



A Meeting of the **Borders Area Drugs and Therapeutics Committee** held at 12:30pm on
Wednesday, 10th July 2019 in Estates Meeting Room
MINUTE

In Attendance: Alison Wilson (Director of Pharmacy) (Chair); Mark Clark (Non Medical Prescribing Lead/Infection Control Lead); Dr Edward James (Consultant Microbiologist); Keith Maclure (Lead Pharmacist – Medicines Utilization & Planning); Adrian Mackenzie (Lead Pharmacist Community); Liz Leitch (Formulary Pharmacist); Keith Allan (Consultant Public Health); Dr Nicola Henderson (GP); Andrew Leitch (Lay Member); Kate Warner (Minute Secretary)

1. **Apologies & Announcements:** Dr Cliff Sharp (Medical Director); Cathryn Park (Lead Pharmacist – Acute Care & Medicines Governance); Dr Elliot Longworth (GP); Dr Rachel Stewart (Consultant);
 Dr R Stewart unable to attend for several months due to staffing; **AW** to ask RS if anyone else in team can pick up or we look for another consultant. Amanda Cotton was going to put into job plan of mental health representative. EJ commented that this should be in a consultant's job plan to allow time to attend and to recognise the work to be done – **AW** will discuss with Dr Howell and Dr Bennison.

Item	Situation ; Background ; Assessment	Recommendation	Person	Timescale
2.	Declarations of Interest: None			
3.	DRAFT Minute previous meeting			
	Draft minute from meeting held 8th May 2019 was approved with no changes as an accurate record of the meeting.	Remove draft, save and upload	KW	Within 24 hours
4.	Matters Arising			
4.1	None			
5.	NEW MEDICINE APPLICATIONS:			
5.1	NFR Benralizumab was discussed with all details in NFR database and folder.	Letter to applicant	KW	15.07.19
5.2	NFR Sativex spray was discussed virtually and noted here with all details in NFR database and folder.	Letter to applicant	KW	15.07.19
5.3	NFR Anakinra was discussed virtually by BFC and noted here with all details in NFR database and folder.	Letter to applicant	KW	15.07.19
5.4	NFR Mepolizumab was discussed with all details in NFR database and folder.	Letter to applicant	KW	15.07.19
6.	PATIENT & MEDICINES SAFETY:			

6.1	Medicines Reconciliation – an update had been attached to agenda from CP. The Pharmacy team have been undertaking a test of change for patients being admitted for elective surgery. The test would understand if there is benefit in contacting patients again prior to surgery to reconcile their medicines and ensure they are following advice. This has highlighted areas for review and will be discussed with relevant surgical / pre-assessment teams. It was commented that it would be interesting to review outcomes with and without the Pharmacist intervention. This shows that medicines reconciliation is not as good as it should be and nurse/pharmacist activity could be merged for an accurate record. ADTC asked why the medicines reconciliation was not the targeted 95% and was below this at 81%. ADTC requested further information as further improvement is expected in medicines reconciliation if dedicated pharmacist input is committed.	What patient numbers used in test? Why not 95%	CP CP	04.09.19 04.09.19
7.	CLINICAL POLICIES, PROCEDURES and GUIDELINES for APPROVAL:			
7.1	MC spoke to the Intravenous Flush Policy, which has been to Associate Directors, Director of Nursing, Clinical Pharmacists, Education and Training. Positive comments have been received including reducing the size of document and this has been updated. Currently there is a PGD for intravenous flushes post cannulation but this restricts staff able to fulfil. The policy has been adapted from a Greater Glasgow & Clyde policy and MC talked through the exclusions and inclusions. If adopted there is a precedent in place. MC answered questions about fluid balance chart and talked of making a record on what is undertaken but not prescription.	ADTC Approved		
7.2	Valproate & Antipsychotic Guidance and meeting notes. LL outlined the meeting discussion on MHRA guidance on Valproate prescribing with sodium valproate remaining as formulary prescribing option with stronger warning for use in particular patient group. It was commented that this was not a new warning and MHRA PP has been issued; the Prescribing Support Team are asked to review patient details repeatedly but are unable to due to the data sharing involved; practice must identify. NH commented that there are frequent notifications and if there are any patients in this category they would refer to mental health team; also that this is prescribed from secondary care not from practice. LL commented that the Mental Health team are committed to reviewing mental health patients on valproate to meet the MHRA safety criteria and if the practices can provide a patient list then mental health team will contact the individual patients and invite them for review. LL requested that ADTC respond to Mental Health team with update on contact with patients for them to fulfil the MHRA criteria. Other specialities may also have to review annually. ADTC agreed that this would be revisited when the data controllership is in place in practices. Responsibility for contraception conversation and advice would remain with GPs.	Letter to mental health team as update on discussion. Forward information to community pharmacies	AW AMack	15.07.19 22.07.19
7.3	A Proforma for the Terms of Reference for Area Drug and Therapeutics Committees has been received from ADTC Collaborative for Boards to adapt for own use. The ADTC Collaborative and the NHS Borders Terms of Reference were both attached for comparison. ADTC agreed	To be checked fully and updated; ADTC September agenda for	AW KW	04.09.19 04.09.19

	that Non Formulary Requests be included in the remit; include/change our attendance section; PACs included in proforma but not Borders; change C Scott job title to updated title for CP and include Kirsten T job title, who will attend as deputy when CP unable to attend.	noting		
7.4	Melatonin – new licensed indication and letters from NHS Highland & Grampian were discussed. ADTC agreed that the Highland letter should be adapted for use at NHS Borders asking people to continue as they are currently doing.	Update and send letter	AW KW	22.07.19
8.	FOR INFORMATION and NOTING:			
8.1	None			
9.	FEEDBACK from SUB GROUPS			
9.1	Borders Formulary Committee DRAFT Minute from meeting 12 th June 2019	ADTC Noted	AW	
9.2	Antimicrobial Management Team Minute meeting held on 12 th June 2019 – draft unavailable; previous meeting April cancelled.	ADTC Noted	EJ	
9.3	Anticoagulant Committee Minute - Next meeting 19 th July 2019			
9.4	IV Therapy Group DRAFT Minute; 18 th June 2019	ADTC Noted	EJ	
9.5	Tissue Viability Group DRAFT minute; 30 th May 2019	ADTC Noted	MC	
9.6	Wound Formulary Group DRAFT Minute	ADTC Noted	MC	
9.7	Medicines Reconciliation Safety Group – no meeting	ADTC Noted	CP	
9.8	NHS Lothian ADTC; Agenda – 7 th June 2019 and Minute 5 th April 2019.	ADTC Noted	AW	
10.	AOCB			
10.1	NFR Guanfacine; was discussed and approved with all details in NFR database and folder.	Letter to applicant	KW	15.07.19
10.2	Feedback process – to be tightened up and included in ADTC agenda for noting.	Feedback from previous applicants	KW	04.09.19
10.3	LL asked about Cannabis items on NHS Lothian agenda and request that Borders issue a statement on position.	Send 8.1 and 8.2 from Lothian Agenda to LL	KW	12.09.19
Date and time of next meeting: 11th September 2019 at 12:30pm in the Estates Meeting Room.				
Items for future meetings:				