

## How using Cemplicity can make you money 19.3.25

*MSKPN Webinar summary – member's only*

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### 1. Summary

- Lucy - will continue with Cemplicity as we believe it increases revenue
- Galvanizes the staff
- Ongoing data analysis – we will further look into different conditions, to benchmark what good looks like with ACLs, ankles, spines and necks etc, to achieve a rubber stamp of best practice.
- It's a way of communicating if we are getting really good outcomes compared to rest of the country. It helps us find out what our magic bullet is.
- We have a clear outcomes page on our website which we didn't have before.  
<https://www.balancephysio.com/our-outcomes/>
- CSP concluded this is what good looks like.

### 2. Who is Cemplicity?

Cemplicity is an IT organisation and they collect PREMS and PROMS on behalf of MSKPN members who wish to have their data collected, for a commercially related fee.

As a member of MSKPN this fee is discounted by 50%. This makes it an excellent way of getting your money back as part of the membership fee and is very cost effective.

### 3. Why are we collecting data?

**The Healthcare Professionals Council (HCPC)** changed their standards of proficiency in September 2023. There are 13 standards. Standard 11 is all about how, as a physio, you are duty bound to assure the quality of your practice. <https://www.hcpc-uk.org/standards/standards-of-proficiency/physiotherapists/>

- 11.2 says you have to gather and use feedback and information including qualitative and quantitative data to evaluate the response of your service users to their care
- 11.4 is to participate in quality management including quality control, quality assurance, clinical governance and the use of appropriate outcome measures
- 11.8 engage with healthcare technologies to record, audit and evaluate decision making and the delivery of care and its outcomes.

**So all of that is completely taken care of, the whole of standard 11, by engaging with a company that records measures, assesses, and gives you back the data on your behalf.**

**HQIP** <https://www.hqip.org.uk/> is the government's website - a really good resource. This shows why you have to measure your quality, why you have to benchmark your interventions against national data. There has never been a national audit against MSK and this is being scoped out by Keele University at the moment.

#### **4. What data are we collecting?**

Lucy talked about the last 18 months of outcomes data that they have been collecting. In Cemplicity we've got less than 30% of MSKPN member practices collecting data. We've now got 7 organisations, approx 30 clinics and 234 physios and data from over 7000 patients and this is increasing.

#### **What are we recording?**

- PROMs – Patient recorded outcomes measures which assesses quality of care from the patient perspective
- PREMS - Patient experience recorded outcome measures which assess the experience of their care from the day they get onto your website to the day they leave
- NRS pain – numerical rating scale for pain
- PSFS – the patient specific functional scale
- GROG and the net promoter score – which effectively is about how likely the patients are to come back or recommend you
- PASS – which is a very simple scale which says are your symptoms in an acceptable state with a binary yes or no answer

#### **5. Steps we take - What do we do?**

- Patients get an automated email 48 hrs before their visit
- Our front of house team check if the patients have filled in their forms. It's important to fill them in before they meet the physio
- If they haven't filled in the survey, they are asked to sit on one side and complete it
- We've got posters all around the place or the patient can be given a tablet
- The patient responses can be viewable immediately but there is often a delay of 20 mins or so
- We teach all of our team to read it beforehand, so they greet the patient with - thank you for filling in your forms. I'm really sorry you can't play football at the moment. Come on in, let's sort this out. We will ask you to do this another 4 times over the next 12 months hopefully we will get you better very quickly but sometimes symptoms can return and we want to know how you do after you have left us.
- The survey is automatically generated at 6 weeks, 12 weeks, 6 months and 12 months

#### **6. What are the costs?**

- Set up fee £500 I believe
- Monthly fee is £450 – 50% discounted rate for MSKPN members. It's set according to how many patients you want to analyse eg 2000 annually
- There is a lower fee for first 1000 and larger clinics can pay an increased rate
- Posters and preparation £1800 – time working out how it would be successful
- For first 12 months we had a check in system where members of the team policed everyone else. If they correctly marked if they had completed the tracker 100% of the time they received a £15 voucher every month.
- Monthly staff voucher £200.
- Only 3 members of the team didn't receive their £15 voucher so I know who to talk to, represented 80 MSK hours.

