

ALL WALES PRESCRIBING ADVISORY GROUP

MINUTES OF MEETING HELD ON THURSDAY, 19th JANUARY 2006 COMMENCING 9.30AM IN THE SOPHIA ROOM, CARDIFF HILTON HOTEL

Members

Mrs Katherine Hier	Healthcare professional eligible to prescribe – SE Wales
Dr Ashok Rayani	GP South West Wales (deputy)
Mr Trevor Batt	Pharmacist South East Wales
Dr Mark Daniels	GP South West Wales
Mr Stuart Evans	Healthcare professional eligible to prescribe – SW Wales
Dr Tessa Lewis (Vice Chair)	GP South East Wales
Mrs Louise Howard-Baker	Pharmacist North Wales (deputy)
Mr John Terry	Secondary care pharmacist
Mr Berwyn Owen	Pharmacist North Wales
Mrs Nicola John (Chair)	NPHS Representative
Dr Jonathan Jones	GP North Wales
Mrs Debbie Davies	Healthcare professional eligible to prescribe – SE Wales
Mrs Delyth Simons	Pharmacist South West Wales
Mrs Kath Haines	Pharmacist South West Wales (deputy)
Dr Martin Duerden	GP North Wales
Mrs Fiona Walker	Pharmacist South East Wales (deputy)

In attendance

Professor Philip Routledge (Welsh Medicines Partnership)
Mrs. Karen Samuels (Welsh Medicines Partnership)
Mrs. Ruth Lang (Welsh Medicines Partnership)
Mrs Kath O'Brien (Royal Pharmaceutical Society of Great Britain) (for item 16 only)

Key of abbreviations

AWDAC	All Wales Dietetic Advisory Committee
AWMSG	All Wales Medicines Strategy Group
AWPAG	All Wales Prescribing Advisory Group
A&E	Accident & Emergency
BSC	Business Services Centre
CHCs	Community Health Councils
GP	General Practitioner
HSW	Health Solutions Wales
HoPMM	Heads of Pharmacy and Medicines Management
LHB	Local Health Board
NHSIF	NHS Industry Forum
NPHS	National Public Health Service
RPSGB	Royal Pharmaceutical Society of Great Britain)
WMP	Welsh Medicines Partnership

1. Welcome

The Chair welcomed members to the meeting and the new members introduced themselves giving their names and the organisation they represented.

2. Apologies

Mrs Judith Vincent
Mr Ken Nazareth
Mr Bill Duffield
Dr Charlie Danino
Dr Rob Bracchi
Dr Paul Buss
Miss Carwen Wynne-Howells

3. Declarations of interest

Members were reminded to declare any interests pertinent to the agenda and in general. Dr Rayani declared during the discussion on item 12, his links to a GP out of hours cooperative

4. Minutes of previous meeting

The minutes of the meeting held on Wednesday 19 October 2005 were checked for accuracy. One typographical error should be amended on page 4 under Shared care (paragraph 3, line one). There were no other changes.

5. Matters arising

The Chair suggested the meeting should split into working groups for two agenda items - Patient safety issues involving generic prescribing (8) and Shared care (13).

6. Membership and constitutional issues

Professor Routledge informed members that Dr. Paul Buss had been appointed Acting Chairman of AWMSG. He suggested that WMP should discuss with Dr Buss if he would continue on AWPAG, or whether Wendy Warren, deputy AWPAG/AWMSG link member, should be invited to attend AWPAG meetings during his term of office to alleviate the workload. WMP agreed to address this issue outside of the meeting.

WMP

It was agreed that if individually assigned deputy members are unable to cover, that remaining deputy members should constitute a pool.

Professor Routledge confirmed that four applications had been received for membership to AWPAG. It was suggested that secondary care representation be increased to two consultant members and two deputies. It was agreed that WMP should seek the approval of the AWMSG Steering Committee and inform the applicants.

WMP

7. Feedback from AWMSG December meeting

AWMSG Chairman - Professor Routledge provided feedback from the AWMSG December meeting. It was reported that Dr. Paul Buss will be in

post for one year whilst the review of ASPBS is undertaken by Welsh Assembly Government.

Joint Sip Feeds Working Group - Dr. Tessa Lewis asked for nominations from a pharmacy member to progress the guidelines on Sip feeds group, and HoPMM members agreed to put forward a name. Volunteers will also be sought from NHSIF. As WMP lead Dr. Lewis confirmed that Working group meetings will be kept to a minimum.

