

A Meeting of the **Borders Area Drugs and Therapeutics Committee** held at 12:30pm on Wednesday, 27th September 2023 via Microsoft Teams MINUTE

Join Microsoft Teams Meeting

Present: Dr Kevin Buchan (Chair ADTC and GP); Alison Wilson, Director of Pharmacy (AW); Liz Leitch, Formulary Pharmacist (LL); Dr Effie Dearden, DME Consultant; Dr Nicola Henderson, GP (NH); Dr Ed James, Consultant Microbiologist (EJ); Malcolm Clubb, Lead Pharmacist Community Pharmacy (MC); Cathryn Park, Senior Clinical Pharmacist (CP); Keith Maclure, Lead Pharmacist (KMacl); Rebecca Devine, Public Health Consultant (deputising for Dr Sohail Bhatti); Rhona Morrison, Medicines Governance/NMP Lead (RM); Kate Warner, Meeting Administrator (KW) **Guest**: Alex Mundell, Clinical Pharmacist NHS Borders.

Item	Situation; Background; Assessment	Recommendati	Lead	Timescale
		on		
1.	Welcome and Announcements:			
	Apologies:			
2.	Declarations of Interest: None			
3.	DRAFT Minute previous meeting			
3.1	Draft minute from 26 th July 2023 meeting was approved with no changes as an accurate record of	Upload to	KW	02/10/2023
	the meeting.	intranet/internet.		
4.	Matters Arising			
4.1	Steroid Safety Bundle had been reviewed at previous ADTC meeting; questions were raised, and	ADTC Approved	LL	
	responses received from Dr R Williamson. 1. RW working with MC on the sustainable supply and	with information		
	using cards in hand. 2. Updates made as requested for bone protection. 3. It was agreed good to	added in and		
	have secondary care supply option for BGH if required; either route is fine. 4. Moderate risk group	circulated by		
	has been updated. Blood pressure monitoring – hypertension monitoring due to long-term steroid	email		
	use has been added; it was commented that follow up visits for BP monitoring can be more crucial	NH to email RW		
	that at commencement. This information will be included in education sessions. Monitoring of	and move		
	patients face to face was discussed including blood pressure checks and this is a new requirement	forward		
	included in the steroid safety bundle. ADTC asked that RW advises a review period for BP checks			

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	of 3-6 months of commencing therapy and at review checklist of monitoring to be done - rather			
	than only discussing at education sessions.			
4.2	Instilagel PGD and change log – no changes required other than minor date/contact. Mr B Thomas	ADTC Noted		
	has reviewed since coming for extension at previous ADTC meeting and the PGD has been			
	updated on intranet.			
5.	NEW MEDICINE APPLICATIONS / NON FORMULARY REQUESTS:			
5.1	NFR Panel decisions made since last ADTC meeting: IVIG June 2023; Botulinum Toxin Type A x 2	ADTC Noted		
	applications July 2023; IVIG x 2 applications August 2023. Including 3 for IVIG grey use which goes			
	through an approved NFR process for grey indications. All in line with process. It was agreed that at			
	future meetings all recent NFRs should be reviewed and any requiring more discussion at ADTC			
	will be highlighted.			
6.	PATIENT & MEDICINES SAFETY:			
6.1	Patient and Medicines Safety Update - Datix Medication Error report to August 2023. This most	ADTC Noted		
	recent report shows 122 errors reported since July ADTC occurring in areas as expected. The			
	report highlights where support is required. It was suggested that a 6 monthly report could compare	Add to Clinical	KB	31/10/2023
	trends and identify areas for learning and reviewing severity change. ADTC medicines governance	Governance		
	has an interest in this and as ADTC Chair is Chair of ACF and a non-executive of Board this gives	Committee –		
	voice to any items to raise or escalate to the Board. More frequent reporting to Clinical Governance	Laura Jones		
	Committee was also suggested with perhaps a 6-month summary. At a recent pharmacy practice			
	meeting the number of datixes was discussed and this has resulted in a spike in numbers reported.			
	ADTC noted that Datix system is not easy or intuitive to use but that reporting was important to			
	continue in community as themes coming through from discharges are important.			
7.	CLINICAL POLICIES, PROCEDURES and GUIDELINES for APPROVAL:			
7.1	NHS Borders Thematic Review 01/01/2019 - 31/12/2022 was tabled for review. This looked at	ADTC Approved		
	themes in the year pre-covid, covid years and then after covid – a four-year block. Each service can			
	look at their own specific area. Then each area is broken down into years. There is an increase but	Distribute and	RM	25/10/2023
	not considered significant. Vaccination now has its own area in the report but previously was across	share with		
	all areas and so there is a difference in errors. Reporting focuses on major and extreme; but it was	colleagues as		
	thought that minor and negligible should also be reviewed and addressed. Community errors are	appropriate.		
	more difficult to analyse when not knowing the boundaries and staff numbers in each team and so			
	on. The idea is to focus on the next couple of years and what we should be doing with new staff			
	and staff turnovers. It was suggested that this should go to Clinical Governance Committee more			
	frequently as updates. This review could be shared with colleagues in other Boards and look at			
	their data as comparison; NHS D&G would be a useful comparison. It was noted that spikes can be			
	a result of the number of clinicians in an area - it is a useful conversation facilitator but caution in			
	comparisons. HEPMA was discussed - this has been raised with the Minister at Annual Review			
	and subsequent conversations with the Chief Executive and Chair.			

