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Stories of change

IMPLEMENTING VOLUNTEER LED GROUP PAIN MANAGEMENT COURSES AT CLOUGH GP SURGERY

Creating a new offer for people who were experiencing pain was given full clinical support and buy in from the outset across the multidisciplinary team (MDT).



What we did

Two years ago, a multidisciplinary team (MDT) was set up at Clough GP Surgery. This meant patients could see a GP, physiotherapist, advanced nurse practitioner, social worker or pharmacist within their own GP surgery. Versus Arthritis already ran pain management courses in other places led by volunteers, so it was mutually beneficial to take this idea forward, with full clinical support and buy in across the MDT. A social worker and social work assistant invited 65 patients from the surgery to join two separate programmes as a trial. Letters and leaflets were sent out, with an optional open evening before the course for people to help decide if it was for them. Two six week pain management courses were then successfully delivered by Versus Arthritis Volunteers, both at capacity of 15-17 people.

Our motivation

10% of patients in one surgery were living with pain such as back pain, fibromyalgia and arthritis and not getting support. Nothing was available in the community to help people with persistent pain. People said they needed help managing their pain. There was a policy drive to reduce inappropriate pain medications in the area.



The difference we are making

Reduced patient attendance at the surgery. Reduced prescriptions and medications. Patients reported reduced isolation. Good attendance at physical activity groups. Post-course support was offered, including local support groups, walking groups and four Tai Chi programmes. These have been specifically set up for people to continue to self-manage through community activities.

What's next?

I am hoping to get it back up and running as soon as we can after covid.





Making change happen

It was such a bonus setting this up as an MDT, because all the services are in the same surgery. If we weren't connected like that, I don't think it ever would have happened. We wouldn't even have known what the drivers were that we could use to get conversations started unless we were set up this way.

Once we had done our mapping and come up with a plan, it was all about communication. We knew it would start small. It was really just phone calls to get things set up. We connected with Versus Arthritis and agreed how things could work. We agreed to each take on some of the costs like recruitment, resources, volunteer expenses, venue and refreshments. We need to use the voluntary sector more, because they have expertise of their own outside of the clinical world. For us, it was Versus Arthritis, but every area will have things they can tap into. Every GP surgery will have a list of people living with pain. Peer led trainer volunteers have brilliant rapport because they have lived experience too; it makes a big difference.

I have told colleagues about this work, and others have started looking into similar things. I couldn't believe the amount of energy and speed with which it has all happened. We're restricted by things like volunteer capacity and the list is still very long. I am hoping for 3-4 programmes each year with new support groups for people after the programme is finished.

Now GPs are recommending it, that endorsement makes a huge difference in terms of uptake. On one occasion we had a 86 year old who went into see the GP, who walked her down the corridor and into the pain management programme, which she completed. Once you have the patients and the buy-in from clinicians, positive things happen.

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“Usually there is no one proactively scrolling through all these patient records to look for solutions. We did some mapping and came up with a plan.”

Top tips

- Information and evidence need to be out there. Try a newsletter for everyone to share what is coming up with the drivers for change and local plans.
- Get into the practice-based learning time for clinicians and get in front of them to talk.
- Show medical professionals exactly what they'd be sending patients to.
- Everyone needs to believe it will make a difference. Get everyone you can on board.



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