

South East London Area Prescribing Committee (APC)
13 October 2016 at Lower Marsh
Approved minutes

1. Welcome, and Introductions

2. Conflicts of Interest – declarations

The Chair requested any interests, either general or relating to the meeting agenda be declared. There were no declarations made. Members were reminded of the need to submit up to date declarations of interest for 2016/17.

3. Minutes, action log and attendance list of Last Meeting and Matters Arising.

The minutes of the June meeting were accepted as accurate, subject to correction of a typo and rewording of paragraph 5, page 1.

Matters Arising:

There were no matters arising.

Action log:

Lewisham CCG confirmed that the Inflammatory Bowel Disease (IBD) monitoring framework has been discussed with the Commissioning Support Unit and will be included in ongoing contract negotiations. The action remains open.

4. RightBreathe website demonstration and incorporation of South East London (SEL) respiratory guidelines

RightBreatheUK have worked with the London Procurement Partnership (LPP) and UK Medicines Information (UKMI) to develop a website and smart phone app, with information on inhalers, for use by clinicians and patients. Respiratory medicines are an expensive part of the health economy and the National Institute of Health and Care Excellence (NICE) pathway is difficult to map against for non-specialists. Additionally the BTS/SIGN guideline was previously ambiguous at step 3. There is also an issue around patients having poor inhaler technique. These issues can lead to unnecessary hospital admissions with the attendant costs. The RightBreathe website is a tool for clinicians and provides a platform for sign posting patients. It has been developed to give clinicians access to the available guidance and resources in one place and includes:

- Links to national and local pathways
- A record for every licensed inhaler on the UK market
- Information on dosage, side effects and contraindications.
- information on which spacer is compatible with which inhaler(s)
- links to inhaler technique training videos for patients
- the ability for patients to set dose reminders
- tailored to individual patient use via an email generated link
- can be integrated with DXS

The site also allows users to filter by drug name, class, licensed indication and device. Images for each entity are also available. There are also separate records for each spacer including the size, cost and cleaning instructions. A referenced version of the SEL respiratory pathways will also be included if approved by the Committee. The pathways are not available

within the app; these are only available via the website. The website also includes a “share” button that allows healthcare professionals to share information with patients.

A practical demonstration of the app was given and the committee was asked for approval to promote its use across SEL and to incorporate SEL respiratory guidelines in the app.

Questions from the committee

- *Could PIP codes be incorporated?*

This could certainly be considered but may be difficult as codes will differ across the different prescribing systems used on patch.

- *When is the target “go live” date?*

The app is at the publicity stage currently and the target date is 15 December 2016. Lambeth CCG has agreed to be a pilot site.

- *Is there ongoing support to update the system?*

Funding was obtained for the development stage and there is a need to demonstrate success in order to obtain sustainable funding. Pilot sites will be an important aspect of this.

- *What would success look like?*

Impact could be demonstrated by reducing respiratory prescribing costs, patients using inhalers more appropriately, a reduction in hospital and/or GP attendances. The presenter acknowledged that some of these would be more difficult to monitor than others.

- *Will the app integrate with other software systems eg: EMIS Web?*

As mentioned above it does integrate with DXS, other software systems are more problematic

The Chair thanked the presenters and the committee confirmed approval to incorporate SEL respiratory guidance within the app and to promote the app across the SEL patch.

5. Six-month APC work plan update, including update on pathways:

- **Ophthalmology**

The Greenwich CCG lead reported that work is ongoing but has been very slow due to workload issues at KCH. The pathway is at the final stage but due to the length of time it has taken to develop will need to be revised very soon. A communication will be sent to the KCH Chief Pharmacist to establish the best way forward in terms of acute trust pharmacist input.

ACTION: Greenwich CCG lead to draft a letter to KCH Chief Pharmacist on behalf of APC

- **Psoriasis**

A final draft has been developed pending the new guidance from the British Association of Dermatologists (BAD), which is currently at the consultation stage. The SEL group will meet early in the new year.