7.2	NHS Borders Non-Medical Prescribing Policy update was tabled with amendments complete after July 2023 meeting. There is an increase in the number of NMPs and this included new prescribers, also some minor amendments. ADTC heard that NMPs can come off the database temporarily and be on a standby list if they are not currently prescribing. Prescribers are good at updating their record information. CPD was commented on – this has been difficult to organise of late and it is hoped that this will get re-started as soon as possible.	ADTC Approved		
7.3	ADTC reviewed the Ward based pharmacy roles and update to medicines code which is as a result of funding received in acute to develop a ward pharmacy service. There has been a pilot test of change looking at how pharmacy can support drug rounds and facilitate discharge in MAU. Pharmacy Technicians are supporting the preparation of IV drugs for drug round, and this releases nurse time for checking. Some pharmacy staff have aseptic training and are familiar with this; others will be trained. Bespoke training of IV PCV insertions is available through bespoke learn pro courses, study day covering all checking. Data gathering is being done in Ward 7 around IVs; pharmacy technicians cannot administer but act as checkers and can prepare. Nurses are released to administer and do second check which is a requirement.			
7.4	Non-Formulary Request Panel Terms of Reference; Non-Formulary Request Form (updated in line with PACST2 form); Open and Transparent Decision Making in Medicines Governance; Decision Making Checklist for NFR and PACST2 Panels. ADTC reviewed these papers which are required after the change from Borders Formulary Committee to East Region Formulary and the requirement for Non-Formulary Requests to be approved locally in a separate Panel with terms of reference. The form is an adaptation of the PACS T2 national form currently in use for those decisions, the decision checklist and decision-making documents are also national and used in the PACS T2 panel meetings. ADTC agreed that PACS T2 Panel and NFR Panel could be merged and dealt with at the same meeting the current date is set at monthly on 4 th Wednesday of month.	ADTC Approved Update to reflect decision to merge PACST2 and NFR Panel in TOR?	KW	16/10/2023
7.5	ADTC discussed the proposal for NHS Borders analgesic prescribing compliance with ERF. With the move to East Region Formulary some medications have become non formulary. This has been discussed at ADTC, with Primary Care Prescribing Group, the Pain Team and Emergency Department/BUCC Team to share thoughts on non-formulary status. It was suggested that prescribers when initiating should not be asked to complete and NFR but are asked to consider formulary alternatives and include a treatment plan with reason for initiation and plans for review. This information would be included in discharge documentation from secondary care and documented in patient notes in primary care. Emergency Department and BUCC requested short term use of 8/500 with no NFR for prescribing; no one from these teams were part of the decision to remove from formulary. It was agreed that Primary and Secondary Care should audit the use of Pregabalin and Co-codamol 8/500 and monitor use – with future reduction in use long term being the aim. Tramadol was not included in the discussions as it is part of the peri operative analgesic pathway. There may be a similar monitoring approach to the use of Tramadol. Monitoring of data	ADTC Approved ADTC to agree plans to implement/take this forward and review progress	ALL	Future agenda

