

Doncaster and Bassetlaw Area Prescribing Committee Annual Report (April 2014 to March 2015)

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 bulletins. 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 2014/2015 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 (Deputy Chair)
- NHS Doncaster CCG Head of Medicines Management
- NHS Doncaster CCG Deputy Head of Medicines Management
- NHS Doncaster CCG MMT Technician (Secretary)
- NHS Bassetlaw CCG GP Representative or deputy
- NHS Bassetlaw CCG Medicines Management Representative or deputy
- DBHFT Medical Director or deputy
- DBHFT 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

Attendance

The meetings are held on a monthly basis, there was a total of 11 meetings during 2014-15.

Figure 1 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%.

Figure 1

Name	Job Title	Organisation	Possible no. of attendance's	Meetings Attended	% attended	Overall Organisation al Attendance
Dr Rumit Shah	APC Chair	NHSD CCG	11	10	91	91%
Dr David Crichton	NHS Doncaster GP	NHSD CCG	11	11	100	100%
Mr Mark Randerson	Head of Medicines Management	NHSD CCG	11	9	82	100%
Mrs Gill Bradley	Deputy Head of Medicines Management	NHSD CCG	11	10	91	
Mr Andrew Barker	Chief Pharmacist	DBHFT	11	1	9	100%
Mr Lee Wilson	Consultant Pharmacist - Deputy	DBHFT	11	8	73	
Dr Mahmoud Al Khoffash	Medical Director Representative	DBHFT	11	7	64	
Mr Andrew Houston	Senior Mental Health Pharmacist	RDaSHFT	11	1	9	82%
Mr Stephen Davies	Principal Pharmacist	RDaSHFT	11	8	73	
Mr Rob Wise	Medicines Management Lead Pharmacist	NHSB CCG	11	10	91	100%
Mr Peter Richards	Medicines Management Pharmacist	NHSB CCG	11	1	9	
Dr Shahzad Arif	Local Medical Committee Representative	Doncaster LMC	11	7	64	82%
Dr Paul Wilson	Local Medical Committee Representative - Deputy	Doncaster LMC	11	2	18	
Mr Richard Harris	Local Pharmaceutical Committee Representative	Doncaster LPC	11	8	73	82%
Mr Paul Chatterton	Local Pharmaceutical Committee - Deputy	Doncaster LPC	11	1	9	
Ms Anne Burton	Doncaster Community Healthcare Non- Medical Prescribing	DCH	11	3	27	27%
Ms Julie Hall	Doncaster Community Healthcare Non- Medical Prescribing - Deputy	DCH	11	0	0	

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

Modafinil for the use in Narcolepsy

Review of existing SCP

- The Management of Inflammatory Arthritis, Connective Tissue Disease & Systemic Vasculitis for Adult services (over 16)
- Management of Parkinson's disease
- Denosumab (Sheffield)
- Management of Children with Growth Hormone Disorders
- Dalteparin SCP (Doncaster)
- Dementia SCP

New/updated Guidance Documents

- Prescribing of Anti-epileptic drugs (AED's) as mood stabilisers for the maintenance of patients with stable bipolar disorder (Valproate salts, Carbamazepine and Lamotrigine)
- Guidance for the Prescribing of Goserelin, Leuprorelin & Triptorelin in the treatment of Prostate Cancer
- The Management of Behavioural and Psychological Symptoms of Dementia

The review & development of shared care documents & prescribing guidance are included as part of the committee's 12-monthly work plan. There are several shared care and Amber-G documents in development at present and are due for completion in the coming months.

These include:

- Amiodarone prescribing (Amber- G)
- Antipsychotics SCP
- Lithium SCP
- Melatonin use in children and young people with neurodevelopmental disorders

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. A search facility has been created to enable easy selection of entries. This is updated every month to reflect the decisions made at the APC meetings.

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.

Figure 2

Month	Drugs for Review	Officers Actions	Considerations	Total of drugs reviewed
April	5	4	1	10
May	3	9	0	12
June	11	14	5	30
July	3	31	5	39
August	3	9	4	16
September	6	6	2	14
October	43	32	7	82
November				
December	14	34	7	55
January	22	9	14	45
February	17	4	10	31
March	10	16	1	27
Total number of drugs for the period				361

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

The APC made the decision to re-introduce a reporting schedule to the Committee demonstrating the prescribing of Red & Grey Drugs. NHS DCCG MMT are producing a monthly report demonstrating any rise or fall in the prescribing of drugs identified as:

- 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

Several of these reports have already been presented at the APC meetings and drugs identified in these categories have been included in the APC Bulletin as a reminder to prescribers of individual issues.

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.

Committee members are granted usernames and passwords to access protected areas of the site.