- **Haematology – Immune Thrombocytopenic Purpura (ITP)**

The Chair is collating the information for circulation with a target date of January 2017. SEL is also working with South West London to develop a thrombotic thrombocytopenic purpura (TTP) pathway and due to capacity issues the Chair of the ITP group is unable to commit to also chairing this group.

- **Nutrition/Gluten Free Prescribing**

This is being led by Lambeth CCG but also ties in with work on self-management that is being led by Greenwich CCG. There is also some national work underway on gluten free

prescribing to ensure people have healthy options. The committee noted that GPs need very clear guidance to support this position when interacting with patients.

- **Deprescribing**

This is currently running in Greenwich and resources have been shared with other SEL CCGs.

- **Continence products**

The work is going forward with a completion date of March 2017.

- **Emollients**

A draft is currently out for consultation.

- **Pain Management**

A draft has been developed for consultation the target completion date is January 2017.

- **Infant feeds**

The draft is out for consultation and the target completion date is January 2017. The committee noted that a supporting pathway is essential for GPs.

6. Update on SEL Sustainability and Transformation Plan (STP) Scoping exercise for high impact Medicines Optimisation themes

CCG and Acute pharmacy leads met to discuss ideas and outline plans in August. The key theme was a discussion about the value of medicines looking at whole pathways. It was noted that the Carter Hospital Pharmacy transformation programme has a much narrower focus compared to STP and it proposed that SEL aligns the two programmes into one overarching STP. The following elements emerged from the discussion:

- Models of care – the most gain lies in collaborative work
- Care pathways – recognising and celebrating success eg: IBD/Respiratory pathways
- Urgent care – pharmacy impact as part of the urgent care team
- Practice pharmacists – career development and a support structure are crucial as is upskilling

ACTION: Lambeth CCG lead to follow up with OHSEL leads to confirm what has gone into the final SEL STP in relation to medicines.

7. Antibiotic campaign for South East London

Lewisham CCG have pulled together the available resources and the committee were asked to consider how best to use them effectively. It was suggested that a basic campaign to run in 2016/17 given timescales, with a more extensive campaign going forward from 2017/18. Some committee members felt that what was needed was something different and more powerful, perhaps making use of consultant pharmacists, tapping into schools etc. The following ideas were discussed:

- Public health champion to talk to all 6 boroughs
- Involving the Lambeth, Lewisham and Southwark Infection Control Committee
- Involve Accident and Emergency departments, out of hours GPs, dentists, care homes
- Consider targeting those GPs known to be high users (Bexley is “naming and shaming”)
- Education for nurses on how to manage urinary tract infections

These ideas will be considered but the committee agreed that the basic message that viruses do not respond to antibiotics is still valid and it is important to promote this to patients.

8. South East London Interface Policy

The revised policy was presented for approval. There was a discussion around the issue of patients presenting at a GP practice with an outpatient prescription which they expect to receive on an urgent basis. It was suggested that the policy should be clear that the first prescription should be given by the hospital. However there are practical concerns around this such as waiting time for the patient, additional cost if they have to pay for two prescriptions etc. It was suggested that advice from the consultant to the GP should include reference to a discussion with the patient in the context of holistic care. The policy was approved.

9. Good news feed - Presentation by winner of UK Clinical Pharmacy Association patient safety award: Improving the pharmaceutical care of patients on psychotropic medication admitted to an acute hospital – the impact of a proactive “in-reach” specialist pharmacist service

The presenter was unable to attend due to illness and the item was deferred to the January meeting.

