

**Attachment F**  
**Learning Collaborative**  
**Quality Improvement Measures**

Each clinic will report quarterly on the QI measures. The QI measures include both process and outcome measures. Process measures are reflective of recommended clinical strategies or tools being implemented, and outcome measures examine intermediate outcomes. A data analyst at each organization will provide aggregate reports of the specified QI measures to the evaluation team on a quarterly basis over the course of a 15-month period. The QI measures are measures of opioid prescribing that are critical for understanding the potential improvements in opioid prescribing in implementing the strategies. The prioritized measures to monitor improvements in recommended prescribing practices could include the following:

1. Number and percentage of clinical staff that completed training on opioids and older adults
2. Number and percent of patients who are on opioid medication
3. Number and percentage of patients who are on opioid medication for pain
4. Number of patients on long-term opioid therapy (LTOT)
5. Number of patients tapered off LTOT/discontinued opioids
6. Number of older adult patients on LTOT
7. Number and percentage of patients in which the was used PEG with older adults to assess pain and function
8. Percentage of older adult patients on LTOT who are on greater than 50 morphine milligram equivalents (MMEs)
9. Percentage of older adult patients on LTOT who are co-prescribed a benzodiazepine
10. Percentage of older adult patients on LTOT who had the prescription drug monitoring program (PDMP) checked
11. Percentage of older adult patients on LTOT who have had a urine drug screen
12. Number and percentage of providers assessed older adult patients for OUD
13. Of the older adult patients with OUD, the percentage that are prescribed or referred to MAT
14. Percentage of older adults patients on LTOT who are prescribed naloxone
15. Number of BH providers engaged in pain management/opioid use