

Improving the pain experience of children with limb injury in the Alberta Children's Hospital ED

Jennifer Thull-Freedman, MD, MSc

Antonia Stang, MD, MBA, MSc



Alberta **Children's** Hospital



UNIVERSITY OF
CALGARY

Acknowledgements

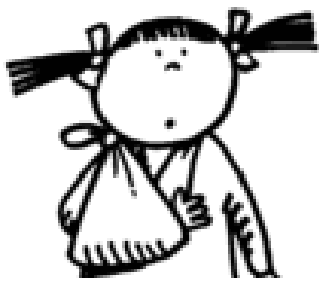
Funding Support

- Department of Paediatrics Innovation Award
- AHS Quality Improvement Grant, Chief Medical Office

Team Members

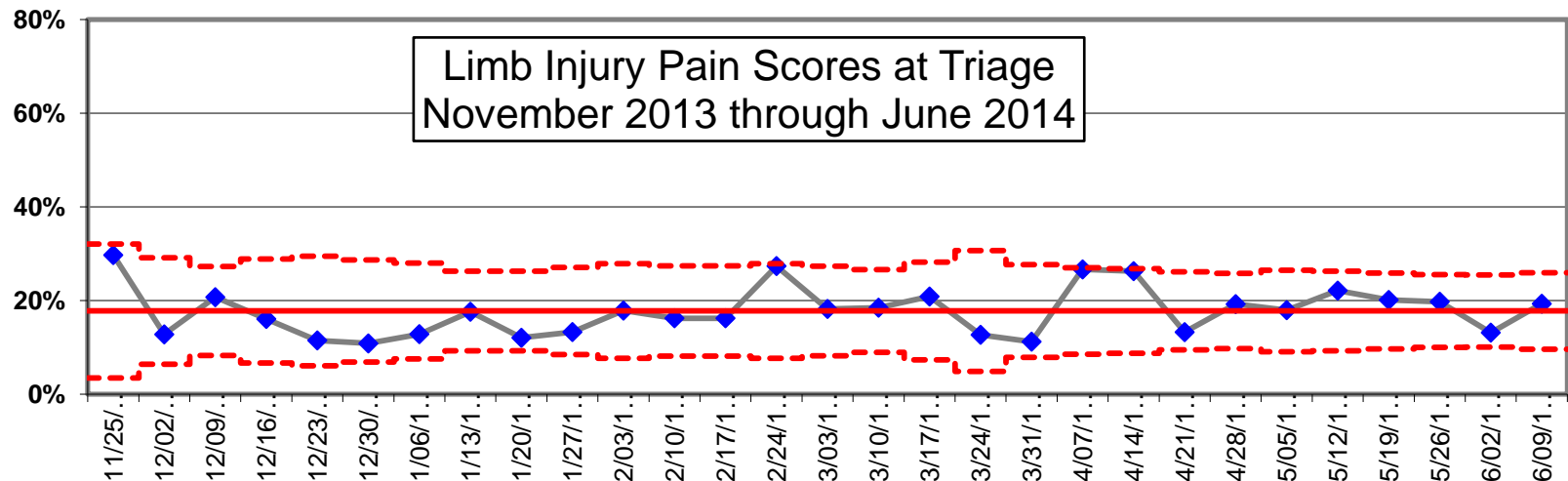
- Project leads: J Thull-Freedman, MD, MSc; Antonia Stang, MD, MBA, MSc
- Quality nursing leads: Erin Pols, RN; Ashley McFetridge, RN
- Acute pain specialist: Christine O’Leary, NP
- Child life specialist: Cathy Smith, CCLS
- Research assistants: Tatum Mitra, Bruce Gao





Defining an Opportunity

- Pain treatment a high priority of families in emergency departments (EDs)
- Limb injuries = most common painful condition in children in the Alberta Children's Hospital ED
 - 11% of all ACH ED visits or 150 visits/ week
 - 18% given pain score, 49% with pain get medication

