

**Minutes of the meeting of the AREA PRESCRIBING COMMITTEE held on
Wednesday, 14th November 2018 in the Boardroom, Hilder House**

MEMBERS:

Chris Lawson (Chair)	Head of Medicines Optimisation (Barnsley CCG)
Tom Bisset (left after item 227)	Community Pharmacist (LPC)
Dr Rebecca Hirst	Palliative Care Consultant (Barnsley Hospice)
Sarah Hudson	Lead Pharmacist (SWYPFT)
Mike Smith	Chief Pharmacist (BHNFT)

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)

APOLOGIES:

Professor Adewale Adebajo	Associate Medical Director (Medicines Optimisation) on behalf of the Medical Director (BHNFT)
Anila George	Senior Interface Pharmacist (BHNFT)
Dr Kapil Kapur	Consultant Gastroenterology (BHNFT)
Dr Jeroen Maters	General Practitioner (LMC)
Dr Abdul Munzar	General Practitioner (LMC)
Gillian Turrell	Lead Pharmacist (BHNFT)

**ACTION
BY**

APC 18/216 QUORACY

The meeting was not quorate and therefore any decisions made would be circulated by email for comment and ratification.

APC 18/217 DECLARATIONS OF INTEREST RELEVANT TO THE AGENDA

There were no declarations of interest to note.

APC 18/218 DRAFT MINUTES OF THE MEETING HELD ON 10th OCTOBER 2018

201.4 should read ...”It was noted that BHNFT only stock chlorthiazide 250mg/5ml...”

Subject to the above change, the minutes were accepted as an accurate record of the meeting.

Agreed action: -

- As the meeting was not quorate, the minutes would be circulated to members for ratification.

Post meeting note: minutes ratified by email

NB

APC 18/219 MATTERS ARISING AND APC ACTION PLAN

219.1 Budenofalk® (budesonide)

The Chief Pharmacist, BHNFT advised that the Gastroenterologists had indicated that they would ideally want to use Colifoam® first line, although some recent supply issues were noted. The

	Committee agreed that Colifoam® was the most cost effective option to be used first line and the formulary would be annotated accordingly.	JH
219.2	<p><u>Chlorthiazide</u> The possibility of agreeing a standardised concentration across South Yorkshire and Bassetlaw for the prescribing and dispensing of chlorthiazide, furosemide and spironolactone liquids would be taken to the next CCG Head of Medicines Management (HOMM) meeting in November. The Chief Pharmacist, BHNFT was awaiting responses back from Yorkshire Chief Pharmacists and would provide an update at the next meeting.</p>	CL/CA MS
219.3	<p><u>MOS 2018/19 (APC 202.1 refers)</u> Feedback was awaited from the paediatricians regarding the suggested replacement of Seretide® evohaler on the formulary with Combisal®.</p> <p>The inhaler purchase contract prices from BHNFT would be emailed to the Lead Pharmacist (DC). It was noted that Combisal® was not on BHNFT contract.</p> <p>It was re-confirmed that community pharmacies would be given at least 1 months' notice of any planned switches.</p> <p>In relation to the proposed change from Metformin/Glucophage® SR 500mg, 750mg & 1000mg MR Tablets to Yaltormin® MR Tablets and given the concerns raised around stock, it was agreed that the Lead Pharmacist (DC) would obtain more information from the company to provide assurance that sufficient stock would be available.</p>	MS DC
219.4	<p><u>Saxenda® (Liraglutide)</u> The financial impact of Saxenda® (Liraglutide) being potentially classified a red drug was discussed at BHNFT Medicines Management Committee and it was agreed that a business case would be taken through the governance structures. Feedback would be provided at the next APC meeting. It was confirmed that no further patients would be commenced on this until this had been completed and a decision regarding formulary status had been made.</p>	MS
219.5	<p><u>NICE TAs (September 2018)</u> The Chief Pharmacist, BHNFT confirmed that the following NICE TA was applicable for use at BHNFT: -</p> <ul style="list-style-type: none"> • TA540 Pembrolizumab for treating relapsed or refractory classical Hodgkin lymphoma <p>The Chief Pharmacist, BHNFT confirmed that the following NICE TA was not applicable for use at BHNFT: -</p> <ul style="list-style-type: none"> • TA541 Inotuzumab ozogamicin for treating relapsed or refractory B-cell acute lymphoblastic leukaemia 	

219.6 Action Plan – other areas
Medicines Interface Action Plan
The report would be brought to the next meeting. CL

219.7 BHNFT Discharge Letter Audit Report (a review of the quality of information regarding medication received by Barnsley primary care practices following patient discharge)
The draft audit report was complete and would be shared with BHNFT for comment and brought to the next APC meeting. DC

BHNFT confirmed that they had piloted their audit with the new audit criteria agreed and data collection was expected to begin before the end of November 2018.

