Pain-Related Patient Satisfaction in Outpatient Settings – The Need for Standardization and Benchmarking

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Objective and Disclosures

Objective
Identify a pain-related patient satisfaction metric for patients receiving care in diverse outpatient settings

Disclosures
Michele Farrington, BSN, RN-BC, Program Manager, and Trudy Laffoon, DNP, RN-BC, Nurse Manager, University of Iowa Health Care, have no conflicts of interest or disclosures to report, and they did not receive sponsorship or commercial support
Background – Patient Satisfaction

• Consumer satisfaction – important outcome measure of service-based industries

• Significance of patient satisfaction – recognized for many years

• Surveys – most frequently used tool to quantify consumer experience

Beattie, Lauder, Atherton, & Murphy, 2014; Davidson et al., 2017; Farley et al., 2014; Iannuzzi et al., 2015; Price et al., 2014; Weinick, Quigley, Mayer, & Sellers, 2014
Background – Patient Satisfaction (cont.)

- 2006 – Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey – first national, standardized survey of patients’ perspectives of inpatient hospital experience in the United States

- 2008 – public reporting of HCAHPS scores; part of value-based purchasing initiatives

Centers for Medicare & Medicaid Services, 2017
• Standardized questions to capture inpatient satisfaction related to pain – existed for >10 years

• Standardized questions to capture patient satisfaction with pain management in outpatient settings – rarely used
Purpose & Rationale

Purpose
Implement a new pain-related patient satisfaction metric for patients receiving care in diverse outpatient settings across an academic medical center

Rationale
• Complement pain screening and applicable follow-up by a licensed independent practitioner occurring at every ambulatory visit
• Coincided with an evidence-based practice initiative related to routinely offering interventions for needlestick pain to adult and pediatric ambulatory patients

Farrington, Laffoon, Dawson, & Kealey, 2017
Process

• March 2013 – Ambulatory Pain Committee began collaborating with the Office of Patient Experience

• Reviewed and discussed customized questions available from organization’s patient satisfaction survey vendor

• Recommended inclusion of new survey item – “Our Sensitivity to Your Pain”

• Final approval and sign-off obtained from Chief Nurse Executive and Chief Medical Officer

• Late March 2015 – item added to ambulatory survey
Limitation

• To date, not enough organizations use the same customized question – preventing external benchmarking
  – Internal benchmarking between 48 outpatient clinics is occurring and “best practices” are shared between clinics
Results Reporting

• Quarterly pain-related patient satisfaction updates – Ambulatory Pain Committee

• Annual update – Department of Nursing Pain Committee

• Increased number of free text pain-related comments
  – Since May 2016, free text comments shared weekly to highlight positive patient experiences and additional opportunities to improve pain-related care
Medical Practice – All Clinic Aggregate

Question – Our Sensitivity to Your Pain

% Very Good for the Last 12 Quarters with Current Quarter to Date

Displayed by Received Date and Total Sample

All My Sites

Displayed by Received Date and Total Sample
“The shot was painless for the most part, and the nurse was very kind.”

“The staff always asks how I am feeling and about my pain. They always listen carefully to my answers and pass these on to the doctors.”

“Only received four days of pain medication.”

“I have no pain but staff always ask.”

“The nurse was incredible. I had a pretty painful procedure done, and she held my hand and talked me through it.”

“She gave me the most pain-free shot I have ever received!”
Next Steps / Conclusions

• Project leaders – continuing external dissemination

• American Academy of Ambulatory Care Nursing (AAACN) – identified pain assessment and follow-up as 1 of 5 ambulatory nursing-sensitive indicators

• Perceptions of delivering safe, high quality patient care – moved beyond just providing excellent clinical care to considering and embracing patient and family experience as another critical component

American Academy of Ambulatory Care Nursing Task Force Members, 2017; Brown & Aronow, 2016; Esposito, Rhodes, Besthoff, & Bonuel, 2016; Martinez, Battaglia, Start, Mastal, & Matlock, 2015; Mastal, Matlock, & Start, 2016; Matlock, Start, Aronow, & Brown, 2016; Smolowitz et al., 2015; Start, Matlock, Brown, Aronow, & Soban, 2018; Wolf, Niederhauser, Marshburn, & LaVela, 2014


References (cont.)


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Questions / Comments