

Supported Self-Management for Patients with Acute Low Back Pain

As documented in [the Acute Low Back Pain Care Pathway](#), 95% of back pain improves a lot over the first couple of weeks. A self-management plan that incorporates support that can educate, encourage and empower people to conservatively manage their symptoms themselves is appropriate. This supportive setting can inform patients and their care advocates about high-value and low-value care, provide a clinical contact for future questions and concerns and help lead the patient on a self-actualized path toward sustainable wellness.

Equity is central to value-based care and critical to ensuring the health and well-being of all individuals, particularly those historically or presently underserved. Poor access to care can certainly be due to its cost, but there are other reasons as well. Multiple barriers to access that a care team can only be aware of by engaging the patient can include: work hours, ability get through to provider clinics, wait time to get an appointment, availability of appointments at convenient hours, availability of transportation or equipment for telehealth, financial burden, etc. There are multiple opportunities within Supported Self-Management to improve health equity:

- Offer all communications in multiple languages and at an accessible literacy level
- Use electronic and physical assessment questionnaires to increase access
- Implement training for all staff assisting patients with the Supported Self-Management process on unconscious bias, social determinants of health and health equity for racial and ethnic groups, the LGBTQ+ and senior populations and people with language barriers, financial barriers and disabilities.

Elements of Supported Self-Management for Patients with Acute Low Back Pain

- Establish a point of contact and plan for regular communication(s) with the patient after the initial point of triage. This needs to be done by someone who is clinically able to re-evaluate for red flags and yellow flags and can also offer a level of critical thinking and patient engagement and shared decision making. The patient needs to feel that this person has listened to and understands their concerns and that they will not be abandoned if their back pain continues for weeks or longer.
- Conservative treatments, including advice to remain active and simple analgesics before considering judicious use of opioids. Help patients make sense of their symptoms.
- Patients should be advised on when to contact the support person before seeking care elsewhere.
- The support for Supported Self-Management can come from Primary Care, RN, PT, DC or Point Solution and can be virtual or in person. It should NOT involve the ED.

Options for the Support in Supported Self-Management (listed alphabetically)

Chiropractic Care
Physiatry
Physical Therapy
Point Solution
Primary Care
Urgent Care

Other high-value, evidence-based care for low back pain that could be considered part of Supported Self-Management (listed alphabetically)

Acupuncture
Behavioral Health
Evidence-based exercise (Tai Chi, Yoga, etc.)
Medical massage