

Lancashire and South Cumbria Clinical Commissioning Groups Commissioning Policy Reviews

Spinal Injections and Radiofrequency Denervation for Low Back Pain Public Engagement Outcomes			
When the public engagement took place	Start date	End date	Duration
	14 May 2018	29 June 2018	6 weeks
Number of survey respondents – electronic or on paper	Total	By gender	By disability
	21	Female: 71% Male: 29%	No disability: 57% Disability: 33% Prefer not to say: 10%
	By sexual orientation	By ethnicity	
	Heterosexual: 95% Gay/Lesbian: 0% Bisexual: 0% Prefer not to say: 5%	White British: 86% Asian ethnicity: 0% Other: 10%	Mixed ethnicity: 0% Black ethnicity: 0% Prefer not to say: 4%
Number of people seen face-to-face	Not applicable		
	0		
Survey question response rates from patients and members of the public	76% of respondents read the spinal injections for low back pain policy before completing the survey	52% of those who responded felt it should only be funded for those people who meet the criteria	53% of survey respondents had received this treatment/procedure
	44% of survey respondents agreed with the criteria for spinal injections and radiofrequency denervation for low back pain and 31% disagreed with the criteria (the remainder neither agreed nor disagreed)		
Key issues/themes raised by patients and members of the public	There was no mention of recurrent back pain in the policy		
	The policy does not refer to back pain around the neck and shoulders		
	Concern was expressed that psychological and rehabilitation approaches for coping with back pain were being overlooked		

Responses to key issues/themes raised during public engagement	The policy did not specifically exclude recurrent back pain, although patients would probably be re-referred into the pathway of care as the policy gave no definition of a new patient
	The policy has been written to specifically cover low back pain. i.e. where the origin of the pain is clinically considered to arise from the lumbar region
	Psychological treatments have a part to play in the management of chronic and recurrent Low Back Pain, but it is not the remit of this policy, which purely focusses on the use of injection and radiofrequency denervation to manage low back pain
Key changes to the policy following public engagement (if applicable)	It was agreed that the policy title should be amended to reflect the fact the policy is solely concerned with treating low back pain
Policy ratified by Joint Committee of Clinical Commissioning Groups on 1 November 2018	