

# **Low Back Pain Clinical Care Standard: 5a-Proportion of patients with low back pain who have documented discussions in their medical record about both self-management strategies and staying active by continuing usual activities**

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# Low Back Pain Clinical Care Standard: 5a- Proportion of patients with low back pain who have documented discussions in their medical record about both self-management strategies and staying active by continuing usual activities

## Identifying and definitional attributes

<b>Metadata item type:</b>	Indicator
<b>Indicator type:</b>	Indicator
<b>Short name:</b>	5a-Proportion of patients with low back pain who have documented discussions in their medical record about both self-management strategies and staying active by continuing usual activities
<b>METEOR identifier:</b>	759562
<b>Registration status:</b>	<a href="#">Australian Commission on Safety and Quality in Health Care, Standard 01/09/2022</a>
<b>Description:</b>	Proportion of patients with low back pain who have documented discussions in their medical record about both self-management strategies and staying active by continuing usual activities.
<b>Indicator set:</b>	<a href="#">Clinical care standard indicators: Low back pain</a> <a href="#">Australian Commission on Safety and Quality in Health Care, Standard 01/09/2022</a>

## Collection and usage attributes

<b>Population group age from:</b>	16 years of age
<b>Computation description:</b>	<p>Self-management strategies will vary for each patient depending on their history, pain severity and confidence to undertake self- management. Self-management strategies may include:</p> <ul style="list-style-type: none"><li>• Active management strategies such as physical activity, staying social, healthy sleep habits and the application of heat</li><li>• Gradually increasing activity levels by using pacing to prevent overexertion followed by inactivity</li><li>• Supporting the patient to set SMART (specific, measurable, achievable, realistic and time-bound) goals that are important to them.</li></ul> <p>Usual activities include work, caring responsibilities and household duties. Modifications and support may be required.</p> <p>Presented as a percentage.</p>
<b>Computation:</b>	$(\text{Numerator} \div \text{Denominator}) \times 100$
<b>Numerator:</b>	Number of patients in the denominator with documentation in their medical record confirming they were provided advice on <b>both</b> self-management strategies and staying active by continuing usual activities.
<b>Denominator:</b>	The number of patients with low back pain.

## Representational attributes

<b>Representation class:</b>	Percentage
<b>Data type:</b>	Real
<b>Unit of measure:</b>	Service event
<b>Format:</b>	N[NN]

## Accountability attributes

**Reporting requirements:** These indicators are for local quality improvement. Monitoring the implementation of the Low Back Pain Clinical Care Standard (ACSQHC, 2022) will assist in meeting some of the requirements of the National Safety and Quality Health Service Standards (ACSQHC, 2021).

**Organisation responsible for providing data:** Not applicable

**Accountability:** Not applicable

**Other issues caveats:** Applicable settings: Public and private hospital emergency departments and primary care settings where care is provided to patients with low back pain (including general practice).

**Release date:** 01/09/2022

## Source and reference attributes

**Submitting organisation:** Australian Commission on Safety and Quality in Health Care

**Reference documents:** Australian Commission on Safety and Quality in Health Care. Low Back Pain Clinical Care Standard. Sydney: ACSQHC; 2022