Understanding the Five Key Domains of Best Practice Pain Care and Making your Job easier: New Pain Education Tools for Oregon Providers and Patients

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Oregon Conference on Opioids and Other Drugs, Pain and Addiction Treatment
Bend, Oregon
May 29, 2019
Learning Objectives:

Learn communication strategies to better navigate difficult conversations about pain and to redirect a treatment plan that addresses the 5 key domains of best-practice pain care.

Learn about state-wide resources for pain education and treatment and apply tools to more effectively screen, educate and provide care for patients with persistent pain.
63 y/o female with fibromyalgia 20 years

**Medical Hx:** Complex history

**Pain Presentation:** Pain in multiple sites, including knees and low back, pain all over, moves around, worse with stress and cold weather

**Medication:** Methadone and benzodiazepine

**Sleep:** Poor sleep, untreated sleep apnea

**Physical/function:** Generally deconditioned, afraid to move because of pain

**Mental health hx:** Multiple issues & cognitive decline

**Social/work:** Supportive family and church, retired shopkeeper

**Nutrition:** Gained 40 lbs in last year

**Substances:** Personal and family hx of alcohol and substance abuse
How Pain Works

Old Model

[Image: A diagram of a human figure with a red 'x' indicating an incorrect model of pain.]
Key Points

• Pain is a multi-dimensional experience

• All pain is real pain

• Nociception is neither necessary nor sufficient for pain

• PAIN ≠ HARM

Adapted from material from G. Lorimer Moseley: Understand and Explain Pain course material 2010
Redirect conversations:

Away from eliminating pain

Towards:

Understanding Pain
Function
Quality of life
Living a meaningful life
Self-management
Goal of Treatment is to Help the Patient Increase Life

Treatment and increased self-efficacy
1. What number best describes your **pain on average** in the past week:

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<tr>
<th>0</th>
<th>1</th>
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<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
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<tbody>
<tr>
<td>No pain</td>
<td>Pain as bad as you can imagine</td>
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2. What number best describes how, during the past week, pain has interfered with your **enjoyment of life**?

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<th>9</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Does not interfere</td>
<td>Completely interferes</td>
<td></td>
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3. What number best describes how, during the past week, pain has interfered with your **general activity**?

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</table>

https://www.oregonpainguidance.org/resources/difficult-conversations/
What We Say Matters! Danger & Threat

MRI and X-Ray results

THREAT!

Fear of movement

Struggles in living with pain

Medication is the only thing that can help me

Copyright (C) 2016 Providence Health & Services
What We Say Matters: Safety & Hope

Understand pain

Sore, but safe

Quiet your worry

Normal age-related changes

Bring some FUN back in your life!

Copyright (C) 2016 Providence Health & Services
Prioritizing Care: Key Domains

- Key Concepts
- Strategies
- Resources
- Connecting with your patient

- Knowledge of pain
- Sleep
- Nutrition
- Mood
- Activity
Videos, written material and trackers

English, Spanish, Simplified Chinese, Vietnamese, Russian
WHAT IS THIS TOOLKIT?

This toolkit is a brief patient-focused education toolkit that reviews health promotion strategies in physical activity, sleep, nutrition, mood, and tapering as they relate to pain management. Learning is patient guided - they decide what domains to focus on and what aspects of the health promotion strategies to employ in their lives.

THE GOALS AND OBJECTIVES

This toolkit hopes to:

- Educate patients on how everyday behaviors can affect pain.
- Help reduce the patient’s pain through health promotion strategies.
- Provide patients with structure for their health behavior change.
- Empower patients to take control over their pain experience and treatment.
- Facilitate discussions between patients and their healthcare team and encourage communication.
- Compliment and not replace a treatment plan.

