

## Minutes of a Meeting of the AWP NHS Trust Medicines Optimisation Group (MOG)

Held on 30<sup>th</sup> June 2016, 1.30pm-3.30pm, Conference Room C, Callington Road

These Minutes are presented for **Approval**

### Members Present

Tim Williams, Chair (TW)	Maria-Paloma Sequeriros (M-PS)
Sarah Parks, Acting Lead Nurse (SP)	Prabhakaran Naveen (PN)
Valerie McElhinney (VMc)	Johnathan Hewitt (JH)
Anthony Lacny (AL)	Shirley Bickers (SB)
Lucie Ralph (LR)	Jon Hayhurst (JH)
Ellen Yankah (EY)	Jeremy Wallace (JW)

### Staff In Attendance

Donna Ensor, Business Coordinator

### MOG/16/17 Apologies

Paul Bown	Joel Hirst
Kathryn Bundle	Melanie Green
Tina Malhotra	Tiff Earle
Simon Manchip	James Eldred
Martin Marlowe	Ian Ellison-Wright
Chris May	Toby Sutcliffe
James Severs	

### MOG/16/18 Declarations of Interest

Declaration of Interest forms completed which are scanned and saved on the shared drive.

### MOG/16/19 Minutes & Actions

Minutes agreed as an accurate record. Action log amended with changes.

### MOG16/20 Ward Emergency Medication Stock

Apologies from James Severs. VMc préciséd James' report for the meeting. This report was formulated due to inconsistencies Trust-wide with regards to emergency medications stocked on in-patient units. It was agreed that the report would be sent to all attendees for comment.

**Action: DE to distribute report.**

### MOG/16/21 Audit Report (LR)

Five months worth of data was reviewed to compile the audit report on controlled drugs checks. Issues

highlighted include: requisitions and manager checks and crossing out of mistakes.

Positives noted: storage of controlled drugs has improved.

Due to policy/procedural changes with controlled drugs, it was agreed the audit tool would need to be amended to capture these changes.

**Action: SP will raise the issues of crossing out mistakes at the Modern Matrons' away day. LR will clarify the audit report action point to review the CD requisition system with VMc.**

### **POMH Audit – Prescribing Valproate**

Findings in-line with national standards; MHRA information leaflets not being given to females of child bearing age and physical health checks not being recorded (it was noted that this is part of a CQUIN).

Recommendations: A Safety Alert has been distributed Trust-wide which includes advice to use the valproate checklist and issue valproate patient guides and cards. Trust valproate procedure to be written.

Bristol CCG have undertaken this work with GP practices, JH will share with MOG meeting.

**Action: JH to share valproate prescribing audit documents with MOG Meeting membership. TW will email medical staff to request help to support VMc with preparing valproate procedure for the trust.**

### **MOG/16/22 Appeals Process**

Appeals process document updated by Bethan Shepherd following the last meeting.

**Action: Approved by meeting – DE to circulate document.**

### **MOG/16/23 Shared Care Protocols/Agreements**

It was agreed that all AWP shared care protocols are to come to MOG and then to be sent onto all Locality CCGs for their discussion/approval at locality meetings.

Four protocols for approval relating to dementia for BNSSG. It was acknowledged that in accordance with new NICE guidance, some GPs are diagnosing and prescribing medications for dementia, however some medications remain amber with Formulary

### **MOG/16/24 Formulary Application**

#### ***Cyproterone***

Formulary application submitted for the use of cyproterone. Dr Hewett, Consultant Psychiatrist, made the application and attended to address the meeting regarding this application. He proposed to use doses starting from 50mg BD, only as a last resort, to manage aggressive behaviour and sexual disinhibition in elderly, male patients with end stage dementia, for whom other interventions have not worked and the use of antipsychotics such as haloperidol poses a more significant risk. The intention is to try it for up to 4 weeks, then review. Cyproterone is to be stopped after 4 weeks if it has not provided benefit. The application contained some trial data and had supporting statements from 2 other consultants. It was acknowledged that a brand of cyproterone acetate (Androcur) is already licensed for treating sexual disinhibition in men. It is estimated that there will only be a small number of service users being prescribed it, so liaison with GPs would be manageable.

This application was agreed for inclusion on the Trust approved list of unlicensed/ off-label medicines, not as a first line medication, with clear formulary guidance – only to be commenced by a consultant specialised in dementia and clear documentation is to be made in patient notes on reason for use.

## MOG/16/25 Antimicrobial Resistance

An Antimicrobial Stewardship lead is needed for the trust and there was discussion as to who is best to take on this role. The work relating to antimicrobial stewardship is on a pharmacy action plan and will remain lead by pharmacy.

## MOG/16/26 NICE Updates / News

### Type II Diabetes

NICE now recommends the use of canagliflozin (Invokana), dapagliflozin (Forxiga) and empagliflozin (Jardiance) for the treatment of type II diabetes. The three drugs can all be used on their own if a patient cannot take metformin, sulfonylurea or pioglitazone, and diet and exercise alone isn't controlling their blood glucose levels.

