Monitor & Sustain Workbook for Practice Facilitators

* This workbook guides you, the Practice Facilitator, through closing out your coaching of the site and the Opioid Improvement Team during the one-month Monitor & Sustain Stage of the Six Building Blocks Program.
* The workbook walks you step-by-step through preparing for and facilitating two meetings, Success and Sustainability and a Final Shared Learning Call (for Practice Facilitators with multiple sites).
* To keep track of the Monitor and Sustain process, we suggest you use the checklists in this document. To track your overall progress through this and future stages for multiple sites, use the [Multi-Site Log](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/06/Multisite-PF-Log.xlsx).

## Acronyms and terms

The following acronyms are used in this Workbook.

* **Agreement**: this refers to a Patient Agreement/Patient Contract
* **Clinic, organization, and site:** These terms are used interchangeably to refer to the organization implementing the opioid management improvements.
* **CDC**: Centers for Disease Control & Prevention
* **EHR**: electronic health record
* **LtOT**: Long-term opioid therapy, sometimes referred to as chronic opioid therapy (COT)
* **MA**: Medical Assistant
* **MAT**: Medication assisted treatment
* **MED**: morphine equivalent dose, also known as MME or morphine milligram equivalents.
* **PA**: Physician Assistant
* **PDMP**: state prescription drug monitoring program; also referred to as PMP
* **VA**: Department of Veterans Affairs
* **WA** [AMDG MED calculator](http://www.agencymeddirectors.wa.gov/calculator/dosecalculator.htm): the Washington State Agency Medical Director’s Group morphine equivalent dose (MED) calculator, which takes into account methadone’s exponential MED increases.

## Monitor & Sustain Process

A site is ready to move on to the Monitor and Sustain Stage once they have completed the majority of the Six Building Blocks Design and Implement Milestones and they are feeling capable of continuing the improvement work independently and with less hands-on time. Generally this happens about 6-12 months into the Design and Implement Stage. The Monitor and Sustain Stage takes about one month. It is a time to help the site launch their independent improvement work and consider sustainability.

# Monitor and Sustain Progress Tracking

Use this section to track the site’s progress through the Monitor and Sustain Stage. If you are working with multiple sites, you can also track progress in the [Multi-Site Log](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/06/Multisite-PF-Log.xlsx).

## Practice Facilitator activities

These are the activities you will do as a Practice Facilitator during the Monitor and Sustain Stage. As you schedule and complete activities, it can be helpful to record them here.

### [ ]  Preparatory work for the Success and Sustainability Meeting Click or tap to enter a date.

#### Objectives

Prepare to facilitate the Success and Sustainability Meeting.

### [ ]  Facilitate a Success and Sustainability Meeting: Click or tap to enter a date.

#### Objectives

Take time to celebrate successes with the site and help them think through next steps and a sustainability plan.

### [ ]  Facilitate the Final Shared Learning Call: Click or tap to enter a date.

#### Objectives

If you are doing Shared Learning Calls, facilitate a final call to reflect on key learnings, successes, and close out as a learning collaborative.

## Activities checklist

This is an [*activities checklist*](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/06/Six-Building-Blocks-Monitor-and-Sustain-checklist_2019-05-20.docx) you can pass on to your site to guide their independent work going forward.

### Leadership & consensus

[ ]  Continue to protect time for improvement team to meet and work

[ ]  Continue to engage leadership, staff, and clinicians by regularly sharing data and stories

[ ]  Assess adequacy of resources needed to support opioid management processes and identify additional resources if needed

[ ]  Obtain feedback from staff and clinicians and adjust as necessary

[ ]  Identify reluctant clinicians and staff and identify strategies to improve engagement

[ ]  Stay up to date with guidelines and regulations (Medicaid, CDC, state, etc.)

### Policies, patient agreements, & workflows

[ ]  Revisit and revise policies, patient agreements, and workflows, as needed based on feedback and new evidence

### Tracking & monitoring patient care

[ ]  Adjust and iterate best possible tracking & monitoring approaches

### Planned, patient-centered visits

[ ]  Offer educational opportunities in opioid management, empathic communication, and patient involvement

[ ]  Integrate opioid management processes into standard trainings, including onboarding new employees

[ ]  When workflows need development or updating, involve those who will do the work and do small cycle tests of change before implementing changes across the organization

### Caring for complex patients

[ ]  Ensure clear referral pathways for complex patient resources and close the loop on referrals

[ ]  If not already in place, consider providing opioid use disorder treatment within the clinic

### Measuring success

[ ]  Produce provider-specific reports on performance measures and discuss during medical staff meetings

[ ]  Regularly review performance measure data at the level of the clinic during staff meetings and other opportunities

[ ]  Identify additional opportunities for improvement and implement small cycle tests of change

# Preparatory Work Ahead of the Success and Sustainability Meeting

## Objective

Prepare for the Success and Sustainability Meeting.

What’s Going on During This Step

### Practice Facilitator

[ ]  Send the site the [*Measuring Outcomes Survey*](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/06/Measuring-outcomes-survey.docx)and ask them to complete it and return it to you.

[ ]  Prepare a summary of site progress from baseline and potential next steps.

