

Pain Resource Programs (PRP)

*Improving Knowledge Translation
in
Pain Management*

Pain Resource Program Presenters

**Lori Palozzi, RN, APN, The Hospital for
Sick Children, ON**

**Salima Ladak, RN, APN, Toronto General
Hospital, ON**

**Nancy Schuttenbeld, RN, APN, River
Valley Health, NB**

Objectives of Workshop

- ◆ To review the literature on the Pain Resource Nurse (PRN) role
- ◆ To discuss the development of the Pain Resource Role at Sick Kids
- ◆ To explore key components of Pain Resource Programs

Objectives of Workshop

- ◆ To discuss factors influencing implementation
- ◆ To discuss program evaluation
- ◆ To explore variables affecting sustainability
 - ◆ *Your challenge....complete a template for a PRP.*



Literature Review

Definition

- ◆ “Resource and role model for nursing assessment and intervention in pain management” (Ferrell et al 1993)
- ◆ “Act as resources, coaches, mentors, role models and champions for improved pain management” (McLeary et al 2004)

Knowledge Translation and Pain

- ◆ Gap in pain practice not related to knowledge generation but perhaps related to knowledge translation
- ◆ Can a PRP or PRN facilitate knowledge transfer?

Role Development

- ◆ First PRN program; Ferrell 1993, Oncology setting, 40 hr didactic and clinical application
- ◆ McLeary et al, pediatric setting 2004, 2 day session
- ◆ Holly et al, 32 hours, Veterans hospital
- ◆ D'arcy – 6 hours

PRN Strategies

- ◆ Communication about pain with MDs
- ◆ Staff education, unit rounds
- ◆ Monthly support meeting
- ◆ Pain research and QI projects at unit level
- ◆ visible and accessible
- ◆ Monitor and evaluate practice- give feedback
- ◆ Coach, role model, advocate, trouble shoot

Impact of PRN role

- ◆ ↑ in K & A score at 3 mo including attitude toward pt with pain, but no diff in # of pts with pain (Ferrell, 1993)
- ◆ RNs report increased confidence (D'Arcy, 2004)
- ◆ Improvement in severity of opioid-induced constipation, pain asst, documentation of pain sites and side effects (McMillan, 2005)



Role Development: SickKids Experience

Development of a PRN role

- ◆ PARIHS framework- evidence, context and **facilitation**
- ◆ Purpose:
 - To describe the PRN from the perspectives of nurses and non-nurse health professionals
 - To identify benefits and barriers to the PRN role

Research Questions

- What are the qualities and essential components of the PRN role from the perspectives of the individual nurse, unit and organization?
- What are the views of the individual nurse, unit and organization on the potential benefits and barriers of implementing a PRN role on a general hospital unit?

Methods

- Sample – staff nurses, advanced practice nurses, educators, physicians, acute and chronic pain team
- Setting- 2 inpatient surgical units
- Focus groups using semi-structured interviews, APN facilitators

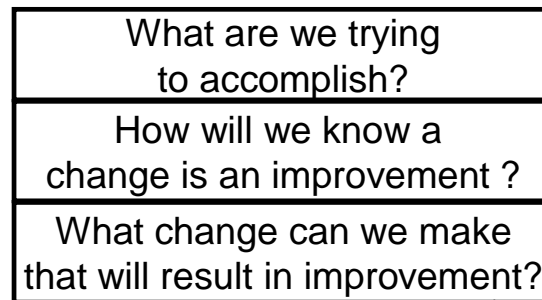


- ◆ **Key Components of
Pain
Resource Programs**

Key Components

Reviewing the River Valley Health experience in New Brunswick

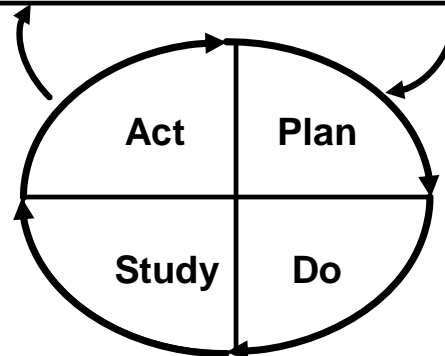
The Model for Improvement



Aim

Measures

Change



**CYCLES for
Testing & Implementing
Change**

Langley, Nolan, Nolan, Norman, Provost;
Improvement Guide, 1996

Key Components

- ◆ Program Planning
- ◆ Selecting Content
- ◆ Program Implementation
- ◆ Evaluation



