


Agenda Item 8

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of Lincolnshire West Clinical Commissioning Group

Report to	Health Scrutiny Committee for Lincolnshire
Date:	22 January 2020
Subject:	Community Pain Management Service

Summary:

The four Clinical Commissioning Groups (CCGs) across Lincolnshire have commissioned a new Community Pain Management Service. Following a robust and thorough procurement the contract was awarded to Connect Health in November 2018, with the service going live on the 1 April 2019. Lincolnshire West CCG is the lead commissioner of the service on behalf of the four Lincolnshire CCGs.

The specification for the new service aligns with best practice and has been based upon the recommendations of the British Pain Society and the relevant NICE guidelines.

This report provides an update to the Health Scrutiny Committee with regards the mobilisation of the new service and the actions taken to address feedback from patients and colleagues.

The CCG and Connect Health are in constant dialogue to ensure that patient queries and operational issues are addressed in a timely manner. Formal contract review meetings are held on a monthly basis.

There were two discrete patient groups considered as part of the mobilisation plan. The first patients who were receiving treatment (described as transition patients) and new referrals. The majority of concerns raised with the CCG and Connect Health directly were with regards patients who were transitioned to the new service. Connect Health have worked hard and diligently to address the mobilisation issues they have had to overcome during the complex transition of 6,000 patients as well as receiving an estimated 6,000 / 7,500 new referrals.

Further details of the actions taken are provided in the body of the report.

Learning

The procurement of the Pain service was a significant transformation programme that encompassed the establishment of best practice clinical models, addressed the feedback from patients and clinicians regarding the inadequacy of the previous services and data that demonstrated that Lincolnshire was an outlier with regards Musculoskeletal and Neurological services in particular pain management. The comprehensive assessment suggested that Lincolnshire was an outlier with regards being one of the highest prescribers of opioids and interventional medicines and had a gap in terms of providing good practice e.g. psychological support. The new service provided by Connect Health addresses all these areas.

The procurement and mobilisation of the Community Pain Management Service has been a steep learning curve for both Connect and the CCGs. The learning from this process will inform future planning and programmes to facilitate transformation of services. The key observations are :

- Long term work required to develop public understanding the “Best Practice” Model of care for patients with long term pain, this is part of the “Pain – Do you Get It” campaign.
- The need to better understand the level of support for the patient’s carers and their families.
- Managing the transition process / expectation of patients who have been receiving treatments that are not recommended by the British Pain Society or NICE.
- Strengthening stakeholder engagement for patients, providers and public representatives

Actions Required:

- To note and consider the contents of this report

1. Background

Introduction

This report provides details of the ongoing work by Connect Health and the CCG to establish the Lincolnshire Pain Service. Information is provided with regards actions and progress to address issues highlighted at the Health Scrutiny Committee meeting on 16 October 2019.

Previous Treatment Model

Lincolnshire pain services were previously provided across various acute trust and independent provider locations. Treatment was Consultant led and based on a medical model of intervention that largely relied on pharmaceutical interventions. This model did not comply with best practice as it failed to provide access to the current evidence-base which involves an approach that combines physical and psychological treatment as recommended by NICE and the British Pain Society Pain Management Programmes.

Clinical Ethos

The Community Pain Management Service (CPMS) that has been commissioned is designed to empower patients to better manage their long-term (chronic) and persistent pain condition recognising that pain can have a significant impact on a person's quality of life physically, emotionally and socially.

The multi-disciplinary pain management team includes Pain Consultants, GPs, Clinical Psychologists, Psychotherapists, Physiotherapists, Occupational Therapists, Nurses and Pharmacists. The treatment available utilises a holistic approach in line with the recommended bio-psychosocial model and is tailored to the individual needs of each patient. We recognise that this holistic approach is different to the bio-medical model adopted by most hospital pain providers in the Lincolnshire region previously. As a result some patients who have accessed the new CPMS after transitioning from an alternative hospital provider have commented that the service looks and feels very different to what they had been used to. This reflects the newly commissioned service meeting the current evidence recommendations in pain management.

Service Performance

Lincolnshire CCGs closely monitor the performance of the CPMS run by Connect Health in terms of both access and quality. Formal contract review meetings are held monthly. Within these contract review meetings activity reports and key milestones of the mobilisation plan are scrutinised. Meeting minutes and action logs are captured these provide evidence that there is a continual improvement cycle that is responsiveness to feedback from patients, public and Health Care Professionals, this ensures that the service remains fit for purpose and flexible to future changes in healthcare needs of the population.

