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Purpose: Engagement with healthcare services in general can present an ongoing challenge for rehabilitation teams (Wong and Leland 2018). Poor engagement with services often leads to unsuccessful treatments and the need to re-refer for further intervention.

Despite engagement and non-attendance from a primary care perspective being often discussed in research, the issue has received less attention within the secondary/ tertiary care sectors around the multitude of different rehabilitative teams. Whilst the impact of poor engagement has been discussed (Marzban et al 2022), there are still areas for ongoing consideration.

The aim of this review was to map the current understanding around the issues which influence engagement with rehabilitation services, with the hope of identifying areas for more detailed onward investigation.

Results: The thematic analysis of the final papers identified 3 overarching themes,

- 1: Psychological factors
- 2: Physiological factors
- 3: Social factors

Of the 3 themes psychological factors appeared most prominent, with sub themes surrounding motivation, emotions and patient perceptions of and degree of understanding regarding their involvement with services. In addition, several studies identified existing mental health conditions that were perceived as barriers.

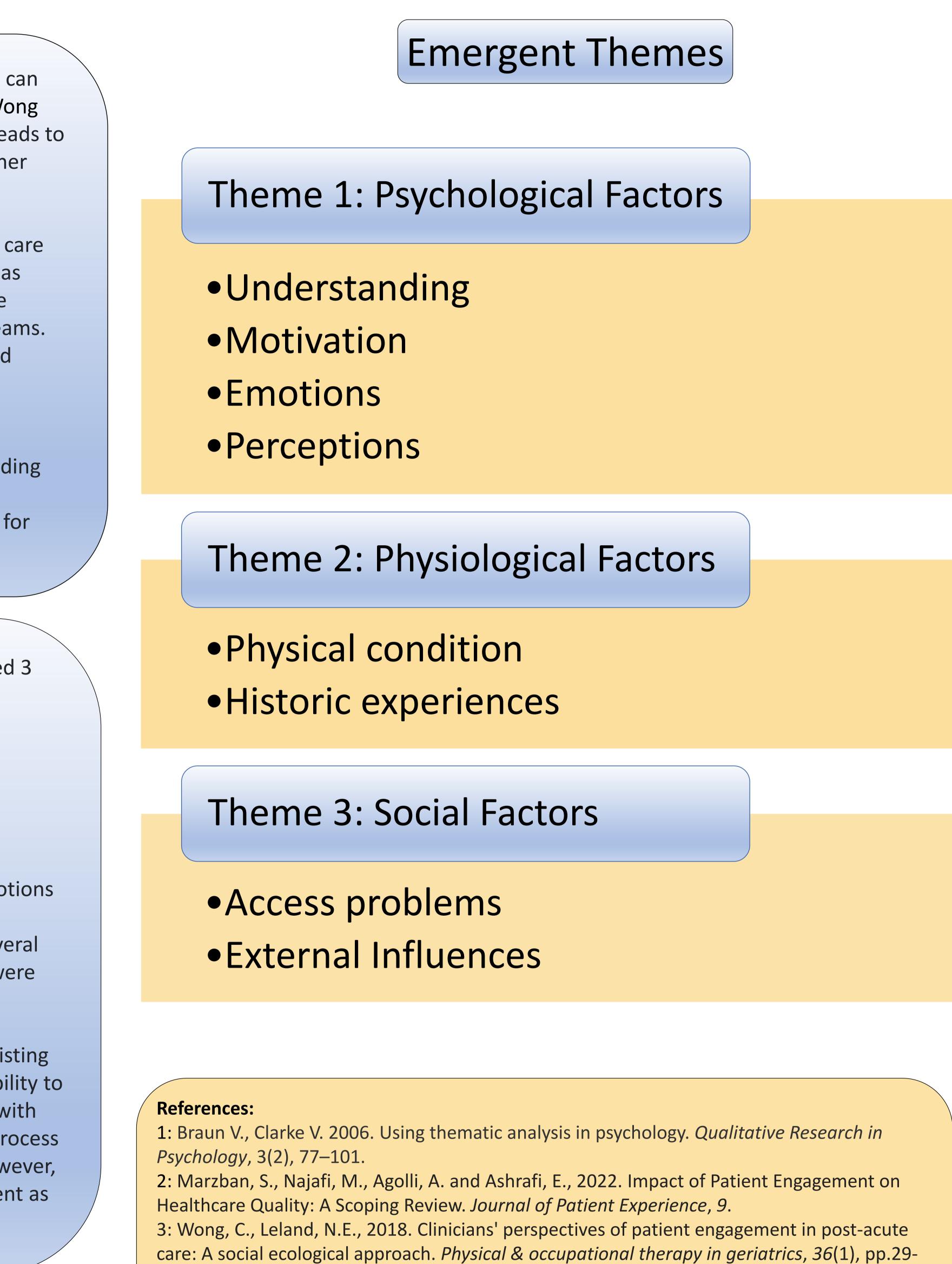
The second theme was physical factors and referred to existing health conditions which physically limited the patient's ability to engage. The final theme, external factors was associated with external influences such as the role of others within the process ranging from peers and family members to therapists, however, in most cases these were seen as an enabler to engagement as opposed to a barrier.



Barriers to engagement with rehabilitative services: A scoping review

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Methods: This scoping review searched Medline (via Ebsco), CINAHL (via Ebsco), Science Direct, Cochrane database, ProQuest and Sport Discus with the key phrase "barriers to engagement with rehabilitation".

Only primary sources published in English and investigating engagement with rehabilitative services were eligible for inclusion.

All papers discussing rehabilitation of any description were included" 279 papers were retrieved, and, after screening, 13 final papers met the inclusion criteria and were analysed using a 6-step Reflexive Thematic Analysis approach (Braun & Clarke 2006).

Conclusion(s): The review indicated that the challenges impacting full and productive engagement are multifaceted. Some issues are more easily controllable than others. For example, psychological elements may require involvement of specialist services to improve engagement with behavioural change approaches. While the role and behaviour of therapists may be easier to control, this also emphasizes therapists need to recognise the impact their own behaviour can have on others.

Reassuringly throughout this work some identified areas presented as enablers showing that positive influence can be made to improve engagement. A more detailed investigation into the individual themes is warranted to determine the extent of the individual challenges and the potential solutions which can be offered.

While the reported results offer some insight, it must be acknowledged that all included studies were not exclusively physiotherapy or UK specific meaning that further investigation into these areas is required to determine if identified trends are transferable.

Abstract no: 430 Theme: Workforce Transformation

