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National Pain Strategy

DRAFT Review - MAY 2014

Pain Management for all Australians



DRAFT

Review of Progress with National Pain Strategy

Introduction

Thank you to all organisations that have contributed to Painaustralia's survey of progress with the National Pain Strategy. The following draft report collates the information received from 45 health care providers and consumer organisations and 19 Medicare Locals who are implementing programs that align with goals of the Strategy. We are aware other organisations have not at this stage reported on activities they are undertaking. Where possible, we have included reference to this work. However, the report will remain in draft form until such time as we manage to collect all relevant input.

The final report will require judicious and informed editing, however additional capacity will be needed for us to complete that process. In the meantime, we believe this is an important step in trying to scope the range of activities underway and helping to facilitate greater consistency and collaboration.

As the next step in the review, we invite comment and any additional input from you. The draft report will be available on the Painaustralia website until 30 June 2014. We will provide further information about the ongoing review process prior to that date.

Goals of the National Pain Strategy

The Goals of the National Pain Strategy are:

1. People in pain as a national health priority
2. Knowledgeable, empowered & supported consumers
3. Skilled professionals & best-practice evidence-based care
4. Access to interdisciplinary care at all levels
5. Quality improvement & evaluation
6. Research

Participating Organisations

National

Lead Funding Organisations:

Australian Pain Society (Dr Tim Semple)

The Faculty of Pain Medicine (FPM) of the Australian and New Zealand College of Anaesthetists (ANZCA) Dr Lindy Roberts, President ANZCA and Associate Professor Brendan Moore, Dean FPM (ANZCA)

Pain Management Research Institute (PMRI), University of Sydney (Dr Elizabeth Devonshire)

Federal Government Organisations:

Australian Medicare Local Alliance (Carol Vickers, Senior Project Officer - Pain Management & APCC program, and Jane Bacot-Kilpatrick, National Programs Manager)

Medical Benefits Division, Department of Health

Pharmaceutical Benefits Advisory Committee

Therapeutic Goods Authority

National Health Care and Academic Organisations:

The Royal Australasian College of Physicians (Claire Celia, Senior Policy Officer)

Royal Australian College of General Practitioners (Matthew Rush, Manager)

Australian Acupuncture & Chinese Medicine Association Ltd (Dr Zhen Zeng, Director)

Australian and New Zealand Society of Nephrology (ANZSN) (Dr Frank Brennan, Palliative Care Physician, Department of Renal Medicine, St George Sydney)

Australian College of Nurse Practitioners (Amal Helou, Secretary)

Australian College of Nursing (Leonie Pike)

Australian Health Services Research Institute (AHSRI) (Dr Hilarie Tardif, Manager - ePPOC)

Australian Pain Management Association Inc. (APMA) (Elizabeth Carrigan, CEO)

Chronic Pain Australia (Dr Mandy Nielsen, Vice President)

Australian Physiotherapy Association (Cris Massis, CEO)

Australian Feldenkrais Guild (Lisa Campbell, Pain Project Officer)

Australian Psychological Society (Dr Louise Roufeil, Executive Manager, Professional Practice - Policy)

Australian RSD/CRPS Support Group

Australian Society of Teachers of the Alexander Technique (Bronwyn Munro)

Fibromyalgia SA

Institute for Urban Indigenous Health (Emma Campbell, Jenny Krause and Tabinda Basit)

Mental Health Professionals Network (Lauren Tyrrell, Senior Project Officer)

National Rural Health alliance

Palliative Care Australia (Dr Yvonne Luxford, CEO)

Pelvic Pain Foundation of Australia (Dr Susan Evans, Board Member)

Medtronic Australasia Pty Ltd (Deb Davis, Senior Business Director)

Mundipharma Australia (Tathra Chai, external Affairs Manager)
Pfizer Australia

New South Wales

NSW Agency for Clinical Innovation (Jenni Johnson, Network Manager Pain)
Central Coast Medicare Local
Dubbo Hospital (Stuart Leckie, CNS Pain Management)
HammondCare (Philip Siddall, Director, Greenwich Hospital Pain Management Service)
Hunter Pain Clinic (Kay Gray, Practice Manager)
Innervate Pain Management (Dr Mike Shelley, Service Director)
John Hunter Children's Hospital, Children's Complex Pain Service (Dr Susie Lord, Senior Staff Specialist, Pain Medicine)
Hunter Medicare Local
Illawarra-Shoalhaven Medicare Local
Ma Ma Aboriginal Health Service, Broken Hill (Outback Pharmacies, Alex Page, Manager)
Macquarie University
Northern Sydney Medicare Local
Southern NSW Medicare Local
The Pain Clinic, Gosford Hospital (Elizabeth Harvey, Occupational Therapist)
Western NSW Medicare Local

Victoria

Arthritis and Osteoporosis Victoria (Andrew Briggs, Research, Knowledge and Policy)
Australian Life Options (Maggie Safron, Psychologist)
Ballarat Health Services
Barwon Health (Diarmuid McCoy, Clinical director)
Barbara Walker Centre for Pain Management, St Vincent's Hospital (Dr Jane Trinca, Director)
Eastern Melbourne Medicare Local
Empower Rehab (Nick Economos, Physiotherapist)
HDSG WorkSafe Victoria and the TAC (Anne Daly, Physiotherapy and Pain Management Consultant)
Kikqua Therapy (Wanda Cook and Associates)
Lower Murray Medicare Local
Monash Health (Barbara Workman, Medical Director of Rehabilitation and Aged Services Project/s)
Origin of Image (Soula Mantalvanos, Advocate for Chronic Pelvic Pain)
South East Melbourne Medicare Local (Jose Peregrina, Program Officer)

Australian Capital Territory

ACT Medicare Local (Paula Sharp, Manager)

Pain Support ACT, the ACT branch of APMA (Margaret McCulloch, Convenor)

Queensland

Darling Downs – South West QLD Medicare Local

Gold Coast Medicare Local (Joyce McSwan, Gold Coast Medicare Local Persistent Pain Project Manager)

St Vincent's Private Hospital Brisbane (Megan Hannah, Pain Services Manager)

The Townsville Hospital (Dr Matthew Bryant, Director, NQPPMS)

Wesley Pain and Spine Centre (Dr Leigh Atkinson, Medical Director)

Western Australia

Fremantle Hospital & Health Service and State Wide Pain Services (Adjunct Associate Professor Stephanie Davies, Pain Physician)

Arthritis and Osteoporosis WA (John Quintner, Project Officer, Pain Education)

Bentley-Armadale Medicare Local

Curtin University (Associate Professor Helen Slater, Senior Lecturer)

Fremantle Medicare Local (Hebe Thomas, Health Interventions Coordinator)

Goldfields Midwest Medicare Local

Perth South Coastal Medicare Local

Perth North Metro Medicare Local (Terina Grace, CEO)

Princess Margaret Hospital (PMH) (Anna Hilyard, Senior Project Officer - Complex Pain Service Development)

South West WA Medicare Local (Jennifer Richards, Clinical Support Coordinator)

South Australia

AMA (SA)

Country North SA Medicare Local (Jane Baulderstone)

Health in Our Hands

Southern Adelaide-Fleurieu-Kangaroo Island Medicare Local

Tasmania

COTA Tasmania (Sue Leitch, CEO)

Tasmania Medicare Local

Summary of Pain Initiatives that Address the Goals of the National Pain Strategy

LEAD FUNDING BODIES:

<u>Australian Pain Society</u>	Goals
<ul style="list-style-type: none">• Scientific conference held annually - the only conference in Australia offering multidisciplinary insights into the complex nature of pain management from a variety of medical, nursing and allied health perspectives including supporting Consumer Day with international speakers and logistic support. In 2013 (Canberra) and 2014 (Hobart) this supported the Living Well With Pain Consumer Conference and Symposium, held by Painaustralia in collaboration with local consumer groups• Members provide education, training and mentoring for GP's and multidisciplinary primary care professionals• Pain in Residential Aged Care Facilities (2005) regarded as definitive document by Federal Department of Health. The APS is committed to updating this valuable resource by 2015• Waiting in Pain: a systematic investigation into the provision of persistent pain services in Australia, published in the Medical Journal of Australia, 02 April 2012, Volume 196, No 6• Major contributor to the National Pain Strategy, ratified at the Pain Summit held at Parliament House, March 2010• Category A member and financial supporter of Painaustralia, the organisation driving with the support and implementation of the National Pain Strategy by Federal and State governments• APS members are active contributors to all state pain programs including:<ul style="list-style-type: none">- Agency for Clinical Innovation and Pain Management Plan in NSW- Statewide Persistent Pain Health Services Strategy 2010 in QLD- Health Networks in WA- ePPOC – electronic Persistent Pain Outcomes Collaboration• Assistance with and contribution to Australian Medicare Local Alliance (AMLA) pain education seminars• Development, update and promulgation of Position Statements on Pain Management including:<ul style="list-style-type: none">- Pain Management Programs- Spinal Interventions- Neuropathic Pain- Psychology and Pain Management• Supporter and sponsor of the Australian Pain Relief Association (APRA) PhD Scholarships program, a flagship training initiative since 1995• Well established Travel Grant program to financially assist young researchers, students, nurses and allied health professionals to attend and present their posters/free papers at our highly regarded Annual Scientific Meetings• Supporter of Pain Management training and services in rural and remote regions of Australia and developing resources for furthering understanding of pain in indigenous Australians• Supporter of pain management education in developing countries in our region, e.g. APS Prize for ASEAPS (Association of South East Asian Pain Societies) delegate to attend APS Scientific Meeting• Promoter and supporter of pain management across our peer organisations, including:<ul style="list-style-type: none">- Australian Physiotherapy Association- Occupational Therapy Australia	1, 2, 3, 4, 5, 6

- Royal Australian College of General Practitioners
- Australian College of Nurse Practitioners and other nursing groups such as PIG-NI (Pain Interest Group-Nursing Issues)
- Australian Psychological Society
- Faculty of Pain Medicine
- The Relationships and Communications committee has been created to engage with these organisations as well as other bodies including AMA and ARA
- Formation of Pain in Childhood Special Interest Group in 2011
- National Facility Directory a publicly available listing of multidisciplinary pain management clinics
- Constantly improving methods of communication with members, consumers and general public via updated electronic newsletter, website and digital media strategy including:
 - Twitter, Facebook, YouTube, LinkedIn , APS Blog
- The APS has worked closely with Painaustralia since its formation to further the goals of the National Pain Strategy and is committed to gaining endorsement for this across all levels of health in Australia. The APS acts to facilitate membership activity associated with the National Pain Strategy
- The APS continues to function as the only professional body to represent all health professionals involved in multidisciplinary pain management and related research in Australia and continues to expand its capacity to meet their needs

[The Faculty of Pain Medicine \(FPM\) of the Australian and New Zealand College of Anaesthetists \(ANZCA\)](#)

Goals

- Works to reduce burden of pain in society through education, advocacy, training and research 1, 2,
- Training and ongoing education of anaesthetists in their primary specialty, of specialist pain medicine physicians in their post-Fellowship vocation, and of other health professionals to improve understanding of the multifaceted nature of pain 3, 4,
- Advocating for a better informed understanding of pain in the health sector and wider community 5, 6
- Category A member of Painaustralia with a seat on the Board
- Developed an Online Pain Management Education Program in conjunction with the Royal Australian College of General Practitioners and funded by Bupa Health Foundation, providing online pain education to General Practitioners
- The Anaesthesia Curriculum (ANZCA, revised in 2013) incorporates pain medicine as one of seven Clinical Fundamentals with specific learning outcomes, volume of practice requirements and assessments on managing patients with pain, particularly acute pain syndromes but also those with chronic pain problems who require management in the perioperative period
- The Pain Medicine curriculum (FPM) and training program currently under major revision, with a view to implementation in 2015. This is the most comprehensive articulation of the clinical discipline of Pain Medicine
- Built advocacy and access into five-year Faculty Strategic Plan (2013-2017) including three objectives:
 - Promote and support a unified understanding of pain in the health sector and wider community
 - Engage with and influence key stakeholders and decision makers
 - Improve access to pain medicine services
- Acute Pain Management: Scientific Evidence (3rd edition) 2010 freely available for download from ANZCA and FPM Websites and 4th edition to be published in 2015
- Commenced work on the 4th edition of "Acute Pain Management – Scientific Evidence" – a publication that has received worldwide acclaim

