

DONCASTER & BASSETLAW AREA PRESCRIBING COMMITTEE (APC)

Action Notes and Log

Thursday 26th April 2019 12 Noon start,
Meeting Room 3 Sovereign House

Present :	Dr David Crichton	NHSD Chair, APC Chair
	Mr Alex Molyneux	NHSD Head of Medicines Management
	Miss V-Lin Cheong	NHSD Deputy Head of Medicines Management
	Dr Rachel Sykes	NHSD GP
	Mr R Wise	NHS Bassetlaw Head of Medicines Management, Deputy APC Chair
	Mr Stephen Davies	Chief Pharmacist RDaSHFT
	Dr Rमित Shah	Local Medical Committee Representative
	Mr Richard Harris	Local Pharmaceutical Committee Representative
	Mr Lee Wilson	Consultant Pharmacist DBTHFT
	Dr Lucy Peart	Acute Physician DBTHFT
Mrs Angie Machin	NHSD Medicines Management Technician (Secretary)	
Minutes only :	Ms Rachel Winn	Doncaster Offender Health, D&T Committee
	Dr Rupert Suckling & Mr Victor Joseph	DMBC Representatives

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Agenda Ref	Subject / Action Required	Action Required By	Timescale	Status of Action (RAG) and Date
04/19/1	Apologies for Absence : None received			
04/19/2	Declarations of Interest : None declared			
04/19/2.1	Fire Alarm Procedure: No test scheduled			
04/19/2.2	Notification of Any Other Business Anti-psychotic pathway			
04/19/3	Notes of the Meeting Held On : 28 th March 2019 were agreed as a true and accurate record and will be made available on the medicines management website	NHSD-AM		
04/19/4	Matters Arising not on the Agenda			
04/19/4.1	Matters Arising			
11/18/8.2	Licensed Hydrocortisone granules The proposed SCP was discussed at DCCG Medicines Management Group meeting where it was agreed that additional clinical information was required prior to the paperwork being considered further. There is also the need to include some patient numbers to the proposal to enable the consideration of any financial impact.	DBTHFT		
01/19/8.3	Epilepsy Guidance for children The Sheffield paperwork is now available on the Sheffield CCG website, it was noted that a small amendment is still required. Once this has been done a link to the paperwork will be embedded into the Doncaster/Bassetlaw flowchart and this will be added to the medicines management website. <i>Mr R Harris joined the meeting</i>	NHSD-AM		

01/19/8.6	<p>Avastin</p> <p>The committee was given a brief update on the current position. Although there is an accepting of using avastin on a clinical basis; there are concerns around the logistics of supply quantities. The Chief Pharmacist Group has stated that their preference would be to wait for the result of the judicial review before progressing further.</p>	NHSD-AJM		
01/19/8.8	<p>Heel balm TLS</p> <p>The committee was asked to consider adding specific high percentage urea based creams to the TLS. This is due to an increased amount of high priced creams being requested by the podiatry service, DBTHFT confirmed that there are two items on the formulary containing 5 & 10% urea. Following discussion it was agreed not to add a formal TLS entry. RDaSHFT agreed to speak with the provider of the service direct to advice of the formulary choices available and ask that prescribing of the higher percentage products be contained within their service.</p>	RDaSHFT		
01/19/8.10	<p>Alzheimer's disease and non-Alzheimer's Dementia SCP</p> <p>RDaSHFT advised the committee of the progress made updating the SCP paperwork. A briefing paper has been presented at Doncaster CCG RDaSHFT finance performance and information groups explaining the proposed changes:</p> <ul style="list-style-type: none"> • Recent NICE publications have changed the potential pathway for the use of these drugs <ul style="list-style-type: none"> ○ NICE NG97 - Dementia: assessment, management and support for people living with dementia and their carers ○ NICE TA217 - Donepezil, galantamine, rivastigmine and memantine for the treatment of Alzheimer's disease ○ Collectively the changes allow for <ul style="list-style-type: none"> ▪ prescribing the drug classes both individually and in combination ▪ the potential for primary care to initiate memantine following advice from secondary care ▪ for patients to not to have donepezil stopped when 	RDaSHFT		