10. Items for ratification/information

Items for ratification:

- Shared care prescribing guideline: Methylphenidate, atomoxetine, dexamfetamine and lisdexamfetamine for the treatment of Attention Deficit Hyperactivity Disorder in Adults
- Shared care prescribing guideline: treatment of Growth hormone deficiency, Turner syndrome, Chronic renal insufficiency, Prader-Willi syndrome, Small for gestational age and Short stature homeobox-containing gene (SHOX) deficiency in Paediatrics (including product choice and homecare pathways)
- Information sheet: Use of a single anticoagulant patient safety card across South London
- Lipid Management for the Primary and Secondary Prevention of Cardiovascular Disease (CVD) in Adults
- Guidance for the Management of Hypertriglyceridaemia
- Guidance on Prescribing Statins

All guidance has previously been discussed at the Medicines and Pathways Review Group and the final revised drafts were ratified by APC.

Items for information:

- SEL APC response to Regional Medicines Optimisation Committee (RMOCs) proposals – 174 responses was received to the steering group consultation and there has been no formal response as yet. Shadow RMOCs will be in place until March 2017 and the first medicines will be considered by RMOC in April 2017.
- NICE summary
- Medicines and pathway review group minutes May-August 2016
- Formulary recommendations
- Recommendation 050 Brivaracetam in Epilepsy
- Recommendation 051 Botulinum Toxin in Temporomandibular Jaw Disorder
- Recommendation 052 Guanfacine in ADHD (children)

- Recommendation 053 Dulaglutide in Type 2 Diabetes Mellitis
- Recommendation 003 Dapagliflozin in Type 2 Diabetes Mellitis (withdrawn)
- Recommendation 011 Relvar Ellipta in Asthma-COPD (withdrawn)
- PAN London Stroke Prevention in Atrial Fibrillation (SPAF) Position Statement
- SPAF DOAC Notification of Initiation
- SPAF DOAC Transfer of Care
- SPAF Apixaban Prescribing Guidance
- SPAF Dabigatran Prescribing Guidance
- SPAF Edoxaban Prescribing Guidance
- SPAF Rivaroxaban Prescribing Guidance
- Primary Care Treatment Summary for Venous Thromboembolism (VTE) Management
- DOACs in Venous Thromboembolism (VE), Pulmonary Embolism (PE), Deep Vein Thrombosis (DVT) Notification of Initiation
- DOACs in VTE, PE and DVT Transfer of Care
- DOACS in VTE, PE and DVT Apixaban Prescribing Guidance
- DOACs in VTE, PE and DVT Dabigatran Prescribing Guidance
- DOACs in VTE, PE and DVT Edoxaban Prescribing Guidance
- DOACs in VTE, PE and DVT Rivaroxaban Prescribing Guidance
- Rivaroxaban in Acute Coronary Syndrome (ACS) Notification of Initiation
- Rivaroxaban in ACS Transfer of Care
- Rivaroxaban in ACS Prescribing Guidance
- Sacubitril Valsartan in Chronic Heart Failure (CHF) Notification of Initiation
- Sacubitril Valsartan in CHF Transfer of Care
- Sacubitril Valsartan in CHF Prescribing Guidance
- Retigabine in adult focal seizures shared care prescribing guidance
- Zonisamide in adult epilepsy shared care prescribing guidance
- Lacosamide in adult epilepsy GP information sheet
- Tiagabine in adult epilepsy GP information sheet
- Perampanel in adult epilepsy transfer of care
- Blood Glucose Control Pathway Type 2 Diabetes Mellitis

All items for information were noted.

11. Any Other Business (AOB)

There was no AOB.

2017 meetings:

| Date | Time | Venue |
|---------------------------|-------------|--|
| Wednesday 25 January 2017 | 14.00-16.00 | Room 322, 160 Tooley Street |
| Thursday 30 March 2017 | 14.00-16.00 | Room 407, 4 th Floor, 1 Lower Marsh |
| Thursday 29 June 2017 | 14.00-16.00 | Room 407, 4 th Floor, 1 Lower Marsh |
| Wednesday 25 October 2017 | 14.00-16.00 | Lewisham/Greenwich Rooms, 4 th Floor, 1 Lower Marsh |