INTERMOUNTAIN PAIN ASSESSMENT TOOL

Research Findings and New Tool Implementation Plan

Med/Surg Nursing Conference – Intermountain Medical Center
September 22, 2016
On a scale of 0-10...
Needs Assessment

• Pain across the continuum
• Standardization
• Common language
• Patient experience
Why Validate?

- **Definition:**
  - Any factual evidence that helps to establish the truth of something

- **In other words:**
  - Provide evidence that this tool accurately measures what it is supposed to measure

- **Evidence-based**

- **Reliable results**
Purpose of Validation Study

Inform the process of selecting or developing a standard tool for quickly and accurately assessing present acute pain in adult patients.

Focused on creating a single tool to be used in inpatient units, emergency departments, and urgent care settings.
Literature Review

• 0-10 scale is the most common metric
• Simple and convenient
• Pain is most accurately assessed on three dimensions
  – Intensity
  – Interference
  – Behavior
Methods

Phase I

- Fall 2014 and Summer 2015
- Face-to-face interviews & focus groups in the Central Region
  - 60 patients
  - 70 nurses
- Discussed how pain is currently assessed, tested alternative designs, and ease of use
Findings

Phase I – Interviews and Focus Groups

1. There is no consistency across care settings in how caregivers assess patients’ acute pain
2. Very often patients are not shown a pain assessment scale when asked to rate their level of pain
3. Caregivers will not use an assessment tool unless it is very simple and convenient
Pain Scale

- **0**: No pain
- **1**: Hardly notice pain
- **2**: Notice pain, does not interfere with activities
- **3**: Sometimes distracts me, can do usual activities
- **4**: Distracts me, can do some activities
- **5**: Hard to ignore, avoid usual activities
- **6**: Focus of attention, prevents doing daily activities
- **7**: Awful, hard to do anything
- **8**: Can't bear the pain, unable to do anything
- **9**: As bad as it could be, nothing else matters

Levels:
- **MILD** (Green)
- **MODERATE** (Yellow)
- **SEVERE** (Red)
TOSH Pain Scale

It's not always easy to describe pain. A pain scale is a tool to help you describe how much pain you're feeling. It should give your provider a clearer understanding of how you feel. Use the scale below to help you rate your pain.

<table>
<thead>
<tr>
<th>Level of Pain</th>
<th>Score</th>
<th>Comfort Level</th>
<th>Pain at Rest</th>
<th>Pain Level with Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minor</td>
<td>0</td>
<td>No Pain</td>
<td>No pain</td>
<td>Mild pain is present but does not limit activity.</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Very Mild</td>
<td>Barely noticeable. Most of the time not thinking about it. Pain is present, but most of the time you do not notice it.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Mild</td>
<td>Dull constant ache, but a simple change of position helps to diminish pain.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Discomfort</td>
<td>Very aware of pain. Able to visit and eat. Able to find a comfortable position.</td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td>4</td>
<td>Tolerable</td>
<td>Pain occupies most of your thoughts. Diminished desire to eat and visit. Difficult to find a comfortable position.</td>
<td>Can do most activities with rest.</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>Uncomfortable</td>
<td>Unable to do some activities because of pain.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>Very Uncomfortable</td>
<td>Unavailable.</td>
<td></td>
</tr>
<tr>
<td>Severe</td>
<td>7</td>
<td>Intense</td>
<td>Pain is all you can think about. Decreased appetite due to pain level. Do not want visitors. Unable to find comfortable position.</td>
<td>Unable to do most activities because of pain.</td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>Very Intense</td>
<td>Pain intensity makes it difficult to think clearly. Sweating, nausea, and unable to eat or drink.</td>
<td>Unable to do any activities because of pain.</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>Unbearable</td>
<td>Significant nausea, vomiting, and pain due to severe pain.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>Unimaginable</td>
<td>Pain so intense, loss of consciousness may occur.</td>
<td></td>
</tr>
</tbody>
</table>
Wong-Baker FACES Pain Rating Scale

Criteria for New Pain Assessment Tool
Based on Findings from Phase I

1. Very simple, quick, and easy-to-use by both patients and caregivers
2. Numeric scale from 0 to 10
3. Short descriptions for each pain level
4. 5-6 faces that represent the different levels of pain
5. Graphic design that is
   • Visually appealing
   • Facilitates the assessment
Intermountain Test Version 1
When asked to compare the TOSH, DoD, and the new tool...

