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An integrated continual professional development approach to service delivery.

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Aim: to embed pathways of care into the Community Musculoskeletal Service and Continuing Professional Development structure to ensure consistency of knowledge in the management of anterior knee pain.

Purpose: Up to 25% of the adult population can present with anterior knee pain (Callaghan & Selfe 2012). Musculoskeletal out patients is characterised by high numbers of referrals creating pressure on rapid through put of patients. Services need to be effective, efficient and provide value for money in the management of these common conditions. Pathways of care are a means by which service quality can be defined and monitored (Beazley & Brady, 2006).

Methods: Using the plan, do, study, act cycle we analysed our CPD activities to understand it's contribution to effective patient care (figure 1). We developed a quarterly CPD cycle focusing on a key area of service provision. Structured CPD was supported by an integrated anterior knee pain pathway developed as a guide to service delivery and management (figure 2). Following delivery of the CPD package in 2013 links to the integrated anterior knee pain pathway were embedded in SystmOne to facilitate access from the clinical record.

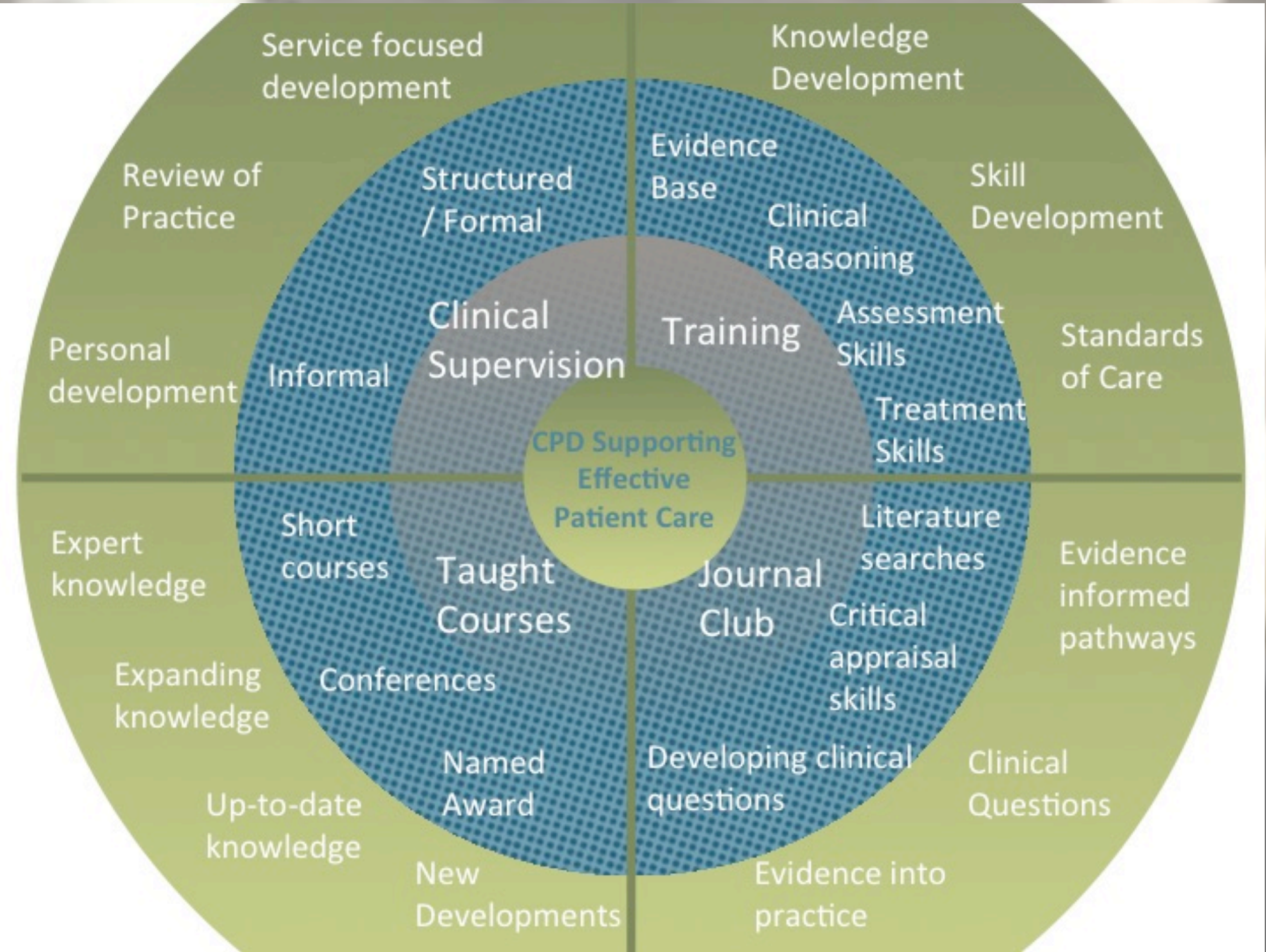


Figure 1: CPD Supporting Effective Patient Care.