Key Components

Program Planning:

- ◆ Establish need
- ◆ Support for project
- ◆ Identify key stakeholders



Key Components

Program Planning:

- ◆ Determine # of participants
- ◆ Consider qualities
- ◆ Develop criteria
- ◆ Obtain commitment from Managers



Key Components

Selecting Content

Include assessment & F/U,

Explore misconceptions,

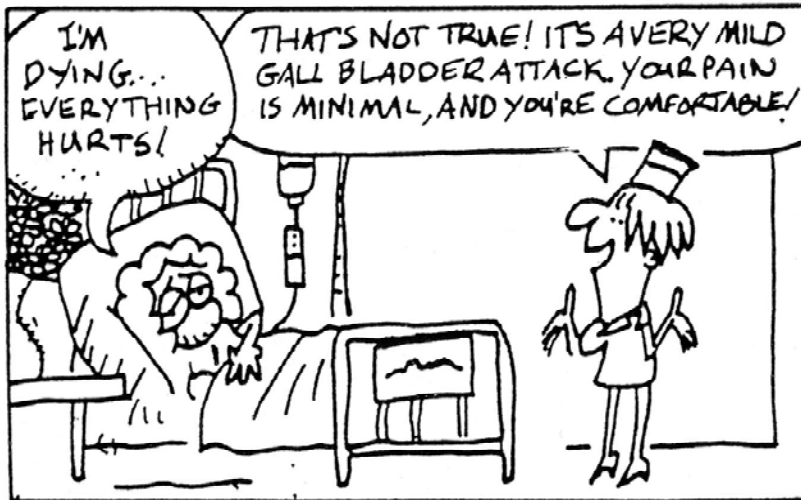
Monitoring,

Pharmacology,

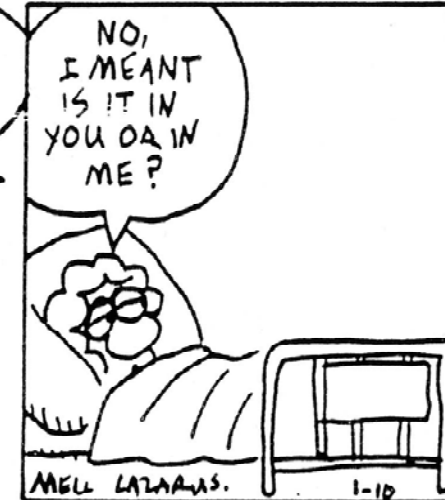
Case studies

Reflective exercises





L A TIMES, 1-10-78



Key Components

- ◆ Keep it interactive!
- ◆ Team building
- ◆ Address gaps in practice
- ◆ Utilize resources
- ◆ Address needs of participants

