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Evaluation of the Musculoskeletal Core Capabilities Framework for First Point of Contact Practitioners

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Introduction

The Musculoskeletal Core Capabilities Framework is aimed at practitioners who will be the first point of contact for people with musculoskeletal (MSK) conditions. This capability framework aims to ensure that the range of health professionals who provide care for people with MSK problems are equipped to consistently deliver person-centred care, can play a full role in helping to manage problems appropriately at the first point of contact and help towards achieving better outcomes across the system.

The document was commissioned by Health Education England and NHS England, building upon work previously undertaken by the national programme delivered by the Arthritis and Musculoskeletal Alliance (ARMA) and its member organisations. It has been endorsed by organisations such as the Royal College of GPs and Public Health England.

Skills for Health was subsequently commissioned by Health Education England to carry out an evaluation of the Musculoskeletal Core Capabilities Framework¹. This evaluation aims to better understand the users of the framework and how it is being utilised so far to inform further developments.

Methodology

A survey was created to capture a snapshot of the utilisation and value of the framework with feedback from experts involved in the development of the framework and the funder. The survey launched in November 2019, nearly a year and a half after the framework did (July 2018) and it aimed to gather current opinions and experiences of people with an interest in the framework, including service users, workforce planners and MSK practitioners. The framework is hosted on the Skills for Health website and has been downloaded 2,887 times since its launch, and those who had provided valid email addresses and had consented to be contacted about updates were invited to participate in this evaluation; 373 responses were collected.

This report gathers the obtained results to draw some conclusions.

¹ <https://www.skillsforhealth.org.uk/services/item/574-musculoskeletal-core-skills-framework>



Key Findings

- 373 people responded to the survey.
- Two thirds of the respondents were practitioners (66%).
- 47% of respondents worked in primary care or community services and 24% in secondary or specialist care.
- Access to the framework was varied and enablers were quite balanced: 27% respondents heard about it through a recommendation from a friend or colleague, 26% from direct email, and 23% from social media or website.
- The number of unique downloads from the Skills for Health website, where the framework is hosted, was 2,887. Most downloads occurred the month after the launch (942 downloads). Since then, the number has remained stable around 78 downloads per month on average.
- Overall, the framework received a score of 4/5 in level of usefulness. Most respondents stated that the framework is very or quite useful (85%).
- Some people who responded to the survey had not used the framework yet. Their main reasons being lack of time or opportunity to do so, believing it is not relevant for their role, and use of the framework as an individual learning tool.
- 52% used the framework within their team, 51% for their own personal interest, and 45% used it within their organisation.
- The main uses of the framework included: identify training needs (71%), identify existing capabilities (70%) and support workforce planning and development (51%).
- The framework has helped to increase awareness (78%), widen (51%) and deepen (42%) knowledge and skills. It has also been attributed to an increase of opportunities in staff development (33%) and improved quality care (30%).

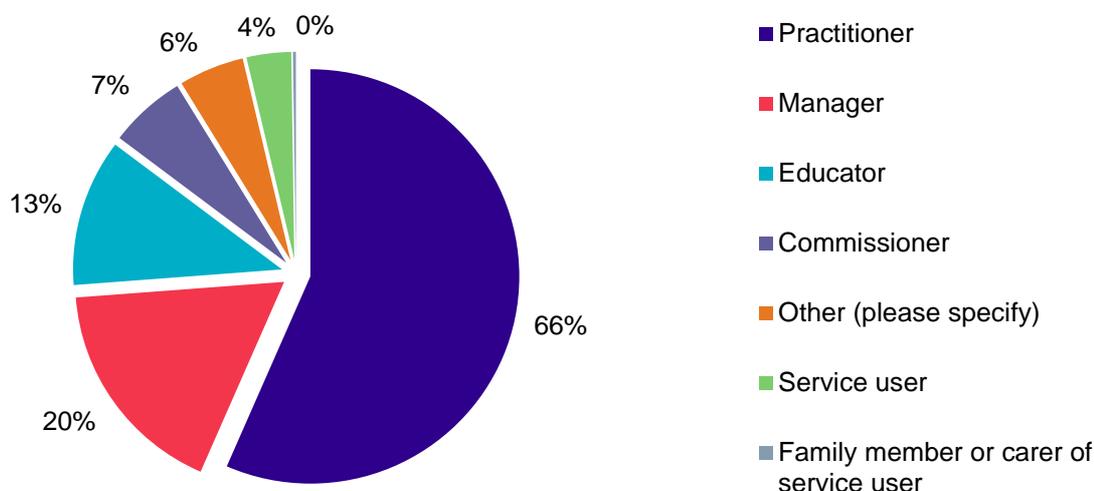
Evaluation Results

The evaluation gathers the opinion and experiences of 373 people who responded to the survey.

