Alberta Pain Strategy

Alberta Pain Strategy Progress Update

April 2022



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This report has been prepared by Planning & Performance in partnership with the Strategic Clinical Networks and the Alberta Pain Strategy Steering Committee and Working Groups.

Contact

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Introduction

The Alberta Pain Strategy (2019-2024) was developed from December 2017 – fall 2019, and officially launched in October 2019. The strategy outlines 3 focus areas:

- Acute pain,
- Chronic pain,
- Opioid use in pain management,

as well as several priorities and actions within each focus area.

Since the launch of the Strategy, a new Steering Committee was established to oversee the work, and seven working groups were formed to complete much of this work. All work to date has been completed through a number of avenues, including:

- from existing resources within Alberta Health Services
- a Substance Use and Addiction Program grant from Health Canada (2019-2022)
- a Canadian Institute for Health Research Health System Impact Post-Doctoral Fellowship (2021-2023)
- the great work completed by a number of partner organizations both provincially and nationally.

This progress reports provides an update on what has been achieved over the course of the first 2.5 years of inception, what work is currently underway, and what else is planned over the next few years.



Acute Pain Focus Area Update

Priority	Key Actions (identified in APS)	Activities Fall 2019 – February 2022	Status
Appropriate Pharma- cologic Interventions	Develop provincial, standardized postoperative surgical and discharge analgesia order sets, and implement within Connect Care.	 Received Health Canada – Substance Use and Addictions program (SUAP) Grant Hired SUAP Grant Staff Established Acute Pain Working Groups Medication Policies Perioperative Pain Transitional Pain Perioperative Pain Management Environmental Scan 	Complete

	 Canadian Patient Experiences Reporting System analysis Surgical Sites Survey – access to evidence-based multimodal and multidisciplinary acute pain treatment provincially Revised Hip and knee Surgical Care Path 2022 Recommendations for elderly- friendly order set for Connect Care called EASE (Elder-friendly Approaches to the Surgical Environment) 	
	 Calgary Zone Grand Rounds – Surgery and Anesthesia March 2022 Alberta Surgery Forum - April 2022 Report Opioid Prescribing in Alberta Realigning Acute Pain Working Groups 	In Progress
	 Connect Care Enhance Perioperative Analgesic Order Sets Connect Care Enhance After Visit Summary/Patient Handouts Connect Care opioids advisory committee 	Future
Develop an unused opioid return program.	 Assessment of medication return programs Identify best and leading practices Support the development of an unused opioid return program in Alberta Health Services Develop Opioid Return Key Messages 	Complete

Multimodal	Implement	•	CADTH Reviews•Codeine for Orthopedic Patients•Codeine for osteoarthritis Pain•Codeine for osteoarthritis Extremity Pain•Codeine for Acute Extremity Pain•Codeine for Pediatric Patients•Codeine for Urological Patients•Codeine for Urological Patients•Provincial nursing governanceComplete
Pain Strategies	evidence-informed multimodal acute pain care across the province in the surgical context.	•	Provincial nursing governanceCompletedocuments – Clinical Policies andProcedures, Alberta HealthServicesCADTH Summary of Abstracts:Acute Pain and FunctionAssessment ToolsRapid Review by Provincial APMInitiative – In-Hospital FunctionalPain Assessment ToolsIASP RELIEF News Article:Making Sense of PainAssessment After Surgery
		•	Support implementation of provincial nursing governance documents for acute pain managementIn ProgressAcute pain and Function Assessment Tool Selection Through Solutions for Kids in Pain (SKIP) Alberta, reimplementing the Commitment to Comfort initiative in the Stollery emergency department by utilizing a multidisciplinary team (physicians, nurse, child life, knowledge broker, and patient partner) to create a proof of concept for acute presenting and procedural painIn Progress

		management in the pediatric emergency settingAcute Pain and Function	Future
		Assessment Tool Implementation	i uture
Patient, Provider, and Public Education	Improve and implement education in acute pain assessment and management to improve outcomes in the surgical context.	 SCNergy Article: Addressing the Opioid Crisis from a Surgical Perspective Pain management Resources - Patient and Health Care Provider Surveys 2021 Established CNE/nursing Working Group Established Education Subgroups Acute pain Chronic pain Opioids in pain management Current state assessment of available Education Resources and Repository Platforms Assessment and inventory creation of My Health Alberta Resources Through SKIP Alberta, created and disseminated resources related to safe opioid use for children and youth, including: Stollery "So you have been prescribed an opioid?" handout for youth receiving opioids in the emergency department setting Translating Emergency Knowledge for Kids (TREKK) infographic for clinicians TREKK infographic for caregivers 	Complete