APC 18/220 LIPID POSITION STATEMENT

The updated position statement was presented. It was noted that minor updates had been made including, in line with NICE guidance update, an amendment to clarify what is meant by a high intensity statin and that this recommendation applies to both primary and secondary prevention.

In line with the new development process, the guidance would be circulated to the LMC for feedback and comment.

Actions agreed:-

- Send to the LMC for feedback at the next LMC meeting (11.12.18). JH
- Send to APC members not present today for feedback and agreement. JH/NB

Post meeting note: *decision ratified by email*

- The guidance was approved subject to completion of the above actions.

APC 18/221 DILTIAZEM CREAM GUIDANCE

The updated guidance was presented. This is an unlicensed special preparation for use second line after GTN.

It was agreed that as the formulary advises prescribing Diltiazem ointment, it would be clarified if the cream or ointment is used within BHNFT and the guidance would be updated accordingly.

Agreed action:-

- Update the guidance regarding choice of formulation. JH
- The Chief Pharmacist, BHNFT to take this back to the Senior Interface Pharmacist to check the prices and amend accordingly. MS/AG

- The final version of the guidance would be circulated for comment and approval by APC members. NB

Post meeting note: *approved by email*

- The guidance was approved subject to completion of the above actions.

Post meeting note:- *the colorectal consultants have confirmed that the cream and ointment can be used interchangeably. The*

cream is used within BHNFT; however the ointment is the most cost effective option within primary care. The guidance has been updated accordingly.

APC 18/222 DILTIAZEM PREPARATIONS

There was a discussion around the preparations listed and it was noted that the Cardiologists would like to remove the TDS and QDS regimes and use BD formulations. There was also a consensus that the once daily and twice daily preparations should be of a different brand to avoid confusion.

It was agreed that this item would be deferred to the December meeting.

NB

APC 18/223 FORMULARY REVIEWS

223.1 Formulary Review Plan

The plan was received and noted. As the Eye formulary chapter has not yet been sent to the second pharmacist reviewer, the date would be changed to January 2019 at the earliest.

DC

APC 18/224 SHARED CARE GUIDELINES/AMBER G SHARED CARE GUIDELINES

224.1 Fiasp® (insulin aspart injection) Amber G Guideline

The new guidance was presented but as this needed to go through the new development process; the guidance would be circulated to the LMC to ask for feedback and comment.

Actions agreed:-

- Send to LMC and ask for feedback at the next LMC meeting (11.12.18).
- The Amber-G guidance template would be updated to say ... "to be initiated by a specialist..."

JH

JH

224.2 Entresto® (sacubitril/valsartan) Amber Guideline

The guideline was presented for discussion with a proposal to move from a red to amber traffic light classification.

It was raised that following requests from Rotherham and Sheffield, where Entresto® is amber, GPs and clinical pharmacists would appreciate some guidance. It was noted that although amber in Sheffield, there was no shared care in place.

There was consensus to move from red to amber so completing the guideline for future consideration by the Committee was approved. It was noted that the disease monitoring section of the guideline still needed to be populated.

Agreed actions: -

- The final draft version to be sent to MM Administration Officer.
- The draft guideline would be circulated to members not present to ask if they agree with the consensus to consider the proposal to change from red to amber.

GT/AG

JH

Post meeting note: decision ratified by email

- The final draft version would be shared with the LMC for comment and brought back to the next APC meeting.

JH

224.3

Updated Aromatase Inhibitor Amber G Guideline

The guideline has been shared with the LMC and feedback has been received from the specialists.

The guideline has been updated to include information on NICE NG101; use in hepatic and renal impairment; and reference to appendix A in the communications section has been removed. Subject to the addition of contact details for two oncologists based at Sheffield, the Committee accepted the guideline.

Agreed action:-

- The guideline would be circulated to members not present for ratification.

JH/NB

Post meeting note: decision ratified by email

224.4

Sheffield Shared Care Guideline for Denosumab

It was noted that the Barnsley Denosumab guidance was due for review but as the local service was no longer functioning and there was no local consultant to support the review of the guidance, the Committee were asked to consider whether the Sheffield guidance was acceptable to replace the Barnsley guidance. It was understood that future referrals would go to Sheffield.

There was some concern raised around the supply being delivered to practice within 24 hours and it would be fed back to Sheffield that this could take longer if community pharmacy processes the script. It would therefore be advised that 2 weeks' notice should be given from appointment to obtaining supply to prevent a treatment break.

