

Enclosure No:	6/AWMSG/0011
Agenda Item No:	10 – AWPAG update
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ALL WALES PRESCRIBING ADVISORY GROUP

**Minutes of meeting held Thursday, 6th
October 2011 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 Stuart Evans	Pharmacist & Healthcare professional eligible to prescribe
Mr Paul Flemming	British Generic Manufacturers (non-voting)
Mr Richard Greville	Director, ABPI Wales (non-voting)
Mrs Louise Howard-Baker	Pharmacist, Betsi Cadwaladr
Mrs Sarah Isaac	Pharmacist, Hywel Dda
Dr Susannah Jacks	GP, Aneurin Bevan
Dr Sue Jeffs	Consultant, Aneurin Bevan
Ms Robyn Miles	ABPI Industry Representative
Ms Marnel Owen	Nurse & Healthcare professional eligible to prescribe
Dr Ashok Rayani	GP (link with GPC Wales)
Dr Hamsaraj Shetty	Consultant, Cardiff & Vale
Mr John Terry	Pharmacist, Abertawe Bro Morgannwg
Mrs Fiona Walker	Pharmacist, Cardiff & Vale
Dr Mark Walker	GP, Betsi Cadwaladr
Dr Sean Young	GP, Abertawe Bro Morgannwg

In attendance

Professor Roger Walker, Chief Pharmaceutical Officer, Welsh Government
Mrs Susan Cervetto, Senior Pharmacist, Welsh Medicines Partnership
Mr Jamie Hayes, Director WeMeReC & Welsh Medicines Partnership
Mrs Ruth Lang, Liaison Manager, Welsh Medicines Partnership
Ms Kath Haines, Head of the Welsh Analytical Prescribing Support Unit
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 Mrs Marnel Owen, a district nurse representing 'other professions eligible to prescribe'.

2.0 Apologies:

Mrs Judith Vincent
Mrs Jonathan Simms
Mr Dave Hopkins

3.0 Declarations of interest

4.0 Chairs report

The Chair confirmed that the prescribing dilemmas paper had been endorsed by AWMSG and made available to NHS Wales. Dr Lewis reported that a task and finish group would be meeting tomorrow to discuss issues relating to the prescribing of warfarin. The Chair confirmed the approval of the AWMSG Steering Committee that Dr Mark Walker and Dr Sue Jeffs be appointed as full members. It was reported that Mr William Duffield had fulfilled his term of office and the Chair invited nominations for the position of AWPAG Vice-Chair. It was confirmed that the All Wales Chief Pharmacists Group would be invited to review the pharmacist representation on AWMSG and its sub-groups.

Action

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

5.0 Minutes of previous AWPAG meeting – July 2011

The minutes were checked for accuracy. No changes were made.

Matters arising not on the agenda:

Clarification was sought in relation to the NICE quality standards.

6.0 Analgesics leaflet

The Chair invited Dr Sue Jeffs to update members in relation to the patient information leaflet developed by AWPAG to provide patients with information to enable them to use analgesic medicines safely and effectively. This issue relates to Recommendation 34 of the AWMSG Medicines Strategy for Wales – 'AWMSG will raise awareness of the risk to health outcomes of poor concordance and, with stakeholders, develop ways to improve concordance and engage patients in better utilisation of medicines'. Susanna Jacks provided feedback from a small user survey within general practice. Members were invited to comment on the paper and the Chair confirmed it is intended that the paper would be presented to AWMSG for endorsement. Identified members of the working group agreed to update the paper in light of comments received, liaise outside of the meeting to finalise the document, and forward the final document to WMP. It was clarified that WMP would undertake a technical edit and seek approval of the AWMSGSC for the document to be presented to AWMSG for endorsement.

Action

Authors to update document and provide final draft to WMP for edit / translation / media input

Paper to be presented to AWMSG in November 2011

7.0 Dronedaron

The Chair provided the background and asked members to review the prescribing status of dronedarone in light of the EMA statement and recommend that dronedarone should be prescribed and monitored by specialist teams only. It was confirmed that the manufacturer had been involved in the discussions prior to the EMA statement. The Chair confirmed that an updated copy of the document would be provided. There was discussion in relation to monitoring and consultation with the cardiologists. It was agreed that the paper should be forwarded to the Cardiac Network representative on the AWMSG Steering Committee.

Action

Chair to provide copy to the Cardiac Network representative on the AWMSGSC

Chair to provide updated copy to the manufacturer

Paper to be presented to AWMSG in November 2011

8.0 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. Subsequently, AWPAG considered the process could be simplified further and undertook two small surveys to allow basic quantification of the problems. Findings from this work had been summarised, key themes developed into standards of good practice, and these were presented to AWPAG for discussion. There was discussion in relation to education and training, and the quality of information provided to patients on discharge. Members noted the potential role of Community Pharmacy Wales in supporting this process. The Chair concluded the discussion by confirming the need to finalise the Standards and provide the document for consultation.

