Chelsea and Westminster Hospital NHS Foundation Trust Medicines Committee

Summary Notes from the Meeting held on the 11th of October 2010

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes were approved.

3. Matters Arising

All of the actions were completed with the exception of reformatting of the electrolyte guidelines and finalisation the CD Governance Arrangements. These are in progress.

4. New Medicines Applications

Formulary Application

Dronedarone. Indication: Licensed. **Decision:** Approved **Tariff:** Included

Restricted for prescribing as an option for the treatment of non-permanent atrial fibrillation **only** in people who meet the criteria detailed in the NICE guidance.

Formulary removal

Rosiglitazone. The EMEA has suspended marketing authorisation for rosiglitazone, therefore it will be removed form the formulary.

5. Medicines Policy Updates

The committee reviewed four updates to the medicines policy. These updated sections were approved, pending agreed amendments, and will be published on the Trust Intranet.

- Section 18 – Medical Representatives had a major revision and now contains more comprehensive guidance. Section 20 – Unlicensed Use of a Licensed Medicine has had a change to the wording regarding obtaining and recording informed consent.
- Appendix - Methotrexate for Non-Cancer Indications has been updated form the previous section which included only oral methotrexate. It also gives information on how to obtain the NPSA methotrexate booklet.
- Appendix - The Formulary has been updated to include the process for urgent requests (including individual funding requests). The flow diagram for adoption of new medicines has been incorporated.

6. Medicines Management Monitoring

- **Medicines Policy Audit 2010**

The Committee reviewed the report of the **Medicines Policy Audit 2010**. The report contains an action plan to address deficiencies identified during the audit and reports on progress against deficiencies identified in previous audits. Overall, the results show that there was good compliance with most aspects of the Medicines Policy. 81% of standards (n=39) scored 80% or greater compliance. Non-compliance was skewed by the effect of paper charts, as compliance was found to be lower with paper charts than with the electronic prescribing and administration charts.

75% of **prescribing standards** scored 80% or greater compliance. However, if 2 of the oxygen prescribing standards were excluded, namely the requirement to specify the initial device for oxygen therapy and to prescribe oxygen on NICU and ITU charts), this would have risen to 82% (see further comments below). **Self-administration standards** scored 100% for those that could be audited. 7 out of 8 **controlled drug standards** scored 95% or greater compliance.

The report was commended for its comprehensive approach, however in future years fewer standards should be audited and the sample size increased. This should be added to the list of recommendations. The recommendation that nursing/ midwifery staff should be reminded to record allergy status, carry out calculation checks independently and sign for administration in a timely manner should also be strengthened and required action via NMAC. Further details should also be included of the recommendations from the 2008/9 audit, how these recommendations had been implemented and the improvement seen. The Committee noted the improvements since previous audits and approved the action plans for any deficiencies pending agreed amendments. The updated report should then be sent to the Quality Committee for noting

- **Vinca Alkaloid Audit 2010**

The only standard which was found not to have been met fully in this audit related to a slower than required infusion time (10 minutes) for 63% of Vinca mini bags. This could have resulted in extravasations problems, this would be further investigated by a retrospective audit of extravasations. The Chemotherapy CNS would provide an update to chemotherapy trained staff on the correct duration of administration for Vinca minibags. The audit report, recommendations and action plan were agreed by the Committee.

- **The Medicines Committee Annual Report 2009-2010**

This report details the activities of the committee during 2009- 2010 and was noted by the committee.

7. Quarter 2 Trust progress against specific prescribing related CQUIN targets: Proton Pump Inhibitors, Antibiotics and Medicines Reconciliation

- **Quarter 2 Trust Progress - CQUIN targets for Medicines Reconciliation.**

In September 2010, out of a total of 123 patients reviewed, 91 (74%) of patients had their medications fully reconciled. The results for Quarter 2 therefore achieve greater than the stretch target for Quarter 2 (65%) and greater than the stretch target for Quarter 4 (70%).

- **Quarter 2 Trust Progress – CQUIN Targets for PPIs and Antibiotics**

In September 2010, the Trust achieved the stretch target of 95% for documentation of indication and duration of antibiotics on discharge summaries (DSUMs), and the standard target of 80% for hospital initiated PPIs.

8. Prescribing of Category A Unlicensed Medicinal Products (Specials)

- **NHS K&C report on Prescribing of 'Specials'**

In 2009/10, NHS K&C spent £287,591 on Category A Unlicensed Medicinal Products or 'Specials', an average of £248.48 per prescription item with a maximum cost of £2,696 per item. The cost of items can vary markedly. For example omeprazole liquid 20mg/5ml (150ml) can vary from £97.19 to £358.02. Hypromellose 0.25% eye drops preservative free can vary from £8.32 to £138.17 – however 0.3% preservative free eye drops are available from Moorefield's Eye Hospital at a more predictable cost (£7.16 excl VAT). The Committee noted the NHS K&C report and asked members to disseminate to their divisional meetings and advise colleagues of the cost impact of specials in primary care and some of the cost variations.

- **Category A UMPs list**

The committee noted the list of Category A UMPs and asked members to disseminate to their Divisions to remind all prescribers of the licensed status of these medicines. It would also be published on the Trust Intranet.

9. Interim Cancer Drugs Fund for London

The committee received a verbal update on the Interim Cancer Drugs Fund (ICDF) for London about arrangements for the fund, guidance on the process and a summary briefing for Trust Clinicians. A list of cancer medicines and indications approved for funding by the ICDF was approved by the committee for addition to the Formulary.

10. NICE Guidance

The committee noted the following NICE Guidance:

- NICE TAG 200 – Hepatitis C - peginterferon alfa and ribavirin issued during September 2010.
  A lead clinician has been nominated at Trust Quality Committee and the guidance will be forwarded to them for implementation and reporting on compliance. Formulary status for peginterferon alfa and ribavirin will be updated to reflect NICE Guidance

11. IVIG Update

The committee approved IVIG requests and supplies for September 2010 (17 issues). 2 of these were new 'Blue' Indications and 1 new Red' indication (neonatal and immune thrombocytopaenia).

12. Items for noting

The committee noted the following items:

- **Updated PGD tracker**
  The PGD tracker has been updated with PGDs signed off in September 2010. One HIV/GUM PGD (non-specific gonococcal arthritis) has been extended to 30/10/2010. Occupational Health has requested extension of PGD expiries until 30/01/2011 until arrangements for developing PGDs with the Marsden have been confirmed.

13. Papers to go to the Trust Executive Quality Committee

The following papers should be sent to the Trust Executive Team – Quality Committee:

- Medicines Committee Summary Notes September 2010
- Medicines Policy Annual Report 2009/10
- Medicines Policy Audit 2010

Date of the next meeting

Monday November 8th 2010 8.00 – 9.00 Trust Board Room
Closing date: Friday October 15th 2010