

Doncaster and Bassetlaw Area Prescribing Committee Annual Report (2017-18)

Introduction

The Doncaster & Bassetlaw Area Prescribing Committee (APC) co-ordinates the development of prescribing and medicines management strategies across the Doncaster and Bassetlaw Health Communities. The overarching functions of the Committee include; providing consistent, evidence based advice to Doncaster & Bassetlaw CCG's, hospital trusts, primary care contractors and non-medical prescribers.

The Committee publicises and disseminates its guidance through Shared Care Protocols, Prescribing Guidance, the Traffic Light System and monthly updates in the Medicines Management Newsletter (The T@blet). All approved documents and guidance are made available on the NHS Doncaster Medicines Management Website.

This report aims to summarise the activities of the APC during 2017-18 and includes; Drug reviews; Membership details; Attendance figures and achievements of the APC.

Membership

The APC serves the Doncaster and Bassetlaw healthcare communities and has representatives from professional, clinical, educational, management and commissioning backgrounds which are committed to the APC from the following organisations:

- NHS Doncaster CCG GP Representative (Chair)
- NHS Doncaster CCG GP Representative
- NHS Doncaster CCG Head of Medicines Management (Deputy Chair)
- NHS Doncaster CCG Deputy Head of Medicines Management
- NHS Doncaster CCG MMT Technician (Minutes Secretary)
- NHS Bassetlaw CCG GP Representative or deputy
- NHS Bassetlaw CCG Medicines Management Representative or deputy
- DBTHFT Medical Director or deputy
- DBTHFT Clinical Director Pharmacy & Medicines Management or deputy
- RDaSHFT Medical Director or deputy
- RDaSHFT Chief Pharmacist or deputy
- Non- medical prescriber representative or deputy
- Local Medical Committee Secretary or deputy
- Local Pharmaceutical Committee Representative or deputy
- FCMS Representative

Attendance

The meetings are held on a monthly basis, there was a total of 10 meetings during 2017-18

The table below shows attendance figures for members of the committee or that of an appointed deputy. It is requested that representatives of the organisation have an annual attendance at APC meetings of at least 60%.

Name	Job Title	Organisation	Possible no. of attendance's	Meetings Attended	% attended	Overall Organisation al Attendance
Dr David Crichton	APC Chair	NHSD CCG	10	10	100	100%
Dr Rachel Sykes	NHS Doncaster GP	NHSD CCG	10	10	100	100%
Mrs Gill Bradley	Deputy Head of Medicines Management	NHSD CCG	10	9	90	90%
Mr Andrew Barker	Chief Pharmacist	DBTHFT	10	0	0	100%
Mr Lee Wilson	Consultant Pharmacist - Deputy	DBTHFT	10	9	90	
Dr Mahmoud Al Khoffash	Medical Director Representative	DBTHFT	10	7	70	
Mr Andrew Houston	Senior Mental Health Pharmacist	RDaSHFT	10	0	0	70%
Mr Stephen Davies	Principal Pharmacist	RDaSHFT	10	7	70	
Dr Eric Dale	Consultant Psychiatrist	RDaSHFT	10	0	0	
Mr Rob Wise	Medicines Management Lead Pharmacist	NHSB CCG	10	9	90	90%
Dr Dean Eggitt	Local Medical Committee Representative	Doncaster LMC	10	1	10	90%
Dr Runit Shah	Local Medical Committee Representative - Deputy	Doncaster LMC	10	8	80	
Mr R Harris	Local Pharmaceutical Committee Representative	Doncaster LPC	10	9	90	100%
Mr Paul Chatterton	Local Pharmaceutical Committee - Deputy	Doncaster LPC	10	1	10	
Ms Heidi Atkinson	Doncaster Community Healthcare Non- Medical Prescribing	DCH	10	1	10	10% -work priorities
Several Attendees	Representative from Quality and Performance	FCMS	10	5 (as from Oct 2018)	50	50%

Specialist Input

Throughout the year officers of the APC worked together with General Practitioners, Secondary Care Clinicians, Specialist Nurses and Pharmacists to develop and review several shared care agreements and prescribing guidance to take to the committee for approval.

Shared Care & Prescribing Guidance Documents

The following list are Shared care Protocols (SCP), Proformas and Amber-G Guidance that have been developed, or reviewed due to new evidence, changes in good practice or expiration of existing documentation.

New SCP

- Shared Care Guideline for Riluzole

Review of existing SCP

- Shared Care Guideline between STH NHS Foundation Trust and NHS Sheffield CCG for the prescription and supply of Dalteparin (Fragmin®)
- Shared Care Protocol for the use of oral N-Acetylcysteine (NAC) in the management of Idiopathic Pulmonary Fibrosis in Adults
- Shared Care Protocol for the Management of Inflammatory Arthritis, Connective Tissue Disease & Systemic Vasculitis for Adult services (over 16)
- Shared Care Protocol for the Management of Pseudomonas aeruginosa Colonisation in Non-Cystic Fibrosis Adult patients with Bronchiectasis (Off license Indication)
- Amiodarone Shared Care Protocol

New Guidance Documents

- Prescribing Guidance for the use of Midodrine in patients with Postural Hypotension

- Anti-epileptic drugs in adults
- Prescribing guidelines for transgender men and women

Updated Guidance Documents

- Management of Vitamin D in Adults
- Process for the prescribing and dispensing of Fidaxomicin in the management of Clostridium difficile
- Process for the prescribing and dispensing of Fosfomycin 3g oral sachets in the management of urinary tract infection in the community

The review & development of shared care documents & prescribing guidance are included as part of the Committee's 12-monthly work plan.