Respondents profile

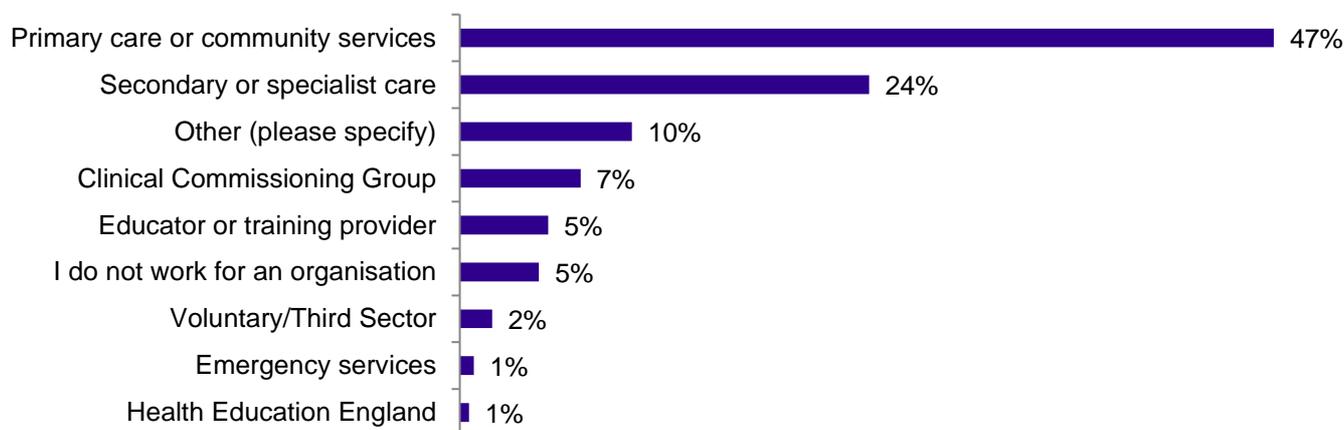
Over half of the respondents were practitioners, followed by 20% who work as managers of services. Most people included in "Other" identified themselves as researchers interested in MSK.

How would you describe yourself?



Almost half of respondents work in primary care or community services (47%), followed by people in secondary or specialists care organisations (24%).

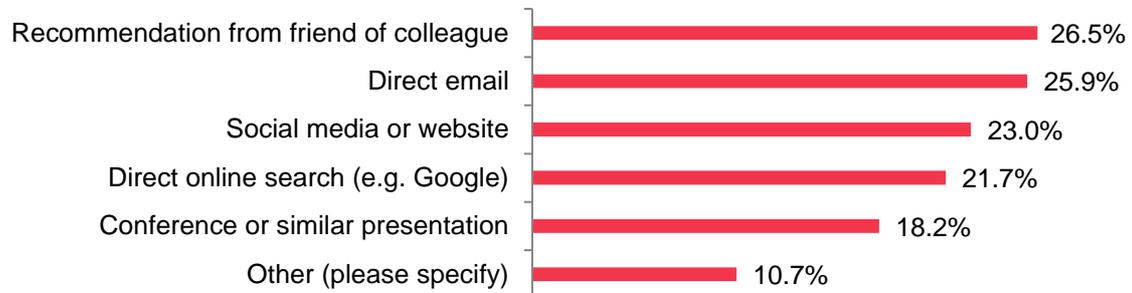
Which of the following best describes the type of organisation you work in?



Access to the framework

Slightly over a quarter of respondents indicated that they learned of the framework through a friend or colleague recommendation (26.5%). Similarly, 26% knew about it via a direct email communication.

