Roadmap
Improvement in Pain Interfering with Activity

Roadmap to Improvement in Pain Interfering with Activity

How can Improvement in Pain Interfering with Activity help reduce hospitalizations?

- Pain is the most common reason individuals seek medical attention and frequently are hospitalized. Recent summary findings have shown that 80% of patients with pain sought physician advice within the last 12 months; 14% of patients went to the ER; and 11% had been hospitalized**.** Fifty million Americans are partially or totally disabled by pain (www.ampainsoc.org).

What can my agency do?

- Utilize a comprehensive pain assessment form at the following intervals: Start of Care, Resumption of Care, Recertification, Discharge and whenever the patient's condition warrants.
  * Ready, Aim, Improve for Pain, Pain Algorithm
- Educate clinicians on accurate and consistent assessments
  * Daily Pain Diary, Fast Facts
- Provide updated information on agency status
  * OBQI Reports
- Encourage inter-disciplinary communication
  * Key Care Plan Objectives, SBAR

What can I do?

- Accurately assess patients' level and frequency of pain, type of pain, precipitating and associating factors
- Consider the patient's pain regimen in determining when pain interferes with activity or movement
- Communicate patient information and Care Plan Objectives clearly to all team members
- Consider non-pharmacological measures such as breathing and relaxation techniques in addition to pharmacological measures

Best Practices: (modify to meet the needs of your patient population)

- Patient pain assessments will include level of pain intensity, type and frequency of pain, location, precipitating and associating factors, pain regimen for relief, effectiveness and patient compliance.
- SN will assess the need for PT/OT to assess for weakness/endurance related to pain. Care plans will address interdisciplinary goals.
- Patients will be taught both pharmacological and non-pharmacological measures for pain control.
- Home Health Aide care plans will include notification of SN when patient experiences pain during personal care visits.

Resources for Pain Interfering with Activity:

Resource	On the Web
Centers for Disease Control and Prevention	www.cdc.gov
American Pain Society	www.ampainsoc.org/
CMS Quality Improvement Resource Packages, Ready, Aim, Improve Tools, Assessment Strategies	www.kfmc.org

Roadmap to Improvement in Pain

Purpose of Checklist: This is a Roadmap that the agency's quality improvement team can utilize to support Improvement in Pain

	Quality Improvement Checklist - Improvement in Pain
Date	**Actions:**
	1. Identify current performance level via your OBQI data, HHC, vendor data
	2. Organize a team with clinical expertise/knowledge as well as, those that can contribute to the process targeted for improvement
	3. Identify those areas that demonstrate performance less than agency expectations (focus on those that negatively impact patient outcomes)
	4. Design/redesign these areas utilizing evidence based clinical interventions
	5. Educate regarding their responsibilities within the plan: **A. *Staff Education*:** I. Consistent assessment strategies for OASIS item M01240 and M01242 II. Clinical interventions selected as best practices for Improvement in Pain III. Include instruction regarding the plan for improvement in pain in new hire orientation Patient education materials for pain Interfering with Activity Tools/Resources IV. Set target goal for improvement in pain **B. Patient/Caregiver Education:** I. Identify appropriate patient education materials
	6. Document your agency Plan of Action
	7. Include STAR targets within your POA
	8. Design/redesign the pain care process/program based on your POA
	9. Educate all stakeholders on the POA and goals
	Monitor Improvement and Revise the Plan of Action, as appropriate:
	1. Monitor for best practice compliance at least monthly
	2. Share findings with staff and management
	3. Post Improvement in Pain Compliance Poster
	4. Recognize high-performing clinicians/teams
	5. Review OBQI Outcome reports and Home Health Compare
	Communication:
	1. Provide agency specific improvement in pain educational marketing materials to:
	a. Physicians
	b. Hospital discharge planners
	c. Emergency department managers
	d. Medicare Advantage contacts

Quality Improvement Checklist - Improvement in Pain Interfering with Activity

Purpose of Checklist: Provides the user with a quick categorized checklist of actions to support Improvement in Pain [MO 420]

Complete Date	Action	Supporting Resources Available	Use N/A
Improvement in Pain Program Development			
	1. Develop program guidelines/policies & procedures to ensure accountability and sustainability of program. **2.** Set Star Target **3.** Utilize evidence-based standards for basis of best practices, as possible. **4.** Define staff competencies/performance expectations as appropriate.	www.guideline.gov **Guideline Objective:** To promote evidence-based management of individuals with chronic pain. ***Guideline Title:*** Clinical practice guideline for the management of opioid therapy for chronic pain. The National Guideline Clearinghouse™ (NGC) is a public resource for evidence-based clinical practice guidelines. NGC is an initiative of the Agency for Healthcare Department of Health and Human Services. www.ampainsoc.org American Pain Society www.us.elsevierhealth.com A resource for integrating the revised JCAHO pain assessment and management standards—pain—the 5th vital sign; provides a "Bill of Rights for people with pain; lists available resources for professional education and clinical practice guidelines. www.aapainmanage.org American Academy of Pain Management www.thecpa.org American Chronic Pain Association www.aspmn.org American Society for Pain Management Nursing	

Staff Education (Continued)			
	1. Provide comprehensive OASIS item (M1242) instruction to appropriate staff. ▪ Ensure staff comprehension of the intent of the assessment measure. ▪ Ensure staff consistency in assessment/scoring approach. ▪ Validate staff competency in assessment/scoring parameters.	OASIS Chapter 3 Guidance	
	2. Education ***all*** stall regarding the "program" with content/responsibility emphasis according to role/accountability. **3.** Include instruction regarding pain improvement program in new hire orientation.	Agency-developed program/performance expectations & competencies as appropriate	
	4. Provide clinician education related to pain improvement. **5.** Validate staff competency related to pain improvement best practices/interventions.	www.npecweb.org National Pain Education Council www.jcrinc.com Pain Management for Special Population: JCAHO Resources : Videos www.npecweb.org/videolibrary Videos designed to enhance pain assessment and treatment to prevent adverse sequelae of pain. Pain Interfering with Activity Tools/Resources www.medscape.com/resource/painmgmt Includes CE program-Webcast regarding the evolving concepts in the chronic pain paradigm	
Patient/Caregiver Education			
	1. Determine patient/caregiver education materials' requirements. **2.** Select appropriate education materials collaboratively.	Pain Interfering with Activity Tools/Resources www.healthinaging.org Patient Education Forum: Persistent Pain	
Target Setting			
	1. Set Pain improvement target score with OBQI plan.	Agency developed OBQI plan	

Monitoring Best Practice Compliance			
	1. Determine method(s)/frequency for monitoring. **2.** Select/develop monitoring tool. **3.** Share findings with staff and management. **4.** Post Improvement in Pain Compliance Poster.	Best Practice Paper Monitoring Tool **Presentations** "Back to the Future" Best Practice Monitoring Paper Tool **Tip for Use**: Update regularly with your best practice compliance rates and goals.	
Rewards & Recognition			
	1. Recognize high performing clinicians/teams. **2.** Post Home Health Compare data	× Organizational Culture Workbooks [Part I]: Rewards & Recognitions Section www.medicare.gov: Updated: March, June , September, December	
Outreach/Marketing Pain Improvement Program & Clinical Outcomes			
	1. Create Physician information packet/strategies.	Use agency specific resources	
	2. Create hospital discharge planner/case management/ED collaboration strategies/packet.	Use agency specific resources	
	3. Create Managed Care Organization collaboration packet.	Use agency specific resources	

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