



DONCASTER & BASSETLAW AREA PRESCRIBING COMMITTEE (APC) Action Notes and Log

Thursday 30th September 2021 12 Noon start,

Present: Dr David Crichton NHSD Chair, APC Chair

> Mr Alex Molyneux NHSD Chief Pharmacist, Medicines Management

Mrs Charlotte McMurray NHSD Deputy Chief Pharmacist, Medicines Management

Mr R Wise

NHS Bassetlaw Head of Medicines Management, Deputy APC Chair

Mr Stephen Davies Chief Pharmacist RDaSHFT

Dr Rumit Shah Local Medical Committee Representative

Mr Lee Wilson Consultant Pharmacist DBTHFT

Doncaster GP Dr Rachel Hubbard

NHSD Medicines Management Technician (Secretary) Mrs Jennifer Cox

Locality Lead Pharmacist DCCG Miss Ning Wong In attendance:

> Mrs Layla Smith **Practice Support Technician**

Minutes only:	Dr Rupert Suckling & Dr	DMBC Representatives
	Victor Joseph	

Agenda Ref	Subject / Action Required	Action Required By	Timescale	Status of Action (RAG) and Date
9/21/1	Apologies for Absence: Dr Lucy Peart, Acute Physician DBTHFT			
9/21/2	Declarations of Interest: DC attended a fourth and final AHSN leadership workshop sponsored by Pfizer, the committee agreed that this would have no impact on today's agenda items			
9/21/2.1	Fire Alarm Procedure N/A Meeting online			
9/21/2.2	Notification of Any Other Business AM requested that the Moderna COVID-19 vaccine Patient Group Directions are added to the next APC agenda as they have been requested for use via 4 Doncaster PCN. It was agreed that this could be a Chair's action and then to add the PGDs to the October Agenda for ratification.	NHSD-AM	Oct-21	
9/21/3	Notes of the Meeting Held On: 26 th July 2021 were agreed as a true and accurate record			
9/21/4	Matters Arising not on the Agenda			

