

The Navigator Tool Intervention; A pilot evaluation of a novel tool to enhance communication in consultations about chronic pain in primary care



I am Renée Blomkvist, for the past two years I have been involved in testing the Navigator Tool Intervention for Pain Concern, in Scotland. The Navigator Tool was developed to improve communication between GPs, healthcare professionals (HCPs) and patients in primary care. Here is an overview of the study and its findings.

Chronic Pain and primary care

Chronic pain is one of the most common health conditions in the UK, and most people's pain is managed in primary care. Self-management is known to help people with chronic pain, but Pain Concern's previous research showed that it is often not well supported in primary care. The Navigator Tool Intervention (NTI) was developed to support self-management of chronic pain by preparing both patients and healthcare professionals for appointments in primary care. Ethical approval was granted from the NHS Research Ethics Committee (REC) and all participating health boards.

The Navigator Tool Intervention

The Navigator Tool aims to ensure each appointment is focused on the most important concerns to the person with pain. Treatment and care are planned from the medical angle but also take into account psychological and social factors, as these have been shown to have a great impact on chronic pain. It aims to prepare the person with pain for their appointment by giving them information and suggesting concerns to raise. By also developing the health professionals' skills in supporting self-management, the intervention helps both patient and professional to make the best use of the appointment time.

How did we test it?

Five healthcare professionals in different areas of primary care were trained in supported self-management and used the Navigator Tool with their chronic pain patients for three months. The feasibility of using the tool was tested in a Randomised Controlled Trial of 35 patients. Feedback forms and interviews were completed to assess the usability of the intervention, with a focus on satisfaction with communication, and analysed using grounded theory.

What did we find?

The study found that the tool has the ability to facilitate four important aspects of communication in appointments about chronic pain:

- Enabling patients and HCPs to see a bigger, more holistic picture of the pain;
- Leading to engaged efficient appointments;
- Highlighting a range of self-management strategies; and
- Facilitating positive emotions.

Outcomes varied between the HCPs. A breakdown of the outcomes at the specific sites can be found in the full report. Here are the overall outcomes across the sites.

Enabling patients and HCPs to see a bigger, more holistic picture of the pain

Two HCPs found that using the tool with patients introduced areas of living with pain that would not normally be covered in a routine appointment. These included psychological elements to the pain as well as financial and social concerns which impacted the patients' ability to self-manage. Patients reported feeling more positive in speaking about these issues with their HCPs, as HCPs subsequently gave constructive advice. Some patients also said they would not have asked these questions without being prompted by the tool.

Leading to engaged, efficient appointments

Two HCPs reported that patients using the tool discussed self-management sooner than they would normally have expected and focused their appointments on just a few issues. Another HCP found that the tool highlighted the need for one patient to be referred to a different service, and with another patient it ensured that all concerns had been addressed by the end of the appointment. Patients from across the sites valued being able to prepare in advance as it made them feel they were not wasting appointment time, and it also served as a reminder for what issues to discuss.

Highlighting a range of self-management approaches

When patients had used the tool before their appointment, it helped HCPs to signpost patients to other services. Patients reported following up on identified self-management techniques, ranging from: reducing feelings of isolation; becoming more active by taking up sewing; seeing a GP about iron levels and changing medication to aid sleep.

Facilitating encouragement, planning and hope

The tool identified new areas to work on and served as a reminder of what had been achieved. One HCP used the tool to reflect with her patient how much the patient had achieved in their pain management journey so far. Other patients used the tool as a source of inspiration, identifying areas of their pain management they could work on.

Limitations to its use in primary care

The main limitations to using the tool are that it may not be appropriate for some patients, being literate and motivated is key, and HCPs need to be flexible and creative in using the different parts of the tool with different patients. Often HCPs chose which parts of the tool they would use with patients, rather than using the whole tool. Most found the My Pain Concerns Form to be the most helpful part, as it contained a lot of key or vital information. The impact of the tool on appointment time varied between the sites.

What does this mean?

This study provides encouraging examples of how the NTI can be used to broaden conversation in primary care to incorporate psychosocial aspects of pain. Both HCPs and patients felt this was helpful. The aim was to develop and test the NTI in primary care, and while our sample size was too small to give a definite measure of the NTI's usefulness in

improving clinical outcomes, we have shown that it appears to have constructive influences on the content of appointments, and we have highlighted several changes to the tool that might improve these further.

What happens now?

The My Pain Concerns Form was found to be the most useful component of the tool, and will be available on Pain Concern's website for HCPs and patients to use, along with other self-management aids.

In order to fully assess the benefits of using the NTI, a further evaluation study is needed. Failing that, further use of the NTI, in real-life consultations, with on-going feedback on useability and practical benefit would be helpful. Plans are therefore ongoing to encourage further use of the NTI in primary care.

The project was funded by The Health and Social Care Alliance and the Edinburgh and Lothians Health Foundation and builds on earlier research by Pain Concern which identified communication barriers to people living with chronic pain. The Scottish Intercollegiate Guideline Network (SIGN)'s advice for chronic pain has highlighted self-management as a recommended treatment option, a stance that is mirrored in the Scottish Government's allocation of £2 million to promote self-management approaches to chronic and long-term conditions. The Navigator Tool can help patients understand how pain is affecting them and give health professionals a clearer focus on areas to address. The research project features in a special edition of Airing Pain to be broadcast on 2nd October 2018. All our resources, as well as the full research report, are available from Pain Concern: www.painconcern.org.

If you would like more information about the Navigator Tool or the study, please contact Pain Concern though phone or email, or visit our website.

Best wishes,

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