

Chronic Pain Care

Workshop Report

25 February 2021

Workshop Summary

Purpose

The purpose of this document is to provide a high-level summary of the Chronic Pain Care Workshop.

Workshop

The workshop was held on 25 February and was attended by over 100 participants both in-person at the National Wine Centre and online. The aim of the workshop was to bring together consumers, tertiary and community based clinicians, and other professionals to discuss opportunities to improve care in South Australia and inform the priorities and give direction to the new Statewide Chronic Pain Clinical Network. .

Presentations

There were three presentations:

- **Katie Billing**, Executive Director, Consumer and Clinical Partnerships, CEIH. Katie provided an overview of the work of the CEIH, and the Statewide Clinical Networks.
- **Anne Burke**, Network Lead of the Statewide Chronic Pain Clinical Network. Anne introduced the Statewide Chronic Pain Clinical Network and provided some examples of opportunities to improve care in SA.
- **Rebecca Aisbett**, Business Solutionist, CEIH. Rebecca presented the data story, i.e. what is the data telling us about chronic pain care in SA.

Workshop Participation Sessions

Participants provided their input by providing answers to the following questions:

1. What does the ideal state of chronic pain (in 10 years' time) look like?
2. What are the gaps and barriers that need to be overcome to achieve the ideal state?
3. How do we achieve the ideal future state? What do we need? What are the enablers?
4. What priority areas should the Statewide Chronic Pain Network focus on in its first 3-5 years?
5. What should be the first priorities (first 12 months)?

Workshop Participant Input

There were common themes across responses to all the questions. These were:

- **Collaboration/Partnerships:**
 - better collaboration and communication between clinicians e.g. multi-disciplinary teams and specialists supporting community providers
 - collaboration between consumers and clinicians and ensuring consumers are partners in their care
 - partnerships between organisations to ensure consumers receive seamless care
 - collaboration between metro and rural clinicians to ensure rural consumers have equitable access to care.
- **Access to care:**
 - more timely access to care
 - increased services for rural consumers to ensure equity of access to care
 - greater access to specialist care and advice (including through telehealth and liaison/shared care with community services)
 - need easy to access information for consumers and clinicians on where services are located and how to access care
 - more services, especially in the community, for children
 - equitable services for Aboriginal and Torres Strait Islander (ATSI) and Culturally and Linguistically Diverse (CALD) communities.

- **Education:**
 - clinicians are educated to provide better care and to better explain chronic pain to consumers.
 - chronic pain has a greater emphasis in undergraduate programs
 - consumers and consumer support groups are educated on how to prevent and manage pain, and about pain drugs (e.g. opioids)
 - community education, in different languages, to improve health literacy, raise awareness of pain and pain prevention, and reduce stigma surrounding chronic pain
 - better understanding of the mental health/psychological aspects of pain
 - accessible information with the latest evidence for health professionals.

- **Resourcing/Workforce:**
 - more funding and staffing for chronic pain care
 - funding models that incentivise recovery rather than clinical activity
 - increased availability and use of allied health and nurse practitioners in care
 - resourcing models that allow longer consultations and incentivise collaboration/shared care
 - more efficient use of resources and reduction in duplication.

- **Services & Service Design**
 - clear pathways for all consumers (including those living in rural areas)
 - more care provided in home/community settings
 - greater allied health involvement
 - consumers are involved in the design of care and care models
 - development of a statewide model of care
 - greater emphasis on prevention and early intervention.

- **Research, Technology and Data**
 - greater use of telehealth, including for shared care
 - quality use of medicines, science and technology in pain management
 - better data and access to data to inform care design and delivery
 - a platform that enables better collaboration between services and clinicians
 - more research and research translation.

It is important to note that the list above is only a very high-level summary of input provided by participants. All input has been captured and is available for the Statewide Chronic Pain Clinical Network to use in its work.

Next steps

The Statewide Chronic Pain Clinical Network Steering Committee will consider the information that has been provided and use it to inform its work plan and priorities.

Thank you

The Statewide Chronic Pain Clinical Network Steering Committee and the CEIH would like to thank everyone that gave up their precious time to come together and help inform the direction of the Statewide Chronic Pain Clinical Network. We look forward to continuing to work with the chronic pain care community in South Australia to improve care.