95% of nurses preferred the new tool!
Findings

Phase I – Interviews and Focus Groups

Which Tool is Easiest to Use

<table>
<thead>
<tr>
<th></th>
<th>Bars</th>
<th>Wedge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients</td>
<td>37%</td>
<td>63%</td>
</tr>
<tr>
<td>Nurses</td>
<td>17%</td>
<td>83%</td>
</tr>
<tr>
<td>All</td>
<td>26%</td>
<td>74%</td>
</tr>
</tbody>
</table>
Findings

Phase I – Interviews and Focus Groups

How Much Easier?

Bars
- A Lot: 22%
- Somewhat: 11%
- A Little: 67%

Wedge
- A Lot: 40%
- Somewhat: 52%
- A Little: 8%
Methods

Phase II

• Fall 2015

• Email survey of 500 randomly sampled nurses across the system
  – 250 responded

• Tested preference for new design and specific written descriptions
Findings

Phase II – Email Survey

1. 88% liked the Intermountain Wedge design

2. Received very helpful feedback about the wording for describing different pain levels
   - Does this description “fit” this point on the scale?
   - Do the descriptions “flow” from one point to another?
## Findings
### Phase II – Analysis of Descriptions

<table>
<thead>
<tr>
<th></th>
<th>Average</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>1&amp;2</th>
<th>4&amp;5</th>
<th>Recommended</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - Hardly notice pain, more like minor discomfort</td>
<td>4.24</td>
<td>6%</td>
<td>7%</td>
<td>4%</td>
<td>22%</td>
<td>61%</td>
<td>13%</td>
<td>83%</td>
<td>KEEP</td>
</tr>
<tr>
<td>2 - Notice minor pain but mostly don't think about pain</td>
<td>3.54</td>
<td>13%</td>
<td>13%</td>
<td>14%</td>
<td>26%</td>
<td>34%</td>
<td>26%</td>
<td>60%</td>
<td></td>
</tr>
<tr>
<td>2 - Slightly aware of pain but mostly don't think about pain</td>
<td>3.74</td>
<td>9%</td>
<td>8%</td>
<td>19%</td>
<td>28%</td>
<td>36%</td>
<td>17%</td>
<td>64%</td>
<td>KEEP</td>
</tr>
<tr>
<td>3 - Somewhat aware of pain</td>
<td>3.71</td>
<td>6%</td>
<td>13%</td>
<td>19%</td>
<td>30%</td>
<td>33%</td>
<td>19%</td>
<td>62%</td>
<td>KEEP</td>
</tr>
<tr>
<td>3 - Easy to take mind off pain</td>
<td>3.80</td>
<td>7%</td>
<td>12%</td>
<td>15%</td>
<td>25%</td>
<td>41%</td>
<td>20%</td>
<td>66%</td>
<td>KEEP</td>
</tr>
<tr>
<td>3 - Easy to relax</td>
<td>3.22</td>
<td>18%</td>
<td>13%</td>
<td>23%</td>
<td>20%</td>
<td>26%</td>
<td>31%</td>
<td>45%</td>
<td></td>
</tr>
<tr>
<td>4 - Quite aware of pain</td>
<td>3.79</td>
<td>4%</td>
<td>10%</td>
<td>20%</td>
<td>34%</td>
<td>32%</td>
<td>15%</td>
<td>66%</td>
<td>KEEP</td>
</tr>
<tr>
<td>4 - Not as easy to take mind off pain</td>
<td>3.84</td>
<td>5%</td>
<td>10%</td>
<td>18%</td>
<td>32%</td>
<td>36%</td>
<td>15%</td>
<td>68%</td>
<td>KEEP</td>
</tr>
<tr>
<td>4 - Not as easy to relax</td>
<td>3.47</td>
<td>10%</td>
<td>13%</td>
<td>20%</td>
<td>31%</td>
<td>25%</td>
<td>24%</td>
<td>56%</td>
<td></td>
</tr>
<tr>
<td>4 - Easy to find a comfortable position</td>
<td>3.22</td>
<td>18%</td>
<td>14%</td>
<td>20%</td>
<td>25%</td>
<td>23%</td>
<td>32%</td>
<td>48%</td>
<td></td>
</tr>
<tr>
<td>5 - Very aware of pain</td>
<td>4.07</td>
<td>3%</td>
<td>5%</td>
<td>17%</td>
<td>32%</td>
<td>44%</td>
<td>8%</td>
<td>75%</td>
<td>KEEP</td>
</tr>
<tr>
<td>5 - Disrupts sleep/rest</td>
<td>4.27</td>
<td>2%</td>
<td>4%</td>
<td>10%</td>
<td>33%</td>
<td>51%</td>
<td>6%</td>
<td>84%</td>
<td>KEEP</td>
</tr>
<tr>
<td>5 - Not as easy to find a comfortable position</td>
<td>3.64</td>
<td>8%</td>
<td>11%</td>
<td>18%</td>
<td>32%</td>
<td>30%</td>
<td>20%</td>
<td>62%</td>
<td></td>
</tr>
<tr>
<td>5 - Can still take mind off pain</td>
<td>3.38</td>
<td>14%</td>
<td>9%</td>
<td>30%</td>
<td>23%</td>
<td>26%</td>
<td>22%</td>
<td>48%</td>
<td></td>
</tr>
</tbody>
</table>
# Methods

