

A Meeting of the **Borders Area Drugs and Therapeutics Committee** held at 12:30pm on  
**Wednesday, 28 MAY 2025 via Microsoft Teams**  
**MINUTE**



**Guests:**

Item	Situation; Background; Assessment	Recommendation	Lead Timescale
1.	<b>Welcome and Announcements:</b>  <b>Present:</b> Malcolm Clubb, Director of Pharmacy (MC); Dr Rebecca Devine, Public Health Consultant (RD); Dr Edward James, Consultant Microbiologist (EJ); Dr Elliot Longworth, GP (EL); Keith Maclure, Lead Pharmacist – Medicines & Utilization (KMacl); Rhona Morrison, Medicines Governance and Non-Medical Prescribing Lead (RM); Kirsten Thomson, Lead Clinical Pharmacist (KT); n Park, Deputy Director of Pharmacy (CP); Kate Warner, Meeting Administrator (KW).  <b>Guests:</b> Ségdæ Richardson-Read, Advanced Clinical Pharmacist (SR-R); <b>Observing:</b> Julie Read, Cancer Clinical Nurse Specialist, Macmillan Centre; Rebecca Bell, Colorectal/HPB/Upper GI/Stoma Clinical Nurse Specialist, Macmillan Centre  <b>Apologies:</b> Dr Nicola Henderson, GP; Dr Sohail Bhatti, Director of Public Health; Andrew Leitch, Lay-member.		
1.1	<b>Declarations of Interest:</b>		
2.	<b>DRAFT Minute previous meeting</b>		
2.1	Draft minute from 26 March 2025 meeting was approved as an accurate record of the meeting; with update on items previously approved. Minute will be uploaded to public webpages for ADTC.	ADTC Approved; remove draft and upload.	KW 03/06/2025
3.	<b>Matters Arising</b>		
3.1	Updated ADTC Terms of Reference, including updated reporting structure diagram.	ADTC Noted	
4.	<b>NEW MEDICINE APPLICATIONS / NON-FORMULARY REQUESTS:</b>		
4.1	NFR Panel decisions – spreadsheet including feedback.	ADTC Noted	
5.	<b>PATIENT &amp; MEDICINES SAFETY:</b>		
5.1	Patient and Medicines Safety Update – 134 reported medication adverse events on InPhase from 24/03/25 -19/05/24. There has been an increase in events between April 2024 and 2025; these have been reviewed and discussed internally with education planned for nursing staff. Process of medicines administration was discussed at Medicines Governance and Safety Group with nurses being asked to	ADTC Noted	

	follow the process which may result in drug rounds taking longer. An update will come back to ADTC.		
<b>6.</b>	<b>CLINICAL POLICIES, PROCEDURES and GUIDELINES for APPROVAL:</b>		
6.1a	ADTC reviewed the CAMHS Symptomatic Relief Policy, new and adapted from the adult SRP currently in use for MH inpatients. This was developed as we have had a few more instances of CAMHS patients being admitted to Huntlyburn/Paediatrics due to lack of beds in the YPU in Lothian. This allows nursing staff, like the adult SRP, to administer medicines for simple analgesia, allergies, etc within in defined circumstances – very restricted. Done once, to save a medic prescribing. If more than once is required then a medic would review. The policy has been reviewed by mental health inpatient nurses as well as CAMHS consultant psychiatrists. There has been a small increase in patients being admitted and may require more regular under 18s in Huntlyburn where this is covered by prescribers available. In adult mental health there are less prescribers, and the policy would assist nurses. Medications and formulations have been reviewed and reduced where appropriate. This will not be used in ward 15 and ADTC asked that this be added to the policy. A change in dosage was requested and will be updated. ADTC also requested that reference to Hypromellose eyedrops be removed as this is not a straightforward solution, paediatric patients may require review. Also to be removed is the use of simple linctus along with removal from adult SRP.	ADTC Approved with changes requested. Update and forward to clinical governance. Email to author.	SR-R 29/05/2025 KW 29/05/2025
6.1b	ADTC reviewed the guideline for use of zuclopenthixol acetate (Accuphase), new guidance which covers the use and administration of Accuphase, in appropriate circumstances, in adult mental health inpatients. This has been reviewed by both inpatient mental health nurses and consultant psychiatrists. SR-R explained the cases used in mental health under consultant direction and its limited use; when it would be given and principles of prescribing and monitoring are included in the guideline. ADTC commented on typo on page 1 in summary it is not quick acting; asked for the inclusion of Procyclidine to be made clearer as this is an important part; asked that the monitoring time for nurses should be prescriptive/clearly identified as two hourly unless instructed otherwise by consultant or prescriber. ADTC approved the guideline with the recommended changes.	ADTC Approved with changes requested. Update and forward to clinical governance. Email to author.	SR-R 29/05/2025 KW 29/05/2025
6.1c	ADTC discussed the document submitted by the Mental Health Pharmacy Special Interest Group (SIG) to the national Directors of Pharmacy meeting, about getting support, in principle, to adopt "once for Scotland" policies for Mental Health. The paper suggests examples of guidance for: use of high dose antipsychotics, management of acute behavioural disturbance, physical health monitoring, management of EPSEs, and clozapine re-titration guidance. The SIG seeks support from local medicines governance groups in each Board first, and then as guidance is developed via the SIG (which we currently participate in), then it can be determined if there is scope, and appetite, for local adoption. SR-R commented on areas to be reviewed and standardised documents. ADTC discussed the process of getting agreement from multiple boards and that using the centre for sustainable delivery would be an option for centralising. ADTC supported this review.	ADTC Approved. Take forward by SIG.	SR-R