WHAT IS INCLUDED

- Clinician Guide: This guide reviews the components of the toolkit and provides clinicians with information on how to present the content to patients.
- Understanding Pain Handout: This is a brief introductory handout that briefly discusses what persistent pain is, and asks patients to identify domains in their life that they struggle with because of their pain. The domains they choose on this worksheet, informs which module they should begin with.
- 5 Pain Management Domain Videos: Each module starts with a 5-7 minute video that give background information on how pain interacts with the specific health domain and provides experiences from both clinicians and patients on how to improve them.
- 5 Pain Management Domain Learning Tool Handouts: Each module will have a 2-sided handout that is meant to explain what kinds of behaviors improve pain experience, and why.
  - Decision Making Checklist: The first side is a very quick list of health behavior that any patient can learn best practices from. They are also asked to select several health behaviors from this side that they want to employ in their lives.
  - Getting a Deeper Understanding: The second side of the learning tool is a more in-depth explanation of how pain and the health domain interact, what processes are often at play, and why the health promotion strategies work.
- 4 Pain Management Domain Worksheets: Each module ends with a worksheet that allows patients to track their progress in employing the health behaviors they chose from the decision-making checklist located in the corresponding learning tool. These include a sleep diary, food diary, ABCD stress diary, and physical activity planner. The tapering domain does not have a corresponding worksheet because it is a sensitive topic that should be navigated differently from patient to patient.

https://www.oregonpainguidance.org/resources/patient-education-toolkit/
Shared Decision Making Tool starts the conversation

UNDERSTANDING YOUR PAIN STORY

DEVELOPING A PLAN
1. My most important goal around pain is: __________________________

2. Below, circle the two things that represent some of the biggest part of your pain story:

   - UNDERSTANDING MY PAIN
   - REDUCING MEDICATION
   - MY THOUGHTS AND FEELINGS
   - MY PHYSICAL ACTIVITY
   - MY SLEEP
   - MY NUTRITION

3. Consider whether you’d like help with these things. If you would, what would you most like help with? __________________________
Understanding Pain Module

- Patient chooses physical activity
  - Physical activity video
  - Tips for getting back to activity
  - Physical activity planner worksheet

- Patient chooses nutrition
  - Nutrition video
  - Tips on nutrition
  - Food diary worksheet

- Patient chooses sleep
  - Sleep video
  - Bedtime tips
  - Sleep diary worksheet

- Patient chooses mood
  - Mood video
  - Tips for increasing positive thoughts and feelings
  - ABCD stress diary worksheet

- Patient chooses tapering
  - Tapering video
  - Tips for decreasing medication
Key domains: Knowledge of pain

- Knowledge of pain
- Sleep
- Nutrition
- Mood
- Activity
"We now understand some things about pain differently. And we know that when a person understands pain better, it can actually help in several ways. You may already know a great deal, but would you be willing to watch a video for a few minutes so that we can talk about it and build a plan together?"

See Resources or visit the Oregon Pain Management Commission (OPMC) for the Pain Care Toolbox
Tools for explaining pain

Written material/shared decision making

Videos

Understanding Pain: With Knowledge Comes Power

YOUR RELATIONSHIP WITH PAIN

At this moment, there are several things going on inside your body that affect how you feel. One of these things is pain. Pain is a warning signal that something might be wrong. It can be caused by injury, illness, or even emotional stress. Understanding pain is important because it helps you make informed decisions about your healthcare.

DID YOU KNOW?

- When people understand their pain, it decreases.
- All pain comes from your brain. That means that the brain makes sense of the input it receives from different parts of the body.
- Pain doesn’t always mean harm. For example, pain can be a protective measure, telling you to slow down or stop doing something that might cause further harm.
- Stress and pain are closely related. For example, reducing stress and changing your thinking patterns can help reduce pain.

References:

Key Domains: Activity and Pacing

- Activity and Pacing
- Knowledge
- Of pain
- Nutrition
- Sleep
- Mood
- Activity
Activity and Pacing: Connecting With Your Patient

"It's common to feel that you should avoid doing things when you are in pain but actually the opposite is true. Would you like to hear more?"