- Maintained a dialogue with the Pharmaceutical Benefits Advisory Committee from regarding regulations surrounding opioid prescribing
- Participates in wider discussions to improve return to work rates for people experiencing pain, including a formal submission to the Workcover WA review of the Workers' Compensation and Injury Management Act 1981
- Community survey to ascertain better understanding of the community's knowledge regarding anaesthesia and pain medicine
- Promoted National Anaesthesia Day to improve understanding within the community including promotional materials, patient information and clinicians answering questions in hospitals
- TV, radio and print interviews across the country
- Updated patient information sheets, professional and educational documents available from the ANZCA website and through the resources page on the FPM website
- Consumer representatives on a number of College committees as outlined under the ANZCA Community Representation Policy
- Undergraduate prize in Pain Medicine in collaboration with Australian and New Zealand universities
- Faculty Fellows involved in a wide range of publications including the recent release of the National Pharmaceutical Drug Misuse Framework for Action which makes recommendations to improve the regulatory environment for health practitioners who are faced with patients managing Pain
- Two major annual events – the Pain Refresher Course Day as part of the ANZCA Annual Scientific Meeting and the Annual FPM Spring Meetings
- Advocating strongly for the appropriate management and funding of acute pain in hospitals, including relevant hospital conditions to receive College accreditation for anaesthesia training including compliance with ANZCA and FPM professional documents
- Individual pain units involved in many different approaches to establish interdisciplinary links within local health services and developing context specific approaches to service provision
- Proactive in developing quality use of medicines (QUM) for opioids, including collaboration with the National Prescribing Service
- Actively pursuing implementation of the electronic recording and reporting of controlled drugs (ERRCD) and had formal correspondence with all Australian national and state Chief Pharmacists in 2013
- Electronic Persistent Pain Outcome Collaboration (ePOCC) rolled out with partner organisations in 2013 and involves collection of standard data and assessment tools by specialist pain services across Australia and New Zealand to measure patient outcomes. Additional pain services being registered in 2014
- In 2014 the ANZCA Anaesthesia and Pain Medicine Foundation supported \$1.2 million dollars worth of research grants in anaesthesia and pain medicine, information on all grants awarded is available from the Foundation web page

PS 38 Statement Relating to the Relief of Pain and Suffering and End of Life Decisions

PS41 Guidelines on Acute Pain Management

PS45 Statement on Patients' Rights to Pain Management and Associated Responsibilities

Pain Management Research Institute (PMRI), University of Sydney

Goals

- Postgraduate studies in pain management: Graduate Certificate, Graduate Diploma, and Masters Degree 1, 3, 6
- Delivery of webinar training and face to face symposia in metro and regional areas through Medicare Locals with funding from the Department of Health
- Train the trainer webinars for Motor Accident Authority
- 2 day pain management workshops

- 2 week short course
- 1 day symposia
- Conducting and Early intervention trial for injured health workers (funded by the Health Department)
- PMRI has been nominated as lead centre in NSW for Pain education and Research with an allocation of fund for this as part of the NSW State-wide Pain Plan

FEDERAL GOVERNMENT ORGANISATIONS:

<u>Australian Medicare Local Alliance</u>	<u>Goals</u>
<ul style="list-style-type: none"> • AML Alliance is an important ally in developing access to pain management services at the crucial primary care and community levels • Pain Project Manager Carol Vickers is coordinating a national pain education and training program in collaboration with Painaustralia, the Faculty of Pain Medicine (ANZCA), the Pain Management Research Institute University of Sydney with support from the Australian Pain Society and the RACGP Pain Special Interest Group • Some individual Medicare Locals have established services while others are taking steps to do so. Please see entries from individual Medicare Locals in the various state sections • Conceptual framework for ML collaboration: A six step structure that provides a practical guide to MLs who wish to engage in collaborative initiatives with different healthcare organisations, such as local hospital networks, and the community care of the Aboriginal and Torres Strait Islander sector. There are examples of tools and techniques to help answer key questions • AML Alliance is also leading a national program ‘Advancing Nurses in Primary Care’ to develop Nurse Clinics, able to provide early intervention and education, referring patients as required. Country North South Australia ML which has a broad constituency including an indigenous community, has a primary focus on pain management and Grampians ML will focus on musculoskeletal pain • Following a presentation at the first National Primary Health Care Conference conducted by AML alliance in 2012, Painaustralia facilitated the establishment of a Pain network which now has 36 Medicare Locals enrolled • <i>Pain Heroes</i> – a chronic pain management program for Aboriginal and Torres Strait Islander People initiated by the Institute for Urban Indigenous Health, and other programs for Indigenous health workers are in development • In collaboration with Painaustralia conducted the first Pain Prevention and Management Roundtable in Melbourne (April 2013), which brought together more than 70 representatives from Medicare Locals and other stakeholders in a watershed event. The aim was to share information in order to help one another develop best practice approaches to pain prevention and management in the primary care setting. A second workshop was held in Adelaide (December 2013) which focused on the tools, education, training and support available for Medicare Locals, to help develop best practice pain services • Painaustralia’s partnership with the Australian Medicare Local Alliance is supporting development of primary care pain services through facilitation of education, training and mentoring of health professionals, with funding from DOH • More than 30 Medicare Locals have identified pain as an area of need in their communities, with the majority taking steps to develop workforce capacity and to provide services. A major barrier to this in most areas is lack of appropriately trained primary care professionals and restrictive funding options under Medicare 	3, 4

Major projects include:

- STEPS (Self-Training Educative Pain Sessions) is now operating in four Medicare Locals in Western Australia, with training and mentoring from Fremantle Pain Medicine Unit

and Curtin University

- The ACI pain network is helping to establish links between tertiary pain services and all Medicare Locals in NSW
- A grant from Hunter Medicare Local enabled the development of the Brief Early Intervention Program developed and run by Innervate Pain Management
- Gold Coast Medicare Local is running a persistent pain education pilot project – Turning Pain into Gain
- Development of Nurse Clinics: Trials underway with a pain management focus in Country North SA Medicare Local and Grampians Medicare Local, which has a focus on Musculoskeletal pain

Education and Training for Primary Care:

- Face-to-face education and webinar-based training is being delivered for Medicare Locals by the Pain Management Research Institute, University of Sydney (PMRI) facilitated by the AML Alliance and Painaustralia (funding from DOH)
- The Royal Australian College of General Practitioners and the Faculty of Pain Medicine (ANZCA) have developed a free online pain management education program for GPs also available to nurses and allied health through GP learning
- New web-based education is in development as a partnership between FPM (ANZCA), the AML Alliance and Painaustralia
- Numerous education and training initiatives for primary care health professionals are being conducted by FPM (ANZCA) and APS members, with some funded by Painaustralia Collaboration members

Department of Health, Medical Benefits Division

Goals

- Formal confirmation that people with chronic pain are eligible for access to a Medicare Chronic Disease Management Plan, (multidisciplinary care from a GP and allied health providers)

3,6

Pharmaceutical Benefits Advisory Committee (PBAC)/Therapeutic Goods Administration

Goals

- Changes in the last three years include PBS listing of Oxycodone/Naloxone, Pregabalin and abuse-resistant slow release Oxycodone
- PBS approval pending for Tapentadol and Zostavax

3,6

NATIONAL HEALTH CARE AND ACADEMIC ORGANISATIONS

The Royal Australasian College of Physicians (RACP)

- | | Goals |
|--|------------|
| • Australasian Chapter of Addiction Medicine (AChAM) developed online module "Opioid Risk Management in Chronic Pain" with a grant from NSW Health, available free to the medical community through AChAM website. Combines information regarding pharmacology of opioids, their role in treating chronic pain, and how to identify patients at high risk of aberrant drug behaviours. Also includes information regarding initial doses and titration, managing patients on opioid therapy and methods to minimise the risks of opioid abuse, misuse and diversion | 1, 3,
4 |
| • Australasian Faculty of Rehabilitation Medicine (AFRM)'s training program has dedicated educational modules on multidisciplinary pain management and musculoskeletal rehabilitation | |
| • AFRM is a member college of the Faculty of Pain Medicine (FPM) and contributes to the education of GP's and health professionals in the community on access to multidisciplinary pain management | |
| • New Fellows and trainees encouraged to consider a Pain Medicine Fellowship | |
| • End of Life initiatives encompass pain management issues: <ul style="list-style-type: none">- Commencing large piece of policy work on End of Life care, led by a Working Party of Fellows across a number of relevant specialties including palliative medicine, geriatrics, neonatology and medical oncology. Key purpose is to determine how to promote best practice for End of Life care in Australia and New Zealand and coordination and integration of care across clinical teams, care settings and time, as well as how to better integrate between specialist and primary care sectors | |
| • Australasian Chapter of Palliative Medicine (AChPM) is represented on two working groups of the Australian and New Zealand Palliative Medicine Society (ANZSPM): one on End of Life and one on sedation with the task of producing position statements which will be made publicly available | |
| • Working Party will look at the following, all of relevance to pain management: <ul style="list-style-type: none">- Advanced symptom management- Care of the imminently dying patient- Appropriate health care design- Implications of better End of Life care management- Training and education issues | |
| • End of Life Working Group has just published the first of two position statements designed to guide and encourage clinicians, health planners and agencies that set and monitor standards for safety and quality pertaining to the provision of Quality End of Life Care (EoL Care) for patients, families, loved ones and carers. These will help guide clinicians who are managing issues associated with their patients' last 6-12 months of life. Some elements will be applicable earlier in the patient journey such as at diagnosis: <ul style="list-style-type: none">- Part 1 outlines evidence-based guidance for Quality EoL Care assessment and planning. Emphasis must be placed on the individual and their specific needs to ensure the process enhances patient preferences and involves family, loved ones and carer engagement in health planning and care support processes- Part 2 will focus on evidence-based implementation strategies aimed at delivering quality EoL Care in a patient choice setting where possible | |
| • Australasian Faculty of Rehabilitation Medicine (AFRM) has a dedicated musculoskeletal Special Interest Group (SIG) fostering education and research in a multi-disciplinary model of care. A number of workshops and lectures are also undertaken to educate Fellows and trainees | |

