

Barnsley Pain Management Review 2017 Engagement Report

1. Background

NHS Barnsley Clinical Commissioning Group (CCG) has the responsibility for the commissioning (planning and buying) of local healthcare services for the benefit of the people of Barnsley.

We are reviewing pain management treatments in Barnsley so that we can make sure we are up to date with the services that are provided.

Many people struggle with long-term pain but help from the NHS and other pain services can lessen the pain, improve independence and help cope in general.

You may have a painful diagnosed condition such as arthritis or diabetes nerve pain. Or, you may have a painful condition that medical science doesn't fully understand, such as long-term back pain.

There are two main types of pain:

Acute pain, also known as short-term pain, is pain that has started recently.

Chronic, or long-term pain, is pain that has lasted for three months or more.

If you have short-term (acute) pain, your GP will try to make a diagnosis and treat the pain. If you have chronic/long-term pain it might be as a result of a diagnosed medical condition, a painful condition that is not yet fully understood or no underlying condition at all. This doesn't mean you don't have pain, but it does mean that a different approach to managing that pain might be helpful such as a referral to a pain management clinic/ service. (Information courtesy of [NHS Choices](#))

What Pain Management Services are available for Barnsley people?

Most people in Barnsley attend pain management clinics at a number of places, including local hospitals (including Sheffield and Doncaster) or a community based service such as InHealth Pain Management Solutions, although some people do travel further afield.

At all of these places, the pain management service will have teams of staff from different medical areas, including occupational therapists, psychologists, doctors, nurses and physiotherapists. They all work together to help people with pain.

Pain clinic treatments vary but usually offer a variety of treatments aimed at relieving long term pain, such as painkilling drugs; injections; Acupuncture and Cognitive Behavioural Therapy (CBT).

People can be referred to a pain clinic by their GP or some other NHS professionals.

What did we want to find out?

We want to make sure the treatments provided to Barnsley people are up to date with current clinical and national guidance. To do this, we are required to regularly review treatments offered in Barnsley.

Key to this review is for us to gain views and feedback from the people who are using these types of treatments. The more examples and feedback we can get, the better we can ensure that future services meet the needs of the local people accessing them.

This summary report details all of the collective feedback that we received as part of the above engagement exercise.

2. Acknowledgements

We would like to take this opportunity to express our gratitude and to sincerely thank all of the individuals and organisations who have taken the time to share their extremely valuable views and feedback regarding their experiences of both accessing, using and referring into pain management treatment services locally.

We would also like to acknowledge the assistance received from our local partners working across health and care who provided their help in promoting the opportunity for local people to have their say.

3. Our engagement approach

We set out with the aim to carry out engagement activity that would;

- Obtain initial views and feedback from professionals, patients and carers from across Barnsley in relation to pain management treatment services with our overall aim being that this feedback will directly help shape the next stage of the review process.
- Act in accordance with the NHS Constitution and meet the statutory duty to engage in line with the Health and Social Care Act 2012 which introduced amendments to the NHS Act 2006 highlighting two specific legal duties which require CCGs and commissioners to enable:
 - 1) Patients and carers to participate in planning, managing and making decisions about their care and treatment, through the services they commission and
 - 2) The effective participation of the public in the commissioning process itself, so that services provided reflect the needs of local people.

In order to help us to achieve the above, two surveys were designed and undertaken in order to obtain views from local patients and carers and clinicians on their experiences of accessing, using and referring into pain management treatment services locally.

Information and links to both surveys were posted online on the 'Get involved' section of the NHS Barnsley CCG website (www.barnsleyccg.nhs.uk) and also kindly circulated by local partners working across the health and social care economy. The patient and carer survey was also circulated, to members of the NHS Barnsley CCG Patient Council and to members of the OPEN (Our Public Engagement Network) Database. Paper copies were also available on request and respondents were also able to feedback over the telephone.

