Enclosure No:	4 /AWMSG/0312
Agenda Item No:	8 – AWPAG update
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ALL WALES PRESCRIBING ADVISORY GROUP

Minutes of meeting held Thursday, 26th January 2012 at 10.00 am At the St Michael's Centre 10a Pen Y Pound, Abergavenny, NP7 5UD

Members

Dr Tessa Lewis (Chair) GP, Aneurin Bevan

Ms Jane Barnard Lay Member

Mrs Nuala Brennan Public Health Wales
Mr Stefan Fec Community Pharmacist

Mr Paul Fleming British Generic Manufacturers (non-voting)

Mr Rick Greville Director, ABPI Wales (non-voting)

Miss Sophie Harding Pharmacist, Velindre Pharmacist, Hywel Dda Dr Susannah Jacks GP, Aneurin Bevan

Dr Sue Jeffs
Mrs Robyn Miles
Dr Hamsaraj Shetty
Mr Jonathan Simms
Mrs Fiona Walker
Dr Mark Walker
Consultant, Aneurin Bevan
Consultant, Cardiff & Vale
Pharmacist, Aneurin Bevan
Pharmacist, Cardiff & Vale
GP, Betsi Cadwaladr

Dr Sean Young GP, Abertawe Bro Morgannwg

In attendance

Mrs Susan Cervetto, Senior Pharmacist, Welsh Medicines Partnership Mr Jamie Hayes, Director WeMeReC & Welsh Medicines Partnership Ms Kath Haines, Head of the Welsh Analytical Prescribing Support Unit Miss Samantha Webster, Appraisal Scientist, Welsh Medicines Partnership

Key of abbreviations

AWMSG All Wales Medicines Strategy Group

AWMSGSC All Wales Medicines Strategy Group Steering Committee

AWPAG All Wales Prescribing Advisory Group

CASPA Comparative Analysis System for Prescribing Audit

CEPP Clinical Effectiveness Prescribing Programme (formerly called incentive scheme)

CPW Community Pharmacy Wales

DH Department of Health GP General Practitioner

MHRA Medicines Health and Regulatory Authority
MMPB Medicines Management Programme Board

NMG New Medicines Group

NICE National Institute for Health and Clinical Excellence

NSAIDs Non steroidal anti inflammatory drugs

PSU Prescribing Support Unit
SLA Service Level Agreement
T&FG Task and Finish Group
UHB University Health Board

WAPSU Welsh Analytical Prescribing Support Unit

WG Welsh Government

WeMeReC Welsh Medicines Resource Centre

WIS Welsh Informatics Service WMP Welsh Medicines Partnership

1.0 Welcome & introduction

The Chair opened the meeting and welcomed Mr Stefan Fec, Community Pharmacist and Miss Sophie Harding, Pharmacist representing Velindre NHS Trust

2.0 Apologies:

Professor Roger Walker
Mr Dave Hopkins
Ms Marnel Owen
Mr Stuart Evans
Mrs Louise Howard-Baker

3.0 Declarations of interest

Mrs Robyn Miles declared a non specific, non personal interest as her parent company GlaxoSmithKline had co-promoted a product for erectile dysfunction with Bayer Plc. This was around 6 years ago and GlaxoSmithKline has no further involvement in this area.

4.0 Chairs report

The Chair reported that Mr John Terry and Mrs Judith Vincent had fulfilled their term of office and thanked them for their valued input to the group. The Chair invited nominations for the position of AWPAG Vice-Chair. The Chair reported that the process for submitting project proposals to AWPAG had been reviewed and the documentation would be discussed further later in the meeting.

Action

All members invited to nominate a member to serve as Vice-Chair

5.0 Minutes of previous AWPAG meeting – October 2011

The minutes were checked for accuracy. Dr Sean Young pointed out that his name and region required correction.

Matters arising not on the agenda:

Dr Rick Greville informed the group that a proposal document has been initiated recently to form stronger links between NICE and Welsh Government with regards to the NICE Quality Standards etc. Dr Greville agreed to provide a copy of the document for to be distributed with these minutes. Rick Greville sought clarification as to whom companies informed if they had any comments regarding the National Prescribing Indicators. The Chair recommended informing WMP.