The records of thirty randomly selected patients with anterior knee pain were audited against the integrated anterior knee pain pathway at three time periods: January to June 2012, 2013 & 2014. Evidence of assessment and treatment of muscle length, muscle activation and recruitment and static and dynamic alignment was recorded for each patient.

Table 1 shows the characteristics the the sample in each year.

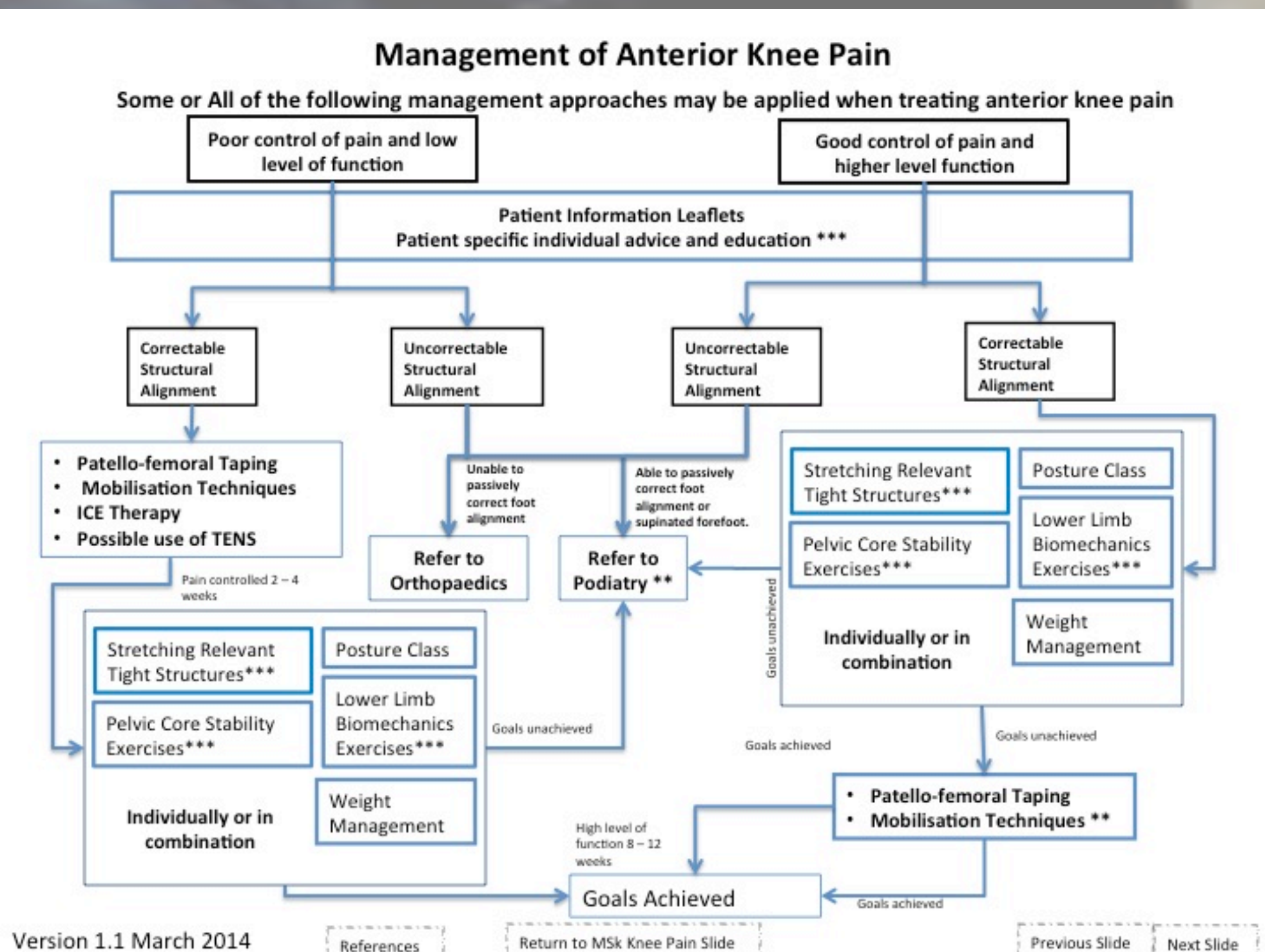
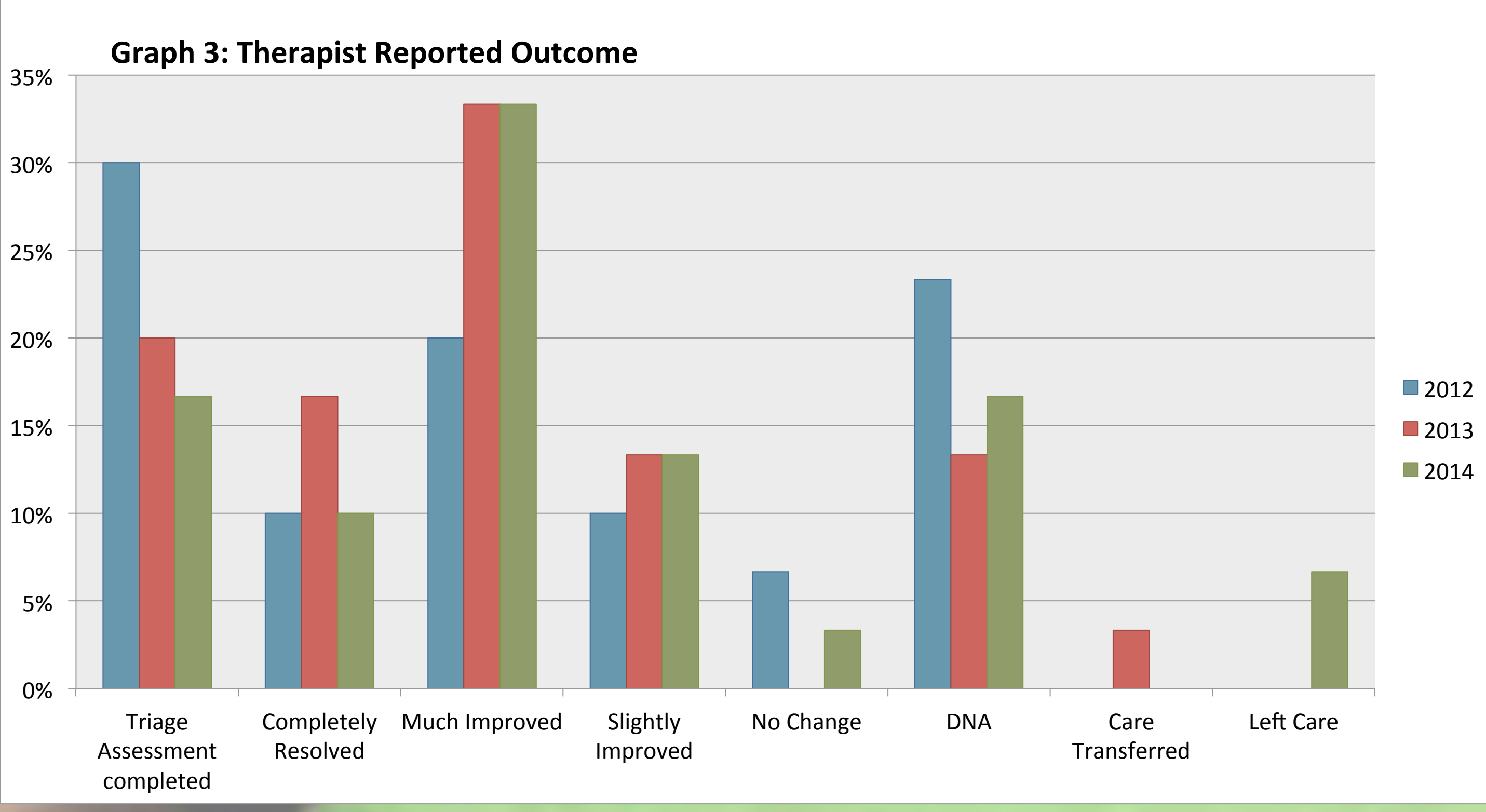
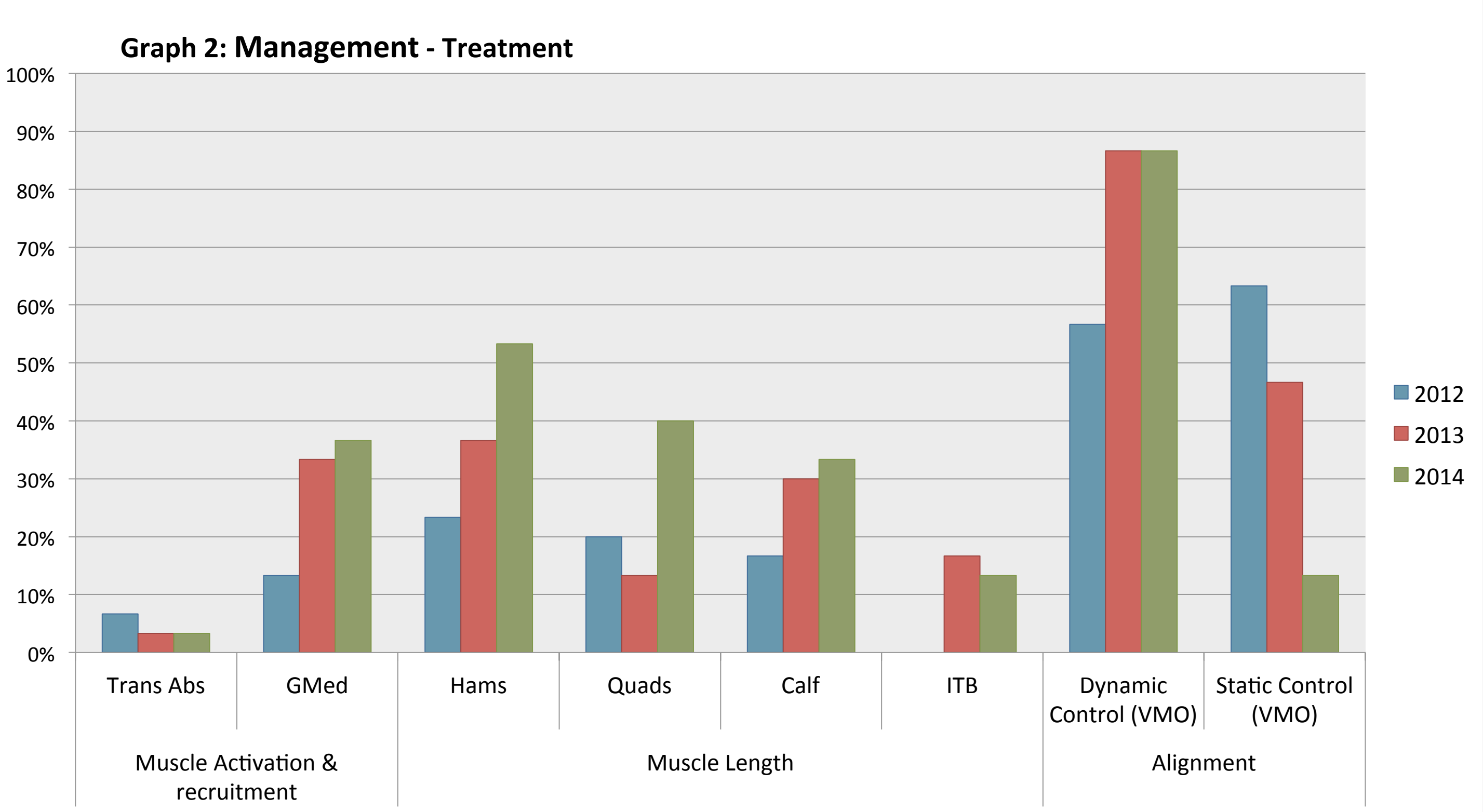
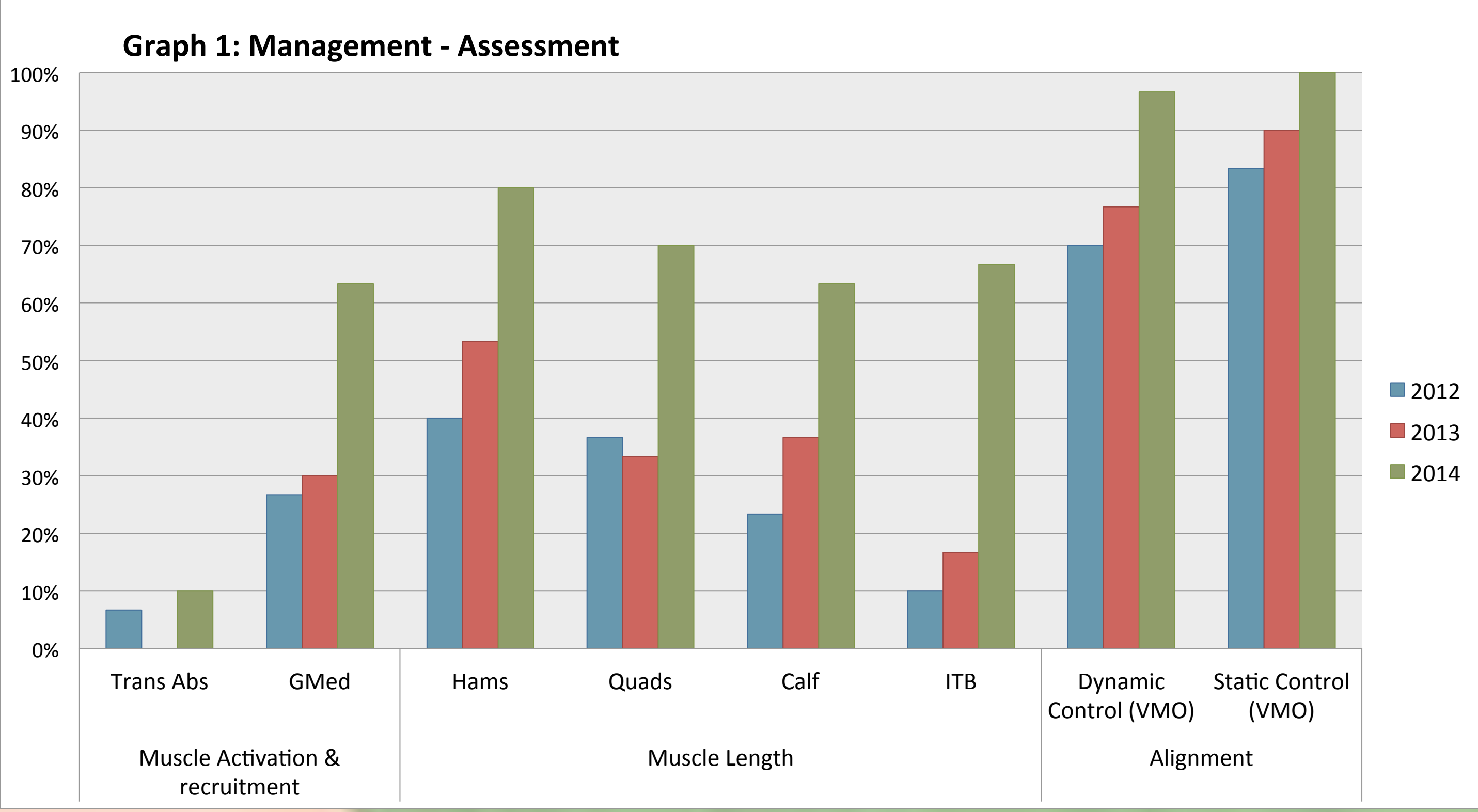