#### **7. What are the benefits?**

- Huge benefits I couldn't have seen at the beginning of the project

- First time we paid the front of house team and the clinical team an equal bonus – so everyone was equally as important going through this process
- We created team ambassadors and we upskilled people who absolutely flourished
- We've got great data which has informed a lot of our protocols
- Client engagement is massive – people don't really like receiving marketing emails but if you get an email from your physio saying - I've just read your latest questionnaire seems you've gone backwards, how are you? This is an email they want to receive

## **8. Snapshot of the data.**

- See slides – improvement in scores across all areas
- They continually improve after they leave physio
- We get really nice quotes from the patients and they are wholly positive. You could use these in your marketing and website
- Being part of MSKPN gives me an inexpensive way of being part of everyone else's data
- Everything is in real time. The PASS report is the outcome measure that asks -you're your symptoms in an acceptable state - yes or no, so we can use it for women's health who may not see an important reduction in pain - Nice response rate and big numbers.
- You can get metrics on your front of house team - how nice and polite they are - and about your facilities
- One thing it enables you to do is to look across the whole gambit and within your individual clinic and individual areas of expertise. It allows you to look at foot, neck etc and you can upskill in a particular area. You can start to benchmark how we do compared to everyone else.
- It shows nice results for Balance eg 9 out of 10 patients report improvement between baseline and 3 months

## **9. Results so far**

- We've got a galvanised team with data under continual analysis
- We can ensure quality
- We put it straight into our clinician's 360 reviews and present the data back. Some of our specialists are not able to access data, so when they go out lecturing they can present their data

## **Alert system**

- We have an alert system built into it. It is purpose built so it triggers a response at the clinic if any of the patients go backwards, significantly.
- **This is where the commercial benefit is**
- In the alert system if the patient regresses, an email drops into the physio's inbox. Patients when completing their questionnaire, tick if they wish to be contacted.
- The physio will read the latest questionnaire, compare it with patient notes, they will immediately pick up the phone or send an email.
- From that there is an action register – we have a 7 system of different actions

## **Action alerts**

- 1 An action might be I'm much lower it's much worse
- 2 Another problem intervened
- 3 sorry I must have filled it in incorrectly
- 4 patient hasn't done very well and needs to be referred on – so important it's done by the physio part of the whole experience of being in your clinic

- 5 book back in for review
- 6 stopped treatment with us
- 7 patient didn't response to contact

We collect all this data and act on it.

### Alerts in Aug 23

- We had 57 alerts where the system recognised that the patient had gone backwards
- Of the 57
  - 1 – 5 people
  - 2 – 24 of those alerts had another problem had intervened. Of those, 16 came to see us in the following year which equaled 140 sessions and £10k worth of income
  - 3 - 16 filled it in incorrectly
  - 7 – 11 unable to contact
- **Cost of the set up fee, time, staff benefits, arrangement fee, posters = £5,500**
- **Income I can attribute to the alert system in those 5 months = over £10k**

So on balance that was a significantly useful investment commercially

### Alerts in 2024

- We had 140 alerts
  - 1 – 12 verified low score
  - 2 – 26 had another problem that intervened. 20 started intervention for their other condition bringing in **£14k**
  - 3- 40 verified absolutely fine but filled in incorrectly
  - 4 - 16 were referred on
  - 5 - booked back in for a review for the original issue = Income £2100,
  - 6 - 10 stopped treatment with us (mostly left London and rest PMI stopped funding)
  - 7 - 24 no response
  - BUPA PROM dispute. A client said that BUPA wasn't going to fund them anymore as clearly no improvement, when requested more treatment. I said to go back to them and confirm you have gone up from 10 to 26 on your PSFS - that is a massive functional improvement from when you first came. He wanted non invasive treatment. So he complained to BUPA. This is bupa's preferred prom so whoever has read that doesn't understand. Since that time, he's had 21 more sessions which is another £1,100. **We don't question very often the PMIs response to yes or no treatment, but we should**

### 12 month costs

- 6 months of paying everyone £200 their £15 pm
- Rest is fee of £450 per month
- **Consequently we think it is of considerable commercial value to continue our journey with Cemplicity and look at further analysis.**

## 10. Audience Questions & Answers

Steven - What are your key learnings and key friction points, eg implementation, overcoming inertia, getting people on board

