



A Meeting of the **Borders Area Drugs and Therapeutics Committee** held at 12:30pm on
Wednesday, 8th July 2020 via Microsoft Teams
MINUTE

PRESENT: Alison Wilson (Director of Pharmacy) (Chair) (AW); Keith Maclure (Lead Pharmacist – Medicines Utilization & Planning) (KMacl); Adrian Mackenzie (Lead Pharmacist Community) (AMack); Dr Elliot Longworth (GP) (EL); Liz Leitch (Formulary Pharmacist) (LL); Keith Allan (Public Health Consultant); Cathryn Park (Lead Pharmacist – Acute Care & Medicines Governance) (CP); Kate Warner (Minute Secretary) (KW)

Guests: Andy Carter (Director of Workforce & Planning) (AC); Rebecca Edden (Trainee ANP, West Linton Medical Practice) (RE)

1. **Apologies & Announcements:** Dr Nicola Henderson (GP); Dr Gemma Alcorn (Consultant Physician); Andrew Leitch (Lay Member) (AL); Mark Clark (Non Medical Prescribing Lead/Infection Control Lead) (MC); Dr Edward James (Consultant Microbiologist) (EJ)

Item	Situation ; Background ; Assessment	Recommendation	Lead	Timescale
	PRESENTATION - “Recovery and Remobilisation following Covid19 Pandemic” – Andy Carter, Director of Workforce Background information was included in the meeting papers in advance of the presentation. AC gave a high level overview of the remobilisation processes and outlined the next phase of dealing with covid19 and providing care to patients in the Borders. He spoke of the early days of covid19 and commented on other areas local lockdowns and spikes which mean being prepared for any number of permutations for the future. AC outlined NHS Borders plans of a future living with covid19 and the principles around this to protect workforce, embrace technology and retain engagement of staff and patients. Currently we are in Phase 2; heading into Phase 3 at end of July. Key considerations – ongoing planning of additional space, testing, IM&T especially for bandwidth for those working at home, making workforce agile and looking at more secure staffing arrangements for bank staff. AC ran through the planning process for different services. Learning lessons – AC asked for this input today from ADTC. He commented on the Staff Voices project that has reassuringly observed a level of collaboration between staff and services as a positive aspect of recent months and that some staff felt barriers had been broken down and hoped this would continue. Remobilisation plan must take into account winter pressures and the Health Board will learn from the covid process. There is a Board session scheduled for the end of the month and receiving feedback from groups is important. AMack asked if there is a timeline for staff currently working from home being brought back. AC answered that this is complicated – there will be a loosening of shielding in Scotland and there will be close engagement between HR and the Well Being service. Risk assessments for PPE will have to be in place. These conversations will take place during August and September; with staff being able to return with careful planning. Some teams can sustain staff working at home but safe passage back is important. EL asked how much is being shared with public as GPs have daily requests from patients asking when their scan or operation will be. AC replied that he will take this question forward and come back to ADTC by email. AW commented that this was also raised at ACF by primary care colleagues and she reiterated that NHS Borders must aim to retain the goodwill of the public and keep them informed at all stages. KA asked if AC could share the modelling and will email AC after the meeting to request. ADTC thanked AC for the presentation and advance paper which had been interesting and useful.			
2.	Declarations of Interest: None			
3.	DRAFT Minute previous meeting			

3.1	Draft minute from virtual meeting 13 th May 2019 was approved with no changes as an accurate record of the meeting.	Remove draft; upload to Internet/Intranet	KW	09.07.2020
4.	Matters Arising			
4.1	None			
5.	NEW MEDICINE APPLICATIONS:			
5.1	NMA LAT Gel - Applicant: Pharmacy Procurement for Emergency Department (ED); LL spoke to this application (MNA form not available due to time constraints with covid19); the request for use had come from Dr A Bailey, ED consultant for this Lidocaine style gel which has a topical use in anaesthetisation for children in ED. LL had discussed with colleagues in Lothian prior to this meeting; papers include the Anaesthesia web table from Lothian Formulary Committee. NHS Lothian approved under urgent approval for medicines use during covid. LL outlined the use and benefits and Lothian approval was for use in Sick Kids only. ADTC noted that there is adequate peer support to indicate that it is a safe medicine to approve. Unlicensed use, only paediatrics in ED.	ADTC Approved for use for Paediatric use in ED only. Letter to applicant	KW	13.07.2020
6.	PATIENT & MEDICINES SAFETY:			
6.1	Medicines Reconciliation: CP informed there has been no local or national update. No future plan at the moment and this item could be removed from the agenda.	Remove item from future agendas	KW	08.09.2020
7.	CLINICAL POLICIES, PROCEDURES and GUIDELINES for APPROVAL:			
7.1	The paper Guidance for GP Practices and Care Homes Regarding the Supply and Administration Of Anticipatory Care Medicines During COVID-19 was sent to ADTC for comments prior to the meeting and comments made had been incorporated in the version attached. AMack explained that the paper has been adapted from NHS GG&C and Grampian and makes provision in pandemic to hold stock of medicine for the treatment of covid only symptoms. The paper forms part of a suite of support documents for GP practices. Input to the paper was received from Eyemouth Medical Practice based on their recent care home covid experiences; also involved primary care, pharmacy and antimicrobial teams. AMack commented on the section regarding repurposing of medicines – this is a last resort route of supply and would not be usual practice. On page 11 there are options for obtaining anticipatory care medicines and the routes for that. EL asked about the level of input from care homes to the paper and AMack answered that Margaret Purves, a staff member in Pharmacy but previously Operations Manager of SB Cares, and Susie Flower, Chief Nurse for Health & Social Care Partnership, have both been fully involved along with the lead, Dr Sheena Macdonald. Nicky Berry will take the paper to the Care Homes Oversight Group weekly meeting and the Care Inspectorate has been involved at national level. AW commented that the committee have had opportunity to contribute to the document. ADTC approved the paper and thanked AMack for leading the piece of work.	ADTC Approved		
7.2	Medicines Resource Group Terms of reference was tabled with a request for approval for MRG to become a sub group of ADTC. Terms of reference have been updated; including a change to Chair from Director of Pharmacy to Medical Director with Vice Chair to be Director of Pharmacy. The Group was previously accountable to the Clinical Executive (now Joint Clinical Strategy and Executive Group) and this Group is in the process of change again. It was felt that	ADTC Approved Update to MRG	AW	16.09.2020

