

Medicines Management Committee Meeting BRIEF MINUTES: Wednesday 1st July 2019 9.00 am - 11.00 am via Zoom

Present:

(CHAIR) Dr Sophie Holden (SH), GP – Market Surgery Dr Ravi Nalliagounder (RNa), GP - Greenside Surgery Stuart Lakin (SL) - Head of Medicines Management - NHS Rotherham CCG Govinder Bhogal – Deputy Head of Medicines Management - NHS Rotherham CCG Eloise Summerfield – Prescribing Advisor – NHS Rotherham CCG Raz Saleem (RS) – Prescribing Advisor – NHS Rotherham CCG Gwen Yale (GY) – Senior Medicines Management Technician – NHS Rotherham CCG Nazreen Hussain (NH) – PCN Pharmacist In Attendance: Jessica France – Administration Officer, NHS Rotherham CCG

| ltem No. | Item Description | Discussion | Action By |
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| 127/20 | Introductions | SH welcomed the group to the meeting. | |
| 128/20 | Apologies | Emma Batten (EB) – Lead Infection Prevention Nurse – NHS Rotherham CCG | |
| 129/20 | Quorum Check Minimum of 3 members to include: 1 x GP, 2 x Medicines Management Team Members, one of which should be the Head of Medicines Management or deputy and one prescribing support pharmacist from the Medicines Management Team. | The meeting was quorate in line with the Quoracy Guidance within the Terms of Reference. | |
| 130/20 | Declarations of Interest | RNa noted his standing declaration as he is an appointed member of the Local Medicines Committee (LMC) and is a Primary Care Network (PCN) Director. | |

| 131/20 | Draft Minutes of the last meeting 17 June 2020 (for approval) and Matters Arising | It was noted that the payments for FIS/QIS audits were discussed and authorised in OE. JF / RS / ES to forward letters out to practices re payments and budgets. <i>ACTION: JF / RS / ES to action the above.</i> JF tasked to organise meeting with JSP as discussed in previous minutes. <i>ACTION: JF to action the above.</i> JF to liaise with GY on altering wording on the Care Homes item on the previous minutes. Sheffield are not monitoring work which is undertaken in care homes. <i>ACTION: JF to change wording of item 114/20 of the previous minutes.</i> The Action Log of MMC will now resume and will begin from next MMC meeting. <i>ACTION: JF to add this to the next MMC agenda.</i> | JF/RS/ ES JF JF/GY JF/ |
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| 132/20 | Audit Appeal | Queen's Practice contacted MMT regarding appealing their FIS/QIS Audit. It was agreed by MMC that the practice did not undertake the work within the specified time frame nor did they use the approved MMT searches, which were shared with the practice. This affected the search results and consequently the final outcome. Their appeal could not be approved. SL will contact Practice Manager at Queen's to explain the reasons for the audit appeal not being approved. <i>ACTION: SL to action the above</i> | SL |
| 133/20 | Yellow Card | This paper was brought to publicise yellow card reporting of adverse drug reactions. | |
| 134/20 | Items for OE | No items to be taken | |

| 135/20 | Care Homes | GY informed MMC that she is currently awaiting a reply from Sheffield CCG to set up the database. ACTION: Care Homes Plan meeting due to be held next week with NH, SL, GY and GB regarding working with PCN Pharmacists. | |
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| 136/20 | Safety warnings from the MHRA, manufacturers and NHS Improvement | There was no discussion regarding this item. | |
| 137/20 | NICE | There will be an update for the next MMC | |
| 138/20 | Traffic Light Update | Dapsone - the Dermatology department is currently using this for skin conditions including Dermatitis Herpetiformis and has recently been requesting GPs to prescribe this. It is currently RED on ScriptSwitch / the Traffic Light System. It needs to have a shared care protocol if TRFT are requesting GPs to take on the prescribing as LFTs, FBC need to be monitored. Danazole to be taken to the next available RMOG meeting. There are a small number of patients on this medication and it was advised that this should be RED. <i>ACTION: ES to take to RMOG</i> . | ES |
| 139/20 | Horizon Scanning | There was no discussion regarding this item. | |
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| 140/20 | NHSE Accountable Care System (ICS) – Impact | The local Medicines Management plan regarding the Framework for Enhanced Health in Care Homes plan has been approved by OE. The plan includes working closely with PCN pharmacists to undertake Medication Reviews, standardising practice across the borough and developing a strategic MDT Care Home Team to include wound care, continence, dieticians and diabetes nurses. The MOCA team are continuing for a further year. As a CCG we are currently unclear how the MOCA team will integrate with our current care home team plans. SL informed MMC that there has been an alteration on frequency of meetings to bi-weekly to ensure regular updates continue. SL has also been seconded for another year to continue work with the ICS. QIPP plans are currently on hold across the ICS due to COVID. Medicines Waste has shown strong growth due to COVID-19. There has been an increase in NCSO Medicines and costs have risen from March to April from £6.90 to £7.30 per item. |
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| 141/20 | For Information: Barnsley APC Minutes Barnsley APC Memo – Memo & Enclosure Doncaster & Bassetlaw APC RDASH Draft MMC Minutes Sheffield Area Prescribing Group | There was no discussion regarding this item. |
| 142/20 | Feedback from RMOG | There was no discussion regarding this item. |

| 143/20 | Items for RMOG, Items for Escalation or Additions to the Risk Register | Dapsone Danazole Betesol Patches – the Dermatology department requesting GPs to prescribe 6m course despite being a RED traffic light drug | |
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| 144/20 | Urgent Issues & Appropriate Escalation | There was no discussion regarding this item. | |
| 145/20 | Risks Raised | There was no discussion regarding this item. | |
| 146/20 | Any Other Business | RS discussed the use of Reporting Forms to record dispensing errors by pharmacies as there is currently no mechanism for reporting these errors. It can be used as part of the Yellow card reporting or via the portal to record prescribing errors e.g. from pharmacy which can then be printed off & recorded in the patient records. Dispensing errors can be flagged as part of contract safety work (covers CQC domains) <i>ACTION: JF to add this item to next MMC agenda (National Reporting & Learning System)</i> RS discussed that RDASH undertake Community Clinics e.g. for Learning Disabilities / ADHD and are looking at how they will manage prescribing and blood requests in future. Options include shared care monitoring of medication or electronic prescribing (EPS). MMC felt that EPS would be the preferred option and ideally bloods should be requested by the prescriber using ICE. EMIS practices need to be taken into account and interoperability of the systems. Pharmacies are downloading eRD prescriptions early and claiming for them before they are due, Inappropriate patients are being added to eRD by some practices. Ideally stable patients on less than 4 medications could be considered for eRD. Not care home patients. | JF |

| | | Out of stocks issues were highlighted as a potential issue for practices if high volumes of patients are started on eRD as this will cause significant risks to safe prescribing, workload and waste work streams. ACTION: SL will discuss eRD at the practice manager's forum and advise to currently put ERD plans on hold, SL to request expressions of interest from practices for projects related to eRD over the coming months to safely initiate appropriate patients. These projects could then be used to promote a safe roll out of repeat dispensing across Rotherham practices. SL informed MMC that the contract with ScriptSwitch has been extended for another 12 month period. SL also noted that he will bring the updated Branded Generics Policy to the next MMC meeting for feedback / comments. <i>ACTION: SL to action the above</i> | |
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| 147/20 | Date of next meeting | Date and time of next meeting: Wednesday 15 th July from 9.00am – 11.00am via Zoom. | |