EDUCATION NEEDS IN CHRONIC PAIN

Elaborating a Transprofessional Competency Profile to Enhance an Educational Program

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BACKGROUND

Objective: To elaborate an interprofessional competency profile for healthcare professionals working with patients with chronic pain. The preliminary competencies profile (IPC) is expected to be the optimal operating mode for those patients and requires the development of various competencies in three domains: collaboration, education, and care provision.

Aims of the study

Aims to improve educational practices through iterative analysis, design, development, and implementation.

Methods

Design-based research (DBR)

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Data collection

Semi-structured interviews were conducted with experts from six healthcare professions involved in specialized care with chronic pain patients.

Participants were asked about their day-to-day experiences, their opinions and recommendations about best practices across the six competency domains identified in the literature review.

Sample

32 professionals (6 physicians, 4 nurses, 3 occupational therapists, 3 physiotherapists, 6 psychologists, 3 pharmacists)

Recruited in the province of Quebec, and working in public establishments specialized in chronic pain management.

On average, participants have 17.5 years of experience in their profession, including 9.7 in chronic pain management.

They work about three days a week with this clientele.

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Data analysis

A qualitative analysis of the interviews using the general inductive approach was conducted by three independent coders.

CONTEXT

A literature review of the requirements for an effective practice for patients living with chronic pain showed that healthcare professionals may have to fill up to 13 different roles, which were grouped under six domains:

- Collaboration, communication, leadership/patient advocacy, education, expertise, and professionalism.
- Extant literature mostly identifies knowledge rather than skills and know-how. The question of how to mobilise knowledge into practice remains underexplored.
- Competencies bring together three components: the actor, skills, and knowledge.
- Competencies are at the heart of effective practices, as they are essential in deploying resources and in solving a range of problems across many areas of knowledge.

Aims of the study

- Document the competency profiles of the different healthcare professions involved in the care of patients with chronic pain, and the curricula of their associated academic programs, across the province of Quebec.
- Elaborate an interprofessional competency profile for healthcare professionals working with patients with chronic pain.
- Identify components to enrich curricula’s contents and practical training.

RESULTS

For patients with chronic pain, the optimal trajectory in healthcare services begins with a comprehensive assessment of their condition.

Chronic pain interferes with daily life functioning on multiple levels (and vice versa). Most patients require specialized care from an interprofessional team because of their complex conditions:

- Side effects from high dosages of heavy medication (sleep interruptions, difficulty focusing, memory loss, psychomotor impairment)
- Comorbidity (anxiety, depression, kinesiophobia)
- Functional limitations (social isolation, work disability, difficulty performing daily living activities)
- Negative feelings towards the healthcare system (frustration from a lack of an appropriate response, long waitlists, feeling prejudiced)

Figure 1. Optimal service trajectory for patients with chronic pain in specialized care

Preliminary statement of competence

- Patient-centered InterProfessional Collaboration (IPC) appears to be the optimal operating mode for those patients and requires the development of various competencies in three domains: collaboration, education, and care provision.

Collaboration

- Communicate with other professionals

Share the responsibility of the management of patients’ conditions. Give feedback to the primary care physician to ensure a continuous follow-up.

Expectation towards other professionals

- Discuss regularly patients' conditions with team members, taking into account their professional expertise.

- Assume a collaborative leadership by knowing each team member’s reserved acts and deferring to their area of expertise.

- State the scope and limits of chronic pain management.

- Individualize treatment plans to suit patients’ needs.

- Educate patients about their condition and treatment options in lay terms.

Care provision

Elicit the uncertainties related to the incurable nature of the condition.

- Understand that patients often have a limited attention span and may have difficulties focusing due to exhaustion.

- Accept the uncertainties related to the incurable nature of the condition.

- Include relatives in the treatment process by giving them the same information as the patient.

- Discuss regularly patients' conditions with team members, taking into account their professional expertise.

- State the scope and limits of chronic pain management.

- Individualize treatment plans to suit patients’ needs.

- Include relatives in the treatment process by giving them the same information as the patient.

CONCLUSION

Educational needs

Being an expert in chronic pain requires:

- Knowledge about the physiology and impacts of chronic pain, a personal interest in the matter and feeling comfortable with teamwork.

- Curricula during initial, continuing, and practical education should include both theoretical content and practical activities.

- As often as possible, include different professionals, since interprofessional collaboration is a major area of expertise in chronic pain.

- Successful interventions require patient’s engagement. Significant others and relatives are not often involved in care plans but could be a key factor to mobilize and sustain changes.

- Future initiatives should think about including patients’ families as active members of the care team (as informants, supporters, and reinforcements).

The preliminary competencies profile will be presented to participants for data triangulation and further analysis.