

Practice Facilitator Guide: Shared Learning Calls

“I found the Shared Learning Calls to be very helpful. It was nice to hear from other teams who were going through and struggling with different points, because some of them had already rewritten their policies while we were working on doing that. Others were still working the same stages we were. So just having the understanding of what other groups are struggling with and succeeding with was helpful.”

Overview

Shared Learning Calls are an opportunity for the program sites to help one another through implementing the Six Building Blocks. These calls are a time to share successes and to brainstorm through the real challenges that arise in this difficult work. We suggest that the entire Opioid Improvement Team attend the call.

Schedule

Shared Learning Calls should take place once a month and last for one hour. We recommend setting a regular schedule for these calls to take place at the same day and time each month. The calls should begin after the Kickoff. Don't worry if the sites are at varying stages of implementation. Previous sites in this program have reported that it was useful to hear about what other sites are doing and learn from each other's struggles and successes. It is best to have 3-6 sites on a call.

Format

One week before the call, the Practice Facilitator should prepare an agenda. General, ongoing topics to consider for the discussion include:

- What are some recent successes and challenges?
- What is the current focus of your work regarding this initiative?
- Is there anything you need help with or resources you are looking for?
- Is there anything specific you would like to discuss on this call?

At the beginning of the call, ask each site to provide brief responses to the questions above. Next, prepare additional topics based on what you know each site is working on at the time. Below is a list of potential topics.

- Emphasizing project importance and sharing stories and data at clinician and staff meetings
- Policy revision
- Patient agreement revision
- Producing a report of patients on chronic opioid therapy
- MED calculation
- Signing up clinicians and designees for the prescription monitoring program
- Urine drug testing processes
- Identifying and using pain visit templates/flow sheets
- Assessment tools for identifying complex patients and plans for approaching complex patients
- Workflows for supporting policies and patient agreements

- Educating patients about opioid risks and new policies
- Identifying variables to track for pre-visit planning and tracking and monitoring success
- Handling legacy patients
- Measuring success
- Referral pathways for non-pharmacologic treatment and complex patient resources and alternative approaches when there are limited resources
- Tracking and monitoring key variables for pre-visit planning and monitoring success
- Implementing and iterating workflows to identify patients, review the chart, and prepare for visits
- Difficult conversations with patients on chronic opioid therapy (e.g., about tapering)
- Training opportunities for empathic communication and patient involvement
- Addressing reluctant clinicians
- Sustainability

Periodically check in with the sites to see if they are getting what they need from the calls and if they have any specific requests for discussion topics. If the calls are not useful to each site, discuss together what changes need to be implemented to make them as useful as possible.