

Scottish National Residential Pain Management Programme

Newsletter Issue 4 –December 2017

Welcome to the fourth edition of the Scottish National Residential Pain Management Programme newsletter. In addition to keeping you up to date on developments within SNRPMP we also hope to include in the newsletters other news and updates from around Scotland. **This edition features activity from both NHS Tayside and NHS Borders.**

Merry Christmas

The team at SNRPMP – Anne, Emma, Fraser, Gillian, Jennifer, Kimberly, Lars, Lisa and Rachel wish everyone within all the Scottish Pain Services a very happy Christmas and would like to thank you all for your ongoing support throughout 2017.



Website

It is almost a year since the website was launched (www.snrpmp.scot.nhs.uk) and we have had a positive response from both staff and patients. In November, we had a film crew in to capture some patient experiences of attending SNRPMP and these will be available on the website in the first part of 2018 – so keep your eyes peeled.

AHP and Psychology Networks



The Scottish Chronic Pain AHP Network is now firmly established with two events taking place in 2017. These events have been very well attended by AHP pain clinicians from throughout Scotland. A number of work streams involving sharing practice, evaluating outcomes and exploring learning needs are ongoing and Emma Mair (Clinical Specialist Physiotherapist, NHS Ayrshire and Arran) shared some of this work at the NBPA meeting in November.

Given the success of these meetings, Lisa Reynolds (Clinical Psychologist, SNRPMP) is organising the first meeting of pain management psychologists in January 2018 at Allander House, Glasgow.

British Pain Society: Pain Management Programme Conference, Glasgow



The SNRPMP team, alongside the Glasgow PMP played host to the British Pain Society two-day PMP conference on 14th and 15th September 2017 at Glasgow Caledonian University. This event was a great success, with feedback including;

"...one of the best conferences I've attended" and not to forget the Scottish hospitality...

"The social evening was amazing. I have never been to one as good at a conference!"

Dr Lars Williams summary of the conference can be found on the website <http://www.snrpmp.scot.nhs.uk/pmp-conference-glasgow-2017-a-great-success/>

Referral Form

A new SNRPMP referral form was shared at the start of this year and is available on the website (link below). From January 2018 we will no longer accept any referrals completed on the old forms.

<http://www.snrpmp.scot.nhs.uk/healthcare-professionals/referral-guidelines-and-forms/>

Save the Dates in 2018

Scottish AHP Chronic Pain Management Network Event

For physiotherapists and occupational therapists

**Wednesday 16th May 2018 &
Wednesday 31st October 2018**
SNRPMP, Allander House, Glasgow

Scottish Psychology Chronic Pain Management Network Event

For psychologists in pain services

Thursday 18th January 2018
SNRPMP, Allander House, Glasgow

Scottish Pain and Research Community (SPaRC)

Eighth Annual Scientific Meeting

Friday 23rd March 2018
West Park Conference Centre, Dundee

<http://medicine.dundee.ac.uk/scottish-pain-research-community-sparc-eighth-annual-scientific-meeting>

Around Scotland

The team at SNRPMP are keen that these newsletters start to feature events from throughout Scotland and in this edition, we are delighted to have features from NHS Tayside and NHS Borders. Thanks to Lynne Sheridan and Sonya Campbell for your contributions.

NHS Tayside

Reflections from Scotland's newest PMP

The Tayside Pain Management Programme officially started in February 2016, with the first patients assessed for the programme in November 2015. It is an 11 week programme, with input from Clinical Health Psychology, Physiotherapy and Pain Specialist Nurses. There was a steep learning curve for all involved in setting up the programme and we are very grateful to the other Scottish services that helped us along the way, especially the Glasgow Pain Management Programme, who allowed our team to gatecrash their programme on several occasions and answered many silly questions! We have also bonded well as a team, from honing our telepathic skills during the assessments, to discovering a shared love of gin at the recent Pain Management Programme conference in Glasgow!

Outcomes and patient feedback have been generally positive so far, with one patient even penning his own poem to express his gratitude. We currently half way through Group 6 and are now at the stage of looking to develop and improve the programme. We have recently introduced the use of FLO, a text-based system developed to support people manage their own health conditions. We hope to present the results of this trial at upcoming conferences so look out for our poster!



If you have any enquiries about the Tayside Pain Management Programme, please contact :

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NHS Borders

Pain Management Programmes – Can we laugh?

A few years ago I attended a British Pain Society PMP conference and wandered into a workshop on laughter not knowing what to expect. Post workshop I found myself talking to fellow delegates about how the workshop had broken down social barriers and created a sense of bonding. Feeding this back to my team in NHS Borders we began to reflect on our PMP, and noted that the groups which laughed most, appeared to make the best progress.

We looked through the scarce literature, a re-occurring theme was that patients felt humour was often underused by professionals, and professionals worried about using it inappropriately. Though humour was sometimes cited as an avoidant coping tool, most considered it as a positive strategy to release emotion (positive or negative by use of laughter) and to express tricky thoughts and feelings to others in a way that did not risk damaging the relationship. The main theory cited in the research was the Humour–Health hypothesis, which

proposed that there was a positive link between humour and health, and that the impact could be direct or indirect (Martin & Lefcourt 2004; McCreddie & Wiggins 2007).

We liaised with Robin (who ran the original BPS workshop) and he volunteered his time to help us investigate the role of laughter as a coping mechanism for chronic pain, and perceptions to it being incorporated into PMPs. Workshops were then offered to individuals who had previously completed our PMP programme and their significant other.

The sessions were popular, and Forty -four individuals participated, they rated the sessions highly for meeting other people and on overall experience. Nineteen also took part in focus groups. The common theme discussed was that attending the sessions helped enhance their insight. As one lady stated *"I think it helped in a variety of ways, it made me realise that laughter, it wasn't just what he had taught me, it made me realise that when I go to my dancing class we laugh a lot. I forgot all about my pain. So I do think laughter is helpful. It is quite a positive tool."*

They talked about how it had enhanced their mood, as one gentleman stated *"I'm here to support my wife. I did notice after the first session she was noticeably ... uplifted during the following week."* Some talked about experiencing physical changes as captured by this participant's quote *"Happy endorphins running about, that definitely makes a difference"* and others described being distracted from their pain.

They also talked about gaining awareness of social influence, for example how emotions are contagious, as one lady stated "because a smile can travel and its strange but they do". They also discussed their fear of being judged and that this was a barrier to using laughter techniques. Some commented that they generally felt guilty about laughing, in case people thought they weren't in pain. Finally they talked about how important individuality was to them, particularly the need to have a choice of pain management tools as everyone is different. In summary, for our participants, the direct benefits of humour appeared to have included enhanced mood and distraction from their pain, while the indirect benefits included enhanced ability to cope, promotion of individuality and enhanced insight of social influences.

Our findings also suggest that laughter within a PMP may be an indicator that members, feel safe from judgment within that group. Consequently, we hypothesised that they may feel safer to talk about difficult topics, gain more insight and that might help them make positive adjustments in their lives. It should however be noted that the conclusions we can draw from this are limited as our group size was small, all those with chronic pain had previously completed a PMP and had chosen to opt in. It however seems, that including

humour/ laughter within PMPs may be of benefit for patients with chronic pain, we recommend more investigation.

Sonya Campbell, Clinical Psychologist, NHS Borders

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We welcome your feedback about the service and ideas for future newsletters.

If you would like to write a feature for future newsletters please let us know.