

Chiropractic Quality Standard Chronic Pain

- 1. Identification: Patients with a history of pain ongoing for more than 3 months (and which persists beyond the time that tissue healing would normally be expected) are identified, assessed and managed with chronic pain as a distinct component of their diagnosis.
- 2. **History and Examination:** A thorough history and examination should be conducted on all patients presenting with chronic pain. Assessments are multidimensional, including a biomedical pain assessment, a functional assessment and a psychological evaluation.
- **3. Psychosocial Assessment:** The assessment of patients with chronic pain includes the identification of psychosocial risk factors relating to attitudes and beliefs, behaviours, compensation, diagnosis, emotions, family, and work. This is assessed by collaborative history taking, the use of questionnaires, and screening or stratification tools.
- **4. Education:** Patients with chronic pain should be given information relating to pain physiology, the relationship between psychology and pain (including fear and avoidance, stress, distress, and depression), safety and risk in relation to increased activity, and the importance of self-management approaches and lifestyle changes.
- **5. Patient-Centred Care:** Patients with chronic pain have the opportunity to discuss their health beliefs, concerns and preferences to inform their care. Patients are given the best available evidence, are actively involved in shared decision-making, and are supported to make fully informed choices about investigations, treatment and care that reflect what is important to them.
- **6. Plan of Care:** Patients with chronic pain are active participants in the development of individualised care plans aimed at changing pain behaviour and improving function, as well as seeking pain relief. The plan should include goal setting that is patient driven and realistic, with return to work a priority (if appropriate).
- **7. Package of Care:** Patients with chronic pain are treated with an individualised package of care, which includes advice and information, exercises and psychosocial interventions. Treatment may also include manual therapies, rehabilitation, and acupuncture.
- **8. Psychological Interventions:** Patients with chronic pain are managed with a broad range of cognitive and behavioural interventions to address the impact of distressing, misleading, or restricting thoughts and beliefs. Goal-orientated techniques are used with the aim of changing thinking, mood and behaviour to increase control over pain.
- **9. Supportive Self-Management:** Patients with chronic pain are given information and support to engage in self-management strategies that may include exercise, relaxation, coping strategies, biofeedback techniques, pacing, sleep management, self-help resources, and graded exposure to social and physical activities guided by agreed goals.
- **10. Monitoring and Reassessment:** The needs of patients with chronic pain are continually kept under review and their care plans amended as necessary. Regular formal reassessments are carried out, at least every six months, with the use of validated outcome measures to assess pain, functional disability, psychosocial factors, and quality of life.
- 11. Integration of Service: When managing patients with chronic pain, chiropractors are attentive to the involvement of other health professionals, the medications that patients are taking, and write detailed reports on their findings and management to the patient's GP. Chiropractors recognise their own limitations in pain management, and refer to other healthcare professionals, or specialist interdisciplinary pain management teams, as appropriate.

Scope of this Quality Standard

This quality standard covers the chiropractic management of patients with chronic pain. As defined by the British Pain Society, this document uses the term *chronic pain* to mean persistent pain beyond the time that tissue healing would normally be expected, taken as beyond 3 months. This is the most widely used and recognised term, although it is acknowledged that this is not the only term and there are sound arguments to justify the use of alternative terms such as long-term pain, persistent pain and complex pain.

Chronic Pain is a long-term condition where patients have ongoing persistent or episodic pain. An estimated 14 million people in the UK suffer with chronic pain. Of all people consulting in primary care, approximately 30% of them attend for help with pain. Half of these contacts relate to chronic or recurring pain, and two thirds are about musculoskeletal conditions. Chronic pain is often an integral component of a range of different musculoskeletal conditions that present to chiropractors. These quality statements are therefore general but nevertheless provide aspirational but achievable markers of high-quality, cost effective patient care.

About the Royal College of Chiropractors' Quality Standards

Quality Standards are tools designed to help deliver the best possible outcomes for patients. They are a series of specific, concise quality statements with associated measures that provide aspirational, but achievable, markers of high-quality patient care covering the treatment of different conditions. They also form an important part in addressing the increasing priority being placed on improving quality and patient outcomes.

The primary purpose of The Royal College of Chiropractors' quality standards is to make it clear what quality care is by providing patients, the public, healthcare professionals, commissioners and chiropractors with definitions of high-quality chiropractic care.

By providing a clear description of what a high-quality service looks like, clinics can improve quality and achieve excellence. The quality standards should encompass statutory requirements, best practice and existing clinical guidelines, but they are not a new set of targets or mandatory indicators for performance management. They are, however, a useful source to form the basis of clinical audit and to identify priorities for future improvement.

Chiropractors are encouraged to adopt the Royal College of Chiropractors' quality standards as practice policy. They can be used in a wide range of circumstances, such as a source of identifying CPD, or clinic promotion, perhaps when tendering for NHS contracts, or even at a national level. They enable Healthcare professionals to understand the standard of service that you provide, and allow commissioners to be confident that the services they are purchasing are of high quality. Importantly, they also help patients to understand what service they should expect.

For the fully detailed version of this Quality Standard, please visit www.rcc-uk.org and choose the 'Quality' menu.

The Royal College of Chiropractors' Quality Standard on Chronic Pain was developed in August 2016 and is due for review in December 2019

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