

Story for Change

Supporting People with Knee osteoarthritis



Why we developed the Knee OA group

As a physiotherapy team at Whipps Cross Hospital, we were seeing the same challenges time and time again. People newly diagnosed with knee osteoarthritis often came to us unsure, anxious and unclear about what they should be doing.

Many relied heavily on their GP, worried about whether things would only get worse. We also saw repeated appointments that could have been avoided if people had the right information and support earlier in their journey.

We created the Knee Osteoarthritis group to address this gap. Our aim was

simple: to give people the knowledge, confidence and support to understand their condition and take control of it from the outset.

Rather than defaulting to one-to-one appointments, we designed a weekly group session where people could learn together and ask any questions they may have. Patients are referred by their GP shortly after a diagnosis, usually within three to four weeks. From the beginning, we wanted this to feel accessible, supportive and practical.

What we do

Each session lasts around one hour and typically includes between six and eighteen patients.

We cover everything we know people need to make sense of their diagnosis, including:

- What osteoarthritis is and how it affects the knee.
- What helps and what doesn't.
- Exercise, lifestyle and self-management strategies.
- Pain relief options (supported by a pharmacist-led video).
- When to seek further help.
- What surgery involves – and importantly, when it should and shouldn't be considered.

We place a strong emphasis on movement and exercise, helping people understand that staying active is key to managing their symptoms.

We also introduce a range of options, including ESCAPE-pain programme, local exercise programmes and community services so people leave with a clear sense of what's available to them.

What makes the session particularly valuable is that every patient has the opportunity to have a one-to-one conversation with a physiotherapist. This allows us to personalise next steps – whether that's joining a group class, accessing physiotherapy, moving onto a Patient-Initiated Follow-Up (PIFU) or simply feeling confident to self-manage.

The difference it's making

The shift we're seeing in patients is significant. People leave the session feeling reassured, better informed and more in control. Feedback consistently shows high levels of confidence in self-management, with most patients rating the sessions as informative and engaging.

Crucially, this is translating into real change in behaviour and in how people use services. We are seeing high rates of self-discharge, where patients feel they no longer need further NHS input; greater use of PIFU, giving people a safety net without unnecessary routine

follow-up; and more targeted use of face-to-face physiotherapy, directed to those who need it most. Patients are not just gaining knowledge; they are making informed decisions about their own care.

From a service perspective, the group has helped us move away from a reactive, appointment-driven model to a more proactive and efficient pathway. We're reducing pressure on one-to-one services while still ensuring people can access the right support when they need it.

What patients tell us and what we've learnt

Patients often tell us they hadn't realised how much they could do themselves. Many describe feeling empowered rather than fearful – a significant shift for people who arrived uncertain about what their diagnosis meant for their future.

One patient put it simply: "I liked the group setting; it was very informative and engaging. I don't think I need anything else from the NHS, I learnt about what can help and I did not realise there were so many forms of exercise I can do."

Delivering this group has reinforced something we suspected but now know with confidence: education is a powerful intervention in its own right. Patients value time to ask questions, hear different perspectives and reflect on their options. Not everyone needs or wants a traditional one-to-one model, and offering something different doesn't mean offering something less.

We have also learnt the importance of clear communication before the session. Some patients arrive unsure what to expect, and a little more preparation upfront makes a meaningful difference to how they engage. Flexibility matters too – people need to feel that whatever comes next is genuinely their choice.

What's next

We see this as an evolving service. We want to strengthen the links between the group and community exercise programmes, refine how we prepare patients before they attend, and continue developing self-management pathways that give people real confidence beyond the session itself.

Our goal is a pathway where people with osteoarthritis feel informed, supported and in control from the very beginning – and where NHS services are used by those who need them most, in the ways that help them most.

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