



TRANSMITTER

THE MEMBERSHIP MAGAZINE FOR THE FACULTY OF PAIN MEDICINE

ISSUE 32



GIRFT

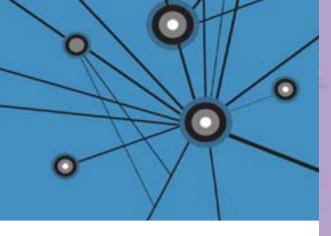
FROM JOURNAL CLUB TO KNOWLEDGE CAPSULE

FPM ANNUAL MEETING 2025



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Wednesday 10 December 2025

Faculty of Pain Medicine Annual Meeting

www.fpm.ac.uk/events

5 CPD points

08:30	Registration	
09:15	Welcome	
09:30	Introduction from the new Dean of the FPM	Dr Ganesan Baranidharan
09:40	Medico-Legal Confidence — Tips for Secure Practice	Dr Rajesh Munglani and Mr Marcus Grant
10:40	Resilience in healthcare — when facing complaints, GMC referrals and medicolegal matters	Dr John Dale-Skinner
11:10	Tea Break	
11:40	Psychiatric and Pain drug interactions	Dr Mike Spencer
12:20	Update on credentialling, exams, and training including National Teaching Sessions	Dr Craig Montgomery
13:00	Lunch Break	
14:00	Essay Competition Winners – 'How AI will change pain management ?' and FPM Commendations	
14:25	Patrick Wall Lecture	Dr Karen Simpson
15:20	Tea Break	
15:50	GAP analysis – What needs to change?	Dr Dev Srivastava
16:30	Summary and Close	

Face to face

CONTENTS



Getting it Right First Time

An Introduction to The Chronic Pain Programme
page 11



From Journal Club to Knowledge Capsule: A
Trainee Innovation in Pain Medicine Education

A guide to *Read Digest*, a new online platform for critical apprasials and shared learning . page 13

- 2 | FPM Annual meeting 2025
- 5 | Welcome
- 6 | Message from the new FPM Dean
- 7 | Message from the new FPM Vice Dean
- 8 | Training & Assesment
- 9 | FFPMRCA Examination Calendar
- 10 | FPMLearning
- 10 | Opipids Aware
- 12 | Getting It Right First Time: The Chronic Pain Programme
- 14 | From Journal Club to Knowledge Capsule: A
 Trainee Innovation in Pain Medicine Education
- **16** | Trainee Update
- 17 | National Teaching Sessions
- 18 | Regional Advisors in Pain Medicine
- 19 | Education & Events
- 20 | Essential Pain Management
- 22 | Professional Standards
- 23 | British Pain Society ASM

This and back issues available online at www.fpm.ac.uk

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Dean: Dr Ganesan Baranidharan **Vice Dean**: Dr Victor Mendis



Dr Shiva Tripathi Clinical Editor

WELCOME

A milestone for our specialty has arrived, as credentialing in 'Specialist Pain Medicine' has now begun. This is being rolled out in a phased fashion to ensure the process is smooth and efficient for applicants. Keep your eye on the FPM website for more news.

The Faculty of Pain Medicine has entered a new chapter since its inception in 2007 and the landscape continues to evolve at pace. On 22 July 2025, Dr Lorraine De Gray became the first doctor in the UK to be registered with the GMC as holding the credential in 'Specialist Pain Medicine' — the culmination of years of dedicated work led by Dr De Gray and colleagues.

We also welcome our new Dean, Dr Ganesan Baranidharan and new Vice Dean, Dr Victor Mendis who take leadership at this pivotal moment.

Looking ahead, the FFPMRCA examinations are being reshaped in line with the independent review recommendations with the new format expected to launch in 2027 under the guidance of Professor Vivek Mehta. The Faculty continues to seek examiners and question writers to support this important transition. Our new trainee representative, Dr Hollis encourages all trainees to get back with feedback and surveys, reminding us, "we can't fix what we don't know". Meanwhile, advanced pain trainee Dr Eslam Elsayed (Northwest deanery) introduces the innovative knowledge capsule; concise, digital 'Read Digests' of key findings from high impact journals to enhance journal club learning.

Service development is also advancing. The Getting It Right First Time (GIRFT) programme, which was initially started for orthopaedics in 2012 has now begun for Pain Medicine under the leadership of Faculty Board member Dr Helen Makins. By reducing variation in services through a data driven clinically reviewed process, GIRFT aims to improve patient care nationwide. This ties in well with directory of pain services in the UK that has been compiled through freedom of information requests. This directory will provide patients and clinicians with clear access to local services while giving commissioners, policymakers, and the faculty essential data for benchmarking, workforce planning, credentialing, and service improvement.

Alongside these initiatives, the Faculty remains committed to academic and educational priorities. The Academic Pain Strategy Group met in person for the first time during the British Pain Society's Annual Scientific Meeting in June 2025 — a significant step in strengthening the academic foundations of Pain Medicine through education and research. The Faculty's mission is clear: to advance Pain Medicine for the benefit of patients, practitioners, and society.

