

**MILTON KEYNES Clinical Commissioning Group
Prescribing Group**

Janet Corbett (JC)	Head of Prescribing & Medicines Management, CCG	Geena Kirpalani (GK)	GP, MKUCS
Helen Chadwick (HC)	Clinical Director of Pharmacy, MKUHFT	Bhervi Patel (BP)	Community Pharmacist
Nikki Woodhall (NW)	Senior Medicines Management Technician, CCG	Nadia Shaw (NS)	Patient Representative/Healthwatch
Nigel Fagan (NF)	GP, Red House Surgery	CNWL Nurse Rep	Non-Medical Prescriber / Nurse Rep (rotate)
Edward Sivills (ES)	GP, CMK Medical Centre		
Fatima Mohri (FM)	GP, Newport Pagnell Medical Centre		
Richard Simpson (RS)	GP, Parkside Medical Centre	Sharon Wilmore	Minutes, MKCCG
c.c. Dupe Fagbenro (DF)	Formulary Pharmacist, MKUHFT		
Adam Staten (AS)	Federation GP (for information)		

**Minutes of the Prescribing Group Meeting held on
Wednesday 10th January 2018**

	Present	Action
	<p>Janet Corbett Fatima Mohri Rachel Major / CNWL</p> <p>Nikki Woodhall Geena Kirpalani</p> <p>Nigel Fagan Nadia Shaw Sharon Wilmore</p> <p>Edward Sivills Bhervi Patel</p> <p>Richard Simpson Jill McDonald/MKUH</p>	
1.	Welcome, apologies and introductions	
	<p>Helen Chadwick / Jill McDonald deputised</p> <p>(Geraldine Sharratt has resigned from the group and will no longer attend these meetings. The group would like to thank her for her input.)</p>	
2.	Acknowledgement of declaration of any other business	
	None	
3.	Notes of previous meeting	
	The minutes from 1st November 2017 were signed by NF as an accurate record of the meeting.	
4.	Matters Arising from previous meeting	
4.1	<p><i>Self-monitoring of Blood Glucose (BGM) and Freestyle Libre update</i></p> <p>This paper was approved by MKPAG at their November meeting and has been sent out to all practices. It advises which meters and strips to use as the first line products (Cost effective options below £10 / pack). Review of BGMs will be incorporated into the new Prescribing Incentive Scheme.</p> <p>Freestyle Libre was also discussed at MKPAG but as there were some concerns about the accuracy of pre-driving & pre-meal levels it was decided to await further guidance before making a final decision.</p> <p>The company is confident that the DVLA will change their stance on their driving protocol. East of England Diabetologist statement is expected at the end of the month, hopefully before the next MKPAG meeting on the 26th January 2018</p>	

5.	Prescribing Incentive Scheme 2018-19	
	<p>The group discussed next year’s Prescribing Incentive Scheme.</p> <p><i>Repeat Prescribing</i> - Part 2 of the qualifying element – to build on previous work around repeat prescribing, the suggested target is completion and shared learning of the CCG’s Repeat Prescribing Training modules. These will be adapted from ones developed by PrescQIPP. This target has now been agreed with the Practice Managers. There will be 3 x 2 hour sessions. The target is for Practices to send at least one member of staff (preferably the same person) to all 3 sessions with the PM also attending the last session to pull the training together. NW will circulate the PLT dates to the PMs.</p> <p><i>Respiratory</i> – The Respiratory Development Group would like to see each practice nominate a clinical lead – a nurse or GP as the “go to” person to help work on the wider respiratory agenda.</p> <p><i>Antibiotics</i> – MKCCG targets to be in line with National guidance. These have not yet been confirmed.</p> <p><i>OTC/Self Care</i> – to remain but be amended as appropriate following national consultations – request from group for posters, guidance, patient leaflets for evidence/education for patients and GPs.</p> <p><i>Baby milk products</i> – to be added to target above</p> <p><i>PPIs</i> –It was agreed to take out this element.</p> <p><i>Tramadol and Hypnotics</i> – it was agreed to take out these elements</p> <p><i>Needles and lancets</i> – New target to simplify the range and make cost effective choices</p> <p><i>Diabetes</i> – target still being working on - Suggestion by JC to have a facilitated case study was approved.</p>	<p>NW</p> <p>JC</p>
6.	NHS Consultations	
	<p>The Department of Health currently have three consultations relating to medicines:</p> <p><i>Gluten Free</i> – this has now closed but no outcome as yet.</p> <p><i>Low Value Medicines</i> - there are 18 medications on this list which are now no longer approved for primary care prescribing. This will be discussed at MKPAG and messages incorporated into OptimiseRx in due course. It will be very important for GPs to deflect requests for these items back to the hospital if they are asked to prescribe. GPs should also consider deprescribing the medicines if the patient is already receiving them.</p> <p><i>OTC/Self Care</i> – consultation ends mid-March. This consultation is rather lengthy and refers to 35 conditions rather than individual drugs. JC encouraged the group to review and respond as this will impact on their practices. The CCG will also respond.</p>	<p>ALL</p> <p>JC ALL</p>

