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Endorsement

This document is endorsed by the British Pain Society.



Dissemination plan

The nursing co-ordinator will be responsible for dissemination to professional and patient organisations and ensuring that the current document version is available for download from RCN webpages. Previous versions will be archived adhering to RCN policy.

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² Royal College of Nursing

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Foreword

Assessing and managing pain are essential components of nursing practice. Pain is often categorised as acute or chronic, but it is a complex physical, psychological and social phenomenon that is uniquely subjective. A key fundamental of nursing care, patients continue to report unrelieved pain during procedures, after surgery, during episodes of acute illness, in the community and in care homes. Pain traverses all clinical settings and the age spectrum, yet is often poorly assessed and managed by nurses. This results in short and long-term adverse consequences. Article three of the *International Association for the Study of Pain* (IASP) Declaration of Montreal (IASP 2010) cites the right of all people with pain to have access to appropriate assessment and treatment of the pain by adequately trained health care professionals.

Poorly managed acute pain may result in the development of chronic pain which is known to have a strong association with anxiety, depression, quality of life and the ability to sleep, communicate and work. The key common findings of surveys of chronic pain inform us that one in five people of all ages have moderate to severe chronic pain and one-third of individuals of working age who have chronic pain have lost the ability to perform wage-earning or other work (IASP 2011).

The Royal College of Nursing (RCN) has launched this document in all four UK countries simultaneously. The content has been endorsed by the British Pain Society (BPS) and has been presented at the 2015 European Federation of IASP Chapters (EFIC) meeting. It is hoped that this framework document will enable a common understanding and terminology to develop, so that levels of competency can be understood across the nursing continuum in all four countries.

Designed to be adapted for local use by individual staff members, this framework should be of great practical use for employers when it comes to writing role descriptions and conducting performance reviews; and for employees needing to evidence their competency, on-going development and assert their fitness to practice during professional revalidation.

Felicia Cox Chair, RCN Pain and Palliative Care Forum

Glossary

Interdisciplinary team (**IDT**) – team consisting of nursing, physiotherapy, pharmacy, psychology, occupational therapy and medical colleagues. This team contains specialists with expert skills in pain assessment, functional performance and medicines management. The IDT can help patients understand their pain-related thoughts, emotions and behaviours.

Pain – an unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage (IASP 2012).

Registered – a registered nurse, health visitor or midwife who has completed a qualification, is competent and on the Nursing and Midwifery Council (NMC) register.

Unregistered – a member of the nursing team (supervised by a registered nurse) providing health and social care to patients. Unregistered staff may be employed as a care assistant, health care support worker or associate/assistant practitioner.

Rationale and approach

The Royal College of Nursing (RCN) is the major professional body for nursing in the United Kingdom (UK). The RCN Knowledge and innovation action plan for 2014-2018 (RCN 2014) aims to develop new knowledge and evaluate its impact. The action plan supports identifying and helping to fill gaps in standards, guidance and knowledge resources for nursing staff.

The publication of *Pain after surgery* (RCS 1990) spearheaded the need for the implementation and development of acute pain services in the UK. At that time, few hospitals had an acute pain service nor nurses specialising in pain management. Professor Kate Seers represented nursing on this working party and we are grateful that she contributed to a panel discussion in 2013 organised by the RCN Pain and Palliative Care Forum.

This event was chaired by Professor Nick Allcock and the panel consisted of expert pain educationalists, academics, researchers and specialist nurses. It was convened to develop a strategy to identify pain-related learning needs of the nursing team. Contributors included nurse representatives of patients from vulnerable groups including older people, those in secure settings or diagnosed with a learning disability. The panel agreed that there was a need to produce supportive educational materials to facilitate an enhanced awareness of the importance of the assessment and management of pain.

The panel agreed two work streams. The first was to produce accessible information about pain in an EasyRead format for people with a learning disability. A separate working party convened to produce EasyRead information on pain; after surgery, epidural analgesia and patient controlled analgesia (PCA). These were launched in June 2015 at RCN Congress. The second work stream was to develop this framework.

Prior to the publication of this document, there were no nationally agreed standards, competencies or frameworks for pain management nursing in the UK. This RCN-funded project focused on developing a knowledge and skill framework (KSF) to improve the understanding and skill set of the wider nursing team; to promote excellence in practice thus improving patient care and outcomes. It is anticipated that this project and the publication of this KSF will also help shape health policy by raising the profile of pain through political lobbying.

This KSF aims to provide a framework that supports the development of competence in managing pain for the entire nursing team; from care assistants to nurse consultants. The framework contains the eight aspects of care identified at the roundtable discussion, such as pain assessment and interventions as well as seven dimensions, for example, nursing responsibility. It has been designed to be used alongside local competency documents and illustrates Benner's vision of individual nurse's migration from novice to expert (Benner 1984). There is clear progression in the knowledge, practice and experience of nursing staff working within the framework. Firstly the career framework (Skills for Health 2010) is mapped against both Benner's levels of performance (novice, advanced beginner, competent, proficient, expert). These two, in turn, are mapped against levels of education across the spectrum from care certificate through to doctoral studies.

Content has been split to meet the specific needs of unregistered and registered members of the nursing team. Each staff group has their own framework summary based on Benner's 1982 novice to expert levels of practice (Table 1) mapped against levels one to eight (excluding director level) of the Skills for Health Career Framework (SFH 2010) illustrated in Figure 1. The framework summary for unregistered staff is shown in Figure 2 and for registered nurses in Figure 3.

Table 1: From novice to expert concept (Adapted from Benner 1982)

| Skill and practice level | Explanatory notes |
|--------------------------|---|
| Novice | A beginner with no experience. They are taught general rules to help perform activities, and their rule-governed behaviour is limited and inflexible. They are told what to do and follow instruction working within protocols and guidelines. |
| Advanced beginner | Shows acceptable performance, and has gained prior experience in actual nursing situations. This helps the nurse* recognise recurring meaningful components so that principles, based on those experiences, begin to formulate in order to guide actions. |
| Competent | Has two or three years' experience in the same field. The experience may also be similar day-to-day situations. These nurses* are more aware of long-term goals, and they gain perspective from planning their own actions, which helps them achieve greater efficiency and organisation. |
| Proficient | Perceives and understands situations as whole parts. Has a more holistic understanding of nursing, which improves decision-making. These registered nurses learn from experiences what to expect in certain situations, as well as how to modify plans as needed. |
| Expert | No longer relies on principles, rules, or guidelines to connect situations and determine actions. They have a deeper background of experience and an intuitive grasp of clinical situations. Their performances are fluid, flexible, and highly-proficient. |

^{*} Nurse refers to all members of the nursing team.

Figure 1: Skills for Health Career Framework (SFH 2010)

Key elements of the career framework

9

Career framework level 9

People working at level 9 require knowledge at the most advanced frontier of the field of work and at the interface between fields. They will have responsibility for the development and delivery of a service to a population, at the highest level of the organisation. **Indicative or reference title: director.**

8

Career framework level 8

People at level 8 at the career framework require highly specialised knowledge, some of which is at the forefront of knowledge in a field of work, which they use as the basis for original thinking and/or research. They are leaders with considerable responsibility, and the ability to research and analyse complex processes. They have responsibility for service improvement or development. They may have considerable clinical and/or management responsibilities, be accountable for service delivery or have a leading education or commissioning role.

Indicative or reference title: consultant

7

Career framework level 7

People at level 7 of the career framework have a critical awareness of knowledge issues in the field and at the interface between different fields. They are innovative and have a responsibility for developing and changing practice and/or services in a complex and unpredictable environment. **Indicative or reference title: advanced practitioner.**

6

Career framework level 6

People at level 6 require a critical understanding of detailed theoretical and practical knowledge, are specialist and/or have management and leadership responsibilities. They demonstrate initiative and are creative in finding solutions to problems. They have some responsibility for team performance and service development and they consistently undertake self-development. Indicative or reference title: specialist/ senior practitioner.

5

Career framework level 5

People at level 5 will have a comprehensive, specialised, factual and theoretical knowledge within a field of work and an awareness of the boundaries of that knowledge. They are able to use knowledge to solve problems creatively, make judgements which require analysis and interpretation and actively contribute to service and self-development. They may have responsibility for supervision of staff or training. **Indicative or reference title: practitioner.**

4

Career framework level 4

People at level 4 require factual and theoretical knowledge in broad contexts within a field of work. Work is guided by standard operating procedures, protocols or systems of work, but the worker makes judgements, plans activities contributes to serviced development and demonstrates self-development. They may have responsibility for supervision of some staff. Indicative or reference title: assistant/ associate practitioner.

3

Career framework level 3

People at level 3 require knowledge of facts, principles, processes and general concepts in a field of work. They may carry out a wider range of duties than the person working at level 2 and will have more responsibility, with guidance and supervision available when needed. They will contribute to service development and are responsible for self-development. Indicative or reference title: senior health care assistants/ technicians.

2

Career framework level 2

People at level 2 require basic factual knowledge of a field of work. They may carry out clinical, technical, scientific or administrative duties according to established protocols, procedures or systems of work. Indicative or reference title: support worker.

1

Career framework level 1

People at level 1 are at entry level and require basic general knowledge. They undertake a limited number of straightforward tasks under direct supervision. They could be any new starter to work in the health sector and progress rapidly to level 2. **Indicative or reference title: cadet.**

Framework summaries

In 2013 the Nurses' Interest Group of the New Zealand Pain Society published a pain management nursing knowledge and skills framework (KSF) for registered nurses (NZPS 2013). This well-designed but lengthy document provided a starting point for the development of this document. Permission was given to adapt the pictorial representation of the KSF.

It was agreed by the working party that competent would be the highest level of performance for unregistered staff, whilst competent would also be the lowest level of performance for registered nurses. This is demonstrated by the use of the same term (competent) and corresponding content of the eight aspects of care. See Figures 2 and 3.

FRAMEWORK SUMMARY UNREGISTERED STAFF

Career Framework

1/2

Advanced beginner

Competent

System Culture
Culture
Interdisciplinary Team (IDT)

Aspects of care

Awareness of painful conditions

Hollstic pain assessment

Physical strategies

Psychological 8 behavioural strategies

Pharmacological strategies

Individual Cultural
Biological
Psychological Environment

Service development

Complex case management

Complex case management

Care Certificate

Care Certificate

Vocational

Qualification L2/3

Attributes

Froundation Degree
or Equivalent L4/5

Attributes

Figure 2: Framework summary unregistered staff

Adapted with permission from © The New Zealand Pain Society (2013) New Zealand Pain Management Nursing Knowledge and Skills Framework.

FRAMEWORK SUMMARY REGISTERED NURSE

Career Framework

5 6 7 & 8

Level of practice (Benner)

Aspects of care

• Awareness of painful conditions
• Holistic pain assessment
• Physical strategies
• Self-management strategies
• Pharmacological strategies
• Pharmacological strategies
• Pharmacological strategies
• Interventional therapies
• Service development
• Complex Pain management
• Complex Pain management

Cultural Biological Psychological Spiritual

Family Friends
Environment
Work

Family Friends
Environment
• Escalation of care
• Assessment

Level of professional
Registration / first degree

Courses

Attribute

Registration / Gollabonation

Registration / first degree

Courses

Attribute

Figure 3: Framework summary for registered nurses

Adapted with permission from © The New Zealand Pain Society (2013) New Zealand Pain Management Nursing Knowledge and Skills Framework.

Guide for implementation

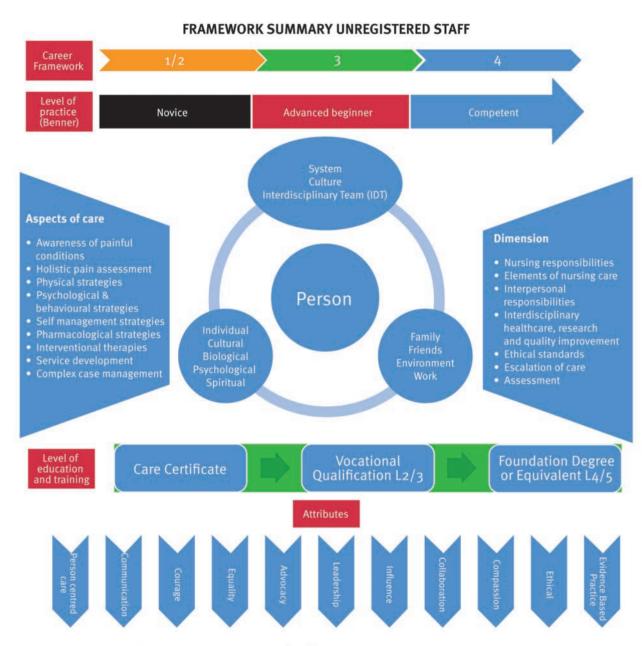
This document, which includes two aspects of care summaries, is designed to guide and support the demonstration of competence by the nursing team when caring for people with pain, thus ensuring transferable excellence in pain management. The frameworks are not intended to be a didactic list of boxes to tick, but a signpost to:

- act as a development tool for graded clinical skills that can be used throughout nursing careers to structure and collate evidence for a personal portfolio of knowledge and clinical skills
- provide evidence for local professional development and performance reviews
- provide a structure to develop education programmes
- to provide a framework by which pain specialist nurses can not only measure educational and clinical skills but also their effectiveness
- place emphasis on self-directed learning
- · facilitate critical reflection on clinical experiences
- promote self-directed learning strategies.

No framework can be universally applicable. It is anticipated that each local area or practitioner will adapt the materials to their own needs and then review at a mutually agreed interval between the employing organisation and the staff member. Suggestions for implementation include that the staff member:

- has a supervisor, assessor or mentor that has already fulfilled their competencies
- works with that person regularly
- identifies and agrees targeted level of practice with supervisor, assessor or mentor
- works within specified time lines for aspects of nursing care competencies
- gathers, collates and presents evidence to meet specific criteria or identified knowledge or skills requirement
- documents learning and skills for review by assessor with subsequent discussion of all relevant sections
- uses framework to guide learning and development with assessor as part of their performance review/appraisal.

Knowledge and skills framework for unregistered staff



Adapted with permission from © The New Zealand Pain Society (2013) New Zealand Pain Management Nursing Knowledge and Skills Framework.

Unregistered staff understanding pain

What is pain? This aspect of care looks at the definition of pain and its associated anatomy and physiology.

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---------------------------------|---|---|--|--|---|---|---|
| Novice Level 1 and 2 | Understands that pain is: 'whatever the experiencing person says it is, existing whenever the experiencing person says it does' (McCaffery 1968). Understands that pain may have different qualities in some patients. | Under supervision: carries out observations of patient's physiology such as temperature, pulse, blood pressure, respiratory rate and oxygen saturation. Performs and documents pain assessment. | Discusses ways in which patients with different types of pain can be supported. | Works as part of the team investigating the patients' pain. | Recognises that the pain experience is not the same for all patients. Works within own sphere of practice. Understands the importance of the safeguarding and wellbeing of patients. | Able to contact senior. | Observation of practice with feedback. Evidence of training/education. Discussion with supervisor. |
| Advanced Beginner Level 3 | Able to describe different types of pain such as acute, chronic and cancer pain and how these may affect patients. | Carries out observations of patient's physiology such as temperature, pulse, blood pressure, respiratory rate and oxygen saturation Performs and documents pain assessment. | Demonstrates how to adapt approach to support patients with different types of pain. | Demonstrates ability to support patients having diagnostic tests and procedures. | Describes how different patients might experience different types of pain. Able to identify and work within sphere of competence. Understands the importance of the safeguarding and wellbeing of patients. | Recognises issues and applies agreed protocols to escalate problems in relation to pain diagnosis. | Observation of practice with feedback. Evidence of training/education. Assist with audit data collection. Discussion with supervisor. Setting of objectives. Appraisal. |



| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---------------------------------------|---|---|---|---|---|--|--|
| Level of practice Competent Level 4 | Describes the role of the nervous system in the transduction, transmission, perception and modulation of pain. Describes with examples fundamental knowledge of: nociceptive pain neuropathic pain visceral pain somatic pain. Identifies the potential relationship of the following to the person's experience of pain: anxiety depression fear/avoidance spirituality quality of life. | Identifies with examples relevant to clinical practice the potential adverse effects of pain from the perspective of: | Assesses the patient and family's knowledge/ understanding of their pain. Modifies approach to patients according to the characteristics of their pain when performing observations and assessments. | Describes specific investigations which may aid diagnosis of pain. Accurately documents and communicate data/ findings with relevant health personnel. | Identifies and works within own sphere of practice. Integrates the importance of the safeguarding and wellbeing of patients undergoing diagnostic investigations. Adherence to Information Governance. Understands the importance of the safeguarding and wellbeing of patients. | Escalates issues in relation to pain anatomy and physiology with nursing staff, clinicians and managers. | Observation of practice with feedback. Evidence of training/ education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

Unregistered staff pain assessment

How pain is recognised. This aspect of care outlines how pain is assessed, measured and communicated.

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|----------------------|---|---|---|--|---|---|--|
| Novice Level 1 and 2 | Uses recommended tools to perform and document pain assessment. | Awareness of patients unable to self-report pain who require alternate pain assessment techniques. | Discusses ways in which pain assessment can be optimised. | Works as part of the team assessing the patient's pain. | Recognises the need for all patients to have pain assessed. | Able to contact senior if pain assessment cannot be performed. | Observation of practice with feedback. Evidence of training/ education. Discussion with supervisor. |
| | Chooses suitable tool to perform and document pain assessment. | Assesses pain across range of patient groups and clinical circumstances. | Demonstrates how to adapt approach to facilitate pain assessment. | Demonstrates ability to assess pain in patients with a range of conditions and cognitive states. | Able to identify and work within sphere of competence. | Recognises issues and applies agreed protocols to escalate problems in relation to pain assessment. | Observation of practice with feedback. Evidence of training/ education. Assist with audit data collection. Discussion with supervisor. Setting of objectives. Appraisal. |



| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|-------------------|--|--|---|--|--|--|---|
| Competent Level 4 | Discusses the rationale for assessment of pain as a multi-dimensional experience and the barriers that can occur. Uses valid and reliable tools for assessing and measuring pain. Demonstrates the ability to undertake a fundamental pain history. Performs a general physical assessment. Assesses the impact of interventions on pain and function. | Identifies social populations with potential challenges to assessment and demonstrate fundamental knowledge of appropriate assessment frameworks/tools where relevant to practice. | Assesses the patient and family's knowledge/ understanding of their pain, its contributing factors, their goals beliefs and expectations surrounding treatment and their preferences. | Discusses clinical rationale for investigations in the assessment of the person with pain. Accurately documents and communicates data/ findings with relevant health personnel. | Negotiates and implements a culturally responsive individualised management plan that incorporates a biopsychosocial approach to pain management. Documents timeline for reassessment of pain and evaluation of pain management interventions. Accurately evaluates effectiveness of the pain management plan in partnership with the person in pain and communicates amendments required to appropriate health personnel. | Escalates issues in relation to pain assessment with nursing staff, clinicians and managers. Within the health history identifies situations such as complex pain problem/suicidal ideation/memory problems that require a more comprehensive assessment and seeks advice or refers as appropriate. | Observation of practice with feedback. Evidence of training/ education. Collect and analyse audit data. Personal reflection Discussion with supervisor. Setting of objectives. Appraisal. |

Unregistered staff physical strategies to manage pain

This aspect of care outlines the importance of physical strategies to improve and maintain function in acute and persistent pain

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal Responsibilities | Interdisciplinary health care, research and quality | Ethical Standards | Escalation of care | Assessment |
|---------------------------------|---|--|---|--|---|--|---|
| Novice Levels 1 and 2 | Monitors the effect of physical strategies. Evaluates the effectiveness of physical strategies. Completes accurate documentation within clinical records. | Demonstrates awareness of physical strategies available for the management of pain. Such as: turning and positioning wound support reach devices heat and cold massage mobilisation exercise. | Listens, observes, learns, participates and responds to others. Communicates effectively with patient, family and other members of the team. | Identifies the role of other team members. Has an understanding of policy that guides practice. | Identifies and works within sphere of own practice. Recognises the need for all patients to have access to the provision of physical strategies. Understands issues of safeguarding patients and patient information. | Knows when to seek support from senior. | Clinical observation. Feedback on observation. Evidence of training and education. Personal reflections. Discussion with supervisor. |
| Advanced Beginner Level 3 | Explains the physical strategies to patients and families and how they improve or maintain function. | Demonstrates knowledge and recognises the importance of physical strategies such as: turning and positioning wound support reach devices heat and cold massage mobilisation exercise role of physiotherapy hydrotherapy TENS. | Explores physical strategies within evidence base. Identifies ways of engaging and empowering patients. | Has knowledge and experience of supporting patents and staff utilising physical strategies within their holistic pain management. Shows understanding of policy that guides practice. | Identifies and work within sphere of own practice. Understands issues and importance of safeguarding patients and patient information. | Recognises issues and utilises agreed protocols to escalate issues that arise. | Clinical observation. Feedback on observation. Evidence of training and education. Discussion with supervisor. Setting of objectives. Appraisal. Data collection for audit. |

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| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal Responsibilities | Interdisciplinary health care, research and quality | Ethical Standards | Escalation of care | Assessment |
|---------------------------------------|--|---|--|--|---|--|--|
| Level of practice Competent Level 4 | Demonstrates a good knowledge of examples of physical strategies with patients to empower them to utilise these appropriately to improve and maintain function within activities of daily living. Actively monitors the effectiveness of physical methods and strategies and integrates different aspects of practice to improve outcomes for patients. | Describes how the following physical strategies aid pain management such as: turning and positioning wound support reach devices heat and cold massage mobilisation exercise role of physiotherapy hydrotherapy TENS. In the context of: range of movement, muscle strength and stamina cardiovascular activity pain relief weight and appetite management activities of daily living sleep mood. | Accesses and utilises evidence based guidelines to discuss the purpose and recognises the benefits and limitations of physical strategies and is able to discuss with patient. Exhibits ways of engaging and empowering patients in the utilisation of physical strategies. | Has detailed knowledge of the roles and responsibilities of health care professionals within the team. Utilises policies that guide practice as a resource to guide own practice and advise patients. | Identifies and works within sphere of own practice. In-depth knowledge of safeguarding issues for patient and patient information. Praises and supports other junior staff members. | Knows when to request assistance from seniors. Raises issues in relation to quality and service development with line manager. | Observation of practice with feedback. Evidence of training/ education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

Unregistered staff self-management strategies

This domain describes how the nursing team contribute to enabling patients to engage with self-management strategies for managing acute and chronic pain.

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---------------------------------|---|--|---|---|---|--|--|
| Novice Levels 1 and 2 | Awareness of difference between acute and chronic pain including physical and psychological effects. | Uses nursing care to promote movement, reduce anxiety, improve comfort, facilitate restful sleep, and encourage distraction to help self-manage pain. | Discusses ways in which self-management can be optimised. | Has an awareness of how nursing care interventions may contribute to promoting self-management strategies as part of the IDT. | Works within sphere of own practice. Recognises the need for all patients to have access to the provision of self-management education Understands issues of safeguarding patients and patient information. | Seeks support and appropriately escalates care to senior when recognises own limitations. | Observation of practice with feedback. Evidence of training/education. Discussion with supervisor. |
| Advanced beginner Level 3 | Demonstrates an awareness of how chronic differs from acute pain and the role self-management plays in helping improve the physical and psychological impact of pain. | Is aware of the different ways in which the role of self-management can be used for chronic pain by: promoting movement reducing anxiety improving comfort facilitating sleep distraction involving family. | Demonstrates a concept of how self-management strategies can be optimised within the context of clinical practice. | Demonstrates the ability to actively take part in promoting self-management strategies at a basic level as part of the IDT. | Identifies and works within sphere of own competence. Recognises the need for all patients to have access to the provision of self-management education. Adherence to Information Governance. | Recognises issues and applies agreed protocols to escalate problems in relation to self-management strategies that may occur as a result of their intervention(s). | Observation of practice with feedback. Evidence of training/education. Discussion with supervisor. Setting of objectives. Appraisal. |



| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|-------------------|--|--|--|---|---|---|---|
| Competent Level 4 | Demonstrates an understanding of how chronic differs from acute pain and discusses the rationale for the role self-management plays in helping improve the physical and psychological impact of pain. Identifies potential barriers to effective self-management. Assesses the impact of the interventions on the physical and psychological wellbeing of the patient. | Identifies the different ways in which acute and chronic pain can be managed and the role of self-management. Displays confidence in guiding the patient to self-management strategies by; promoting movement, reducing anxiety, improving comfort, facilitating sleep, distraction and involving the family. | Applies knowledge to facilitate patient in adopting self-management strategies to optimise their pain management. Assesses patient's level of ability to apply these strategies and facilitates knowledge and understanding of pain and related pain behaviour, beliefs, goals and expectations, highlighting how these may contribute to their pain. | Actively takes part and contributes to promoting self-management strategies as part of the IDT. Discusses clinical rationale for the self-management strategies chosen for the patient and how they have been applied. Accurately documents and communicates with the relevant personnel any outcomes related to chosen strategies. | Recognises own limitations when actively engaging with self-management strategies in order to work within own sphere of practice. Recognises the need for all patients to have access to the provision of self-management education whether this be patient or clinician directed. Adherence to Information Governance. | Recognises issues and applies agreed protocols to escalate problems in relation to self-management strategies that may occur as a result of their intervention(s). Within the health history identifies situations such as complex pain history, suicidal ideation or cognitive dysfunction, which may require a more comprehensive assessment and management. | Observation of practice with feedback. Evidence of training/education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

Unregistered staff pharmacological strategies

This aspect explores how the nursing team contributes to the safe, timely and appropriate use of pharmacological therapies.

| Aspect of care | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---|---|---|--|---|---|--|---|
| Level of practice Novice Levels 1 and 2 | Observes and reports the effectiveness of pharmacological therapies for pain relief including side effects under direct guidance. | Assists with the administration of pharmacological strategies under direct supervision as appropriate (www.nmc-uk.org/ publications/standards). Has awareness of routes of administration and side effects of commonly used medicines in the area of practice. | Listens, learns, and responds to others. | Demonstrates continuous learning from more experienced staff, with an emphasis on evidence based practice from the start. Learns about the importance of continuous data collection and quality improvement. | Works within relevant legislation and local standard operating procedures. Articulates the importance of safeguarding patient information. | Learns to recognise, and appropriately escalates to seniors, potential problems in relation to pharmacological strategies which are not working and or producing side-effects. | Observation of practice with feedback. Evidence of training/ education. Discussion with supervisor. |
| Advanced beginner Level 3 | Demonstrates, with guidance, knowledge of medications including allergies, analgesia, non-prescribed drugs, over the counter drugs, alcohol and tobacco intake. | Administers commonly prescribed pharmacological strategies under supervision. Has awareness of routes of administration and side effects of commonly used medicines in the area of practice. | Listens and responds to the novice practitioner. Learns from others. Gives simple and clear instructions to patients about pain relief under supervision. Has an awareness that medicines may impact mental capacity. | Contributes to, and understands the importance of, continuous audit – the effectiveness and safety of pharmacological strategies. | Accepts and documents patients' right to decline analgesia. Keeps knowledge up to date. | Recognises and uses protocols to appropriately escalate potential problems to seniors in relation to clinical signs and symptoms of adverse effects. | Observation of practice with feedback. Evidence of training/ education. Assist with audit data collection. Discussion with supervisor. Setting of objectives. Appraisal. |



| Aspect of care | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|--------------------------------------|---|---|---|---|---|---|--|
| Level of practice Competent Level 4 | Takes histories to include drug ranges, efficacy, side-effects of medication and intolerance to analgesia. Evaluates and articulates a clear rationale for the choice of pharmacological strategies. Aware of any potential signs and symptoms/ contra-indication of pharmacological strategies. Manages adverse effects and completes and maintains accurate documentation. | Takes responsibility for day-to-day management of routine care using pharmacological strategies. Knows the therapeutic uses of the medication to be administered, its normal dosage, sideeffects, precautions and contraindication. Considers the dosage, weight, where appropriate method of administration, route and timing. | Listens and responds to juniors. Learns from others. Develops the skills to give simple and clear instructions for patients in their care, and at discharge. Recognises that medicines may impact mental capacity. | Assists in the development of protocols and guidelines for treatment of side effects and complications associated with pharmacological strategies. Works closely with pharmacy and other relevant health care professionals. | Aware of the roles of the regulatory agencies involved in medicine use, monitoring and licensing (for example the National Institute of Health and Clinical Excellence, the Committee on Safety of Medicines, and local formulary committees). | Recognises and uses protocols to appropriately escalate potential problems in relation to: • clinical signs and symptoms of adverse effects • knows when to request help from senior colleagues. Supports junior colleagues when they report incidents or concerns. | Observation of practice with feedback. Evidence of training/ education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

Unregistered staff interventional strategies

This aspect of care outlines the role of interventions to improve and maintain function.

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---|--|---|---|---|--|--|--|
| Level of practice Novice Levels 1 and 2 | Observes the effectiveness of interventions for pain management. Completes accurate documentation. | Awareness of the needs of patients with advanced analgesic techniques or those undergoing a procedure for pain management. | Discusses how patients can actively engage in their pain management interventions. Communicates effectively with patients, families and within the IDT. | Has an awareness of policies guiding practice. | Works within sphere of own practice. Understands the importance of safeguarding the health and wellbeing of patients. Adheres to Information Governance. | Knows when to seek support from seniors. | Observation of practice with feedback. Evidence of training/education. Discussion with supervisor. |
| Advanced Beginner Level 3 | Evaluates and provides a rationale on the effectiveness of an intervention, manages simple adverse effects and completes accurate documentation in clinical records. Effectively and safely monitors and manages a patient appropriate undergoing a pain management intervention. | Assesses the needs of patients with advanced analgesic techniques or those undergoing a procedure for pain management. | Demonstrates ways to actively engage patients with their interventional pain management care. Communicates effectively with patients, families and within the inter-disciplinary team (IDT). | Understands policies guiding practice as a clinical resource to guide own/junior staff practice and to advise patients. | Works within sphere of competence. Describes the importance of safeguarding the health and wellbeing of patients. Adheres to Information Governance. | Recognises issues and utilises agreed protocols to escalate issues that arise. | Observation of practice. Feedback. Evidence of education training. Discussion. Appraisal. |



| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---------------------------------------|--|---|--|---|--|--|---|
| Level of practice Competent Level 4 | Evaluates and articulates a clear rationale on the choice and effectiveness of an intervention. Manages adverse effects and completes accurate documentation in clinical records. Able to articulate physiological responses to interventional pain management techniques. | Demonstrates the ability to effectively prepare, assess, manage and evaluate the needs of patients undergoing a pain management intervention. | Role model who actively engages with patients with complex pain issues in their interventional care. Communicates effectively with patients, families, IDT. | Use policies guiding practice as a clinical resource to guide own/junior staff practice and to advise patients. | Works within sphere of own practice. Integrates the importance of the safeguarding and well being of patients undergoing pain management interventions. Adheres to Information Governance. | Escalate issues in relation to patients or service delivery to managers as required. Demonstrate awareness of how patient safety links into the wider organisation. | Observation of practice with feedback. Evidence of training/education. Assist with audit data collection. Discussion with supervisor. Setting of objectives. Appraisal. |

Unregistered staff service development

This aspect of care describes how the nursing team contribute to the development of person-centered pain management provision ensuring the use of audit, research and education.

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---|--|---|---|--|--|---|---|
| Level of practice Novice Levels 1 and 2 | Provides patient- centered care ensuring pain management is addressed with all patients. | Awareness of safe pain management practice adapting own practice as agreed. Seeks support, guidance and accepts instruction when necessary. | Listen, observes, learns, participates and responds to others. Communicates with patient, family and other members of the team. | Understanding and awareness of the service provision provided to individual areas. | Identifies and works within sphere of own practice. | Knows when to seek support from senior. | Observation of practice with feedback. Evidence of training/ education. Discussion with supervisor. |
| Advanced beginner Level 3 | Works effectively with others to continually improve pain management care offered to all patients. | Demonstrates safe pain management practice adapting own practice as agreed. Seeks support, guidance and accepts instruction when necessary. | Describes ways of engaging and empowering patients to improve services. | Good understanding and awareness of the service provision provided to individual areas. | Identifies and works within sphere of own practice. | Has the courage and ability to escalate any concerns to direct line manager. | Observation of practice with feedback. Evidence of training/ education. Assist with audit data collection. Discussion with supervisor. Setting of objectives. Appraisal. |
| Competent Level 4 | Identifies situations where the scope of practice needs to be expanded to improve the service. | Acts as a role model in the contribution to improve the service by employing good communication skills. | Identifies areas of educational needs and contributes to service improvement by using knowledge and skills to share best practice. | Identifies any risks associated with the service delivery and gives constructive suggestions in reducing any risk to improve the service for users and the public. | Works within own sphere of influence ensuring services are patient centered. | Works effectively with others to clearly define values, direction and policies including guidance on how to respond when these are under pressure or interests are in conflict. | Observation of practice with feedback. Evidence of training/education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

Unregistered staff complex pain management

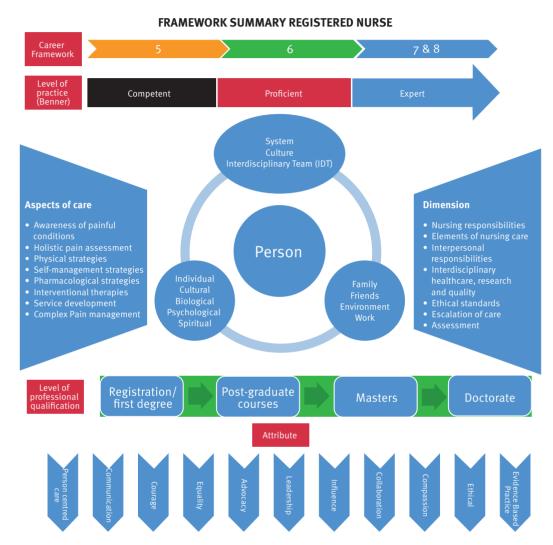
This domain focuses on the relationship between holistic patient assessment and responsive care individualised management of care emphasising the importance of communication and self-management.

| Understanding pain | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---------------------------|--|---|--|---|---|--|--|
| Novice Levels 1 and 2 | Assesses pain and accurately documents findings. Supports patients undertaking selfmanagement approaches. | Awareness of patients unable to self-manage their pain. | Discusses ways in which patients can be assisted in their understanding of pain management. Communicates effectively with patients, families and other members of the IDT. | Has an understanding of local policies that guide practice. Demonstrates the ability to effectively assist other members of the IDT. Aware the individual needs of a patient with (or living with) complex pain and their family. | Identifies and works within sphere of own practice. Understands the importance of safeguarding the health and wellbeing of patients. Adheres to Information Governance. | Knows when to seek assistance from seniors. | Observation of practice with feedback. Evidence of training/ education. Discussion with supervisor. |
| Advanced beginner Level 3 | Chooses suitable tools to assess complex pain and accurately documents findings. | Assesses the patient with complex pain across a range of clinical circumstances. Supports and encourages self-management strategies. | Demonstrates ways in which patients can be assisted in their understanding of pain management. Communicates effectively with patients, families and other members of the IDT. | Demonstrates an understanding of local policies that guide practice. Demonstrates the ability to effectively support other members of the IDT. Recognises the needs of individual patients with (or living with) complex pain and their family. | Identifies and works within sphere of own practice. Adheres to Information Governance. | Recognises issues and applies agreed protocols to escalate problems in relation to complex pain. | Observation of practice with feedback. Evidence of training/education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives Appraisal. |

| Understanding pain | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---------------------------------------|---|--|---|---|--|---|--|
| Level of practice Competent Level 4 | Evaluates and articulates a clear rationale on the choice and effect of a pain management strategy. Interprets the potential clinical signs and symptoms of complex case management. Manages adverse effects and complete accurate documentation in clinical records. Ensure patient is undertaking selfmanagement strategies appropriately. | Undertakes a biopsychosocial assessment of a patient with complex pain. Evaluate the effect of selfmanagement approaches. | Role model who actively engages patients and their families with complex pain issues. Communicate effectively with patients, families and IDT. | Good understanding of local policies that guide practice. Collaborate with IDT to provide biopsychosocial pain management. | Identifies and works within sphere of own practice. Adheres to Information Governance. Integrates the importance of safeguarding the health and wellbeing of patients into daily practice. | Escalates issues in relation to complex pain with nursing staff, clinicians and managers. Identifies situations such as suicidal ideation that requires a more comprehensive assessment and seeks advice or refers as appropriate. | Observation of practice. Feedback from team members/mentor. Evidence of education training. Evidence from education/training (assessments). Individual performance review. Personal reflections. |

Pasero C, McCaffery M. Pain: clinical manual. St. Louis: Mosby; 1999.

Knowledge and skills framework for registered nurses



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Registered nurse understanding pain

What is pain? This aspect of care looks at the definition of pain and its associated anatomy and physiology.

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---------------------------------------|---|---|--|---|---|--|--|
| Level of practice Competent Level 5 | Describes the role of the nervous system in the transduction, transmission, perception and modulation of pain. Describes with examples fundamental knowledge of acute, chronic and cancer pain and of: • nociceptive pain • neuropathic pain • visceral pain • somatic pain. Identifies the potential relationship of the following to the person's experience of pain: • anxiety • depression • fear/avoidance • spirituality • quality of life. | Identifies with examples relevant to clinical practice the potential adverse effects of pain from the perspective of: | Assesses the patient and family's knowledge/ understanding of their pain. Modifies approach to patients according to the characteristics of their pain when performing observations and assessments. Recognises that medicines may impact mental capacity. | Describes specific investigations which may aid diagnosis of pain. Accurately documents and communicate data/ findings with relevant health personnel. | Identifies and works within own sphere of practice. Integrates the importance of the safeguarding and wellbeing of patients undergoing diagnostic investigations. Adheres to Information Governance. Understands the importance of the safeguarding and wellbeing of patients. | Escalates issues in relation to pain anatomy and physiology with nursing staff, clinicians and managers. | Observation of practice with feedback. Evidence of training/ education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |



| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|--------------------------------------|--|---|---|--|---|---|--|
| Level of practice Proficient Level 6 | Demonstrates an indepth knowledge of the biopsychosocial model of pain and relationship to pain behaviours. Demonstrates knowledge of the pathophysiology and psychology of acute, chronic and cancer pain and of: • nociceptive pain • neuropathic pain • visceral pain • somatic pain. Discusses the concept of pain as a whole and the implications for practice that involves: • sensation • emotion • cognition • social, cultural and environmental factors. | Discusses the potential adverse physiological and psychological effects of acute and persistent pain from the perspective of: | Assesses and informs the patient and family's knowledge/ understanding of their pain. Specifically adapts approach to patients according to the characteristics of their pain when performing observations, and assessments when planning treatment. | Actions specific investigations which may aid diagnosis of pain. Accurately documents and communicate data/ findings with IDT and other health personnel. | Demonstrates ability to work within sphere of own practice. Demonstrates the importance of the safeguarding and wellbeing of patients undergoing diagnostic investigations. Adheres to Information Governance. Understands the importance of the safeguarding and wellbeing of patients. | Comprehensively discusses and escalates issues in relation to pain diagnosis, anatomy and physiology with nursing staff, clinicians and managers. | Observation of practice with feedback. Evidence of training/ education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

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| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|-----------------------|--|--|--|--|--|---|---|
| Expert Levels 7 and 8 | Demonstrates knowledge and comprehensive understanding of the patient's pain. Experience as evidenced by the successful completion of a postgraduate course in pain management including diagnosis, anatomy and physiology of pain. Demonstrates leadership in the utilisation of a biopsychosocial/spiritual approach to pain management in practice. | Expertly evaluates the potential adverse physiological and psychological effects of acute and persistent pain from the perspective of: | Acts as a role model to guide and teach other health care staff about the rationale for incorporating a biopsychosocial/spiritual approach to pain management. Critically analyses and adapts approach to patients according to the characteristics of their pain when performing observations, and assessments when planning and implementing treatment. | Orders specific investigations and conducts physical examination which may aid diagnosis of pain. Accurately documents and communicate data/findings with IDT, other health personnel and the wider health care arena via the local, national, and international dissemination of research and audit results. | Demonstrates precision in working within sphere of own practice. Identifies shortcomings in the service delivery. Evaluates, develops and implements strategic plans. Adheres to Information Governance. Understands the importance of the safeguarding and wellbeing of patients. | Expertly discusses and escalates issues in relation to pain diagnosis, anatomy and physiology with nursing staff, clinicians, managers and the wider health care arena. Initiates appropriate referrals in response to abnormal findings and ensure that patients are followed up appropriately. | Observation of practice with feedback. Evidence of training/ education. Design and implement audit and research projects. Ensure service follows best practice for pain assessment across the range of patient groups and clinical conditions. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

ଅ Registered nurse pain assessment

How pain is recognised. This aspect of care outlines how pain is assessed, measured and communicated.

| Dimension N | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|--|--|---|---|---|--|--|--|
| Competent and for a compet | Discusses the rationale for assessment of pain as a multi-dimensional experience and the parriers that can occur. Uses valid and reliable cools for assessing and measuring pain. Demonstrates the ability to undertake a fundamental pain nistory. Performs a focused obysical assessment. Assesses the impact of interventions on pain and function. | Identifies social populations with potential challenges to assessment and demonstrates fundamental knowledge of appropriate assessment frameworks/tools where relevant to practice. | Assesses the patient and family's knowledge/ understanding of their pain, its contributing factors, their goals beliefs and expectations surrounding treatment and their preferences. | Discusses clinical rationale for investigations in the assessment of the person with pain. Accurately documents and communicates data/findings with relevant health personnel. | Negotiates and implements a culturally responsive individualised management plan that incorporates a biopsychosocial approach to pain management. Documents timeline for reassessment of pain and evaluation of pain management interventions. Accurately evaluates effectiveness of the pain management plan in partnership with the person in pain and communicates amendments required to appropriate health personnel. | Escalates issues in relation to pain assessment with nursing staff, clinicians and managers. Within the health history identifies situations such as complex pain problem/ suicidal ideation/ memory problems that require a more comprehensive assessment and seek advice or refers as appropriate. | Observation of practice with feedback. Evidence of training/ education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|--------------------------------------|--|--|---|---|---|--|---|
| Level of practice Proficient Level 6 | Demonstrates knowledge of the rationale for, and barriers to assessment and evaluation of pain from the perspective of health professionals, patient, family and general public. Performs a focused physical assessment. Uses valid and reliable tools for the population to assess and measure pain and function. Assesses the impact of interventions on pain and function. | Demonstrates proficiency in the use of appropriate frameworks/tools for special populations as required and relevant to practice for the assessment of pain. Undertakes a comprehensive pain history to gather health data and to inform nursing diagnosis cross a range of complex pain presentations. | Within the health history identifies actual or potential for pain-related anxiety, depression, catastrophising, fear avoidance behaviour, persistent pain, medication misuse/ abuse, self-harm and abuse. Assesses the patient/ family's beliefs about pain, coping strategies, expectations, management, preferences, treatment goals, knowledge of their condition and its likely cause or contributing factors and their role in their pain management. | Demonstrates rationale for appropriate laboratory investigations in response to patient's clinical condition. Discusses rationale for specific radiological investigations as part of diagnostic work up. Demonstrates recognition of abnormal laboratory results, and identifies potential explanation and the implications for pain management therapy. | Negotiates and implements a culturally responsive individualised management plan that incorporates a biopsychosocial approach to pain management. Documents timeline for reassessment of pain and evaluation of pain management interventions. Accurately evaluates effectiveness of the pain management plan in partnership with the person in pain and communicates amendments required to appropriate health personnel and services. | Comprehensively discusses and escalates issues in relation to pain assessment with nursing staff, clinicians and managers. Within the health history identifies situations such as complex pain problem/ suicidal ideation/ memory problems that require a more comprehensive assessment and seeks advice or refer as appropriate. | Observation of practice with feedback. Evidence of training/ education. Lead on audit projects and participate in research. Personal reflection Discussion with supervisor. Setting of objectives. Appraisal. |
| Expert Levels 7 and 8 | Demonstrates leadership in the use of appropriate frameworks/ tools relevant to clinical practice for the comprehensive assessment of pain. Completes a focussed physical assessment. | Completes a comprehensive pain history to gather and critically analyse subjective and objective health data to inform differential diagnosis across a range of complex pain presentations. | Acts as a role model to guide and teach other health care staff about the importance of a comprehensive pain history, the approaches to taking this and the formulation of differential diagnosis for the complex pain patient. Assesses the patient and family's knowledge of pain and provides individualised information and education as appropriate. | Acts as a role model to guide and teach other health care staff about the importance of assessment, identification and where possible appropriate management of risk factors in the health history. Demonstrates in-depth knowledge of the clinical rationale for laboratory tests and radiological investigations in response to patient's clinical presentation, abnormal results/findings and implications for treatment. | Comprehensively and critically evaluates effectiveness of pan management interventions at agreed follow up, modifies plan/therapy and/or referrals accordingly, and communicates with appropriate staff/services. | Comprehensively discusses and escalates issues in relation to pain assessment with nursing staff, clinicians, managers and the wider health care arena. Initiates appropriate referrals in response to abnormal findings and ensure that patients are followed up appropriately. | Observation of practice with feedback. Evidence of training/ education. Design and implement audit and research projects. Ensure service follows best practice for pain assessment across the range of patient groups and clinical conditions. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

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Registered nurse physical strategies to manage pain

This aspect of care outlines the importance of physical strategies to improve and maintain function in acute and persistent pain.

| Understanding pain | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---------------------------------------|--|--|---|--|---|--|---|
| Level of practice Competent Level 5 | Demonstrates a good knowledge of examples of physical strategies with patients to empower them to utilise these appropriately to improve and maintain function within activities of daily living. Actively monitors the effectiveness of physical methods and strategies and integrates different aspects of practice to improve outcomes for patients. | Describes how the following physical strategies aid pain management such as: turning and positioning wound support reach devices heat and cold massage mobilisation exercise role of physiotherapy hydrotherapy TENS. In the context of: range of movement, muscle strength and stamina cardiovascular activity pain relief weight and appetite management activities of daily living sleep mood. | Accesses and utilises evidence based guidelines to discuss the purpose and recognise the benefits and limitations of physical strategies and is able to discuss with patient. Exhibits ways of engaging and empowering patients in the utilisation of physical strategies. | Has detailed knowledge of the roles and responsibilities of health care professionals within the team. Utilises policies that guide practice as a resource to guide own practice and advise patients. | Identifies and works within sphere of own practice. In-depth knowledge of safeguarding issues for patient and patient information. Praises and supports other junior staff members. | Knows when to request assistance from seniors. Raises issues in relation to quality and service development with line manager. | Observation of practice with feedback. Evidence of training/education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

| Understanding pain | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|--|---|--|--|--|--|---|--|
| Level of practice Proficient Level 6 | Demonstrates where best practice and evidence base has been applied to clinical practice or in depth knowledge of role and a wide variety of physical strategies for the management of pain. Able to explain the rationale of therapies used and discusses the benefits and limitations. | Discusses, utilises and teaches, patients and the interdisciplinary team why improving and maintaining function is important in pain management in relation to: • physiological • pathological • psychological • psychological • elements. Recognises the effects on unrelieved pain. Demonstrates and teaches an in-depth knowledge on physical strategies above and: • acupuncture • biofeedback • other rehabilitation approaches. Utilises assessment to provide an appropriate pain management plan. Discusses the characteristics between capacity and function in relation to physiological and psychological attributes. | Accesses and utilises evidence based guidelines to discuss the purpose and recognises the benefits and limitations of physical strategies and is able to discuss with patient. Exhibits ways of engaging and empowering patients in their utilisation of physical strategies. | Acts as a resource and promotes the benefits of interdisciplinary team collaboration. Participates in development of guidelines and policies for clinical practice. Feeds back and presents to the wider team. | In partnership with patients and other disciplines makes sound decisions that are ethically-based in the interest of patients in the absence of previous experience or protocols. Demonstrates ability to work within sphere of own practice. Demonstrates a high level of knowledge of safeguarding issues for patient and patient information. Supports junior staff members. | Confidently and efficiently integrates such therapies into clinical practice or where more appropriate refers to seniors. Identifies shortcomings in service provision to enhance strategic development. Records, discusses and escalates any patient safety issues or service delivery issues with line manager. | Observation of practice with feedback. Evidence of training/education. Lead on audit projects and participate in research. Personal reflection. Discussion with supervisor. Setting of objectives Appraisal. |



| Understanding pain | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|--|--|--|---|---|--|--|---|
| Level of practice Expert Level 7 and 8 | Demonstrates an advanced level of clinical decision making. Manages competing demands, adverse effects and completes comprehensive documentation. Generates new solutions that best meet the needs of the patient, through lateral thinking and evidence base. | Demonstrates a comprehensive level of knowledge and understanding of the essential nature of improving and maintaining function in relation to: • activities of daily living • different functional activities • incorporating cognitive behavioural interventions into those functional activities • activity tolerance • sleep and sleep hygiene • relationships – social, sexual and intimate • returning to work. Utilises this knowledge in clinical practice and teaching others | Provides thorough consultation with patient and family about the importance of using physical strategies in managing pain to improve and maintain function. Has advanced communication skills. Discusses advanced evidence-based knowledge with patients and the interdisciplinary team. Contributes to the development of pain by publicising and disseminating developments. | Demonstrates effective leadership skills. Independently establishes a nursing and interdisciplinary team training programme on physical strategies. Integrates the importance of safeguarding patients and patient information into all clinical practice. Demonstrates influence into physical strategies and service delivery from national and international evidence and practice. Collaborates with expert working groups at a regional, national and international international level. | Demonstrates precision in working within sphere of own practice. Appreciates and evaluates ethical diversity in developing strategies for ethical approaches in cultural groups within patients and staff members. Identifies shortcomings in the service delivery. Evaluates, develops and implements strategic plans. | Comprehensively discusses and provides information and resources on referral to appropriate services for functional assessment and management. | Observation of practice with feedback. Evidence of training/education. Design and implement audit and research projects. Ensure service follows best practice for pain assessment across the range of patient groups and clinical conditions. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

RCN Pain Knowledge and Skills Framework for the Nursing Team

Registered nurse self-management strategies

This domain describes how the nursing team contribute to enabling patients to engage with self-management strategies for managing acute and chronic pain.

| Dimension Nu | ursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|--|---|--|--|---|--|---|--|
| Competent chr Levels 5 acu disc for ma in h the psy of p Ide bar ma: Ass of t on psy | emonstrates an aderstanding of how ronic differs from ute pain and can scuss the rationale reference the role self-anagement plays helping improve e physical and ychological impact pain. entifies potential rriers to effective self-anagement. sessess the impact the interventions of the physical and ychological wellbeing the patient. | Identifies the different ways in which acute and chronic pain can be managed and the role of self-management. Displays confidence in guiding the patient to self-management strategies by; promoting movement, reducing anxiety, improving comfort, facilitating sleep, distraction and involving the family. | Applies knowledge to facilitate patient in adopting self-management strategies to optimise their pain management. Assesses patient's level of ability to apply these strategies and facilitates knowledge and understanding of pain and related pain behaviour, beliefs, goals and expectations, highlighting how these may contribute to their pain. | Actively takes part and contributes to promoting self-management strategies as part of the IDT. Discusses clinical rationale for the self-management strategies chosen for the patient and how they have been applied. Accurately documents and communicates with the relevant personnel any outcomes related to chosen strategies. | Recognises own limitations when actively engaging with self-management strategies in order to work within own sphere of practice. Recognises the need for all patients to have access to the provision of self-management education whether this be patient or clinician directed. Identifies and works within sphere of own practice. Adheres to Information Governance. | Recognises issues and applies agreed protocols to escalate problems in relation to self-management strategies that may occur as a result of their intervention(s). Within the health history identifies situations such as complex pain history, suicidal ideation or cognitive dysfunction, which may require a more comprehensive assessment and management. | Observation of practice with feedback. Evidence of training/ education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |



| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|--------------------------------------|---|---|--|---|--|--|---|
| Level of practice Proficient Level 6 | Demonstrates knowledge of the rationale for, and barriers to success in using self-management techniques, from the perspective of health care professionals, patient, family and general public. Uses evidence based principles to improve practice. Demonstrates knowledge by using tools and approaches that support shared decision making for self- management. Assesses the impact of interventions on pain and function. | Demonstrates knowledge and understanding in how to use shared decision making to help the patient be in control of their condition and quality of life. | Communicates effectively to enable patients to assess their needs and develop and gain confidence to self-manage. Aware of own values and beliefs and be able to put the patient's own values and beliefs at the centre of supporting self-management. Assesses the patient/family's beliefs about pain, coping strategies, expectations, management, knowledge of their condition and its likely cause or contributing factors and their role in their pain management. | Ensures on-going follow-up supported by feedback to both patient and health care team of self-management interventions. | Ensures individuals are able to make informed choices to manage their self-care needs. Negotiate and implement a culturally responsive individualised management plan that incorporates a biophysical approach to pain management. Identifies and works within sphere of own practice. Adheres to Information Governance. | Support and enable risk management to maximise independence and choice whilst promoting patient safety. Discusses and escalates issues with regards to self management to nursing staff, clinicians and managers. | Observation of practice with feedback. Evidence of training/ education. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|----------------------|--|---|---|---|---|---|--|
| Expert Level 7 and 8 | Demonstrates expert knowledge of how to use health behaviour change theories and strategies. Demonstrates expert knowledge of how to use patients existing skills, coping strategies and strengths. | Expert in the use of self-management strategies and coaching patients to optimise their coping skills. Identifies gaps in patient's knowledge and abilities. Promotes excellence in sleep hygiene, facilitates pacing and challenges unhelpful or destructive beliefs, values and behaviours. | Communicates expertly to reinforce helpful behaviours to enhance patient confidence and self-esteem. Acts as a role model to guide and teach other health care staff about the importance of self-management and behavioural approaches. | Collaborates closely with other members of the ICT such as psychologists and other mental health professionals to ensure safe and effective care for all patients. Evaluates effectiveness of self-management strategies and contributes to local, regional and national health care agenda. | Critically evaluates own values and beliefs and is willing to put the patient's values and beliefs at the centre of supporting selfmanagement. Identifies and works within sphere of own practice. Adheres to Information Governance. | Comprehensively discusses and escalates issues in relation to self-management strategies with the IDT and wider health care team. | Observation of practice with feedback. Evidence of advanced training/education. Design and implement audit and research projects. Ensure service follows best practice for pain assessment across the range of patient groups and clinical conditions. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

8 Registered nurse pharmacological strategies

This domain explores how nurses contribute to the safe, timely and appropriate use of pharmacological therapies.

| Understanding pain | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health and care, research and quality | Ethical standards | Escalation of care | Assessment |
|---------------------------------------|--|--|---|---|---|--|--|
| Level of practice Competent Level 5 | Takes histories to include drug ranges, efficacy, side-effects of medication and intolerance to analgesia. Evaluates and articulates a clear rationale for the choice of pharmacological strategies. Aware of any potential signs and symptoms/ contraindication of pharmacological strategies. | Takes responsibility for day-to-day management of routine care using pharmacological strategies. Knows the therapeutic uses of the medication to be administered, its normal dosage, side-effects, precautions and contraindication. Considers the dosage, weight, and where appropriate method of administration, route and timing. | Listens and responds to juniors. Learns from others. Develops the skills to give simple and clear instructions for patients in their care, and at discharge. Recognises that medicines may impact mental capacity. | Assists in the development of protocols and guidelines for treatment of side effects and complications associated with pharmacological strategies. Works closely with pharmacy and other relevant health care professionals. | Aware of the roles of the regulatory agencies involved in medicine use, monitoring and licensing (for example the National Institute of Health and Clinical Excellence, the Committee on Safety of Medicines, and local formulary committees). | Recognises and uses protocols to appropriately escalate potential problems in relation to: Clinical signs and symptoms of adverse effects Knows when to request help from seniors colleagues Supports junior colleagues when they report incidents or concerns. | Observation of practice with feedback. Evidence of training/education. Collect and analyse audit data Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |
| Proficient Level 6 | Independently evaluates and articulates a clear rationale for the choice of pharmacological strategies. Aware of any potential signs and symptoms/ contra-indication of pharmacological strategies. Independently manages adverse effects when appropriate and completes and maintains accurate documentation. | Exhibits confident and independent decision-making. Supports patients taking their own pain relief where able and appropriate. Initiates careful titration and individualization of dose regimens. An independent non-medical prescriber with knowledge of the pharmacokinetics and pharmacodynamics of medicines used in a wide range of settings. | Teaches others. Gives detailed explanations re pharmacological strategies to both staff and patients. Recognises that medicines may impact mental capacity. | Proactively develops protocols and guidelines for treatment of side effects and complications associated with pharmacological strategies. Discusses all aspects of pharmacological strategies with the interdisciplinary team. | Has a good understanding of the roles of the regulatory agencies involved in drug use, monitoring and licensing (for example the National Institute of Clinical Excellence, the Committee on Safety of Medicines, the Medicines and Healthcare products Regulatory Agency and local formularies and Committees. | Recognises and acts appropriately/takes the lead in relation to: clinical signs and symptoms of adverse effects from interventions. | Observation of practice with feedback. Evidence of training/education. Lead on audit projects and participate in research Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

| Understanding pain | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health and care, research and quality | Ethical standards | Escalation of care | Assessment |
|----------------------|---|---|---|---|---|--|--|
| Expert Level 7 and 8 | Delivers complex care at an advanced level. | An independent non-medical prescriber Advanced knowledge of the pharmacokinetics and pharmacodynamics of medicines used in a wide range of settings. | Develops and leads teaching organisation-wide on analgesic pharmacological strategies. Recognises that medicines may impact mental capacity. | Leads on the development of protocols and guidelines for treatment of side effects and complications associated with pharmacological strategies. Leads on organisation-wide audit and research related to pharmacological interventions. Collaborates with local, regional, national and international expert working groups. | In depth knowledge of the roles of the regulatory agencies involved in drug use, monitoring and licensing (for example the National Institute of Clinical Excellence, the Committee on Safety of Medicines, the Medicines and Healthcare products Regulatory Agency and local formularies committees. | Recognises and acts appropriately/taking the lead in relation to: clinical signs and symptoms of adverse effects from interventions. | Observation of practice with feedback. Evidence of training/ education. Design and implement audit and research projects. Ensure service follows best practice for pain assessment across the range of patient groups and clinical conditions. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

Registered nurse interventional strategies

This aspect of care outlines the role of interventions to improve and maintain function.

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---------------------------------------|--|--|--|---|--|--|---|
| Level of practice Competent Level 5 | Evaluates and articulates a clear rationale on the choice and effectiveness of an intervention. Manages adverse effects and completes accurate documentation in clinical records. Able to articulate physiological responses to interventional pain management techniques. | Demonstrates the ability to effectively prepare, assess, manage and evaluate the needs of patients undergoing a pain management intervention. ¹ | Role model who actively engages patients with complex pain issues in their interventional care. Communicates effectively with patients, families, IDT and managers. | Use policies guiding practice as a clinical resource to guide own/junior staff practice and to advise patients. | Works within sphere of competence. Describes the importance of safeguarding the health and wellbeing of patients Adheres to Information Governance. | Recognises issues and utilises agreed protocols to escalate issues that arise. | Observation of practice. Feedback. Evidence of education training. Discussion. Appraisal. |
| Proficient Level 6 | Demonstrates clinical decision-making on the effectiveness of an intervention, interprets the potential clinical signs and symptoms of interventional therapies, manages adverse effects and completes comprehensive documentation in clinical records. Independently, effectively and safely manage all aspects of care for the complex patient undergoing a pain management intervention. | Demonstrates the ability to provide advanced knowledge, skills, advice and management for patients undergoing a pain management intervention. | Ability to act as a role model and actively engage patients with complex pain issues in their interventional pain management care. Communicate effectively with patients, families, MDT and managers. Independently deliver nursing and MDT interventional training sessions and/ or programmes. | Collaborates on development of policies guiding practice. Feedbacks to IDT about pain management intervention outcomes. | Demonstrates the ability to work within sphere of own practice. Integrates the health and wellbeing of patients undergoing pain management interventions. Adheres to Information Governance. | Comprehensively records, discusses and escalates issues in relation to patient safety or service delivery with nursing staff, clinicians and managers. | Observation of practice. Feedback. Evidence of education training. Discussion. Appraisal. |

^[1] Including but not limited to Patient Controlled Analgesia, Subcutaneous/intravenous infusions, neuraxial and regional anaesthesia & analgesia, injection, radiofrequency and neuromodulation.

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|-----------------------|---|--|--|--|--|---|---|
| Expert Levels 7 and 8 | Demonstrates an advanced level of clinical decision-making as to the suitability of patients for pain management interventions and the outcomes. Independently interprets and manages the clinical signs and symptoms associated with multiple co-morbidities and interventional therapies. Manages competing demands, adverse effects and completes comprehensive documentation in clinical records. | Demonstrates the ability to provide expert clinical knowledge, skills and advice for patients undergoing a pain management intervention. | Acts as a role model. Provides expert clinical care and actively engages patients (with complex pain issues and multiple co- morbidities) in their interventional pain management care. Communicates advanced evidence based knowledge with patients, families, IDT and managers at local, regional and national settings. | Collaborates on and initiates the development of policies and guidelines pertinent to practice. Leads on audit and research activities to measure, evaluate and feedback to managers and the wider health care arena on interventional practice outcomes. Demonstrates influence on the interventional health care agenda. | Demonstrates precision in working within sphere of own practice. Able to integrate the importance of safeguarding the health and wellbeing of patients into daily practice guiding others and role modelling best practice. Adheres to Information Governance. | Comprehensively discuss and escalate issues in relation to patient safety or service delivery with nursing staff, clinicians, managers and the wider health care arena. | Observation of practice. Feedback. Evidence of education training. Discussion. Appraisal. |

Registered Nurse service development

This aspect of care describes how the nursing team contribute to the development of person-centered pain management provision ensuring the use of audit, research and education.

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care research and quality | Ethical standards | Escalation of care | Assessment |
|--------------------|--|---|--|--|--|--|---|
| Level of practice | Identifies situations | Acts as a role model in the | Identifies areas of | Identifies any risks | Works within own | Works effectively with | Observation of practice |
| Competent Level 5 | where the scope of practice needs to be expanded to improve the service. | contribution to improve the service by employing good communication skills. | educational needs and contributes to service improvement by using knowledge and skills to share best practice. | associated with the service delivery and gives constructive suggestions in reducing any risk to improve the service for users and the public. | sphere of influence ensuring services are patient-centred. | others to clearly define values, direction and policies including guidance on how to respond when these are under pressure or interests are in conflict. | with feedback. Evidence of training/ education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. |
| | | | | | | | Setting of objectives. Appraisal. |
| Proficient Level 6 | Interprets innovation in nursing practice at local and regional level. | Leads the development of high quality services by identifying team values, direction and policies. | Constructively undertakes own role in improving services as agreed through continuous appraisal and supports others effectively during times of change. Develops robust educational program and delivers pain management training to all health care professionals throughout the organisation. | Evaluates with others the effectiveness of service improvements and agrees any further action required to take them forward. | Works within a system which ensures that care is provided on an equal basis to all patients and is fully accessible. | Monitors care ensuring staff are meeting objective. Escalates concerns. | Observation of practice with feedback. Evidence of training/education. Lead on audit projects and participate in research. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

| Dimension | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care research and quality | Ethical standards | Escalation of care | Assessment |
|----------------------|---|--|--|--|---|--|--|
| Expert Level 7 and 8 | Communicates and disseminates innovations in nursing practice at local, regional, national and international level. | Plans for and applies local/national policy initiatives that will change pain management practice within staff team. Promotes a dynamic pain service that responds to appropriate changes and motivates the staff team. | Develops a common vision of patient-centred and evidence-based services and create systems and processes to achieve this in liaison with other groups of: service users wider public colleagues and co-workers GPs/CCGs people in other parts of the organisation other agencies. | Effectively engages the public, service users and other interested parties in an open and effective discussion on; values, direction, policies and strategies for the organisation/services. | Identifies own strengths and utilises them to develop the pain service within sphere of own practice. Plans for and applies ethical and professional education to manage patients in pain and uses wider concepts in the professional and ethical literature to improve practice. Supports and develops roles of staff. | Works in partnership with others to develop, take forward and evaluates direction of policies and strategies. Lobbies for resources to support and develop pain services. | Observation of practice with feedback. Evidence of training/ education. Design and implement audit and research projects. Ensure service follows best practice for pain assessment across the range of patient groups and clinical conditions. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

Registered nurse complex pain management

This aspect of care describes how the nursing team contribute to the development of person-centered pain management provision ensuring the use of audit, research and education.

| Understanding pain | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|---------------------------------------|---|---|--|---|--|---|---|
| Level of practice Competent Level 5 | Evaluates and articulates a clear rationale on the choice and effect of a pain management strategy. Interprets the potential clinical signs and symptoms of complex case management. Manages adverse effects and complete accurate documentation in clinical records. Ensure patient (families and carers where appropriate) is undertaking selfmanagement strategies appropriately. | Undertakes a biopsychosocial assessment of a patient with complex pain. Evaluates the effect of self-management approaches. | Role model who actively engages patients and their families with complex pain issues. Communicate effectively with patients, families, IDT. | Good understanding of local Policies that guide practice. Collaborate with IDT to provide biopsychosocial pain management. | Identifies and works within sphere of own practice. Adheres to Information Governance. Integrates the importance of safeguarding the health and wellbeing of patients into daily practice. | Escalates issues in relation to complex pain with nursing staff, clinicians and managers. Identifies situations such as suicidal ideation that requires a more comprehensive assessment and seeks advice or refers as appropriate. | Observation of practice with feedback. Evidence of training/education. Collect and analyse audit data. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

| Understanding pain | Nursing responsibilities | Elements of nursing care | Interpersonal responsibilities | Interdisciplinary health care, research and quality | Ethical standards | Escalation of care | Assessment |
|-----------------------|--|--|--|---|--|---|--|
| Proficient Level 6 | Demonstrates clinical decision-making on the implementation and effect of pain management strategies. Manages adverse effects and completes comprehensive documentation in clinical records. Independently, effectively and safely manages all aspects of biopsychosocial care for the patient with (living with) complex pain. | Undertakes a comprehensive biopsychosocial assessment of a patient with complex pain. Evaluates the effect of pain management approaches, using biopsychosocial assessments for patients receiving evidence-based treatment. | Acts as a role model and actively engages patients and their families with complex pain issues in their pain management. Communicates effectively with patients, families, IDT and managers. Independently delivers nursing and IDT education and/or programmes. | Collaborates on development of policies guiding practice. Safely and effectively work within the IDT. Leads on audit and engages with research activities to measure, evaluate and feedback to managers. | Identifies and works within sphere of own practice. Adheres to Information Governance. Able to implement and integrate the health and wellbeing of patients into daily practice and guide others. Implements a culturally responsive individualised plan to manage complex pain. | Discusses and escalates issues in relation to complex pain with nursing staff, clinicians and managers. Identifies situations such as suicidal ideation that requires a more comprehensive assessment and seeks advice or refers as appropriate. | Observation of practice with feedback. Evidence of training/ education. Lead on audit projects and participate in research. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |
| Expert Levels 7 and 8 | Demonstrates an expert level of clinical decision-making on the effectiveness of the biopsychosocial pain management strategies. Independently interprets and manages the clinical signs and symptoms associated with multiple co-morbidities in a patient with complex (or living with) pain. Manages competing demands, adverse effects and completes comprehensive documentation in clinical records. | Undertakes expert biopsychosocial assessment of a patient with complex pain. Problem solve/refer to other members of the IDT. Evaluates the effect of pain management approaches, using biopsychosocial assessments for patients receiving evidence based treatment. Evaluates the effect of self-management approaches. Problem solve/recommend changes (based on evidence). | Communicates complex information effectively with patients, families, IDT and managers. Collaborates on and initiate the development of policies guiding practice. Independently delivers nursing and IDT education and/or programmes at local, regional and national level. | Acts as role model to guide and teach other health care staff about the importance of complex pain. Demonstrates an in depth knowledge of the rationale for any investigations required for the diagnosis and ongoing management of the patient with pain needs. Leads on audit and research activities to measure, evaluate and feedback to managers and the wider health care arena. Demonstrates influence on the patient with (or living with) complex pain, health care agenda. | Identifies and works within sphere of own practice. Adheres to Information Governance. Demonstrates consistent effective leadership and clarity in working with patients with complex pain Comprehensively and critically evaluates pain management interventions for patients with complex pain. | Identifies complex situations such as suicidal ideation that requires a more comprehensive and expert assessment and seeks advice or refers as appropriate. | Observation of practice with feedback. Evidence of training/ education. Design and implement audit and research projects. Ensure service follows best practice for pain assessment across the range of patient groups and clinical conditions. Personal reflection. Discussion with supervisor. Setting of objectives. Appraisal. |

Footnotes



1 Including but not limited to patient controlled analgesia, subcutaneous/intravenous infusions, neuraxial and regional anaesthesia and analgesia, injection, radiofrequency and neuromodulation.

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