

## Doncaster and Bassetlaw Area Prescribing Committee Annual Report (2020-21)

### 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. 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 2020-21 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 Clinical Chair
- NHS Doncaster CCG GP Representative
- NHS Doncaster CCG Head of Medicines Management
- NHS Doncaster CCG MMT Senior Pharmacist or Chief Technician
- NHS Doncaster CCG MMT Senior Technician (Secretary)
- NHS Bassetlaw CCG Head of Medicines Management (Deputy Chair)
- NHS Bassetlaw CCG GP Representative 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
- Local Medical Committee Representative
- Local Pharmaceutical Committee Representative
- FCMS Representative

### Attendance

The meetings are held on a monthly basis, there was a total of 8 meetings during 2020-21. Please note there were no meetings held in April/May/June 2020 due to the Covid-19 pandemic. There was also no meeting held in December 2020.

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 attendances	Meetings Attended	% attended	Overall Organisational Attendance
Dr David Crichton	APC Chair	NHSD CCG	8	7	87	87%
Dr Rachel Hubbard	NHS Doncaster GP	NHSD CCG	8	8	100	100%
Mr Alex Molyneux	Head of Medicines Management	NHSD CCG	8	3	38	100%
Dr V-Lin Cheong (Pharmacist)	Deputy Head of Medicines Management	NHSD CCG	8	8	100	
Mrs Rachel Wilson	Deputy Chief Pharmacist	DBTHFT	8	1	13	100%
Mr Lee Wilson	Consultant Pharmacist - Deputy	DBTHFT	8	6	75	
Dr Lucy Peart	Acute Physician DBTHFT	DBTHFT	8	2	25	
Mr Andrew Houston	Senior Mental Health Pharmacist	RDaSHFT	8	1	13	76%
Mr Stephen Davies	Principal Pharmacist	RDaSHFT	8	5	63	
Mr Rob Wise	Medicines Management Lead Pharmacist (Deputy Chair)	NHSB CCG	8	8	100	100%
Dr Dean Eggitt	Local Medical Committee Representative	Doncaster LMC	8	1	13	100%
Dr Rumit Shah	Local Medical Committee Representative - Deputy	Doncaster LMC	8	7	87	
Dr Sulman Thullimalli	Local Medical Committee Representative	Doncaster LMC	8	1	13	
Mr R Harris	Local Pharmaceutical Committee Representative	Doncaster LPC	8	0	0	63%
Mr Munashe Mvududu	Local Pharmaceutical Committee Representative	Doncaster LPC	8	5	63	
Vacant position	Doncaster Community Healthcare Non- Medical Prescribing	DCH	8	0	0	0%
Mr Andrew Shakesby	Representative from Quality and Performance	FCMS	8	2	25	25%

### 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 lists 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.

## Review of existing SCP

Documents that have been under review this year include:

- The Management of Children with a Growth Hormone Disorder SCP – the committee approved the shared care document which enables the continuation of care by primary care clinicians of children initiated on growth hormone by the consultant paediatricians at Doncaster and Bassetlaw NHS Teaching Hospitals Trust.
- Modafinil in Narcolepsy SCP – The updated document is a modified version of the Sheffield Area Prescribing Group protocol. This has been adapted for Doncaster and Bassetlaw and supports primary care to continue the prescribing of modafinil for adults within its licenced indication once stabilised by secondary care.
- Denosumab SCP – The shared care document was written to enable the continuation of care by primary care clinicians of patients initiated on Denosumab 60mg/ml (Prolia ®) by the Doncaster and Bassetlaw Hospitals NHS Foundation Trust where it is appropriate and in the patients' best interests.
- Inflammatory Arthritis and Connective Tissue Diseases SCP –the committee needed a review of the SCP due to the possibility of service arrangements changing for the monitoring requirements of hydroxychloroquine, one of the drugs listed within the document. This was considered and the document was updated to reflect current guidance from the Royal College of Ophthalmologists. The document specifies the requirement for rheumatology and ophthalmology to work collectively to ensure patient safety.
- Parkinson's SCP- The draft document has been discussed by the committee and further work is ongoing to develop shared care that is suitable across the wider ICS.
- Gender Dysphoria – Doncaster and Bassetlaw have adopted and host the SCP developed by Rotherham CCG, however the document is not mandatory in our area. The committee have been reviewing the document and working to decide if a local shared care protocol should be developed. This is now going to be worked into a local enhanced service agreement and will come back to the committee at a later date.