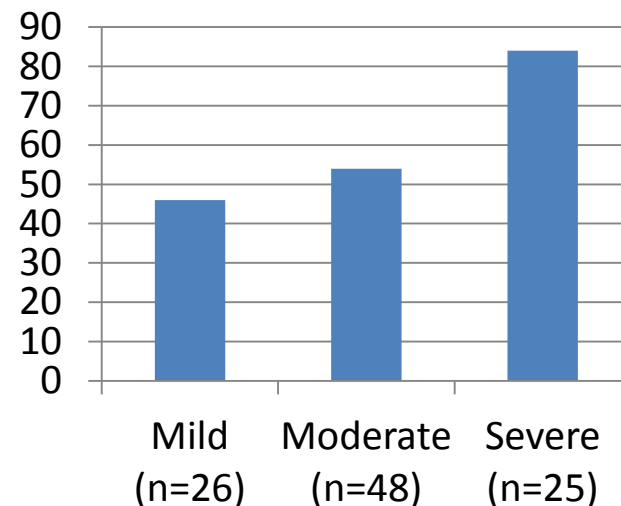


Understanding the Problem

- Survey of 100 families in ED for limb injury
- Unmet needs for analgesia in 18%
- Worried analgesia meant needle or pill (14%)



Percent of children desiring analgesic medication on arrival by pain category



Setting Aims

By December 1, 2015, we will:

- Increase the proportion of patients with limb injury who have a documented pain score from 20% to 80%
- Decrease the proportion of patients with moderate or severe pain who are not offered pain medication to 0%
- Decrease the proportion of patients (and parents) with moderate or severe pain who are dissatisfied with ED pain management to 0%

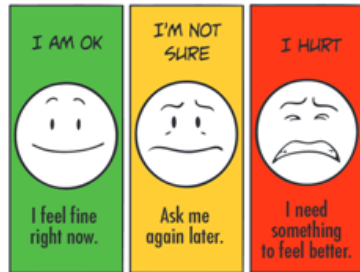




Strategy: Commitment to Comfort

- “We'll do our best to promote comfort by helping to lessen pain and anxiety.”
- Staff education: rounds, on-shift teaching
- Change management: staff comfort week, performance feedback, sharing family quotes
- Development of interventions: pain scales, comfort kits, posters, education materials
 - Informed by family interviews and consultation with Child and Youth Advisory Committee

How are you feeling?



Let's work together to reduce pain.

We can help by:

- helping kids rate their pain
- providing pain medicine
 - ask about no-needle options
- using comfort positions for procedures
- offering items on our comfort menu

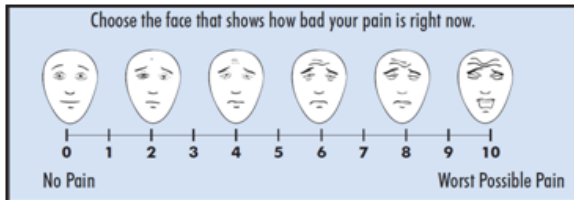
Comfort Menu	
<input type="checkbox"/>	Medicine for pain
<input type="checkbox"/>	Numbing cream before needles
<input type="checkbox"/>	Ice pack
<input type="checkbox"/>	Warm blanket
<input type="checkbox"/>	Wheelchair
<input type="checkbox"/>	Splint
<input type="checkbox"/>	Something to watch
<input type="checkbox"/>	Something to play with

Kids can help by:

- talking to us - ask questions and let us know what we can do for you

Grown-ups can help by:

- letting us know if your child isn't comfortable
- providing distraction, reassurance, a soothing voice, or a loving touch
- ask about how to support your child during a procedure

