

Educating Health Care Professionals: Converting Knowledge into Practice



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FACETS



**Focused and Customized
Education Topic
Selections
in Pain Management**



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Legal Terms & Conditions for Using This Program: FACETS of Pain Management

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FACETS Development

- Topics
 - Based on healthcare professional requests and identified learner needs
- Modules
 - Utilize principles of adult learning
 - Contain evidence-based, referenced slide content with speaker notes
 - Authored by Medical Liaisons, Purdue Pharma L.P.



Benefits of FACETS

- Designed to accommodate various learning needs, objectives and venues
- Case based/interactive format facilitates assimilation into practice
- Modules may be selected to customize the educational experience
- Respects time of busy healthcare providers
 - Each module may be presented in 15-20 minutes



FACETS Module Highlights

- Modules each:
 - contain 8-12 referenced slides
 - detailed speaker notes
 - include 1-2 program objectives and a brief program description
- Each module may be presented in as little as 15-20 minutes
- Modules may be combined to adjust length of educational offering



From Education to Bedside: Changing Practice Behavior



Barriers

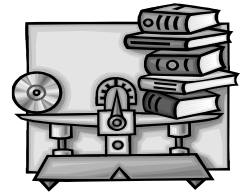
Strategies



Educational Format

Customize to accommodate:

- Learning needs
- Objectives
- Venue
- Audience



Educational Format continued

Customize to accommodate:

- Learning needs
- Objectives
- Venue
- Audience



How do we educate?



- Formal
 - Lecture
 - Lecture w/Q & A
 - Case discussion
 - Non human media
- Informal
 - Case discussion
 - Discussion groups
 - Consultation
 - Documentation



There can be no knowledge without emotion. We may be aware of a truth, yet until we have felt its force, it is not ours. To the cognition of the brain must be added the experience of the soul.

- Arnold Bennet (1897)



What Motivates the Adult Learner?

- Social relationships
- External expectations
- Social welfare
- Personal advancement
- Escape / Stimulation
- Cognitive interest



Lieb S. Principles of Adult Learning, Vision, Fall 1991.
<http://honolulu.hawaii.edu/intranet/committees/FacDevCom/guidebk/teachtip/adults-2.htm>

Critical Elements of Learning

- Motivation
- Reinforcement
- Retention
- Transference



Lieb S. Principles of Adult Learning, Vision, Fall 1991.
<http://honolulu.hawaii.edu/intranet/committees/FacDevCom/guidebk/teachtip/adults-2.htm>

FACETS Interaction/Assimilation

- Case Studies
- Complex Scenarios
- Thought provoking discussion questions
- Others



Principles of Adult Learning

- Valid experience
- Goal oriented
- Relevancy oriented
- Need to identify own learning needs
- Non-threatening environment
- Clear expectations



Lieb S. Principles of Adult Learning, Vision, Fall 1991.
<http://honolulu.hawaii.edu/intranet/committees/FacDevCom/guidebk/teachtip/adults-2.htm>

Principles of Adult Learning (continued)

- Retain information best when application available
- Want specific feedback
- At risk for information overload
- Learn best with a variety of teaching methods



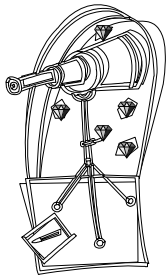
FACETS in Pain Management Opportunities for Use

- Large audiences at local, state regional, and national meetings
- Small audiences at hospitals, health systems, society meetings
- Inservices
- Grand rounds
- New employee orientation
- Construct a pain management series
- Develop partial or full day symposium



“Leadership appears to be the art of getting others to want to do something you are convinced should be done.”

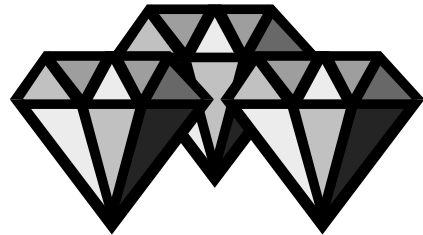
- Vance Packard



A Glimpse at a Module: Facets of Pain Management



Facets of Pain Management



What is Pain?

