

A survey of research priorities in occupational health physiotherapy

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Background. In the early 2010s, the Association of Chartered Physiotherapists in Occupational Health and Ergonomics identified the need for more research to underpin practice. Research has been identified as playing a key role in translating evidence into high-quality care.

Objective. To identify current research priorities in occupational health physiotherapy in order to establish where funding is directed.

Methods. A survey was administered to delegates attending a 30-minute research priority-setting workshop at an occupational health physiotherapy conference in London, UK, in 2018. Content analysis was undertaken to identify the key research priorities.

Results. In total, 49 participants (77%) returned the survey. Initially, 96 research topics were reported, from which after de-duplication 76 research topics were collated in an anonymised manner in a spreadsheet at the end of the workshop. Following content analysis, 18 occupational health physiotherapy research priorities emerged.

Conclusion. This project confirmed a need to establish current research priorities to highlight areas for investment and grow the overall evidence base.

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Health and Care Professions Council guidance confirms the need for allied health practitioners to engage with research throughout their working life.^[1] Physiotherapists are well placed to identify limitations in clinical practice and recognise the importance of undertaking and collaborating in research.^[2] As a specialised professional network of the Chartered Society of Physiotherapy (CSP), the Association of Chartered Physiotherapists in Occupational Health and Ergonomics (ACPOHE) actively promotes research activity as part of its core strategy. Research-active physiotherapists are more likely to provide higher-quality care,^[3] and the process of research is essential to inform evidence-based practice, promote continuous professional development and advance the speciality.^[4] However, the evidence base for occupational health physiotherapy is declining. Barriers to undertaking research include limited time and funding, lack of confidence to identify and critically appraise the literature, inadequate workplace support, corporate data sensitivity and the perception that workplace health is a secondary priority.^[2,5,6] By identifying current research priorities in occupational health physiotherapy, this project will inform the national occupational health research strategy, encourage and support research that focuses on limitations in clinical practice and determine where research funding is directed.

Methods

An initial literature search was conducted online employing health and medical databases using the search terms: occupational health;

physiotherapy; priorities; and research. A report by the CSP (2018)^[7] that explored research priorities in physiotherapy across multiple stakeholders informed the selection of these terms. This review provided an understanding of the wider literature on the subject, and informed the development of a survey. The final survey incorporated four questions, which focused on occupational health physiotherapeutic interventions, self-management, prevention and service delivery (Table 1). Demographic data were also requested (Table 2). Participants were recruited from a gathering of delegates at the 2018 occupational health Physiotherapy Conference in London. This conference is one of the largest national occupational health physiotherapy meetings in the UK. Occupational health physiotherapists represented included those from the academic, industry, National Health

Table 1. List of survey questions

- 'What question(s) do you have about occupational health physiotherapy to help people recover and get back to work/usual activities?'
- 'What question(s) do you have about occupational health physiotherapy to help people manage their condition(s) themselves?'
- 'What question(s) do you have about occupational health physiotherapy to help people to improve their health and prevent disease and injury?'
- 'What question(s) do you have about how occupational health physiotherapy services are accessed and delivered?'

Service and private practitioner sectors. Data collection was undertaken by convenience sampling, targeting those who attended a research priority-setting workshop. Participants were under no obligation to return the survey at the end of the session. Data were collated in an anonymised manner in a spreadsheet at the end of the workshop. Content analysis was undertaken to identify the key research priorities. This involved coding individual responses, with similar codes grouped together into themes.^[8] Ethical approval was not required, as this piece of work was classified as a service improvement survey.

Results

In total, 49 participants returned the survey, representing 77% of the total delegates (Table 2). Initially, 96 research topics were reported, of which 76 remained after de-duplication. Following content analysis, 18 occupational health physiotherapy research priorities emerged (Table 3). The most frequent research priorities identified related to measuring health benefits and cost-effectiveness and determining the most effective service model for occupational health physiotherapy provision. Feedback at the end of the workshop revealed a common concern expressed by most participants: the inability to carry out research in their daily clinical practice, unless supported by their employer.