Shiva Tripathi



Dr Ganesan Baranidharan FPM Dean

MESSAGE FROM THE DEAN

It is with immense pride and a deep sense of responsibility that I write my first Dean's statement. As the seventh Dean for the Faculty of Pain Medicine (FPM), I would like to start by thanking our outgoing Dean, Dr Lorraine de Gray, on behalf of all Fellows and Members of the Faculty.

Credentialing

Over the last three years, Dr de Gray has provided exceptional leadership in steering the Faculty. The crown of accomplishments in her many achievements during her tenure is her work on the GMC credential. In 2015, the General Medical Council introduced the concept of Credentialing, defined as "a new process to formally recognise a doctor's expertise in a specific area of practice". The Faculty applied to be one of the five pilot credentials in 2018 and was accepted in 2019. I am pleased to share that Dr de Gray was among the first to be registered as a 'Specialist in Pain Medicine' credentials on the GMC register. The roll out of the FPM credential will continue in phases over the coming months. As Vice Dean to Dr de Gray, I have had the privilege of learning from her leadership and contributing to several of her initiatives, many of which I intend to carry forward.

We have just piloted the application process for admitting Pain Medicine specialists onto the GMC register, by working through the FPM Board and

committee members. Once we have trained the assessors and evaluated the process, we plan to roll out the credentialing in phases, potentially in batches of 50 or 100, to make the process easier for administration. There are two routes to credentialed status: the Recognition route, for those already qualified in Pain; and the Training route, for those undertaking Pain training when this route is formally launched. We are urrently working to finalise the credential route for Anaesthetists in Training (AiTs) and working to ensure alignment between the Anaesthetics CCT curriculum and the Specialist Pain Medicine credential curriculum, so please watch this space.

In parallel, we are developing a structured pathway for nonanaesthetist specialists, such as Neurologists, Rheumatologists, and Rehabilitation Medicine physicians to access the credential.

Pain Service Directory

Thanks to another initiative led by Dr De Gray, we now have a comprehensive directory of Pain Services in the UK, compiled through Freedom of Information requests. We will use this to monitor and help service development across the country.

We have also had successful support meetings for Clinical Directors and Pain Medicine Leads, which we aim to continue on an annual basis.

GIRFT for Pain Medicine

The Getting It Right First Time (GIRFT) programme for Pain Medicine is being led by Dr Helen Makins, an elected member of the Faculty Board. She is being supported by Dr Clinch (Consultant in Paediatric and Adolescent Rheumatology) and Dr Siers (General Practice). GIRFT is a national NHS programme designed to improve patient care and outcomes by reducing unwarranted variation in services through a data-driven, clinically led review process. The Faculty, in collaboration with the British Pain Society, is working closely with GIRFT to support its objectives.

Dr Victor Mendis

I am also delighted to have Dr Victor Mendis as Vice Dean. He brings a wealth of experience, having previously chaired the Training and Assessment Committee and held various roles within the Faculty. His experience and knowledge will be invaluable as we shape the future of Pain Medicine in the UK.

The work of the Faculty would not be possible without the dedication of our secretariat. I extend my sincere thanks to the team for their hard work and responsiveness. Should you need support, the Faculty team is contactable via contact@fpm.

ac.uk and are always happy to help with any queries or concerns.

Pain Medicine in the UK is defined by its multidisciplinary, biopsychosocial approach. This is not merely a model of care but the bedrock of our practice. We lead teams comprising anaesthetists, nurses, physiotherapists, psychologists, and, in some units, occupational therapists. Together we deliver holistic care that addresses the biological, psychological, and social dimensions of pain. In an era

of NHS integration and system-wide collaboration, this model positions us as essential leaders in designing effective care pathways across primary, secondary, and tertiary services.

Finally, to all our Fellows and Members across England, Scotland, Wales, and Northern Ireland: I encourage you to actively engage with your Faculty. Your frontline expertise is invaluable. Please share your insights, contribute to our consultations, and help us shape the future of Pain Medicine in the UK.



Dr Victor Mendis
FPM Vice Dean

MESSAGE FROM THE VICE DEAN

I am truly honoured to step into the role of Vice Dean for the Faculty. This is an exciting opportunity, and I look forward to building on the excellent work already underway. While our specialty faces challenges, I am confident that through collaboration, your continued support, and shared commitment, we can further advance multidisciplinary care and champion evidence-based practice.

My training at Barts and The London School of Anaesthesia laid the foundation for a fulfilling career. Since 2005, I have served as a Consultant in Pain Medicine at Mid and South Essex NHS Trust, and practised anaesthesia until 2020. I'm eager to bring this experience to the role and to contribute positively to the Faculty's future.





