Enclosure No:	5/AWMSG/1114
Agenda Item No:	9 – Minutes of AWPAG Meeting 24 <sup>th</sup> September 2014
Author:	Chairman, AWPAG
Contact:	Tel: 029 20716900
	E-Mail: awttc@wales.nhs.uk

### ALL WALES PRESCRIBING ADVISORY GROUP

### Minutes of meeting held Wednesday 24<sup>th</sup> September 2014 commencing 9.30 am At the St Michael's Centre, 10a Pen Y Pound, Abergavenny, NP7 5UD

#### Voting members

Mrs Louise Howard-Baker (Chair) Mrs Jane Barnard Mr Alan Clatworthy Mrs Sian Evans Mr Stefan Fec Miss Sophie Harding Dr Peter Horvath-Howard Mrs Sarah Isaac Dr Susanna Jacks Dr Sue Jeffs Mrs Robyn Miles Mr Jonathan Simms Mrs Fiona Walker Mrs Bev Woods

#### In attendance (non-voting)

Mr Paul Fleming		
Dr Rick Greville, Director		
Mr Paul Gimson		
Karen Eveleigh		
Miss Christine Collier		
Ms Kath Haines		
Mr Jamie Hayes		
Mrs Kate Jenkins		
Dr Tessa Lewis		

Pharmacist, Betsi Cadwaladr Lay member Pharmacist, Abertawe Bro Morgannwg Pharmaceutical Public Health Wales Community Pharmacist Pharmacist, Velindre GPC (Wales) Pharmacist, Velindre GPC (Wales) Pharmacist, Hywel Dda GP, Aneurin Bevan Consultant, Aneurin Bevan ABPI Wales Industry Group Pharmacist, Aneurin Bevan Pharmacist, Cardiff and Vale Pharmacist, Cwm Taf

British Generics Manufacturers ABPI Cymru Wales Public Health Wales Welsh Government AWTTC AWTTC AWTTC AWTTC AWTTC AWTTC

#### Key of abbreviations

ABPI	Association of the British Pharmaceutical Industry
AWMSG	All Wales Medicines Strategy Group
AWMSGSC	All Wales Medicines Strategy Group Steering Committee
AWPAG	All Wales Prescribing Advisory Group
AWTTC	All Wales Therapeutics and Toxicology Centre
CASPA	Comparative Analysis System for Prescribing Audit
CEPP	Clinical Effectiveness Prescribing Programme
	(formerly called the Prescribing Incentive Scheme)
CPW	Community Pharmacy Wales
DHSS	Department of Health and Social Services
GP	General Practitioner
MHRA	Medicines and Healthcare products Regulatory Agency
NMMPB	National Medicines Management Programme Board

NICE	National Institute for Health and Care Excellence
NMG	New Medicines Group
NWIS	NHS Wales Informatics Service
PSU	Prescribing Support Unit
T&FG	Task and Finish Group
UHB	University Health Board
WAPSU	Welsh Analytical Prescribing Support Unit
WeMeReC	Welsh Medicines Resource Centre
WG	Welsh Government

#### 1.0 Welcome & introduction

The Chair opened the meeting and informed the group that Dr Mark Walker had been appointed to AWMSG and therefore would no longer be attending AWPAG and that Dr Sean Young had resigned from the group. The Chair extended thanks to them both for all they have done for AWPAG. The Chair also informed the group that Dr Ashok Rayani had been unwell and Dr Peter Horvath-Howard was attending as his deputy from GPC (Wales). A welcome was also extended to Karen Eveleigh from Welsh Government and to Paul Gimson, Primary Care Lead from the 1000 Lives Programme. Members introduced themselves.

#### 2.0 Apologies

Dr Mark Walker Mrs Karen Samuels Dr Hamsaraj Shetty Mr Andrew Evans Ms Marnel Owen GP, Betsi Cadwaladr AWTTC Consultant, Cardiff and Vale DHSS Community Nurse, Betsi Cadwaladr

#### 3.0 Declaration of interest.

The Chair asked for any declarations of interest. Mrs Robyn Miles declared interests pertinent to the meeting.

#### 4.0 Chair's report

The Chair informed the meeting that a project proposal for a Welsh Lexicon for labelling medicines is currently being considered, and gave a brief update on the Trusted to Care report.

