



### **EP8EO- Nurses use internal and external experts to improve the clinical practice setting.**

Provide one example, with supporting evidence, of an improvement that occurred due to a change in the clinical practice setting resulting from the use of internal experts. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data.

**Or**

Provide one example, with supporting evidence, of an improvement that occurred due to a change in the clinical practice setting resulting from the use of external experts. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data.

**Example:** Internal Experts Lead Improvement in Pain Management Efficacy as Measured by Patient Satisfaction

#### **Background/Problem:**

Effective, safe management of pain is a key driver of quality patient outcomes. Our patient satisfaction scores related to pain management, for the question “How well was your pain controlled?” were below national benchmarks and organizational goals. We knew that sustained improvement of our patients’ pain management experience within our practice settings was needed.

UVA is fortunate to have two internal experts in our health system whose leadership has been instrumental in guiding our interprofessional efforts to improve this domain:

- Pain Expert Nurse Clinician: Nancy Eksterowicz, MSN, RN-BC  
Eksterowicz’s role as APN2-CNS focuses on providing bedside consultation and education to clinical nurses and interprofessional teams to maximize pain management approaches with complex patient situations. Additionally, this role provides leadership to our pain management committees, clinical lead of our Nursing Pain Champion network, and serves as the organizational metric steward for our pain management patient satisfaction metric.
- Clinical Coordinator, Pain Management and Palliative Care: Jim Ray, PharmD  
This position was established in the fall of 2012 within the department of Pharmacy to provide support for pain management and high-risk drug safety while integrating multimodal analgesic approaches into house-wide pain management. Dr. Ray serves as a resource to authoritatively educate and consult with LIPs, pharmacists, and nurses. He co-chairs the Opioid Safety Committee and works with Eksterowicz



to support other medication-related performance improvement efforts including the generation of pain management order sets. Jim teaches a variety of continuing education offerings on multimodal pain pharmacology and effective pain management targeting our physician, pharmacist and nursing staff.

Together these two internal experts provide evidence-based consultation and leadership for a variety of performance improvement efforts, as well as daily patient care at the front line. These collaborative activities support the plan to improve our overall patient satisfaction with pain management. Nancy and Jim are each active in their respective national professional organizations in order to bring our patients and staff the most up-to-date guidance on the many facets and difficult challenges inherent in a successful pain management program. They share their knowledge within the healthcare community through many teaching and presentation events.

Each of our internal pain management experts guides our performance improvement of pain management via leadership of institutional committees charged with implementing best practices in opioid safety and effective pain management.

#### **Interprofessional Committees:**

- Pharmacy and Therapeutics Subcommittee: Opioid Safety
  - Chairs: James Ray, Pharm D, and Josh Barclay, MD, Assistant Professor of Medicine, General Internal Medicine and Palliative Medicine
  - Committee purpose: focus on pain management medication safety; review Medical Emergency Team (MET) team data on opioid over-sedation and use of Naloxone to address both inherent safety issues as well as to improve pain management to a better experience for the patient. Drive standardization of pain management ordering practices via the collaborative development of pain management order sets.
- Patient Care Committee Subcommittee: Pain Management
  - Chairs: Nancy Eksterowicz, MSN, RN-BC, and Quanjun (Trey) Cui, MD, Associate Professor of Orthopedic Surgery, Orthopedic Trauma
  - Committee purpose: focus on patient satisfaction and related pain management practices that are driven by interprofessional pain management standards and initiatives. Support the Pain Champion network.

#### **Goal Statement:**

Improve inpatient Press Ganey scores for patient satisfaction with pain management, as measured with the question “How well was your pain controlled?”