The Royal Australian College of General Practitioners (RACGP)	Goals
<ul style="list-style-type: none"> • In collaboration with the FPM (ANZCA) developed a new online pain education (6 modules) program, available through GP Learning. Free of charge to GPs, and also available currently to nurses and allied health professionals free of charge • Special Interest Groups in Pain Management and Addiction Medicine have a focus on the goals of the National Pain Strategy 	3
Australian Acupuncture and Chinese Medicine Association Ltd (AACMA)	Goals
<ul style="list-style-type: none"> • AACMA invites pain specialists to deliver keynote lectures on pain management at annual conferences which are very well received by members • Research is being carried out to identify the level of pain knowledge and management skills of Chinese Medicine senior undergraduates and to map course material. This research will be extended to practitioners with various years of experience • Provided \$100,000 research funding to Australian academics and students to support Chinese medicine clinic research • Academic members have delivered presentations to primary care, allied and complementary professional organisations • Undergraduates are trained to communicate with medical doctors, nurses and other allied and CAM professionals. One university provided clinical placement in hospitals for acute pain management, with collaborative research a trend in acupuncture for pain research • Five NHMRC grants were given to Acupuncture and pain research in 2009, some assessing inter-disciplinary management 	3, 4, 6
Australian and New Zealand Society of Nephrology (ANZSN)	Goals
<ul style="list-style-type: none"> • Endorsed Australasian Guidelines and Position Statement on Renal Supportive Care including a section on pain management • Pain management for patients with Chronic Kidney Disease, as part of an overall interest in Renal Supportive Care is an emerging area of research and clinical practice both nationally and internationally 	3, 6
Australian College of Nurse Practitioners	Goals
<ul style="list-style-type: none"> • Pain education programs (2-4.5 hour direct lectures) • Clinical stream on pain at National conference • Prize for Quality Use of Medicines in Pain Management, sponsored by Mundipharma 	3
Australian College of Nursing	Goals
<ul style="list-style-type: none"> • One and two day courses in pain assessment and management, accredited CPD • ACN Webcasts in pain assessment and management 	3
Australian Health Services Research Institute	Goals
<ul style="list-style-type: none"> • The electronic Persistent Pain Outcomes Collaboration (ePPOC) aims to improve services and outcomes for people in pain through reporting and benchmarking, and is being managed and implemented by the Australian Health Services Research Institute at the University of Wollongong • Development and implementation began in 2013 with funding from the NSW Department of Health. These funds enabled the development of infrastructure necessary for the implementation of ePPOC and supported participation by all publicly funded specialist pain services in NSW 	5, 6

To date, progress includes:

- Australasian agreement on a standard set of paediatric and adult data items to be collected

- by participating pain services
- Development of software for use by participating pain services to assist with collection of the information and maximise clinical use
 - Establishment of a National Reference Group to oversee and provide advice in the early stages of implementation
 - Development of documentation necessary for the ongoing operation of ePPOC, including a business plan, data policy and data dictionary
 - Development of reports to be provided on a six monthly basis to participating services
 - Participation by all of the adult and paediatric NSW pain services
 - Funding from the Victorian Department of Health to support participation by 14 specialist pain services
 - Funding from the Accident Compensation Corporation in NZ for two adult pain services to join ePPOC
 - Planned participation by five publically funded pain services in Queensland and services in Western Australia

Australian Pain Management Association Inc. (APMA)	Goals
<ul style="list-style-type: none"> • Pain Link telephone helpline: only national helpline in Australia offers a lifeline to individuals distressed by living with persistent pain. Trained volunteers listen, clarify issues, assist with action planning and provide options to help alleviate distress. Those in regional and rural areas or house bound can be supported by people who have the skills to pass on their knowledge to others and can deliver health coaching for pain management. Drug Arm and Lifeline refer consumers to Pain Link as do many GPs and health professionals • Pain Support Groups: 16 locations across Australia. Directed peer support with a positive self-management focus encourages individuals to become active in their pain management. Participants are encouraged to develop skills to self-manage pain through physical activity and cognitive approaches to navigate the complexity of living with persistent pain as well as other practical tips and strategies • Facilitators are screened and supported by training, as well as given Facilitator Manuals and activity and discussion booklets for monthly meetings • Social connectivity: Website is updated regularly with quality information, Facebook allows for social connections, practical tips and current pain news and many support groups have their own pages for local interaction • Evidence based information: High quality, accessible information and resources to inform and empower consumers. Guided by an eminent Clinical Advisory Committee and the current evidence base for pain management. ‘Wellbeing’ quarterly newsletter for members • Volunteers regularly visit pain management clinics to mentor patients as they transition back to community living, linking patients with APMA services and providing a point of contact for people to continue their road to better health using treatment and self-management skills • Provides guest speakers to staff of large community, aged and disability service providers as well as to smaller, local community services • Presentations comprise awareness of the problem of persistent pain, the personal and social impacts of pain as well as the role of pain management including self-management to bring about tolerable pain levels and enable living better lives • Representatives present at conferences and workshops and provide tutorials to students studying physiotherapy • Partners with other organisations to hold national events (eg the RSL) so staff can gain an understanding of best practice pain health care for veterans. Eg: In 2014 APMA and Palliative Care Queensland are partnering to present the 50 Shades of Pain National Conference • Raises awareness of people living with pain, particularly chronic pain with state and federal governments as well as overseas through submission processes, meetings and lobbying • Submissions, consultation and feedback to government bodies in support of people living 	1, 2, 3

with chronic pain represented, including:

- Medicare Locals, NHMRC, The Hon Michael Rann MP, Senate Standing Committee on Community Affairs, Chronic Disease Prevention and Service Improvement Flexible Fund Guidelines, Senate Finance and Public Administration References Committee inquiry into the Government's administration of the Pharmaceutical Benefits Scheme, Department of Essential Medicines and Health Products - World Health Organization, Strategy for Improving Care and Support for those Living with Chronic Conditions 2012–2017 - ACT Health Directorate, Australian Medical Council, Suicide Prevention Australia, WA Musculoskeletal Health Network, NHMRC Complementary and Alternative Medicine Resource for Clinicians, ACT Health, and letters sent to every State Health Minister in support of the Australian Health Ministers' Advisory Council recognising chronic and persistent pain as a chronic disease
- Representation on Committees: Australian Medicare Local Alliance, Clinical Engagement and Cross-Sector Collaboration Project; Reference Group member for the POINT (Pain and Opioid IN Treatment) Study, Pharmaceutical opioid prescription in Australia: Trajectories of prescribing, risk of adverse events and predictors of harm; Queensland Persistent Pain Steering Committee; Allied Health Models of Care Project - Multidisciplinary Pain Clinic, RWH Steering Committee, Painaustralia Board member, Member of General Practice Advisory Council Queensland, Patient Education and Health Literacy Working Group, Princess Alexandra Hospital, Various ad hoc committees for state consumer health organisations

<u>Chronic Pain Australia</u>	Goals
<ul style="list-style-type: none">• Provides information, support and social connection to those living with pain, their families and others with an interest in chronic pain• Website aims to improve community understanding of chronic pain, provide accessible information, and reduce social isolation. High quality, user-friendly, evidence-based information on pain and related topics, case studies of people's experiences of living with chronic pain conditions, and links to external resources• Online Forum: Supportive and understanding online community where information is shared freely between members. Also informs people on topics of interest such as changes in the health system that could benefit members. Moderated by people who live with chronic pain and understand the principles of effective self-management• Free monthly e-publication and social media keep people informed of activities and share news and information about a variety of resources and pain-related topics of interest as well as engage people in conversation about pain issues• National Pain Week: Annual awareness event to increase knowledge and understanding of chronic pain. Aims are based on the outcomes of the 'Pain is Not Invisible' project conducted in 2008/2009 to ensure messages are grounded in the lived experiences of people in pain• Broad aims of NPW are to help de-stigmatise the experience of chronic pain, work towards creating healing relationships between the person in pain and their health care practitioners, and reduce isolation and suffering• Conducts and participates in research when resources permit, with a particular emphasis on exploring and documenting the lived experience of pain. Since the release of the NPS, relevant research projects include:<ul style="list-style-type: none">- 2012: 'Internet, Social Media & App Use by People with Chronic Pain Study' in collaboration with researchers from The University of Queensland- 2013: Focus Group Study of Consumer Priorities for Pain Management Resources in NSW, conducted for the NSW Agency for Clinical Innovation• Give Silent Pain a Voice (GSPaV): Developed in consultation with Occupational Therapy students from the University of Sydney. Guest speaker training package developed to train a group of interested consumers - aims to increase awareness and improve understanding about issues for people living with chronic pain through free presentations to businesses, health groups and the general community	1, 2, 3, 6

- Actively represents consumer perspective on a variety of pain-related working groups, committees, seminars, conferences and publications. Consumer involvement to ensure consumer-focused care

Australian Physiotherapy Association

- The most substantial initiative is the establishment of a Pain Network for members of the Association. Launched in April 2014, the network is dedicated to (1) supporting physiotherapists develop the knowledge and skills to deliver evidence-based care, (2) supporting pain education in pre-registration and post-registration training programs for physiotherapists, and (3) facilitating translation of research into practice. To celebrate the launch, a special edition of the members' publication InMotion included interviews with international pain experts from a range of disciplines
- The APA has shown a strong commitment to keeping up-to-date with developments in the area of pain by providing a representative of the Association to engage with Painaustralia and when necessary, the Association has provided the necessary support to enable the attendance of the representative at Painaustralia events
- The APA commissioned and published a position statement on Pain Management (2012)
- The APA have supported an initiative in Western Australia, painHEALTH, a website developed to help educate and upskill people with pain associated with musculoskeletal conditions
- The APA recognises National Pain Week with special features in publications for its membership
- An APA member has had an active role on the Australian Pain Society's (APS) Relationships Committee – dedicated to improving interdisciplinary activity in pain research and clinical management
- The APA has provided financial support to enable the running of two discipline specific workshops as part of the pre-conference programs for the Australian Pain Society's Annual Scientific Meetings, 2013 and 2014

Goals

2, 3,
4

Australian Feldenkrais Guild

- Pain project officer appointed to coordinate 'Pain Team', liaising with AFG membership, leadership and pain organisations
- Dedicated section of website for information on pain, with content reviewed and updated regularly
- Educating Feldenkrais Practitioners on pain via email, website and workshops
- Involvement in National Pain Week - financial support, development of video to explain pain and Feldenkrais Method, classes and workshops run by practitioners
- Developed info-sheets and articles on the Method for management of chronic pain
- Evidence on effectiveness of Feldenkrais Method in managing pain included in submission to health insurers to allow continuation of rebate to those insured
- Approached Medicare Locals to support Feldenkrais classes in local areas
- Feldenkrais offered in some pain management programs
- Recent publication of study showing improved movement for people with osteoarthritis
- Initiated systematic review of Feldenkrais research with support from the International Feldenkrais Federation, and encouraging research in the area of pain management
- Small research project shown link between Feldenkrais Method and reduction of pain

Goals

2, 3,
4, 6

Australian Psychological Society

- APS is the peak body for psychology representing more than 21,000 members
- Members engage in providing services to individuals experiencing pain, usually in collaboration with a multidisciplinary team

Goals

1, 2,
3, 6

- Informs members of resources such as clinical guidelines, educational resources and fact sheets for clients
- Pain management is currently in the curriculum for most health psychology programs and some clinical psychology programs in Australia
- Potential for organisations to be funded to develop Practice Certificates in multidisciplinary pain management for general psychologists, other medical and allied health professionals, rehabilitation providers, aged care providers and assessors of clients of Third Party providers
- APS is very willing to contribute to the development of national core competencies in pain management to ensure adequate coverage of the psychosocial components of pain management

