

Developing an Action Plan for PCCDS to Address Opioid Use in Pain Management

PCCDS Opioid Action Plan Work Group (OAPWG) WG Charter, 3/16/18

Overview:

The AHRQ-funded [Patient-centered Clinical Decision Support Learning Network](#) (PCCDS-LN) is bringing together key stakeholders to identify ways to accelerate the creation, dissemination, and broad value generation from PCCDS approaches to the use of opioids in pain management that otherwise wouldn't happen or would happen much more slowly.

Desired WG Outcomes:

Primary Deliverable: By 1/31/19, develop, vet with key stakeholders, and publish a Roadmap/National Action Plan for leveraging PCCDS to broadly improve the use of opioids in pain management.

“Stretch” Goal: point to a set of specific, compelling instances where OAPWG activities and work products accelerated or improved development, dissemination, implementation, and successful use of PCCDS interventions to manage pain/opioid use.

WG Membership:

Representation from key stakeholder groups essential to delivering targeted achievements – see below. Aim for ~10-15 members, each of which will serve as both an informed representative of their respective stakeholder group, and a robust, bi-direction liaison with that group for input into the OAPWG’s activities and to facilitate spread and value delivery from OAPWG products.

Stakeholder Groups Represented in WG:

- Patient advocates/representatives
- Opioid use/pain management experts
- EHR vendors/EHRA
- CDS suppliers
- Care delivery organizations
- Pertinent related initiatives, e.g., AHRQ-funded CDS Connect, CHIME Opioid Task Force, other PCCDS-LN WGs: Trust Framework (TFWG) and Technical Action Plan (TAPWG)

WG Timeframe:

Form WG in March. Sunset WG at end of 2018 after accomplishments are reported, with option to continue at discretion of PCCDS-LN Steering Committee.

WG Starting Point Materials/Resources

- Activities/capabilities/tools/channels provided by WG members (*key execution drivers*)
- Draft PCCDS-enabled PCCDS Pain Management/Opioid Future State (attached)
- Detailed [MITRE Opioid CDS Environmental Scan](#) (ES) and Purdue summary ES (attached)
- PCCDS-LN channels/activities, e.g., website, webinars, membership communications

WG Activities¹/Timeline:

The workgroup will meet every 2 weeks, throughout the year. Assumes start date late March. Activities are planned as follows:

1. Vet draft use cases and vision, create consensus. **(Meetings 1 – 3, through May)**
 - Assess completeness, focus, appropriateness, stakeholder value; determine appropriate scope that aligns LN focus/scope, stakeholder needs, and greatest opportunity to add value for the use PCCDS in the opioid crisis.
 - Consider whether/how to modify vision/use case based on [CDC 12 recommendations](#) and CDS Connect efforts to implement them as CDS, and other relevant perspectives or initiatives advanced by WG members.
 - Identify vision/use case elements (especially specific PCCDS interventions) that will yield greatest value in improving pain management/opioid use.
 - Coordinate with related [CDS Connect](#) efforts.

Deliverable: vetted, prioritized future vision and priority use cases (initially) that will drive compelling, evidence-based functional requirements for enhanced PCCDS-enabled approaches to opioids/pain.

*Note that the output of this step will be used as an input for the TAPWG

2. Clarify current state, components currently in place and opportunities to leverage existing initiatives. Identify what progress/enablers/drivers can be leveraged for full realization of the action plan. **(meetings 4-5, June)**
 - Identify/prioritize current activities with greatest potential for advancing high priority use cases identified in the vision statement.
 - Leverage WG members to assess key initiatives in this space.
 - During this phase this phase the TAPWG will be working independently to identify technical solutions for priority use cases.
 - **Deliverable:** A document describing current state, enablers and drivers for realizing the vision statement, and key goals to pursue.
3. Develop initial Action Plan **(meetings 6 -10, through August)**
 - Begin analysis as soon as consensus elements of vision and related progress/drivers begin to emerge; expand and refine as more future vision and current state details take shape.
 - Action plan outlines specific steps WG will take (leveraging starting materials/resources noted above) to accelerate closing the gap between the current state and the state identified in the prioritized future vision elements.
 - i. For example, a CDC and/or CDC Connect opioid project may be generating PCCDS interventions that are central to the future vision. Influential CDS implementers might be interested in implementing these

¹ For each activity below, start first with internal work among WG members, then reach out more broadly to stakeholders from the WG member constituencies, broader LN stakeholders, and others as determined by the WG

in interventions, CDS content vendors might be interested in providing versions in their commercial offerings, EHR vendors might be interested in facilitating access to these interventions within their systems, standards developers might be interested in strengthening/applying standards to enable more widespread access to these interventions, etc.

- Potential synergies will be identified and defined during the semi-monthly WG web meetings, and outreach to pertinent key stakeholders between meetings. Includes developing approaches to address significant challenges, e.g., the heavy lift associated with addressing interoperability barriers.
- Coordinate with other LN WGs and activities.
- **Deliverable:** vetted initial action plan (i.e., high leverage, near term activities to realize future vision) and steps key stakeholders *are excited to execute*.

4. Refine Initial Action Plan (**meetings 10-14, through early-October**)

- Based upon stakeholder feedback, refine initial action plan.
- Identify where stakeholders have been able to advance aspects of the plan
- Fold in the findings of the TFWG and TAPWG.
- **Plan for presentation and discussion at the PCCDS-LN annual meeting**
- **Deliverable:** Refined AP incorporating all WG contributions and stakeholder updates, for discussion and refinement at PCCD-LN Annual Meeting.

5. Revisit all steps above, refine approach as needed (**meetings 15 – 20, through 1/19**)

- Incorporate input from annual meeting
- Draft manuscript and supporting materials for final AP
- **Deliverable:** Final Action Plan, including any compelling instances where WG activities have accelerated the development, dissemination, implementation, and successful use of PCCDS interventions for pain management/opioid use. Final Plan to be published prior to end of contract year 3 (Jan. 31, 2019)