

Hull and East Riding Prescribing Committee Minutes –CONFIRMED

Date / Time	Wednesday 25 th March 2015
Venue	The Board Room, Health House, Willerby.
Chair	Mrs J Lyon, Head of Medicines Management , North Yorks & Humber CSU
Notes / Action Points	Mrs W Hornsby, Senior Pharmacy Technician – Formulary/Interface, HEY.
Quorate: Yes / No	Quorate
Attendance	Dr M Miller, Senior Principal Pharmacist - Interface, HEY. Mr G Hill, Senior Pharmacist, CHCP Dr A Jeffreys, General Practitioner, LMC. Mrs J Clark, Chief Officer, Local Pharmaceutical Committee Mr W Chong, Chief Pharmacist, HFT. Dr L Witvliet, General Practitioner, Vice Chair, Prescribing Lead for Hull CCG Dr S Roberts, Medical Secretary, Secretariat for Humberside LMC Mrs J Moore, Non Medical Prescribing Lead, HFT Mr D Corral, Chief Pharmacist, Clinical Director Therapy & Therapeutics , HEY Mr A Ortiz, Medical Information Pharmacist, HFT Mr S Gaines, Senior Principal Pharmacist, HEY Dr M Al Saed, Consultant for Substance Misuse (guest)
Apologies	Prof A Morice, Professor of Respiratory Medicine, HEY

Agenda No	Item	Discussion	Decision Made	Action	Lead	Due Date/Date complete
2015.03.01	Apologies	As above. JLy informed the committee that Dr Harley would be stepping down as a GP lead for the ER CCG and would therefore not be attending any further HERPC meetings.				
2015.03.02	Declarations of Interest	There were no declarations of interest	No further action			Mar 15
2015.03.03	Minutes of the previous meeting	Simon Gaines was in attendance at the previous HERPC meeting but had been omitted from the list of attendees. WC pointed out that he had been actioned to write a paper on Tamiflu, action should have been WC to provide information on Tamiflu which has already been done.	WH to add SG to minutes. WH to update minutes and tracker reflecting change.		WH	May 15
2015.03.04	Action Tracker	<u>Pregabalin – Gabapentin</u> Meeting has taken place with all providers. Points agreed: 1.review and update current algorithm for chronic pain 2.add into guideline action for patients with history of substance misuse 3. provide leaflet to all patients on substance misuse potential, earlier referral to clinical and prioritise psychosocial support. When referring to pain clinic GP to clarify referred for non pharmacological strategies. The committee raised concerns over the increase in	JLy to develop pathway		JLy	Jan 14

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		the prescribing of pregabalin for the treatment of GAD, as it should not be used ahead of SSRI's. It was agreed that guidance needs to be issued around this area of prescribing.				
		<u>Communication Received – Multi-compartment aids</u> JLy looking at how to apply national guidance into a local guideline will discuss further with community pharmacy's from Humber and West Yorkshire.	JLy/JC to discuss further		JLy	Nov 14
		<u>Shared Care Frameworks</u> JLy has drafted letter to providers.	Action complete		JLy	Mar 15
		<u>Red Classification</u> Final draft to be agreed with JLy and circulated to members for comments.	Once agreed, list to be added to website		MM/W H	Sept 14
		<u>Shared Care Framework ADHD</u> WC has feedback to MM on CG72.	Action complete		WC	Nov 14
		<u>SCF & PG</u> MM has recirculated ECG guideline which is on agenda for discussion.	Discuss on agenda		MM	Mar 15
		<u>Traffic Light Status</u> Pollinex Quatro still to be discussed by CCG	Ongoing		JLy	Mar 15
		<u>Ketamine</u> JLy to write draft statement covering current cohort of patients.	Ongoing		JLy	Mar 15
		<u>Shared Care Framework Discharge and Referral</u> JLy to meet with Kevin Richardson in contracting.	Ongoing		JLy	Mar 15

