

<b>Enclosure No:</b>	5/AWMSG/0810
<b>Agenda Item No:</b>	9 – Update on AWPAG
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## **ALL WALES PRESCRIBING ADVISORY GROUP**

### **MINUTES OF MEETING HELD**

**Wednesday 7th July 2010 at 10.45 am**

**At the St Michael's Centre, 10a Pen Y Pound, Abergavenny,  
NP7 5UD**

#### **Members**

Dr Tessa Lewis (Chair)	GP South East Wales
Mr Bill Duffield	Pharmacist North Wales
Mrs Louise Howard-Baker	Pharmacist North Wales
Mr Ken Nazareth	Pharmacist South East Wales
Dr David Webb	Hospital Consultant
Dr Hamsaraj Shetty	Hospital Consultant
Dr Rick Greville	Representing NHSIF Industry Forum (non voting)
Mr Brendan Dobrowolny	Representing NHS Industry Forum (non voting)
Mrs Janette Wilkins	Representing NHS Industry Forum (non voting)
Mrs Kath Hier	Senior Nurse

#### **In attendance**

Mrs Karen Samuels (Welsh Medicines Partnership)  
Mrs Ruth Lang (Welsh Medicines Partnership)  
Mr Jamie Hayes (Welsh Medicines Partnership)  
Mr Dave Hopkins (Health Solutions Wales)

#### **Key of abbreviations**

AWMSG	All Wales Medicines Strategy Group
AWPAG	All Wales Prescribing Advisory Group
CASPA	Comparative Analysis System for Prescribing Audit
CEPP	Clinical Effectiveness Prescribing Programme (formerly known as the Prescribing Incentive Scheme)
CPW	Community Pharmacy Wales
DoH	Department of Health
GP	General Practitioner
HSW	Health Solutions Wales
HoPMM	Heads of Pharmacy and Medicines Management
MHRA	Medicines Health and Regulatory Authority
NHSIF	NHS Industry Forum

NMG	New Medicines Group
NPHS	National Public Health Service
NSAIDs	Non steroidal anti inflammatory drugs
PSU	Prescribing Support Unit
SLA	Service Level Agreement
UHB	University Health Board
WeMeReC	Welsh Medicines Resource Centre
WMP	Welsh Medicines Partnership

**1. Welcome and introduction**

The Chair opened the meeting and welcomed members.

**2. Apologies**

Mrs Katie Panton, representing NHS Industry Forum  
 Mr John Terry, Chief Pharmacist  
 Mr Jonathan Simms, Pharmacist South East Wales  
 Dr Susanna Jacks, General Practitioner  
 Mr Stuart Evans, Healthcare professional eligible to prescribe - South West Wales  
 Mrs Judith Vincent, Pharmacist South West Wales  
 Mrs Nuala Brennan, NPHS Representative

**Not in attendance:**

Mrs Delyth Simons Pharmacist Mid & West Wales  
 Dr Jonathan Jones GP North Wales

**3. Declarations of interest**

Members were reminded to declare any interests pertinent to the agenda and in general. Mrs Wilkins declared an interest in Enclosure 7 as the paper refers to Dronedarone, a product manufactured by Sanofi Avenus.

**4. Chair's report**

The Chair provided feedback from the recent AWMSG Steering Committee meetings. Concern was expressed over the level of usage of medicines prior to the availability of AWMSG guidance. Members agreed this problem is a potential communication challenge and requires further clarification in the broadening of AWMSG's appraisal remit. The Chairman drew members attention to the 'call for new members to AWMSG and its sub-groups' that had recently been posted on the AWMSG website and circulated to medicines and therapeutics committees. The Chair welcomed the opportunity to strengthen the existing committee and update the Constitution in light of the recent NHS reorganisation.

The Chair confirmed that a Waste Campaign will commence in the Autumn.

Dr David Webb joined the meeting.

**5. Minutes of previous AWPAG meeting**

The minutes of the previous meeting were checked for accuracy. No changes were made.

## **Matters arising:**

### **NICE quick reference guide query**

The Chair confirmed the status of the NICE quick reference guides in relation to the full version of the guideline where the advice is inconsistent. Clarification had been sought over a point within the NICE CG2 regarding the use of SSRIs in the treatment of generalised anxiety disorder (GAD). The Chair confirmed that the section, which addresses GAD, is currently being updated and the first draft is due for consultation from 20 July – 17 August.

