

Opioid Deprescribing Toolkit

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Update for the East of England Citizen's Senate #40









Our partners



Integrated Care Board

Applied Research Collaboration East of England

Patient Safety **Collaborative**





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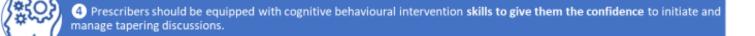
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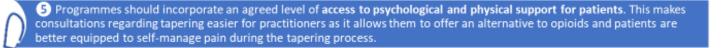
Opioid Deprescribing Toolkit









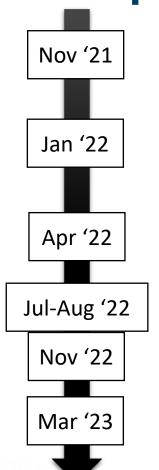


6 Patients need comprehensive education to align patient: practitioner expectations of tapering which supports them to engage and persist with a tapering schedule making the tapering process easier for the prescriber.

https://www.easternahsn.org/aboutus/our-projects/opioiddeprescribing-toolkit/

Our journey to implement the Opioid **Deprescribing Toolkit** Identify and engage with key stakeholders STEP 2 Gap analysis of local resources or services Work with local Prescribing Leads to identify key stakeholders, identify potential challenges to engagement and develop strategies to overcome barriers Activities to engagement. + Desk research: Use multiple approaches to identify resources or services, such as, discussion with NHS England and + Our Stakeholder Matrix NHS Improvement Medicines Safety team, review examples in the report on Improving chronic pain management by reducing harm from opioids (December 2021), speak to key stakeholders identified in Step 1, speak to other relevant individuals or organisations identified through snowballing STEP 3 techniques, review Opioids Aware Bringing our stakeholders Practitioner Survey to identify elements together of the toolkit absent from existing service offer and existing elements that required enhancement to support opioid Activities tapering. Work with local Prescribing Leads to refine the list of key stakeholders. Bring the stakeholders together to ★ Improving Chronic Pain Management by Reducing Harm from Opioids Report achieve a collective understanding of the toolkit, identify key individuals 2021 (available on the NHS Future motivated to support the change and Platform - login required). better understand the challenges to * Practitioner Survey sent to primary engaging with unrepresented stakeholders and secondary care practitioners across NHS Norfolk and Waveney. * Presentation for the online workshop STEP 4 Identifying guidelines and developing a pathway STEP 5 Evaluation Review and refine local guidelines for tapering opioids for non-malignant chronic pain with key stakeholders in Activities primary and secondary care. Process evaluation to describe the Develop draft pathway based on process of implementing the opioid refined guidelines. toolkit in Norfolk and Waveney. Engage with stakeholders e.g., by Review routine data at baseline and convening task and finish groups to post-implementation to evaluate consult stakeholders to review and impact on opioid deprescribing. design a system-wide pathway, Practitioner Survey completed at develop referral processes and identify baseline and post-implementation to or develop resources to support evaluate whether the opioid toolkit delivery of the pathway. has been implemented as intended Pllot the pathway in a small number of and targeted barriers to opioid practices and refine as appropriate deprescribing have been addressed. before system-wide implementation. ◆ Interviews with stakeholders to explore feasibility and acceptability of the opioid toolkit in practice. Our Guideline for Tapering Opioids in Non-Malignant Chronic Pain Pathway for tapering opioids across * Data collection identified by developing Norfolk and Waveney (under our Logic model (under development). development)

Our implementation process



STEP 1

Identify and engage with key stakeholders

STEP 2

Gap analysis of local resources or services

STEP 3

Bringing our stakeholders together

STEP 4

Identifying guidelines and developing a pathway

STEP 5 Evaluation

Local prescribing leads

Local healthcare professionals

Professionals & patients

Professionals & patients

Professionals & patients

Knowledge Anglia



Register Sign In Norwich Clinical Information Prescribing, Pharmacy and **Clinical Thresholds Policy Providers / Services Forms Medicines Optimisation** --Include all types--▼ Enter your search terms here Search Home > Prescribing, Pharmacy and Medicines Optimisation > Opioid Deprescribing Toolkit and Resources Page last updated: 11/11/2022 Opioid Deprescribing Toolkit and Resources

Resources for Clinicians ♣ Dose equivalents and changing opioids | Faculty of U: 07/11/22 R: 07/11/26 Pain Medicine (fpm.ac.uk) Guidelines for tapering opioids in chronic pain U: 07/11/22 R: 07/11/24 ★ Opioid Risk Tool (ORT) U: 07/11/22 R: 07/11/26 A Opioids Aware U: 07/11/22 R: 07/11/26 ♣ Oral morphine equivalence calculator U: 07/11/22 R: 07/11/26 PrescQIPP bulletin - Reducing opioid prescribing in U: 07/11/22 R: 07/11/26 chronic pain ♣ PrescQIPP e-learning - Reducing opioids in chronic U: 07/11/22 R: 07/11/26 ♣ Tapering and stopping | Faculty of Pain Medicine U: 07/11/22 R: 07/11/26 Toolkit for Tackling Chronic Opioid Use in Non-U: 11/11/22 R: 11/11/24 Cancer Pain

0 review soon 0 review overdue

:50	urces for Patients		
*	Live Well with Pain Health Check tool to explore how pain affects people's lives	U: 07/11/22	R: 07/11/26
	Lowering your opioid dose	U: 07/11/22	R: 07/11/24
	Opioids, chronic pain and the bigger picture – a patient diary to record how they are feeling during the tapering process	U: 07/11/22	R: 07/11/26
	Patient medicines decision guide	U: 07/11/22	R: 07/11/24
	Ready to Change - Your Way to Better Health (Norfolk County Council	U: 07/11/22	R: 07/11/26

ICB Website

https://improvinglivesnw.org.uk/our-work/healthier-communities/medicines/

Medicines



The NHS Norfolk and Waveney Integrated Care Board (ICB) regularly review local prescribing practice based on the latest evidence available and in line with guidance from The National Institute for Health and Care Excellence (NICE ∠).

You can find you local pharmacy online.

Opioids

Opioids are very strong pain killers and are used to treat pain after surgery, serious injury and cancer pain, for example. They usually contain morphine or codeine. Research tells us taking opioids long-term for chronic pain is not a good idea. Opioids aren't very effective when taken for more than a few months.

You can find a selection of resources for clinicians and patients on the <u>Knowledge Anglia website</u>. Further resources can be found on <u>Norfolk and Waveney STP Formulary</u> which includes <u>Guidelines for tapering opioids for chronic primary pain</u>.

Added value of patient feedback

• Improved understanding of local challenges

• Informed guideline content – patient discussion points

Identified patient resources

Prompted hosting of launch event

Next steps



Raise awareness of our resources



Ensure system-wide implementation



Evaluation



Patient feedback



Thank you