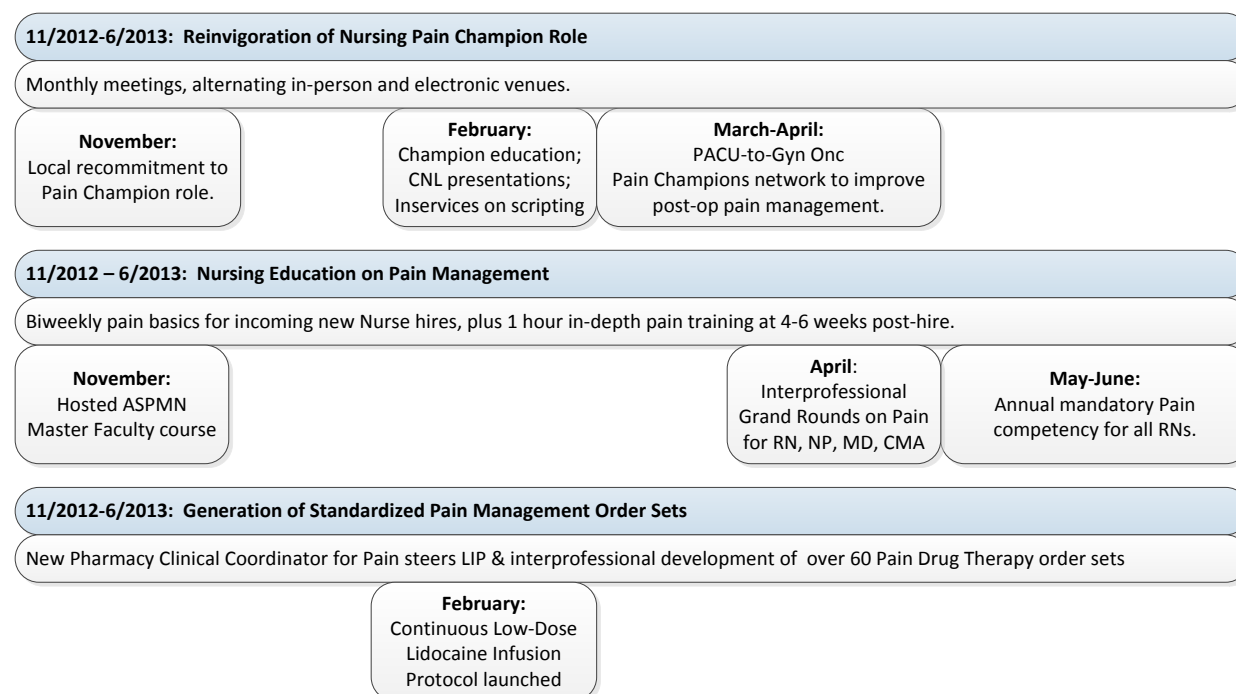


### Description of the Intervention/Initiative/Activity(ies):

Interventions between November 2012 and July 2013 resulted in significant improvement in patient satisfaction with pain control. The interventions were:

- Reinvigoration of the Nursing Pain Champion role
- Nursing education on pain management
- Generation of standardized pain management order sets

### EP8EO Figure 1: Summary Timeline of Interventions, 11/2012-6/2013



### Reinvigorating the Nursing Pain Champion Role: November 2012-June 2013

Pain Champions were initially established in 2011 and reinvigorated with the push to improve this metric in the fall of 2012. Nancy actively recruits nurses into this group and fosters their professional development in the realm of pain management expertise. The group now includes 43 individuals. One or two clinical nurses from each practice area are identified as pain champions and receive in-depth training by Nancy in pain management clinical content including initial orientation by Eksterowicz utilizing the Pain Champion Curriculum, which was generated by Nancy using the foundation provided by Chris Pasero, MSN, RN-BC, FAAN, a national expert in pain management.



Pain Champions are tasked with serving as a bedside resource in pain management practices with all their colleagues and the unit interdisciplinary teams. They work with their peers at the bedside reinforcing the use of evidence based pain management principles. Nancy actively advocates for Pain Champions to work toward becoming nationally certified in pain management and to date four have achieved this level.

Pain Champions are urged to clinically consult with Nancy on difficult patient situations, which typically generate 3-5 consults / week. Nancy comes to the unit to discuss nurses' assessment of the patient and their concerns regarding unmet needs. She coaches staff in discussing next steps with the LIP staff involved in the patient's care. She directly role models this process as indicated by working with the Pain Champion to dialogue with the team in question and where needed she will sit in on patient / family / team meetings to assist in developing an effective individualized plan for the patient's needs.