6.2	ADTC reviewed the updated Antipsychotic Depot & Long-acting injections guideline which includes changes primarily in the sections on what brands of each product are available and also in the section about how depots are ordered as this process is different from when the guideline was first developed. Track changes were included for review, and this is available in RDS format. ADTC approved and asked that the link to non-formulary request process and form on intranet be included.	ADTC Approved Email author Include link to NFR form and process.	KW KW 03/06/2025
6.3	ADTC reviewed the updated Administration of Mantoux Test Patient Specific Direction Supporting Guidance. Page 8 actions for follow up arrangement was discussed; also included on next page in Green Book comment. It was agreed this could be left as it is and ADTC approved.	ADTC Approved Email author J Madden/MC	KW 29/05/2025
6.4	Paediatric Enteral Tube Feeding Guidelines was reviewed; comments were raised about some of the content, anti-fungal and others that ADTC were unsure was required but were content to leave in. EJ commented that he would like time to review further with infection control and antimicrobial. ADTC agreed that EJ would review over the next two weeks and discuss any recommendations with author before it is approved by ADTC.	ADTC Approved to be reviewed further by EJ Email author A Gillies	KW 29/05/2025
6.5	ADTC reviewed the Private Public Policy which has been updated along with the accompanying Health Inequality Impact Assessment (HIIA). RD spoke to this paper, which was co-authored by KMacI and MC and has been to GP Subgroup and Area Medical Committee for approval before coming to ADTC. After this it will go to the Board for final approval. National and territorial policies were reviewed along with flowchart. The HIIA confirms this policy does not offer advantages to any particular group. GP representative commented that this policy will be helpful to general practice.	ADTC Approved policy to go to NHS Borders Board for approval. Email author – R Devine	RD 03/06/2025 KW 03/06/2025
6.6	NHS Borders Accountable Officer Controlled Drugs Governance Report 2024-25 to report on the safe and secure use of controlled drugs within NHS Borders during that time. There is some data unavailable at the time of the meeting which will be added in and circulated as soon as available. ADTC approved the report and when it is complete with data will be emailed to all for any additional comments.	ADTC Approved as seen - with inclusion of data to follow. Email authors – F Fealy; S Shelley	KW 03/06/2025
6.7	NHS Borders Area Drug and Therapeutics Committee Annual Report 2024-25 was reviewed and approved.	ADTC Approved Email author – MC	KW 03/06/2025
6.8	NHS Borders Pharmacy Clinical Governance Annual Report 2024-25 – which will include reports from items 6.6 and 6.7, was reviewed and approved to go to Clinical Governance Committee when other items are added as appendices.	ADTC Approved Complete appendices and forward to CGC	KW 10/06/2025
6.9	ADTC reviewed the counselling checklist for LT Steroid Counselling and discussed the steroid bundle and education; it was not clear who this checklist was for – pharmacy or organisation. If it does not include paediatrics then it needs to state that. It was agreed that “LT” should be “Long-Term” as the abbreviation is not used by everyone. It does not include repeated courses or kits, and it also may need to have approval as leaflet format. ADTC agreed that it was a good starting point and that, although not approved, the author could update further and bring back to ADTC.	ADTC did not approve. Email author O Shirlaw	KW 29/05/2025
7.	<b>FOR INFORMATION and NOTING:</b>		