"We’re used to thinking that, if we feel pain, what we are doing isn’t safe. But actually, when you have pain that lasts a long time, it often means that your pain system has become overly protective."

"In this situation, the things we do in everyday life aren’t making our condition worse, even if what we are doing causes discomfort. As you begin to increase your activity and your body adapts to new challenges, you will probably feel sore and stiff, which is completely normal. Gentle movement will ease the soreness, over time."

"Remember, you are sore but safe."
Key domain: Activity

• **Gradual** return to activity to improve conditioning
• Pacing – **WORKING SMARTER NOT HARDER**
• Activity improves sleep
• **REMEMBER:** **YOU ARE SORE BUT SAFE**
• Doing more is more important than exercising
• Expect flare ups and learn to manage them with pacing
• Gentle movement, tai chi, therapeutic yoga, aquatic exercise, PT, OT
• Remember: **MOTION IS LOTION**
About Pacing

Pain Response – *With* Persistent Pain

New Potential Injury

Flare Up

New Pain Response

Activity Level

https://www.youtube.com/watch?v=hjenuiXDUZg
Key Domains: Sleep

- Knowledge of pain
- Sleep
- Nutrition
- Mood
- Activity
"One of the most important things you can do to decrease pain is to improve your sleep. Would you like to hear more?"

"Going to bed and getting up at the same time each day can reduce stress on your body and decrease pain."

"As little as 10 minutes of aerobic exercise, such as walking or cycling, can significantly improve nighttime sleep quality, mood, and energy level."

See Resources or visit the Oregon Pain Management Commission (OPMC) for the Pain
Key Domain- Sleep

Sleep – wake cycle often disrupted
Fatigue makes pain worse
Rest is essential to rejuvenate and repair tissues
Learning to calm the nervous system can promote rest
Teach sleep hygiene
Address sleep apnea
Sleep log could be helpful to see patterns
Refer for Cognitive Behavioral Therapy for Insomnia CBT-I (CBT-i coach)
Sleep: Tools

Video:

Why does sleep affect pain?
Getting restful sleep can make you feel energized, more active, more social, and reduce your cravings for unhealthy foods. Any of those improvements can help reduce your pain.
Focus treatment on these key domains

Key Domains:
- Knowledge of pain
- Sleep
- Nutrition
- Activity
- Mood
<table>
<thead>
<tr>
<th>Common Co-morbid Psychological Conditions w Chronic Pain</th>
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<tbody>
<tr>
<td><strong>Thought</strong></td>
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<tr>
<td>Anxiety &amp; PTSD</td>
</tr>
<tr>
<td>“I feel overwhelmed”</td>
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<tr>
<td>“I feel out of control”</td>
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<tr>
<td>“Nobody understands me”</td>
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<tr>
<td>“Nobody believes me”</td>
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<tr>
<td>Depression</td>
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<tr>
<td>“Last time I went to the park I had a flare up, I can’t do anything I enjoy”</td>
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<tr>
<td>“I feel guilty I can’t contribute to my family”</td>
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<tr>
<td>“I feel worthless”</td>
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<tr>
<td>Grief &amp; Loss of Identity</td>
</tr>
<tr>
<td>“I’ve always hard to be the best ___”</td>
</tr>
<tr>
<td>“Who am I now?“</td>
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<tr>
<td>“My daughter has to help me wash my hair and shave my legs”</td>
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<tr>
<td>“I use to be the provider for the family”</td>
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<tr>
<td>“I’ve lost my sense of independence”</td>
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<tr>
<td><strong>Emotion</strong></td>
</tr>
<tr>
<td>Anxiety &amp; PTSD</td>
</tr>
<tr>
<td>Fear</td>
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<tr>
<td>Depression</td>
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<tr>
<td>Grief</td>
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<tr>
<td>Grief &amp; Loss of Identity</td>
</tr>
<tr>
<td>Shame</td>
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<tr>
<td><strong>Behavior</strong></td>
</tr>
<tr>
<td>Anxiety &amp; PTSD</td>
</tr>
<tr>
<td>Withdraw from activity</td>
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<tr>
<td>Depression</td>
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<tr>
<td>Withdraw from activity</td>
</tr>
<tr>
<td>Grief &amp; Loss of Identity</td>
</tr>
<tr>
<td>Withdraw from activity</td>
</tr>
</tbody>
</table>
Our goal is to help people get their life back…
“Mood and pain can have a big impact on each other. Can I share some information with you?”

