

**Minutes of the meeting of the AREA PRESCRIBING COMMITTEE held on
Wednesday, 7th July 2021 via MS Teams**

MEMBERS:

| | |
|---------------------------|---|
| Chris Lawson (Chair) | Head of Medicines Optimisation (Barnsley CCG) |
| Professor Adewale Adebajo | Associate Medical Director (Medicines Optimisation) on behalf of the Medical Director (BHNFT) |
| Tom Bisset | Community Pharmacist (LPC) |
| Dr Jeroen Maters | General Practitioner (LMC) |
| Mark Payne | Lead Pharmacist (SWYPFT) |
| Mike Smith | Chief Pharmacist (BHNFT) |

IN ATTENDANCE:

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|-----------------|--|
| Nicola Brazier | Administration Officer (Barnsley CCG) |
| Lauren Clarke | Senior Pharmacist, Interface (BHNFT) |
| Deborah Cooke | Lead Pharmacist (Barnsley CCG) |
| Joanne Howlett | Medicines Management Pharmacist (Barnsley CCG) |
| Liane Hyde | IBD Clinical Nurse Specialist (BHNFT) |
| Gillian Turrell | Lead Pharmacist (BHNFT) |

APOLOGIES:

| | |
|------------------|---|
| Dr Rebecca Hirst | Palliative Care Consultant (Barnsley Hospice) |
| Sarah Hudson | Deputy Chief Pharmacist (SWYPFT) |
| Dr Kapil Kapur | Consultant Gastroenterologist (BHNFT) |

**ACTION
BY**

APC 21/136 QUORACY

The meeting was quorate. Liane Hyde was welcomed to the meeting, attending to observe as part of her NMP course training.

APC 21/137 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 21/138 DRAFT MINUTES OF THE MEETING HELD ON 9th JUNE 2021

The minutes were accepted as an accurate record of the meeting.

APC 21/139 MATTERS ARISING AND APC ACTION PLAN

21/139.1

Dantrolene Amber G Guideline

The Head of Medicines Optimisation has received feedback from STH in response to the issue around LFTs and it was agreed that the Head of Medicines Optimisation and Senior Interface Pharmacist, BHNFT would discuss outside of the meeting to ensure the response was satisfactory.

Agreed action: -

- Response to be discussed outside of the meeting to ensure it was satisfactory.

CL/LC

21/139.2

AK Pathway

The Head of Medicines Optimisation confirmed that a meeting had taken place to advise Dr Baxter that not all GP practices would be able to follow the algorithm from capacity perspective, scope of practice and time.

It was noted that the CCG Senior Management Team have recently signed off a review of the primary care specialist drugs service, with funding available for managing patients which now includes a new tier around new pathway introductions that require medicines to be managed and overseen. This would be presented at the next LMC meeting. The pathway was discussed at the meeting with Dr Baxter and it was agreed that Solaraze® would remain amber G but the other preparations within the pathway (i.e. Actikerall®, Aldara® and Efudix®) would move to amber shared care. There was a discussion about how this could be implemented optionally for GPs who wish to do it, with support and training to facilitate increased take up.

It was agreed that a follow up meeting would be arranged to discuss the agreed plan of work.

Agreed action: -

- Follow up meeting to be arranged to discuss the agreed plan of work.

NB

21/139.3

NICE TAs May 2021: TA697 Andexanet alfa for reversing anticoagulation from apixaban or rivaroxaban

At the last meeting, it was noted that NICE TA697 would need to be added to the BHNFT antidote list but the Trust were awaiting clarification if it was to be held by each Trust or held at a central point.

The Lead Pharmacist confirmed that this had been added to the BHNFT antidote list which will need to go through the internal governance process. The Trust was still awaiting information from region regarding any requirement for a regional stock holding. It was agreed to share the approved antidote list with the APC for information only, when approved.

Agreed action: -

- The BHNFT antidote list to be shared for information following internal governance approval.

GT

21/139.4

Action Plan - other Phyllocontin® Guidance

The Lead Pharmacist, BHNFT provided an update following response from the respiratory physicians which wasn't in line with the request to meet with them to agree the plan for reviewing patients. It was therefore suggested and agreed that a respiratory physician would be invited to attend an APC meeting in order to progress this work.

Agreed action:-

- The Lead Pharmacist, BHNFT to invite a respiratory physician to the next meeting.

