

County Durham and Darlington Drug and Therapeutics Clinical Advisory Group

Tuesday 7th February 2017
12.30 – 2.00 pm
Board Room, North Durham CCG, Rivergreen

Minutes

In Attendance:

Dr James Carlton (Chair)	Medical advisor DDES CCG	JC
Dr Martin Jones	GP Prescribing Lead DDES CCG, Sedgefield	MJ
Dr Ian Davidson	GP CCG Quality & Safety Lead North Durham CCG	ID
Dr Catherine Harrison	GP Prescribing Lead DDES CCG, Durham Dales	CH
Claire Jones	Public Health Pharmacist, Durham County Council	CJ
Kate Huddart	Head of Medicines Optimisation DDES CCG	KH
Joan Sutherland	Head of Medicines Optimisation North Durham CCG	JS
Dominic McDermott	Senior Medicines Optimisation Pharmacist NECS	DM
Gavin Mankin (Professional Secretary)	Principal Pharmacist, RDTG	GM

Meeting Quorate (four members, including 2 GPs, with two CCGs represented)

Item Description	
1.	Apologies David Russell (Darlington CCG), Rob Pitt
2.	Declarations of interest It was noted that GP prescribers in the room may have a conflict of interest with regards to the prescribing incentives scheme discussion. However, it was agreed that at this meeting the group were only commenting on the scheme and the final decision on approval of the scheme would be taken by the CCG Exec in Common.
3.	Minutes of last meeting held Tuesday 20th December 2016 The draft minutes were agreed as accurate. The group noted that since the last meeting that regional workstream on managed repeat prescriptions is now being led by the NE CCG Prescribing Forum as of January 2017 not NECS, with DDES CCG as the identified lead.

	ACTION: GM to upload minutes to the website
4.	Matters arising: All matters arising covered on agenda or on Action Log.
	<p>Actions taken following December 2016 meeting</p> <p><u>Prescribing Engagement Scheme 2017/18</u> On today's agenda for discussion. ITEM NOW CLOSED.</p> <p><u>Managed Repeats – Memorandum of Understanding</u> The Memorandum of Understanding has been sent out by the LPC and 87 community pharmacies have responded so far, and the outstanding responses are in the process of being followed up.</p> <p><u>GP Letter template for Overordering</u> Still to be circulated by Darlington CCG to D&T CAG members.</p> <p>5. <u>Review D&T CAG Terms of Reference</u> The D&T CAG Terms of Reference will be reviewed once impact of new RMOCs is known. RMOCs are due to meet for first time in April 2017.</p> <p><u>Stopping Overmedicating in LD</u> Alert to GP systems to highlight that these patient requires a review each time they attend for repeat medication review – no further update.</p> <p><u>Ulipristal acetate</u> Discussed at Oct 2016 Formulary Subgroup and formulary application requested from consultant for extended license covering intermittent use. Application remains outstanding. AGREED TO REMOVE FROM ACTION LOG AS ON FORMULARY SUBGROUP AGENDA.</p>
6.	Agenda
6.1	<p>Prescribing Engagement Scheme Proposal for 2017/18</p> <p>The final draft North Durham & DDES Prescribing Engagement Scheme for 2017/18 was presented to the group. The original draft has been to all the locality groups for comment and the comments received were reviewed by the group.</p> <p>Further suggested changes were made by the group and DM will make the necessary changes to the final draft before it goes to the CCG Exec for final approval.</p> <p>ACTION:</p> <ul style="list-style-type: none"> • Final Prescribing Engagement Scheme for 2017/18 to be approved at the February 2017 CCG Exec.
6.2	<p>Magnesium Supplements – draft guideline</p> <p>A local draft guideline on the use of magnesium supplements was presented to the group</p>