### Antimicrobial resistance: A call to action

Antibiotic resistance could kill ten million people a year by 2050, a stark government report has warned. NICE guidance on antimicrobial stewardship highlights the importance for healthcare professionals to **only prescribe antibiotics when they are needed**. Doctors need to give the right antibiotic, at the right dose to the right patient.

### End of Life Care

NICE guidance has been updated in May regarding end of life care. It was noted that James Severs is undertaking Do Not Resuscitate (DNR) updates.

### CAMHS

There has been updated guidelines regarding diagnosis and prescribing in children and young adults with a diagnosis of psychosis and schizophrenia.

**Action: Praveen is undertaking PDP, AL (EI) happy to link with PN on this.**

### Dementia

GPs or prescribers with appropriate competency can prescribe medications for dementia according to NICE guidance. A technology appraisal (TA217) on donepezil, rivastigmine, galantamine and memantine has been produced by NICE.

**Action: EY will send out summary of NICE updates.**

## MOG/16/27/28 Formulary update

Total non-formulary requests approved since last MoG meeting = 19

9 in May; 10 in June. Breakdown below:

Aripiprazole LAI = 6

Cyproterone acetate = 3

Trihexyphenidyl tabs for unlicensed indication = 1

Fluphenazine u/l 100mg/ml depot inj = 3

Pirenzepine = 3

Agomelatine = 1

Lurasidone = 2

### MOG/16/29 Flow Chart summary of non-formulary/ specialist drug use requests

This was approved. EY to communicate this to relevant person to get it posted on the pharmacy pages on Ourspace. EY stated that so far, the 'non-formulary/ specialist drug' use requests are being reviewed within 24-48 hours by the Chief Pharmacist and Medical Director or their designated deputies.

### MOG/16/30 BCAP Paliperidone Application

Application to BaNES for paliperidone long acting injection has been accepted as red on their formulary.

It was confirmed that the 3 monthly injection is now licensed and available; use in trust to be agreed.

**Action: EY will bring evaluation of 3 monthly injection to next MOG.**

### MOG/16/31 Sliding Scale (Insulin Doses) for Diabetes

EY has discussed with several colleagues to establish what this is. What is required is not a sliding scale but a variable insulin dose guide based on blood glucose levels.

**Action: PN to will liaise with EY to form a working group. TW will approach medics for volunteers to assist in the Trust insulin and diabetes guidelines.**

### MOG/16/32 AOB

#### **Pregabalin – managing withdrawal**

A medicines information enquiry was sent to EY regarding a reportedly high usage of pregabalin by a service user. Advice was requested on how to manage withdrawal. TW advised that pregabalin has actions similar to benzodiazepines and the management of withdrawal would be similar.

**Action: EY to advise enquirers to contact Drug and Alcohol Services for specialist advice.**

**Pharmacy to prepare a bulletin to include guidance on prescribing pregabalin (SB).**

#### **Cochrane report: PRN Use**

Article published online on the use of PRN medications and the potential for these to be written up as repeat medications. This has also been picked up by the CQC on inspections. It was discussed and agreed that doctors clerking in patients are routinely writing them up for PRN medications.

**Action: To put on agenda for Quality Forum/joint Nursing/Medical facilitation. Ask for audit of PRN medications (audit to include on admission/7 days/14 days). DE to feedback to Alan Metherall. LR to support audit work.**

#### **Review Traffic Light - Naltrexone (opioid maintenance/withdrawal)**

This is currently amber on AWP's formulary and it was agreed that this would be reviewed.

**Action: Jon Hayhurst will discuss with Ben Watson.**

#### **Overuse of Psychotropics in Learning Disabilities (LD)**

The overuse of psychotropics in LD was raised with regards to the GPs taking on prescribing. It was confirmed that Dr Manash Chattopadhyay, Consultant Psychiatrist, is currently leading on this and that it is in hand.

### **Rapid Tranquilisation Procedure**

This is currently being reviewed by pharmacy staff. It was acknowledged that this needs to be sent to the wider team for comment once a revised draft has been prepared. To ensure engagement with appropriate teams, a working group needs to be developed.

**Action: SB to advise pharmacy lead on the need for a working group to include staff from PICUs, acute wards and doctors.**

### **Cost of Quetiapine XL in the community**

Prescribing of a specific brand of generic XL quetiapine will lead to a reduction in costs (GP prescribing and FP10s).

**Action: Prescribing bulletin to be produced for circulation (SB).**

### **Clozapine**

VM advised that the new clozapine database is being implemented in pharmacy. The clozapine procedures are being peer reviewed and it is anticipated that they will be ready for ratification at MOG in August.

### **MOG/16/17 Dates of Future Meetings**

18<sup>th</sup> August, 1.30pm-3.30pm Conference Room, Jenner House, Chippenham

20<sup>th</sup> October, 1.30pm-3.30pm Conference Room C, Callington Road Hospital, Bristol

15<sup>th</sup> December, 1.30pm-3.30pm Maple Room, Jenner House, Chippenham