



*EQUIP for Quality*  
**PAIN MANAGEMENT PROGRAM AUDIT**

## **Objectives**

- To determine the adequacy and effectiveness of the facility's pain management program including:
  - Written policies and procedures
  - Assessment/reassessment (consistent and uniform) by the IDT
  - Pharmacological and non-pharmacological treatment interventions
  - Documentation
  - Education (staff and resident)

## **Procedure**

- Review policy/procedures related to pain prevention/management program
- Review pain assessment tools for cognitively intact and cognitively impaired residents
- Review medication administration record
- Review medical record including data from physician and IDT
- Review care plans for interventions
- Interview front line staff
- Observe delivery of care.
- Review documentation related to the assessment, interventions and evaluation of pain management
- Review in-service records for documentation related to staff education regarding facility's pain management program, including each staff's role/responsibility

## **Probes for compliance**

- Did the facility recognize the right of the residents to appropriate assessment and management of pain?
- Did the facility provide resident/family education on the right to pain management, including how to communicate pain, staff response to identified pain, and expected outcome?
- Did the facility develop and implement policies and procedures to assess for and manage/eliminate residents' pain including determination of the nature (root cause) and intensity of pain in all residents?

- Did the facility document the results of the assessment in a way that facilitates regular reassessment, IDT communication, and follow-up?
- Is staff determined to be competent in pain assessment and management, and does orientation of all new staff address pain assessment and management?
- Have policies and procedures been developed and implemented which support the appropriate prescription/ordering of effective pain medications and non-pharmacological interventions?

### **Regulatory deficiency citations**

If these criteria have not been met, consider possible citations as follows:

#### Regulations and guidance to surveyors F-tag 154

*The resident has the right to be fully informed in language that he or she can understand of his or her total health status, including but not limited to, his or her medical condition*

#### Regulations and guidance to surveyors F-tag 163

*Unless adjudged incompetent or otherwise found to be incapacitated under the laws of the State, the resident has the right to participate in planning care and treatment or changes in care and treatment*

#### Regulations and guidance to surveyors F-tag 224 and/or 226

*The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect, and abuse of residents and misappropriation of resident property Note: neglect is defined as failure to provides goods and services to avoid physical harm, mental anguish, or mental illness*

*Note: F226 relates to deficiencies concerning the facility's development and implementation of policies and procedures*

#### Regulations and guidance to surveyors F-tag 272

*The facility must conduct initially and periodically a comprehensive, accurate, standardized reproducible assessment of each resident's functional capacity*

#### Regulations and guidance to surveyors F-tag 279

*The facility must develop a comprehensive care plan for each resident that includes measurable objectives and timetables to meet a resident's medical, nursing, and mental and psychosocial needs that are identified in the comprehensive assessment*

#### Regulations and guidance to surveyors F-tag 280

*A comprehensive care plan must be prepared by an interdisciplinary team that includes the attending physician, a registered nurse with responsibility for the resident, and other appropriate staff disciplines as determined by the resident's needs, and, to the extent practicable, the participation of the resident, the resident's family or the resident's legal representative; is periodically reviewed and revised by a team of qualified persons after each assessment*

#### Regulations and guidance to surveyors F-tag 281-282

*The services provided or arranged by the facility must meet professional standards of quality and be provided by qualified persons in accordance with each resident's written plan of care*

Regulations and guidance to surveyors F-tag 309

*Each resident must receive and the facility must provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being, in accordance with the comprehensive assessment and plan of care*

Regulations and guidance to surveyors F-tag 386

*The physician must review the resident's total program of care, including medications and treatments, at each visit required; write, sign and date progress notes at each visit; and sign and date all orders.*

Regulations and guidance to surveyors F-tag 428-430

*The drug regimen of each resident must be reviewed at least once a month by a licensed pharmacist; the pharmacist must report any irregularities to the attending physician and the director of nursing; and these reports must be acted upon*

Regulations and guidance to surveyors F-tag 501

*The facility must designate a physician to serve as medical director who is responsible for implementation of resident care policies and the coordination of medical care in the facility*