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Identifying Innovations in Children’s Pain Management Project: An International Perspective

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Aim
The aim of the Travel Scholarship was to identify and learn from international examples of good practice in the management of children’s pain by visiting three areas of excellence in pain management in the UK, Sweden and Australia.

Background
Children have a right to effective pain management and up to date guidelines are available to promote good pain management. However, many reports state that children’s pain in hospital settings is not managed well, and many children are left to suffer unnecessary pain. Nearly a quarter of children surveyed said they were in pain all or most of the time they were in hospital. However, this is not the whole picture; many areas deliver effective and innovative pain management for the benefit of children.

Project structure
The study took an appreciative inquiry approach, focusing on learning from good practice and follows four stages.

Discovery: Involved meeting practitioners, educators and researchers in the UK, Sweden and Australia to explore innovations in their pain management practice.

Dream: Involved meeting with the host and presenting to them identified examples of good practice for confirmation.

Design: Involved writing up the findings of the three visits, exploring what innovations could be introduced to improve pain management practice across the UK.

Destiny: Involved dissemination and implementation of the best practice examples identified

Findings from site visits

Alder Hey Children’s Hospital, Liverpool, UK
- Increased use of IV paracetamol
- Paediatric Pain Profile for children with cognitive impairment
- Hospital Play Specialists using Entonox for painful procedures
- Protocols for anticipatory distress and procedural pain
- Post-operative tonsillectomy pain regime

Randwick Children’s Hospital & Westmead Children’s Hospital, Sydney, Australia
- One pain team covering acute and chronic pain
- All pain protocols and analgesic regimes, online & user friendly
- Standardised observation charts (all ages) with pain scores
- Follow-up pain support for parents from pain nurses, post-discharge for children on long acting opioids
- Development of national pain dataset

Queen Silvia Children’s Hospital, Gothenberg, & Linköping University Hospital, Linköping, Sweden
- The use of Ulrich’s environmental work to reduce anxiety and pain
- Use of tactile touch in PICU
- Protocol devised to give children in A&E analgesia before they are seen by a doctor
- Literature designed to enhance communication with children and parents pre-surgical admission
- Use of 70:30 nitrous oxide and air for painful procedures

Conclusion
In every area visited confident practitioners identified innovations in their pain management practice that have improved children’s pain experience in hospital. Innovations ranged from environmental adjustments to reduce anxiety related to pain, to standardising children’s observation charts in promoting the regular assessment of children’s pain.

Effective leadership was apparent at each study site.

Implications for Practice
Dissemination of the findings to each area to share new ideas on the management of children’s pain


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