About the project

• Symptom control of pain accounts for over 70% of requests for SPCT assistance
• No uniform approach to pain from both ward teams as well as SPCT
• What tools are currently being used within DBTHFT and how effective are they
• Finding a tool that would work for all types of patients and diagnosis as well as within any care setting

Aims

• Improving pain and symptom management - Establish a pain assessment tool (CQC evaluation)
• Improving communication on handover from hospital to community - Education and training on symptom management
• Enabling choice and shared decision making on treatment options - Incorporating Pain Management Diary into ‘Me and My Plan’
• Improving future care planning in out patients - Empowering patients and relatives to understand their own symptoms and their management to facilitate a smooth transition irrespective of care setting

What was done?

• Review of electronic systems (DBTHFT) and tools currently used
• Face to face discussions with medical/nursing team regarding ‘their favoured tools’
• Systematic literature review of pain tools – cancer and non-cancer
• Identification of ‘1 tool for all’
• Discussions with Defense & Veterans Center for Integrative Pain Management (DVCIPM)
• Permission to use the tool and registration with DVCIPM
• Systemic literature review of pain diaries
• Devising what the document would look like and sizing
• Clinical Records Committee
• Graphics team
• Patient Safety Review Group – shown to patients/families
• Graphics
• Diary produced - testing and refining

Impact and Learning

• Protocols on introducing new documentation and time scales this involves:
  1. Continuity of support systems
  2. Time scales
  • Motivation
  • Capacity to continue with project
  • Developing roll-out after testing takes time

Key Messages

• Establish what systems and processes that your Trust have when introducing a new document
• Everything does not have to be perfect or have ‘the finished product’ before getting input from others
• Finding the time to collaborate with other teams

For full case study, visit www.hospiceuk.org/BoTB