Increasing access to rehabilitation for knee/hip OA: delivering escape pain[®] in the community

M. Hurley^{1,2}, M. Connelly², H. Sheldon², A. Gibney², R. Hallett¹, A. Carter² ¹Faculty of Health, Social Care & Education, St George's University of London; ²MSK Programme Health Innovation Network, London.

Background

10m people have osteoarthritis (OA)

ESCAPE-pain – is an integrated rehabilitation programme of education and exercise for knee/hip OA

Findings Function Quality Pain 70 Participant's pain, 62 Of Life 58 60 mobility, function 52 48 ey 50 00 40 and QoL improved 44 35

6 HSJ VALUE AWARDS 2020

MSK Care Initiative of the Year

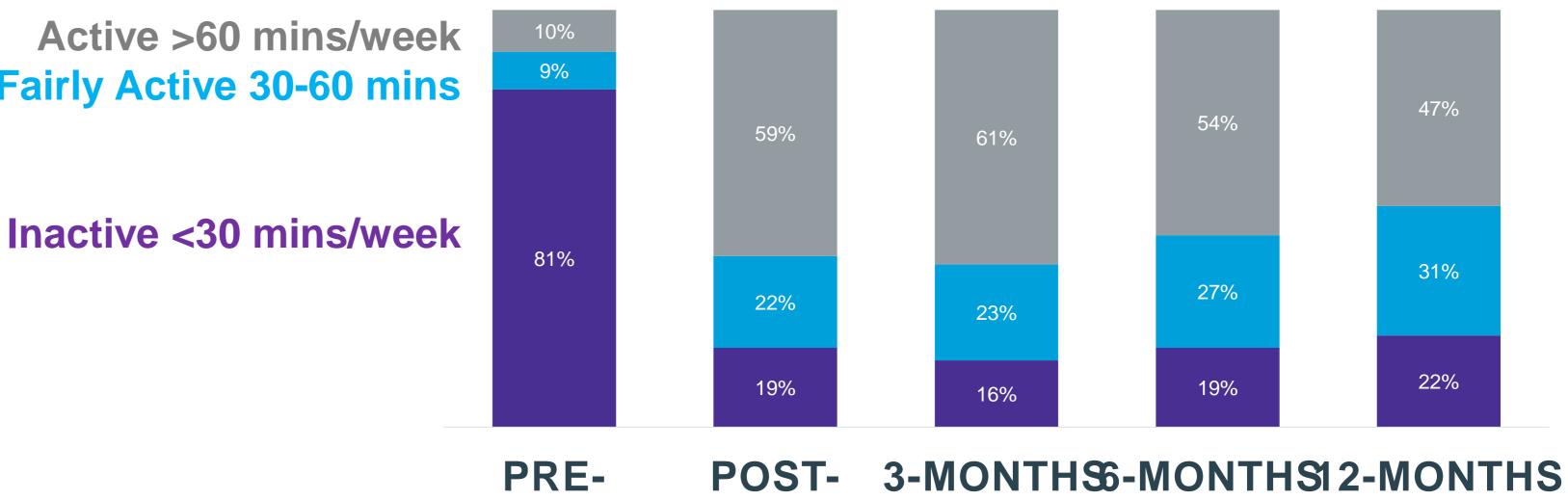


SO 30 Their understanding ۲ ý 20 and confidence in 10 the role of exercise 0 in managing OA increased

Active >60 mins/week **Fairly Active 30-60 mins**

Delivering ESCAPE-pain in NHS facilities limits access for most people

Delivering it in community venues supervised by exercise professionals would increase accessibility and



Before ESCAPE-pain

After ESCAPE-pain

opportunities for on-going support

Aims

Deliver ESCAPE-pain in community venues Evaluate its effectiveness document participant's experiences

Method

482 exercise professionals delivered **ESCAPE-pain to** 1384 participants in 75 community venues

Pain, function, quality of life (QoL) and activity levels were measured

Participants moved from being "inactive" to "active", maintained increased activity levels for 12 months to maintain the benefits, and as a result reported increased socialisation

They were helped by the venues who laid on additional programmes to support them

Conclusions **escupeptin[®]** can be delivered > as a community-based programme

- **by exercise professionals**
- > it retains its effectiveness and benefits

Semi-structured interviews captured experiences of 110 participants

- physical, mental, socioeconomic

habitulises physical activity

making it accessible to many more people



