UKMi Executive Meeting

22nd June 2012
The Studio Birmingham

Chair: Trevor Beswick Secretary: Janice Watt

Attendees: Trevor Beswick, Graham Cox, Melinda Cuthbert, Sue Dickinson, David Erskine, Peter Golightly, Claudine Hughes, Christine Proudlove, Ben Rehman, Craig Rore, Katie Smith, Janice Watt, Fiona Woods

APPROVED MINUTES

12/42 Apologies for absence

Paula King, Simon Wills

12/43 Minutes of previous teleconference May 21st 2012

The following changes were noted: Melinda Cuthbert attending the meeting.

A number of other typos were noted and corrected.

Otherwise, the minutes of the meeting were approved as an accurate record.

12/44 Matters arising not on the agenda

IT

12/14 Funding for MiDatabank development
TB advised that he had discussed this briefly with Steve Moss and that it would be on the agenda for more formal discussion at the next MiDatabank Steering Group in July.

Action Items: Nil

12/45 NeLM update

DE reported that the phased model of transition was passed by the NICE SMT. NICE will now take over the hosting of NeLM. The future employment of 3 staff members paid for by NeLM associated monies is part of ongoing negotiations with NICE. Once the change to hosting of NeLM is complete, NICE will then look at transition of the content. By April 2013 the NeLM user access to the "front end" will be closed but it may still be used as a content management system. It was agreed that it would be important that UKMI has plans in place to ensure that there is ongoing access to the NeLM content that is not included in NHS Evidence. There are two main options:

1. Add content to existing UKMI website
2. Develop a national specialist pharmacy services website together with other national specialist services.

It was agreed that the second option may be more in keeping with UKMI's vision of more collaborative working. DE will continue to feedback to the Exec about when further action in relation to the content is required.

Action Items: Nil

12/46 MiDatabank- user group report

BR has circulated the draft minutes of this group which met on 13th June 2012. The main points were:

- The user group remit will change and will focus on prioritisation of developments and testing of new versions. It was agreed that a revised ToR should be prepared for approval by the steering group
- A rating tool will be developed to prioritise developments.
- The user group will also oversee requests for bug fixes and that regional representatives should act as liaison with CoACs on behalf of local centres. Bugs would be risk assessed for implications for the service in general.
- The user group will ask CoACS to provide a spreadsheet of current and planned development of MiDatabank in response to requests from UKMI members.
- The user group will encourage uptake to version 3 by preparing a "how to" document to describe how problems with implementation/ installation can be overcome.

Action Items:	Person responsible	Deadline

Re-run survey to establish current uptake with version 3	KS	September 2012

Clinical Governance

Matters arising:
12/16 Renal drug Handbook and Palliative Care Formulary
MC reported that Aileen Currie has offered to circulate a list of monographs that have been revised and has also been asked to prepare a list of the changes. These documents can then be circulated via the UKMI network. It was agreed that UKMI Exec should wait to hear formally from the authors about any specific ongoing concerns before writing to the publishers.

PG reported that he has not been able to make contact with the publishers of the Renal Drug handbook or the Palliative Care Formulary. PG asked if anyone had a named person for the PCF. The CGWG has intimated that they intend to change the recommended resources list to show that the electronic version is preferred.

Action Items:	**Person Responsible**	**Deadline**
Advise PG of any contacts within the Palliative Care Formulary publishing team	All	Asap

12/47 Clinical Governance Working Group Report- General

The CGWG is due to publish an SOP about answering "fridge enquires" including a template for recording relevant information.

Action Items: Nil

12/48 IRMIS reports

FW briefly discussed the updated quarterly IRMIS report covering the period 1st January- 31st March 2012. The front page has been reworked for clarity. The CGWG has also revised the wording of their recommendation about calculation errors to further reinforce this issue.

CP highlighted a previous entry on IRMIS about vitamin D which described and error in the answer given together with the "correct" answer. It was subsequently agreed that this answer also contained some inaccuracies. It was agreed that the IRMIS report should include a statement that it is for training purposes only that it should not be used as a source of advice for specific enquires.

FW reported that they are almost ready to launch the revised IRMIS reporting tool.

Action Items:	**Person Responsible**	**Deadline**
Send a PDF with the revised wording as described above for circulation through the network	FW	July 2012

12/49 Risks associated with common information sources

FW presented an updated paper prepared by the Clinical Governance Working Group detailing known risks with common resources on the UKMI recommended resources list.