LMWH

The Chair gave a brief update regarding the prescribing of LMWH in pregnancy. AWMSG had previously endorsed five recommendations in relation to the prescribing of low molecular weight heparin (LMWH) in Wales. These had covered the most common scenarios, but there was an outstanding issue in relation to prescribing prophylactic LMWH in pregnant women where high body mass index was a risk factor. Following the presentation given by Dr Phil Banfield at the last meeting of AWPAG he had taken AWPAG's recommendations to the Transforming Maternity Services Mini-Collaboration1000 Lives. He has subsequently informed the Chair that the gynaecology profession were happy that LMWH in pregnancy was prescribed by secondary care. Dr Banfield will be taking this for sign off by the Welsh Executive Committee and if successful will take the recommendation forward to AWMSG. AWPAG members supported this approach.

6.0 Analgesics Patient Information Leaflet

The Chair reported that the leaflet had been supported by AWMSG at their meeting in November 2011 and that it was currently being prepared by a media company on behalf of WMP. Once finished both colour and black and white versions will be available to download from the AWMSG website. There was a question regarding distribution to community pharmacists who do not have electronic access. Ms Nuala Brennan informed the Chair that next year there may be an opportunity to create a campaign around the safe use of analgesics, aimed at community pharmacists.

ACTION

Dr Susannah Jacks/Sue Jeffs to look at distribution & develop dissemination email

7.0 Prescribing Status of dronedarone (Multag®)

The Chair reported that the Prescribing status of dronedarone (Multaq®) paper was supported by AWMSG at their meeting in November 2011 and was now available on the AWMSG website. The Chair asked for any update from around the table regarding the uptake within each of the Health Boards in Wales. There were no issues of note.

8.0 Patient information at the point of discharge – Medicine Reminder Charts

The Chair reported that the paper had been supported by AWMSG at their meeting in December 2011 and invited Mrs Jane Barnard to give an update. Implementation was now dependent on the acceptance by MTCs and also the development of IT within the Health Boards.

9.0 National Prescribing Indicators 2012-2013

The Chair reported that this paper was supported by AWMSG at their meeting in December, albeit with several amendment to the supporting text. There were no changes to the actual indicators.

Ms Kath Haines provided members with prescribing data for three of the indicators, antibacterial, hypnotics and NSAIDs which will be measured by "specific therapeutic group age—sex related prescribing units" (STAR PUs).and these were discussed at length Members agreed that although STAR PUs are based on English data there is a reasonable data match with the previous measure of prescribing units (PU). The change will enable benchmarking with "Quality, innovation, productivity and prevention" (QIPP) comparators in England. Indicators measured by PU in previous years will continue to be monitored for comparative trend analysis.

The Chair informed the meeting of feedback from the Welsh Endocrine and Diabetes Society who questioned AWPAGs engagement with the All Wales Diabetes Forum with regard to the insulinanalogue indicator. The Chair has since given both groups further opportunity to comment, with a deadline of today, but had not received any comment to date. It was agreed that the AWPAG sub group would look at the comments when received and respond accordingly.

ACTON

AWPAG sub group to respond to AWDF comments when received. Fiona Walker to join the strategic intervention group

10.0 Guidance on prescribing for erectile dysfunction

The Chair presented a draft paper recommending that the Welsh Health Circular be updated and that continued prescribing for erectile dysfunction causing severe distress is suitable for primary care prescribing. The chair sought comment regarding once daily preparations. Dr Rick Greville informed the meeting that three companies currently involved in promoting erectile dysfunction treatments had been invited to comment and these comments had been passed to the Chair. The companies also made reference to guidelines produces by the British Society of Sexual Medicines with regard to once daily preparations and requested that AWPAG continue to consult them during the development of this paper. Members were supportive of the recommendation relating to once daily use.

The group discussed the initial assessment of patients with severe distress resulting from erectile dysfunction and the term "Specialised Services" as these differed in each Health Board. The

meeting was informed that industry maintains a watch list of falsified medicines and these are mainly treatments for erectile dysfunction. There is a risk that patients denied access to treatment by GPs or specialised services will often seek to obtain treatments elsewhere and not all of these are regulated.

It was agreed that there is a need for clear guidelines within each Health Board to ensure that an adequate initial clinical assessment is made by a clinician with the appropriate expertise.

The Chair suggested that a sub group reviews the paper in light of the comments received and discussion and prepares revised wording for the assessment recommendation.

