

## Changing the Face of Pain in Missouri - Two Year Strategic Plan for 2007 and 2008

What follows is a 2-year strategic plan complete with outcomes, goals, strategies and action steps for the identified target areas of: a) public engagement and self-advocacy, b) provider practice improvement, and c) public policy/systems change. Through implementation of this strategic plan The Changing the Face of Pain in Missouri Collaborative hopes to maximize exposure and resources, minimize duplication, and forge interdependent relationships that are of mutual benefit to the collaborators involved.

### Public Engagement and Self-advocacy

*Discussion:* We want to move from a passive orientation of raising awareness to one in which the public takes action. Thus, we are changing the name of this target area from “Public Education” to “Public Engagement and Self-advocacy”. We also want to guard against using the word “consumer” and instead use the word “public” as this term is inclusive of pain sufferers and their caregivers. We want to encourage ongoing exploration of and discussion about the message(s) we use so that we have a better understanding of the linguistics, tools, and motivations behind the message. For example, what is more likely to motivate the public - fear or anger? We also want to ensure our outreach efforts reach the poor/working poor and under served populations and that find ways to include more minority organizations in this effort

*Goal:* Educate and engage Missourians to become empowered self-advocates for more effective pain assessment and treatment.

*Strategy:* Education of the right things (i.e. - what the public needs to know to become self-empowered) said the right way (i.e. - how the message is delivered)

*Success measured by:*

- number and variety of venues through which pain message is delivered to the public
- volume of printed materials distributed
- number of POP presentations made
- growth in the American Pain Foundation’s Power Over Pain Action Network (in Missouri)
- amount and variety of media coverage during the two-year period

<b>Steps:</b>	<b>Complete by:</b>	<b>Resources needed:</b>	<b>Follow-up:</b>
Contact all current collaboration members and inventory their interest in: a) continuing in the collaboration, b) joining a collaborative listserv, for the purposes fostering responsive two-way communication on pain-related matters, c) joining the American Pain Foundation Power Over Pain Action Network, and d) linking to each other’s websites.	11/7/06	Ann’s time	<i>Delegated to:</i> Ann Corley <i>Status:</i> Completed
Inventory those interested in remaining a part of the collaboration about the specific types of resources they will commit and the geographical area covered by their outreach efforts	11/7/06	Ann’s time	<i>Delegated to:</i> Ann Coley <i>Status:</i> Completed

Steps:	Complete by:	Resources needed:	Follow-up:
Identify targeted activities for Pain Awareness Month (PAM) in September 2007 and September 2008 and develop and implement an action plan that identifies resources needed, responsibilities, timelines, and outcomes to measure success.	Year 1 – 9/30/07 Year 2 – 9/30/08	Workgroup planning/travel time. Other resource needs to be identified as plan is developed.	<i>Delegated to:</i> Project Coordinator and these volunteers: John Carney – Center for Practical Bioethics Fred Brown – Missouri State Medical Association Cathy Flasar – ASPMN - St. Louis Marianne Ronan – KC-CDC Brian Valentine – Paula J. Carter Center on Minority Health and Aging <i>Status:</i> Need to convene planning meeting by early 2007, name a PAM coordinator for the effort, and get preparation under way.
Continue to solicit and train Power Over Pain (POP) community education presenters. Poll collaborators on their interest in training public education presenters from within the ranks of their specific groups/organizations.	ongoing	Meeting space, lunch, travel time, phone conferencing time, coordinator planning time	<i>Delegated to:</i> Ann Corley & regional POP coordinators with the help of: Barb Barber Jo Hawkins – ONS Carol Scott - Regional LTC Ombudsman staff Cindy Baird – MHPCA <i>Status:</i> Need to convene a conference call meeting of the group in early 2007 to brainstorm and plan
Continue to identify and solicit venues through which to distribute the new MOPI/Advisory Council pain brochure and American Pain Foundation POP materials.	ongoing	phone conferencing time, coordinator planning time, postage	<i>Delegated to:</i> Ann Corley & regional POP coordinators with the help of: Carol Scott - LTC Ombudsman Lori Ladd – MOPI & Advisory Council ( <i>identify only</i> ) John Carney - Center for Practical Bioethics Susan Pendergrass Dorothy Lucey & Cathy Flasar - ASPMN St. Louis, Marianne Ronan – Kansas City CDC Brian Valentine – Paula J. Carter Center on Minority Health and Aging <i>Status:</i> Need to convene a conference call meeting of the group in early 2007 to brainstorm and plan.
Continue to solicit, schedule, and maintain a calendar of POP community presentations.	ongoing	coordinator planning time	<i>Delegated to:</i> Ann Corley & regional POP coordinators with the help of: Carol Scott - LTC Ombudsman Lori Ladd – MOPI & Advisory Council ( <i>identify only</i> ) John Carney - Center for Practical Bioethics Susan Pendergrass Dorothy Lucey & Cathy Flasar - ASPMN St. Louis, Marianne Ronan – Kansas City CDC <i>Status:</i> Need to convene a conference call meeting of the group listed about in early 2007 to brainstorm and plan.

