

Dumke College of Health Professions

ANNIE TAYLOR DEE SCHOOL OF NURSING

ABSTRACT

Pain management and pain education are still lacking in the acute care setting. Studies have shown that the current pain management measurement tools may be ineffective in managing pain for patients. National accrediting bodies promote the human right to pain control. Nurse-led teaching and improved pain education tools will promote patient's comfort and understanding. The implications for improvement in educational tools and nurseled teaching is that improved pain education tools will promote comfort, recovery, and involvement of patient's in managing personal health care in the acute care setting.

PICO QUESTION

Will nurse based pain evaluation (I) and education improve pain management (O) in hospital patients (P)?

LITERATURE REVIEW

Pain management, patient perception of pain management, and the relationship to nursing have been widely studied. Studies involving quality improvement projects about nursing's role in pain management have indicated the need and the ability for positive change to occur (¹); they have also demonstrated that the current approach to pain education and pain management may be lacking the tools to make this patient centered condition more treatable (²). Major themes found were

- Pain can be an antagonist to healing (³)
- Patient satisfaction coincides with pain management (⁴)
- Nursing has constant correlation to pain satisfaction and HCAHPS scores (⁵)
- Numeric Pain Scale does not evaluate pain effectively (⁶)
- Comprehensive Nursing assessment and non-pharmacological interventions will promote decrease in opioid use (⁷)

Improved Pain Management in the Acute Care Setting Through Education for Nurses

Kasey Grubb, BSN, RN, MSN Student

PROJECT METHODOLOGY

In the acute care setting, pain management remains a difficult issue. Deficient pain education and pain management skills were identified as a topic for an improvement project following discussions with patients and nurses. The aim of this project is to improve pain education, intervention strategies, and management approaches by nursing staff. Improvement in these areas will engage the patient as part of the healthcare team, address patient safety, and strengthen the relationship between nurse and patient.

Pain Scale Tool

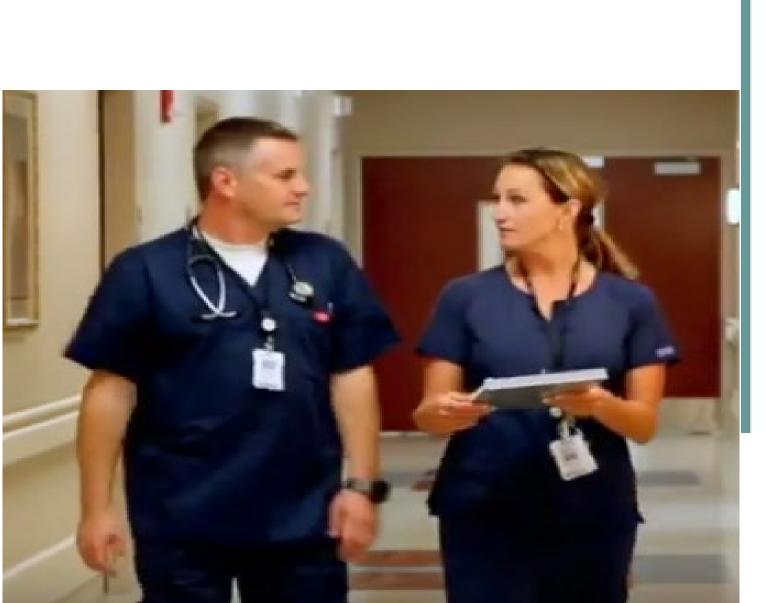
Project Development and Implementation

The implementation of the improvement project is being piloted at a local acute care facility on the medical and surgical care floors. Approval was gained through the Nursing Advisory Committee and Nursing Leadership Committee.

Project preparation included development of a lesson plan, multisensory didactic instruction that incorporates media, and clinical simulation studies. The following teaching tools were created.

- Lesson Plan
- PowerPoint presentation
- Pain case studies
- Pain Scale Education Tool
- Nursing Evaluation Tool

The improvement project is currently active on the medical and surgical care units. Preliminary feedback by nursing staff, quality improvement, and unit directors is positive. A copy of the Pain Scale Education Tool is being used in patient admission packets for patients on the medical and surgical floors. Current barriers to effective use are No patient education on pain scale education tool. Clinical staff not using the pain scale education tool. • Resistance to change. Education is being reinforced, and nursing super users have been identified as implementers and promoters of the pain scale evaluation tool. Ongoing evaluation is occurring.





Project Evaluation

THEORETICAL FRAMEWORK

Acute Pain Management theory and Cognitive-Field Theories guided the development of this project. These two theories provide a framework describing how patients relate to pain, pain control, and nursing involvement.

 Acute pain management theory (⁸) describes the relationship between nurses and patients and how these relate to pain in the acute care setting.

Cognitive-field (²) theories describe how the person is made up of different parts that equal a whole, the whole can be affected by the many parts that make up the whole.
Perception of the parts or the whole that make up a person, can affect the way a person relates to the physical and psychological world.

CONCLUSIONS

Pain management in relation to nursing continues to be a complex concept. Ongoing focus and education about patient centered pain control for the nursing workforce can be described as a continuous cycle. The continuous cycle includes education, involvement of patient and nursing, current research, evaluation, and recommended practices.

REFERENCES

 Glowacki , D. (2015). Effective pain management and improvements in patients' outcomes and satisfaction. *Critical Care Nurse*, 35(3), 33-41. doi.10.4037/ccn20154Glowacki , D. (2015). Effective pain management and improvements in patients' outcomes and satisfaction. *Critical Care Nurse*, 35(3), 33-41. doi.10.4037/ccn201544040

2. McEwen, M., & Wills, E. M. (2014). *Theoretical basis for nursing* (5th ed). Philadelphia, PA: Wolters Kluwer

DeVore, J., Clontz, A., Ren, D., Cairns, L., & Beach, M. (2017). Improving patient satisfaction with better pain management in hospitalized patients. *Journal for Nurse Practitioners*, *13*(1), e23-e27. doi.org/10.1016/j.nurpra.2016.07.020
Craig, A. R., Otani, K., & Herrmann, P. (2015). Evaluating the influence of perceived pain control on patient satisfaction in a hospital setting. *Hospital Topics*, *93*(1), 1-8. doi: 10.1080/00185868.2015.1012926.
Eawwaz, A. D. Williams, K. Meyers, J. Jones, K. D. Sullivan, K. & Logsdons, M.

Fawwaz, A.D., Williams, K., Meyers, J., Jones, K. D., Sullivan, K., & Logsdons, M. C. (2017). Contextual factors impacting a pain management intervention. *Journal of Nursing Scholarship*, *49* (5), 504-512. doi:10.1111/jnu.12319
Joint Commission, (2018). Pain assessment. Retrieved from

https://www.jointcommission.org/assets/1/18/R3_Report_Issue_11_Pain_Assess ment_8_25_17_FINAL.pdf Radnovich, R., Chapman, C. R., Gudin, J. A., Panchal, S. J., Webster L. R., &

Pergolizzi, J. V. Jr (2014) Acute pain: Effective management requires comprehensive assessment. *Postgraduate Medicine, 126* (4), 59-72. doi: 10.3810/pgm.2014.07.2784

 Good, M. (1998). A middle-range theory of acute pain management: Use in research. *Nursing Outlook, 46*(3), 120-124. https://doi.org/10.1016/S0029-6554(98)90038-0