“With pain we tend to do less, socialize less and do fewer things we enjoy. This causes stress which affects our ability to manage pain and makes the pain feel worse.”

“Learning tools to manage stress, such as relaxation and mindfulness can help reduce pain.”

See Resources or visit the Oregon Pain Management Commission (OPMC) for the *Pain Care Toolbox*. 
Mood – Key Domain

• Depression, anxiety, PTSD, history of trauma, complex grief, isolation and stress can impact pain

• The brain interprets chronic pain as a chronic stressor and activates the body’s stress response

• The release of cortisol and pro-inflammatory cytokines can affect tissue regeneration, immune function and metabolic controls which can increase pain

• Decreasing pleasurable activities increases the focus on pain
YOUR WORDS MATTER! Negative thoughts about pain can lead to maladaptive coping and increased suffering and disability.

**Thought:** “I have DDD.” “My back is crumbling”

**Emotion:** fear

**Behavior:** seek additional medical treatment

**Idea:** change wording from “DDD” to “normal age related changes.”
Neuroplasticity

The ability of the brain to form and reorganize synaptic connections, especially in response to learning or experience or following injury.

Remember:
THE NERVES THAT FIRE TOGETHER WIRE TOGETHER
Calming the Nervous System

• Diaphragmatic breathing
• Mindfulness training
• Progressive muscle relaxation
• Visualization
• Self-hypnosis
• Biofeedback
• Sleep
• Movement (tai chi, yoga)
• Apps: Calm.com, Headspace.com, Insighttimer.com
Mood: Tools

Video

How do mood and thoughts affect pain?

Positivity is incredibly important in managing your pain. Positive thinking can help reduce negative feelings, pain, stress, and increase your motivation to make healthy choices.
Key domains: Nutrition

Nutrition

Knowledge of pain

Sleep

Mood

Activity
"What you eat affects your pain and should be a key part of our plan together. This is something you can do for yourself every single day. Would you like to hear more?"

"If you think of pain like a fire, a bad diet pours gasoline on the fire, and the good diet pours water on the fire. There are foods we often eat that actually increase our pain through inflammation, like processed foods. And, there are also foods that decrease inflammation and pain such as fresh vegetables."

"Are you aware of any things in your diet that aren’t helpful? Can you replace a couple of them with better choices? Is there a time when you remember having a healthier diet? What made that possible?"

See Resources or visit the Oregon Pain Management Commission (OPMC) for the Pain Care Toolbox.
Nutrition – Key Domain

• What we eat can throw fuel on the pain, affect energy level & make us feel worse

• Explore knowledge of healthy eating and cooking

• Understand barriers to eating healthier

• Dietary log can be helpful
Nutrition: Tools

Video

How can food affect your pain?
Eating healthy and nutritious food is important for many reasons. A big benefit is that food can increase your energy levels. If you have more energy, you can make changes in other areas like sleep, physical activity, and your mood and mindset.

TIPS FOR IMPROVING YOUR NUTRITION

1. Drink more water
2. Eat more plants and whole grains for fiber
3. Use sweeteners and salt in moderation
4. Eat more plant-based foods
5. Read food labels
Medication: Tools

Video

Why I should think about reducing my pain medication?

