

# Wall to wall Health Coaching: New Approaches to Chronic Pain

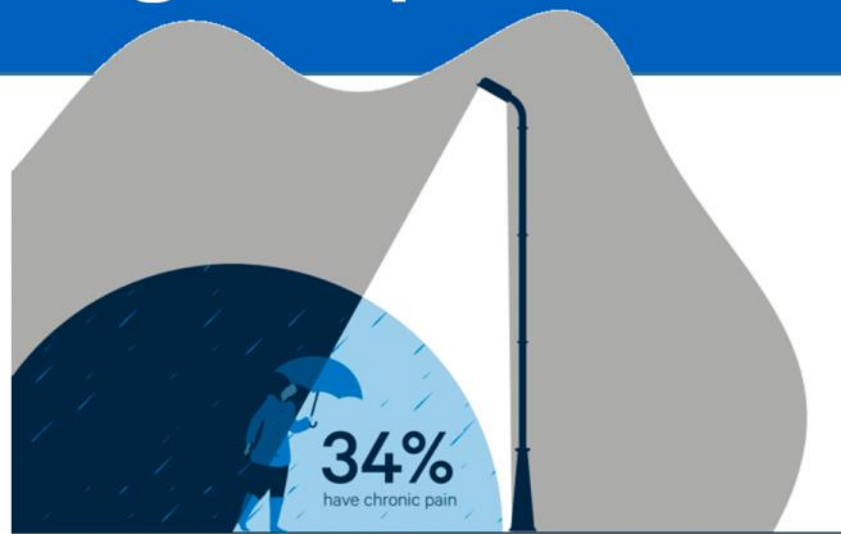
Ollie Hart and Adam Davies

# Introduction

- Chronic pain – the impact
- Implementing advances in pain science and a health coaching approach
- Outcomes with case studies, service evaluations, patient and stakeholder feedback
- Next steps