ACTION

AWPAG sub group to revise the recommendation wording (MW, SY, JS and FW) Paper to be submitted to AWMSG

11.0 MDS Standards

The Chair provided the background – in March 2011 AWMSG endorsed minimum standards for patients admitted on Monitored Dosage Systems (MDS) and requiring one at discharge. This process was proposed as an interim measure where hospitals were unable to provide discharge medication directly, providing a simpler model with few hand-offs compared with other models. The group reviewed the paper in detail and the amendments were noted.

There was a proposal to add a standard for the speed of discharge information. The Chair agreed to speak to Welsh Government to how this would fit with other work streams and the electronic discharge project.

It was agreed that the updated paper should be sent for consultation to Community Pharmacy Wales, GPC Wales, Local authorities and MTCs.

ACTION

Dr Susannah Jacks to finalise the paper for consultation and discussion at AWPAG in April 2012

12.0 Promoting rational contraceptive prescribing

The Chair invited Ms Nuala Brenan to present the proposal for prescribing guidelines and the development of relevant prescribing comparators to aid the promotion of agreed prescribing guidance. The use of branded generics was discussed for new patients rather than switches. It was considered that these may be addressed via scriptswitch messages rather than a national recommendation. The comparator baskets were discussed with a preference for positive rather than negative baskets if possible. The use and measures of reversible long acting contraceptives were discussed and Ms Brennan agreed to enquire about further data from family planning clinics. The paper included a flow chart from Greater Glasgow and Clyde NHS which could be used as a template for a prescribing flow chart for Wales. This approach was supported by members. It was proposed that WeMeRec be approached to produce an educational pack for the initiation of contraceptive prescribing for clinicians and nurses. The need for consultation with industry was noted.

ACTION

Ms Nuala Brennan to develop flow charts as guidelines and update the proposed comparators for April AWPAG meeting

13.0 CEPP - National Audits

The Chair provided the background and invited members who had volunteered to undertake a pilot audit to present their results:

13.1 Lithium

Mrs Fiona Walker presented the proposed lithium national audit designed to ensure the implementation in GP practices of the five recommendations contained in the National Patient Safety Agency (NPSA) patient safety alert "Safer lithium therapy". Minor

amendments were suggested for the supporting information. It was agreed to establish whether all regions now had a lithium shared care protocol.

After a brief discussion it was agreed to recommend this as a national audit.

ACTION

To be submitted to AWMSG as a national audit 2012/13

13.2 Depression

Dr Sean Young presented the findings of his audit designed to help provide more appropriate management of depression in a primary care setting. Dr Mark Walker gave feedback from the audit trial conducted within his practice. He reported that there were issues with coding in practice and the recording of self harm should be considered. Dr Rick Greville suggested that consultation be made with Wales Mental Health. Members were asked to submit any further comments to Dr Young. Members agreed that following the amendments advised, the audit is suitable for AWMSG

ACTION

Members to submit comments to Dr Sean Young by 9th February 2012 To be submitted to AWMSG as a national audit 2012/13

13.3 Repeat prescribing systems

Dr Susannah Jacks presented a proposed audit designed to improve the quality of repeat prescribing policies and systems. It gives general practitioners the opportunity to reflect on their repeat prescribing procedures and compare how current repeat prescribing reflects the practice policy and repeat prescribing best practice standards. Mr Jonathan Simms noted that repeat dispensing is in this years AOF target. The paper was discussed in detail.

ACTION

Members to submit any further comments to Dr Susannah Jacks by 17th February 2012

Updated paper to be piloted prior to consideration by AWMSG as a national audit 2012/13

14.0 CEPP – Local comparators

The Chair invited Ms Kath Haines to present data relating to local comparators suggested by the subgroup. These will be available for both local and national comparative measurement as necessary in accordance with local prioritisation. The previous year's national indicators which have been retired will continue as comparators. An updated list will be provided to AWPAG members and subsequently circulated to Chief Pharmacists and medicines and therapeutics committees. Those comparators requiring further investigation of measure will be considered further by members at the April meeting.

ACTION

KH to update comparator paper with supporting information for prescribers and circulate to members

15.0 Anticoagulation monitoring - Warfarin

The Chair presented a paper highlighting changes in best practice for the monitoring of warfarin therapy which aims to reduce harm to patients and reduce variations in service provision. The work was developed following a multi-professional meeting of representatives across wales. The key recommendations were highlighted and the group were asked for comment. The stated duration of treatment for patients with an unprovoked proximal DVT or PE was questioned. Consistency of the exemplar risk assessment with existing national tools was discussed. Members supported the paper and advised that it should be available for a short consultation prior to review by AWPAG in April and subsequently AWMSG.

