



A Meeting of the **Borders Area Drugs and Therapeutics Committee** held at 12:30pm on **Wednesday, 24<sup>th</sup> January 2024** via **Microsoft Teams**

**MINUTE**

Item	Situation; Background; Assessment	Recommendation	Lead	Timescale
1.	<p><b>Welcome and Announcements:</b></p> <p><b>Present:</b> Dr Kevin Buchan (Chair ADTC and GP); Dr Ed James, Consultant Microbiologist (EJ); Malcolm Clubb, Lead Pharmacist Community Pharmacy (MC); Keith Maclure, Lead Pharmacist (KMacl); Dr Nicola Henderson, GP; Cathryn Park, Senior Clinical Pharmacist (CP); Rhona Morrison, Medicines Governance/NMP Lead (RM); Kyna Harvey, Clinical Pharmacist (KH); Kate Warner, Meeting Administrator (KW)</p> <p>MC welcomed new member Kyna Harvey, Clinical Pharmacist, BGH Pharmacy.</p> <p><b>Guest:</b> Alex Mundell, Clinical Pharmacist (item 7.2); (item 7.4 and 7.5)</p> <p><b>Apologies:</b> Dr Effie Dearden, DME Consultant (ED)</p>			
2.	<p><b>Declarations of Interest:</b> None</p>			
3.	<p><b>DRAFT Minute previous meeting</b></p>			
3.1	<p>Draft minute from 22<sup>nd</sup> November 2023 meeting was approved as an accurate record of the meeting and will be uploaded to the intranet/internet as appropriate.</p>	<p>Remove draft; upload</p>	<p>KW</p>	<p>29/01/2024</p>
4.	<p><b>Matters Arising</b></p>			
4.1	<p>Lay Member – A Leitch is keen to continue, and forms have been resent for him to complete; he will be included in future meetings when forms are accepted by Public Involvement Team.</p>			
5.	<p><b>NEW MEDICINE APPLICATIONS / NON-FORMULARY REQUESTS:</b></p>			
5.1	<p>NFR Panel decisions made since last ADTC meeting were ratified by ADTC. MC commented on feedback from Althea application which is to be continued for another 3 months. Dabigatran – applicant has been asked to resubmit and give additional evidence as well as details of cessation of patient treatment; Anti-Coagulation Committee have been asked to consider guidance for patients</p>	<p>ADTC ratified decisions and noted this update.</p>		

	with failure to Apixaban.			
<b>6.</b>	<b>PATIENT &amp; MEDICINES SAFETY:</b>			
6.1	Patient and Medicines Safety Update – Datix Medication Error report to January 2024; adverse Events report to January 2024. ADTC reviewed the reports. The pharmacy datix team meets weekly to review and react to errors; majority are in an acute setting. A tool is being developed to review medication errors, ownership, and accountability of missed medication and errors; this will be a scoring system and will include escalation of errors on time critical medications; controlled drugs and missed. unaccounted for. It is expected that this will raise the profile of incidents and reduce errors. A new Medicines Governance Group has been set up with Dr Jamie Young as Chair. Clinical Directors have been asked to identify staff to sit on this Group; nursing staff have been approached and there would be value in GPs attendance if required – most errors in practice are from discharge process. It is planned that the medication error and adverse events will be reviewed by this group and then any plans/actions will be included in ADTC agenda for noting. GP representative asked if practices could receive information about lessons learned from clinical teams. Mental health has a newsletter that covers this and acute could do similar.	ADTC noted this update.		
<b>7.</b>	<b>CLINICAL POLICIES, PROCEDURES and GUIDELINES for APPROVAL:</b>			
7.1	Second Checking of Controlled Drugs in Community Hospitals and Mental Health Units policy was discussed. Community hospital staffing, including night shift staff, was outlined. A HCSW LearnPro module for this has been put together by Shelley Scott. Escalation to BUCC was confirmed as well as consultation with nursing staff. One registered nurse on night shift and two during day; HCSWs would be trained and supported but it would not become the norm for them. Pharmacy asked for an addition to the paper – on call pharmacists must be able to see the Kardex or paperwork for syringe driver checks, can it be added that this is for on call BUCC team.	ADTC Approved with addition as noted. Contact mental health areas to check procedure.	RM  RM	31/01/2024  31/01/2024
7.2	Alex Mundell, Clinical Pharmacist, spoke to the NHS Borders TPN Guideline – BGH Parenteral Nutrition Guidelines; drafted to clarify the roles of each member of MDTs responsibility within TPN and prescribing of it. AM outlined the review of TPN, control routes appropriate and processes in place. AM commented on the support documentation for pre-filled ready-made bags for aseptic unit for wards; monitoring is on the reverse of document. This supports nurses to ensure that all correct checks are done before hanging; a governance measure signature that task is done. It was noted that the pharmacist is still responsible for the stability of the bag even on the sourced ready-made bags and to ensure the right stock is in. It was asked if the organisational responsibility of infection control team had been agreed with the team. There is historical guidance available noting this; EJ will inform the team and come back with any queries.	ADTC Approved. Check with infection control team	EJ	31/01/2024
7.3	ADTC reviewed the NHS Borders Formulary - Oral Nutritional Supplements update which had minor changes, all tracked, and a change for one product of Fortisip Cal to Protein. Supply route of sip feeds is being changed from current GP prescribing to Stores; this will be dietician supply and not GP in future. Full guidance will also come to ADTC for approval at a future meeting. Enteral	ADTC approved. Update policy date and caveat regarding ERF	KMacl	31/01/2024

