Chelsea and Westminster Hospital
NHS Foundation Trust

Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Group

Summary of Main Points from the Meeting held on Monday 21st October 2019

2. Minutes and Summary Notes from last meeting

The minutes and summary notes of the Medicines Group Meeting held on 23rd September 2019 were approved. The summary notes will be disseminated and published on the Trust intranet.

3. Matters Arising

The Group noted the matters arising from the previous meeting.

4. Business to be transacted by the Medicines Group

a) Formulary Applications

Full Applications

- **Ganirelix 0.25 mg/0.5 ml Solution for Injection in pre-filled syringe (Fyremadel®)**

Requested by Reproductive Medicine and Gynaecology, Assisted Conception Unit (ACU). Fyremadel® is indicated for the prevention of premature luteinising hormone surges in women undergoing controlled ovarian hyperstimulation for assisted reproduction techniques. It is intended that Fyremadel® will only be prescribed at CWH Site as an ACU Service not provided at WMUH Site currently. It will be prescribed to all Assisted Conception Unit patients who require a gonadotrophin-releasing hormone (GnRH) antagonist as part of their IVF Cycle. The potential cost saving to the Trust is estimated to be £650 per annum if used instead of Cetrotide® which is currently the agent of choice on the Trust Joint Formulary. It was agreed that Fyremadel® would be prescribed first line but that Cetrotide® would remain on the formulary as second line in case there are delays in supplies which has occurred historically.

Outcome: Approved for addition to the formulary

Ex-panel

- **Biosimilar for Adalimumab 20mg and 40mg syringes (Amgevita®)**

Angevita® is the brand that have been chosen as the Adalimumab Biosimilar of choice for Paediatric patients in preference to the alternatives for the following reasons:

- Available as both 40mg Pen and paediatric 20mg pre-filled syringe
- Similar pen to Humira® in terms of administration

In addition, it is Citrate free and virtually pain free on administration.

All NEW patients starting on Adalimumab will be initiated on the Amgevita® brand as of 23rd September 2019

Any EXISTING patients will be sent a letter from Healthcare at home to let them know about the switch and give them the option to opt out - they will be given a 4 week period to do so.

Patients still within their induction dosing can complete their induction with Humira® and then switch to Amgevita®
Hyrimoz® will remain the Biosimilar of choice for Adult patients.

Outcome: Approved for addition to the formulary

Removals

- **Sucralfate (Antepsin®) 1g Tablet**

Licensed product discontinued by the manufacturers. Special is available and price is variable. Suspension continues to be available as the licensed product and more cost effective. Removed from NWLIF in July. Proposal to remove from CWFT Formulary.

Outcome: Approved for removal from the formulary

NICE Approved drug applications

- **TA592 - Cemiplimab for treating metastatic or locally advanced cutaneous squamous cell carcinoma**

Approved by NICE in August 2019

Outcome: Approved for addition to the formulary

- **TA595 - Dacomitinib for untreated EGFR mutation-positive non-small-cell lung cancer**

Approved by NICE in August 2019

Outcome: Approved for addition to the formulary

Pharmacoeconomic Board requests

- **Nil**

Compassionate supply

- **Olaparib Tablets (Lynparza®)**

Compassionate supply granted for the treatment of a patient with Olaparib Tablets (Lynparza®) in line with its licensed indication for the treatment of Breast Cancer.
Approved by Chair's action and therefore was for noting by the Group

Decision: Noted

4.2 Trust Medicines Policy

- **Section 30: Supply of Over-labelled/Pre-packed medicines by Nurses/Midwives on Wards/Departments**

Updated to include the addition of St. Mary Abbott Ward as a clinical area that can work under this policy.
Decision: Approved

- **Trust Medicines Policy Audit**

Report detailing the results, conclusions and actions from the TMP Audit 2019 which was conducted cross-site in August:

CWH Site

Overall, the results show that there is very good compliance with the aspects of the Trust Medicines Policy for the majority of standards that were assessed in this audit.

- Of the 22 standards audited, it was possible to assess compliance to 21 standards. Of these, 96% (n=20) achieved the target score of 90% or greater compliance. A total of 14 (67%) standards scored 100% compliance.

- Of the 20 standards where variance in compliance from the 2018 audit could be assessed, the compliance either increased or remained static for 15 (75%) standards. Where the compliance remained static, 91% (n = 10) of these standards continued to have 100% compliance.

- There were 5 standards where compliance decreased, however the greatest decrease did not exceed 4%.

- There was one standard relating to the **documentation of missed doses** that scored less than 80% compliance.

Compliance to 5 of the **Prescribing** standards decreased compared to the 2018 audit. Full patient details were not recorded on two paper medication charts and three paper prescriptions were not signed by the prescriber and/or dated. In addition, dosage units were not written in full and the frequency was not stated for three paper prescriptions where the medicines were prescribed on a "When required" basis. These standards scored 100% when compliance was determined using electronic medication charts only. The result was lower when

the score for paper charts was included in the overall results, demonstrating a very high level of compliance when electronic prescribing is in operation.

The patient's allergy status was found not to be documented on one prescription from NICU.

All standards relating to **Controlled drugs and FP10 (HP) prescription** scored 100%.