RW updated the group on feedback from the Bassetlaw GP prescribing leads meeting, who were commenting on the April APC Action Log regarding Vitamin D guidance around pregnancy and queried if the APC had considered including blood test monitoring into the current guidelines. It is not part of the routine pregnancy blood test but will be undertaken if there is a clinical need The committee discussed what monitoring is required once vitamin D deficiency has been diagnosed and it was agreed that the current guidelines are aimed at treatment only and monitoring was not the aim of the document			
It was agreed that the guidelines wording will be reviewed via the DCCG Medicines Management Group. All links embedded in the document to be checked and details will be included to state that, if a patient is clinically found to be vitamin D deficient in pregnancy, give treatment proposed by RCOG (Royal College of Obstetricians and Gynaecology guidance) then review post-partum	NHSD-CM		
Matters Arising			
Endometriosis shared care proposal			
Following the July APC where concerns were raised about the reduction of Bone Mineral Density (BMD) and the proposal for a DEXA scan. CM discussed the weak evidence base for this proposal. CM discussed with NHS Sheffield CCG as to whether a shared care document will be produced. It is currently on hold as different commissioning arrangements are being considered CM will give further updates as they become available	NHSD-CM		
LW to collate a list of which preparations are currently used and feedback	DBTHFT-LW		
It was agreed to await further updates from RMOC and the development of any ICS guidelines. To add to forward planner	NHSD-JC		
	meeting, who were commenting on the April APC Action Log regarding Vitamin D guidance around pregnancy and queried if the APC had considered including blood test monitoring into the current guidelines. It is not part of the routine pregnancy blood test but will be undertaken if there is a clinical need The committee discussed what monitoring is required once vitamin D deficiency has been diagnosed and it was agreed that the current guidelines are aimed at treatment only and monitoring was not the aim of the document It was agreed that the guidelines wording will be reviewed via the DCCG Medicines Management Group. All links embedded in the document to be checked and details will be included to state that, if a patient is clinically found to be vitamin D deficient in pregnancy, give treatment proposed by RCOG (Royal College of Obstetricians and Gynaecology guidance) then review post-partum Matters Arising Endometriosis shared care proposal Following the July APC where concerns were raised about the reduction of Bone Mineral Density (BMD) and the proposal for a DEXA scan. CM discussed the weak evidence base for this proposal. CM discussed with NHS Sheffield CCG as to whether a shared care document will be produced. It is currently on hold as different commissioning arrangements are being considered CM will give further updates as they become available LW to collate a list of which preparations are currently used and feedback It was agreed to await further updates from RMOC and the development of any	meeting, who we're commenting on the April APC Action Log regarding Vitamin D guidance around pregnancy and queried if the APC had considered including blood test monitoring into the current guidelines. It is not part of the routine pregnancy blood test but will be undertaken if there is a clinical need The committee discussed what monitoring is required once vitamin D deficiency has been diagnosed and it was agreed that the current guidelines are aimed at treatment only and monitoring was not the aim of the document It was agreed that the guidelines wording will be reviewed via the DCCG Medicines Management Group. All links embedded in the document to be checked and details will be included to state that, if a patient is clinically found to be vitamin D deficient in pregnancy, give treatment proposed by RCOG (Royal College of Obstetricians and Gynaecology guidance) then review post-partum Matters Arising Endometriosis shared care proposal Following the July APC where concerns were raised about the reduction of Bone Mineral Density (BMD) and the proposal for a DEXA scan. CM discussed the weak evidence base for this proposal. CM discussed with NHS Sheffield CCG as to whether a shared care document will be produced. It is currently on hold as different commissioning arrangements are being considered CM will give further updates as they become available LW to collate a list of which preparations are currently used and feedback DBTHFT-LW It was agreed to await further updates from RMOC and the development of any	meeting, who we're commenting on the April APC Action Log regarding Vitamin D guidance around pregnancy and queried if the APC had considered including blood test monitoring into the current guidelines. It is not part of the routine pregnancy blood test but will be undertaken if there is a clinical need The committee discussed what monitoring is required once vitamin D deficiency has been diagnosed and it was agreed that the current guidelines are aimed at treatment only and monitoring was not the aim of the document It was agreed that the guidelines wording will be reviewed via the DCCG Medicines Management Group. All links embedded in the document to be checked and details will be included to state that, if a patient is clinically found to be vitamin D deficient in pregnancy, give treatment proposed by RCOG (Royal College of Obstetricians and Gynaecology guidance) then review post-partum Matters Arising Endometriosis shared care proposal Following the July APC where concerns were raised about the reduction of Bone Mineral Density (BMD) and the proposal for a DEXA scan. CM discussed the weak evidence base for this proposal. CM discussed with NHS Shefffield CCG as to whether a shared care document will be produced. It is currently on hold as different commissioning arrangements are being considered CM will give further updates as they become available LW to collate a list of which preparations are currently used and feedback DBTHFT-LW NHSD-IC

9/21/5	Shared Care Protocol For Myasthenia Gravis or Chronic Inflammatory Demyelinating Polyradiculopathy (CIDP) in Adults RW updated the committee regarding further discussions that have taken place with the neurologists involved and that the SCP has been expanded to include Mycophenolate, Azathioprine and Methotrexate It was requested that a handover form be added to the document		
	Although patient numbers are expected to be low, concerns were raised around the ongoing monitoring in Doncaster as currently there is no monitoring of DMARDs in primary care. The circumstances in Bassetlaw are different as there is primary care monitoring. LW to investigate if using the RMOS system could be a solution.	DBHFT-LW	
	RW to review current DMARD monitoring across SYB, provide feedback to the neurologists and to add a handover form to the document.	NHSBL-RW	
	It was agreed there was a need to look into robust Doncaster models for monitoring	NHSD	
9/21/6	Topical corticosteroids: information on the risk of topical steroid withdrawal reactions The committee received the MHRA Safety Update and agreed it should be circulated in the GP Bulletin and when available and an alert message will be added to optimise	NHSD-CM	
	RDaSH will also investigate methods of sharing the message with their patients	RDaSHFT- SD	
9/21/9	Amiodarone Shared Care Protocol (item moved forward to enable discussion with LW before he leaves the meeting)		

