

Increase Patient Satisfaction: A Nursing Pain Education Campaign

Madea Neumont DNP, RN • Maria Grosselin MSN, RN-BC • Penny Norvell RN-ONC
UPMC Hamot, Erie, PA

Background

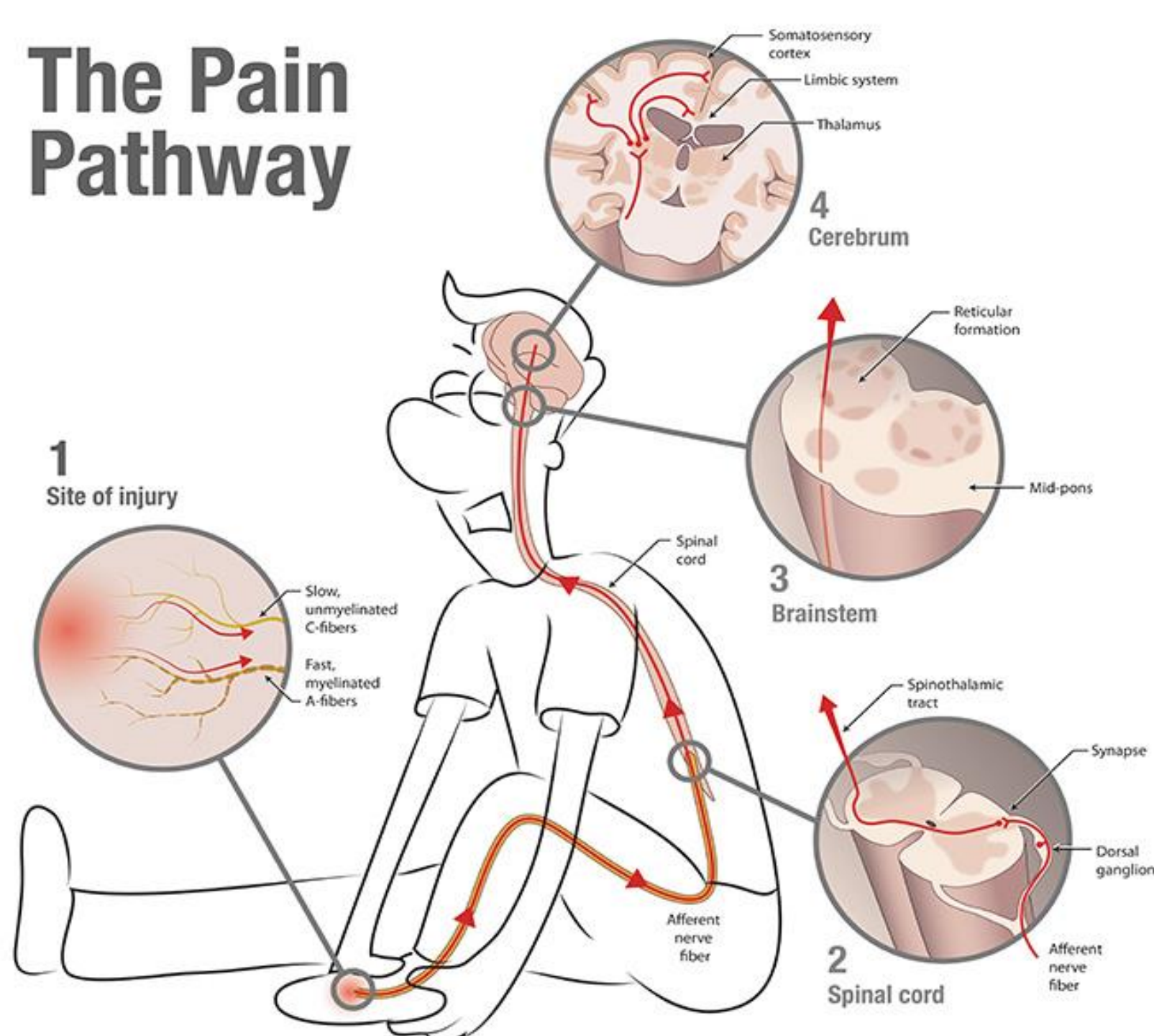
Many health care communities seek to improve post-operative pain control. Reduction in pain has been associated with positive patient outcomes and satisfaction. One area many health care communities identify as problematic is pain control of the orthopedic surgery patient. Inadequate pain management was identified to affect patient satisfaction and increase length of hospital stay. The average length of stay for elective orthopedic surgery patient at UPMC Hamot is 2.5-3 days compared to the national average of 1.5-2 days. The patient care perspective surveys or Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) tallied the orthopedics services at this facility as poor for length of stay at 36.3/100. Post-surgical pain is associated with risk factors that include prolonged uncontrolled chronic pain and the usage of long-term opioids. With the opioid epidemic, an increasing concern both nationally and regionally, uncontrolled post-surgical pain can be a contributing factor. Gan (2017) determined worsening pain at the surgical site on the day of surgery has been found to be a predictor of persistent opioid use over six months. In Northwest Pennsylvania, the opioid epidemic has been associated with many deaths and debilitating conditions. This geographical area has experienced one of the highest rates of drug overdose in the state of Pennsylvania. Additionally, Northwest Pennsylvania has a high incident of prescribed opioids according to The Drug Enforcement Agency's (DEA), Joint Intelligence report (2018).



