

Practice Alert

Pain management

November 2022

Key points

- Pain is more common in people with disability than the general population but is often not recognised, particularly in people who have difficulties communicating.
- Untreated pain can have negative physical and mental health consequences, and can cause changes in behaviour.
- Providers should support participants to access appropriate health professionals such as doctors, dentists and physiotherapists for the assessment and treatment of pain.
- A GP can help to develop a pain management plan with participants that might include physical, psychological or medication treatments.

Types of pain

Pain is usually categorised as acute or chronic depending on how long a person has experienced the pain.

- **Acute pain** – is pain that is a result of injury or illness that lasts for three months or less. Acute pain can lead to chronic pain if left untreated.
- **Chronic pain** – is defined as pain that lasts consistently for more than three months. This type of pain is common and often difficult to treat. This type of pain can exist with or without an obvious underlying condition.

Pain may be experienced as:

- sharp, aching or throbbing pain due to tissue damage caused by injury, surgery, arthritis, osteoporosis, or musculoskeletal conditions
- burning or shooting pain following damage to the nervous system that may also be associated with numbness, tingling or sensitivity in the skin
- pain related to sensitisation of the nervous system with no tissue damage.

Causes of pain

Common causes of pain include:

- arthritis or mobility issues
- back or hip pain
- constipation or other digestive issues
- dental pain
- ear or headache
- injury or illness
- menstrual pain
- muscle spasms.

What are the consequences of untreated pain?

It is important that people with disability are supported to access health professionals who can treat symptoms and causes of pain. If pain is left untreated or unmanaged, there can be serious consequences, including:

- **Behaviours of concern** – studies show that pain can lead to increased challenging behaviour in people with disability.
- **Worsening pain** – if pain is not managed properly it can become worse and result in long-term damage.
- **Physical injury or illness** – pain can indicate underlying physical injury or illnesses that can become worse without treatment.
- **Reduced quality of life** – unmanaged pain can greatly reduce a person's physical and psychological quality of life.
- **Psychological distress** – unmanaged chronic pain can result in increased levels of depression and anxiety.
- **Impaired physical function** – untreated, severe acute pain is associated with limited physical function such as decreased mobility and longer hospital stays.
- **Impaired sleep** – unrelieved pain can have a significant impact on the duration and quality of sleep.

Who is at risk of pain?

People with physical disabilities experience chronic pain at a significantly higher rate in comparison to the general population. People with physical disabilities often experience pain that may be related

to their disability but may also be more likely to experience pain that is not directly related their disability.

People with intellectual disabilities are as likely to experience pain, particularly chronic pain, as the general population but are less likely to be prescribed adequate pain medications compared to the general population. A reason for this may be that pain often goes undetected.

People with disability are at risk of having undiagnosed health conditions that can cause pain for a range of reasons, including:

- Some people may not be able to communicate when they feel unwell or experience pain. They may communicate in ways that are specific to them, and not well understood by others.
- A person's symptoms or behaviours are attributed to their disability and, as a result, they do not receive appropriate health assessments or treatment.

How to identify pain

There are two primary ways to identify pain in participants: through self-report and behavioural observation. While people with disability are often more likely to experience pain compared to the general population, limitations around communication can prevent the identification of pain and its cause.

It is important that providers combine knowledge of the person with active observations in order to identify pain in people with disability. It is important to note that changes in behaviour, including sudden demonstration of behaviours of concern can indicate pain.

Indicators of pain

People who have complex communication needs may not always clearly identify or seek support to manage pain. Some observable indicators of pain may be:

- facial expressions or vocalisations such as grimacing, frowning, crying or groaning
- withdrawn or seeking comfort
- disturbed sleep or changes in sleep
- changes in movement such as restlessness or pulling away when touched
- musculoskeletal (bones, joints, muscles and connective tissues) changes such as back arching or clenching fists
- changes in behaviour or escalating behaviours of concern.

