

**Minutes of the meeting of the AREA PRESCRIBING COMMITTEE held on
Wednesday, 8th September 2021 via MS Teams**

MEMBERS:

Chris Lawson (Chair)	Head of Medicines Optimisation (Barnsley CCG)
Tom Bisset	Community Pharmacist (LPC)
Dr Rebecca Hirst	Palliative Care Consultant (Barnsley Hospice)
Dr Kapil Kapur (from 21/184)	Consultant Gastroenterologist (BHNFT)
Mark Payne	Lead Pharmacist (SWYPFT)
Mike Smith	Chief Pharmacist (BHNFT)

IN ATTENDANCE:

Nicola Brazier	Administration Officer (Barnsley CCG)
Deborah Cooke	Lead Pharmacist (Barnsley CCG)
Lauren Clarke	Senior Pharmacist, Interface (BHNFT)
Joanne Howlett	Medicines Management Pharmacist (Barnsley CCG)
Gillian Turrell	Lead Pharmacist (BHNFT)

APOLOGIES:

Professor Adewale Adebajo	Associate Medical Director (Medicines Optimisation) on behalf of the Medical Director (BHNFT)
Caron Applebee	Lead Pharmacist (Barnsley CCG)
Dr Mehrban Ghani	Chair, Barnsley Healthcare Federation CIC, representing the Primary Care Networks (PCNs)
Sarah Hudson	Deputy Chief Pharmacist (SWYPFT)
Dr Jeroen Maters	General Practitioner (LMC)
Dr Abdul Munzar	General Practitioner (LMC)

**ACTION
BY**
APC 21/181 QUORACY

The meeting was not quorate and therefore any proposed decisions/approvals will be ratified for endorsement either outside the meeting by email or at the next meeting.

APC 21/182 DECLARATIONS OF INTEREST RELEVANT TO THE AGENDA

The Chair invited declarations of interest relevant to the meeting agenda. The Head of Medicines Optimisation declared that she signs rebate agreements on behalf of the CCG, noting that there is no personal financial gain and all savings from rebates schemes are re-invested into other local health services. The rebates are all in line with PrescQIPP guidance and a full list is available on the website.

APC 21/183 DRAFT MINUTES OF THE MEETING HELD ON 11th AUGUST 2021

As the LMC did not meet in August, it was noted that any actions requiring approval or feedback from the LMC will be discussed at the next meeting under Matters Arising.

APC 21/159 - the Head of Medicines Optimisation will be obtaining feedback from RMOC and HOMM in relation to any review of Flash Glucose Monitoring Guidance and criteria.

APC 21/170.1 - the Lead Pharmacist, SWYPFT highlighted the

confusion with Slo Milkshakes being reported due to similar packaging for levels 1, 2, 3 and 4 noting the risks associated with selecting the wrong product.

It was noted that the issue has been fed back to the company and SWYPFT were in the process of producing a poster to highlight the differences. The Lead Pharmacist, Barnsley CCG advised that guidance was being developed following approval of the new product application at the last meeting and that information regarding this could also be incorporated into the guidance.

Subject to a spelling correction at the top of page 4, the minutes were accepted as an accurate record of the meeting.

Agreed action:-

- As the meeting was not quorate, approval will be obtained outside the meeting by email.

NB

***Post meeting note:** approval received by email, therefore the minutes were accepted as an accurate record of the meeting.*

APC 21/184 MATTERS ARISING AND APC ACTION PLAN

21/184.1 Knee Pressure Offloading Device (Knee Brace) Action Reliever
Deferred to the next meeting.

SH

21/184.2 Diabetes Guidelines Review List
The Head of Medicines Optimisation is progressing a meeting to discuss reviewing the sections of the Diabetes Guidelines.

21/184.3 NICE TA712 Enzalutamide for treating hormone-sensitive metastatic prostate cancer

The Lead Pharmacist, BHNFT advised that NICE TA712 **was not** applicable for use at BHNFT and would only be prescribed by the Oncologists, therefore will be stocked in the hospital for use in the Weston Park outreach clinics at BHNFT and this would be clearly stated on the formulary. The Lead Pharmacist, BHNFT would advise if this status needed changing.

GT

21/184.4 Shared Care For Antidepressants In CAMHS

The Head of Medicines Optimisation noted that the CAMHS Task and Finish Group had not yet met but the issues around shared care in the CAMHS service will be raised at the next meeting.

CAL

The Lead Pharmacist, SWYPFT advised that there was discussion at the SWYPFT D&T around challenges with prescribing of melatonin and where this sits within the West part of the Trust. Meetings are ongoing and the Lead Pharmacist will obtain further details in order to facilitate a joined up approach and line up discussions across the Trust. Details to be shared with the Head of Medicines Optimisation.

MP

21/184.5 Action Plan - other
BHNFT D1 Audit

The Chief Pharmacist, BHNFT advised that the work of the D1 Group was currently on hold and requested this be deferred until there was clarity around the Trust's pharmacy system platform. A timeline on

this decision was currently unknown; however, the Chief Pharmacist felt that with processes in place around DMS and D1 queries going to embedded Clinical Pharmacists and point of contacts within the Trust for any issues/clarifications, this mitigates the need for an audit.