Dr HooKee Tsang
FPMTAC Co-Chair



Dr Peter Cole FPMTAC Co-Chair

TRAINING & ASSESSMENT

This the first update of FPMTAC with Co-Chairs. We would like to thank Dr Victor Mendis, past Chair of FPMTAC for all of his work with the committee for over ten years and to congratulate him for his induction as Vice Dean on 3 October 2025

Thanks also to Dr Paul Rolfe (Paediatric Pain representative, Dr Varanasi (SAS representative), Dr Baird (Acute Pain representative) and Dr Alistair Dodds (Pain and Communications Skills representative) who have come to the end of their terms, they have all made significant contributions to this committee and we wish them well for the future.

The committee and secretariat

The committee comprises of the following members.

 Dr Sheila Black (RAPM Chair Elect & Women in Pain/Logbook Representative

- Dr Helen Makins (FPM Board Member
- Dr Vivek Mehta (Chair, FFPMRCA Examination)
- Dr Sailesh Mishra ICESR and MTI Lead
- Dr Sonia Pierce [Deputy Chair, FPM's Education Sub-Committee]
- Dr Jonathan Rajan (RAPM Chair)
- Dr Sachin Rastogi
 IPaediatric Pain Representati
- Dr Alex Hollis (Co-optee: Trainee Representative)

FPMTAC could also not exist without essential support from our Faculty colleague

► Ms Natalie Bell (Training Manager, Faculties)

- Mr James Goodwin (Associate Director of Faculties)
- Ms Fiona Daniels (Head of Examinations, RCoA)
- Miss Susan Simpson (Training Administrator, Faculties)
- Mr Ross Stonier (Faculties Exams Manager)

New roles

In order to broaden the representation on the committee, two new roles have been advertised, one for an SAS doctor and one for a Locally Employed Doctor (LED). These roles will remain separate due to differences in roles and contractual arrangements. Inclusion of an LED representative is intended to bring valuable insight from an underrepresented group, particularly those engaged in credential and post-CCT fellowship roles. The Acute

Pain representative role is currently vacant and is a Board-appointed position. Recruitment in underway and the appointed individual will join the committee in due course.

Part of the core work of FPMTAC is to maintain the standards for training across the four nations. To facilitate this work, a Quality Lead role has been created to focus on training quality, engagement with training surveys and supporting areas of best practice and we will be recruiting for this role in due course. The Clinical Leads Network will now fall under the remit of the Professional Standards Committee, though FPMTAC will remain involved in discussions at Board level.

Our work

► The rollout of credentialing

- ► Educational events including Pain Medicine careers day, Faculty Tutors day
- Overseeing the FFPMRCA exams including development of the new clinical performance exam, oversea examinations working group and examiner recruitment
- Working to deliver consistent paediatric pain training
- ► RAPM and FT support
- Review of training available including hospital review form
- Promoting pain training including early engagement in Pain Medicine and representation at anaesthetic training meetings such at GAT
- Reviewing GMC Portfolio Pathway applications, development of MTI in pain medicine and the next Faculty of Pain Medicine Workforce Census.

FFPMRCA EXAMINATION CALENDAR

	FFPMRCA SOE	FFPMRCA MCQ
Opening date for FFPMRCA exam applications	06 February 2026	10 November 2025
Closing date for FFPMRCA exam applications	5pm - 19 March 2026	5pm - 18 December 2025
Examination date	07 May 2026	10 February 2026
Examination fee	£715	£605

Visit www.fpm.ac.uk/training-examinations/ffpmrca-examinations for the latest news.

Transmitter Autumn 2025



Do you have an interesting case to share?

Or have you been to any new programmes or events in Pain Medicine recently?

FPMLearning is the Faculty of Pain Medicine's open resource for all learners in Pain Medicine. We're looking for new contributors from all areas of the specialism to contribute to The new FPMLearning blog, our Education Cases and Radiology Corner.

Please email contact@fpm.ac.uk to find out more.

www.fpm.ac.uk/fpmlearning

Opioids Aware

The Faculty of Pain Medicine has undertaken a comprehensive update to the Opioids Aware resource reflecting the latest clinical evidence and international guidance. The proposed updates went out for professional and public consultation and was revised based on received suggestions. Below are the key changes:

Dose Guidance Revised

- The recommended oral morphine equivalent (OME) threshold has been reduced from 120mg to 90mg/day, with an ideal target of 50mg/day. These are more clearly designated as guidance and exceptions may be clinically appropriate
- This change is based on new evidence highlighting increased harm at higher doses without proportional benefit.

Updated Literature and Reference

▶ All references and external links have been reviewed and updated.

Safequarding

New information on safeguarding consideration when prescribing strong opioids, especially in vulnerable populations.

Opioid Statistics

Outdated statistics, particularly those not relevant to prescribed opioids, have been removed to improve clarity and relevance.

Terminology

Clarity on the use of terminologies when describing opioids.

Updated patient information section

- Updates to content, language and format.
- Updated patient information leaflets

Opioids Aware is a living document with ongoing updates as new evidence arises.

www.fpm.ac.uk/opioids-aware



Dr Vivek Mehta Chair FFPMRCA

FPM EXAMINATIONS

We are in transition phase as we prepare for the new FFPMRCA with a revamped MCQ with an increase in the Single Best Answer (SBA) and the Extended Matching Questions (EMQs) whilst phasing out Multiple True or False (MTF).