How to manage pain

The management of pain requires a whole-of-person and multidisciplinary approach. Treatment options may include:

- Physical therapy including muscle strengthening, postural training and exercise programs can be beneficial in acute and chronic pain management

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- Medication, nerve blockers, or surgery.
 - Psychological interventions such as cognitive-behavioural therapy (CBT) can be useful in alleviating chronic pain and aid in the development of coping strategies.

Pain Management Plans

A GP Management Plan (GPMP) that includes pain management planning can be developed in consultation with the participant and their carer/s to identify health needs, create a plan of action, and establish an organised approach to care that is also in line with the participant's preferences. A GPMP allows for healthcare services such as physiotherapy to be subsidised by Medicare.

GPMPs are available from a participant's usual GP for people with chronic pain and/or complex medical conditions or care needs. A GPMP can also include Team Care Arrangements which subsidise treatments provided by allied health practitioners such as exercise physiologists, occupational therapists, physiotherapists, podiatrists. GPMPs need to be reviewed by the GP regularly in order to access Medicare subsidies, assess current health care needs and make changes where necessary.

Supporting participants

Participants experiencing or observed to be in pain (including suspected pain) should be supported to arrange a GP appointment to discuss appropriate treatments, preventative strategies and referrals to relevant medical and allied health specialists.

Participants with pain can also be supported to ask their GP about a Pain Management Plan.

Preventative strategies

Supporting participants to maintain good health and proactively manage health conditions contributes to pain prevention. Annual comprehensive health assessments are important to help identify and address health concerns including those that may be a cause of pain.

Regular health reviews and screening to identify or prevent pain can be arranged with participants such as regular:

- health assessments
- dental check-ups.

You can read more about this in our [Practice alert: Comprehensive health assessment](#) and [Practice Alert: Oral Health](#)

Providers should talk with participants about their health, including pain, using the participant's preferred method of communication. A speech pathologist may be able to help create a system to communicate health needs such as describing pain. Providers can also support participants to access medical and allied health professionals and ensure that medical records and support plans are kept up-to-date including the following:

- Health care plans
- Mealtime Management Plans
- Epilepsy Management Plans
- Behaviour Support Plans.

Medication reviews

Participants who have been prescribed pain management medication should be supported to arrange regular medication reviews to ensure the treatment is effective, discuss and monitor any side effects, interactions with other medications and consider long-term pain management options.

You can read more about medication reviews in the [Practice Alert: Polypharmacy](#)

Provider obligations

NDIS Code of Conduct

The NDIS Code of Conduct requires all NDIS providers and workers who deliver NDIS supports to NDIS participants to, among other things:

- Provide supports and services in a safe and competent manner with care and skill.
- Promptly take steps to raise and act on concerns about matters that might have an impact on the quality and safety of supports provided to people with disability.

NDIS Practice Standards

If you are a registered NDIS provider, you must comply with the [NDIS Practice Standards and Quality Indicators](#) as part of your conditions of registration. The NDIS Practice Standards relate to the delivery of safe, quality supports and services, and the management of risks associated with the supports you provide to NDIS participants.

The NDIS Practice Standards that are most relevant to this alert include:

- **Access to supports:** each participant can access the most appropriate supports that meet their needs, goals and preferences.
- **Independence and informed choice:** each participant is supported by the provider to make informed choices, exercise control and maximise their independence relating to the supports provided.
- **Information management:** each participant's information is managed to ensure that it is identifiable, accurately recorded, current and confidential. Each participant's information is easily accessible to the participant and appropriately utilised by relevant workers.
- **Responsive Support Provision:** each participant can access responsive, timely, competent and appropriate supports to meet their needs, desired outcomes and goals.
- **Risk management:** risks to participants, workers and the provider are identified and managed
- **Support planning:** each participant is actively involved in the development of their support plans. Support plans reflect participant needs, requirements, preferences, strengths, and goals, and are regularly reviewed.

Resources

NPS Medicine Wise Pain Management plan

https://www.guild.org.au/_data/assets/pdf_file/0017/6209/patient-resource-my-pain-management-plan-nps-medicines-wise4e0a9a33c06d6d6b9691ff000026bd16.pdf (PDF, 468 KB)

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General enquiries

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