- Biggest time I spent on it was thinking time. I've done a couple of RCTs. I couldn't get my head around how I was going to get the team on board. I have a wonderful member of staff who at the time was head of IT. We'd been trying to work out the system, spectacularly doing it ourselves and not getting anywhere.
- Then when Cemplicity came around, I charge myself out at £250 an hour. So seeing a bill of £450 commercially we had to make this work, but I couldn't see how to get this galvanized in a team of 30. So that's why we came up with the financial incentive. We had everyone marking everyone else's homework. We delayed it by a month and I would say it has gone relatively well since then. You have to wake everyone up ever so often, we decided we would stop paying the voucher after 12 months and there is no doubt certain people aren't on the ball but you can incentivise people in different ways and maintain the momentum
- We have a lovely pictogram of all the lovely patient comments and we present that back to everyone as part of the 360 review. Physios do go to bed and worry about that one client - have I done enough. They were all delighted about receiving these positive comments they weren't receiving at any other time.
- In a couple of months we'd changed our protocols for how we allocate funds for going on courses. So we look at Cemplicity data first. Are their outcomes below ave for shoulder. It's giving us hard data on those aspects that I wasn't expecting at all.
- Get your thinking time right. Don't underestimate how difficult it is

Is there a set up fee and a fee per patient?

- No, one off set up fee. You agree with Cemplicity if you want them to capture the first 1000 or 2000 or 5000 patients and pay that monthly fee depending. We agreed 2000 and the fee was £450

What Vouchers do you use?

- Multistore £15 - You can use it at Pizza Express, Waterstones, Waggamamas, Boots, WH Smith

Karen – her experience

- We didn't take the thinking time we just jumped straight in. You do need an ambassador we made our practice manager that person to make sure all patients were completing it. Lucy said we could steal the processes they put in place. Our rates have gone up to 50%. It takes time and effort so the team knows they're effective. Really nice to have an evidenced way of saying how good they are.
- I had 3 patients to contact this month who had regressed. One had gone off to get surgery. Other one fully recovered but said I really need to see you about my back so has made an appointment. Another one's health had regressed as training for a marathon and playing more golf, so he booked back in. They all said really appreciated I got back in touch and really nice to know someone cared.
- It enhances the engagement with the patient.

Steven – technology

For a tech solution is it only on the front end that you're getting the forms completed before they start their journey. And the rest is a technology solution you set it and forget it or is it still continued?

- It's so important in the first place, we want the data that's pure from the start. Everyone 3 months we'd receive information from Cemplicity showing a report eg missing fields, so there is quite a lot of labour intense teething problems but it soon gets ironed out. **You have to keep on top of it to keep the numbers up.**

Simon – pointed out another commercial benefit

- We have found it to be very useful in negotiating with the PMI sector for negotiating rate increases. If you are able to present what your business is doing as a whole and the improvement you're making and put some numbers behind that value proposition, I've found it to be incredibly useful.
- **It is the difference between a good increase and no increase.**

Natasha – cost

- Cost is a bit of a barrier. You could just pay for 500 patients and get some early data. Then increase your number and increase your cost.

Karen – lesson learnt - getting team on board

- I wish we had done more. You mean I actually have to look this up before I see my new patients, I don't have time - yes you do, you don't have time not to do it. Inherent fear about being found out eg everyone is better than me, but I invested the time to get over that

Simon – learned experience

- Anyone who is considering taking on the collection of outcome measures, there is a lot of learning in the group. For anyone who wants to pick this up is going to hit the ground running. It's good to go in with eyes wide open. Lot of benefits in the group that can be shared. **The philosophy in MSKPN is about sharing for the benefit of moving things forward.** This is a fantastic resource I'd encourage people to draw experiences from.

Steven – technical question

Integration with existing PM software. Is there a plug in or API that connects automatically or do you manually put in those ICB codes.

- TM3 team has been working with Cemplicity. All of the practices who are inputting in this meet every month with Cemplicity. I speak with Nookal and Cliniko and I'm encouraging everyone to speak and get it as seamless as possible
- Chris Pinches Central Health - Integration was done very recently so sharing of information is a lot more seamless. Individual physios can now see the individual scores through TM3 and Cemplicity
- David Luka – Complete-Physio - We were the middle man but now we're not anymore and they seem to have been harassed into talking to each other.
- There is a seamless API integration with Medibase also. A lot of the heavy lifting has been done on data sharing.
- In an ideal world it requires the physios to drive the process more than we thought would be needed, so there has to be an ongoing human element to make this work.
- Natasha - Get everyone on Heidi notes to free up time

Practice management software integration

- Only Medibase and TM3 are seamlessly linked
- Klinko or Nookal is not integrated yet. Everyone else is manually shifting things over.