UKMi Executive meeting

5th-6th March 2012
Midland Hotel, Derby

Chair: Trevor Beswick Secretary: Janice Watt

Attendees: Trevor Beswick, Sue Brent, Melinda Cuthbert, Graham Cox (Monday only), David Erskine, Peter Golightly, Paula King, Christine Proudlove, Katie Smith, Janice Watt, Fiona Woods

~~DRAFT~~ APPROVED MINUTES

12/10 Apologies for absence

Claudine Hughes, Ben Rehman, Craig Rore, Simon Wills

12/11 Minutes of previous teleconference held on 17th January 2012

The following changes were noted:

11/61 Reference to MiDatabank v2 should read "earlier versions of Mi~~i~~Databank"
12/07 National Pharmacy Congress should be Clinical Pharmacy Congress

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

It was agreed that the final versions of the minutes from 2007 onwards should be sent to PG for the UKMI website.

12/12 Matters arising not on the agenda

11/76 Specialist Pharmacy Services in England
David Webb has advised that there is no progress with discussions on National commissioning as yet.

IT

Matters arising-Nil

12/13 NeLM update

DE reported that the contract for NeLM has been renewed till March 2013.

The main areas for information on medicines within NHS Evidence are:

- Evidence repository
- QIPP
- Best practice
- NICE publication process for these.

It is still unclear how some of the other information on NeLM will be posted e.g. Formularies, Communities, SPC changes etc.

A further meeting on collaboration with NPC on news service is planned for the near future. DE is also continuing to work with NPC on a PGD website.

Action Items: Nil

12/14 MiDatabank- steering group report

The minutes of the steering group on 2nd February 2012 were discussed. At present there is minimal use of MiDatabank in pharmacy out with MI. It was agreed that an alternative interface for MiDatabank for other users (see minutes of steering group meeting for details) would be desirable. This would include a free text search function and a quick documentation function for clinical pharmacists. CoACS has indicated that this fits with their planned development for other users. This development was supported by UKMI Exec.

Future development of MiDatabank includes functionality to allow sharing of enquiries between MI centres. Whether to upload all or some selected enquires needs to be agreed. Piloting sharing within regional centres was proposed and agreed by the Exec. These enquiries would not contain patient identifiable information.

It was agreed that the possible development of a medication error tab on MiDatabank was not useful for MI users. A new enquiry type for work undertaken for medication errors may be included.

It is unclear whether specific funding would expedite some of the proposed developments. TB agreed to explore this with CoACS

BR has agreed to chair the user group and is looking for new members particularly from local centres. The first meeting will be face to face but future meetings will be predominantly by teleconference/email. A proforma for suggested modifications to MiDatabank and a standard assessment/ scoring is proposed.

The DH letter to Trusts highlighting MiDatabank as a potential resource for supporting pharmacovigilance has been delayed while UKMI answered some questions about costs of MiDatabank. The letter will go on MHRA website and will be highlighted in the DH "This Week" newsletter.

Action Items:	**Person responsible**	**Deadline**
Send examples of IT proformas/ templates for assessment of modifications to BR	All	April 2012
Feedback to BR on new members for the user group	All	March 2012
Discuss funding of developments with CoACS	TB	May 2012

12/15 eLearning Medicines Management collaboration with NICE

SW met with NICE to discuss possible collaboration with them on the development of medicines management e-learning. He shared with NICE the process by which South Central had identified priority meds management e-learning topics, and the resulting Q&A on NeLM. Further meetings to discuss this further are planned.

Action Items: Nil

Clinical Governance

Matters arising

12/16 Clinical Governance Working Group report

FW presented a paper in which the CGWG had proposed a number of changes to the essential resources list:

Renal drug handbook- TB has contacted the authors of the Renal Drug Handbook to offer to circulate changes/ errors if these are clearer described and there is clear document control. This was referred to one of the authors in Ayrshire. No feedback has been received as yet. Palliative Care Formulary- Current online subscription is for single users and institutional subscriptions are expensive. Investigate an MI institutional rate.