7.1	Public Health Scotland: Medicines in Pregnancy Report and dashboard, published on 1st April 2025, reporting on anti-seizure medicines (ASMs) prescribed to females in Scotland aged 0-54 years and pregnant women over the period April 2018 to March 2024. The report has a focus on two of these medicines: valproate and topiramate, as informed by MHRA (Medicines and Healthcare products Regulatory Agency) and CHM (Commission on Human Medicines) requirements. Also, in this report and dashboard is the inclusion of data on ASM prescribing in males aged 0-54. Pharmacy is working with neurology and mental health specialities on this.	ADTC Noted	
7.2	Management information resource from the Medicines in Pregnancy Programme to provide NHS board data on prescribing of anti-seizure medicines for females and males aged between 0-54 prescribed any medicine within BNF chapter 4.8 (anti-epileptic drugs) or valproate within any other British National Formulary (BNF) chapter. Two excel worksheets - 1 summarising data for female patients, and a second summarising data for male patients.	ADTC Noted	
7.3	Final versions of advice documents from the NCMAG Programme.	ADTC Noted	
<b>8.</b>	<b>FEEDBACK from SUBGROUPS</b>		
8.1	Anticoagulation Committee – next meeting 2 June 2025		
8.2	Antimicrobial Management Team – next meeting 21 May 2025		
8.3	IV Therapy Group meeting (draft) minute – 12 March 2025; reported working with senior charge nurses on current infusion devices.	ADTC Noted	
8.4	Medicines Resource Group meeting (draft) minute – 23 April 2025	ADTC Noted	
8.5	Medicines Governance and Safety Group – next meeting 26 May 2025; ADTC asked that MG&SG discuss which items should come to them and which to ADTC for discussion before approval.	Forward request to Chair and Admin	KW 03/06/2025
8.6	Tissue Viability Steering Group meeting (draft) minute – 27 February 2025	ADTC Noted	
8.7	East Region Formulary Committee minute from meeting held 5 February 2025 and 2 April 2025	ADTC Noted	
8.8	NHS Lothian ADTC minute from meeting held 7 February 2025	ADTC Noted	
<b>9.</b>	<b>AOCB</b>		
9.1	ADTC were asked to note the risk around GP Prescribing systems. There has been no update to the EMIS practice system as this was being moved to Vision system, which is web based and removes the requirement for servers. The organisation producing Vision went into administration and the process has halted. It is unclear at this time which system will be used; our servers will have to be updated to use EMIS update. Some drug interactions have not been updated on the system, and this is being communicated to general practice and pharmacotherapy team. Requesting this is made a priority with IM&T and has been escalated and is to be followed up. ADTC agreed that this should be placed on the risk register.	Record this on the organisational risk register.	KMacI/CP 03/06/2025

9.2	NMC update - communication to note that remote prescribing, without face-to-face consultation, will end on 1 <sup>st</sup> June 2025. Has been sent to prescribers and non-medical prescribers.	ADTC Noted	
9.3	ADTC discussed puberty blockers, appropriate indications and when prescribers should not prescribe for new patients. Request from community pharmacy to receive information from secondary care for stock and licensed indications. This requires to be reviewed and ADTC agreed that it should come to July agenda.	Prepare paper for July agenda.	KT 14/07/2025
<b>Date and time of next meeting: Wednesday 23 July 2025 at 12:30pm via Microsoft Teams.</b>			
<b>Items expected for future Agendas –</b> <b>JULY 2025</b> - Guidance for the Management of Elective Alcohol Detoxification Admissions to Huntlyburn Ward; Dr Rosemary Gordon. <b>JULY 2025</b> – or by email before – PCA Guidance; Dr Shona Smith. <b>Matters Arising expected: -</b> Local Anaesthetic Toxicity Protocol update (not approved JAN ADTC; AM); Treatment Pathway for Ritlecitinib (Litfulo®) in Severe Alopecia Areata from NHS Borders Dermatology Department (not approved Sept 2024 ADTC); Position statement on antipsychotic monitoring which will be an appendix in the Antipsychotic and Lithium Monitoring Protocol (update not approved Sept 2024 ADTC)			