

California Health Improvement Project (CHIP)

Integrative Pain Management:

Transforming Care for Chronic Pain in the San Francisco Health Network

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Problem Statement and Underlying Causes

Problem: Chronic pain is one of the most frustrating areas of primary care practice for both patients and providers.

Underlying Causes:

- Prescription opioids, the mainstay of chronic pain treatment, often do not improve patient function and quality of life and carry considerable risk of morbidity and mortality.
- Until recently, there has been a lack of awareness and availability of evidence-based, integrative pain treatment that have substantially limited effective treatments.



Project Description

Pilot a sustainable, **integrative pain management program** for patients with chronic pain that includes **physical rehabilitation** services; integrative health modalities such as **meditation, acupuncture and massage; pharmacy consultation; and behavioral health and peer support** interventions.

Goals and Objectives

Goals:

- Improve the functional status and well-being of patients with chronic pain
- Improve staff experience with managing chronic pain

Output-oriented Objectives:

- Convene Steering Committee by March 1, 2015
- Gather input from 30 patients by July 31, 2015
- Survey 75% of staff on experience with managing chronic pain by September 30, 2015
- Enroll 50 patients into the pilot by May 31, 2016
- Assess program acceptability and feasibility and its effect on patients' use of prescription opioids at 6 months after enrollment

Outcome-oriented Objectives:

- Improve participants' function and well-being by self-assessment by 20% at 6 months after enrollment
- Improve staff experience with providing care to patients with chronic pain by 25% at 6 months after the start of program

Outputs and Outcomes

Outputs Achieved:

- Obtained leadership buy-in at all organizational levels
- Convened multi-disciplinary Steering Committee
- Gathered patient input through key informant interviews

[The medications] made me gain weight. And are basically detrimental to your health overall. They only help so much, can only help you get so far.

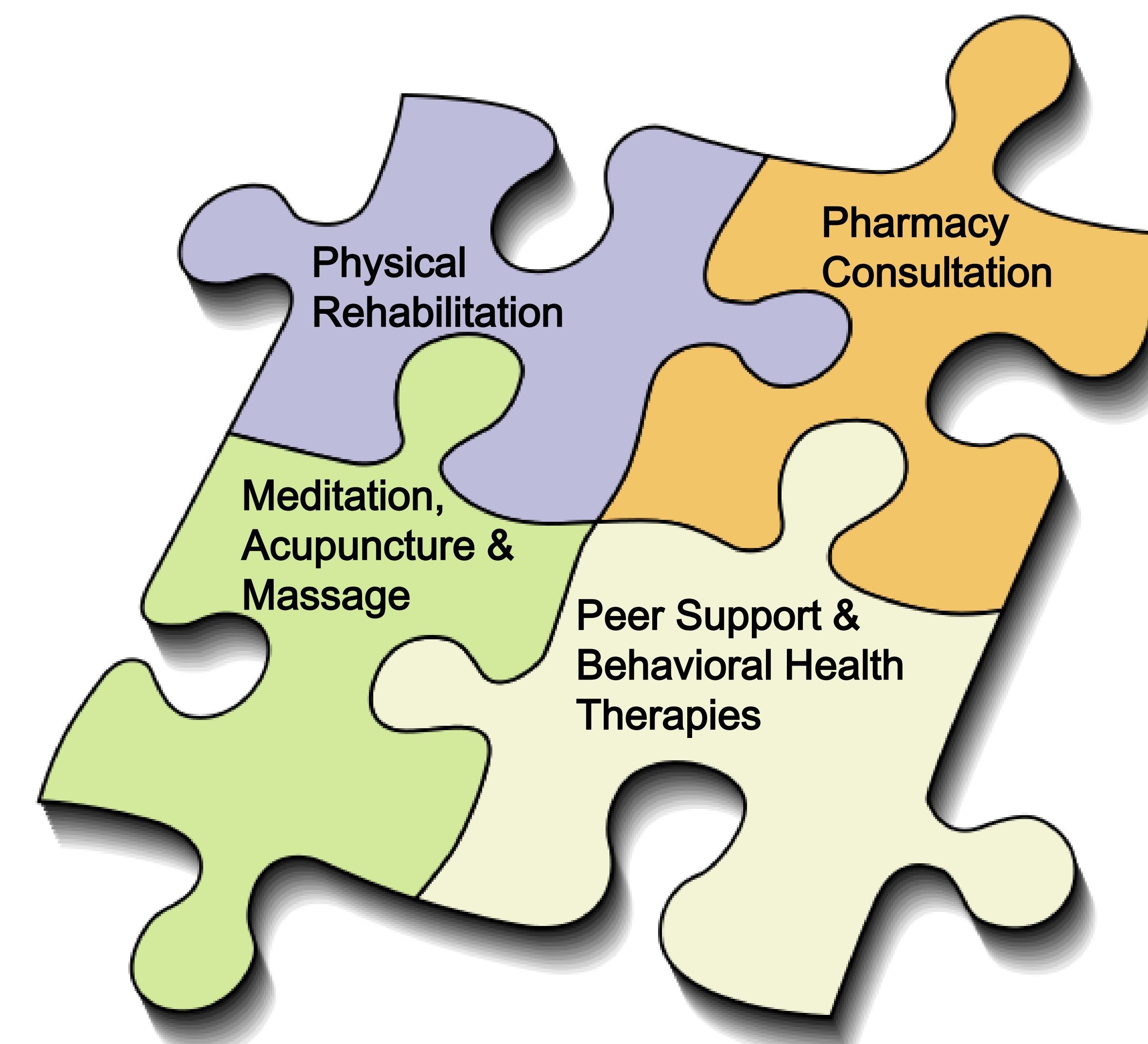
At this point my meds are my mobility but they are not everything. Only because nothing else is really offered.