Reducing your pain medications may be the safest option for your pain management if:

- Your pain isn't getting much better even with more pain medication.
- The medication's side effects make it hard to function normally every day.
- You are prescribed both opioids and other high-risk medications like benzodiazepines.
- You have other health issues such as sleep apnea, pulmonary or lung disease, liver disease, renal disease, a tendency to fall, or you are over 65.

Getting ready to decrease your medication

- Communicate with healthcare staff about your goals for reducing your medication and ask them what other resources are available to help manage your persistent pain.
- About tapering to reduce the stress symptoms. Many people find this the safest method.

TIPS FOR DECREASING YOUR MEDICATION

- Make a mental plan during your medications reduction. The extra social support will help keep your mind and body in the best condition.
- Learn about therapies like cognitive behavioral therapy and mindfulness. Therapy can help stop negative thoughts and reduce stress or pain. Find your healthcare team about getting a referral to specialists in these therapies.

Getting support

- Improve your sleep quality by learning more about sleep hygiene or behaviors to help you sleep better.
- Playing active role in your care plan makes it more likely that you'll work with the team that sees you during your medication reduction process.
- Understand goals and track any issues of weight, food, or water to ensure you're not losing weight or gaining weight.

Taking care of yourself

- Set realistic goals for your medication reduction process.
- Be sure to drink plenty of water on a regular basis to stay hydrated.
- Review the steps to take for your medication reduction process.
- Talk to your healthcare team about your medication reduction plan.
RELIEF+: Preventing Opioid Harms in Older Adults

Sara Love, ND, Senior Project Manager, Comagine Health
Kevin Novak, MS, Research Assistant, Comagine Health

May 28, 2019
Funding for the Opioid Safety Special Innovation Project, titled RELIEF+, was provided by the Centers for Medicare & Medicaid Services (CMS HHSM-500-T0008).

Special Thanks
Qualis Health & HealthInsight have joined forces to do great things.

Together, we’re reimagining health care.
Who is Comagine Health?

- **Comagine Health**, formerly Qualis Health and HealthInsight, is a national, nonprofit, health care consulting firm. We work collaboratively with patients, providers, payers and other stakeholders to reimagine, redesign and implement sustainable improvements in the health care system.

- **Our Mission:**
  Together, with our partners, we work to improve health and to create a better health care system so that people and communities will flourish.
Disclosures

• Sara Love, ND: No actual or potential conflict of interest in relation to this program or presentation.
• Kevin Novak, MS: No actual or potential conflict of interest in relation to this program or presentation.
Learning Objectives

• This presentation is intended to enable participants to...

  • Recognize important caveats for treating pain in older adults

  • Locate the RELIEF+ Toolkit and be able to describe its components.

  • Understand how to use the RELIEF+ toolkit, and how it can address barriers to treatment.
Quick Overview of Topics Already Covered

- Biopsychosocial Model of Pain
- The Five Domains of Best Practice Pain Care
- How to treat pain in older adults
Older Adults and Pain

1 in 4 Community-Dwelling Older Adults experiences agonizing pain DAILY.
Prevalence of diagnosed pain conditions among U.S. adults in 2018, by age

Source
Kantar Health
© Statista 2019

Additional Information:
United States; Kantar Health (National Health and Wellness); as of 2018; 18 years and older; U.S. adults
What are your barriers to effective and safe pain management for older adults?