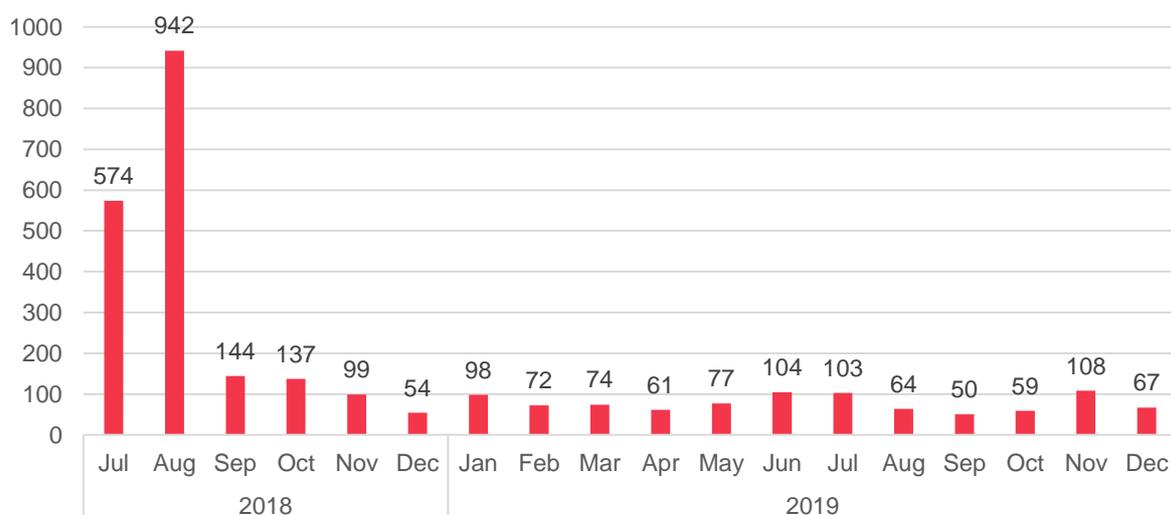
How did you hear about the MSK Framework?



The framework was launched in July 2018 and is hosted on the Skills for Health website. In order to download it, people with interest in the framework need to provide some contact detail information which is securely stored. This allows the number of downloads to be tracked and interest in the framework monitored. Whilst this is a good initial indicator of the popularity or interest for the framework, the following graph should be read with caution as the downloaders could have shared the downloaded pdf document; therefore, numbers could be an underestimate of the actual reach of the framework.

Duplicates were deleted from the dataset in order to show unique downloads. The graph below shows the time which the framework was most popular, August, recently after the launch. The number of unique downloads rapidly decreased in the months following the launch and have remained at an average of 78 per month, and a total of 2,887 downloads to date.

Count of MSK Framework downloads from the SfH website since its launch



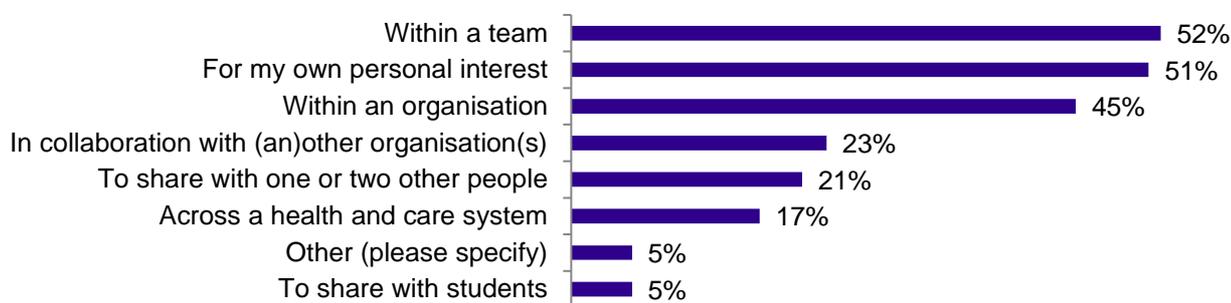
Use of the framework

Weighted results of the survey state a rate of 4.15/5 in a scale of overall usefulness. Most respondents indicated that the framework was very or quite useful (78%), whilst 20% found it fairly or a little useful. None of the participants said the framework to be not useful at all.