Some changes for the entries for the Medusa, UCL and Renal Drug Handbook entries were suggested. It was agreed that it was important to reflect that some reference sources describe specialist practice and that this is different from anecdote.

	Person Responsible	**Deadline**
Send detailed comments on the content of the document to FW	All	13th July 2012

12/50 Medicines Information User Survey

A new survey to be adopted by UKMI Centres for assessing user satisfaction was discussed. It is planned to promote it at the PDS and implement thereafter. A pack to allow electronic circulation and collation of results will be circulated. The audit standards will need to be revised to reflect the scoring in the new survey.

Action Items:	Person Responsible	Deadline
Revise audit standards for new survey	CGWG	Sept 2012

Patient Safety

Matters arising

11/22 RPS Patient Symposium Feedback

TB reported that he had received positive feedback about work done by UKMI to support the NPSA agenda at this day. He had also been approached by David Cousins afterwards about UKMI's role in patient safety work under the NHS Commissioning Board. He asked that UKMI formulates an approach for assessing the safety of new medicines as they are introduced into practice. This may include risks associated with missed doses, risks with intravenous drugs, confusing or similar names etc. There was wide support within the Executive for this. It was agreed that the output would probably take the form of an algorithm to allow a standard approach to risk assessment according to specific criteria. The possible pharmaceutical industry response to adverse criticism was discussed. It was agreed that this could be partially offset by external validation. This would also have benefits in demonstrating an integrated approach with other specialist services.

David Cousins has also highlighted that the pharmaceutical industries' pharmacovigilance programmes may need, in future, to consider data collection on medication errors.

Action Items:	Person responsible	Deadline
Meet with David Cousins to discuss this further	TB	September 2012
Discuss this approach with the chair of the QC Committee, UKCPA in due course	SD, CP	When ready

Liaison with other groups

Matters arising

11/66 RPS professional standards for hospital pharmacy - update

GC reported that there is limited progress at present. The DH has requested that the statements of standards around unlicensed medicines be checked with the MHRA and their publication has been delayed pending this.

TB reported that a meeting to discuss communication between specialist groups and the NHS Commission Board has taken place. It was agreed that communication should be via the Royal Pharmaceutical Society. This will need to be monitored and it may be necessary to consider how to deal with situations where specialists groups disagree with the RPS.

TB has received a request from RPS for a representative to work with Anaphylaxis UK on guidance.

12/05 UKMI Exec work with Drugs and Therapeutics Bulletin

This work is now underway. One article will be published in the next couple of months. Two others have been commissioned. DE asked for any ideas for future edition be sent to him for discussion at the editorial board

Action Items:	Person Responsible	Deadline
Advise DE of any new topics that could be included in future DTBs	All	Ongoing

12/51 UKMI- NHS Direct - Update

PG reported that he is still waiting for the SLA to be signed due to a request by NHS-D for some last minute changes. This will delay the payments to UKMI centres. The future SLA for 2013/14 is still uncertain. This needs to be clarified by September 2012. The roll out of the '111' service has been delayed 6 months till September 2013. The impact of this is unclear. PG highlighted that regional centres should consider opportunities for local negotiation with '111'.

Action Items: Nil

12/52 Injectable Medicines Guide

CP advised that there has been no progress with the Pharmaceutical Press at present. Sue Keeling has proposed a change to the way the IMG is configured in the future. Sue is proposing that a revised model with fewer authors (approx 65 authors writing eight monographs each) is considered and that relevant organisations writing the monographs will sign a contract tying them to doing this work. Those not writing monographs would be charged a set fee (approx £1000). This would be in line with the previous discussion with the Pharmaceutical Press were they to take over publication. Sue is proposing to write chief pharmacists with this proposal.

The Executive agreed that fewer authors would be beneficial and this option should be considered but expressed concern that Trusts may struggle to find £1000 to fund the IMG and authors may not be willing to take on extra monographs. The possibility of UKMI regional centres taking on the writing was discussed.

A paper was tabled at the Pharmaceutical Market Support Group within the Commercial Medicines Unit highlighting issues that had occurred with the introduction of generic medicines on contract. It has been proposed that the Injectable Medicines Group become involved in risk assessing intravenous medicines and reviewing the SPCs during the contracting process. It was agreed that this would be useful and Sue Keeling has agreed to this in principle. This would involve seeking comments from the original authors of the monographs on Injectable Medicines Guide.