* Review your Prepare and Launch Stage notes, baseline Self-Assessment summary, Kickoff Survey summary, the milestones checklist you have maintained for the site, their baseline Measuring Outcomes Survey and their end of project Measuring Outcomes Survey.
* Use these documents to prepare the summary. Consider using the [*Success and Sustainability PowerPoint template*](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/05/Success-and-Sustainability-meeting.pptx).

# Success and Sustainability Meeting Overview

## Time

1 hour

## Objectives

Celebrate successes, identify potential next steps, and think through sustainability.

## Who Should Attend

Opioid Improvement Team

## Relevant Materials to Bring To This Meeting

* [*Success and Sustainability slides*](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/05/Success-and-Sustainability-meeting.pptx)
* [*Sustainability*](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/05/Sustainability_2019-05-20.docx) *handout*
* [*Monitor and Sustain activities checklist*](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/06/Six-Building-Blocks-Monitor-and-Sustain-checklist_2019-05-20.docx)
* *[Relevant Six Building Blocks resources](https://depts.washington.edu/fammed/improvingopioidcare/helpful-resources/resources-for-clinics/)*

## Agenda

1. Celebrating successes
2. Next steps
3. Think through sustainability

# Success and Sustainability Meeting Content

## Celebrating Successes

* Review and celebrate key successes of the site’s opioid management improvement work.
* Share any data that illuminates their progress over time. For example, comparing their baseline and end of project data from the [*Measuring Outcomes Survey*](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/06/Measuring-outcomes-survey.docx) or any [run charts](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/03/DIY-run-chart-tool.xls) they use.

## Next Steps

* Reflect on baseline clinic reported areas of struggle and identified priorities. Celebrate progress and make a plan for any areas that are still a struggle.
* Review with the site any milestones you believe they have not yet achieved and pass along supports for that work.

## Think Through Sustainability

Help the site consider the following sustainability concepts (from the [*Sustainability Handout*](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/05/Sustainability_2019-05-20.docx)*)* to help them make a sustainability plan for their opioid management improvement work. The concepts were adapted from: [*How To Build Sustainability Into the Innovation Process | AHRQ Health Care Innovations Exchange.*](https://innovations.ahrq.gov/perspectives/how-build-sustainability-innovation-process)

### Engagement

Continue to keep leadership, staff, and clinicians engaged in the process by:

* Continuing to share data and promote success stories (both about patients and about improved work life) to remind everyone of the value of the work.
* Checking in that the processes are still working and that any new changes are in fact improvements.
* Continuing to adapt and improve in response to feedback. Ensure there are compelling reasons for any changes and that changes are supported.

### Education

Continue to educate staff and clinicians by:

* Integrating opioid management training into regular staff meetings, trainings, newsletters, etc. Training is not “one and done”.
* Including opioid management training in onboarding. Make sure new staff understand the key opioid policies and processes and why they are important.
* Continuing to provide opportunities for staff and clinicians to receive education on opioid management. Evidence-based medicine evolves. See the [Clinical Education Opportunities](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/05/Clinical-Education-Opportunities-on-Opioids.pdf) resource for ideas.
* Continuing to adapt and improve in response to new evidence-based guidelines. Educate clinicians and staff about the compelling reasons for any changes and involve them in developing and iterating new workflows to support the changes.

### Culture

If possible, integrate opioid management into a culture of continuous improvement at your organization. One way to do this is to make measurement a regular part of clinic activities.

### Measurement

By continuing to monitor and share quality improvement data with key stakeholders (e.g., leadership, involved staff and clinicians), you are able to:

* Encourage continual buy-in for the processes.
* Identify if there is an issue that needs further investigation and adjustment.

### Infrastructure

Identify ways to “hardwire” your changes. You’ve done much of this already by writing policies and workflows and updating your EHR templates. You might also consider including opioid management tasks in job descriptions.

### Staffing

Your opioid improvement team has been instrumental in keeping this work moving forward. But what if one of you leaves? It is important to have a back-up for key roles.

# Final Shared Learning Meeting Overview

## Time

1 hour

## Objectives

Close-out as a learning collaborative and reflect on key learnings.

## Who Should Attend

Opioid Improvement Teams from participating sites

## Relevant Materials to Bring To This Meeting

* [*Final Shared Learning Call Agenda*](https://depts.washington.edu/fammed/improvingopioidcare/wp-content/uploads/sites/12/2019/06/SLC-Final-Agenda.docx)

## Agenda

1. Share key accomplishments
2. Discuss important lessons learned to help future sites
3. Discuss key learnings that will inform future quality improvement work
4. Close-out

# Final Shared Learning Call Meeting Content

## Share key accomplishments

When you think back over your work implementing opioid management improvements:

* What are you most proud of?
* What improvement do you think your clinicians and staff most appreciate?

## Discuss important lessons learned to help future sites

When you think back over your work implementing opioid management improvements:

* What important tip would you want to share with clinics taking on this work?
* What made the work easier? (e.g., what project supports, resources)
* What made the work hard and how did you overcome the challenges?

## Discuss key learnings that will inform future quality improvement work

When you think back over your work implementing opioid management improvements:

* What did you learn that will inform your future quality improvement work?

## Close-out

Acknowledge the amazing work your sites have done and wish them a fond farewell!