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Introduction to Six Building Blocks

A Team-Based Approach to Improving Chronic Pain Management in Primary Care Clinics

Our Mission

Together with our partners, we work to improve health and create a better health care system so that people and communities will flourish.

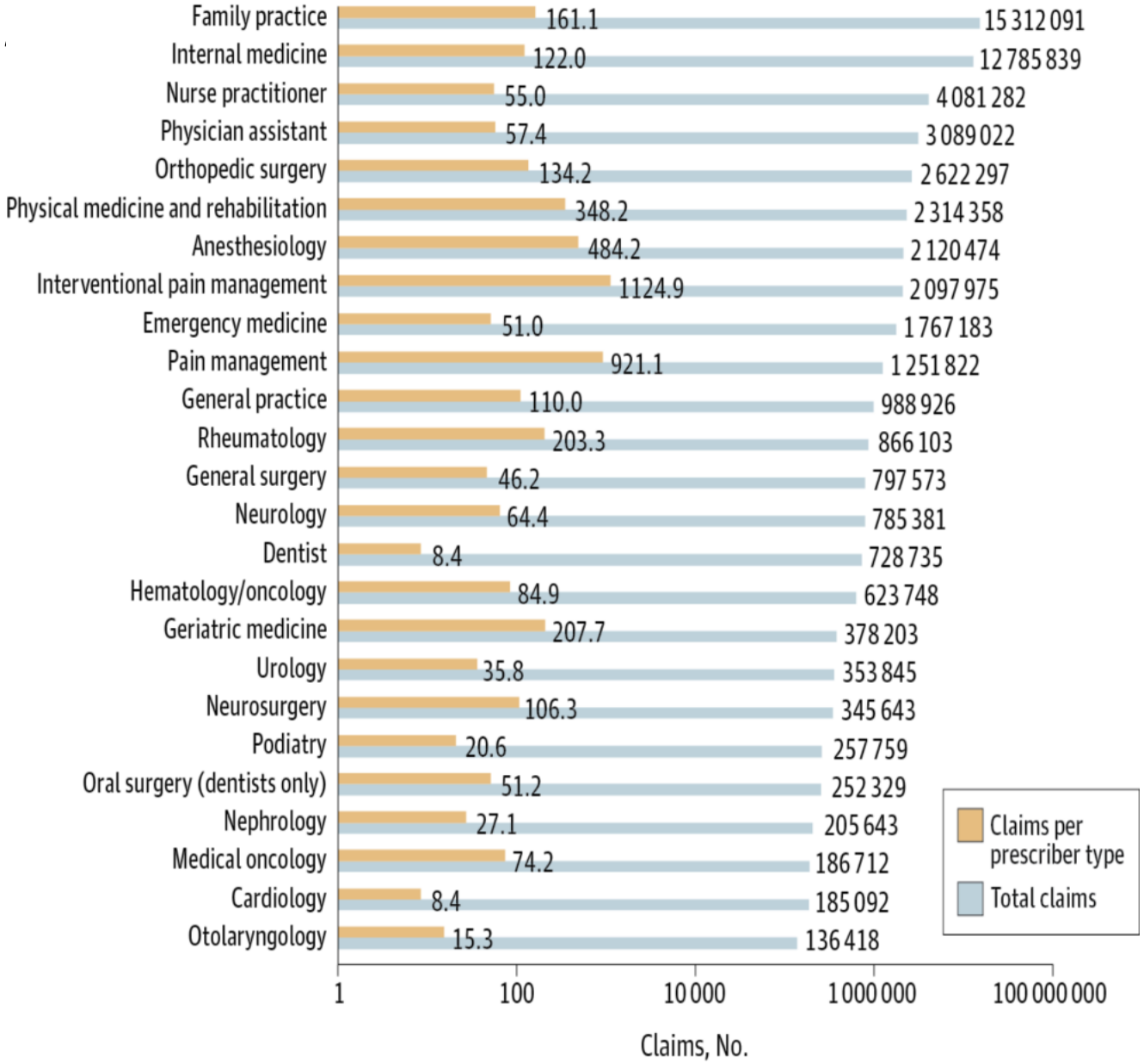
Our Mission Re: Opioid Work

To promote safe prescribing practices, decrease opioid use and improve behavioral health outcomes.

