

**Minutes of the meeting of the AREA PRESCRIBING COMMITTEE held on
Wednesday, 7th February 2018 in the Boardroom, Hilder House**

MEMBERS:

Dr Mehrban Ghani (Chair)	Medical Director (Barnsley CCG)
Professor Adewale Adebajo (from item 18/27)	Associate Medical Director (Medicines Optimisation) on behalf of the Medical Director (BHNFT)
Tom Bisset (from item 18/28)	Community Pharmacist (LPC)
Dr Rebecca Hirst	Palliative Care Consultant (Barnsley Hospice)
Sarah Hudson	Lead Pharmacist (SWYPFT)
Chris Lawson	Head of Medicines Optimisation (Barnsley CCG)
Dr Jeroen Maters	General Practitioner (LMC)
Dr Abdul Munzar (from item 18/27)	General Practitioner (LMC)

IN ATTENDANCE:

Caron Applebee	Lead Pharmacist (Barnsley CCG)
Nicola Brazier	Administration Officer (Barnsley CCG)
Deborah Cooke	Lead Pharmacist (Barnsley CCG)
Joanne Howlett	Medicines Management Pharmacist (Barnsley CCG)
Umar Patel	Senior Pharmacist - Formulary / Interface (BHNFT)
Gillian Turrell	Lead Pharmacist (BHNFT)

APOLOGIES:

Dr Kapil Kapur	Consultant Gastroenterology (BHNFT)
Mike Smith	Chief Pharmacist (BHNFT)

**ACTION
BY**

APC 18/21 QUORACY
The meeting was quorate.

APC 18/22 DECLARATIONS OF INTEREST RELEVANT TO THE AGENDA
There were no declarations of interest to note.

Declarations of Interest Register

The register was received for information however it was noted that some declarations required updating to declare their professional membership and job roles.

Agreed action: -

- Declarations to be updated where applicable.

ALL

APC 18/23 DRAFT MINUTES OF THE MEETING HELD ON 10th JANUARY 2018
The minutes were accepted as an accurate record of the meeting.

APC 18/24 MATTERS ARISING AND APC ACTION PLAN

18/24.1

NICE TAs – December 2017

The Lead Pharmacist, BHNFT would confirm by email if the following NICE TAs were applicable for use at BHNFT:-

- TA495 Palbociclib with an aromatase inhibitor for previously

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untreated, hormone receptor-positive, HER2-negative, locally advanced or metastatic breast cancer

Post meeting note: - not applicable

- TA496 Ribociclib with an aromatase inhibitor for previously untreated, hormone receptorpositive, HER2-negative, locally advanced or metastatic breast cancer

Post meeting note: - awaiting response

Action Plan – Other Areas

18/24.2 Inflammatory Bowel Disease and Autoimmune Hepatitis Shared Care Guideline Monitoring Audit

Work was ongoing to ensure that shared care was in place and monitoring was in line with the guideline and it was agreed that this would be brought back to the April 2018 meeting.

CL

APC 18/25 **FREESTYLE LIBRE®**

Following discussion at the December 2017 meeting, the guidance had been updated with the exclusions and amendments agreed. However, following the release of the NHS Sheffield CCG position statement for prescribing Freestyle Libre®, which is being managed in a very similar way to Barnsley with specialist initiation, the Lead Pharmacist (CA) felt that there was some beneficial information which could be incorporated into the Barnsley guidance including advice on how to deal with patients purchasing the device themselves and strict criteria for stopping the device if it wasn't achieving the desired outcome. It was noted that the Sheffield guidance also included information for treating paediatric patients and the Committee agreed to include this criteria in the Barnsley guidance.

It was noted that Sheffield are advising specialist initiation and specialist prescribing for 12 months before prescribing is passed to Primary Care versus Barnsley advising 6 months. The reasons for this decision would be obtained from Sheffield.

Agreed actions: -

- The updated guidance would be brought back to the next meeting.
- The Lead Pharmacist (CA) would contact Sheffield to understand their reasons for advising specialist prescribing for 12 months before prescribing is passed to Primary Care

CA

CA

APC 18/26 **SALOFALK®**

Following the approval of the new product application in June 2016, it had been agreed to monitor and review the use of Salofalk®. This was approved 2nd line for patients who are taking a high tablet load or for patients who take quite high doses, dependent on how patients respond to tablets initially, with Octasa® remaining 1st line.

The data presented provided assurance to the Committee that Salofalk® was being prescribed appropriately and this action could be removed from the action plan.