Exam changes

The old SOE will be replaced by Clinical Performance in Pain (CPEP) examination. This will incorporate stations that will assess knowledge, theoretical, practical and behavioural, aspects of clinical practice in pain. The examinations development is going through its stages with a mini pilot performed with 'actors' in May, and then a full pilot CPEP held on 12 September 2025 with actors and volunteer candidates.

A big thank you to all who have stepped in and agreed to volunteer. The EDAG has been working with these changes, and a formal submission is expected to the GMC later this year. This will allow the Faculty to give enough notice to hopefully go live in 2027. Formal communications will be made via the RCoA and Faculty communications channels. This is in line with GMC recommendations. The progress has been extensive and the work monumental.

A big thanks goes to the CPEP development team led by Dr Jonathan Rajan, Dr Sonia Pierce and Dr Arumugam Pitchiah. The MCQ team led by Dr Saravanakumar Kankarajan is doing a

stellar job in revamping the old questions and bringing in new material in line with the Credentialing curriculum. This has involved several out of hours meetings that have well encroached weekends and I am immensely grateful to the team who have really given their best. The work is not done yet but it's getting to a shape that the future will be proud of. The aim remains to be fit for purpose for years to come. The examination team at the college, Imagen O Brien, Ross Stonier, and Fiona Daniels are all working relentlessly to ensure the changes meet the appropriate regulatory deadlines. Whilst there is always an agenda for change, we remain focused in ensuring that we deliver the current examination to ensure standards of pain practice are upheld.

Exam results

We had a big turnaround and the May 2025 SOE had a total of 23 candidates: 18 passed making the pass rate 78%. The SOE examination in Autumn 2024 had 13 candidates taking the examination. Despite low numbers this was a low pass rate for the examination with 6 candidates passing 46.15%. However the MCQ examination in February

2025 demonstrated an excellent turnout with 31 candidates taking the exam and 23 passing (74.19%).

New examiners

The round of applications is now closed for the new examiners, and I look forward to welcoming our new colleagues in the next sittingWe would also be appointing affiliate examiners who would be helping not only with question development but also Angoff process as part of standard setting for the examination. This is an incredible and fascinating experience that provides the insight to the standard setting process. The examinations are also open for visitors who would ultimately apply for examiners. It is a quite a fun packed day where you can sit and observe the examination and I personally look forward to welcoming some of you. Please contact me directly at Vivek.mehta@nhs.net if you are interested. The college is also exploring overseas candidate intake and more to come in subsequent bulletins as we make progress. I feel privileged to have your support and it's an honour to continue to deliver the highest standards of Pain Medicine in any examinations.



GETTTING IT RIGHT FIRST TIME: THE CHRONIC PAIN PROGRAMME

The GIRFT chronic pain programme has launched! After many years of discussion, we are excited to introduce ourselves as the clinical leadership team and describe our early plans for the programme. We recognise that this project has become reality due to the considerable work put in by members at the Faculty of Pain Medicine amongst other organisations.



Dr Helen Makins Clinical lead/consultant Gloucestershire Hospitals NHS Foundation Trust



Dr Graham Syers
GP, National clinical
advisor, community and
primary care



Dr Jacqui Clinch Paediatric rheumatologist and National clinical advisor, children and young people



Representatives from the FPM including Dr Nick Plunkett and Dr Lorraine de Gray and from the British Pain Society led by Professor Roger Knaggs, along with many others, have worked tirelessly to highlight the importance of a focus on pain at a national level. We are very grateful for this background work which has raised the profile of Pain Medicine as a specialty and brought national attention to the importance of our services and work.

The GIRFT programme for Pain

Many faculty members will be aware of GIRFT from the surgical and anaesthetic perspective. For those who are less familiar, the GIRFT program sits within NHS England currently and aims to identify areas of unwarranted variation in service provision and practice, using data to identify strengths and weaknesses and track progress, as recommendations are made on a national level. Therefore, the primary aim of the GIRFT program for chronic pain is to improve access and consistency of management options for patients in line with best practice. We are reassured that the GIRFT program looks set to continue as one of the successful NHS England initiatives and will be developed further over the coming years.

Our clinical team has a breadth of experience across all tiers of service provision, including pain education, third sector/voluntary organisation initiatives, community-based services,

general practice and hospital pain services, for both adults and children. We have a dedicated and highly experienced project management team, with specialists in data analysis who support the work. This program sits within the GIRFT musculoskeletal portfolio, led by Dr Lesley Kay, National Clinical Director for Musculoskeletal Conditions, amongst programmes covering community musculoskeletal, spinal, orthopaedic and rheumatological conditions for all ages. We share resources and ideas with these other work streams, to ensure a consistent approach and avoid duplication.

