Models for pain care delivery

- 11 articles (10 studies) included
- Most RCTs of fair-good quality (3 poor)
- Most had 12 month follow-up (range 6-18)
- Most used usual care control
- Baseline mean pain on 11-point scale: 5.1-7.7
- 9 diverse models
A Few Definitions

• Integrated Care
  • Multidisciplinary approach
  • Interfaces with and supports primary care
  • Not Integrative care (or CAM) though may incorporate

• Collaborative Care
  • Team-based
  • Population-based
  • Measurement-based
  • Key components
    • Self-management support
    • Delivery system redesign (addition of care management)
    • Decision support
    • Clinical information system facilitation
Principles of Effective Collaborative Care

- Patient-Centered Team Care / Collaborative
  - Team focused on patient’s goals
- Population-Based Care
  - No patients “falling through the cracks”
  - Specialists support care
- Measurement-Based Treatment to Target
  - Outcomes measured + stepped up care
- Evidence-Based Care
  - Psychosocial and pharmacological treatments
- Accountable
  - Reaching treatment targets

Principles of Effective Collaborative Care
Facilitated conversation with teams in each clinic: agreement on current state for each Building Block

1. Leadership & Consensus
2. Policies & Workflow
3. Population Health/Use of a Registry
4. Planned, Patient-Centered Visits
5. Complex Patients’ resources
6. Measuring Success
System Redesign through COHE

• Four quality indicators, representing occupational best practices, linked to physician payment incentives
  – Each time a physician performed a best practice he/she received added payment

• Community-based COHEs
  – Quality improvement (QI) activities:
    • Care coordination
    • Mentoring and CME for community MDs
    • Disseminate treatment guidelines and best practices information
    • Medical leadership

Collaborative Care

Primary Care Practice
- Primary Care Physician
- Patient
  +
- Mental Health Care Manager
- Psychiatric Consultant

Outcome Measures

Problem Solving Treatment (PST)
  Behavioral Activation (BA)
  Motivational Interviewing (MI)
  Medications

Treatment Protocols

Population Registry

Psychiatric Consultation

PHQ-9
Building Capacity. “Let Doctors be Doctors”

• Who needs to be on the Primary Care Team?
  • Pharmacy Support
  • Integrated Behavioral Health
  • RN Case Management
    • Centralized Resource
    • Embedded Nurse Navigator
    • Empowered, engaged support staff

• Available to the team?
  • Chemical Dependency
  • Social work
  • Community resources/ church/ other

• Standard Work!
  • Local Practice teams creating work flow that supports best practice.
    • This drives specific job expectations, skills training and skill task alignment.

• Accountable leadership, willing to invest in resource and training.
  • Support metrics and reliable dashboards that encourage performance.