In addition to the above, we also held a joint informal patient, public and carer drop in session on Thursday 10th August between 2:30pm and 8pm at the Core, County Way, Barnsley in order to discuss this work and also similar work that is being undertaken (in relation to Community Based Musculoskeletal (MSK) Services and Diabetes) in further detail and gain additional feedback via the surveys. 13 people attended throughout the day.

Notification of the engagement phase and workshop was circulated to the local media (Barnsley Chronicle) and the opportunity for people to have their say was promoted on social media via the CCG Facebook and twitter pages on a regular basis throughout the engagement period.

We also arranged for a dedicated focus session to take place on Wednesday 23rd August 2017 at the Core, County Way but despite advertising this opportunity on several occasions unfortunately we did not get any attendees registered.

4. Summary overview of the feedback received

Overall we received responses from 20 respondents in total to the patient and public survey by the closing date of Monday 11th September 2017 and 9 responses to the stakeholder survey.

Patient and Public Survey Feedback

- The majority of people (85%) highlighted that they have been accessing pain management treatments for over 1 year, with over 40% of those accessing treatment in the past month for the following types of condition/ injury.

- We asked people to share with us how their pain management treatment has helped with their condition/ injury and the responses they provided included the following: Pain Medication x 2, TENS, Physiotherapy (both NHS and Private), Steroid Injections, Acupuncture x 4, Pain Management Coping Strategies, Limited help x 3, No help x 3, and Hydrotherapy.
- Twelve respondents provided comments in relation to the question to the type of improvements they would like to see in relation to local pain management services and their responses covered the following themes; staff attitude and empathy, long term help and access to wider range of therapies offered, and more holistic services about 'treating the whole person not the bits and pieces'. However by far the most commented upon improvement people would like to see would be more accessible services in wider range of locations to alleviate travel costs and time.
- The majority of respondents to the survey were female (75%) with the majority being between the ages of 45 and 64 (55%).
- 100% of respondents stated their ethnicity as White British.
- 95% stated their sexuality as Heterosexual with 10% of respondents identified themselves to be Transgender
- 75% highlighted that they are currently living with a disability.

Stakeholder Survey Feedback

- Responses were received from the following: 1 Consultant, 3 GP's, 3 Physiotherapists, 1 Psychotherapist and 1 Cognitive Behavioural Therapist.
- The majority of responses came from clinicians working within Doncaster and Bassetlaw Hospitals NHS Foundation Trust and this was reflected in the split of responses from providers (6) and referrers (3) to pain management treatment services.
- In relation to the question regarding what aspects of pain management treatment respondents felt works well and why, from both their perspective and that of their patients, the following areas were highlighted:
 - Evidence based group interdisciplinary psychological approaches;
 - CBT self –management in conjunction with physiotherapy led activity and exercise programmes;

- Pain Management Programmes which addresses patient expectations of realistic long-term management, provides information and supports behavioural change relating to activity, exercise and communication;
 - Medication management education and advice in supporting patients to make informed choice regarding long-term use of pain medications;
 - Chronic Pain Management Service (based at Mexborough);
 - Acupuncture;
 - The service provided by Sheffield Teaching Hospitals.
- In relation to the question regarding what aspects of pain management treatment respondents felt could work better and why, from both their perspective and that of their patients, the following areas were highlighted:
 - Interventions that create dependency on healthcare e.g. long term use of acupuncture and injections;
 - Medication management outside of specialist services - This would include following current clinic guidelines in prescribing for chronic conditions and making sure the patient is well informed and encouraged to seek an understanding of what they are taking;
 - More education regarding chronic pain management should be encouraged to primary care providers such as physiotherapy in order for patients to get early appropriate information, management and expectation setting.
 - Excessive medical interventions aimed at short term pain relief can be ineffective and keep patients stuck focussing on a passive approach to chronic pain management, rather than adjusting their lives and expectations and focussing on function.
 - Access to 1-1 CBT focussed pain management or PMPs (groups) earlier on to prevent and tackle pain related disability and distress and function.
 - I think services would be better for patients if they adhered more closely to the NICE guidelines for chronic pain (back pain) and Fibromyalgia.
 - Outreach clinic in community in Barnsley area would be desirable. It worked well for patients. Elderly and poorly mobile patients have lost out. There is a postcode lottery for access to medication.
 - Delayed referrals common. Conditions like CRPS can be treated well early, several years down the line it is quite difficult
 - Services based in Barnsley are quite poor. Generally I do not think they offer a detailed or holistic approach.
 - More plans to discharge patients When dealing with opiate addiction we don't tend to receive help and support in a way forwards- please advise GPs on medicines especially dependence, quickly local clinics or central
 - The following additional comments were also made by stakeholders:

