



- Two Patient Partner Advisory Groups (Youth and Caregiver/Supporter) informed the language used in the questions.
- These advisory groups championed and provided insight into when and how pain becomes an adverse patient safety incident.
- The knowledge and perspective of the advisory groups strengthened and informed the ongoing commitment and accountability for pediatric pain management and the promotion of comfort during hospital care at BCCH.

RESULTS

Successful implementation of this project has further allowed us to review procedures that cause the **most pain**. A PSLS report indicated that from **September 2020 - September 2023**, of the **700** PSLS events flagging for Pain and/or Discomfort as a Factor:

- 43 pain events were procedures under General Anesthesia.
- 31 pain events were due to insertion or removal of Intravenous (IV) devices.
- 23 pain events were because of Orthopedic procedures.
- 20 pain events were a result of Venipuncture.

IMPACT

- Application of comfort approaches to targeted procedures and clinical areas.
- This project helped inform data-driven quality improvement projects.
- A hospital wide Pain, Comfort and Sedation Committee is accountable for using this data to inform patient-centered approaches to pain care at BC Children's Hospital.
- Spread of this work to other health authorities.
- This work contributed to the achievement of ChildKind International certification for BC Children's Hospital.

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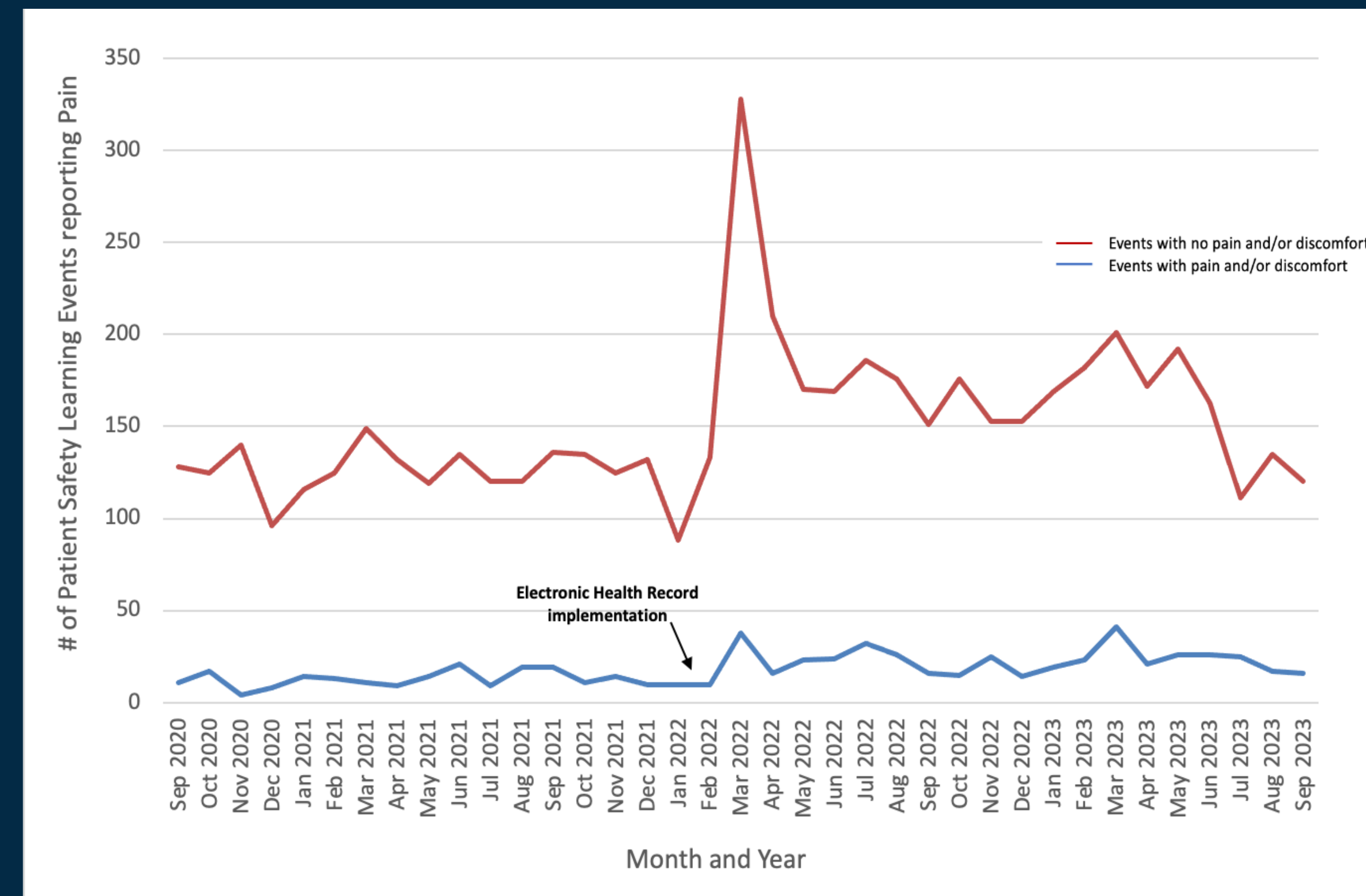
We extend our gratitude to the BC Children's Hospital Foundation and their donors, including the Summer Split Foundation, for their commitment to improving pediatric pain care in BC.

