

The interdisciplinary (IDT)/interprofessional (IPT) team should include:

- The person living in the nursing home
- Family, surrogate, or legal guardian
- Attending physician, nurse practitioner, physician's assistant, or other prescribers
- Licensed nurse(s) – at least one nurse with direct knowledge of the person
- Nursing assistant(s) – at least one NA with direct knowledge of the person
- Medication aide(s)
- Consultant pharmacist(s)
- Dietary Manager
- Activities Director
- Therapist(s) – PT, OT, ST
- Social Worker
- Others as appropriate



Administration should collaborate with the IDT/IPT to implement and support pain management policies and procedures.

Licensed nurses should conduct comprehensive pain assessments and re-evaluations.

The IDT/IPT should review the information shared from the assessment process and assist in the development and implementation of person-centered interventions.

Nursing assistants and medication aides should be interviewed for information concerning changes in ADLs or behaviors that may indicate the person is in pain.

Consultant pharmacists should keep lines of communication open with the physician/prescriber, and facility nursing staff to ensure treatment effectiveness and medication regimen simplification.

The person living in the nursing home and their family members should be interviewed for important information regarding pain history and behaviors.

Other staff in the facility may be able to offer suggestions and provide non-pharmacological alternatives:

- Therapists (PT, OT, ST) – provide non-pharmacological modalities such as adaptive devices and coordinate care with licensed staff to include pre-medication prior to therapy to maximize rehabilitation treatment
- Activities – provide diversional activities, colored lighting, aromatherapy, textile stimulation, etc.
- Dietary – provide comfort foods, aromatherapy
- Social Worker – assess cultural/spiritual beliefs, provide emotional support
- Housekeeping/Laundry – provide pleasant smelling cleaning products or detergents (aromatherapy)
- Maintenance – ensure safety measures (lowering the closet pole, raising bedside tables)

Non-pharmacologic interventions provided by the IDT/IPT may include:

- Repositioning
- Massage
- Heat or cold therapies
- Music therapy
- Exercise
- Relaxation
- Imagery
- Psychotherapy
- Peer support groups
- Spiritual therapy or activities
- Aromatherapy

Care planning and outcomes monitoring should include:

- Revising the pain management care plan as needed with changes in the assessment, medication regimen, or non-pharmacological interventions.
- Reviewing pain documentation to monitor the effectiveness and quality of pain management provided in the facility.

References

- [GeriatricPain.org](https://www.geriatricpain.org/). (2023). The University of Iowa.
- *Pain Management in the Post-acute and Long-Term Care Setting: A Clinical Practice Guideline (CPG)*. (2021). The Society for Post-Acute and Long-Term Care Medicine Columbia, MD.
- Boltz, M., Capezuti, E., et al. (2021). *Evidence-Based Geriatric Nursing Protocols for Best Practice* (6th ed.). New York: Springer Publishing.