Why Six Building Blocks

Chronic Pain & Opioids in Primary Care

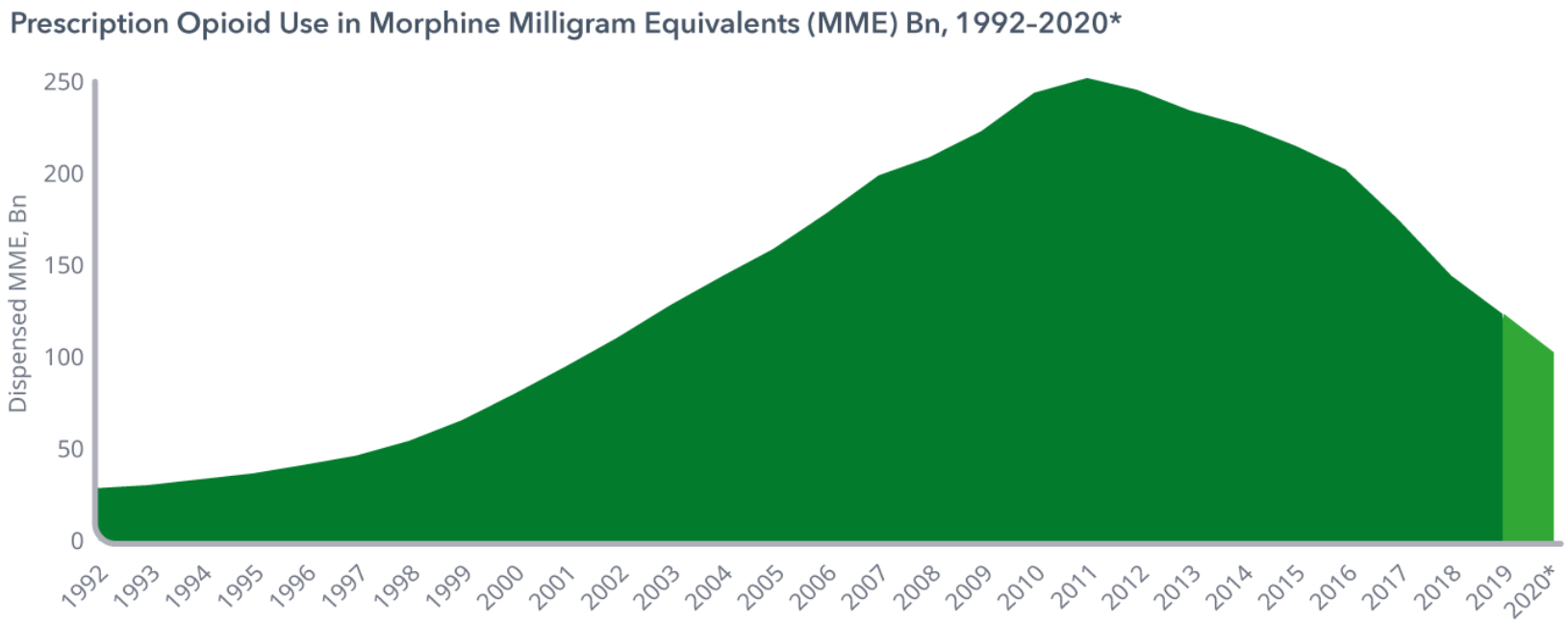
- Most opioids are prescribed by primary care providers
- We are unlikely to address this iatrogenic epidemic without addressing the source



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Chen JH, Humphreys K, Shah NH, Lembke A. Distribution of opioids by different types of Medicare prescribers. JAMA Intern Med. 2016;176:259–61.

