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Background

Pain management remains a challenging task and despite recent advances pain is often untreated or undertreated.

Pain is a growing area of non-medical prescribing; it is therefore essential that Non-Medical Prescribers (NMPs) maintain their competence and skills in order to improve patient outcomes and overcome some of the barriers to effective pain management.

Studies have shown that NMPs are well integrated and established practitioners that manage a variety of conditions and provide access to medicines (NHS i5 health, 2015).

Aim

The aim of this project is to examine the current non-medical prescribing practice for pain patients in a central London hospital. Furthermore, to assess the performance and compliance of NMPs working in Pain Management and evaluate patient outcomes based on prescribers' recommendations.

Methods

Pain Clinical Nurse Specialists at a large teaching hospital in London developed a questionnaire following the Nursing and Midwifery Council (NMC) standards of practice for Independent Nurse Prescribers in order to assess their current prescribing practice.

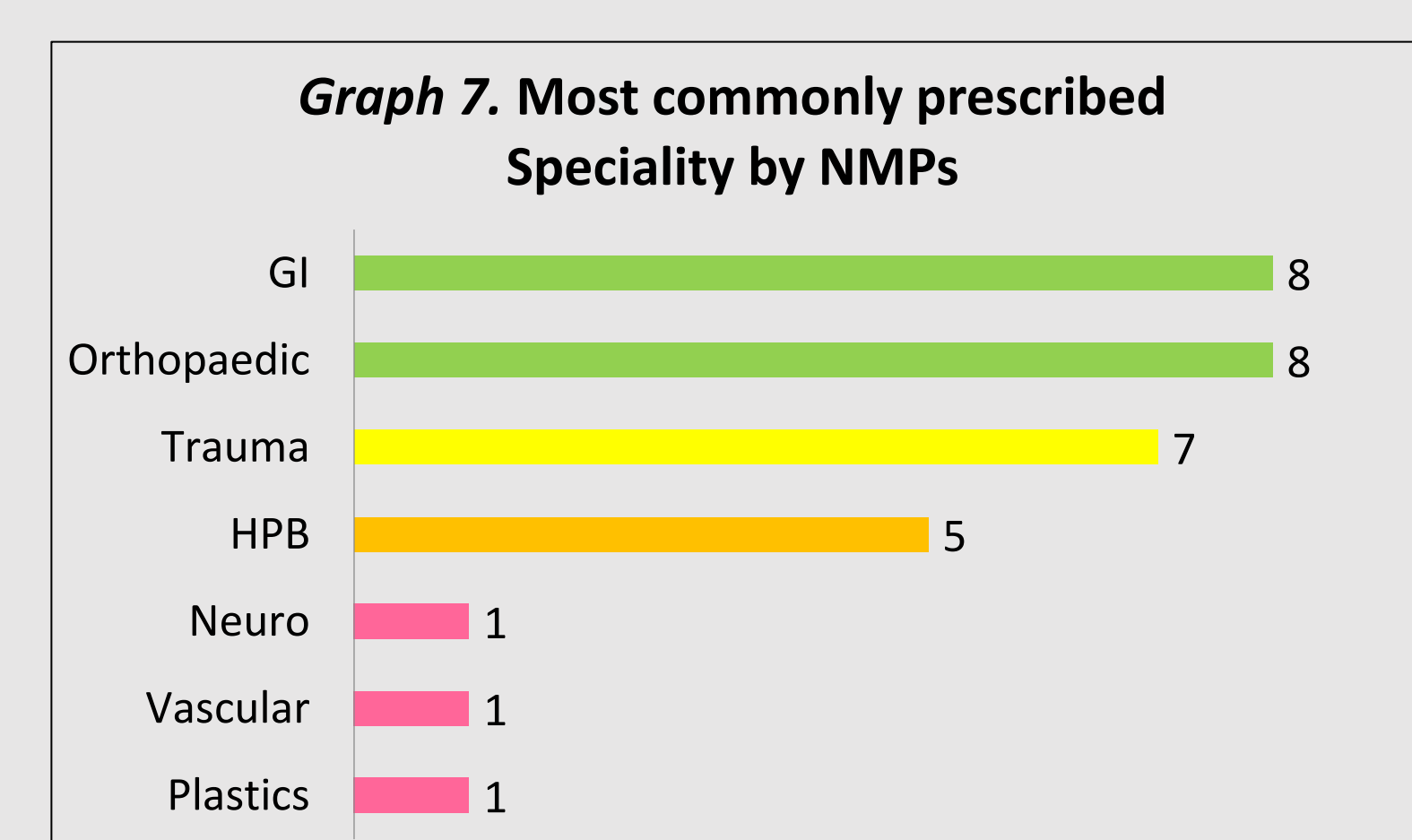
