

A Meeting of the **Borders Area Drugs and Therapeutics Committee** held at 12:30pm on **Wednesday, 22nd September 2021 via Microsoft Teams MINUTE**

Present: Alison Wilson, Chair (AW); Dr Nicola Henderson, GP (NH); Adrian Mackenzie, Lead Pharmacist Community Pharmacy (AMck); Rhona Morrison, Medicines Governance Lead (RM); Dr Ed James, Consultant (EJ); Keith Maclure, Lead Pharmacist Medicines Utilisation (KMacl)

Item	Situation	Background; Assessment	Recommendation	Person	Timescale		
1.	Apologies and Announcements: Keith Allan, Public Health Consultant; Liz Leitch, Formulary Pharmacist; Andrew Leitch, Lay Member; Dr Effie Dearden, DME Consultant.						
2.	Declarations of Interest: None						
3.	DRAFT Minute previous meeting						
3.1	Draft minute from	28 th July 2021 meeting was approved as an accurate record of the meeting.	Upload to website	KW	29/11/2021		
4.	Matters Arising						
4.1		tal Discharge Policy – to be brought back after changes requested from APC – at the time of this meeting.	Move to November ADTC Agenda	KW KMacl	15/11/2021		
4.2		matic Review of Medication Errors was to be brought to this meeting for of available at the time of this meeting.	Move to November ADTC Agenda	KW RM	15/11/2021		
5.	NEW MEDICINE APPLICATIONS:						
5.1	Treatment of adu Name: Sarilumab application; Num pandemic; Proje	m McKay and Sweyn Garrioch; Clinical Director: Dr Imogen Hayward; Indication: t patient admitted to ICU / high dependency with COVID19 pneumonia; Generic; Brand Name: Kevzara; Dosage: 400mg as a single dose; Cost: included in per of patients in first year: vary with progression and regression of covid19 cted increase in patients: currently unknown. AW outlined this national erim clinical policy; application from respiratory consultant and ITU consultant.	ADTC Approved for Specialist Use only Letter to applicant	KW	23/09/2021		
6.	PATIENT & MED	CINES SAFETY:		_	_		
6.1	RM provided an	update - there have been no insulin Datix raised since the large uptake on	ADTC Noted this				

	LearnPro module on insulin. RM now reviewing the requirement for other modules on LearnPro for area that there are a high number of Datix recorded. There continues to be Datix regarding controlled drugs and RM will work on module to address this. Medicines Governance – recent presentation on reducing missed doses at Grand Round has resulted in review of this in medical wards particularly patients who are nil by mouth. Dr P Neary has expressed an interest in time critical medicines and reducing missed does in medical areas and will work on this with RM. Also discussed Datix regarding drug not being available when it often is – reviewing the reasons for this now.	update		
7. 7.1	CLINICAL POLICIES, PROCEDURES and GUIDELINES for APPROVAL: Prescribing Administration of Topical Morphine Guideline; prepared by Morag Herkes, Pharmacist; reviewed by Michelle Scott, Palliative Care Consultant Nurse. ADTC discussed the guideline and noted that the guideline states specialist use only but is also used in primary care for palliative care – prescribed by GPs and experience district nurses. GP agreed that it was not common for them to prescribe and cited circumstances when they would. Question arose of if it needs to always be senior specialist palliative care input? Using outside a non-palliative care setting was also discussed and request for Tissue Viability group to be asked if they would use for other wounds. AMack asked if there are any commercially produced compounds as, looking at costs, there may be an alternative source produced in manufacturing unit with improved sterility. ADTC agreed that the guideline should be approved with change to the "review by senior palliative care" to be "in discussion with senior palliative care team".	ADTC Approved for Specialist Use only With change to wording as in note. Email to Michele Scott	KW obo AW	23/09/2021
7.2	Updated Guideline for the use of Amiodarone has been reviewed from medical perspective by Dr P Neary and Gillian Donaldson Lead Cardiac Specialist Nurse following a Datix showing the guideline had expired. The guideline required no changes. ADTC approved the reviewed guideline to have new approval date September 2021 to September 2023.	ADTC Approved KW inform authors and f/wd to CGov for upload to web	KW	23/09/2021
8.1	FOR INFORMATION and NOTING: AW updated ADTC on the progress of East Region Formulary. Memberships have been proposed for two groups — East Regional Formulary Committee and East Regional Formulary Working group. The Chapter Expert Working Group will be experts in the area being discussed. Terms of reference were included for noting. Progress is being made and around 6 chapters have been reviewed. First meeting of ERF committee is next week. Chair of committee is split across the three regions with each current Formulary chair chairing three meetings or six months each; starting with Lothian. Admin support will follow chair. Currently there is no new medicines application process in place and this will continue to be local — Borders Formulary Committee will meet in October (and possibly December) to discuss applications in pipeline. Future new medicines applications will go to East Regional Formulary Committee. Non formulary and individual patient requests will continue to be approved locally. NH has been involved in the chapter expert groups and reported that these are interesting, a huge undertaking and may	ADTC Noted		

	•	g when the formulary group meet. AW thanked NH and others involved in supporting				
8.2	ADTCC. Any	dicines Procurement Update from NHS National Services Scotland; forwarded by off patent and efficiency work can be picked up. KMacl commented on parallel trade on final page which we may start to see coming through BGH in contracts; prices are	ADTC Noted Raise awareness in wards of parallel import products	KMacl	30/09/2021	
8.3	Covid Therap	eutic Alert – Palivizumab	ADTC Noted			
8.4	crisis in adult	on Steroid Emergency Card to support early recognition and treatment of adrenal s. NHS Borders have received in Pharmacy and Endocrinology departments. Dr R ill pick up with pharmacy and roll out cards. GPs and Community Pharmacists will	ADTC Noted			
9.	FEEDBACK from SUB GROUPS					
9.1	Borders Form	ulary Committee DRAFT Minute – meeting held 25 th August 2021	ADTC Noted			
9.2		Management Team DRAFT Action Tracker – meeting held 18 th August 2021. EJ C on move from formal minutes to action tracker; updated work plan and on-going .	ADTC Noted			
9.3		: Committee DRAFT Minute – no recent meeting				
9.4	IV Therapy Group DRAFT Minute – meeting held 8 th September 2021. RM updated ADTC on the request from Caroline Burgess that we look at how we could support IV fluids in community hospitals. Nurses are IV trained and a number of them use skill regularly as work in BGH nurse bank. GP commented that GPs run the community hospitals and this would have an impact on GPs – must ensure that this proposal goes through the appropriate channels of discussion before it gets too far. EJ commented on IV antibiotics use in a community hospital setting and the oversight that this would require from his team. This is in early stages of discussion and RM plans to discuss with the ANP at Duns about how they work at the Knoll and how this differs to other community hospitals and infusion rooms. RM will review and come back to the appropriate groups if further discussion required.					
9.5	Tissue Viability Steering Group – no recent meeting					
9.6	Wound Formulary Group DRAFT Minute – meeting held 26 th August 2021		ADTC Noted			
9.7	NHS Lothian ADTC Minute – meeting held 4 th June 2021.		ADTC Noted			
10.	AOCB			1	T	
10.1	Covid drug process	EJ asked about the clinical review for therapeutics, such as Sarilumab, for Covid. AW replied that LL has picked this up and liaises with Dr Anne Scott and ITU clinicians depending on the area to review and recommend where appropriate.				
Date a	and time of ne	ext meeting: Wednesday 24 th November 2021 at 12:30pm via Microsoft Teams.	1	ı	•	