The Head of Medicines Optimisation suggested that a separate meeting be arranged to understand current issues from primary care, secondary care and community pharmacy perspectives, given that there was still significant workload in primary care associated with corrections/missing information on D1s, noting only a small proportion are being reported through APC Reporting.

Agreed actions:-

- Meeting to be arranged to understand current issues and look at what changes can be made to improve the pathway process.
- Action plan to be updated with review in 3 months.
- The Head of Medicines Optimisation to provide update to Q&PSC.

CAL

**NB
CAL**

APC 21/185 ENTRESTO - SHARED CARE

The Lead Pharmacist, SWYPFT raised on behalf of the Heart Failure nurses the possibility of reviewing the Entresto® amber status following challenges around prescribing.

It was noted that the current amber shared care guideline states that the specialist service will supply the first 12 weeks of treatment, which is causing a challenge in the heart failure service due to limited access to prescribers, resulting in multiple appointments being made just for the provision of prescriptions.

The Lead Pharmacist, BHNFT has previously liaised with the primary care heart failure team in terms of training etc and would be happy to discuss this further with them, and the consultants to bring back to the Committee a more robust proposal.

The continuing workload pressure in the system was acknowledged and the monitoring requirements in the guidelines were highlighted. The professional responsibilities and associated risks when receiving requests to prescribe were raised.

The Lead Pharmacist, Barnsley CCG fed back the Entresto® classifications of other areas noting Leeds was equivalent to Shared Care, Rotherham Amber and Sheffield Amber (stating that it will only be transferred to the GP when the patient has been up titrated and is on a stable optimal dose). It was noted that the NICE TA says that treatment should be started by a heart failure specialist with access to the multidisciplinary heart failure team. Dose titration and monitoring should be performed by the most appropriate team member.

Agreed action: -

- The Lead Pharmacists, BHNFT and SWYPFT to progress this work and bring back to the meeting.

GT/MP

APC 21/186 SHARED CARE GUIDELINES / AMBER G SHARED CARE GUIDELINES

There were no guidelines to review.

APC 21/187 FORMULARY REVIEWS

21/187.1 Formulary Review Plan (for information)

The Lead Pharmacist (DC) presented the formulary review plan for information noting that 12 sections have now been reviewed, with 2 further sections being presented at today's meeting. The Lead Pharmacist, BHNFT to advise dates for a number of formulary review sections.

GT

21/187.2 Chapter 6: Endocrine

The Senior Interface Pharmacist, BHNFT presented the review noting routine updates to traffic light list information and links. The review identified a few guidelines that needed updating and these would be updated in due course.

It was noted that the HRT section needed reviewing as a separate piece of work. The Lead Pharmacist, Barnsley CCG advised that the MMT were working on developing some HRT guidance and it was therefore suggested that the MMT pharmacists link with the Senior Interface Pharmacist to progress the guideline/formulary section.

It was noted that there was no amber G guidance for Clomifene and desmopressin spray and it was agreed that Sheffield THFT would be contacted regarding guidance they have in place, to possibly adapt for use in Barnsley.

The suggested changes were endorsed by the Committee.

Agreed actions: -

- The Senior Interface Pharmacist and MMT Pharmacists to work together to progress the HRT guideline/formulary section, liaising with the Community Pharmacists regarding awareness of any stock issues.
- The Senior Interface Pharmacist to contact STHFT regarding amber G guidance for clomifene and desmopressin spray.
- As the meeting was not quorate, approval will be obtained outside the meeting by email.

LC/DC

LC

JH

Post meeting note: approval received by email, therefore the suggested changes were accepted.

21/187.3 Chapter 11: Eye

The Senior Interface Pharmacist, BHNFT presented the review noting only routine updates to traffic light list information, duplication of information and links. There was nothing specific to discuss.

The suggested changes were endorsed by the Committee.

Agreed action: -

- As the meeting was not quorate, approval will be obtained outside the meeting by email.

JH

Post meeting note: approval received by email, therefore the suggested changes were accepted.

APC 21/188 NEW PRODUCT APPLICATION LOG

The log was received and noted.

APC21/189 BARNSELY APC REPORTING

The Lead Pharmacist, Barnsley CCG presented the reports relating to the month of July 2021, referring back to last month's meeting where it had been noted to delay reporting by a month in order to allow time to follow up on reports to provide a more robust report with outcomes to the Committee. There were 28 reports received in July 2021 with varying key themes and 4 significant issues highlighted. The enclosure detailing APC reports that have been received directly by BHNFT was received and noted.

The Lead Pharmacist also highlighted that reports had been received relating to Vitamin B Co and the guidance not being followed.

The Lead Pharmacist also raised a query in relation to Maxitrol® eye drops post cataract surgery and the expected supply issued by the Trust. It was felt that the Trust should be supplying the full treatment course should the number of weeks be stated, however the Lead Pharmacist, BHNFT would pick this up and investigate.

The Senior Interface Pharmacist, BHNFT requested further information in order to investigate these reports.

