

Managing chronic pain via an IDT during a medical specialist shortage.

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Abstract



- Chronic pain patients had been managed in a haphazard way in Hawkes Bay for many years, due to a shortage of medical specialists and an unawareness of how large the burden of chronic pain is on the health system.
- An audit of long-term opioid use in primary care started the journey of providing a “fresh look” chronic pain service which focused on a IDT approach, instead of the traditional medical approach.
- This team has now been delivering this service for 3.5 years with great outcomes.

Outcomes



- Primary care teams feel more supported in managing chronic pain patients. *“the support Vanessa has given to both myself and my chronic pain patients over the last 3 years has been amazing. She is approachable and accessible and has improved the health outcomes of 100’s of patients in Hawkes Bay already.” GP*
- Shorter wait time for patients to be seen in chronic pain clinic.
- Patients feel more supported and have a better understanding of their pain.
- 85% of patients seen achieve their outcomes without the input of a medical specialist.

Addressing Health Inequities



- The Hawkes Bay chronic pain service is contracted to ProActive Rehab and is therefore provided in the community, it is also provided across 2 locations.
- This removes the burden of having to get to the hospital, find a park and pay for parking, home visits or telehealth appointments can be arranged also.
- The service is fully funded and hence no cost to the patients.
- The holistic approach of this team encompasses all cultures and beliefs and works with other services such as Ministry of social development to fund other services required.

Implementation / Translation to Practice



- This new service started with a multidisciplinary team developing a local chronic pain pathway and identifying the key members of the chronic pain team.
- The team includes physiotherapy, occupational therapy, clinical pharmacist, pain psychologist and clinical nutritionist.
- The service also contains a 6 week group program that is run as part of the package.
- Staff recruitment and retainment are always issues, however this service is such a positive way of working that those involved are fully engaged and committed.
- This service can easily be translated to other areas with a sharing of resources and an IDT that has clear understanding of the desirable outcomes.
- The service is self funding from the decrease in demand for both primary and secondary care.