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		<p><u>SCF & PG</u> MM has met with Dr Fletcher to discuss B12 guideline and has incorporated comments from the committee. MM to clarify 150 value agreed on guideline with Dr Fletcher and to recirculate for further comments.</p> <p><u>SCF & PG</u> All approved documents have been added to the website</p> <p><u>Addition to tracker</u> MM circulated anticoagulant guidance in December, meeting to be held in May to discuss further.</p>	<p>MM to recirculate for further comments</p> <p>Action complete</p> <p>WH to arrange meeting in May</p>		<p>MM</p> <p>WH</p> <p>WH</p>	<p>Mar 15</p> <p>Mar 15</p> <p>May 15</p>
2015.03.05	Traffic light status	<p><u>HEY D&T (February & March)</u></p> <p>Peginterferon beta-1a (Plegridy)- Approved as RED will require IFR until policy published</p> <p>Alogliptin – Approved as Green Eculizumab-Approved as RED will require IFR if request not in line with guidance</p> <p>Dolutegrevir & Dolutegrevir/Abacavir/Lamivudine – Approved as RED</p> <p><u>HFT DTC (February)</u> Tapentadol – HFT would like adding to chronic pain pathway, CCG to discuss commissioning position. Concerns were raised over inappropriate prescribing it was therefore agreed that the CSU Clinical Effectiveness team would review all recent</p>	<p>Add to red list</p> <p>Add to red list</p> <p>Add to red list</p> <p>JLy to request review be written</p>		<p>WH</p> <p>WH</p> <p>WH</p> <p>JLy</p>	<p>May 15</p> <p>May 15</p> <p>May 15</p> <p>May 15</p>

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		evidence and write TAG to be discussed at HERPC in May.				
2015.03.06	Recommendations from York and Scarborough Commissioning Committee	Rituximab – recommended second line for commissioning after corticosteroids, will be discussed in April. Alprostadil cream – recommended as an option MM has already drafted a guideline and will circulate. Alprostadil to be initiated by a specialist.	Noted MM to circulate draft guideline	No further action	MM	May 15
2015.03.07	Shared Care Frameworks – Prescribing Guidelines	Before starting the discussion JLy pointed out to committee that alcohol/substance misuse was now the responsibility of public health. The CSU provide support for ER public health but not Hull. The committee agreed that although some of the SCF were for public health medicines it would still be useful to discuss them clinically. a) Acamprosate in Alcohol Relapse Prevention The committee asked that the title of the SCF reflect that the patient was “in abstinence”. Adverse affect section to be revisited. The committee felt that the background information should be limited to one paragraph b) Naltrexone in Alcohol Relapse Prevention As above, also need to remove statement no routine blood tests” as LFT’s required 6 monthly c) Naltrexone in Opioid Relapse Prevention	JLy to write to public health and inform them if they would like SCF in place for public health medicines they will need to commission them. Re write SCF in accordance with committees comments and then discuss further with public health.		JLy MM	May 15 May 15

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		<p>(update) Move section on substance misuse enhanced services for GP's to front page</p> <p>d) Nalmefene The committee agreed that Nalmefene would not be prescribed by GP's. It would be initiated by specialist services</p> <p>e) Testosterone (New) This SCF contains a lot of monitoring which MM assured the committee was in line with the SmPC, it was felt that a leaflet could be written outlining the need for the tests and added to the end of the SCF.</p> <p>f) Drugs requiring ECG The document was written to ascertain the magnitude of the problem and assess the need for commissioning ECG facilities. It was felt that the LMC would have concerns regarding time and funding issues.</p>	<p>WH to add to red list</p> <p>MM to write testosterone leaflet</p> <p>JLy to approach CCGs with issue.</p>		<p>WH</p> <p>MM</p> <p>JLy</p>	<p>May 15</p> <p>May 15</p> <p>May 15</p>
2015.03.08	Prescribing of Pregabalin – NHS England Circular	The contents of the circular were noted. The committee agreed that it would be useful to discuss the Wessex guidance at May HERPC.	WH to add Wessex guidance to May agenda		WH	May 15
2015.03.09	Additional Minutes for Information	<p>a) MMIG (Jan, Feb)</p> <p>b) HEY D&T (Jan, Feb)</p> <p>c) HFT DTC (Dec)</p> <p>d) Formulary Sub Group (Feb)</p>	Noted	No further action		Mar 15
2015.03.10	AOB	WC raised the duplication of drug evaluation and	WC and JLy to	No further action		Mar 15

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		requested that when CSU are writing a TAG they work together with HFT where appropriate. JLy agreed that if HFT were to let the CSU know what medicines were on the horizon the CSU TAG team could perform a review.	liaise over future new medicines.			
2015.03.11	Date and Time of Next Meeting	Wednesday 27 th May 2015 1 – 3pm The Boardroom, Health House, Willerby				