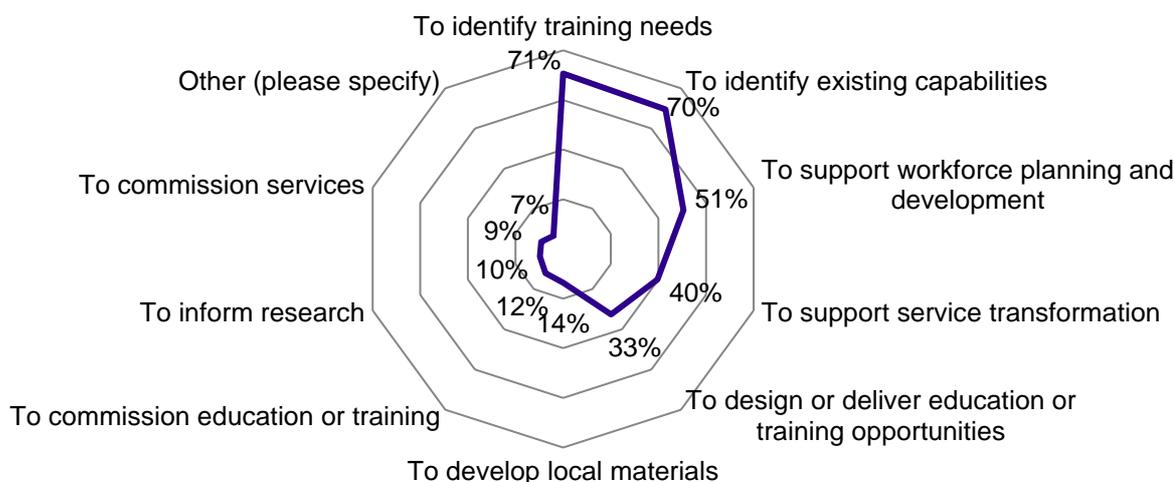
Regarding how the framework has been used, respondents usually share it and use it within a team (52%) and fulfils their own personal interests (51%). Interestingly, 45% of respondents, which account for 83 people, potentially from different organisations, have used the framework at an organisational scale.

At what scale have you used the framework?



Results show that the framework is being used in two major ways: To *identify training needs* (71%), and to *identify existing capabilities* (70%). Other uses also include *support workforce planning and development* (51%) and *support service transformation* (40%).

In what way have you been using the framework?



There is also a proportion of respondents who downloaded the framework but have not used it. Three themes have emerged from their reason:

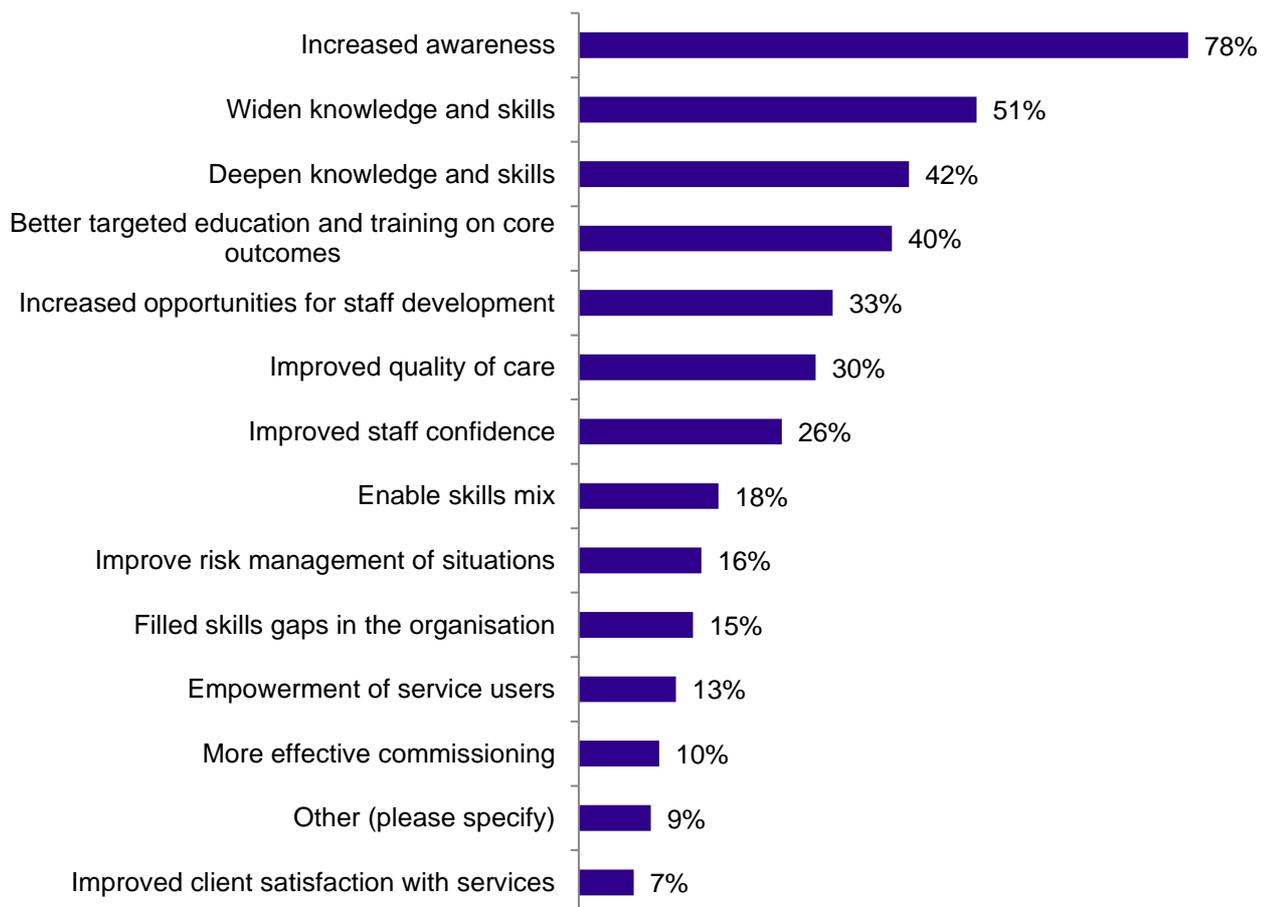
1. Not having enough time.
2. Believing it is not relevant for their role.
3. Downloaded it as a learning tool for their own personal interest and development.