## Phase III
- Spring 2016
- Field test at 15 inpatient units, EDs, and InstaCares in the Central Region
  - 30 Patients
  - 50 Nurses
- Tested actual use of tool over an 8 week period

## Phase IV
- Summer 2016
- Follow-up phone interviews with 36 thoughtful respondents from the Phase II email survey
  - 14 participated system-wide
- Refined the descriptions of moderate pain
With “Very Severe” Category

Without “Very Severe” Category
Final Findings

Phase III & IV – Field Test and Follow-up Phone Interviews

1. Compared to how they usually assess pain, 90% of nurses rated the new tool as significantly better
   • Simple, effective graphics: faces, color shading from green to red, wedge
   • Short descriptions
   • Communicates quickly and easily in a way that overcomes literacy barriers

2. Addition of “Very Severe” category is preferred
   • Helps provide a more accurate score and pain goal by reducing the inclination of some patients to over report their pain as a 10

3. Refinement of wording in the descriptions

4. Addition of bullet points within each description
Naming of the Tool

1. iPS: Intermountain Pain Scale
2. iPAT: Intermountain Pain Assessment Tool
# Pain Assessment Tool

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No pain</td>
</tr>
<tr>
<td>1</td>
<td>Hardly notice pain; it's more like minor discomfort</td>
</tr>
<tr>
<td>2</td>
<td>Slightly aware of pain; but mostly don't think about it</td>
</tr>
<tr>
<td>3</td>
<td>Somewhat aware of pain; still easy to take mind off it; doesn’t interfere with doing things</td>
</tr>
<tr>
<td>4</td>
<td>Quite aware of pain; not as easy to take mind off it</td>
</tr>
<tr>
<td>5</td>
<td>Very aware of pain; may interfere with doing some things; disrupts sleep and rest</td>
</tr>
<tr>
<td>6</td>
<td>Hard to take mind off pain; hard to find a comfortable position</td>
</tr>
<tr>
<td>7</td>
<td>Restless, fidgety; can't talk with people or text</td>
</tr>
<tr>
<td>8</td>
<td>Don’t want to talk with people or text; don’t want to eat; can hardly sleep or rest</td>
</tr>
<tr>
<td>9</td>
<td>Very hard to talk with people or text; pain is all you can think about; sometimes cry out</td>
</tr>
<tr>
<td>10</td>
<td>Not at all able to talk, eat, sleep or rest; may cry out uncontrollably</td>
</tr>
</tbody>
</table>

**Categories:**
- MILD
- MODERATE
- SEVERE
- VERY SEVERE
Next Steps

- Branding
- Spanish Translation
- Copyright
- Pediatric Validation
- Q1 2017 Implementation
  - Communication Plan
  - Staff Education
  - iCentra Integration
"It's our new method for determining who we should treat first. We take people in order of how loud they scream."
Questions?

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