



# Supporting Opioid Prescribing in NHS Borders

## SPOT – The Safer Prescription of Opioids Tool

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### Abbreviated abstract:

Errors in opioid prescribing rank in the top five of drug errors world-wide. SPOT is a novel Software Medical Device designed to improve opioid switch safety. This poster outlines key quantitative and qualitative data collected about the use of SPOT in NHS Borders over a 12 month period.

### Related publications:

- Flint, R.; et al The Safer Prescription of Opioids Tool (SPOT): A Novel Clinical Decision Support Digital Health Platform for Opioid Conversion in Palliative and End of Life Care—A Single- Centre Pilot Study. Int. J. Environ. Res. Public Health 2019, 16, 1926.
- Howell, A et al, SPOT Scale-Up in Clinical Practice SPPC poster 2019

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# Previous work, challenge, and approach

## Opioid Prescribing Errors

- Opioid prescribing errors rank in the top five or drug errors worldwide
- These errors can include under- or over-dosing when performing opioid switch
  - The Safer Prescription of Opioids Tool is proven to significantly increase the confidence of opioid conversion
  - NHS Borders adopted SPOT on a Board-wide basis to support their prescribers when performing opioid conversion.
  - This poster outlines some of the novel insights gathered by SPOT in its first 12 months of use in NHS Borders and the potential that the SPOT platform offers to prescribers and institutions

## Methods

- The NHS Borders data conversion calculation data (n=220) were analysed using an Empirical Bayesian approach.
- We sought interviews from colleagues to give their 'lived experience' of using SPOT
- Using a combination of data-exploration, -mining and -modelling it was possible to draw a wide variety of conclusions from the dataset.

## Results

- The most frequent user groups were Nurse Independent Prescribers (n128), followed by Junior doctors (n62) and GPs (n19)
- Conversions were closely split between the in-hours (n119) and out-of-hours period (n99)
- The most common day of the week for opioid conversion was a Tuesday (n44), and Saturday had the fewest conversions (n7).
- Oxycodone was the most common index drug (n58), and Morphine was the most common target drug (n63). Morphine and oxycodone were the most common breakthrough drugs (both n22).

## Conclusions

- SPOT is able to identify the opioid conversions that prescribers find particularly challenging
- SPOT can categorise whether an error in opioid conversion is likely to cause patient harm and the magnitude of the conversion error
- SPOT has a role in supporting under-performing prescribers and in benchmarking them against their colleague's error rates
- Organisations and clinical areas can also likewise be benchmarked against each other
- SPOT can identify errors in selections of the opioid used for conversion
- During the COVID-19 pandemic, SPOT is a safe way to support colleagues working in unfamiliar settings to perform opioid conversion with second- and third-line opioids if there is an acute shortage
- Clinicians feel the tool provides an additional safety net for prescribing decisions, out of hours in particular

## Summary

SPOT is a uniquely novel and safe way to support prescribers when performing opioid conversion. It is available 24/7 and gathers data that can be used to support warranted variation whilst providing best-practice safeguards to organisations, clinical areas and colleagues