Subject to the above, the Committee were happy to accept the Sheffield guidance for use in Barnsley.

Agreed actions:-

- The guidance would be shared with Committee members not present to ratify the decision to accept the Sheffield guidance.

JH/NB

Post meeting note: decision ratified by email

- Concerns to be fed back to Sheffield regarding delivery and suggested notice period.
- Consult with the LMC and clarify the ordering process used in practice.

JH

CL

APC 18/225 NEW PRODUCT APPLICATION LOG

Noted.

APC 18/226 NEW PRODUCT APPLICATIONS

It was noted that the Wound Care Formulary is currently undergoing a substantial review and a number of products were presented for information. These products are accessed and prescribed in community on FP10.

226.1

ActivHeal® Alginate

This product is to replace Sorbsan® and Kaltostat® and is the most cost effective option across the range.

- 226.2 ActivHeal Aquafiber® Ag
This product is to replace Silvercel®.
- 226.3 ActivHeal Aquafiber® Extra
This product is a replacement for Aquacel® Extra and is an improved product, equivalent in cost.
- 226.4 Aquacel Ag® + extra dressing
This is a new additional dressing acting against super bugs, for use where other products are not tolerated.
- 226.5 Kliniderm® silicone foam border
This is a new dressing which is more cost effective compared to other market leading brands.

The Committee accepted the applications presented.

There was concern raised around patients receiving incorrect items and it was agreed that as part of the wound care formulary review, that a robust ordering form listing formulary products should be produced and implemented.

Agreed actions:-

- Committee members not present to ratify the decision to accept the above applications. **NB**

Post meeting note: decision ratified by email

- The Head of Medicines Optimisation to liaise with the Lead Tissue Viability Nurse regarding implementing a formulary wound care dressing order form. **CL**

APC 18/227 BARNSELY APC REPORTING NOVEMBER 2018

227.1 Summary Report (January – September 2018)

The report was presented and noted.

The sub-group would continue to meet quarterly and an LMC representative or clinical pharmacist would be invited to attend future meetings.

Agreed action: -

- It was agreed that the report would be shared with the LMC. **CA**
- An LMC representative or clinical pharmacist would be invited to attend future meetings. **CA**

227.2 APC Reporting Process

The updated guidance was presented for information which clarified that APC reporting was to report issues and not to resolve issues and there was some confusion that this was its function. The purpose of APC reporting is to identify key themes and tackle these areas.

227.3 APC Reporting November 2018 (for information)

The report was presented with a number of reports highlighted i.e. Vitamin B co-strong and palliative care stockist scheme. There were some reports relating to triple inhalers but members were not aware

of any new product applications being submitted for consideration.

APC18/228 NEW NICE TECHNOLOGY APPRAISALS (OCTOBER 2018)
The Lead Pharmacist, BHNFT would advise if the following NICE
TAs were applicable for use at BHNFT:-

GT

- TA542 Cabozantinib for untreated advanced renal cell carcinoma
- TA543 Tofacitinib for treating active psoriatic arthritis after inadequate response to DMARDs
- TA544 Dabrafenib with trametinib for adjuvant treatment of resected BRAF V600 mutation-positive melanoma

228.1 Feedback from BHNFT Clinical Guidelines and Policy Group
There was nothing to report back to the Committee.

228.2 Feedback from SWYPFT NICE Group
There was nothing to report back to the Committee but it was confirmed that NICE TAs 542, 543 and 544 were not applicable for use in SWYPFT.

APC18/229 FEEDBACK FROM THE MEDICINES MANAGEMENT GROUPS

229.1 Primary Care Quality & Cost Effective Prescribing Group
The Group had a virtual meeting due to a number of apologies and focussed on QIPP delivery which was on target.

229.2 BHNFT
The Chief Pharmacist informed the Committee that the Trust were implementing Transfer of Care Around Medicines (TCAM) which would alert community pharmacies when patients were admitted (potential reduction in waste medicines i.e. venalinks) and discharged from hospital (allow Trust to signpost patients to commissioned services within primary care). The IT portal was currently being put in place. The platform is available across all LPC and all members of LPC have signed up.

The running costs and a possible incentive scheme were discussed.