Opioid Prescribing Trends



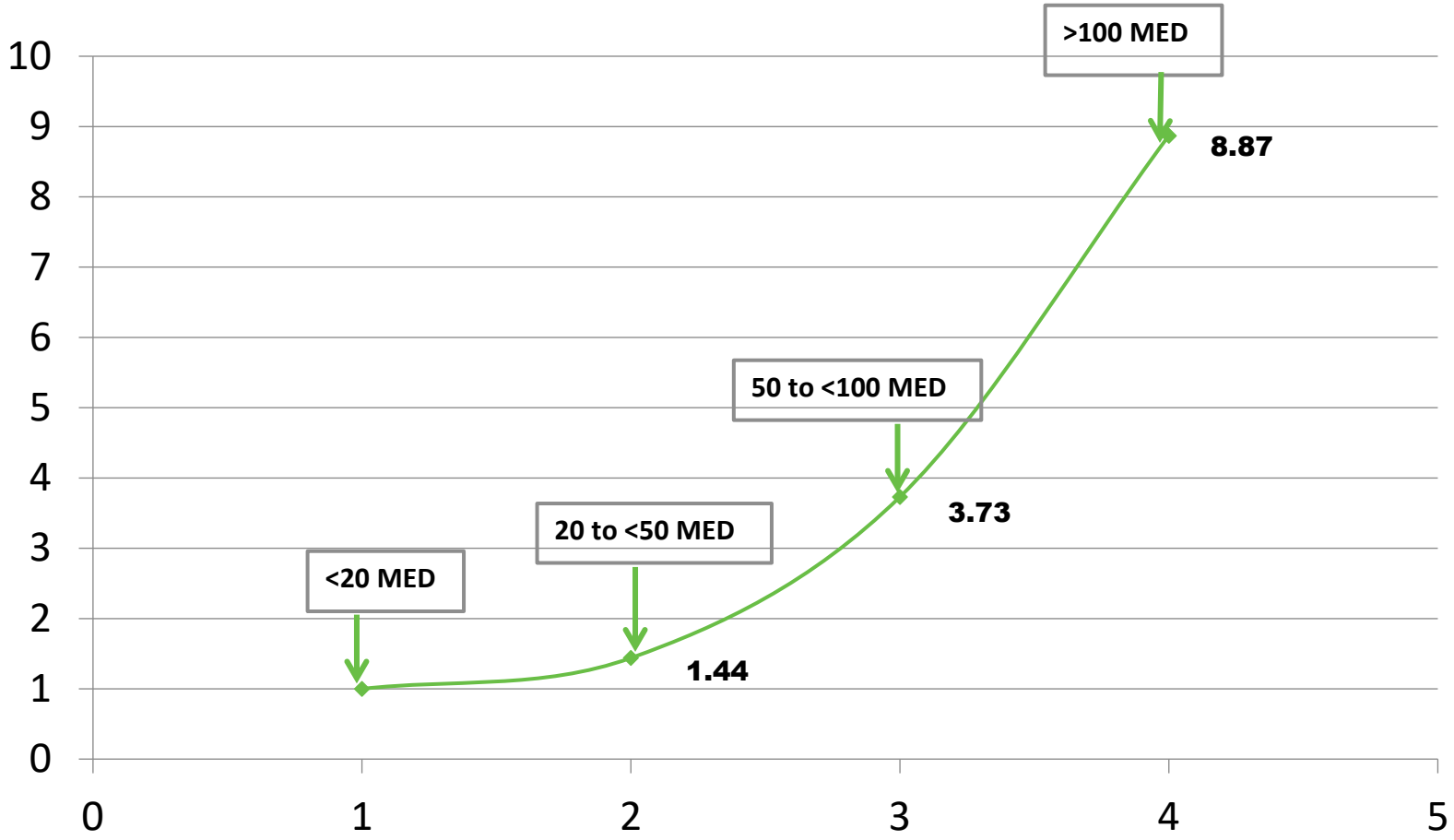
Source: IQVA Xponent, Mar 2020; IQVIA National Prescription Audit; IQVIA Institute, Nov 2020

Exhibit Notes: Historical NPA archive data for periods 1992-2005 combined with Xponent analysis for periods 2006-2020. 2020* includes data through September, and an estimation of Q4 2020 data based on previous year trend. Analysis is based on opioid medicines for pain management and excludes those medicines used for medication-assisted opioid use dependency treatment (MAT) or overdose recovery. Opioid medicines are categorized and adjusted based on their relative intensity to morphine, called a morphine milligram equivalent (MME), see Methodology. [1]CDC Prescription Opioid Data. Accessed Oct 2020. Available from: https://www.cdc.gov/drugoverdose/data/prescribing.html

Report: Prescription Opioid Trends in the United States. IQVIA Institute for Human Data Science, December 2020.

