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**Title:** Burwood assessment, screening and education for chronic pain – An evaluation

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**Introduction:**

The Pain Management Center (PMC) at Burwood Hospital offers a Comprehensive Pain Assessment (CPA) that allows individuals with chronic pain to receive interdisciplinary treatment depending on their individual needs. However, they only have the resources to accept around 35% of referrals for this intensive assessment, which has meant that approximately 700 people every year have had to be turned away. To help address this problem, the Burwood Advancement, Screening and Education programme (BASE) has been developed. BASE is a half-day seminar for those who've been referred to the PMC to receive education about chronic pain and self-management principles.

**Aim:**

The aim of this project was to conduct a mid-point analysis of the first 10-sessions of BASE.

**Impact:**

This evaluation is an opportunity to highlight and address anything that could be improved upon for the remainder of the seminar's 1-year pilot period. Ideally, it will also begin a convincing body of evidence that would allow BASE to continue.

**Method:**

Questionnaires were administered to patients after the seminar, and this data was entered and descriptively analysed. Interviews were conducted with the presenters of BASE to gain their perspective.

**Results:**

116 patients (67% female, 33% male, *M* age = 45.59, age range = 17 to 80) attended BASE during the 10 fortnightly sessions between July and December 2016. 103 patients identified as European and 23 identified as non-European. 32 (21.62%) patients were booked, but did not attend.

Overall, patients agreed that the content of the seminar was easy to understand and follow, relevant to their pain, and that they would recommend it to others with chronic pain. While most patients tended to say that they did not need a medical intervention and that a self-management approach was appropriate, there was still a proportion of patients that did feel such an intervention would help their pain. This may suggest that while patients understand the theory behind a self-management model, many may have less confidence knowing how to implement it into their daily life. Patients also tended to feel ambivalently about whether they believed their G.P. had a good understanding of chronic pain, and most reported that they learned some things that they wished to take back and discuss with their doctor, such as a review or decrease of their medications.

Analysis of psychometric variables did not reveal any statistically significant change between the assessments patients completed before the seminar and 2-weeks after BASE. However, since many patients did not complete and return the 2-week follow-up questionnaires, it may be that the sample size is too small to yield a significant result. As the collation of this data continues with subsequent BASE seminars, it may be that a significant change is revealed. Ongoing analysis will determine whether any psychometric variables reached clinical significance according to the Reliable Change Index.

The addition of BASE has improved the service model at the PMC as a whole. The triage decision is now more informed by both questionnaires from the seminar and psychometric assessments that patients complete before entry. This has meant that many patients (48.81% of those who received treatment) have been able to be sent straight into their appropriate treatments without the need for a CPA. This stratification of patients allows for a better efficiency of CPAs, as they are now more likely to be used for those who have the most complex needs. Furthermore, those who do not receive further treatment from the PMC are still being exposed to education and self-management principles through BASE. 6.6% of patients indicated that they did not wish to receive any further treatment from the PMC, presumably because many had gained enough information and skills from the seminar that they felt equipped to manage themselves.

**Conclusion:**

It seems clear from this analysis that BASE is functioning well both from a service perspective, and that patients positively evaluate the content of the seminar itself. However, discussion with the presenters and patient responses emphasise the need for more time needing to be spent on self-management, and so it is recommended that the seminar be extended to a full day so to help patients develop a personal self-management plan. It is hoped that this would increase the number of people who feel equipped to manage themselves without further treatment from the service. Furthermore, findings highlight the importance of ongoing education within primary care to ensure G.P.s have a fundamental understanding of chronic pain. BASE has also highlighted an issue with the current service model; many patients would be suitable for the self-management education modules offered at the PMC, yet their psychometric profiles are considered too severe to qualify for this treatment. An addition of a medium intensity self-management treatment programme that does not require patients to receive a CPA prior, would improve the service further. Yet overall, it seems clear that the BASE seminar is a valuable addition to the pain management service at Burwood Hospital, and should undoubtedly continue beyond its 1 –year pilot period.