

**RECEIVED**  
SEP 2 1999  
FINANCIAL MONITORING

---

**ANNUAL PROGRESS REPORT:  
INSTITUTIONALIZING PAIN MANAGEMENT**

A Robert Wood Johnson Foundation project to  
**Make Pain Assessment and Treatment an Integral Part  
of the Nation's Health Care System**

---

8/1/98 - 7/31/99

Grant #032037

Submitted by  
June L. Dahl, PhD  
Professor of Pharmacology  
Director of the Resource Center for State Cancer Pain Initiatives

The University of Wisconsin Medical School

Madison, WI

September 1, 1999

## TABLE OF CONTENTS

I.	OBJECTIVES AND ACCOMPLISHMENTS.....	3
A.	PROJECT OBJECTIVES.....	3
B.	PROJECT ACCOMPLISHMENTS.....	4
1.	JCAHO Standards Revisions.....	4
2.	GIQ/HCFA Project.....	4
3.	Home Care Project.....	7
4.	Video Project.....	7
II.	INTERNAL PROBLEMS.....	11
III.	EXTERNAL PROBLEMS AND SUCCESSES.....	11
IV.	RELATIONSHIPS WITH OTHER ORGANIZATIONS.....	12
V.	DISSEMINATION ACTIVITIES DURING THE PAST YEAR.....	12
VI.	OTHER SOURCES OF SUPPORT.....	12
VII.	PLANS FOR THE COMING YEAR.....	13
A.	JCAHO STANDARDS.....	13
B.	GIQ/HCFA PROJECT.....	13
C.	HOME CARE PROJECT.....	14
D.	VIDEO PROJECT.....	14
VIII.	FOUNDATION'S ROLE.....	14
IX.	BIBLIOGRAPHY.....	15
X.	APPENDICES.....	16
A.	JCAHO STANDARDS REVISION .....	17
B.	GIQ/HCFA PROJECT.....	18
C.	HOME CARE PROJECT.....	19
D.	VIDEO PROJECT.....	20

---

**ANNUAL PROGRESS REPORT:**

**INSTITUTIONALIZING PAIN MANAGEMENT**

**Making Pain Assessment and Treatment an Integral Part  
of the Nation's Health Care System**

---

**I. Objectives and Accomplishments**

*What were the project's objectives and how has the project met them in this year?*

**A. Project Objectives**

The project originally had two major goals:

- 1. Development and implementation of a process to assure that the standards of the Joint Commission on Accreditation of Healthcare Organizations include the assessment and treatment of pain.**

The Standards Department of the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) expressed support for a collaborative project to integrate pain assessment and treatment for all patients into the Joint Commission standards, intent statements, scoring guidelines and survey process questions. This presents us with a rare opportunity to improve pain management in hospitals and other health care facilities throughout the United States.

The Joint Commission's mission is to improve the quality of care provided to the public by offering health care accreditation and related services that support performance improvement in health care organizations. According to JCAHO documents, "the Joint Commission has comprehensive quality review programs for hospitals, health plans, home care agencies, laboratories, behavioral health care settings, long term care facilities, ambulatory care clinics, and networks of services that can, and often do, serve as an alternative to state and federal inspection of these organizations. In fact, the Joint Commission's Hospital, Home Care, and Laboratory Accreditation Programs are recognized by the federal Health Care Financing Administration (HCFA) as meeting or exceeding the federal quality standards for these organizations. Thus many of these organizations are able to use their Joint Commission accreditation to obtain Medicare certification through a process known as 'deemed status.' Similar reliance for licensure purposes exists for hospitals and other types of provider organizations in most states."

- 2. Development and implementation of national pain management quality improvement programs**

At the same time that the process for revision of the JCAHO standards was being implemented, we proposed to initiate national pain management quality improvement efforts. Since the Joint Commission accredits 80% of the nation's hospitals which have 98% of the licensed beds, revised standards should be powerful forces for change in pain management practices in these settings. We proposed to reach hospitals by working in collaboration with the HCFA supported state peer review organizations (PROs). We also proposed to implement programs specifically designed to meet the needs of patients being cared for by home care agencies. Although a relatively small percentage of these are JCAHO accredited, those in Wisconsin had shown a strong commitment to improving pain management practices.

All of the pain management quality improvement programs were planned to contain the essential elements of the model programs that project personnel have successfully conducted in Wisconsin and other states. These include NCI-funded Cancer Pain Role Model programs, 34 of which have been conducted over the past 7 years, 3 in Wisconsin and 31 in other states, and a cooperative quality improvement project with MetaStar (formerly the Wisconsin Peer Review Organization) which was directed at improving acute post-operative pain management in 22 Wisconsin hospitals.

*The Wisconsin Resource Manual for Improvement*, which was published in 1996 by the Wisconsin Cancer Pain Initiative, was proposed to serve as the "text" for the proposed quality improvement programs. It provides a step-by-step process as well as the necessary tools for clinicians and administrators to make pain management a priority in their settings.