Impact of the framework

In terms of the impact that the framework has had so far, and considering it was launched a year and a half ago, 78% of respondents stated that the framework has helped to increase awareness, and half state that it has helped to widen (51%) and deepen (42%) knowledge and skills.

Results indicate that the most common use of the framework, identifying training needs, has already shown impact with 40% of respondents stating they have accomplished better targeted and education and training on core outcomes. Additionally, 18% have noticed that it has enabled skill mix in their organisations.

What has been the impact so far?



Despite the overall reviews of the framework being positive, some respondents (16%) indicated to encounter difficulties when implementing the framework. These difficulties were mainly around:

1. A lack of support from managers and/or clinicians to implement.
2. Low funding and support at CCG level.
3. The framework being heavily theoretical and difficult to implement in practice.

Additionally, some suggestions for improvement were also gathered about the added value of an accompanying document (e.g. spreadsheet) that would facilitate the recording and monitoring of outcomes.

"I had to hand type the document out again to use with space for recording outcomes/progress/actions."

"It would be extremely beneficial to have a standardised method of collating and reviewing the information collected relating to the Framework".

A few respondents also acknowledge that the framework might become an important resource from which further work can be built upon. For example, by adding more information on specific elements (e.g. assessment, manual therapy), pay bands, and how it interacts with other existing frameworks.

Finally, the survey has gathered numerous accounts of benefits shared by respondents. A few themes have emerged from their responses:

1. Provide a base to monitor and map current workforce skills.
2. Provide guidance for identifying learning needs and design training.
3. Provide evidence of core competencies for the role, and reassurance to current practitioners on the quality service they are providing.
4. Inform workforce planning and development solutions.
5. Provide a better understanding of the role and musculoskeletal conditions.

"It helped to formalise the skills that I need to do my job as a first contact Physiotherapist in primary care"

"It's been useful for sharing with neighbouring commissioners, secondary care trusts and educational organisations in order to develop a sustainability plan for the MSK FCP role."

"Clinicians have engaged with utilising the MSK framework to identify their individual learning needs and areas where they already meet the requisite capabilities. The framework has helped to identify and support the aims and objectives of the MSK services operating within the integrated care system."

"It gives a clear outline of the expected competencies for an FCP role and has been very helpful as I design our module content and plan how students will measure their learning and improved capability for the role."



Overall, respondents viewed the framework as a comprehensive document that highlighted the importance of musculoskeletal conditions and the role of first point practitioners. A few specific areas for improvement were suggested, particularly on translating the framework into everyday practice, and the suggesting of creating a document that would allow organisations and practitioners themselves to almost assess against each learning outcome. This in addition to other comments referencing further specialisation (e.g. paediatric), suggests the wide operational potential of the framework.

Report prepared by Adela Sobrepera, January 2020

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