	can be done through primary care prescribing for these products over time. ADTC agreed with the approach and approved this paper.			
7.6	NHS Borders Joint Prescribing Formulary for Adults Abbreviated Drug List updated September 2023, based now on East Region Formulary, is a Borders specific document. The chart summarises common prescribing in different therapeutic areas, and it is used in supporting prescribing especially with new prescribers to Borders. Updates were highlighted. ADTC agreed that this was a helpful reference for, especially junior doctors. Request to remove the word inpatient leaving just post-op for Tramadol.	with change to wording at Tramadol	LL	28/09/2023
7.7	Guidance for the administration of Infliximab (Remsima brand) for ADULTS within Gastroenterology and Rheumatology Services & Prescription was discussed; the guidance brings NHS Borders in line with other health boards and reduces waste.	ADTC Approved		
8.	FOR INFORMATION and NOTING:		l	
8.1	East Region Formulary updates 1 ERF Committee minute – 9 th August 2023; 2 ERWG minute – 19 th July 2023; 3 ERF Update – August 2023 newsletter; 4 ERF Chapter updates at NHS Borders Formulary (scot.nhs.uk)	ADTC Noted		
8.2	NHS Pharmacy First Scotland Approved List of Products; MC commented on some key updates.	ADTC Noted		
8.3	Borders Joint Formulary to East Region Formulary – main changes and abbreviated – no updates to review.	November ADTC	KW	14/11/2023
8.4	NHS Borders Homecare Annual Report was available for review. There are around 100 new patients per annum coming through homecare which comes with a huge amount of additional work – invoicing and other manual checks. Pharmacy is reviewing a more electronic method with a business case being written by K Harvey to take to Finance. Also risk register hold in terms of our database.	ADTC Noted		
8.5	ADTC Collaborative Newsletter – September 2023	ADTC Noted		
8.6	MHRA DSU - July and August 2023	ADTC Noted		
8.7	SCOTCAP – PSS Clinical Guideline update – May 2023. Request to check this is most up to date; agreed to sign off the most recent as other people prescribe on our behalf. CP to report back to ADTC.	To check report back.	СР	
9.	FEEDBACK from SUB GROUPS			
9.1	Anticoagulation Committee minute from meeting held 4 th September 2023. RM – change on agenda not LL Not quorate at emceeing and we managed to go back to some issues with urology and plan to discuss further with me Thomas.	ADTC Noted		
9.2	Antimicrobial Management Team meeting 19 th July 2023. Workplan has been completed for the	ADTC Noted		

	year and will come to ADTC to be approved. November ADTC is the same week as Antibiotic			
	Awareness Week; there will be further communications about being involved in this. RD offered to			
	be involved on behalf of Public Health and EJ will include in communications.			
9.3	Controlled Drug Governance Team – meet every 6 weeks; verbal update as required.	ADTC Noted		
9.4	IV Therapy Group minute from meeting held 6 th September 2023	ADTC Noted		
9.5	Medicines Resource Group – next meeting 27th September 2023			
9.6	Non-Medical Prescribing Group – no recent meeting			
9.7	Tissue Viability Steering Group – no recent minute/meeting. Wound Formulary Group met recently and through work of ERF and with formulary pharmacist, the Borders Wound Formulary will be relaunched with streamlined dressings to bring back formulary adherence. Tissue Viability team are working on sessions September and November. The formulary will come to ADTC November meeting.			
9.8	NHS Lothian ADTC minute from meeting held 2 nd June 2023.	ADTC Noted		
10.	AOCB			
10.1	None			
Date a	Date and time of next meeting: Wednesday 22 nd November 2023 at 12:30pm via Microsoft Teams.			
Items expected for future Agendas – Adult Patient Controlled Analgesia (PCA) Pathway (S Smith); Unlicensed Medicines Approval Process/Policy – update to current version (November 2023); NHS Borders Guideline on NHS Care and Private Treatment (November 2023)				