We also proposed to create sets of educational videos which would be made available at cost to facilitate ongoing educational/orientation/refresher programs for agency staff.

## **B. Project Accomplishments**

### **1. JCAHO Standards Revisions**

The first major goal of the project has been accomplished. The new pain standards developed in collaboration with the Standards Department of JCAHO received final approval from the Board of Commissioners of JCAHO on July 30 and will appear in all of the 2000-2001 accreditation manuals which will be published in September. However, they will not be scored until 2001 because of concerns about the potential burden these standards would place on the healthcare field and a desire to give organizations ample time to ready themselves for compliance. Because of this change, the post evaluation survey will be delayed for one year. These standards call upon hospitals, home care agencies, long-term care facilities, behavioral health facilities, outpatient clinics and health plans to:

- recognize the right of patients to appropriate assessment and management of pain
- assess pain in all patients
- record the results of the assessment in a way that facilitates regular reassessment and follow-up
- educate relevant providers in pain assessment and management
- determine competency in pain assessment and management during the orientation of all new clinical staff
- establish policies and procedures which support appropriate prescription or ordering of pain medications
- assure that pain does not interfere with participation in rehabilitation
- educate patients and their families about the importance of effective pain management and include patients' needs for symptom management in the discharge planning process
- collect data to monitor the appropriateness and effectiveness of pain management

We have responded to numerous calls for information about the new standards from health care professionals in a variety of clinical settings. We maintained a close dialog with the Standards Department of the Joint Commission so that these questions were answered in a manner consistent with JCAHO policy. During the next year we will be working with the Joint Commission's Department of Education to educate surveyors and assist accredited healthcare organizations and healthcare professionals from all disciplines become familiar with the new pain standards and assess their readiness to conform to them. The accomplishments for Year 2 of the grant are summarized in the table below.

**Accomplishments on Revisions of the JCAHO Standards - Year 2**

**August, 1998:** Presented drafts of revised standards to all of the Professional Technical Advisory Committees (PTACs) of JCAHO for review and authorization for field evaluation and inclusion in the 2000 manuals; attended Hospital PTAC meeting.

**September, 1998:** Assisted with development of a presentation to the Standards and Survey Procedures Committee (SSP), of the JCAHO.

**September, 1998:** Permission obtained to proceed with field evaluation (responsibility of JCAHO Department of Standards Staff); attended SSP meeting

**September, 1998:** Evaluation survey instrument and demographic questions finalized; Human Subjects Committee approval obtained and JCAHO database access secured.

**October, 1998:** Completed pilot test of evaluation measure.

**November, 1998:** Department of Standards initiated evaluation pretest.

**December, 1998:** Field evaluation of standards initiated; expert panel review initiated.

**January, 1999:** Evaluation pre-test completed, this included contacts with randomly selected non-responders.

**February, 1999:** Assisted in review of data from JCAHO's field evaluation; reviewed modifications to proposed standards and intent statement language.

**February & March, 1999:** Assisted with development of presentation to the PTACs and SSP for inclusion in the 2000 manuals; attended the SSP meeting.

**March, 1999:** Consulted with the staff of the Department of Standards of JCAHO about incorporating relevant pain standards in the Long Term Care Pharmacy Manual.

**March & April, 1999:** Drafted examples of implementation for all standards manuals.

**May, 1999:** Assisted the staff of the JCAHO Department of Standards with presentation to the JCAHO Board of Commissioners; standards approved but with a directive to be "creative" with implementation.

**May, 1999 through present:** Assisted JCAHO Department of Publications with the development of the *Pain Management Monograph* for field education; secured and contacted "best practice" sites; reviewed preliminary drafts, will review and approve final document.

**July, 1999:** Assisted with the implementation plan proposal to the SSP Committee; implementation plan approved; standards will be published in the 2000-2001 manuals, but scoring will be delayed until January 1, 2001.

**July, 1999:** Met with two staff members (associate director and program producer) from the JCAHO Department of Education Programs to begin planning for surveyor and field education.

**July, 1999:** Worked with the Communications and Customer Services Department of JCAHO to develop a press release about the new standards

**July 30, 1999:** The Board of Commissioners gave its final approval of the new standards.

**August 2, 1999:** New standards are posted on the JCAHO website.

## 2. QIO/HCFA Project

In the summer of 1998, the Health Care Financing Administration (HCFA) reviewed the activities of the state peer review organizations (PROs) and developed a new approach to project implementation. HCFA established 6 core "scopes of work" for all PROs. PROs may also undertake 2 "local" or "special" projects, however one of these has to be related to one of the 6 core projects. Furthermore, HCFA delayed awarding the first round of project contracts to the PROs until August 1, 1999.

In the fall of 1998 (Year 2), we concluded that it would be very difficult for the PROs to take on the additional work we were proposing, despite their interest in a postoperative pain ("POP") quality improvement project. At this time we decided to explore alternative avenues for the dissemination of our project. In doing so, we spoke with Tom Granatier