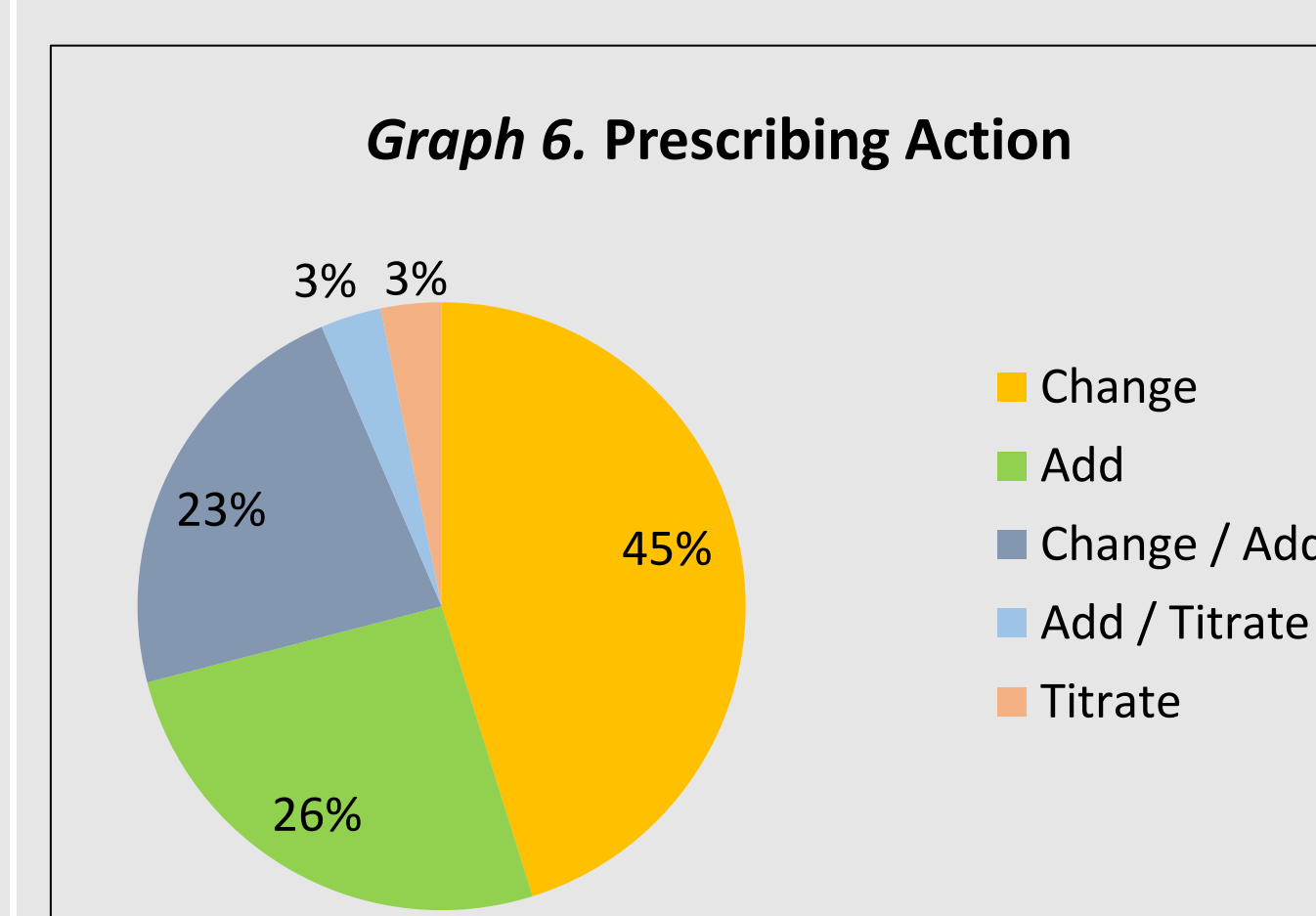
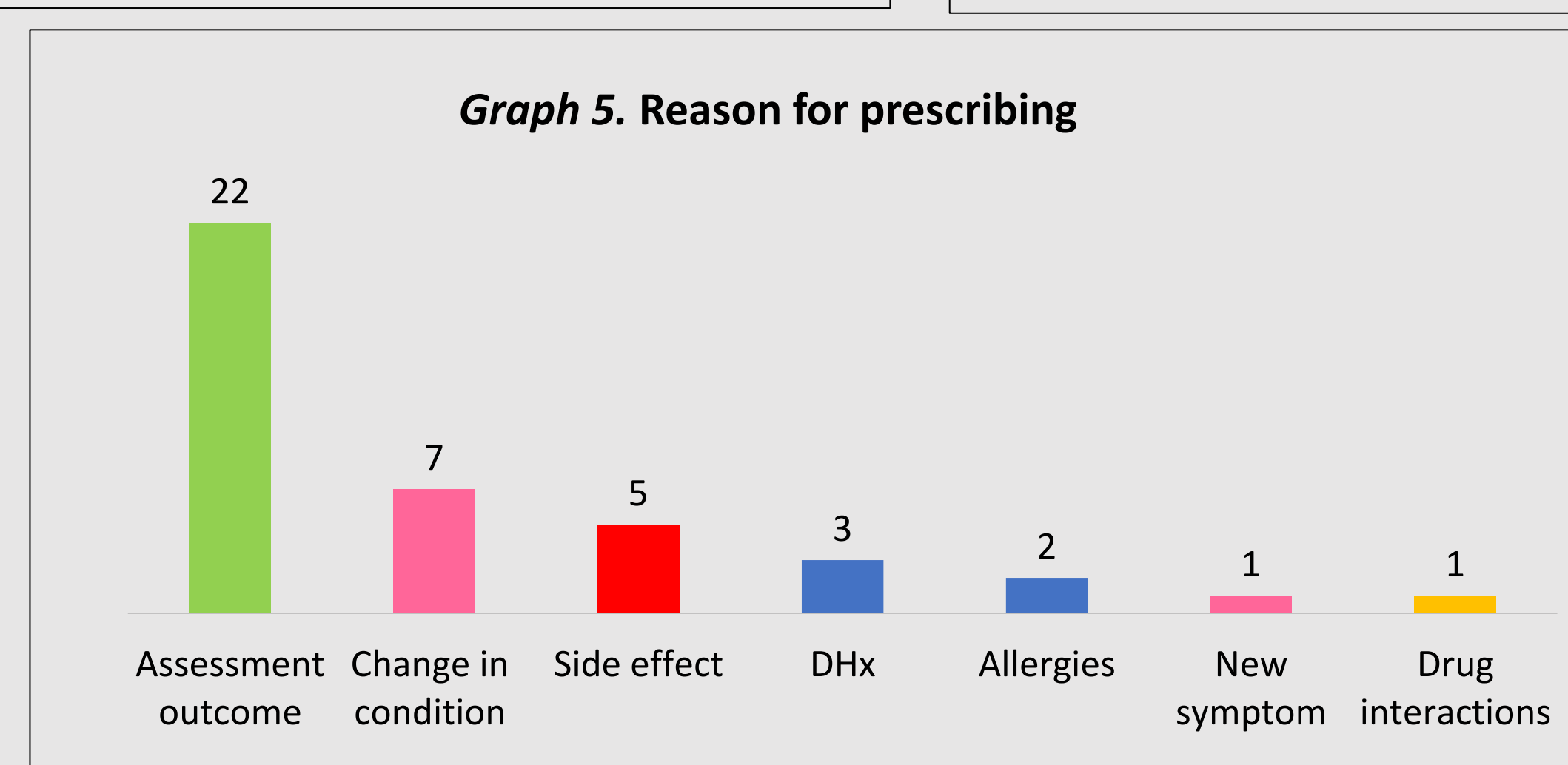
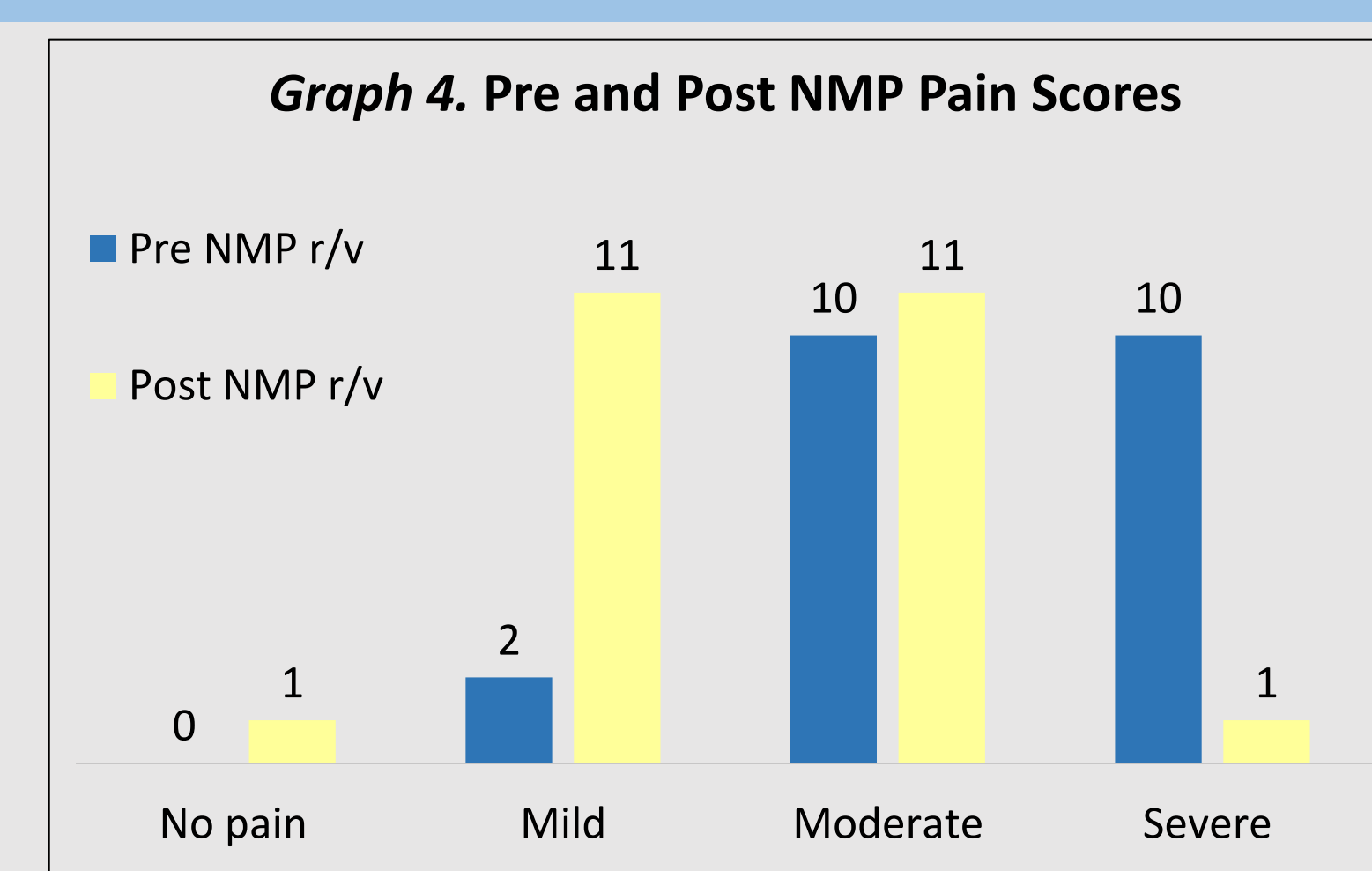
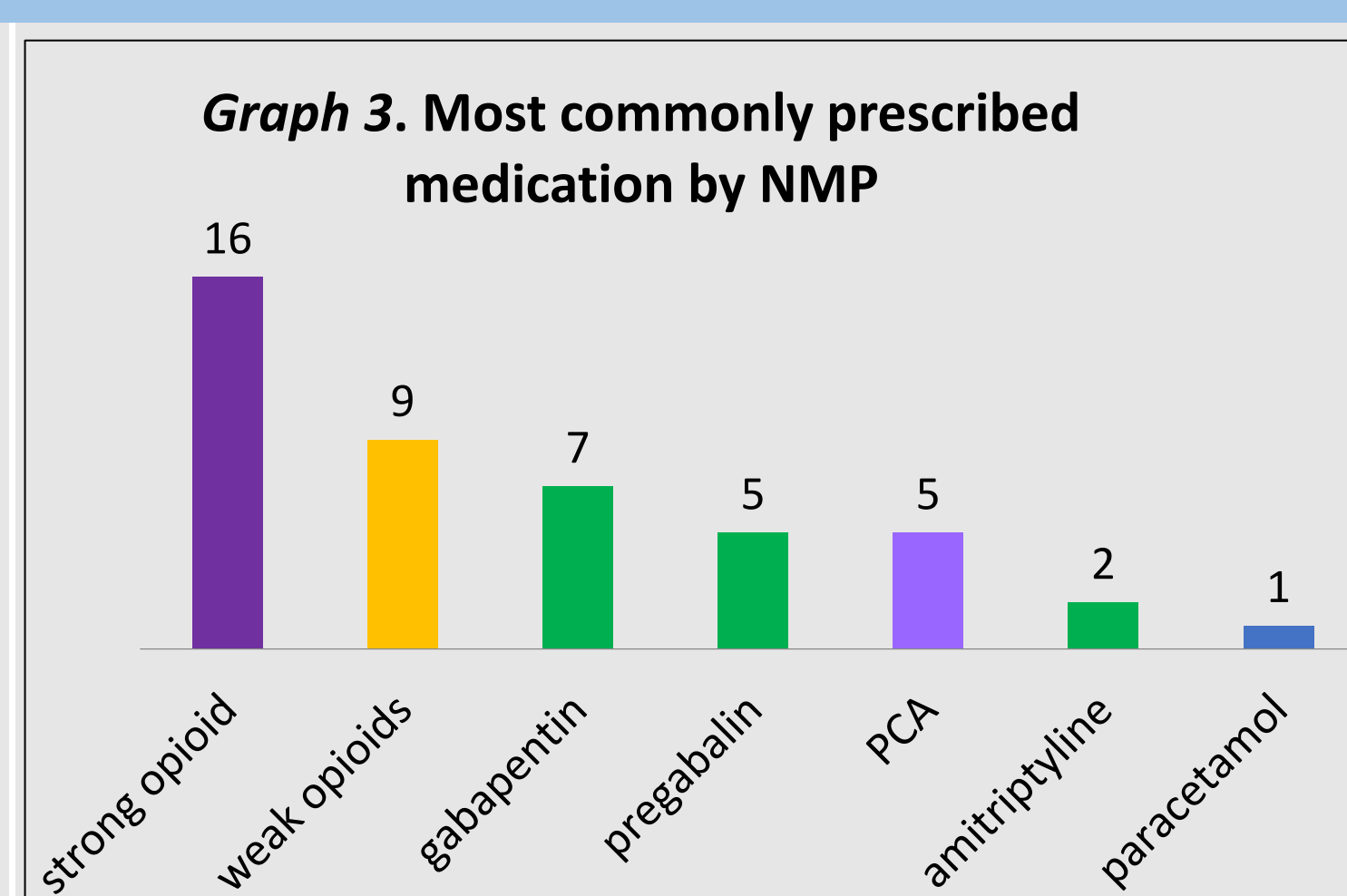
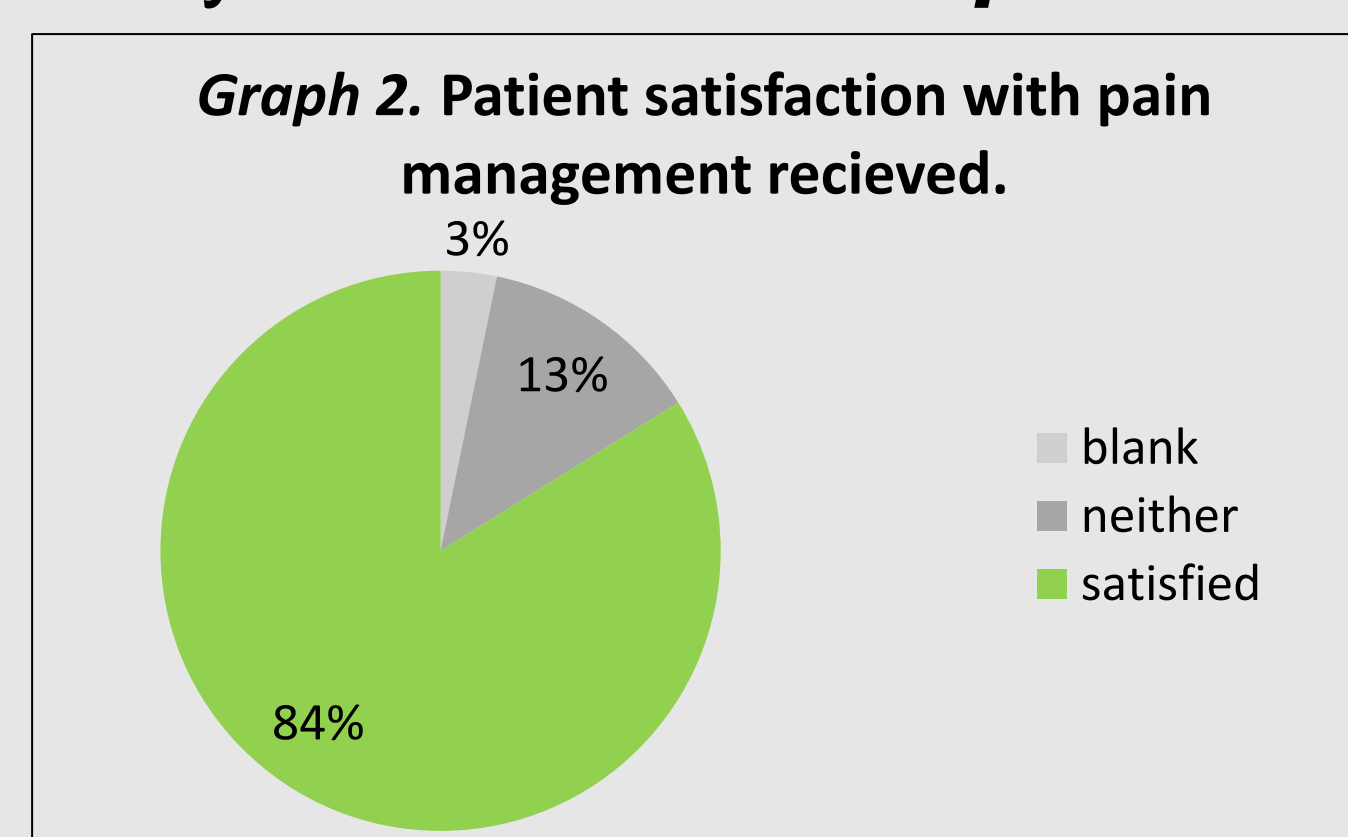
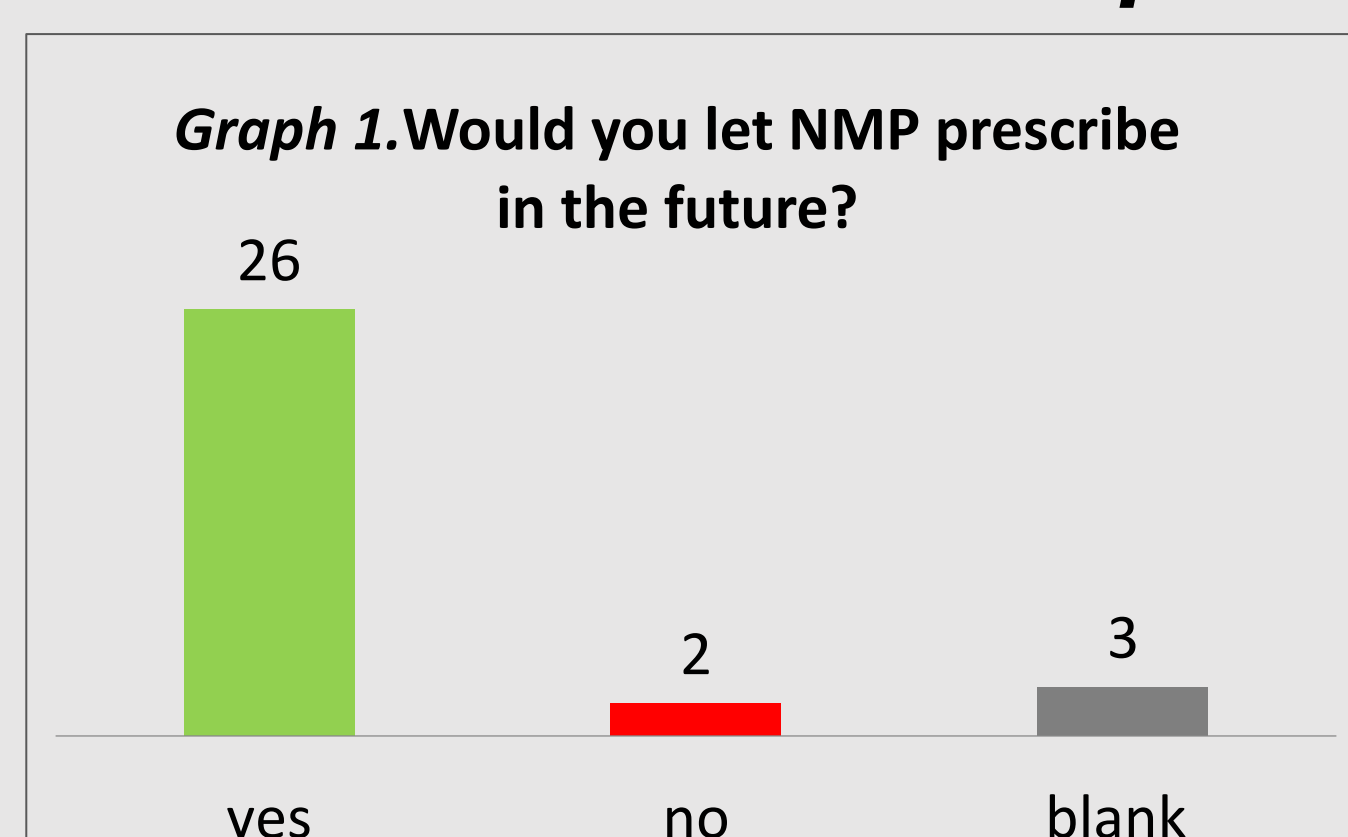
The questionnaire consisted of 18 questions which included: patient demographics, presenting condition, clinical speciality, rationale for prescribing, type of medications prescribed and patient satisfaction. Additionally pre and post prescribing amendments, pre and post pain intensity scores and prescription details were obtained.

