	Hull and East Riding Prescribing Committee Minutes -CONFIRMED				
Date / Time	Wednesday 27 th January 2016				
Venue	Meeting Room 1-2, 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	Yes				
Attendance	Dr M Miller, Senior Principal Pharmacist - Interface, HEY.				
	Mr G Hill, Senior Pharmacist, CHCP				
	Dr A Jeffreys, General Practitioner, LMC.				
	Mr D Corral, Chief Pharmacist, Clinical Director Therapy &Therapeutics ,HEY				
	Mr S Gaines, Senior Principal Pharmacist, HEY				
	Mrs J Clark, Chief Officer, Local Pharmaceutical Committee				
	Ms Z Norris, GP Prescribing Lead, Hull CCG				
	Dr H Klonin, Consultant Paediatrician, HEY				
	Mr A Ortiz, Medicines Information Pharmacist, HFT				
	Ms F Hammond, Senior Pharmacist, HFT				
	Dr R Walshaw, LMC Representative				
	Mrs J Stephenson, Nth of England CSU				
Apologies	Mr W Chong, Chief Pharmacist, HFT				
. •	Prof A Morice, Professor of Respiratory Medicine				
	Mrs J Moore, None Medical Prescriber, HFT				

Dr T Allison , East Riding Council

Agenda No	Item	Discussion	Decision Made	Action	Lead	Due Date/Dat e complete
2016.01.01	Apologies	As above. JLy introduced Janette Stephenson from the Nth of England CSU, who will take over local CSU from 1/3/16	Noted	No further action		Jan 16
2016.01.02	Declarations of Interest	None	Noted	No further action		Jan 16
2016.01.03	Minutes of the previous meeting	Accepted as a true record. A query was raised over an action regarding erythropoietin guidance, MM clarified that the action was to discuss guidance at LMC. AJ agreed to take to LMC next week. JC requested the spelling of Mosely be altered to Mosley.	Noted			Jan 16
2016.01.04	Action Tracker	Minutes of Previous Meeting JLy is still chasing ER prescribing lead, as no appointment has been made.	Recruitment process ongoing	Update next time	JLy	
		Shared Care Framework Discharge & Referral Meeting to be held with contracting to discuss options- still to take place	Ongoing	Update next time	JLy	
		Update of Red List JLy is happy for new red list to be added to website, MM to seek confirmation from POB that this is ok.	MM will discuss with POB	WH to add to web if POB agrees	MM/W H	
		Prescribing Guidelines/Shared Care Frameworks SG and AM have review formulary position of respiratory guidelines.	Action complete	No further action	SG/AM	

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		Action Tracker Furosemide Policy – MM has emailed the current position	Action complete	No further action	MM	
		COPD Pathway AM has sent several supporting papers.	Action complete	No further action	AM	
		COPD Pathway Azithromycin – MM has updated box as requested.	Action complete	No further action	MM	
		Traffic Light Status WH has updated red list on internet site.	Action complete	No further action	WH	
		SCF/PG Amantadine for delayed ejaculation. JLy has not discussed funding with CCG. KMc to liaise with GH.	KMc will progress with GH	Feedback next time	KMc	
		SCF/PG Rifaxamin prescribing guideline has been added to website.	Action complete	No further action	WH	
		SCF/PG Erythropoietin guidance – AJ will take to LMC for comments next week.	Ongoing	Feedback next time	AJ	
		SCF/PG Gonadorelin Analogues and Ulipristal. JLy has not discussed funding with commissioners. KMc to take over and discuss with clinical policy group.	KMc to take to clinical policy group	Feedback next time	KMc	
		SCF/PG DOAC guideline has been amended and added to internet.	Action complete	No further action	WH	

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		SCF/PG AREDs prescribing guideline – subject to proposed workplan as AREDs is on Prequip drop list. It is currently commissioned but may be decommissioned altogether.	To be discussed by commissioners	Feedback next time	JLy	
		SCF/PG Glaucoma guideline has been added to website.	Action complete	No further action	WH	
		SCF/PG MM has updated and circulated inflammatory bowel pathway, awaiting feedback from HEY consultants then to be added to internet.	Action complete	No further action	MM	
2016.01.05	Traffic light status	HEY D&T December 15 • Empagliflozin • Tafluprost Eye drops	Guideline led Guideline led but will need to be discussed by commissioners	Requires approval from CCGs	JLy	Mar 16
		Nutilis Clear	Agreed for secondary care to initiate	No further action		Jan 16
		HEY D&T January 16 • Sucroferric Oxyhydroxide (Velphoro)	Approved as Guideline led	Requires approval from CCGs		Jan 16
		Cutimed Sorbact Gel	On CHCP formulary-guideline led	No further action		Jan 16