HoPMMs

Clarification of wording in relation to national indicators 2006/2007 – Mrs. Ruth Lang reported that the enclosure had been taken to AWMSG in December 2005 and confirmed that the original wording of the targets would revert to read “reduction to 25th percentile or below”.

WMP

Prescribing strategy timetable – Professor Routledge confirmed that the strategy would be split into four different areas that need to be considered separately and this would mean four sub-group meetings over the next few months to look at these particular areas. The Chairman of each sub-group would contribute to the strategy and it is envisaged that an update report will be made at the AWMSG meeting in June.

NJ

The Chair asked members to comment on the suggestion in the minutes of the AWMSG December meeting (page 6, item 14/7 AWMSG/AWPAG and NHSIF constitutions) which involved Chairs and Vice-Chairs of AWPAG and NHSIF being invited to attend each others' meetings. There was concern over the time commitment this may involve and it was agreed that the minutes of NHSIF meetings should form part of the AWPAG meeting documentation – to be reviewed in 12 months.

WMP

8/9. Patient safety issues involving generic prescribing

As agreed earlier this item would be taken after lunch in group working and report back format.

Generic substitution

It was noted that no members of WAG were present to provide any feedback. Mrs. Ruth Lang informed members that Mrs Karen Samuels would present the paper and it was agreed that this item should be deferred until her arrival.

10. Prescribing trends

The Chair asked the committee to note that the SaFF stated that there were 5 indicators. The AWMSG Steering Committee had thus requested that AWPAG should consider a further national indicator for 2006/2007. The group **agreed** to keep co-proxamol as the 5th indicator.

Mrs. Kath Haines produced a document she had received from WeMeRec dated 11 January 2006 which had been circulated to LHBs and Trusts, pharmacists, Medical Directors and Chief Executives which mapped out co-proxamol prescribing across Wales. The committee welcomed this type of approach, and suggested that it would be helpful if links to other relevant work were given in future documents. It was agreed that the LHBs who had achieved the greatest reduction in co-proxamol prescribing should be

WMP

contacted, to bring examples of good practice to wider attention.

Dr Tessa Lewis asked when the review of the prescribing incentive scheme was planned. The committee agreed that the existing scheme needs to run for longer before it was changed but that a timetable should be put in place for a review.

**AWPAG
working
group**

11 Audit of clopidogrel

Dr. Martin Duerden sought the endorsement of the group to the circulation of the proposed audit template. Dr. Martin Duerden stated he did not foresee any problems, but that the template might need slight local adaptation. It was agreed that the template should be placed on the website.

WMP

The committee agreed to ask WeMeRc to produce a national map of clopidogrel usage; LHBs are able to produce their own bar chart of local use.

WMP

There was discussion on how primary care and secondary schemes differ but could be made complementary.

12. WAG Questionnaire on out of hours pharmacy provision

AWMSG had requested that AWPAG consider the WAG out-of-hours questionnaire and bring any issues back to AWMSG in March 2006. It was noted that no representative from Welsh Assembly Government was present at the meeting. The committee made a number of suggestions, based on views around the table and feedback received from Chief Pharmacists

- That the secondary care perspective, and in particular the involvement of A&E departments, was needed
- That consideration needs to be given to how changes in the GP & Pharmacy contracts have impacted
- That attention should be given to any lessons learned from the recent protracted Christmas break
- That the patient view should be sought, possibly via CHCs

There was concern that some areas do not have out of hours pharmacy provision. The committee noted the WAG policy to reduce prescription prices to zero, and expressed concern about the effect this could have on GP workload. The committee requested that WAG is asked to consider the introduction of minor ailment schemes, to encourage the use of pharmacies for appropriate conditions. The Chair indicated that NPHS has been asked to carry out a review of any effects on the reduction in prescription prices on OTC and prescribed items

9. Generic substitution

Mrs Samuels presented the paper. AWPAG decided that there were issues that need to be clarified before generic substitution could be considered by AWPAG;

WAG

- Advice from WAG on the legal position is needed

- Initial work on the estimated financial savings from generic substitution of existing products, and projected savings from future generic products, to determine if it is worthwhile pursuing this policy

WMP

The committee will be pleased to consider the other questions raised in enclosure 5, after consideration of information in relation to these points.

