**Opioid Process Improvement: Getting Started Guide**

**Opioid meeting #1 (45 minutes):**

**Why opioids?**

* (Optional) Watch video and discuss
	+ Government of Canada: www.youtube.com/watch?v=XtuglzVesWQ
	+ Petra’s story: https://www.youtube.com/watch?v=aoNfUrShRHQ&index=7&list=PLi1tOF1I5ZoWY3hfrrwu15NTWz8e9amOt
* Review statistics and guiding principles from ‘pledge document’. Any surprises?
* Discuss linkage to PMH & continuity

**Quality improvement approach**

* Confirm improvement team members and discuss meeting schedule/norms/roles/etc.
* Consider inviting a patient to be an advisor on the QI team
	+ *If yes, review ‘Ideas to Support Patient Representatives’ guide*
* Consider completing the ‘Opioid Process Improvement: Team Assessment’
* Review panel readiness
	+ *Consider using the STEP checklist as a guide*
* How do the physicians write opioid triplicate prescriptions? Are they documented in the EMR? Where? Does every physician do this?
* Are opioid contracts or other opioid tools used? Are they searchable in the EMR?

**For the next meeting**

* Using the EMR, identify which patients on the panel are taking opioids and bring the list.

**Opioid meeting #2 (45 minutes):**

**Patients taking opioids**

* Was the team able to pull the patient list?
	+ If not, what were the issues? Should panel readiness be the starting point?
	+ If yes, does the list look accurate? Why might some patients be missing?

**Select initial area for process improvement**

* If panel readiness needs attention, use STEP Tools to guide
* If ready to identify an opioid patient population to start with: continue to ‘Improvement Planning’

**Improvement Planning**

* Decide which opioid patient population to start process improvements for:
	+ Initiating opioids
	+ Managing including OUD
	+ Tapering
	+ Other
* Set an aim
	+ What are we improving? By how much? By when?
* Map current state process for the chosen patient population
* Identify areas to test potentially better practices (See High Impact Changes document)

**As the team progresses, use the ‘High Impact Changes’ document to discuss potentially better practices that the team may want to test and implement.**