

FPM

Faculty of Pain Medicine
ANZCA

2025–2026

Commonwealth Pre-Budget Submission

Progressing Australia's National Strategy for Health Practitioner Pain Management Education

All Australians are entitled to efficient, effective and appropriate quality health care.

National Strategic Framework for Chronic Conditions¹

It has never been more urgent, given the complexity of medical care and burgeoning knowledge about the complexities of chronic pain, for health professionals to be educated in the most effective and up-to-date ways to assess and treat people with these problems.

Associate Professor Michael Vagg
Past Dean, Faculty of Pain Medicine

Foreword



The Faculty of Pain Medicine (FPM) is an internationally renowned medical academy, established within the Australian and New Zealand College of Anaesthetists (ANZCA) in 1998 in response to the growing prevalence and significant impact of chronic pain in our communities. Pain medicine was subsequently recognised as a distinct medical specialty in Australia in 2012, underscoring its importance in healthcare.

As the world's first medical multidisciplinary medical academy dedicated to pain medicine, we are committed to advancing education, training and standard setting while fostering research to strengthen the evidence base for effective pain management. Our work plays a pivotal role in shaping the future of pain care delivery.

Our vision is to reduce the burden of pain on society through education, advocacy, training and research. We advocate a 'holistic', person-centred and multidisciplinary approach to pain care, collaborating closely with interprofessional peak bodies and multidisciplinary organisations. Through strong partnerships with Australian and New Zealand pain societies, we actively engage in advocacy, education and health promotion, establishing ourselves as a trusted and credible source of evidence-based information and advice in pain medicine.

FPM has a strong track record of successfully delivering government-supported initiatives, including the development of *Australia's National Strategy for Health Practitioner Pain Management Education* ("*National Strategy*") and our current leadership of the implementation of the National Strategy's first goal: Developing a set of national standards for health practitioner pain management education.

The *National Strategy*, developed during 2020–2022 with extensive stakeholder consultation, provides a detailed blueprint for the future of pain education over the next decade. It identifies not only what needs to be achieved but also how to achieve these goals effectively and efficiently, ensuring a meaningful impact on individuals and communities living with pain². This budget submission seeks to further progress and implement additional goals within the *National Strategy*, ensuring its full realisation and delivering sustainable improvements in pain care across Australia.

I urge the Australian government to endorse and support the implementation of all goals as outlined in this submission, recognising the profound impact this initiative will have on reducing the burden of pain in our society.

Sincerely

A handwritten signature in black ink, appearing to read "D. Kapur". The signature is stylized and cursive.

Dr Dilip Kapur

Dean
Faculty of Pain Medicine
Australian and New Zealand College of Anaesthetists

The headlines

Problem

The urgent need to upskill Australia's health workforce in evidence-based pain management remains critical to improving the health, social, and economic outcomes of the millions of Australians living with chronic pain. Productivity losses associated with chronic pain total \$48.3 billion annually, with the total cost to the Australian economy around \$139b annually³.

Lack of education on chronic pain

Up to **80%** of these people may miss out on best-practice treatments⁴ because of healthcare graduates lacking the knowledge and skills to deliver evidence-based pain management⁵.



Stigma in healthcare

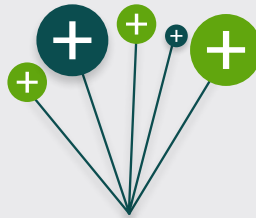
Almost **48%** of individuals living with chronic pain experience stigma from health professionals, and nearly **38%** feel stigmatised by their general practitioners⁶.



Multidisciplinary care not available

More than 40% of people living with chronic pain have not received a referral for broader pain management⁶.

Of those who had received a multidisciplinary team appointment, **71.9%** would recommend them⁶.



Disparities in pain care delivery

Discrepancies in providing best-practice acute and chronic pain care in clinical practice persist despite well-established clinical care guidelines being available for these conditions.



Cost of inadequate pain care

Poor pain management leads to unnecessary treatments, reduced patient productivity, and increased healthcare costs.

Chronic pain presentations account for 12–16% of emergency department visits, with hospital admission costs ranging from \$13,137 to \$14,949 per person⁷.



17 years



Gaps in research translation to practice

A seventeen-year lag exists between new research evidence and changes in clinical practice, delaying the adoption of innovative pain management strategies⁸.

Pain is the most common reason why Australians seek health care. "It has never been more urgent for health professionals to be educated in the most effective assessment and treatment of pain,"

Dr Kieran Davis, FPM Dean, 2022–2024

Solution

To ensure all Australians living with pain have access to contemporary, evidence-based care, it is imperative to advance the **implementation of the remaining goals within the National Strategy**. These next steps are essential for creating a health system that is both equitable and effective in managing one of the most prevalent and impactful health issues of our time.

Goals of the National Strategy

| Goal 1 | Goal 2 | Goal 3 | Goal 5 |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| Developing national standards for health practitioner pain management education. | Developing a national pain management education competency and capability framework. | Developing educational resources that align with the standards and competency and capability framework. | Equipping educators to deliver pain management education. |
| In progress (Feb 2024–Oct 2025) | Jan 2026–Dec 2027 | Jan–Dec 2028 | Jan 2029–Jun 2030 |
| Already funded for \$440k | \$1,190,400 | \$406,000 | \$958,000 |

Total Proposed Investment: \$2,554,400

**Please note that Goal 4 “Embedding pain management education into entry-to-practice curricula” will be the final stage and does not form part of this submission.*

Investment

This \$2.55m investment includes staff resourcing, consultations, and resource development. The educational tools will be developed using an iterative co-design approach in partnership with consumers, and a diverse range of stakeholders, focusing on the needs of Australians living with pain. The commencement of each goal is dependent on the completion of previous goals. Further information on each of the goals is included on page 6.

