Anti-Pain Campaign: Collaborative Efforts to Transform Care in the Pediatric Emergency Department

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Introduction:
Control of pain and anxiety in children is a vital component of emergency medical care. Within the Pediatric ED there are many perceived barriers which prevent this from being actualized (1).

Methods:
Beginning April, 2015 a QI project entitled “Anti-Pain Campaign” was started in the Pediatric Emergency Department at Cohen Children’s Medical Center. The project was a collaborative effort with: child life, nursing, chief residents, Pediatric EM fellows and attending physicians. Various methodologies were used to achieve buy-in from the ED staff:
(1) Identifying advocates within each job description in the ED
(2) Posters in every patient room to achieve partnership with families
(3) Publishing “tips of the week” educating staff about methods of addressing pain and anxiety
(4) Daily briefs reminding staff of our mission
(5) Awarding weekly Anti-Pain champion of the week which came with a small monetary reward
(6) Kicking off the campaign with a week of personal presentations with food

We collected Press Ganey survey results, as well as data on the ordering of topical anesthetic for IV placement pre and post initiation of the project. Additionally, we conducted an internal survey in our Pediatric ED asking parents in real time about their perception of the ED’s sensitivity to their child’s pain and anxiety.

Results:
We found an impressive difference between mean raw scores reported on Press Ganey surveys for both staff sensitivity to fear and how well pain was controlled (Figure 1 and 2). Ordering of LMX increased by over 485% (Figure 3). The internal review revealed pain and anxiety was appropriately addressed 97.4% and 94.1% of the time respectively.

Discussion:
Multi-disciplinary efforts to change attitudes and practices regarding pain and anxiety resulted in significant improvements demonstrated by a short term analysis. More studies need to be completed to assess the effectiveness long term.
References: