

Intervene Phase 2: Promoting a pain vigilant culture for people living with dementia using the COM-B Behaviour Change Wheel

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1. Background

Intervene Phase 2 is an implementation project which aims to embed evidence-based best practice pain management for people living with dementia in residential aged care. Intervene Phase 2 builds upon the findings of a pilot study which revealed pervasive challenges in effective pain management, including identification and assessment of pain.

2. Study Design

Multi-disciplinary teams have been established at four residential aged care sites, and the project has identified barriers to optimal pain management processes. Utilising a participatory action research approach, staff practices and behaviour have been targeted as areas of change, with a particular emphasis on empowering personal care staff to be involved in the pain management process.



Fig.2

3. Theoretical Framework

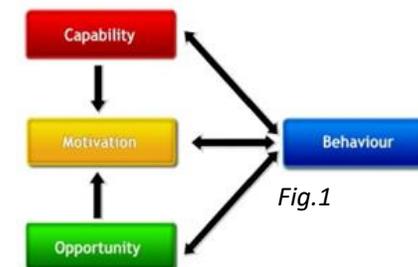


Fig.1

The COM-B (capability, opportunity, motivation) model (Fig.1) and Behaviour Change Wheel (BCW)¹ (Fig.2) were used to identify target behaviours of aged care staff (in particular personal care staff), then map comprehensive intervention strategies and develop resources to address barriers to evidence-based pain management practices.

4. Interventions



The project has developed an intervention strategy and is currently in the implementation stage, where educational videos, posters (Fig.3), pocket reference cards and a pain protocol are being trialled. Results of the intervention strategy will be collated by December 2018. Implementation of the resources is currently occurring at the four participating sites. The multidisciplinary and participatory approach used to build intervention strategies based on the Behaviour Change Wheel model has produced engagement at each site that surpasses traditional, “top-down” educational approaches.

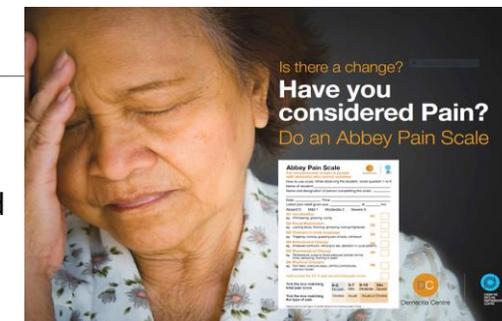


Fig.3

5. Initial data collection

Baseline patient audit data of 169 pain episodes revealed that 13% contained information across all domains of best practice pain-management (Identification, assessment, intervention and evaluation). Most episodes (83%) contained only documentation about the problem and the intervention. Post-implementation data collection results be available upon completion of the project.