Steps:	Complete by:	Resources needed:	Follow-up:
Add component to POP presentations that provides specific advice on how to communicate with their health care provider, including what information they need to bring with them for discussion (e.g. - pain diary).	3/31/07	Workgroup planning time, updating PowerPoint presentation,	<i>Delegated to:</i> Project Coordinator and these volunteers: Jo Hawkins – ONS Julie Wilson - LTC Ombudsman John Carney – Center for Practical Bioethics Barb Barber – Endo Pharmaceutical Cathy Flasar – ASPMN St. Louis, Susan Pendergrass, Rebecca Rengo-Kocher – MOPI; Jim Collier – Sickle Cell Disease Assn KC Chapter <i>Status:</i> Need to convene a conference call meeting of the group listed about in early 2007 to brainstorm and plan
Use the media as an education and advocacy tool to help spread the pain message, especially during PAM 2007 and 2008.	ongoing	Workgroup and/or coordinator for this effort	<i>Delegated to:</i> Project Coordinator - No collaborative members have volunteered assist in coordinating a media campaign. <i>Status:</i> MOPI and the Council will continue to share their media efforts with collaborative members and encourage reciprocity.
Design and print a laminated card with the pain care bill of rights on one side and resources on the other for distribution at community education and advocacy events.	9/1/07	Workgroup time to design card; coordinator to identify and secure sponsor and print card	<i>Delegated to:</i> Project Coordinator and these design volunteers: Jane Loitman – MOPI Lori Ladd – MOPI & Advisory Council Cathy Flasar & Dorothy Lucey – ASPMN St. Louis <i>Status:</i> There are currently no pledges of resources to print the card and no current plan to identify and solicit sponsors.
Reprint/restock American Pain Foundation materials and MOPI/Advisory Council pain brochure as needed	ongoing	Sponsors to pay reprinting and/or purchase costs	<i>Delegated to:</i> Project Coordinator and with pledges from: Oncology Nursing Society (St. Louis Chapter) - \$50 for Pain Care Bill of Rights Center for Practical Bioethics – pledged to purchase/reprint APF Bill of Rights, Resource Guide, Action Guide and Treatment Options. Greater St. Louis Hospice Organization – pledged to purchase/reprint APF Bill of Rights, Resource Guide, Action Guide and MOPI/Advisory Council Pain Guide. Kansas City Chronic Disease Coalition – pledge not to exceed \$500 to purchase/reprint Pain Care Bill of Rights Sickle Cell Disease Assn KC Chapter – purchase APF's Treatment Options booklet Center for Pain Management – purchase/reprint APF's Pain Resource Guide <i>Status:</i> Once a determination is made about venues and the plan for distributing materials, Ann Corley will follow-up with on the pledges.

