

Medicines Management Committee Meeting
BRIEF MINUTES: Wednesday 18th November 2019 9.00 am - 11.00 am via Zoom

Present:

(CHAIR) Dr Sophie Holden (SH), GP – Market Surgery
 Dr Ravi Nallagounder (RNa), GP - Greenside Surgery
 Surinder Ahuja (SA) - Medicines Evaluation Pharmacist – TRFT
 Stuart Lakin (SL) - Head of Medicines Management - NHS Rotherham CCG
 Govinder Bhogal – Deputy Head of Medicines Management - NHS Rotherham CCG
 Lisa Murray (LM) - Prescribing Advisor – NHS Rotherham CCG
 Raz Saleem - Prescribing Advisor – NHS Rotherham CCG
 Gwen Yale (GY) – Senior Medicines Management Technician – NHS Rotherham CCG

In Attendance: Jessica France (JF) –Administration Officer – NHS Rotherham CCG

Item No.	Item Description	Discussion	Action By
359/20	Introductions	SH welcomed the group to the meeting.	
360/20	Apologies	Emma Batten (EB) – Lead Infection Prevention Nurse – NHS Rotherham CCG GB left the meeting at 9.30am due to other commitments.	
361/20	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.	

362/20	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.	
363/20	Draft Minutes of the last meeting 4 November 2020 (for approval) and Matters Arising	<p>The minutes were a true and accurate record of what was discussed in the previous meeting.</p> <p>SSRI pilot has been discussed at LMC and there were some concerns about GPs verifying the patient lists.</p> <p>ACTION: Invitation to LMC to discuss their concerns</p>	SL
364/20	Action Log	No further updates were recorded for any of the Action Log items.	
365/20	Medicines Code	<p>This item will be carried forward to the next MMC meeting for discussion. SL is wanting to develop a CCG statement to support GPs in managing the increasing numbers of patients who are requesting medication on the NHS which has been initiated in the private sector. A legal opinion may be needed for this. GB feels that the West Essex prescribing policy may be a useful starting point and the Sheffield Medicines Code can also be used to develop a local policy.</p> <p>ACTION: GB to forward the relevant papers to SH, SL and any comments to JF prior to the next MMC meeting</p> <p>ACTION: JF to add to next MMC agenda.</p>	GB JF
366/20	Items for OE	There was no discussion regarding this item.	

367/20	Care Homes	SL noted that NHS England has funding to encourage Ordering by Proxy on an ICS footprint. All Heads of Medicines Management within SYB took place in a webinar regarding this. NHSE have funding streams regarding App ordering and digital solutions which can be accessed.	
368/20	Safety warnings from the MHRA, manufacturers and NHS Improvement	SA circulated the Drug Safety Update for October. There were no major concerns with the information contained in the document.	
369/20	NICE	GB will provide an update at the next MMC meeting.	
370/20	Traffic Light Update	There was no discussion regarding this item.	
371/20	Horizon Scanning	There was no discussion regarding this item.	
372/20	NHSE Accountable Care System (ICS) – Impact	The ICS is reviewing and refreshing the current workstreams. There is to be a ‘Care Homes’ day to share knowledge across the ICS.	
373/20	<p>For Information:</p> <ol style="list-style-type: none"> 1. Barnsley APC Minutes 2. Barnsley APC Memo – Memo & Enclosure 3. Doncaster & Bassetlaw APC 4. RDASH Draft MMC Minutes 5. Sheffield Area Prescribing Group 	<p>LM raised a query regarding routine prescribing of Alprostadil, mentioned in the Doncaster APC minutes. Testosterone (alprostadil) cream initiated by urology is grey on Doncaster traffic light system as it is part of the ‘Not to be routinely prescribed by GPs’. It is currently not traffic lighted in Rotherham. ACTION: LM to liaise with LB and review whether alprostadil needs to be traffic lighted in Rotherham.</p>	LM

374/20	Feedback from RMOG	There was no discussion regarding this item.	
375/20	Items for RMOG, Items for Escalation or Additions to the Risk Register	There was no discussion regarding this item.	
376/20	Urgent Issues & Appropriate Escalation	There was no discussion regarding this item.	
377/20	Risks Raised	There was no discussion regarding this item.	

DRAFT

378/20	Any Other Business	<p>Complex Discharge Issues: SL raised an issue which is becoming increasingly common –requests to GPs to provide prescriptions for complicated stoma/ tracheostomy kits etc. Community nurses normally provide kit but this is not currently the case. SL raising with finance to work out where the costs lay. Not fair on practices to pick up the costs.</p> <p>Preferred Brands: GB shared the Preferred Brands document for the Payment Incentive Scheme (PIS) with MMC. GB noted that this information can be circulated with Practice Managers as they may find it informative and useful. The preferred brands can also be used by secondary care to identify the generic alternative. Currently it ONLY includes those medicines which are part of the PIS scheme. Plan: Circulate paper to practices and PCN pharmacists A further extension can be done to include other medications as part of the migration to Optimise Rx.</p> <p>A discussion was had regarding the use of non-integrated apps to request medication. This was because a query regarding our policy has been received by a private company. We will reiterate that we encourage practices to use fully integrated apps due to safety reasons.</p> <p>GB noted that all 800 Pulse Oximeters are now ready for distribution.</p> <p>LM has joined an Opioid Learning Group and is meeting with V-Lin from Doncaster to look at a non-medication service</p> <p>SH –Vitamin D prescriptions requests from TRFT –receiving increasing requests from departments e.g. O&G who are veering from CCG guidance and are requesting patients have daily Vitamin D medications prescribed (rather than the monthly preparation or requesting they buy OTC).</p>	
--------	--------------------	--	--

		<p>SL updated MMC regarding the QUIT meeting highlighting the following:</p> <ul style="list-style-type: none"> • There is a completed smoke free site document- outstanding issues are that staff are smoking in residential buildings. TRFT are working towards becoming a smoke free site. • TobTA is now live, the issue is that they are not receiving referrals to the service despite being live. • The ICS has a strong systematic commitment for funding and supporting the QUIT programme • Contract with Yorkshire Cancer Research has still not been signed, they are hoping it will be signed within the next month • QUIT is to go live in March 2021 • GHR and Parkwood aware that there was a gap for provision of smoking cessation for under 18s- they are looking to incorporate a pathway by 1st April 2021 • There is poor quality of referrals from the hospital to GHR- Trevor is working to improve this • Smoking cessation in pregnancy services also want to adopt this electronic voucher once it is finalised • ICS is working on resources to help support QUIT and e-learning packages. 	
379/20	Date of next meeting	<p>Date and time of next meeting: Wednesday 2nd December from 9.00am – 11.00am via Zoom</p>	