Rather than relying on traditional performance indicators, that provided limited assurance with regards the effectiveness of the service and particularly outcomes for patients, Connect Health & CCGs are jointly developing outcome measures that will be meaningful to patients. Patients will have the opportunity to shape this work so that this method of contract monitoring will be in place at the start of the new financial year when the mobilisation plan has been completed.

Clinic Availability

One of the key objectives of the new service was to improve access for patients bringing care closer to home. To date, Connect Health have mobilised 14 clinic locations across the County. These community clinic locations have been chosen to ensure good coverage with some locations being mobilised as a direct result of patient feedback / request.



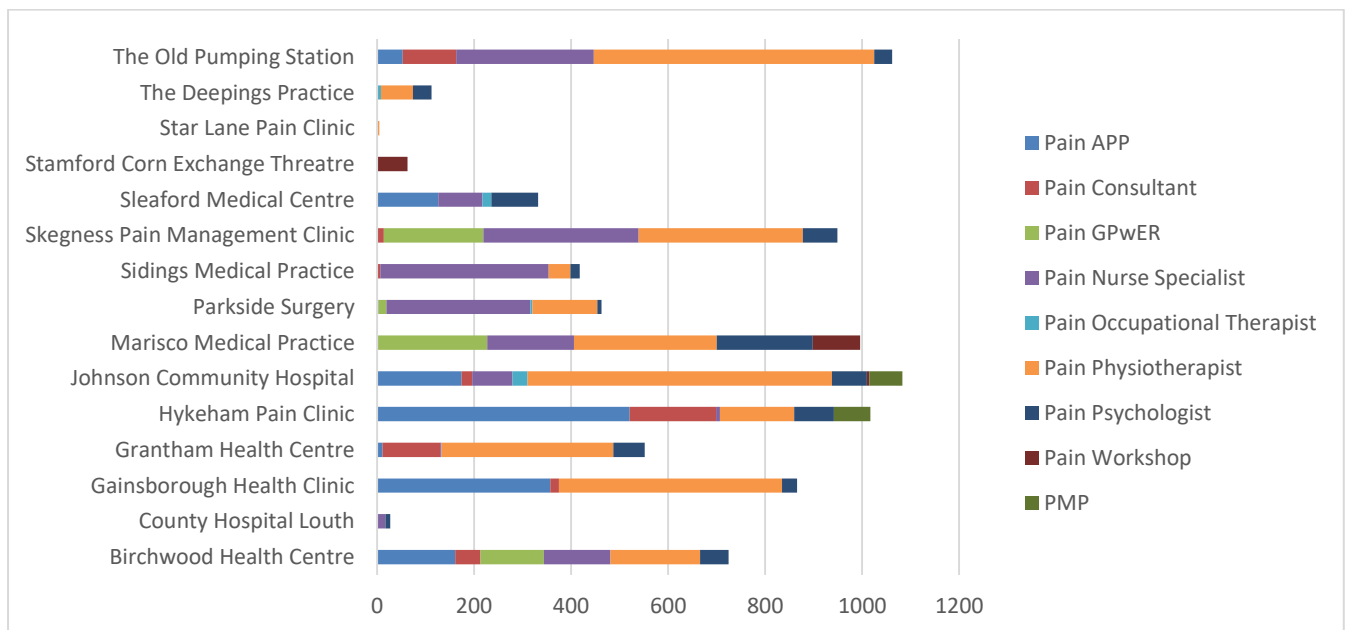
Location Comparison by CCG

	Pre-Connect Health	Connect Health
Lincolnshire West	<ul style="list-style-type: none"> Lincoln County Hospital 	<ul style="list-style-type: none"> Old Pumping Station, Lincoln Birchwood Health Medical Centre Hykeham Pain Clinic BMI Lincoln North Hykeham Health Centre Gainsborough Medical Centre

	Pre-Connect Health	Connect Health
Lincolnshire East	<ul style="list-style-type: none"> • Pilgrim Hospital, Boston • Louth County Hospital • Boston West Hospital 	<ul style="list-style-type: none"> • Parkside Medical Centre, Boston • Marisco Medical Centre • Skegness Pain Clinic • Louth County Hospital • Sidings Medical Centre, Boston
South West Lincolnshire	<ul style="list-style-type: none"> • Grantham Hospital 	<ul style="list-style-type: none"> • Grantham Medical Centre • Sleaford Medical Centre
South Lincolnshire	<ul style="list-style-type: none"> • Stamford Hospital • Spalding Community Hospital 	<ul style="list-style-type: none"> • Deepings Medical Practice • Spalding Community Hospital • Star Lane Clinic, Stamford
Out of Area	<ul style="list-style-type: none"> • Ramsay Health Care, Peterborough • St Hughs Hospital, Grimsby • Goole Hospital • Queen Elizabeth Hospital, King's Lynn 	-

Connect Health are providing timely access to pain management treatment within Lincolnshire. The average waiting time from referral to first appointment offered is 22 working days with 100% of all patients initiating their second phase of treatment within 40 working days.

