

Illinois EMS for Children Quality Improvement and Indicator Monitoring Report

Title of Project: **Pediatric Pain Management**
 Date of Report: November 16, 2005
 EMSC Region: Region 7
 Facility: All Participating Facilities in the Regional CQI Effort

1. Opportunity / Issue / Problem Identification (PLAN)

- Opportunity: Pediatric pain management in the ED
- Problem: Initial Assessment Using Scale:
 - All children with the diagnoses of laceration, otitis media, or extremity fracture will have an initial pain assessment recorded
 - An objective scale will be used (Examples include, but are not limited to: FLACC, Faces, Numeric)
- Desired Outcome: 100% for the indicator

2. Most Likely Causes

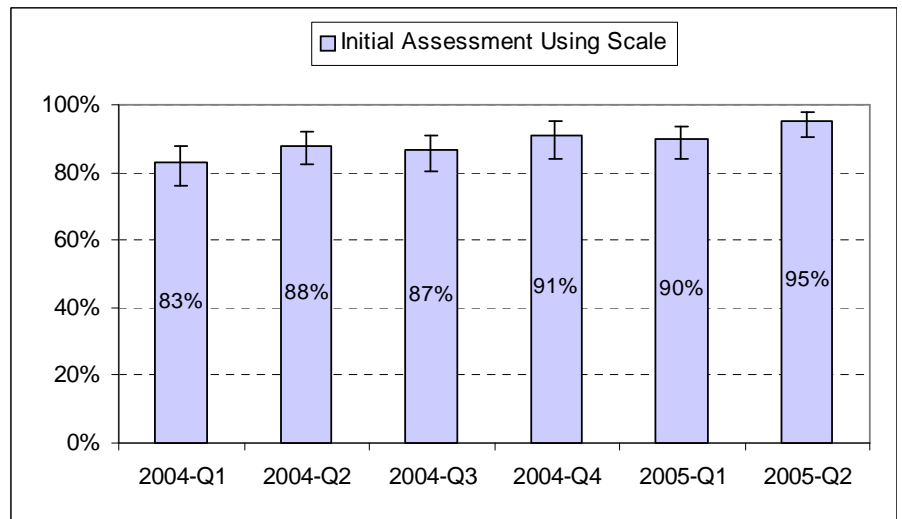
- Lack of knowledge
- Lack of staff awareness of expectations
- Lack of written guidelines, protocols

**Region 7 EMSC CQI – Pediatric Pain Management
Regional Totals for 2004-2005**

Note: Error bars represent 95% confidence intervals.

3. Solution(s) Implemented (DO)

- Data report reviews
- Collection tool process revision
- Continuing education
- Sharing of resources
- Physician Involvement
- ED leadership team buy-in
- Protocol development



4. Data Elements Collected for Evaluation

- Assessment
 - Initial assessment
 - Objective scale use
- Interventions
 - Pharmacological
 - Non-pharmacological
- Reassessment/Disposition
 - Reassessment documented
 - Objective scale used

5. Results and Data Analysis (STUDY)

- Initial assessment using pain scale documented: 12% improvement

Year and Quarter	Records Reviewed by Region				Initial Assessment Using Scale
	Y	N	NA	Total	
2004-Q1	145	30	0	175	83%
2004-Q2	182	25	3	210	88%
2004-Q3	155	24	1	180	87%
2004-Q4	109	11	0	120	91%
2005-Q1	160	18	0	178	90%
2005-Q2	142	7	0	149	95%

Note: % **Initial Assessment Using Scale** excludes NA records.

6. Conclusions and Recommendations (ACT)

- Conclusion: The emergency departments in Illinois EMSC Region 7 have shown progress toward meeting the desired outcome of 100% initial assessments using an objective scale for pediatric patients presenting to the ED with pain. This improvement follows specific educational efforts at individual and regional levels.
- Recommendations: Continued on-going efforts to maintain and promote awareness of pediatric pain management. Attempt to further identify barriers to assessment. On-going data analysis.