



SUMMARY OF WORK GROUP ACTIVITIES

Background

COAMI is a collaborative established across stakeholders to improve the delivery of OA care, with representatives from physician groups involved in musculoskeletal care, including sports and family medicine, orthopaedics, physiatry, rheumatology, and pediatrics; members of allied health groups including physical therapy, advanced practice nurses, physician assistants, and registered nurses; advocacy and patient groups. To date we have completed and published systematic reviews of literature on guidelines for OA management, and of patient-reported outcome measures that could be administered realistically in a practice setting.

OA Clinical Pathways/Delivery Model Work Group (Formerly Groups 1 and 2)

Focus: Develop OA Care Pathways and novel delivery models for prevention and optimal conservative care of OA, starting with knee OA as a focus.

Leaders: Kelli Allen, Ph.D.; Alexandra Page, M.D.

Work Accomplished

- Review of OA delivery models
- Review of OA care pathways
- Preliminary development of liaison model for OA care delivery

Next Steps

- Establish funding
- Codify the assimilation of models
- Comprehensive review of OA care pathways
- Review and assessment of treatment implementation models in other chronic diseases
- Development of decision node model with potential providers
- Pilot delivery models in various clinical settings (academic, capitated care, private practice)

OA Shared Decision-Making Tools Work Group (Formerly Group 3)

Focus: Optimizing shared decision to guide OA prevention and care

Leaders: Thomas Walsh, Ph.D., P.T.; Leigh Callahan, Ph.D.

Work Accomplished

- Literature/expert review for SDM tools for OA
- Comparison chart of existing OA decision tools

Next Steps/Action Plan

- Assess the identified aids using International Patient Decision Aids Standards with the addition of cost, time, health literacy scope, and cultural competency scope
- Determine optimal decision tool choices and location within care pathway
- Embed patient assessment of shared decision making (e.g. CollaboRATE)

OA and Physical Activity Work Group (Formerly Group 4)

Focus: Incorporating physical activity into the prevention and conservative treatment of osteoarthritis **Leaders:** Adrian Hutber, Ph.D.; Jim Whitehead, CEO, American College of Sports Medicine

Work Accomplished?

Next Steps

Further involvement of Exercise is Medicine

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