Chronic Pain Management Redesign Program: Palo Alto Medical Foundation

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PROJECT OVERVIEW

Project Goals:
- To improve the management of chronic pain within a healthcare delivery system

Project Activities:
- Healthcare provider education ("boot camps")
- Electronic Health Record (EHR) tools
- Chronic Opioid Therapy (COT) report
- Opioid Shared Medical Appointment (SMA)

PROJECT SETTING

Palio Alto Medical Foundation (PAMF):
- A part of Sutter Health
- 1 M patients seen annually
- Geographically dispersed

Target Populations:
- 450 PAMF providers and 3800 COT Patients
  - 800 with high MED

PROVIDER Education BOOT CAMPS

Educate on new paradigms:
- Shift culture to focus on treatment goals and functional restoration
- New Medical Board of California opioid prescribing guidelines
- New EHR tools for documentation of guideline compliance

Provider Reach:
- 200 providers attended 4 boot camps in-person (or by WebEx)

Outgrowth:
- "Mini boot camps" at department meetings preferred to evening meetings, even if no CME credit, focused on tools.
- Grand Rounds held on urine drug testing (UDT)

COT REPORT

- ID’d patients & providers with 3 consecutive months of opioid Rx; and MED distribution (Fig 1)
- "Proto Dashboard" became actionable: providers can send pts to SMA; batch CURES checks; send high MED pts for consults
- Encourages variation reduction (GET THE RED OUT!) (Fig 2)

KEY FINDINGS

- Providers interested in "how" to change chronic pain management, rather than "why"
- Providers have some insecurity around care of COT patients – want more specialist resources/support
- COT report can serve as a variation reduction tool
- Most COT patients are not using dangerously high opioids doses, but risk assessments are not complete
- Use of EHR tools and improved documentation of pain encounters followed state introduction of new regulatory scheduled substance prescribing guidelines and regulations
- The Opioid SMA fulfills informed consent per CDC guidelines; resulted in improved patient confidence; and patients were generally satisfied with the program.

CHANGING CULTURE

Lessons Learned:
- Resistance to change is significant
- No one-size-fits-all approach
- Lean methodology for rapid cycle revisions is appropriate
- Identify “carrots” and “sticks” to leverage influence

PROJECT HAS OPENED DOORS

- PAMF launched a Pain Consultation Service in Aug 2016 as a prototype of a fully-integrated service
- The Opioid SMA was a big win, generating more interest in group appointments. Coming soon….
  - Buprenorphine SMA (May '17)
  - Experience of Pain SMA (Jul '17) led by a pain psychologist
  - Neurobiology of Pain (TBD) led by a pharmacist
- Collaborations
  - California Health Care Foundation
  - Quest Diagnostics
  - Community addiction services

DISSEMINATION ACTIVITIES

Sutter:
- PAMF P&T to create policy regarding standards for pain management
- Collaboration with other affiliates on standards for UDT

External:
- Health Care Systems Research Network (HCSRN) Annual Meeting; March 21-23, 2017 (San Diego, CA)