

Notes of the Formulary Management Group

Held on	Tuesday 5 th February 2019			12:30pm (2:30pm finish) at Jubilee House, Board Room	
Members	Attended	Apologies	Absent	Designation	Abbreviation
	✓			Head of Medicines Management (Chair)	(C)
	✓			Prescribing Adviser	(PA)
	✓			Prescribing Adviser	(PA2)
	✓			GP Lead for Medicines Management	(GP)
		✓		Primary Care Pharmacist	(PCP)
			✓	Clinical Nurse Specialist	(CNS)
			✓	Nurse Non-Medical Prescriber	(NNMP)
	✓			DWMHPT Pharmacist	(DWMHP)
		✓		DWMHPT Deputy Pharmacist	(DWMHDP)
		✓		Patient Representative	(PR)
	✓			Formulary Pharmacist (WHT)	(FP)
			✓	LMC Representative	(LMC)

	Agenda item	Action
1.	<p><u>Welcome and Apologies (Declarations of AOB)</u></p> <p>Everyone was welcomed to the February 2019 Formulary Management Group meeting. (Group was not quorate).</p> <p>Apologies have been noted above.</p>	
2.	<p><u>Minutes of the Last Meeting</u></p> <p>The minutes from the last meeting (January) were declared a true and accurate record from all present. (Amendments to be made: incorrect spelling of Blueteq).</p>	
3.	<p><u>Matters Arising/Actions Sheet</u></p> <p><u>Action Log</u></p> <p>Drug safety update – Valproate – agreed/complete Clearfilm and Acticoat flex 3 – deferred Ciclosporin – pending TA Report – deferred RMOC Guidance – Prescribing of Liothyronine – agreed/complete RMOC STOMP resources – pending Silk garment breach – pending</p> <p>(DWMHP entered the room 12 minutes into the meeting. PA2 entered the room 15 minutes into the meeting).</p>	
4.	<p><u>Declarations of Interest (DOI)</u> – Everyone reminded to check their compliance</p> <p>None</p>	
5.	<p><u>Trust Formulary Updates</u></p> <p>None</p>	

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6.	<p><u>NICE Technology Appraisal</u></p> <p>The committee is asked to take action with regards to the outstanding NICE guidance and ensure compliance with the national guidance.</p>	
7.	<p><u>Non NICE TA drug/devices – Full applications</u></p> <p>None</p>	
8.	<p><u>Pathway/Guidelines</u></p> <p>Liothyronine template (adopted from RMOC) discussed – have already gone through the ESCA, no other comments have come through from this meeting.</p> <p>OOA cross border formulary template – most of the time these are honoured, however where there are issues around commissioning decisions these then need to be considered on a case to case basis at JMMC.</p> <p>Where a commissioning decision has been made we will support it. We will look at mapping out what kind of drugs are being given which may come here.</p>	
9.	<p><u>Drug Safety Update</u></p> <ul style="list-style-type: none"> • Letters and drug alerts sent to healthcare professionals in December 2018 • Yellow Card App: download the updated App to receive the latest MHRA safety news and report suspected side effects, including in pregnancy - Update • Ipilimumab (Yervoy): reports of cytomegalovirus (CMV) gastrointestinal infection or reactivation – More for Hospitals – Will take back to MMC • Tapentadol (Palexia): risk of seizures and reports of serotonin syndrome when co-administered with other medicines – Action - will put on Optimise. • Action – Tag Appraisal - PA has done the Blueteq form for Gastro. • Discontinuation of Zovirax (Aciclovir) eye ointment. Also recent recall of Actavis batches of irbesartan/hydrochlorothiazide tablets from pharmacies as a precautionary measure due to possible contamination with N-nitrosodiethylamine (NDEA). 	
10.	<p><u>Regional Medicines Optimisation Committee</u></p> <p>Brought forward from January meeting:</p> <ul style="list-style-type: none"> • RMOC Guidance - Prescribing of Liothyronine 7th November 2018 • Regional Medicines Optimisation Committee Update November 2018 • RMOC briefing on adalimumab – December • Regional Medicines Optimisation Committee Update December 2018 <p>February meeting:</p> <ul style="list-style-type: none"> • Regional Medicines Optimisation Committee Update 2019: Issue 1 	