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Opioid Overdose Risk



Dunn et al Ann Intern Med 2010

Overdose Fatalities



130

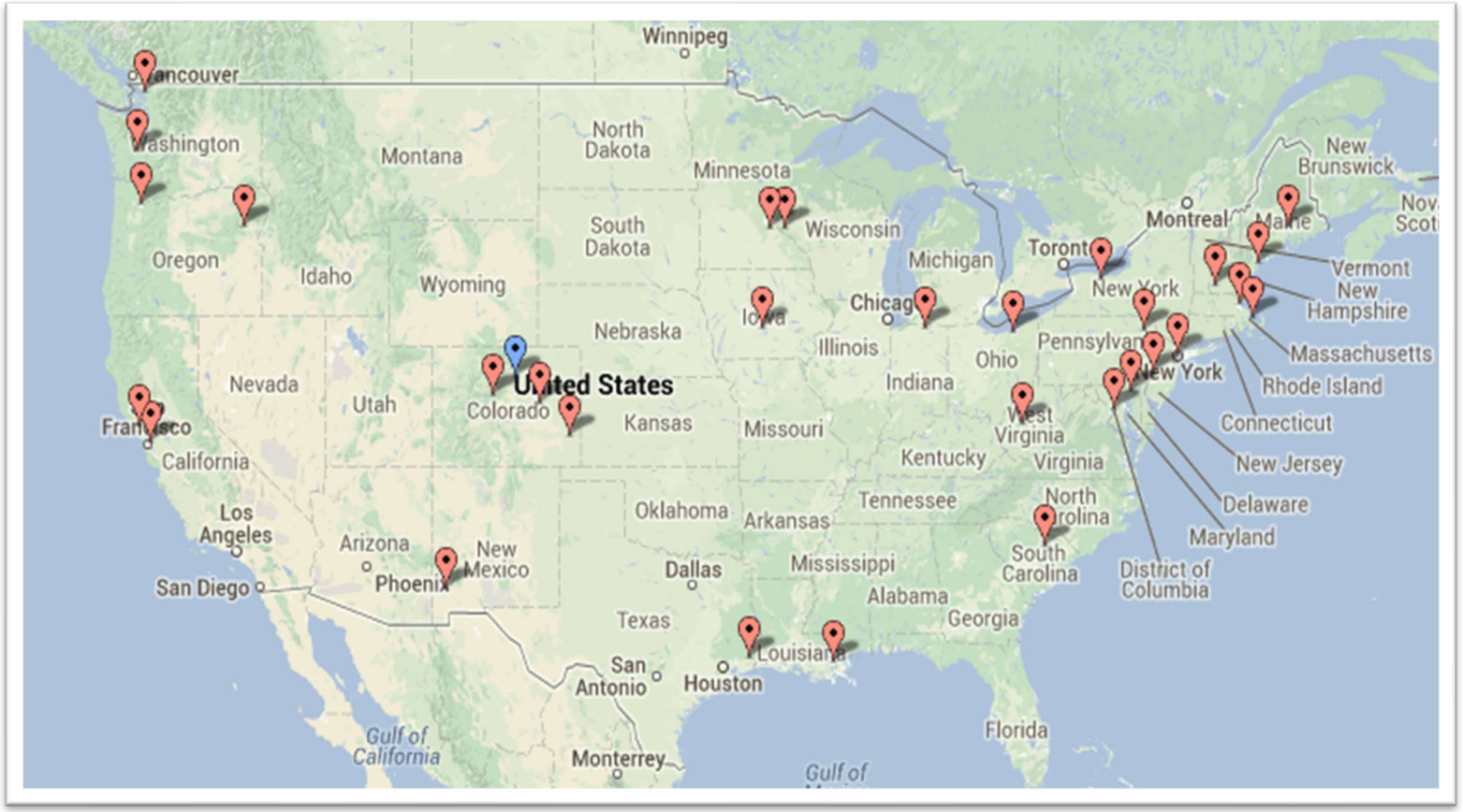
AMERICANS

die every day from an
opioid overdose
that includes
prescription opioids
and heroin

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Best Practices Inform Opioid Management Program

The Six Building Blocks are derived from observations of approaches taken among 20 primary care practices across the U.S. that were identified as having exemplar, team-based clinical innovations.



Learning from Effective Ambulatory Practices (LEAP) study: http://www.jabfm.org/content/30/1/44.full#abstract-1

Six Building Blocks Identified



Leadership and consensus
Demonstrate leadership support and build organization-wide consensus to prioritize more selective and cautious opioid prescribing.



