Purpose:

The goal was to implement and opioid sparing approach while improving the patient’s experience with pain management, increasing patient satisfaction in the pain management domain.

Relevance/Significance:

Pain management is consistently identified as a leading problem throughout hospitals across the United States, one that results in significant costs both to institutions and patients alike. The Hospital’s patient satisfaction scores for pain were low even though significant amounts of opioids were given. An opioid-sparing approach maintaining or improving patient satisfaction scores was needed.

Strategy and Implementation:

Pain management is one of the most complex challenges facing health care in the United States, but at this Community Hospital we face those challenges with innovation. Recently, the Orthopedic Specialty Unit for Total Knee Replacement (TKR) had many complaints of uncontrolled pain with correspondingly low patient satisfaction scores in pain management. An interdisciplinary team of physicians, nurses, and pharmacists collaborated and formed the “Pain Management Team” to address pain management in TKR patients. They set the goal to increase the number of TKR patients reporting that their pain was well-controlled. The team wanted to ensure patients regularly achieved a pain score at or below their "acceptable pain level" – the level of pain that does not distress a patient – even on the most difficult day, post-op day #2. An innovative Electronic Medical Record (EMR) Pain Dashboard was developed to highlight inpatient pain scores. In 2016, the Pain Management Pharmacist and Clinical Nurse Specialist conducted a pilot on the orthopedic unit using the new Cerner® Pain Dashboard. Patient Satisfaction related to pain management steadily increased on Orthopedic Unit after implementation. The HCAHPS question, "Was your pain well controlled?" score increased 20% in just one month.

Evaluation/Outcomes:

The innovative EMR Pain Dashboard was created to allow the interdisciplinary team to assess baseline pain trends and monitor the Pain Initiative’s effects over time. The central metric on the Pain Dashboard was the percent of patients per month who had pain scores less than or equal to the patients’ acceptable levels of pain during their hospital stay. The initiative allowed these scores to be tracked and trended over time; however the most powerful component was the daily rounds with the Cerner® Pain Report. This report allowed the Pain Pharmacist to identify patients with consistently high pain scores (7 through 10 out of 10) and independently perform pain assessments on these patients. The Nurse Manager and the clinical nurses on the Orthopedic Unit simultaneously used the daily report by following an algorithm to ensure uncontrolled pain was identified and treated (algorithm attached). This algorithm, developed by the Clinical Nurse Specialist and Pain Management Pharmacist, incorporated a three-step triaged system. The algorithm informed coordination of the interdisciplinary team of nurses, pain pharmacist, and physicians to reduce pain scores to acceptable levels in as many patients as possible with no interruptions to workflow. Using the new Pain Dashboard, the Orthopedic Unit Patient Satisfaction scores related to pain management increased significantly.
As a result of this initiative, patient satisfaction scores, in the pain management domain, improved from as low as 40th percentile in April 2016 to 90th percentile in October 2017.

Implications for Practice:

Pain management is a leading problem in U.S. hospitals, resulting an estimated $78.5 billion cost, in 2016. These costs are due to increased health care, addiction, lost productivity, and the criminal justice system. This innovation promotes a safer, opioid sparing approach to pain management. The Orthopedic Unit Pain Project and its positive results exemplify the meaning of service, as the individual patient was treated as a unique person with unique needs that were met by every professional touch-point in the process. This interdisciplinary team’s innovative approach to pain management has impacted both the average pain scores and the HCAHPS scores for pain management. The leaders of this project took a proactive approach to ensure that all patients had their pain well controlled for optimal healing. This team's innovative approach has dramatically improved patient satisfaction in the areas of the EMR Pain Dashboard’s implementation.

Title:
Pain Management: Rounding to Improve the Patient's Experience

Keywords:
Opioid-sparing, Pain and Rounding

References:


Abstract Summary:
An innovative Pain Dashboard with an EMR Pain Report allowed an interprofessional team to monitor patient’s pain throughout the hospital, intervene immediately, then improve communication about pain through motivational interviewing. This innovation promotes a safer, opioid sparing approach to pain management.

Content Outline:
Pain Management: Rounding to improve the patient’s experience

Purpose:
The goal was to implement and opioid sparing approach while improving the patient’s experience with pain management, increasing patient satisfaction in the pain management domain.

Strategy and Implementation:
1. An innovative electronic medical record (EMR) pain dashboard, pain report, and interprofessional rounding process was created.
2. The most powerful component was the daily rounds with the EMR pain report.
3. Comprehensive pain assessments were completed with identified patients

Evaluation/Outcomes:
As a result of this initiative, patient satisfaction scores, in the pain management domain, improved from as low as 40th percentile in April 2016 to 90th percentile in October 2017.

Implications for Practice:
This innovation promotes a safer, opioid sparing approach to pain management.

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