

# The Use of Visual Aids to Enhance Pain Management in Elderly Patients in the Acute Care Setting

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## INTRODUCTION

Pain assessments are rarely documented by health care workers outside pain services, which are a contributing factor to poor pain management (Prowse, 2006; Gloth, 2001; Hadjistavropoulos, T. et al, 2007; VHA/DoD, 2002; Idval & Ehrenbert, 2002). The acuity of most wards in major teaching hospitals is such that pain management often competes with overwhelming demands on clinicians' time and thought processes.

Strategies to overcome these barriers to effective pain management include the use of promotional materials as part of a multimodal approach which included face-to-face staff education.

The use of visual aides or reminders to clinicians may have a greater impact on changing practice than traditional interventions such as education alone (Grimshaw, Eccles, Walker & Thomas, 2002). Many studies in the area use multifaceted programs with a number of interventions combined to produce the desired outcome of changing clinicians' behaviour and improving care for patients. It has been demonstrated that posters placed at crucial points can assist to ensure that a targeted message can get through to clinical staff (World Health Organisation, 2006).

## AIM

To assess the value of promotional material as aids to enhance the management of pain in elderly patients in an acute setting.

## METHOD

Two visual tools were used as part of a study assessing pain management in the older person in the acute setting. The study unit was a general medical ward in an acute tertiary referral teaching hospital in Newcastle NSW. The study incorporated multidisciplinary education sessions for medical, nursing and allied health staff of the acute medical unit.

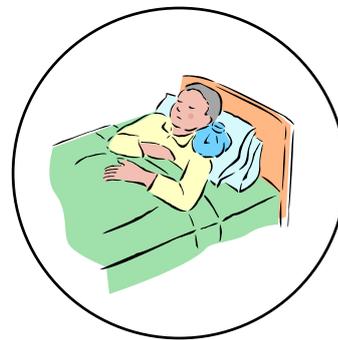
Education encompassed pain management and assessment utilizing purpose designed tools specifically targeted at the older person.

Pre and post chart audits, patient interviews, questionnaires and staff focus groups were used to collect the data. The effectiveness of the promotional tools were assessed specifically by patient interviews and staff focus groups conducted after the end of the targeted campaign.

## Visual Tools

### The Badge

The research team designed the badge and determined the textual content to facilitate patients' self-reporting of pain.



Altogether 30 "Pain Let Me Know" badges were provided for medical, nursing and allied health staff to wear on the medical unit during the study period.

### The Poster

Effective posters are large and bold. In a clinical area posters need to compete with their surroundings by being eye-catching, using simple outlines and strong colours. As they are usually viewed from a distance, they must be easily understood (World Health Organisation, 2006; Victoria & Albert Museum n.d.).

The poster was designed around existing road safety signage used by NSW Police to increase awareness of one particular aspect of safety. The poster was an adjunct to the education, pain assessment and management tools, as a static reminder. To have the greatest impact, the posters needed high visibility to be seen and acknowledged by staff, patients and visitors.



## RESULTS

During a four-week period in the study ward, the posters were displayed and the badges were worn by more than 20 of the nursing staff.

Patient interviews revealed that both patients and visitors had noticed the 'Pain - Let me Know' badges. The badges allowed for open pain dialogue, with one patient commenting "it sort of allows you to talk about pain".

Participants attending the staff focus group at the completion of the study period thought that the badges were useful. Some did not recall the education program. Neither nursing staff nor patients could recall seeing the posters.

## DISCUSSION

### Targeting Pain Poster

New Infection Control and Occupational Health and Safety (OH&S) rules restricted the size and placement of signage that was achievable during the study. Only one A3 poster could be displayed in a designated covered box near the entrance to the ward. The size and location of the sign impacted significantly on its visibility and the fact that staff did not recall seeing the signs.

### Badges

Many staff left their badges at home and more had to be made. Some staff continued to wear them even when they moved to work in other wards.

## RECOMMENDATIONS

Signage alone is not a useful tool to highlight an education message. An alternative to physical signage could be the use of the same graphic as a screensaver and desktop wallpaper on all ward computers. Information saturation would have been more successful had medical and allied health staff worn badges. The badge is currently undergoing redesign to encourage improved uptake by staff.

### Acknowledgements

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