**Top Tips Checklist For High Dose Opioid Prescribing**

**(for non-cancer chronic pain)**

This checklist is to support clinicians when reviewing patients who are prescribed high dose opioids (total daily morphine equivalent dose of more than 120mg) for non-cancer, chronic pain in adults.

Herts and West Essex ICS and national guidance do not support the long-term prescribing (greater than 3 months) of opioids or the use of high dose opioids for non-cancer, chronic pain in adults.

See further information for details on each of these suggestions.

|  |  |  |
| --- | --- | --- |
|  | **Discussed in clinical meetings** | **In progress/completed/ not actioned** |
| 1. **Set up MDTs** |  |  |
| 1. **Text messaging** |  |  |
| 1. **Pop-up message on EMIS**   **Message on SystmOne home page** |  |  |
| 1. **Ensure no opioids are prescribed on repeat** |  |  |
| 1. **Use ePACT2 opioid comparators dashboard to identify patients** |  |  |
| 1. **Opioid training completed** |  |  |
| 1. **Opioid treatment agreement/contract** |  |  |
| 1. **Liaise with the patient’s regular community pharmacy** |  |  |
| 1. **Patient resources** |  |  |
| **Action plan in place Sign: Date:** | | |

**Further information:**

* **New patients** joining the practice on high dose opioids must be reviewed.
* **Accountability** – the person who signs the prescription is accountable

1. Set up **MDTs** in your practice to discuss complex opioid patients (see webinar link 21 minutes onwards)– [​mp4 icon HWE Primary Care Webinar - all colleagues (non-clinical and clinical)\_ Type 2 Diabetes\_ Path to remission, ARRS Communication and Opioid Awareness-20240416\_125953-Meeting Recording.mp4](https://nhs-my.sharepoint.com/personal/hwetraininghub_nhs_net/_layouts/15/stream.aspx?id=%2fpersonal%2fhwetraininghub_nhs_net%2fDocuments%2fRecordings%2fHWE+Primary+Care+Webinar+-+all+colleagues+(non-clinical+and+clinical)_+Type+2+Diabetes_+Path+to+remission%2c+ARRS+Communication+and+Opioid+Awareness-20240416_125953-Meeting+Recording.mp4&nav=eyJyZWZlcnJhbEluZm8iOnsicmVmZXJyYWxBcHAiOiJTdHJlYW1XZWJBcHAiLCJyZWZlcnJhbFZpZXciOiJTaGFyZURpYWxvZy1MaW5rIiwicmVmZXJyYWxBcHBQbGF0Zm9ybSI6IldlYiIsInJlZmVycmFsTW9kZSI6InZpZXcifX0&ga=1&referrer=StreamWebApp.Web&referrerScenario=AddressBarCopied.view.99bd8c71-34dc-4029-9668-4e023ad38066&xsdata=MDV8MDJ8YXNoaWsuc2hhaDFAbmhzLm5ldHw2NDIyYTgwNjdlZWQ0YjIyYmI5YzA4ZGQzYWZlYzFkYXwzN2MzNTRiMjg1YjA0N2Y1YjIyMjA3YjQ4ZDc3NGVlM3wwfDB8NjM4NzMxNTg4NjE5ODAwNjc0fFVua25vd258VFdGcGJHWnNiM2Q4ZXlKRmJYQjBlVTFoY0draU9uUnlkV1VzSWxZaU9pSXdMakF1TURBd01DSXNJbEFpT2lKWGFXNHpNaUlzSWtGT0lqb2lUV0ZwYkNJc0lsZFVJam95ZlE9PXwwfHx8&sdata=eDBPQ083S1dNWmFHcTQyQnNPcXNoMzIrbGN1aU5VUHFMUkJLVHVDTk42dz0%3d)
2. Send a **text message** for patients who are making early requests for their opioid medication to invite them for an urgent medication review (see appendix 1).
3. Add a **pop-up message** (EMIS) or a message on the home screen (SystmOne) on the clinical system to highlight that a patient is on an opioid reduction plan:

EMIS pop up message instructions:



1. **Review repeat and acute prescribing process** – review process to ensure no opioids are on repeat
2. Use the **ePACT2 Opioid comparators dashboard** to identify patients that are taking an opioid for more than 3 but less than 6 months to review opioid use before it becomes a long-term prescribing issue.



1. Opioid **training** available for clinicians:

GPs and Pharmacists can sign up to the PrescQIPP ‘Reducing opioid prescribing in chronic pain’ e-learning course (see details of how to sign up in the attachment below):



Pharmacists can sign up to the [CPPE Deprescribing opioids in people with chronic pain - focal point online workshop](https://www.cppe.ac.uk/programmes/l/pain-ew-01/)

1. Agree a **contract between patient and prescriber** - [Opioid treatment agreement](https://www.hweclinicalguidance.nhs.uk/all-clinical-areas-documents/search-results/opioid/)
2. Liaise with community pharmacy so that they are aware of the patient’s treatment plan.
3. **Patient resources** for initial appointments:

[Opioid fact sheet](https://www.hweclinicalguidance.nhs.uk/all-clinical-areas-documents/download?cid=3376&checksum=14e422f05b68cc0139988e128ee880df) (for patients)

[Persistent pain: Supporting self-management clinicians quick guide](https://www.hweclinicalguidance.nhs.uk/all-clinical-areas-documents/download?cid=242&checksum=e4a6222cdb5b34375400904f03d8e6a5)

[Sample Letter Inviting Patients for an Opioid Medication Review](https://www.hweclinicalguidance.nhs.uk/all-clinical-areas-documents/search-results/opioid2/)

Links to **other resource** documents on HWEICS website:

[Opioid reduction tool](https://www.hweclinicalguidance.nhs.uk/all-clinical-areas-documents/download?cid=1451&checksum=80a8155eb153025ea1d513d0b2c4b675)

[Dependence forming medicine FAQs](https://www.hweclinicalguidance.nhs.uk/all-clinical-areas-documents/download?cid=1464&checksum=c913303f392ffc643f7240b180602652)

**Appendix 1**

**Opioid review patient text message template:**

Dear [Title] [Surname],

We are writing to you because you are experiencing long term pain treated with X which is an opioid medicine.

The way our bodies react to pain medicines changes over time and opioids can become less effective and cause unwanted side effects.

However do not stop taking your opioid suddenly as this may cause unpleasant withdrawal effects.

Please request an appointment so we can review your pain and medicines to ensure you are on the best possible treatment.

|  |  |
| --- | --- |
| **Version** | 1.0 |
| **Developed by** | Stacey Golding and Ashik Shah - Pharmacy and Medicines Optimisation Team, Hertfordshire and West Essex Integrated Care Board |
| **Approved by** | Medicines Optimisation Delivery and Implementation Group (MODIG) |
| **Date approved /updated** | July 2025 |
| **Review date** | The recommendation is based upon the evidence available at the time of publication. This recommendation will be reviewed upon request in the light of new evidence becoming available. |
| **Superseded version** | n/a |