



SIP

Societal Impact of Pain

**Time for Action
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Report SIP WG1

Pain as a quality indicator for health care

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WG Reporter 1 WG Reporter 2	Hilda Wieberneit-Tolman (PAE) Michael Schäfer (Deutsche Schmerzgesellschaft e.V)
The next stage of implementation of the Cross Border Healthcare Directive / Pain in European Reference Networks?	Tapani Piha (DG SANTE) / Enrique Terol (DG SANTE)
Best practice in pain policy: legge 38/2010	Marco Spizzichino (Ministry of Health, Italy)
Can we use pain as a quality indicator for health care	Rolf-Detlef Treede (IASP)
How can we use pain as a quality indicator for health care	Winfried Meissner (Deutsche Schmerzgesellschaft e.V)
Mutual Benefit Societies & pain	Menno Aarnout (AIM)
Hospitals and the right to avoid unnecessary pain and suffering	Rosapaola Metastasio (Civic Evaluation Agency of Cittadinanzattiva)
The role of pain as indicator in hospital accreditation	Guy Hans (BPS)
Health indicators in practice	Leonie Mallmann, (BPA - Bundesverband privater Anbieter sozialer Dienste e.V.)

We discussed

- Directive 2011/24/EU on the Application of Patients' Rights in Cross-border Healthcare grants European citizens the right to access treatment in another EU member state, if required.
- Art 8.5 foresees that an objective assessment of 'the degree of the patient's pain' must be used to assess the right to cross-border healthcare.
- Common quality indicators for the measurement of pain are needed to set criteria for granting access to cross-border healthcare, in member states.
- Quality indicators could focus on
 - Structure – e.g. availability of dedicated personnel
 - Processes – e.g. use of regular pain assessments
 - Outcome – e.g. pain intensity, side effects, functional interference
- Best practice examples exist, in terms of national laws (e.g. Italy, Spain) and existing projects around Europe (e.g. Pain Out project)
- The possibility to start working on a European Reference Network could be discussed

To implement the Cross-border Healthcare Directive, we recommend ...

1. The European Commission should investigate the implementation of Article 8 paragraph 5 of Directive 2011/24/EU to assess whether patients are able to access treatment based on the 'the degree of pain' experienced.
2. The European Commission should follow up on commitments made by national governments at the informal Council of EU Health Ministers in Milan, 22 September 2014, by using quality indicators on pain management to facilitate the sharing of best practice.
3. If not already done, national governments should review their national legislation implementing Article 8 paragraph 5 of Directive 2011/24/EU to ensure it fully meets their commitments under EU law.
4. National governments should make the organisational changes required to ensure that patients are granted their rights in full, including establishing quality indicators to set criteria for granting access to cross-border healthcare.
5. National governments should establish an official committee, including the involvement of civil society organisations, to assess the state of implementation of Directive 2011/24/EU in their member state.

We also recommend ...

6. National governments should prioritise pain care within basic medical training, the education of nurses, and all healthcare providers
7. The European Commission and national governments should initiate pan-European and national patient education programs and information campaigns in order to create public awareness of the short- and long-term consequences of undertreated pain symptoms during hospital stay, reduce the stigma and increase self-management.
8. National governments should establish programs through which hospitals can acquire technical modalities, including eHealth solutions, to facilitate the assessment and re-assessment of pain in hospitalised and ambulatory patients.
9. The European Commission and national governments should set clear a framework on how to promote the assessment of pain, how to facilitate the creation of national and pan-European data registries and hence the exchange of experiences and creation of international guidelines.
10. National governments should establish strategies on the implementation of recording of pain assessment while dedicating sufficient financing to the modalities required by hospitals and healthcare institutions for this purpose, and should ensure that health records, including electronic health records pay due regard to pain.



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