Delivering self-management for LBP via a digital solution in primary care – A sustainable solution for a growing problem

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Purpose
Most low back pain (LBP) does not need specific or specialist treatment and will often resolve if people follow simple evidence-based advice. Access to this advice is inconsistent with people often self-managing via untrusted resources online. Using digital technology to provide immediate day-by-day support whilst connecting people to their local MSK pathway and support services, has the potential to deliver trusted evidence-based advice in a consistent and standardised way. We are introducing a self-management solution (getUBetter) into the routine care of patients with LBP. Implementation should lead to quicker recovery, better outcomes, and a reduction in overall healthcare spend.

Methods
The evaluation focused on the 'pre-implementation' phase of delivering a digital self-management solution using the following metrics:
2. Staff experience of using the app to facilitate the patient pathway using a staff experience questionnaire
3. Patient experience of using the app and mapping their recovery journey using a patient experience questionnaire

Results
Understandability and actionability
10 clinicians/experts and 10 patients scored the app using the PEMAT. In total it scored 86% understandability and 88% actionability. This demonstrates that the information in the app was easy to understand, and people were able to act on the information well.

Staff Experience
Staff reported overall positive results of using the app. Most found it easy to give to patients but challenging to explain the context especially if time was tight. Staff felt patients sometimes struggled to understand the concept. Some pointed out this was due to a combination of both clinicians and patients beliefs about best care being delivered by traditional face to face consultation. Despite this, most respondents felt it enhanced the patient pathway.

Patient Experience
The vast majority of users found the app helpful and agreed that it was a much quicker way to access information to help them self manage. A few preferred to see a clinician as well as self managing using the app. All agreed that accessing physiotherapy via the app was very helpful. Only a hand full didn’t want to use the app.

Conclusions
The getUBetter app is an effective way of delivering early evidence based information, advice, and guidance to help people self-manage their back pain. There are some improvements needed to make the app more understandable and to make the goals and actions of the app clearer. Clinical and patient experience was positive, but it is clear that the context of delivering back pain treatment in this manner needs to be fully communicated.

Implications
This was an analysis of early implementation of self-management delivered by a digital app for back pain. As such it has highlighted key issues and themes, which when addressed should enhance delivery of this model of care. If successful this project has the potential to redefine the management of LBP and the way patients with LBP interact with the health system.

Acknowledgements
We are very grateful to Wandsworth CCG who funded 3500 getubetter licences, and the two practices involved in the initial pilot – Southfields Group Practice and Heathbridge Practice.