Schaefer- It has been noted that this resource is now potentially out of date- a note on caution in use is to be added.

Latex resources- The latex database is to be removed from UKMI website. Laura Grainger from Bournemouth has produced a list ~~of~~ containing information on the latex content of IVs ~~in her~~available in theatres at Bournemouth Trust. This has been made available ~~from~~ on the Medusa website but the list will not be updated in totality in future. The content will ~~also been~~be added to individual IMG monographs with individual authors updating the information when the monograph is updated on an annual basis.

Other resources
CP highlighted that specific Adobe editor software is needed for the Maudsley guide. Negotiation of subscription deal for the Palliative Care Formulary has been requested by local centres.

MiDatabank
Confidentiality- The sharing of enquiries where the "control m" function had been used was discussed. The Exec agreed that they did not have any specific concerns with this and that this could be considered further during the pilot of enquiry sharing with regional centres.

User satisfaction survey
A new user satisfaction survey has been agreed by the CGWG and is in the final stage of piloting in East Anglia before national roll out. A questionnaire for patient helpline enquires has been requested but has not been progressed at present. DE reported that he has had some local advice about the need to seek consent from the patient when the call is taken if it is intended that a questionnaire may be sent.

Telephone skills evaluation form
This has been developed in East Anglia and will be posted on the CG section of the UKMI website.

Action Items:	**Person responsible**	**Deadline**
Contact MI Lead in Ayrshire and Arran re communication of issues with renal drug handbook	MC	May 2012
Contact publisher of PCF about a bulk deal for UKMI	PG	June 2012

12/17 KPIs

FW discussed the proposed KPIs for UKMI centres. Four mandatory indicators have been proposed:

- Total number of enquiries
- % enquiries answered on time
- Number yellow card submitted from MiDatabank
- Patient specific enquiries as a proportion of total

There were revised to 5 recommended KPIs:

- Number of MI enquiries
- Percentage of answered on time
- Proportion of level 1,2 and 3 enquiries
- user satisfaction- results of survey
- Number of Yellow cards submitted

The need for targets for the KPIs was discussed. It was agreed that this is relevant for percentage of enquiries answered on time but not appropriate for others. It may be appropriate for targets to be set locally in some cases. It was agreed that it would not be necessary to collect data on KPIs centrally but that they would be a recommended set of data for collation locally. In some regions these may be collected regionally.

Action Items:	Person responsible	Deadline
Add KPIs to UKMI website	FW	March 2012
Pilot collation of KPIs across a region and feedback	PG	

12/18 IRMIS report

The quarterly IRMIS report covering the period 1st October 2011 to 31st December 2011 and the annual report covering January 2010 to December 2011 were discussed.

There is a recurrent issue with errors in calculations. This is a cause for concern. The need to provide a second check for calculations has been reinforced. It was agreed that the annual and quarterly reports should highlight on the front page the need for second check for calculations. The need to check all calculations was discussed. This statement was revised to say "normally all calculations should be checked by a second person". The reports will also suggest that peer review is undertaken on a sample of enquiries about calculations to focus on this issue. TB reminded the group of a document prepared in the South West about second checks. This is available on the UKMI website and should also be highlighted in the report. It was agreed that the risks / increase in errors associated with poorly staffed centres should be highlighted.

The annual report describes priorities for 2012/13. These were agreed.

Action Items	Person responsible	Deadline
Circulate revised IRMIS report with agreed changes	FW	**May 2012**

12/19 Risks associated with MI resources

This item was deferred till the next meeting.

Action Items: Nil

Patient Safety

Matters arising

11/22 RPS Patient Safety Group

TB is presenting to a meeting run by RPS on patient safety in June.

Action Items

Liaison with other groups

Matters arising

11/65 Unlicensed Medicines and Off-Label Medicines Project- update on tender

TB reported that that UKMI had been unsuccessful in being short listed for the ULM tender. TB has asked for the scoring for the tender for UKMI and the other bidders to better understand where the weaknesses were.