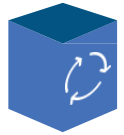
Policies, patient agreements and workflows
Revise, align, and implement clinic policies, patient agreements and workflows for health care team members to improve opioid prescribing and care of patients with chronic pain.



Tracking and monitoring patient care
Implement proactive population management before, during and between clinic visits of all patients on long-term opioid therapy.



Planned, patient-centered visits
Prepare and plan for the clinic visits of all patients on long-term opioid therapy. Support patient-centered, empathic communication for care of patients on long-term opioid therapy.



Caring for patients with complex needs
Develop policies and resources to ensure that patients who develop opioid use disorder and/or who need mental/behavioral health resources are identified and provided with appropriate care, either in the primary care setting or by outside referral.



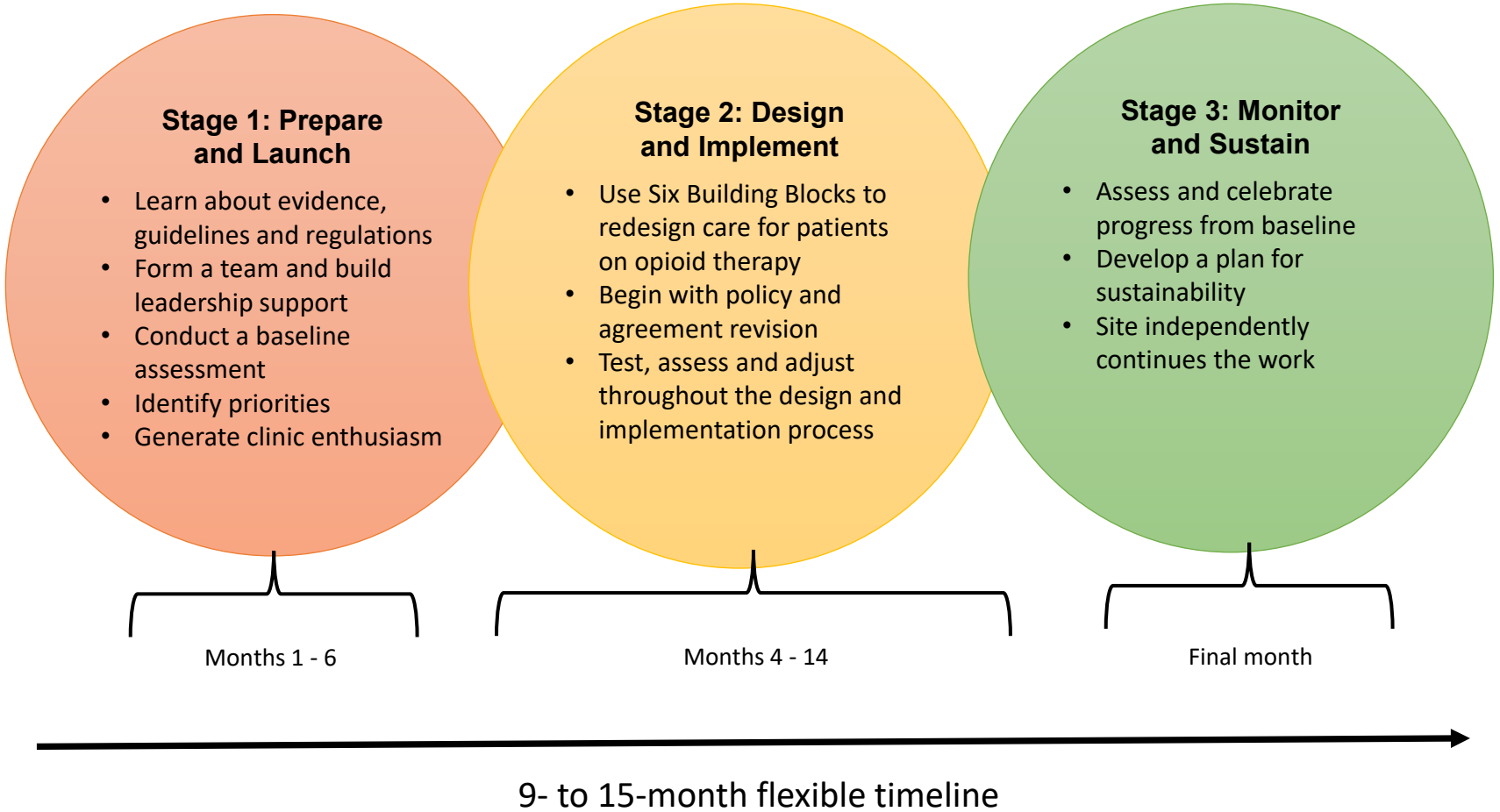
Measuring success
Continuously monitor progress and improve with experience.