Australian RSD/CRPS Support Group	Goals
<ul style="list-style-type: none"> • Offers a website, Facebook Page, monthly newsletter and one on one support for people with CRPS 	2
Australian Society of Teachers of the Alexander Technique (AUSTAT)	Goals
<ul style="list-style-type: none"> • Pain relief is one of four main target areas listed in the AUSTAT organisational strategy • Pain conference to be held in Adelaide in May 2014 with the theme - “Chronic pain and the Alexander Technique – where do they meet?” Conference will help educate teachers on recent advances in pain management and encourage them to find ways to be more active in helping people in pain find relief • Agenda includes facilitated sessions designed to look more closely at the role the Technique plays in pain management and the role it could play in the future • Guest teacher is Carolyn Nicholls, director of the Brighton Alexander Technique College and currently acting as consultant on the British run ASPEN trial – <i>Alexander technique and Supervised Physiotherapy Exercises in back pain: a randomised controlled trial</i>. Carolyn will be teaching practical workshops covering how she works with people with chronic pain • Mark Catley, research physiotherapist from the BodyinMind(BiM) group at the University of South Australia will present on the biology of pain and recent research projects at BiM • Alexander teachers from around Australia presenting workshops relating to teaching the technique to students for chronic pain. A number will also be presenting research studies in relation to pain and falls prevention 	3
Fibromyalgia SA (Bridges and Pathways)	Goals
<ul style="list-style-type: none"> • Works through stakeholder partnerships to improve understanding and care for people with fibromyalgia and complex pain syndromes. Provides information, networking and support 	2
Institute for Urban Indigenous Health	Goals
<ul style="list-style-type: none"> • Pain Heroes - chronic pain management program for Aboriginal and Torres Strait Islander people • Develops and evaluates patient-centred service delivery and funding models for pain management which provide interdisciplinary assessment, care and support as a part of comprehensive primary health care centres and services • Interdisciplinary approach taken with program: Run by OT and psychologist and involvement of indigenous health worker is integral. Supported by Practice Managers, GP's deliver a section of program and are involved in referrals to it. Trainees and university students involved in development • Advocacy to destigmatise predicament of people with pain, especially non-cancer pain • Improving community understanding of the nature of chronic pain and best-practice management through community programs. Topics include understanding pain, chronic versus acute, evidence based non-medical strategies for managing and coping with chronic 	1, 2, 3, 4, 5

- pain, medications talk with a GP, and links to appropriate health services
- All materials and programs including Pain Heroes and homes visits, are culturally sensitive and tailored appropriately for working with First Australians
 - Easily accessible information and support programs to assist people with pain, carers, practitioners and other supports to understand and be more proactively involved in managing pain. Information is provided in a group setting with ample time for questions and individual sessions also available as follow up
 - Train and support health practitioners in best-practice pain assessment and management: on-the-job training for OT students, Allied Health Assistant trainees and health workers involved in the program
 - Establish and promote systems and guidelines to ensure adequate management of acute, chronic and cancer pain: development of program guide with session plans, background information, evidence base etc
 - Increase available workforce for pain management and palliative care: development and expansion of the Pain Heroes program will increase the available workforce as staff are allocated to this role and/or recruited to work in the program
 - Program evaluated with weekly notes and ongoing improvements

<u>Mental Health Professionals Network</u>	Goals
<ul style="list-style-type: none"> • Supporting 5 multidisciplinary pain and mental health networks in North Sydney, Newcastle, the Gold Coast, Mackay, and Melbourne, and in talks with people in other areas (such as Adelaide), but nothing concrete established yet • MHPN received a one year extension, with a review of mental health services being conducted this year to determine whether it will receive ongoing funding 	4
<u>National Rural Health Alliance</u>	Goals
<ul style="list-style-type: none"> • Provision of Fact Sheets “Chronic Pain – A Major Issue in Rural Australia” developed with Painaustralia • Advocacy for improved access to pain services in rural regional and remote areas 	3
<u>Palliative Care Australia</u>	Goals
<ul style="list-style-type: none"> • Effective pain management and quality end of life care is integral to PCA policy 	1,2,3
<u>The Pelvic Pain Foundation</u>	Goals
<ul style="list-style-type: none"> • The Pelvic Pain Foundation of Australia was formed in February 2014 with the aim of fostering education and research in this area. Pelvic pain is estimated to affect around 20% of women and up to 8% of men, yet it remains largely undertreated. A true ‘silent epidemic’ • Pelvic Pain is of particular concern as it affects young people, compromising their educational opportunities, workplace involvement, Quality of Life and ability to contribute positively to our economy • An informative and inclusive website is currently under construction • Facilitation and support for pain research has begun, and community programs have commenced. These include work with Zonta International and the development of Mindfulness Classes for those with pelvic pain • The Foundation builds on the needs identified in the document ‘The \$6Billion Woman and the \$600Million Girl: The Pelvic Pain Report’ published in collaboration with Painaustralia in 2012 • The Foundation recognises that pelvic pain affects men as well as women and will advocate on behalf of all those with pelvic pain women and up to 8% of men, yet it remains largely undertreated - a true ‘silent epidemic’ 	2,3,6

Medtronic Australasia Pty Ltd	Goals
<ul style="list-style-type: none"> • Information: Development and provision of fact sheets on chronic pain and therapy areas to aid efforts to raise awareness of all factors amongst community members. Facts sheets used in education sessions with health insurance companies to aid understanding of the condition, including value of appropriate healthcare • Education: High quality and meaningful education for patients including peer to peer engagement, skills training and education for healthcare professionals, and 'Quality use of technology'. Website and printed collateral present a balanced view of all treatment options with detailed insight to spinal cord stimulation and targeted drug delivery • Advocacy: Work with individuals and advocacy groups to help change attitudes toward pain, and those living with pain. Helping people share their personal story with the general community through our network of clinicians and patients, aiming to raise awareness of the face of pain and de-stigmatise • Leaders are briefed on the efforts of Painaustralia and the National Pain Strategy, enabling meaningful discussions at government level and with key stakeholders. Discussions are specifically related to the social and economic impacts of poorly managed pain and the need for appropriate access to therapies that alleviate the burden • Briefings: Work closely with a broad range of members of the healthcare community, including Hospital Administrators and Government. Utilise fact sheets and update stakeholders on the value of appropriate pain care, both within the context of the healthcare system and the wider community • Patient testimonials: Provides new consumers with access to people who have received pain therapies to help educate, comfort and empower consumers to make informed decisions with their healthcare provider • Skills training: Provide access to world class education and training, leverage global network and help to facilitate knowledge sharing between healthcare professionals around the world • During 2013, more than 10 educational events were held in Australia focusing on chronic pain. Specific areas include: Workshops for implanters (theory and practical); Overview of guidelines to help address barriers to access (particularly in the referral pathway); and Peer to peer education - including sponsored international experts • Support education and events organised by relevant associations to help improve access for all professions and encourage discussion on improving patient outcomes through appropriate use of pain therapies, including: <ul style="list-style-type: none"> - Faculty of Pain Medicine: Annual Scientific Meeting - Australian Pain Society: Annual Scientific Meeting - International Neuromodulation Society: Annual Scientific Meeting - Royal Australasia College of Surgeons: Annual Scientific Meeting • Promote local stakeholder involvement in global projects including best practice guidelines on targeted drug delivery (TDD), and a Polyanalgesic consensus paper • Actively involved in Neuromodulation research both in Australia and globally, with a focus on improving outcomes, improving access, and improving economic efficiencies for the healthcare system. Recent projects include five randomised controlled trials exploring: <ul style="list-style-type: none"> - Peripheral nerve stimulation (x2) - Spinal cord stimulation - Novel stimulation parameters - Benefits of stimulation for pain in everyday life • TDD research project: exploring oral medications vs. TDD and the potential of new dosing strategies to provide better pain management • Committed to advancement in medical technology, including breakthrough SCS MRI technology with the goal that no Australian patient would be denied an MRI due to their pain therapy. Evidence indicates this breakthrough will benefit 70% of all SCS patients within 10 years 	1, 2, 3, 5, 6

	Goals
Mundipharma Australia Pty Ltd	2, 3 6
<ul style="list-style-type: none"> • Dedicated to developing and providing innovative medicines for patients and healthcare professionals and to supporting quality education for the safe use of its products • Established leader in the therapeutic area of pain management, and recently furthered commitment in the field of advanced drug delivery. Committed to maintaining a focus on educational and working in partnership with the medical profession • Educational programs developed or sponsored include accredited meetings, speaker presentations, grant rounds, seminars and symposia at a local, regional, and state level, helping to educate hundreds of medical professionals including general practitioners, specialists, pharmacists and nursing staff • Across 2013, the GP program alone included: <ul style="list-style-type: none"> - Pain Management Master Class meetings, which comprise active learning modules for GP's on chronic pain. These meetings are RACGP accredited and provide 40 Category 1 points. Across the year, 16 meetings were held with 729 GP's attending • RACGP accredited Continuing Medical Education Meeting programs including the following modules – in 2013, 208 meetings were held with 4006 GPs attending: <ul style="list-style-type: none"> - Managing moderate to severe persistent pain - Essential considerations in chronic pain management: A case based programme - Chronic low back pain: assess and manage - GP tool box for chronic pain - Quality use of pharmacotherapies in chronic pain • GP meetings on pain related topics spanning disease states, speaker initiated education and product related updates. Across 2013, 145 of these types of meetings were held with 2284 GP's attending • Commitment to education will continue, with similar programs and new initiatives in place for 2014 onwards • Sponsors awards for Quality Use of Medicine through the Pharmaceutical Society of Australia and Association of Nurse Practitioners 	

	Goals
Pfizer Australia	3
<ul style="list-style-type: none"> • My Pain Clinic – a quality guide to provision of multidisciplinary pain management in primary care. Being promoted through AML Alliance and utilised by several Medicare Locals • A range of education initiatives being provided in collaboration with AML Alliance • A range of educational resources available for HCPs and consumers on neuropathic pain 	

NEW SOUTH WALES

NSW Agency for Clinical Innovation (ACI)	Goals
<ul style="list-style-type: none">• Brings together a network of consumers and clinicians to promote equity of access to pain management services for patients with chronic pain, determine priorities for action and develop and support implementation of new evidence-based models of care, to improve integration and co-ordination of care between hospital-based specialist multi-disciplinary pain clinics and community and primary health services• The ACI Pain Management Network is led by an executive committee, which includes staff specialists, general practitioners, nurses, allied health professionals and consumers• Three working groups that have been established to represent aspects of the continuum of care and the priorities identified in the Model of Care for the statewide plan. There is broad representation from consumers and clinicians across the spectrum on these committees• The network has more than 74 members and includes the peak NSW non-government organisation Chronic Pain Australia, Painaustralia, consumers, local health districts and specialty network governed health corporations in NSW	1,2,3, 4,5,6

The network is collaborating to implement the NSW State-wide Pain Plan 2012-2106, with funding of \$26 million allocated in 2012. Key elements include:

- Pain Management Programs – Which Patient for Which Program; describes characteristics for Low, Medium and High Intensity programs
- A comprehensive web-based resource for health care professionals and consumers, on best practice management of chronic pain launched March 2014
- Standardised Pain Charts for use in all health services
- Spinal Cord Injury and Chronic Pain Project, funded by the Lifetime Care and Support Authority – aims to improve services and support for people with traumatic SCI and chronic pain, commenced June 2013
- A paediatric outreach pain service managed jointly by the Sydney Children's Hospital and Westmead Children's Hospital
- Development of a national persistent pain management outcomes database (EPPOC), managed by Wollongong University. This is now collecting data from 30 pain clinics in NSW and Victoria and is being expanded to include other states
- Enhancement of services (including paediatric services at John Hunter Hospital) in 11 metropolitan public hospitals
- Most tertiary clinics are providing outreach services through Telehealth
- Establishment of five Regional Tier 2 Services (Orange/Dubbo, Tamworth, Port Kembla, Port Macquarie and Lismore). Building a skilled workforce through mentoring tier 3 to tier 2
- All NSW Medicare Locals have identified pain as a major issue and the tertiary pain centres are connecting with their MLs in their community to provide education, mentoring and support to develop primary care services. This is helping to reduce long wait times for access to multidisciplinary pain clinics, where average wait time was two years
- Funding for an early intervention trial with NSW health workers. A similar trial is being conducted with the Motor Accident Authority (led by PMRI)
- Funding for PMRI as the NSW lead centre for research and education. Centre now officially named “Michael J Cousins Pain Management and Research Centre”, and a new director is being recruited with the retirement of Professor Cousins

NSW Health Funding for Research and Education:

