A Healthcare Improvement Initiative to Increase Multidisciplinary Pain Management Referrals of Youth with Sickle Cell Disease

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A Healthcare Improvement Initiative to Increase Multidisciplinary Pain Management Referrals of Youth with Sickle Cell Disease

Rae Ann Kingsley, MSN, APRN, CPNP-AC/PC; Gail Robertson, PhD; Lynne Covitz, PhD; Areli Ramphal, LMSW

Background

- Youth with Sickle Cell Disease (SCD) are at risk for chronic pain
- SCD is the most common inherited blood disorder affecting ~ 100,000 Americans
- The most common complication of SCD is periodic episodes of pain (Dampier et al., 2017)
- Youth with SCD report persistent pain on most days of their lives (Sil, Cohen, & Dampier, 2016)
- Certain characteristics can be helpful in identifying youth at greater risk for chronic pain
- Only 3.9% of the local SCD population have been referred for multidisciplinary pain management services

Methods

Participants:
- > 2 years of age and < 21 years of age
- Confirmed SCD
- Not previously screened in the past 12 months

Setting:
- One Midwest Regional Sickle Cell Treatment Center

Screening Tool:
- 8-item, evidence-informed tool inclusive of factors associated with painful episodes
- 30 day pilot by key stakeholders prior to implementation

Process/Intervention:
- Yearly assessment of risk
- REDCap based screening completed by clinic Psychologists or Social Workers

Results

- 84% (N=111) of eligible youth ages 2-20 years (M=11.75, SD=5.34) were screened
- 56.11/100 (50%) screened positive for ≥ 2 risk factors
- 57.7% were hospitalized in the past 1-year
- Nearly half (43.8%) had > 3 hospitalization *
- Hospitalizations were ≥ 5 days * in 51.6%
- 16.2% endorse pain ≥ 15 days/month *
- 46% (N=12) with a positive screen referred to pain management clinic
- 200% increase in referrals during project implementation

Discussion

- Implementation of an evidence-based risk screening tool, within a quality improvement framework, results in a steady upward trend in multidisciplinary pain management referrals
- This project has reinforced the value of team communication when applying a system change and provides the infrastructure to launch future tests of change
- Long-term targets are aimed at decreasing the number of SCD pain related hospitalizations, readmissions, and total hospital days.

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