

Medicines Management Committee Meeting BRIEF MINUTES: Wednesday 2nd December 2019 9.00 am - 11.00 am via Zoom

Present:

(CHAIR) Dr Sophie Holden (SH), GP - Market 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

Laura Fotherby (LF) - Senior Medicines Management Technician - NHS Rotherham CCG

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

Item No.	Item Description	Discussion	Action By
386/20	Introductions	SH welcomed the group to the meeting.	
387/20	Apologies	Emma Batten (EB) – Lead Infection Prevention Nurse – NHS Rotherham CCG Dr Ravi Nalliagounder (RNa), GP - Greenside Surgery Nazreen Hussain – PCN Pharmacist	
388/20	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.	
389/20	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.	

390/20	Draft Minutes of the last meeting 18 November 2020 (for approval) and Matters Arising	ACTION: JF to remove LM noted apologies as she attended the meeting. Alprostadil –LM has discussed this with LB. Topical Alprostadil is not routinely recommended by the urology nurse who currently runs the erectile dysfunction clinic. There are currently 20 patients on Alprostadil in Rotherham. There is no current need for reclassification on the traffic light list. Vitamin D (AOB) – discussed that pregnant women can receive via Healthy Start vitamins or OTC as they are currently being asked to prescribe from Obstetrics. ACTION: JF to add Medicines Code to Activity Log and to add to next agenda dates 16 th December.	JF JF
391/20	Action Log	Medicines Prescribing Code to be added to the Activity Log	

392/20	eRD (electronic Repeat Dispensing) Support Programme	Two practices, Clifton and Wickersley are currently involved in the eRD programme. Training has been completed with Clifton. There are 2700 patients at Clifton who are being reviewed for suitability. Community pharmacies are aware of eRD and have been primed to expect an increase in number of prescription requests via this method. EPACT data is due to be updated which should then show an upward trend in eRD. Greasbrough currently has 37% patients on eRD. ACTION: JF to liaise with LM to arrange training sessions. ACTION: Monthly updates by LM to MMC meeting ACTION: Ensure community pharmacies can access training and have support ACTION: Look at cost/ item growth in those practices who are using eRD (to see if any impact on waste) – choose pharmacies with higher volumes of prescriptions ACTION: JF to add 'eRD Support Program' to action Log.	JF/LM
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393/20	Financial Report – September 2020	Cost growth is 4.4% - forecast at the end of the year to come in at 2.88% which is significantly below similar CCGs. SL noted that item growth is reducing which is positive for the CCG. Currently -1.4% which is below the England average. Sertraline price has decreased since it has stopped being NCSO 'no cheaper stock obtainable'. This had a big impact on Rotherham's budget. Communications have been sent to practices regarding the reduction in antibiotics prescribing. The CCG will be working with practices to see how we can continue this in the future. ACTION: Need to refresh the Self Care agenda ACTION: Comms to practices regarding capitalizing on the reduction in antibiotic prescribing this year
394/20	Items for OE	There was no discussion regarding this item.
395/20	Care Homes	SL noted that regular update meetings are now held within MMT. The new Care Homes Technician will be starting their new role soon. SL also noted that MMT have begun ordering by proxy for Rotherham Care Homes. We have committed to ensure 25% care homes are ordering by proxy as part of an ICS initiative.

396/20	Safety warnings from the MHRA, manufacturers and NHS Improvement	Pfizer COVID Vaccine Theophylline	
397/20	NICE	There was no discussion regarding this item.	
398/20	Traffic Light Update	There was no discussion regarding this item.	
399/20	Horizon Scanning	There was no discussion regarding this item.	

400/20	NHSE Accountable Care System (ICS) – Impact	The ICS is re-evaluating all workstreams for next year. No benefit for further swaps / switches as most have already been actioned. Meds optimization agenda includes antimicrobial stewardship, electronic repeat dispensing,	
401/20	For Information: 1. Barnsley APC Minutes 2. Barnsley APC Memo – Memo & Enclosure 3. Doncaster & Bassetlaw APC 4. RDASH Draft MMC Minutes 5. Sheffield Area Prescribing Group	medicines waste and CROP (opioid prescribing) across practices. No comments were recorded regarding the enclosure.	
402/20	Feedback from RMOG	There was no discussion regarding this item.	
403/20	Items for RMOG, Items for Escalation or Additions to the Risk Register	There was no discussion regarding this item.	
404/20	Urgent Issues & Appropriate Escalation	There was no discussion regarding this item.	
405/20	Risks Raised	There was no discussion regarding this item.	

407/20	Date of next meeting	Date and time of next meeting: Wednesday 16th December from 9.00am – 11.00am via Zoom	
406/20	Any Other Business	SA is halfway through the report investigating the clozapine incident. She will share learning with the MMC. SA has analysed the data of discharged summaries – 55 patient enquiries, 110 medicine related enquiries. SA has charted the most common enquiries. This will be taken to the Medicines Safety Group. SL will be attending the meeting and will forward to MMC. ACTION: JF to add 'Discharge Summaries' to agenda for next MMC.	JF
		LM: Lidocaine patches: an increasing number of patients are being prescribed these inappropriately. There seems to be an increase in prescribing from medical wards. SA has been included on email correspondence and will be discussed at RMOG. ACTION: LM will analyse data from the past 12 months to view prescribing trends. SA will feed back data to medics and will raise length of duration of the medication (i.e. acute) and when to use	LM