South West Yorkshire Area Prescribing Committee Minutes

15 January 2016 | 12:30 - 2:30 Venue: Board Room, Broad Lea House

Chair: Nigel Taylor (NT)

Attendees: Nikki Lawton (NL)

Lucianne Ricketts (LR)

John Yorke (JY) Eric Power (EP) Ric Bowers (RB)

Joanne Fitzpatrick (JF) Kate Dewhirst (KD) Fozia Lohan (FL)

Apologies: Neill McDonald (NM)

Ramesh Edara (RE)

AGENDA TOPICS

Topic 1: Welcome and Apologies

Apologies received as above.

Topic 2: Declarations of Interest

None declared

Topic 3: Minutes of the Last Meeting

The minutes of the last meeting held on 20 November 2015 were accepted as a true record with a few minor typos corrected.

Topic 4: Action Log

The action log was discussed and most actions were agreed as complete. The outstanding actions relate to:

- QT interval prolongation
- APC membership and development
- Website updating
- Workplan additions

Topic 5: Membership of Group and Terms of Reference

i) South West Yorkshire, hosted by Greater Huddersfield CCG, is taking on the roles for high cost drugs and the APC/joint guidelines. This will provide better integration with Bradford CCGs who are interested in joining SWY APC. Discussion ensued as so whether this was the correct approach and the possibility of a wider West Yorkshire APC. It was agreed to look at other models for APCs – how they are set up, funding, constitution - and make a decision in April 2016.

Actions:

- 1. Tidy up distribution lists EP
- 2. Leave terms of reference as they are pending AHSN review All
- 3. Pharmacy Management Group APC workshop details to be circulated JF

Topic 6: Safety

- 1. It was queried if we need to continue to receive the Drug Safety Updates at the full APC from the Medicines Safety Subgroup. It was agreed that any action wider than individual organisations would be considered through this route; individual organisations to remain responsible for their own actions.
 - a. Drug Safety Updates to be considered by Medicines Safety Subgroup in future and consider if any wider action/APC action necessary.
 - b. The Medicines Safety Subgroup to develop Terms of Reference to include reporting arrangements and scope of the work of the group.
- 2. It was agreed that all organisations will look to implement naloxone recommendations within own organisations. It was not felt that it would be useful to do a more collaborative piece of work on this alert at this moment in time.
- 3. Medicines Safety Network Update
 - KD noted that each organisation picks up incidents from other organisations particularly from community pharmacy. The group is looking to pull together all community pharmacy incidents from January to March and send them in bulk to NHS England Community Pharmacy contracting.
 - The group has also discussed a number of issues relating to tramadol.

Actions:

Medicines Safety Group Terms of Reference to be developed	HF	ТВС
Update on incidents sent to NHS England at next meeting	HF	6 th Nov 2016

Topic 7: RAG Additions

- a) Ullipristal (Esmya)
 - RB suggested that this is moved to Green with Specialist Initiation. It was felt that there needs to be more
 information on what is expected of community prescribers. The group has suggested that this is deferred
 to the next meeting.
 - Action: Defer to next meeting pending development of supporting guidance.

	0	Red
c)	Extavia	
	0	Red
d)	Copaxo	ne
	0	Red
e)	Fidaxor	micin
	0	Agree green with specialist initiation subject to restricted use only when it prevents admission to hospital or severe illness.
	0	MYT to audit first 5 patients or 6 months.
f)	Insulin	Glargine (Toujeo)
•	0	Green – suggestion that this is restricted to patients on high doses.
g)	Ultibro	Breezehaler
O,	0	Green
h)	Vortiox	etine
	0	Green with specialist initiation
	0	Has a lot of interactions – would expect that would be usually used 5 th line in local guidelines.
i)	Nebulis	sed Hypertonic Saline

o Green with specialist initiation.

b) Nintedanib

Guidelines on community prescribing of ullipristal to be developed RB TBC

a) RAG Additions

Silicone scar treatments - RED

b) RAG Amendments

Midodrine – need to ensure completion of form before any reclassification can be agreed. Maintain **RED** status until discussion at next APC. JY to discuss with the consultant and obtain a new product request submission.

Mycophenolate – JY asked for wording to be changed to state when red or amber. This was approved.

Toujeo® (insulin glargine 300u) – GREEN.

c) GREY List – It was suggested the SWY APC adopt the PrescQIPP DROP list. To bring to next APC for consideration. JL sent the PrescQIPP link to all APC members. JF to send out the original Wakefield GREY list and the current one for comparison.

Actions:

New product request submission for midodrine	JY	31 st Oct 2015
New wording for mycophenolate to be added to the website	NL	31st Oct 2015
DROP list to be circulated	NL	31st Oct 2015
Wakefield GREY list to be circulated	JF	31st Oct 2015

Topic 8: Shared Care Guidelines (SCGs)

For approval

- a) Agomelatine
 - Approved. Was noted that there should be no new patients as NICE has published a terminated appraisals which local commissioning organisations recommend as "not funded".
- b) Atomexetine
 - Approved
- c) Dexamfetamine & Lisdexamfetamine
 - Approved
- d) Hydroxycarbamide
 - Has been updated to state exactly how communication will happen following comments at last update.
 Approved.
- e) Methylphenidate
 - Approved

For consultation

- Cyproterone (draft)
 - o Ready to share more widely.

- Would be worth checking if there are many patients in primary care already, particularly on CHFT footprint,
 as the impression of committee members is that this has not been traditionally shared care.
- Action
 - JY to check if any patients in CHFT
 - EP/JF to check prescribing data & only share data more widely if reasonable levels of prescribing taking place.

Actions

JY to check if any patients in CHFT prescribed cyproterone

EP/JF to check prescribing data & only share data more widely if reasonable levels of prescribing taking place.

TBC

Topic 9: Health Economy QIPP

Melatonin

- To agree a shared guideline/approach to changing product across the health economy.
- To update shared care guideline in line with wider health economy guideline.
- SWYPFT clinicians are happy to look at melatonin formulations.
- Action
 - JF to draft switch guidance

Barrier Creams

Teleconference of Wound Management Formulary Group on Monday to agree whether to carry out a health economy switch from Cavillon to Medi Derma S.

Growth Hormones

EP updated the APC that the Yorkshire and Humber Medicines Procurement Collaborative were looking into QIPP opportunities.

Actions

JF to develop and share melatonin switch guidance

JF

TBC

Topic 10: D&T Updates

Various organisations' D&T minutes were presented for information.

Topic 12: General discussion

Pioglitazone

The group noted that there continue to be issues with access to treatment; it was also noted that not all generics had licenses for triple therapy however the group agreed this shouldn't be a factor if patient would otherwise be denied access to treatment.

Prednisolone

RB noted that this switch has gone well.

Actions: None

Date and Time of Next Meeting - To be agreed