	<p>memantine is started</p> <p>Financial implications of these changes have been considered and were accepted as reasonable.</p> <p>Following discussion at the DCCG MMG a suggestion to re-categorise the medication on the TLS to Amber-G was discussed. The committee agreed that until the pathway was clarified the Amber status will remain. RDaSHFT will update the provider service of this.</p> <p>RDaSHFT advised the committee that the protocol for managing behavioural and psychological symptoms in patients with dementia is also being reviewed and will be presented to the committee for consideration once complete.</p>			
02/19/8.1	<p>Over the Counter (OTC) consultation</p> <p>The committee was advised that the campaign was live and supporting packs are available. The messages have been added to Optimise Rx to support the suggestion of purchasing the items. The committee discussed that there still seems to be issues with schools requesting labelled medication. Schools do have a legal obligation to support the NHSE guidance/legislation. The LMC asked that a reminder of this should be added to the T@blet to remind Primary Care to support them declining requests for medication in this circumstance. NHSD will consider what action to take to support carers using OTC medication.</p>	NHSD-AJM		
02/19/8.2	<p>Antimicrobial Formulary update</p> <p>NHSB is progressing with the updates to the formulary. NHSD has provided some support in completing the work. The document will then be presented to DBTHFT Microbiologists for approval before being formally approved and added to the medicines management website.</p> <p>The LMC discussed the monitoring in place in Primary Care to ensure that there is adherence to the formulary and asked if there is a similar process in Secondary Care. DBTHFT agreed to confirm the process and feed back to the committee.</p>	<p>NHSB</p> <p>DBTHFT</p>		

03/19/8.1	<p>New TLS Category NHSB provided the committee with examples of other areas TLS categories to aid the discussion around creating a new colour on the Doncaster and Bassetlaw system. Following discussion it was agreed that the existing Grey category will have a new rationale '5'. This will be organised by NHSD and brought back for further discussion at the May APC meeting.</p>	NHSD-AM		
03/19/19.1	<p>Pre-emptive prescribing DBTHFT has made some suggestions to consider for the update of the pre-emptive prescribing document. NHSD has agreed to update the document and return to DBTHFT for a first approval.</p>	NHSD-AJM		
04/19/5	<p>Drugs for Review Semaglutide (Ozempic) used for type 2 diabetes has been categorised as Green G Ertugliflozin (Steglatro) used for type 2 diabetes requires further discussion and will be included in the May review. Alirocumab (Praluent) is now indicated for established atherosclerotic cardiovascular disease and remains Red 1,2 Ciclosporin eye drops (Ikervis) used for severe keratitis will remain as Red 1,2 Lubiprostone (Amitiza) used for chronic idiopathic constipation has now been discontinued and therefore removed from the TLS. Dapagliflozin (Forxiga) licence has been extended to diabetes Mellitus Type 2 (as monotherapy or in combined therapy) & 1 (in combination with insulin) this new indication will be discussed further at the FLG</p>	NHSD-AM		
0419/6	<p>Officers action All officers actions were agreed as proposed and will be updated on the traffic light system</p>	NHSD-AM		
04/19/7	<p>Drugs for Consideration Rituximab (Mabthera) used to treat pemphigus vulgaris has been categorised</p>	NHSD-AM		