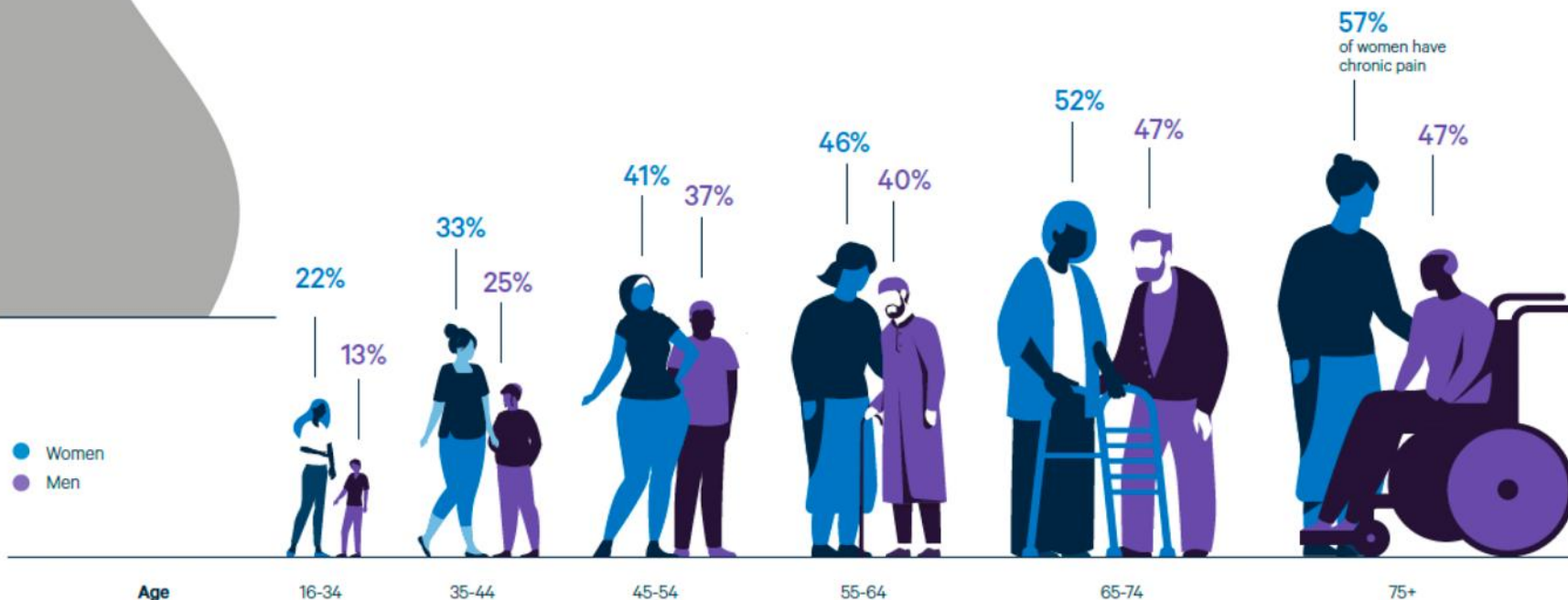
# High-impact chronic pain



22%  
Low-impact  
chronic pain

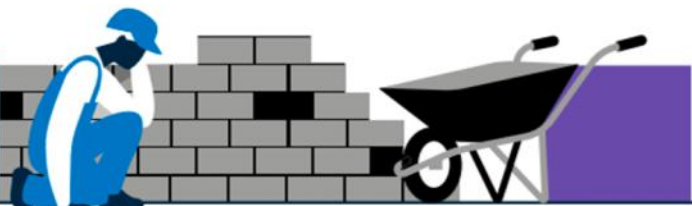
**12%**  
High-impact  
chronic pain

About 8 in every 10 people (84%) with chronic pain report that at least some of their chronic pain is in the neck or shoulder, back, limbs or extremities – all sites where pain is most likely to be musculoskeletal.



High-impact chronic pain

**34%**  
in paid employment  
or self-employed



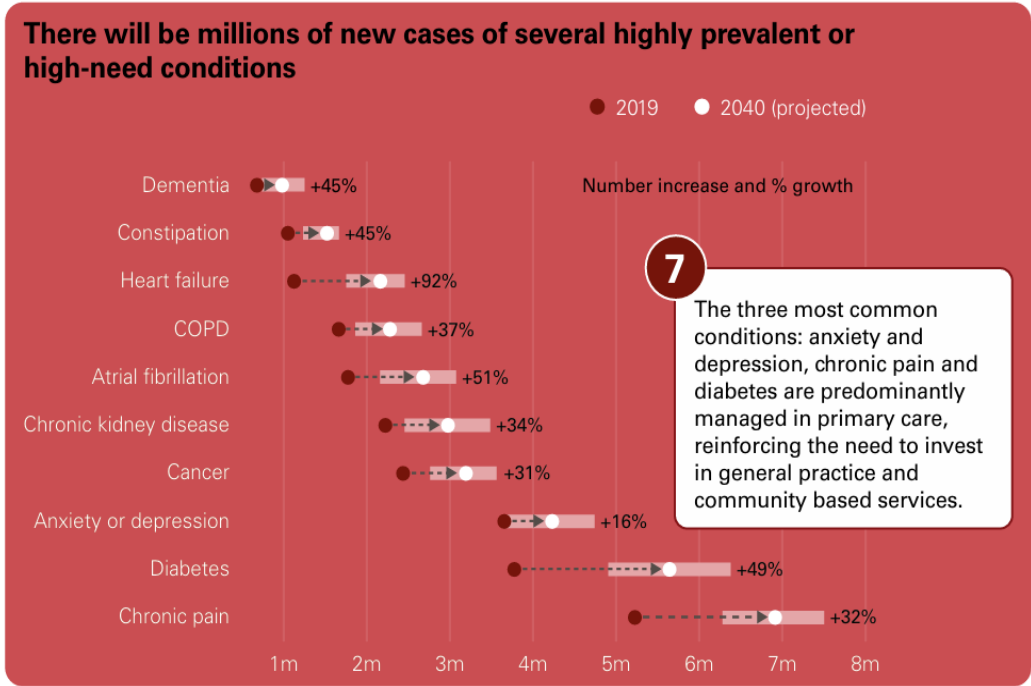
**20%**  
Permanently  
unable to work



# REAL Centre

## Health in 2040: projected patterns of illness in England

Insight report • July 2023  
Toby Watt, Ann Raymond, Laurie Rachet-Jacquet,  
Anna Head, Chris Kypridemos, Elaine Kelly,  
Anita Charlesworth



There is no silver bullet to reduce the growth in the number of people living with major illness. A long-term plan is needed to reform, modernise and invest in the NHS, alongside a bold new approach to investing in the nation's health and wellbeing.