The Pain Champions meet face-to-face as a group every other month and hold an internet-based electronic meeting tool called Collab on the alternating months. Document sharing and message board-style discussions are the features most commonly used. Eksterowicz posts learning assignments from the literature to reinforce knowledge. She also provides periodic pain management seminars to the pain champions, which are also open for anyone to attend.

**February 2013** marked an important turning point in the momentum around pain management. Educational efforts for pain champions in combination with Clinical Nurse Leader graduate student work and internal presentation combined to activate the pain champions in a new way. In-service education to Pain Champions was provided by Eksterowicz which focused on the value of scripting when talking to patients about pain management. Several Clinical Nurse Leader nursing students were also recruited to assist in developing materials and reinforcing educational messages. Pain Champions incorporated this into daily practice. Champions on several units produced bulletin boards and other staff materials to further disseminate this practice among unit nurses.

Pain Champions also identify practice issues across settings that they can collaborate on to improve outcomes for our patients. In **March-April 2013**, a trend of poor pain management was noted in gynecologic surgery patients transitioning from PACU to the GYN/ONC acute care unit. To address this, the GYN unit Pain Champion reached out to the PACU Pain Champion to investigate the issue of PCA pumps on post-op GYN patients no longer being initiated in PACU. The pain champions wanted to assure early and ongoing pain control during the early postop period. Together they consulted with Nancy and validated that there was sufficient evidence that this practice led to increased safety and improved patient comfort. A week later, they brought together an interprofessional group to standardize this practice. This resulted in improved patient satisfaction, and underscored the need for acute care unit nurses to immediately assess the patient's pain and safety upon arrival. Additionally this demonstrated the value of the Pain Champion role in the respective units and their ability to catalyze change.



### **Nursing Pain Management Education:** November 2012-April 2013

Basic training of all our new nursing staff is vital to lay groundwork for effective pain management practice. Eksterowicz teaches all incoming clinicians about pain management and patient satisfaction in general orientation sessions during their first week of hire. Additionally, she teaches a one-hour interactive class on pain management to all nurse orientees at four to six weeks post-hire in our final day of nursing orientation. Clinician 1 nurses in the Nurse Residency Program receive a session on pain management safety and satisfaction in their first-year curriculum. Nancy generates an annual computer-based learning module that is required for all RN staff in all settings that reviews our pain management principles, clinical updates, and requirements. Finally, our Patient Care Assistant (PCA) to Patient Care Technician (PCT) course includes a guest lecture by Eksterowicz in how to work with the patient and team in communicating about pain management needs.

In **November 2012**, Eksterowicz offered a full-day master faculty course developed by the American Society for Pain Management (ASPMN) in preparation for ANCC Pain Management Certification for interested pain champions. This course was also open to all nurses in our system as well as nurses in the community. The course enrolled 79 attendees including five community RNs. Several champions obtained certification and others continue to work toward this. Another key feature of this educational offering included a guest expert in pediatric pain management, Renee Mannwarran, PhD, RN-BC. As part of the master faculty, she provided our pediatric area Pain Champions in-depth knowledge toward their area of expertise.

In **April 2013**, Eksterowicz developed and coordinated Grand Rounds presentations offerings targeting MDs, NPs, PAs, nurses and pain champions, to provide education on pain management topics that included:

- Enhancing Pain Management
- Pain Management, Patient Safety and Patient Satisfaction, Pharmacology of Analgesics and the Intersection of Pain & Addiction
- Opioid Safety
- Opioid Alternatives

### **Standardized Order Sets:** November 2012-June 2013

The use of standardized order sets for pain management drug therapy has provided consistent and safe opioid management. This drives safe, evidence-based pain management for our patients. Since late **November 2012**, accelerated work to develop these tools across physician teams has been underway under the leadership of Ray and the Opioid Safety Committee in partnership with physician leadership. They have achieved consensus regarding evidence-based approaches to complex clinical scenarios. Jim works with our clinical pharmacist group to develop their active



collaboration with our LIPs in utilizing these order sets in clinical care. Our pharmacist colleagues are strong advocates for safety and effectiveness in pain management for individual patient needs.