Action Items:	**Person Responsible**	**Deadline**
Feedback to Sue Keeling on UKMI views of IMG redesign	CP	June 2012

Education and Training

Matters arising

11/46 Modernising Pharmacy Careers

(a) Workstream 2

SD reported that the group has now met for the last time. Two frameworks have been proposed: (1) post registration framework (2) advanced level framework with “bolt-ons” for different types of specialist practice.

(b) Stakeholder meeting 13th July 2012

TB has received an invitation to attend this meeting. BR will attend to represent UKMI.

12/07 Proposal for a shared conference with UKCPA

TB advised that he has been unable to progress this at present.

Action Items: Nil

12/53 UKMI training course – projected numbers

BR advised that due to the very late cancellation of the training course in July it would be important to try to more accurately predict the number of delegates for the January 2013 course. 21 delegates are required to make the course financially viable. The ETWG has proposed that flyers are included in the PDS delegate packs to request feedback on likely numbers for January 2012. It was suggested that an email survey seeking feedback on actual and potentially delegate numbers be sent out via regional centres.

Options for reconfiguration of the course were considered:

(1) Increase costs to cover reduced delegate numbers
(2) Change the course to annual (depending on feedback on delegate numbers)
(3) Run a parallel course for more advanced practitioners
(4) Hold a UKMI Exec meeting at the same time

Action Items:	**Person Responsible**	**Deadline**
Circulate an email survey	BR	July 2012

Investigate likely numbers with local centres and encourage attendance including for those returning to practice	All	July 2012
Rework costs based on 15 delegates	BR, PG	July 2012

12/54 and 12/55 Research evaluation and future strategy for centrally produced MI training products

A revised version of MiCal should be available for August. There has been quite a lot of revision in line with the plan previously described.

UKMI training output i.e MiCal and the Workbook were discussed at ETWG. The ETWG agreed that both are very good products but that further integration may be helpful and that development of electronic versions should be considered. It has been proposed that some research is undertaken to evaluate user experience (trainer and trainee) and whether the products meet their needs. This would be followed by a strategy to further develop the two resources. BR is due to meet with SW in July to discuss this further. There was general support for the proposed research and evaluation. Any future developments need to take account of how the MI products might support the development frameworks under modernising pharmacy careers work streams 1 and 2.

Action Items:	**Person Responsible**	**Deadline**

12/56 Practice Development Seminar

KS advised that the programme for the PDS 2012 is complete. 35 full NHS delegates have registered so far. KS requested that speakers submit CVs and abstracts to the admin team ASAP.

PG advised that he has been asked by Warwick University to sign the contract for the PDS for 2013. The contract is based on a minimum of 150 delegates. The terms have also been changed so that the financial penalties appear to begin within 11 months. It was agreed that UKMI should not sign a contract on this basis and that alternative models for a UKMI PDS need to be considered. The possibility of MI focused sessions alongside or as part of the Clinical Pharmacy Congress or a joint conference with the UKCPA was discussed. A joint meeting with the QA pharmacists group could also be considered.

PG highlighted some uncertainty over whether his Trust will continue to hold the UKMI funds and carry this forward year on year. The possibility of UKMI becoming a legal entity was discussed. BR offered to share a paper on different types of legal entities that had been prepared in the London area.

Action Items:	**Person Responsible**	**Deadline**
Explore options for shared conferences with Chris Green (UKCPA) and Alison Beenie (QA Group)	TB, SD	September 2012
Discuss experience of renal pharmacists group in working with the Clinical Pharmacy Congress	DE	September 2012
Circulate an email through the network to publicise this year's PDS in light of uncertainty about next year.	KS	July 2012
Share paper on different types of legal entities	BR	July 2012
Consider whether any trust could hold UKMI fund	All	September 2012

UKMI Executive Issues

Matters arising

11/56 UKMI Performance management 11/12

TB discussed the detail of the performance management report. MiDatabank uptake, user satisfaction and audits within 3 years have improved (although audits still below target). There are one or two gaps in the information presented. Exec members were asked to provide text for these where relevant. It was agreed that the same criteria would be used for 12/13.

12/08 Monitored Dosage System Database development

TB has issued a revised timetable to account for the slippage. Exec members were asked to begin to populate their spreadsheets. A deadline of the end of August was agreed for centres to complete their chapters. Discussions with PIPA are ongoing and the industry should not be contacted at the moment. It was decided that each centre should manage the contact with the industry for their products once the form has been agreed.

12/25 Inclusion of QIPP documents in the work in progress database

This work is ongoing and the spreadsheet of output is almost complete. CP will circulate this shortly. It was agreed that this would be discussed further in September.