Meds help but hardly at all; they never make the pain go away. I need more options please!

I don't like what I do doing drugs and my prescriptions; it doesn't really help, it just distracts me. Actually it doesn't fix the problem at all. But sometimes I don't know what else to do.

Next Steps:

- Gather staff input by September 30, 2015
- Secure space by October 1, 2015
- Finalize program design by October 31, 2015
- Initiate pilot by December 1, 2015
- Begin outcomes evaluation by June 1, 2016



Lessons Learned

- ➔ Creating a pilot program that aims to transform care requires identifying key institutional resources (e.g., staff and space) that are committed at the outset before planning begins. Lack of sufficient resources will delay project implementation.
- ➔ Investing the time upfront to gather input from multiple stakeholders is key to designing a program that will bring value to our patients and improve the work experience of our staff.
- ➔ Creating innovative services will help to distinguish the San Francisco Health Network within a health care marketplace with ever expanding options and support our viability as a safety net provider.
- ➔ Project design is an iterative process that requires flexibility and willingness to change course based on stakeholder input and changes in available resources.
- ➔ When designing a pilot project, it is critical to identify key evaluation metrics that will clearly demonstrate a program's value to leadership as they decide whether to scale up and sustain a program.

About My Organization



The San Francisco Health Network (SFHN) is the health care delivery arm of the San Francisco Department of Public Health. It is the city's only comprehensive system of care. Our top goal is to improve the value of services provided to our patients, staff, and San Franciscans.

SFHN Primary Care encompasses 11 community-based clinics and 4 clinics located at the San Francisco General Hospital and Trauma Center.

This pilot program will be located at Tom Waddell Urban Health Clinic. Located in San Francisco's Tenderloin district. We provide adults experiencing homelessness, those who are marginally housed and other highly vulnerable populations with high quality, innovative, comprehensive, trauma-informed primary care and behavioral health services.

Contact Me

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CHCF HEALTH CARE LEADERSHIP PROGRAM

To learn more about CHCF go to:
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