

The Navigator Tool –Here's What You Need to Know

Pain Concern researcher Renée Blomkvist shares her thoughts on the Navigator Tool study. Renée joined Pain Concern in 2017 and took the study from finalising the design of the tool, through to applying for approval from the NHS research ethics board, to conducting the interviews and writing up the results. She spoke to health journalist Judy Ozkan.

What's this study about?

We have known for a long time that people living with pain have struggled to get the best from their GP or clinic. Persistent pain affects not only your physical health, but can also your mental and even your financial status, and this creates a vicious circle that can make matters worse. In an earlier study we identified barriers that were preventing people discussing their circumstances or feelings during appointments and developed a communication aid or 'tool' to make it easier for both sides to talk. This new study was a way for us at Pain Concern to understand if the tool was useable in primary care and if it met the aims we wanted it to meet.

What is the Navigator Tool?

It's a communication aid which can be used in a GP or clinic setting to encourage positive twoway communication. Printed and online copies are available and the aim is prepare people with pain and their health professional to have a constructive conversation. It can be difficult for people to talk to their GP about things like depression and loneliness so there are prompts to help broach these areas and suggested questions to ask. People are asked about their feelings and mental well-being in a structured way and this can help doctors pinpoint areas for additional help. There is also a section for goal-setting which is useful for people who are trying to get to grips with techniques such as pacing.

What were you looking into?

Firstly, we wanted to see if the tool was feasible to use during doctors' appointments and did what we wanted it to do in a straightforward way. We also wanted to see how both health professionals and people with chronic pain used it in real-life settings. We were also keen to see how communication was influenced by the tool, as we were hoping it would act as a bridge between health professionals and people living with pain. We hoped it would and help promote the idea of self-management which can be difficult to talk about in a constructive way.

What did you find out?

Using the tool cover-to-cover wasn't the best option for all of the people who took part in the study, but using different parts of the tool was useful for many. We found that the tool opened up conversations to include wider, lifestyle, aspects of living with pain and it also highlighted a range of self-management options in a constructive way. Appointments were often said to be more efficient and engaged for both parties. It also gave people a sense of hope, and encouraged them to plan their lives better. Although it wasn't suitable for everyone, flexibility and being creative in which parts to use, were the key to helping some people get the best from it.

What were the most important findings?

We identified four themes as key aspects of good communication and fit well with current trends in self-management of chronic pain. We also found that the part of the tool where people are encouraged to talk about their feelings was especially useful as it helped people with chronic pain map out their concerns or identify hidden concerns. It also brought up a lot of concerns that they could work on.

How will the study help people living with long-term pain?

Long-term conditions such as chronic pain can create other problems such as depression or sleeplessness which can make their pain worse. People with pain, tend to focus on finding treatment to stop their pain and not the other features that are affecting them. Our tool gives people with pain permission to talk about their whole condition, not just the medical part, and increases the likelihood that they will be signposted to relevant services. Acknowledging and accepting that having pain isn't just about having pain, but involves seeing the bigger picture will hopefully make the condition easier.

How should people use this tool and what can they expect?

Flexibility is the key and we found that people who put the most effort into it, got the most out of it. People should feel comfortable with using it and taking it to their primary care professional, be it their physiotherapist, pharmacist, GP or practice nurse, to start a conversation. Many patients used the form at home and identified aspects of their lives such as feeling isolated that they hadn't really thought about before. By engaging with their wider circumstances, problems associated with chronic pain became tangible and easier to describe to health professionals.

Where can I find out more?

The study, a short report on the study, the Navigator Tool, and a wealth of in-depth, interactive material on self-management are available from <u>www.painconcern.org.uk</u>.