

Dignity in Care factsheet

June 2010

Pain management in practice

- Raise staff awareness that people may not report pain, that it can have a significant impact on dignity and well-being and that it can be identified and treated.
- Enquire about pain during assessment.
- Ensure that night staff receive equivalent training on pain identification and treatment to those working during the day.
- Use assessment guidance (PDF) to support professionals to assess for pain in people with communication problems.

Key points from policy and research

- Pain can wrongly be viewed as an unavoidable aspect of old age.
- Older people are more likely to experience pain, less likely to complain about it and less likely to comply with medication.
- Pain in people with cognitive impairment, including learning disabilities and dementia is under diagnosed and under treated.
- In a study into the care and treatment of people with dementia in hospital 51 per cent of carers were dissatisfied with pain recognition and 71 per cent of nursing staff wanted more training on being able to recognise pain in people with dementia.
- Pain can exacerbate the behavioural and psychological symptoms of dementia and could result in challenging behaviour.
- Use of bank and agency staff can reduce pain recognition because regular staff would know the person and therefore be more likely to identify pain related behavior.
- Pain can cause people to wake at night; restlessness should trigger concerns about whether the person is suffering pain.
- Pain can cause people to avoid activities and can increase social isolation as a result.