	MRG, as part of medicine governance, should also come under ADTC as a formal sub group. ADTC approved this request.			
8.	FOR INFORMATION and NOTING:			
8.1	Introduction of a new Vancomycin prescribing, administration and monitoring chart planned for the new FY1 Doctors start this summer; has been adapted by Anne Duguid, Antimicrobial Clinical Pharmacist from NHS GG&C and has been well tested and in use there for several years. This is new in BGH. Implementation to include education of new junior doctors at induction, raising awareness at ward handover meetings and use of the Safety Brief. LL asked about training for prescribers and nurses on wards who will be using the chart. AD has reassured there will be full training and she will be doing this on the wards with pharmacists supporting safe use of the chart. LL requested that bank and agency staff be included in the training and awareness. ADTC welcomed this new chart as long as education is fully in place to support.	ADTC Noted		
8.2	Management of Vitamin D Insufficiency/ Deficiency in Mental Health Inpatients, NHS Borders Update to clinical guideline.	ADTC Noted		
8.3	VTE prophylaxis with Apixaban-orthopaedics limb casts_brace - update to clinical guideline.	ADTC Noted		
8.4	Medication Algorithm Secondary Prevention after TIA Ischaemic Stroke Feb 2020-22 - update to clinical guideline.	ADTC Noted		
8.5	Covid19 Process Change tracker includes any changes made to guidelines during covid19 pandemic and process of change/approval.	ADTC Noted		
8.6	HEPMA Update was given by AW who has been furthering discussion with Head of IM&T, Jackie Stephen. AW has pulled together a business case and the planned next step is to generate support and enthusiasm within NHS Borders. AW is discussing a case study demonstration via Teams with HEPMA user, NHS Ayrshire & Arran. This demonstration would be recorded and available to staff to review and support the HEPMA process. IM&T prioritisation board are sighted on this project and acknowledge that IT time will be required. AW will take this forward with the new Medical Director and update accordingly.	ADTC Noted		
8.7	Guidance for Dexamethasone in the treatment of covid19 along with letter from Scottish Government.	ADTC Noted		
9.	FEEDBACK from SUB GROUPS			
9.1	Borders Formulary Committee DRAFT Minute from meeting 10 th June 2020	ADTC Noted		
9.2	Antimicrobial Management Team Minute; last meeting June 2020 minute not available.			
9.3	Anticoagulant Committee Minute; no recent meeting			
9.4	IV Therapy Group DRAFT Minute; no recent meeting			
9.5	Tissue Viability Steering Group DRAFT minute; no recent meeting			
9.6	Wound Formulary Group – no recent meeting			
9.7	NHS Lothian ADTC Minute – 7 th February 2020	ADTC Noted		
10.	AOCB			
10.1	AW informed that the new SMC Process will be discussed at next Director of Pharmacy meeting. There is a plan to change the process to allow some medicines a quicker route to	ADTC Noted Circulate information	AW	

	cope with the backlog of applications during the pandemic.	after the DOPs meeting	KW	13.07.2020
10.2	ADTC Annual Report 2019-20 tabled for approval and upload to web and inclusion in Pharmacy Annual Report to Clinical Governance Committee.	ADTC Approved Upload / add report	KW	13.07.2020
10.3	NFR for Prucalopride was discussed with discussion and decision saved in NFR folder.	Letter to applicant	KW	10.07.2020
10.4	ADTC discussed the use of Dexamethasone and Remdesivir. LL explained that NHS Borders was part of the recovery trial and outcome that led to use of Dexamethasone. NHSB had received 6 vials of Remdesivir under the EAMS equivalent to half a course of treatment for one patient; supply uncertain. Consultants require a protocol to be put in place for patients, who fit the criteria, to support both medicines support any future use required. ADTC agreed that protocols should be developed. CP commented on the national protocol which is being created for Remdesivir. ADTC discussed and approved a separate Covid19 medicines microsite on Intranet.	ADTC Approved creation of protocols ADTC Approved separate covid19 microsite	LL LL KW	23.07.2020
10.5	AW thanked RE for joining the call and invited her to join BFC meeting, 19 th August at 12:30 via Teams, if this would help with prescribing course Any feedback on the meetings would be welcomed. RE thanked the committee.			
Date and time of next meeting: Wednesday 16th September 2020 at 12:30pm via Microsoft Teams.				