Discussion

The main finding from this survey was that participants confirmed the need for current research addressing limitations in clinical practice within this specialty. Overall, measuring the impact of the health benefits and cost-effectiveness of occupational health physiotherapy services was the most prevalent research priority identified. In contrast, previous research among occupational health clinicians identified musculoskeletal disorders and stress as the main priorities.^[9,10] The requirement for more comparative research studies was commonly listed, with the perception that more research is required on the effectiveness of face-to-face v. telephone consultations. Similarly, there is a need to determine which service model of occupational health physiotherapy provision is most effective, such as providing a case management or treatment service, or both. Another priority was on determining the difference in quality of clinical care of physiotherapists with specialist training

in occupational health and those with no specialist training working in an occupational health setting. The value of Safe, Effective, Quality (SEQOHS)-accredited occupational health physiotherapy services compared with non-SEQOHS-accredited services was also prioritised. In relation to the wider literature on this subject, studies identifying occupational health physiotherapy research priorities are limited and outdated.^[3,6,7] The current findings also highlight other developing research areas not reported in previous studies, notably a focus on managing long-term conditions, benefits of health and wellbeing programmes, presenteeism and strategies to improve manager and client engagement and satisfaction within occupational health physiotherapy services. As occupational health physiotherapy practice continuously evolves, with developments

Table 3. Emerging research priorities for occupational health physiotherapy

- The impact of functional rehabilitation programmes on the prevention of musculoskeletal-related sickness absence
- The components of health and wellbeing programmes that provide the most impact in the workplace
- The benefits of occupational health physiotherapy based on health outcomes and return of investment
- Normative data for functional capacity evaluations in the UK population from sedentary to physically demanding jobs
- Occupational health physiotherapy consultations: face-to-face v. telephone consultations for long-term conditions
- Occupational health physiotherapists' understanding and implementation of clinical guidelines
- Long-term outcomes in managing musculoskeletal disorders: occupational health physiotherapists v. occupational health physicians and/or nurses
- Impact of ergonomic interventions: cost-effectiveness and organisational benefits
- Best outcome measures to evaluate effectiveness of occupational health physiotherapy interventions
- Barriers and facilitators of on-site v. off-site occupational health physiotherapy provision
- Occupational health physiotherapy reports: increasing engagement of manager with the advice provided in the report, and understanding what affects willingness to engage with the advice
- Understanding how employees engage with occupational health physiotherapy services, and the factors that affect their level of engagement
- The effectiveness of occupational health physiotherapy v. standard musculoskeletal physiotherapy
- Impact of occupational health physiotherapy on presenteeism
- Effectiveness of physiotherapists with specialist training in occupational health v. physiotherapists with no specialist training working in this specialty
- Comparison of different models of occupational health physiotherapy provisions: treatment v. case management v. combined treatment and case management
- Manager and client satisfaction with occupational health physiotherapy services
- The value of Safe, Effective, Quality Occupational Health Services (SEQOHS) accreditation for occupational health physiotherapy services

Table 2. Demographic data (N=49)

Variable	n (%)
Participant grade	
Basic grade physiotherapist	12 (24)
Senior physiotherapist	29 (59)
Head of service	6 (12)
Lecturer	2 (5)
Other (please specify)	0 (0)
Service sector	
Health and social care	7 (14)
Industry	13 (27)
Higher education	2 (5)
Private practice	27 (54)
Other (please specify)	0 (0)

in working practices, new technology and changes in customer and organisational requirements, this project offers a useful insight into the research areas that require priority and investment. The strength of this study was the convenient access to a wide variety of occupational health physiotherapists on this key issue, and the low cost of undertaking it. The main limitation was the small sample size. While the small sample size is recognised, the findings provided a snapshot of the views of occupational health physiotherapists as represented by a section of the conference delegates. Further studies should focus on ranking the list of research priorities, and on achieving consensus within an expert group of occupational health physiotherapists. This consensus can guide national research priorities in occupational health, highlighting areas for investment and growing the overall evidence base.

Conclusion

The findings of this project confirm a need to establish current research priorities to highlight areas for investment and grow the overall evidence base. This project can support the national occupational health research strategy and assist in determining where research funding is directed.

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