More than 60 pain management Epic order sets have been revised to enhance effectiveness and safety. This work has translated evidence based strategies such as the use of multimodal therapies and the use of hydromorphone as the intravenous infusion agent of choice into full use in the patient populations addressed by these order sets. This has strengthened nurses' "toolkit" in effectively managing common pain management needs in their patient populations.

Another new tool for complex pain management was introduced in **February 2013** — a continuous, low-dose lidocaine infusion protocol was introduced to address palliative care pain management, post-operative pain and severe neuropathic pain. This protocol is managed and supported by the Acute Pain Service and minimizes opioid use to enhances safe practices. Both Eksterowicz and Steve Morton, BSN, RN-BC, Clinician IV Acute Pain Service Coordinator, serve as educational resources for the nursing staff. This tool has enabled us to more effectively and safely address these patients' needs.

Taken together, these multifaceted interventions during this period led by our internal experts have brought more consistent, satisfying, evidence-based therapy to our patients. Their satisfaction with this key clinical outcome of their care is improving due to the focus and commitment of all our clinicians to this improvement day after day.

### Participants:

**EP8EO Table 1: Participants, Pain Satisfaction Improvement Leaders**

<b>Name</b>	<b>Discipline</b>	<b>Title</b>	<b>Department</b>
Nancy Eksterowicz	Nursing	Advanced Practice Nurse 2-Clinical Nurse Specialist	Clinical Support, Patient Care Services
Jim Ray	Pharmacy	Pharmacy Clinical Coordinator	Pharmacy
Trey Cui	Physician	Associate Professor of Orthopedic Surgery	Orthopedic Trauma
Steve Morton	Nursing	RN Clinician IV	Acute Pain Service
Joel Anderson	Nursing	Director, Nursing Adult Medical-Surgical Care	Patient Care Services



Josh Barclay	Physician	Assistant Professor	General Medicine, Geriatrics, and Palliative Care Medicine
Jennifer Witten Barnes	Pharmacy	Clinical Pharmacist	Pharmacy
Patricia DeYoung	Nursing	RN Clinician III Ambulatory	Pain Management Center
Lisa Gabriel	Nursing	RN Clinician III	Interventional Radiology
Catherine Casey	Physician	Assistant Professor	Family Medicine
Robert Thiele	Physician	Assistant Professor	Critical Care Anesthesiology
Virginia Barton	Pharmacy	Supervisor, Pharmacy	Pharmacy
Amy L. Morris	Pharmacy	Pharmacy Resident	Interns & Residents
Traci Hedrick	Physician	Assistant Professor	Surgery
Derek Mongold	Physician	Assistant Professor	Psychiatry and Neurobehavioral Sciences
Julie Kelsey	Pharmacy	Clinical Pharmacist	Pharmacy
Dania Chastain	Anesthesiology	Associate Professor and Pain Clinical Psychologist	Anesthesiology
Anne Stadelmaier	Nursing	RN Clinician III	PACU
John Rowlingson	Physician	Director, Acute Pain Service	Anesthesiology
Susan Steck	Nursing	RN Clinician III	7 Acute
Barbara Trotter	Nursing	RN Clinician IV	3 West
Pain Champions	Nursing	Various	All areas



**Outcome(s):**

The focused attention provided by Nancy and Jim have led to an improvement in patient satisfaction with pain throughout the organization.

- The implementation of the Pain Champion network has promoted frontline clinical knowledge of resources, innovative practices and an increased awareness.
- Nursing pain management education has given nursing staff the tools needed to deliver effective pain management in collaboration with the interdisciplinary team.
- Pain Management order sets derived in interdisciplinary partnership equip nurses at the front line to administer effective multimodal pain therapies to a number patient populations.

A targeted interprofessional approach has initiated a positive trajectory to this important metric.

**EP8EO Figure 2: Patient Satisfaction: “How Well Your Pain Was Controlled?” (Press Ganey, All Units, 3Q12–1Q14)**