The NMPs firstly identified adult pain patients from different specialities for a period of two months. Following a detailed pain assessment and history taking the decision was then made to change, add and/or titrate their current analgesic regime.

The NMP's acted in accordance with the NMC standards of practice and informed patients of their actions at all times. Finally, patients were followed up as per standard of care.

Results

- N=31 questionnaires completed . The female/male ratio was 1:1.
- 83% (N=26) of patients would be happy for an NMP to prescribe for them again. **Graph 1**
- The majority of patients were satisfied with the pain management received (n=22). **Graph 2**
- 80% (N=25) of patients felt they *were involved* in the decision making process of prescribing. N=7 patients didn't know the prescriber was an NMP.
- The most common medications prescribed were anti-neuropathics and opioids. **Graph 3**
- Pain intensity scores improved following NMP prescribing. **Graph 4**
- The indications for NMP are detailed in **Graph 5**. The actions taken are shown in **Graph 6**. Speciality is shown on **Graph 7**.



Conclusions

Despite limitations, this service evaluation has shown the efficacy of NMPs working in Pain Management. Pain intensity scores improved alongside patient satisfaction. Furthermore, patients were content having NMPs make amendments and felt involved in the prescribing process. To improve the strength of this service evaluation a larger cohort of patients would be recruited to examine the prescribing practice in pain management is needed in the future.