Purpose

The purpose of this evidence-based quality improvement project is to increase nursing knowledge of pain management strategies. Evidenced based practice (EBP) has shown that nursing education is one major intervention to improve nurses' knowledge and attitudes regarding pain management (Germossa, Stromseng-Sjetne, & Helleso, 2018). Improved pain management can have a major impact on patient satisfaction, and which may decrease length of hospital stay for elective orthopedic surgery patients.

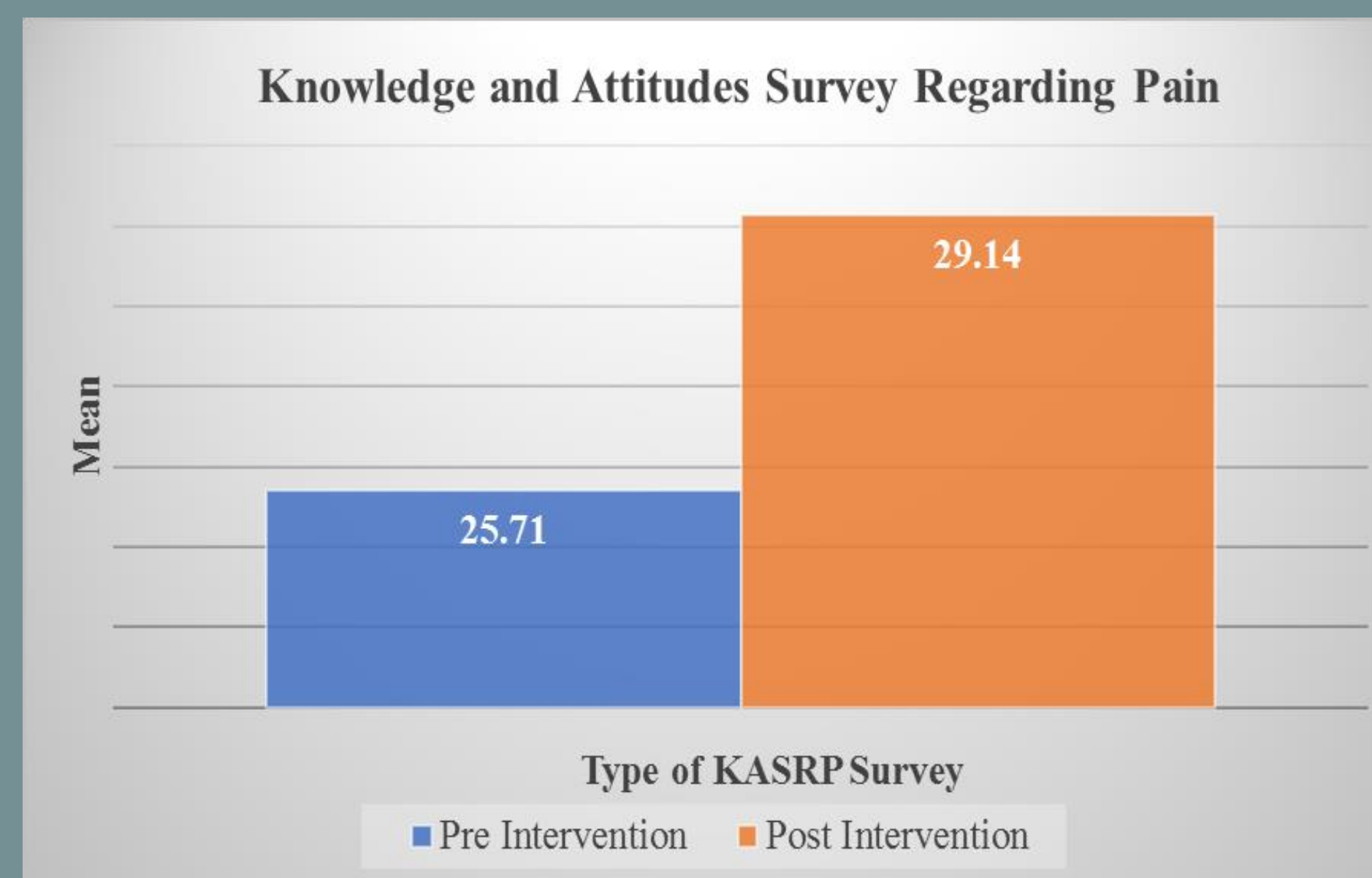
The Pain Pathway



Methodology

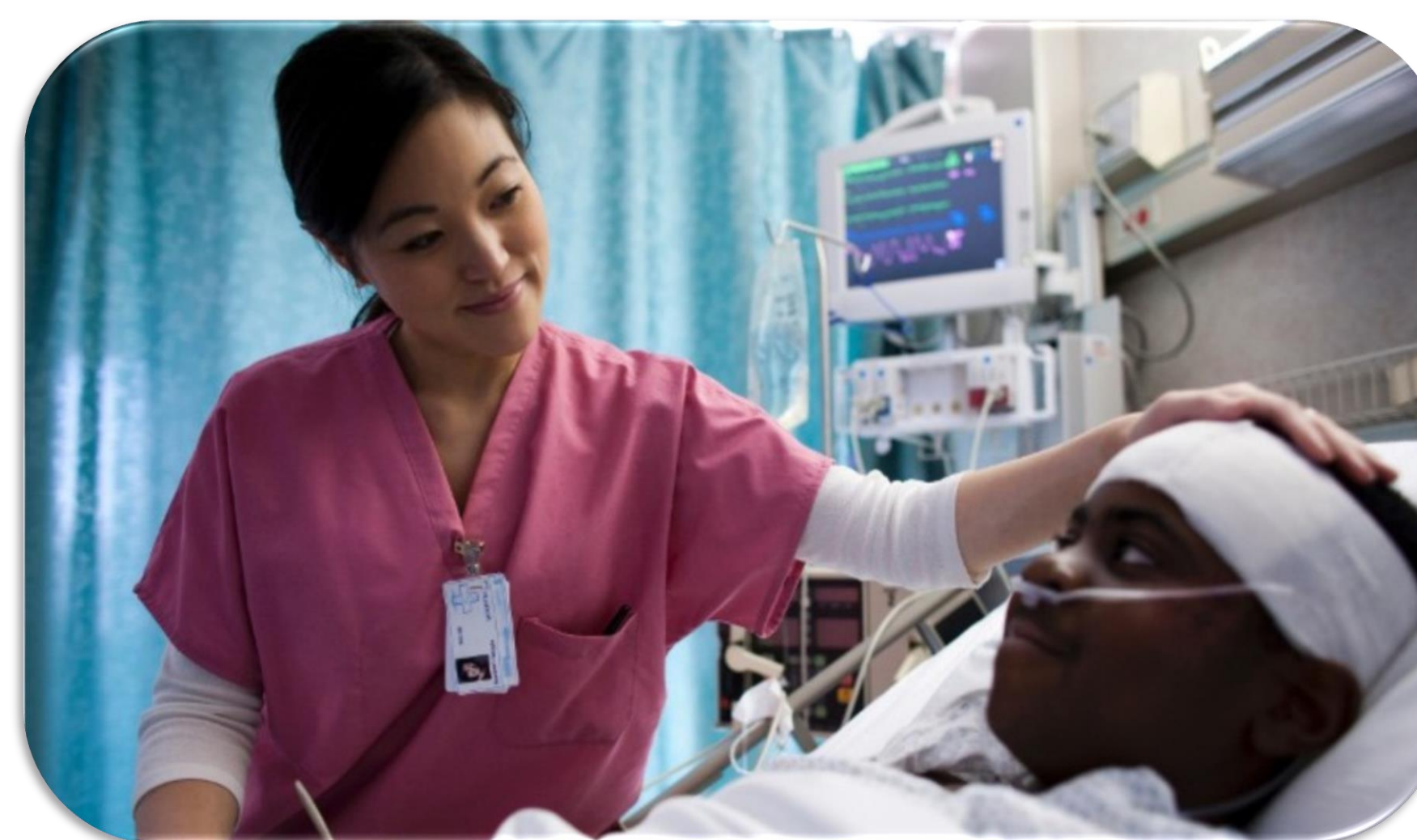
A one-on-one, 3-step nursing education intervention was utilized over 5 weeks, consisting of a pre-survey test, education session, and post-survey test. Project completion occurred on an orthopedic unit within a short-term acute care level II trauma hospital.

To measure the nursing knowledge pre-and post-education, the established tool Knowledge and Attitudes Survey Regarding Pain (KASRP) was used. Pre-test and post-test data will be evaluated for percentage change in participants knowledge of pain management. Validity and reliability have been established and this tool has been recognized since 1987 by the World Health Organization and National Pain Society. Al-Quliti and Alamri (2015) described the validity was accomplished through comparison of caregivers, including nurses and senior pain experts, and showed test-retest reliability ($r > 0.80$).



