



## Stories of change

# OPIOID REDUCTION AND CARRYDUFF SURGERY - PARTNERSHIP FOR IMPROVEMENT

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A primary care based quality improvement project to reduce the percentage of patients who are on more than one opioid for non-cancerous chronic pain



## What we did

Chronic pain is very complex. To be able to live with this, people need a whole selection of tools, not a 'one size fits all' approach. As part of our Health & Social Care Quality Improvement (HSCQI) Opioid Collaborative project, we established a connection with Versus Arthritis (VA) ultimately resulting in a self-management course which supported the aims of the project. Relevant patients were identified by Practice Pharmacist and GPs and offered this option as part of an opioid reduction plan. An initial course was arranged in partnership with VA to provide non-medical pain management support in the immediate locality of Carryduff Surgery to make self-management as accessible as possible.

## Our motivation

There is a growing body of evidence of the harms from long term opioid use in patients who have chronic pain. It is important to inform patients of this. Opioid medication will not take chronic pain away, carries significant risk, and has the potential to make things worse.

We wanted to support patients through the deprescribing process with accessible, evidence based self-management.



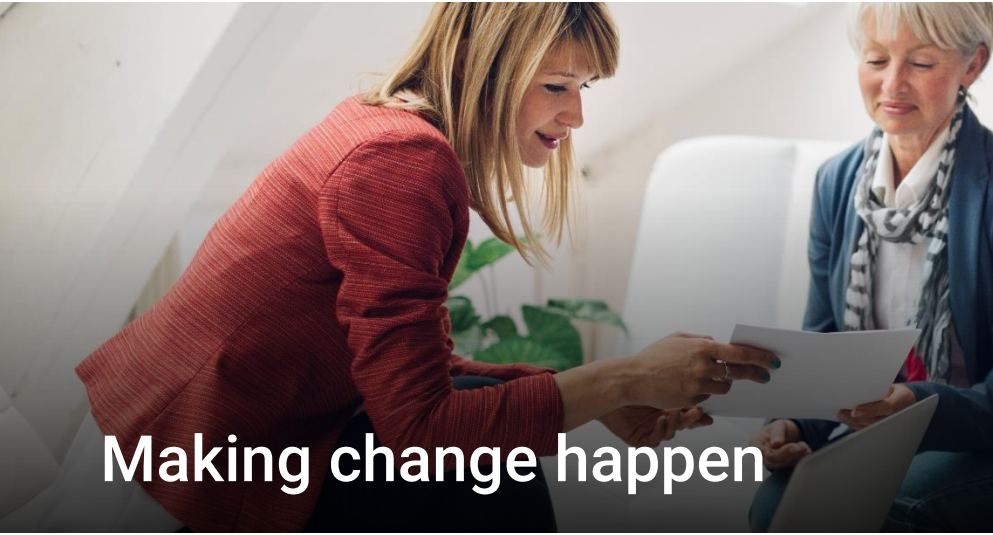
## The difference we are making

We feel that this process has led to strengthened relationships between patients and clinicians. It was brave of patients to attend a self-management course with others and to start a deprescribing process. The fact that patients saw an improvement and felt supported throughout this process has enhanced trust. People who attended the course continue to need less medication having noted benefit from these alternative supports.

## What's next?

We want to continue to nurture these relationships between the surgery, patients, Versus Arthritis and our wider community. We want to continue this ripple effect and share our work with colleagues across Northern Ireland. We encourage replication of this model at a wider level. Why? It is better for people living with chronic pain and more sustainable for healthcare organisations.





## Making change happen

We are one of only 3 practices in Northern Ireland able to sign up to the regional 'HSCQI Opioid Collaborative' programme, as it involved time away from practice and increased workload. There is huge inequity facing primary care teams' ability to participate in QI – there are barriers such as funding and capacity preventing participation.

Guidelines on managing chronic pain have changed significantly and patients are not necessarily aware of that. We had invested in planned medication reviews, not an urgent consultation or at a time of crisis, but as the practice being interested in the care of patients.

An outcome measure was to support people in reduced prescribing however it was not always the right time for people to down-titrate medication, so we tried to address the fear that medication would be stopped without a shared decision-making process.

Collaborating with Versus Arthritis enabled people to see the impact of a holistic approach to chronic pain management rather than fear deprescribing.

Loneliness and social isolation were key issues for patients, so the post-course offer from Versus Arthritis was also key. Utilising the local leisure centre as the course venue was a game changer in terms of a non-medical setting and promotion of physical activity.

To reinforce partnership, we greeted participants on the first and last day of the course, many of whom had a lot of anticipatory stress.

By the final session there had been a clear shift. This was cohesive group that had a transformative experience – they had agency to manage their chronic pain condition within the context of their own lives. One participant reported "I only came because thought you would take my medication away from me – now I'm here, it has changed my life".

This kind of qualitative data can be hard to show in a graph – through this collaboration people are being seen as individuals and all are realising the ripple effect on effective chronic pain management on relationships, families and the community.

**"I have been simply bowled over by the positive response. I do not think I have ever seen such as transformational change in people as I saw in the group"**

### Top tips

- Listen! Align practice to evidence base and lived experience
- Not always the right time or place for patients – keep conversation open
- Approach is key – empower patients to understand medications
- Make self management accessible – peer led is rich resource
- Utilise community assets for sustainable change

### Want to know more?

[HSCQI-One-Page-Programme-Summary-Med-Safety-Final.png \(1414x2000\) \(hscni.net\) Opioid Recognition Booklet 2024](#)

Carryduff surgery site [Carryduff Surgery](#)



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