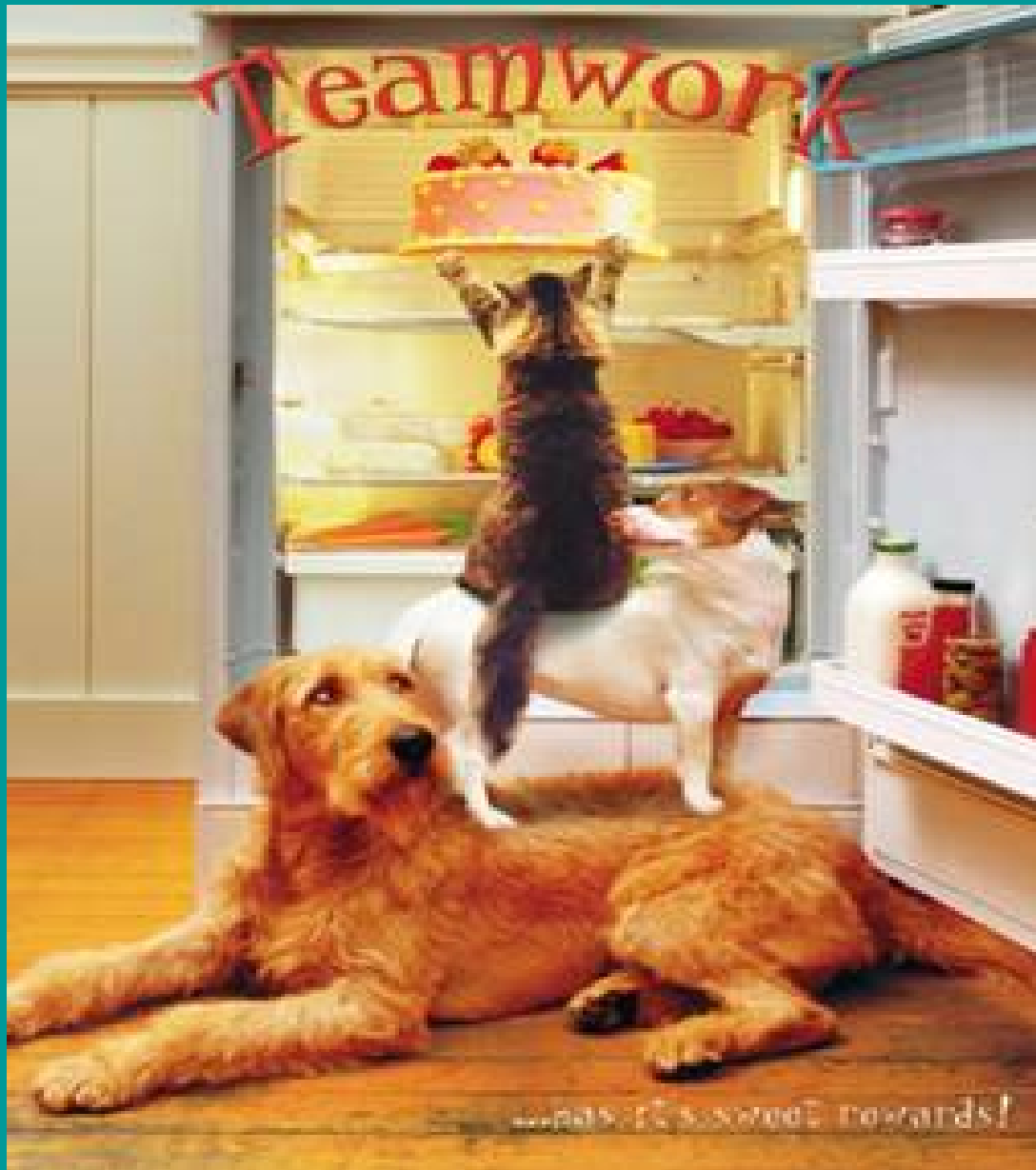


Key Components

Multidisciplinary or Nurses only?

- ◆ Explore needs of organization
- ◆ Explore pros and cons







Program Implementation

Factors Affecting Implementation

- ◆ Strength of facilitators
- ◆ Program objectives
- ◆ Consideration of contextual factors in work environment



Implementation Issues

Facilitators

- ◆ Expert nurses, committed, compassionate
- ◆ Monthly meetings
- ◆ Networking/support from other PRN's
- ◆ Buy in from managers, MDs
- ◆ High satisfaction with role
- ◆ Increased awareness of patient centered care
- ◆ Unit support/ support from pain APN

Implementation Issues

Barriers

- ◆ Problems with co-workers
- ◆ Time
- ◆ Integrating the PRN role within the nursing role
- ◆ Self-doubt
- ◆ Resistance to PRN expertise
- ◆ Lack of role clarify



Program Evaluation

Program Evaluation

- ◆ Program content
- ◆ Pain resource role
- ◆ Impact of program on patients, nurses, units, organization



Evaluating Outcomes...