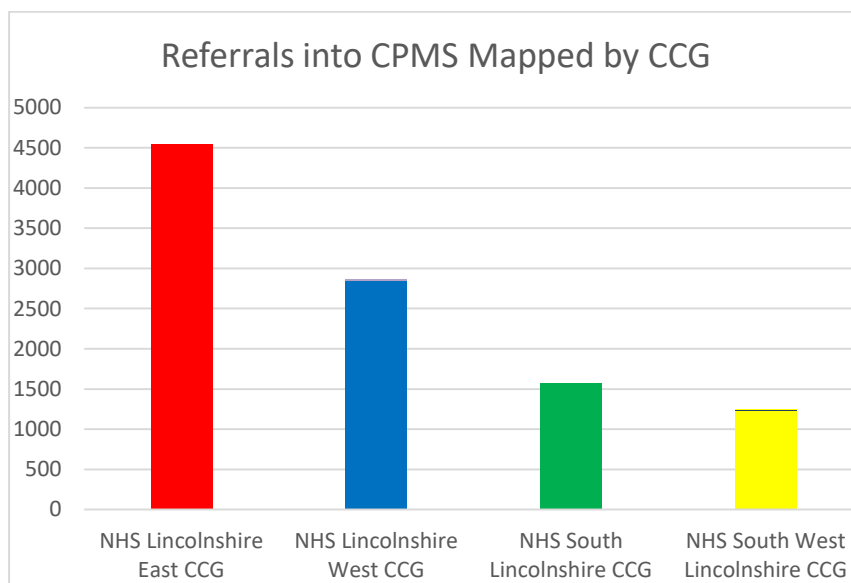
The graph below illustrates the skill mix of multi-disciplinary pain management team clinicians working across Lincolnshire:-



NB. County Hospital Louth and Star Lane Pain Clinic, Stamford are relatively new locations. Clinics started here 31 October and 28 November 2019 respectively.

Demand

In seeking to establish a community based service, Connect Health have mapped referrals into CPMS by CCG. The graph below illustrates that largest proportion of referrals into the CPMS have been from the Lincolnshire East region. Connect Health are currently reviewing their clinic capacity and availability to ensure that this is representative of and in line with the current demand. The team will continue to review referral activity in order to identify any changes in the pattern of referrals that might necessitate future review of clinic capacity.



Waiting Times

The CPMS provides improved access to a range of clinicians who work together to provide access to a range of treatments as recommended by NICE and the British Pain Society. The waiting time for each specialist is closely monitored and capacity reviewed to reflect patient need.

The table below provides details of the current waiting time. This information has been split to show the position for patients who have transitioned into the service and new referrals.

Average wait - Referral to Appointment attended (Weeks)				
Pain Specialist	Backlog	Non-Transition	Transition	Overall Average wait
Pain APP	6	5	13	6
Pain Consultant	15	9	16	12
Pain GPwER	8	5	11	6
Pain Nurse Specialist	6	4	12	6
Pain Occupational Therapist	-	6	5	6
Pain Physiotherapist	7	5	13	6

Average wait - Referral to Appointment attended (Weeks)				
Pain Specialist	Backlog	Non-Transition	Transition	Overall Average wait
Pain PsyConnect Healthologist	0	5	4	3
Pain Workshop	6	7	9	9
Pain Management Program	-	4	21	12
Average waits	7	5	10	7

Access to a full multi-disciplinary team enables Connect Health to ensure that patients are directed to the most appropriate specialist and that capacity within the 14 clinics across Lincolnshire is utilised. The waits for transition patients have been longer than new referrals into the service due to the initial reduced capacity for induction and training alongside the phased process of recruitment. Review of information regarding waiting times has highlighted that for transition patients who were delayed in the time taken from referral for patients to respond to the invite from them to commence treatment within our service.

Currently the longest waiting times, which is causing concern, is for patients who have transitioned to the CPMS who require a Consultant appointment and whilst this is significantly better than previous performance which could have been up to 20 weeks, Connect health are mindful of the fact that for a number of these patients their appointment would have been scheduled as follow and not be aware of the length of waiting. This has caused some patients concern and both Connect Health and the CCG continue to ensure that patients receive a timely response if they contact us with concerns.