GT

- 21/139.5 Dapagliflozin for HFrEF Amber G Guideline
The Lead Pharmacist, BHNFT advised that this would be presented to the next LMC.
- 21/139.6 Combination anticoagulant and antiplatelet treatment for patients with concomitant AF and ACS Guideline
The Lead Pharmacist, BHNFT advised that the interim guideline has recently been amended and will need to go through the internal governance process. This would be deferred to October 2021.
- 21/139.7 Ticagrelor Audit
The Lead Pharmacist, BHNFT advised that the audit report has recently been amended and will need to go through the internal governance process. This would be deferred to October 2021.
- 21/139.8 BHNFT discharge letter audit / monitoring (links with long term action - discharge letter audit)
The Chief Pharmacist, BHNFT advised that due to Care Flow taking precedence, the work of the D1 Group was currently on hold.
- It was agreed to change the target date to September 2021 but the Chief Pharmacist would provide a progress update at the August 2021 meeting.
- 21/139.9 Immunosuppressants - dermatology guidelines
The Lead Pharmacist, BHNFT advised that herself and Dr Kay Baxter had met and were working through the guidelines. These would be presented to the September 2021 LMC meeting and the October APC 2021 meeting.
- 21/139.10 Hyperkalaemia Management Guideline
The Lead Pharmacist, BHNFT advised that the guideline was being progressed but will need to go through the internal governance process and therefore the target date would be changed to October 2021.

APC 21/140 DIABETES GUIDELINES REVIEW LIST

The Head of Medicines Optimisation referred to enclosure C noting that as part of the Diabetes Service Review, there were plans pre-COVID to assign sections of the guideline to a number of leads for review. Post-COVID when the group re-established, Dr Atcha agreed to lead on cutting up the sections.

The Barnsley Diabetes Guideline has previously been endorsed by the APC and a number of the guidelines listed, some of the APC ones have recently been reviewed and the dates were shown on the review list. Quite a number require review and members of the Diabetes Service Review Group and clinical leads have been asked to give input into whether they feel the guideline sections listed are suitable in their current form to be published on the BEST website. The Head of Medicines Optimisation had fed back that a number of medication guidelines have not been reviewed for a number of years and these would need to be reviewed before being published on the website due to significant clinical risk if not reviewed.

There was discussion around which sections would need to be considered and approved by the APC and it was agreed to share the link to the BEST website for members to be able to access the guidelines and provide any feedback. This would be discussed further at the next meeting to decide if any of the sections should be published on the website and to decide how the sections will be endorsed going forward.

It was noted that BHNFT pharmacy colleagues were not aware of some of guidelines listed, although these are Barnsley wide guidelines which are now part of the integrated service. Dr Uchegbu, BHNFT is leading on reviewing the guidelines on behalf of the whole of Barnsley. It was noted that there is currently no link into the Diabetes Service from a BHNFT pharmacy perspective other than the medicines information team, noting there is no diabetes and endocrine lead currently in post. It was recognised that involvement would be useful and BHNFT pharmacy would look to providing input but a capacity issue to support the significant amount of work in updating the guidance was acknowledged.

Agreed actions:

- The link to the BEST website would be shared for members to be able to access the guidelines and provide any feedback.
- This would be discussed further at the next meeting.

DC/NB

APC 21/141 ANTIMICROBIAL STEWARDSHIP PATHWAY

The Head of Medicines Optimisation presented the antimicrobial stewardship pathway for wound care.

An audit, led by the wound care nurse specialists has been undertaken across a number of organisations in Barnsley. Over half of those having wounds treated were receiving antimicrobials and 44% of those had received for prolonged use, greater than 4 weeks, 15% were on antibiotics and 38% were on a repeat course of antibiotics. The aim of the pathway presented was to promote antimicrobial stewardship (AMS) around wound care management.

The intention is to trial this pathway, developed by the tissue viability specialists, in community with the aim to incorporate it into the wound care formulary. It was acknowledged that the hospital have had limited involvement and that the pathway was brought for information to advise the Committee of the pilot /trial in primary care and to ask whether there was anything around collaboration or involvement that members wanted to raise.

It was fed back that the title should reflect that it is AMS for wound care as it currently reads as general AMS but the template format was welcomed and suggested that the presentation be used for other stewardship areas. This would be fed back to those involved with reviewing the guidance to take into consideration but it was noted that the guidance is based on the NICE guidance and there are many different infections included, therefore this would need to be taken into consideration in terms of practicalities in producing a different pathway. The Head of Medicine Optimisation would raise with the Medical Director.

It would also be fed back that not all primary care nurses have access to equipment referenced such as thermometers and oximeters.

Agreed actions: -

- Comments to be fed back.