- Funding for an early intervention trial with NSW health workers. A similar trial is being conducted with the Motor Accident Authority (led by the PMRI)
- Funding for the PMRI as the NSW lead centre for pain management research and education Renaming of Royal North Shore Hospital’s Pain Management Centre as the ‘Michael J

Cousins Pain Management and Research Centre' by The Hon. Jillian Skinner, NSW Minister for Health and Minister for Medical Research

	Goals
<u>Central Coast Medicare Local</u>	
• Working with NSW ACI (Agency for Clinical Innovation) in collaboration with local health care providers to develop an early intervention, short term, primary care based model of care	3
<u>Dubbo Hospital</u>	
• Community Pain Interest Group • Tier 2 clinic established in nearby Orange but waiting list is apparently already 12 months. There is need for an additional service in Dubbo • Provision of consumer forums and dinners with speakers on chronic pain and associated medication	2
<u>HammondCare: Greenwich Private Hospital</u>	
• New Tier 2 pain management service provides assessment, treatment and interdisciplinary care including a medium intensity pain management program - short waiting time increases early and direct access to interdisciplinary care • Development of the Australian Cancer Pain Management Guideline and implementation strategy, pilot testing, development of Q stream modules on the guidelines to support health professional education, led by Dr Melanie Lovell • Guideline development followed the ADAPTE method. Implementation research conducted using environmental scanning and process mapping techniques. Pilot testing being conducted to assess feasibility and utility. Applications have been made for funding to conduct an RCT with patient and health economic outcomes to determine benefits to patients and the health system • Directly involved in the development of consumer resources through the NSW ACI • Provides training for health professionals interested in pain management (rehabilitation medicine, physiotherapists and clinical psychologists) and staff within the clinic • Provides education to undergraduate health professionals, postgraduates, trainee specialists, general practitioners and primary health care workers • Involved in research focused on assessment of interventions and development of best practice models of care • Latest evidence-based management strategies available online and updated regularly • Evidence for benefits of allied health and nursing interventions provides support for funding increases • Outcomes from people who attend group pain program collected and evaluated • Regular team discussions held to discuss quality improvements to the service • Audit tool being piloted Strong contribution to pain research. The head of the service Professor Philip Siddall has a conjoint appointment at the University of Sydney and is an investigator on a number of research grants including an academic enhancement grant from the Australian and New Zealand College of Anaesthetists, awarded each year to foster development of a new centre of research within Australia or New Zealand	1, 2, 3, 4, 5, 6
<u>Hunter Integrated Pain Service (HIPS)</u>	
• A comprehensive multidisciplinary pain program which offers community resources, including You Tube video: "What to do about pain is less than 5 minutes" and health professional resources including assessment guide, practice guide, primary care toolkit • Director Dr Chris Hayes is co-chair of the ACI Pain Network	2,3,4

<u>Hunter Pain Clinic</u>	Goals
• Partnership with Hunter Medicare Local, in the process of becoming a tier 2 training facility through FPM	1, 2,
• Housed and associated with Innervate Pain Management which provides psychological counselling and pain management programs via a psychiatrist and workplace physio who take patients through a program of exercises that assist them to function with their pain	3, 4,
• Formed connections with GP practices in the area and run education sessions for them and their practice nurses to ensure they are aware of what assistance is available for patients suffering chronic pain	5, 6
• Conduct monthly professional development activities with guest speakers and invited participants	
• Peer to peer mentoring for other pain specialists and graduates	
• Actively developing community based pain program in conjunction with Central Coast Medicare Locals	
• Provided education to GP's through Hunter Post Graduate Medical Institute (HPMI) and will be running training session in 2014 for GP's and practice nurses	
• Community awareness pain seminar for consumers in Newcastle attended by 70 people	
• Nurses developed patient education resources and conduct face to face education	
• Provide patients with reading material suitable to their condition	
• Evaluation by participants	
• Hunter Clinical Research conducts trials in pain management in collaboration with FPM, APS. Data shared with members of the International Neuromodulation Society through presentations at conferences	

<u>Innervate Pain Management</u>	Goals
• Innervate Pain Program (IPP) - intensive 100 hour multidisciplinary program for chronic pain, provided 6 workshops in 2013	1, 3,
• Services 63 groups and 530 participants. Data shows consistent and improving outcomes in both functional and psychosocial domains. 4 weeks, 3 days a week, groups of 6 to 12 (8 on average)	4, 5,
• Transition to Self-Management Program (TSP) - 18 Hour self-management and educative multidisciplinary program for people transitioning from WorkCover to self- management. Goal is effective self-management and knowledge about accessing health care in the community. Delivered in two full days, groups of 6 to 12	6
• Brief Early Intervention Program (BEIP) - 24 Hour Flexible delivery education and treatment within 18 months after injury and preferably within 3 months, also used as a refresher course; designed for people from sub-acute to 18 months of pain with retaining or early return to work as goals. Delivered at the same time as assessments or treatments. 10 modules, one afternoon a week for 2 hours with groups of 6 to 15, developed with the help of Hunter ML	
• A Tier 2 provider, Innervate has developed community links with other actual and potential Pain services - partnership with Hunter Medicare Locals and Membership of committee developing a pain program in the Central Coast Medicare Locals; regular communication with Hunter integrated Pain Service and Royal North Shore Pain Service	
• Provided 6 workshops with GPs in the local community in 2013	
• Community awareness pain seminar for consumers in Newcastle attended by 70 people	
• A three-monthly Mental Health and Chronic Pain Journal Club (4 sessions so far) developed with the help of the National Mental Health Network and Hunter Medicare Locals	
• Presented at consumer group meetings and run seminars for injury managers	
• Monthly professional development activities covering cognitive decline, unusual psychological diagnoses, new directions in pain management, outcomes from targeted physiotherapy, sleep disorders, and medication interactions	

- Contributed to “Clinical Pathways” for Pain. An online confidential clinical management system for both patients and clinicians, including paperless office with encrypted record management
- Staff are postgraduate-qualified allied health, medical and nursing health professionals. All have extensive experience in the management of chronic pain as a specialist area of practice
- Constant professional development programs ensure knowledge and application of the latest evidence
- Travelled to Perth to see the STEPS program and discuss its evidence base
- Attended each Australian Pain Society Conference
- Follows a case management model. At each stage of treatment, health professionals of different disciplines collaborate to achieve best outcomes for patients. Requires ongoing interdisciplinary training so that an understanding and level of skill can be achieved and maintained. Many services have only multidisciplinary care and do not achieve effective skills across disciplines
- Assesses outcomes and reports them to stakeholders
- Discussing collaborative research with Royal North Shore and Hunter Integrated Health
- Changes to programs based on outcomes and other relevant research according to a hierarchy of evidence
- Interprofessional programs have been evaluated and disseminated in four publications
- Reported evaluation online using RACGP ALM system
- Multiple clinical and policy-into-practice funded grants; PhD students and masters students involved in pain-related research; competitive grants; overseas collaborations

John Hunter Children's Hospital, Children's Complex Pain Service	Goals
<ul style="list-style-type: none"> Contributed to incorporation of children’s measures into ePPOC (started as ACI project; now National outcomes database) Contributed to development and implementation of a State-wide referral guideline and referral form (ACI project) Contributed to PainBytes online consumer education for adolescents and young people with complex and chronic pain (ACI project) Contributed to <i>Therapeutic Guidelines – Analgesic and Australian Medicines Handbook – Children’s Dosing Companion</i> (resources for general practitioners and junior medical officers) Used funding from NSW Health (Pain Management Plan) to establish a multidisciplinary service for children and adolescents (CCPS) where there had not been such a clinic previously. Funding was sufficient to employ a CNC 3d/wk, physio 2d/wk, psychologist 2d/wk and administrative assistant 2d/wk in addition to an incumbent pain specialist 3d/wk since July 2013 Working in partnership with JHCH Acute Pain Service so that children at risk of complex or chronic pain are referred early during admission and/or for post-discharge early intervention Triage and liaison strategies to maximise return to school and stage-appropriate role-functioning Email and telephone advice to GPs and other specialist referrers ahead of referral or to obviate the need for referral and facilitate care as close to home as possible Telehealth: used for clinical case conferences and recently for clinical care delivery Individualised Pain Management Plan document to assist children and their families in recalling strategies discussed in clinic and supports available Closing the Gap Action Plan includes reviewing cultural safety and appropriateness of recently developed service and on-line materials Networks with consumer groups where pain issues are common: Partnership between CCPS staff and Rare Voices Australia has recently been commenced as over one quarter of our clients have a rare disease associated with pain Planning of transitional care for children transferring ongoing care to adult care settings: 	1, 2, 3, 4, 5, 6

CCPS has scoped a project to develop a model of care for transition on young people with pain to adult services and improvement of services to 16-24yo persons with pain to ensure developmental appropriateness and efficacy

- Education: Educational and scientific presentations at local, national and international forums for clinicians; Providing training for FPM paediatric core competencies; Tailored education to teachers and counsellors to support specific clients in schools on a case-by-case basis

<u>Hunter Medicare Local</u>	Goals
<ul style="list-style-type: none"> • Created and are widely promoting “Understanding Pain” Youtube video • Provide healthcare professional targeted pain education sessions and resources 	2, 3

<u>Illawarra-Shoalhaven Medicare Local</u>	Goals
<ul style="list-style-type: none"> • Worked in collaboration with AML Alliance to promote training webinars to local primary health care professional network 	3

<u>Outback Pharmacies</u>	Goals
Ma Ma Aboriginal Health Service/Broken Hill:	2, 3
<ul style="list-style-type: none"> • Community pharmacist Alex Page of Outback Pharmacies is seconded two days a week to the Ma Ma Aboriginal Health Service, as part of a multidisciplinary team • Spends half of his time at the Broken Hill service, and the rest of the time travelling to outreaches to Wilcannia and Menindee, seeing patients who would rarely consult a pharmacist • Routinely conducts Home Medicines Reviews and provides education on remaining active and functioning despite the pain • Developing plans for a pain management support group in Broken Hill, for Aboriginal and non-Aboriginal people with chronic diseases 	4

<u>Macquarie University</u>	Goals
<ul style="list-style-type: none"> • Centre for Emotional Health offers a free online course to help people manage chronic pain, anxiety and depression, as part of a research trial to develop an effective evidence-based online support program 	1,2

<u>Northern Sydney Medicare Local</u>	Goals
<ul style="list-style-type: none"> • Delivered pain education focused evening sessions targeted at primary care professionals • Met with Professor Michael Nicholas (PMRI) to discuss pain program options 	3

<u>North Shore Private Pain Clinic</u>	Goals
<ul style="list-style-type: none"> • A new multidisciplinary pain management clinic located at North Shore Private Hospital, staffed with a multidisciplinary team. Director Professor Michael Cousins AO also engaged in major research program into “closed loop neuromodulation” 	3,4,6

<u>Southern NSW Medicare Local</u>	Goals
<ul style="list-style-type: none"> • Established a telehealth pain clinic in the Bega Valley 	3

<u>The Pain Clinic, Gosford Hospital</u>	Goals
<ul style="list-style-type: none"> • Expert knowledge and long term support by health professionals including an occupational therapist, physiotherapist and clinical psychologist, with consultant services from pharmacy, social work and addiction medicine • Multidisciplinary team of allied health workers as well as consultant service from medical officers in the drug and alcohol clinic • Provide rapid access into our clinic with waiting periods less than 2 weeks, predominantly focusing on managing people in pain in the community, however for some clients the wait list is still 6-9 months • Continual data collected on pre and post outcome measures 	3, 5
<u>University of Sydney</u>	Goals
<ul style="list-style-type: none"> • The Discipline of Pain Medicine, University of Sydney Medical School is running Pain Symposia for undergraduates in Medicine, Health Sciences and Law (2 x 2 day symposia have been run to date) 	3
<u>Western NSW Medicare Local</u>	Goals
<ul style="list-style-type: none"> • Pain management webinars with an aged care focus being provided through the Pain Management Research Institute University of Sydney 	2