An expert rederence group

We have identified an expert reference group, with representation from a range of key stakeholders in the pain field. We are actively encouraging a range of different professionals to be involved in this group, along with patient representation. In addition, we are collating a list of professionals and organisations interested in contributing to our community of practice, which will meet regularly and enable sharing of ideas and experience related to specific aspects of practice.

Much very important work has already been done, by the Faculty of Pain Medicine and other organisations such as the NHSE prescribing team and NICE. We will take the learning from these initiatives and build upon them. Recent useful publications from the FPM include the gap analysis, comparing

service provision with the FPM core standards for pain services and the nearly complete directory of services available for people with pain across the regions. Our initial priority is to identify sources of data which will enable us to quantify the variation across the regions and country. Thereafter, we will be creating a survey and a dataset which we will be taking out to a range of regions and systems. This will help us to identify variation and to make recommendations for improvement. We will focus on prevention and early intervention, in accordance with the aspirations of the 10-year plan for the NHS but crucially because good foundations in service provision will benefit patients and reduce the pressure on other services further along the pathway.

Find out more

Thank you to those who have already been in touch to pledge support, contribute ideas or highlight areas of concern. We are keen to hear from any departments, organisations or systems who are seeking guidance, or to share examples of excellent pathways and practice. Similarly, individuals who would like to join our community of practice would be very welcome to express interest. Please contact us using the email address england. girftchronicpain@nhs.net.Updates and further information can be found on our webpage, https://gettingitrightfirsttime. co.uk/medical_specialties/chronic-pain.

Transmitter Autumn 2025





Dr Eslam Elsayed MBBCh, PgD Pain, MD Anaesthesia & Surgical Intensive care

FROM JOURNAL CLUB TO KNOWLEDGE CAPSULE: A TRAINEE INNOVATION IN PAIN MEDICINE EDUCATION

Journal clubs have long been a cornerstone of postgraduate medical education, providing a forum for critical appraisal and the application of evidence to clinical practice.

In today's demanding training environment, particularly in specialist fields like Pain Medicine, trainees face significant challenges in maintaining regular academic engagement.

Clinical workload, shift-based rotas, geographical dispersion, and mounting exam pressures often limit the feasibility and effectiveness of traditional journal club formats. These pressures highlighted a need for a

more flexible, time-efficient, and inclusive approach to critical appraisal and shared learning. The idea behind *Read Digest* emerged from this context: to transform the journal club into a concise, digital newsletter that allows trainees to engage with high-quality evidence on their own schedule, within a psychologically safe and collaborative virtual space. Rather than requiring synchronous attendance or

lengthy discussions, Read Digest distils key findings and clinical implications from high-impact literature into structured summaries—facilitating both personal reflection and group learning. By adapting the format to the realities of modern training, Read Digest addresses not only the academic needs of trainees but also broader educational principles such as peer learning, digital accessibility,



The initiative models professionalism and leadership by creating a safe space for open discussion, differing opinions, and constructive critique, all of which contribute to a healthier learning environment.

and the integration of knowledge translation into everyday practice.

Structure and impact

Delivered monthly through online platforms, *Read Digest* provides structured, concise appraisals of current research articles, clinical guidelines, and high-impact publications. Each issue focuses on extracting key messages, clinical applications, and questions for reflection, making complex evidence more accessible and relevant. This enables trainees to stay academically engaged while balancing service commitments, and supports critical thinking and informed clinical decision-making.

By presenting information in a digestible format, *Read Digest* empowers readers to evaluate research more efficiently and apply findings more confidently in day-to-day practice. The emphasis on clarity, relevance, and reflection encourages both deeper learning and exam readiness.

Research and practice

A core objective of *Read Digest* is to bridge the gap between published research and clinical application.

Trainees are encouraged not just to absorb evidence, but to understand its context, limitations, and practical implications. The initiative fosters

curiosity around how studies are designed, how data is interpreted, and how new findings might shape clinical approaches. This promotes a culture of evidence-based thinking and research-informed practice, even in areas where guidance may be limited or evolving.

Peer learning

One of the most valuable aspects of *Read Digest* is its peer-led nature. Trainees contribute by selecting articles, leading discussions, and producing summaries, creating a collaborative learning environment. This shared responsibility enhances engagement, encourages critical discourse, and develops key educational skills such as teaching, facilitation, and content design.

The initiative also promotes thoughtful evaluation of educational impact, with regular feedback shaping how content is presented and discussed. This cycle of creation, reflection, and improvement mirrors the principles of adult learning and supports the growth of future educators within the specialty.

Leadership

Leading and sustaining Read
Digest has naturally developed
broader professional skills. These
include planning and coordination,
adapting communication styles,
supporting diverse learner needs, and

fostering a respectful and inclusive learning culture. Importantly, the initiative models professionalism and leadership by creating a safe space for open discussion, differing opinions, and constructive critique, all of which contribute to a healthier learning environment.

By offering opportunities for trainees to lead within their peer group, *Read Digest* supports the development of confidence, initiative, and teamwork—skills essential to both clinical leadership and educational excellence.