APC 18/27 RMOG WORK PROGRAMME (FOR INFORMATION)

The enclosure was received and noted. It did appear that there was some duplication of work by the different RMOGs.

The Committee were unsure of the RMOG membership, structure and communication links for future engagement. It was suggested that information was currently being communicated via the Regional Leads. The South Yorkshire Heads of Medicines Optimisation are in turn attending the Regional Heads of Medicines Management Committee meetings and agenda items are fielded from that group into the RMOG.

The Lead Pharmacist, BHNFT advised that Vanessa Chapman was the Trent Regional Centre Director and may be able to advise the Head of Medicines Optimisation about the Committee. It was suggested that the APC invite a member of the RMOG to a future APC meeting.

Agreed action: -

- The Head of Medicines Optimisation would obtain further information about the RMOG and this would be discussed more at the APC Time Out Session.

CL

APC 18/28 FORMULARY REVIEW - CHAPTER 5 INFECTIONS

The Infection formulary review was presented and the following changes highlighted and discussed: -

- Updated hyperlinks
- Linezolid guidance will be updated
- 5.01.07 Colistin (nebulised) – Amber classification however currently no Shared Care Guideline in place. It was agreed to check if there was a guideline in place at Sheffield. Guideline to be brought back.
- 5.01.12 Ciprofloxacin – following discussion it was agreed that the grey classification will remain
- Dapsone – it was agreed that Amber-G guidance would be produced for dermatology use.
- Changes to non-formulary sections – currently funded by NHS England but used by GUM. It was agreed to add these to these with a red classification.

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Agreed actions: -

- Linezolid guidance will be updated
- Colistin (nebulised) – any existing guidelines to be obtained from Sheffield.
- Amber G guidance to be produced for dapsone use by dermatology.

UP

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UP

APC 18/29 GLP-1 AGONISTS SHARED CARE GUIDELINE UPDATE

18/29.1

As discussed at the December 2017 meeting following an update to the SmPC for liraglutide (Victoza®), the updated Amber G Guideline, a summary of the updates and data from the LEADER trial published in the New England journal of Medicine in 2016, looking at the cardiovascular benefit, was presented.

The EMA's Committee for Medicinal Products for Human Use had reviewed the evidence submitted following the LEADER trial and concluded that the mechanism behind the cardiovascular benefit with liraglutide was unclear. The SmPC acknowledges that it has favorable outcomes and the Committee agreed that information would be included in the Amber-G guideline.

There was further discussion around the Iraglutide dosing information and the increase in the maximum dose from 1.2mg to 1.8mg. It was agreed that a clearer understanding of the benefit with evidence base to support use of the higher 1.8mg dose should be brought back to the Committee. It would be checked if there was currently any guidance available from other areas around which GLP-1 agonist to use first line.

Agreed actions:

- The updated Shared Care Guideline would be brought back to the next meeting with any evidence base to support the use of the higher 1.8mg dose.
- It would be checked if there was currently any guidance available from other areas around which GLP-1 agonist to use first line

UP

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18/29.2

New Diabetes Service Mobilisation

The Chair informed the Committee that from 1st April 2018, Barnsley Healthcare Federation in partnership with Barnsley Hospital NHS FT would deliver the Community and In Patients Diabetes service for Barnsley.

The Chair sought views from the Committee about writing to the Barnsley Healthcare Federation asking them to reinforce that clinicians should prescribe in line with local guidelines and the formulary.

Representation from Barnsley Healthcare Federation on the APC would be discussed at the Time Out session.

Agreed actions: -

- The Chair to write to Barnsley Healthcare Federation.

MG/CL

APC 18/30

SHARED CARE GUIDELINES / AMBER G SHARED CARE GUIDELINES

18/30.1

Zoladex® Amber G Shared Care Guideline

The Committee approved the guidance and this would be sent to the LMC.

JH

18/30.2

Prostate Cancer Amber G Shared Care Guideline

The Committee noted the additional paragraph under cautions and contraindications and approved the guidance. The guidance would be sent to the LMC.

JH

18/30.3

Buccolam® Amber G Guidance

The Committee noted the additional information highlighted and approved the guidance. The guidance would be sent to the LMC.

JH

APC 18/31 NEW PRODUCT APPLICATION LOG – noted.

APC 18/32 NEW PRODUCT APPLICATION

18/32.1

ProSource TF®

The Committee received the new product application for ProSource TF®. This was primarily for patients who needed a greater protein content, particularly for critical care patients and mainly for hospital use with a small number of patients needing to continue after discharge for a period of time.