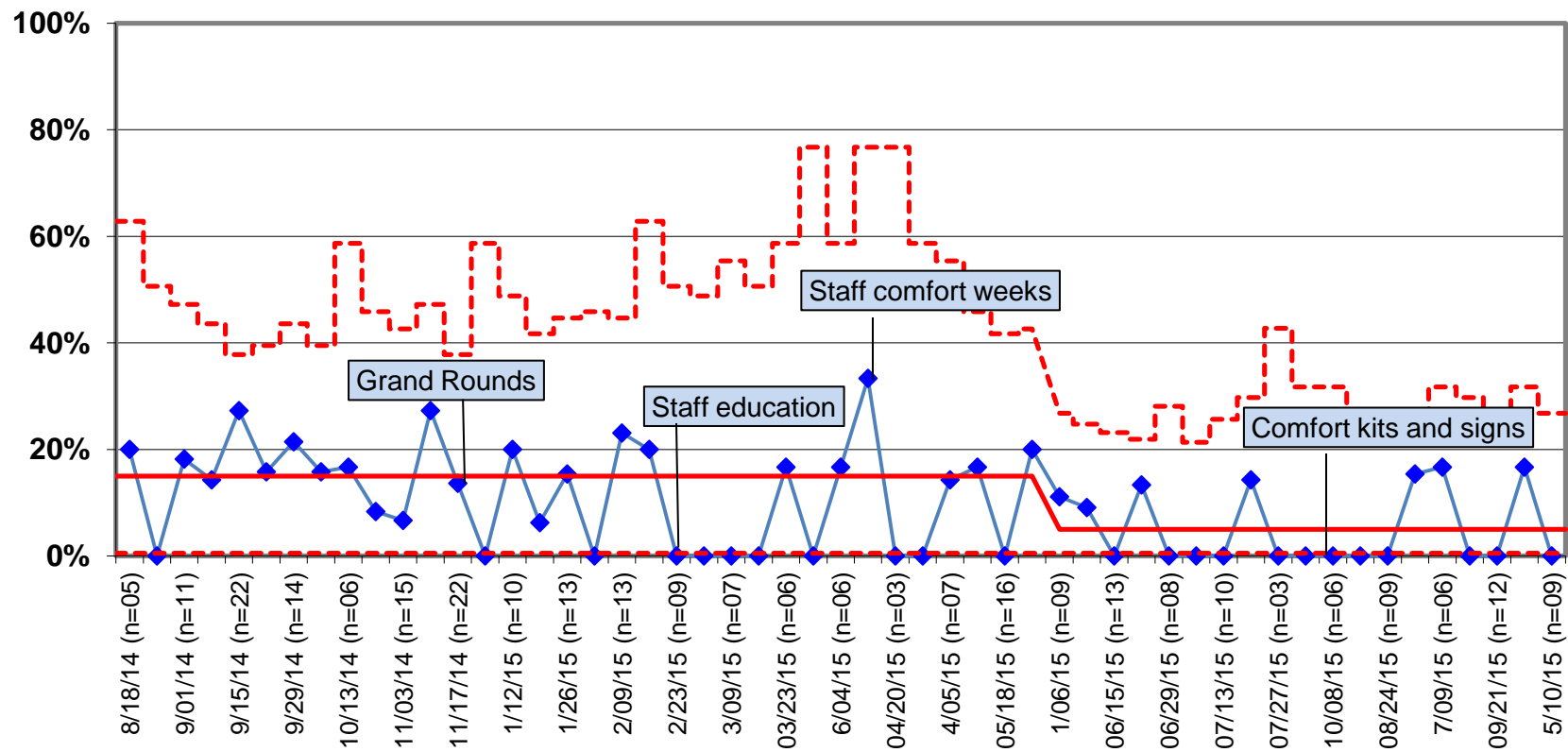


Our commitment to comfort:

We'll do our best to promote comfort by helping to lessen pain and anxiety. Please let us know what we can do to help.

