

Pain Assessment In A Surgical Paediatric Ward

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Our Improvement Story....



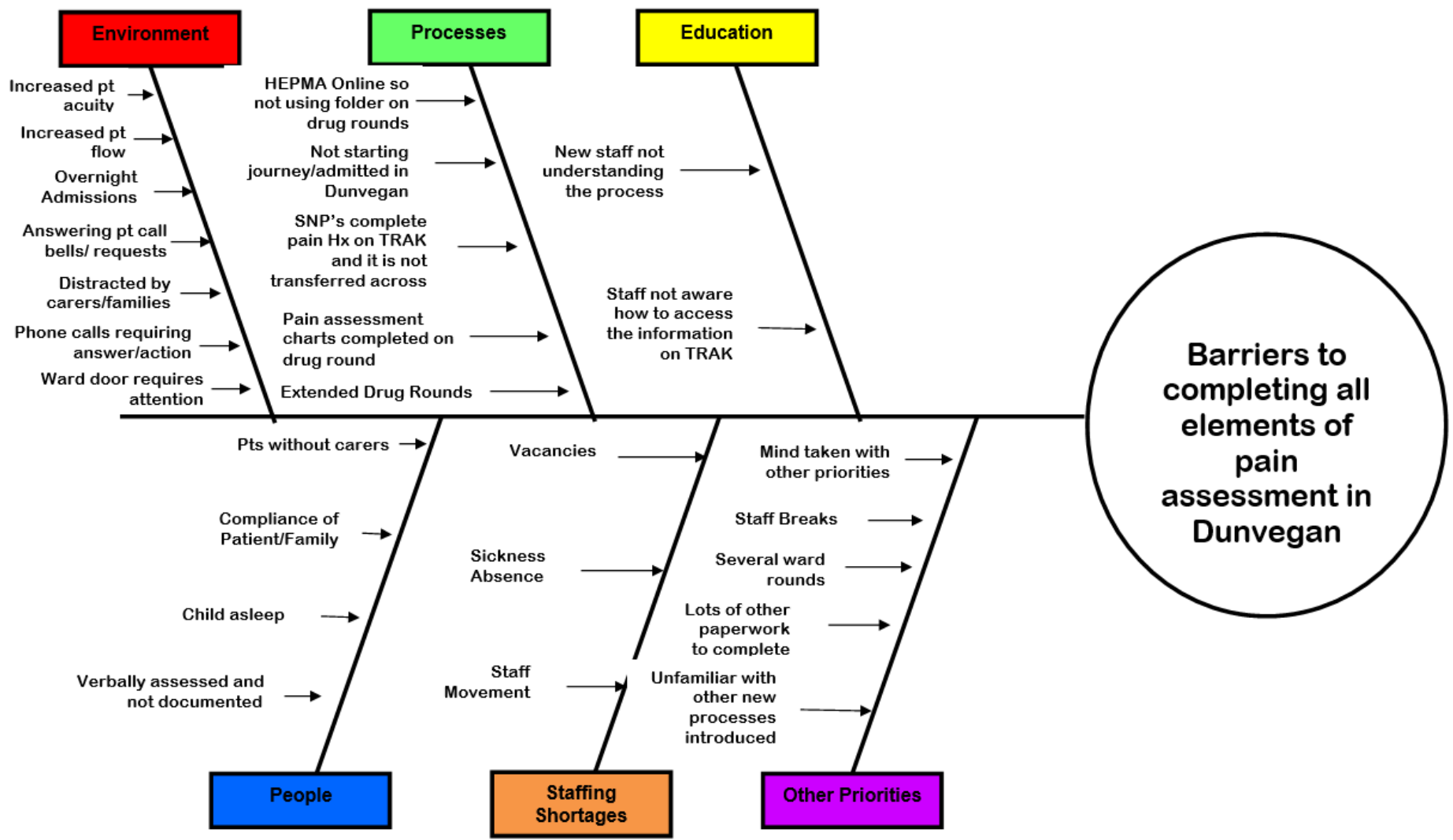
- Why pain assessment?
- Quality Planning
- Change Ideas Process
- Outcome
- Engagement and Next Steps



Why Pain Assessment?



- Consistent method not being used
- The effects unrelieved pain has on children
- To provide assurance
- LACAS improvement priority for service



Vision:

All CYP in Dunvegan will have their pain made visible

Aim

In order to achieve this Aim...

By January 2024, 80% of children within Dunvegan will have pain assessed using FACES, FLACC or Linear assessment. (Full assessment of all 6 elements recorded)

Primary Driver

We need to ensure...

Processes that support pain assessment are efficient and effective (Process)

Existing resources support Pain Assessment (Resources)

CYP experiences of pain assessment (People)

Staff understanding Value of Tool (People)

Secondary Driver

Which requires...