	The committee received the updated Amiodarone Shared Care Protocol and were informed that there are still some minor amendments to be made, SNOMED codes need to be added and the option to fax needs to be removed and changed to NHS Mail It was agreed that a handover letter should also be added to the document and that handover letters is considered good practice in all Shared Care documents It was agreed that the following statement is removed as titration is undertaken in a short period of time and it may cause confusion. 'Secondary care assumes responsibility for the monitoring and re-prescription of amiodarone until maintenance dosage has been successfully achieved' With the agreed amendments the document was approved and can go live on the website	NHSD-AM	
	LW left the meeting at this point		
9/21/7	Riluzole Shared Care Protocol – NHS Sheffield		
	The updated document was received by the committee and were informed only minor changes have been made. It was requested that the logos be altered from Sheffield to Doncaster and Bassetlaw and the option to fax be changed to nhs.net email. With these small amendments the Shared Care Protocol was approved	NHSD-CM	
	CM informed the committee that Sheffield Teaching Hospital are requesting to transfer seven existing patients who are currently under Home Care. Riluzole has become generic so there would be a significant cost saving to transfer patients to Primary Care. The Committee agreed that as these are stabilised patients, they fall into the criteria of the Shared Care Protocol and would be happy for them to be transferred into Primary Care	NHSD-CM	

9/21/8	Epilepsy Shared Care Protocol		
	AM informed the committee that there are concerns from RDaSH regarding the responsibility of titration of patients. The concerns are around the section in the		
	SCP, Primary Care responsibilities, which they feel they are not commissioned to provide		
	The Epilepsy SCP states the following.		
	Epilepsy Nurse Specialist** will send a written request to ask the GP to issue a prescription for the medication. The request will also detail the individual patient plan (dose and titration)		
	**Where the epilepsy nurse service is commissioned to prescribe medicines (e.g. Doncaster), they will issue the prescription and provide a written update for the GP.		
	The committee members in Primary Care reported that the majority of titration requests are complex and take a considerable amount of time, with regular contact with the patient. It was felt that it is appropriate for the Epilepsy Nurse service to ensure that patients are stable before GPs are requested to take over prescribing		
	It was agreed that SD look into re-wording this section in the SCP to ensure that simple change requests can be done via the GP.	RDaSH-SD	
	It was noted that this is not the most up to date version of the Epilepsy SCP and Stiripentol is included in the up-to-date version. Sheffield CCG have confirmed that Stiripentol will be red on the TLS for adults		
	RW raised a query he has received regarding Stiripentol in Children. Stiripentol does not have a current TLS listing in Doncaster and this will be added to the drugs for consideration at the next APC meeting. Sheffield APC have agreed an Amber traffic light status for children	NHSD-JC	
	The updated document will return to the next meeting	NHSD-AM	

9/21/10	Drugs for Review		
	There were no drugs for review at this meeting		
9/21/11	Officers actions and returning drugs All officers actions and returning drugs were finalised and will be updated on the medicines management website	NHSD-JC	
9/21/12	Drugs for Consideration		
	Baloxavir marboxil – Uncomplicated influenza and post exposure prophylaxis of influenza in patients aged 12 years and above. As NICE guidance is currently in development it was agreed to confirm this entry is in line with other influenza drugs on TLS and make Green G pending NICE guidance becoming available Bimekizumab - Moderate to severe plaque psoriasis in adults who are candidates for systemic therapy was agreed as Red 1,2	NHSD-JC	
9/21/13	DBTHFT D&TC Update The Committee received minutes from the meeting held July 2021 and September 2021		
9/21/14	Formulary Liaison Group Update The Committee received minutes from the meeting held July 2021		
9/21/15	DCCG Medicines Management Group Update		
	The Committee received minutes from the meeting held July 2021		
9/21/16	RDaSH FT Medicines Management Committee update The Committee received minutes from the meeting held August 2021		
9/21/17	Barnsley Area Prescribing Committee Update The Committee received minutes from the meeting held July and August 2021		
9/21/18	Rotherham Medicines Optimisation Group Update		

	The Committee have not received any up-to-date minutes		
9/21/19	Sheffield Area Prescribing Committee Update The Committee received minutes from the meeting held June 2021		
9/21/20	Nottingham Area Prescribing Committee Update The Committee received minutes from the meeting held June 2021		
9/21/21	SY& B sICS Medicines Optimisation Work-stream Steering Group The Committee have not received any up-to-date minutes		
9/21/22	Northern Regional Medicines Optimisation Committee The Committee have not received any up-to-date minutes		
9/21/23	Any Other Business RW raised a query regarding Stoma bags where patients are being given a brand of Stoma bag via DBHFT that are unable to be prescribed on FP10. RW to contact LW to investigate further. To feedback at next meeting The Chair gave his apologies for the October meeting and informed the committee that RW would chair in his absence	NHSB-RW	
9/21/24	Date and Time of Next Meeting 12pm on 28 th October 2021 Venue – Microsoft Teams Meeting Online		

KEY

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