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Primary Care Clinic Re-Design for Prescription Opioid Management: https://www.jabfm.org/content/30/1/44

The Six Building Blocks Program Study



Support provided along the way

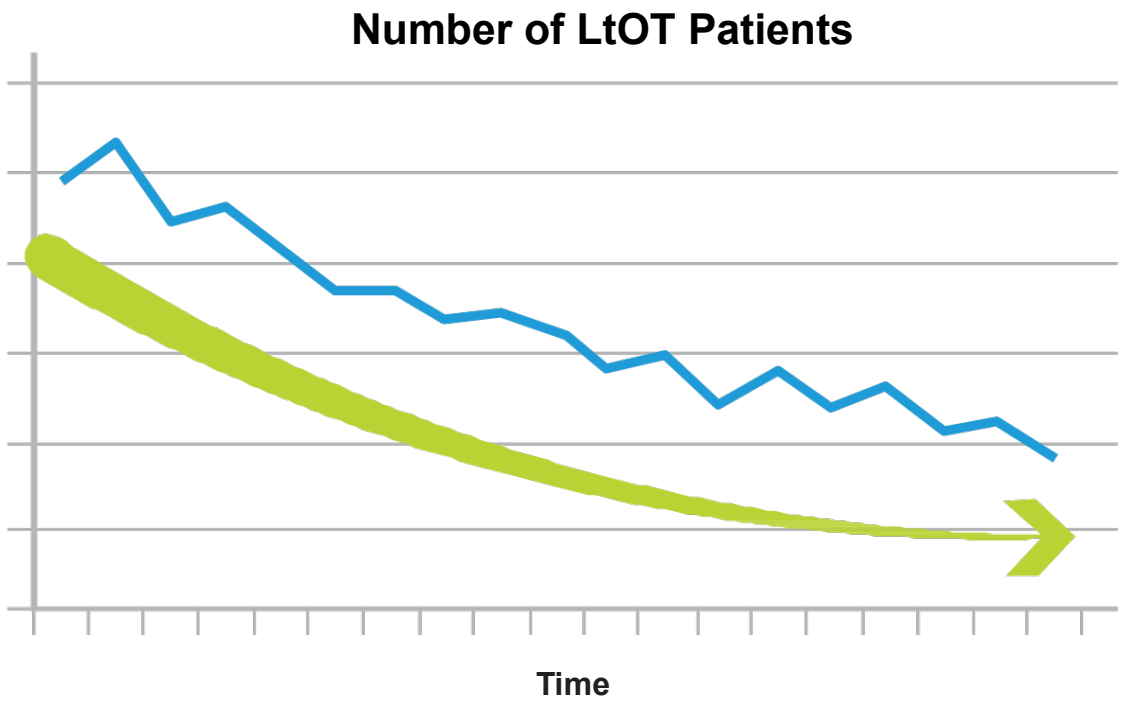
- Clinic-wide kickoff to facilitate discussions on the Six Building Blocks self-assessment
- Ongoing guidance from a practice coach to support the opioid improvement team in developing and implementing action plans
- Monthly shared learning calls at which all clinics share lessons learned and help problem-solve challenges
- Provision of resources: policy, patient agreement, workflows, tracking approaches, patient education, etc.
- Clinical education through UW TelePain