The Lead Pharmacist, SWYFT referred to a recent report around the refusal to supply liothyronine and who is responsible to supply. The Head of Medicines Optimisation to discuss this further with the Lead Pharmacist, BHNFT in order to pick this up with the endocrinologists.

Agreed actions: -

- Additional information on the Vitamin B Co and the supply of Maxitrol eye drops post cataract to be shared with the Senior Interface Pharmacist. **DC/CA**
- The Lead Pharmacist to investigate the quantity of Maxitrol® eye drops supplied to patients post cataract surgery **GT**
- Quarterly APC reporting meetings to be arranged to look at themes/trends. **CA**
- The Head of Medicines Optimisation and Lead Pharmacist to discuss the liothyronine report outside of the meeting. **CAL/GT**

APC 21/190 NEW NICE TECHNOLOGY APPRAISALS (AUGUST 2021)

21/190.1 NICE TAs August 2021

The Lead Pharmacist, BHNFT **would advise** if the following NICE TAs were applicable for use at BHNFT: -

- TA720 Chlormethine gel for treating mycosis fungoides-type cutaneous T-cell lymphoma
- TA721 Abiraterone for treating newly diagnosed high-risk hormone-sensitive metastatic prostate cancer
- TA722 Pemigatinib for treating relapsed or refractory advanced cholangiocarcinoma with FGFR2 fusion or rearrangement
- TA139 (updated from March 2008) Continuous positive airway

GT

pressure for the treatment of obstructive sleep apnoea/
hypopnoea syndrome

21/190.2 Feedback from BHNFT Clinical Guidelines and Policy Group
The Group have not met since the last APC meeting; therefore there was nothing to report.

21/190.3 Feedback from SWYPFT NICE Group
There was nothing relevant to report.

APC 21/191 **FEEDBACK FROM THE MEDICINES MANAGEMENT GROUPS**
21/191.1 Primary Care Quality & Cost Effective Prescribing Group (QCEPG)

The Head of Medicines Optimisation noted that smoking cessation work was due to be discussed but this has been delayed until the data can be provided. The Head of Medicines Optimisation would follow up with the Lead Pharmacist, SWYPFT regarding what information can be shared in relation to quit rates etc.

CAL/MP

21/191.2 BHNFT
The Chief Pharmacist advised that the August 2021 meeting was a Digital Transformation meeting discussing issues around electronic prescribing. The next MMC is due to meet next week with a planned 'normal' agenda. There was nothing relevant to report.

21/191.3 SWYPFT Drug and Therapeutics Committee
There were no issues to escalate.

21/191.4 Community Pharmacy Feedback
The Community Pharmacist gave a brief update advising the Committee on the following services: -

- Hypertension Case Finding Service to start October 2021.
- Smoking Cessation Service from hospital discharge to start 2022.
- Additional areas added to the New Medicines Service, with some having been made retrospective.
- Recycling of inhalers (return to pharmacy)
- Community Pharmacy Contraceptive Service pilot to begin October 2021.

In relation to the metformin combination switches currently being progressed by the MMT, feedback was provided around reports of patients being confused by the content of the letter issued. The Lead Pharmacist, Barnsley CCG to look into this further.

Agreed actions:-

- The Lead Pharmacist, Barnsley CCG to look into and mitigate any patient confusion with metformin combination switches.
- The Community Pharmacist to share any further information obtained from patients with the Lead Pharmacist, Barnsley CCG.

DC

TB

21/191.5 Wound Care Advisory Group
The minutes of the meeting held in April 2021 were received and noted for information.

APC 21/192 ISSUES FOR ESCALATION TO THE QUALITY & PATIENT SAFETY COMMITTEE (Q&PSC)

There were no issues to escalate to the Q&PSC.

APC 21/193 SPS NEW MEDICINES NEWSLETTER (JULY 2021)

The Committee assigned the following classifications to the products listed below: -

- Belantamab mafodotin (Blenrep®) – non-formulary provisional red
- Cefazolin – non-formulary provisional red
- Dostarlimab (Jemperli®) – non-formulary provisional red
- Remimazolam (Byfavo®) – non-formulary provisional red

Agreed action: -

- As the meeting was not quorate, approval will be obtained outside the meeting by email.

JH

Post meeting note: approval received by email, therefore the suggested classifications were accepted.

APC 21/194 MHRA DRUG SAFETY UPDATE (AUGUST 2021)

The update was noted with the following information highlighted relevant to primary care:-

COVID-19 vaccines: updates for August 2021

Recent information relating to COVID-19 vaccines that has been published since the July 2021 issue of Drug Safety Update.

APC 21/195 REGIONAL MEDICINES OPTIMISATION COMMITTEE (RMOC)

There was nothing to note.

APC 21/196 SOUTH YORKSHIRE AREA PRESCRIBING COMMITTEE MINUTES

There were no minutes available.

APC 21/197 ANY OTHER BUSINESS

No items raised.

APC 21/198 DATE AND TIME OF THE NEXT MEETING

The time and date of the next meeting was confirmed as Wednesday, 13th October 2021 at 12.30 pm via MS Teams.