	There was a request that the school letter which was sent out by Dr Nicola Smith be added to the Formulary as information and also for posters for OTC to be sent to MKUCS.	SW
7.	Respiratory Project	
	<p>MKCCG has approved a 6 month project (led by the Federation) to employ a WTE nurse and pharmacist to support practices to tidy up COPD and Asthma registers and review prescribing. Four local Respiratory Nurses have been identified for this project which is likely to start in January 2018.</p> <p>There are three main prescribing areas to look at:</p> <ol style="list-style-type: none"> 1. Spiriva Handihaler to Braltus Zonda switch 2. Asthma patients – support step down of high dose ICS as appropriate 3. COPD – identify mild COPD patients who are on triple therapy with a view to stop ICS and move to dual bronchodilation. <p>New triple therapy inhalers will be reviewed by MKPAG and added to the formulary for appropriate patients following this review.</p> <p>RS asked about review of Rescue Packs – NW said this was an area to review in future months / if the project is extended</p>	NW
8.	Finance Update	
	<p>Concerns over finances – prescribing is likely to overspend in 2017/18 – main drivers are because of stock shortages and price increases (NCSO – No Cheaper Stock Obtainable list).</p> <p>2018/19 QIPP challenge has increased to £1.66m compared to £1m in 2017/18. Some solutions include Edoxaban switch from Apixaban but this needs hospital consultants support and Tiotropium (Spiriva) Handihaler switch to Tiotropium (Braltus) Zonda inhaler for COPD patients. Some of the QIPP targets are viewed as high risk for delivery.</p>	
9.	MK PAG – 22nd November 2017	
	<ul style="list-style-type: none"> • BGMS guidance approved • MKPAG asked for further information on Freestyle Libre. Prescribing is on hold until the next meeting in January. • The shared care guidelines for DMARDs are being updated in conjunction with the new rheumatologists at MK hospital. • Guanfacine for ADHD remains on the formulary even though it had only been used in one patient. GPs should decline any request to prescribe it as prescribing should remain in secondary care. 	

10.	AOB	
	<p>RS mentioned concerns over online private GP consultations resulting in scripts that were outside local / National guidance e.g. Trimethoprim for UTI and asked where to feedback concerns? The advice was to feedback direct to the private clinics and highlight concerns. If concerns are with local hospitals e.g. Saxon Clinic let Janet know as CCG contracts team can challenge. Antibiotic guidance is national and comes from Public Health England. All private clinics should be aware of this. JC to send the link.</p>	<p>RS JC</p>
11.	Future Agenda Items	
	None.	
12.	Date of Next Meeting	
	<p>Wednesday 7th March 2018 – 7.30am</p> <p>Venue: Boardroom 1, Sherwood Place, Bletchley</p>	

Minutes approved as an accurate record by:

(Signature): 

Print Name: FALCON

Position: CHAIR

Date: 7/3/18