**AHRQ/NIDDK PCOR eCare Plan Project:**

**Pain/ OUD Disease Technical Expert Panel Call**

**Meeting Minutes**

**August 20, 2020**

**Attendees:**

Tolu Abidogun

Shelly Spiro

Sean Mackey

Helen Fu

Arlene Bierman

Saadia Miran

Jenna Norton

1. **Continued Review of Data Elements Sheet: Starting Review of Goals Section**
	1. **Subsection: Free Text Goals**
		1. The group discussed the importance of including free text goals in addition to the standardized elements, because goals can be very individual and specific. Such goals may be useful for person-centered life and health goals that might not easily be standardized.
		2. The group discussed creating built in clinical guideline based goals (ex: target A1C of 7%) while still allowing clinicians to individualize targets based on the specific patient situation
	2. **Subsection: Goal Priorities, Preferences, & Participation**
		1. The group discussed differentiating patient versus provider preferences in discrete elements or with meta data
		2. This subsection also includes an element to capture potential barriers/ challenges the patient may face in achieving a goal
		3. A free-text element to capture strengths (factors that support achieving a goal) was adapted from the eLTSS care plan
	3. **Subsection: Goal Attributes**
		1. The section captures metadata surrounding a goal, in order to understand the context of a goal, including goal creation date, goal completed date, progress toward goal observation, purpose of the goal, target completion date, goal status, and outcome
	4. **Subsection: Laboratory & Vital Sign Goals**
		1. The group will be able to link FHIR goal to any lab observations
		2. Allowing patient and providers to set targets would accommodate the lack of guidelines for people with multiple chronic conditions
		3. The group was asked for any missing labs/ values for a pain population that was not reflected in the existing elements
			1. The group suggested including a goal relating to target morphine/opioid equivalent dose, for people trying to wean from opioids; however it was noted this may fit better in the treatment preferences section
	5. **Subsection: Dietary & Behavioral Goals**
		1. This subsection includes elements that capture goals around amount intake of substances (alcohol, marijuana, etc.), diet/fluid intake, physical activity/movement, etc.
		2. The group commented on depression among patients with chronic pain- which can lead to effects on sleep, and suggested addition of a sleep management goal.
		3. The group suggested an element that captured pain psychology goals which is based on being non-judgmental, breathing, monitoring thoughts. Sean Mackey shared a list of cognitive behavioral therapy goals and activities for consideration.
		4. Elements to capture functional (e.g., walking, sitting, standing) and social (e.g., time with family) goals were also suggested
	6. **Subsection: Treatment Preferences & Goals**
		1. This subsection includes elements that capture preferences regarding renal replacement therapy and other advance directives
			1. The group suggested including an element to capture target dose for NSAIDs, benzodiazepines, acetaminophen, and other medicine tapering
		2. The group discussed the FHIR resource for advanced directives
			1. Currently, the care plan includes an element to capture a reference or link to an advanced directive
	7. **Subsection: Person Life & Health Goals**
		1. This subsection includes elements that capture personal goals regarding health (ex: health events, functional goals, etc.) and life (ex: working, having children, etc.)
		2. The group discussed how to address proliferation of goals and ensure goals are shared across healthcare teams