## New/updated/reviewed Guidance Documents

Several documents have been presented at APC meeting for comments on their development including:

- The Pre-emptive prescribing document was discussed and approved to support clinicians in prescribing medication to manage patients' conditions towards the end of life.
- The updated pathway supporting NHSE for prescribing of Freestyle Libre (flash glucose monitoring) to appropriate patients with type 1 and type 2 diabetes has been approved.
- Guidance for Vitamin Supplementation post Bariatric Surgery is in development and will return to the meeting once completed.
- Guidance on Heel Balms is also being developed and will come back to the meeting once completed.
- Fidaxomicin and Fosfomicin guidance has been reviewed. The Fosfomicin guidance has now been removed from the CCG website, it is no longer difficult to source and prescribers can issue FP10 prescriptions to community pharmacies. As there remain issues with the process of obtaining and dispensing Fidaxomicin outside of DBHTFT, this remains the same process currently but will be reviewed again in May 2021.
- APC updated terms of reference, the committee received and approved the document.

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

## Ad-hoc interactions

The committee members have also been involved in other areas providing support and advice including:

- Chair's actions in conjunction with both Heads of Medicines Management at Doncaster and Bassetlaw CCGs were taken. This was regarding Covid-19 vaccinations and the SPS procedures for receipt, handling and administration being accepted as a base point. The PGDs and legal mechanisms published by NHSE were also endorsed promptly to avoid any delays in the vaccine roll out.
- Continued input into the local work following the NHSE Over the Counter prescribing consultation and the ICS OTC campaign.
- Contribution and comments to the MMGs work regarding letters from primary care returning prescribing responsibility to secondary care of red/amber traffic lighted drugs.
- Guidance relating to the discontinuation of Aminophylline. The recommendations for patients who may still require treatment with a methylxanthine and identifying those who would respond to increased inhaled therapies.
- Discussions regarding Saxenda which is now NICE recommended for weight loss alongside tier 3 weight management services.
- Discussions regarding updated NICE guidance for sciatica and lower back pain.
- Queries regarding off label use of Glycopyrronium to treat hyperhidrosis.
- Discussions and traffic-lighting of drugs used off label by specialists at the Leger clinic.
- Traffic light decisions regarding medication used by the specialist eye clinic.
- The governments initiative to provide care homes in England with a four month Vitamin D supply and discussing how to communicate out to the care home to identify the residents already taking Vitamin D alone or in a combined product to reduce the risk of patients being given more than the recommended dose.

## 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	No meeting	No meeting	No meeting	No meeting
May	No meeting	No meeting	No meeting	No meeting
June	No meeting	No meeting	No meeting	No meeting
July	12	15	1	28
August	0	10	2	12
September	0	2	7	9
October	1	30	12	43
November	4	38	7	49
December	No meeting	No meeting	No meeting	No meeting
January	18	50	6	74
February	4	14	7	25
March	1	6	2	9
<b>Total number of drugs for the period</b>				<b>249</b>

## 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

A full complement of reports has been included on the agenda in this period.

## 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.

## 2021-22 Work Programme

Month	Item	Action	Progress
April	SOP/MATRIX update	Internal Action for MMT – APC process documentation	On-going
	Anti-coagulant DOAC prescribing tool	DBTHFT	On-going
	Prescribing of Oral Antipsychotics SCP	RDASH	On-going
	Adults with Growth Hormone SCP	STH	On-going
	Lithium Shared Care Document	RDASH	On-going
	Melatonin SPC	DBTHFT	On-going
May	Anti-Epileptic medications as mood stabilisers in Bipolar Disorder	RDASH	On-going
	Parkinson's disease	APC supporting the development of a wider ICS protocol. Sheffield APC is leading with this work.	On-going
	Fidaxomycin Process	DCCG review	On-going
	Riluzole	STH – watch and brief	On-going
June	Gluten-Free Guidance	Review of current guidance	On-going
	Amiodarone SCP	Review of the shared care protocol	On-going
	Epilepsy in adults SCP	STH	On-going
	Invicorp Guidance	DCCG BCCG Review of guidance	On-going
July			
August	OTC consultation actions	On-going via SYB ICS & AJM/CCG comms team	On-going



**Bassetlaw**

**Clinical Commissioning Group**



**Doncaster**

**Clinical Commissioning Group**

September			
October	Dementia SCP	RDaSH	On-going
November			
December			
January 2022			
February			
March			

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