Having identified that there has been a higher than expected level of demand for Pain Consultant appointments, particularly from patients transitioning from the previous services additional Pain Consultant capacity has been sought and extra clinics added as a priority. Additionally, Connect Health are working collaboratively with existing sub-contractors to increase Consultant capacity as well as working hard to forge strong positive links with existing hospital pain service providers in neighbouring CCG regions.

The primary purpose of providing patients with Pain Consultant consultations was to assess the patient for suitability of pain interventions e.g. spinal injection. Audits completed by Connect Health indicate that on average 80% of the referrals for review by Pain Consultants by other specialists within the Connect Health multi-disciplinary team have resulted in listing for injection intervention.

The conclusion from this audit is that our pain specialist clinicians are making appropriate referrals and as such Connect Health have introduced a pro-forma that enable clinicians within our MDT to directly list onto the mobile injection unit clinics. This streamlines the pathway for patients, enabling those that are appropriate for injections to have quicker access and fewer appointments. This also enables Consultant assessment appointments to be prioritised for those patients that require a complex review or second opinion and as such will support a reduction in waiting times. The mobile unit location is flexible and will be placed to meet the demand majority vs the current process of the consultant clinics being fixed.

Pain consultants alongside the Connect Health Multi-Disciplinary Team (MDT) provide expertise within panels to review complex patients and plan suitable treatment including completing prior approval forms and individual funding requests.

Consultant Clinic Capacity

Connect Health operate a forward planning approach to ensure that they maximise capacity for Consultant appointments for those that need this. Diaries are scheduled 6-8 weeks in advance. Limiting scheduling within this time frame reduces cancellations and allows us to align demand to capacity and location where possible. Over the next 6 weeks Connect Health has 30 clinic sessions (am/pm) scheduled for 4 Pain Consultants across 5 locations in Lincolnshire (Grantham, Hykeham, Lincoln, Birchwood, Spalding). Analysis identifies there is a variation in demand on Consultant appointments between transition patients (13%) and new referrals (5%), based on this, it is anticipated that demand on Consultant appointments will reduce and waiting times will reduce further.

Pain Management Programme (PMP)

The British Pain Society guidelines and NICE guidelines identify PMPs are the treatment of choice for people with persistent pain which adversely affects quality of life and where there is significant impact on physical, psychological and social function.

PMPs consist of methods to promote behaviour change and promote well-being. They include education on pain physiology, pain psychology, general health and pain self-management. PMPs also contain guided practice on exercise and activity management, goal setting, identifying and changing unhelpful beliefs and ways of thinking, relaxation and changing habits which contribute to disability. Participants practice these skills in their home and other environments to become expert in their application and in integrating them into their daily routines. Methods to enhance acceptance, mindfulness and psychological flexibility are also recommended.

PMPs have commenced within the PMP service at locations including Hykeham Pain clinic, Spalding Community Hospital and Parkside Medical Centre with excellent results. Further programmes are scheduled including new locations at Grantham and Marisco Medical Centre in Mablethorpe.

Quality Assurance

Connect Health submit a quarterly Quality Report to the CCG. The Service Manager meets with the CCG Quality Team to discuss this submission in detail and a summary presentation of the key elements within the report are shared on a quarterly basis at the contract review meeting.

As part of our Governance and Quality Assurance Framework Connect Health have robust mechanisms for managing mandatory training, an audit plan that includes triage quality, notes audit and injection audit and a training program and supervision framework to support the development of staff.

Treatment Outcomes

The infographic demonstrates recent patient outcomes from a completed Pain Management Programme. This summarises the patient experience and improvement across the outcome measures that we utilise to demonstrate the effect of this programme on depression, anxiety and self-efficacy which Connect Health are all strongly related to persistent pain.

The CPMS also demonstrated a 0.32 +ve shift score in EQ5D (a nationally recognised Patient reported outcome measure – that enables patients to feedback on whether the interventions provided positive benefit) in Oct 2019. National benchmarking for this outcome measure within Musculoskeletal services is 0.16 so this data is highly encouraging and demonstrates that the service is having a significant positive impact on Patients' lives.



Pain Interventions / Injections

Shared decision making and personalised care are integral to the function of the service. Following a comprehensive assessment by a Pain Specialist Clinician, treatment options

are considered and discussed collaboratively with the patient in line with CCG policy and national guidance/best evidenced care. Pain interventions such as injections are offered as part of a package of care when this is clinically indicated and aligns to the evidence and best practice that this will to facilitate self-management and rehabilitation.