### **Antimicrobial dispensing in primary care in Wales**

The Chair reported she had spoken to NPHS regarding linking this report with the evidence base and disseminating the prescribing messages. It was confirmed that HoPMMs are normally included in the circulation list of the report and that the publication is usually followed by an action plan.

The Chair raised the observation from the interface pharmacists group that antimicrobial pack sizes do not support current recommendations. For example trimethoprim is not readily available in 3-day packs. The group discussed the potential for producing 3-day packs, and the industry representatives suggested that consideration of a list of requirements or preferences could be included in the central procurement process. The Chair agreed to raise the issue with the Chairman of the All Wales Drugs Contracting Committee at the next AWMSG Steering Committee meeting.

#### **ACTION**

**Chair to raise antibiotic pack size at next AWMSG Steering Committee**

Dr Hamsaraj Shetty joined the meeting.

### **Vascular Group report update**

The Chair informed members that officials are in the process of preparing further advice for the Minister and no further information is available at this time.

### **Monitored Dosage System (MDS) update**

Following discussions in relation to the direction of travel in tackling this issue and the need to identify a novel way forward, Mr Hayes confirmed that contact had been made with Cardiff University in relation to process mapping. Members agreed that a meeting of a working group should now be convened. A suggestion was made to include a liaison nurse and a GP receptionist in addition to those identified previously.

#### **ACTION**

**Chair to contact working group members**

### **Escitalopram update**

It was confirmed that representatives from WMP will be meeting with representatives of Lundbeck on 13<sup>th</sup> July to discuss the monitoring of the use of escitalopram.

### **Update: A guide to supporting patients having difficulty taking oral solid dosage forms**

Mr Duffield confirmed that feedback has been collated and the document is in the process of a major re-write and would be considered by AWPAG at the next meeting. Members agreed that the potential to link with the Medicines Management Programme in relation to implementation could be explored outside of the meeting.

**ACTION**

**WD to provide document to WMP for a technical edit by 1<sup>st</sup> August prior to consideration by AWPAG in October 2010**

**6. AWPAG Membership & Constitution update**

The Chairman drew members' attention to the updated AWPAG Constitution and invited comment. A suggestion was made to include a locality medical director and a member of the Welsh Informatics Service. It was confirmed that membership will reflect the different roles of pharmacists. Mrs Hier agreed to provide WMP with an updated contact list for the Nurse Directors and all members agreed to highlight the vacancies amongst their colleagues. It was suggested that the notice be forwarded to GP prescribing leads, medical directors, GPC Wales, Local Medical Committees as well as Medicines and Therapeutics Committees.

**ACTION**

**Mrs Hier to provide updated Nurse Director contact list to WMP**

**All Members to highlight vacancies with colleagues**

**WMP to update draft updated Constitution for next AWMSG SC**

**WMP to disseminate notice**

**7. Broadening of AWMSG's appraisal remit**

WMP representatives updated members on progress in relation to the broadening of the appraisal process. Attention was drawn to the proposed increase in meetings to manage the anticipated increase in the number of appraisals. It was confirmed that IT equipment had been purchased to enable development of an independent IT infrastructure and a User Group identified to address recent criticism of the AWMSG website. It was confirmed that WMP is taking an inclusive approach in the re-designing of the AWMSG website and development of a robust communication system.

**ACTION**

**WMP to convene a meeting of the IT User Group**

**8. Draft minutes of AWMSG Meeting April 2010**

The Chair referred members to the draft minutes of the AWMSG meeting held on 21<sup>st</sup> April 2010 which had been provided for information. Clarification was sought in relation to the AWMSG recommendation that enoxaparin (Clexane®) is not suitable for shared care. WMP representatives confirmed that the advice is in the context of the indication appraised. The Chair agreed to discuss with the AWMSG Chairman whether a sentence of clarification is needed.

**9. Report on the National Medicines Management Programme**

The Chairman invited comment on Enclosure 5 – a report on the National Medicines Management Programme. Members were reassured of the commitment of the NMMP to work with AWPAG to address issues in relation to waste, harm and variance. It was confirmed that meeting documentation would be shared and links between the groups developed. Members acknowledged the role of NMMP with regard to implementing AWPAG's advice in relation to the use of liquid specials. It was recognised that some initiatives may not release the identified cost savings. For example erythropoietin repatriation because of the associated service development. Members agreed duplication of effort should be avoided.

