

Update

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Input welcome: draft dictionary for procedural pain management

Procedural (interventional) pain management is an evolving multi-specialty practice, requiring complex graduated care. Highly specialized procedures require specialized training, knowledge, and skills. As with any advanced technique, health authorities are responsible for confirming that practitioners meet credentialing requirements for privileges to ensure safe care.

To meet this need, the BC Medical Quality Initiative has engaged a provincial panel of subject-matter experts consisting of a cross-section of procedural pain practitioners, who work across six specialties, including anesthesia, family medicine, orthopedics, neurology, psychiatry, and radiology. Panel members represent six BC health authorities and both urban and rural practice settings.

In keeping with the Ministry's plan for chronic pain care, the draft dictionary recognizes an escalating degree of specialized knowledge for treatment. The tiered model identifies procedures as basic, intermediate or advanced, according to levels of training and complexity.

For some specialties, intermediate and advanced procedures may currently be core to their practice and will remain so. In instances where procedures are not core to their primary practice, physicians will use the PPM dictionary as a supplement to their primary discipline dictionary, when applying for privileges.

The dictionary panel is now seeking feedback from physicians who practice some aspect of procedural pain management, typically from the following disciplines:

Anesthesia	Neurology	Rheumatology
Emergency Medicine	Physical Medicine	Orthopedic Surgery
Family Medicine	Rehabilitation	Neurosurgery
Internal Medicine	Psychiatry	Radiology

The draft dictionary is intended to reflect PPM practice standards in BC. Feedback from practitioners across the province is welcome—especially in regard to the grouping of procedures and the educational requirements.

Feedback received by May 27 will be brought forward to the next dictionary panel meeting. A revised draft and a fresh round of consultation will follow in early June. New drafts are always made available on the BC MQI website, in the dictionary review hub.



Visit the dictionary review hub at bcmqi.ca to view the <u>draft Procedural Pain</u> <u>Management dictionary</u>. Comments can be submitted using the feedback form provided. The Update reports on activities underway to strengthen BC's medical quality framework.



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Dictionary refresh

Reviews in progress

This April, three dictionaries reached the final stages of completion: adult gastroenterology, otolaryngology, and pediatrics. Ten dictionary panels are still underway; two of which are focused on creating new dictionaries for emerging practices. The latest to launch is a provincial panel to develop new privileges for Injectable Opioid Agonist Treatment (iOAT).

Dictionary reviews still in progress include hematology, neonatology, neurology, pediatric gastroenterology and urology dictionaries. Refreshed dictionaries on pause while awaiting outcomes from the procedural pain management panel include anesthesiology, critical care, and diagnostic imaging.

Next up

Review panels starting soon:

- Medical oncology
- Pediatric hematology/oncology
- Radiation oncology
- Vascular surgery

Learn more at bcmqi.ca.

The BC Medical Quality Initiative (BC MQI) brings health care partners together to develop ways to improve the quality of medical care for people living in BC.

Questions or concerns about AppCentral or the provincial privileging dictionaries? See the resources at <u>www.bcmqi.ca</u> or contact your medical leader or local medical administration office.