

A Meeting of the **Borders Area Drugs and Therapeutics Committee** held at 12:30pm on Wednesday, 28th July 2021 via Microsoft Teams MINUTE

Present: Alison Wilson (Director of Pharmacy) (Chair) (AW); Dr Ed James (Microbiology Consultant) (EJ); Dr Effie Dearden (DME Consultant) (ED); Keith Maclure (Lead Pharmacist – Medicines Utilization & Planning) (KMacl); Adrian Mackenzie (Lead Pharmacist Community) (AMack); Liz Leitch, Formulary Pharmacist (LL); Rhona Morrison (Medicines Governance & NMP Lead) (RM); Kate Warner (Minute Secretary) (KW)

Guests: Louise Lackie, Oncology Charge Nurse, Macmillan Centre; Dr Elliot Longworth (deputising for Dr Nicola Henderson)

Item	Situation	Background; Assessment	Recommendation	Person	Timescale	
1.	Apologies and Announcements: Dr Nicola Henderson (GP); Andrew Leitch (Lay Member); Keith Allan (Public Health Consultant); Cathryn Park (Lead Pharmacist)					
2.	Declarations of	Declarations of Interest: None				
3.	DRAFT Minute previous meeting					
3.1	Draft minute from with no changes	n 26 th May 2021 meeting was approved as an accurate record of the meeting	Save; upload to internet	KW	02/08/2021	
4.	Matters Arising					
4.1	link http://www.n	C that Borders Joint Formulary has been updated and changed to new public hsborders.scot.nhs.uk/patients-and-visitors/our-services/general-les-and-prescribing/nhs-borders-formulary/; Intranet link will take staff member public website.	ADTC Noted			
5.	NEW MEDICINE APPLICATIONS:					
5.1	None					
6.	PATIENT & MEDICINES SAFETY:					
6.1	each month. In:	TC with the Datix summary report. There are around 20-30 prescription errors sulin errors have decreased significantly and RM will be discussing this further urses. Errors with anticoagulation medication, Warfarin to Apixaban, were e clarified as, since the beginning of the pandemic, it has been NHS Borders	errors report to LL to review and discuss	RM	02/08/2021	
		clinically appropriate patients from Warfarin to Apixaban. RM also reported that		KW	20/09/2021	

	the LearnPro system has seen a bigger uptake and will be used to promote Datix knowledge and use. Shelley Scott has been working on a Controlled Drug module for support workers in LearnPro to decrease errors and ensure a standardised approach in this area. Within the medicines work stream – Alison Foster has been appointed; there will be an August meeting of the Medicines Group. RM suggested that student nurses and new qualified practitioners could spend time shadowing pharmacy staff, particularly the CD process; ADTC supported. This year there are 64 students which may not be feasible for shadowing but RM asked if pharmacy would be interested in doing live team sessions with Q&A afterwards; as a good way to promote pharmacy. There is soon to be a Clinical Educator in place to support students and Kim Smith will submit the live teams' sessions along with her proposal for this post. AW commented on the Thematic Review currently being done around errors and this will be on September ADTC agenda.			
7.	CLINICAL POLICIES, PROCEDURES and GUIDELINES for APPROVAL:			
7.1	NHS Borders Policy for Processing Requests to Prescribe Unlicensed Medicines; Off-label Medicines; Non-Formulary Requests; or Peer Approved Clinical System (PACS) Tier Two Requests; several changes (tracked) as a result of update at BFC; no other changes required.		KW	30/08/2021
7.2	Update to Symptomatic Relief Policy in Adult Patients, generally used in mental health and community hospitals, allowing nursing staff to administer drugs included in policy; LL listed drugs included. A number of changes were requested. 1) Change to #5 use of the symptomatic relief must be "reviewed regularly" – ADTC agreed this should be changed to "reviewed weekly" as good clinical practice. 2) Policy excludes palliative care patients – section to be reworded. 3) In medicines covered #4 Paracetamol and comments regarding sepsis should be removed as ADTC felt this was not necessary here and would be covered by the weekly review. 4) Typo under glycerol suppository. 5) In medicines covered #4 under Senna – ADTC agreed that the review should be an individual clinical review for the patient – to be documented; request for this to be medical review not symptomatic review.		KH/LL	30/08/2021
7.3	Community Hospital Discharge Policy was tabled at Area Pharmaceutical Committee Tuesday 27 th July and a number of changes were suggested which have not been updated in this paper. To be brought back to ADTC in September.	Include in September agenda	KW	20/09/2021
7.4	NHSB Intravenous Flush Policy has been reviewed and updated with changes highlighted. Question why "In the event of patient allergy to Chlorhexidine 2 %, use povidone iodine (10% in aqueous solution) as an alternative cleanser if compatible with equipment (see manufacturer's guidelines)" this has been changed to reflect practice used in Training and Development and updated by Christine Irving – this is included in similar policy.	ADTC Approved Update clinical documents	RM	30/08/2021
7.5	SAPG Protocol for Implementation of Penicillin Allergy De-Labelling in Adult Patients in Acute Hospitals, tabled by EJ, and is included in the Antimicrobial Team (AMT) work plan. This large undertaking with oral penicillin challenge, governance and safety process. ADTC noted that	project	EJ	20/09/2021