In line with NICE NG59 low back pain and sciatica in over 16s: assessment and management, lumbar facet joint injections and lumbar trigger point injections are considered procedures of low clinical value (PLCV) and are not routinely commissioned by the CCG. Access to PLCV treatments are subject to an individual funding request or prior approval from the CCG which health will only be approved in cases where clinical exceptionalism is demonstrated. These procedures were regularly provided within pain services prior to the launch of the Lincolnshire Community Pain Management Service provided by Connect Health in 1 April 2019; this was not because they were clinically indicated but rather that providers did not adhere to the PLCV Policy, July 2018.

Connect Health and the CCG acknowledge that the adherence to national best practice has met that colleagues both within Connect Health and the CCG have had to explain this to patients who have been understandably concerned and confused about the changes to their treatment plan. For patients who have been referred as new referrals into the CPMS service no concerns have been raised as they had no prior experience or expectations with regards the treatment they would receive.

Connect Health are working in collaboration with two partner organisations to deliver the injection pathway; In-Health Pain Management (mobile injection facility) and BMI Lincoln (static hospital site). To date, the mobile injection facility has been sited at the following locations:-

- North Hykeham Health Centre, Lincoln
- Louth County Hospital
- Johnson Community Hospital, Spalding

Additional site locations across other parts of the county will be utilised in future as per demand.

Prior Approval / Individual Funding Requests

Since the launch of the Lincolnshire CPMS, Connect Health have submitted individual funding requests (IFRs) to the CCG for Patients who connect health consider that there is clinical justification to proceed with a procedure of low clinical value. One out of approximately 20 IFRs submitted by Connect Health has been approved and all other applications were declined. The CCG and Connect Health are working together to determine whether there is evidence that some patients may benefit from a fixed number of treatments to support the individual adjusting to the new treatment plan. These discussions are ongoing.

Medicine Management

Connect Health are working with the CCG's Medicines Management Optimisation Service and local prescribing forums to help address the issues in Lincolnshire in relation to high prescribing of pain management medications, particularly, Opioid based medication.

Referral Management Centre

One of the primary areas of concern raised by patients with regards the new service was with regards the Referral Management process, Connect Health have considered this feedback and made significant organisational changes that will provide improved services both for patients in Lincolnshire and in other areas of the country. The following provides feedback with regards the actions taken by Connect Health and is an extract from a letter received from the executive team within Connect Health to commissioners.

“During 2019 our Referral Management Centre faced some significant challenges. The impact of these challenges affected performance and resulted in incidents in Lincolnshire such as patients being offered appointments at the opposite side of the County and particular anxiety for transition patients who were at times mis-informed regarding the availability of Pain Consultant appointments.

These challenges were multi factorial, but in implementing several positive changes, Connect Health used some of its front-line resources to help design and deliver four future proofing projects which at times impacted on their ability to sustain and deliver the normal levels of performance. Furthermore, considering the expected improvements in efficiency and effectiveness resulting from the future proofing projects, Connect Health reduced the rate of back-filling leavers with a view to avoiding any risk of redundancy for colleagues. With the benefit of hindsight, this was not an effective strategy and put too much pressure on the function. Connect Health have since utilised temporary staff and employed more permanent staff in the RMC to bring performance closer to where it needs to be, but the impact of the gap in provision was significant and continues to be felt (although constantly improving).

However, Connect Health have continued to invest in their Transforming Care Coordination programme, which has allowed them to strengthen the operational team, streamline processes and create a better experience for patients. The four main projects within this programme are:

- System Standardisation
- Mitel System Integration
- Intelligent Robotic Automation
- Training and development

System Standardisation: Connect Health currently use two patient administration systems: EMIS Web; and SystmOne (S1). This project will standardise their use to one system (S1), whilst concurrently optimising their suite of clinical and administrative templates across services. This project has started and is due to end by the end of NHS Q4 2019/20. The purpose of standardisation is to improve the experience for colleagues & patients. Connect Health clinical & admin colleagues will benefit by having smarter templates, auto-populating letters & effective electronic-workflows that make care coordination vastly more efficient and safer.

Connect Health intention is to make it easier for colleagues to do the right thing, which will result in fewer errors, reduced risk of patient safety incidents, improved efficiencies to reduce administrative burden, and a system fit for purpose for the service delivery model – now and in the future.

Mitel System Integration: The Mitel telephony system has been upgraded to the latest version, with a fully managed support provision from Aspire, which allows Connect Health to configure the platform to be highly available and resilient, so outages are uncommon and avoidable.

The call queuing / waiting functionality will improve significantly following clear feedback from those contacting us of a need to do this. It will provide patients and healthcare professionals contacting Connect Health with clearer indications of the position of their call with a view to improving their initial contact experience. Connect Health will also be able to route calls more effectively, based on relevant skills within the team, and manage patients and healthcare professionals through the telephony system in a much more managed way.