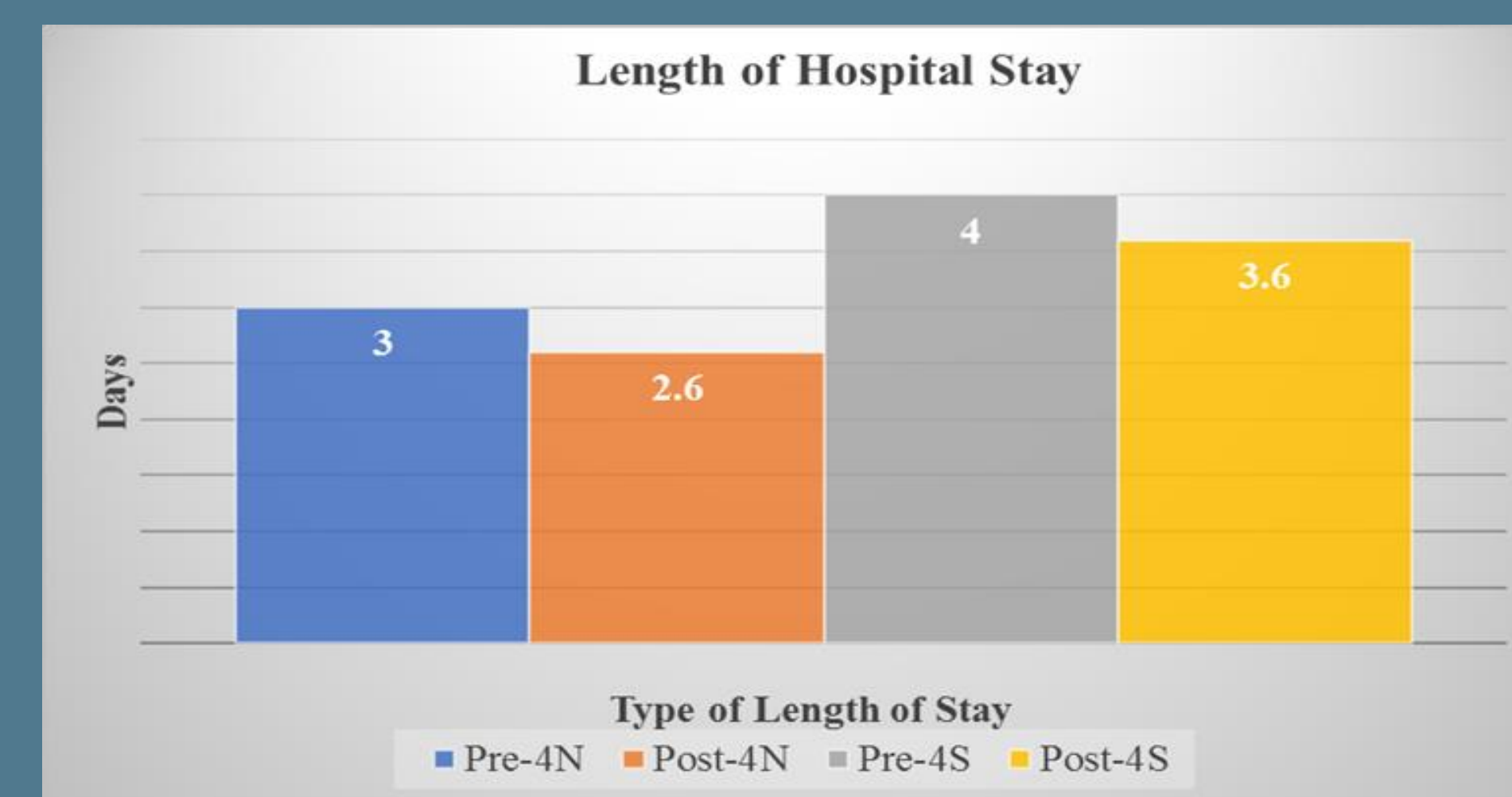
The education emphasizes the importance of effective pain management, potential side effects of pain medication, risks associated with discharge from hospital with prescribed controlled substance(s), the patient's/family's role in managing pain. It is important to teach patients that pain is expected sometimes.

Health Promotion - A culture that promotes pain relief and always makes it a priority should be introduced. In such culture, achieving optimal pain management must be the goal for every healthcare professional rather than a goal for a specific team" (Al-Mahrezi 2017).



