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Welcome to the quarterly ESCAPE-pain newsletter.

Our goal is to provide you with the latest news on the ESCAPE-pain programme and to tell you about MSK research, projects and people you may be interested in.

Please send any comments or suggestions to hello@escape-pain.org.

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Join our sessional training team as an ESCAPE-pain trainer



We're looking for sessional trainers to teach clinicians and exercise instructors how to deliver the ESCAPE-pain programme.

Find out all the details and who to contact here: www.escape-pain.org/

Closing date: March 7, 2018

NHS Innovation Accelerator (NIA) Fellowship

Professor Mike Hurley has been awarded a Fellowship joining the prestigious 2017 [NHS Innovation Accelerator](#) (NIA) to increase national spread of the ESCAPE-pain programme along with 10 other healthcare innovations. The fellowship will last one year and will be supported by a host of industry and healthcare professionals. Read the Health Innovation Network's [press release here](#).

ESCAPE-pain shows a positive ROI of £5.20 for every £1 spent

Effective interventions for MSK prevention

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

- The STarT Back (Stratified Risk Assessment and Care) for back pain saves up to £226.23 when days of work saved are also included.
- Self-referral to physiotherapy saves £98.54.
- ESCAPE-pain, for knee pain saves £5.20.
- PhysioDirect (Early telephone assessment and advice) saves £47.32 spent.

ESCAPE-pain has been recommended by Public Health England (PHE) as a preferred intervention for musculoskeletal management - their report titled, 'Return on Investment Interventions for the Prevention and Treatment of Musculoskeletal Conditions' shows the programme has a positive financial ROI of £5.20 for every £1 spent.

ESCAPE-pain and Joint Pain Advisor featured in the Telegraph

The pathway approach

Commissioning (planning, agreeing and monitoring services) in a structured pathway is the best way to make use of NHS finances. It means that patients won't get medical treatment when they don't need it, and will get it quickly if they do. With a proper pathway, everyone knows what is available and understands the referral process.

An example: Mary's knee osteoarthritis

Without a clear pathway	The result...	With a good pathway
Mary started getting knee twinges. They weren't too bad so she didn't do anything. Recently, though, they have been getting worse, so she decided to go to her GP.	At least eight million people in the UK have osteoarthritis, but many don't know it. Knee arthritis is very common.	Mary started getting knee twinges. They weren't too bad so she didn't do anything. Recently, though, they have been getting worse, so she decided to go to her GP.
Mary's GP says that there isn't anything serious, she's just getting older! He says it is important for her to keep moving and suggests some exercises, but he doesn't have time to answer her questions. He tells her it will help if she loses some weight.	Escape Pain classes have proven to be effective in helping people manage knee pain. Find a class near you at escape-pain.org	Mary's GP says that there isn't anything serious, she's just getting older! He says it is important for her to keep moving and suggests some exercises, but he doesn't have time to answer her questions. He tells her it will help if she loses some weight.
Mary finds the exercises hurt, so assumes they are doing more harm than good and she gives up. The pain gets worse and Mary goes to her GP several times in the next year. In the end, he refers her to a surgeon to see if she needs a knee replacement.	Without Escape Pain classes, Mary is in more pain than she needs to be. She is making repeat appointments with the GP when she doesn't need to. She sees a surgeon when she doesn't need to.	Mary goes to the class and learns more about pain and exercise. She also enjoys talking tips with other people in the same situation. She can go back to the joint pain advisor any time she needs to.
The surgeon decides Mary doesn't need surgery but tells her to come back in a year. Mary continues taking pain killers, doesn't do much exercise and is putting on weight. She struggles with work, goes part time and eventually gives up altogether. She becomes isolated and depressed.	Mary has to give up work, stop paying tax and start to claim benefits. People with bone, joint and muscle conditions are less likely to be in full time work than any other long-term condition. 70 per cent of people with arthritis have anxiety or depression ¹ .	After many visits Mary's pain gets worse enough that the joint pain advisor suggests that she might want to consider surgery. Mary doesn't have to wait long for an appointment because the surgeon doesn't see patients until they need to see him.
Eventually, Mary's pain is so bad that the surgeon agrees to operate. But Mary's local NHS service has a policy that people who are overweight must lose weight. Gradually, Mary does manage to lose enough weight, but by the time her pain is better, the operation helps, but the pain has already set in with mobility.	Mary's doctor has to go on up work to help out for Mary.	Mary has her operation quickly and it is a great success. She doesn't need the operation until after she's retired, and her quick recovery means she can continue to look after her grandchildren.