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	<ul style="list-style-type: none"> • Sodium Oxybate – Committee to consider continuation in adolescent patients on transition to adulthood who have benefitted for Narcolepsy. Need to talk to NHS England. • GLP1 – Considering the place on the rag type in the management of diabetes – Differences in the class – pending. • North RMOG are going to take a lead role on shared care issues on behalf of the carmark system nationally. • Midlands East will take anti-microbial stewardship, will share the work load across the areas. • A CCG representative is stepping down from committee - a replacement is being looked for. 	
11.	<p><u>Horizon Scanning</u> - <i>Information only</i></p> <p>NICE Resource Planner - Downloaded 25.01.18</p>	
12.	<p><u>Appeals</u></p> <ul style="list-style-type: none"> • None 	
13.	<p><u>Formulary Breach</u></p> <ul style="list-style-type: none"> • Dermasilk (2nd breach Dec and Jan) – FP to report action 	
14.	<p><u>Recommendations to JMMC</u></p> <ul style="list-style-type: none"> • ESCA Liothyronine 	
15.	<p><u>Any other business</u></p> <ul style="list-style-type: none"> • Brexit – C – national guidance is being upheld, if more guidance is needed there is a Brexit Lead Chief Officer. • MOLCV engagement link - https://www.engage.england.nhs.uk/consultation/items-routinely-prescribed-update/user_uploads/low-priority-prescribing-consultation-guidance.pdf - Please respond to consultation online for individual responses. A Walsall CCG response is also being collated through the Medicines Management Team efforts in engaging with patients of Walsall. Secondary care colleagues have also been approached for their responses. • Tapentadol audit – 60 responses to the audit – The data shows there is high initiation from primary care (whereas the guidance states it is for secondary care initiation only). Since communication of the new pain pathway, the message that tapentadol should be restricted to consultant initiation and not be used prior to consideration of opioids has been reinforced. Some of the key messages from the campaign are – <ol style="list-style-type: none"> i. Dose optimisation before referring patients to the pain clinic ii. Reiteration of the referral criteria iii. Managing patient’s expectations iv. Physio input as non – pharmaceutical 	

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	<ul style="list-style-type: none"> Datix – there is training available in the form of presentations which can be circulated if anyone is interested. GP is taking on new role of Lead of Pre-Natal Mental Health from 15/1 – 15/7, will bring any agenda items for February JMMC. ESCA ADHD – C approached by a GP in PLT to re visit this. Have been reassured that the process is robust. <p>KINES Update - new NICE COPD Guidance Jan-19</p> <p>KINES Update - Influenza: Large cohort study finds influenza vaccine decreases risk of death in people with heart failure</p> <p>KINES Update- Antibiotic prescribing: UK study reports that high volume prescribing GP practices issue more antibiotic prescriptions- January 2019</p>	
16.	Finish	
17.	These minutes are a true representation of the Group’s proceeding	
	Signed: _____ Chair _____ Date _____	

These minutes will be redacted to remove names/initials before publication

Future Meeting Dates

2019								
Formulary Management Group Future Meeting Schedule								
12:30pm Start (Finish 2:30pm)								
Date	Month	Year	Venue		Date	Month	Year	Venue
8 th	January	2019	Board Room		2 nd	July	2019	Board Room
5 th	February	2019	Room 3		6 th	August	2019	Board Room
5 th	March	2019	POD		3 rd	September	2019	Board Room
2 nd	April	2019	Board Room		1 st	October	2019	Board Room
7 th	May	2019	Board Room		5 th	November	2019	Board Room
4 th	June	2019	Board Room		3 rd	December	2019	Board Room