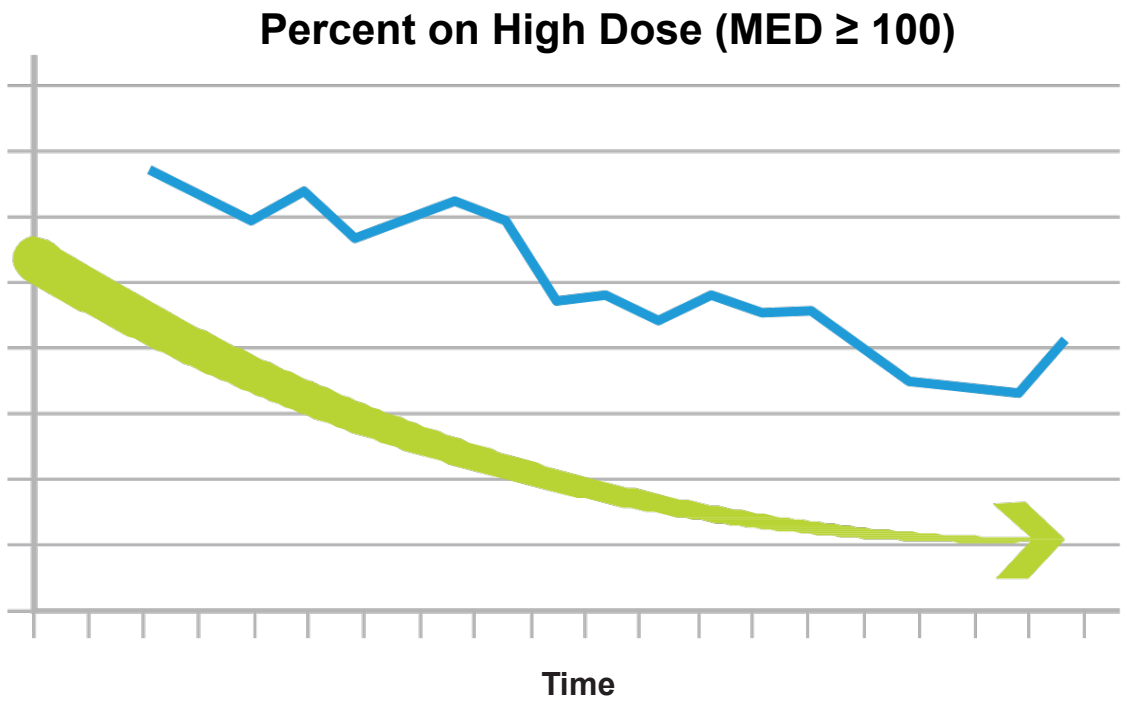
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“I feel like our patients are safer and there’s less disruption in the practice.”

Prescribing Outcomes

The number of patients using long-term opioid therapy (LtOT) and the proportion on high-dose opioids decreased.





Team-Based Clinic Redesign of Opioid Medication Management in Primary Care: Effect on Opioid Prescribing: https://www.annfammed.org/content/17/4/319.long

Clinician and Staff Experiences

Improved work life

- Increased confidence and comfort in caring for patients with chronic pain
- Increased collaboration and teamwork across the clinic
- Decreased stress in providing care to patients using long-term opioid therapy
- Improved relationships with patients using long-term opioid therapy
  - Seeing patients were receptive to change
  - Fewer negative interactions



Staff and Clinician Work-Life Perceptions after Implementing Systems-Based Improvements to Opioid Management: https://www.jabfm.org/content/32/5/715.abstract?etoc

Spreading the Six Building Blocks Program

- Provide direct coaching to practices across Washington state through a contract with the Washington Department of Health
- Train quality improvement staff to coach clinics using the Six Building Blocks
- Lead a national shared learning webinar series aimed at fostering communication between departments of health and their partners working to reduce opioid overdose
- Host a learning collaborative on developing an MOUD program in collaboration with Public Health – Seattle & King County



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National Adoption of Program

- Adapted for the **Oregon Prescription Drug Overdose Project** funded by the Centers for Disease Control and Prevention
- Included in the implementation package for the **CDC Chronic Pain Guidelines**
- Included in the **SAMHSA Evidence-Based Practices Resource Center**
- Included in the **2018 Collaborative Care for Chronic Pain Report and Recommendations** from the Bree Collaborative

Thanks for spending time with us today!

If you think your clinic is interested in receiving support from our team or you'd like to have a conversation about next steps, please contact us at sixbb@comagine.org

The Six Building Blocks program has received funding from the Agency for Healthcare Research & Quality (R18HS023750 and HHSP2332015000013I), the Washington State Department of Health (Subcontract HED23124 of Cooperative U17CE002734, funded by the CDC), National Institute on Drug Abuse (Award UG1DAO13714), and the Washington State's Olympic Communities of Health. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of CDC, NIH, NIDA, the WA State Department of Health, or the Olympic Communities of Health.