The functionality within the system will allow improvements to observation and listening to calls, which Connect Health will use, to give feedback, coach and develop team members.

Intelligent Robotic Automation: In order to sustain performance, meet demand and continue to provide excellent patient care, Connect Health is working with the Thoughtonomy platform to enable certain high volume, low value, repetitive tasks to be automated and carried out by “virtual workers”. This results in streamlined processes which free up time for colleagues to focus on the patient, rather than on administrative tasks.

Thoughtonomy’s Intelligent Automation platform provides a foundation to further improve the efficiency of processes in order to deliver first class patient outcomes

The first phase of Connect Health’s ground-breaking Intelligent Automation programme is the integration of “virtual workers” into some Referral Management Centre processes, namely the registration of patients onto clinical systems. Receiving over 1000 patient referrals each day, Connect Health aim to register patients within 48 hours, so cutting this time will significantly speed up patient access to care. This in turn will create capacity, allowing colleagues to grow and develop their individual skills to make a real difference to the patient journey through enhance care coordination and a focus on value-add responsibilities.

The award winning Thoughtonomy platform was chosen since it gives organisations access to a pool of cloud-based intelligent digital workers that can perform the repetitive, time-intensive tasks that slow people down. A leader with more than 200 customers using its platform in 29 countries spread across four continents and beginning to get wider traction in the NHS to.

<https://www.business-live.co.uk/technology/connect-health-brings-virtual-workers-16967934>

Training and Development

In order to ensure Connect Health Patient Care Advisors are delivering the best care to patients they are strengthening their induction journey. This will ensure all colleagues have the right balance of system, soft skills and contract specific training to ensure they are capable and confident when they leave training.

Colleagues will then progress through a career pathway where they are able to build their skills and capability and be measured as competent before being trained on the next part of

their role, ensuring colleagues are trained to the highest of standards and they become experts in what they do.

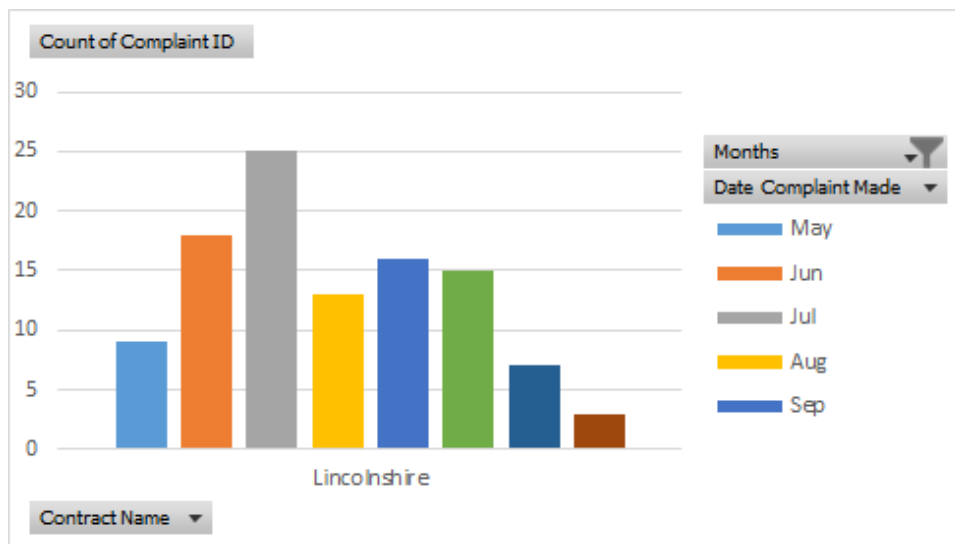
Connect Health is also undergoing a learning and development programme for their management team within the RMC. This has so far included a strong focus on managing staff performance including conduct, capability and absence.

The four projects highlighted above are essential to Connect Health’s longer-term sustainability as a provider of NHS services and demonstrates our commitment to continue our investment in class-leading tools and infrastructure that will ultimately lead to significant improvements in the experience of our service users and stakeholders.

This provides visibility of the expected improvement in performance of our RMC which will in turn improve the experience / journey for all of our patients.

Learning from Complaints

Connect Health have demonstrated that they have an open and transparent reporting and investigation culture and provide regular updates to the CCG with regards to complaint themes and actions taken to prevent a recurrence. 107 formal complaints have been received by Connect Health in relation to the CPMS which accounts for approximately 2% of patient’s accessing the service. The number of complaints received by month peaked in July (when an additional 1500 patients were identified by a previous provider) and the rate of complaints is decreasing. The main theme from recent complaints have been with regards the expectations of patients transitioning to the CPMS and have been with regards to the provision of repeated PLCV injections.