An APC bulletin continues to be produced monthly. This is then distributed to the healthcare community and posted on the website. This ensures APC decisions are well communicated throughout the area and helps to share best practice.

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 DBH FT.

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 Committee, and the DCCG Quality & Patient Safety Group
- DBH FT 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

Review of Objectives 2014-15

Objective	Progress	Evidence
Develop a 12 monthly work plan to ensure objectives are met.	Complete	NHS DCCG MMT developed a work programme for the period April 2014-March 15. This was presented at the APC meeting in June 2014. The Committee agreed that this was a suitable plan of future work.
Work with all SY&B CCG's to develop a commonly agreed document on the 'Principles of Shared Care'	Complete	NHS DCCG Head of Medicines Management, NHS Bassetlaw Lead Pharmacist and a NHS Doncaster GP have been involved in meetings to develop a 'Principles of Shared Care' document to be agreed by all five South Yorkshire and Bassetlaw CCG's (SY&B CCG's). This work was completed and approved by the APC in October 2014 (appendix 1). The document has been received and approved by both RDASH FT and DBH FT
Work with neighbouring Area Prescribing Committees/Groups, to promote joint development of shared care protocols	Ongoing	Work continues through discussion at the SY&B Head of Medicines Management group following the completion of the Principles of Shared Care agreement.
Work with neighbouring Area Prescribing Committees/Groups to raise awareness of commissioning issues that impact on prescribing so that problems arising from the transfer of prescribing responsibilities are minimised	Ongoing	Work continues through discussion at the SY&B Head of Medicines Management group following the completion of the Principles of Shared Care agreement.
Establish a robust process for dealing with requests from Secondary Care to develop Shared Care, acknowledging the Doncaster CCG commissioning priorities.	Complete	The APC has developed a flow chart detailing the process for the management of Shared Care Prescribing Arrangements. The purpose of this flowchart is to enable the APC to follow a consistent pathway of development from the point of reviewing a current SCP/guidance document or a new request for shared care or guidance document. (appendix 2)

Objectives for 2015-16

The Committee discussed setting new objectives for this period and decided that the over-arching functions of the APC provide adequate objectives and in future years the newly developed APC work programme will be included in the annual report to demonstrate this. Below is the 2014/15 work programme indicating the progress of individual items.

Month	Item	Action	Progress
April 2014	Denosumab SCP review	Liaise with Sheffield APC	Complete
	Gender Dysphoria – Primary Care responsibilities	APC to feedback concerns to NHS England	Complete
	Dalteparin SCP	Review	Complete
	Annual Report (annual)	MMT to prepare the report	Complete
May	Declaration of Interest (annual)	Committee members to consider if applicable	Complete
	SCP Management of children with growth hormone disorders	DBHFT to commence review of document	Complete
	SCP for the management of dementia	RDASH FT to commence review of document	Complete
	Antiepileptics as mood stabilisers in the management of stable bipolar	RDASH FT to lead review To APC for approval	Complete
June	Management of Inflammatory Arthritis, Connective Tissue Disease & Systemic Vasculitis for Adult Services (over 16)	Review undertaken by DBHFT APC for approval.	Complete
Jul	Guidance document for GP management of pts with established locally advanced prostate cancer	DCCG MMT to review & in line with new DCCG/DBHFT commissioned pathway document.	Complete
	Development of new SCP for Melatonin use in children & young people	DCCG MMT to work with DBHFT & RDASH FT	On-going
	Review Amiodarone guidance document in line with Sheffield APG SCP Jan 2014	DCCG MMT to update the document & send to DBHFT for approval	On-going
Aug	Review of monitoring schedule for ergot-derived dopamine-receptor agonists (as part of SCP for Parkinsons Disease)	DCCG MMT to review section of SCP to ensure monitoring schedule is in line with MHRA & licensed recommendations	Complete
	Development of a report to monitor prescribing patterns for red and grey drugs	DCCG MMT to develop a process to monitor and feed-back newly initiated (either independently or at Secondary Care request) drugs in Primary Care to the Committee	Complete
Sep	Review progress of workplan		Complete
Oct			
Nov	Consider development of guidance for use of Melatonin in dementia patients	Agree lead organisation to develop guidance. This is linked to previous melatonin work.	On-going
Dec			
Jan 2015	Prepare data for APC annual report	DCCG MMT to collate data in preparation for the end of the year.	Complete
Feb	Prepare work plan for 2015-2016 period	APC to consider priorities for the next 12 month	On-going
	Colomycin- review of SCP	Choice of water/saline as a diluent – provide greater clarity	C/f to 2015-16
March	Review progress of work plan and achievements of objectives	APC Agenda item	Complete

Prepared by:
Angie Machin
 MMT Technician
 April 2015