- Patient expectation and positive patient feedback is not always in-line with effective clinical outcomes and what has been demonstrated in research, and therefore should be used with caution when deciding on what treatments are "effective" or worthwhile commissioning long term.
- Thinking about the people of Barnsley, of which I am also one; it is essential that easier access to Pain Management services be provided, along with education and guidance to referrers. Our service has long provided a fully Multi-disciplinary approach to Chronic Pain Management which ensures availability to a high standard of psychological and self-management approaches which are in keeping with current NICE guidelines and updated research findings. Few other services are able to provide this spectrum and standard of service.
- I think chronic pain management is a very important part of healthcare and requires specialist expertise to deliver effective and safe care to patients. I think continuing to invest in effective pain management approaches is important, especially aiming at self-management of pain using CBT and Physiotherapy.
- A recent small Patient Satisfaction Survey of new Patients in our clinic showed that all the patients felt that the experience was excellent. A larger survey 2 years ago showed that most patients felt that the service they received was excellent or very good.
- Please feel free to contact us. There is a lot we can do to get the best possible service to the people of Barnsley in a time of major financial constraints.

5. Summary of the key themes from the collective feedback we have received

The key themes taken from this engagement are as follows:

- The feedback received during this engagement activity confirmed that the current service is valued and appreciated by a number of the patients, carers and clinicians who have direct experience/ knowledge of the service (and who responded to the survey) and the following elements were particularly praised;
 - ✓ Professionalism and knowledge of a number of the staff working in the current services
 - ✓ Range of services on offer
 - ✓ Praise for members of staff, teams and services
 - ✓ Range of therapies
 - ✓ Clear advice and information for patients
 - ✓ Self -management education
- However there were also suggestions highlighted where improvements could be made mainly in relation to the following areas;

- × Services needed in wider range of locations locally
 - × Holistic services
 - × Access to timely assessment, treatment and appointments
 - × Communication with patients and between services/ teams
 - × Frustration over waiting times
 - × Referral processes and correct information
 - × Wider range of services and appointments 'out of normal working hours'
 - × Support, training and education for patients and professionals
 - × Concern that feedback won't be taken into account
- The majority of respondents to the survey were female (75%) with the majority being between the ages of 45 and 64 (55%).
 - 100% of respondents stated their ethnicity as White British.
 - 95% stated their sexuality as Heterosexual with 10% of respondents identified themselves to be Transgender
 - 75% highlighted that they are currently living with a disability.

6. Next Steps

This engagement process has provided a brief snapshot of the views and experiences from a number of patients, carers, clinicians and other stakeholders regarding pain management treatments and services locally.

The collective feedback that we have gained as a result of this engagement will help us understand more about how pain management treatments and services work now - what respondents think works well and what doesn't in relation to the those points we described in the introduction to this report.

This information will be shared with the CCG leads for this review to help shape next steps and this engagement report will be made publically available and feedback provided to those respondents who have requested it.

Again we would like to reiterate our thanks to all respondents who have given their time to share their views to help inform this process and to all partners who have helped us to gain their feedback.

Updated December 2017.