**10. Audit and implementation of NICE and AWMSG guidance**

WMP representatives confirmed that monitoring the implementation of AWMSG advice

falls within one of the four 'Invest to Save' Initiatives currently being undertaken by the Welsh Medicines Partnership. As part of this initiative, WMP is required to highlight any prescribing issues that deviate from the advice. Members were asked to note the variance in the prescribing of aliskiren (Rasilez®) and were invited to explain possible reasons for this. It was noted that prescribing patterns in relation to both positive and negative appraisal recommendations will be subject to future discussions.

TL provided feedback from discussions at the Interface Pharmacists meeting.

Common practice was discussed with particular reference to the three regions with differing patterns of prescribing over the 2 year period. These covered (i) high and increasing volume prescribing (ii) persistently low volume prescribing (iii) significant change in prescribing from June 2009.

The following points were identified:

- Misunderstanding of the status of AWMSG advice. Prescribers should be reminded that AWMSG appraisals, both positive and negative have ministerial endorsement. Should clinicians wish to prescribe a medicine not recommended for use they should raise a case for exceptionality. Members suggested that a Ministerial letter is issued in light of the broadened AWMSG remit to clarify status and mandatory standing of advice.
- Members agreed that non-adherence to AWMSG advice should be brought to the attention of the Medical Director and the Clinical Pharmacy Director of the identified LHB.
- The highest prescribing region did not have an interface pharmacist in post during the period under discussion. The high volume of prescribing had been identified locally during the last quarter and action undertaken to address it.
- Once a medicine has been prescribed to a patient it can be difficult to withdraw if there is a subsequent negative appraisal. The region where prescribing has been consistently low had included it in a local comparator of medicines considered less suitable for prescribing.
- The locality showing change from June 2009 had raised the AWMSG guidance at the Medicines and Therapeutics committee in conjunction with local cardiologists, and provided guidance to prescribers.

Other areas of good practice were identified or recommended

- Clinical lead cardiologist/cardiology directorate discussion with GPs or GP prescribing leads groups
- Included in prescribing newsletter to clinicians
- Included on Scriptswitch
- Engagement of directorate pharmacists
- Identification of high prescribing practices
- Notify Clinical Pharmacy Directors and recommend they approach individual prescribers with an individual letter.
- Increase awareness of CASPA data and discussion with secondary care prescribers
- Identify the prescriber using the prescription viewing software and refer to the initiator to review
- Improve communication and information provided to MTCs

- Clarify role, remit and standing of local MTCs. To include systematic audit of NICE and AWMSG recommendations and develop strategies to deal with variance in local prescribing
- Monitor usage of medicines before and after advice becomes available
- Investigate medicines usage in a local area and take into consideration local needs
- Consider use of prescribing grey lists
- Consider timescale for implementation of AWMSG guidance

**ACTION**

**WMP to take forward the issue**

**11. Prescribing amiodarone for historical patients  
(recommendation 8)**

The Chair confirmed that the document had been updated in light of the comments received from the consultation and had been provided to the cardiac network leads for further comment. The Chair made note of the issues raised in the discussion and confirmed that the document would be further amended and presented to AWMSG in August.

**ACTION**

**Author to amend and provide updated document to WMP by 1<sup>st</sup> August**

**12. AWPAG representation/link requests**

The Chair invited membership to the following Groups:

**Elderly National Service Framework**

Dr Hamsaraj Shetty volunteered to provide medical consultant input and Mrs Louise Howard Baker volunteered to provide pharmacy input and represent AWPAG/AWMSG on this group.

**Diabetes group**

The group identified colleagues who have previously worked with the national diabetes forum. Mr Ken Nazareth suggested that his deputy may be willing to undertake this role. Mrs Jeanette Wilkins confirmed her role as industry representative on the group.

**ACTION**

**Chair to progress nominations**

**13. Low molecular weight heparin outstanding issues  
(recommendation 19)**

The Chair provided the background and confirmed that following the endorsement by AWMSG of the five recommendations addressing the most common scenarios of LMWH prescribing in NHS Wales, a small working group had been convened to address the outstanding educational issues in relation to recommendation 19 of the AWMSG Medicines Strategy for Wales - ***AWMSG will work with clinical networks and specialist groups to ensure that national clinical pathways and guidance include consistent advice on cost-effective and evidence-based prescribing.*** The associated education and dissemination requirements had been considered in an effort to maximise uptake of best prescribing practice. The Group considered and commented on the good practice points set out in the discussion paper and highlighted outstanding issues. It was suggested that the recent WeMeReC publication 'Things to know about LMWH' be included in the resource list. The Chairman concluded the discussion by confirming that the paper would be technically edited by WMP before being presented to AWMSG at a future meeting.