Meaningful

Read Digest demonstrates how a simple change in format, rooted in real-world training challenges, can drive meaningful improvements in medical education. By combining evidence appraisal, digital accessibility, and peer collaboration, this initiative provides a sustainable model for academic engagement and reflective practice. As clinical and educational demands continue to evolve, traineeled innovations like Read Digest will be vital in supporting the next generation of adaptable, engaged, and well-informed clinicians.

Those interested in *Read Digest* should please email <u>contact@</u> <u>fpm.ac.uk</u> to be put in touch with me for access to the resoruce.



Dr Alex Hollis
FPM Resident in Training
Representative

TRAINEE UPDATE



Hello, I'm Alex Hollis, and I'm pleased to introduce myself as the new Faculty of Pain Medicine Resident in Training Representative. I'm currently undertaking a chronic pain fellowship at Hampshire Hospitals based in the Wessex region. It's an honour to step into this role and support our growing community of Pain Medicine trainees.

My Focu

First, I'd like to thank my predecessor Dr Victoria Winter for her outstanding work and trainee advocacy. I'd also like to acknowledge the former trainee reps whose hard work has helped bring about the exciting rollout of the National Teaching Sessions, a major step toward consistent, high-quality education for all trainees.

My goal is to be a supportive, approachable liaison between the Faculty Board and the trainee body. I want to continue being a strong voice for trainees. Whether you're just starting your special interest area (SIA) and feeling a little lost, gearing up for exam revision, or nearing the end of training and exploring career development opportunities, I'm here to support you as best I can.

Feedback

On that note, a quick plea for feedback. I completely understand the fatigue that comes with surveys. But with 52 trainees currently undertaking an SIA in Pain Medicine, written

feedback remains our strongest tool for change. Most surveys receive a response rate of around 15%, making it hard to capture a representative view of our trainee community. If you have suggestions, concerns, or frustrations please share them. We can't fix what we don't know about. Change can feel slow, but to justify action and investment, we need evidence and I can't advocate without it.

It you're just starting your SIA, congratulations on choosing such a rewarding specialty! My advice is simple: stay curious. Pain is complex and deeply personal. A holistic approach helps build meaningful, patient-centred plans. During my SIA, I spent time with an insomnia clinic, radiology reporting, sports physicians, and dietitians, alongside the more traditional pain MDT.

These experiences gave me a broader view of what our colleagues offer and how we can integrate that into patient care. I hope to share more of this in future *Transmitter* articles.

Education and updates

- National Teaching Sessions Now live with future dates on the FPM Website: https://fpm.ac.uk/ fpmlearning/national-teaching-
- ► Wellbeing Hub
 https://fpm.ac.uk/wellbeir
- ► GIRFT Pain: This in the early stages but will aim to ensure high standards and equity nationally
- ➤ Trainee Survey: Closed—results coming next issue after Training and Assessment Committee review

Key Dates for Your Diary

- ▶ 22 Sept 2025: FFPMRCA SOE Online Tutorial
- ▶ **9–11 Nov 2025**: ISPN Annual Conference, London
- ► 14 Nov 2025: FPM Trainee Day (Hybrid)
- ▶ 26–28 Nov 2025: Liverpool Chronic Pain Course
- ▶ 10 Dec 2025: FPM Annual Meeting, RCoA London

Join the trainee WhatsApp group via the QR code above, we'd love to hear from you.



National Teaching Sessions

The National Teaching Sessions aim to coordinate high quality educational teaching for Pain Medicine trainees across all regions and create opportunities to share good practice.

The National Teaching Sessions are a supplementary resource deigned to share good learning and good practice, and to allow the exposure of topics and teaching from other regions on an ad hoc basis.

This is not a replacement for local Pain Medicine teaching.

Vist www.fpm.ac.uk/fpmlearning/national-teaching-sessions for more.



Dr Jonathan Rajan RAPM Chair

REGIONAL ADVISORS

"Live as if you were to die tomorrow. Learn as if you were to live forever" — *Gandhi*. The time has come for my last RAPM update and to pass the baton into the very capable hands of your next Lead RA, Dr Sheila Black.

RAPM Meeting

The most recent RAPM meeting took place on 16 June 2025. One exciting proposal discussed was the development of a Pain Medicine Careers Day, aimed at promoting the specialty earlier in anaesthetic training. Following discussion at TAC, a small working group, led by Dr Sonia Pierce, has been formed to take this initiative forward. Another topic raised was the challenge of accessing paediatric Pain Medicine training. To address this, the possibility of cross-regional placements to attend paediatric pain clinics is being explored. Please look out for updates in future issues.

Faculty Tutor Day

This year's Faculty Tutor (FT) day has been twinned with the RAPM meeting on Monday 27 October 2025. Please remember to book leave so you can attend online. The programme is currently being finalised, but planned topics include:

- Radiation safety
- ► New national teaching sessions
- ▶ Updates to the FFPMRCA exam
- ► The Medical Training Initiative
- Developments in paediatric Pain Medicine training.