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			Guideline led			
		 Naloxegol 	Approved as red			
		Lubiprostone		No further action		Jan 16
2016.01.06	Recommendations from York and Scarborough Commissionning Committee	None	No further action			Jan 16
2016.01.07	Shared Care Frameworks – Prescribing Guidelines	a) Constipation guideline Has been updated to include lubiprostone and naloxegol. If opioid induced need for regular laxative emphasized. As palliative care is referred to it was questioned if all of the guideline applied to palliative care as sodium picosulfate and docusate not mentioned.	MM agreed to produce flowchart for palliative care and will circulate between meetings		MM	Mar 16
2016.01.08	Review of Terms of Reference	At this point in the meeting Janette Stephenson gave the committee an overview of how area prescribing worked in the north east which is different to how it currently works in Hull and ER. Which led to a discussion on the need to review the	Agreed to keep current terms and conditions for next 6 months.	Current terms and conditions to be amended to state review in July 16	WH	Mar 16
		current system to assess if changes need to be made or if it can stay as it is. It was agreed that a meeting should be arranged for early March once take over has happened to discuss further. As JLy will be leaving the CSU Mid February it was agreed that ZN would temporarily chair HERPC for the next 6 months with the help of MM as vice chair.		Arrange meeting to consider decision making processes, ToR	J Ly / JS	Mar 16
2016.01.09	ERoY CCG Recovery Plan	The medicines management team have prepared a recovery plan which has been circulated to LMC/LPC. Hull have also prepared a work plan and there are 13areasof commonality between the two CCG's. 6 of which relate to pain management. Gluten free foods,sip feeds. ER have begun a "Nutrtion Mission" and have				

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		adopted a food first approach, with powdered foods being second line and sip feeds being third. A review of current patients receiving sip feeds will take place. Specials need to be reviewed and it was mentioned that the liquid preparation of melatonin Kidmel is no longer available therefore SCF will need to be updated. Stoma was another area to be looked at in the workplan and it was suggested that perhaps stoma could become a specialist service in the same way that wound management is with its own budget, if successful this could also be rolled out to dietetics. JLy agreed to suggest to both Hull and ER CCG's. Currently ER have no funds for medicines	Melatonin SCF to be update		MM	Mar 16
		management but a business case for specialist services could still be produced.				
2016.01.10	Prescribing and Monitoring Responsibilities for Antipsychotics	A discussion took place around the prescribing and monitoring responsibilities for antipsychotics and the following was clarified: HFT responsible for first 12 months of patients treatment including prescribing and monitoring if patient is stable then can be transferred to GP care who will then be responsible for prescribing and monitoring.	No further action			Jan 16
2016.01.01	Prescribing options for Low Molecular Weight Heparins	HEY are considering switching LMWH from dalteparin to tinzaparin as a cost saving exercise. The committee discussed the switch and the issuesaround it including: 1)Different doses between the two preparations 2) Tinzaparin dose dependant on weight 2)Retraining of staff in both primary and secondary care, 3)Tinzaparin does not have a licence for the medical prophylaxis of VTE and the current drug	Taking into account the safety issues around the switch, the committee agreed that they did not support the switch			

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		policy states that an unlicensed product should not be used if there is a licensed alternative 4)Healthcare workers are allowed to administer dalteparin as it requires giving a full syringe with tinzaparin if a part syringe is to be given a nurse must do this and there were concerns that there would not be enough nurses available 5)CHCP use dalteparin in the anticoagulation services.				
2016.01.12	HFT Discharge Form	HFT have drafted a new discharge form. It was mentioned that it would be easier if the form could be sent electronically and not faxed but that is not an option at the moment. The committee asked if a box could be included to highlight if a sick note was required for a patient and if so a duration would also need to be included.	Committee approved subject to amendments.	MM/AO to check situation at HEY/HFT with regards to recommending sick notes in clinics.	MM/AO	Mar 16
2016.01.13	Contracting Issues for Shared Care Frameworks	Deferred				
2016.01.14	Governance	Diamorphine Supply Issues A paper was discussed recommending the use of morphine injections in times of shortage. JLy agreed to circulate to GP's. JLy has raised palliative care scheme with NHSE but they have no one available, GH said that CHCP could provide a palliative care pharmacist to NHSE if it would help	Noted	No further action		Jan 16
2016.01.15	Primary Care Rebate Scheme	No new additions	Noted	No further action		Nov 15
2016.01.16	Additional Minutes for Information	a) MMIG b) HEY D&T c) HFT DTC	Noted	No further action		Nov 15

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		d) Formulary Sub Group				
2016.01.17	AOB	None	Noted	No further action		Nov 15
2016.01.18	Date and Time of Next Meeting	Wednesday 23rd March 2016 1 – 3pm Meeting Room 1, Health House, Willerby				