Pain is defined as “an unpleasant sensory and emotional experience associated with actual or potential tissue damage or described in terms of such damage.”



Federation of State Medical Boards of the United States, Inc. *Model Policy for the Use of Controlled Substances for the Treatment of Pain*. Eulesss, TX: 2004. Available at www.fsmb.org

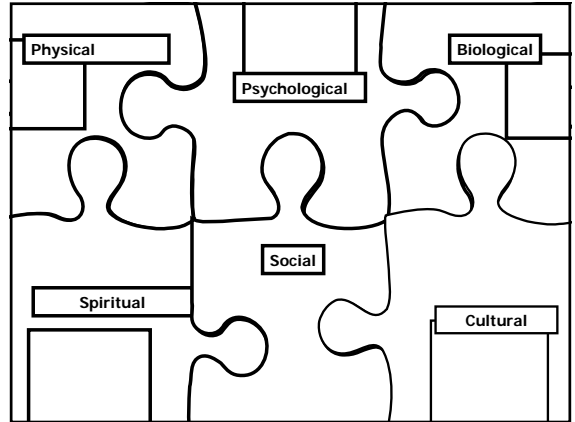
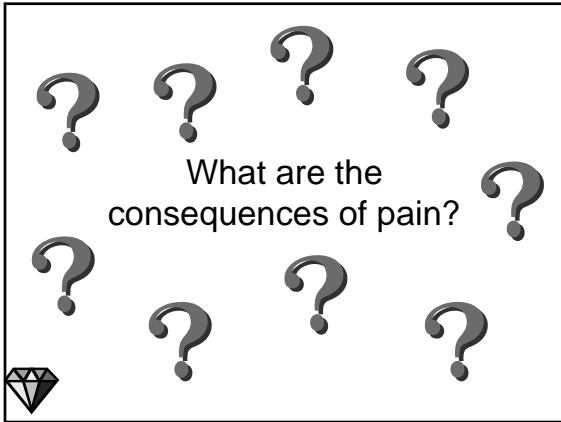
Pain in America

Under-treated – or untreated pain – is a national public health problem


- Affects ~57% of Americans live with chronic pain.⁽¹⁾
- A leading reason people seek medical care. ⁽²⁾
 - the primary presenting symptom in > 80% of all physician visits. ⁽³⁾
- Consumes \$100 billion annually in healthcare, compensation, and litigation ⁽⁴⁾
- Attributed to a myriad of social, economic, political, legal, and educational factors ⁽⁵⁾
- Has far reaching consequences



¹Research! America, Peter D. Hart Research Associates, July 15-19, 2003. ²Turk DC. Clinicians' attitudes about prolonged use of opioids and the issue of patient heterogeneity. *J Pain Symptom Manage*. 1996;11:218-230. ³American Academy of Pain Medicine and the American Pain Society. The use of opioids for the treatment of chronic pain: a consensus statement from the American Academy of Pain Medicine and the American Pain Society. *Clin J Pain*. 1997;13:6-8. ⁴NIH Guide: New Directions in Pain Research 1998. On line at http://www2.nih.gov/grants/qa/qafiles/Pa_98-402.html. ⁵Federation of State Medical Boards of the United States, Inc. *Model Policy for the Use of Controlled Substances for the Treatment of Pain*. Eulesss, TX: 2004. Available at www.fsmb.org




Pain Management Requires an Interdisciplinary Pain Management Team




Scenario: ST

- 54 year old female
- Elementary school teacher, married, 2 children ages 15 & 17
- 12 year history diabetes, bilateral lower extremity peripheral neuropathy
- 5 year history rheumatoid arthritis
- Unable to work full time due to severe pain
- Expressing feelings of hopelessness



Pain upsets and destroys the nature of the person who feels it.

- Aristotle



Educational and Advocacy Resources



- Healthcare Professionals
- Patients and Caregivers
- Health Systems

www.partnersagainstpain.com