Reflecting on Transition Projects

Both Connect Health and the CCGs have reflected on the project to repatriate Patients care from hospital pain services to the Lincolnshire Community Pain Management Service. Since March 2019, approximately 6000 patient records were transferred to Connect Health.

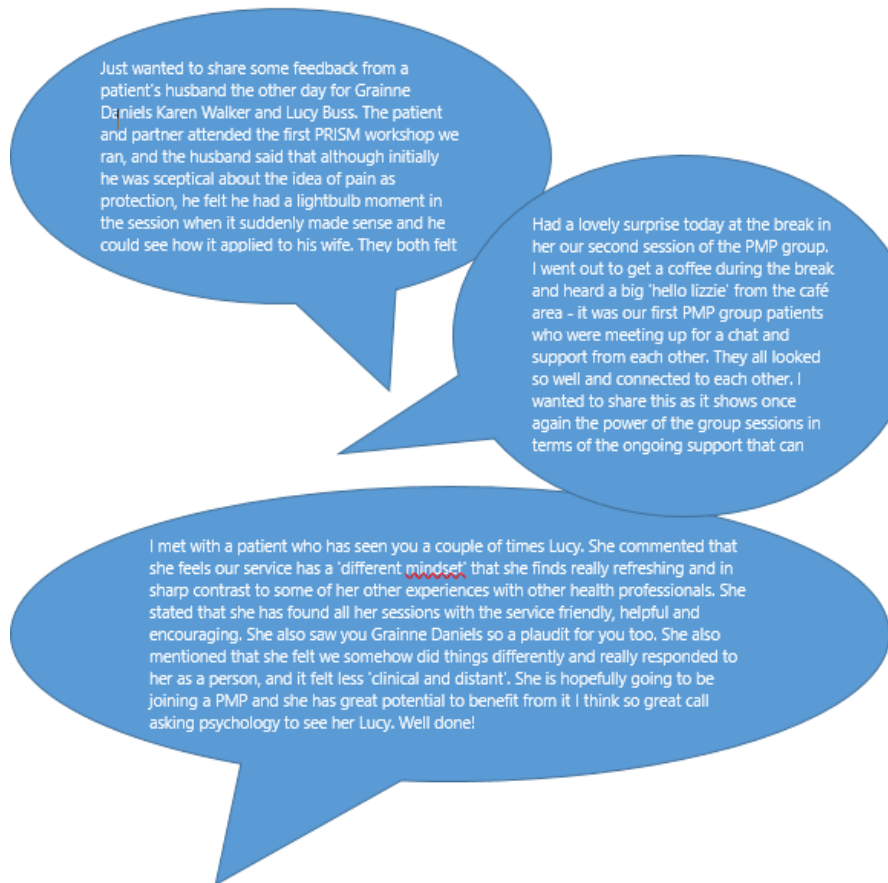
Connect Health have demonstrated that they are committed to being a learning organisation, they recognise that this was a complex and challenging project and acknowledge that with hindsight, some improvements could have been made to the project design.

While the CCG and Connect consider that patients were adequately informed and consulted in relation to the change in pain management provider, we all appreciate that the service specification and model of the revised CPMS is very different to the biomedical model that was previously available. Consequently, both parties have noted some key learning points:

- Public engagement events to introduce the new clinical ethos may have helped better prepare patients for the changes
 - Information for transition patients could have been made available on both Connect Health and CCG websites
 - The Commissioning Statement and Frequently Asked Questions document that were created could have been published and shared more widely
- Additional consultation and consideration could have been given to the level of support available for the cohort of patients who were previously receiving a procedure of low clinical value
- A phased approach to the transition of care may have helped manage demand and clinic capacity

Compliments

Our patients tell us:-



Friends and Family Feedback – Oct- Dec 2019

- Impressed with the support staff getting the appointment and the Consultant was great had all my records and was caring and told me exactly what next step would be. Keep up the good work.
- Very professional and friendly service, I was given immediate treatment as well as aftercare and ongoing pain management support.
- I felt my therapist is one of the most competent professional and caring people I've ever met. She is thorough and shows a kind of empathy towards patients that some lack. While I hope my pain gets better at some stage, I am not in a hurry to lose her as my support worker
- Very helpful and friendly and professional lady who I saw. She took her time to listen and understand and was genuinely interested in helping. I am very grateful indeed.
- The clinician listened carefully to what my problem was then explained clearly the cause of problem and how to improve my condition. Very helpful, and by following their directions my condition has improved.
- Very helpful and good alternative to manage pain independently
- Have found the help very professional and have helped me Immensely have hope for the future now
- Although I only had 3 appointments I found them to sympathetic helpful and conducted in a professional manner

Patient and Public Engagement

Connect Health have attended multiple patient and public participation groups, prescribing forums, Local Medical Council and GP forums to promote the service and answer questions. Connect Health have actively engaged with Lincolnshire Healthwatch, PALS, Optum, Social Prescribing

providers, Community Rehabilitation Teams and Addaction. An updated service information leaflet and a Summer edition of a Newsletter have been released.