Include Quantitative AND Qualitative measures

Examples:

Pre and post K&A for participants

- ◆ Patient Questionnaires in departments, facilities
- ◆ Focus groups, sharing stories
- ◆ "Pain Report Card"



Evaluation of PRN Program at UHN

- ◆ Improving Pain Management Through Capacity Building: Experience of the Pain Resource Nurse (PRN) Role Implementation

Salima S. J. Ladak, RN, MN-APN

- ◆ Quality improvement initiative in response to patient pain satisfaction scores
- ◆ Goal: Improve pain management practices at UHN
- ◆ Select group of RNs received 4-day educational program in addition to time with APN Mentor in Pain Management



Focus Group Study Outline

- ◆ Approved by Research Ethics Board
- ◆ Funded by Krembil Foundation

Guiding Research Question:

How did implementation of the PRN role at UHN work?

- ◆ Use of Roy's adaptation model as framework (PRN role function as adaptation to a change in the professional nursing role)
- ◆ Qualitative descriptive study using open ended focus group questions
- ◆ Convenience sampling
- ◆ Interview tape recorded and transcribed by RA

Participant Demographics (N = 21)

- ◆ 90% Female; 10% male
- ◆ Years worked at UHN = 12.3
- ◆ Years in Nursing profession = 17.2
- ◆ Employment status:
 - Part time 2 PRNs (9%)
 - Full time 19 PRNs (91%)

◆ Education:

- Diploma – 8 (38%)
- Bachelor's Degree – 9 (43%)
- No response - 4

◆ Previous Leadership Positions:

- 3 PRNs – No
- 18 PRNs – Yes
- Eg: Unit Council, Charge RN, Care Leader

Focus Group Analysis

Objectives:

- ◆ Describe role expectations of the pain resource nurses at UHN.
- ◆ Describe what contributes to role clarity for PRNs at UHN.
- ◆ Describe role conflict with the PRN role at UHN.
- ◆ Describe future role expectations and role development needs of PRNs at UHN.

Describe role expectations of the pain resource nurses at UHN

- ◆ Function as a resource in a leadership role for staff and further pain management knowledge
- ◆ Patient advocacy
- ◆ Resource for clinical decision making

Describe what contributes to Role Clarity for PRNs at UHN

- ◆ Leadership support on unit
- ◆ Support from Pain Management Advance Practice Nurse

Describe role conflict with the PRN role at UHN

- ◆ Confusion about scope of practice
- ◆ Lack of awareness of the PRN role
- ◆ Lack of time, human resources

Describe future role expectations and role development needs of PRNs at UHN

- ◆ Additional time
- ◆ More educational opportunities
- ◆ Increased human resources capacity
- ◆ Improved Role Awareness

Impact on Patient Satisfaction

- ◆ Increased satisfaction from 87.6 to 88.9% (statistically significant at $p=0.001$).
- ◆ Data Source: NRC Picker Patient Satisfaction, UHN Total July 2003-March 2004 (N=4,075) April 2004-August 2006 (N=13,085)
Score: Yes, definitely = 100, Yes, somewhat = 50, No = 0; UHN Methodology

Limitations

- ◆ No statistical analysis of responses
- ◆ Ability of participants to voice opinions freely

A hand is pointing to a grid pattern on a teal background. The grid consists of concentric circles and radial lines, creating a perspective effect. The word "Sustainability" is written in a bold, white, sans-serif font with a black outline, positioned in the center of the image.

Sustainability

Sustainability

- ◆ Being real and setting realistic expectations.



Sustainability Strategies

- ◆ Contract with participants
- ◆ Provide bimonthly feedback
- ◆ F/U 1 page evaluation for participants
- ◆ Focus groups if possible
- ◆ Reconnect via intranet and share projects
- ◆ Highlight projects at annual Pain Conference

Take Home Messages

- ◆ *The PRP is an effective strategy in creating organizational change to improve the management of pain.*
- ◆ *The PRP provides an opportunity to facilitate knowledge transfer T/O healthcare organizations.*

Take Home Messages

- ◆ *When implementing a PRP, set attainable goals, & have fun!*

Questions?



lori.palozzi@sickkids.ca

nancy.schuttenbeld@rvh.nb.ca

salima.ladak@uhn.on.ca