# Health Coaching For Chronic Conditions – What’s The Evidence?

- Improved QOL
- Improved self-efficacy
- Reduced GP appointments

> [Am J Lifestyle Med](#). 2017 May 19;12(6):436-447. doi: 10.1177/1559827617708562.  
eCollection 2018 Nov-Dec.

Compendium of the Health and Wellness Coaching  
Literature

**The impact of health and wellness coaching on patient-important  
outcomes in chronic illness care: A systematic review and meta-analysis<sup>☆</sup>**

[Kasey R Boehmer<sup>a,b,\\*</sup>](#), [Neri A Álvarez-Villalobos<sup>c,d</sup>](#), [Suzette Barakat<sup>e</sup>](#), [Humberto de Leon-Gutierrez<sup>d</sup>](#), [Fernando G Ruiz-Hernandez<sup>d</sup>](#), [Gabriela G Elizondo-Omaña<sup>f</sup>](#), [Héctor Vaquera-Alfaro<sup>d</sup>](#), [Sangwoo Ahn<sup>g</sup>](#), [Gabriela Spencer-Bonilla<sup>h</sup>](#), [Michael R Gionfriddo<sup>i</sup>](#), [Juan M Millan-Alanis<sup>c</sup>](#), [Marwan Abdelrahim<sup>j</sup>](#), [Larry J Prokop<sup>k</sup>](#), [M Hassan Murad<sup>l</sup>](#), [Zhen Wang<sup>l</sup>](#)

# Pain Specialist Health and Wellbeing Coaching

- Fully ARRS funded role
- Cost-effective
- Recommended by NHS England in the drive for supported self-management of chronic conditions (NHS England, 2023)
- Reduces GP appointments and offloads GP practice
- Personalised approach recommended in NICE guidelines for chronic pain (NICE, 2021)
- Compelling evidence to support health coaching (Sforzo et al 2017, Kivela 2013, NHS 2020)



# Patient Journey

- Referrals from members of the primary care team or proactive searches
- Booked directly with specialist HWC for assessment
- In depth assessment and follow up session 60 mins
- Weekly sessions 30 minutes



# Integration and Community Pain Cafes Community Approach

- Fully integrated with the primary care team
- Training for GP practices to ensure understanding of the service
- In depth training offered in collaboration with Peak Health Coaching
- Pain cafes set up in conjunction with social prescribers and existing team