This would be initiated by a dietician with communication sent to the GP in order to continue prescribing. As agreed previously with oral nutritional supplements (ONS), primary care will not prescribe ONS from a D1 alone without an accompanying dietitian's letter.

The Committee approved the application for ProSource TF® with an Amber G traffic light classification.

18/32.2

Barnsley Wound Care Advisory Group (for information)

Vliwasorb® Pro Superabsorbent Dressing

The Committee accepted that the Barnsley Wound Care Advisory Group had undertaken a review of the product and approved the application for Vliwasorb® Pro Superabsorbent Dressing.

It was noted that wound care usage data was submitted to the Barnsley Wound Care Advisory Group on a bi-monthly basis and recommendations are made accordingly and communicated to the nurses.

18/32.3

Barnsley Wound Care Advisory Group (for information)

Kerracel® Gelling Fibre Dressing

The Committee accepted that the Barnsley Wound Care Advisory Group had undertaken a review of the product and approved the application for Kerracel® Gelling Fibre Dressing.

The Lead Pharmacist (DC) informed the Committee that work was being undertaken with Lynne Hepworth, Lead Tissue Viability Nurse, SWYPFT to update the wound care products on Scriptswitch.

APC 18/33

BARNSLEYAPCREPORT@NHS.NET FEEDBACK

18/33.1

APC Reporting February 2018

The reports were noted. It was agreed that future reports would be summarised and anonymised.

CA

18/33.2

Summary/Trend Report 2017

The report was received and key themes highlighted.

GP Practices

- Following reports regarding demeclocycline, an Amber G guideline was being produced.
- Shared care sign up – education within practices undertaken.
- Following a high number of reports relating to summary care record discrepancies, a piece of work will be undertaken to look at the report details. This would be brought back to the Committee.

CA

BHNFT

- Trends were seen with reports relating to D1 communication, shared care issues, formulary and medicines supply issues.

SWYPFT

- Trends were seen with reports relating to discharge and CAMHS.

Community Pharmacy

- Trends were seen with reports relating to MDS, transfer of care, incorrect strengths, repeat items issued not wanted and liquid spironolactone and furosemide.

It was expressed that some of these issues may improve as a result of ongoing work with the Medicines Management Service Working Group.

It was agreed that the findings from the trend report would be disseminated across primary care, secondary care and community pharmacy to encourage incidents to be reported.

CA/SH/GT
/TB

APC 18/34

NEW NICE TECHNOLOGY APPRAISALS – JANUARY 2018

The Lead Pharmacist, BHNFT confirmed that the following NICE TAs were applicable for use at BHNFT:-

- TA497 Golimumab for treating non-radiographic axial spondyloarthritis
- TA499 Glecaprevir–pibrentasvir for treating chronic hepatitis C

The Lead Pharmacist, BHNFT confirmed that the following NICE TAs were not applicable for use at BHNFT:-

- TA498 Lenvatinib with everolimus for previously treated advanced renal cell carcinoma
- TA500 Ceritinib for untreated ALK-positive nonsmall-cell lung cancer

The Lead Pharmacist, BHNFT would confirm by email if the following NICE TA was applicable for use at BHNFT:-

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- TA502 Ibrutinib for treating relapsed or refractory mantle cell lymphoma

Post meeting note: applicable and compliant.

The following NICE TAs were not recommended: -

- TA501 Intrabeam radiotherapy system for adjuvant treatment of early breast cancer
- TA503 Fulvestrant for untreated locally advanced or metastatic oestrogen receptor positive breast cancer

It was noted that this was currently classified red on the formulary and it was agreed that the Lead Pharmacist, BHNFT would check whether it should remain on the formulary for any other indication(s) and report back to the Committee

GT

18/34.1 Feedback from BHNFT Clinical Guidelines and Policy Group
The group were due to meet this month.

18/34.2 Feedback from SWYPFT NICE Group
There was nothing relevant to report back to the Committee.

APC 18/35 **FEEDBACK FROM THE MEDICINES MANAGEMENT GROUPS**
18/35.1 Primary Care Quality & Cost Effective Prescribing Group (QCEPG)

- The Group reviewed savings targets and work progressing around QiPP work streams
- A piece of work around high cost drugs is progressing about how to implement biosimilars next year.
- Primary Care medicines optimisation work has exceeded its delivery target.
- There was discussion around the Medicines Ordering, Safety and Waste Project which is working with GP practices and community pharmacies across Barnsley in order to make sure only required medicines are ordered but ensuring that patients requiring support receive the support to order medicines appropriately. The project is slightly behind target but sensitive to making sure appropriate support is in place for patients.

