

PROGRESS REPORT 2022

Changing the way people think about, talk about and treat pain.





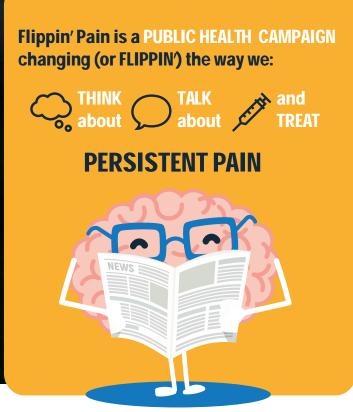


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INTRODUCTION

WHAT IS FLIPPIN' PAIN?





Flippin' whole communities' understanding of pain could change the face of healthcare delivery and the lives of the many people living with it.

Flippin' Pain is a public health initiative that brings the science of pain to the people who really need it in the places they live and work; in the heart of their communities. We believe that engaging the individuals and communities affected by persistent pain, and **empowering them through a better understanding** is essential to delivering a change in approach to pain across whole systems: A pain revolution!

Through raising awareness and facilitating a better understanding of persistent pain at a population level Flippin' Pain engages and empowers whole communities to rethink pain, re-engage and recover. Flippin' Pain is inspired and informed by the ground-breaking Pain Revolution movement in Australia. It is powered by Connect Health and supported by – amongst others - NHS Lincolnshire Clinical Commissioning Group and Teesside University.

This report outlines the science behind Flippin' Pain, what the campaign has delivered so far, and where we want to go next.

CASE STUDY

FEN'S STORY

Fen currently lives with inflammatory arthritis, fibromyalgia and osteoarthritis,

Persistent pain has been a part of who I am for over 16 years

At times it's been all-encompassing, affecting every aspect of my life. It has been debilitating, no matter how many injections, infusions or high-level opioids I was given. Multiple surgeries and even more medication resulted in so many horrible side effects and left me feeling worse not better.

Over time I lost my whole identity to pain. It was all I ever thought about, talked about, and it controlled everything I did. I had no option but to give up my job. I stopped seeing friends and family, gave up hobbies, was walking with sticks, and spent most of my time stuck on the sofa, feeling worthless and angry.

Through all those years, no health professional ever asked me about what I wanted to achieve, what I enjoyed doing or how I was coping. When I questioned why all the medication made no difference, I was discharged from my local pain service. **If the drugs weren't working, it seemed there were no alternative option available.**

Being discharged was frustrating, but it also made me look for better options. I found that health services in other areas were treating persistent pain holistically; looking at the person as a whole, rather than just a painful body part.

I was helped to learn how my brain processes pain messages and I began to understand that focusing on things I enjoyed, becoming more active, and having lots of different distractions put me back in control. To be honest, being able to access the wide range of information provided by Flippin' Pain made the biggest difference to me. The friendly, engaging style of the expert webinars, workbooks, patient stories and links to current scientific thinking about pain means that I am constantly finding positive alternative ways to think and feel about my pain and to manage it.

I now consider myself a pain survivor, and I have met lots of folks just like me through **Flippin' Pain.** Together we all advocate for better understanding, well-being and healthcare for people living with and dealing with persistent pain.

WHY FLIPPIN' PAIN EXISTS

Persistent PAIN is COMMON, & REDUCES quality of LOPFE



Between 10-14% of the population of the UK live with pain that is moderately to severely disabling.*

Living with persistent pain negatively impacts people's physical and mental health, their social and home lives and ability to stay in work.

It is also a key factor in health inequalities, loneliness and social exclusion.

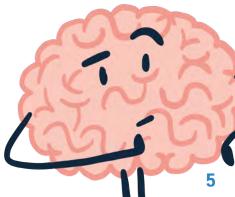
Persistent PAIN in often MISUNDERSTOOD

Researchers have learned A LOT about pain in recent decades but so much of this new understanding has not filtered through to those who need it the most.

The result is a disconnect between the type of care people expect and the type of management that best-practice guidelines recommend. This widespread misunderstanding is nobody's fault but it is a significant barrier to improving the experience and outcomes of those affected by persistent pain.

It's making a big problem even bigger.

*Chronic pain in adults. Health Survey for England. (2017) Public Health England



Healthcare DISIGN & DEUVERY is sometimes / NCONS/STENT with SCIENTIFIC UNDERSTANDING

An outdated understanding of pain is not limited to the general population: many healthcare approaches fail to fully embrace the biological, psychological and social impacts of living with pain. In many ways we are trying to fight pain with the wrong tools and the wrong understanding. Flippin' Pain is working towards a future where people living with pain expect and seek out holistic, evidence-informed care, and healthcare professionals are equipped with the skills to provide it.



