

## MSKPN Networking event 11.6.25 (member's only summary, not for onward sharing)

Thank you to all our members and wider colleagues for joining us this evening. It was a strong turnout with around 25 people in attendance. When it comes to understanding and addressing member needs, there is a clear alignment in our shared priorities.

### Key takeaways

- One notable shift is the market's positive momentum, with strong demand now emerging for private physiotherapy.
- If solely NHS provision, it is tough due to the cyclical nature of commissioning
- Private physio is a fragmented market, unlike private hospitals where there are only a small number of large entities - Last year private hospitals had a 18% ave uplift in funding
- From the 24 members who completed the MSKPN survey, we deliver 500,000 appointments a year.



**Claire Small** (Co-founder and Consultant Physiotherapist at Pure Sports Medicine) was thanked for her support in representing the industry in her role on the CSP Council. She added “250 letters have been received by the CSP so far so the message about the CSP policy position to include private physio has definitely landed, especially as we think around 30% of CSP members are non-NHS. It's crucial to continue drawing attention to various issues, like shockwave to the CSP, because they can only address the problems they're aware of.”

### **Danielle Henry, Policy Director, IHPN**

We were honoured to host expert speaker Danielle from the Independent Healthcare Partners Network, who provided an insightful update on the key market drivers. IHPN is a membership body representing 120+ organisations including private hospitals, primary care, community care, diagnostics and ophthalmology.

Today's [Spending Review](#) announced an extra £29bn a year to be spent on the NHS, an annual rise of 3% on current levels. Key points:

- A reinforced commitment to achieve the Plan for Change 18 week wait for elective care (mainly hip knees and cataracts) currently standing at 7.4m
- Capital spending money but not enough due to a £13.8bn maintenance backlog
- This is alongside asking for 2% productivity improvement per year

In summary, the NHS is under great pressure, with the abolishment of NHS England, cutting ICB (Integrated Care Board) numbers by half, 7.4m on elective waiting lists, 1-1.5m on community waiting lists, 2m waiting for diagnostic tests and around 80% of people in the system waiting for some sort of test. The NHS needs to take 1m people per year off the list to get back to normal and currently they are doing only 150k pa. In addition, there is huge change coming on the regulatory side with new leaders at the CQC.

**Sadly the patient is the one who is really suffering, leading to the view of private pay changing.**

- Public polling indicates that private healthcare is a key priority, especially among those under 40, who value access and flexibility and tend to be more health-conscious. The three main areas for seeking private healthcare are:
  - GP appointments
  - MSK
  - Diagnostic tests particularly MRIs

#### **Private market stats**

- The Times research showed that in 2020-22, 4m people saw a private GP of which 2m people did so for the first time
- Predominantly we see young women in private GP waiting rooms
- IHPN member surveys show an increase in demand of 25-30% for private GPs
- 1.1m paid for private tests and scans last year, that's around 30% increase
- PHIN data shows that private health insurance is increasingly more important when job hunting
- Data from Broadstone, who analysed the latest Financial Lives Survey from the Financial Conduct Authority, found 7.6m now hold a PMI policy equating to about 11m people and that 5m people are covered by employee PMI
- We know that the two main reasons for being unable to work are mental health and MSK issues

#### **Feedback on the night included**

- "It's so wonderful having a voice to stand up for our members."
- "Thank you to the MSKPN board for your support with PMIs."
- "Often feels like we are the little guy when talking to the PMIs."
- "These in-person meetings are where the 'Secret Sauce' is."
- "So good for networking and sharing in a collaborative open forum with likeminded MSK Business owners."

#### **Collective voice is so important**

Simon Devane, Chair MSKPN added: "As a trade association one of our big roles is to lobby the PMIs to change - change how services are commissioned, how much we are paid, how it recognises quality and safety.

As a sector, we need strong leadership and effective representation. By raising the profile of our profession, we can create collective benefits for everyone. We remain committed to supporting our members and look forward to continuing that journey together."

If anyone would like to chat further, please do get in touch.

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