Figure 2: Integrated Anterior Knee Pain Pathway

Results

Table 1: Descriptive Statistics		2012		2013		2014	
		Mean	Range & %	Mean	Range & %	Mean	Range & %
Age		41.8	(13-77)	32.1	(11-55)	37.2	(18-85)
Duration of symptoms	Months	13.9	(1-96)	6.2	(1-24)	12.9	(1-84)
Referral Priority	Urgent	2	7	1	3	1	3
	Routine	28	93	29	97	29	97
StartBack	Low Risk	9	30	19	63	15	50
	Medium Risk	4	13	3	10	8	27
	High Risk	7	23	5	17	5	17
	Not collected	10	33	3	10	2	7
Number of Appointments		3.1	(1-15)	3	(1-7)	3	(1-8)
Length of episode of care	Days	60.1	(0-296)	117.0	(0-502)	112.1	(0-244)



Take home message

An integrated approach to Continuing Professional Development supported by an integrated pathway has an impact on physiotherapists' management of anterior knee pain in a Community Musculoskeletal Service.

Standards of practice improved with physiotherapists carrying out a more comprehensive assessment and treatment.

Patients were treated the same number of times over a longer period with no change in therapist reported outcomes.

Conclusion

A structured approach to CPD and the use of Information Technology to embed standards of practice within day to day clinical practice can have an impact on the standard of care provided to patients.

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