Medical Training Initiative

Dr Sailesh Mishra, our MTI and Portfolio Pathway Lead on the Faculty of Pain Medicine's Training and Assessment Committee (FPMTAC), has highlighted the increasing demand for UK-based Pain Medicine training from this cohort, and some of the challenges they face in accessing anaesthetic training as a prerequisite. To support this, a working group has been established to explore national coordination and integration with the global MTI framework.

Hospital Review Forms

Good news: the HRFs are currently being simplified by the Faculty of Pain Medicine Training and Assessment Committee. Planned improvements include:

- ► Clearer site-specific information
- ► Training stage breakdowns
- Removal of named staff to reduce completion time
- Streamlined workforce data, now focusing on the number of accompanied teaching sessions per week.

New fields are being considered to reflect emerging service developments, such as transitional pain services, and pharmacist-led ward rounds. The updated HRF Forms will be on the FPM website soon; we will notify the RAPMs as soon as they are live.

Changing faces

A warm welcome to Dr Sailesh Mishra and Dr Sunil Dasari, the new RAPMs for the Northern region and Wales, respectively. We also extend our thanks to Dr Mulla who has stepped down as RAPM for the East of England. We look forward to welcoming his successor.

Finally, it has been a privilege to serve as Chair of this dedicated and hardworking group of RAPMs, alongside the Faculty's management team, over the past three years. The introduction of a clinical leads network, new staff grade and Faculty Tutor specifications, supporting the creation of the national teaching sessions and bringing updates in Pain Medicine training to the Faculty Tutors' network, have been a worthwhile investment of time, and I hope they will continue to benefit trainers and trainees for years to come.

Between supporting the seven SIA pain trainees in my region and developing the new exam, I won't be short of things to do! In the meantime, over to you Dr Black!



Dr Dev Srivastava Chair Education Subcommittee and Events Lead

EDUCATION & EVENTS

The aim of the Education Subcommittee (ESC) is to bring together all FPM education activities under one roof and provide greater synergy to these work streams. Recently the ESC confirmed the formal inclusion of the FPMLearning working group into the Subcommittee.

Educatio

Dr Andrew Whelan is leading on the National Teaching Sessions which continue to grow in reach and visibility. The scheme supports Fellows in developing leadership roles in teaching, and plans are underway to strengthen national collaboration and trainee engagement. If you or your department wish to join the scheme, please get in touch.

The FFPMRCA SOE Exam Preparation Course in September 2025 was delivered successfully, with Dr Tammar Al-Ani shadowing as part of faculty development. Dr Al-Ani is the new lead for the course. The feedback has been very positive from the trainees.

Dr Nancy Cox represents e-PAIN on the ESC. e-PAIN is a multidisciplinary programme based on the International Association for the Study of Pain's recommended multidisciplinary curriculum for healthcare professionals learning about pain management. If you wish to contribute ,Dr Nancy Cox can be contacted at nancycox@doctors.org.uk.

Events

The FPM now organises two study events, one in the summer taking a deep dive into acute and chronic pain issues and the annual meeting in December. For the last few years since we have focused on specific

areas of pain management in depth, we have had consistently positive feedback.

The Spring Study Symposium in May 2025 (Day 1 Acute Pain) was very well received. Standout sessions included paediatric pain, VR and AR applications, Al in education, and sublingual sufentanil. Suggested additions included challenging patient groups (substance misuse, psychosocial complexity, dementia). Overall, attendees valued the diverse, engaging programme and expert speakers. Day 2 of the Spring Study Symposium was a deep dive into 'Low Back Pain'. Willingness to recommend was strong. Learning objectives were completely/mostly met by 83%, and 89% rated overall relevance as extremely/mostly relevant. Top-rated sessions included *Imaging Back Pain* (Dr Gontsarova) and *Surgical Management* (Mr Cousins); biomechanics, assessment, psychology, physical therapy, injections, and neuromodulation sessions.

Join us for the FPM Annual Meeting 2025, scheduled for 10 December 2025, with a focus on innovation in Pain Medicine education and practice. The summer meeting on 15/16 June 2026 will be held in London, and the focus will be on Pain due to trauma (Acute Pain) and large joint pain interventions (shoulder, hip and knee). Visit www.fom.ac.uk/events for more



Essential Pain Management®

A simple structure to teach a complex subject

EPM was developed by Roger Gouke and Wayne Morriss (ANZCA) and adapted for medical student use by Linda Huggins.

EPM has been used in the UK since 2014 for training medical students, postgraduate doctors and other healthcare professionals in pain management.

EPM is freely available on the FPM website www.fpm.ac.uk/epm-uk

Modules include:

> Introduction
> EPM for medical students
> EPM for Foundation doctors
> EPM for trainees

Recognise — Assess — Treat

EPM is centred around this simple acronym, which provides a memorable structure and standardises the approach to teaching.

Essential Pain Management needs YOU!

