

QUERINational Program

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Improving Pain-Related Outcomes for Veterans

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Overview

Among Veterans treated in the VA healthcare system, chronic non-cancer pain is highly prevalent (up to 50% of patients) and a major contributor to poor health-related quality of life. VA primary care teams—responsible for most chronic pain care—report feeling overburdened and under-resourced to meet the needs of these Veterans. Consensus recommendations from expert groups discourage sole reliance on pharmacologic strategies and encourage multi-modal approaches that support patient self-management and non-pharmacological interventions, while de-implementing risky prescribing practices such as high-dose opioid therapy and opioid-benzodiazepine combination therapy. Although efficacious non-pharmacologic interventions exist, determining which patients might be best served by which interventions is a challenge for primary care. Moreover, referral to specialty programs often is overly complex, time-consuming or even unavailable. To address needs for specific strategies and tools, the Improving Pain-Related Outcomes for Veterans (IMPROVE) QUERI program aims to:

- Develop and refine implementation facilitation strategies to increase access to and uptake of evidence-based, multi-modal pain management services;
- Evaluate the effectiveness of the implementation strategies on the uptake of evidence-based, multi-modal pain management services, with an emphasis on unburdening PACTs (Patient Aligned Care Teams) and conserving local resources; and
- Partner with VA Program Offices to support and evaluate programs and policy initiatives that promote safe, effective, patient-centered pain care.

Methodology

The IMPROVE QUERI works to develop, implement, and evaluate a consortium of inter-related and complementary pain management interventions that address cross-cutting quality gaps in pain care. This includes developing an informatics tool to support the proactive identification of patients through automated case finding and optimizing implementation through formative work, guided by the Consolidated Framework for Implementation Research, to identify factors that facilitate or hinder uptake of the interventions.

Findings and Anticipated Impact

The Academic Detailing (AD) to Improve Pain Management project identified best practices and lessons learned in the VISN 21 Pharmacy Benefits Management (PBM) AD program to help other VISNs implement opioid-related AD programs. IMPROVE QUERI provided guidance to National PBM's AD program on how to facilitate more successful implementation of academic detailing in the VA healthcare system. Suggested strategies included:

- Linking high-performing detailers with detailers at struggling sites,
- Providing education on best practices to struggling sites, and
- Conducting needs assessments for identification of sites with poor leadership engagement, to name a few.

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The Primary Care-Integrated Pain Support (PIPS) project studies the implementation of a pharmacist-led pain care program designed to decrease the number of Veterans receiving high-dose opioid and combination opioid-benzodiazepine therapy, while increasing engagement with non-pharmacologic pain treatment. Pre-implementation interviews revealed prominent themes, including both system- and patient-level barriers. PIPS is expected to help VA Primary Care align pain treatment with evidence-based, consensus recommendations with respect to opioid safety and multimodal pain care, thereby reducing the risk of serious opioid-related consequences while preserving patients' quality of life and functional status.

The Cooperative Pain Education and Self-management (COPES) project reaches Veterans without access to pain management resources by using technology to provide cognitive-behavioral therapy (CBT) in Veterans' homes. It is expected that the use of technology will facilitate wider access to CBT, especially in lower resourced areas, and to enhance the geographic reach of these services. Successful implementation of this system could provide a foundation for similar interventions, thereby increasing impact for Veterans with high-priority chronic conditions (i.e., depression, diabetes, and obesity).

IMPROVE QUERI strives to optimize safe and effective pain management through partnered implementation of personalized, proactive, patient-centered interventions that optimize access to multi-modal care.

**Safe and Effective
Pain Management**

*Academic
Detailing (AD)*

**Multimodal
Pain Care**

*Automated
Cognitive
Behavioral
Therapy*

*Pharmacist
Led Management
Strategy*

- Decrease unsafe opioid prescribing practices
- Increase engagement in non-pharmacologic care
- Increase access to care for Veterans in rural areas
- Improve AD processes

Operations Partner(s):

VA Pain Management, Primary Care, National Pharmacy Benefits Management (including Academic Detailing), VISN 21 (Sierra Pacific Network), Pharmacy Benefits Management, and the Office of Patient Centered Care & Cultural Transformation.