Building an opioid improvement team

The opioid improvement team works in the clinic to support the implementation of opioid management improvements through the Six Building Blocks program. The team is responsible for leading the work, such as revising policies, developing and implementing workflows, and tracking progress. In addition, they will participate in monthly Shared Learning Calls with other organizations, and at least monthly calls with each other. We suggest you keep the team small enough to be a working group (e.g., 3-6).

The following table gives more information about team membership. You might also consider including a patient on the opioid improvement team. (See IHI for more information on including patients in QI work.)

Position	Time Commitment Estimates	Role Characteristics	Responsibilities
QI project lead (required)	2-8 hours per month	• QI experience helpful • Interest in this topic	• Leads the day-to-day work • Organizes meetings • Oversees quality improvement processes on site (e.g., plan, do, study, act)
Clinical champion (required)	2-4 hours per month	• Interest in this topic • Critical to success • Sway in the organization	• Builds consensus among clinicians and staff • Maintains leadership support for program • Lead clinical voice on the team
Tracking and Monitoring Lead	Highly variable depending on your system, 4+ hours per month	• Protected time for tracking and monitoring • Skills in clinical data and technology • Ready access to prescription and refill data	• Works with data to develop and generate reports
Others, as desired (medical assistant, nurse, social worker, behavioral health provider, clinic manager, pharmacist, MAT team member, patient)	2-4 hours per month		• Represents roles important to team-based care of patients on long-term opioid therapy

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