

CSP2023: 92**A Scoping Review to Map Evidence Regarding Key Domains and Questions in the Management of Non-traumatic Wrist Disorders**

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Purpose: Non-traumatic wrist disorders (NTWD) are commonly encountered yet a sparsity of resource exists to aid management. The aim of this study is to produce a literature map of the evidence for the diagnosis, management, pathways of care and outcome measures for NTWDs in the United Kingdom.

Methods: An interdisciplinary team of clinicians and academic researchers used Joanna Briggs Institute guidelines and the PRISMA ScR checklist to conduct the scoping review. A Patient and Public involvement (PPI) exercise identified 16 questions of importance to stakeholders to which the literature was mapped. An *a-priori* search strategy of both published and non-published material from five-electronic databases and grey literature resources identified records. Two reviewers independently screened records for inclusion using explicit eligibility criteria with a third researcher providing oversight. Data extraction through narrative synthesis, charting and summary was performed independently by two reviewers.

Results: Of 185 studies meeting eligibility criteria, diagnoses of wrist pain, De Quervain's syndrome and ulna-sided pain were encountered most frequently, with uncontrolled non-randomised trial methodology being the most frequently used. 119 of the studies gave details of diagnostic methods, pathways of care were found from 2 sources, conservative management was the described of 58 articles and outcome measures featured 53 times.

Conclusion(s): Substantial gaps in evidence exist in all parts of the patient journey for NTWD when mapped against an analytic framework (AF).

Impact: Opportunities exist for future rigorous primary studies to address these gaps and preliminary concerns regarding the quality of the literature regarding the assessment, prognosis and management of NTWD.

Keywords: Non-traumatic, wrist pain, hand therapy

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CSP2023: 104**An Integrated Care System: A service evaluation of an integrated model between the NHS& voluntary sector following acquired brain injury**

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Purpose: The incidence of acquired brain injury (ABI) in the United Kingdom is on an upward trajectory. Community neurological rehabilitation is key for individuals recovering from an ABI; however, long-term service provision is inadequate. In line with the NHS long-term plan, in March 2022 a novel integrated therapy model was established between the Midlands Partnership Foundation Trust and third sector to fill unmet care needs. The project was initiated after listening to the patient's voice. Our mission statement was to 'increase quality of life through provision of advocacy, leisure, vocation and social interaction through co-production between the NHS and Headway'. The aims of this project were to evaluate this current service in line with national guidance and at a service user level.

Methods: The service was evaluated using mixed methods and addressed in four stages. The primary outcome was change in Therapy Outcome Measure Impairment Scale (TOMS) measured at baseline and following 12-weeks therapy intervention. Secondary Outcomes included Barthel Index (BI), Modified Rankin Score (mRS), Nottingham extended activities of daily living (NEADL), Goal attainment measured by the East Kent Outcome System (EKOS) and Yale Question Mood Screen were measured at the same time points. Qualitative data was collected using a service user questionnaire. An audit of service performance was completed before and 12 weeks after the launch of the new integrated therapy model.

Results: Improvement was seen in subdivisions of the TOMS tool following 12-weeks of therapy, BI and NEADL. The mRS demonstrated no change in median score. Therapy provision is shown to have a positive impact on mood and a median goal attainment score of 55% in 12 weeks. Thematic analysis of questionnaire results identified four sub themes: therapeutic relationship, specialist