Action

Identified members of the AWPAG T&FG to liaise outside of the meeting, update the document in light of comments and share with other interested parties

T&FG to bring the paper back to AWPAG for further comment in January 2012

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

The Chair provided the background to the agenda item. The AWPAG patient representative had asked AWPAG to propose measures to promote the provision of patient held medicines reminder charts, to include telephone contact numbers, for use by patients when transferring between care settings and community prescribers. Members noted the Royal Pharmaceutical Society guidance entitled 'Help get the right medicines when you move care providers' issued in July 2011. It was agreed that any Medicine Reminder Chart endorsed by AWPAG should support and supplement existing guidance and standards. The Chair invited comment on the paper, including the minor amendments to the medicine reminder leaflet and template medicine reminder chart currently in use within Abertawe Bro Morgannwg health board. Members agreed that templates provided patients with clear and concise information for local adaptation and that the focus on the point of discharge should be retained. Members agreed that development of information technology would be important to support the process. The patient representative agreed to work with WMP/TL to update the document in light of the comments. The Chair concluded the discussion by confirming that the final version of the paper would be provided to WMP for a technical edit and the approval of the AWMSGSC would be sought for presentation of the documents to AWMSG.

Action

Authors to update document and provide final draft to WMP for edit

Paper to be presented to AWMSG at a future meeting

10.0 National Prescribing Indicators 2012-2013

The Chair informed members that the Indicator Working Group had met on 13th September to review the current national indicators and make recommendations for those to be considered for 2012-2013. The indicators proposed by the working group were individually considered by AWPAG. Mrs Haines presented the evidence supporting each indicator and agreed to update the

draft paper in light of the comments received. The Chairman confirmed that the updated paper would be circulated to all AWPAG members so that informal consultation on the national indicators proposed for 2012-2013 could be undertaken prior to the AWMSG Steering Committee meeting on 24th November. Several new local comparators were recommended by the Indicator Working Group and these will be considered in detail at AWPAG Jan 2012 meeting.

Action

WAPSU/WMP to update document and provide final draft to members for informal consultation with colleagues

Paper to be presented to AWMSG in December 2011

11.0 Feedback from the joint meeting with the Antimicrobial Stewardship Forum

The Chair confirmed that a joint meeting had been held by WMP and the Antimicrobial Stewardship Forum to promote appropriate antimicrobial prescribing within NHS Wales. Key messages were discussed by the working group and areas for prioritisation identified. A key outcome from the meeting was that appropriate antimicrobial prescribing guidelines currently exist and there is a need for these guidelines to be promoted and adhered to, and any deviation identified. The leadership role of clinicians was highlighted. Members were invited to contact the chair if they were interested in the work to progress the meeting outcomes.

12.0 CEPP – National Audits

The Chair provided the background and invited members to consider options for a national audit as part of the CEPP. The potential to promote more than one national audit was highlighted. The following were considered:

- Antipsychotics in patients with dementia: Cardiff and Vale 1000 lives audit is part of ongoing work, it was considered useful and could be signposted to Medicines Management teams.
- Yellow card reporting could be considered by health boards as one of the 3 actions which are agreed at the yearly QoF Medicines Management practice visits.
- Initiatives to support prescribers in the review of patients using complex medicines regimes
- Adherence to antimicrobial guidelines and other outcomes identified at the joint WMP/Antimicrobial Stewardship Forum. (see above 11.0)

The following three quality audits were prioritised and members volunteered to undertake a pilot.

Lithium

Depression

Repeat prescribing systems

13.0 Erectile dysfunction

The Chair referred members to WHC (99) 148 and asked them to consider whether this guidance required re-issue in a similar format, or whether it should be changed. Members also considered comments from the Welsh Interface Pharmacist meeting, the Scottish government guidance issued in February 2011, the BNF 62 and the NHS Executive Health Service Circular HSC 1000/148. Members agreed there is a need for equity as there is currently variation across Wales in the management of erectile dysfunction. Members discussed the issue of severe distress, the most appropriate place for initiation of treatment was debated. For ongoing prescribing it was agreed the prerequisite currently in the guidance that patients should obtain prescriptions from specialist services should be removed, and that wording be included to reflect that prescribing may be undertaken in primary care.

Action

Welsh Government representative to consider AWPAG comments for updated guidance to NHS Wales

Post meeting note – recommendations to be progressed via AWMSG

14.0 Low Molecular Weight Heparin (LMWH) prophylaxis in pregnancy

The Chair invited Dr Phil Banfield, AWMSG Consultant representative, Consultant in Obstetrics and Gynaecology, and Faculty Lead 1000 Lives plus Transforming Maternity Services Mini-collaborative, to provide the background to the agenda item. In March 2010 AWMSG had endorsed five recommendations in relation to the prescribing of low molecular weight heparin