	feed prescribing was discussed, and it was recommended that a reminder be included in Scriptswitch. The need for dieticians to readjust workforce to implement change along with communications would be on-going. ADTC heard that the ERF choices had been difficult to combine from all the Boards and it had been agreed that individual Boards would work on their own formulary until such times as they could work towards a regional formulary in this area.	future changes.		
7.4	ADTC discussed the SBAR outlining the preparation required in NHS Borders to meet upcoming regulatory measures for oversight of prescribing of Valproate to new patients and existing female patients, along with the Draft Policy. The new MHRA advice was reviewed, included in item 8.3. A new review governance group for Valproate is to be appointed and this would have to be led by an Associate Medical Director and include clinicians from different clinical areas. This is one of the stipulations of the new regulations. Psychiatric AMD or Neurology/Paediatrics were suggested, and Dr A Cotton will be approached.	ADTC Approved. Discuss with Dr A Cotton.	KH	31/01/2024
7.5	ADTC discussed the review of Non formulary request paperwork and policy which included an SBAR; updated Non-Formulary Request form – adapted from NHS Lothian form; NHS Borders policy for accessing medicines not available on ERF; and updated Terms of Reference for NFR Panel with tracked changes and comments included for ADTC to review changes. It was agreed that the Non-Formulary Request form should include the options for prescribing - Specialist Use Only, Specialist Initiation, GP Prescribing.	ADTC Approved; with inclusion on form as noted.	KH	31/01/2024
<b>8.</b>	<b>FOR INFORMATION and NOTING:</b>			
8.1	Paramedic Exemptions SBAR and the impact of recent changes in legislation for NHS Borders. Paramedics were not previously able to prescribe controlled drugs; five drugs have been passed and more will be added in future. SAS have non-medical prescribing leads and we also have an Independent Prescriber - Advanced Paramedic in BGH who has been included in the review. As they add these into their formulary, they will be monitored. This is not new practice for them as they currently use PGDs.	ADTC noted		
8.2	ADTC Collaborative Newsletter – November 2023	ADTC noted		
8.3	National Safety Alerts – Valproate was issued and forward to Drug Alerts distribution list – December 2023. This is the alert was discussed above in SBAR and patient safety alerts highlighted by MC. Facilitation for patients has been reviewed and will be a central solution without the requirement for involvement of general practice.	ADTC noted		
<b>9.</b>	<b>FEEDBACK from SUBGROUPS</b>			
9.1	Anticoagulation Committee meeting 4 <sup>th</sup> December 2023. A policy has been developed for endoscopy procedures which may have a further amendment after reviewing national guidelines. Working with training and development on Dalteparin missed doses.	ADTC noted		
9.2	Antimicrobial Management Team meeting 15 <sup>th</sup> November 2023	ADTC noted		
9.3	IV Therapy Group minute from meeting held 10 <sup>th</sup> January 2023; changes are being made to use of	ADTC noted		

	pre-made flushes for PVCs and this will be brought to an ADTC meeting.			
9.4	Medicines Resource Group – next meeting 24 <sup>th</sup> January 2024			
9.5	Non-Medical Prescribing Group – a Teams channel has been in place for some time as a replacement to this Group and this is working well. Acute and Community education sessions to replace the face-to-face sessions in the past are also delivered through teams.	ADTC noted; remove from agenda.		
9.6	Tissue Viability Steering Group – no recent minute/meeting. Tissue Viability Specialist Nurse has been liaising with East Region Formulary and will bring anything new to the Group; NFRs go through TV specialist nurse and only go to Group where appropriate.	ADTC noted; remove from agenda.		
9.7	East Region Formulary Committee minute – 13 <sup>th</sup> December 2023 and East Region Working Group minute – 22 <sup>nd</sup> November 2023	ADTC noted		
9.8	NHS Lothian ADTC minute from meeting held 6 <sup>th</sup> October 2023	ADTC noted		
<b>10.</b>	<b>AOCB</b>			
10.1	To further strengthen the links between SMC and Health Boards, Dr Scott Muir, SMC Chair and Dr Yvonne Semple, Chief Pharmaceutical Adviser are planning to visit ADTCs around Scotland to update committees on the work of SMC, enable discussion around issues of common interest and receive feedback on how SMC can further collaborate with ADTCs. They have requested a 20-minute time slot on ADTC agenda to provide a presentation followed by discussion with your members. ADTC agreed that this would be welcomed, and KW will give dates. ADTC asked for information about their expectations before discussion.	Arrange visit for future ADTC.	KW	31/01/2024
10.2	Carbomer eye product being included on Scriptswitch was discussed as a result of patient safety alert noted earlier. It was agreed that clarification on the alert should be sought (MC) and decide if switch is required. ADTC also asked if this could be discussed with respiratory (KH) and critical care to take out of stock cupboard (RM) once information is clearer.	Clarity on Carbomer alert; followed by other actions if required.	MC	31/01/2024
<b>Date and time of next meeting: Wednesday 27<sup>th</sup> March 2024 at 12:30pm via Microsoft Teams.</b>				
<b>Items expected for future Agendas –</b>				
March 2024 - <b>Delegation of medicine administration by non-reg practitioners Band 4</b> (Rhona Morrison)				
March 2024 - <b>NHS Borders Guideline on NHS Care and Private Treatment</b> (Rebecca Devine/Kirsty Kiln)				