	 Pain Education Learning Module Series (AHS and Covenant Health Nursing) Module 1: Understanding Pain Module 2: Enhanced Pain Assessments Module 3: Pharmacological Pain Management Module 4: Non- pharmacological Pain Management Poster Submission Canadian Pain Society Annual Scientific Meeting, May 2022 Education Resource Repository – My Health Alberta Page (Patient and Public) Education Resource Repository (Provider) – APS website IASP RELIEF News Article – Chronic pain after surgery as a priority Scientific Article: Development of the Alberta Pain Strategy: Facilitators, Barriers and a Framework 	In Progress
	 Patient and Health Care Provider Surveys 2022 Evaluate uptake, access, and use of repositories for both patients and providers 	Future
Develop a Pain Toolkit for family physicians.	 No additional resources available to support this work at this time 	Future
Improve pain education for healthcare	 Podcast Survey: Surgery, Pain Practices and Culture - Improve Pain Practices Surrounding Surgery by Addressing Culture 	Complete

	providers at multiple levels.	•	Through SKIP Alberta, collaborated with clinicians and patient partners to update over 130 resources on My Health Alberta related to painful pediatric conditions Monthly SKIP Alberta "Research Article of the Month" poster dissemination Monthly SKIP Alberta "Pain Fact of the Month" poster dissemination	
		•	Provincial Acute Pain Management Initiative Podcast Series for Providers	In Progress
Transitional Pain Service	Advocate for a fulsome evaluation and review of options related to	•	CADTH Rapid Review – Perioperative Pain Screening Tools	Complete
	the spread and scale of a transitional pain service.	•	Prototype: Alberta Preadmission Pain Screening Questionnaire	In Progress
	Work with zone committees who have received funding for transitional/opioid prescribing efforts in the community.	•	No work planned at this time	Future



Chronic Pain Focus Area Update

Priority	Key Actions (identified in APS)	Activities Fall 2019 – February 2022	Status
Access	Develop and disseminate a catalogue of pain resources to enable health system planning by AHS zone.	 Chronic Pain Education sub- group formed Chronic Pain Education sub- group reviewed all current My Health Alberta chronic pain related patient resources APS website developed and launched: <u>www.ahs.ca/albertapainstrategy</u> Models of Care Working Group developed an inventory of chronic pain services across the province 	Complete

	 Preliminary list of internal and external chronic pain education resources compiled Working with My Health Alberta to update all chronic pain patient resources and create a Pain-specific webpage within My Health Alberta Inventory of chronic pain services to be refined based on Spring 2022 survey to all chronic pain programs Review all provider chronic pain resources Identify any gaps in current patient and provider chronic pain resources and develop a plan to fill these gaps All provider chronic pain education resources to live on APS website Map of all chronic pain service locations to live on APS website 	In Progress Planned for 2022-2023 and beyond
Create a sustainable model for funded access to evidence- informed interdisciplinary services for people with pain	 Launched Models of Care and Interdisciplinary Access Working Groups AHS created the Rehabilitation Advice Line (RAL). This phone line allows trained physiotherapists and occupational therapists to provide advice and guidance to clients seeking rehabilitation services, including way finding of local offerings, and also provides rehabilitation services via telehealth. Clientele includes, but is not limited to, pain patients. 	Complete

