Alignment of Pain Reassessment Practices and National Comprehensive Cancer Network Guidelines

Cynthia Smith Idell, RN, BA, MSN, AOCN®, Marcia Grant, RN, DNSc, FAAN, and Christina Kirk, RN, BSN, OCN®

Purpose/Objectives: To improve nursing pain reassessment practices using a research utilization model and advanced practice nurses (APNs).

Design: A pre- and postintervention one-group design.

Setting: A cancer hospital located in the western United States.

Sample: 42 oncology RNs from the inpatient staff of medical or surgical oncology units working at least 24 hours per week.

Methods: National Comprehensive Cancer Network clinical practice guidelines were adopted. Interventions included one-on-one feedback regarding reassessment practices and nursing pain rounds. Instruments used were Nurses' Knowledge and Attitudes Survey Regarding Pain (NKASRP), Pain Reassessment Data Tool, and Pain Competency Evaluation (PCE).

Main Research Variables: Independent variables were pain rounds and one-on-one feedback. Dependent variables were PCE scores, percentage of pain reassessment documentation, and NKASRP test scores.

Findings: Changing staff pain practices requires more than education. Barriers may be overcome through careful planning, using a systematic change process such as a research utilization approach. NKASRP and PCE scores and a percentage of reassessment documentation reached statistically significant increases postintervention.

Conclusions: Adapting research recommendations allowed staff to create unit-specific solutions, evaluate practice changes, establish research partnerships, and use research in bedside care. Staff increased their proficiency in pain reassessment practices after the intervention.

Implications for Nursing: Research utilization models bring about desired practice changes under APN leadership. Aliasing pain reassessment practices with clinical pain guideline recommendations promotes improved pain management through better reassessment documentation.

Key Points . . .

- Ineffective pain management persists despite numerous clinical practice guidelines for pain.
- Research demonstrates that poor staff reassessment practices and lack of documentation impede pain relief for patients.
- Advanced practice nurses may bridge the gap between application of clinical practice pain guideline recommendations (e.g., frequency of reassessment) and clinicians by diffusing innovations and interventions depicted in the guidelines.
- Research utilization models incorporating organizational change strategies may be used to align staff practice with clinical practice guidelines.

Cynthia Smith Idell, RN, BA, MSN, AOCN®, is a medical oncology professional practice leader at the City of Hope National Medical Center in Duarte, CA; and Marcia Grant, RN, DNSc, FAAN, is the director and a professor and Christina Kirk, RN, BSN, OCN®, is a research specialist, both in Nursing Research and Education at the City of Hope National Medical Center. (Submitted July 2006. Accepted for publication October 24, 2006.)

Digital Object Identifier: 10.1188/07.ONF.661-671