

## Campaign to Reduce Opioid Prescribing (CROP)

You will be aware of the increasing amount of evidence confirming that opioid analgesics provide little benefit in the management of chronic pain.

Recent NICE guidance (7 April 2021) advises that chronic primary pain (in which no underlying condition adequately accounts for the pain or its impact) and chronic secondary pain (in which an underlying condition adequately accounts for the pain or its impact) should be managed with exercise programmes, CBT, acceptance and commitment therapy, and acupuncture. The only drug treatments that should be considered are amitriptyline, citalopram, duloxetine, fluoxetine, paroxetine or sertraline

[Chronic pain \(primary and secondary\) in over 16s: assessment of all chronic pain and management of chronic primary pain – guidance \(NG193\)](#)

The South Yorkshire and Bassetlaw (SYB) ICS has funded the West Yorkshire Research and Development (WYRD) to carry out a CROP study across the SYB CCGs aiming to help prescribers reflect on previous practice and implement the NICE Chronic pain guidance

The CROP audit has been previously conducted across CCGs in West Yorkshire, and proved to be very successful in helping prescribers manage their prescribing of opioid analgesics and significantly reduce opioid analgesic prescribing across West Yorkshire

### What is the CROP study?

The report will outline key action points and data on the prescribing of opioids for chronic non-cancer pain. These action points will be of help to the practice team members undertaking structured medication reviews.

The data will be extracted at practice level and an anonymised data set will then be collated by the ICS and presented into the final format. This data set will form the basis of the CROP reports that will be sent to each practice. The reports will contain references to the latest guidance, sample action plans along with answers to questions relating to better pain management. We are confident that the reports will help you to deliver a better quality of care, improve outcomes for patients suffering from pain and reduce opiate use.

### What will the practice have to do?

**All that a practice has to do is agree to participate in the CROP audit.**

The anonymised data extraction will be done by a CCG member of staff. The WYRD Team will only have access to anonymised data; they will analyse the data and produce the report which will be sent to your practice every 8 weeks from June 2021, for 12 months

## What are the benefits of participating in the Project/ Study?

- As a practice you will be able to reflect on your practice's prescribing of opioid analgesics against other practices.
- The reports can be used by individual GPs to direct their private reflections as part of their personal revalidation.
- The data can direct, or be incorporated into, audits as part of revalidation.
- The reports could be used to support CQC practice visits demonstrating medicine safety awareness, NICE compliance and reflective practice, which may help contribute to subsequent CQC rating
- CROP projects carried out in other parts of the country were found to be effective in reducing the level of prescribing of opioid analgesics, leading to an improvement in the quality of care delivered in the community.

Please confirm that:

- You would like your practice's data to be included in this initiative and
- You would like to receive the reports for your practice

by emailing the medicines management team by 12<sup>th</sup> May 2021

Yours sincerely,



Paul Carder  
Head of Research  
West Yorkshire and Harrogate and Rural District CCGs



Idris Griffiths  
AO, Bassetlaw CCG and  
SRO Medicines Optimisation Programme  
South Yorkshire & Bassetlaw ICS



Alex Molyneux  
Head of Medicines Management  
Doncaster CCG