		 Aligns closely with Provincial Approaches Priority. See further details below. CIHR fellow has begun to work with PCN pain programs to evaluate their model of interdisciplinary access. Partnership with Rehab Advice Line being explored. May be a potential framework to help achieve this priority. Not currently resourced to complete this work beyond what is outlined under Provincial Approaches below Will consider undergoing a fiscal mapping exercise Gain better understanding of current funding mechanisms and barriers Advocate for changes to funding mechanisms to better support 	In Progress Planned for 2022-2023 and beyond
Patient, Provider, and Public Education	Building on national initiatives, partner with universities, professional organizations, and healthcare employers to establish pain competencies and curricula.	 needs of patients and evidence- based practice Members of APS working groups contributed to the development of the Association of Medical Faculties of Canada pain curriculum, which was launched in 2021 Through a CIHR-funded project, members of APS working groups have contributed to developing a process to measure physiotherapy student pain competencies at the time of graduation 	Complete
		Many partnerships with regulatory bodies and university departments have been formed	In Progress

through the development of the APS, and are ongoing Work is now beginning through the Association of Medical Faculties of Canada to develop postgraduate (i.e. residency) curriculum and teaching resources • No additional work within the APS planned at this time. Future opportunities could expand pain competency work completed within physiotherapy to other health professions Planned for 2022-2023 and beyond Establish a provincial repository of evidence informed and provincially consistent pain assessment tools, treatment guidelines, and other useful resources. • Patients Experience Evidence Research (PEER) guideline for chronic non-cancer pain developed Complete • Chronic Pain Education subgroup. The collaboration with partners like SKIP Alberta, reviewing current My Health Alberta tools and guidelines for adult and pediatric pain and creating a Pain-specific webpage. In Progress • What are the evidence-based risk factors of patients at increased risk of developing post-surgical chronic pain? • What are the validated <u>precoperative</u> screening tools/asseesments for identifying patients who are at increased risk of developing post-surgical chronic pain?			
APS planned at this time. Future opportunities could expand pain competency work completed within physiotherapy to other health professions2022-2023 and beyondEstablish a provincial repository of evidence- informed and provincially consistent pain assessment tools, treatment guidelines, and other useful resources.• Patients Experience Evidence Research (PEER) guideline for chronic non-cancer pain developedComplete• Chronic Pain Education sub- group, in collaboration with partners like SKIP Alberta, reviewing current My Health Alberta tools and guidelines for adult and pediatric pain and creating a Pain-specific webpage.In Progress• What are the evidence- based risk factors of patients at increased risk of developing post-surgical chronic pain?In Wealth alberta tools and guidelines for adult and pediatric pain and creating a Pain-specific webpage.• What are the evidence- based risk factors of patients at increased risk of developing post-surgical chronic pain?In Wealth alberta tools and guidelines for adult and pediatric pain and creating a Pain-specific webpage.• What are the evidence- based risk factors of patients at increased risk of developing post-surgical chronic pain?In Wealth alberta tools and guidelines for adult and pediatic pain and creating a Pain-specific webpage.• What are the evidence- based risk factors of patients at increased risk of developing post-surgical chronic pain?In Wealth alberta tools and guidelines for adult and pediatic pain and creating a Pain-specific webpage.		 APS, and are ongoing Work is now beginning through the Association of Medical Faculties of Canada to develop postgraduate (i.e. residency) curriculum and teaching resources 	
repository of evidence- informed and provincially consistent pain assessment tools, treatment guidelines, and other useful resources. In Progress Group, in collaboration with partners like SKIP Alberta, reviewing current My Health Alberta tools and guidelines for adult and pediatric pain and creating a Pain-specific webpage. • Facilitating CADTH Rapid Reviews to answer the following questions: • What are the evidence- based risk factors of patients at increased risk of developing post-surgical chronic pain? • What are the validated <u>pre- operative</u> screening tools/assessments for identifying patients who are at increased risk of developing post-surgical		APS planned at this time. Future opportunities could expand pain competency work completed within physiotherapy to other	2022-2023
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	pain assessment tools, treatment guidelines, and other useful	 Chronic Pain Education sub- group, in collaboration with partners like SKIP Alberta, reviewing current My Health Alberta tools and guidelines for adult and pediatric pain and creating a Pain-specific webpage. Facilitating CADTH Rapid Reviews to answer the following questions: What are the evidence- based risk factors of patients at increased risk of developing post-surgical chronic pain? What are the validated pre- <u>operative</u> screening tools/assessments for identifying patients who are at increased risk of developing post-surgical 	In Progress