VICTORIA

Victoria Overview

- | Goals | |
|-------|---|
| 1, 3 | <ul style="list-style-type: none">• Victoria has allocated additional funds to address pain in this state including:<ul style="list-style-type: none">- \$9 million to supplement pain services through its Subacute Ambulatory Care Services (SACS) to embrace improved pain management, part of the Victorian Government's Public Health and Wellbeing Plan 2011-2015- \$2.35 million to staffing of four new community pain clinics, raising the total number of publicly funded clinics to 15- A further \$4 million to community peer support programs (through grants of up to \$100,000)• The funding established new interdisciplinary pain clinics in the regional centres of Shepparton and Traralgon, adding to the regional clinics already operating at hospitals in Ballarat, Bendigo and Barwon• Three new regional Tier 2 clinics are now operating at La Trobe, Shepparton and Bendigo, in addition to Barwon/Geelong, to improve access to pain services• A total of 13 tertiary pain clinics are now operating across the state and collecting data through ePPOC• Program supported by WorkSafe Victoria and the Transport Accident Commission has increased the availability of skilled health professionals and case managers providing early intervention pain management programs for compensable clients in Melbourne• In 2013 the Minister for Health in Victoria announced the establishment of the Victorian Musculoskeletal Clinical Leadership Group in response to the landmark report regarding the socioeconomic impact of chronic musculoskeletal health conditions in Australia, "<i>A problem worth solving</i>"• The purpose of the Musculoskeletal Clinical Leadership Group is to provide strategic advice to the Minister, Department of Health (Vic) and other stakeholders concerning opportunities and approaches to optimise system performance and consumer outcomes in the context of musculoskeletal health and persistent pain. The group is represented by a large range of clinical disciplines, consumers, and policy representatives/experts and will ultimately work in partnership with musculoskeletal networks in other states, predominantly WA and NSW• Other local initiatives in Victoria include:<ul style="list-style-type: none">- The 2012 Victorian S8 Opioid Forum - convened to discuss the use of opioid analgesics in the context of chronic non-malignant pain management trends in the US, Canada and in Victoria. The Forum reached consensus on five points of clinical practice and governance- The Lower Murray Medicare Local, in conjunction with Monash University, launched a new Regional Pain Management Service in March 2014- A nurse clinic trial with a focus on musculoskeletal pain at Grampians Medicare Local (Country North SA Medicare Local is the second trial site for this initiative)- Several forums held by Medicare Locals to discuss opportunities and barriers for best practice |

Arthritis and Osteoporosis Victoria	Goals
<ul style="list-style-type: none"> • Development and promotion of ground breaking report "A Problem Worth Solving" which details the rising cost of musculoskeletal conditions in Australia and makes a case for the need for a proactive, strategic response • Policy and Advocacy program aimed at improved access to services for management of persistent musculoskeletal pain • Health professional Training Program • Research Strategy for the next 5 years includes musculoskeletal pain as a priority area • Pain has been explicitly included as an area of importance for the newly established Victorian Musculoskeletal Clinical Leadership Group • Runs a suite of services for consumers with musculoskeletal pain including: webinars, information sessions on pain, a helpline for empowering consumers with pain to develop better system navigation skills 	1, 2, 3, 4, 6
Australian Life Options	Goals
<ul style="list-style-type: none"> • Clinical Psychologist Marg Saffron offers community support programs in collaboration with other health professionals including pain specialists, GPs and allied health • Seeking to develop GP led teams within other communities to expand these services with local community • Ongoing relationship and constant liaison with university clinical schools with the aim of developing education and fostering collaboration 	2, 5
Ballarat Health Services	Goals
<ul style="list-style-type: none"> • New regional clinic has reduced wait times to under a month • Program redesign aiming to have people with persistent pain seen in a more timely manner • Completed literature reviews and benchmarking against other services • Service provides an initial education session to client base which includes holistic education topics and empowers clients to make informed choices about treatment/ care options • Professional development for staff including courses, attending conferences and motivational interviewing workshops • Program evaluation through consumer feedback, staff evaluation and formal review and planning process 	2, 4, 5
Barwon Health	Goals
<ul style="list-style-type: none"> • IMPACT: Integrated Medication Reduction Physical Activity and Cognitive Therapy • Map and Compass system: Education delivery program towards recovery. Map is a program that outlines the landscape of pain and the patient; Compass is a supporting program to outline the methods used to navigate the map • Patient Education promoting positive moves and mindfulness meditation. • Patients able to access psychiatry, psychology and physiotherapy in addition to pain specialists and nurses 	1, 2, 3, 4
Barbara Walker Centre for Pain Management, St Vincent's Hospital	Goals
<ul style="list-style-type: none"> • Gateway: This pain education and triage system has led to improved education of consumers and better selection and prioritisation of patients who are ready to undertake management and informed to make decisions about their care • Clinic Outcome project • PRISM GP education program: Developed to teach evidenced-based pain management skills 	2, 3, 4, 5, 6

in assessment and management in conjunction with Medimark. Over 1000 GPs have participated in this module which has allowed collection of data from several thousand patients from GP practices throughout Australia gained through GP's applying some of the strategies taught

- Continued use and development of the flagship intensive 3 week integrated pain program START - allowing important basic training for staff in management strategies which result in long term improvements in quality of life and medication reduction – currently achieving patient satisfaction
- Transition clinic has allowed hospital inpatients access to interdisciplinary pain management, usually limited to single discipline
- Gastroenterology clinic allows patients access to an interdisciplinary holistic care model in a busy clinic environment
- Education of general practitioners about pain management: One day workshops "using opioids safely in general practice" and "Pain Management: Nuts and Bolts" has been successful, with 3 series run over last 4 years
- Outcome measures now taken for all patients at baseline and 6 and 12 months after first engagement in treatment using basic self-report questionnaires
- Outcome study comparing K10 to DASS, and evaluation of graduate doctor pain knowledge

Eastern Melbourne Medicare Local	Goals
<ul style="list-style-type: none"> • Working with Albury-Wodonga Health to promote their Chronic Pain Management program - 3-week residential cognitive-behavioural modification and physical reactivation program based on the biopsychosocial model of chronic pain 	2

Empower Rehab	Goals
<ul style="list-style-type: none"> • Individual and group based pain management programs • Early intervention programs for clients deemed at high risk of developing chronic pain due to psychological factors • Education of patients to increase understanding of chronic pain • Pain management training to external clinicians and others who work with clients in pain (6 sessions per year nationally) • Attend APS conference each year and belong to the Physiotherapy Pain Collaboration and have presented at the APS on our model of care • Provide interdisciplinary care, providing combined physio and psychology sessions with the client at assessment, goal setting and discharge as well as strategically when providing therapy • Pain medicine specialist involvement and liaise closely as a team with regular meetings • Regularly review programs as a team, inviting feedback from clients and external stakeholders • Programs are also reviewed by WorkSafe and TAC with the provision of a significant amount of data to benchmark performance against other Victorian based providers • Commencing a research project assessing the effect of integrated sessions and comparing that to separate sessions to determine the benefit of integrated sessions 	3, 4, 5, 6

Health and Disability Strategy Group (HDSG) - WorkSafe Victoria and the TAC	Goals
<ul style="list-style-type: none"> • Network Pain: Multidisciplinary Pain Management program with specific focus on compensable clients, return to work and navigating the system • Enhanced communication systems between all stakeholders by use of standardised reporting tools. Case conferencing mandated and reimbursed. Medication reviewed and recommendations made by pain specialists, weaning of medication can commence in a Network PMP when appropriate outcomes are benchmarked across providers of Network Pain programs • Increased availability of skilled health professionals providing PMPs in Melbourne, requires 	2, 3, 4, 5

that each site utilises a set of standardised clinical outcome measures (based on the ePPOC / IMMPACCT recommendations), ongoing emphasis on provision of PMP much earlier in the claim

- Education program/sessions to challenge prejudices about persistent pain specifically within the compensable context, provides resources and recommendations for consumers to share with providers, case managers, clients and their families
- Strong promotion of early access to multidisciplinary assessment and PMP to promote optimal outcomes for clients, challenge to beliefs that pain management is the last possible treatment, multi- level education program still being developed to allow workers to learn more and develop skills over time
- Aim to train all stakeholders in the compensable health chain, eg, case managers, senior managers, health professionals, even those who answer the phone to TAC clients
- Physiotherapy and Pain Management Consultant Anne Daly provides:
 - Education for Medicare Locals on persistent pain and the health benefits of work
 - Education program for case managers and rehabilitation counsellors
 - Editorial in Physiotherapy magazine providing advice on management of patients undertaking PMPs and commentary on outcomes

	Goals
<u>Kikqua Therapy (Wanda Cook and Associates)</u>	Goals
• A pilot study of an alternative online resource / technique to assist in the management of chronic pain. Has involvement from Dr Stephanie Davies, Fremantle Hospital Pain Medicine Unit.	2
<u>Lower Murray Medicare Local</u>	Goals
• A new Pain Management Program commenced operation in April 2014, servicing a very extensive regional community where pain has been identified as a major issue • Regional Pain Management Clinic is run by various specialists and full multi-disciplinary team - this clinic together with the training program will make a huge difference	1, 2
<u>Monash Health</u>	Goals
• Monash Health Pain Program: Comprehensive program formed by merger of three programs is now providing better access for all patients to allied health, psychiatry and addiction specialists • Education program for patients which they attend before their first clinic appointment • Support group available to patients from (previously) 3 separate programs	1, 2, 4
<u>Origin of Image</u>	Goals
• A volunteer consumer support service committed to raising awareness of Pudendal Neuralgia and providing advocacy for injured workers through the development of patient website • Presenting at AIM Pain 2014 in Sydney • Providing a patient voice to health professionals via social media/internet • Writing to SafeWork Australia, WorkSafe Victoria and the Minister advocating for the acknowledgment of chronic pelvic pain as a disability/impairment • Raising production funds for a personal documentary on art/pain, The Hurting Strings (currently in production)	1, 2
<u>South East Melbourne Medicare Local</u>	Goals
• Chronic Pain roundtable held in March for local health care providers with a special interest in the management of Chronic Pain and associated comorbidities. Guest speaker Professor Lorimer Moseley	3

AUSTRALIAN CAPITAL TERRITORY

ACT Overview

- ACT Health identified chronic pain as a separate chronic condition, not just a symptom of other chronic diseases, in its ACT Chronic Conditions Strategy 2013-2018, after strong advocacy efforts by the Canberra-based arm of the Australian Pain Management Association and other consumer organisations
- ACT Health funded (\$1.5 million) for the establishment of a Tier 1 pain clinic at Canberra Hospital, and appointed Dr Romil Jain as Director to revamp pain services across the hospital

	Goals
ACT Medicare Local	
• Attended Pain Workshop in Adelaide in December, to gain information about what is happening nationally	3
• Hosted a multidisciplinary education event for 86 members, in collaboration with Private providers and TCH Pain Management Unit (sponsored by AML Alliance)	
• Promotion of Pain webinar and symposia series to HCPs through ACT Medicare Local newsletter	
• ACT Medicare Local is planning another education event later in 2014 around Pain Management and Prescribing or Pharmacology	
Pain Support ACT (ACT branch of APMA)	Goals
• Public support and social meetings for people living with pain (approx. 8 per year)	1, 2,
• Local speakers with appropriate expertise plus opportunity to learn about relaxation/meditation and discuss matters of concern or interest	3, 4,
• Networking to form alliances with other health care organisations	5, 6
• Advocacy to gain better services to support people with pain in the area	
• Provide information to educate people and organisations on pain services and issues	
• Worked with national APMA to submit formal submission - final 5 year Strategy recognised chronic pain as a separate chronic condition requiring support and the key role of work done by consumer groups	
• ACT Medicare Local data collection didn't ask questions that would enable it to identify pain as a problem in the ACT, but after joint work with HCCA, ML recognised the problem, including need for more skilled professionals, and has conducted its first pain training event for primary care providers	
• Quarterly newsletter provides information about upcoming meetings and social events, events of interest to people with pain, programs available from the government, and useful resources	
• Input to local reviews of services and policies	
• Training for support group facilitators	
• Sought an evaluation of the services of the Canberra Hospital Pain Clinic by the ACT Government	
• Connect with organisations such as the University of Canberra, opening opportunities for greater consumer participation in research, for example through focus groups	