#### 5.0 Minutes of previous meeting

The minutes of the previous meeting were checked for accuracy. Tessa Lewis asked for it to be noted that her attendance should now be entered onto the minutes under the non-voting section as member of AWTTC. It was agreed the minutes were an accurate reflection of proceedings.

The Chair asked for an update of the action points:

#### Role of Oral Anticoagulants for the Prevention of Stroke and Systemic Embolism

Tessa Lewis informed the group that this paper had now been endorsed by AWMSG.

## Dose Taper and Discontinuation of Biologics in Low Disease Activity Rheumatology

Kath Haines informed the group that Jayne Price is still working on the points for clarification requested from the last meeting

#### **BNF Chapter Analysis: Respiratory Therapeutic Area**

Kath Haines informed the group that this paper is going to AWMSG on 8 October 2014 as the "GP Cluster Level Comparators" paper.

#### 6.0 Feedback from AWMSG meetings held 16 July and 3 Sept 2014 Polypharmacy – Guidance for Prescribing in Frail Adults

The Polypharmacy – Guidance for Prescribing in Frail Adults document was supported by AWMSG in July 2014. Positive feedback and requests to use the document were reported from NICE, Welsh Government and the Centre for Medicines Optimisation, Keele University. A letter had been received from the Chair of the National Specialist Advisory Group for Older People with positive comments about the guidance. The group questioned how it was to be implemented and suggested the inclusion of a summary. Sarah Isaac suggested Appendix 2 as a useful summary and agreed to share the PowerPoint presentation she has used in Hywel Dda.

The recently established Prudent Prescribing Implementation Group can help with implementation of AWPAG guidance, including the polypharmacy document. JH will liaise.

#### Action: LHB to talk to Prof John Hindle.

Action: AWTTC/LHB to continue working with interested parties to support the implementation of the guidance.

#### Pharmacotherapy for Smoking Cessation

Pharmacotherapy for Smoking Cessation was endorsed by AWMSG in July 2014.

#### All Wales Advice on the Role of Oral Anticoagulants

The All Wales Advice on the Role of Oral Anticoagulants document was endorsed by AWMSG in September 2014. Minor edits had been made and resources updated. It was felt that some further alteration in relation to the NICE Clinical Guidelines for AKI could not be made without consultation.

#### NPIs 2013–2014: Analysis of Prescribing Data to March 2014

NPIs 2013–2014: Analysis of Prescribing Data to March 2014 document was supported by AWMSG in September 2014.

Paul Gimson joined the group.

## 7.0 Presentation – National prescribing Indicator (NPI) related outcome measures proposal – Paul Gimson

The Chair welcomed Paul Gimson, Primary Care Manager at 1000 Lives who presented the NPI related outcome measures proposal and highlighted the need for NPIs to support key principles of prudent prescribing. It was suggested that NPIs should become more outcome-focused and that 1000 Lives could support this. Difficulties with availability of outcome data were raised. Need to clarify the purpose of NPIs and who they are intended for, together with the context of their criteria for measurement.

The group agreed that antidepressant and respiratory prescribing could be investigated as possible areas where NPIS could become more outcome focused. It was suggested that WAPSU pursue respiratory data and 1000 Lives look at antidepressants, with support from each other.

Action: Two groups to report back to December AWPAG meeting.

Action: KH and PG to co-ordinate the respiratory and antidepressant work respectively.

Action: JS and BW to support respiratory work.

Action: **PF** to provide feedback on the medicines optimisation document when it is ready to a future AWPAG meeting.

Karen Eveleigh left the meeting.

Jane Barnard joined the meeting.

Jonathan Simms and Sarah Isaac left the meeting during the next item.

#### 8.0 Documents for discussion

#### 8.1 National Prescribing Indicators 2015–2016

Kate Jenkins presented the proposed NPI 2015–2016 document and referred to the notes of the AWPAG Task and Finish Sub-Group held on 21 July 2014 plus a circulated key discussion document. Discussion then followed on the document in general; order of the document, the setting of thresholds, decision support tools (e.g. ScriptSwitch) and the development of key messages. The group agreed that a summary document and PowerPoint support material would be useful and that formalised shared learning should be developed. It was requested and agreed that English averages were included within the graphs/data.