18/35.2 BHNFT
There was nothing relevant to report.

18/35.3 SWYPFT Drugs & Therapeutics Committee (D&TC)

- The Committee were informed that SWYPFT had started their own drug cost savings plan using Refine and have already identified large savings.
- Patient safety issue was reported around risks associated with withdrawal from benzodiazepines. The Lead Pharmacist SWYFT agreed to share the letter from NHS England with the Committee.

SH

It was noted that the Medicines Safety Officer at SWYPFT would produce some guidance to share with CCGs and GPs around the associated risks with withdrawal from benzodiazepines.

It was agreed that when the guidance was available it would be incorporated into the existing primary care guidance.

Agreed action: -

- It was agreed that the NHS England letter would be added to the agenda for discussion at a future meeting.

NB

APC 18/36 **ISSUES FOR ESCALATION TO THE QUALITY & PATIENT SAFETY COMMITTEE (Q&PSC)**

It was agreed that the following would be escalated to the Q&PSC: -

- Risks associated with withdrawal from benzodiazepines
- APC Reporting Summary/Trend Report

MG

APC 18/37 HORIZON SCANNING DOCUMENT – JANUARY 2018

The Committee agreed to classify the new products as follows on the traffic light list (TLL): -

JH

Budesonide/formoterol 80/4.5 & 160/4.5 micrograms inhalation powder (Fobumix[®] Easyhaler, Orion Pharma)- **PROVISIONAL GREY**

Fluticasone/salmeterol 125/25 and 250/25 micrograms pressurised inhalation suspension (AirFluSal[®] MDI, Sandoz) – **ALREADY GREEN**

Sildenafil 50 mg film-coated tablets (Viagra[®] Connect, Pfizer) – **PROVISIONAL GREY**

Daptomycin 350 mg & 500 mg powder for solution for injection/infusion (Accord) – **PROVISIONAL RED**. It was queried whether daptomycin was already included on the formulary.

Post meeting note: Daptomycin is not currently included on the formulary.

Niraparib 100 mg hard capsules (Zejula[®]▼, Tesaro) – **PROVISIONAL RED**

Tenofovir disoproxil 245 mg film-coated tablets (Lupin) – **ALREADY RED**

APC 18/38 MHRA DRUG SAFETY UPDATE – VOLUME 11, ISSUE 6, JANUARY 2018

Received and noted.

It was agreed that co-dydramol would be classified grey.

JH

APC 18/39 SOUTH YORKSHIRE AREA PRESCRIBING COMMITTEE MINUTES

The minutes from NHS Doncaster & Bassetlaw CCG (November 2017) were received and noted.

APC 18/40 ANY OTHER BUSINESS

18/40.1 Medicines Optimisation Scheme (MOS) 2018/19

It was noted that following approval of the QIPP areas list for 2018/19 by the CCG Governing Body, the formulary would be updated with those brands and formulations.

JH/DC

18/40.2 Methotrexate 10mg and Warfarin 5mg

It was reported that a dispensing error involving methotrexate 10mg had occurred in South Yorkshire which was a 'never event'.

It was also noted that warfarin 5mg is still prescribed. Although good practice not to prescribe, it was acknowledged that following GP/patient discussion, it may have been considered appropriate for a small number of patients and this should be documented in the patient's notes. It was agreed that information would be shared with the medicines management clinical pharmacists.

Agreed action: -

- Information around prescribing of warfarin 5mg to be shared with clinical pharmacists.

DC/CL

18/40.3 Sildenafil for Pulmonary Hypertension
There was a classification query following receipt of a letter from Sheffield for sildenafil for pulmonary hypertension.

Post meeting note: *It was confirmed that PDE-5 inhibitors are classified red for pulmonary hypertension on the Sheffield traffic light list. Sildenafil is also classified red on the Barnsley traffic light list for this indication.*

18/40.4 APC Time Out
A number of possible dates would be shared with members and Jeremy Budd, Director of Accountable Care Organisation (ACO) would attend the session to give an overview of the ACO.

NB

APC 18/41 **DATE AND TIME OF THE NEXT MEETING**
The time and date of the next meeting was confirmed as Wednesday, 14th March 2018 at 12.30 pm in the Edith Perry Room at Barnsley Hospital NHS Foundation Trust.

ADOPTED