QUEENSLAND

Queensland Overview

- QLD Health allocated \$39 million in 2011 for a state-wide pain management plan
- Pain clinics now operating in Royal Brisbane and Women's Hospital, Brisbane South Metro, Gold Coast, Sunshine Coast, and Townsville
- The clinics are now supporting primary health care professionals with education, training and mentoring, with the aim of reducing wait times
- Community support groups run by The Australian Pain Management Association have expanded and are now operating in Brisbane, Gold Coast, Townsville, Mackay, and Bundaberg, with no committed funding
- St Vincent's Private Hospital opened a new \$3 million Queensland Centre For Pain Management, which offers an adult pain program and LEAP into life, an innovative program for adolescents as well as treatment facilities
- Support Kids in Pain (SKIP) based in Brisbane is operating as Australia's first not-for-profit organisation providing multidisciplinary treatment, support and education to children aged 15 and under living with chronic pain and their families. It supports and then helps transition appropriate adolescents into the LEAP program for continued pain support

<u>Darling Downs – South West QLD Medicare Local</u>	Goals
<ul style="list-style-type: none">• Sponsored GP and health professional attendance at the Brisbane pain symposia	2, 4
<u>Gold Coast Medicare Local</u>	Goals
<ul style="list-style-type: none">• Pilot Project 'Turning Pain into Gain' Program: Treatment and service navigation for those living with persistent pain within the region - helps people with persistent pain become better managers of their pain through group education and support, goal setting and improved use of community healthcare services• Advisory Group Project: Aims to address the wait list burden of public health facilities and assists in providing patients with a strategic plan for service navigation and understanding of pain management to promote better utilisation of available health care services• The eligibility criteria aims at Category 2 and 3 patients (per QLD Health classification). Patients in the project are managed within primary health care by GPs and a multidisciplinary allied health team skilled in managing persistent pain. Teams communicate to maintain a continuum of care with the aim of achieving treatment and lifestyle outcomes and goals• 12 month group education held on a monthly basis. Better understanding of pain management translates to better health care service utilisation and a greater commitment to self-management• Upskill primary health care to better support consumers in their pain management and funds extended health care services to allied health to enable a more complete and strategic pain management plan• Quantitative and qualitative evaluations by means of PSEQ, WHO QOL and verbal patient feedback during one on one service navigation assessment collated for review at close of project• Clinicians evaluated on their participation, patient outcomes and work satisfaction measures from their participation in the project	1, 2, 4, 5

St Vincent's Private Hospital - Brisbane	Goals
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- New pain service includes specialist multidisciplinary paediatric and adolescent clinics 1, 2,
- Adult pain program - ReCharge 3, 4,
- Adolescent Pain Program - LEAP 6
- Programs aim to provide a timely pain service to people with persistent pain, empowering individuals to help manage it. Provides expertise to other pain services and representations to the community to highlight importance of managing persistent pain
- Special pain management programs available to people who are financially disadvantaged and would not be able to afford it or who would be placed on a long waiting list to be seen by a public hospital pain service
- Involves family members and provides information and education to significant others about persistent pain, as well as safe use of medications for pain and non-pharmaceutical methods of managing persistent pain
- Program participants followed up at regular intervals afterwards to assess progress
- Both programs have regular interdisciplinary case conference meetings to ensure all members of the team are working towards appropriate goals for individuals
- Pain Service acts as a resource for other practitioners and encourages and supports education to other practitioners through facility visits and presentations to other pain services in the community. Allied pain specialists at St Vincents are active participants in Telehealth services for patients who live in regional areas
- Website provides point of access for consumers to link into the pain service
- Involved in a major pain conference scheduled for late 2014
- Staff are involved in CPD programs and are actively involved in scientific meetings and professional networking groups
- Working towards providing training for medical officers specifically in pain medicine
- Awaiting commencement of the EPOCC outcome measures program that has been piloted in NSW to enable pain service to align with other services nationally and facilitate improvements in provision of current services
- Future research will specifically target the adolescent group

The Townsville Hospital	Goals
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- The Queensland Health Persistent Pain Statewide Services Strategy provided funding for four new regional pain services in Queensland, including at Townsville Hospital. The locally developed and implemented model of care relied heavily on the National Pain Strategy 2, 3, 4, 5
- Patient education is central to model of care, with daily education and motivation. Each team member (medical, pharmacy, nursing, physiotherapy, occupational therapy and psychology) presents to consumers and feedback is strongly positive. Message is around pain education and active self-management
- Obtained FPM accreditation to train registrars with first registrar successful in his exam, and recruited another pain specialist
- FTE has risen from 6 to 22, spread across three locations (Townsville, Cairns and Mackay). Team provides regular education and frequently contributes to external service education (GP's, GP registrars, specialist registrars, military, private and public sector allied health teams)
- QI process are weaved into model of care
- Working towards a research capacity and plan to contribute to ePPOC database

Wesley Pain and Spine Centre

Goals

- Pain Management Program is for people who have: Persistent pain which is limiting their lifestyle and ability to perform everyday tasks; Failure to respond as expected to surgical or medical treatment; Increased reliance on medication or an exaggerated dependency on health professionals 2, 3
- Two program options available for patients requiring pain management (nine days over three weeks or ten days over eight weeks) with up to eight patients per group. Patients individually assessed by team members: Specialist Pain Medicine Physicians, Registered Nurse, Physiotherapists, Exercise Physiologists, Occupational Therapists, and Psychologists
- Uses a multidisciplinary cognitive behavioural approach with an emphasis on physical conditioning and education to facilitate self management of persistent pain
- Regular medical reviews conducted in addition to team case conference meetings to discuss progress and identify any change in management, if indicated
- At the end of the program, a comprehensive discharge report with outcomes and recommendations for future management is sent to the referring doctor, insurer (if relevant) and any other practitioners involved in the patient's future care
- Components: Physiotherapy/Exercise Physiology (develop, modify and provide a self-managed exercise program that is appropriate for the individual), Psychology (education, tools and strategies designed to promote health self-management and a greater understanding of pain mechanisms, CBT model is used to optimise ability to manage their condition and rehabilitation), Occupational Therapy (functional capacity and job suitability, general posture and basic ergonomics etc), Medical (discussion regarding medications and their side effects, advice on medication reduction), and Nutritional (healthy eating patterns encouraging self-responsibility)

WESTERN AUSTRALIA

Western Australia Overview

- WA Health contributed \$50,000 seek funding to help establish Painaustralia (2010)
- WA Health funded a \$600,000 dedicated pain service for children and adolescents at Perth's Princess Margaret Hospital (opening 2014)
- PainHEALTH – a valuable website resource for consumers and health professionals on musculoskeletal pain funded by WA Health was launched and has now had more than 1.5 million hits, and almost 70,000 visitors from more than 82 countries
- WA Health Networks have been expanded to incorporate a pain management group linking with state-wide pain services
- Fremantle Hospital Pain Medicine Unit has supported the development of primary care pain services in several Medicare Locals
- WA Health and Arthritis and Osteoporosis WA have funded the provision of interprofessional pain management education in metropolitan and remote areas
- Curtin University is providing interprofessional pain education and Rural Roadshows taking pain management education into regional areas of the state
- WA Health funded a project to improve pain management skills among indigenous health workers
- Notre Dame University, Fremantle announced plans to establish a Chair of Pain Medicine, with a major donation from Perth philanthropists Geoff and Moira Churack

Fremantle Hospital & Health Service with Spinal Pain Implementation Working Group (WA DOH 2010-2013) and State Wide Pain Services (WA)	Goals
<ul style="list-style-type: none">• Service development and delivery by Adjunct Professor Stephanie Davies since 2007• STEPS 2 day interprofessional program and subsequent individual or pain team assessments (In-STEP approach)<ul style="list-style-type: none">- Fremantle Hospital Pain Medicine Unit (WA) commenced Oct 2007 - funding ongoing from June 2008- Perth North Medicare Local (WA) - commenced Nov 2011- Bentley Armadale Medicare Local (WA) - commenced Nov 2013- Greater Southern Costal Medicare Local (WA) - commencing May 2014- Central Rehabilitation (ACT) - commenced 2011- Royal Prince Alfred (NSW) - commenced 2012-13- Austin Health (Vic) - commencing 2014• Modified STEPS (6 hours) only• Rural Roadshow - 4 programs - remote and rural - Kununurra, Geraldton, Albany, Kalgoorlie• Telehealth<ul style="list-style-type: none">- Fremantle Hospital & Health Service Pain Medicine Unit- Solo consultations - increased more than 10% of consultations- STEPS TH - trialled 2010 and 2014 - far end site issues• Interprofessional Education Programs:<ul style="list-style-type: none">- gPEP (WA) - 2009 - 61/2 hrs, 40 CPD pts for GPs - 5 programs metro; 1 program 2011 Broome- hPEP (WA) - 2010-11 - 4 programs - remote and rural - Kununurra, Geraldton, Albany, Kalgoorlie• Range of interactive presentations from health care professionals:<ul style="list-style-type: none">- Presenters with FPM qualifications and other health care professionals- Medical Students- Post-Grad Physio Students- Nursing	2, 3, 4, 6

- Pharmacists
- Medicare Locals – to provide context for In-STEP approach
- <http://painhealth.csse.uwa.edu.au/> launched April 2013, funded by WA Department of Health with co-leads Dr's Helen Slater and Stephanie Davies. Monitoring data in the first 6 months post-launch indicate 1,171,626 hits with 49,113 visitors from > 80 countries (45% from Australia)
- Establishment of www.mylibrary.net.au in 2005 - Online evidence-based Medicine "storage" cabinet
- Establishment of www.researchaustralia.net.au web database (2006 - ongoing)
- Service Delivery for most STEPS sites utilise a form of pre/post evaluation
- Linking with http://www.kikquatherapy.com.au/kikqua_therapy.html
And www.researchaustralia.net.au supporting Wanda Cook (Victoria)

StateWide Pain Service (WA) forum informs:

- Arthritis & Osteoporosis WA (AOWA) led by John Quintner: Website has information for consumers and some for health care professionals
- WA Department of Health announced in Nov 2013 ~ 600K recurrent annual funding to establish new Children and Adolescent Pain Service at PMH (separate section for PMH below)
- Paediatric and Adolescent: KOPE program - details on the AOWA website
- WorkCover WA: 7th Feb 2014 submission for Legislative Review via Australian Pain Society by Dr's John Salmon, Stephanie Davies and Roger Goucke
- WA Department of Health, Health Networks: 2014 establishment of Pain Health Working Group (for WA) to work with the State Wide Pain Services (WA) forum (established 2009-ongoing). This replaces and expands the scope of the previous Spinal Pain Implementation Working Group under Musculoskeletal Health Networks
- 10th April 2014 forum - updating pain services and gaps

Publications:

