



The Need for a Chronic Pain Management Program in an Outpatient Setting

Mansi Patel, OTS; Valley McCurry, PHD, MBA, OTR/L, FALOTA

Department of Occupational Therapy | University of Alabama at Birmingham

Jamie Wade, MS, CCC-SLP, MSHA, LSSGB | UAB Medicine Outpatient Rehab Services

Introduction

- Chronic pain is the number one cause of disability and disease worldwide (Treede, 2015).
- Chronic pain is also considered a public health issue around the world and accounts for up to 20% of physician visits.
- Pain lasting over 3 months affects daily life, mental health, and physical function.
- According to current research, one of the main goals of clients with chronic pain is to improve occupational function (Amris et al., 2019).
- The general role of an OT is to improve engagement in meaningful occupation and for clients with chronic pain to reduce hindrance and distress caused by pain and improve clients' well-being.
- Patient education regarding chronic pain management is vital and its impact on the client's quality of life could improve occupational participation.
- The restricted occupational participation and its impact on the client's motivation to participate in the required habitational tasks also negatively affect the client's quality of life (Lagueux et al., 2018).
- Decreased occupational participation due to chronic pain can negatively influence several lifestyle factors like sleep quality, physical activity, stress, and BMI, which directly affect a client's quality of life.
- Previous research shows the multidisciplinary approach effective for:
 - Increased occupational participation
 - Provide holistic care
 - Improve carryover of strategies to the home environment

Methods

- To carry out this needs assessment, the information was gathered through interviews with UAB Medicine occupational therapists, physical therapists, and pain physicians, addressing how the clinic currently assesses and treats patients with chronic pain.
- The interviews with occupational and physical therapists focused on their approaches to treating patients with chronic pain and whether current treatments allow clients to return to their everyday activities in the short or long term.
- This project's secondary focus is assessing the multidisciplinary approach and how it will fit into the clinic's current rehabilitation setting. There are reasons for readmission to the outpatient rehabilitation clinic related to chronic pain.
- The evaluation is formatted as a SWOT analysis, incorporating a framework to recognize the needs assessment's strengths, weaknesses, opportunities, and threats.
- This thematic analysis indicates whether enough information is gathered to assess the need for a standardized chronic pain management program and support its development.

Results

Strengths	Weaknesses	Opportunities	Threats
Experienced occupational and physical therapist at UAB Medicine	Repeat referrals of chronic pain client into outpatient therapy	Partnering with primary care and providing holistic care to decrease repeat referrals and break the cycle of recurrence into outpatient therapy.	Low reimbursement to cover ongoing costs which can affect sustainability. The upfront cost of chronic pain programs such as training, space, staff, equipment, and marketing.
Therapists currently provide HEP to all the patients during the evaluation visit.	Unable to monitor accountability to HEP and follow through in home settings	UAB has acquired a new system called EPIC which allows remote monitoring of follow-through	Client's time commitment for chronic pain program
Collaborative physicians available at UAB Medicine	Lack of facility and access to therapy due to influx of referrals	UAB acquired St. Vincent's hospital which allows access to their ambulatory therapy department	Some insurance policy payers don't cover occupational therapy.
Online Med Bridge education system	Education gaps with patients which impacts follow through in home or community setting.	Revising current education provided to patient to ensure follow through and compliance	Clients' ability to participate in a set chronic pain program due to financial issues, insurance access, transportation
Access to spiritual health and pain psychologist within UAB Medicine	Decreased understanding on the role of an OT among physicians	Provide education to referring providers on the role of an OT through lunch and learn, physicians' communication, or Med Bridge system.	Access to OT specialty such as chronic pain management
	Current therapist's interest to treat chronic pain at UAB Medicine.	Measure patient outcomes such as decreased ER visits or hospitalization, and increased QOL.	Recruitment of therapist interested to treat chronic pain.