Outcomes

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Investing in health practitioner education improves patient outcomes, reduces reliance on healthcare systems, and alleviates the economic and societal burden of chronic pain, aligning with national health priorities ¹ . | Chronic pain costs the Australian economy \$139 billion annually ³ . A reduction of even 5-10% due to improved education could result in savings of \$7-14 billion per year. |
| Equitable access to clinically appropriate, evidence-based, and safe healthcare ensures high-quality care for all people living with chronic conditions, addressing gaps in rural, remote, and underserved communities. | People in rural and remote areas experience triple the burden of chronic pain compared to urban populations ⁹ . |
| Timely and effective management of acute pain minimises the transition to chronic pain, with early identification and targeted support for high-risk individuals reducing the long-term prevalence of chronic pain across Australia ⁴ . | Preventing just 337 emergency department visits through the delivery this submission would fully offset the \$2.5 million requested ⁷ . |
| Integrated multidisciplinary teams operate at full capacity to deliver high-quality, person-centred care, with a strong focus on prevention, early intervention, and shared decision-making to meet the needs of diverse populations. | Multidisciplinary pain management interventions result in a reduction of health expenditure by \$226 per person ³ . |
| All Australians benefit from affordable, accessible, and person-centred care that supports optimal health and well-being, regardless of geographic location, socioeconomic status, or timing of care needs. | Productivity losses associated with chronic pain total \$48.3 billion annually ³ . |

Goal 1: Developing national standards for health practitioner pain management education *(in progress)*

The project, which began in February 2024 and is on track for completion by October 2025, is progressing on time, within budget, and meeting all milestones. It aims to develop aspirational, nationally consistent standards for health practitioner pain management education that are multidisciplinary, aligned with the National Strategy, and focused on quality and guidance for education delivery and relevant across multiple disciplines and levels of education.

Key achievements / milestones to date:

- Establishment of a representative governance advisory group.
- Comprehensive review of published and grey literature.
- Extensive in-person and online stakeholder consultations.
- Inductive thematic analysis of the stakeholder workshop data.
- Stakeholder confirmation of the internal and external validity of the analysis.
- Mapping of national and international policies, guidelines, and legislation.
- Initial drafting of standards for stakeholder review and input.

Feedback from stakeholders and collaborators has been overwhelmingly positive, reinforcing the value and importance of this work.

Stakeholder insights

“Chronic pain is a life-altering challenge, and improving understanding and support is essential. I’m excited about the positive changes this work can bring moving forward! As someone living with chronic pain, I’m thrilled to see research focusing on person-centred care, collaboration, and better education for health practitioners. These priorities, centred on holistic care, effective communication, accessibility, and evidence-based practice—are exactly what is needed to improve outcomes for those of us living with chronic pain.”

Health practitioner living with chronic pain who was involved in checking the external validity of the identified themes for standards development

“I am pleased to advise that the department has concluded their assessment of the performance report. They have approved the performance report, with some feedback for your attention below ... the report was very detailed and high quality, which was pleasing to see.”

Team leader, funding arrangement manager, health grants branch, community grants hub

“Thank you SO much for the comprehensive update. I am glad that you managed to collect so much data to move forward with. The project is fantastic and so worthwhile. I am sure that it will be well worth all the effort that you and the team are putting into it. It was a privilege to attend the workshop. The online workshop was great.”

Person living with pain who attended a stakeholder consultation workshop

This submission: Implementation of goals 2, 3 and 5

| Deliverables | Goal 2 – Creating a national pain management competency and capability framework | Goal 3 – Developing educational resources that align with the standards and competency framework | Goal 5 – Equipping educators to deliver pain management education |
|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Background | Competency-based education in the health sector is becoming more common with the potential to align educational programs with health system priorities and the needs of health consumers ¹⁰ . | Current health practitioner pain management education courses and resources in Australia were developed prior to the development of the standards governing health practitioner pain management education and the competency and capability framework. | The skills and knowledge of educator of health practitioner pain management education have been identified as an area requiring improvement and support ¹¹ . |
| Rationale | A national pain management competency and capability framework applicable across diverse health disciplines, education levels, and community contexts will provide clear, actionable guidance for educators in planning and delivering pain management education. This framework will enhance health practitioners' awareness of the skills and knowledge needed to effectively support people living with pain. | Conducting a gap analysis of current pain management education courses and resources, guided by the standards and competency framework, will help education providers identify and address gaps, ensuring alignment with contemporary best practices and consumer needs. | Enhancing the knowledge, skills, and resources of educators will ensure they can deliver evidence-based, best-practice pain management education aligned with the standards and competency framework. |
| Outputs | <ul style="list-style-type: none"> Evidence-based competency and capability framework developed for the Australian context and with stakeholder input. Self-assessment tool piloted and refined. Comprehensive promotions and implementation campaign to promote awareness and uptake of the developed standards, frameworks and the self-assessment tool. | <ul style="list-style-type: none"> Evidence-based gap analysis framework and methodology based on the Australian standards and the competency and capability framework. Report detailing the gap analysis of current health practitioner pain management education resources in Australia. Presentations and workshops to demonstrate the application of the gap analysis framework and methodology | <ul style="list-style-type: none"> Pain educator toolkits: Practical guides aligned with the standards and competencies, including evidence-based education resources and advice for integrating these into curricula and programs. Promotions and implementation campaign: Comprehensive initiatives to raise awareness and encourage adoption of the pain educator toolkits. |
| Timeframe | January 2026–December 2027 | January 2028–December 2028 | January 2029–June 2030 |
| Investment | \$1,190,400 | \$406,000 | \$958,000 |

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