12/40 UKMI Support for patient helplines

It was generally agreed that some material to support patient helplines would be helpful. This could be included as a topic in a general debate about improving patients' information around the wider discussion on medicines optimisation. It was felt that in some cases there may be legitimate reasons why a patient helpline had not been implemented and we should avoid stating that there is no excuse not to have one. Inclusion of some information on workloads generated by opening a helpline would be helpful. The suggestion to attempt to get this recorded as part of regional and national QIPP was not supported at present.

Action Items:	**Person responsible**	**Deadline**
Circulate some worked examples to centres for the MDS database	TB	July 2012
Encourage participation in the MDS survey	All	Now
Complete allocated chapter for MDS	All	31st August 2012

12/57 UKMI Support for Medicines Optimisation

The paper describing UKMI's support for Medicines Optimisation was discussed. This has been shared with two SHA leads for comment. TB plans to meet with Keith Ridge to discuss the contents. The implications for other home countries outside England were discussed. It was agreed that this paper had been specifically developed to describe how UKMI in England to support the National commissioning Board and that the paper should be renamed Medicines Optimisation In England. There was overall agreement on the content of the paper. Some further minor changes to the paper were suggested.

TB has been asked to participate in a RPS working group to agree medicines optimisation standards for Primary Care. TB won't be able to attend this first meeting. SW has also expressed interest in attending this.

Action Items:	**Person responsible**	**Deadline**
Circulate final version of the Medicines Optimisation paper	TB	July 2012

12/58 New Products Working Group Report

CP outlined the results of a survey of users of Prescribing Outlook. Overall feedback was very positive. 55% of users said they used the paper version. Just under 20% of respondents said that electronic only publication would cause them problems. It was agreed that users should be sent the report electronically this year with a PDF format available if individuals wish to print off themselves. An executive summary with the index would be circulated in paper form to act as a reminder of the product.

Action Items: Nil

12/59 NICE Good Practice Guide on Formularies Project Development Group

TB has volunteered to join this group. It has now met twice and work is ongoing. TB has been asked to circulate information on material available to support horizon scanning to the Project Development Group. Publication of the good practice guide is planned for December 2012.

Action Items: Nil

12/60 DH Task and Finish Group on Formularies

The Innovation Health and Wealth Report stated that local Formularies should automatically include NICE approved treatments in a planned way. The task and finish group will oversee the NICE work.

Action Items:	**Person Responsible**	**Deadline**

12/61 UKMI website and discussion group (MI-UK) access

PG asked for comments on the current access permissions for UKMI material. This will be finalized at the September teleconference

Action Items:	**Person Responsible**	**Deadline**
Feedback to PG on the access permissions	All	September 2012

12/63Communications/ AOB

TB-
TB reminded the Exec that the 2 year term of office for the chair and secretary of the group are due to end in September. The group were asked to consider succession to these roles. SD volunteered to take on the post of secretary.

SD-
Poisons Board- SD has attended the first meeting of the Poison's Board representing UKMI.

SD advised that she is aware that David Webb had updated his paper on Specialist Pharmacy Services and details of MI associated funding were being sought from those centres currently commissioned by PCTs.

JW-
JW highlighted that as the Scottish Mi centres are able to access Martindale and Stockley through the Knowledge Network they do not usually subscribe to the Medicines Complete package. Therefore, AHFS has to be purchased at an additional cost. Feedback from the Scottish centres is that they are unclear about whether this is value for money and have asked whether the CGWG can review whether AHFS should continue to be an essential resource.

DE-

From July 2012, the MHRA plans to publish SPCs probably as PDFs and therefore some of the advanced search functionality with the eMC may be lost. UKMI may want to consider highlighting the potential loss of this functionality if this proves to be a real issue. It was agreed that we should continue to monitor this.

CH reported that in ROI two platforms for publishing SPCs (Irish Pharmaceutical Healthcare Association (similar to ABPI in UK) and the regulatory authority) currently co-exist and that there can be inconsistencies in versions of SPC on the two sites. This may be a consideration in the UK where SPCs are now available on the eMC and MHRA platforms.

Action Items:	**Person Responsible**	**Deadline**
Actively compare the new MHRA published SPCs with those on eMC and feedback	All	September 2012
Review AHFS for essential resources list	CGWG	December 2012

DATE OF NEXT MEETING –	
Exec meetings: **Monday 12th-Tuesday 13th November 2012- Derby**	**Teleconferences:** **Tuesday 18th September 2012**