Empowering people to take back control of their pain not only helps them, but also the healthcare systems and society around them. Self management of pain reduces reliance on pain services and GPs, reduces the need for medication and surgery, and enables people to contribute as happier, healthier and more productive members of society.

Persistent pain has historically been viewed through a narrow clinical lens, whilst other long term conditions have benefited from a broader public health approach to management alongside more holistic multi-system interventions.

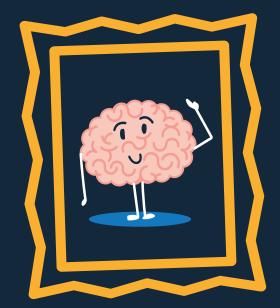
It's time to close the gap: We need to create joined up public health and healthcare approaches to persistent pain, empowering those affected it and ensuring quality and consistency of care.

Public health interventions that target persistent pain conditions, such as back pain have been shown to positively shift public beliefs about pain in a cost-effective way (Buchbinder et al. 2001).

Meet BRIAN the Brain!

Brian is the face of Flippin' Pain; our campaign mascot. Brian takes the form of a human brain, because Flippin' Pain is all about learning - creating a new understanding of pain.

He is also a nod to the important, often overlooked role of our beliefs, thoughts, feelings and emotions in the experience of pain. Finally - but just as important - he is cool, fun and easily recognisable.



'Recovery' isn't necessarily about zero pain. Living a better life with pain is possible. Recovery is different for everyone but taking control of your health is a skill for life. *Ruth, Glasgow* We focus on championing SIX key messages:



Through raising awareness and facilitating a better understanding of persistent pain at a population level Flippin' Pain engages and empowers whole communities to:



The campaign delivers an educational approach known as "pain science education" to whole communities. This approach has been shown in clinical settings to positively shift the beliefs of people about their pain – reducing pain related fear and catastrophising (Watson et al., 2019).

We DELIVER our messages through:



Public Outreach Events

Informal and interactive public seminars, hosted in community venues and delivered by experts including people with lived experience of pain.



Community Pain Champions

Champions of the campaign who have an in-depth understanding of pain science coupled with the skills and empathy recruited to share their expertise in ways that are accessible and engaging.



The Brain Bus

Our immersive, interactive science laboratory on wheels offering visitors the opportunity to experience first-hand some of the mind-blowing lesser-known phenomena of pain, the human brain and our senses.



Community Outreach Tour

A week-long campaign tour headed by a peloton (a big bike ride) delivering multiple public engagement events and activities in the heart of communities. See our video <u>overview here.</u>



Online resources

The Flippin' Pain Formula offers a suite of interactive multimedia learning resources that bring the six key messages to life through podcasts, infographics and animations. They were co-created by a team of pain experts including people with lived experience of persistent pain. Check out <u>the Formula here.</u>

OUR THEORY OF CHANGE

Misunderstanding about persistent pain is common amongst the general public as well as many health professionals. This contributes to worse health outcomes and ineffective use of healthcare resources. **It's making a big problem, BIGGER.**

I. The FRIBLEM

The general public and health professionals

2.TARGET GROUP

3. ACTIVITIES

Community events and activites centred around pain and Pain Neuroscience Education (PNE)

- Multimedia resources
- Public seminars
- Community champions
- Community Outreach Tour

4. OUTPUTS

Validation of people's experiences of living with persistent pain, and realisation they are not alone. Intrigued by new understanding of pain and reconceptualise (or FLIP) their pain **RE-ENGAGE & RETHINK**

5. OUTCOMES

- Expectations of care change
- Self-efficacy improved
- Self-management increased
- Positive shift in healthcare utilisation behaviour

6. TMPACT

Whole communities adopt a new understanding of pain that leads to better health outcomes, better healthcare experience, and better use of healthcare resources

More people lead healthier lives.

THE CAMPAIGN SO FAR



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Flippin' Pain Twitter Account Created @FlippinPain