11/66 RPS Standards for hospital pharmacy

Comments were submitted by UKMI on the draft standards. A further advisory group meeting is planned for Tuesday 6th March. This is to agree the standards before they are tested in pilot sites. A handbook acting as an audit tool, describing how the standards can be used locally is then to be produced. GC has agreed to participate in the development of this.

12/05 UKMI Exec work with DTB

UKMI will be commissioned to write up to 12 articles for DTB per year. DE will sit on the editorial board. DTB would like to work with up to 5 MI centres in addition to Guys. The initial literature search and circulation of the draft to expert advisors for comment will be the responsibility of DTB. Each article will be produced over an 8 week period.

Action Items:	Person responsible	Deadline
Advise DE if your centre would still like to be involved in the DTB work	All	9th March 2012

12/20 UKMI-NHS Direct- Update

PG reported that the 2012/13 SLA has not been progressed. PG and TB will participate in a teleconference with NHSD at the end of March 2012. PG asked if regional centres involved in the SLA could let him know if they anticipate any capacity issues in the coming year that may impact on the SLA.

The future in 2013/14 following the roll out of the "111" service is still unknown.

Action Items:	Person responsible	Deadline
Update NHSD workload data online	All involved in SLA	March 2012
Submit excess travel claims to PG	All involved in SLA	March 2012

12/21 UKMI/ NICE Collaboration- update from meeting

CP reported on the recent meetings with NICE. CP, PG and SW have been involved. Horizon scanning, e-learning, medicines Q&As and Medicines in Development Reviews had been discussed at a meeting in December. Options for collaboration with NPC on the latter were discussed, including the potential to use a common template.

A further meeting was held in February 2012. Gillian Leng did not attend this meeting. The current directorate led by Gillian Leng is to be split and she will no longer lead this workstream. A director is yet to be appointed. A further meeting is planned for June 2012.

NPC are updating processes to conform to NICE requirements. Once achieved, NPC products will go on NICE website. NPC website will be retained until content goes out of date. This may also have implications for UKMI processes and future working with NICE.

NHS accreditation of UKMI products was discussed. It was agreed that the possibility of accreditation of Medicines Q&As should be explored further. This could be discussed with Paul Crisp, lead for the NICE accreditation process. No other UKMI products were identified for accreditation at present.

Action Items:	Person responsible	Deadline
Request notes for last meeting with NICE	CP	April 2012
Meeting with Paul Crisp	CP	June 2012

12/22 Injectable medicines guide- report

CP presented a report on the Injectable Medicines Guide. It is recognized that the IMG is a very well used resource. There are 50,000 downloads per month.

CP reported that there are some changes to the writing guide. The issue of inclusion of information for children was discussed. It was agreed that UKMI's recommendation to the IMG group is that the guide should state that it is predominantly intended for adults unless it is explicitly stated that the information is intended for children.

Data to the end of February 2012 show that 100 monographs have been allocated this financial year. 60% have been quality assured within the target of 4 weeks.

Action Items:	Person responsible	Deadline
Feedback to Medusa on UKMI concerns about paediatric information on Medusa	**CP**	**April 2012**

Education and Training

Matters arising

11/24 UKMI training course update

Feedback from the previous course participants has been generally positive. Technicians had been integrated successfully. Glasgow will lead the July course. Sandra Wharton has sent out an email requesting nominations for this course.

It was agreed that it may be appropriate for accredited technicians to attend. Criteria for technicians attending should be discussed by the ETWG. It is recognized that we need to be cautious about opening this up to widely as the course has been over-subscribed in the recent past.

11/46 Modernising Pharmacy Careers – Workstream 2

Meeting early in January 2012 was cancelled while some work is done on documentation that will be then circulated to the group for comment.

12/07 Proposal for a shared conference with UKCPA

TB has not yet been able to discuss this further with Chris Green.