Interview themes:

Administration's perspective :

- Reimbursement: The implementation cost includes the initial and ongoing cost of running a set chronic pain management program.
- Productivity: Concern raised regarding decreased productivity while aligning schedules among all healthcare professionals in a team approach
- Collaboration: Collaboration with spiritual health to address chronic pain-related needs.
- Education: Educate physicians on the scope of OT practice to allow referral to appropriate therapy services.
- Access: Healthcare professionals within UAB Medicine are available.

Physician's perspective:

- Reimbursement: concerns regarding reduced reimbursement due to the team approach and its negative effect on the sustainability of a chronic pain program.
- Productivity: other commitments that could disrupt their availability and lead to inconsistent care provided
- Collaboration: the possibility of collaborating with the client's primary care physicians to ensure clients receive consistent care.
- Education: a lack of follow-through in the home setting due to client education gaps.
- Access: All three physicians mentioned that UAB Medicine can access pain psychologists to address clients' psychosocial concerns.

Therapist perspective:

- Reimbursement: The reimbursement for the time and resources required for an interdisciplinary chronic pain management team would be decreased.
- Productivity: decreased productivity as it would require nonbillable time allotted to team meetings.
- Collaboration: Collaboration with a pain psychologist to address emotional needs related to chronic pain management.
- Education: Empower clients through education regarding their pain and its mechanism and provide coping strategies to improve self-efficacy.
- Access: access to pain specialty to address client's needs.

Discussion

Limitations:

- A small number of participants
- Not included perspectives of clients dealing with chronic pain
- Not incorporating spiritual health and pain psychologists

Implications:

- The study supports the use of a multidisciplinary approach to treat chronic pain to provide holistic care
- A multidisciplinary team approach to chronic pain management allows OTs to provide clients with coping skills, relaxation techniques, and training in cognitive-behavioral techniques and mindfulness.

Future study suggestions:

- Investigate ways to improve client compliance
- Investigate financial feasibility such as cost and benefit

Conclusion

- The findings of the study revealed that there is a need for further research, and no concrete need for such a chronic pain management program was suggested.
- All the professionals interviewed agreed that the use of a multidisciplinary approach for chronic pain management promises to enhance clients' functional independence to perform meaningful occupations and improve their QOL.
- In conclusion, while the execution of a set chronic pain management program through a multidisciplinary team approach indicates enhanced daily functional outcomes for outpatient therapy, addressing various challenges identified regarding client commitment, financial needs, and various professional availability is vital for the chronic pain management program's success.

References

Amris, K., Bülow, C. V., Christensen, R., Bandak, E., Rasmussen, M. U., Danneskiold-Samsøe, B., & Wæhrens, E. E. (2019). The benefit of adding a physiotherapy or occupational therapy intervention program to a standardized group-based interdisciplinary rehabilitation program for patients with chronic widespread pain: a randomized active-controlled non-blinded trial. *Clinical Rehabilitation*, 33(8), 1367–1381. <https://doi.org/10.1177/0269215519843986>

Lagueux, É., Dépelteau, A., & Masse, J. (2018). Occupational therapy's unique contribution to chronic pain management: A scoping review. *Pain Research and Management*, 2018, 1-19. <https://doi.org/10.1155/2018/5378451>

Treede, R. D., Rief, W., Barke, A., Aziz, Q., Bennett, M. I., Benoliel, R., Cohen, M., Evers, S., Finnerup, N. B., First, M. B., Giamberardino, M. A., Kaasa, S., Kosek, E., Lavand'homme, P., Nicholas, M., Perrot, S., Scholz, J., Schug, S., Smith, B. H., Svensson, P., Wang, S. J. (2015). A classification of chronic pain for ICD-11. *Pain*, 156(6), 1003–1007. <https://doi.org/10.1097/j.pain.000000000000160>

Acknowledgement & Contact information

Special thanks to: Emily Delzell

Contact information: Mansi Patel OTS: patelmj@uab.edu