CL/DC

APC 21/142 SHARED CARE GUIDELINES / AMBER G SHARED CARE GUIDELINES

There were no guidelines to review.

APC 21/143 FORMULARY REVIEWS

21/143.1 Formulary Review Plan (for information)

The Lead Pharmacist (DC) presented the formulary review plan noting that there were sections to be reviewed at today's meeting.

The Cardiovascular section was now complete and would be brought to the August 2021 meeting.

The review dates for the CNS and Anaesthesia sections may need to be changed.

Agreed action: -

- The Lead Pharmacist, BHNFT to advise if the review dates for the CNS and Anaesthesia sections need to be changed.

GT

APC 21/144 NEW PRODUCT APPLICATION LOG

The log was received and noted.

The Head of Medicines Optimisation had made a request to Medicines Information (Leicester) regarding undertaking an independent review of the Ensure Plus new product application. A response to this request would be followed up.

The Lead Pharmacist, BHNFT advised that the treatment pathway incorporating Ferric Maltol being developed with primary care was in the final stages and would soon be presented to the LMC.

Agreed action: -

- The Head of Medicines Optimisation to follow up the request made to Medicines Information (Leicester).

CL

APC 21/145 BARNESLEY APC REPORTING

21/145.1 APC Reporting June 2021 (for information)

The Lead Pharmacist (DC) presented the reports for information.

21/145.2 APC Reporting June 2021 Key Themes

It was noted that there were 23 reports submitted during June 2021 over a range of categories as noted in the summary report. During the first 6 months of the year, 139 reports had been submitted compared with 161 reports for the first 6 months of last year.

A number of significant issues were highlighted. The Lead Pharmacist also wanted to highlight a report in relation to primary care being asked to prescribe FreeStyle Libre for a patient who did

not meet the local criteria, with an explanation given that the criteria is likely to be changed soon following a recent position statement produced by the Diabetes Technology Network, a sub group of ACBD. This has highlighted potential inconsistencies.

Kerry Burns, Lead Diabetes Nurse, BHNFT has been invited to attend the next APC meeting to discuss the position statement and to enable the Committee to decide whether or not any changes to our local guidance are required.

21/145.3

APC Reporting May and June 2021 Interface Issues

The enclosures showing interface reporting issues through May and June 2021 produced by the Senior Pharmacist, Interface (BHNFT) were noted. It was acknowledged that there was some reporting overlap with reports captured in enclosures G1 and G4 and that the 64 interface issues presented do include some of those reports logged in enclosure G1.

The significant amount of work involved with trying to understand the issues reported and then looking at where changes can be implemented in order to reduce it occurring again where possible was acknowledged. This was an excellent piece of work being undertaken locally which needed to be publicised more widely across the region.

It was felt that it would be beneficial to restart the quarterly APC reporting meetings held prior to COVID in order to discuss some of the reports in more detail, and it was suggested that it would be helpful to collate and present information on the number of reports closed/still open.

An update had been provided in relation to BAPC21/06/04 but this wasn't captured in the report presented.

The Community Pharmacist to liaise with the Head of Medicines Optimisation to help resolve issues raised in BAPC21/06/13.

The Lead Pharmacist, SWYPFT provided an update for BAPC21/06/10 and BAPC21/06/11 and the communication issues raised would be fed into the quarterly APC reporting meeting being reinstated.

APC21/146

21/146.1

NEW NICE TECHNOLOGY APPRAISALS (JUNE 2021)

NICE TAs June 2021

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

- TA708 Budesonide orodispersible tablet for inducing remission of eosinophilic oesophagitis
- TA711 Guselkumab for treating active psoriatic arthritis after inadequate response to DMARDs

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

- TA702 Ibrutinib with obinutuzumab for untreated chronic lymphocytic leukaemia and small lymphocytic lymphoma (**terminated appraisal**)

- TA703 Ibrutinib with rituximab for untreated chronic lymphocytic leukaemia (**terminated appraisal**)
- TA704 Trastuzumab deruxtecan for treating HER2-positive unresectable or metastatic breast cancer after 2 or more anti-HER2 therapies *
- TA705 Atezolizumab monotherapy for untreated advanced nonsmall-cell lung cancer *
- TA706 Ozanimod for treating relapsing–remitting multiple sclerosis
- TA707 Nivolumab for previously treated unresectable advanced or recurrent oesophageal cancer *
- TA709 Pembrolizumab for untreated metastatic colorectal cancer with high microsatellite instability or mismatch repair deficiency *
- TA710 Ravulizumab for treating atypical haemolytic uraemic syndrome

* These drugs 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.