Additional Support provided by the Committee

- Cessation of DBTHFT thyroid register: The APC provided support to the CCG when negotiating a new pathway for the continued care of complex patients.
- Pathway discussion for the supply of methotrexate injections via Community Pharmacy to support the Rheumatology
- National Consultation List - Medicines of Low Clinical Value & Prescripp Drop List/ Items which should not routinely be prescribed in Primary Care: The APC has completed extensive work to align the traffic light categorisation of specific drugs to match recommendations made in these documents.

Traffic Light System (TLS)

The Traffic Light System (TLS) is a database which provides guidance to prescribers on prescribing responsibilities for selected medications. It aims to provide clear understanding of where clinical and prescribing responsibility rests between specialists and GPs.

Criteria for the inclusion of medicines on these lists, or the moving of medicines between the different categories of the TLS, will be primarily based on: evidence, clinical responsibility, patient safety, willingness to provide agreed shared care information and the presence of an approved shared care protocol.

Each drug is classified under one of the following categories:

- Grey
- Red
- Amber (Shared Care)
- Amber with Guidance (Amber-G)
- Green
- Green with Guidance (Green-G)

The category it is placed in determines the circumstances in which it is recommended to be prescribed and any guidance/rationale which needs to be taken into consideration. When new guidance/information is released on the drug, it is reviewed and the category it is placed in can be changed dependent on its place in therapy.

The TLS is available as a web-based version on the medicines management website

Review of new drugs, formulations and indications

At each meeting several lists of drugs are reviewed. These include; new indications for existing drugs; new drugs; products granted licences for new indications; existing TLS entries which are due for review or review of existing entries when there is new or emerging evidence available. These are identified prior to the meetings by APC officers who use a review process to ensure that a robust horizon scanning process is carried out daily on existing and potential new TLS entries.

The Committee considers these under:

- **Officers Actions:** amendments or additions completed by APC officers and are circulated on the agenda for information and ratification. These actions include adding national or local guidance to support an agreed rationale, brand names and grammatical changes.
- **Additions for Consideration:** new drugs, indications or formulations which are being considered for inclusion onto the Traffic Light System.
- **Drugs for Review:** for current entries where the review date is due or new emerging evidence, such as the publication of a Summary of Product Characteristics (SPC) or new NICE guidance has been released.

The following shows a breakdown of the number of drugs that have been reviewed and agreed at the APC through the process of drugs for review, officer's actions, and considerations.

Month	Drugs for Review	Officers Actions	Considerations	Total of drugs reviewed
April	2	5	34	41
May	5	2	8	15
June	No meeting			
July	6	5	62	73
August	1	12	30	43
September	2	2	11	15
October	4	4	6	14
November	0	0	0	0
December	No meeting			
January	13	7	56	76
February	0	0	0	0
March	12	8	9	29
Total number of drugs for the period				306

Monitoring prescribing patterns against APC guidance on selected traffic light entries (TLS)

NHSD-MMT produce reports throughout the year, these are reviewed at practice level and they are periodically included on the APC agenda. The reports highlight:

- Those with potential risks linked to on-going clinical review of the requirement for a monitoring schedule to be in place
Or
- not recommended for initiation or prescribing on an NHS prescription in the Doncaster & Bassetlaw Health Care Communities

The APC is currently reviewing both red & grey drugs and highlighting misplaced Primary Care prescribing in the Medicines Management Newsletter (The T@blet).

Communication

The NHS Doncaster Medicines Management Website provides a useful and informative resource for the public, staff members and healthcare professionals from Doncaster, Bassetlaw and other Trusts around the country.

APC decisions are well communicated via The T@blet newsletter.

Formulary

The Committee continues to support the collaborative work undertaken by the Formulary Liaison Group (FLG), which is represented by DCCG, BCCG, RDASH FT and DBTHFT.

Preparation and Support

Support to the APC from NHS DCCG MMT is provided by the Head of Medicines Management, Deputy Head of Medicine Management, Medicines Management Technician, administrative support and input from a DCCG Information Analyst.

Governance

The Area Prescribing Committee is encompassed within the following governance processes:

- DCCG Medicines Management Group, and the DCCG Quality & Patient Safety Group
- DBTHFT Drug & Therapeutics Committee
- RDASH FT Medicines Management Committee.

The Committee ensure that robust standards and governance arrangements underpin area wide decision-making and advice related to medicines.

Objectives The Committee agrees that the over- arching functions of the APC provide adequate objectives and the APC work programme for the period is included below to demonstrate progress.

2017-18 Work Programme

Month	Item	Action	Progress
April 2017	Denosumab SCP	STH – watch & brief	none
May	Modafinil SCP	STH - watch & brief	none
	Annual Report	May agenda	
	Dalteparin SCP	Amendment	
	Workplan 2017-18	May Agenda	
June	Consider development of guidance for the use of melatonin in dementia patients	Once there is Committee agreement to develop this, agree the lead organisation to develop the guidance. Added to Sept 2017 for discussion.	Done – np feedback from secondary care so removed from work plan
July			
August	Consider joining together the amber g guidance for prostate cancer	Discussed within MMT 06.09.17 and considered a low priority due to MMT capacity	
September	Prostate Cancer Amber- G guidance	Include Lutrate on Amber –G doc	done
October	ADHD Shared Care Documents	Add to agenda	
November	Epilepsy SC/guidance	Check current situation – on-going	done
December			
January 2018			
February	Prepare the Annual Report		done
March	ToR	Add to agenda	done

Prepared by:

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 April 2018