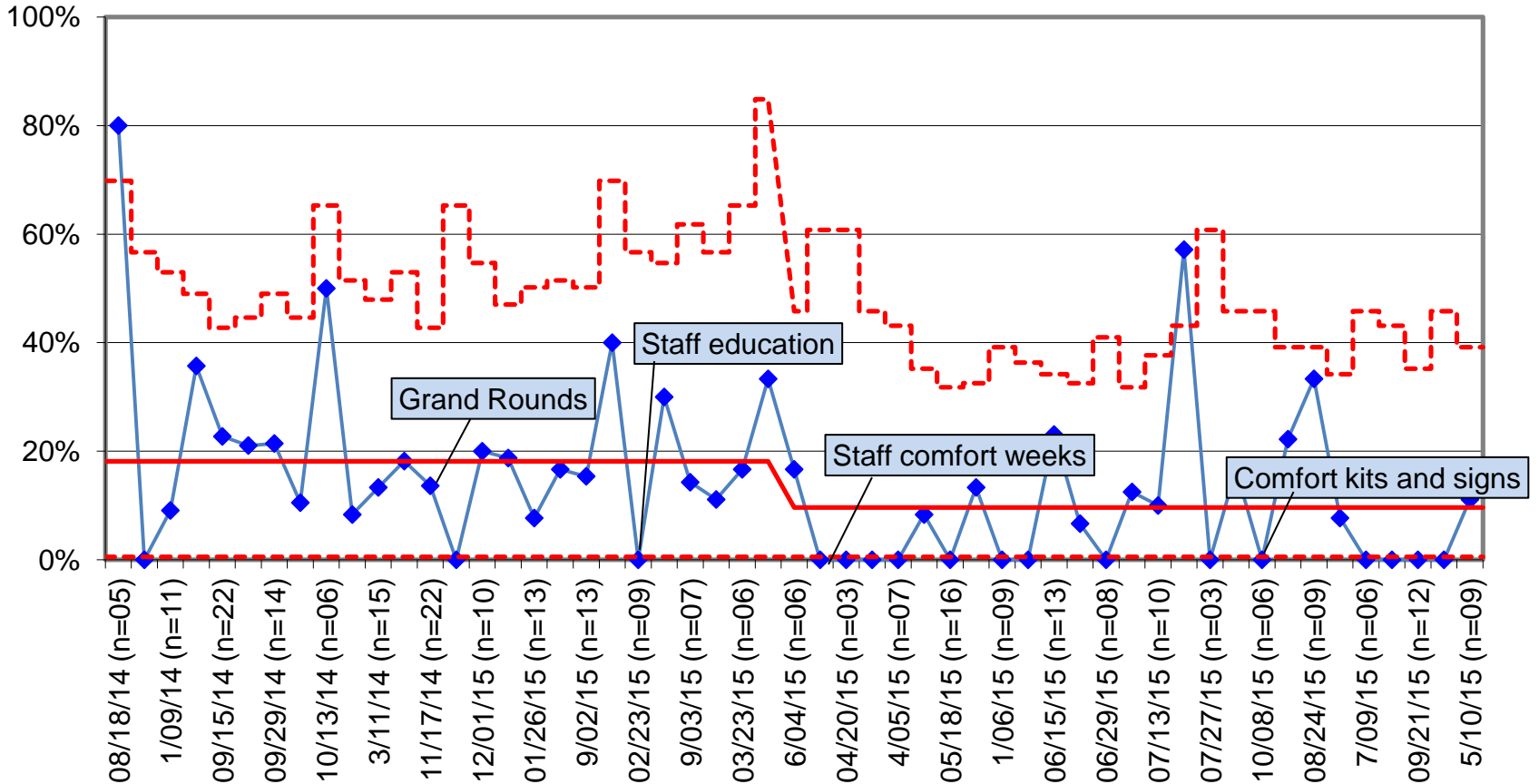


Children wanting but not offered pain medication August 2014 - Present



67% decrease

Parent or Child Dissatisfied with ED with Pain Management August 2014 - Present



47% decrease

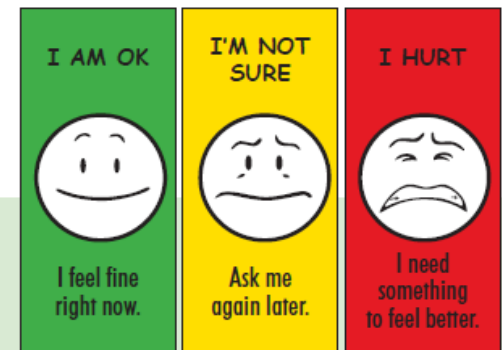
Challenges

- Choosing where to start
 - Comfort kits more engaging than triage pain scores
- Key role of QI nurse

Next Steps

- Patient/family education resources
 - Pamphlet
 - Webpage
- Spread
 - ACH inpatient units
 - Calgary area EDs

Let's work together to reduce pain



StoplightPainScale.com ©2014 Booster Shot Media

Our Commitment to Comfort

We'll do our best to promote comfort by helping to lessen pain and anxiety. Please let us know what we can do to help.

