotherapy, saves £90 in healthcare
- PhysioDirect, saves £47 in healthcare savings & quality of life year gains
Commissioning physical activity provision for people with musculoskeletal conditions

Signposting & referral, e.g.
- Self-referral
- Pharmacies
- Workplace
- Secondary Care

Underpinned by support for behaviour change

Tier 1:
Accessible community facilities
e.g. Parks, cycle paths, outdoor gyms, swimming pools, leisure facilities

Tier 2:
Supervised physical activity
e.g. Walking clubs, aqua aerobics, dance clubs, Tai Chi groups

Tier 3:
Structured community rehabilitation programmes
e.g. ESCAPE-pain

Tier 4:
Individualised support

Continuum of appropriate level of MSK knowledge and skill

Self directed
Trained peers, fitness professional
Fitness professional, physiotherapist
Physiotherapist, sports and exercise medicine

Physical activity interventions proceed alongside appropriate medical interventions, including medication and surgery where clinically indicated

Local authority commissions

CCG commissions

Tiered approach to MSK health

Call to Action

- Raise awareness of the facts surrounding MSK conditions and the impact it has on individuals, society and the economy.

- Use and raise awareness of the available resources to inform practice and impact.

- Join our MSK K-hub community today.
Thank you.
Questions and comments