Members considered the remaining warfarin work streams and were supportive of taking these forward.

ACTION

Paper to be updated prior to circulation for consultation

16.0 Consideration of future work programme items:

16.1 Update on statin template

The Chair informed the meeting that the statin template had originally been removed from the AWMSG website to update it into a lipid therapy guideline, however NICE are currently reviewing their lipid therapy guidance and that outcome is awaited. In the mean time the template has been updated to include the latest MHRA advice re: simvastatin dosing at 80mg. The updated template was discussed by the group and it was agreed that following minor amendments it should be uploaded to the AWMSG website.

ACTION

Updated version to be circulated to members with tracked changes To be re published on AWMSG Website

16.2 Paediatric steroid card

Dr Rebekah Pryce, Paediatric Consultant, Singleton Hospital has submitted a project proposal to develop an All Wales paediatric steroid card. Whilst not present at the meeting, she has agreed to lead the development with support from AWPAG. This project was accepted, the documentation to be considered in detail at a future AWPAG meeting. **ACTION**

Chair to take recommendation to AWMSG SC and WMP support staff to contact Dr Pryce if agreed

16.3 Drug monitoring pack

The Chair informed the meeting that NPHS had requested AWPAG assistance in the updating of their Drug Monitoring Pack which includes guidelines for monitoring drugs which have potentially serious side effects. This compliments the previous AWMSG paper on shared care drugs requiring clear commissioning arrangements. The group was supportive of such national guidance

16.4 Drug monitoring and shared care

Dr Sean Young presented a proposed project to review shared care. The current National Enhanced Services (NES) around shared care are complex and difficult to understand. It is proving difficult for practices to manage, challenging for post payment verification (PPV) to monitor and is not helpful for patients. They are also inconsistent and have variation across Wales, which does not help management across health boards. Consideration needs to be given to simplifying the process and making it fit for purpose. Following discussion there was support for developing this project.

ACTION

Dr Young to present draft guidance at AWPAG in April 2012

16.5 Antimicrobial therapy – appropriate testing

The Chair informed the group that at the last meeting of the Antimicrobial Stewardship Forum the issue of appropriate swabs and samples was raised. The Chair proposed that that a working group be established to look at this. There was support for progressing the issue via a subgroup.

17.0 AWPAG Process and timelines

The Chair presented draft timelines for comment in the form of a flow diagram. Dr Rick Greville questioned the timing of the availability of papers for consultation, particularly if industry is invited to comment. The Chair clarified the point at which the documents would be available for comment. Members discussed when papers should be available prior to AWPAG meetings and agreed that 10 days was adequate. It was agreed that 2 AWPAG meetings may not always be necessary particularly if a paper has been well developed by a subgroup. Flow chart to be amended to allow bypassing of second meeting if members have given agreement.

18.0 Formulary and Interface Pharmacists - Terms of Reference

Draft Terms of Reference for the AWPAG Formulary Group (formerly known as the Welsh Interface Pharmacists Group) were presented for comment. There followed discussion regarding the name of the group, with several suggestions being made. Members were asked to submit

further comment to WMP. Dr Rick Greville requested if there could be industry involvement in the group. The Chair stated that this had previously been considered but not actioned as it was a working group whose output would come via the multiprofessional forum at AWPAG. The presented membership was discussed and agreed.

ACTION

Members to submit comments to WMP

19.0 AWPAG Membership

The Chair gave a brief update regarding membership of AWPAG and the current membership table for presented for information.

20.0 National Medicines Management Board

There was no representation from the All Wales Chief Pharmacists Committee and no issues of note.

21.0 All Wales Chief Pharmacists Committee

There was no representation from the All Wales Chief Pharmacists Committee and no issues of note.

22.0 Welsh Informatics Service/NWIS

There was no representation from NWIS and no issues of note.

23.0 Any other business

Breaking Down Barriers between GPs and Community Pharmacists

Dr Susanna Jacks informed the group that The Royal College of General Practitioners (RCGP) and the Royal Pharmaceutical Society (RPS) have produced a joint statement detailing how GPs and community pharmacists can work together to improve the care provided to patients in the community.

The date of the next meeting was confirmed as Thursday, 26th April 2012 at the St Michaels Centre, Abergavenny