

SPOT: The Safer Prescription of Opioids Tool – Data Analysis

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Abstract: The Safer Prescription Opioids Tool (SPOT) is a quality assured and CE-marked Software as a Medical Device solution which empowers clinicians to validate their own opioid conversions in palliative and end-of-life care. This poster presents SPOT usage data that illustrates how SPOT supports safe prescribing across a variety of opioids, routes of administration and prescriber settings. Furthermore, the SPOT app serves as an educational tool for prescribers working within palliative care.

"An invaluable tool keeping patients and staff safe."


Annabel Howell - Chair of SPPC

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This poster is part of
the SPPC Poster
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What is SPOT?

The Safer Prescription of Opioids Tool SPOT is a CE-marked, clinically-validated, Clinician Decision Support (CDS) tool ~ Clinically driven and co-designed ~ Developed over 6 years and used daily in the NHS Scotland ~ Part of the Scottish Government's Coronavirus (COVID-19) palliative care toolkit ~ Available in Android and Apple iOS Hybrid Apps + Website.

What does SPOT do?

Enables users to validate their own decision making when prescribing opioids, performing equianalgesic conversions and calculating breakthrough opioid dosages at the patient's bedside ~ Enables simple conversion from one opioid and route of administration to another ~ Users are able to calculate breakthrough opioid dosages with SPOT ~ All preparations of the chosen target drug are displayed, aiding drug selection and administration ~ Links directly to gold-standard reference to inform prescribers.

How does SPOT support safe prescribing?

SPOT provides direct links from the home page to Best Practice Guidelines ~ Equianalgesic opioid conversion double-check ~ Quick-reference equivalence tables for opioid conversion ~ Stores prescriber's own calculations to aid revalidation and education ~ Displays all drug preparations available to prescribe in the organisation's formulary ~ Ability to direct users towards lower-cost opioids or to consider alternatives in cases of shortage.

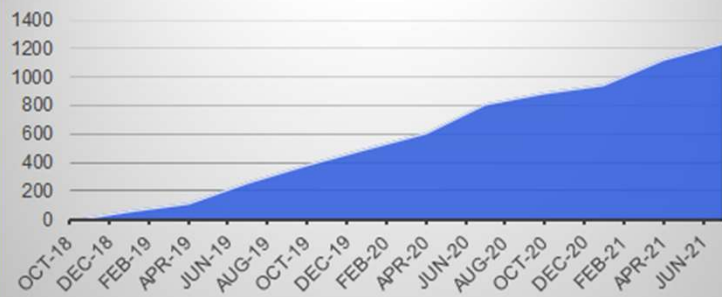
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Analysis of Current Usage Data

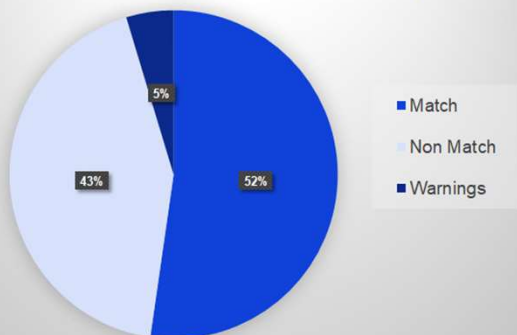
Number of Calculations



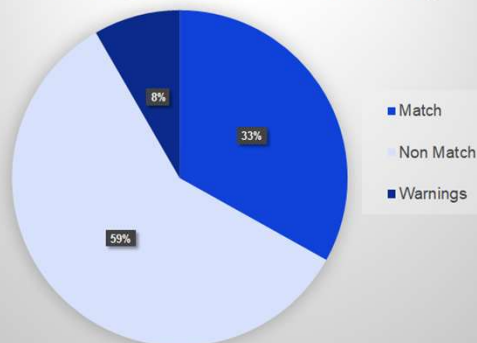
Breakdown of Calculations



Index Calculation Match Percentage



Breakthrough Calculation Match Percentage



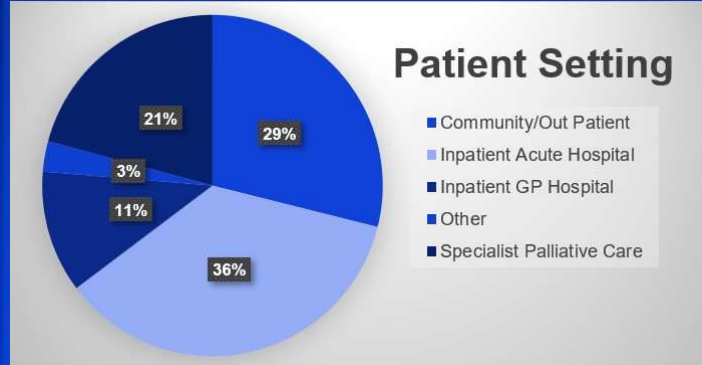
Drug Conversion Data

DRUG	INDEX	TARGET	BREAKTHROUGH
Alfentanil	67	120	53
Codeine	102	18	0
Diamorphine	24	64	35
Dihydrocodeine	57	7	11
Fentanyl	78	112	0
Hydromorphone	15	19	0
Morphine	275	288	193
Oxycodone	239	229	148

Preparations Summary

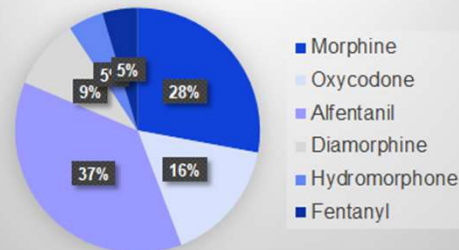
DRUG PREPARATION	INDEX	TARGET	BREAKTHROUGH
Oral	571	351	213
Subcutaneous	208	394	217
Transdermal Patch	78	112	0

Analysis of Current Usage Data



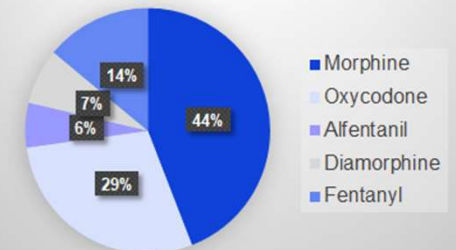
Conversions were split with 64% being in-hours and 36% out-of-hours.

eGFR <30 Opioid Choice (for Index Drug)



Adherence to the Palliative Care Guidelines' recommendations to consider eGFR when administering certain opioids.

eGFR >30 Opioid Choice (for Index Drug)



Conclusion

SPOT is a safe clinician decision support tool with significant evidence of increasing use in supporting patient care according to best-practice guidelines ~ SPOT supports prescribers to prescribe opioids safely in both in-hours and out-of-hours settings ~ SPOT is able to identify whether calculation errors are significant enough to cause harm ~ SPOT can identify conversions that prescribers find particularly difficult which may help with the creation of guidelines ~ The data highlights how SPOT is able to identify errors in drug selection and conversion calculation.

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