- Davies Stephanie, Quintner John, Parsons Richard, Parkitny Luke, Knight Paul, Forrester Elizabeth, Roberts Mary, Graham Carl, Visser Eric, Antill Tracy, Packer Tanya, Schug Stephan A. Pre-clinic group education sessions reduce waiting times and costs at public pain medicine units. *Pain Med*, 2010, 12/1, 59-71
- Davies Stephanie J, Hayes Christopher, Quintner John L. System plasticity and integrated care: informed consumers guide clinical reorientation and system reorganization. *Pain Med*, 2010, 12/1, 4-8
- Department of Health Publication "Schedule 8 Medicines Prescribing Code" PSB 2014 following two workshops 2012-2013 organised by WA DOH

[Arthritis and Osteoporosis WA](#)

- Reaching out to Women in Pain: A 4 hour workshop presented by health professionals in Perth outer metro venues
- Making Sense of Pain: A two day interdisciplinary workshop for multidisciplinary health professionals
- Pain Explained: A series of 2-hour lecture discussions on topics of interest to health consumers
- KOPE (Kids Overcoming Pain Education): Program for children and adolescents (together with their parents)
- All programs evaluated

Goals

2, 3,
5

Bentley-Armadale Medicare Local	Goals
<ul style="list-style-type: none"> • STEPS Program to help people manage persistent Pain – two-day multidisciplinary workshops for people living with persistent pain. Clients are offered subsequent individual pain team assessments • Chronic Pain Self-Management course – A series of 2.5 hour workshops delivered over six weeks to assist clients living with chronic pain with self management skills 	2

Curtin University	Goals
<ul style="list-style-type: none"> • Interprofessional Education Programs <ul style="list-style-type: none"> - gPEP (WA) - 2009 – 6.5 hrs, 40 CPD pts for GPs - 5 programs Perth; 1 program 2011 Broome (competitive funding from State Health Research Advisory Council) - Rural Roadshow - 4 programs implementing Spinal Pain Model of Care in partnership with Fremantle Hospital, AOWA, Rural Health West, Curtin University, Department of Health WA – 2 components: (i) hPEP and (ii) STEPS in remote and rural WA - Kununurra, Geraldton, Albany, Kalgoorlie (partnership project with AOWA, Department of Health WA, Fremantle Hospital, Rural Health West, Curtin University) • Development of a new postgraduate Clinical Masters in Physiotherapy Pain Unit – Management of Pain Disorders which aligns with the IASP curriculum and articles with state and whole of government policy frameworks • Development, evaluation and implementation of website for consumer management of musculoskeletal pain http://painhealth.csse.uwa.edu.au/ launched April 2013, funded by WA Department of Health with co-leads - Dr's Helen Slater and Stephanie Davies. Monitoring data in the first 10 months post-launch indicate 1.7 million hits with 83,000 visitors from > 82 countries (51% from Australia) • WA Department of Health, Health Networks: 2014 establishment of Pain Health Working Group (for WA) to work with the State Wide Pain Services (WA) forum (established 2009-ongoing) • Working Group Development and implementation of Spinal Pain Model of Care – WA, Department of Health (followed by a suite of policy-into-practice implementation projects; see above) • Regular invited lectures to health professionals (cross-discipline) including: <ul style="list-style-type: none"> - Medical Students - Post-Grad Physio Students - Nursing - Pharmacists - GPs • WAGPET (WA GP Education Training) 	2, 3, 4, 5, 6

Publications * joint publications with Department of Health WA, # Fremantle Hospital

- Slater H, Davies SJ, Parsons R, Quintner JL, Schug SA. A Policy-into-Practice Intervention to Increase the Uptake of Evidence-Based Management of Low Back Pain in Primary Care: A Prospective Cohort Study. PloS One. 2012;7(5):e38037. Epub 2012 May 25 *
- Slater H, Briggs AM, Bunzli S, Davies SJ, Smith AJ, Quintner JL. Engaging consumers living in remote areas of Western Australia in the self-management of back pain: a prospective cohort study. BMC Musculoskelet Disord. 2012 May 11;13(1):69*#
- Briggs AM, Slater H, Bunzli S, Jordan JE, Davies SJ, Smith AJ, Quintner JL Consumers' experiences of back pain in rural Western Australia: access to information and services, and self-management behaviours. BMC Musculoskelet Disord. October 2012, 12:357 *#
- Slater H, Briggs A. Bunzli S, Davies SJ, Smith AJ, Quintner, JL. 'Engaging consumers living in remote areas of Western Australia in the self-management of back pain: a prospective cohort study', BMC Musculoskeletal Disorders 2012, 13:69 *#
- Slater H, Briggs AM, Smith AJ, Bunzli S, Davies SJ, Quintner JL. Implementing Evidence-

Informed Policy into Practice for Health Care Professionals Managing People with Low Back Pain in Australian Rural Settings: A Preliminary Prospective Single-Cohort Study Pain Med, 2014 *#

- Slater H, Briggs AM, Watkins K, Chua J, Smith AJ (2013) Translating Evidence for Low Back Pain Management into a Consumer-Focussed Resource for Use in Community Pharmacies: A Cluster-Randomised Controlled Trial. PLoS ONE 8(8): e71918. doi:10.1371/journal.pone.0071918 *

	Goals
Fremantle Medicare Local	
• Self Training Educative Pain Sessions (STEPS): A multi-disciplinary program targeting adults with persistent pain	1, 2, 3, 4, 5
• Results will feed into a Research Database to contribute to the evaluation of the program being undertaken by Fremantle Hospital and Health Services	5
• Living Well with Chronic Pain: A self management program based on the Stanford model targeting adults living with chronic pain	
• Comprehensive Needs Assessment (CNA): Including focus groups undertaken in the Fremantle ML region to better understand health needs and identify gaps in access to care in pain management	
• Informs all health providers in the region of training available on Pain through Painaustralia and AML Alliance	
Goldfields Midwest Medicare Local	Goals
• Interested in online pain management education targeted to nurses	3
Perth South Coastal Medicare Local	Goals
• Looking to upskill local GP's to enable them to deliver the medical component of STEPS program	2, 3
• Living Well with Chronic Pain: Self-management program based on the Stanford model targeting adults living with chronic pain	
Perth North Metro Medicare Local	Goals
• Self Training Educative Pain Sessions (STEPS): A multi-disciplinary program helping people with pain to improve function and return to a more normal life. In the last nine months the program has provided 288 multidisciplinary pain team appointments to 96 participants	1, 2, 3, 4, 5, 6
• Client outcome statistics evaluated for quality improvement practices and inputted into Research Australia database	
• Mentoring and support to other Medicare Locals and organisations in the development and implementation of local area primary care pain programs, including Bentley-Armadale Medicare Local and Perth South Coastal Medicare Local	
• Upskilling of local GPs enabling them to deliver the medical component of the STEPS Program	
• Multidisciplinary education events across a range of topics including Managing Back Pain Seminar, Inflammatory Arthritis Schedule 8 Opioid and Over the counter Painkiller Misuse – Dealing with the Dilemmas and Inflammatory Arthritis sessions attended by participants from general practice, pharmacy, chiropractors, nurses, podiatrists, occupational therapists, physiologists and other allied health services. WAGPET Registrar training on musculoskeletal conditions is also provided through PNML's Education Program	
• Living Longer Living Stronger (LLLS): strength training program run by physiotherapists targeted at individuals over 50 years of age with chronic conditions who may require higher level of supervision in order to exercise safely. In September 2013, PNML was awarded the inaugural Innovation Award at the WA Council of the Ageing Living Longer Living Stronger annual awards	
• Me Managing Me (MMM): program is delivered by PNML as the only licensed provider in	

Western Australia at Camp Freedom, a camp specifically for young people aged 7-17 with a diagnosed musculoskeletal condition, run by Arthritis WA

- Live Well: peer led program based on the Stanford model for individuals with chronic health conditions
- Healthy Friendships: a chronic disease, peer led, self-management program for people with chronic health conditions. Many individuals who complete PNML's Live Well Program continue into the Healthy Friendships group, encouraging continued support
- Member and participant in Painaustralia facilitated Pain network
- PNML is a member, contributor and participant of the Statewide Pain Services (WA) Forum
- Exhibitor STEPS chronic pain self-management and education program at 2nd World Healthcare Networks Congress, July 2012, Cairns Convention Centre
- Presentation on multidisciplinary primary care management of chronic pain at Australian Annual National Primary Healthcare Conference, November 2012, Adelaide Convention Centre
- Key note presentations at the National Medicare Locals' Pain Prevention and Management Roundtable, Melbourne, April 2013. CEO, Pain Specialist and Chronic Pain Program Manager attended and facilitated two presentations on the PNML STEPS Program and how the program can be replicated at other Medicare Local sites around Australia
- Participation in State Wide Pain Services Forum – Interprofessional Education Forum, April 2013
- PNML CEO presented PNML STEPs program on ABC radio's Norman Swan Health Report, November 2012

<u>Princess Margaret Hospital (PMH)</u>	Goals
Child and Adolescent Pain Service (CAPS) at PMH: WA DOH confirmed funding in ~ Oct-Nov 2013, approximately \$600K recurrent annual funding, following gap analysis 27.08.2009 at SWPS (WA) and business support with broad interprofessional commitment from PMH healthcare workforce, SWPS (WA), and with consumer support	1, 3
<ul style="list-style-type: none">• Complex Pain Service commenced medical clinics in December 2013• Currently recruiting MD team and renovating clinic space in heritage building• Plan for multidisciplinary team to be fully operational May/June 2014• First group intervention will be "PACE Telehealth". This is a research program funded by a Telethon Allied Health Fellowship. It is currently at Ethics final approval stage and we will hopefully be recruiting subjects from late April	

<u>South West WA Medicare Local</u>	Goals
<ul style="list-style-type: none">• Clinical support coordinator has background and special interest in Neuropathic pain in regional areas of WA	3

SOUTH AUSTRALIA

	Goals
<u>Australian Medical Association (SA)</u>	1
• State policy identifies a major gap in access to chronic pain services, although SA Health is yet to endorse or support the National Pain Strategy.	1
<u>Country North SA Medicare Local</u>	Goals
• Pain Nurses Interest Group and pain program link • Webinars required for ML team & nurses in rural SA • A Nurse Clinic to provide early intervention, education and referral as required is in development with funding through AML Alliance. Part of a national “Advancing Nurse Clinic in Primary Care” project	3
<u>Health in Our Hands</u>	Goals
• A volunteer health organisation based in Whyalla, runs chronic pain management workshops developed by Stanford University in the US. The organisation is understood to hold the only license for these Stanford programs in South Australia. In 2013, the organisation developed a partnership with Country North SA Medicare Local, which will assist with promotion of the program within the community and primary care	2
<u>Southern Adelaide-Fleurieu-Kangaroo Island Medicare Local</u>	Goals
• Pain management referral pathways and resources	3

TASMANIA

TAS Overview

Tasmania Medicare Local has employed a pain program manager who is facilitating pain education for primary care health professionals to expand access to services.

Speaking at the APS Painaustralia Symposium: Living Well with Pain in April 2014, Chief Medical Officer, Dr Chris White pointed to the need for reform of Medicare to support best-practice management of chronic pain.

	Goals
COTA Tasmania	1, 2
<ul style="list-style-type: none">• Provision of peer education on chronic pain management: Programs delivered for organisations such as Beyond Blue, National Prescribing Service, Tasmanian State Fire Commission and on Financial Elder Abuse• Advocacy role for older people	
Tasmania Medicare Local	Goals
<ul style="list-style-type: none">• Chronic pain program officer employed by TML - enabled a group of GPs to attend the pain webinar series• Participation in the Painaustralia APS Consumer Day, Hobart in April 2014• New private pain management clinics provided in Devonport and Burnie by Precision Ascend Pain Management Program (Dr Richard Sullivan)	2,3

Please send all responses and comments to:

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