



# Update

Keeping in touch with the PROMPPT community

Bulletin 1 – September 2019

## Improving care for patients prescribed opioids for persistent pain: An overview of the PROMPPT programme

Guidelines say that people who use long-term opioids should be reviewed regularly to make sure that their medicines are helping rather than harming. In practice this often doesn't happen, mainly because GPs are too busy.

A recent report recommends that clinical pharmacists should be more involved in looking after patients with long-term health problems. Clinical pharmacists are pharmacists who have done extra training in patient care. They can see patients and prescribe medication in the same way as GPs do. In future more clinical pharmacists will work as part of the team of health professionals in GP practices.

The aim of the PROMPPT programme is to develop and test a new approach to reduce opioid use (where appropriate) in patients living with persistent pain led by clinical pharmacists working in GP practices.

### What does PROMPPT stand for?

Proactive clinical Review of patients taking Opioid Medicines long-term for persistent Pain led by clinical Pharmacists in primary care Teams



### Find out more:

For information about PROMPPT, please see our website: [promptt.co.uk](http://promptt.co.uk) & follow **KeelePain** on Twitter and Facebook

## The Timeline of the 5- year PROMPPT Research Programme

### Phase 1 Intervention Development

Co-design intervention (the PROMPPT review) & pharmacist training package with the **PROMPPT community**

### Phase 2 Feasibility Study

Test how well the PROMPPT review works in practice & then improve the review and training package

### Phase 3 Main Trial

Does providing PROMPPT reduce opioid use ( $\geq 25\%$ ) without increasing pain/ pain-related interference, when compared to usual primary care & is it cost-effective?

We are here

# What is the PROMPPT Community?

Members of the public, patients and healthcare professionals who have come together to support the research team to co-design & produce the PROMPPT intervention and training package. The community includes:

- Patients living with persistent pain who have experience of taking regular opioid painkillers. Members of the public. GPs, practice nurses, practice managers and specialist from pain, mental health and addiction services.



The PROMPPT study team would like to say a big **thank you** to everyone in the community who has expressed an interest & and is sharing their knowledge and experience.

## An example of the impact of the community, so far...

### What the research team needed



Feedback on the PROMPPT website and Q-PROMPPT Research blog

### What did we do about it?



Research user group meetings, informal user testing Keele University

### What we have done



Acknowledge need for greater diversity, more relevant information, KeelePain social media platforms curated by research team, more user-friendly blog-platform for patients and participants

### The impact



Meaningful online public engagement to promote the study and encourage recruitment. User friendly experience on [promptt.co.uk](http://promptt.co.uk) and on the Q-PROMPPT research blog.

## The Q-PROMPPT Research blog

We know that many people living with pain will be not be able to, or may not want to take part in an interview but we want to understand the views and experiences of a diverse range of people. For this reason and to help shape our review, we have developed the Q-PROMPPT research blog.

This is an exciting opportunity to join in with our research and it will go live in early September.

**For the latest updates please visit [promptt.co.uk](http://promptt.co.uk).**