

---

**Bree Collaborative | Collaborative Care for Chronic Pain Workgroup**March 9<sup>th</sup>, 2018 | 3:00-4:30**Foundation for Health Care Quality**

---

**Members Present**

---

Ross Bethel,\* MD, Selah Family Medicine  
Leah Hole-Marshall, JD, Washington State  
Labor and Industries (Chair)  
Mary Kay O'Neill, MD, MBA, Mercer  
Jim Rivard, PT, DPT, MOMT, OCS, FAAOMP,  
MTI Physical Therapy  
Nancy Tietje, Patient Advocate

Emily Transue, MD, MHA, Washington State  
Health Care Authority  
Mark Sullivan,\* MD, PhD, University of  
Washington Medicine  
Michael Von Korff, ScD, Group Health  
Research Institute

**Staff and Members of the Public**

---

Adam Burkey,\* MD, MSCE, Anesis Spine & Pain  
Care  
Mark Flanery, MD, MultiCare Auburn Medical  
Center, Washington State Society of  
Anesthesiologists

Christopher Tag Veal,\* MD, Pacific Anesthesia  
Ginny Weir, MPH, Bree Collaborative  
Alicia Parris, Bree Collaborative

\* By phone/web conference

**INTRODUCTIONS AND APPROVAL OF MARCH 12<sup>TH</sup> MINUTES**

---

Ginny Weir, MPH, Bree Collaborative, opened the meeting and those present introduced themselves. A motion was made to approve the minutes from the previous meeting.

*Motion:* Approve 2/09/2018 Minutes.

*Outcome:* Passed with unanimous support.

**BUILDING ON PRELIMINARY SCOPE OF WORK AND DEVELOPING FOCUS AREAS**

---

Leah Hole-Marshall, JD, L&I discussed the previous meeting and the results of voting on the Collaborative Care Matrix and viewed matrix 6 Self-Management Support:

- Self-care management as a more effective goal rather than changes to failures in the healthcare system
- Self-management was identified as a later subject for inclusion based on voting and present group consensus
- The group discussed the language
  - “Self-management” may give the patient the idea that they are being abandoned
  - Changed “self-management” to “supported self-management”
- Barriers that may render patients incapable of participating in self-management
  - Complexity of issues like homelessness, addiction etc.
  - Making a system that is responsive to individuals unique situations
- Group agreed to include patient education in the scope
  - Cultural shift to the importance of thoughts, emotions, and activities in managing chronic pain
  - Behavioral health as a resource
  - Setting up reasonable expectations for pain management
  - Value of the patient as a self-advocate

The group looked at another highly voted category 4.3 for possibility of inclusion:

- What type of expertise would be required for a case manager
- What the role of a case manager would need to be in order to be effective
  - Necessity for specific guidelines of expertise
  - Need for a point of contact for a team of disconnected experts to function together
  - Using the case manager as support when the patient is not able to participate in self-care
  - Being aware of the pitfall of setting up a person who simply makes connections to ineffective channels

Ms. Weir defined the goal of the group as a checklist for clinics to ensure provision of effective pain management and support. The group viewed matrix 4.2 and discussed:

- Providing Sustained support in trying alternative evidence based methods
  - Non-traditional pain management options that are evidence-based
  - Including services that are not traditionally included in health care
  - Local anesthetics to reduce pain
  - Lack of insurability as a barrier to non-billable methods
  - Ms. Hole-Marshall pointed that the group does not have the mandate to require insurance coverage but can make recommendations
- Bringing teams into existence rather than requiring trainings
- The group discussed exclusions from the matrix

**Action Item:** Ms. Weir asked the group to make a visual that would show the patient as the center of concentric care circles

**Action Item:** Michael Von Korff, ScD, Group Health Research Institute, will share his chronic pain toolkit he has been developing for the group to make additions to

- Looking for gaps in resources
- Ms. Hole-Marshall set the agenda for the next meeting that the group will begin with defining core elements of self-management support with more specificity to chronic pain

#### **NEXT STEPS AND PUBLIC COMMENTS**

---

Ms. Hole-Marshall asked for final comments and thanked all for attending. The meeting adjourned.