# Standardization of Pain Documentation to Improve the Quality of Pain Management

Emily N. Herbert, MSN, FNP-C., and Sharon L. Kozachik, PhD., RN, F.A.A.N. Johns Hopkins University, School of Nursing

#### INTRODUCTION

Research supports that hospitalized patients do not receive adequate pain control (Centers for Disease Control and Prevention, 2015; Coyne et al., 1998; David & Musgrave, 1996); upwards to 71% report adequate pain control (Centers for Disease Control and Prevention, 2015; Centers for Medicare and Medicaid Services, 2015). Pain assessment provides valuable information but it is only useful when documented and accessible in the patient chart. Without accessible pain assessment data, providers are unable to access critical information needed to promptly identify and treat patients during a pain crisis. Research strongly supports increasing pain documentation rates and visibility to improve the quality of pain management in inpatient nursing units (Coyne et al., 1998; Dalton, Carlson, Blau, Lindley, Greer, & Youngblood, 2001; Johann, Shapourian, & D'Arcy, 2007; Mattox, 1996; O'Connor, 2003; Paice, Mahon, & Faut-Callahan, 1995; Shannon & Bucknall, 2003).

### **PURPOSE**

The purposes of this on-going quality improvement project is to standardize pain assessment documentation for persons diagnosed with cancer and admitted to inpatient nursing units, improve pain assessment visibility, and expedite therapeutic interventions. This two-step quality improvement study is being conducted at a 73 bed cancer hospital in the Midwest.

#### **OBJECTIVES**

- 1. To implement a standardized documentation process for pain assessment on three nursing units
- 2. To improve nurses' satisfaction with the pain documentation process and visibility
- 3. To improve prescribers' satisfaction with the pain documentation process and visibility
- 4. To improve patient satisfaction scores in pain care

## **MATERIALS AND METHODS**

# Design and Sample

This two-step quality improvement study is being conducted at a 73 bed cancer hospital in the Midwest. From June 1 until September 30, 2016, we will accrue a consecutive sample of patients admitted to medical, surgical, and intensive care units. We will also accrue nurses and clinicians working on the targeted units, to determine satisfaction with the pain documentation process.

#### Standardized Pain Assessment Flowsheet

For step one, a standardized documentation flowsheet, located in the physical assessment portion of the electronic health record (EHR) will pop-up whenever an "as needed" pain medication is scanned into a patient's EHR to be given. Prior to administering an "as needed" pain medication, the nurse will be required to document responses to the following questions related to pain: 1. Where is the pain location? 2. What number does the patient rate the pain utilizing the numeric pain scale? 3. How does the patient describe the pain? 4. Is the pain tolerable, yes or no? The responses will be entered into a file under the pain assessment flowsheet. located in the physical assessment portion of the EHR. Information will be obtained on pain documentation rates before and after this intervention. Baseline data will be gathered over a 2 month period prior to implementing pain assessment visibility.

#### Improving Pain Assessment Visibility

For step two, a color coded pain specific facility board will be developed based on the data obtained from the pop-up flowsheet. Patients who report adequate pain control and rate current pain less than 4, on a 0 - 10 numeric rating scale, will be highlighted in green. Patients who report adequate pain control and rate pain greater than 4, on a 0 - 10 scale, will be color coded yellow. Patients who report inadequate pain control at any number or rate their pain greater than 7, on a 0 - 10 scale, will be color coded red.

#### Patient Satisfaction with Pain Management

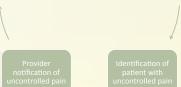
Patient satisfaction will be measured and compared using Hospital Consumer Assessment of Healthcare Providers and Systems surveys, as well as surveys conducted by hospital administration. Hospital administration conducts daily rounds on each patient admitted in the hospital. Data will be gathered on whether patients report being satisfied with pain control.

#### Nurse and Clinician Satisfaction with Pain Documentation Process

Nurse and clinician satisfaction will be measured using pre and post-intervention surveys focused on the process and visibility of pain documentation.

# Pain Assessment Documentati

CONCEPTUAL FRAMEWORK



#### REFERENCES

- Centers for Disease Control and Prevention. (2015, September 30). Hospital utilization. In Fast Facts. Retrieved February 5, 2016, from http://www.cdc.gov/nchs/fastats/hospital.htm
- Coyne, M., Stein, D., Smith, J. H., Hieser, M., & Hoover, L. (1998, February). Describing pain management documentation. *Medsurg Nursing*, 7(1), 45-51.
- David, Y., & Musgrave, C. (1996, April). Pain assessment: A pilot study in an Israeli bone marrow transplant unit. *Cancer Nursing*, 19(2), 93-97
- 4.Centers for Medicare & Medicaid Services. (2015, October). Summary of healpps survey results. In Hospital Consumer Assessment of Healthcare Providers and Systems. Retrieved December 1, 2015, from http://healpsonline.org/Files/ October 2015 Summary Analyses Survey Results.pdf
- Dalton, J., Carlson, J., Blau, W., Lindley, C., Greer, S. M., & Youngblood, R. (2001, June). Documentation of pain assessment and treatment: how are we doing? *Pain Management Nursing*, 3(2), 54-64
- 6.Johann, D., Shapourian, B., & D'Arcy, Y. (2007, June). Screening for pain. Nursing
- Management, 38(6), 42-47.
- Mattox, L. M. (1996, August). A working method for pain management outcomes documentation. *Management, Informatics*, & *Technology*, 5(4), 269-271.
- O'Connor, M. (2003, January). Pain management: improving documentation of assessment and intensity. *Journal for Healthcare Quality*, 25(1), 17-22.
- Paice, J., Mahon, S. M., & Faut-Callahan, M. (1995, October).
  Pain control in hospitalized postsurgical patients. MEDSURG nursing, 4(5), 367-372.
- 10.Shannon, K., & Bucknall, T. (2003, June). Pain assessment in critical care. *Intensive and Critical Care Nursing*, 19(3), 154-162.

#### **ACKNOWLEDGEMENTS**

The authors express sincere appreciation to Dr. Raed Rahman for his assistance in protocol planning; Amy Hannaman, BSN, RN, for her informatics assistance, and to Samantha Powers who assisted with data collection