

The Bree Collaborative Spine/Low Back Pain Workgroup Charter

Problem Statement

Low back pain is a common, costly, and complex problem. It is one of the most common reasons for patients to see a physician and the leading cause of work-related disability and workers' compensation for people under the age of 45. Despite the availability of evidence-based guidelines, wide variation persists in the diagnosis and treatment of patients with low back pain. This variation results in the unnecessary use of expensive imaging and surgeries without improved outcomes. Changing provider practices in the area of low back pain is therefore necessary to improve health outcomes and reduce health care costs in Washington State.

Aim

To improve health outcomes and reduce unnecessary costs in the diagnosis and treatment of low back pain in Washington State.

Purpose

The purpose of the Spine/Low Back Pain (Spine) workgroup is to propose recommendations to the full Bree Collaborative on how to improve care for low back pain within the following three general strategies identified by the Bree Collaborative:

1. Focus initially on appropriate management of acute low back pain. Target "upstream" opportunities for the Bree Collaborative to improve care for acute low back pain and prevent its progression to chronic pain. ("Acute" is defined as the first three months of pain.)
2. Encourage widespread adoption of evidence-based practices and programs. Gather evidence-based guidelines and identify opportunities for the Bree Collaborative to endorse and otherwise support broader adoption of successful evidence-based programs, such as approaches focused on physical and occupational therapy.
3. Increase measurement and reporting for low back pain treatment outcomes. Promote the collection of process and outcome measures for low back pain care, including surgical treatments such as lumbar fusion, and participation in community registries.

Duties & Functions

The Spine workgroup shall:

- Present findings and recommendations in a report.
- Provide updates at Bree Collaborative meetings.
- Research evidence-based guidelines, emerging best practices, and current initiatives to improve outcomes and/or reduce health care costs for low back pain care.
- Consult members of WSHA, WSMA, other stakeholder organizations and subject matter experts for feedback.
- Create and oversee subsequent subgroups to help carry out the work, as needed.
- Post draft report on the Bree Collaborative website for public comment prior to sending report to the Bree Collaborative for approval and adoption.

Structure

The Spine workgroup will consist of individuals appointed by the chair of the Bree Collaborative, and confirmed by the Bree Collaborative steering committee. The Bree Collaborative members recommend including primary care providers, physiatrists, and physical therapists.

The chair of the Spine workgroup will be appointed by the chair of the Bree Collaborative.

The Bree Collaborative project manager will staff and provide management and support services for the Spine workgroup.

Less than the full Spine workgroup may convene to: gather and discuss information; conduct research; analyze relevant issues and facts; or draft recommendations for the deliberation of the full workgroup. A quorum shall be a simple majority and shall be required to accept and approve recommendations to the Bree Collaborative.

Meetings

The Spine workgroup will hold meetings as necessary.

The Spine workgroup chair will conduct meetings and arrange for the recording of each meeting, and will distribute meeting agendas and other materials prior to each meeting.

Spine Workgroup

Name	Title	Organization
Neil Chasan	Physical Therapist	Sport Reaction Center
Dan Cherkin, PhD	Head of Clinical Research & Researcher	Bastyr/Group Health Research Institute
Andrew Friedman, MD	Physiatrist	Virginia Mason
Leah Hole-Curry, JD	Medical Administrator	WA State Labor & Industries
Heather Kroll, MD	Rehabilitation Physician	Rehab Institute of WA
Chong Lee, MD	Spine Surgeon	Group Health Cooperative
Mary Kay O'Neill, MD (Chair)	Chief Medical Officer PNW	Cigna
John Robinson, MD	Chief Medical Director	First Choice Health
Michael Von Korff, ScD	Psychologist & Researcher	Group Health Research Institute
Kelly Weaver, MD	Physiatrist	The Everett Clinic
Committee Staff		
Steve Hill	Chair	Bree Collaborative
Rachel Quinn	Project Manager	Bree Collaborative