Lincolnshire Community Pain Management Service website <http://lincs.connecthealth.co.uk/>
Video update on the Lincolnshire Community Pain Management Service <https://www.powtoon.com/c/doYy8NGIBRn/1/m>

Additionally, Connect Health have launched a series of public engagement events called 'Pain: Do you Get it?' which is linked to the Pain Revolution Australia movement led by Professor Lorrimer Moseley. To date, there have been two public engagement events 9/9/2019 in Boston and 9/12/19 in Grantham which have been well received. These events aim to improve public understanding and awareness of current research evidence and best practice in relation to pain neuroscience and managing persistent pain conditions.

Highlight video <https://www.youtube.com/watch?v=PrIAZwcTJc4>
Connect Health You Tube channel <https://www.youtube.com/channel/UCJxTRmBrEksa2G7E1jwJ9FA/videos>

Staff Development

- X2 Nurses undertaking the Independent Non-Medical Prescribing course
- X2 Physiotherapists undertaking the Independent Non-Medical Prescribing course
- Second Pain Accelerated Development Programme to start April 2020
- Connect Health staff invited to teach on the MSc Physiotherapy course at Lincoln University and support student placements

Future Developments

- Virtual consultations for hard to reach / socially isolated patient groups
- Virtual pain management programme
- PRISM group sessions – an information giving session on practical self-coping strategies
- Opioid reduction clinics / pain management programme

2. Consultation

This is not a consultation item.

3. Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy

The new CPMS will support and address a number of issues identified by the Joint Strategic Needs Assessment and/or the objectives of the Lincolnshire Joint Health & Wellbeing Strategy and issues highlighted in the Director of Public Health Annual Report discussed at the December meeting.

- Musculoskeletal (MSK) Conditions: Many patients suffering from an MSK condition will end up with a Connect chronic/Persistent pain diagnosis. The BPS and NICE recommend a Biopsychosocial model of care for the long term management of chronic/persistent pain. The CPMS has been commissioned to deliver this "Best Practice" model of care
- Obesity – is a key factor in MSK conditions and therefore pain – advise on life style choices.

- Physical Activity – is a key factor in MSK conditions and therefore pain – physical activity is a key component in supporting patients to manage their chronic/persistent pain.
- Anxiety & Depression – is often a consequence of a patient’s long term condition, the Biopsychosocial model of care places an equal emphasis on an holistic approach to a patients care.
- Self-Care & Self-Management: Health and social care need to transition from a passive service (patients / clients expect services to do everything for them) to a proactive service (patients / clients are encouraged to take control of their own health / circumstances and are supported by providers as their needs arise)

4. Conclusion

Connect Health have and are working extremely hard to mobilise a complex multi-faceted service based on “Best Practice” as recognised by the British Pain Society and NICE.

The evidence received by CCGs demonstrates that they are listening to patients and have embarked upon a significant programme of change for its Referral Management Service to address many of the issues. Connect Health should be given the opportunity to complete the service transformation and report back on its outcomes and how that has supported the patient pathway.

CCGs have commissioned a service which complies with NICE and Best Practice guidance for the treatment of chronic and persistent pain. This is the correct model of care for patients living in Lincolnshire who require pain management support.

The mobilisation of the new service has been challenging and has not provided a positive experience for some patients. The CCG and Connect health continue to work with together to address issues highlighted by patients who have transitioned from previous services.

The CCG has identified that planning and management of the model of delivery requiring additional support to be available for patients who will be receiving a service, that whilst being best practice, is not consistent with the treatment plan they were previously receiving.

The CCG and Connect Health continue to work together to ensure that all actions are completed and that new issues for patients transitioning are addressed. Going forward the CCG and Connect Health will continue to drive improvement in service provision by using data and patient feedback to support continuous improvement and inform any new developments.

5. Appendices

These are listed below and attached at the back of the report	
	None attached

6. Background Papers:

The following background papers were used in the preparation of this report:

- Health Scrutiny Committee – Community Pain Management Service – Oct 2019

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