		 Identify outstanding resource gaps Develop provincial tools to fill gaps Identify appropriate location(s) for resources 	Planned for 2022-2023 and beyond
	Develop a public education campaign about chronic pain and its impact on patients and families. This should target audiences in all stages of life and offer concrete advice about how to support people with pain.	 Resources not currently available to support this action Cascaded Beyond Stigma video that was created by Lunenfeld- Tanenbaum Research Institute, Sinai Health. While focused on stigma around opioid-use disorder, also applicable to chronic pain patients. 	Planned for 2022-2023 and beyond
Performance Outcomes	Identify common outcome measures that will be shared openly and used uniformly across the province to guide	 Formed Outcome Measures Working Group Completed two rounds of surveys utilizing a Modified Delphi methodology 	Complete
	healthcare system design, patient care decisions, and development of	Confirming parameters based on survey results	In Progress
	research and education.	 Implementation of selected measures 	Planned for 2022-2023 and beyond
Provincial Approaches	Work with stakeholders across the province to develop and implement an interdisciplinary hub & spoke model for chronic pain in Alberta.	 Launched Models of Care and Interdisciplinary Access Working Groups Developed Inventory of Chronic Pain Services Created a Patient Engagement Subgroup to ensure patient perspective is embedded throughout model development 	Completed

 Completed literature review on patient barriers and needs for chronic pain services Facilitated a national environmental scan through CADTH to examine Models of Care for Chronic Pain. Found here: Models of Care for Chronic Pain: An Environmental Scan CADTH Applied for and received funding for two year CIHR post-doctoral Health System Impact Fellow (Sept 2021-Aug 2023) to lead Model development High-level provincial pain program framework developed by Steering Committee Revised language from hub-and-spoke to tiered model 	
 Facilitating a national customized literature review through CADTH examining the cost effectiveness and efficacy of chronic pain models of care Developing a chronic pain patient pathway within a four-tier model Disseminating a survey to all chronic pain programs to complete a current state assessment of service offerings across the province Determining what evidence- based services are must haves for all chronic pain patients Determine which providers can provide must have services 	In Progress Planned for 2022-2023
 Complete an evaluation of PCN Pain Programs 	and beyond

Develop a mentorship model for chronic pain and addictions to allow primary care-based teams to care for people closer to the patient's community within the Medical Home.	• • • • •	Determine where/which tier(s) each service should occur Determine provider role in diagnostic work-up process Determine workflow Economic analysis of services and model SWOT analysis and implementation considerations Environmental scan on complementary medicines The Alberta College of Family Physicians has developed The Collaborative Mentorship Network for Chronic Pain and Addiction (CMN) to building capacity and competencies within primary care related to chronic pain and addictions	Completed
Create navigation pathways for use by Health Link to guide people with pain to the right resources at the right time.	•	As mentioned above, AHS created the Rehabilitation Advice Line (RAL) in 2020. This phone line allows trained physiotherapists and occupational therapists to provide advice and guidance to clients seeking rehabilitation services, including way finding of local offerings and tele-rehab. Clientele includes, but is not limited to, pain patients. Once provincial resources and service inventory are developed, embed within current RAL	Completed Planned for 2022-2023 and beyond
	•	embed within current RAL resources Expand resource access to Health Link Expand to include all pain and opioid resources	

Advocate for the use of Connect Care (Epic) infrastructure and web- based platforms to make chronic pain tools and pathways available widely across	 APS members have ongoing membership on various Connect Care councils Manage my Pain Application currently being piloted using grant funding 	In Progress
the province.	 Alberta is actively involved in conversations with national partners on leveraging the release of a nationally available pain education platform in April 2022 Determine where current chronic pain tools exist within Connect Care and examine ways to better integrate APS work and recommendations within infrastructure 	Planned for 2022-2023 and beyond



Opioid Use in Pain Management Focus Area Update

Priority	Key Actions (identified in APS)	Activities Fall 2019 – February 2022	Status
Addressing Stigma with Special Reference to "Legacy" Opioid Patients	Develop a pathway for treatment for those individuals who have been using opioids long term, which would be different from the pathway of treatment for those who are newly	 In a collaborative effort, developed an Agreement in Principle: Alberta's Care Plan for Chronic Pain Patients on Long-Term Opioid Therapy. Available here: <u>Agreement-in- Principle-2-0-final.pdf (cpsa.ca)</u> The Rural Community Opioid Outreach Program (RCOOP) was one of 29 projects providing funding through Alberta Health to support local, community-driven opioid 	

