Pain Management
Use standard procedures to assess and manage a patient's pain throughout the course of care.

Domain

Patient Care Processes:
Clinical processes that ensure delivery of high-quality care to individual patients

Aims

Effective:
An evidence-based practice that produces better outcomes than its alternative

Patient Centered:
Care throughout a patient’s experience that is coordinated, informed, and grounded in respectful interactions with care providers that are consistent with the patient’s values, expectations, and care decisions

Equitable:
Care delivered fairly, with consideration to need, and with no other discriminating factors

Process Attributes

Cost to Implement
The monetary resources required to implement this process

Minimal: Just the cost of the improvement effort itself

Time to Implement
The amount of time, from months to years, it will take on average to establish this process

Fewer than 12 months

Difficulty to Implement
The challenges of implementing this process

Moderately Challenging: Either involves multiple units or disciplines OR requires a substantial shift in culture and/or operations, but not both of these

Level of Evidence
The degree to which the actions in this process are supported by research and experience; based on the Cochrane scale

Some Evidence: Level III — Studies published with some control included
Details

Elements

• Assess and treat pain
  • Recognize the patient’s right to appropriate assessment and management of pain.
  • Assessment: Identify patients with pain in an initial screening assessment. When pain is identified, perform a more comprehensive pain assessment, including the impact of pain, making sure to address language and/or health literacy barriers.
  • Record the results of the assessment in a way that facilitates reassessment and follow-up, and data extraction for purpose of improvement.
  • Recognize the multi-dimensional nature of pain, and use a multi-disciplinary treatment, including non-pharmacologic modalities.
  • Use pain management protocols and order sets, treating until patients reach target comfort levels.
  • Ensure that pain does not interfere with participation in rehabilitation.
  • Empower patients and families and improve care by educating them about the importance of effective short and long term pain management.
  • Address patient needs for symptom management in the discharge planning.

• Ensure clinician and staff competence and expertise in pain management
  • Educate relevant providers in pain assessment and management.
  • Ensure staff competency in pain assessment and management, including adding pain assessment and management in the orientation of all new staff.
  • Establish policies and procedures that support appropriate prescribing or ordering of effective pain medications.
  • Establish unit-based auditing system with effective monitoring and feedback

• Establish efficient institutional system of care in pain management.
  • Cultivate a culture of accountability, no blame, and patient-centered care in pain management.
  • Streamline the delivery of timely pain assessment and treatment process, i.e., responding to acute pain crisis (pain score >7) as a code or rapid response event.
  • Identify unit-specific nursing and physician leaders as champions of pain management.
  • Review sentinel events using root cause analysis and encourage patient and family reporting.
  • Develop a pain hotline or pain telemetry for patients.

Outcomes

• Patient Satisfaction: Increased patient satisfaction (e.g., HCAHPS Willingness to Recommend, HCAHPS Hospital Rating)
• No Gap by Race, Ethnicity, or Language: No gap by race, ethnicity, primary language for key measures

Service Lines and Critical Functions

• Applies in All Patient Settings
• Hospital Medicine, Adult
• Nursing

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Key Measures

- No difference in all other measures by race/ethnicity/language
- Overall amount of opioid use
- Percent of patients who answer “always” to the question, “how often was your pain well controlled?”
  Item 13 on the HCAHPS Survey
- Percent of patients who have their pain assessed
  - Numerator: Of the patients who have their pain assessed, include any patient who has a pain intensity score documented in their chart each time vital signs are taken (unless a greater or lesser frequency is clinically indicated and documented in the chart)
  - Denominator: Total number of patients in the sample or population
- Percent of patients who state “always” on the question, “How often did the hospital staff do everything they could to help you with your pain?”
  Item 14 on the HCAHPS survey
- Percent of patients with severe pain
  Patients with pain intensity scores of 7 to 10 on a scale of 0 to 10 (where 0 is No pain and 10 is Worst possible pain)
- Percentage of patients on opioids who have their bowel movement assessed and documented at least once per shift
- Unit specific average pain score

Reasons and Implications

Importance for Patients and Families
Controlling pain is a basic right that is due all patients. A care team’s failure to assess and control a patient’s pain is both harmful to the patient’s quality of life and may also prolong recovery.

Requirement, Standards, Policies, and Guidelines

- Agency for Healthcare Research and Quality (AHRQ)
- American Pain Society
  Clinical Practical Guidelines
- Centers for Medicare & Medicaid Services (CMS)
- National Priorities Partnership (NPP)
  Palliative and End-of-Life Care
- The Joint Commission
  Facts about Pain Management
- The Joint Commission (TJC)
  Speak Up: What You Should Know About Pain Management

Financial Implications
- Positive return on investment reported in the literature.

Prerequisites
None for this process

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Additional Resources

- **The Joint Commission (TJC)**
  Speak Up: What You Should Know About Pain Management

- **American Medical Association (AMA)**
  Pain Management Series

- **Veterans Health Administration (VHA)**
  Pain management resources

- **Agency for Healthcare Research and Quality (AHRQ)**
  Advances in Patient Safety 2 [2008]

- **Agency for Healthcare Research and Quality (AHRQ)**
  Patient Safety & Quality: An Evidence-Based Handbook for Nurses [May 2008]
  Chapter 17. Improving the Quality of Care Through Pain Assessment and Management

- **Consumer Assessment of Healthcare Providers and Systems (CAHPS) Hospital Survey**

- **City of Hope Pain and Palliative Care Resource Center**

- **Agency for Healthcare Research and Quality (AHRQ)**
  Implementing Re-Engineered Hospital Discharge (Project RED) [2009]
  Information on Toolkit and Web Conference
  Frequently Asked Questions (includes links to Annals of Internal Medicine article and Project RED site at Boston University)

- **The Commonwealth Fund**
  Why Not the Best?
  Comparative performance data on patient experiences, including pain management

- **Department of Pain Medicine and Palliative Care at Beth Israel Medical Center**
  www.StopPain.org

- **National Comprehensive Cancer Network (NCCN)**
  “Adult cancer pain” (free but registration required)

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