229.3 SWYPFT Drug and Therapeutics Committee
There was nothing to report back.

APC 18/230 ISSUES FOR ESCALATION TO THE QUALITY & PATIENT SAFETY COMMITTEE (Q&PSC)

It was agreed to escalate the following issues to Q&PSC: -

CL

- Quoracy of the meeting
- Review of Wound Care Formulary and expected launch date
- TCAM

APC 18/231 HORIZON SCANNING DOCUMENT – OCTOBER 2018
Cytarabine/daunorubicin 44mg/100mg powder for concentrate for solution for infusion (Vyxeos[®], Jazz Pharmaceuticals) – NON-FORMULARY PROVISIONAL RED

Erenumab 70mg solution for injection in pre-filled syringe (Aimovig[®]▼, Novartis) – **NON-FORMULARY PROVISIONAL GREY**

Budesonide 1mg orodispersible tablet (Jorveza[®], Dr Falk) – **NON-FORMULARY PROVISIONAL GREY**

Post Meeting Note: BHNFT Lead Pharmacist to discuss with ENT and feedback to the Committee, Traffic light classification to be reviewed again when this information is available.

GT

Ciclosporin 1mg/ml eye drops, emulsion (Verkazia[®], Santen) – **NON-FORMULARY PROVISIONAL RED**

Nonacog beta pegol 2000IU, 1000IU and 500IU powder and solvent for solution for injection (Refixia[®]▼, Novo Nordisk) – **NON-FORMULARY PROVISIONAL RED**

Naloxone 1.8mg nasal spray, solution in a single dose container (Nyxoid[®], Napp) – **NON-FORMULARY PROVISIONAL GREEN**

Fluticasone/formoterol 50/5 microgram and 125/5 microgram per actuation pressurised inhalation, suspension (Flutiform K-haler[®], Napp) – **NON-FORMULARY PROVISIONAL GREEN**

Tisagenlecleucel Dispersion for infusion (Kymriah[®]▼, Novartis) – **NON-FORMULARY PROVISIONAL RED**

Ocriplasmin 0.375mg/0.3ml solution for injection (Jetrea[®], ThromboGenics) – **ALREADY RED**

Pentosan 100mg hard capsules (Elmiron[®], Consilient) – **NON-FORMULARY PROVISIONAL RED**

Buprenorphine / naloxone (Generic) 8 / 2mg and 2 / 0.5mg sublingual tablets (Ethypharm) – **ALREADY RED**

Agreed action:

- Email Committee members not present to ratify the decisions above

JH/NB

Post meeting note: decisions ratified by email

APC18/232 MHRA DRUG SAFETY UPDATE (OCTOBER 2018)

The update was received and noted, with information highlighted around transdermal fentanyl patches: life-threatening and fatal opioid toxicity from accidental exposure, particularly in children.

The Palliative Care Consultant advised that an information leaflet was being produced and asked for engagement from all stakeholders to produce a generic leaflet for use across Barnsley. This was supported.

The following alerts were also highlighted: -

- Rivaroxaban (Xarelto▼) after transcatheter aortic valve replacement: increase in all-cause mortality, thromboembolic and bleeding events in a clinical trial
- Ritonavir-containing products: reports of interaction with levothyroxine leading to reduced thyroxine levels

APC18/233 REGIONAL MEDICINES OPTIMISATION COMMITTEE (RMOC)

The RMOC Work Programme was received and noted and it was agreed that this should be shared quarterly at APC meetings.

Specific recommendations documented in the work programme

would be looked at in more detail by the Lead Pharmacist (DC) and the Medicines Management Pharmacist and actions fed into the APC where appropriate.

It was agreed that RMOB briefing updates would be brought to each APC meeting.

JH

APC 18/234 SOUTH YORKSHIRE AREA PRESCRIBING COMMITTEE MINUTES

The minutes from NHS Sheffield CCG (20th September 2018) and NHS Doncaster & Bassetlaw CCG (27th September 2018) were received and noted.

APC 18/235 ANY OTHER BUSINESS

235.1 Proposed 2019 meeting dates

These would be confirmed as soon as possible.

NB

235.2 SWYPFT – outside Barnsley

It was reported from the West Yorkshire APC that Bradford and Mid Yorkshire and potentially Calderdale and Huddersfield are planning to switch from Dalteparin to Tinzaparin and given the shared borders, Barnsley plans would need to be agreed.

Agreed action:-

- The Chief Pharmacist would discuss this further with the Lead Pharmacist (GT) at BHNFT.

MS

235.3 COPD Algorithm

The Medicines Management Pharmacist informed the Committee that small changes have been made to the algorithm, including the addition of Soltel®; and changes to the wording around doses to be consistent throughout. The Committee were happy to accept the changes.

JH

Agreed action:

- Email Committee members not present to ratify this decision
Post meeting note: decision ratified by email

JH

APC 18/236 DATE AND TIME OF THE NEXT MEETING

The time and date of the next meeting was confirmed as Wednesday, 12th December 2018 at 12.30 – 2.30 pm in the Edith Perry Room at Barnsley Hospital NHS Foundation Trust.