(LMWH) in Wales. These covered the most common scenarios and should be read in conjunction with the good practice points which were established subsequently. There was an outstanding issue in relation to prescribing prophylactic LMWH in pregnant women where high body mass index was a risk factor. A document prepared by the Transforming Maternity Services Mini-collaboration 1000 Lives Campaign was discussed. The aim was noted - to reduce the risk of venous thromboembolism in pregnancy, whilst optimising the number of women being given LMWH prophylaxis, which itself may have direct and indirect adverse consequences. Members welcomed the clarification and recommendation which includes BMI over 45 as part of a DVT risk assessment at booking. Members agreed that the prescribing status recommendation should be specialist initiation but there was mixed feeling amongst members regarding subsequent prescribing and monitoring. In drawing the discussion to a close, the Chair suggested that AWPAG could develop a shared care protocol template. Dr Banfield agreed to relay the comments received and seek the views of the Collaboration with regard to the development of a shared care template for local adoption and adaptation.

15.0 Gluten-free prescribing

The Chair invited Dr Susanna Jacks to provide the background to the agenda item. Dr Jacks explained that she had been part of a MMPB T&FG to address issues relating to the supply of gluten free products on prescription within NHS Wales. The T&FG briefing, which detailed the issues addressed and those supported by the group, was considered by members. The Chair clarified that the final version of the briefing would be presented to AWMSG at a future meeting for endorsement, and asked members to consider whether AWPAG supported the recommendations. Members agreed there is a need for equitable service and noted the inconsistencies in current practice. AWPAG supported the recommendations in the briefing to ensure this area is managed effectively and endorsed the paper.

Action

Final version of the paper to be approved by AWMSGSC in October for presentation to AWMSG in November

Chair to relay the endorsement of this briefing by AWPAG to AWMSG

16.0 Non-medical prescribing

The Chair invited members to endorse the paper developed by Mr Marc Donovan, Community Pharmacist, to support and promote non-medical prescribing within NHS Wales. The Chair confirmed that this issue had been progressed and supported by the National Medicines Management Programme Board. Members were informed that the paper is to be presented to AWMSG on 12th October. Members considered the paper and there was support for the recommendations.

Action

Author to present the document to AWMSG in October

Chair to relay the endorsement of this paper by AWPAG to AWMSG

17.0 Medicines Management Programme Board meeting September 2011

The draft minutes of the NMMP were circulated to members for information. It was noted that all health boards had agreed to highlight the range of products available for purchase from pharmacies, and encourage patients to make better use of the community pharmacy.

18.0 All Wales Chief Pharmacists Committee

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

19.0 Welsh Informatics Service / NWIS

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

20.0 Combined Oral Contraceptives

Members were asked to consider whether there would be support for an All Wales formulary for oral contraception. It was agreed that a discussion document would be presented at the next meeting.

Action

NB to present paper to AWPAG in January 2012

21.0 AWMSG July 2011

The draft minutes of the AWMSG meeting held in July 2011 had been circulated for information.

22.0 Future work programme

The Chair asked members if there was interest in developing a national shared care protocol for prescribing apomorphine to support consistency in practice across Wales. Members were not aware of problems relating to apomorphine prescribing. Members agreed to enquire locally and advise WMP if the issue needs to be progressed.

The Chair asked members whether they wished to contribute or comment on the draft Proton Pump Inhibitor (PPI) toolkit which is intended to be presented to AWMSG.

Action

WAPSU to circulate toolkit to AWPAG members for comment outside of the meeting

23.0 Any other business

Increased usage of chlorhexidine gluconate 2.0% w/v in isopropyl alcohol 70% v/v (ChloraPrep®) within NHS Wales

Members were informed that at the AWMSG Steering Committee meeting held 25th August 2011, the increased usage of chlorhexidine gluconate 2.0% w/v in isopropyl alcohol 70% v/v (ChloraPrep®) was highlighted. As a result of the discussion, the Welsh Medicines Partnership (WMP) was requested to provide a status report in relation to ChloraPrep® and this had been circulated to AWPAG members for comment. It was noted that when this medicine had received its licence it had fallen outside the remit for appraisal by the All Wales Medicines Strategy Group (AWMSG) as it had met the exclusion criteria. It was highlighted that ChloraPrep® has a higher unit purchase cost than other available antiseptic agents. The WMP status report presented an overview of the clinical and cost effectiveness evidence for the use of ChloraPrep® prior to insertion of peripheral vascular cannulae and blood culture collection. Evidence relating to its use for other indications within its licence had not been included and was outside the scope of the document. The Chair opened the discussion and invited comment. The group noted national guidance relating to the use of chlorhexidine gluconate. It was considered that as there was limited evidence to support the use of chlorhexidine gluconate 2.0% w/v in isopropyl alcohol 70% v/v (ChloraPrep®) prior to insertion of peripheral vascular cannulae and blood culture collection, and there is a significant financial implication to NHS Wales, AWPAG could not support its use.

Action

Chief Pharmaceutical Officer to relay the general view of AWPAG to the AWMSGSC

The date of the next meeting was confirmed as Thursday, 12th January 2012 at the St Michaels Centre, Abergavenny