# Pain Self Efficacy Questionnaire Breakdown

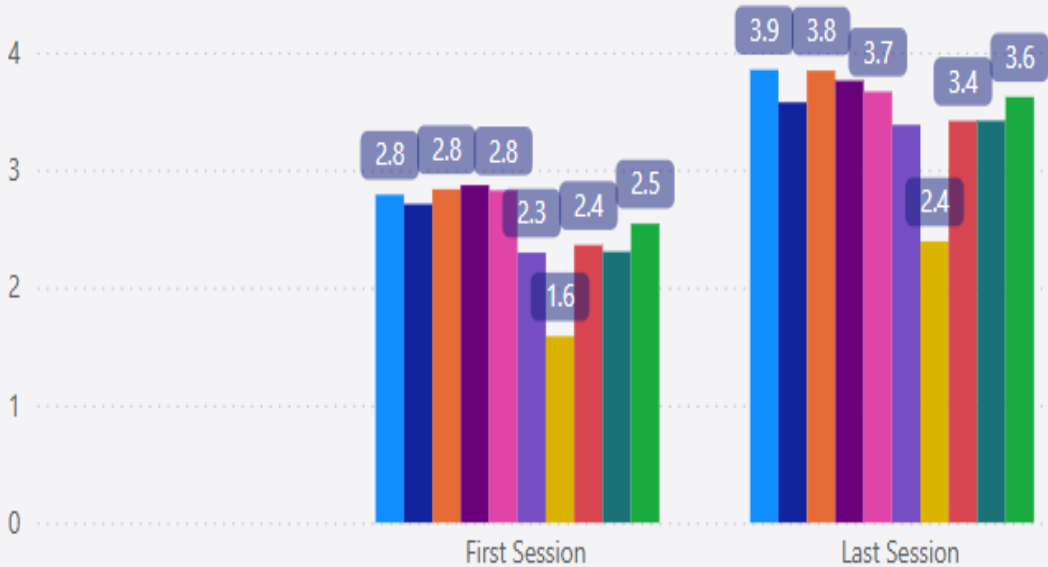
## Questions

- 1) I can enjoy things, despite the pain.
- 2) I can do most of the household chores, despite the pain
- 3) I can socialise with my friends or family members as often as I used to do, despite the pain
- 4) I can cope with my pain in most situations
- 5) I can do some form of work, despite the pain
- 6) I can still do many of the things I enjoy doing, such as hobbies or leisure activity, despite pain
- 7) I can cope with my pain without medications
- 8) I can still accomplish most of my life goals, despite the pain
- 9) I can live a normal lifestyle, despite the pain
- 10) I can gradually become more active, despite the pain.

## PSE-Q Breakdown

Avg Score for each Question asked when completing the PSE-Q. Data only captured from 01/08/2023.

● Q1 ● Q2 ● Q3 ● Q4 ● Q5 ● Q6 ● Q7 ● Q8 ● Q9 ● Q10



# Impact of the Service

Improved pain  
self-efficacy



**39%**

Average  
increase

Improved confidence in  
managing without medications



**49%**

Average  
increase

Reduced GP  
appointments



**82.5%**

of patients do not visit  
the GP during the  
pathway

# Long-term Impact

- 6 months following discharge
- Pain Self efficacy maintained



**87.8%**

average improvement  
from the start of the  
programme



**36%**

Reduction in GP visits  
6 months prior  
compared to 6 months  
following



Consistent  
positive  
feedback that  
changes are  
maintaining

# Pain Café Evaluation

- 29 patients attending
- Set up in collaboration with wider MDT



**50.4%**

Average PSEQ change



**34%**

Reduction in GP visits  
3 months prior  
compared to 3 months  
following referral



**9.5/10**

Average feedback  
rating

# Impact at place level

- 1-1 remote service set up across Bedford PCN's in collaboration with MSK and pain provider
- 356 referrals over 6-month period



**54%**

Required no onward referral to secondary care



**81.5%**

Patients completing the programme did not require GP input



**6.3/7**

Average feedback rated **“Outstanding”** on personalised care questionnaire

# Place Wide Service Evaluation - Patient Feedback Thematic Analysis

## Emotional Support & Empathy

- “You have really helped me and listened so well... I feel so much better.”
- “I haven’t felt rushed or pressured. When I feel like I’ve failed... she helps me see I haven’t.”

## Empowerment & Coping Strategies

- “Changing how we talk about it can lead to a more positive life change.”
- “More positive with looking at things and prioritising... trying to delegate.”

## Therapeutic Relationship & Continuity

- “Having someone to talk to every week... your support has been invaluable.”
- “I already miss our positive sessions over the phone.”

# Place Wide Service Evaluation - Patient Feedback Thematic Analysis

## Positive Impact on Mental Health

- “It has done me good mentally as I have something to focus on.”
- “Felt in control and not judged from day one.”

## Practical Advice & Education

- “Helped me differentiate between acute pain and chronic symptoms.”
- “Very informative and extremely helpful... exercises and meditation.”

## Unexpectedly Positive Experience

- ““I thought, what’s this going to achieve? But after the first conversation... I felt positive.”
- “Went into this thinking it would be a bad experience... but I really benefited.”

# Stakeholder Feedback



## Strong Support for Continuation

*“Please continue this service!!!!!!”*

*“We must keep this service going in East Bedford PCN.”*



## Holistic, Educational and Empowering Approach

*“Patients living with chronic pain need coaching to understand their condition...”*

*“Non-pharm ways to manage especially around CBT is ideal.”*



## Positive Impact on Patients and Clinical Practice

*“It’s an outstanding impact that so many patients didn’t contact GP again.”*

*“Patients are heard and seen promptly instead of months of wait.”*



## Increase capacity and access

*“Very few appts that can be booked.”*

*“Maybe F2F appts could be worthwhile?”*



# The Future for Chronic Pain

- 1-1 Coaching with pain specialist Health and Wellbeing Coaches
- Quick access to supported self-management and PSE
- Prevention with improved PSE for clinicians and focus on holistic care
- Pain Café's & H&W Hubs city wide
- Collaboration **WITH** communities and not **FOR** communities.
- **What matters to you**, not what's the matter with you....

# Any questions? Feel free to get in touch



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