**ACTION**

**Document to be finalised and technical edit undertaken prior to AWMSG meeting**

**14. Proposal to update nGMS contract:**

**Near Patient Testing enhanced service**

The Chair invited comment on an updated basket of medicines for Near Patient Testing and sought the views of the group in relation to strengthening the evidence and explanation within the document. Members endorsed the key recommendations and provided comments, which were noted by the Chairman. It was agreed that the Chair would update the document in light of the discussion and comments received and forward to the Assistant Medical Directors for consideration. Areas for future consideration were identified.

**ACTION**

**Chair to update document and seek the views of the medical directors**

**15. Clinical Effectiveness Prescribing Programme**

**(recommendation 19)**

Due to time constraints, it was agreed this standing agenda item would be postponed to the next meeting.

Mrs Howard-Baker confirmed that the national indicator paper for 2011-2011 will be progressed via the working group outside of the meeting and acknowledged the deadlines.

**ACTION**

**Indicator working group to progress national indicator paper for 2011-2012**

**16. Invest to Save Initiatives**

WMP representatives provided a progress report on the four 'Invest to Save Initiatives'.

**Project 1 – Hypnotics and Anxiolytics**

It was confirmed that the report on the scope and nature of benzodiazepine and 'z' drug prescribing in Wales had been completed by WMP. The report will be presented to AWMSG in October 2010. A comprehensive educational resource pack will also be developed. It was noted that staff had been seconded to work with WMP in developing this project.

**Project 2 – NSAIDs**

WMP had sought feedback from the HoPMMs in relation to audits/initiatives undertaken in their locality. It was reported that uptake of the NSAID audit/toolkit developed by AWPAG had been varied, and suggestions for maximising GP engagement and increasing the awareness of audit/toolkits were discussed. It was noted that staff had been seconded to work with WMP in developing this project, including a further pilot to ensure that the implementation of the audit tool is efficient. It was noted that the audit can be time-consuming and some regions had supported implementation using prescribing technicians. Other practices had divided the data collection amongst clinicians to improve engagement. WMP invited further comments outside of the meeting.

**Project 3 – Proton Pump Inhibitors**

Members were informed that WMP had commissioned this work and the project is in its preliminary stages.

#### **Project 4 – Auditing the uptake of medicines appraised by AWMSG**

It was reported that since 2003 AWMSG has appraised 81 new medicines. Of these, 37 were recommended for use within NHS Wales, 19 were recommended with restrictions and 25 were not recommended for use. It was noted the use of medicines prior to appraisal and post negative appraisal were areas of particular concern. The industry representative highlighted the need to monitor implementation of positive AWMSG advice and alluded to the clinical freedom of prescribers.

NHS Industry Forum representatives left the meeting.

#### **17. Non NHS prescribing**

The Chair invited the author to provide the background to the discussion. It was confirmed that Enclosure 10 serves as a good practice resource guide – a compilation of guidance taken from various Welsh and English policies, including ABMU Trust, Conwy and Denbighshire, Anglesey and Gwynedd, Neath Port Talbot and Carmarthenshire. Members welcomed the document and it was suggested that the Chair seek the views of the AWMSG Steering Committee in relation to disseminating the document. The author agreed to include a disclaimer and references.

#### **ACTION**

**Chair to seek the views of AWMSG Steering Committee in relation to the dissemination of the good practice**

#### **18. 28 day prescribing AOF target**

AWPAG had been invited to comment on the initial data set for this target. Members stated that the data looked reasonable and that no further amendments were needed to the drug basket provided.

#### **19. Feedback from Interface Pharmacists Group**

The Chair confirmed that the interface pharmacists had met in North Wales on 1<sup>st</sup> July. The draft minutes from the meeting will be available at the next meeting.

TL raised concerns of the group that IT issues were not yet resolved regarding the primary care recording of medicines prescribed by secondary care.

**IT concerns to be raised at AWMSG**

#### **20. Feedback from HoPMMs**

Due to time constraints no report was provided.

#### **21. Feedback from PSU Users Group**

Due to time constraints no report was provided.

#### **22. Any other business (Chair to have been informed prior to the meeting)**

**Date of next meeting - Wednesday 20<sup>th</sup> October 2010 at the St Michaels Conference Centre, Abergavenny.**