21/146.2 Feedback from BHNFT Clinical Guidelines and Policy Group
There was nothing relevant to report.

21/146.3 Feedback from SWYPFT NICE Group
There was nothing relevant to report.

APC 21/147 **FEEDBACK FROM THE MEDICINES MANAGEMENT GROUPS**
21/147.1 Primary Care Quality & Cost Effective Prescribing Group (QCEPG)
The Head of Medicines Optimisation advised that the next meeting would focus on wound care and the report taken to that meeting would be shared with APC members.

CL

21/147.2 BHNFT
The Chief Pharmacist advised that the MMC would function more like an assurance committee, with each monthly MMC going forward having a themed discussion and an update would be provided at each APC. The theme at the next MMC would be the Digital Transformation Programme and a copy of the report being presented to MMC would be shared with APC members when available. It was expected that the first one to impact would be the Care Flow EPMA which will soon be replacing/working in conjunction with ICE (substantive V9 discharge documentation changing from ICE to Care Flow).

21/147.3 SWYPFT Drug and Therapeutics Committee
There was nothing relevant to report.

21/147.4 Community Pharmacy Feedback - GP Community Pharmacy Consultation Service (CPCS)
The Community Pharmacist spoke about the service which now includes referrals for lower acuity conditions from general practice, as well as from NHS 111 (from November 2020).

The practice care navigator, or NHS 111 call advisor will make a digital referral to a convenient pharmacy, where the patient will receive pharmacist advice and treatment for a range of minor

illnesses, or for an urgent supply of a previously prescribed medicine (NB. Referrals for urgent prescriptions from general practice are not covered by this service).

It was noted that 1 Barnsley GP practice has been 'live' for a number of weeks with over 300 referrals so far and it was planned that 3 further Barnsley GP practices would go 'live' in July 2021, taking into account capacity and therefore a steady roll out.

There was a discussion about COVID/flu vaccine planning work that was underway.

21/147.5

Wound Care Advisory Group

The Group have not met and therefore there was nothing to report.

APC 21/148 ISSUES FOR ESCALATION TO THE QUALITY & PATIENT SAFETY COMMITTEE (Q&PSC)

It was agreed to escalate the Antimicrobial Stewardship Pathway Wound Care Pilot to the Q&PSC.

CL

APC 21/149 SPS NEW MEDICINES NEWSLETTER (MAY 2021)

The Committee assigned the following classification to the product listed below: -

- Risdiplam (Evrysdi®) - non-formulary provisional red

APC 21/150 MHRA DRUG SAFETY UPDATE (JUNE 2021)

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

COVID-19 vaccines: updates for June 2021

A summary of key MHRA advice issued up to 11 June 2021 and since the publication of the May 2021 edition of Drug Safety Update was noted.

APC 21/151 REGIONAL MEDICINES OPTIMISATION COMMITTEE (RMOC)

The Head of Medicines Optimisation advised that since the last APC meeting, 4 RMOC draft shared care guidelines had been disseminated for consultation with a mid-August 2021 deadline.

Feedback has been provided advising that Barnsley shared care guidelines are developed around therapeutic areas rather than individual guidelines for individual drugs, but that we would use the information within the RMOC guidelines as part of reviewing our guidelines.

APC 21/152 SOUTH YORKSHIRE AREA PRESCRIBING COMMITTEE MINUTES

The minutes from NHS Sheffield CCG (20th May 2021) and NHS Doncaster & Bassetlaw CCG (29th April 2021) were received and noted.

APC 21/153 ANY OTHER BUSINESS

21/153.1

CyanocoMinn®

The Lead Pharmacist (DC) referred to the MOS QIPP paper presented at the April 2021 which included switching Cyanocobalamin tablets to CyanocoMinn® or CyanocoB12® tablets.

After considering additional information including information on assay limits and looking at what other areas are doing, it has been decided to switch to CyanocoMinn® as part of the MOS work. The formulary will be updated.

21/153.2

CAMHS

A query raised by the Lead Pharmacist, SWYPFT around transfer of care for people prescribed antipsychotics on shared care was discussed. Information would be shared on email and the Head of Medicines Optimisation would raise the issue at the next LMC meeting.

Agreed actions: -

- The Lead Pharmacist to provide the Head of Medicines Optimisation with information on email.
- The Head of Medicines Optimisation to raise the issue at the next LMC meeting.

MP

CL

APC 21/154 DATE AND TIME OF THE NEXT MEETING

The time and date of the next meeting was confirmed as Wednesday, 11th August 2021 at 12.30 pm via MS Teams.

ADOPTED