	this will be a potential project for AMT to pick up and gave their approval to pursue. There are no timescales as yet; more information is available through the SAPG website. GP representative asked if this was applicable to primary care or only hospital. EJ replied that in the first instance patients would be identified in hospital setting; the process may need to take place in ambulatory settings with equipment in place but likely patients will be in secondary care as trying to pick out patients with repeated courses of antibiotics that are necessary and those with history of penicillin prescribed. ED commented that she had been involved in the	implementation with		
	early trials in NHS Lothian and this had been successful. She advised documenting de- labelling and removal from patient's notes is difficult and that it would be important to review how this could be managed. If hospital initiated then it would be clearly marked on discharge and Practice Pharmacists should pick up and ensure it is in patient notes. ADTC agreed that anything that can be learned from other Boards experiences would be useful and also asked that this information be disseminated to GPs to enable them to review and ask any questions.			
7.6	ADTC reviewed the GPCP guidance documents created by SP3A sub-groups established for this purpose. KMacl outlined the guidance which is an aggregation of best practice from multiple Boards and will be under continuous review and 2-yearly review. NHS Borders will follow this guidance with some minor local amendments; as close to national document as possible. To be used in conjunction with the Unified Prescribing Policy; aim to create a standard prescribing policy across all Practices. The guidance documents have been discussed and approved at Primary Care Prescribing Group.	ADTC approved for local adoption Decision to KMacl (at meeting)		
7.7	NHSB Homecare Annual Report was tabled for approval; there were no comments or changes. AW thanked Fiona Bathgate for her work on this. The report should also be included in MRG agenda for financial implications.	ADTC Approved Decision to FB Include next MRG	KW KW	29/07/2021 20/09/2021
7.8	NHSB Controlled Drug Accountable Officer Annual Report was tabled for approval; there were no comments or changes. AW thanked Shelley Scott) for her work on this.	ADTC Approved Decision to SS	KW	29/07/2021
7.9	ADTC discussed Shared Care Agreement/Guidance responsibility; Clinical Governance send reminders for expiring SCA to formulary pharmacist. ADTC agreed that this should be updated as ownership of SCAs is not with Pharmacy but clinical lead for area of SCA is responsible and any being updated by GPs and Consultants should go first to Clinical Interface Group for approval clinically and then to ADTC for governance approval. AW commented on work of CTAC (Community Treatment and Care Work) and the contractual elements of SCAs with GPs and whether required to go to LNC if outside the payment for enhanced service. This will be picked up by AW with lead for CTAC, Dr Cathy Wilson, and also Dr Tim Young. ADTC also agreed that the SCAs should be available on Intranet/Internet as currently they are only available on RefHelp which not everyone has access to.	Request reminders be updated with clinical governance. Contact lead of CTAC re this topic.	AW	30/08/2021
8.	FOR INFORMATION and NOTING:			
8.1	East Region Formulary update; LL outlined the Chapter Expert Working Groups that will	ADTC Noted		

	commence August-September and ADTC discussed involvement for the committee. Agreed that updated formulary sections will be reviewed by East Region Formulary Committee and then come to ADTC agenda for information and noting. Any escalations or exceptions that this committee needs to be aware of should also be included in ADTC agendas in future.			
8.2	Papers to make ADTC aware of Lyrica (Pregabalin) Litigation – NHSB to supply information from February 2015 to March 2019. Questionnaire is being provided to solicitors this week and any searches required will receive notification as soon as possible.	ADTC Noted		
8.3	EJ spoke to the Antimicrobial Team Work Plan 2021-22 includes green highlighted work for 2021-22 which has carried over from previous year due to workforce issues. RM suggested that Pharmacy students could be involved in audit work, collecting data and agreed to be touch	ADTC Noted Send audit information to RM	EJ	30/08/2021
	regarding this.	Contact Anne Duguid re data collection	RM	30/08/2021
8.4	HIS via ADTCC Safe use of valproate: information gathering. ADTC agreed that Dr A Cotton and Dr D Simpson should review as their teams will initiate valproate. Information to be pulled together and shared.	ADTC Noted Share information as noted	LL KMacl	30/08/2021
8.5	Maternity & Assisted Birth Practitioner PGDs and Midwife Exemptions had been previously approved by ADTC virtually and links were available for noting. Audit information will come from M Davidson.	ADTC Noted		
8.6	HIS Updated advice on use of chloramphenicol eye drops in children under 2 years – to make aware of change; NHS Borders will not be introducing a PGD. Ensure advice has been forwarded.		KW KMacl	02/08/2021 30/08/2021
8.7	14 th June 2021 Update to the guidance on the use of Remdesivir for patients hospitalised with COVID-19 (adults and children aged 12 years and older). Clinical treatment has not changed but changes in exemptions and treatment for patient group outlined for ADTC. Covid patients looked after by Consultant physicians; update on guidance.	ADTC Noted Update Consultant physicians/ ED Update ITU	LL RM	02/08/2021
8.8.	26 th June 2021 MHRA information about revisions to the product information for Moderna and Pfizer/BioNTech COVID-19 vaccines for action as highlighted in the covering letter.	ADTC Noted		
9.	FEEDBACK from SUB GROUPS			•
9.1	Borders Formulary Committee DRAFT Minute – meeting held 23 rd June 2021	ADTC Noted		
9.2	Antimicrobial Management Team DRAFT Action Tracker – meeting held 16 th June 2021	ADTC Noted		
9.3	Anticoagulant Committee DRAFT Minute – no recent meeting			
9.4	IV Therapy Group DRAFT Minute – next meeting September 2021			
9.5	Medicines Homecare Governance Group – meeting held 2 nd June 2021	ADTC Noted		
9.6	Tissue Viability Steering Group – no recent meeting			
9.7	Wound Formulary Group DRAFT Minute – meeting held 27 th May 2021	ADTC Noted		

9.8	NHS Lothian ADTC Minute – last meeting 4 th June 2021 minute unavailable				
10.	AOCB				
10.1	None				
Date and time of next meeting: 22 nd September 2021 at 12:30pm via Microsoft Teams.					