13. Shared care

Present:

Louise Howard-Baker, Kath Haines, Ashok Ryani, Jonathan Jones, Trevor Batt, Stuart Evans, Tessa Lewis

The group discussed the rationale for an all Wales amber drug list. Amber lists were available from some LHBs/Trusts at the meeting. It was agreed to obtain outstanding lists including those from the Welsh borders where possible. These would be collated and existing consensus established.

TB

Where there is no consensus, drugs will need to be reviewed. Defined criteria were proposed. Representatives from consultant national groups will need to be involved in prioritising drugs relevant to their speciality.

Updating the Enhanced Service List: Strategy needed to co-ordinate with BMA contract negotiators to avoid unnecessary duplication. Letter to be sent on behalf of AWPAG to GPC.

TL

When there is an agreed list of amber drugs they will need Shared Care Agreements. Chief Pharmacists supported sharing this workload (see AWMSG Dec 05 minutes).

14. Minutes of Consensus Group on glucose testing

The January meeting of the Consensus Group had been postponed.

The Chair agreed to write a letter in conjunction with Dr. Martin Duerden to AWMSG voicing the concerns of AWPAG. The Chair also agreed to discuss with the AWMSG Chairman whether to take forward the work previously brought to the Group in relation to blood glucose testing.

NJ/MD

15. Allergy Box

The Chairman stated there was no need to consider this item as the amended prescription form had been withdrawn.

16. The use of Multi-compartment compliance aids (MCAs) and monitored dosage systems

Cath O'Brien, Director of Wales for the RPSGB attended for this item to discuss the problems associated with the use of MCAs. She reported that a focus group had convened at the end of December 2005 for the purpose of highlighting the problems, which they had set out in the paper (enclosure 11). The committee agreed that this be taken forward by a working group, with membership as set out in the paper, with the addition of a Chief Pharmacist.

It was agreed that a chair was needed; the committee agreed with a suggestion made by Mrs Kath Haines, who agreed to approach this individual. Cath O'Brien offered to be a repository for the purpose of co-ordinating any information that was available. Kath Haines and John Terry offered to be members of any future working group.

**KH /
CO'B**

The meeting divided into sub-groups to progress agenda items

Inappropriate generics – Mrs. Delyth Simons agreed with the actions of AWMSG with respect to patient safety issues involving generic prescribing. The sub-group suggested consideration should be given to some method of distributing advice through the WeMeRec newsletter which is circulated to include nurse prescribers with a link to their microsite on Howis and the AWMSG/WPM website. Further clarification as to reasoning behind Hyoscine and whether there had been any adverse reports or near misses or whether that led to the result. The sub-group felt a fuller explanation is needed regarding Anadin and Canesten. The sub-group would like to see the following added to the list

- 5.ASA Asacol
- Products containing three or more active ingredients
- Dressings
- Contraceptive pill
- HRT

The group discussed the benefits and pitfalls within generic prescribing focussing on the area where generic prescribing might not be appropriate. The group concluded that in addition to those areas identified by the MHRA it would be appropriate that all medicines containing more than three active ingredients should be prescribed by brand.

WMP

The Chairman then proposed to use this method of working in the future, providing the topics on the agenda were appropriate, and this was agreed by the meeting.

17. Antiplatelet & Statin Template Review

It was suggested that WMP find out who is the overall lead for the cardiac network groups in Wales, and that Mr. Stuart Evans would draft a letter to the appropriate authority for the purpose of feeding this review into the cardiac networks.

**WMP
SE**

18. Any Other Business

- a. Dr. Tessa Lewis asked that the WMP should circulate members of AWPAG with current contact details.
- b. Berwyn Owen asked that WMP place Independent Prescribing as an item on the next AWPAG agenda.
- c. Dr. Martin Duerden to draft together guidelines regarding the use of Fucidin re impetigo and recommended antibiotic with steroids and bring them to the next meeting.

WMP

WMP

MD

- d. Mrs. Delyth Simons asked who is able to witness the destruction of controlled drug waste. Clarification is to be sought from WAG
- e. Regarding the subject of destruction of diabetic waste (sharps etc) the Chairman said that NPHS maybe doing some work in this area.
- f. Update on Herceptin issue – Mrs. Karen Samuels reported that the AWMSG working group on Herceptin is currently progressing this issue in collaboration with representatives from NPHS and the Cancer Network.

WAG

Date and time of next meeting – To be confirmed