	<p>as Red 1,2,3 Sucralfate (Antepsin) used to treat Duodenal ulcer, gastric ulcer, chronic gastritis(treatment of), and the prophylaxis of gastrointestinal haemorrhage from stress ulceration has been categorised as Grey-4 Inotersen (Tegsedi) used in polyneuropathy has been categorised as Red 1,2,3 Melatonin lmg, 5mg MR used in insomnia in children and adolescents aged 2-18 with Autism Spectrum Disorder (ASD) and / or Smith-Magenis syndrome, where sleep hygiene measures have been insufficient has been categorised as Grey 4, further work needs to be prepared with the SCP and will be added to the agenda for next month Rucaparib (Rubraca) used to treat (and as maintenance therapy) epithelial ovarian, fallopian tube cancer has been categorised as Red 1,2,3 Iloprost used for ischaemia (severe chronic) of lower limbs in patients at risk of amputation and raynaud's phenomena has been categorised as Red 1,2 Sodium zirconium cyclosilicate (Lokelma) used for hyperkalaemia has been categorised as Red 1,2,3 Leuprorelin (PROSTAP SR DCS) used to preserve ovarian function has been categorised as Red 1,2,3 <i>Mr R Harris left the meeting</i></p>			
04/19/8	New Business			
04/19/8.1	Principles of SCP document The updated document was approved by the committee.	NHSD-AJM		
04/19/8.2	Request for review or consideration of TLS There is a standard form available to request the review a drug or consider a drug for entry on to the TLS. This form has been updated to reflect recent changes in the handling of such requests and the process to consider drugs for shared care. The document will provide a consistent process route for considering requests. The committee approved the document and it will be made available on the medicines management website.	NHSD-AJM		
04/19/8.3	Doxylamine/ Pyridoxine (Xonvea) Following discussion at both the MMG and FLG a decision to categorise this item Green was agreed by the committee.	NHSD-AM		

04/19/8.4	<p>Work programme 2019-20</p> <p>The work programme for the current year was agreed by the committee with the addition of the pre-emptive prescribing item to be added as an on-going piece of work</p>	NHSD-AM		
04/19/9	<p>DBTHFT D&TC Update</p> <p>The minutes of the meeting held in March 2019 were received by the Committee</p> <p>No minutes available</p>			
04/19/10	Formulary Liaison Group Update			
04/19/11	<p>Doncaster Prisons Drug & Therapeutic Committee update</p> <p>No minutes available</p>			
04/19/12	<p>RDASH FT Medicines Management Committee update</p> <p>No minutes available</p>			
04/19/13	<p>Barnsley Area Prescribing Committee Update</p> <p>The minutes of the meeting held in February 2019 were received by the Committee</p> <p>Item 19/38.8 was noted by the committee – additional information regarding the Epilepsy guidance for adults has been approved. NHSB will mention this at the HoMM meeting to enquire if the guidance is to be available across the SY&B area.</p>	NHSB		
04/19/14	Rotherham Medicines Optimisation Group Update			
04/19/15	<p>Sheffield Area Prescribing Committee Update</p> <p>The minutes of the meeting held in February 2019 were received by the Committee</p>			
04/19/16	<p>Nottingham Area Prescribing Committee Update</p> <p>The minutes of the meeting held in January 2019 were received by the Committee</p>			
04/19/17	SY& B sICS Medicines Optimisation Work-stream Steering Group			

	No minutes available			
04/19/18	Northern Regional Medicines Optimisation Committee No minutes available			
04/19/19	<p>Any Other Business</p> <p>04/19/19.1 Shared Care Pathway for Anti-Psychotics</p> <p>RDaSHFT informed the committee that the pathway to enable discharge of patients from Secondary Care has moved forward and the enhanced mental health check review will be live in Primary Care to enable review of this cohort of patients. RDaSHFT discussed the re-categorisation of these drugs to Amber –G will be required and suggested that any preparation should be done in anticipation of this happening. It was agreed that NHSD-VLC would check with the RDaASHFT manager to establish a timeframe and will feedback at the next meeting.</p> <p><i>Post meeting note:</i></p> <p><i>The SMI physical healthcare implementation is targeted for October 2019. Stephen Emmerson Head of Strategy & Delivery – Adult Mental Health will feed back on APC decision date to their mobilisation plan</i></p>	NHSD-VLC		
04/19/19.1	<p>Date and Time of Next Meeting</p> <p>12 noon prompt Thursday 30th May 2019 in Meeting Room 3 Sovereign House</p>			
	<p>12 noon prompt Thursday 27th June 2019 in Meeting Room 3 Sovereign House</p> <p>12 noon prompt Thursday 25th July 2019 in Meeting Room 3 Sovereign House</p> <p>12 noon prompt Thursday 29th August 2019 in Meeting Room 3 Sovereign House</p>			

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Completed / Closed	To Action
In Progress	To be actioned but date not yet due