

**TOPIC: PAIN ASSESSMENT WITH INTERPRETER- BETTER PRACTICE**

<p><b>Description</b></p>	<p>The purpose of this video is to illustrate a nursing pain assessment that incorporates best practices with the use of an interpreter. As a reminder, the gold standard, or place to begin, is the patient <i>self-report</i> of pain. Many resources are available when patients are unable to self-report (Fink &amp; Gallagher, 2019). There is a companion video (<i>Pain Assessment with Family Translator- Opportunities for Improvement</i>) demonstrating a similar scenario in which the nurse does not use best practice pain assessment and holistic care for a patient who has non-English language preference.</p> <p>The principles in this video align with concepts taught in:</p> <ul style="list-style-type: none"> <li>• ELNEC Undergraduate/New Graduate             <ul style="list-style-type: none"> <li>○ Module 1: Introduction to Palliative Care</li> <li>○ Module 2: Communication</li> <li>○ Module 3: Pain</li> </ul> </li> <li>• ELNEC Graduate             <ul style="list-style-type: none"> <li>○ Module 1: Introduction to Palliative Care</li> <li>○ Module 2: Communication</li> <li>○ Module 3: Pain</li> </ul> </li> </ul>
<p><b>Learning Objectives</b></p>	<p>Upon completion, the learner will be able to:</p> <ol style="list-style-type: none"> <li>1. Consider nursing practices in pain assessment when caring for patients with non-English language preference.</li> <li>2. Identify best practices for working with medical language interpreters.</li> <li>3. Identify key components of a thorough pain assessment.</li> <li>4. Explore cultural variations in pain presentation and assessment that nurses can consider in their practice.</li> </ol>
<p><b>Faculty Instructions</b></p>	<ol style="list-style-type: none"> <li>1. Review Important Definitions:             <ol style="list-style-type: none"> <li>a. Medical language interpreter: A certified medical interpreter is a bilingual or multilingual person who is responsible for providing real-time oral translations to patients and their family members. Their work helps bridge the communication gap between healthcare professionals and patients who do not share a common language.</li> <li>b. Medical translator: A medical translator is in charge of translating medical documents and written content from one language to another.</li> </ol> </li> <li>2. Students should watch the entire video at least once. The video can be viewed several times to inform discussion and debriefing.</li> <li>3. Then debrief about what went well/opportunities for improvement:             <ol style="list-style-type: none"> <li>a. <b>Related to the pain assessment.</b> It may be helpful to use the OLDCARTS or PQRSTU mnemonics for pain assessment. All components of this mnemonic are addressed at least once in the vignette. Consider instructing students to watch how each of these is used in the scenario. The items included in the vignette are provided in the debriefing resources.</li> <li>b. <b>Related to best practices when working with interpreters.</b> Faculty can also debrief about the best practices when working with an interpreter that were demonstrated in the video.</li> </ol> </li> </ol>

## DEBRIEFING RESOURCES

<b>Pain Assessment Questions in Vignette</b>	
<b>OLDCARTS</b>	<b>Questions in the Vignette</b>
Onset	Okay, when did your pain start?
Location	Where does it hurt? Do you feel the pain anywhere else?
Duration	When you have pain, how long does it last?
Character	Can you describe your pain?
Aggravating factors	What makes the pain worse?
Relieving factors	What makes the pain better? Have you ever had any treatment or taken any medication for your pain? When you take Advil, how many pills do you take per day?
Temporal pattern	How has the pain affected your activities of daily living? If your pain was better controlled, what might you be able to do that you find difficult now?
Severity	Can you rate your pain on a scale of 0-10 with zero being no pain and 10 being the worst pain possible?

<b>Pain Assessment Questions in Vignette</b>	
<b>PQRSTU</b>	<b>Questions in the Vignette</b>
Palliating and provoking factors	What makes the pain better or worse?
Quality or Quantity	Can you describe your pain?
Region and Radiation	Do you feel the pain anywhere else?
Severity	Can you rate your pain on a scale of 0-10 with zero being no pain and 10 being the worst pain possible?
Temporal characteristics (e.g., timing, patterns)	Okay, when did your pain start? When you have pain, how long does it last? Have you ever had any treatment or taken any medication for your pain?
Treatment	When you take Advil, how many pills do you take per day?
Understanding	How has the pain affected your activities of daily living? If your pain was better controlled, what might you be able to do that you find difficult now?