<p><b>Provider Practice Improvement</b></p> <p><i>Discussion:</i> Again, we want to move from a passive orientation of education to one in which the providers demonstrate they are incorporating effective pain assessment and treatment into their practice. Thus, we are changing the name of this target area from “Professional Education” to “Provider Practice Improvement”. The group quickly decided that the analysis of the recent professional education survey sent out by MOPI should be the used as the road map for developing our action plan for this target area. The survey analysis should be completed by the end of 2006. We discussed the importance of continuing to look for opportunities to develop strategic provider practice partnerships, with Occupational Medicine Nurses and Primaris receiving specific mention.</p> <p><i>Goal:</i> That health care professionals are knowledgeable and proficient in delivering effective pain assessment, treatment, and management.</p> <p><i>Strategy:</i> Develop an action plan based on the professional education survey findings that addresses identified curriculum development and delivery system needs.</p> <p><i>Success measured by:</i> to be determined once the action plan is completed in early 2007.</p>			
Steps:	Complete by:	Resources needed:	Follow-up:
Analyze MOPI professional education survey data and submit report to collaborative on findings.	January 2007	Skill and time to analyze data and summarize	<i>Delegated to:</i> Ray Tait and Tom Geller (MOPI) <i>Status:</i> The data is still under analysis. A summary will be forwarded to the collaborative when ready.
Schedule a conference call for the collaborative in early 2007 to identify a strategy (based on MOPI professional education survey findings) for provider practice improvement and develop an action plan for this target area.	February 2007	Phone conferencing time. Other resource to be identified as strategy and action steps are developed	<i>Delegated to:</i> Project Coordinator <i>Status:</i> Need to set up call once the survey review is complete. The discussion from the 6/13 meeting will be used as a starting point for planning.
Develop strategic partnerships with groups/organizations that responsible for health care delivery system improvement.	Ongoing	Time to schedule and meet; contact list	<i>Delegated to:</i> Project Coordinator and these volunteers: John Carney – Center for Practical Bioethics Marianne Ronan – Kansas City Chronic Disease Coalition Rebecca Rengo-Kocher – MOPI John Lucio – Center for Pain Management <i>Status:</i>
Use the MOPI professional education survey data to expand pain-related questions on future DHSS - Behavioral Risk Factor Surveillance System survey.	Need to determine when survey will be repeated.		<i>Delegated to:</i> Tricia Schlechte <i>Status:</i> on hold until survey analysis is complete and summary is disseminated.
<p><b>Public Policy: Public Policy/Systems Change</b></p> <p><i>Discussion:</i> Our end in mind is that we want to have state pain policies and statutes which support effective pain management. In order to accomplish that we need to continue to build relationships with policy makers and, hopefully, identify some legislative champions who will work with us. We also need to look for common ground with those who influence policy who may not currently support some of our strategies.</p> <p><i>Goal:</i> To have state pain policies and statutes which support effective pain assessment, treatment, and management.</p>			

*Strategy:* Establish a functioning in state pain action network in Missouri and use it to champion a) language change consistent with suggestions in Pain Policy Studies Work Group report card and Advisory Council workgroups, and b) improve access to effective pain assessment and treatment in Missouri.

*Success measured by:*

- Successful removal of ambiguous or negative language from Intractable Pain Treatment Act and the Controlled Substances Act
- Improvement in our 2008 Pain Studies Work Group report card
- Any prescription-monitoring bill, if passed, is balanced such that while minimizing risks of abuse and diversion of medications, it will not negatively impact access to care for legitimate patients with pain.
- Increasing access to pain care through passage of legislation authorizing advanced practice registered nurses to prescribe schedule II, III, IV, or V controlled substances under a collaborative practice agreement.

