Musculoskeletal (MSK) England Programme Logic Model

Programme Vision: Help maintain and improve the musculoskeletal health of the population in England (across the life-course), supporting people to live with good lifelong MSK health and freedom from pain and disability (e.g. prevention).

Premise: Achieving the goal(s) below will help to achieve the vision, for example, by encouraging behaviour change among the population and System Leaders of England.

RATION		STRANDS /OBJECTIVE		ACTIVITIES (WHAT YOU DO)		OUTPUTS (DELIVERABLES)			OUTCOMES (RESULTS)		IMPACTS	
Informed opinion a intelligence sugges wider public health including the health (H&C) system in Er as effective as it co prevent, maintain a the musculoskeleta the population.	and sts that the n system, th and care ngland, is not ould be to and improve al health of	Whole system decision- makers informed and supported with evidence and knowledge required to affect change		 Leading and influencing the MSK Health Steering Group across Government and key stakeholders. Matrix working on Productive Healthy Ageing to support implementation of MSK interventions. Commissioning and influencing MSK Public Health research. Horizon scanning and responding to relevant consultations. Developing implementation tools and resources including collections of robust evidence, making successful programme case studies and lived experience narratives available. Advocate for comprehensive MSK data collection and develop effective innovative health intelligence and tools to support surveillance of MSK conditions across the population. 		 Governance structure across Government and key stakeholders to steer the MSK prevention agenda. MSK embedded within key PHE programmes to reach decision-makers and the general public. Research into prevention of MSK conditions prioritised and funded to address the gaps. High quality, accessible data and intelligence tools to support surveillance and reduce unwarranted variation of MSK conditions across the population pathway. Systematic collection, publication, analysis and development of MSK surveillance, data and indicator sets. 			 Decision-makers across the system are informed, engaged and implementing improvement initiatives. Increase in public awareness of how to maintain good MSK Health across the life course. 		Improved MSK health outcomes and Equity across the life course through primary prevention	
Improve/support the system enabling or and other agents re MSK health to delive outcomes in alignme identified population addressing inequal health outcomes.	rganisations elevant to ver better ment with on needs,	Wider Public Health and Health & Care system workforce engaged and skilled to deliver the goal		 Influence health professionals' and wider Public Health curriculum & working practices, and delivering training. Ongoing support for Faculty of Public Health MSK Special Interest Group. Engaging, collaborating, bringing together system leaders locally and nationally. Maintain, improve and promote digital platforms for MSK Public Health collaboration. 		 Communication of MSK health is reflected in relevant health professional curricula and continuing professional development for health professionals. Virtual MSK public health networks. Cohort of MSK Public Health leaders. 			and H workfo resour • Enhar across	Health and wider Public Health ealth & Social Care system prce adequately and appropriately rced, engaged and skilled. nced collaboration on MSK health is the public, private and third providers, commissioners and s.	Reduce the social and economic gap for people with a MSK condition	
Budgets Data Collection Digital resources an Governance		Improved provision and uptake of good MSK health workplace practice		 Raise awareness and support implementation of MSK toolkits for employers and self-management models. Commissioning evaluation of PHE's MSK tools & resources (understanding the effectiveness, usage and impact of the current tools and resources, and gaps for further resources). Development and provision of training for employers across all sectors. 		 A large-scale uptake by employers of the current evidence-based resources and training. MSK menu of resources and interventions available through the online employee assistance programme. MSK is embedded within the staff wellbeing agenda, utilising cross - government human resources structures. 			 Increase in good MSK workplace health practice across all employment sectors. Reduced number of work days lost to MSK conditions. Opportunity for people with MSK conditions to return to work early and remain in employment until statutory pensionable age. 		Improve the employment outcomes of people disabled through MSK Conditions	
Leadership National Policy Research Tools Workforce		Effective health initiatives scaled up, spread and sustained		 Work collaboratively to influence commissioners and providers to deliver evidence-based interventions. Activities to support raising awareness of MSK's contribution to co-morbidities, multiple long-term conditions and frailty. Production, identification, synthesis, promotion and dissemination of interventions, frameworks, tools and resources. Market research developing and testing of messages. 		 High quality evidence-based interventions are identified and accessible and promoted to decision-makers, practitioners and patients. MSK is integrated into government and agencies' approach to multi-morbidity and frailty. Relevant community assets mapped, understood, updated and shared. Effective demand management strategies. 			 health integra NHS i focus Impro Patier 	essful sustained coverage of MSK interventions across England are ated into MSK health pathways. Interventions as enablers to shift upstream in pathways. ved patient reported measures. Its empowered to make informed ons about their care.	Increase in the Quality of Life (QALYs) for people living with MSK Health conditions	
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	ENABLE		NHS England / Depa Education England / Health and Safety Ex Care / NHS Digital/ A Versus Arthritis / Arth	lationships/ partnerships artment for Work and Pensions / Health / NHS Right Care / NHS Improvement / xecutive / Department of Health and Social Academic Health Science Networks hritis and Musculoskeletal Alliance / Centre port England / Royal Osteoporosis Society/ f Physiotherapy		Local Government, Association of Directors of Public Health, Regional Directors of Public Health	Marketing Comms Digital IT	People with MSK MSK Cross Gover Coordination Grou National MSK Hea Group	rnment up,	PHE Centre Teams PHE National Teams – Life Course Healthy Places, Work and Health, Public Mental Health, Physical Acti Health Inequalities Unit, Diet, Obes and Physical Activity, Knowledge a Intelligence, Healthcare Public Hea	vity, ity nd	