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Dementia-Dutch version (PACSLAC-D)

Description: The Pain Assessment Scale for Seniors with Severe Dementia-Dutch version (PACSLAC-D) is a modified version of the original PACSLAC tool which was developed by a Canadian team. Both tools were developed for a nurse or caregiver to observe and assess common and subtle pain behaviors, though the shorter Dutch version does not require prior knowledge of the older adult before administering. The Dutch version is a direct observation scale with 24 items covering 3 subscales: facial and vocal expression (10 items), resistance/defense behaviors (6 items), and social-emotional aspects and mood (8 items). Each item is scored on a present/absent dichotomous scale. Subscale scores are summed to arrive at a total score ranging from 0 to 24.

Psychometrics: The PACSLAC-D was developed with factor analysis-guided refinement of the original 60 item PACSLAC. It is, therefore, highly correlated with the psychometrically sound PACSLAC. The tool has a reportedly high degree of sensitivity and specificity using suggested cut off scores. Internal consistency evaluations have supported very good ranges for both the overall tool and the subscales. Strong intra-rater reliability has been reported for the whole scale, but with less robust findings for subscales alone.

Languages and Settings: The PACSLAC-D is a Dutch only tool. It has been translated to English, but there are no known psychometrics to date. Studies of both this modified tool and the original tool have been limited to the nursing home setting.

Feasibility/Clinical Utility: No specific evaluations for feasibility or clinical utility have been reported. However, the tool developer reports minimal training of 30 minutes is required for use and for adequate reliability measures. Time for administration is reportedly no more than 5 minutes. A threshold score for determining the presence of pain is provided by the author.

Scoring and Interpretation: Simple instructions for scoring are provided at the beginning of the tool. Scoring instructions are available to improve interpretation, and cut-off scores have been evaluated and are provided.

Summary/Critique: The PACSLAC-D is a potentially clinically useful behavior checklist that is reportedly easy to use for assessing and monitoring changes in persons with dementia exhibiting behaviors associated with pain. Clinical utility is enhanced with minimal training requirements, scoring instructions and cut-off scores, though no evaluations of these aspects have been conducted. Further validation of proposed cut-off scores are needed. Additional studies of English translations with larger English-speaking samples and/or increased diversity in settings, ethnicity and cultures, and levels of pain severity would also be valuable.

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