Action Items	Person responsible	Deadline
Agree criteria for technicians attending the national training course	ETWG	Sept 2012
Discuss with Chris Green the possibility of a shared conference with UKCPA	TB	June 2012

12/23 Practice Development Seminar 2012

KS discussed a number of actions for the PDS organization. See minutes of recent TC.

The following sessions were discussed/agreed:

No Parkinson's Disease Specialist has yet been identified for this session. A PD nurse specialist has agreed to speak.

Lilly have agreed to run a session on effective team working.

DE will follow up on session being run by Ted Butler at present on dealing with change.

PG has been in contact with Steve Jackson but may not be able to do the allocated time slot. May need an alternative speaker for the diabetes workshop.

SW was suggested as a chair for antibiotic resistance session

PG agreed to chair the Parkinson's disease session

DE agreed to chair the shared decision making session

TB agreed to act as liaison for team working workshop

PG advised that we need to make a decision on whether to go ahead with a UKMI PDS in Warwick in 2013. Once the contract is signed we can cancel without penalty up to 12 months before the date of the PDS. It was agreed that we should sign the contract at this stage. Meantime we should try to get a clearer idea of whether there is any potential for a joint conference with UKCPA.

Action Items	Person responsible	Deadline
Update logo on UKMI website for current year	PG	March 2012
Submit objectives for workshops for which you have responsibility	All	March 2012

Research and Development

Matters arising
11/28 Submitting Yellow Cards on MiDatabank
The Exec welcomed a recent report that showed that numbers of Yellow Cards submitted on MiDatabank continue to increase.

Action Items: Nil

UKMI Executive Issues

11/56 UKMI Performance management 11/12

TB will circulate a table for completion by regional MI centres within the next few weeks. The Exec discussed the benefits of an annual report for UKMI including performance data. This could be sent to the Chief Pharmacists for information. It was agreed that a summary paper may be beneficial.

12/08 MDS Database development

TB advised that the survey to collect data on previous enquiries about stability in monitored dosage systems had been piloted in the SW. Some changes have been made as a result. It was agreed that KS's region would also pilot the survey before it is rolled out for use.

TB tabled a paper describing the process for regional centres obtaining data for the MDS database. Some data will be provided by the South West with an additional search of some standard resources carried out by the regional centre.

Chapters have been assigned to regional centres. Some large chapters have been split and the regional centres involved should agree between themselves how the work will be divided. Some centres have been assigned two small chapters.

FW has contacted PIPA to alert them to the project. They have some concerns about the workload. TB has developed a template to send to the pharmaceutical industry to obtain data from them. How best to request this information was discussed. It may be best to request all the information for their products at the one time. It was agreed that PIPA should be asked for further advice about the best approach.

It was agreed that it would be useful to collate data on what manufacturers would need to be contacted about which products. Regional centres should therefore review their chapters and provide a list to Michele in Bristol.

It was agreed that information found for each product should be document by regional centres in MiDatabank.

Action Items	**Person responsible**	**Deadline**
Draft a short annual report	TB	
Send inhouse guides to stability in an MDS to TB	All	April 2012
Circulate MDS paper for confirmation/ comment on proposed search strategy	TB	March 2012
Send list of products/ manufacturers for each chapter to Michele	All	April 2012
Ask PIPA for advice on method of contact with pharmaceutical industry for this project	FW	April 2012

12/24 UKMI support for medicines optimisation

TB welcomed Keith Ridge to the meeting. Keith gave a presentation on some of the key issues in the reorganisation of NHS services in England, the national commissioning board and related structures, the medicines optimisation agenda and the challenges ahead. This agenda has a particular focus on involving the patient.

It was agreed that this medicines optimisation is an area where UKMI can make a significant contribution and that the Exec needs to look at current areas of work and areas for development. Closer involvement in Formulary and NICE guidance implementation will be a role for UKMI- "NICE local". The role of UKMI in signposting/ facilitating access to clinical effectiveness/ patient outcome data should be considered. There may be potential for working with CPPE on elearning/ self directed learning to support practitioners involved in direct patient care.

It was agreed that UKMI Exec should write a paper describing the role of UKMI in the medicines optimisation agenda, including the current organization, portfolio of work and areas where MI might have future input. A short life working group to draft a paper was agreed. PG, KS, SB, TB and DE agreed to be involved.

Action Items:	**Person responsible**	**Deadline**
Draft objectives and scope for the paper	SB	16th Mar 2012
Send ideas for objectives to SB	All	12th Mar 2012

12/25 New Products Working Group-

Proposal to add regional produced QIPP documents to the Work in Progress database

CP presented a paper describing the possibility of sharing documents that support QIPP. These would be sign-posted on the UKMI New Product Work in Progress database. It was agreed that this would be very useful. It may be helpful to make this more easily accessible. NeLM may be an appropriate forum. It was agreed that, in the first instance, the Exec should collate information to assess level of duplication and overlap with NPC.

The new products work in progress database is not as well populated as it could be. It was agreed that there would be a regular email prompt to encourage centres to populate this.

Action Items:	**Person responsible**	**Deadline**
Send titles/ subjects/ web link of QIPP material to CP for collation	All	April 2012

12/26 Advanced practice within Mi- work with RPS

There was a general discussion about advanced and specialist practice and involvement with RPS.

Action Items:	**Person Responsible**	**Deadline**
Respond to Catherine Duggan with UKMI views	TB	April 2012

12/27 UKMI support for RPS membership

TB has circulated a statement from UKMI Exec that can be forwarded to UKMI local centres and will also go on the UKMI website.

Action Items: Nil

12/28 UKMI Exec meeting – venue for June

PG advised that he will book the Studio in Birmingham for the June meeting.

Action Items: Nil

12/29 Communications/ AOB

DE

The Chinese herbal MI service based at Guys within the Poisons Information Service has been available free at the point of use. It is now run by a private company. The poison's service receives 40-50 calls/ year from MI

centres. UKMI have been asked if they would be willing to contribute funding to make the service financially viable (£10-15,000/ year). It was agreed that it would be difficult to prioritise suitable funds for this in the current financial climate.

PG
PG asked whether there was any potential to make available more detailed data from UKMI outcome study as this would be very useful for discussion with chief pharmacists. These data have been held back pending publication. An executive summary is available but has not been circulated. Slides from the presentation at the PDS can be made available. It was agreed that this would be sufficient for the needs of most people. More detailed questions could be fed back to researchers.

The Clinical Pharmacy Congress session on medicines information on Saturday 21st April requires a speaker. DE may be able to do this. UKMI has also been offered exhibition space. This is anticipated to cost approximately £1200. Most if the exhibitors are from the pharmaceutical industry. It was agreed that the potential benefits did not justify the cost.

CP has received a request from Turkey to write an article on Drugs and Therapeutics Committee. A pharmacist from Barnsley has volunteered.

PK
Paula advised that she is going to have staffing difficulties over the next few months.

KS
Ipswich hospital is no longer going to fund the preparation of posters for conferences. No other centre~~s~~ has come across this yet.

SB
MHRA have asked SB to attend a meeting to discuss the drug alerts. Once this is confirmed SB may seek advice on specific issues that should be raised.

Helen Gordon has asked for UKMI to nominate someone to join the Poisons' Board at the Home Office. The work will initial scope the role of such a board in the future. SB intends to do this.

The Exec congratulated Sue on her forthcoming marriage this weekend. Her surname will then change to Dickinson.

Action Items:	**Person responsible**	**Deadline**
Circulate executive summary and PDS presentation slides on the outcome study	BR	March 2012
Ask BR if he can speak at Clinical Pharmacy Congress if DE not able to do this	TB	March 2012

DATE OF NEXT MEETING –

Exec meetings Friday 22nd June 2012 **Teleconference Monday 21st May 2012**