Step:	Complete by:	Resources needed:	Follow-up
Inventory all collaborators regarding their willingness to include pain in their current advocacy activities and their interest in being active in a state pain action network that would be willing to send e-mail and letters or make phone calls and visits to policymakers, or even testify should the occasion arise.	November 7	Ann's time	<i>Delegated to:</i> Ann Corley <i>Status:</i> Completed
Distribute pain fact sheet to newly elected legislators	January 2007	Workgroup time to update fact sheet, write cover letter, and coordinate distribution	<i>Delegated to:</i> Project Coordinator and these volunteers: Jo Hawkins – ONS Barb Barber – Endo Pharmaceuticals; Barbara Westland – Greater St. Louis Hospice Organization Brian Valentine – Paula J. Carter Center on Minority Health and Aging Cindy Baird – Missouri Hospice and Palliative Care Association
Meet with selected Committees (e.g. – Health Care Policy, Aging, Families, Mental and Public Health) prior to the beginning of the 2007 and 2008 legislative sessions.	January 2007 January 2008	Coordinator time to solicit volunteers, organize, and execute meetings	<i>Delegated to:</i> Project Coordinator <i>Status:</i> No collaborative members have yet volunteered to set-up and meet Committees/Committee members
Formulate wording changes for the Intractable Pain Treatment Act and the Controlled Substances Act and forward them to the network.	January 2007	Council meeting time	<i>Delegated to:</i> Advisory Council <i>Status:</i>
Ask collaborative members to sign onto letter addressed to the Boards of Healing Arts, Nursing, and Pharmacy, encouraging them to officially endorse the Joint Statement developed by the Advisory Council in support of pain management as a healthcare priority.	When statement is adopted	Coordinator time to craft letter and solicit signors	<i>Delegated to:</i> Project Coordinator <i>Status:</i> On hold until statement is adopted

Step:	Complete by:	Resources needed:	Follow-up
Schedule and plan a Pain Advocacy Day for the legislative session 2007 and 2008	April 2007 and 2008	Workgroup planning time, handouts, volunteers to make legislative visits, PAD refreshments,	<i>Delegated to:</i> Project Coordinator and these volunteers John Carney – Center for Practical Bioethics Cindy Baird – Missouri Hospice and Palliative Care Association Lori Ladd – Advisory Council <i>Status:</i> Need to convene planning meeting in early 2007, name a PAD coordinator for the effort, and get preparation under way.
Meet with key House and Senate Committee members to identify and engage legislative champion	After joint statement is adopted and language changes are ready and approved by Advisory Council	Coordinator time to solicit volunteers, organize, and execute meetings	<i>Delegated to:</i> Project Coordinator and these volunteers: Jim Collier – Sickle Cell Disease Assn KC Chapter John Lucio – Center for Pain Management & Advisory Council <i>Status:</i> On hold, until statement is adopted
Secure a Governor's proclamation for Pain Awareness Month for September 2007 and September 2008.	September 2007 and 2008	Coordinator time to work with Governor's office to secure Proclamation and solicit volunteers for the signing ceremony.	<i>Delegated to:</i> Project Coordinator and these volunteers: Fred Brown – Missouri State Medical Association <i>Status:</i> Need to coordinate with Pain Awareness Month and Pain Advocacy Day groups

The plan is now ready for implementation and there are several actions items for which sufficient manpower and resources have been pledged to enable the collaborative to proceed with their implementation. However, the successful implementation of the Pain Awareness Month action plan has demonstrated to the collaborative how valuable and essential is it to identify, name, and secure the resources to retain a project coordinator who will oversee the implementation of the strategic plan in its entirety over its two-year timeline. This individual needs to demonstrate successful management of similar projects and have a working knowledge of the collaborative and its membership.

At this time, the collaborative lacks sufficient resources to retain the services of a project coordinator. The Advisory Council and Missouri Pain Initiative also lack the resources to provide the needed level of support and oversight to the effort. Thus, the ability to successfully implement the strategic plan as currently outlined is dependent on the collaborative's ability to identify and seek the support of potential funders who value merits of our plan and are willing to provide the monetary resources needed to hire a coordinator. Finding and securing funding now becomes the next priority action item for the Council, MOPI, and the entire collaborative.

### Acknowledgements

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