Stepped Care Model for Pain Implementation

“Medically Ready Force...Ready Medical Force”
Disclaimer

The views expressed are those of the author and do not reflect the official policy of the Department of Defense (DoD), the U.S. Public Health Service, or the U.S. Government.

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Objectives

At the end of this presentation, participants will:

2. Understand how upcoming Stepped Care Model for Pain implementation pathway intends to operationalize the DHA-PI 6025.04.
Task: Implementation of DHA-PI 6025.04

Stepped Care Model for Pain pathway to implement DHA-PI 6025.04 Pain Management and Opioid Safety in the Military Health System (MHS) dated June 8, 2018 aims to:

- Enable Clinical Communities to provide evidence-based pain management guided by clinical practice guidelines.
- Effectively treat acute and chronic pain.
- Promote non-pharmacologic treatment of pain.
- Prevent acute pain from becoming chronic.
- Minimize use of opioids with appropriate prescribing and risk mitigation.
Clinical guidelines can help improve providers’ professional practice and quality of care, and may empower patients to make more informed choices.

Presence of guidelines does not necessarily mean recommendations are followed. In a Dutch observational study, for example, GPs followed guidelines in 61% of relevant decisions.

Complexity matters. Guidelines have a greater chance of being used when easy to understand, can easily be tried out, do not require specific resources...

Uh oh!


SCM for Pain Implementation
Work Group Members

- Defense Health Agency and Tri-Service clinical subject matter experts
  - Primary care managers
  - Pain specialists
  - Health psychologists
  - Nurses
  - Pharmacists
- Analytics subject matter experts
- Enabling groups:
  - Defense and Veterans Center for Integrative Pain Management (DVCIPM)
  - Psychological Health Center of Excellence (PHCoE)
  - Uniformed Services University and external academia

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Clinical pathway:
“a documented sequence of clinical interventions, placed in an appropriate timeframe, written and agreed to by a multidisciplinary team. They help a patient with a specific condition or diagnosis move progressively through a clinical experience to a desired outcome.”

Operationalizing the DHA-PI 6025.04 Pathway will enable patient-centered medical home staff to:

1. Understand the patient variables that perpetuate pain.
2. Screen patients for pain using the Defense and Veterans Pain Rating Scale.
3. Complete a biopsychosocial assessment.
4. Provide pain education and collaboratively set treatment goals.
5. Create an evidence-based, comprehensive treatment plan to effectively treat acute and chronic pain; promote non-pharmacologic treatment; and prevent acute pain from becoming chronic.
7. Minimize use of opioids; assess and minimize risk when used.
8. Determine level of the Stepped Care Model; connect with team members.

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Pathway Implementation Components

- Algorithm/work flow
- Initial trainings
  - Champion training
  - PCMH training
  - IBHC training
  - Screener breakout training
  - Care coordinator breakout
- Follow-up support
  - Champion mentorship
  - Academic advising
  - Weekly training tid-bits
- Strategic messaging
- Job aids/tools for clinic staff
  - Tri-folds
  - Exit planning sheet
  - Talking points for providers
  - AHLTA TSWF updates
- Tools for champion
  - Mapping tool
  - Champion reporting tool
  - Implementation checklist
  - Data pulls
  - Feedback forms
  - Smart book

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Job Aids and Tools

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Exit Tool to Support Collaborating with Patient on a Treatment Plan

Your Pain Treatment Plan may include some of the following approaches:

- **Behavioral Health Modalities**
  - Cognitive Behavioral Therapy
  - Acceptance and Commitment Therapy
  - Mindfulness, Meditation
  - Problem solving therapy

- **Physical Modalities**
  - Physical therapy
  - Occupational therapy
  - Complementary and Integrative Health therapies
    - Chiropractic, Acupuncture, Yoga, Massage
    - Biofeedback

- **Interdisciplinary Programs**

- **Self-Management**
  - Education about pain
  - Physical activity/movement
    - Stretching, walking
    - Strengthening
    - Pool/Aquatics
    - Yoga, tai chi
    - Pacing
    - Posture
  - Restful sleep
  - Healthy eating
    - Weight management
    - Heat/ice
    - Foam roller
    - Self massage
    - Tobacco cessation

- **Therapeutic injections**
  - Trigger point injection
  - Radiofrequency nerve ablation
  - Epidural steroid injection
  - Joint injection

- **Medications**
  - Your provider will determine if medications are recommended for you

Approaches that overlap indicate an important component of self management.

Figure courtesy of Dr. Diane Flynn

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Select Implementation Strategies Incorporated into Pathway

Use of multifaceted implementation interventions are more likely to be effective than single interventions.¹

Stepped Care Model for Pain implementation incorporates a number of implementation strategies, including:

- Mapping of current clinic practices to desired practices.
- Use of local champions.
- Provider/team education.
- Audit and feedback.
- Assessment of/intervention for local barriers.
- Reminders (electronic health record, job aids and tools).

Questions?
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