Pain affects approximately 90% of infants/children/youth admitted to hospital.

There is now an efficient way to identify pain and/or discomfort as a factor in patient safety incidents.

This allows for the allocation of resources, evaluation of improvement in pain care and championing for funding to advance the quality of care and pain management at BC Children's Hospital.

Number of events where pain was a factor at BC Children's Hospital September 2020-September 2023



Mandatory pain/discomfort question on PSLS events forms

★ Was pain and/or discomfort a factor in the event? Yes No
Physical, psychological, or social aspects of a person/family experience were negatively impacted due to pain being under-treated.

★ Was the pain and/or discomfort related to a procedure? Yes No

★ What was the procedure?

★ How did pain and/or discomfort contribute to the event or impact patient care?
Please describe.

- Accessing or de-accessing of port central venous catheter (CVC)
- Application or removal of sutures or staples
- Biopsy
- Capillary sampling
- Cooling jacket
- Dental procedure
- Burn dressing, wound care, dressing removal or change
- Examination or assessment (e.g. eye exam)
- Immobilization or restraint

Datix Help: Was pain and/or discomfort a factor in the event?

Pain is an aversive sensory and emotional experience typically caused by or resembling that caused by actual or potential tissue injury. (International Association for the Study of Pain (IASP), 2019)

Pain is always a subjective experience that is influenced by varying degrees by biological, psychological, and social factors.

- Pain and nociception are different phenomena: the experience of pain cannot be reduced to activity in sensory pathways.
- Through their life experiences, individuals learn the concept of pain and its applications.
- A person's report of an experience as pain should be accepted as such and respected.
- Although pain usually serves an adaptive role, it may have adverse effects on function and social and psychological well-being.
- Verbal description is only one of several behaviours to express pain; inability to communicate does not negate the possibility that a human or a non-human animal experiences pain.

Psychological pain is pain experienced with or without a physical source and may cause symptoms of emotional, social, spiritual distress.

Under-treatment of pain is the absence of pain management (physical, psychological and pharmacological approaches) for a person in pain when treatment is indicated.

Being committed to a ChildKind approach means compassionate care dictates treatment and, whenever possible, prevention of pain. <https://childkindinternational.org/>

To learn more about the consequences of under-treated pediatric pain: <https://childkindinternational.org/childrens-pain-matters/>

Enhancing Patient Safety: Addressing Pain as an Adverse Event through the Patient Safety Learning System (PSLS)



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BACKGROUND

Poorly managed pediatric pain poses potential safety risks for patients, with short and long-term psychological and physiological consequences. Pain experience in infants, children, and youth can create memories that have long-term psychological impact in their lives. Most pain can be prevented, treated or reduced; therefore, if pain and/or discomfort is present during hospital visits, it is considered an **unwanted adverse event** requiring a process to learn and improve the health system.

In BC, adverse events, "near misses" and hazards related to patient care are reported via the **Patient Safety Learning System (PSLS)**. There was a need for a tool that could effectively monitor pediatric safety incidents related to pain and discomfort to guide the improvement of pain care practices at BC Children's Hospital (BCCH).

METHODS

Environmental Scan

- A 5-year data retrieval for incidences of pain as an adverse outcome was conducted via the Patient Safety Learning System (PSLS).
- Data retrieval showed no clear means of tracking and trending pain-related events.

Pain question added to BCCH PSLS generic forms

- "Was pain and/or discomfort a factor in the event?" was added as a mandatory question.
- Adding this pain question resulted in the successful identification of pain-related patient safety incidents. This made it a successful initiative with good validity for other clinical areas to adopt.

Mandatory pain question added to other BCCH forms

- The pain question was then added to the PSLS report forms for **BC Children's Mental Health, Surgical Services, Sunnyhill, and Medical Imaging**.
- Addition of follow-up questions to PSLS forms followed: *Was pain/discomfort related to a procedure? If yes, what was the procedure? How did pain and/or discomfort contribute to the event or impact patient care?*

PSLS data extraction

- Data extraction from the PSLS system allowed for: Track and trend pain-related patient safety incidents
 - Track and trend pain-related patient safety incidents.
 - Identifying and monitoring procedures that cause the most pain