All CYP have assessment completed within 4 hours

Aligned with Medicines Management

Current processes aligned to influence and support regular review and assessment

Assessed when providing analgesia

All paperwork is easy to access and stored in one place

Ward is at staff establishment

Protected Time & Reduce Distraction

Patient/carer availability

Patients and Carers understand the Value of pain assessment/Re-assessment

Education Package for all staff

Re-assessment scores clearly recorded and not described as ongoing

Staff understand Person-Centred Care

Staff need to complete all elements of Tool

Pain Assessment Identified as a priority on admission

Awareness of validated tools

Change Ideas

Ideas to ensure this happens...

Allocated member of staff check stock and order if required on allocated day/time

Reminder given at safety brief prior to each shift ★ PDSA 1

Gold standard example on all computer stations ★ PDSA 3

Daily checks by staff??

Admission documentation checklist

RCN Guideline distribution "The Recognition and assessment of acute pain in children".

Sticker/Sign on notes indicating assessment complete

Assessment form online

Coloured Apron worn when assessing pain

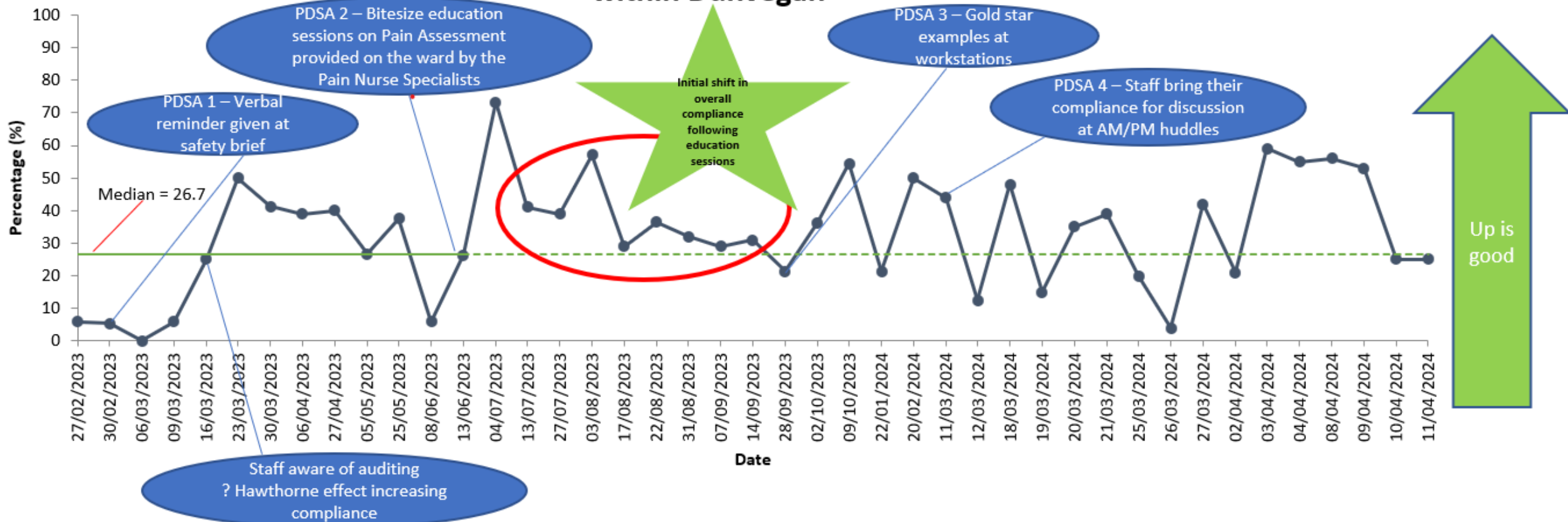
Commence process in Crichton if journey starts there

Dual screens for HEPMA/TRAK

15 minute bitesize education sessions delivered by Pain Specialist Nurses ★ PDSA 2

RTW completed within 48hours

Percentage of Patients with all 6 Elements of Pain Assessment Completed Accurately within Dunvegan



Staff Feedback

“I wasn’t aware that all the sections required completion”

“I am a newly qualified nurse and would like to have had a session like this during my induction to ensure I was doing it right from the start”

“Now that been educated, I feel more confident to teach others who I mentor to assess pain properly”

Key Learning



- ✓ **Ensure data collection is not reliant on one person as can be onerous.**
- ✓ **Human factors and other priorities have a huge impact.**
- ✓ **Don't be scared to revisit a test of change again if it doesn't seem to be making a difference.**
- ✓ **Never expect a project to be a simple task, embrace errors and use these to drive improvement.**

Challenges and Next Steps

1. **Continue bitesize education sessions in Dunvegan ward as a drop in.**
2. **Capture the NQN group and provide education at induction.**
3. **Encourage the staff to take responsibility for their own non-compliance and establish reasons why.**