- Bio
- Psycho
- Social
- Logistics
- Clinic Specific
- Patient Specific
Biological barriers to pain management in older adults

- Reduced mobility and physical activity
- Changes in metabolism (pharmacokinetics)
- Genetic predispositions
- Changes in nervous system response (nociception)
- Comorbidities, many times leading to potentially dangerous drug–drug interactions
- Opioid Use Disorder
Psychological barriers to pain management in older adults

- Cognitive decline
- Depression and anxiety
- Fluctuations in mood
- Unaddressed psychological problems (e.g., PTSD)
- Beliefs around pain and when opioids are appropriate
Social barriers to pain management in older adults

• Loneliness and social isolation
• Lack of proper social support systems
• Disintegrating social networks
• Change of living settings
• Transportation challenges
Clinic barriers to pain management in older adults

• Technological challenges
  • Electronic health records
  • PDMP
  • MED calculators
• Workflow considerations
• Patient/family-centered goal setting
• Care coordination between settings
• Access to a variety of nonpharmacological care modalities
• Insurance considerations
Introducing “Resources Encouraging Lifestyle Interventions and Enhanced pain treatment for 55+” (RELIEF+)

https://healthinsight.org/relief-plus/
RELIEF+
Improving pain management and opioid safety for older adults (55+)

- **Target:** primary care providers, clinic staff, pain specialists, and behavioral health specialists
- **Program:** web-based / printable resources and online training

**COURSE MODULES**

Module 1: Communicating for Opioid Safety and Pain Management (Part 1)

Module 2: Best Practices for Pain Management: Nonpharmacological Approaches (Part 1)

Module 3: Best Practices for Opioid Safety: Prescribing and Monitoring (Part 1)

Module 4: Screening For and Addressing Opioid Use Disorder (Part 1)
Objectives of the RELIEF+ Toolkit

**Purpose**
- Empower primary care clinics to use an evidence-based, patient-centered approach to persistent pain management tailored for older patients (55+)

**Primary goals**
- Reduce risky prescribing practices
- Reduce opioid-related hospitalizations

**Secondary goal**
- Assess the cost-effectiveness and overall impact of two levels of clinic intervention
Training Videos

Eight online modules

Each video focuses on one of four topics:

- Communicating for opioid safety and pain management
- Nonpharmacological approaches for pain management
- Opioid prescribing and monitoring best practices
- Screening for and addressing opioid use disorder
RELIEF+ Website

- Access to the RELIEF+ Video Training Series
- Practice resources and printable materials
- Links to publicly available data and clinical resources
- 6 AMA PRA Category 1 Credits™ available

https://healthinsight.org/relief-plus
Expert Advisory Committee
How RELIEF+ can address barriers to pain treatment for older adults

<table>
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<tr>
<th>Barrier</th>
<th>How RELIEF+ Addresses</th>
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<tbody>
<tr>
<td>Biological Barriers</td>
<td>• Help clinicians understand biological changes in older adults, and adjust treatment plans to be more focused on gradual change.</td>
</tr>
<tr>
<td>Psychological Barriers</td>
<td>• Use motivational interviewing and communication techniques to dispel maladaptive beliefs about pain, and to help address underlying psycho-emotional problems.</td>
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</table>
How RELIEF+ can address barriers to pain treatment for older adults

<table>
<thead>
<tr>
<th>Barrier</th>
<th>How RELIEF+ Addresses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Barriers</td>
<td>• Being supportive as a clinician and staff. Encourage patients to engage in social activities and spend more time with friends and family.</td>
</tr>
<tr>
<td>Logistic Barriers</td>
<td>• Modify workflows as needed to streamline care, create patient-centered goals and continue to build relationships with community partners.</td>
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Questions?
Contact information

• Sara Love, ND  
  slove@comagine.org  

• Kevin Novak, MS  
  knovak@comagine.org  

This material was prepared by Comagine Health (formerly HealthInsight), the Medicare Quality Innovation Network-Quality Improvement Organization for Nevada, New Mexico, Oregon and Utah, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. 11SOW-OSSIP-19-04-OR  5/6/19
63 y/o female with fibromyalgia 20 years

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**Substances:** personal and family hx of alcohol and substance abuse
Shared Decision Making Tool starts the conversation

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2. Below, circle the two things that represent some of the biggest part of your pain story:

3. Consider whether you'd like help with these things. If you would, what would you most like help with? ____________________________
Questions
References:
OPMC/OPG Pain Education Toolkit
Activity