	<p>for comment.</p> <p>A number of suggested amendments were made including:</p> <ul style="list-style-type: none"> • Highlighting clearly when groups require magnesium levels to be tested • Duration of magnesium replacement therapy to be confirmed • Cost of a course of treatment to be included. • Frequency of testing to be confirmed • Confirmation of local reference ranges. • Make clear need to stop PPI if patient has low magnesium. <p>ACTION:</p> <ul style="list-style-type: none"> • Guideline to be updated with suggested changes seeking clarification from secondary care where necessary prior to guideline going forward for approval at next meeting of APC.
6.3	<p>Nausea and Vomiting in Pregnancy Guideline</p> <p>The recently approved CDDFT Nausea and Vomiting in Pregnancy Guideline was shared with the group for information. Whilst the content of the document is largely applicable to secondary care the group felt that single page summary for GPs on when patients should be referred for admission would be useful.</p> <p>ACTION:</p> <ul style="list-style-type: none"> • GM to contact CDDFT to ask for single page summary for GPs on when patients with nausea & vomiting in pregnancy should be referred for admission
6.4	<p>Psychotropic Drug Monitoring Guideline</p> <p>A draft of an updated psychotropic drug monitoring guideline produced by TEWV was presented to the group for comment.</p> <p>The group liked the format of the document and was happy for it to go forward for approval/adoption locally.</p> <p>ACTION: No action from D&T</p>
6.5	<p>Tadalafil Once Daily</p> <p>Following the inclusion of tadalafil once-daily on the CD&D Do Not Prescribe List the APC has asked the D&T CAG to discuss the issue of its use with a view to producing some guidance for GPs on how to manage these patients and challenge inappropriate requests to prescribe from secondary care. The group reviewed the DROP List Bulletin available from PrescQIPP with regard to once daily tadalafil and agreed that a summary of it should be produced and circulated to primary care locally. This is because the advice within the PrescQIPP bulletin is clear.</p> <p>It was also discussed about doing some joint working with Sunderland CCG on this issue as Urology service is provided by City Hospitals Sunderland locally.</p> <p>ACTION:</p> <ul style="list-style-type: none"> • JS to pick up the issue with Sunderland CCG

	<ul style="list-style-type: none"> • JS/KH to produce a summary of the PrescQIPP bulletin on tadalafil once daily for primary care locally.
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Subgroup Updates	
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7.0	<p>IT Development Group Update The next meeting is scheduled for the end of Feb 2017.</p> <p>ACTION: No action from D&T</p>
8.0	<p>Non-medical Prescribing Update Nothing to report.</p> <p>ACTION: No action from D&T</p>
9	<p>ND & DDES Joint Working with Community Pharmacy Steering Group Nothing to report.</p> <p>ACTION: No action from D&T</p>

Sharing Best Practice	
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10.1 – 10.5	<p>CCG prescribing locality updates and minutes Provided for information.</p> <ul style="list-style-type: none"> • Darlington prescribing sub-committee – nothing specific to highlight. • North Durham prescribing and medication safety group Nov 2016 – nothing specific to highlight. • Durham Dales LPG Nov 2016 – nothing specific to highlight. • Easington LPG Nov 2016 – nothing specific to highlight. • Sedgefield LPG Nov 2016 – nothing specific to highlight.
11	<p>QIPP and cost effective prescribing Noted that the diabetes SOP for gliptins and the Braltus® switch SOP have now been circulated to GP practices in North Durham and DDES.</p> <p>ACTION: No action from D&T</p>
12	Medication Safety and NPSA
12.1	<p>MHRA Drug Safety Updates Dec 2016 + Jan 2017 GM updated the group on the December 2016 and January 2017 MHRA DSU and that these had already been actioned within the formulary.</p>
12.2	<p>Central Alerting System – patient safety alerts The alert issued on the 16th November 2016 re: Risk of severe harm and death due to withdrawing insulin from pen devices was brought to the attention of the group.</p>
12.3	<p>Significant medication incidents Ongoing progress with three recent medication incidents within primary care in North Durham and DDES were discussed.</p>
12.4	<p>Primary care medication incident trends Next report not available as yet.</p>
12.5	<p>Secondary care medication incident report Next report not available as yet.</p>

Standing items	
13	Budget Update DM provided a verbal update to the group.
14	Patient group directions None for group to note this meeting.
15	Area prescribing committee minutes November 2016 Provided for information.
16.1 - 16.4	Provider drug and therapeutics committees The group noted the minutes and September 2016 update from TEWV D&T. Minutes from CD&D CSTC, UHNT D&T and Sunderland JFC were not available as yet.
17	AOB <u>NRT</u> There has been some confusion on how NRT is provided on discharge from CDDFT. It has been confirmed that patients are referred to the stop smoking service on discharge and given 7 days supply of NRT from secondary care. Patients should not be referred to GPs for NRT provision. This has been highlighted in bulletin to staff within secondary care and will also be highlighted in next primary care bulletin. ACTION: <ul style="list-style-type: none"> • JS/KH to highlight agreed pathway for NRT provision on discharge from CDDFT in next primary care bulletin.
18	Date and time of next meeting 18 th April 2017 12noon – 2.30pm Board Room, Appleton House