Each proposed NPI was then discussed in detail, as to whether it should be included as a NPI and the appropriate measure used.

Proton pump inhibitors, lipid modifying drugs, hypnotics and anxiolytics, opioid analgesics, NSAIDs and yellow card reporting were supported by the group with some minor amendments to the supporting information

Inhaled corticosteroids - KJ circulated further graphs to show alternative measures to the one proposed in the document. Following lengthy discussion it was agreed to monitor all low dose inhaled corticosteroids. The All Wales Primary Care Pharmacists group will be approached to check and agree the final drug baskets for this measure.

Antibiotics – the proposed revised measures were agreed for the individual antibiotics/ groups of antibiotics. It was agreed that annually monitoring data to December would be appropriate to identify whether or not prescribing was reducing.

Drug baskets and measures for tramadol and NSAIDs were discussed following feedback from health boards; however the group agreed with the proposals of the subgroup and the measures remained unchanged

TL proposed the inclusion of an alternative, that is, non-drug measure for a NPI around patients on oral anticoagulants receiving a baseline bleeding risk assessment or a record of Time in Therapeutic Range. The group discussed the proposal and although the suggestion was supported, it was felt that it should not be included as a NPI at this point because they aren't readily available measures.

Action: AWTTC to explore authoring prescribing decision support message (ScriptSwitch) to support AWTTC projects.

Action: KJ to revise the document for consultation and present final document to December AWPAG meeting.

Action: KJ to approach Primary Care Pharmacists group to check drug baskets. Action: BW to propose a project on morphine use in chronic pain, to reduce its association with palliative care only.

#### 8.2 Advice on the Role of Oral Anticoagulants – Supporting documents

Tessa Lewis presented the Advice on the Role of the Oral Anticoagulants – Supporting documents. The group were informed that QOF had now been updated regarding use of aspirin in AF. Discussion followed and it was agreed that in recommendation 1.1 of the Questions for Health Boards the section on flu clinics should be removed. The group also discussed the Summary for Patients and it was agreed that this needed rewording. Rick Greville, Alan Clatworthy and Jane Barnard agreed to forward rephrasing suggestions outside of the meeting.

Action: AWTTC to update documents, share with AWPAG (who will share more widely) then PAPIG, then present to AWMSG for information.

#### 9.0 Verbal updates

#### 9.1 Prescribing Dilemmas

Tessa Lewis gave a verbal update on the Prescribing Dilemmas document. Dr Rob Bracchi is supporting this project and will contact contributors individually to clarify any outstanding issues. It was agreed that the section on HPV should be removed.

Action: Updated document and any outstanding issues to December AWPAG meeting.

#### 9.2 Bisphosphonates

Kate Jenkins informed the group that the Bisphosphonates paper had been put out to consultation and that debate about the content had arisen. The paper will be discussed at the WOAG meeting in November, and will be amended as appropriate and then presented to AWPAG in December 2014.

Action: AWTTC to amend following WOAG meeting and present at December AWPAG meeting.

#### 9.3 Medicines-related Admissions

Jamie Hayes updated the group on the Medicines-related Admissions work. Currently this project is being undertaken in Wrexham and is soon to be presented to the ABPI. A WeMeReC Bulletin regarding medicines-related admissions is due to be released in October 2014.

Action: JH to update members on progress at December AWPAG.

# **9.4 Dose Taper & Discontinuation of Biologics in Low Disease Rheumatology** Work is ongoing.

Action: Jayne Price to update members on progress at December AWPAG.

#### 9.5 Antibiotic Audit Outcomes

Tessa Lewis gave an update on the Antibiotic Audit Uptake. Outcomes are also being collated though fewer responses had been recieved. A suggestion was made for the audit to be given to medical students, or registrars for appraisal/revalidation support **Action: Members to send any further results to AWTTC.** 

Action: AWTTC to continue to collateaudit results and CEPP plans including tramadol, and present to PCDG.

#### **10.0 Feedback from the All Wales Chief Pharmacists Committee (AWCPC)**

There were no items of note.

#### 11.0 AOB

There was no other business and the meeting closed.

#### The date of next meeting – Wednesday 10<sup>th</sup> December 2014