Essential Pain Management UK Advisory Group (EPMAG) is currently advertising for Lead roles in Manchester and Northern Ireland region.

We are looking for keen educators would be responsible for liaising with local universities and NHS trusts to propagate pain education through the recognised framework of Essential Pain Management among MBBS undergraduates, Foundation Year 1, 2 doctors and Anesthetic core and specialist trainees. The overall national activity of Essential Pain Management UK is coordinated through EPMAG which meets online three times a year and reviews progress through these meetings and background email communications. The appointment would be for a period of three years, which can be extended for a period of another three years as needed.

Please get in touch via contact @fpm.ac.uk for expression of interest or any queries.

For more information and to get free access, please visit www.fpm.ac.uk/epm-uk



Prof Sailesh Mishra Clinical Lead EPMAG UK

ESSENTIAL PAIN MANAGEMENT (EPM)

The Essential Pain Management (EPM) course is a globally recognised, multidisciplinary programme designed to enhance pain knowledge and management skills among healthcare workers of all backgrounds.

It is endorsed by the Faculty of Pain Medicine and the Royal College of Anaesthetists in the United Kingdom, along with other international pain societies. At its core, the course revolves around the RAT approach: Recognise, Assess, and Treat pain.

EPM in the cirriculum

EPM is now integrated into the undergraduate medical curriculum at several universities across the UK. Key concepts are also available through the e-Learning for Healthcare portal, where dedicated modules for undergraduates and Foundation Year trainees can be completed after registration.

Additionally, the principles of pain

management are incorporated into both Core and Specialist Anaesthetic training programs, delivered through face-to-face teaching sessions in hospitals throughout the UK.

Teaching EPM

Members of the Essential Pain Management Advisory Group UK have been invited to facilitate workshops internationally, including in Saudi Arabia and India. Within the UK, a network of regional leads has been established to support local delivery.

If you are interested in setting up an EPM teaching program as part of your local university's undergraduate

medical curriculum or Foundation Year trainee teaching, please reach out to your regional lead or the Faculty of Pain Medicine for assistance.

The group is also in the process of appointing a trainee representative to join the EPM UK Advisory Group.

The Faculty of Pain Medicine website offers excellent resources, including EPM teaching slides, workshop completion certificates, and feedback forms. Looking ahead, there are plans to expand the pool of EPM trainers by conducting further training-the-trainer workshops at national pain conferences next year.

Useful Resources

- ► EPM UK https://fpm.ac.uk/ epm-uk
- Essential Pain Management https://wfsahq.org/our-work/education-training/essential-pain-management/
- ► EPM Global https://fpm.ac.uk/
- epm-uk/epm-global
- ► Module 10 Essential Pain Management - NHSE elfh Hub https://portal.e-lfh.org.uk/ Component/Details/393452
- Pain https://www.e-lfh.
 org.uk/programmes/pain-
- management/
- Essential Pain Management (EPM) | A-Line https://www.aline.org.uk/events/essentialpain-management-(epm)/



Dr Manohar Sharma FPMPSC Chair

Updated CPD skills

relevant to chronic pain

are available on the

Lifelong Learning Platform and Events Section.

PROFESSIONAL STANDARDS

The Professional Standards Committee has recently appointed new members: Dr Manojit Sinha and Dr Richard Makin, alongside Prof Sailesh Mishra as our new Medicines Lead. Dr Devjit Srivastava will also join the committee as co-opted Acute Pain representative.

Core Standards

The third edition of Core Standards for Pain Management Services in the UK has started the process of setting up an Editorial Board, with roles for section editors having been advertised. Here we are learning lessons from previous editions of Core Standards, as well as colleagues in the Faculty of Intensive Care Medicine and the process behind their Guidelines for the Provision of Intensive Care Services

Section Editors will help recruit authors for various chapters for the third edition and will help develop the content, quality and standards further to positively

> influence future pain medicine service and its delivery.

OPCS-4 codes

OPCS-4 classification of pain codes booklet for chronic pain activity is in the final stages of development. We hope that this will be available for our members soon on the FPM website.

PSC has contributed to the current updates to the RCoA CPD guidance and has updated

the topics for chronic pain. These updated topics cover a range of skills in Pain Medicine for those in training, as well as for our members in established chronic pain practice.

The guidance document and patient information leaflet for patients on anticoagulants and antiplatelet agents when undergoing international pain procedures is near completion and will be available soon on the FPM website.

Pain Clinical Leads network

The development of the Pain Clinical Leads network in close liaison with the Regional Advisors Group is in progress. I am hoping that this will take shape over the coming months, and we will share further details on that in due course. If you are a Pain Clinical Lead, please get in touch.

Opioids Aware

The updated Opioids Aware resource is now live on the FPM website: https://fpm.ac.uk/opioids-aware.

PSC Committee members are also updating various published guidelines and documents, and we will share the updated versions of those documents as these become ready.





BRITISH PAIN SOCIETY 59th ANNUAL SCIENTIFIC MEETING





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