being prescribed opioids.	public awareness and education outreach sessions	
	Cascading Beyond Stigma video that was created by Lunenfeld- Tanenbaum Research Institute, Sinai Health	In Progress
	 Agreement in Principle Implementation 	Planned for 2022-2023 and beyond
Establish peer navigators within the system who	This element is being considered within the development of the provincial chronic pain model	In Progress
are available for patients across the health continuum.	 No additional resources to support this work at this time 	Planned for 2022-2023 and beyond
Implement Green Zones or Urgent Opioid Pain Clinics across the province to provide services for those with chronic pain who have had difficulty accessing their medications. Develop an appropriate referral process for Physicians, including a telephone consultation to ensure the target patient population are those who have lost access to their treatments.	 No additional resources to support this work at this time 	Planned for 2022-2023 and beyond

	Use the fact that current guidelines all recognize the prime importance of non-opioid therapies for chronic pain to remove impediments to accessing them in both urban and rural areas. Make access to active physical therapy, exercise training and psychological therapy free of cost to those with chronic pain.	•	Embedded within chronic pain priorities of Provincial Approaches and Access and development of a provincial chronic pain model Co-chairing Connect Care Opioid Optimization Workgroup	In Progress
Indigenous Populations and Response	Develop an Indigenous- specific pain team or clinic to best meet the needs of the community, which could leverage community assets	•	A provincial grant to Native Friendship Centres provides new opioid crisis supports for Indigenous people. Includes support for four navigators to connect people with life-saving treatment, harm reduction, education, and culturally sensitive wraparound services	Complete
	to build local capacity, where appropriate.	•	No additional resources to support this work at this time	Planned for 2022-2023 and beyond
	Create a mobile access team that can provide treatment directly in community.	•	No additional resources to support this work at this time	Planned for 2022-2023 and beyond
Monitoring Use and Impact	Establish a notification system to remind patients to either dispose of any expired	•	Medication Policies Working Group was formed Completed assessment of medication return programs across the province and country	Complete

	medications or return them to their healthcare provider.	 Identified best and leading practices for medication return Developed Opioid Return Key Messages No additional resources to support notification system available at this time 	Planned for 2022-2023 and beyond
	Ensure that all patients have access to their	 Alberta patients can access some health information through My Health Records 	Complete
	own health information or health records, including and beyond, AHS.	 No additional work planned at this time 	Planned for 2022-2023 and beyond
	Establish at least one opioid deprescribing program in every zone.	 No additional work planned at this time 	Planned for 2022-2023 and beyond
	Ensure pharmacies across the province are able to provide Suboxone and naloxone, and practitioners are appropriately trained.	 No work planned at this time 	Planned for 2022-2023 and beyond
Pathway Development	Ensure all PCNs have an interdisciplinary team available to support patients with chronic pain, as well as ensure chronic pain support is provided as a core service.	The further examination of this service delivery model (among others) is embedded within the work of the Models of Care Advisory Group and the provincial chronic pain model development	In Progress

	Establish new funding models (i.e., ARP model) for physicians and/or healthcare time which would allow for the additional time required to manage complex needs.	•	A number of physicians are interested in joining a new provincial ARP for chronic pain as well as one for transitional pain. Application being submitted to re- allocate physician compensation to an hourly rate rather than per patient.	In Progress
Patient, Provider and Public Education	Utilize experts in knowledge translation and health technology assessment to create and maintain an easy- to access, constantly updated, database of the best evidence in pain treatment.	•	Patient and provider survey to determine needs and use of educational materials. Education Working Group established. My Health Alberta selected as platform for patient and public education materials.	Complete In Progress
	Establish a network of pain and addiction specialists that are available via telephone or telehealth for every physician in Alberta.	•	Service could be possible under a provincial Pain Program	Planned for 2022-2023 and beyond
	Partner with the CPSA, CARNA and Alberta College of Pharmacy to	•	National Association of Medical Faculties of Canada developed content for residents across the country	Complete

ensure core competency licensure includes pain and opioid management, and opioid deprescribing.	 No additional work planned at this time 	Planned for 2022-2023 and beyond
Ensure the Province's Medical, Pharmacy, and Nursing schools publish the type and quantity of education in pain and addiction medicine provided to students.	No work planned at this time	Planned for 2022-2023 and beyond