Supporting People with Persistent MSK Pain - Referrer Pathway

East Sussex MSK Community Pain Service

Use alongside the agreed East Sussex Community MSK Pain Service Referral Criteria. www.EastSussexPain.org.uk (live from 2 November 2026)

PRIMARY CARE / CORE MSK

For most people living with persistent MSK pain

- Appropriate history and clinical assessment.
- Remain alert to new or changing symptoms and red flags.
- Complete and review clinically indicated investigations.
- Explain persistent pain and provide reassurance.
- Encourage activity, participation and confidence in movement.
- Review medicines in line with current guidance.
- Consider sleep, lifestyle, emotional wellbeing, work and social factors.
- Use relevant MSK, rehabilitation, wellbeing, social prescribing and community resources.

ES COMMUNITY MSK PAIN SERVICE

When persistent pain is having a significant ongoing impact & additional support is needed.

- Clinical triage to identify the most appropriate next step.
- Initial What Matters to You conversation.
- Individualised, supported self-management.
- Support with pain understanding, function, confidence and valued activity.
- Physical, psychological and social approaches according to need.
- Group, peer and individual support.
- MDT input for complex & changing needs.
- Medication optimisation where appropriate.
- Specific interventions in line with NICE guidance where appropriate and part of a wider management approach

SPECIALIST / SECONDARY CARE

When needs require specialist assessment or intervention beyond the community service

- Specialist assessment where clinically indicated.
- Specialist procedures or interventions within commissioned pathways.

SUPPORTED SELF-MANAGEMENT THROUGHOUT THE PATHWAY | getUBetter digital support and resources

Helping people understand persistent pain, manage flare-ups, remain active, build confidence and work towards what matters to them.

People do not need to move sequentially through each part of the pathway.

Care is based on clinical need, what matters to the person and the most appropriate service at that time.

Supporting People with Persistent MSK Pain - Referrer Pathway

East Sussex MSK Community Pain Service

The Community MSK Persistent Pain Service supports people whose persistent MSK pain is having a significant impact on their life and who may benefit from a supported self-management approach. **It is not a diagnostic service or a route to investigation or procedures alone.**

Has the person's pain been appropriately assessed?

- Has an appropriate history and clinical assessment been completed?
- Are new, unexplained or changing symptoms being considered rather than automatically attributed to persistent pain?
- Have clinically indicated investigations been completed and reviewed?
- If further diagnostic assessment is required, should another pathway take priority?

What impact is pain having?

- Explore activity and daily life, sleep and fatigue, work or caring roles, emotional wellbeing, relationships and participation.
- Ask: "What is your pain stopping you from doing that matters to you?" and "What would you most like help with?"

What support has already been explored?

- Consider explanation and reassurance, activity and rehabilitation, medicines review, sleep and lifestyle support, emotional wellbeing, work support, social prescribing and community resources.
- People do not need to have exhausted every treatment before referral. The key question is whether another clinical pathway or intervention is currently more appropriate.

Is the person open to a supported self-management approach?

- Explain that the service focuses on reducing the impact of persistent pain and supporting the person to live well, rather than promising to remove pain completely.
- A useful question is: "Would you be open to exploring ways of reducing the impact pain has on your life, even if it isn't possible to completely take the pain away?"
- Readiness does not mean already being good at self-management. Uncertainty or ambivalence should not prevent referrals.

Supporting People with Persistent MSK Pain - Referrer Pathway

East Sussex MSK Community Pain Service

Could another pathway be more appropriate now?

Primary need	Consider
Further investigation or diagnostic assessment	Relevant MSK, diagnostic or specialist pathway
New or significantly changing symptoms	Clinical reassessment and appropriate urgent/routine pathway
A specific condition requiring specialist management	Relevant condition-specific or specialist service
Mental health need beyond the remit of the pain service	Appropriate mental health support/pathway
Immediate risk or safeguarding concern	Urgent, emergency or safeguarding pathway as appropriate

Where a spinal intervention is being considered:

Referral should support shared decision-making and considerations of the most appropriate next step, which may or may not include an injection. A useful decision aid can be found here: Making decisions to help you live well with chronic primary pain. **Please avoid setting an expectation that an injection will be offered.** All referrals for injections will be reviewed by the team.

Options for referral:

- Where the person meets the relevant NICE/local criteria, and an appropriate assessment and shared decision-making conversation has already taken place to include the benefits, risks, limitations and alternatives, the referral may be triaged directly to the appropriate intervention pathway.
- Where the person has persistent pain and an injection is one potential option being considered but is not clearly the agreed or indicated next step, please discuss the wider range of pain management options with them before referral. The Community MSK Persistent Pain Service can then explore what matters to the person and together consider the most appropriate management approach. This may or may not include consideration of an injection.

- Procedures normally assessed and delivered as part of a specialist pathway should remain within that service and must not be referred to the Community MSK Persistent Pain Service solely to access an injection. This includes but is not limited to, selective nerve root blocks and suprascapular nerve root blocks.

When referral may be helpful:

- Persistent pain is having a meaningful impact on the person's life.
- Appropriate clinical assessment has been completed and there is no outstanding diagnostic pathway that should take priority.
- Relevant primary care, MSK and community options have been considered.
- The person's needs are unlikely to be met through another single pathway alone.
- The person understands the broad purpose of the service and is willing to explore a supported self-management approach.

Not sure whether to refer?

Check the agreed Referral Criteria and use Here.eastsussexpainenquiries@nhs.net **where further discussion would help.**