More than 100,000 knee replacements were undertaken in 2015²

1. Depression and Anxiety in the Workplace: The National Institute for Occupational Safety and Health (NIOSH) estimates that 10% of people with arthritis have anxiety or depression. 2. National Health Service (NHS) report 2015: [http://www.nhs.uk/press/2015/04/2015-nhs-report-2015/](#)

On World Arthritis Day (12 October 2017) the **Joint Pain Advisor** and **ESCAPE-pain** were featured in a Daily Telegraph supplement called Arthritis Awareness. Under a feature headlined 'The MSK Revolution underway at a GP near you', the pathway approach is illustrated using a case study, shown above.

ESCAPE-pain app and web app

Thank you to those who have provided feedback about our app since it launched last year. Bugs and glitches have been fixed and updated versions are now available to download. To see the updates, it's best to uninstall the older version and install the new version (Version 1.5) from the [App Store](#) or [Google Play](#).

Our developers are finalising a 'webapp' which will make the app available on a computer or laptop. This should be completed in the coming months and will be linked to the main [ESCAPE-pain website](#).

ESCAPE-pain now available in Malaysia!

The Feasibility Randomised Controlled Trial of ESCAPE-pain is being implemented in the Malaysian Healthcare context for patients with Knee Osteoarthritis. Read more about the clinical trial [here](#).

ESCAPE-pain facilitator training course: new dates

Since we launched our training packages in early 2017, over 150 clinicians and fitness instructors have been trained. Please click on the below training dates for more details and to register your place.

Register to attend on Tuesday 6 March 2018

Register to attend on Tuesday 10 April 2018

Register to attend on Friday 18 May 2018

Register to attend on Thursday 7 June 2018

ESCAPE-pain participant feedback

DEAR PHNSIO TEAM,

THANK YOU ALL FOR ALL OF YOUR HARD WORK OVER THE LAST 6 WEEKS, YOU HAVE ALL HELPED MY KNEE PAIN RELIEF IMMENSELY AND I HAVE NOW LEARNED HOW TO EXERCISE REGULARLY TO CUT DOWN THE STRESS AND SWELLING IN MY KNEE JOINTS.

I HOPE YOU CAN CONTINUE THIS CLASS FOR A LONG TIME INTO THE FUTURE AS I THINK IT WOULD REALLY HELP A LOT OF OTHER PEOPLE WITH SIMILAR PROBLEMS TO REALISE THEY CAN HELP THEMSELVES IN THE CORRECT MANNER.

We continue to share participant feedback letters as part of **#FeelGoodFriday** on [Twitter](#). This is one of our favourites – it highlights the importance of the programme sessions in producing sustained behaviour change. Please do share your feedback with us!

Updates on Joint Pain Advisor (JPA)

Soon to launch in London Borough of Merton

A Joint Pain Advisor service will launch in Merton March 2018. We are testing a new delivery model using Outreach teams from AGE UK Merton, local charity Wimbledon Guild and Central London Community Health Case Management Service to help people to self-manage their knee, hip or back pain in home settings. A large number of clients supported by these organisations experience joint pain; upskilling their existing outreach teams in MSK health and pain management will enable them to provide much needed support alongside existing health and wellbeing services offered that are complementary to managing joint pain e.g. diet, activity, smoking and alcohol reduction in addition to signposting to further services if needed. The pilot will run for one year.

Shropshire launches Joint Pain Advisor

Help2Change in Shropshire supports people to make healthier decisions and take control of their health. In December it launched a Joint Pain Advisor service from its mobile clinic delivered by Health Advisors and Social Prescribing Navigators. Next month the service will be also trialed at a GP surgery.

London Borough of Greenwich study is ready for evaluation

We are currently evaluating our Greenwich pilot delivered by Health Trainers from Charlton Athletics Community Trust and Public Health in community settings. The pilot ran from March 2017 to January 2018 and supported 85 people with knee, hip or back pain. A full evaluation is available March 2018 but initial results show:

- A significant increase in number of days physically active from 3 to 5 days per week
- A significant increase in functionality based on 'sit to stand' measurements: from 6 (below average) to 12 in 30 seconds
- Self-reported reduction in pain and pain medication
- Self-reported increase in wellbeing through improvements in diet and participation in social activities/hobbies.

For information on Joint Pain Advisor contact:

Amy Semple, Senior Project Manager via email: a.semple@nhs.net or visit our [website](#).

Back Pain Forum: Save the Date

The upcoming information sharing forum will bring together professionals and managers who work with back pain or have an influence over back pain services.

Date: April 24, 2018

Time: 10.00 - 13.00

Register to attend

'I can't do that!' Taking the fear out of exercise and chronic pain:

A learning event for fitness instructors: Save the Date

Do you receive referrals for exercise from a health professional (i.e. GP or physio)?

Do you work with clients with chronic musculoskeletal pain / back pain?

If **YES** join us for an afternoon of myth busting and learning about exercise and chronic pain.

Date: April 24, 2018

Time: 14.00 - 16.30

Register to attend

Curious about what everyone else is doing? Check out the ESCAPE-pain map



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