Hospice & Palliative Care Association of Iowa

How Pain Management Influences Patient Satisfaction

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Objectives

- Review how patient satisfaction with pain management is measured and reported.
- Discuss the potential financial impact of poor patient satisfaction on healthcare settings.
- Identify strategies for leadership to consider when focusing on improving patient satisfaction with pain management.
Some History…

- HCAHPS – *Hospital Consumer Assessment of Healthcare Providers and Systems*
- Started in 2002 – Centers for Medicare & Medicaid Services (CMS) + Agency for Healthcare Research and Quality (AHRQ)

- Rigorous process…public input…scientific testing
- The first national, standardized, publicly reported survey of patients' perspectives of hospital care
- 2006 – Survey finalized and initiated
- March 2008 – Survey results made public
Survey: Three Broad Goals…

- Survey: data about PATIENT’S PERCEPTIONS
  - Topics are important to the consumer / patient
  - Data can then be used to compare hospitals

Hospital Survey Results: publicly reported data
- Ideally creates incentives to improve quality
- Ideally enhances health care accountability
  - Increases data transparency

What’s the rest of the story…$?

- Since July 2007 - hospitals with Inpatient Prospective Payment System (IPPS) annual payment update provisions must collect and submit HCAHPS data in order to receive full annual payment update
  - Failure = payments may ↓ 2%
- Non-IPPS hospitals (Critical Access Hospitals) – participation is voluntarily
HCAHPS aren’t going away

- Patient Protection and Affordable Care Act of 2010
  - Beginning with discharges in October 2012, HCAHPS among measures to calculate value-based incentive payments

HCAHPS Surveys

- 27 questions about recent hospital stay
- Random sample of adult patients
- Between 48 hours - six weeks after discharge
- Can use mail, telephone, mail with telephone follow-up, or active interactive voice recognition (IVR)
- Data is reported 4 times / year
- www.hcahpsonline.org
Survey

- 18 core questions about pt. experience
  - Communication with nurses and docs
  - Responsiveness of hospital staff
  - Cleanliness and quietness of hospital environment
  - Pain management
  - Communication about meds
  - Discharge info
  - Overall rating of hospital
  - Would they recommend the hospital

Pain Management Questions

- During this hospital stay, did you need medicine for pain? Yes / No

- During this hospital stay, how often was your pain well controlled?
  Never / Sometimes / Usually / Always

- During this hospital stay, how often did the hospital staff do everything they could to help you with your pain?
  Never / Sometimes / Usually / Always
So...the million dollar question:

**HOW DO WE IMPROVE PATIENT SATISFACTION PAIN SCORES????**

“Best Practice” ideas…

- Enhance Communication
  - Hourly Rounds – address 3-P’s every hour
  - Bedside report at shift change: Managing Up
  - White boards – encourage questions
  - LISTEN to patients, encourage questions…”I have plenty of time to assist you, please let me know what questions you have…”
  - Use the “teach back” method
  - Ask every time, “Is there anything else I can do for you?”
Enhance Communication: **Scripting!!**

- Always introduce yourself, state your intention
- Know how to address delays...how to apologize, stay calm – “I know you have been waiting 45 minutes to see the doctor and I am very sorry about that. I can imagine as you are waiting that you feel frustrated. We believe in giving every patient the time they need and sometimes a patient takes longer than we anticipated. I assure you that Dr. Smith will give you that same time and attention, and thank you again for your patience.”
- Know what **NOT** to say!! “We are so busy...we are short staffed...Dr. Smith always talks too long to his patients!”

Scripting with pain management

- “Mrs. Jones, managing your pain is very important to me and all the team taking care of you. We want to be sure you are as comfortable as possible and want to reduce your pain to a level that is good for you. We will be asking you on a regular basis about your pain and one way we measure your pain is by using a scale of 0 – 10...yada yada...”
EDUCATE – EDUCATE – EDUCATE!!

- Use a variety of tools – verbal, written, visuals
- Avoid medical jargon!
- Pain education is ongoing – ideally before, during and after hospital stay or interaction
- Empower the patient and family to ask questions to staff and docs…write them on white boards

Improving Patient Satisfaction with Pain Management

- Consider around the clock dosing (ATC) if appropriate
- Write down time of next med
- EDUCATE
- Empower ALL staff, i.e.: CNA/PCT’s
Pain Champion Program

**Pain Champion:** is a nurse who has a passion and commitment to providing high-quality pain management for Mercy’s patients, and serves as a role model and resource for other staff members on their nursing unit.

The Pain Champion Will:
- Advocate for high-quality pain management
- Enhance patients’ satisfaction with their pain management
- Actively listen and respond to questions and concerns related to patient pain management
- Identify problems or barriers to high-quality pain management and drive change in resolution
- Assist with communication to the unit regarding pain management
- Be a role model and mentor staff in their becoming the first-line solution in providing high-quality pain management
- Facilitate/coordinate unit-based outcomes measurement and development of a plan of action when need identified
- Participate in Pain Champion meetings
- Value the Pain Champion role as a benefit rather than an assignment
Requirements

- Attend pain management education opportunities
- Active participant at a minimum of 75% of the Pain Champion meetings (may be shared by Champions on a unit; 50% if you are the only nurse representing your unit)
- Participate in pain audits for your unit
- Coordinate pain management unit-based projects and report at committee meetings

Other general ideas...

- Thank you cards to patients
- Thank you cards to staff
- Leadership Rounds
  - Leave business card, contact info
  - Address positives (and negatives) with staff
- Culture change of service excellence
  - Take don’t Tell
  - Visual greeting
  - Open communication when issues noticed
- Happy Staff = Happy Patients!
Universal Words that Work/Don’t Work™

Words that Work™
Thank You
My Pleasure
I have the time
For your Safety
May I help you
Welcome
Always
I want to make sure
I understand
It is important
Excellent
Very Good

Words that Don’t Work™
- It’s not my department
- This happens all the time
- There is nothing I can do
- I don’t have time
- The doctor’s cell phone does not get reception on the golf course
- The doctors never answer their pages
- You’re lucky
- I can’t help you
- If you don’t like it, here is another hospital down the road
- Short staffed
- Thank God it’s Friday
- It’s the lab’s/radiology/administration’s fault
- Hospital Policy
Summary

- Pain management plays a HUGE role in patient satisfaction!
- Unmanaged pain is one of patients’ biggest fears.
- Service excellence – the right thing to do PLUS reimbursement…or lack there of!

ADVOCATE for Pain Management!

Thank You
References and Suggested Readings

- www.hcahpsonline.org