



THIS SERVICE IS SUITABLE FOR PEOPLE WHO HAVE THE FOLLOWING CHARACTERISTICS:

<p>Pain lasting for longer than 3 months or the normal expected healing time.</p>	<p>This is in line with accepted international definitions of “persistent pain”.</p> <p>Acute conditions need appropriate investigation/management prior to referral to our service.</p> <p>Exceptions may be but are not limited to:</p> <ul style="list-style-type: none">- <i>Early identification of suspected Complex Regional Pain Syndrome</i>- <i>Cancer related pain after discussion with secondary care specialists</i>
<p>Acknowledgement that some types of persistent pain may not have a ‘cure’ and willingness to engage in strategies to improve quality of life through behavioural/emotional/medical approaches.</p>	<p>Conversations have been had between the service user and referrer explaining that treatment or therapy may not take the pain away but can enable improved health, wellbeing and quality of life.</p> <p>The person understands that behavioural and emotional changes are necessary and are willing to engage in a holistic pain management approach.</p> <p>It is anticipated that service users will choose to embrace enhanced pain management strategies alongside a traditional medical paradigm.</p>
<p>Have completed appropriate investigations and diagnosis and have completed all appropriate diagnostic pathways and investigations</p>	<p>The Pain Service does not offer diagnostic work-up.</p>
<p>Have received first line treatment within the relevant primary or secondary care service for their condition.</p>	<p>The Pain Service is aimed at people who have not responded to standard treatments for their particular condition. It is not meant for those who have not yet trialled standard treatments.</p> <p>Usually, service users would be referred to the service following receiving standard treatment for their condition. However, we are happy to work with service users for whom a conservative approach prior to consideration of invasive or risky treatment options is advisable.</p> <p>For some service users, engaging with pain management alongside a standard treatment pathway is really useful. In our experience, this works best when the service user understands the possible positive impact of such work on their quality of life.</p>



THIS SERVICE IS NOT SUITABLE FOR PEOPLE WITH THE FOLLOWING CHARACTERISTICS.

“Red flags”	We are a routine service. People requiring urgent physical and mental health attention should be referred immediately to the appropriate clinical discipline in secondary care.
Children under 16	This service is not able to support children under the age of 16 years. Referrals for children of 16 and 17 years will be considered on a case-by-case basis.
Repeat referrals	<p>The service utilises a comprehensive biopsychosocial approach and it is anticipated that our service users will engage in all our modalities for their benefit.</p> <p>The service does not usually accept repeat referrals within 6 months of discharge unless:</p> <ol style="list-style-type: none">1. The person can demonstrate clear goals for the re-referral2. There is a change in physical or emotional need3. Change of circumstances to enable them to engage more fully with pain management4. There is an expressed intention to consolidate prior learning
People having treatment with other teams for the same condition.	Care provided must complement but not duplicate treatment being offered by other services for the same issue .
Requests for home visits	Home visits are considered in very exceptional circumstances.
People suffering with acute episodes of common or serious mental illness	<p>Having acute mental illness may pose challenges to understanding and accepting the models of therapy and/or treatments used in persistent pain management, which are likely to prevent the service user from achieving a successful outcome.</p> <p>The Pain Service does not provide psychiatric or general psychological services.</p> <p>People in need of specialist mental health treatment should receive first line support through their Mental Health Teams.</p>
People with unmanaged substance misuse	Evidence clearly suggests that people who have unmanaged substance misuse are unable to engage in psychological therapies in pain management. They need to be stabilised by the addiction services prior to referral and we will liaise with addiction services if appropriate to provide joined up care.