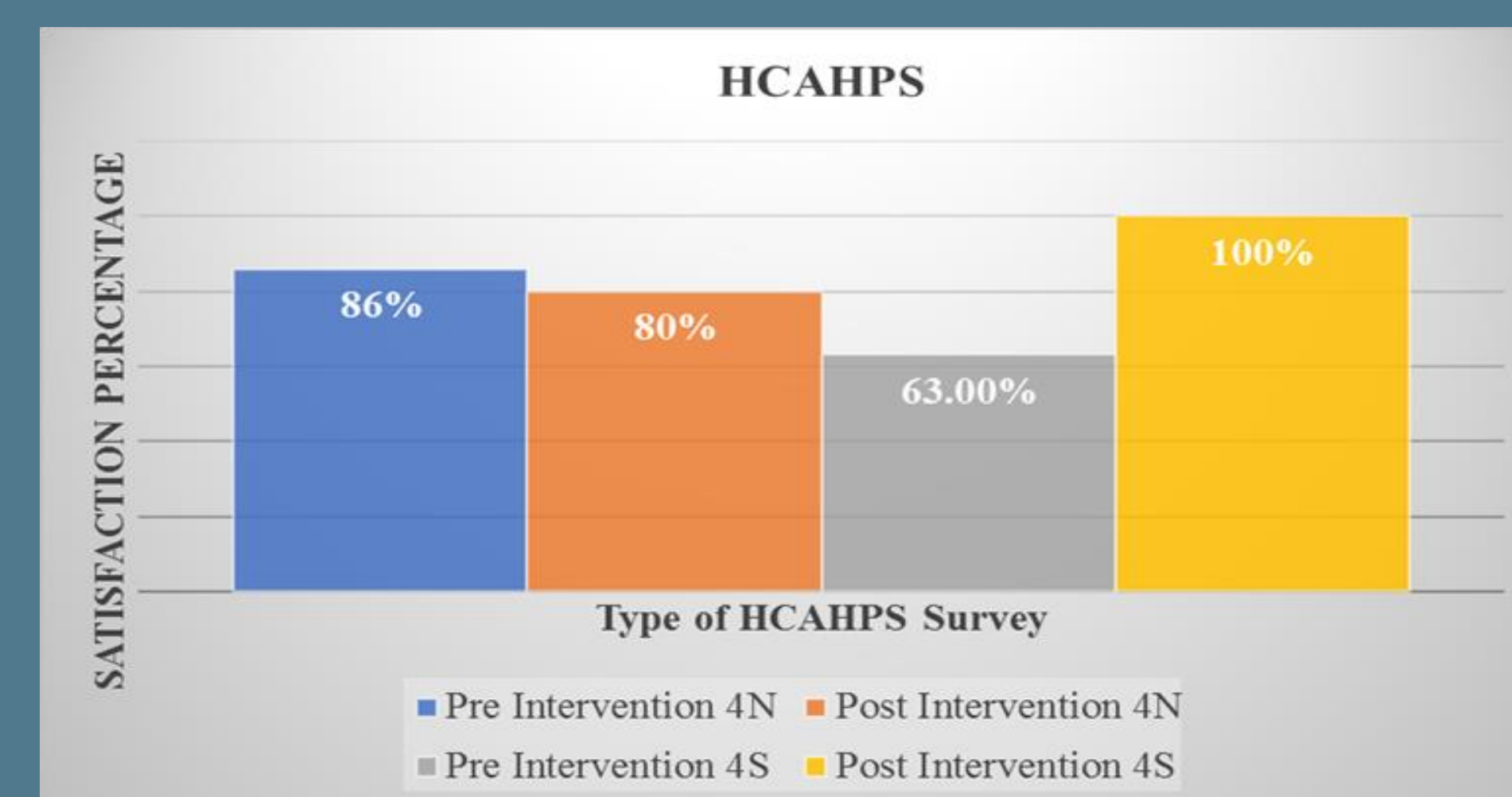
Results

A 13% increase in nursing mean knowledge of pain management was determined post intervention. The t-test results indicated that the knowledge of the EBP change quality improvement project participant significantly improved, $t(20)=5.1$, $p < .0001$. HCAHPS scoring revealed an increase post intervention of 26% in patient satisfaction. Length of stay data indicated a decrease in patient hospital stay by 0.4 days. The results determined that the nursing education intervention improved orthopedic patient satisfaction and decreased length of stay in the practice setting.



Conclusion

Educating nurses on pain management can improve patient satisfaction. Increased pain control, as well as improved patient perception of pain can decrease length of stay in the orthopedic surgery patient.



References

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