## Alberta Pain Strategy – Progress At-a-Glance

April 2022

## Legend

Shading indicates area of priority	Current status	
Acute Pain	Complete	
Chronic Pain	Partially complete	0
Opioid Use in Pain Management	In progress	
	Not started	

Priority	Action	Status
Appropriate Pharmacologic Interventions	Develop provincial, standardized postoperative surgical and discharge analgesia order sets, and implement within Connect Care.	0
	Develop an unused opioid return program.	
Multimodal Pain Strategies	Implement evidence-informed multimodal acute pain care across the province in the surgical context.	0
Patient, Provider, and Public Education	Improve and implement education in acute pain assessment and management to improve outcomes in the surgical context.	0
	Develop a Pain Toolkit for family physicians.	
	Improve pain education for healthcare providers at multiple levels.	
Transitional Pain Service	Advocate for a fulsome evaluation and review of options related to the spread and scale of a transitional pain service.	
	Work with zone committees who have received funding for transitional/opioid prescribing efforts in the community.	
Access	Develop and disseminate a catalogue of pain resources to enable health system planning by AHS zone.	0
	Create a sustainable model for funded access to evidence-informed interdisciplinary services for people with pain	
Patient, Provider, and Public Education	Building on national initiatives, partner with universities, professional organizations and healthcare employers to establish pain competencies and curricula.	0
	Establish a provincial repository of evidence-informed and provincially consistent pain assessment tools, treatment guidelines, and other useful resources.	0
	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.	•





Priority	Action	Status
Performance Outcomes	Identify common outcome measures that will be shared openly and used uniformly across the province to guide healthcare system design, patient care decisions, and development of research and education.	0
Provincial Approaches	Work with stakeholders across the province to develop and implement an interdisciplinary hub & spoke model for chronic pain in Alberta.	
	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.	•
	Create navigation pathways for use by Health Link to guide people with pain to the right resources at the right time.	0
	Advocate for the use of Connect Care (Epic) infrastructure and web-based platforms to make chronic pain tools and pathways available widely across the province.	0
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 being prescribed opioids.	•
	Establish peer navigators within the system who are available for patients across the health continuum.	•
	Implement <i>Green Zones</i> or <i>Urgent Opioid Pain Clinics</i> 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.	
Evidence - Informed Options and Current Guidelines	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.	
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 to build local capacity, where appropriate.	•
	Create a mobile access team that can provide treatment directly in community.	•

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Monitoring Use and Impact	Establish a notification system to remind patients to either dispose of any expired medications or return them to their healthcare provider.	•
	Ensure that all patients have access to their own health information or health records, including and beyond, AHS.	
Opioid Dependency Treatment	Establish at least one opioid deprescribing program in every zone.	
	Ensure pharmacies across the province are able to provide Suboxone and naloxone, and practitioners are appropriately trained.	
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.	
	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.	
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.	
	Establish a network of pain and addiction specialists that are available via telephone or telehealth for every physician in Alberta.	•
	Partner with the CPSA, CARNA and Alberta College of Pharmacy to ensure core competency licensure includes pain and opioid management, and opioid deprescribing.	•
	Ensure the Province's Medical, Pharmacy, and Nursing schools publish the type and quantity of education in pain and addiction medicine provided to students.	