References:
OPMC/OPG Pain Education Toolkit
Mindset


References:
OPMC/OPG Pain Education Toolkit
Sleep


• CLINICIAN GUIDE: APPENDIX
References: OPMC/OPG Pain Education Toolkit
Nutrition


• 9. Silişteanu SC, Covaşă M. Reduction of body weight through nutrition intervention reduces chronic low back pain. In *E-Health and Bioengineering Conference (EHB)*, 2015 Nov 19 (pp. 1-
References:
OPMC/OPG Pain Education Toolkit
Tapering/Multi-domain

• Tapering

• Multi-Domain Sources
References


• https://www.cdc.gov/nchs/data/hus/hus06.pdf

References


Prescription Drug Monitoring Program

The Oregon Prescription Drug Monitoring Program (PDMP) is a tool to help healthcare providers and pharmacists provide patients better care in managing their prescriptions. It contains information provided by Oregon-licensed retail pharmacies.

Pharmacies submit prescription data to the PDMP system for all Schedules II, III, and IV controlled substances dispensed to Oregon residents. The protected health information is collected and stored securely.

Oregon-licensed healthcare providers and pharmacists and their staff may be authorized for an account to access information from the PDMP system. Bordering state licensed healthcare providers may also be authorized for access accounts. By law their access is limited to patients under their care.

The program was started to support the appropriate use of prescription drugs. The information is intended to help people work with their healthcare providers and pharmacists to determine what medications are best for them.

Information for the public

- Patient Rights
- Unauthorized Access/Improper Disclosure
- Patient Resources

Information for providers

- User Access and Registration
- PDMP Data Uploader
- Provider Resources
- Provider FAQs

Oregon PDMP Provider Portal
For password resets, call 666-205-1222.
Required Pain Management Education

Changing the Conversation about Pain:
Pain Care is Everyone’s Job

Oregon Pain Management Commission (OPMC)
Updated: January 2018

- Physicians
- Physician Assistants
- Nursing
- Acupuncture
- Psychologists
- Physical therapists
- Occupational therapists
- Chiropractic physicians
- Naturopathic physicians
- Pharmacists
- Dentists

www.oregonpainmodule.org
The Oregon Pain Website:  https://www.oregonpainguidance.org/
Pain and Opioids & Addiction ECHO
https://www.oregonechonetwork.org/
Lorimer Moseley—
*Tame The Beast—It's time to rethink persistent pain*

https://youtu.be/ikUzvSph7Z4
Motivational Interviewing resources
(Miller and Rollnick, 2009)

Motivational Interviewing Network:
https://motivationalinterviewing.org/

The Efficacy of Motivational Interviewing in Adults with Chronic Pain: A Meta-Analysis and Systematic Review
Dion Alperstein & Louise Sharpe  The Journal of Pain, Vol 17, No 4 (April), 2016: pp 393-403. “MI significantly increased adherence to chronic pain treatment in the short term...”

Motivational Interviewing for Healthcare Professionals - Online Education
College of Nursing at the University of Colorado
http://www.ucdenver.edu/academics/colleges/nursing/programs-admissions/CE-PD/Pages/Motivational-Interviewing-for-Healthcare-Professionals.aspx
Save the Date!

Trauma Informed Care in Oregon: Connecting people, practices, and communities

October 16-18, 2019 | Sunriver, Oregon

Resources for Implementing Trauma Informed Care

Find the resources you need as you implement trauma informed care. Browse state, local, and national resources on trauma informed care including materials and databases for health and behavioral health care providers. We’ve also included resources for community partners, family and youth organizations, and individuals and families.
Understanding Pain and What to Do About It in Less than 5 Minutes

Joint Pain Education Project video from the Department of Defense and Veterans Health Administration to learn more about chronic pain management.

https://www.youtube.com/watch?v=cLWntMDgFcs