## Articles to Support Teaching and Debriefing

### For Pain Assessment:

- Fink, R. M., & Gallagher, E. (2019). Cancer pain assessment and measurement. *Seminars in Oncology Nursing, 35*(3), 229–234. <https://doi.org/10.1016/j.soncn.2019.04.003>

### For Best Practices when Working with Interpreters

- The National Council on Interpreting in Health Care. (2004). *A National Code of Ethics for Interpreters in Healthcare*. <https://www.ncihc.org/assets/documents/publications/NCIHC%20National%20Code%20of%20Ethics.pdf>
- Hadziabdic, E., & Hjelm, K. (2013). Working with interpreters: Practical advice for use of an interpreter in healthcare. *International Journal of Evidence-Based Healthcare, 11*(1), 69–76. <https://doi.org/10.1111/1744-1609.12005>
- Ortega, P., Shin, T. M., & Martínez, G. A. (2022). Rethinking the term "limited English proficiency" to improve language-appropriate healthcare for all. *Journal of Immigrant and Minority Health, 24*(3), 799–805. <https://doi.org/10.1007/s10903-021-01257-w>
- Squires A. (2017). Evidence-based approaches to breaking down language barriers. *Nursing, 47*(9), 34–40. <https://doi.org/10.1097/01.NURSE.0000522002.60278.ca>

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## Curricular Alignment- Undergraduate Programs

### Competencies And Recommendations for Educating Nursing Students (CARES, 2nd. ed.)

- #4 Demonstrate respect for diversity, equity, and inclusion as essential for the delivery of culturally sensitive, quality palliative care.
- #5 Communicate effectively, respectfully, and compassionately with patients, families, interprofessional team members, and the public about palliative care.
- #6 Collaborate effectively within the interprofessional team to coordinate the delivery of high-quality palliative care across healthcare settings.
- #10 Utilize evidence-based tools to perform a holistic health assessment of pain and other symptoms, considering physical, psychological, social, and spiritual needs.

<b>Alignment with AACN Essentials: Entry-Level Professional Nursing Education</b>		
<b>Domains</b>	<b>Competencies</b>	<b>Sub-Competencies</b>
Knowledge for Nursing Practice	1.2	1.2c
Person-Centered Care	2.1 2.2 2.3 2.8 2.9	2.1c 2.2a, 2.2b, 2.2c, 2.2d, 2.2f 2.3a, 2.3b, 2.3c, 2.3e, 2.3f, 2.3g 2.8d 2.9a
Interprofessional Partnerships	6.1 6.4	6.1a, 6.1b, 6.1d, 6.1e, 6.1f 6.4a, 6.4b
Informatics and Healthcare Technologies	8.1 8.3 8.4	8.1a 8.3a, 8.3c 8.4b
Professionalism	9.1 9.2 9.3 9.5 9.6	9.1c 9.2d, 9.2e, 9.2g 9.3g 9.5c 9.6a
Personal, Professional, and Leadership Development	10.2	10.2f

#### **Alignment with AACN Essentials Concepts:**

- Clinical Judgment
- Communication
- Compassionate Care
- Diversity, Equity, and Inclusion
- Ethics
- Evidence-Based Practice
- Social Determinants of Health

Resource: American Association of Colleges of Nursing and End-of-Life Nursing Education Consortium (2021). Primary palliative care competencies for undergraduate and graduate nursing students (CARES/G-CARES, 2nd ed): Alignment with the 2021 AACN Essentials. <https://www.aacnnursing.org/Portals/42/AcademicNursing/Tool%20Kits/Essentials/Alignment-CARES-G-CARES-Essentials.pdf>

## Curricular Alignment- Graduate Programs

### Graduate Competencies And Recommendations for Educating Nursing Students (G-CARES, 2nd. ed.)

- #5 Engage in strategic partnerships with interprofessional colleagues and community stakeholders to influence policies and quality improvement activities related to primary palliative care
- #7 Utilize advanced palliative care communication skills with patients, families, and team members as appropriate to one’s functional area of nursing practice and the professional context.
- #8 Promote delivery of care that supports holistic assessment and management of pain and symptoms common in serious illness at the full scope of practice.
- #9 Collaborate with healthcare team members to coordinate culturally sensitive, patient-centered, and family-focused palliative care across care settings.

<b>Alignment with AACN Essentials: Advanced-Level Professional Nursing Education</b>		
Domains	Competencies	Sub-Competencies
Knowledge for Nursing Practice	1.2	1.2h, 1.2i,
Person-Centered Care	2.1 2.2 2.3 2.6 2.9	2.1d, 2.1e 2.2g, 2.2j 2.3h 2.6e, 2.6j 2.9f, 2.9h
Interprofessional Partnerships	6.1 6.4	6.1h, 6.1i, 6.1j 6.4g
Informatics and Healthcare Technologies	8.1 8.3 8.4	8.1g 8.3g, 8.3i 8.4e
Professionalism	9.1 9.2 9.3 9.5 9.6	9.1i 9.2h, 9.2i, 9.2k, 9.2l 9.3i 9.5g 9.6d, 9.6g, 9.6h

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