Nurse Practitioners Can Play an Important Role in Pain Management in Long-Term Care



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THE ISSUE

Up to 83% of older adults experience pain and it is typically under-treated, especially in those with cognitive impairment.
Individualizing and monitoring pain treatment effectively in Long Term Care (LTC) settings is a challenge because most of these settings have physician coverage for only a few hours a week. A potential solution is the integration of nurse practitioners (NPs) into an interdisciplinary team to manage these pain treatment programs.

THE PURPOSE

To examine the NP role within an interdisciplinary model of pain management in LTC.

What did we do?

We conducted a cross-sectional survey with 16 NPs in Ontario, Canada working in LTC to find out if they perform or think that they should be performing 33 activities related to pain management. Also, the survey looked at potential barriers that hindered their ability to include pain management activities in their practice.

What did we find?

- 81% of the NPs use pain assessment tools, but less than half report the use of pain management clinical practice guidelines (CPGs).
- Barriers to use of pain management practices included time constraints, lack of prescriptive authority, lack of knowledge and clear guidelines, difficulty assessing pain, practitioner resistance, and concerns regarding addiction, substance abuse and side effects of medication.
- Very little time was spent providing leadership in pain management and engaging in pain related research initiatives, even though NPs reported feeling they should be more involved in these activities.
- NPs identified that the use of CPGs and standardized tools for pain assessment, interdisciplinary collaboration especially with physicians and pharmacists, staff education, support from and mutually trusting relationships with physicians would improve their role in pain management in LTC settings.

How will this research help?

The role of the NP could be better utilized in overall pain management programs for LTC residents, particularly since onsite coverage by physicians is limited. However, the barriers that limit the NP's pain management practices must be addressed.

What's next?

We need to clarify the NP role in LTC and how it fits within the interdisciplinary team. We need to determine whether improving interdisciplinary collaboration within a model of care that includes a well-defined role for the NP would improve the quality and effectiveness of pain management in LTC.

Bottom Line?

NPs can play an important role in managing pain among elderly patients in LTC if they use high quality up-to-date pain management CPGs, standardized tools for pain assessment, engage in a supportive and mutually trusting collaborative relationship with physicians and pharmacists, and provide staff education.

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