Flippin' Pain Facebook Page Created @FlippinPain

1000 followers

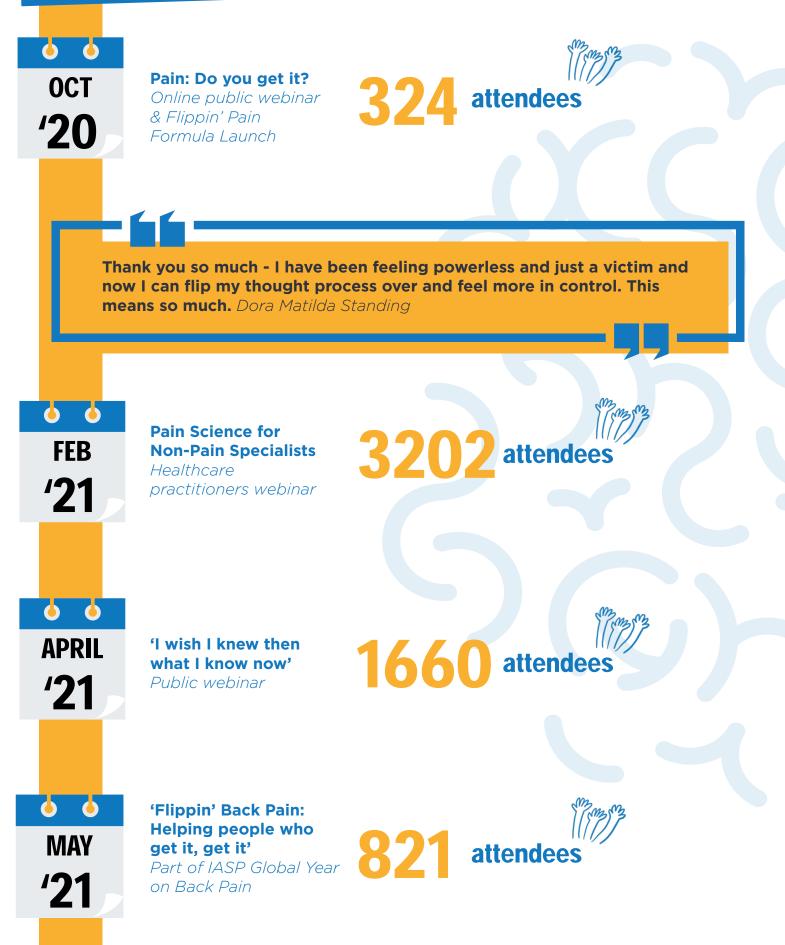




Public Seminar The Lawn Lincoln, Lincolnshire

I've used this approach to pain, in primary care. It was very well received by service users. Thank you for all your information & resources. Suzanne, Occupational Therapist, Leeds

VIRTUAL EVENTS







THE TOUR

what you









THE BRAIN BUS

Flippin' Pain is dedicated to bringing the real science of pain to the people.

The Brain Bus is our immersive, interactive mini-event village, allowing participants to experience first-hand some of the mind-blowing lesser-known phenomena of the human brain and our senses.

The pain you feel is always real. It's the need to protect that can be incorrect.

I spoke with Felicity at the Brain Bus in Lincoln and I cannot convey enough how grateful I am to her for her help and information about Flippin' Pain - my pain is now 10% of what it was. Angela Britton

SPPIN' the way we Think

TALK about, and TREAT

CAMPAIGN IMPACT



in-person

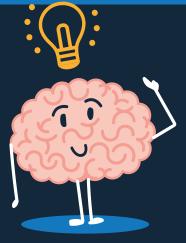
events



16 virtual events







95% of people who engaged with FP had a positive shift in at least one negative belief about pain*

from '19-'21

Of those demonstrating beliefs that pain is a result of damage to tissues,

81.6%

of people who attended a seminar reported a POSITIVE shift in beliefs*

100%

of people who believed surgery was most often the best way to treat persistent pain before attending a seminar reported a POSITIVE shift in their beliefs post event*



of people with baseline beliefs that medication is the only way of relieving persistent pain reported a positive shift towards understanding the role of non-pharmacological interventions post event*

Completely changed my understanding and perceptions of pain. Would love to see this area on future healthcare courses and create even more empathetic professionals. *Ciaran, Pre-reg Physio* (@PhysioCiaran)

Featured on:

BBC News regionally and nationally, Express Online, Lincoln City Radio, East Midlands Connected, North East Connected, The Northern Echo, North East Times

SOCIAL VALUE

Flippin' Pain - and in particular our Community Outreach Tour of Lincolnshire delivered in partnership with NHS Lincolnshire CCG- is a fantastic example of creating social value. Our campaign events and activities make a direct positive contribution to the wellbeing of those who interact with them, they involve collaboration with local people and organisations, and provide a positive influence in the local community to improve health and wellbeing.

Community interventions with demonstrable social value will be of particular interest to those responsible for public health and NHS funding who are tasked with ensuring the public pound is used as effectively as possible. National Voices and Social Enterprise UK emphasised in the 2017 report 'Healthy Commissioning' that community-based approaches based around peer support and education for self-management (like Flippin' Pain) deliver health and wellbeing benefits at low cost.

The Flippin' Pain Outreach Tour demonstrates social value by:



Strengthening local partnerships across silos through improving intergrated working











CASE STUDY

LAURA'S STORY

My interest in pain came from my mum, who lives with persistent pain.

I watched pain take over my mum's life, affecting her sleep, her motivation, her activity levels and her mental health, leaving her feeling alone and helpless.

Unfortunately, it took several years for my mum (and me!) to understand persistent pain, to develop self-management tools and to live well with it. This inspired me to change my clinical practice to focus on persistent pain and try to support other people like my mum. Now I am a Prescribing Support Pharmacist running clinics in GP Practices to support people living with persistent pain. As well as reviewing pain medication with the people attending my clinics, I also explore the psychological and social factors influencing their experience of pain and provide education too.

I became aware of Flippin' Pain in late 2020 and since then have been regularly using it with patients and with fellow professionals. The content and messages are very informative and pitched in such a way that it is accessible to everyone. Many people like the myth buster section, the webinars and reading about the experiences of other people who live with pain. The region where I work covers some of the most deprived areas in Scotland meaning that for many people attending my clinic, social factors can have a negative impact on their health. Nevertheless, many of my patients engage with **Flippin' Pain's events and resources leading to an improved understanding of pain that provides hope and helps them feel less isolated.**

I find Flippin' Pain really helps me to foster a supportive patient-pharmacist relationship too, making shared decision-making about the best way forward much easier. As a result of gaining a better understanding of their pain and embracing other pain management strategies, some of my patients have reduced or stopped their regular pain medication altogether. Several patients also found that learning about all the things that can worsen their pain was the impetus they needed to access other services for support with mental and physical health.

I truly believe that by continuing to change how the populations we serve and we, as the healthcare professionals who serve them, think about, talk about and treat persistent pain we can make a huge difference to the lives of so many people.

WHAT NEXT?

We are committed to continuing to bring NEW understanding to more people, supporting BETTER OUTCOMES for the people affected by persistent pain.

But we can't do it by ourselves!

A Flippin' Pain campaign in your locality can deliver a unique solution for:

- Waiting List management
- Creation of Social Value
- Patient & Public participation and engagement
- Integration between physical & mental health and across health and social care

SO, WHAT NEXT

To support our vision for all communities in the UK to have the opportunity to re-think pain, re-engage, and recover, we need help with:

FUNDING

(e.g., sponsorship) to deliver more events, create more resources, and bring the campaign to more people.



IMPLEMENTATION SITES

Commissioning – from Healthcare, Local Authority, and/or Public Health – to deliver locally-targeted campaigns (including public events, community engagement and our Community Outreach Tour).

EVALUATION



to demonstrate our true impact on everything from pain-related beliefs and behaviours, to healthcare outcomes and experience, healthcare utilisation and social value.

ENDORSEMENT

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There's so much information about pain out in the public domain - not all of it accurate or helpful. Endorsements can help demonstrate quality and consistency of messaging.

If you can help or would like to discuss the possibility of bringing Flippin' Pain to where you live / work, please get in touch at info@flippinpain.co.uk

REFERENCES

*PAIN NUMBERS STATISTICS

Fayaz A, Croft P, Langford RM, et al; Prevalence of chronic pain in the UK: a systematic review and meta-analysis of population studies. BMJ Open. 2016 Jun 206(6):e010364. doi: 10.1136/bmjopen-2015-010364

Watson, J.A., Ryan, C.G., Cooper, L., Ellington, D., Whittle, R., Lavender, M., Dixon, J., Atkinson, G., Cooper, K. and Martin, D.J., 2019. Pain neuroscience education for adults with chronic musculoskeletal pain: a mixed-methods systematic review and meta-analysis. The Journal of Pain, 20(10), pp.1140-e1.

Buchbinder, R., Jolley, D. and Wyatt, M., 2001. Population based intervention to change back pain beliefs and disability: three part evaluation. BMJ, 322(7301), pp.1516-1520.

***PAIN BELIEF STATISTICS**

Informed by the Doctoral work of Nick Livadas at Teesside University which has the working title of "An Evaluation of a pain focused public health campaign" currently in preparation for submission

***SOCIAL VALUE**

MAC 7.2: Influence staff, suppliers, customers and communities through the delivery of the contract to support health and wellbeing, including physical and mental health.

MAC 8.1: Demonstrate collaboration with users and communities in the co-design and delivery of the contract to support strong integrated communities.

MAC 8.2: Influence staff, suppliers, customers and communities through the delivery of the contract to support strong, integrated communities.

How Social Value is Being Used by CCGs https://www.nationalvoices.org.uk/sites/default/files/public/ publications/healthy_commissioning_-_how_the_social_ value_act_is_being_used_by_clinical_commissioning_groups.

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