The standard relating to the **Missed doses** scored less than 80% compliance. Missed doses are not being recorded consistently using the standard Trust codes on a number of wards. This has been a long-standing issue with low compliance to this particular standard being highlighted in previous audits undertaken. This issue is being addressed by the Trust Medication Safety Group. The compliance to this standard has increased by 11% when compared to 2018 audit results which demonstrates an increasing understanding of this issue amongst nursing staff and an improvement in how missed doses are being documented. In addition, the disparity in compliance scores for this standard between the CWH Site and the WMUH Site may demonstrate an issue relating to the documentation of missed doses on Lastword as opposed to there being a high rate of missed doses at the CWH Site.

Actions:

- Continue to have *Delayed and omitted doses of critical medicines* as a focal theme/ agenda item identified from the monthly review of incidents, review as part of the senior nursing quality rounds or audit at the Medication Safety Group meeting agenda. Continue to ensure ongoing progress with the addressing of this issue across the Trust.
- Continue the switchover from Lastword to Cerner EPMA across all ward including intensive care settings.

WMUH Site

- Of the 22 standards audited, it was possible to assess compliance with 21 standards. Of these, 90% (n=19) achieved the target score of 90% or greater compliance. All 21 (100%) standards scored 80% or greater compliance and 12 (57%) scored 100% compliance.

- Of the 20 standards where variance in compliance from the 2018 audit could be assessed, the compliance either increased or remained static for 12 (60%) standards. Where the compliance remained static all of these standards continued to have 100% compliance.

- There were 8 standards where compliance decreased, however the greatest decrease did not exceed 5%.

- No standards scored less than 80% compliance.

Compliance to 6 of the **Prescribing** standards decreased compared to the 2018 audit. Two standards scored below the target score of 90% as there were 9 charts where at least one of the prescriptions was not signed and/or dated and the dosage units such as "micrograms" were not written in full.

Full patient details were missed off six charts. For the other standards where the compliance score was 90-100%, one or two of the prescription charts reviewed were found not to be fully compliant with the standard being audited.

All standards relating to **Controlled drugs and FP10 (HP) prescription pads** scored 100% except for one which scored 97%.

Actions:

- Educate prescribers and ward pharmacists on various aspects of prescribing that have been identified as deficient in the audit
- Continue the switchover to Cerner EPMA across all ward including intensive care settings.

Decision: Noted

4.3 Medicines Optimisation

- **Memorandum of understanding for EU Exit**

Memorandum of Understanding between NHS provider organisations to support safe access to medicines during times of shortages.
Decision: Noted

- **Medicines supply delays - Report**

Report detailing the delays in medicines supplies currently being experienced by Pharmacy
Decision: Noted

4.4 NICE Technical Appraisals and Guidance

a) NICE Technical Appraisals

5 Appraisals published in September 2019

TA599 - Sodium zirconium cyclosilicate for treating hyperkalaemia
Formulary status / Action
Add to the formulary following receipt of a signed application form from the Medicine Division.

TA600 - Pembrolizumab with carboplatin and paclitaxel for untreated metastatic squamous non-small-cell lung cancer
Formulary status / Action
Currently included on the formulary for other indication.
Numbers likely to treat at CWH site: 12 patients per year
Numbers likely to treat at WMUH site: N/A - Condition not treated at WMUH site

TA601 - Bezlotoxumab for preventing recurrent Clostridium difficile infection (terminated appraisal)
Formulary status / Action
Nil - Terminated appraisal

TA602 - Pomalidomide with bortezomib and dexamethasone for treating relapsed or refractory multiple myeloma
Formulary status / Action
Nil - Terminated appraisal

TA603 - Lenalidomide with bortezomib and dexamethasone for untreated multiple myeloma
Formulary status / Action
Nil - Terminated appraisal

b) NICE Highly Specialised Technologies published since last meeting
0 Highly Specialised Technologies published in September 2019

4.5 IVIG requests

- **IVIG Issues for September 2019 - CWH Site**

There were 14 IVIG issues in September 2019, with 7 new requests
Decision: Approved

- **IVIG Issues for September 2019 - WMUH Site**

There were 13 IVIG issues in September 2019, with 1 new request
Decision: Approved

4.6 Items for noting

- **Letter to Diabetes Team re. Semglee Insulin**

Letter to Diabetes Team informing them that Semglee Insulin was added to the Trust Formulary in July 2019
Decision: Noted

- **Trust Patient Safety Group Report - October 2019**

Trust patient Safety Group Report for October covering the period of July, August and September 2019
Decision: Noted

- **Medication Safety Bulletin - Gosport Inquiry**

Medication Safety Bulletin relating to the Gosport Inquiry
Decision: Noted

- **MHRA Drug Safety Update - September 2019**

MHRA update for September 2019
Decision: Noted

4.7 Meeting minutes for noting

- **Medication Safety Group - September 2019**

Minutes from Medication safety Group meeting - September 2019
Decision: Noted

- **Antibiotic Steering Group - April 2019**

Minutes from Antimicrobial Steering Group - April 2019
Decision: Noted

- **Antibiotic Steering Group - July 2019**

Minutes from Antimicrobial Steering Group - July 2019
Decision: Noted

4.8 Additional papers to go to Trust Patient Safety Group

- Trust Patient Safety Group Report - October 2019

5. Any other business

Nil

6. Date of next meeting

Date: Monday 16th December

(Please note the November meeting is cancelled due to Cerner implementation)

Time: 8am-9am

Location: Executive Boardroom and A&E Meeting Room

Closing date: 29th November